

Lower shore clinic

HB191

Maryland Medical Assistance Program – Telemedicine –
Assertive Community Treatment and Mobile Treatment Services

January 27, 2021

POSITION: SUPPORT

My name is Dimitri Cavathas. I am the Chief Executive Officer of Lower Shore Clinic, which offers a psychiatric rehabilitation program, outpatient mental health clinic, primary care services and, since 2011, Assertive Community Treatment (ACT). Every year, we serve over 2,500 citizens of Wicomico, Caroline, Dorchester, Somerset, Talbot, and Worcester Counties. Prior to joining Lower Shore Clinic, I administered ACT Teams in Maryland for 15 years in Baltimore City, Baltimore County, Anne Arundel County, Montgomery County, Prince Georges County.

The challenge to find a psychiatrist or nurse practitioner in and of itself is a challenge for any service due to the shortage of providers. The population served by ACT are the highest-cost persons in our health care system, and they are unable to participate in the traditional health care system. ACT is a non-traditional approach to go to where the citizen is, instead of waiting for them to show up to an appointment.

The Telemedicine Provision for ACT teams alleviate considerable challenges providing psychiatry to citizens who are chronically homeless and/or suffering from a severe and persistent mental illness and / or dealing with an addiction issue and /or suffering from a chronic somatic illness and / or living in poverty and / or coming in and out of jail or the emergency room. Finding a psychiatrist to travel to homes or provide services on the street is extremely difficult. Finding a psychiatrist to do this in a rural area is even harder. The reality is that most psychiatrists regardless of pay do not want to do this kind of community work. Telemedicine is our way to accommodate this issue. This program has been a success.

ACT services is an Evidenced Based Practice proven to not only help people recover but also save money. *In an... review... about ACT...it estimated that, compared with just giving patients appointments at an outpatient clinic, a relatively high-fidelity ACT program reduces the number of hospital days by about 78%* (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1197281/>). I have been part of ACT services that have targeted the top 20 highest cost utilizers and over a

one-year period saved approximately \$200,000. This was verified by an analysis from the University of Maryland Evidenced Based Practice Center. Every time an ACT team stops a person from going to the emergency room on average it saves approximately \$1100. Every time an ACT Team can move a person out of a State Hospital Psychiatric Bed and into the community it saves approximately \$200,000 for one year. Having administered ACT teams that moved over 300 persons from the State Hospital system, I know that this service saves the health care system precious resources. Allow us to continue to utilize this technology to continue to provide this critical service.

This is what our prescribers say:

“Telehealth as a model of care is good for ACT Prescribers so the members can get in the direction of mental wellness from the comfort of their home or wherever they are as safely as possible. The model can also improve service delivery and help some of our members with their burning questions and treatment of acute conditions to divert unnecessary ER visits.”

“It allows us rapid follow up for any crisis situation that does not require inpatient admission. It also allows me to follow patients more closely and assess all medication changes and psychiatric conditions in real time without a waiting period. The ability to assess for suicidality and need for hospitalization without out the delay caused by long travel time in rural areas is a invaluable service and one that needs to be continued. In addition, we have had several cases that patients are more open to sharing personal concerns via telehealth rather than face to face interviews, especially when discussing very traumatic and sensitive events.”

Please allow this service to continue as an intervention and pass this bill with a favorable report.