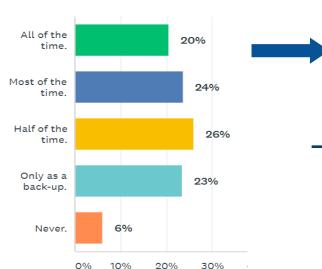
Client Response to Telehealth

Community Behavioral Health Association Survey | July 10, 2020



Telehealth has long been used in behavioral health settings to improve access to care and alleviate workforce shortages. However, payer rules limited its widespread deployment. With the advent of the COVID-19 public health emergency, many restrictions on the use of telehealth were temporarily lifted. Beginning in mid-March, CBH members engaged in an extraordinary pivot to telehealth to protect the health and safety of clients and staff. **This survey documents the reaction of 4,181 clients of CBH organizations to the use of telehealth.** Responses were collected from June 24 to July 10, 2020.

Telehealth Brings Down Barriers to Care



Q: If telehealth remained available after the pandemic ends, would you prefer to continue using it instead of in-person visits?

70% would use telehealth for half or more of their visits.

"It hard to get to that office weekly. It takes about 2 hours out of my day just getting there and back."

"I have a traumatic brain injury. I can't remember appts and planning ahead to get to office is hard."

Q: Please identify the reasons you may wish to continue with telehealth services.

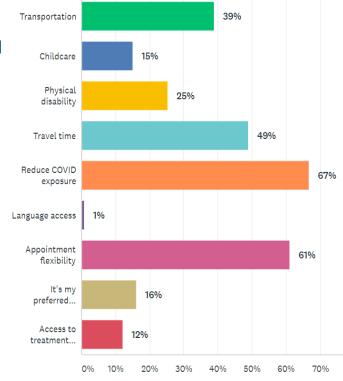


"I work the nightshift. Better appointment times with telehealth."

"It helps in my current job situation to access services without taking my day off."

"With everything that happens with my illness (getting overwhelmed, going out. with my paranoia), it's just better to manage my stress and panic attacks. I have more panic attacks when I'm out. Other things that can trigger me ."

"I am more at ease in my home and more likely to share my thoughts in this environment. I suffer from anxiety and wherever I can increase my comfort level is what I am going to choose. This telehealth type of setting works for me."





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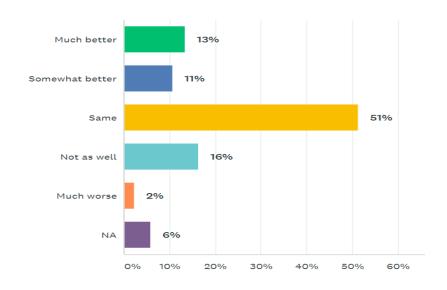




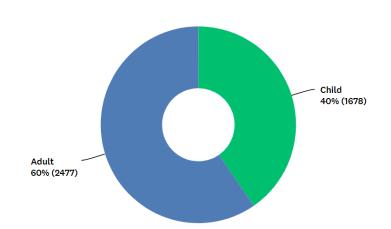
Telehealth Doesn't Change Therapeutic Alliance

Q: How connected do you feel to the therapist, case manager or other individual providing you services through telehealth?

75% report same or better therapeutic connection

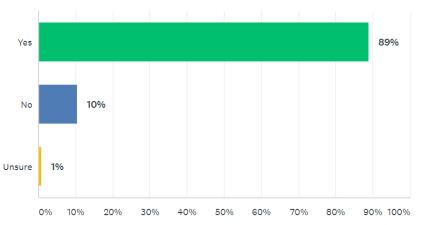


Survey Demographics



Survey responses were split 60/40 between adults and children. Among respondents, 92% were completed by the client or a parent, and 8% by staff assisting a client.

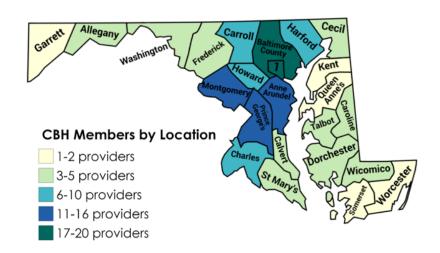
Q: Did the client have in-person visits with this agency prior to using telehealth?





The Community Behavioral Health Association of Maryland (CBH) seeks to improve the quality of behavioral health care and access to treatment.

We represent 72 organizations encompassing over 750 service sites, 180,000 individuals served and 13,000 employees.



Our members offer the following services:

- 1. Outpatient mental health clinics and group practices;
- Outpatient substance-related services including: DUI education programs, Level 0.5 early intervention programs; Level 1 outpatient treatment programs, Level 2.1 intensive outpatient treatment programs, Level 2.5 partial hospitalization programs; opioid treatment services; withdrawal management services.
- 3. Specialty mental health services: psychiatric rehabilitation programs (PRP), psychiatric day treatment programs, supported employment programs, mobile treatment or Assertive Community Treatment (ACT), capitation program, therapeutic behavior services (TBS), targeted case management (TCM), and 1915(i);
- 4. Residential mental health services, including residential treatment centers (RTCs), respite care, residential crisis services, residential rehabilitation programs, and supported housing.



Join CBH today.

Our peer-to-peer learning communities tackle measurement-based care, opening Maryland's commercial market to behavioral health providers, HR in a COVID world, and providers' needs in the face of a difficult ASO transition. Be part of the solution: http://mdcbh.org/join