

Telehealth and Community Broadband Take on Substance Abuse

Recovering addicts require intensive support from trained specialists and peer groups. Telehealth is one of the best ways – and sometimes the only practical way – to deliver that support.

By Craig Settles / *CJ Speaks*

Abuse of opioids and other substances is covered in the news daily from coast to coast. There seems to be no end in sight to the heartache, the billions of dollars spent and lost, and the lives lost or damaged. Though no one claims technology is a silver bullet that will make addiction go away, telehealth can give communities a leg up in keeping pace with the epidemic or, hopefully, stemming the tide.

But telehealth is hugely dependent on another technology: community broadband, or high-speed internet delivered by municipalities and counties, public utilities and co-ops. These entities typically value their communities' well-being above everything and commit to making broadband universally available. Without broadband, telehealth providers cannot attack or treat substance abuse and opioid addiction.

FREE TELEHEALTH JOINS THE BATTLE

In February, telehealth vendor VSee announced a free version of its software platform, VSee Clinic. Practitioners can download this platform, which is suitable for many telehealth applications, from the company's website.

Mental health professionals, general practitioners, specialists, clinics and other medical providers can test VSee Clinic to see how they and their patients respond to telehealth. Doctors cannot issue online

prescriptions for substances regulated by the DEA. However, Milton Chen, CEO of VSee, says they can use telehealth to manage initial patient screenings and video consultations.

Standard detox programs are intrusive, requiring patients to check in to a center for 30 days. Many low- and middle-income people cannot afford the cost or the time. Detox centers provide medical treatment for the physical drug withdrawal. "They also incorporate counseling and therapy during detox to help with the withdrawal," explains Chen. "Telehealth gives patients the option to do this after work."

Dr. Edward Kaftarian, chief of telepsychiatry for California Correctional Healthcare Services, believes telepsychiatry requires good video and audio connections with guaranteed security, anywhere between 30 and 100 Mbps. Kaftarian says, "Slower speeds may be adequate [for the video call], but doctors may lack enough bandwidth for simultaneously charting, accessing medical records and consulting other information sources."

"Substance abuse often leads to other medical issues that require specialized treatments," says Erika Chuang, vice president of product management for VSee. "Rural hospitals, in particular, need access to various specialists who work in larger cities that are



A counselor at Texas A&M Telehealth Counseling Clinic helps a patient at one of the clinic's access points.

hours away from some rural residents. Telehealth enables medical providers and their patients to experience basic telehealth treatments that involve video consults.”

CAPACITY, NOT SPEED

Carly McCord, Ph.D., is director of clinical services at the Texas A&M Telehealth Counseling Clinic, which partners with communities to establish behavioral health solutions, including telehealth. She says, “I’m struggling in my rural areas that have really slow internet access. We bought the best internet we could afford, but all that’s available is satellite. I bought a telehealth platform that touts the lowest bandwidth requirements – 0.25 Mbps. And that’s a minimum!”

McCord’s staff created a hub-and-spoke model, with the hub at the university and nine access points in seven counties in the Brazos Valley. The university provides the mental health expert staff. The counties chip in by providing physical locations where underserved people can be greeted by

staff and access services. Telehealth software at these locations enables patients to access counseling services on laptops, tablets and smartphones. Quality broadband is key.

“We’re talking about intensive therapy, something like treating PTSD, which you can’t do with really crappy internet connections,” says McCord. “Or when your patient’s disclosing a trauma to you, and your connection glitches. You miss a word and have to say, ‘I’m sorry, can you repeat that?’

It’s not optimal. We’re at the forefront of telehealth; we’re making it work. But we definitely need broadband to step up, to improve, especially in our rural areas.”

Kaftarian, McCord and many other health care professionals believe telehealth is so potent for treating substance abuse because patients can receive treatment in the privacy of their homes. However, even though telehealth vendors may be reducing the speed that individual patients

THE REIMBURSEMENT GAP

Although states and insurers have increased their support for telehealth in the last several years, they aren’t all there yet.

Becky Jones, program manager for the TexLa Telehealth Resource Center, advises, “Before using telehealth, communities need to determine whether parity laws are in place in their state that allow insurance companies to reimburse telehealth treatment at the same level as comparable in-person services. Then medical providers have to determine if their patients’ specific insurance policies cover telehealth treatments.”

Barriers such as distance, lack of transportation, bad weather and unpredictable work schedules can prevent patients from regularly attending counseling or peer-group sessions, impacting treatment effectiveness. Telehealth helps patients keep these appointments.

need to use their products, the broadband infrastructure may not be able to support multiple devices and users within a home or neighborhood.

As Pew Research reported in 2017, “Taken together, 90 percent of U.S. households contain at least one of these devices (smartphone, desktop/laptop computer, tablet, or streaming media device), with the typical (median) American household containing five of them. And nearly one in five American households (18 percent) are “hyper-connected” – meaning they contain 10 or more of these devices.”

The quality of broadband is affected not only by the number of devices within a residence but also by the types of applications the devices run. Students’ homework assignments involve intensive graphics, lengthy videos and group video collaboration. Adults often do work assignments from home. Everybody uses Netflix, games and other entertainment. Add telehealth, and systems can quickly overload. A rehab patient suffering a crisis cannot afford a broadband glitch.

LONG-TERM RECOVERY

“What we’re seeing in California is that communities with the most acute substance abuse issues are in counties where we have the most need for behavioral health professionals,” says Eric Brown, president of the California Telehealth Network (CTN). “They are less likely to have the trained clinicians who can do the type of therapy required. There are areas where they’re lucky to have even one licensed psychiatrist or psychologist, let alone

specialists who are trained to treat substance abuse.”

Brown can bring telehealth and broadband to bear on the substance abuse dilemma. CTN, a nonprofit, is part of Portland, Oregon-based OCHIN, a nonprofit health care innovation center. OCHIN, also a nonprofit, serves as the back-office IT shop for 500 community clinics and health centers in 47 states, offering a high level of technical support and network infrastructure. Recently, OCHIN asked Brown to head all its broadband activities nationwide.

Because primary care providers often deal with substance abuse patients first, they have responsibility for collaborating with appropriate medical personnel to get the patients treated. CTN and OCHIN are leveraging broadband connectivity appropriately for all these parties.

They have deployed, or are deploying, telehealth technology and broadband infrastructure in rural communities so the clinics and hospital examination points are linked to specialists. A lot of these specialists have to be videoconferenced in, which generates high volumes of data traffic and requires broadband infrastructure to carry the increased traffic. The best solution is to train local people to deliver treatments – but that may call for intensive distance learning systems.

Brown believes that geography dictates the need for telehealth in many areas. “The more barriers a patient has – travel across a mountain range, lack of a car, inclement weather, an unpredictable work schedule – the

higher probability that the treatments won’t be as effective.”

VSee’s Chen concurs, saying, “Telehealth is good for delivering treatments that involve peer support groups similar to Alcoholics Anonymous. If a person has to drive a hour or two every week to meet with a support group, it’s discouraging. But if [he or she] can virtually connect with a laptop or smartphone video, the convenience factor can result in the counseling’s being more effective.”

Joan Vandermate, global head of marketing for Logitech’s video collaboration business, believes video conferencing as a service and video collaboration can become instrumental in preventing or treating substance abuse. She says mental and other health issues, medications, lifestyles and life events can trigger depression, anxiety and various activities that lead to substance abuse.

Vandermate advises, “If telehealth teams categorize and store this data in the cloud, as well as other relevant materials, individuals can download short videos with tips, online resources and coping mechanisms to help them get past the moment. Video conferencing apps then can connect the individuals to clinicians and counselors as easily as clicking on an embedded link.”

These anywhere-anytime patient interactions make a great impact on substance-abuse treatment and recovery. As long as the connections between individuals and groups are speedy and dependable, there can be immediate communication when minutes matter. Ultimately, this symbiotic relationship between telehealth and community broadband can pay huge dividends for a community. ❖

*Craig Settles is a community broadband industry analyst, a strategy consultant and the host of the Gigabit Nation radio talk show. Reach him at craig@cjspeaks.com. Don't miss the April 8 session on this subject at the **BROADBAND COMMUNITIES SUMMIT**.*