



**RE: SB 1022/ HB 5596: An Act Concerning Telehealth**

March 14, 2021

I am writing to provide testimony on SB 1022 / HB 5596 in my role as the President of the Connecticut Psychological Association. Prior to COVID-19, I served as the Director for the VA's New England telemental health hub, which provides services to rural and underserved communities throughout the region under the VA umbrella. I have provided exclusively telemental health services since 2017, and am considered a national expert in telemental health practice. Furthermore, I conduct research on telemental health and provider perceptions/ experiences and am an active consumer of scientific research in this area. In all of my roles, I want to convey very strong support for SB 1022 / HB 5596.

Telemental health is not only effective and efficient, but reduces many barriers to care. While its utility has been highlighted during the COVID-19 Pandemic, its purpose extends far beyond the current situation. Many individuals in our state, in particular our more rural communities, have poor and limited access to care. High-quality and effective mental health care requires regular and consistent treatment, which is difficult if not impossible for many given time and economic cost (travel, time off work, etc). There are many barriers to participating in treatment the way that is needed to reduce problematic symptoms/behavior, and improve health and quality of life.

Telemental health increases access to care, and importantly allows expert care to expand its reach and serve those who are traditionally underserved. Telemental health allows patients to connect with experts and the best possible provider for them across the state, regardless of location. Telemental health can offer real-time intervention in a patient's natural environment, offering important opportunities for in-the-moment assistance, easily connecting with family members when this is helpful, and concrete assistance making changes in one's environment (e.g. coaching someone through getting rid of alcohol/drugs in their home in real time).

**Scientific Evidence**

Excerpt from: *Doran & Lawson (2021)*: Research has found that TMH services appear to be effective for assessment and treatment across the lifespan (e.g. Myers et al., 2011; Holden & Dew, 2008), and diagnostic spectrum, including conditions like depression (Fortney et al., 2013; Khatri et al., 2014), anxiety/panic (Yuen et al., 2013), PTSD (Morland et al., 2020; Turgoose, Ashwick, & Murphy, 2018), and substance use (Frueh, Henderson, & Myrick, 2005). Direct comparisons of TMH to face-to-face care demonstrate that TMH is relatively comparable in terms of overall effectiveness (Hilty et al., 2013; Richardson et al., Elhai, 2009).

From the *Telemental Health Literature Review Executive Summary* (June 2020):

- Decades of rigorous research consistently supports that mental health services, including psychotherapy and psychiatry, delivered over clinic-based and home-based Clinical Video Telehealth (CVT) modalities are as clinically effective as traditional in-person care for treating a range of mental health conditions in Veterans and civilians.



- Patient and provider satisfaction with CVT modalities for mental health care has been demonstrated. Therapeutic alliance is similar for CVT and in-person mental health care, according to both patients and providers.
- Retention is comparable between CVT and in-person modalities for delivering mental health services.

Patient and providers appreciate and enjoy telemental health and find it extremely effective for clinical service delivery. Patients prefer it for a number of reasons, many of which are separate from and predate the COVID-19 Pandemic. Having telemental health as a viable option is the right thing to do for our communities and increases the likelihood that everyone can access mental health services in a way that will work within their lives, jobs, and other constraints (e.g. childcare, transportation, accessibility).

### **Summary**

Telemental health has been instrumental in allowing access to high-quality mental health services during the COVID-19 Pandemic. However, its utility extends far beyond the present circumstances. Telemental health is a desirable and effective option for both providers and patients. It offers increased access to care, better matching of patient needs to provider expertise, and eliminates many barriers to care that often render regular, consistent mental health care difficult if not impossible. Telemental health can greatly reduce challenges associated with accessibility, mobility, economic cost, transportation limitations, childcare conflicts, work constraints, and mental health conditions that make it difficult to leave the house and get to a physical office location.

Telemental health is the future of behavioral health care. Parity for these services is essential in order to ensure that mental health providers continue to offer these critically important services to their patients. Equal treatment and equal pay allow for the continuation and expansion of telemental health services in a way that is good for our communities, promotes easy access to high-quality mental health care, and serves the individuals in our great state in a way that allows them to reduce distressing symptoms and improve the quality of their lives.

**It is critically important to support SB 1022/ HB 5596: An Act Concerning Telehealth** and ensure that Payment Parity is part of this important legislation.

Respectfully submitted,

A handwritten signature in black ink that reads 'Jennifer M. Doran'.

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