Good morning esteemed members of the Public Health Committee. Thank you for the opportunity to participate today. My name is Jenna Harma, and I am a former President and current Membership Chair of the Connecticut Counseling Association. CCA is the professional organization that represents Professional Counselors, Professional Counselor Associates, and counseling graduate students here in CT. The mission of CCA is to advocate for the counseling profession, promote counselor identity, provide opportunities for development and networking, and offer resources to better support those we serve. I am also a Licensed Professional Counselor and National Certified Counselor and have lived in Cheshire for the last 9 years.

I am pleased to have the opportunity to provide some information regarding the implementation of telehealth from the providers’ perspective as it relates to the Covid 19 pandemic. I share this information in hopes to provide support to codify the telehealth provisions for behavioral health care implemented in the Governor’s Executive Orders 7G, 7F, 7DD and 7FF.

Behavioral health providers have reported challenges and frustrations with the abrupt need for utilization of telehealth, but these struggles pale in comparison to the many benefits it has offered during this unprecedented time. Telehealth has provided an opportunity for our most vulnerable community members to continue to have access to their mental health care. Moreover, with the implementation of the Governor’s various Executive Orders it has also allowed those experiencing increased mental health symptoms related to the pandemic to begin essential treatment through telehealth. People who have lost loved ones to this terrible virus or those who are working on the frontlines found themselves with a sudden, unexpected need for treatment, and because of telehealth they have access to care. Specifically, waiving the originating site requirements for psychiatric diagnostic evaluation and the telephonic-only telehealth provision have been critical to allow clients in need to initiate or continue treatment with their providers.

Additionally, the move to telehealth under these provisions has made it possible for providers to reach a greater number of people in need of treatment who otherwise may have been unwilling or unable to participate. Counselors have indicated that some clients are reporting feeling more comfortable with telehealth, specifically the ability to participate in audio-only treatment. In fact, some providers have found that the transition to telehealth has been embraced by their clients, and it is their hope to continue to offer telehealth as a supplement to their practice, allowing increased flexibility and accessibility for the behavioral health consumer.
Furthermore, the option to use telehealth is a resource for clients who live in underserved areas where there are limited numbers of mental health providers. Similarly, the option to use telehealth removes barriers of access to transportation, not just in ordinary circumstances but specifically during New England winters where inclement weather can be prohibitive to consistent treatment. Telehealth also provides clients more opportunity to connect with behavioral health providers around the state who specialize in certain unique populations or treatment modalities. Eating disorders, maternal mental health, trauma specialists, and those with experience working with first responders are a few that come to mind. Despite our slow transition back to some of our normal routines and activities, people’s anxieties remain high. Thinking of a possible second outbreak in the fall or looking ahead to flu season, having access to telehealth treatment with these provisions could also be considered a proactive preventative measure in the spread of contagious illness. I remember back in the winter prior to Covid 19 when a new child client missed two sessions in a row due to illness and then lack of transportation. Had the option of utilizing telehealth already been established, it’s possible that one or both sessions could have been held, providing for more consistent treatment for this client. Similarly, for those clients with chronic illness that makes travelling difficult or for a child client with a caregiver with chronic illness, the flexibility of telehealth is a viable option to minimize missed sessions and improve continuity of care. Some counselors report seeing new clients who may not have otherwise accessed counseling services due to these factors. Access to telehealth with the provisions enacted from the recent Executive Orders allows behavioral health consumers the option to be seen in person or over an online platform, giving them a choice that best fits their needs.

There have been many challenges with the implementation of telehealth, some of which have abated while others remain. Initially, there were many insurance related issues with information seeming to change on an almost daily basis, confusion about rules and regulations, and inconsistencies among insurance carriers. And of course there was the issue with payment parity and the confusion over cost sharing. Technical difficulties with required platforms with some insurance companies made telehealth difficult or impossible for some consumers. The enactment of the Governor’s Executive Orders addressed some of these challenges, giving behavioral health providers a clearer direction so that they could focus on the needs of their clients. These provisions have removed barriers to allow consumers access to audio and video sessions on a variety of platforms in order to continue or begin essential treatment. This flexibility provides consumer choice which is critical to ensuring access to behavioral healthcare.

Specifically, the provision expanding telehealth to include the use of audio-only sessions was critical in addressing two of the biggest challenges in telehealth treatment--one, clients not having access to a computer or device with a camera and two, the technical difficulties experienced with using any of the various platforms. For treatment with those clients who do not have access to a computer with a camera, an approved platform can often be used on a cell phone or other mobile device. That would seemingly solve the face to face issue. However, issues with consistent connectivity, freezing frames, and lack of audio still remain and have frequently been reported with both computers and mobile devices, disrupting the flow of sessions. Some providers have reported having such significant issues with logging in or
maintaining connection using the telehealth platforms that they have been forced to cancel sessions for the day, resulting in loss of income as well as inconsistent treatment for the client. These technological challenges were further complicated when insurance companies that allow for telehealth were still requiring that only a certain platform be used. If connection with that platform is unreliable for whatever reason, their ability to utilize telehealth for treatment is absent or limited at best. In fact, providers have been resistant to engaging in telehealth in the past because of these restrictions and technological issues, thereby limiting consumer access to quality treatment. The ability to employ the provider’s desired platform and to switch to a audio-only session when these issues arise has been imperative to maintain connection with clients during this time.

In summary, the implementation of the Governor’s Executive Orders related to behavioral health care have been integral to providers’ ability to provide treatment for new and existing clients via telehealth. We know that telehealth was around prior to Covid 19, but this situation has brought to light some of its limitations as written in the current statutes which may have led to its under utilization. Now that healthcare providers across disciplines have been forced by the pandemic to begin using telehealth, it is essential that we examine current statutes and make necessary changes to optimize this resource for our clients. Telehealth as implemented under the provisions of the Executive Orders provides consumers with more options and better access to treatment. Using this information, it is hoped that consideration will be given to passing legislation that would allow telehealth to be a covered behavioral health service for both public and private insurance, as well as including covering the use of telephonic-only sessions and the use of any HIPAA compliant platform. Behavioral health providers are doing significant work over telehealth, and therefore it is also hoped that legislation can be passed to require payment parity between telehealth and in person sessions as well.

Thank you again for providing me with an opportunity to speak regarding telehealth and Covid 19 on behalf of the Connecticut Counseling Association and my fellow counselors.

Respectfully,

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