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Agency	1. How many people do you treat via telehealth? And what percentage is that of the total number of people you treat?	2. If you're not able to prescribe controlled substance via telehealth what changes would your agency have to make? And what type of costs would that add to your agency ?	3. What type of drugs do you prescribe via telehealth and what does that treat?
Saginaw County CMH	All of our tele-medicine arrangements at present are with board certified child psychiatrists for service to children and adolescents. As of March 1st, 361 children and adolescents are being seen for psychiatric and medication services by three different board certified child psychiatrists. This is 34% of all of the children and adolescents we serve. Children and adolescents (SED and ID/DD including ASD) represent 23% of all of the consumers we serve annually.	It would be an emergency as the reason we had to move to tele-psychiatry is that we have been unable to hire or contract with enough board certified child psychiatrists in our area of the state to meet our service demand needs and we are not alone in this challenge. We are a training site for the new Psychiatric Residency at the Medical School at Central Michigan University, but there is no Child Psychiatry fellowship there at least not yet.	The following medications/ stimulants are those that would be prevented from being prescribed if this new language does not go into effect before April 1st. Most all are prescribed to attend to some sort of Attention Deficit Disorder with Hyper Activity. Ritalin, Adderall, Focalin, Concerta, Quintellix, Vyvanse, Quillichew ER and Daytrana
Livingston County CMH	• We treat about 200 consumers via tele-psych (adults and children) • Rough estimate of 25% of the total number of consumers we treat (adults and children)	• I would just add that prescribing controlled substances such as benzodiazepines for anxiety (which is also associated with agitation, especially in psychotic patients) and stimulants for ADHD (especially important to treat in children to maximize potential for success in education but also important for adults as ADHD affects job performance, driving, etc) is an important tool for any psychiatrist. If we weren't able to rely on telepsychiatry services we currently receive, the impact on patients would be tremendous. Even with telepsychiatry services, we are still short on needed psychiatry services and may need to increase telepsychiatry services in the future due to shortage of available psychiatrists in the area.	1. Stimulants – ADHD 2. Psychotropics – Depression, psychosis, anxiety, mood-stabilizers.

Hiawatha Behavioral Health	300 And what percentage is that of the total number of people you treat? 75-80%	We would have to contact primary care physicians and hope that they would prescribe. Or, the people receiving services would need to have a change in medication. Many primary care doctors are reluctant to prescribe to our clientele because their needs are so complex. Most of the people receiving medications are long-term clients whose medication régime, is working for them, has taken time and effort to balance and maintain therapeutic effect. The cost to us would be difficult to measure. I could presume that time and effort would be "X" number of man hours, resulting in a fixed cost. However, the cost to the people we serve could be insurmountable. If they cannot continue to obtain the medication that works for them, relapse may be inevitable. The financial impact is much less significant than the impact relapse can have on an individual and their families. And, each time there is a relapse, the return to baseline is much more difficult.	Primarily Benzodiazepine: for individuals with anxiety. Often individuals with SMI have an accompanying anxiety disorder. Stimulants for children with Attention Disorders. We do not prescribe opioids or other pain medications to our clientele.
Beacon Specialized Services	We treat approximately 100 residents, which is 33% of our census	We would lose our psychiatrist who is very involved and dedicated to our residents. We would have to discontinue offering this service as there is a shortage of psychiatrists available in this area and are outside of our salary range.	The following drugs that treat, including but not limited to, anxiety, depression, ADHD, OCD, schizophrenia, and bi-polar - antipsychotics, antidepressants, and anti-anxiety medications.

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Montcalm Care Network	In 2016, Montcalm Care Network served 193 people via Telehealth. Those 193 people represent 35% of all persons receiving psychiatric services and 10% of all person served by MCN. 25% of the 193 of people served in Telehealth were children with SED.	Without the ability to utilize Telehealth, we would lose psychiatric time as Psychiatrists would be unwilling to travel to our rural area the additional days needed to provide services. Lost psychiatric time would result in waiting lists for initial evaluations out 3-4 months particularly for children with SED. Additionally, we would be unable to maintain a full time Medical Director because Telehealth capabilities reduce the number of days per week the Psychiatrist must commute to our rural community (three days instead of five days a week). The ability to offer flexibility to work from home is a significant recruitment and retention tool for rural communities. Because of our use of Telehealth, we have been to retain the same psychiatric staff for over 10 years. Stable, high quality psychiatric staff ultimately impacts patient care and reduces inpatient hospital rates. Montcalm already pays salaries comparable with urban areas. Our experience has shown, without Telehealth to reduce the number of days in office, Psychiatrists are not willing to work in our rural area.	• Stimulant medications (examples- Adderall, Ritalin) medications utilized with children to treat symptoms of ADHD • Benzodiazepines (examples- Ativan, Xanax) medications to treat severe anxiety conditions • Hypnotics (examples Ambien, Restoril) medications to aid persons with sleep disturbance secondary to a variety of mental health disorders
West Michigan CMH	90% of the psychiatric services we provide are via telehealth. We serve approximately 2300 people per year. 90% are served in our health clinic.	We have been searching for an on site full-time psychiatrist for 1.5 years, with no success. Due to the rural nature of our communities recruitment is very challenging. This would decrease access to important services to our consumers and likely we would not be able to replace the capacity we have on telepsych.	We prescribe a variety of controlled substances—stimulants for kids for ADHD, various benzodiazapenes (minimizing utilization of these substances now) for anxiety, sedative hypnotics for sleep issues associated with other psychiatric conditions.

Genesee Health System	290 patients treated via telehealth at GHS/1557 total patients = 18.6% Telehealth	Controlled substances prescribed by GHS include Benzodiazepines and Stimulants. Without access to these classes of medications, GHS would not be able to utilize telehealth at all since access to these are an instrumental part of the prescribers armamentarium. Without Telehealth, GHS could face staffing shortages, which could increase inpatient use due to reduction in available psychiatric care.	Psychiatric Drugs: 1. Antidepressants: treats major depressive episodes and anxiety disorders. 2. Antipsychotics: treats Schizophrenia, Bipolar disorder, and augments antidepressants 3. Mood stabilizers: treats Bipolar Disorder and other impulse control disorders 4. Anxiolytics: treats Panic Disorder, Generalized Anxiety Disorder, agitated anxious aggressions, and Insomnia. 5. Stimulants: Treats ADHD and can augment antidepressants. 6. Other: Beta Blockers for Anxiety
North Pointe Behavioral Health	We have currently 4 Psychiatric providers, 3 providers are primarily telehealth, and roughly 60 % of the total number of people that receive Psychiatric services are treated via Telehealth.	There is no Fellowship trained, Board certified Child Psychiatrist currently in the UP .Our Child Psychiatrist, who is Fellowship trained, Board certified Child Psychiatrist see's individuals via telehealth primarily. ADHD is common disorder in the kids in our community (ADHD 7-11 % prevalence in school age kids) and Stimulant medications are the main stay treatment for it. Majority of our local Medical providers do not feel comfortable treating ADHD, and without proper treatment, untreated ADHD will lead to poor academic, social, occupational functioning as well as increased prevalence of alcohol/SUD, increased crime/legal problems and abuse/neglect. Given the acute shortage of Psychiatric providers and especially Child Psychiatrist, without telehealth services available to treat our children, we will not be able to provide this invaluable service to our kids. This would lead more use of the ED, and Inpatient/residential treatment AND so significantly increased cost.	We prescribe all psychotropic medications including controlled substances to treat various diagnosis including Schizophrenia, Bipolar disorder, MDD, ADHD, Panic d/o, PTSD, Autism, SUD, ID etc.

Huron Behavioral Health	Currently, the active caseload for our telehealth Child & Adolescent Psychiatrist is 41. Everyone under the age of 18 is treated through telehealth. The telehealth caseload represents about 10% of the total number of people treated through our Med Clinic/Psychiatric Services.	If we are unable to prescribe controlled substances via telehealth, we would be forced to seek treatment arrangements for these children in the Bay City, Saginaw, Port Huron and Detroit areas. At a minimum, this would put a serious burden on the families as they would be required to travel significant distances out of the county to access psychiatric services. It is also possible/probable that, if required to travel outside of the county, some of the families would just drop out and not avail themselves or their child of the needed treatment. We spent several years recruiting psychiatrists to our area, to no avail. When people discovered our physical location (not in a metropolitan area), they were no longer interested. We have offered to support immigration/J-1 visa process, etc., and our salary/benefit package were very competitive with other CMHSPs in the state. We fully expect increased inpatient use if we are unable to provide psychiatric care or prescribe the necessary medications.	Schedule II drugs for children with ADHD; Schedule IV (example, Clonapin/benzodiazepines) for anxiety and sleep issues.

Gogebic County CMH	If we focus only on MD services provided over the past quarter and use this to project estimated numbers for the year: Dr. Burrows saw around 130 patients and Rocco saw 24 for a total of 154 unduplicated consumers. I would be inclined to say that based on those numbers we could reasonably project that about 84% (130/154) of our consumers are treated via telehealth this year.	If we were unable to prescribe controlled substances via telehealth this would mean decreased access to psychiatry for our consumers as we have not been able to successfully recruit a psychiatrist to work on site full time. It would create higher demand for primary care physicians in the local community to accept responsibility for prescribing these types of medications and they may not feel that it is within their scope of practice. This would impact the quality of care that we provide to our consumers as there may be lack of access to necessary medications and decreased continuity of care. It would also likely mean we would have to incur higher costs in order to attract, recruit & retain a psychiatrist and/or it may also be necessary to utilize Locum Tenems psychiatrists who may not remain constant and come with their own set of costs.	Our psychiatrist prescribes medications via telehealth to treat a variety of mental health diagnoses including but not limited to: ADHD and Disruptive Behavior Disorders, Anxiety, Obsessive Compulsive Spectrum, Posttraumatic and Dissociative Disorders, Mood Disorders, Psychotic Disorders, & Substance Related Disorders. Medications prescribed include, but are not limited to: antidepressant medications, antipsychotic medications, anti-anxiety medications & stimulants.
Sacred Heart Rehabilitation Center	Around 800 telehealth services (6% of total clients) provided in Fiscal Year 2016	Not being able to prescribe controlled substances via telehealth would limit the amount of services that a substance use disorder provider is able to provide to clients needing to access an opiate treatment program. Additionally, it would limit treatment access for pregnant opiate dependent women. Costs to attract and retain physicians is a constant issue for SUD providers, along with a lack of physicians, physician's assistants and nurse practitioners trained in addictions treatment in Michigan. It is also noteworthy that in Michigan, a licensed SUD methadone program can only utilize a PA for up to 30% of the physician's hours, which further restricts our use of mid-levels.	• Methadone for medication assisted recovery • Buprenorphine for medication assisted recovery • Benzodiazepines for alcohol detoxification • A variety of other medications for detoxification purposes • A variety of other medications for physical health issues

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Lifeways CMH	Number of services provided: 8,888 Number of services provided by telehealth psychiatrists: 2,796 Percent of telehealth services: 31.46%	Due to the lack of psychiatrists, if we cannot use telemedicine then consumers will not be seen in a timely fashion and it will cause back log across our entire psychiatric services. Our costs for recruiting and maintaining psychiatrists would increase and more than so in a metro area as we would have to consider relocation costs and or transportation/travel costs. Without telemedicine the ability to see a psychiatrist as often as necessary would increase and more individuals are likely to go inpatient. Inabilities to provide adequate psychiatric care increases the risk for homelessness and more intensive services.	Psychiatrists prescribe benzodiazepine for agitation and anxiety and to control the withdrawal symptoms from alcohol. They also prescribe stimulant medication for ADHD.
Newaygo CMH	We currently have 7 medical providers, 3 of which solely provide via telehealth and one provides via telehealth 50% of her time. Approximately half of the people we serve in our med clinic receive their services through telehealth. In the last year, we provided approximately 2,500 psychiatric services in our medication clinic, with approximately half being telehealth.	The biggest impact to our CMH would be to our child and adolescent psychiatric services. Not being able to prescribe stimulants via telehealth would greatly disrupt our current practices, as both of our child psychiatrist utilize telehealth. I would expect that limiting the ability to prescribe controlled substances would increase our costs by having to secure new psychiatric providers. I would imagine that the salaries would be higher to recruit them and there would be additional cost related to paying for travel time.	We prescribe the full array of psychotropic medications via telehealth. This includes stimulants that are used to treat ADHD. We do not currently prescribe buprenorphine products, however, we may want to be able to in the future. We do not prescribe pain medication.

Pathways CMH	Tele health service in past month (unique people : 239 Percentage of total served: 30% in the past quarter	We would have to find a psychiatrist willing to travel to remote areas of the Upper Peninsula to provide services to children and adults. This would involve a dramatic increase in salary as well as travel costs, if we were able to hire such a person. We would have a dramatic loss of flexibility in providing services to our population, who are spread out over four counties. This could easily result in increased costs associated with hospitalization, not to mention increased stress and suffering for the people we serve. Telehealth is an important tool, especially in remote areas—psychiatrists and mid-levels providing service in this way must be able to provide safe and effective treatment, including access to appropriate medication, in order for the tool to be effective.	Stimulants and benzodiazepines are the only controlled substances we prescribe via Telehealth. We also use other standard psychotropic medications via Telehealth.
Gratiot CMH	We have 2 Psychiatrists who supplement appointments with tele-psychiatry. There are 54 consumers enrolled to these physicians. These consumers receive a combination of in person and tele-psychiatry appointments for medication reviews. This translates to approx. 12% of our total consumers served under Psychiatric Services.	The largest group of consumers served via Tele-psychiatry are children and adolescents. This is also the largest group prescribed controlled substances, often for the treatment of ADHD. The removal of the ability to prescribe with Teleheath would have negative implications for an already difficult to serve population. Our agency would likely have to contract for more in-person days with our Child Psychiatrists or begin attempting to recruit another physician. It is a difficult task to find physicians in our rural area who are capable of treating children/adolescents.	We prescribe a wide range of medications via telehealth used to treat a variety of mental disorders. All of our consumers who are seen for telehealth, also see the physician in-person for an initial evaluation.
Kalamazoo CMH	33 individuals Approximately 2%	Although it's rare to need to prescribe a controlled substance via telehealth, the additional costs are related to securely sending (mailing) the prescription to the person.	Psychiatric medications to treat individuals with moderate to severe mental illnesses.

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Lenawee CMH	We serve 562 consumers with Telehealth. That's 65% of those being seen for medications.	The inability to prescribe controlled substances via Telehealth would have a tremendous impact on our CMH - we don't have a plan 'b' at this point. We were able to maintain/increase our capacity using Telehealth- we have one Psychiatrist physically on site right now. We have nowhere in the community to refer people, either. There are few Doctors in Lenawee County and even fewer Psychiatrists	Our tele psych doctors prescribe medications for ADHD (stimulants), anxiety (benzodiazapines) and sleep (sedatives).
St. Clair CMH	From 10/1/2016-current, St. Clair CMH has provided a telehealth service to 195 unique individuals. That number is slightly greater than 6% of the overall number (3,171) of unique individuals served during that time period. St. Clair CMH currently utilizes one (1) Board-Certified Child Psychiatrist approximately 16 hours/week via telehealth.	If prescription of controlled substances were no longer allowed via telehealth, this would result in early termination (at a cost) of a locum tenens telehealth psychiatric services contract. The most immediate effect would be to our consumers—they will no longer be able to continue to see a psychiatrist with whom they have developed a therapeutic relationship. They will be forced to be transferred to an on-site prescriber. Another immediate effect would be an increased caseload for the Medical Director and other on-site psychiatrists and psychiatric nurse practitioners. Ultimately, it would require additional resources in recruiting an on-site prescriber, which has proven time-consuming and costly. In order to attract quality prescribers, higher salaries are necessary (and sometimes competition is so large, not even that seems to be enough). We would do everything possible to avoid an increase in inpatient use due to the lack of psychiatric care; however, there is no guarantee that would not happen as a result.	Our telehealth Psychiatrist prescribes medications for 1) ADHD; 2) Bipolar Disorder; 3) Symptoms associated with Autism Spectrum Disorder; 4) Major Depressive Disorder; 5) Symptoms associated with Intellectual and Developmental Disabilities; 6) Substance Use Disorders; and 7) Psychosis. She prescribes psychostimulants, antipsychotic medications, mood stabilizing medications, antianxiety and antidepressants, and medications to treat side effects. Examples of psychostimulants include Ritalin, Concerta, Adderall, and Vyvanse. A full list of controlled substances prescribed via telehealth include: Ativan, Xanax, Clonazepam, Klonopin, Vyvanse, Lorazepam, Adderall XR, Quillivant XR, Ritalin LA, Daytrana, Focalin XR and Metadate CD.

CEI CMH	None currently. We are soon hoping to be treating about 300 people via telehealth.	We would have to be able to obtain sufficient psychiatric staff, which I believe would required higher salaries and loan repayment. Alternatively, we would have to have the telepsychiatrist transfer all of his or her cases who require controlled substances to an in-person psychiatrist, which adds extra time and expense before a person can receive definitive care. Repeating multiple evaluations due to transfers is not good clinical care.	I expect the telepsychiatrist will be prescribing antipsychotics, antidepressants, anticonvulsants (for mania), thyroid hormone, medications to treat side effects of antipsychotics, benzodiazepines (to treat anxiety and agitation, as well as sometimes as an adjunct for mania), stimulants (to treat ADHD and depression), and occasionally other medications depending on the clinical situation of the patient.
CMH for Central MI	Over the past 12 months, 1776 consumers were seen via telepsychiatry out of a total of 2558 consumers who were in psychiatric treatment. That equates to 69% of our consumers who were in need of psychiatric medications.	Approximately 50% of the children we serve have the diagnosis of ADHD requiring controlled substance prescriptions (stimulants). Children in three of our six counties are served via telepsychiatry. Being unable to prescribe the indicated treatment via telehealth would render our ability to care for these children impossible and would result in increased hospitalization, impaired school performance and increased legal involvement. Similar results, including impaired work performance, would be expected for the adult population who suffer from ADHD, unresponsive depression or anxiety. In addition, being unable to treat side effects of consumers who have schizophrenia and who are experiencing severe side effects, which untreated would lead to non-adherence, could risk declining level of function. Attempts to recruit adult and child psychiatrists to our rural counties have been unsuccessful and would require a significant increase in salary and benefits.	Controlled substances prescribed by psychiatry include stimulants and benzodiazepines. Stimulants are prescribed for those with ADHD and are also used to treat resistant depression. Benzodiazepines are prescribed to treat panic disorder, generalized anxiety disorder and side effects of antipsychotic medications.

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Health West (Muskegon CMH)	In the past year HealthWest has treated 1,091 persons, 50.35% of the total number served.	We would need to find/recruit psychiatrists to work on site. If we were able to find a psychiatrist, it would require higher salaries to attract to our area, increased in-patient days, increased Crisis Residential days and a significant lower quality of care by the inability to provide psychiatric care to the persons served in our agency. The cost of Locum Tenens is very expensive and the frequency of change is very difficult in building a therapeutic relationship for individuals served	Medication categories prescribed via telehealth: Antipsychotics, Antianxiety Antiparkinsonian, Sedative-Hypnotic, Antidepressants, Calcium Channel Blockers, CNS Stimulants, Potassium Channel Blocker, Ethanol Dependency, Antifungal, Cholinergic, Antihyperlipidemic, Histamine Antagonist, Analgesics, Opioid Dependency, Mineral Supplement, Anticonvulsant, Amino Acid Supplement. Adrenergic Blocker, Smoking Cessation Agent, Antihypertensive, Pituitary Hormone, Laxative, Antidiabetic, Vitamin, Thyroid Supplement, Opioid Antagonist, Antivertigo, Ethanol Dependency.

Bay-Arenac CMH	Five telehealth providers with 920 of the 1784 unduplicated consumers. 52% of our patients receive telehealth services.	and our efforts to recruit on-site prescribers has had limited success. There are several agencies in our area that have been recruiting for an on-site Psychiatrist for well over two years without success. With the extreme shortage of Psychiatrist in our area, we have successfully assured needed specialty mental health psychiatric services by utilizing telehealth providers. Telehealth services allows us to bring skilled and highly trained prescribers to our area. Many of these prescribers are established in other states/communities and telehealth provides a means to expand their practice. Currently our Tele-psychiatrists do not prescribe opiates. They sparingly prescribe benzodiazepines and sedative hypnotic in a judicious and time limited manner. We do prescribe CNS stimulants via telehealth, mainly for children whose stimulant mess are supervised by their parents. Of our 920 telehealth patients, we have 367 current prescriptions for the above mentioned medication classes. If our telehealth prescribers are not allowed to prescribe controlled substances the impact on consumer care will be devastating. Again, due to the shortage of on-site Psychiatrist is Michigan, we do not have on-site capacity to absorb cases that would be impacted by this change. This would cause a disruption in consumer care and place	CNS Stimulants—ADHD Benzodiazepines—stabilization of acute anxiety Sedative Hypnotic—insomnia and other sleep disturbances