

Geographic differences in telehealth found among mental health clinics

February 2 2024



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Telehealth availability for mental health care varies significantly across states—from less than half of treatment facilities contacted in states like Mississippi and South Carolina to every facility contacted in states like



Maine and Oregon, according to a new study.

Researchers found there were differences in services offered depending on whether a mental health treatment facility was located in a rural or metropolitan area.

The types of services offered—and the types of telehealth modalities available—also varied widely among clinics, with roughly one in four clinics not offering virtual medication management and about one in three not offering virtual diagnostic services.

The results are from a "secret shopper" study where researchers phoned nearly 2,000 clinics nationally and sought to make telehealth appointments for various mental health conditions posing as patients with different perceived race and ethnicities. The findings are published in the journal *JAMA Health Forum*.

"We found <u>considerable variation</u> in the types of services telehealth offered by mental health clinics across the U.S.," said Jonathan Cantor, the study's lead author and a policy researcher at RAND, a nonprofit research organization.

"On the positive side, we observed no significant differences in the availability of telehealth services based on the caller's stated mental health condition or perceived race and ethnicity."

The use of telehealth in the United States expanded considerably during the COVID-19 pandemic. While telehealth use has returned to near prepandemic levels in most fields of medicine, it remains much higher than pre-pandemic levels in <u>mental health care</u>.

While studies have examined use of telehealth throughout the pandemic, there is little known about the availability and composition of mental



health telehealth services. This includes ease of access to appointments, mental health conditions treated, types of telehealth services offered, and accepted types of insurance for payment.

"Understanding the availability of telehealth is important for informing policies that maximize the potential benefits of telehealth for mental health care," Cantor said.

RAND researchers telephoned a nationally representative sample of 1,938 outpatient mental health treatment facilities that treat adults between December 2022 and March 2023 using a standardized client script to inquire about current facility telehealth availability. Despite repeated calls to some clinics, researchers could reach someone at only 1,404 clinics.

"We tried to replicate the experience of a typical client seeking specialty care from a mental health treatment facility in the U.S.," Cantor said. "The fact that we could not reach anyone at one in five facilities suggests that many people may have trouble reaching a clinic to inquire about mental health care."

Of the facilities successfully contacted, 87% were accepting new patients and 80% reported that they were currently offering telehealth services. The median wait time for a telehealth appointment was just over two weeks, with significant geographic variation ranging from more than two months at mental health clinics in Maine to four days at clinics in North Carolina.

About half of current telehealth providers reported that telehealth was available only via video appointments, 5% reported that they only used audio appointments, and 47% used both video and phone appointments.

Among current telehealth providers, 97% said they offered counseling



services, 77% offered medication management and 69% offered diagnostic services via telehealth. Responses did not differ significantly according to the stated clinical condition of the caller.

Private facilities were nearly twice as likely to offer telehealth services compared to public facilities. In addition, private for-profit facilities were much less likely to offer medication management via <u>telehealth</u> compared to public facilities, but were more than twice as likely to offer diagnostic services.

"This may be because public and private facilities tend to serve different populations," Cantor said.

Other authors of the study are Megan S. Schuler Samantha Matthews, Aaron Kofner, Joshua Breslau and Ryan K. McBain.

More information: Availability of Mental Telehealth Services in the US, *JAMA Health Forum* (2024). DOI: 10.1001/jamahealthforum.2023.5142

Provided by RAND Corporation

Citation: Geographic differences in telehealth found among mental health clinics (2024, February 2) retrieved 28 April 2024 from <u>https://medicalxpress.com/news/2024-02-geographic-differences-telehealth-mental-health.html</u>

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