

VETN Request for Information Q&A

February 22, 2023

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Today's Agenda

- Introductions
- Background
- VETN Overview
- Demonstration Projects
- Purpose of RFI
- Questions to Date
- Next Steps
- New Questions



Project Team Introductions

VETN Project Team

- Ali Johnson, MBA
 - VPQHC
- Reid Plimpton, MPH
 - MCD Global, NETRC
- Caren Bishop, MS
 - MCD Global, NETRC
- Chris Gilding
 - MCD Global, NETRC
- Mark McGee, MD
 - Alpine Telehealth



Background

Psychiatric Patient Boarding

- Vermonters with mental health needs are waiting days in EDs before discharge or psychiatric inpatient care admission.
- On most days, the majority of people have been waiting more than 24 hours for placement.¹
- The rate of suicide-related ED visits in youth is increasing.²

¹ *Mental Health Boarding in VT Emergency Departments, Monday and Thursday mornings, point-in-time, from 5/24/2021 through 3/31/2022*, Vermont Association of Hospitals and Health Systems.

² *Youth Emergency Department (ED) Visits for Suicidal Ideation and Self-Directed Violence*, Vermont Department of Health, May 2021.

Timeline

- **October 2021:** A strategic goal to “establish a statewide telepsychiatry program in emergency departments” was published in the [Health Care Workforce Development Strategic Plan](#).
- **January 2022:** The Vermont Community Foundation awarded VPQHC a grant, which culminated in the [Vermont Emergency Telepsychiatry Network 2022 Needs Assessment](#).
- **September 2022:** VPQHC received a one-time, one-year \$901,123 Congressionally Directed Spending grant from Senator Patrick Leahy (D-Vt.) through SAMHSA to support coordination of the Vermont Emergency Telepsychiatry Network.

VERMONT EMERGENCY TELEPSYCHIATRY NETWORK

NEEDS
ASSESSMENT

20
22



The full report
may be accessed
on the [VETN
webpage](#).

Executive Summary (1 of 2)

- Literature shows that emergency telepsychiatry is associated with reduced lengths of stay in the ED, lower hospital admission rates, and lessened overcrowding.
- Hospitals identified these needs:
 - Funding
 - Equipment
 - Software
 - Staffing
 - Technical assistance
- “Success” might be defined as improved quality of care and higher patient and provider satisfaction.

Executive Summary (2 of 2)

- Reasons for an emergency telepsychiatry network include:
 - Timeliness of care
 - Workforce capacity
 - Training
 - Geographic access
 - Financial access
 - Prevention
- If out-of-state telepsychiatry providers are to be used, they must have access to and knowledge of local resources to manage the care needs of patients across the continuum of care, including transitions of care.



VETN

Vermont Emergency Telepsychiatry Network

Vision



Vermonters with mental health needs receive the highest quality of coordinated services along the continuum of care.

image credit: www.nami.org

Purpose

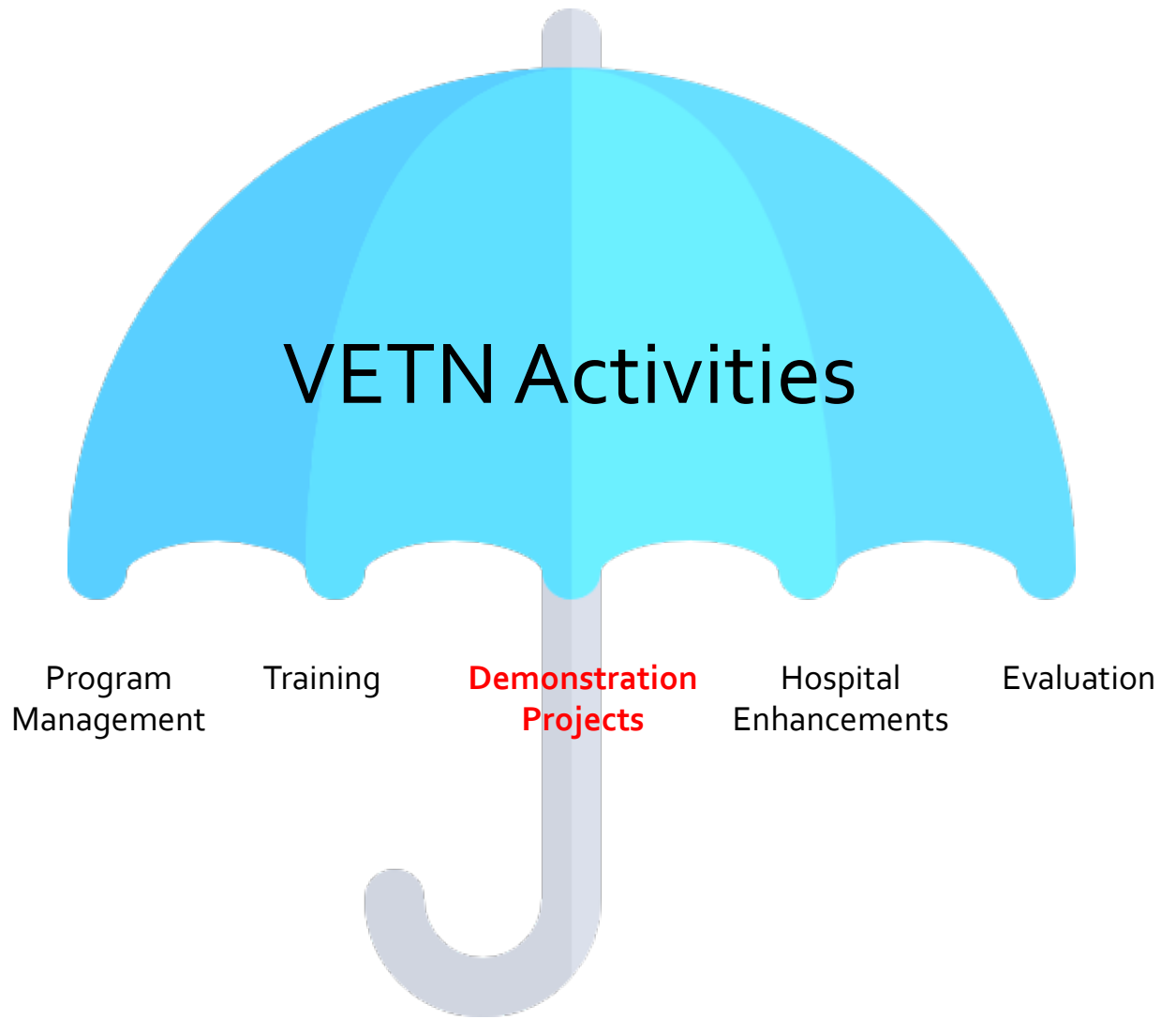
Vermont Emergency
Telepsychiatry
Network

VETN



a **statewide** system helping Vermont
EDs provide timely **psychiatric** care
via **telehealth** for individuals with
mental health needs

Project Scope

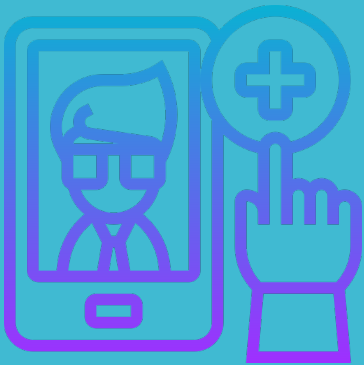




Demonstration Projects

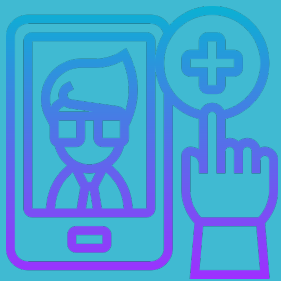


Demonstration Projects



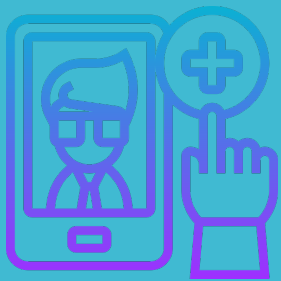
- Mid-Sized Hospital (RRMC):
 - Receiving child telepsychiatry service from the Brattleboro Retreat.
 - 4 Brattleboro providers credentialed and enrolled for RRMC billing purposes.
 - Went live on January 12, 2023.
- Critical Access Hospital (CAH), TBD:
 - To establish a system for telepsychiatry services in the ED.
 - Readiness assessment will be used to select the CAH to host the second demonstration project.

Critical Access Hospital Demonstration Project



- **Objective 1.** Establish a system for providing telepsychiatry services in the ED of a Critical Access Hospital.
 - clinical and operational consultation (designing clinical/operational workflows)
 - collaboration with MCD Global to provide ED staff training (e.g., mock patient encounters, patient consent, facilitate telepsychiatry encounter)
 - IT compatibility testing
- **Objective 2.** Provide telepsychiatry consultation for people boarding in the ED awaiting treatment serious mental illness.
 - emergent video encounters
 - 2-hour response time or less (24/7 coverage)

Critical Access Hospital Demonstration Project



- **Timeframe for Activities**
 - CAH selection, vendor contracting, and provider credentialing could take months.
 - SAMHSA grant project period ends 9/29/2023.
 - Possible 1-year no-cost extension.
- **Allowable Costs**
 - Implementation fee (if applicable).
 - Telepsychiatry consultation.
 - Total amount depends on hospital selected and funds available.



Purpose of RFI

- To vet potential vendors for the CAH demonstration project.
- The information collected will be shared with the chosen hospital so they can make the final decision.

Request for Information

Business to Business
Vermont Department of Economic Development

ThinkVermont.com

Home

To print, go to File on the menu bar and select Print.

Emergency Telepsychiatry Services - VETN Demonstration Project

VERMONT PROGRAM FOR QUALITY IN HEALTH CARE, INC.

**132 Main St Ste 1
Montpelier, VT 05602-3226**

**Bid Type:
Request for Information**

**Request Date: 2/10/2023
10:44:44 AM**

Open Date:

**Closing Date: 2/24/2023
10:00 PM**

Intent To Bid Deadline:

Est. Dollar Value: \$0.00

RFQ Number:

<http://www.vermontbusinessregistry.com/BidPreview.aspx?BidID=57456>



Questions to Date

Question 1

Q: Could you please provide a number of initial encounters and follow-ups? I see that you listed 170-370 discharges, but would we be doing the initials for all of those patients?

A: It is highly unlikely that an initial encounter will be required for every mental health ED discharge. Based on Vermont data, currently, the best estimate of the anticipated patient need is one consult to five discharges. Therefore, the number of initial encounters is estimated to be 34-74 per year. There are many factors, and this ratio varies greatly by hospital. We are unable to estimate how many follow-up consults would be involved and encourage you to use an estimate based on your experience in rural settings.



Next Steps



Next Steps

DATE	EVENT
2/22/2023	Final questions due in writing by 1:00 p.m. EST
2/23/2023	Meeting presentation and recording posted to VETN webpage
2/23/2023	Questions and answers posted to VETN webpage
2/24/2023	RFI proposals due by 10:00 p.m. EST
3/13/2023 p.m. 3/17/2023 a.m.	Vendor Interviews (TBD)
TBD	Demonstration project hospital selected
TBD	Vendor recommendations shared with demonstration project hospital
TBD	Vendor selection by demonstration project hospital



New Questions

Questions?



Contact

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Quality Improvement Specialist

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