Clinical Outcomes and Policy Implications of a Statewide Telepsychiatry Initiative

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Persons with mental disorders account for a large and growing portion of Emergency Department (ED) visits in the United States. Because of the wide geographic distribution of EDs, telemedicine holds particular promise for increasing access and improving outcomes of mental health care. However, almost no existing research has examined the potential of telepsychiatry services as a means of treating mental health consumers seen in emergency departments. In March 2009, South Carolina began implementing an ambitious statewide telepsychiatry initiative designed to improve care for persons seen in its Emergency Departments. Psychiatrists in this telepsychiatry consultation system, provide around-the-clock coverage for consultation with hospital emergency departments. The program will be rolled out to all emergency rooms in the State over a two-year period. In an R01 awarded by the National Institute of Mental Health the effectiveness of this telepsychiatry initiative is being studied by comparing access and quality of care for persons with mental illness following an emergency department visit to a set of matched controls. Generalizability is assessed by examining the individual, the ED, and community-level moderators of the telepsychiatry program’s impact. Financial sustainability will be examined using a budget impact analysis from multiple state perspectives. Data is being comprehensively tracked for treatment contacts for individuals across the mental health, health, and social service systems.