



Virtual Care Alone Won't Drive Durable Behavioral Health Outcomes

A multi-channel, whole-person approach is required to drive lasting behavior change.

The healthcare industry is approaching a tipping point as consumers increasingly demand to engage in healthcare on their terms. A key part of the paradigm includes virtual care, especially where behavioral health is concerned. For the population at large, this trend can make care easier and more convenient to access where and when they need it. Yet virtual care, while valuable, is only part of a larger ecosystem of necessary channels and interventions. For the small but high-acuity and high-cost health plan members who may face multiple barriers to seeking care, providing virtual care solutions alone is not enough to spur meaningful engagement and durable health outcomes. For this population, Ontrak meets members where they are, offering a combination of virtual and in-person interactions with coaches and behavioral health providers, depending on what works best for them. Ontrak also works to build trust and engagement by identifying and helping remove barriers to care for each member.

The Rise of Virtual Care and Its Role in Improving Behavioral Healthcare

Telehealth adoption skyrocketed in 2020 during the COVID-19 pandemic, but the trend toward virtual care was beginning even earlier. Consumer adoption of virtual services, including telephone consults, online, email, text communications with providers, and a variety of health apps, has been steadily increasing for years. This evolution mirrors what we've seen in other industries such as finance and travel, and is being driven by consumer demand for convenience, technology improvements, regulatory approvals, expanded reimbursements for virtual services, increased availability of data, and cultural shifts toward destigmatizing treatment for behavioral health issues.

Even before the COVID-19 pandemic, virtual care utilization was slowly catching on. A [national study of claims data](#) found overall telehealth use rose 53% between 2016 and 2017. The pandemic pushed virtual care uptake into overdrive, at least in the beginning. Structural barriers to its use began to fall as restrictions around use of telehealth were reduced and reimbursements were expanded in light of the pandemic.

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As a result, consumers' previously muted preference for virtual care exploded. Use of telehealth increased by 2,980% in the early months of the pandemic. Certainly, fear of catching the virus and reduced in-person operations by providers prompted much of the rise in virtual care in the first months as communities issued stay-at-home orders. However, as fears have subsided and operations began returning to normalcy, use of virtual care services remains elevated, especially for behavioral health. In fact, as of October 2020, virtual care sessions still accounted for [41 percent](#) of all behavioral health visits.

Drivers of Adoption of Virtual Care for Behavioral Health



Greater Accessibility and Convenience. Virtual care delivered online or by telephone can make health services available to more people – especially those who live in rural or underserved communities, have limited transportation options, or cannot make appointments outside of normal office hours.



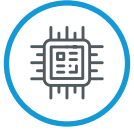
Improved Patient Engagement. New technologies are making patient outreach easier – whether it is simply tracking members, or automated reminders and monitoring, in-app or online scheduling, and remote consultations, access to more continuous and coordinated care is easier.



Reduced Stigma. Despite progress having been made to reduce stigma around seeking behavioral healthcare, it still remains a barrier for many. Virtual care allows people to seek help in the privacy of their homes.



Better Technology. Next-generation data-sharing and interoperability, widespread use of personal health technology that is integrated with care delivery, and patient-generated data that is integrated into electronic health records should allow easier access to patient information and decision-making for providers.



Improved Data Science. Artificial Intelligence-enabled systems can search for patterns in health care utilization and connect the dots to identify undiagnosed underlying conditions – such as depression, anxiety or substance use disorder – that can cause or exacerbate chronic disease. Data collection and analysis can also highlight best practices and opportunities for improvement, allowing health plans and providers to provide better, more personalized care.



Clearer and Increased Reimbursement. In March 2020, the CARES Act [waived CMS requirements](#) for video technology for certain telehealth services, which allowed for telephone evaluation and management services, behavioral health counseling, and educational services. The act also expanded the types of healthcare professionals approved to furnish virtual care services to include all practitioners eligible to bill Medicare. As of December 1, 2020, CMS made these changes permanent. In March 2021, the US House of Representatives introduced the Ensuring Parity in MA and PACE for Audio-Only Telehealth Act of 2021 (H.R. 2166). The bill would allow for audio-only telehealth services to count toward Medicare Advantage risk adjustment, further improving access to care for a vulnerable population.

Common Behavioral Health Engagement Challenges and Virtual Care Solutions

A [2020 report](#)¹ showed 63% of respondents reported some level of anxiety or depression, and 25% reported with issues with substance use. And with the behavioral health crisis in the United States intensified by COVID-19 – with the prevalence of these conditions is [estimated to rise by 50%](#)² by the end of the year – the need for care is only going to increase.


The behavioral health crisis is further complicated by the fact that behavioral health issues and chronic disease often co-mingle. One [study](#) showed 68% of people with a mental health issue also had chronic medical conditions and conversely, people with chronic illnesses were twice as likely to experience a behavioral health problem.

Unfortunately, getting people into treatment for behavioral health issues can be a challenge. To start, behavioral health conditions are often undiagnosed or undertreated. A majority of Americans – about [60 percent](#) – only seek primary care, so providers may only treat the physical issues without identifying behavioral health problems that can contribute to or even cause those issues.

Even when the behavioral health condition is diagnosed, people may still face barriers to getting the care they need.

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Cost is the number one barrier to care in the U.S. Even with insurance coverage, restrictions on services covered, co-payments, and lack of access to in-network providers can make treatment unaffordable. The [America's Mental Health 2018](#) report found 42% of the population cited cost as the top barrier to care and 25% reported having to choose between behavioral health treatment and other daily costs.

The same report found that nearly one-third of Americans worry about social stigma attached to seeking behavioral health care. As a result, some people don't seek treatment because they are embarrassed or have family or cultural taboos against behavioral healthcare.

Lack of access, inconvenience, barriers related to social risks, and previous negative experiences also present barriers to getting needed care. Long wait times for appointments are understandably off-putting and lack of transportation or nearby providers are difficult challenges to overcome for many. Minorities in particular may have had prior negative experiences with the health care system in general

and may be reluctant to place their trust in a new provider. And in terms of using virtual care support alone, for the 21 million people in the U.S., including nearly a third of people in rural communities who don't have high-speed internet access, online-only support tools are not an option.

Certainly, virtual care technologies such as self-guided app-based programs and online or telephone visits provide a channel that can address several barriers to behavioral healthcare, particularly access, stigma and a need for privacy, and cost. However, virtual care technologies alone are far from addressing all barriers. For the small but costly portion of the population with unaddressed behavioral health issues and chronic medical comorbidities, a whole-person, personalized care approach that builds trust and focuses on member-perceived needs is vital to producing sustainable behavior change and durable outcomes.

Ontrak's Solution

While preference for virtual care for behavioral health treatment is increasing – and health plans are investing in telehealth technologies to better engage with members and overcome some barriers to care – virtual care alone is just a channel. Driving true behavior change and better health outcomes requires a **persistent, high-touch, whole-person approach**. This is particularly true of the small population with unaddressed behavioral health issues and co-morbid conditions. This group accounts for roughly 5% of a health plan's population yet drives nearly half of all costs, primarily resulting from high-cost crisis care including emergency department and inpatient admissions. At the same time, finding and helping this population offers a significantly higher cost savings opportunity compared to low-acuity populations and could result in medical cost savings to health plans of 40% or more.

A common challenge for health plans is that these members can be difficult to identify because the underlying behavioral condition is often undiagnosed, they may not be seeking care, or they may face other barriers that prevent them from getting the help that they need. And with many competing needs and challenges, continued engagement of this group can be difficult. These members require a high-touch, multi-channel, whole-person approach to overcome barriers, develop self-efficacy and help them see behavioral health support as a core health need.

The Ontrak solution combines the benefits of high-touch support from dedicated care coaches and nutrition specialists with virtual or in-person behavioral health provider visits, who together work to address the underlying behavioral issues and personalize each member's journey to better health.



Identify: Find the Hidden High-Acuity, High-Cost Members

Ontrak leverages proprietary predictive algorithms to analyze claims and other data to identify health plan members with unaddressed behavioral health conditions - even absent a diagnosis - and co-existing chronic disease who could benefit from a personalized behavior change program that connects them to needed behavioral health services. This population has high impactable costs (i.e. high avoidable utilization) that could be significantly reduced with the right approach.





Engage: Meeting Members Where They Are

Trained member engagement specialists establish trust through persistent outreach focused on what matters most to each person. They live by the mantra that “What matters to the member is more important than what’s the matter with the member.” To do this, they use evidence-based techniques such as asking open-ended questions and listen for key words that may indicate a need even if it isn’t articulated directly. Once enrolled in the program, dedicated care coaches screen for barriers related to social risks and work together with the member to triage issues and deal with the most pressing matters first.



Treat: Caring for the Whole Person

Once members enroll in the Ontrak program, which lasts up to 52 weeks, they work with their care coach to identify and prioritize their health goals. Care coaches help members navigate the health system while building skills and improving health literacy, with the end goal of developing self-efficacy. They work together to develop a plan and plot a course for care, which includes connecting members to licensed therapists and psychiatrists in the health plan’s network to provide treatment for their behavioral health needs. Care coaches can also identify and connect members with community resources and support to address social determinants of health such as arranging transportation, addressing housing or food insecurity, economic challenges, or language or literacy issues.



Activate: A Whole-Person Approach Empowers Members to Take Charge of Their Health

Ontrak’s whole-person approach has been shown to generate engagement twice as high as approaches focused on only care management, and has lasting effects that have been shown to be durable 2+ years after graduating from the program. That includes sustainable behavioral and lifestyle changes to support better health, resolution of social and personal barriers to care, improved engagement with both the health plan and primary care providers, and greater use of preventive care.

At the same time, health plans that partner with Ontrak have seen medical cost savings as high as 50% for these members, driven by reduced utilization of emergency department or in-patient hospital stays, as these members no longer wait until they experience a medical crisis to seek care.



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The population needs personalized, persistent engagement if they are to get the help that they desperately need. Targeting this small group of people can have a huge impact on health care spending while bringing relief to those who are suffering.

Apps and technology solutions serve as an important channel to facilitate and complement Ontrak's unique engagement methodology and personalized interventions. However, telehealth and other digital only solutions on their own are just another channel and are not sufficient to drive durable behavior change and outcomes for complex populations with unaddressed behavioral health conditions and chronic medical comorbidities.

The key to successful identification, relationship building and engagement with this difficult-to-reach population is advanced predictive analytics combined with a high-touch, multi-channel, whole-person approach that builds trust and addresses both physical and behavioral health, social determinants of health, and other barriers such as stigma and lack of trust in the system. By connecting this population with care coaches who can earn their trust and offer guidance, encouragement, and connections to treatment, vulnerable members can reach a place of better health, self-efficacy, and improved well-being.

About Ontrak

Ontrak, Inc. is a leading AI and telehealth enabled behavioral healthcare company whose mission is to help improve the health and save the lives of as many people as possible. Leveraging advanced analytics and human interaction, Ontrak identifies, engages, treats, and activates individuals with unaddressed behavioral conditions that cause or exacerbate chronic medical conditions, delivering improved member health and validated, durable outcomes and savings. Ontrak solutions are available to members of leading national and regional health plans.

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