The par⊧cipants were invited via email to take the online survey and all responses were collected anonymously. Providers who completed the survey were given a $5 Amazon.com gift card for their participation. The content validity of the questionnaire was checked and deemed adequate, and the reliability was calculated using Cronbach’s alpha coefficient (α = 0.89).

## Methods

Non-physician mental and behavioral providers in the Mid-Atlantic region using the SimplePractice EHR in January 2019 provided informed consent to par⊧cipate in an online survey conducted using SurveyMonkey™. The survey included items aimed to measure the following top-ic:

- Current telehealth usage
- Perceived competency and efficiency providing telehealth services
- Barriers to using telehealth
- General provider attitudes toward telehealth

The participants were invited via email to take the online survey and all responses were collected anonymously. Providers who completed the survey were given a $5 Amazon.com gift card for their participation. The content validity of the questionnaire was checked and deemed adequate, and the reliability was calculated using Cronbach’s alpha coefficient (α = 0.89).

In total, 653 clinicians completed the questionnaire, and the response rate was 39%. Slightly less than half (49%, n=322) were currently using telehealth for some or all appointments. More than half (54%, n=172) of users reported that colleagues were their primary source of telehealth knowledge.

The most frequent barriers to usage for current telehealth users were lack of insurance reimbursement (59%, n=164), lack of community/dent acceptance of telehealth (n=192), and insufficient bandwidth speeds (n=80). Lack of insurance reimbursement was also the most frequent barrier cited by nonusers (39%, n=130), however nonusers also reported that clinical effective-
ness (n=130) and privacy/security concerns (n=119) were barriers to usage.

As the most frequently cited barrier to providing telehealth services in both current users and nonusers of telehealth was lack of insurance reimbursement, support for legislation that makes it easier for providers accept insurance when conducting telehealth sessions is imperative.

More robust and easily accessible education will likely increase the rate of claims successfully paid to providers who do bill commercial and/or government insurance.

Internet bandwidth speeds were also frequently reported as a barrier to telehealth usage even amongst current telehealth users. While federal grants have started to address this problem in rural areas, lack of access to high-speed internet remains a significant problem that disproportionately affects people living in rural communities.

Future training of pre-licensed and licensed clinicians should focus on using telehealth to achieve improved outcomes. Programs that highlight how to incorporate other electronic tools into telehealth practice and how to develop optimal workflows will likely increase uptake of telehealth usage and confidence in practice.

## Results

### Figure 1: Where clinicians get their knowledge on telehealth

<table>
<thead>
<tr>
<th>Source</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colleagues</td>
<td>39%</td>
</tr>
<tr>
<td>Conference/Book/Other</td>
<td>31%</td>
</tr>
<tr>
<td>Training/Workplace Education</td>
<td>23%</td>
</tr>
<tr>
<td>Internet/Website/Other</td>
<td>7%</td>
</tr>
</tbody>
</table>

### Figure 2: Reported barriers to telehealth usage by telehealth users and non-users

<table>
<thead>
<tr>
<th>Barriers</th>
<th>Non Users</th>
<th>Users</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of reimbursement</td>
<td>39%</td>
<td>19%</td>
</tr>
<tr>
<td>Current effectively provides mental care</td>
<td>39%</td>
<td>18%</td>
</tr>
<tr>
<td>Concerns re: privacy</td>
<td>18%</td>
<td>16%</td>
</tr>
<tr>
<td>I am not comfortable telephoning</td>
<td>10%</td>
<td>10%</td>
</tr>
<tr>
<td>Inability to connect to internet</td>
<td>1%</td>
<td>8%</td>
</tr>
<tr>
<td>Lack of client acceptance</td>
<td>1%</td>
<td>3%</td>
</tr>
</tbody>
</table>

## Implications

- As the most frequently cited barrier to providing telehealth services in both current users and nonusers of telehealth was lack of insurance reimbursement, support for legislation that makes it easier for providers accept insurance when conducting telehealth sessions is imperative.
- More robust and easily accessible education will likely increase the rate of claims successfully paid to providers who do bill commercial and/or government insurance.
- Internet bandwidth speeds were also frequently reported as a barrier to telehealth usage even amongst current telehealth users. While federal grants have started to address this problem in rural areas, lack of access to high-speed internet remains a significant problem that disproportionately affects people living in rural communities.
- Future training of pre-licensed and licensed clinicians should focus on using telehealth to achieve improved outcomes. Programs that highlight how to incorporate other electronic tools into telehealth practice and how to develop optimal workflows will likely increase uptake of telehealth usage and confidence in practice.

## Limitations

- This study used a convenience sample comprised of SimplePractice EHR customers. This non-probability sample is considered a source of bias.
- This convenience sample selected for par⊧cipants who were already using technology in the form of an EHR, meaning that some practitioners who have not yet embraced technology in general may have significantly different perspectives of telehealth usage.
- This study is limited to the Mid-Atlantic region of the United States, as defined by the Office of Rural Health Policy. Regional limitations of the study findings must be considered.

## References


## Contact Information

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