

The Honorable Rod Blagojevich  
Governor of Illinois  
James R. Thompson Center, Floor 16  
100 W. Randolph Street  
Chicago, IL 60601

Dear Governor Blagojevich:

I am writing on behalf of the Illinois Psychiatric Society (IPS). We have introduced SB6, a bill that would require Medicaid to reimburse psychiatrists for providing treatment to patients through telepsychiatry. Telepsychiatry is performed, via videoconferencing, by having a patient at one location evaluated, diagnosed and/or treated by a psychiatrist at a separate location. We introduced this bill in conjunction with the Illinois Hospital Association and the Illinois Chapter of NAMI. The bill's chief sponsor, in the Senate, was Senator Deanna Demuzio, and the co-sponsors were: Gary Forby, John M. Sullivan, Michael W. Frerichs, David Koehler, M. Maggie Crotty, Kimberly A. Lightford and Pamela J. Althoff. The same bill was also introduced in the House by the Chief Sponsor Patti Bellock and her co-sponsors were: John E. Bradley, Elizabeth Coulson, Naomi D. Jakobsson, Jack D. Franks, Mike Boland, Jack McGuire, David Reis, Bill Mitchell, Ron Stephens, Chapin Rose, Roger L. Eddy, Jim Watson, Michael Tryon, and Kathleen A. Ryg. Both bills received unanimous support from the legislators.

The bill is a measure to address the very urgent issue of improving access to psychiatric care throughout the state of Illinois. Telepsychiatry was one of five solutions recommended by the Joint Task Force on Rural Health and Medically Underserved Areas in their report released on February 27, 2007.

Nationally, suicide is the leading cause of death for adolescents and young adults and over 90 % of youths committing suicide have experienced a mental disorder. Further, rural teens and rural older adults have a much higher rate of suicide than do their urban peers, and many of these suicides could be prevented through treatment. Unfortunately, individuals with mental illness in rural areas are much less likely to have access to the mental health services they need. Currently, fifty out of 102 counties in Illinois do not have any psychiatrist. Further, 84 out of 102 counties do not have a child or adolescent psychiatrist.

We want to make sure that mentally ill patients receive the best medical and psychiatric care from those who are trained to do so. Studies have shown that patients respond very well to diagnosis and treatment through telepsychiatry. Telepsychiatry is already being used successfully in the Illinois Department of Corrections and at Southern Illinois University in the Department of Psychiatry for use with children and adolescents. In fact, adolescents prefer telepsychiatry to in-person visits.

Telepsychiatry would also be useful for mentally ill patients with special needs issues including, but not limited to: deafness; limited hearing; blindness; patients that speak only a language other than English; physical disabilities; and developmental disabilities. Telepsychiatry services would also provide cost-efficient mental health care to those either in underserved areas or those who do not have access to providers with specialized skills such as sign language or foreign language skills. In addition, telepsychiatry services could be used in schools to assess and diagnose children for mental illnesses that may impact their learning skills and behavioral issues.

The Illinois Psychiatric Society is committed to taking a pro-active approach to ensuring that people with mental illness have access to psychiatric services throughout the state of Illinois and to protecting patient safety. Please feel free to contact me at [insert preferred number] for further information regarding telepsychiatry and SB6.

Sincerely,

Daniel Anzia, M.D.  
President, Illinois Psychiatric Society