The Coronavirus Is Keeping Addiction Counselors From Their Patients. So The Industry Has Transformed.

"Our experience is this works. We are not waiting for this COVID thing to pass over. We are doing the work."

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No one gets turned away. That was the principle for Options Recovery Services, a Bay Area addiction treatment network: If you showed up asking for help, you got it.

But when the coronavirus pandemic caused a nationwide shutdown, addiction and mental health practitioners scrambled to find a way to keep treating patients. They faced a terrible choice. Taking people into outpatient centers put staff and people already in treatment at a greater risk of infection. But turning them away can mean leaving people to battle their addictions without help.

Many of Options Recovery Services’ walk-ins are people recently released from jail or psychiatric institutions. Overdose deaths have drastically increased in the Bay Area in recent years with the rise of fentanyl.
“If we turn them away we may be picking how they die,” said Tom Gorham, executive director of Options’ drug treatment program. “I’m not going there.”

Gorham decided to keep the doors open despite the coronavirus pandemic. It’s personal for him. Alcohol once led him to a life of crime and homelessness. One day when he was in jail he met Davida Coady, the founder of Options Recovery Services. He got clean and made helping others his life’s work. He’d end up marrying Coady.

But the decision to keep taking in patients off the street did not initially go over well with staff, who were afraid for their safety. “It was very unpopular at first,” Gorham said. They talked through it and after instituting a slew of safety measures — social distancing, temperature checks, face masks, frequent hand-washing — kept the doors open. Staff were told that they were not required to physically come to work, but Gorham said everyone has.

So far there have been no infections among the roughly 120 patients being housed.

“They are very, very grateful and they’re letting us know,” said Gorham. “A lot of people come from traumatic backgrounds. They’ve never seen this kind of love and caring in their entire life and they’re overwhelmed. So that’s really beautiful that this moment has created this opportunity, in a way, for them to really redefine their lives like we’re all basically doing.”

Elsewhere, centers have closed physically but kept operating by moving to Skype and Zoom and other streaming platforms. Addiction professionals across the country told BuzzFeed News that they first scrambled to adapt to the outbreak, but have ended up having lots of uptake for their new remote services.

“We’ve kind of had to reinvent ourselves over the past six weeks,” said Gerry Schmidt of Valley HealthCare System in Morgantown, West Virginia. It’s a large, comprehensive network with about 370 employees over 18 sites. Almost all of their outpatient services have been converted to telehealth — video or phone calls. They’ve maintained some limited in-person services such as patients coming for blood draws or injections.

But what about people who don’t have the technology at home for telehealth? Valley HealthCare has set up computers at their sites so that people can come in and videoconference with a clinician in another room. There have been challenges, such as getting enough personal protection equipment, but Shmidt said overall the transformation has been incredibly successful.

“I’m amazed at how resilient our clients are,” said Schmidt. “They’ve been really receptive of it, as have our clinicians.”

It is by no means a perfect solution for everyone. For people treating substance abuse and mental health disorders, much of what they look for is nonverbal. It’s harder to get a sense of how stable a patient is from a little box on a screen, especially in group settings. Things like smelling for drugs or alcohol can be extremely useful and are obviously impossible remotely.

“I have a couple patients that are anorexic and I typically weigh them in the office,” said Malcolm Horn. “When I see them face to face I can see hey, you look a little thin. I can’t do that with telehealth. I see them from the shoulders up.”

Horn runs a team of mental health counselors at the Rimrock Foundation in Billings, Montana. She’s already been doing telehealth for five or six years because many of their clients live in rural areas. She calls group meetings the first line of defense against substance abuse, but said that some of their patients opted out until face-to-face is possible again. “Is it better than nothing? Yes,” she said. “Is it what I would prefer to do? No.”

The industry had been moving toward telehealth for years, but it was slowed by a variety of technical and regulatory hurdles. There were privacy concerns and restrictions on what videoconference technology could be used. There were jurisdictional issues around treating someone in a different state, and concerns about fraud. But at the drop of a hat, coronavirus changed everything.

The Center for Medicaid and Medicare Services quickly moved to relax its restrictions. Billing insurance companies for telehealth services has also been opened up. The Association for Behavioral Health and Wellness, which represents payers, said its members are all covering telehealth services now.

There is also a feeling among many that there is no going back — the outbreak has permanently changed the industry. Turning Point Counseling Services in Fairbanks, Alaska, was seeing 400 patient visits per week before the coronavirus. When a clinician got sick, they switched entirely to telemedicine. After going through the bumps of getting their whole practice online, they’ve now seen near-100% attendance for video sessions.
Ebbeson says telehealth has "completely changed the landscape of what’s possible" in terms of providing addiction and mental health services to far more people. That’s something that could soon become necessary. Every clinician quoted in this story said they expect the conditions caused by the coronavirus to lead to a rise in PTSD-type symptoms when this is over. People being stuck inside fearing for their health and stressed about losing their jobs is a societywide recipe for more substance abuse.

“This has been a public health disaster waiting to happen and here we are,” said Gorham. “We didn’t want to address it before, now here you go. It’s in our laps.”

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