

**Federal Office of Rural Health Policy (FORHP)
Office for the Advancement of Telehealth (OAT)**

**Evidence Based Tele-behavioral Health Network Program (EB THNP)
Substance Abuse Treatment Telehealth Network Grant Program (SAT TNGP)**

RTRC Data Elements

Brief description of Data Elements to be reported during measurement period. The tables are separated according to the Level column.

Domain	Data Elements for Measure	Description of Data Element	Level	Value
Access	1. Treatment group	Indicates whether the patient was in the telehealth group or the non-telehealth comparison group	Patient	Check one
ID	2. Treatment Site ID	An ID assigned to each treatment site	Patient	#
ID	3. Patient ID	An ID assigned to each patient that is converted to a non-linkable ID when data are submitted	Patient	#
Demographics	4. Age	The patient's age at intake	Patient	#
Demographics	5. Sex	The patient's sex	Patient	Check one
Demographics	6. Race	The patient's racial group	Patient	Check one
Demographics	7. Ethnicity	The patient's ethnic group	Patient	Check one
Cost savings/ effectiveness	8. Patient's insurance status	The type of insurance that the patient has at intake	Patient	Check one
Cost savings/ effectiveness	9. Patient travel miles to the initial planned place of behavioral health services	Miles from the patient's location to where the patient plans to receive behavioral health services	Patient	#
Cost savings/ effectiveness	10. Patient travel time to the initial planned place of behavioral health services	Travel time from the patient's location to where the patient plans to receive behavioral health services	Patient	#
Cost savings/ effectiveness	11. Patient travel miles to next likely source of behavioral health services	Miles from the patient's location to the next likely source of behavioral health services if the planned place of services was not available	Patient	#
Cost savings/ effectiveness	12. Patient travel time to next likely source of	Travel time from the patient's location to the next likely source	Patient	#

	behavioral health services	of behavioral health services if the planned place of services was not available		
Cost savings/ effectiveness	13. Patient likelihood of using next source of behavioral health services	The patient's likelihood of using next source of care for type of service delivered	Patient	Check one

Commented [MKAS1]: Likelihood will be determined as one of the following: Minimal; Some; Moderate; Great.

Domain	Data Elements for Measure	Description of Data Element	Level	Value
Clinical outcomes	14. Assessment instrument administration timing	The number of weeks since the initiation of the treatment when the assessment instrument(s) were re-administered	Intake + Repeat	#
Clinical outcomes	15. Patient-Reported Outcomes Measurement Information System (PROMIS) Global Health – Mental Health score (component)	Use the PROMIS to track patient functioning scores (mental health component)	Intake + Repeat	Scale score
Clinical outcomes	16. PROMIS Global Health – Physical Health score (component)	Use the PROMIS to track patient functioning scores (physical health component)	Intake + Repeat	Scale score
Clinical outcomes	17. PROMIS Global Health score (total)	Use the PROMIS to track patient functioning scores (total global health score)	Intake + Repeat	Scale score
Clinical outcomes	18. Patient Health Questionnaire 9-item (PHQ-9) depression symptoms score	Use the PHQ-9 to assess depression symptoms	Intake + Repeat	Scale score
Clinical outcomes	19. Generalized Anxiety Disorder 7-item (GAD-7) generalized anxiety symptoms score	Use the GAD-7 to assess anxiety symptoms	Intake + Repeat	Scale score
Clinical outcomes	20. Drug Use Disorders Identification Test – Clinical utility (DUDIT-C) substance use severity score	Use the DUDIT-C to assess substance use severity	Intake + Repeat	Scale score

Domain	Data Elements for Measure	Description of Data Element	Level	Value
Access	21. Treatment type	Whether encounter was planned for telehealth or non-telehealth services	Encounter	Check one
Access	22. Timing of encounter	Number of days since first treatment encounter	Encounter	#

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Access	23. Therapy scheduling success	Whether or not scheduled session was completed	Encounter	Check one
Access	24. Provider type	Type of provider/clinician seen for behavioral health services during this encounter	Encounter	Check one
Clinical outcomes	25. Patient's behavioral health diagnosis	The ICD-10 code(s) associated with the diagnosis established to be chiefly responsible for the behavioral health services	Encounter	#
Access & Cost savings/ effectiveness	26. Treatment service type	CPT code for each encounter	Encounter	Check one
Clinical outcomes	27. Disposition recommendation	Indicates the provider's recommended disposition for the patient at the end of the encounter	Encounter	Check one
Cost savings/ effectiveness	28. Treatment billing	Indicates whether or not the behavioral health services encounter was billed to insurance	Encounter	Check one

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0906-XXXX-NEW. Public reporting burden for this collection of information is estimated to average 14 hours per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including

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suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N136B, Rockville, Maryland, 20857.