



# NORTH CAROLINA

STATEWIDE TELEPSYCHIATRY PROGRAM

## Quarterly Progress Update

**Sy Atezaz Saeed, MD, MS, FACPpsych,**  
*Executive Director*

North Carolina Statewide Telepsychiatry Program (NC-STeP)

*Professor and Chair Emeritus*

Department of Psychiatry and Behavioral Medicine  
Brody School of Medicine - East Carolina University





**NORTH CAROLINA**  
STATEWIDE TELEPSYCHIATRY PROGRAM

**NC-STeP Advisory Council Meeting**  
Wednesday, November 29, 2023  
10:30 am – 12:00 pm  
Virtual Meeting via Zoom Video Conference

**Agenda**

- |                   |  |
|-------------------|--|
| 10:30- 10:40 a.m. | Welcome and Introductions                      |
| 10:40- 10:45 a.m. | Review and Approval of August 28, 2023 Minutes |
| 10:45- 11:45 a.m. | NC-STeP FY24-Q1 (Jul-Sep) Performance Data     |
| 11:45- 11:50 a.m. | Old Business                                   |
| 11:50- 11:55 a.m. | New Business                                   |
| 11:55- 12:00 p.m. | Announcements                                  |
| 12:00 p.m.        | Adjourn  |



**Join Zoom Meeting**

<https://us06web.zoom.us/j/88462582831?pwd=NFAKQ9bKFurU9TC7sYmLn0KUQTCobY.1>

Meeting ID: 884 6258 2831

Passcode: 505481



# Advisory Council

1. **Teresa Bowleg, MSN, RN**  
Chief Nursing Officer, Erlanger Murphy Medical Center
2. **Scott W. Brown, MD, FACEP**  
NCCEP Board of Directors/ Harnett Heath System
3. **John Bigger**  
Corporate Director of Behavioral Health, Cape Fear Valley Health
4. **Joy Futrell, MBA**  
Chief Executive Officer, Trillium Health Resources
5. **Katy Kranze**  
Executive Director, North Carolina Psychiatric Association
6. **Gary R. Maslow, MD,**  
Professor of Psychiatry and Behavioral Sciences, Duke Health
7. **Keith McCoy, MD**  
Deputy CMO for Behavioral Health and I/DD Community Systems, NC-DHHS
8. **Shakeerah McCoy, MSN,RN,PCCN**  
Director, Rural Health Innovation
9. **Sy Atezaz Saeed, MD, MS,**  
Professor and Chair Emeritus, Department of Psychiatry and Behavioral Medicine,  
ECU Brody School of Medicine  
Founding Executive Director, NC-SteP (*Chair*)
10. **Glenn M. Simpson, MBA, MA, NCC**  
Behavioral Health Service Line Administrator, ECU Health
11. **Ashley Stoop, MPH**  
Health Director, Albemarle Regional Health Services

## ***Ex Officio Members***

1. Ryan Baker, NC-SteP/ECU
2. Renee Clark, MSW, DHHS-ORH
3. Sheila Davies, Ph.D., NC-SteP/MedAccess Partners
4. Phil Donahue, NC-SteP/MedAccess Partners
5. Nick Galvez, DHHS-ORH
6. Katherine Jones, Ph.D., NC-SteP/ECU
7. Maggie Sauer, DHHS-ORH

# NC-STeP Quality Management and Outcomes Monitoring Processes: July – September 2023

- 29 hospitals were live
- 21 hospitals reporting Telepsychiatry patients in their ED
  - not all live hospitals had telepsychiatry patients
- Total number of assessments for this quarter = 1,139
- Total number of encounters for this quarter = 1,008



# NC-STeP Quality Management and Outcomes Monitoring Processes: July - September 2023

- The Median Length of Stay was 39.5 hours
- The Average Length of Stay was 71.0 hours
  - 63.5 hours for those discharged to home
  - 59.9 hours for those transferred to another facility
- Average Consult Elapsed Time (in Queue to Exam Complete) for Model 1 hospitals was 5 hours and 29 minutes.

# NC-STeP Quality Management and Outcomes Monitoring Processes: July - September 2023

- 771 ED patients who received telepsychiatry services had an IVC in place during their ED stay.
  - 311 (40.3%) of those patients did not have an IVC in place when discharged.
- Of the ED patients who received telepsychiatry services:
  - 46% were discharged to home
  - 40% were discharged to another facility

# NC-STeP Quality Management and Outcomes Monitoring Processes: July - September 2023

- 22 Community based sites were live as of 09/30/2023.
- 2,045 total behavioral health visits.
  - 173 visits with a Psychiatrist.
  - 1,872 visits with a behavioral health manager.



	Since project inception in November 2013	Quarter Jan- Mar 2023	Quarter Apr- Jun 2023	Quarter Jul- Sep 2023	Quarter Oct- Dec 2023
<b>Total Patient Encounters</b>	47,025	880	925	1,008	
<b>Model 1 Hospital Patient Encounters</b>	29,681	828	861	940	
<b>Model 2 Hospital Patient Encounters</b>	17,344	52	64	68	
<b>Total Number of Assessments</b> (Billed Assessments for Model 1 Hospitals + Number of Patient Encounters for Model 2 Hospitals)	60,403	1,027	1,019	1,139	





	Since project inception in November 2013	Quarter Jan- Mar 2022	Quarter Apr- Jun 2022	Quarter Jul- Sep 2022	Quarter Oct- Dec 2022
<b>Total Patient Encounters</b>	47,025	1,240	1,325	1,350	1,209
<b>Model 1 Hospital Patient Encounters</b>	29,681	802	873	894	759
<b>Model 2 Hospital Patient Encounters</b>	17,344	438	452	456	450
<b>Total Number of Assessments</b> (Billed Assessments for Model 1 Hospitals + Number of Patient Encounters for Model 2 Hospitals)	60,403	1,532	1,563	1,506	1,322

# NC-STeP Benchmarks



Goals	Values Reached		
Cumulative Target to be reached by (06/30/2024)	Value Reached as of most recent previous quarter (06/30/2023)	Value Reached as of this reporting quarter (09/30/2023)	Year-to-Date Total with % of the Yearly Target (09/30/2023)
<b>Number of IVCs</b>	2,229	695	771 34.6% of Yearly Target
<b>Number of IVCs Overturned</b>	1,113	303	311 28% of Yearly Target
<b>Total Number of Assessments</b> (Billed assessments for Model 1 hospitals + Number of patient encounters for Model 2 hospitals.)	3,400	1,019	1,139 33.5% of Yearly Target

# NC-STeP Status as of September 30, 2023

EVALUATION CRITERIA	BASELINE VALUES/MEASURES AS REPORTED ON 06/30/2023	TARGET TO BE REACHED BY 06/30/2024	VALUES/MEASURES REACHED AS OF 09/30/2023
1. The number of full-time equivalent (FTE) positions supported by these contracts	4.30 FTEs	5.30 FTEs	4.30 FTEs
2. The number of overturned involuntary commitments (inpatient admission prevented)	1,249	1,133	311 in this quarter Cumulative total since program inception 10,367
3. The number of participating consultant providers	23	20	23



# NC-STeP Status as of September 30, 2023

EVALUATION CRITERIA	BASELINE VALUES/MEASURES AS REPORTED ON 06/30/2023	TARGET TO BE REACHED BY 06/30/2024	VALUES/MEASURES REACHED AS OF 09/30/2023
4. The number of telepsychiatry assessments conducted.	4,824	3,400	1,139 in this quarter  Cumulative total since program inception 60,403
5. The number of telepsychiatry referring sites	30	29	29
6. The reports of involuntary commitments to enrolled hospitals	3,123	2,229	771 in this quarter  Cumulative total since program inception 28,644



# NC-STeP Status as of September 30, 2023

EVALUATION CRITERIA	BASELINE VALUES/MEASURES AS REPORTED ON 06/30/2023	TARGET TO BE REACHED BY 06/30/2024	VALUES/MEASURES REACHED AS OF 09/30/2023
7. The average (mean) Length of Stay for all patients with a primary mental health diagnosis across all dispositions.	61.0 hours	72.25 hours	QTD Average = 71.0 QTD Median = 39.5
8. Cumulative return on investment to state psychiatric facilities through overturned involuntary commitments. (inpatient admission prevented)	\$6,744,600	\$5,929,200	QTD = \$1,679,400 Project-to-date = \$55,927,800



# NC-STeP Status as of September 30, 2023

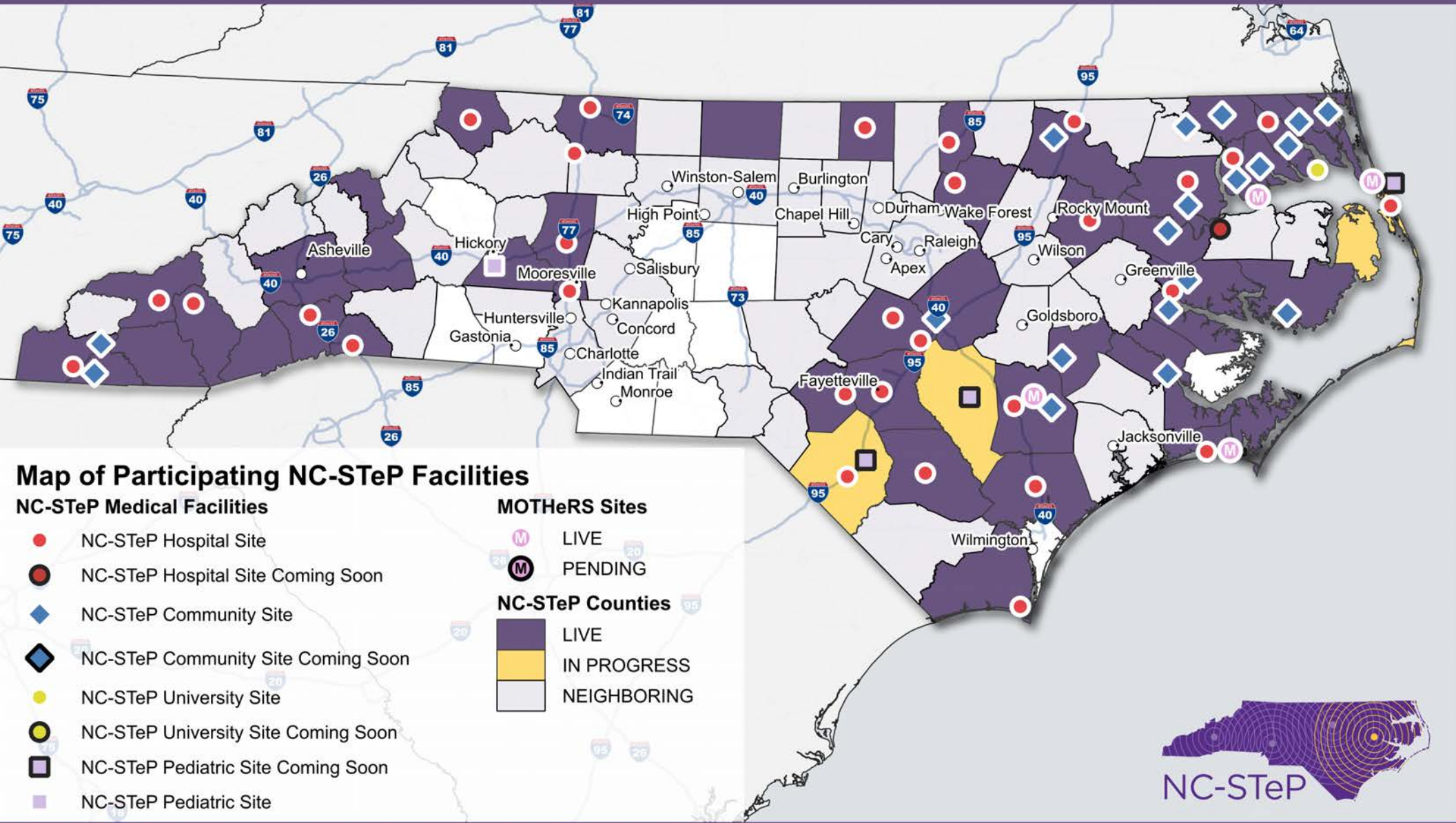
## COMMENTS/EXPLANATIONS:

Evaluation Criteria #2, #4, and #6:

PTD totals were adjusted upwards to include 15 assessments for 2023 Q3 Jan-Mar 23 and 34 for 2023 Q4 Apr-June 2023 that were submitted too late to be included in their respective reports, for an increase of 49 assessments, 29 IVCs and 10 overturned IVCs.

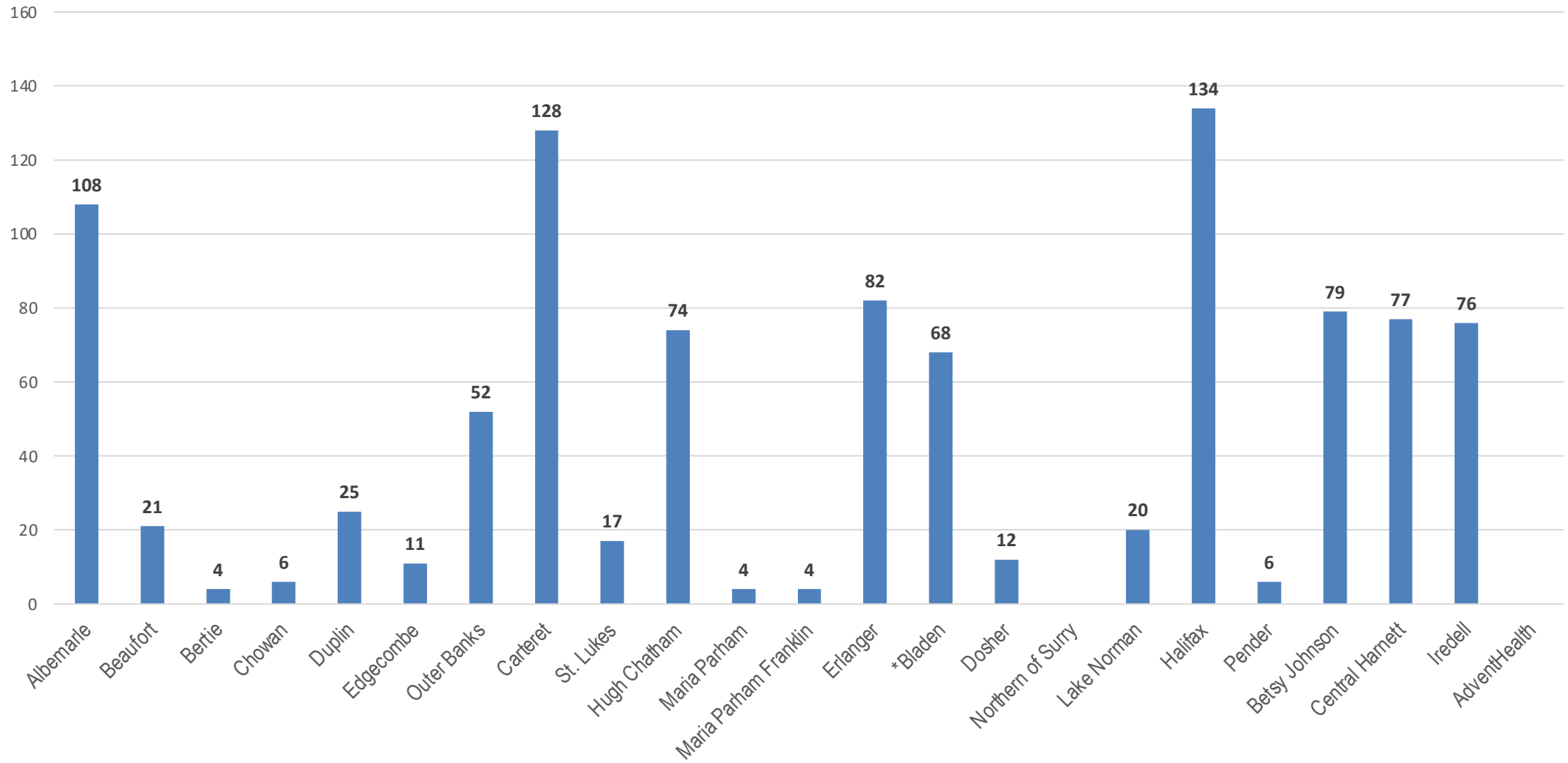


# NC-STeP Status as of September 30, 2023



# Number of NC-STeP Patients by Hospital

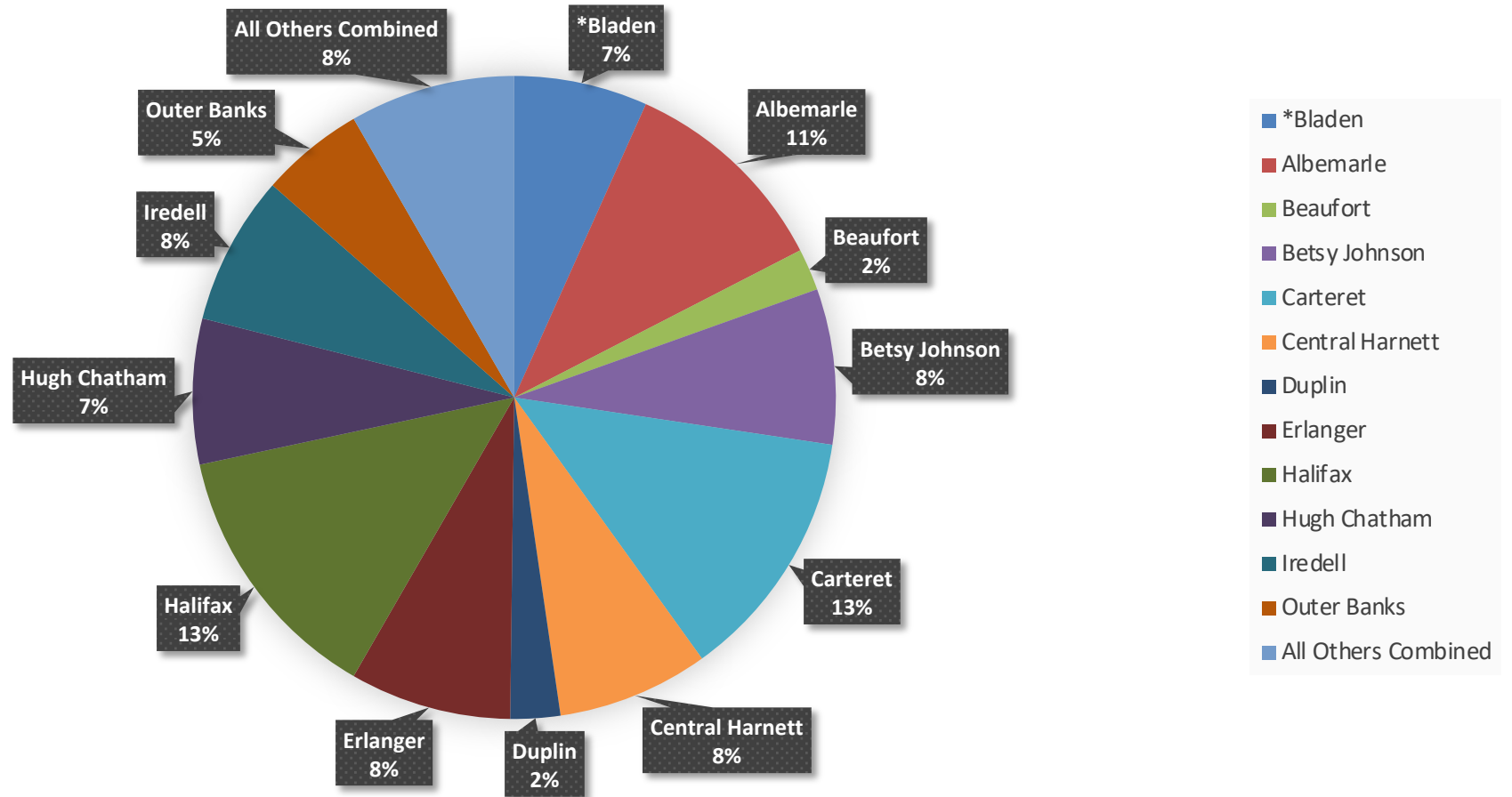
July - September 2023



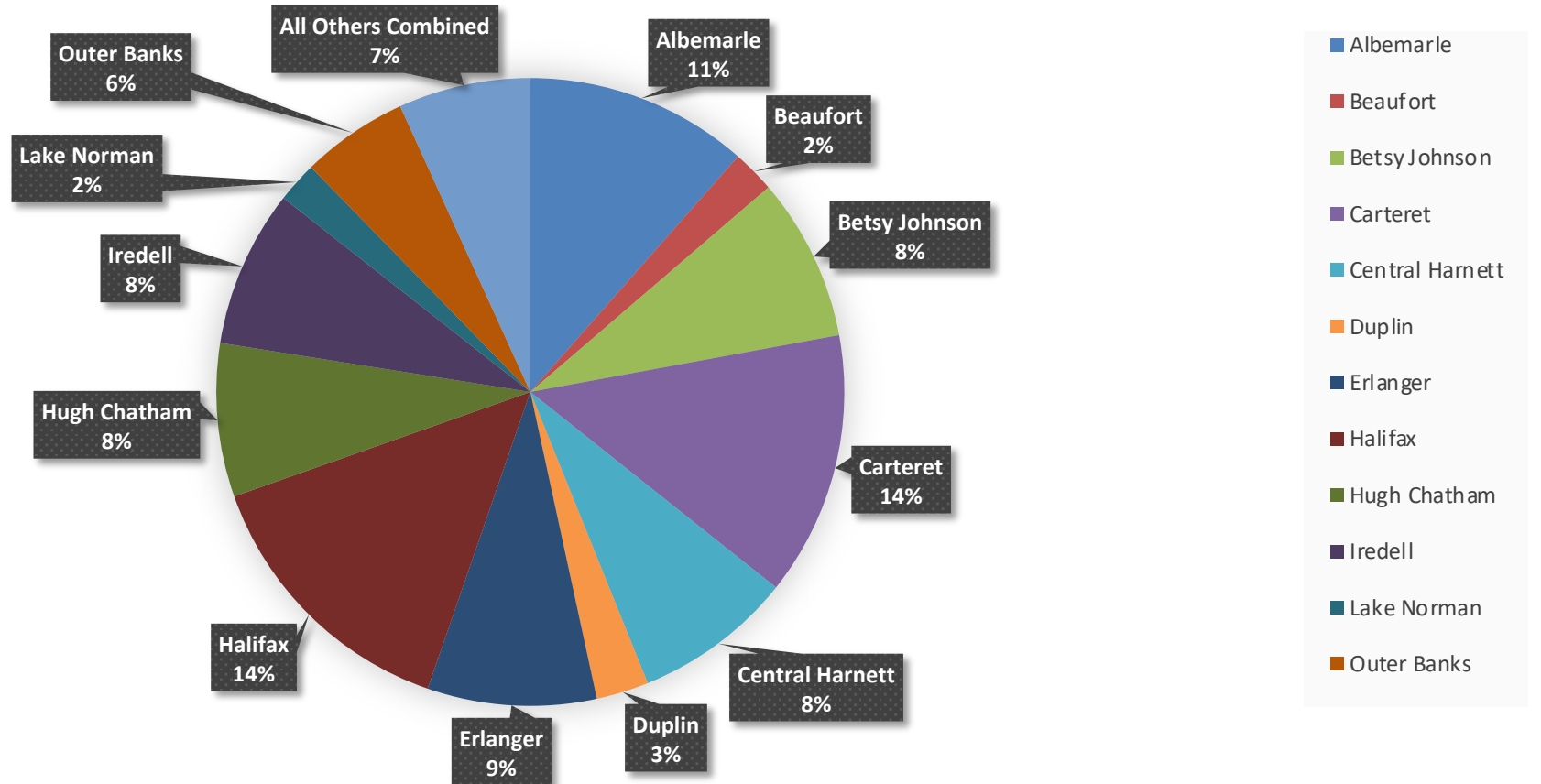


# Percent of Use by Hospital for Model 1 and Model 2 Jul - Sep 2023

(based on number of patients)

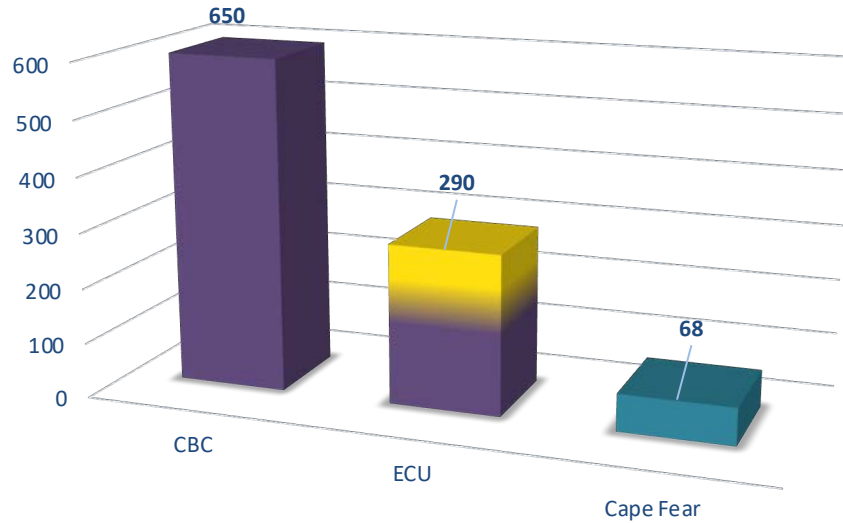


# Percent of Use by Hospital for Model 1 Jul - Sep 2023 (based on number of encounters)

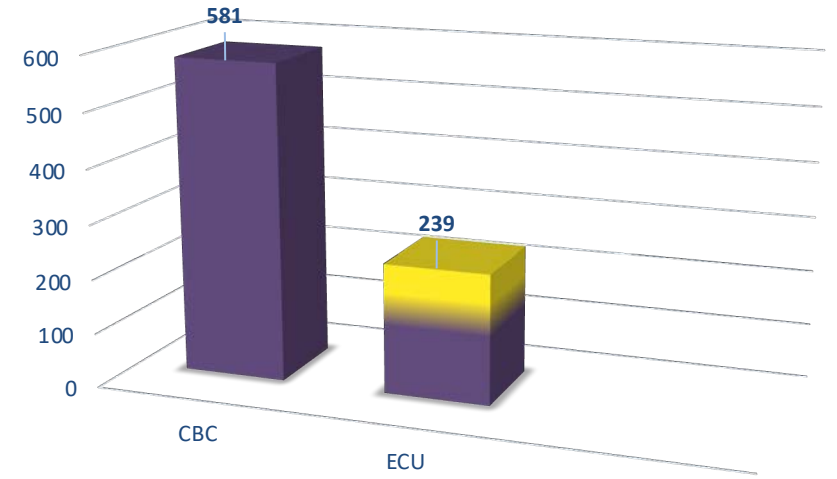


# Number of Patients by Provider (Model 1)

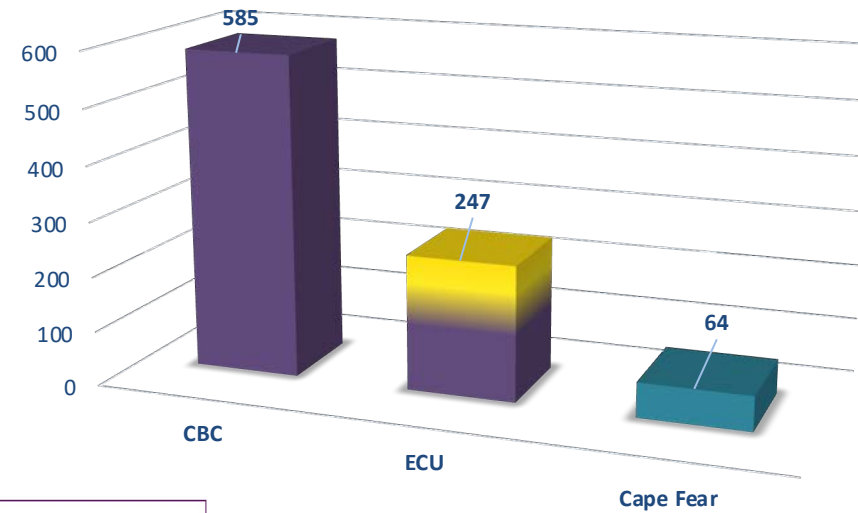
## Jul-Sep 2023



## Jan-Mar 2023

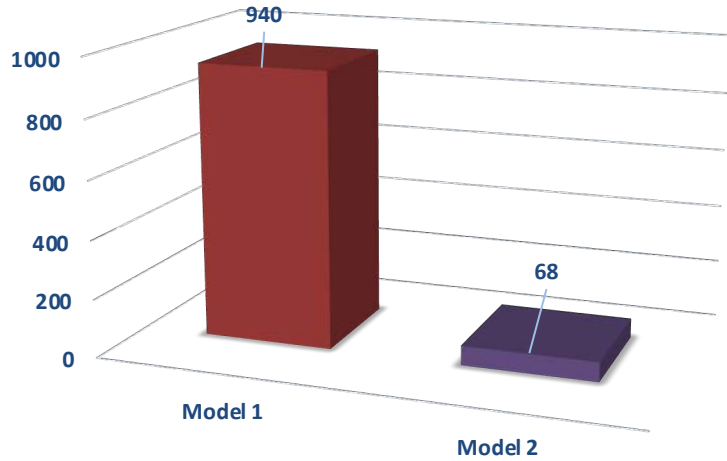


## Apr-Jun 2023

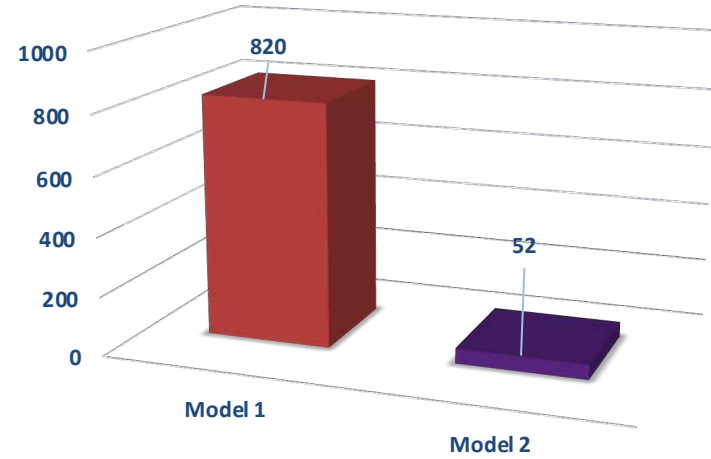


# Number of Patients by Model

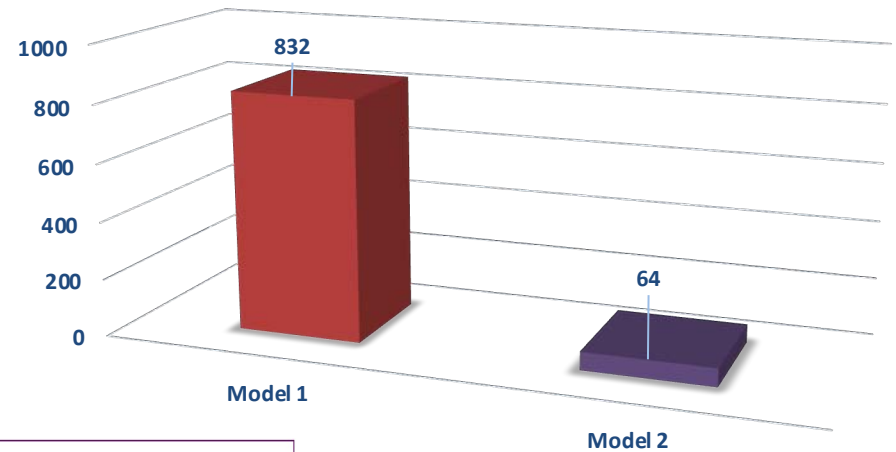
## Jul-Sep 2023



## Jan-Mar 2023

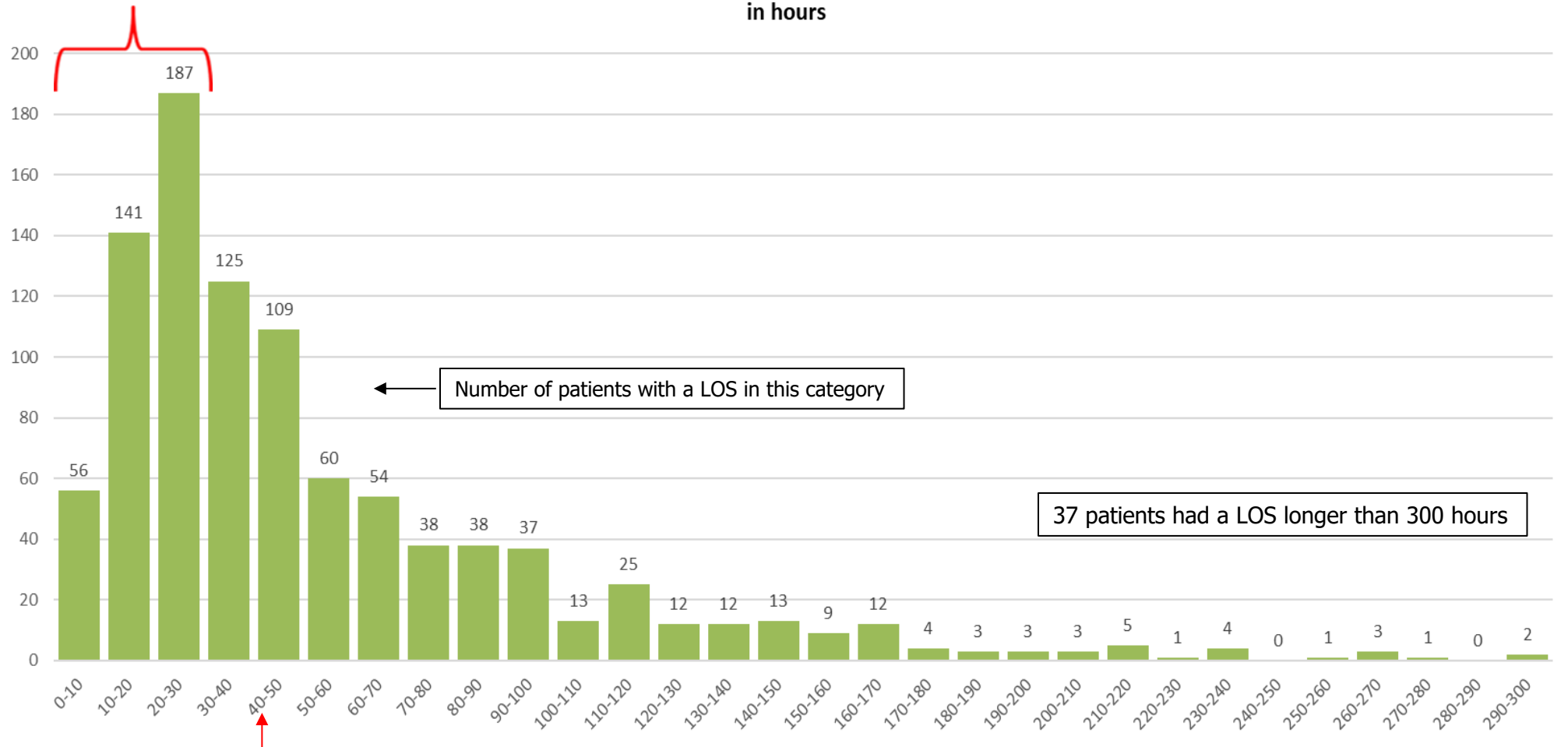


## Apr-Jun 2023



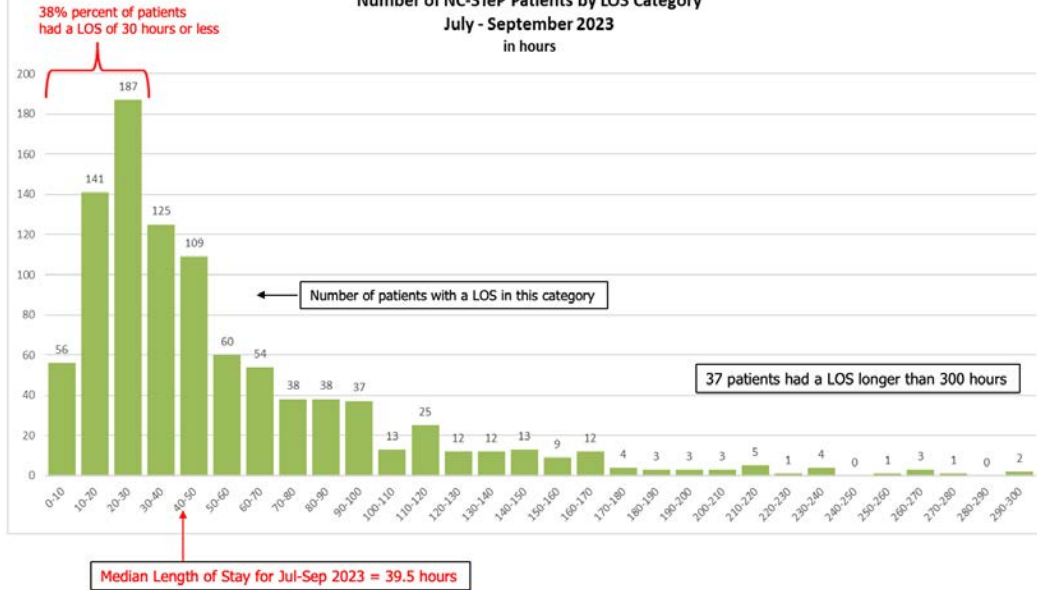
## Number of NC-STeP Patients by LOS Category July - September 2023 in hours

38% percent of patients  
had a LOS of 30 hours or less

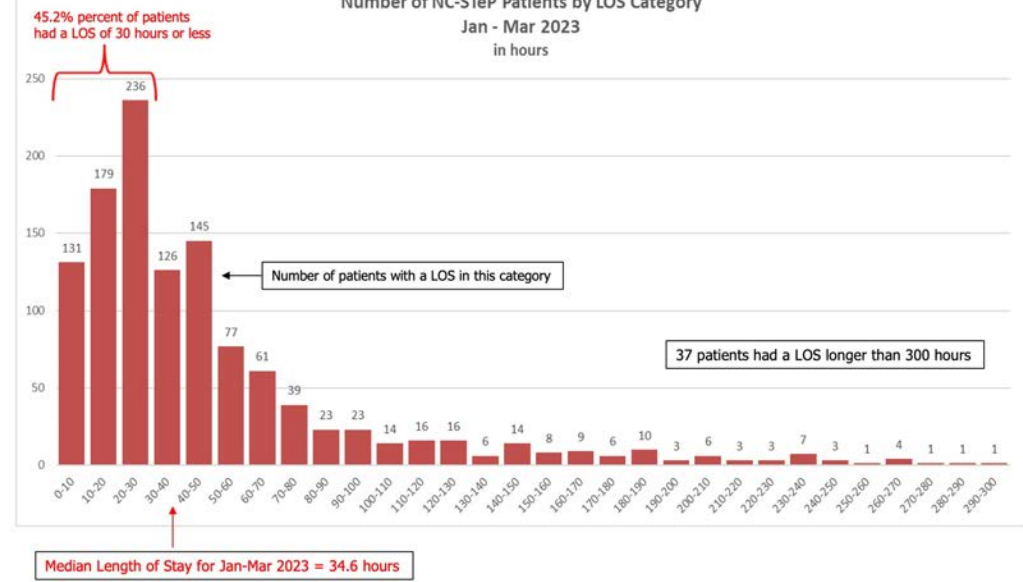


Median Length of Stay for Jul-Sep 2023 = 39.5 hours

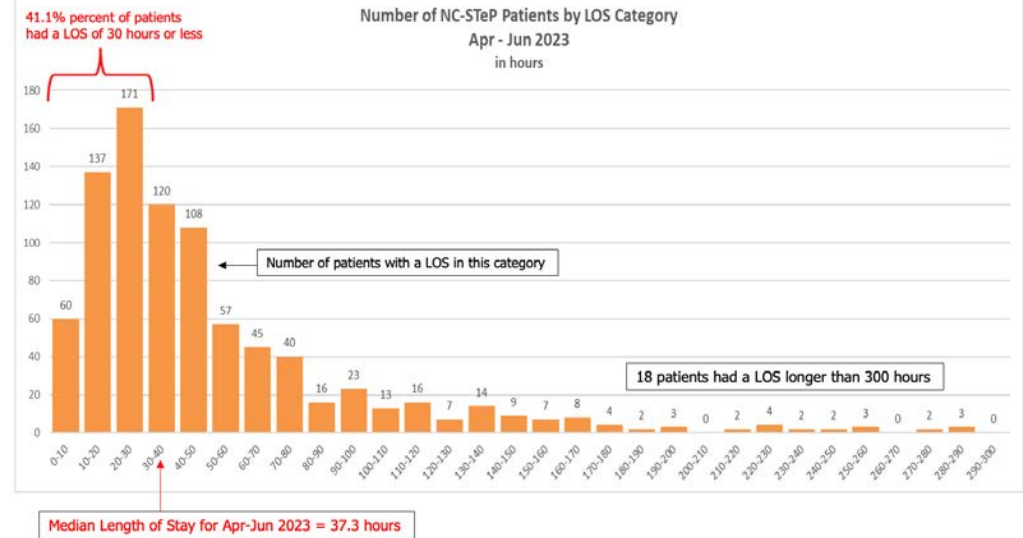
**Number of NC-STeP Patients by LOS Category  
July - September 2023**  
in hours



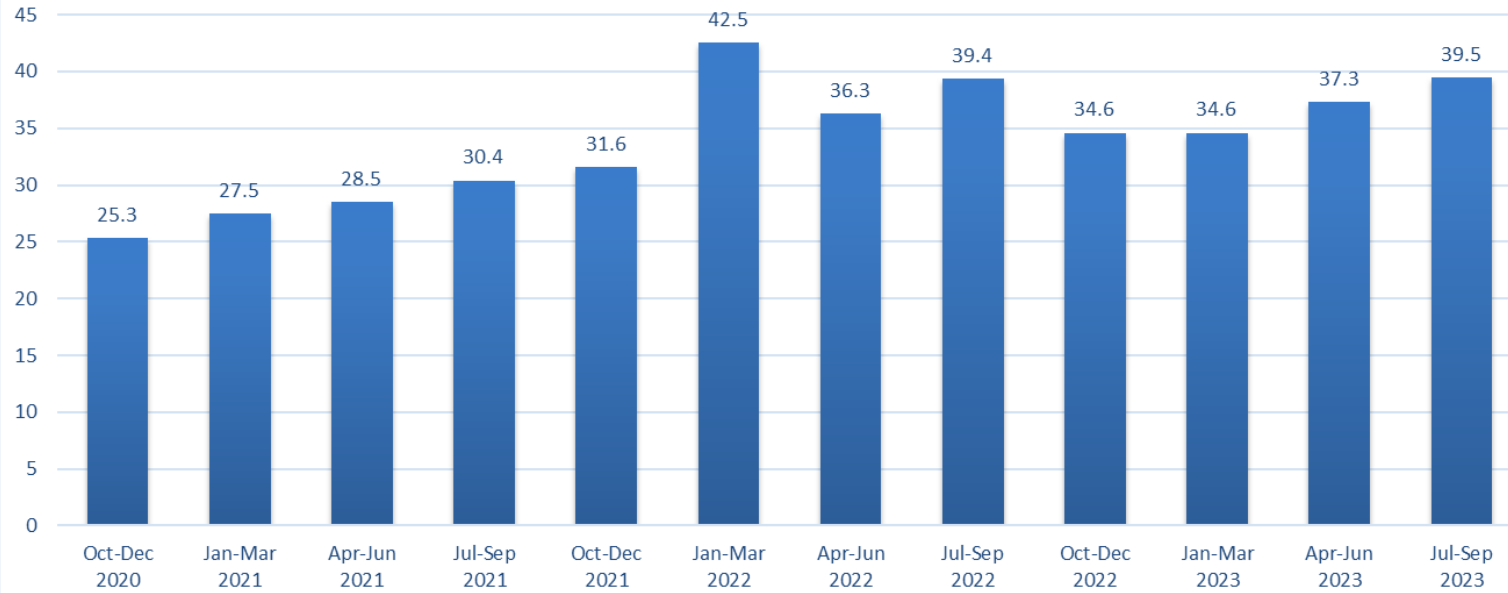
**Number of NC-STeP Patients by LOS Category  
Jan - Mar 2023**  
in hours



**Number of NC-STeP Patients by LOS Category  
Apr - Jun 2023**  
in hours



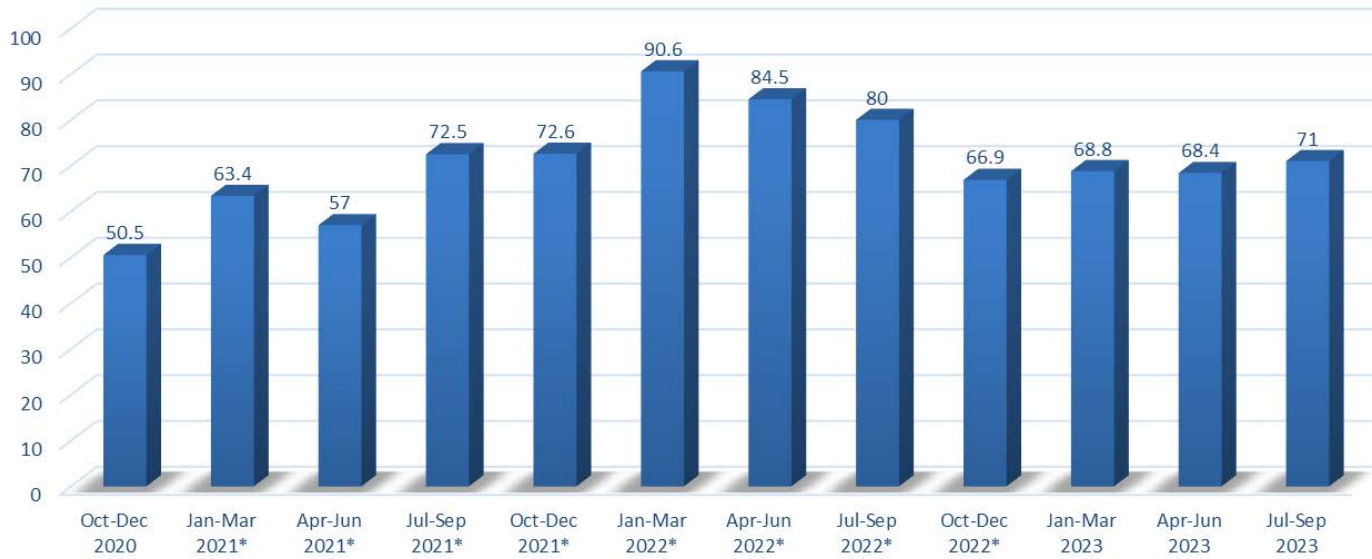
### Median Length of Stay by Quarter (in hours)



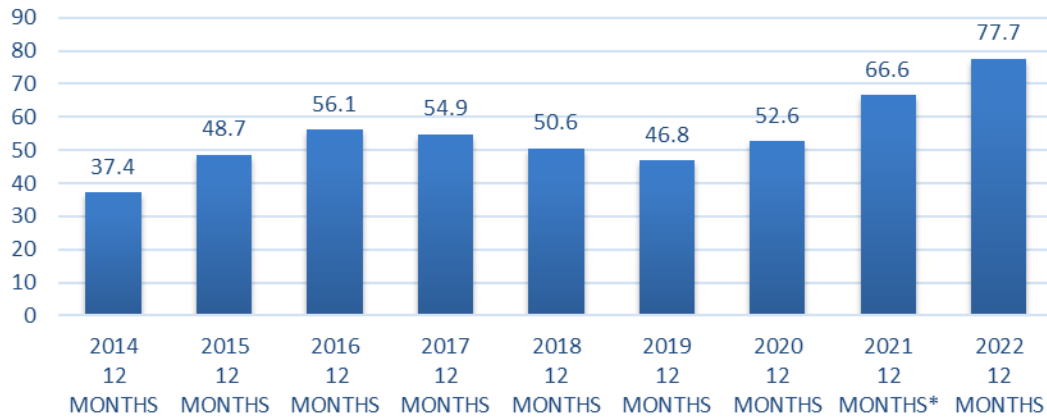
### Median Length of Stay by Year (in hours)



### Average Length of Stay by Quarter for Hospitals Participating in NC-STeP (in hours)



### Average Length of Stay by Year (in hours)



\*Indicates average was adjusted to include back data

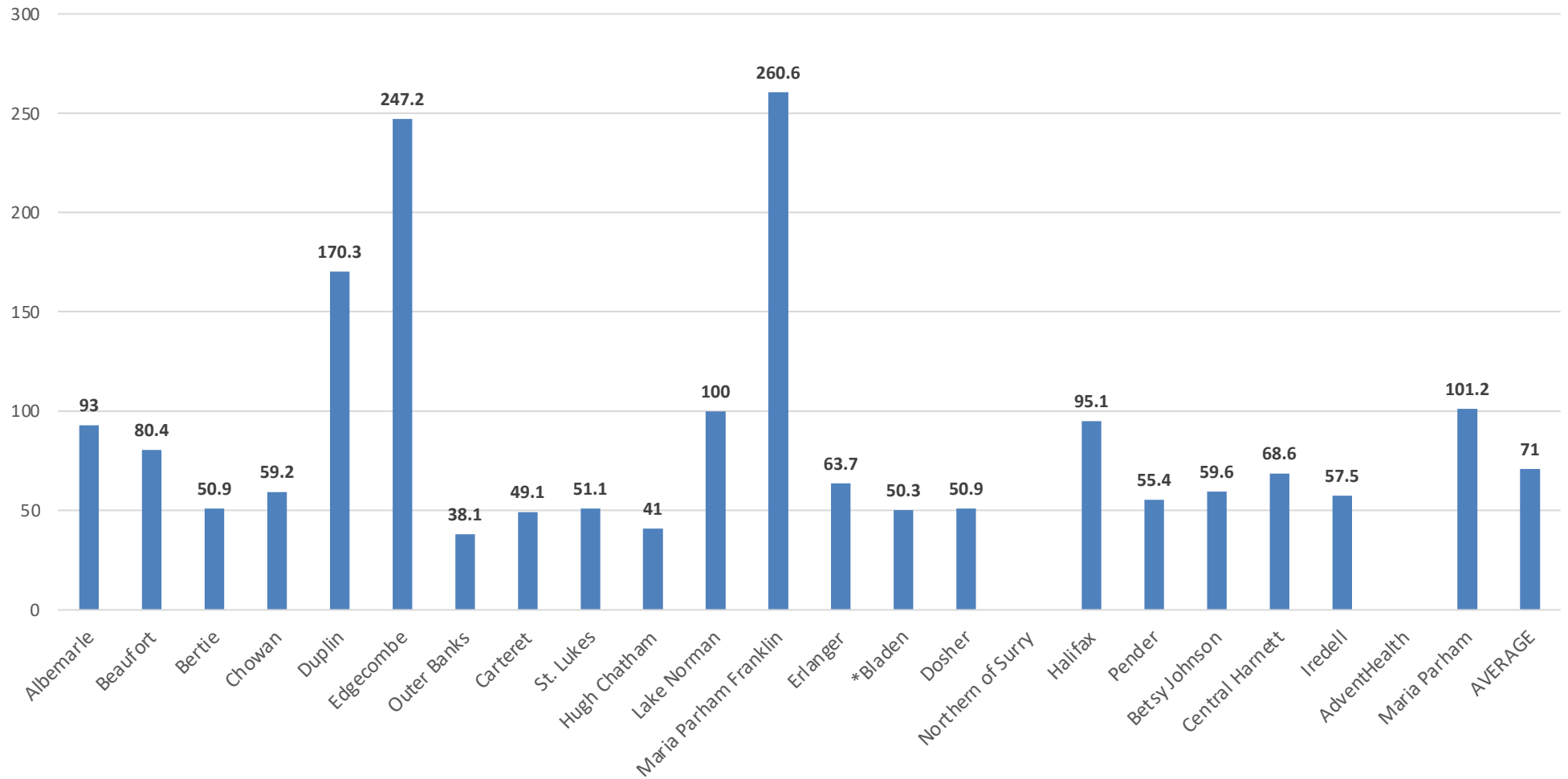




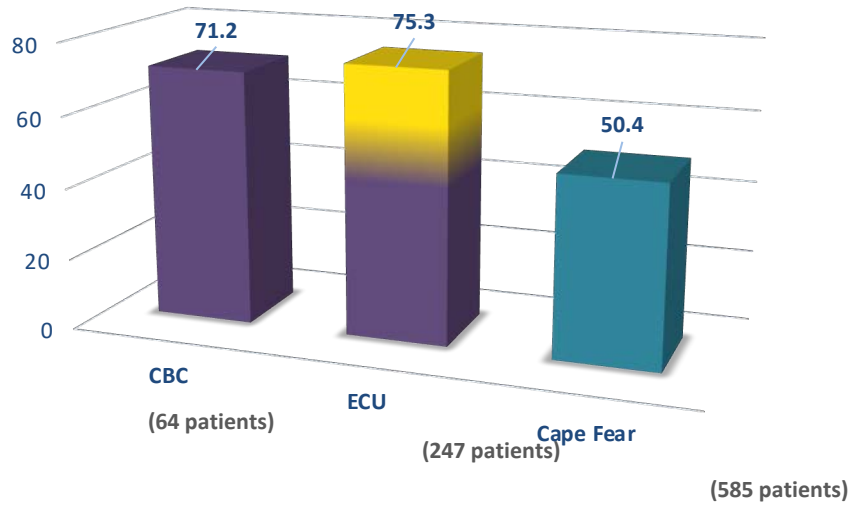
# Average Length of Stay for NC-STeP Patients by Hospital

July - September 2023

(in hours)

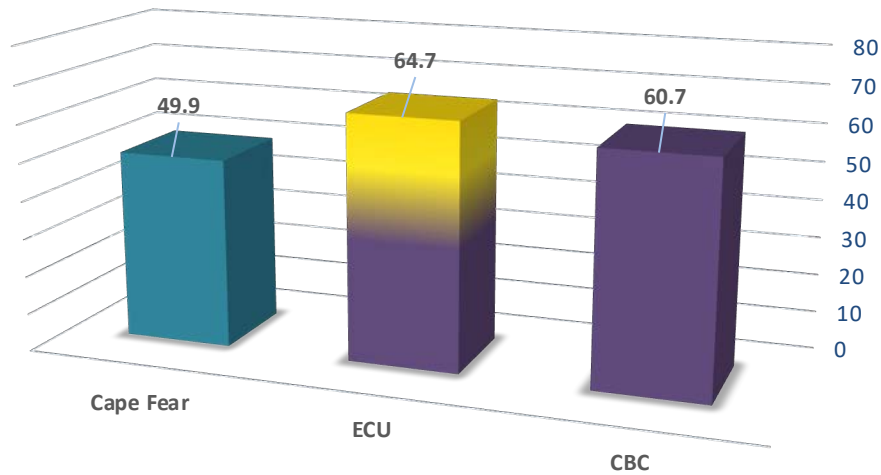


### Jul-Sep 2023 (in hours)



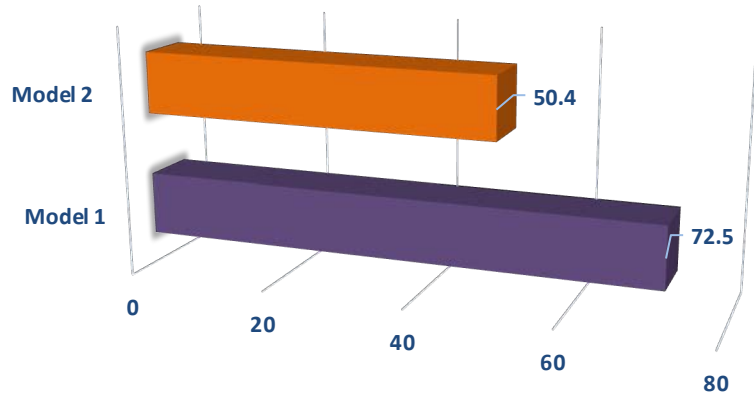
## Average Length of Stay by Provider

### Apr-Jun 2023 (in hours)

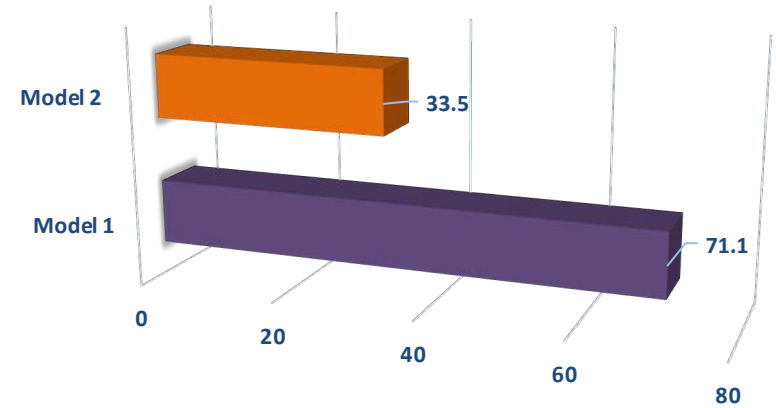


# Average LOS by Model

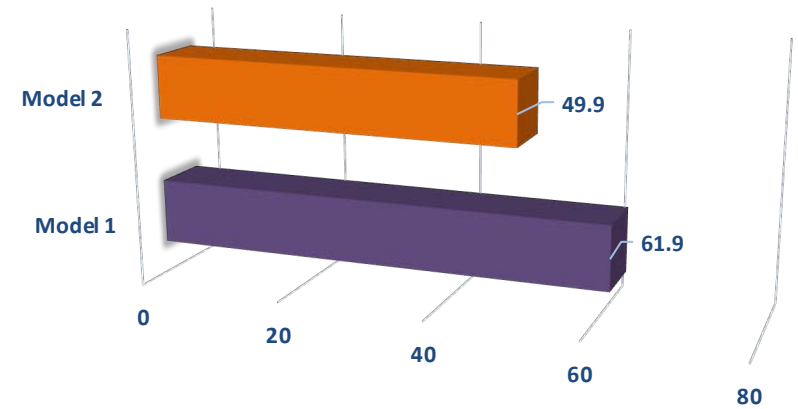
## Jul-Sep 2023 (in hours)



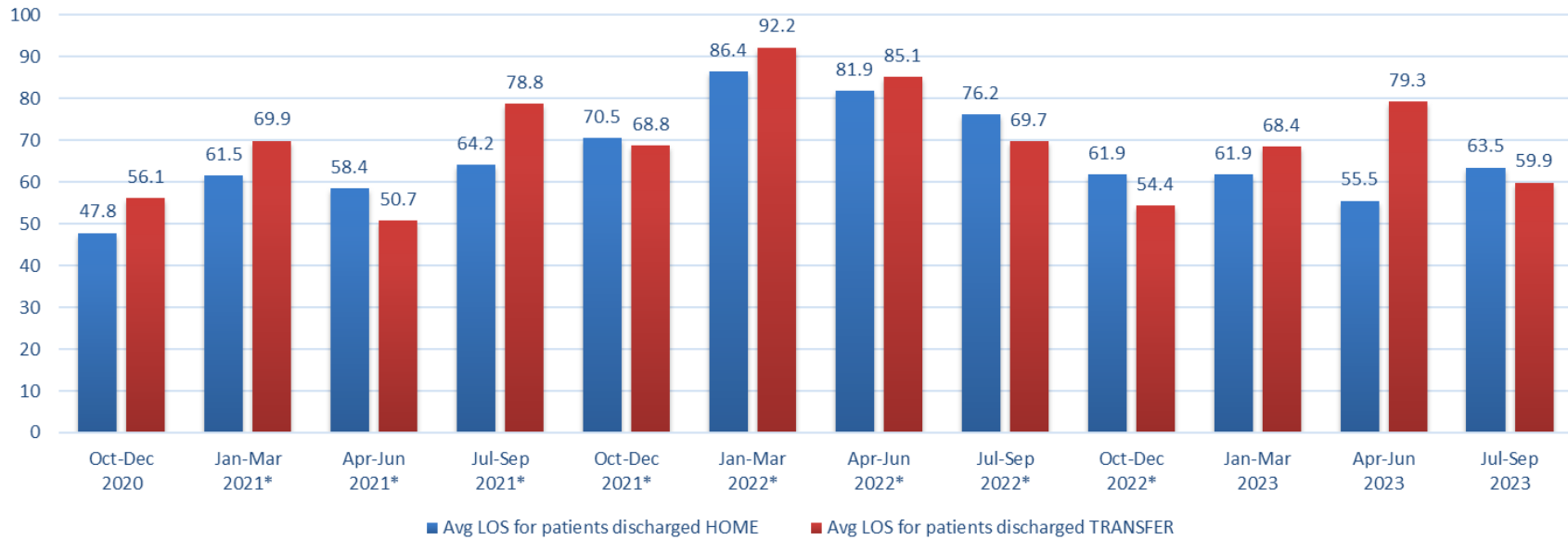
## Jan-Mar 2023 (in hours)



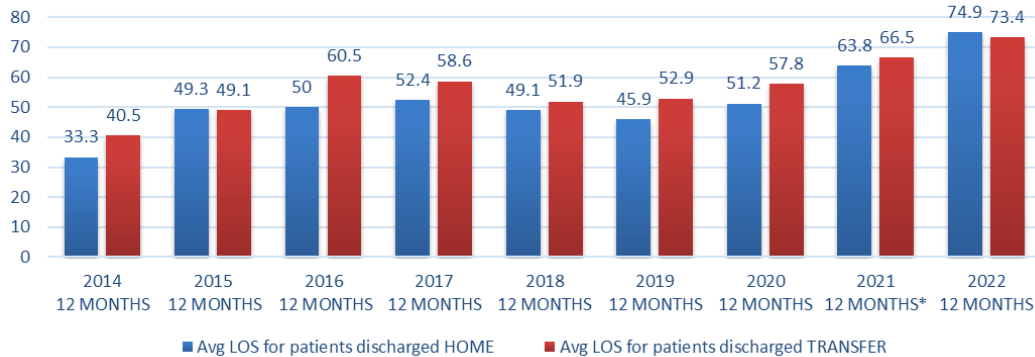
## Apr-Jun 2023 (in hours)



### Average Length of Stay by Quarter for Patients Discharged to Home or Transfer (in hours)

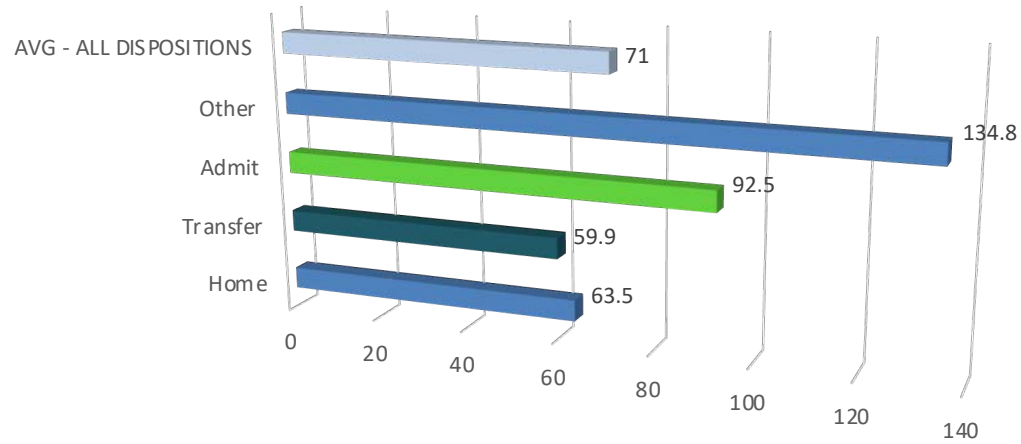


### Average Length of Stay by Year for Patients Discharged to Home or Transfer (in hours)



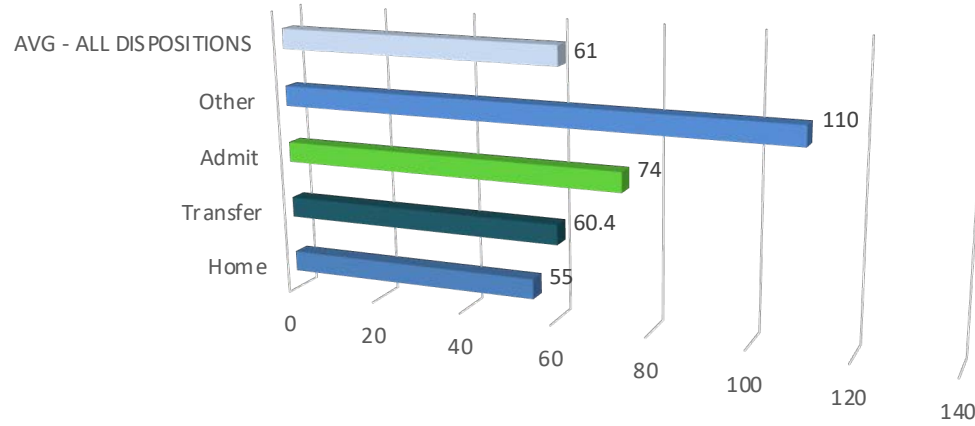
\*Indicates average was adjusted to include back data

Jul - Sep 2023 (in hours)



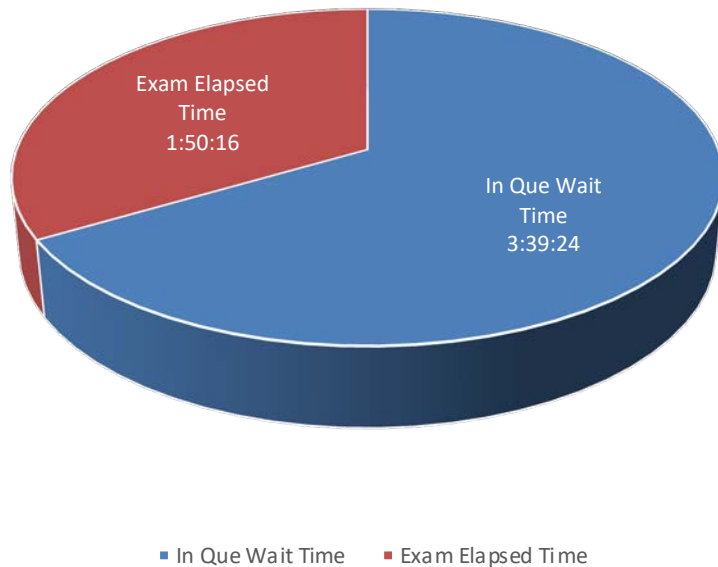
## Average LOS by Discharge Disposition

Apr - Jun 2023 (in hours)

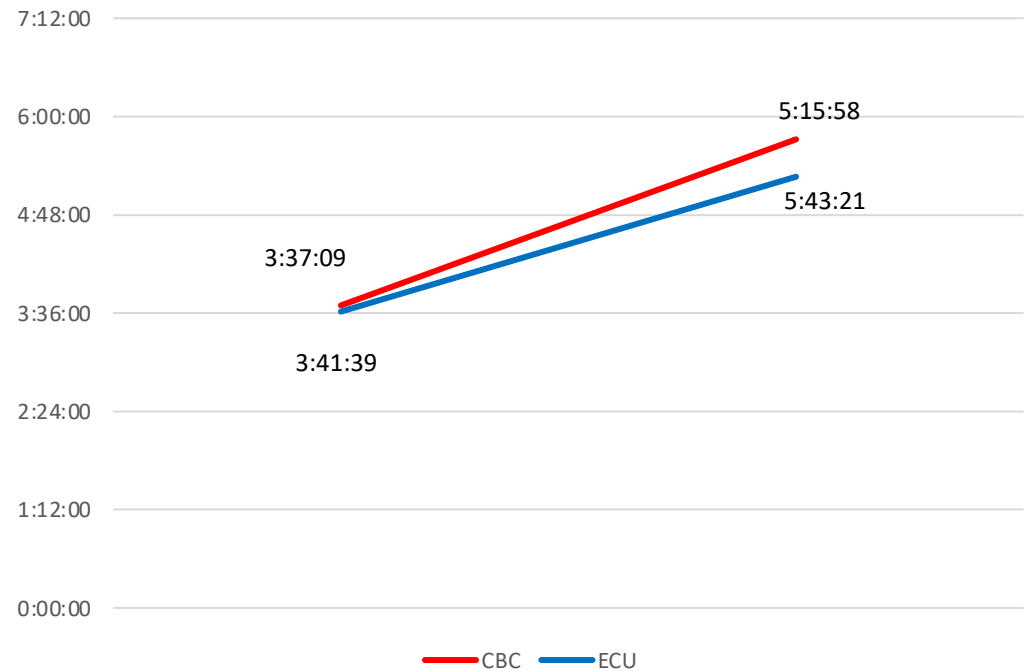


# Consult Elapsed Time: July - September 2023

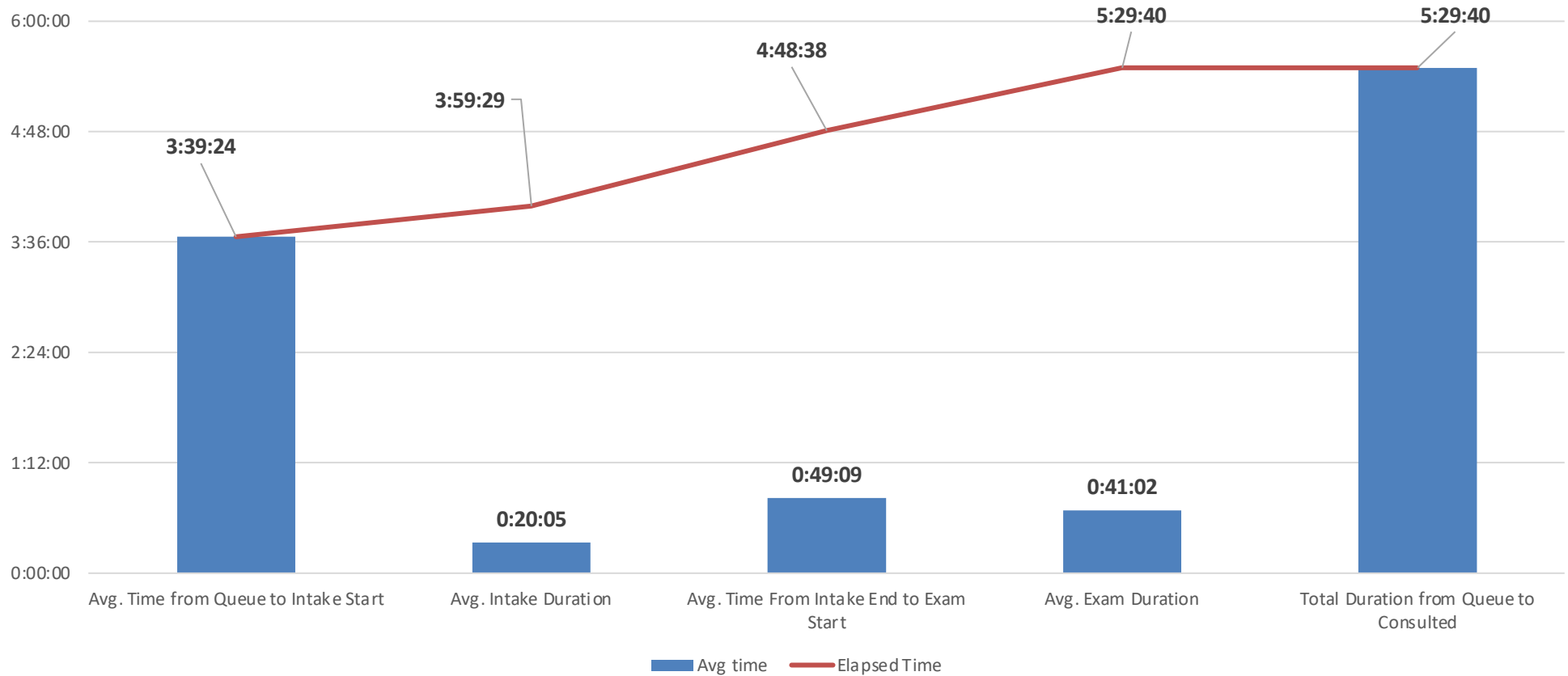
**CBC & ECU**  
**Average Consult Exam Elapsed Time**  
**In Que to Exam Complete**  
FY24-Q1 July - September 2023  
**(5 hrs. 29 min. 40 29 sec.)**



**Comparison CBC & ECU**  
**Average Consult Exam Elapsed Time**  
**In Que to Exam Complete**  
FY24-Q1 July - September 2023

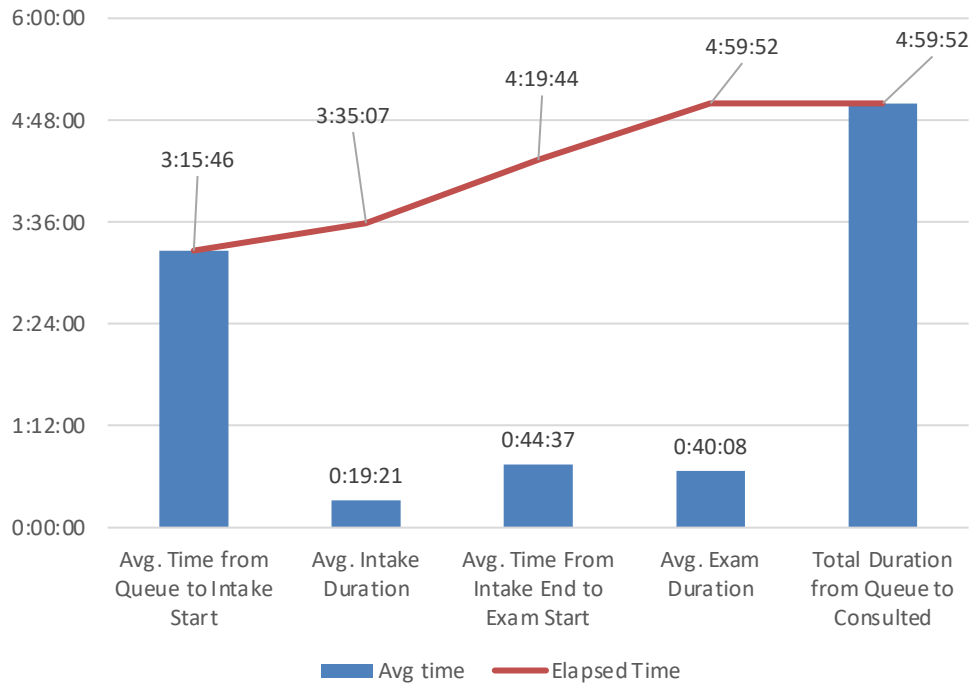


# Key Processes and Elapsed Times Averages CBC and ECU: July - September 2023

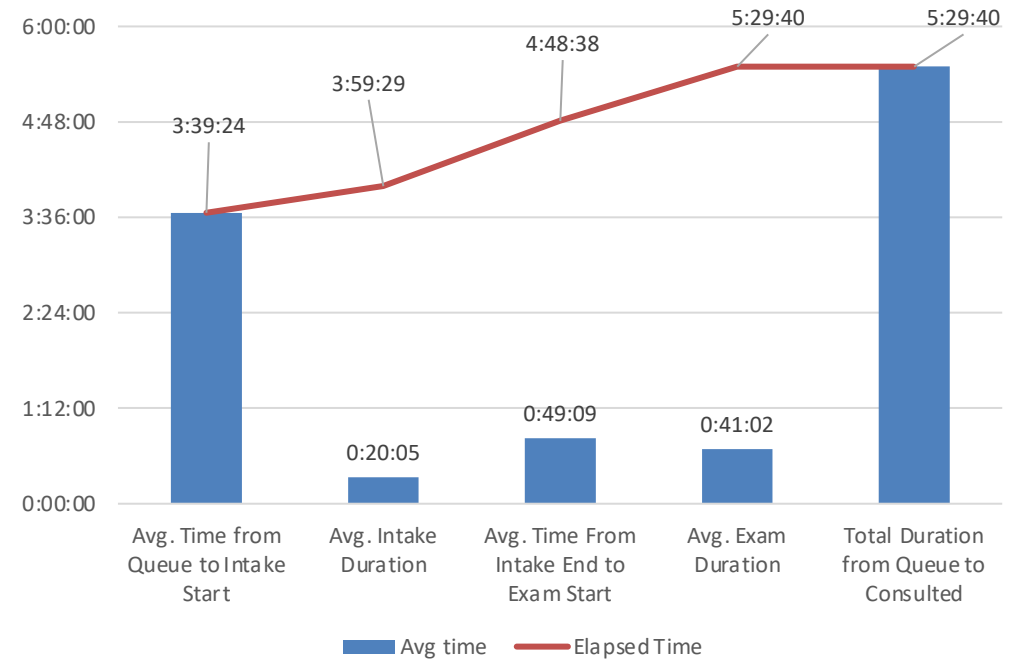


# Key Processes and Elapsed Times Averages (CBC and ECU)

## April - June 2023



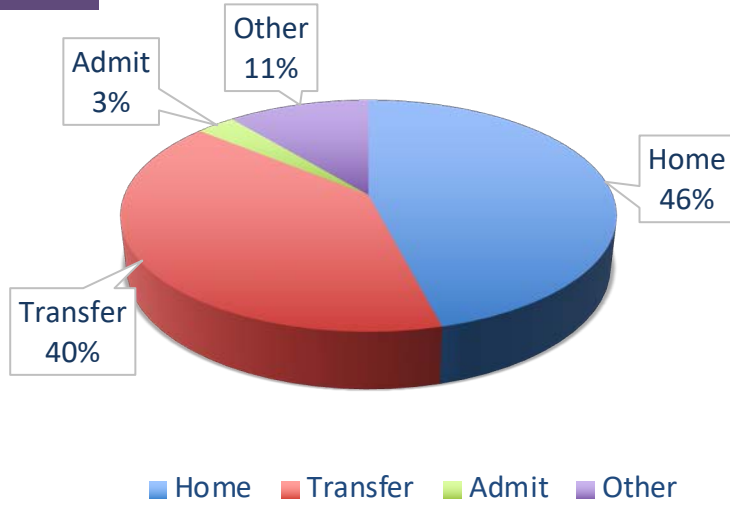
## July - September 2023



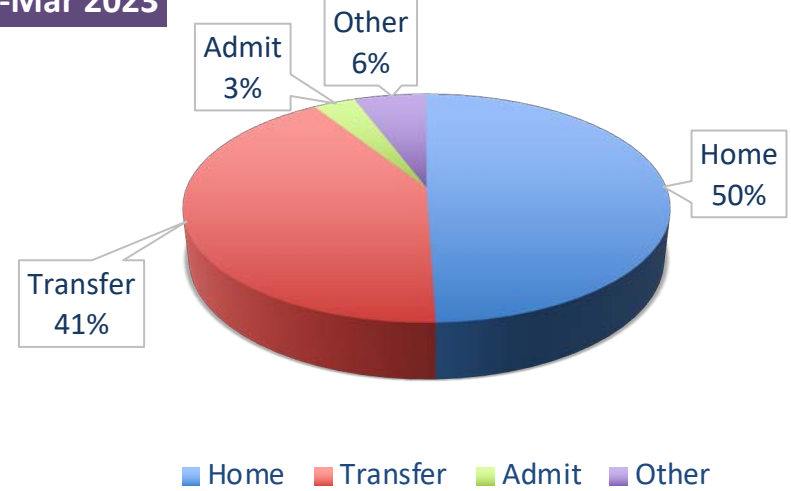


# Percent of Patients by Discharge Disposition

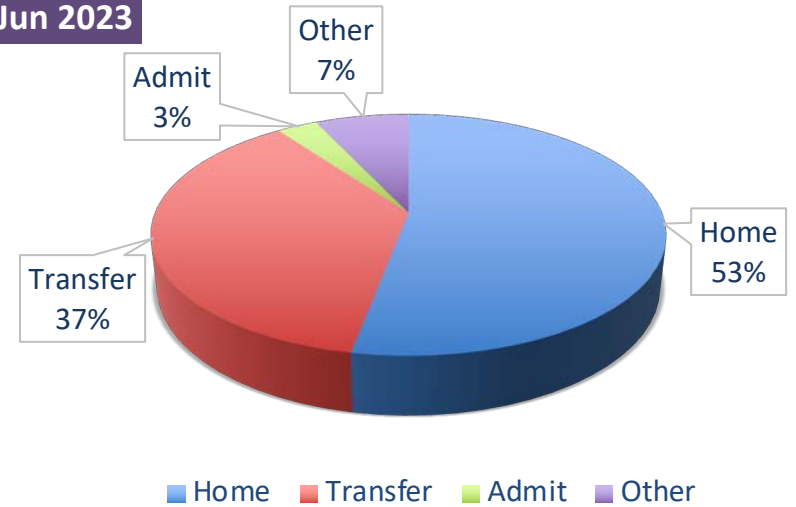
Jul-Sep 2023



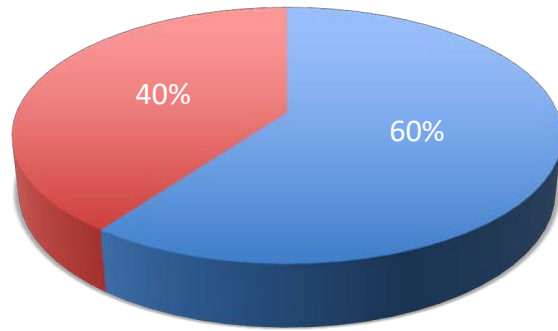
Jan-Mar 2023



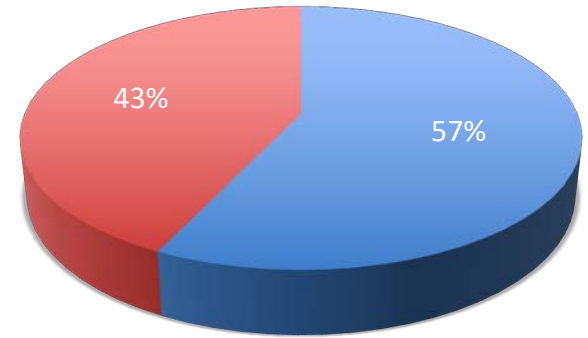
Apr-Jun 2023



**Jul-Sep 2023**



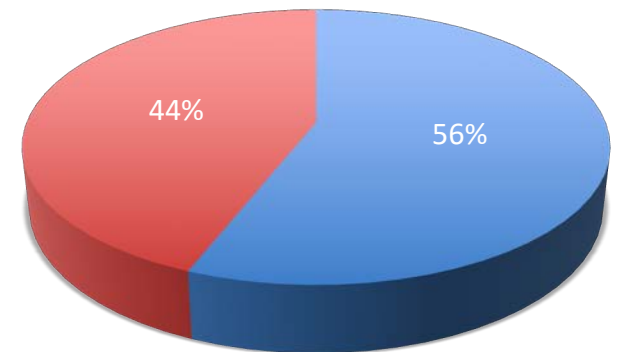
**Jan-Mar 2023**



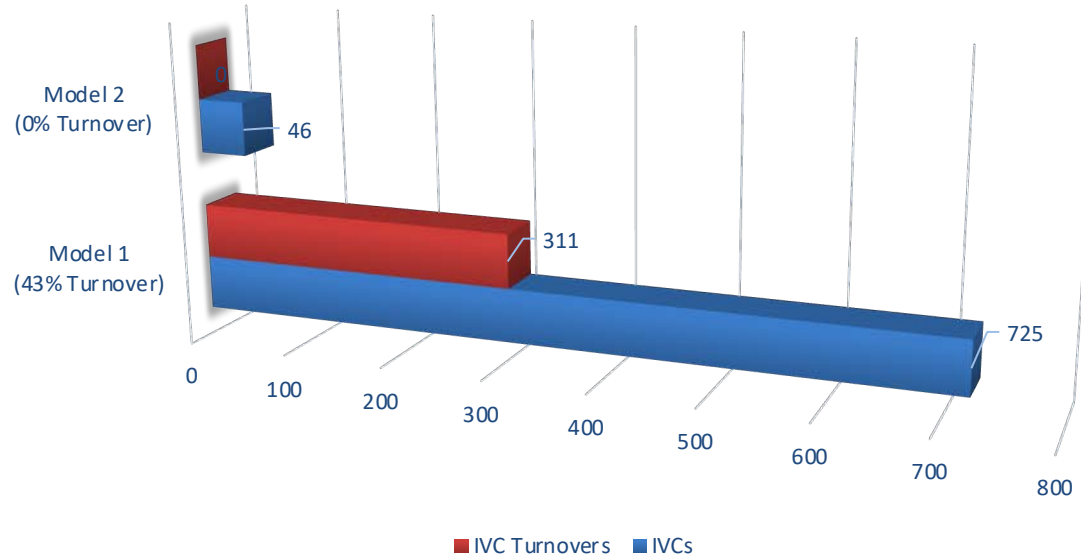
## IVCs – By Release Status

- IVCs - percent not released
- IVCs - percent released

**Apr-Jun 2023**

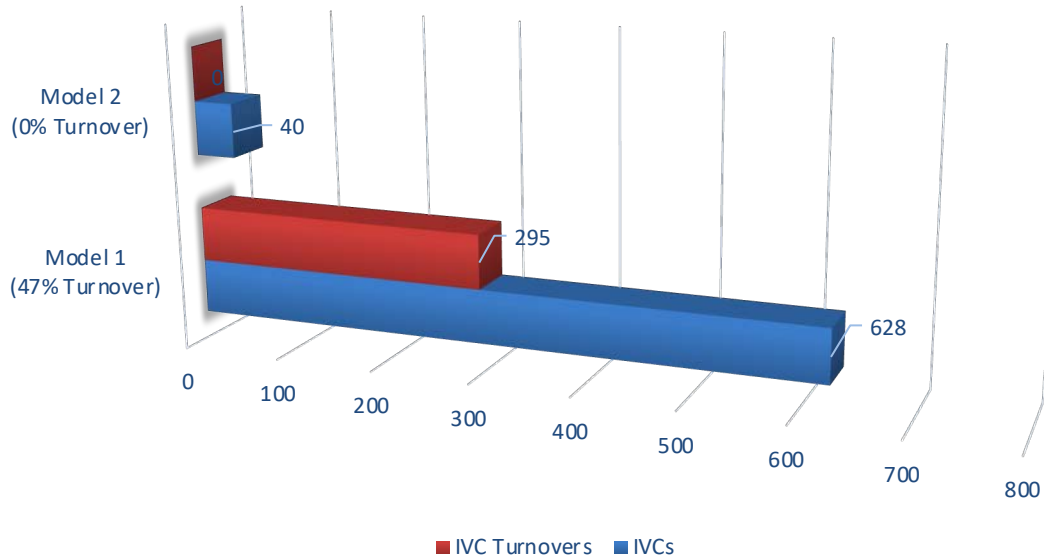


## Jul-Sep 2023

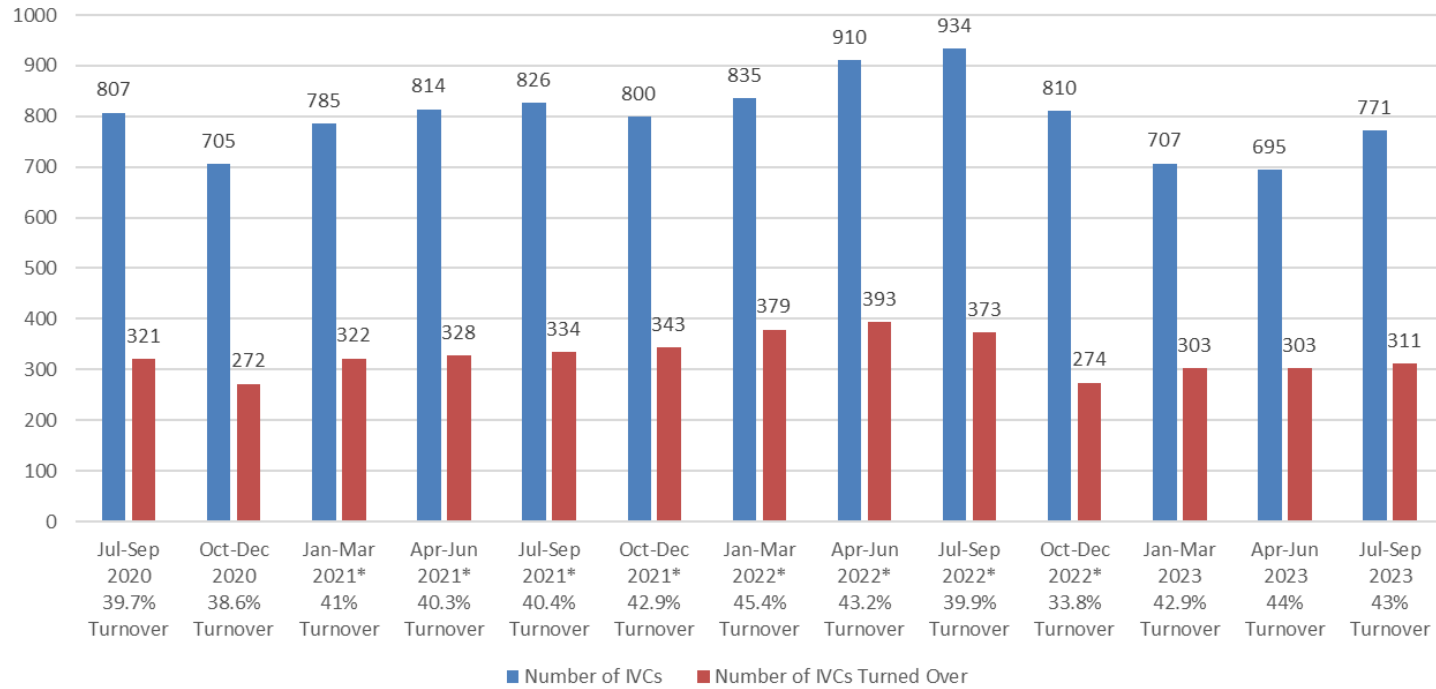


## Number of IVCs and IVC Turnovers by Model

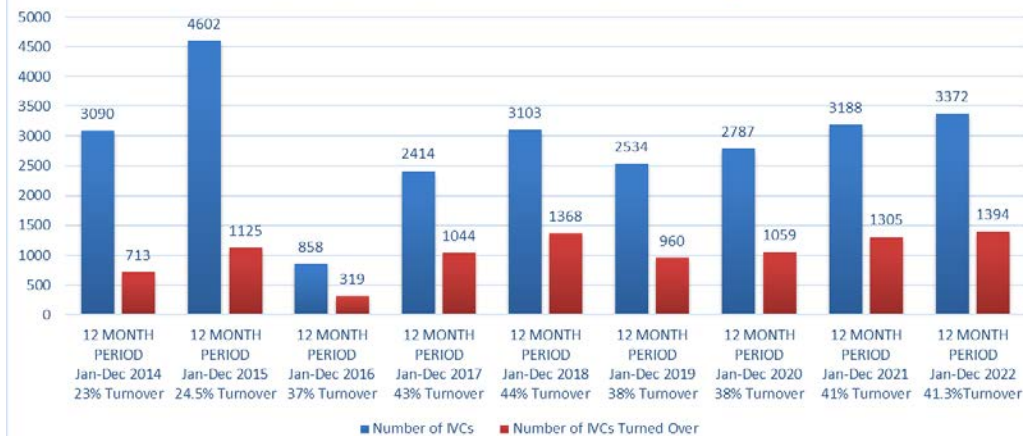
## Apr-Jun 2023



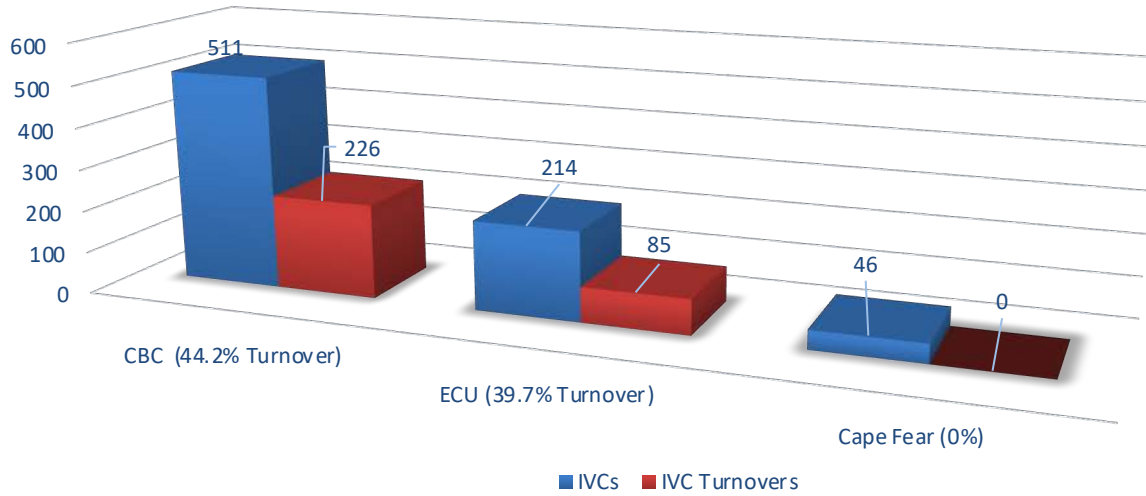
### Number of IVCs and IVCs Turned Over by Quarter



### Number of IVCs and IVCs Turned Over by Year

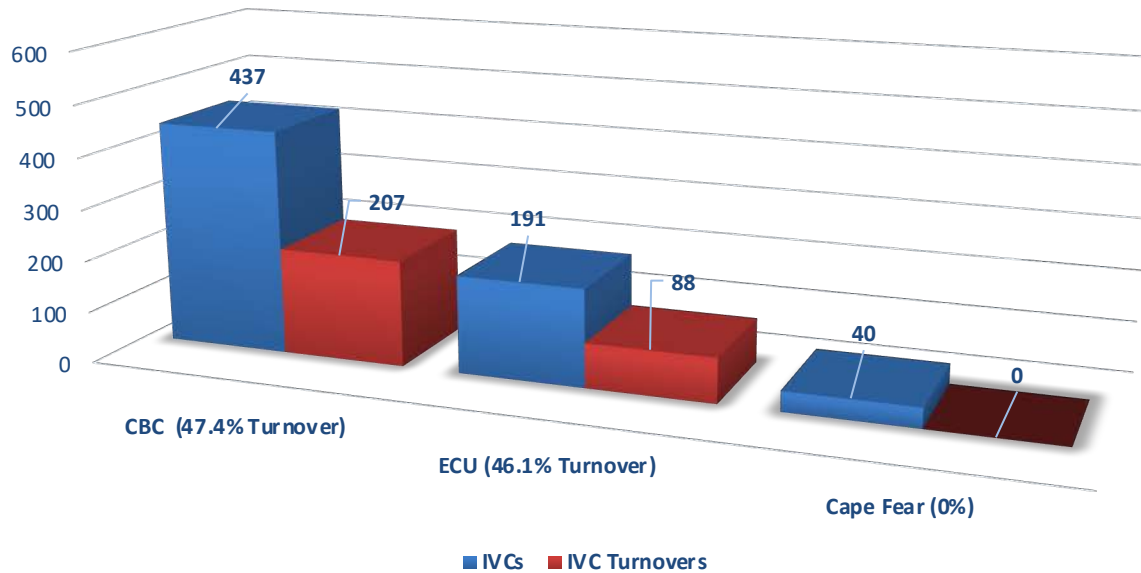


Jul-Sep 2023



## Number of IVCs and IVC Turnovers by Provider

Apr-Jun 2023



# Satisfaction Surveys

- Satisfaction surveys are done twice a year.
- Most recent surveys were conducted in September 2023.
- Invitations to participate were sent via electronic mail
- For groups that use the portal (Model 1 ED staff, psychiatrists, and intake specialists) there was a link to the survey on the portal log-in page.
- Surveys were completed online via Qualtrics software

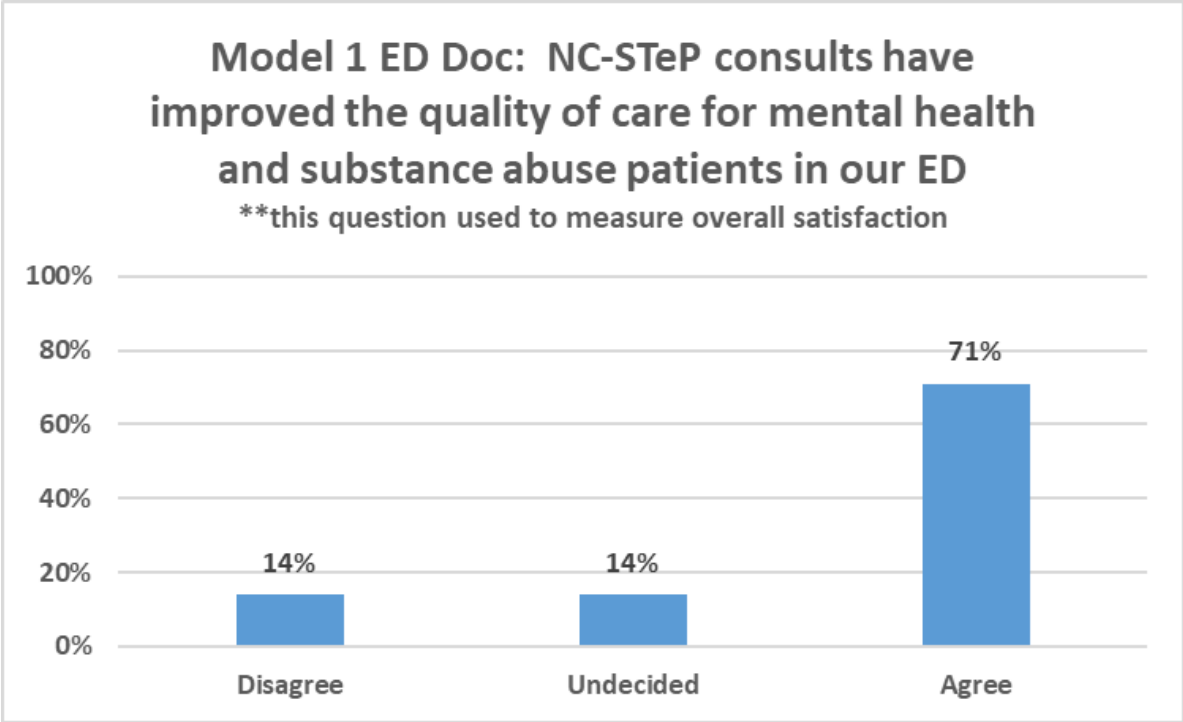


# Satisfaction Surveys Methodology

- 52 individuals responded to the survey (N = 52).
- For each group, one summary question was selected for an overall “satisfaction” rate.
- **The overall satisfaction rate was 81%.**



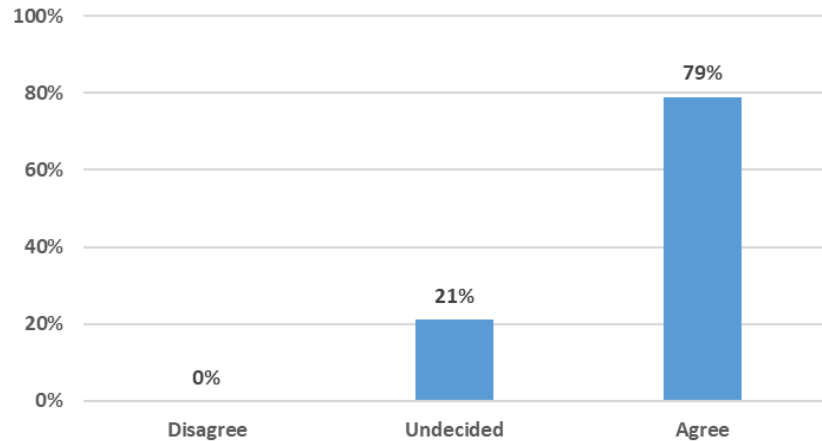
# Model 1 Hospital ED Physicians Results (n=14)



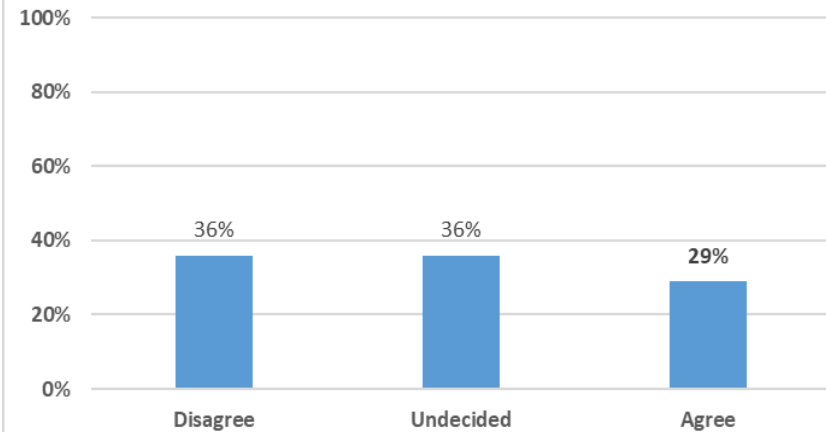


# Model 1 Hospital ED Physicians Results (n=14)

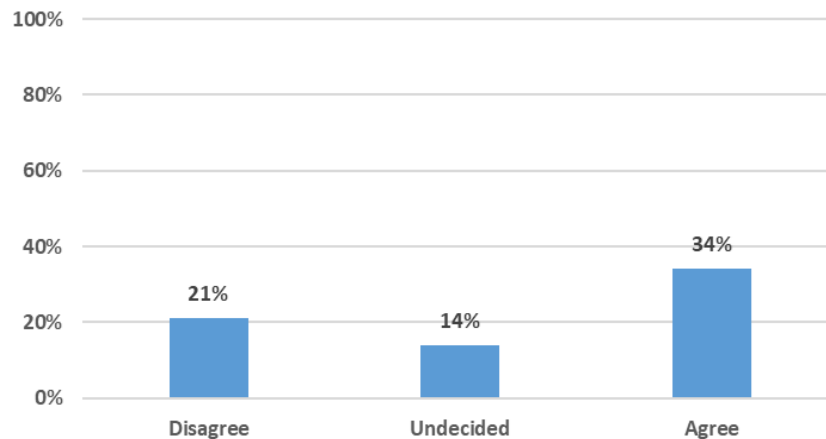
**Model 1 ED DOC: NC Step disposition recommendations are helpful**



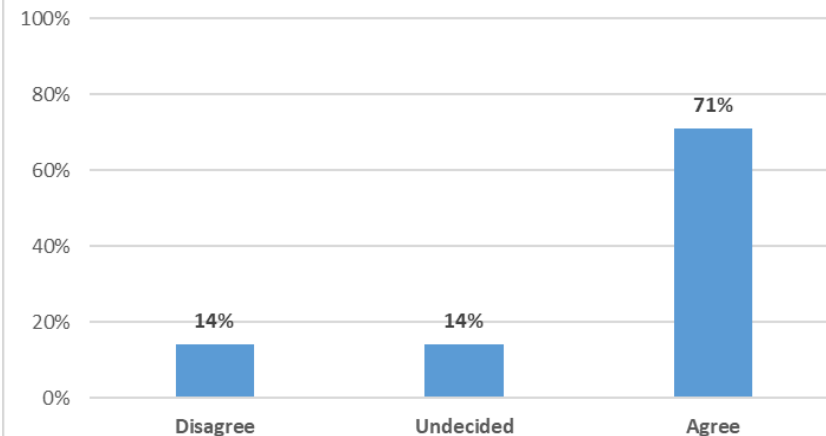
**Model 1 ED Doc: NC STeP consultants respond quickly to telepsychiatry requests.**



**Model 1 ED DOC: NC STeP consults are complete and thorough.**

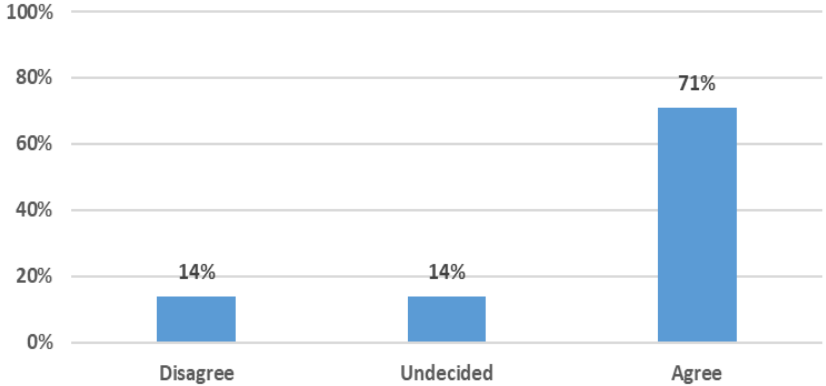


**Model 1 ED Doc: NC STeP consults are easy to obtain**

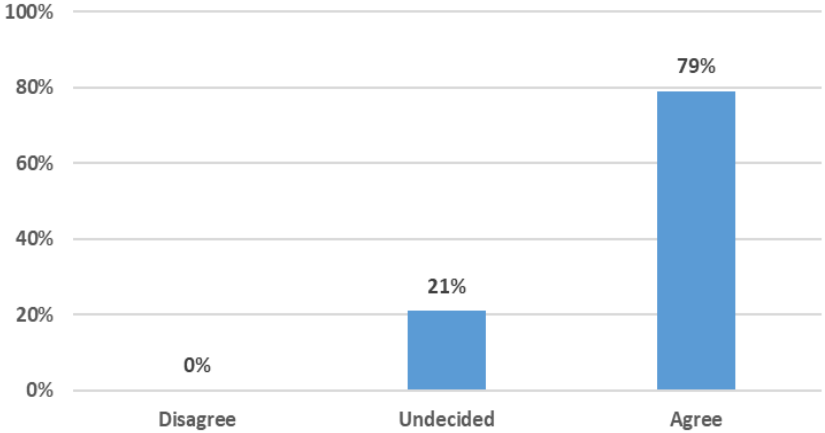


# Model 1 Hospital ED Physicians Results (n=14)

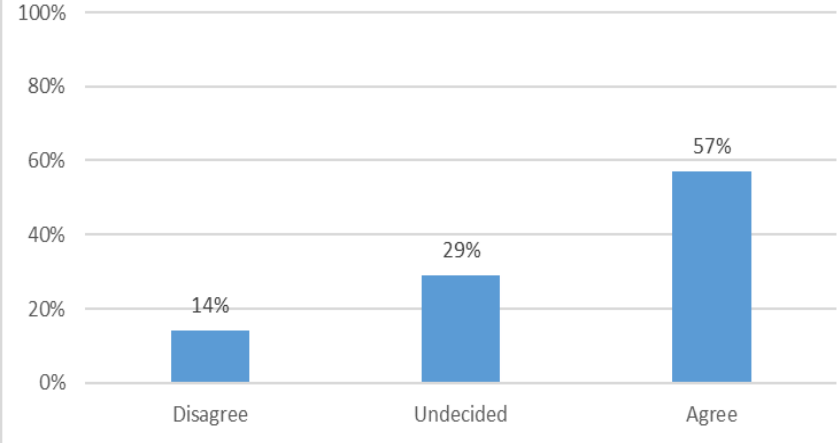
**Model 1 ED Doc: NC-SteP consults have made me more comfortable assessing and treating patients with mental health/substance abuse issues**



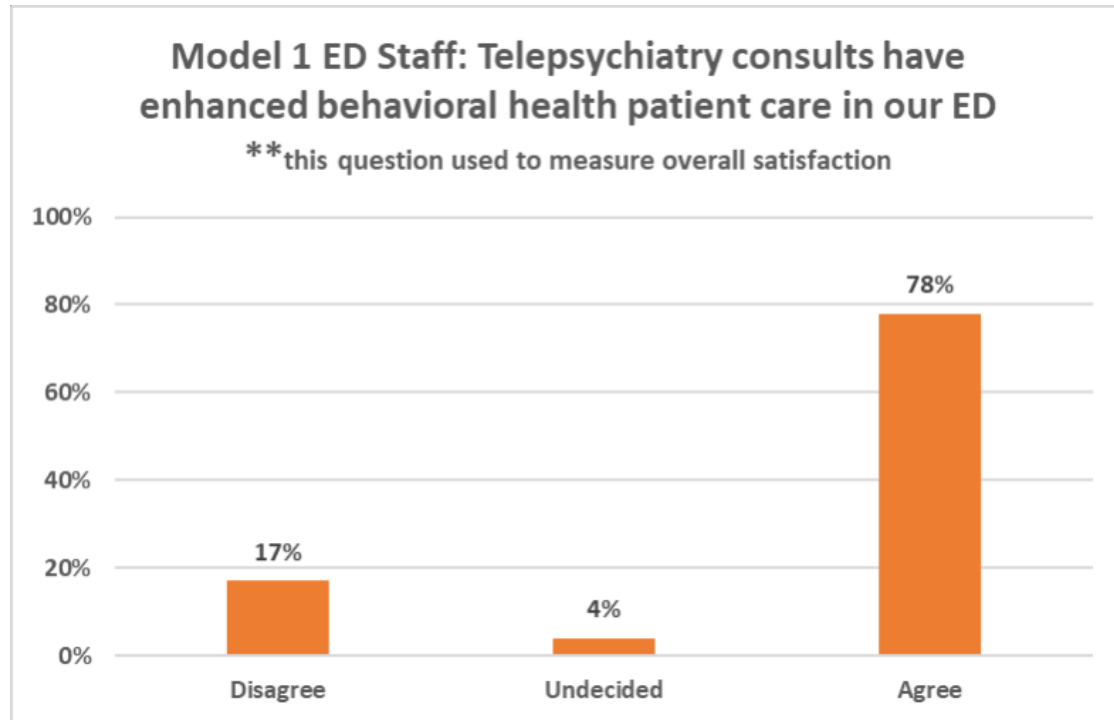
**Model 1 ED Doc: NC SteP documentation is straightforward**



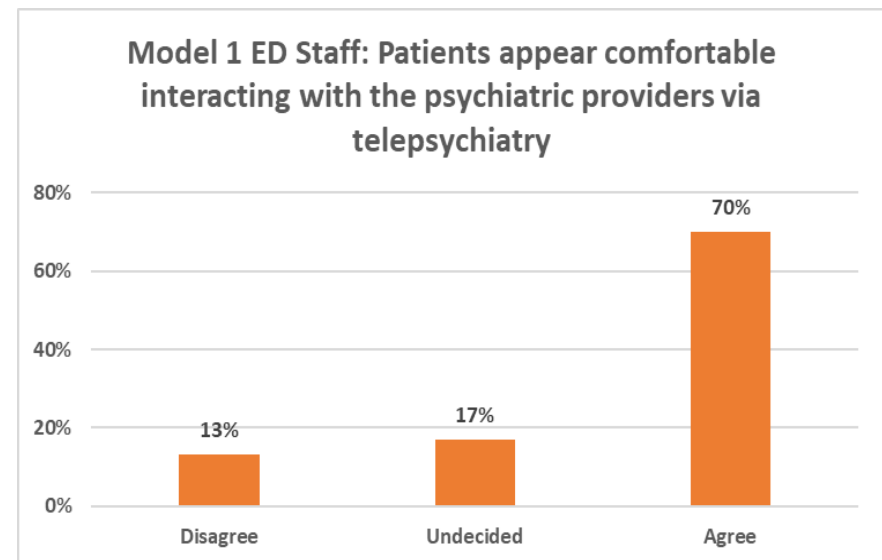
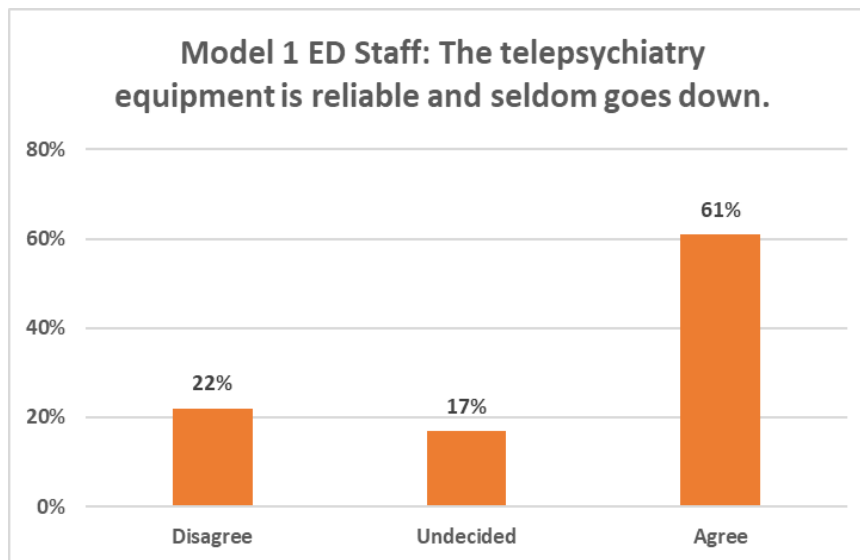
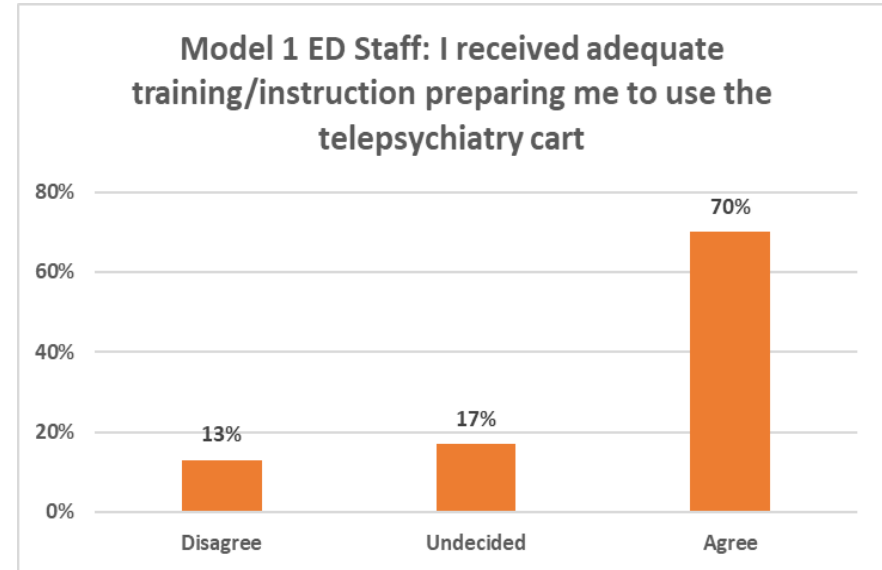
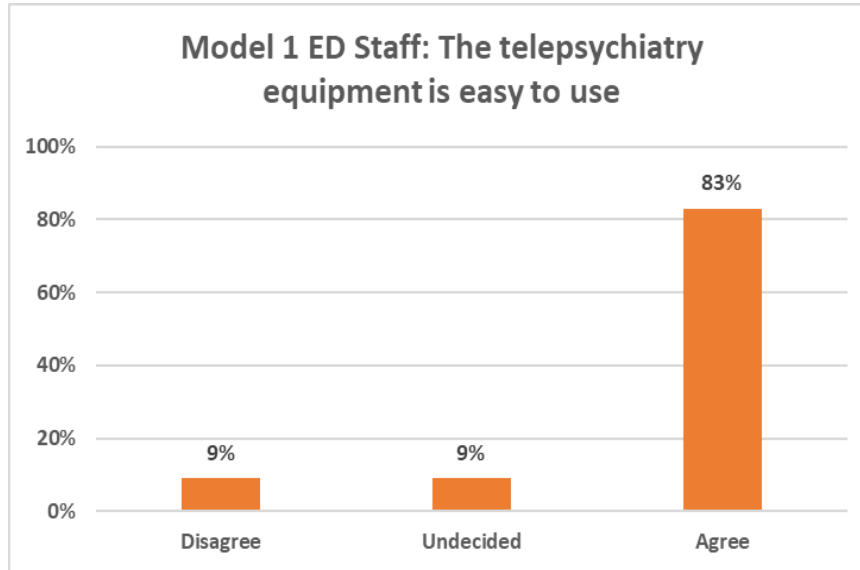
**Model 1 ED Doc: Telepsychiatry consults have improved the work flow in the ED**



# Model 1 Hospital ED Staff Results (n=23)

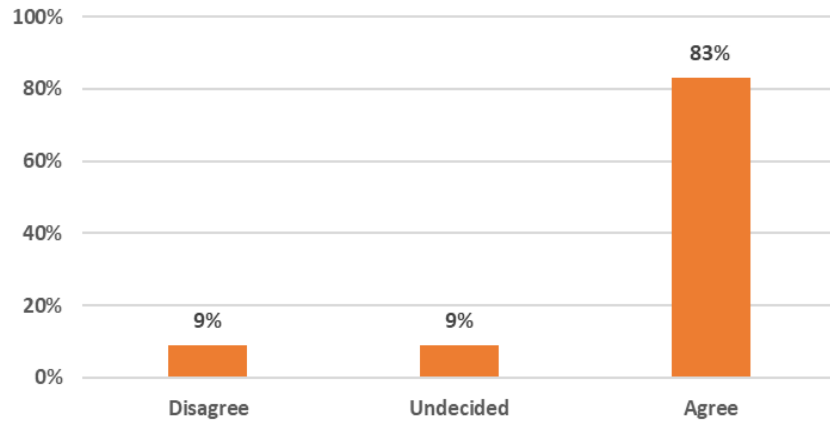


# Model 1 Hospital ED Staff Results (n=23)

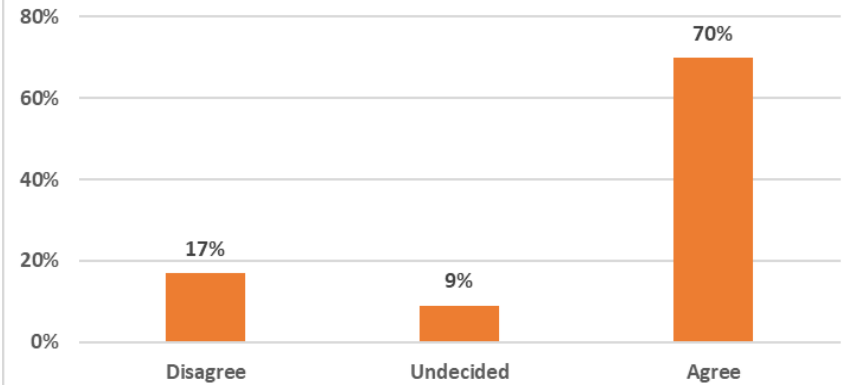


# Model 1 Hospital ED Staff Results (n=23)

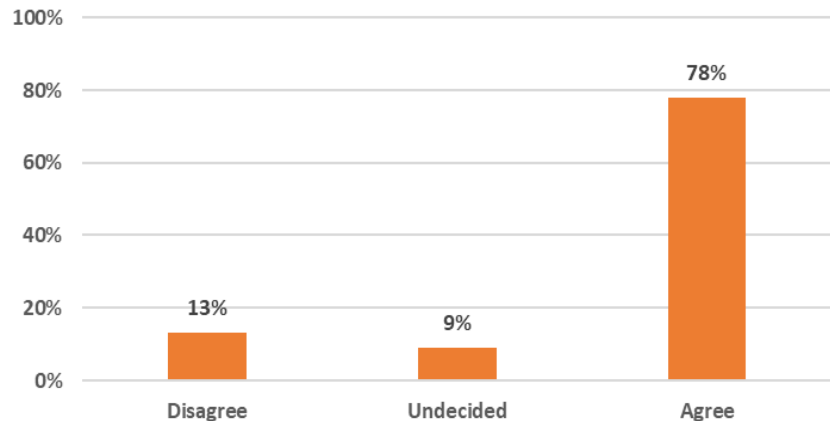
**Model 1 ED Staff: The NC-STeP portal is easy to use.**



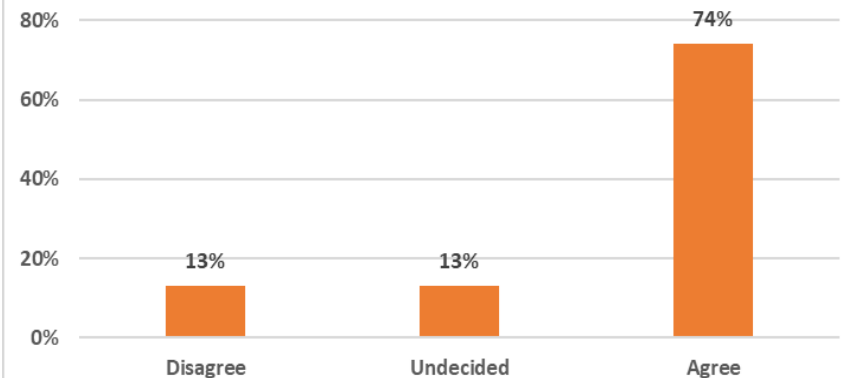
**Model 1 ED Staff: The training and resources provided adequately prepared me to use the NC-STeP portal.**



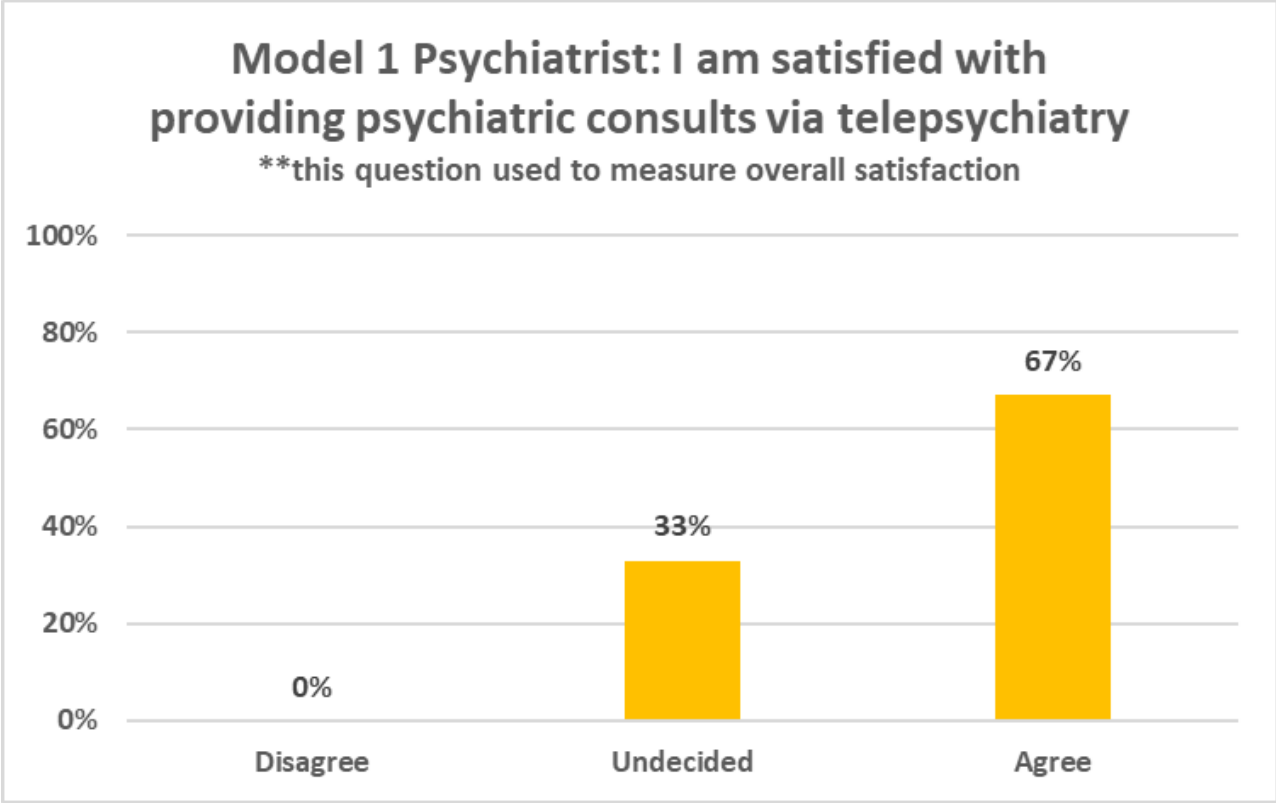
**Model 1 ED Staff: The NC-STeP portal is reliable and unscheduled downtime is rare.**



**Model 1 ED Staff: The level of technical expertise provided by NC-STeP support is adequate.**

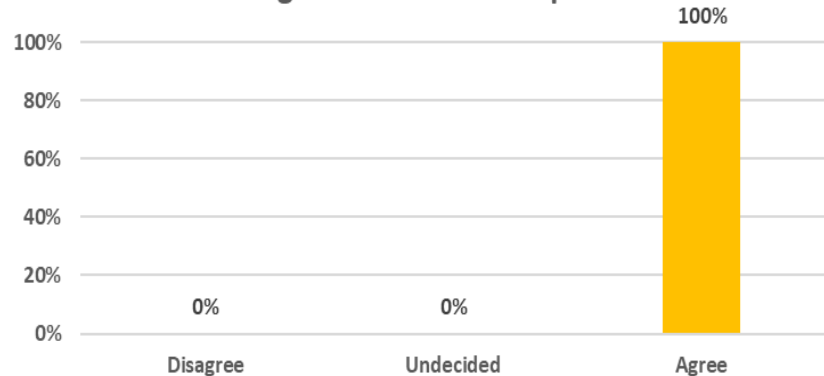


# Model 1 Provider Psychiatrist Results (n= 3)

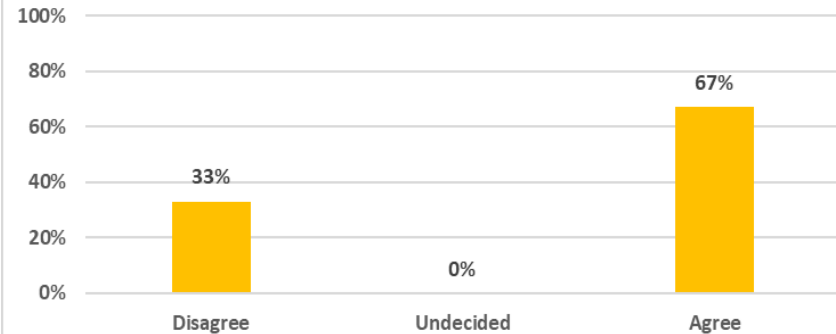


# Model 1 Provider Psychiatrist Results (n= 3)

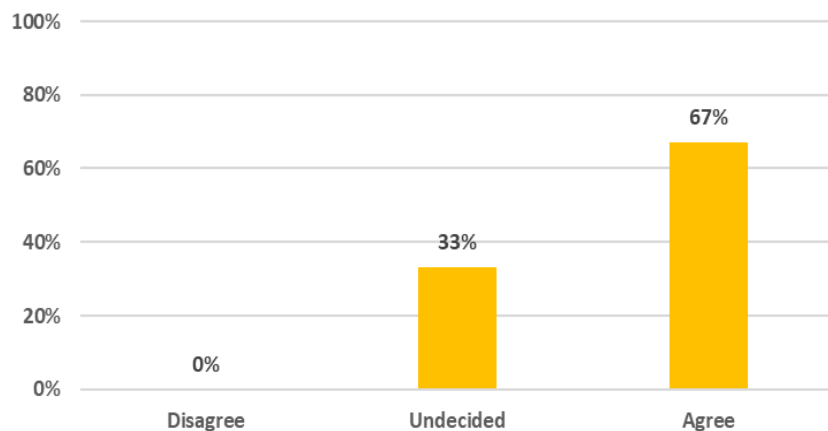
**Model 1 Psychiatrist: Telepsychiatry is an effective and efficient way of assessing and treating behavioral health patients**



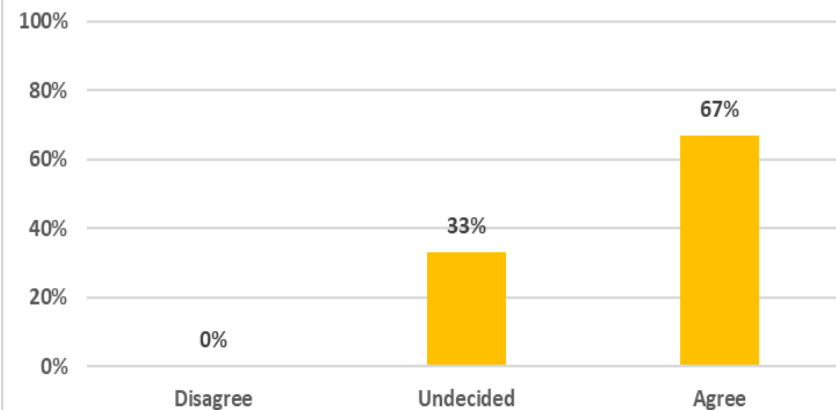
**Model 1 Psychiatrist: I believe the quality of psychiatric care I provide via telepsychiatry is comparable to the quality of care I deliver face to face**



**Model 1 Psychiatrist: Telepsychiatry increases my productivity and/or efficiency.**

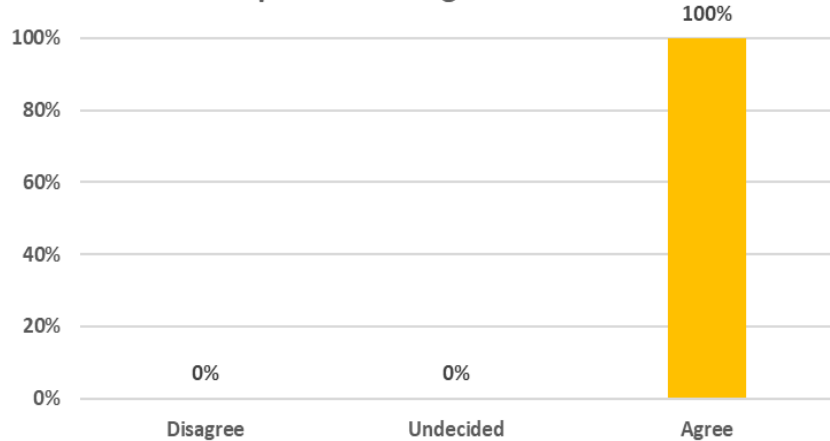


**Model 1 Psychiatrist: The NC-STeP portal is straightforward to use.**

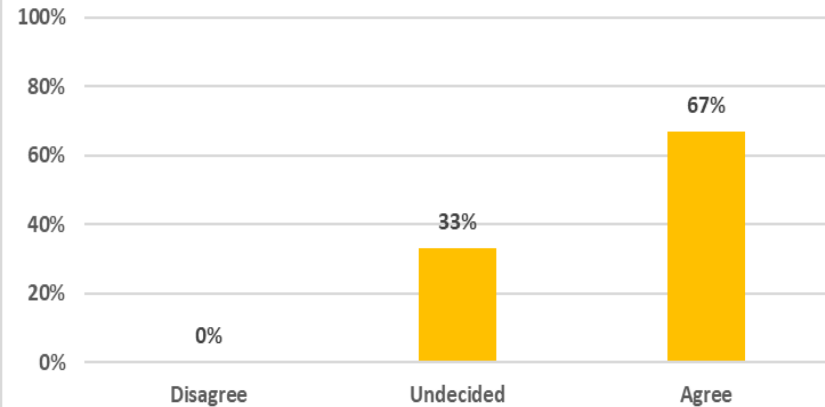


# Model 1 Provider Psychiatrist Results (n= 3)

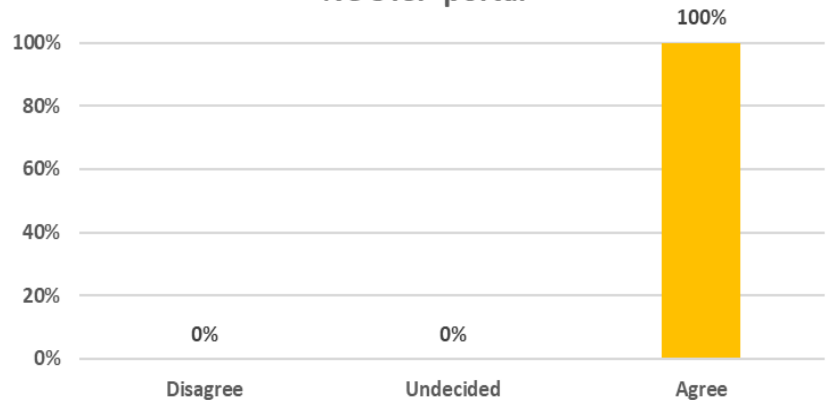
Model 1 Psychiatrist: The telepsychiatry desktop unit is straightforward to use



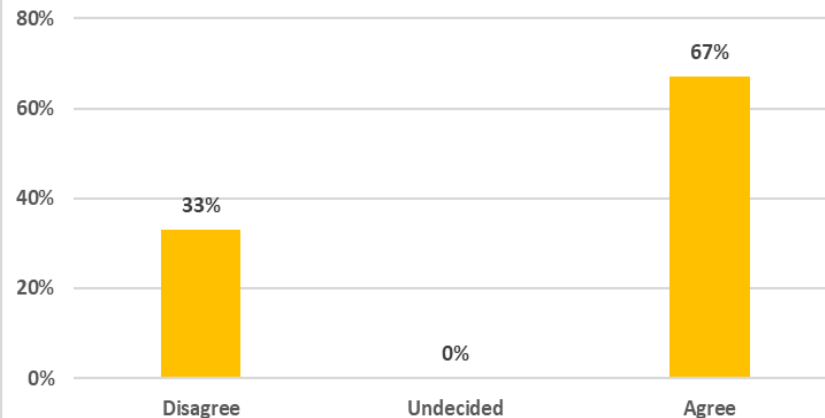
Model 1 Psychiatrist: The NC-STeP portal is straightforward to use.



Model 1 Psychiatrist: I received adequate training and resources preparing me to use the NC-STeP portal



Model 1 Psychiatrist: The NC-STeP portal works well without excessive delays or downtime

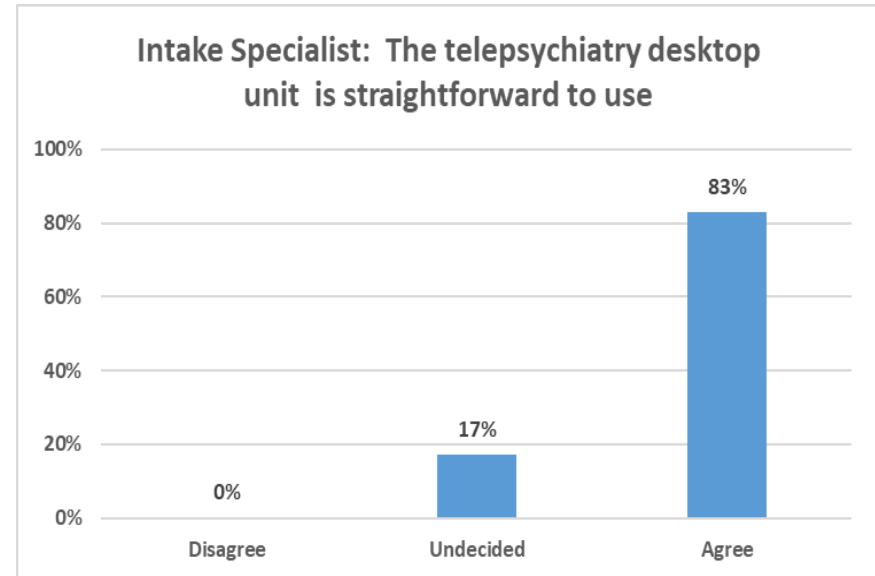
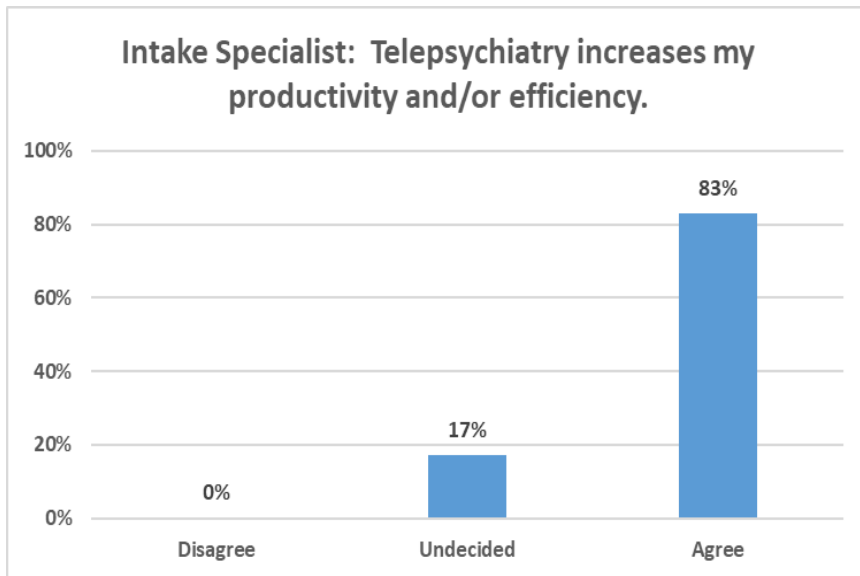
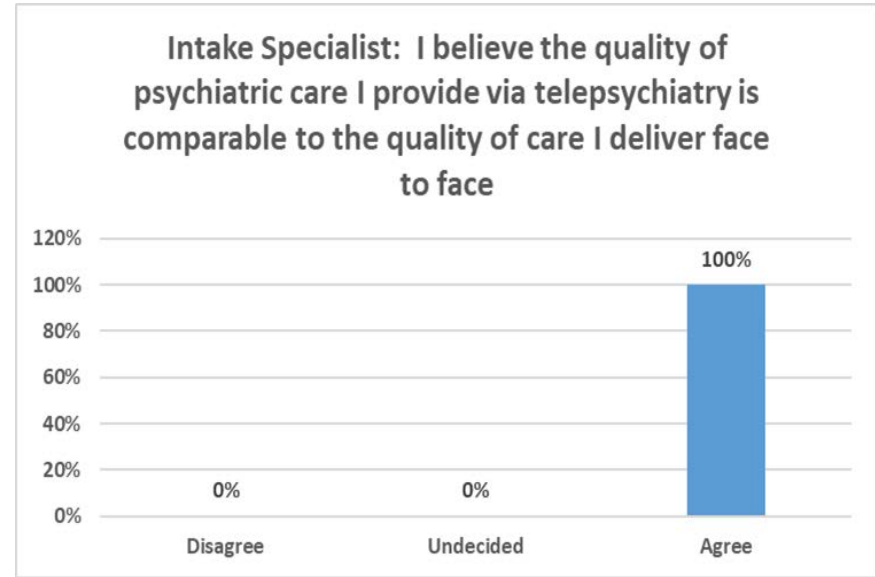
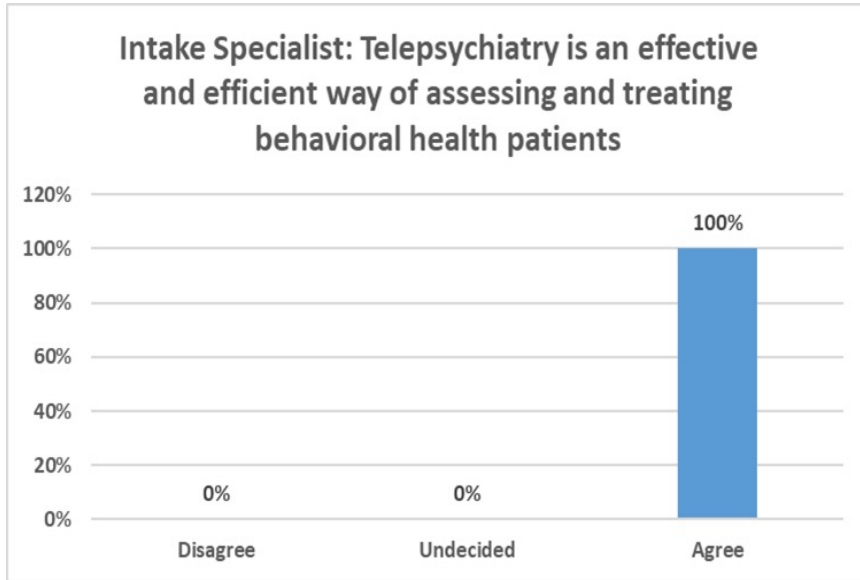




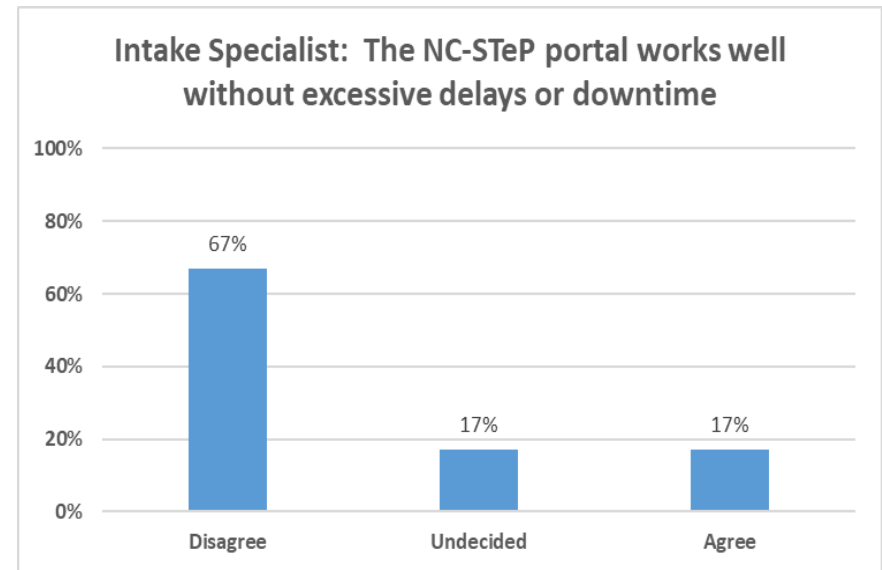
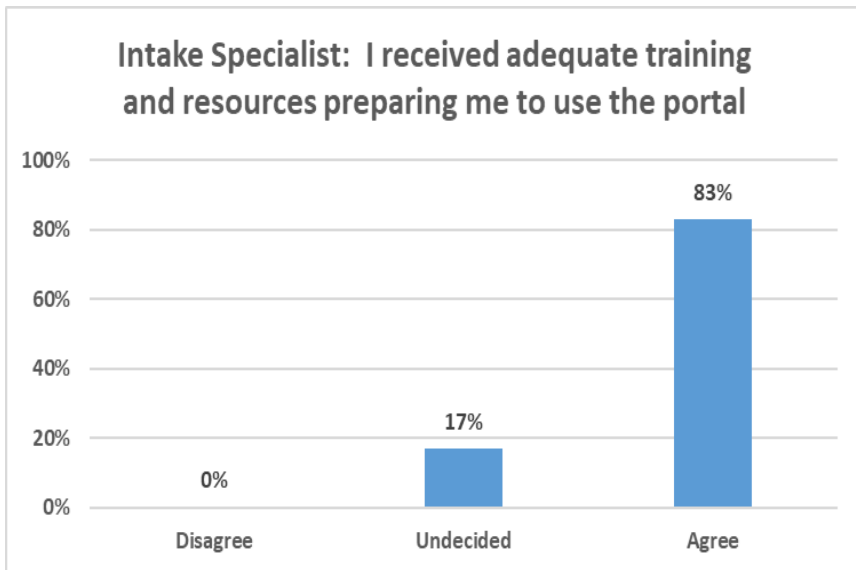
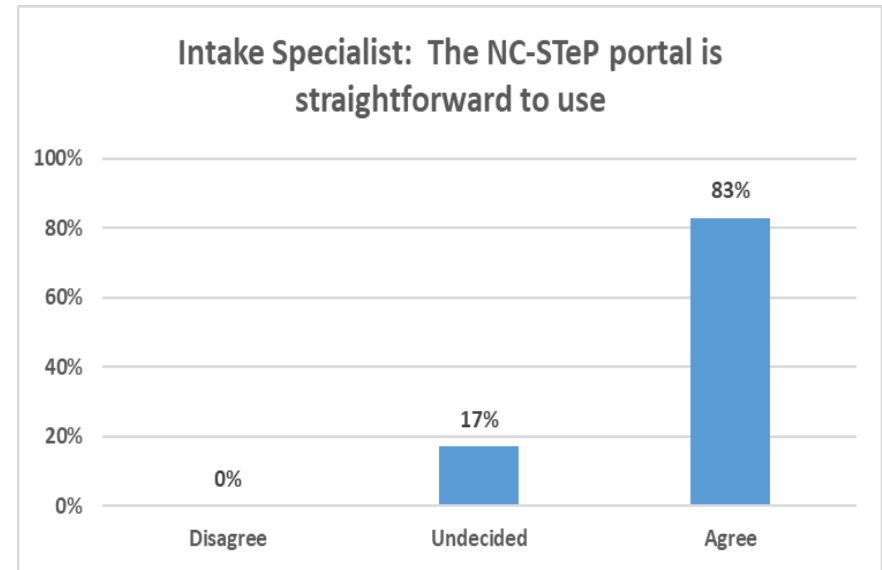
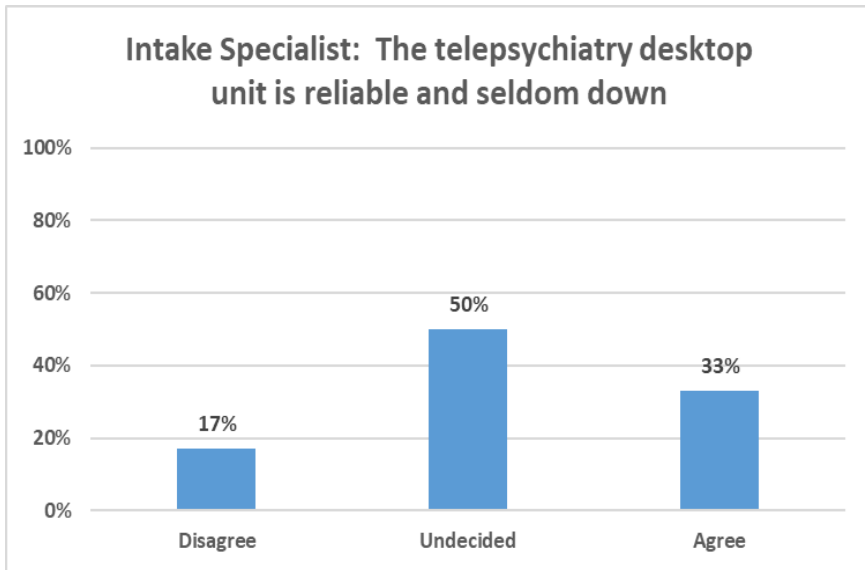
# Model 1 Psychiatric Intake Specialist Results (n=6)



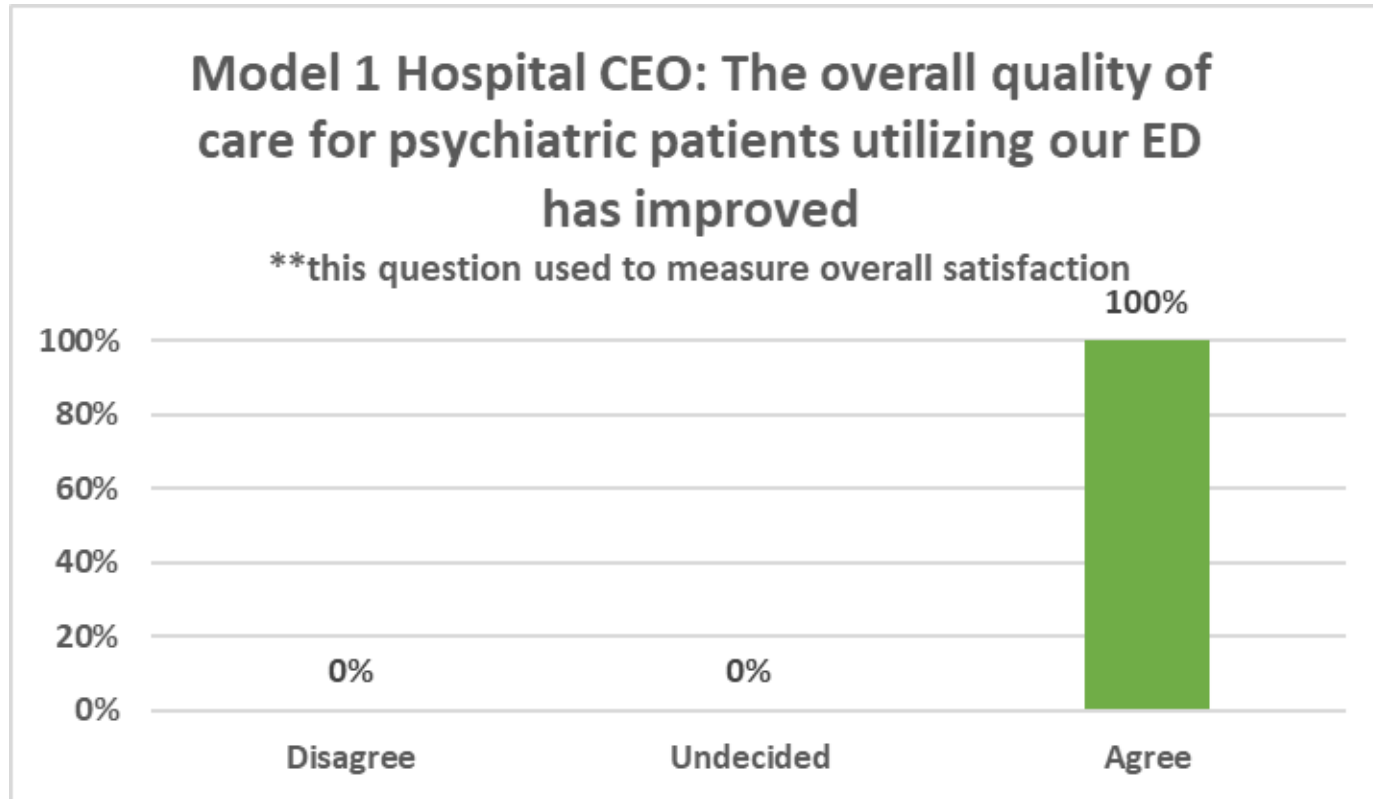
# Model 1 Psychiatric Intake Specialist Results (n=6)



# Model 1 Psychiatric Intake Specialist Results (n=6)

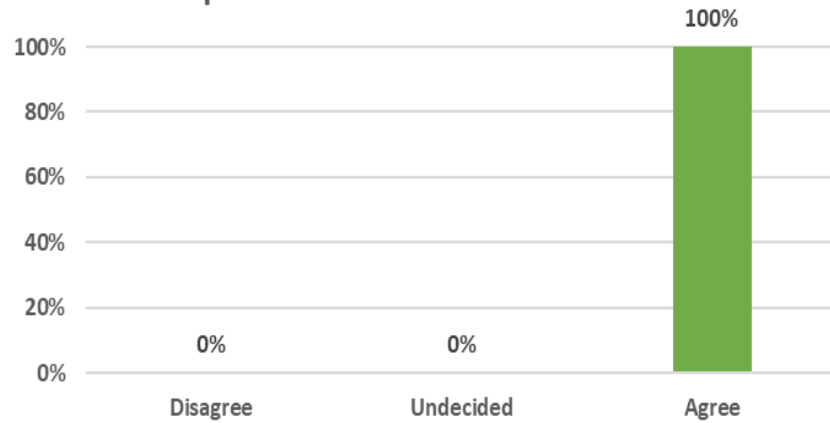


# Model 1 CEO/CNO/CFO Results (n=6)

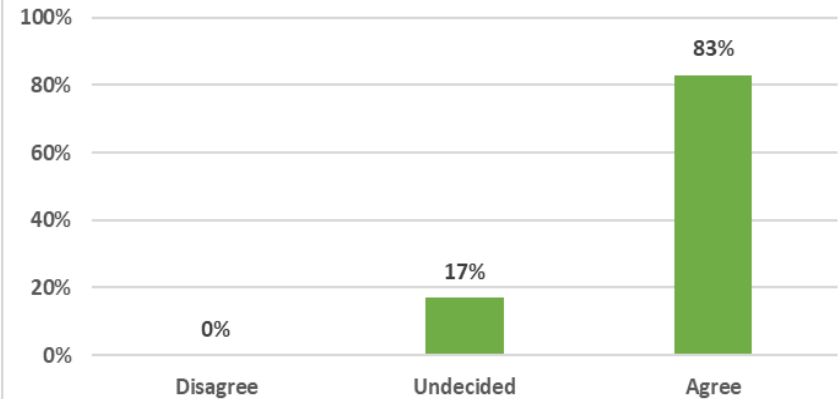


# Model 1 CEO/CNO/CFO Results (n=6)

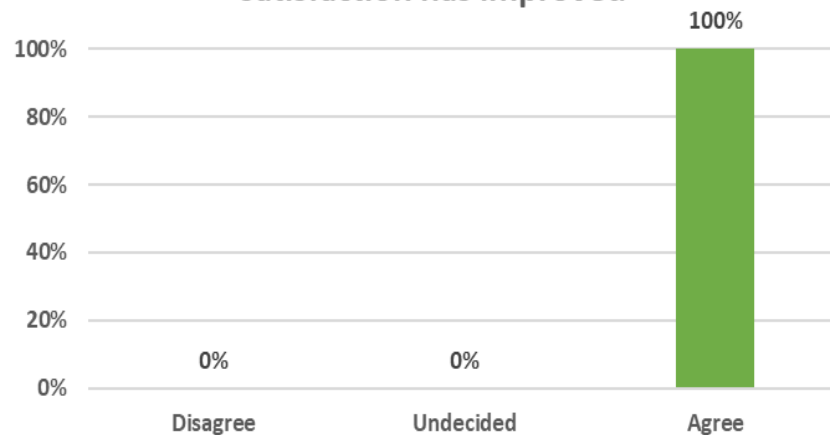
**Model 1 Hospital CEO: The LOS for psychiatric patients in our ED has reduced**



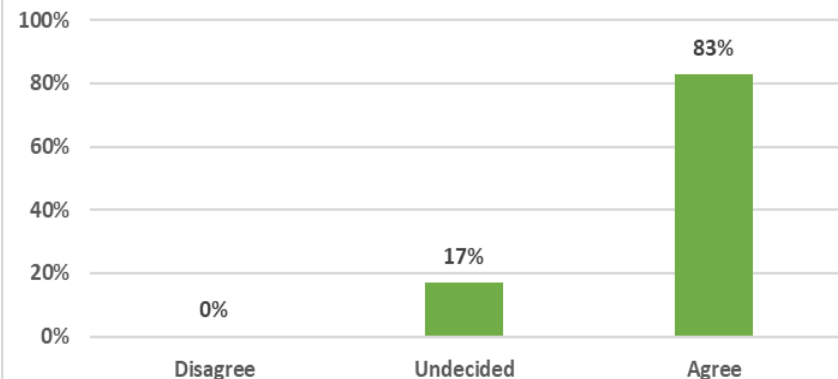
**Model 1 Hospital CEO: Overall, ED throughput has improved.**



**Model 1 Hospital CEO: Overall, ED staff satisfaction has improved**

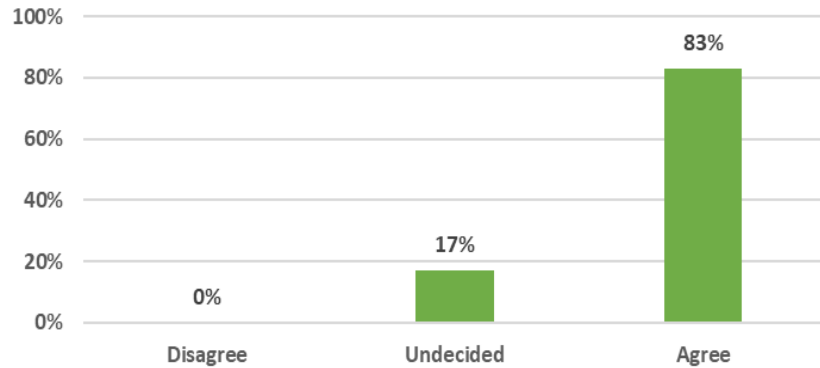


**Model 1 Hospital CEO: There has been an improvement in discharge planning and referrals for psychiatric patients in our ED**

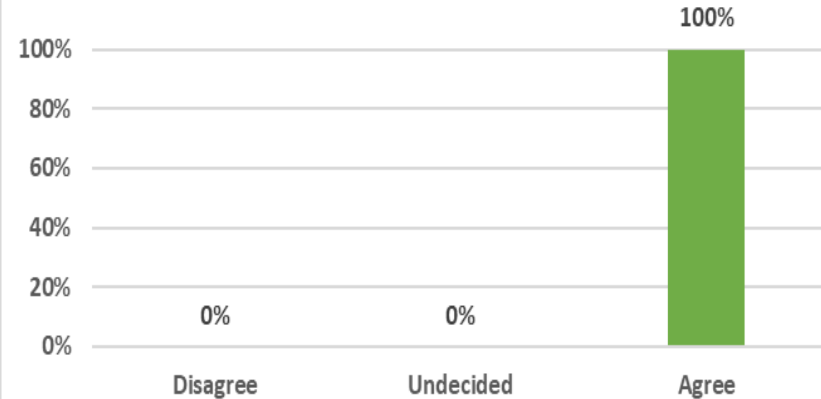


# Model 1 CEO/CNO/CFO Results (n=6)

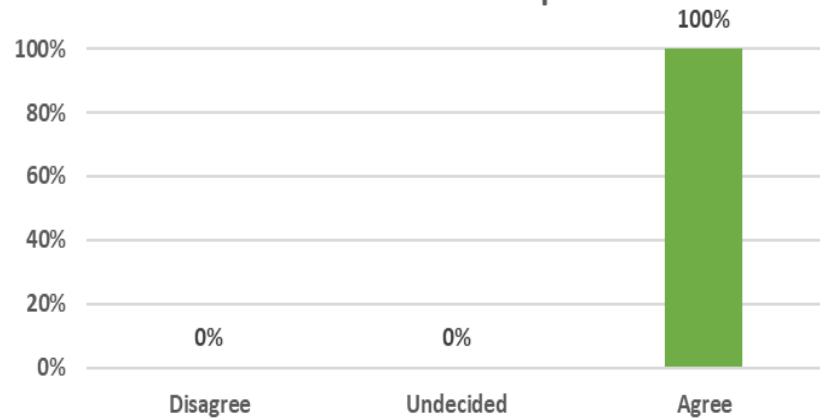
Model 1 Hospital CEO: Medical staff's understanding of mental health issues and treatment options in our ED has improved



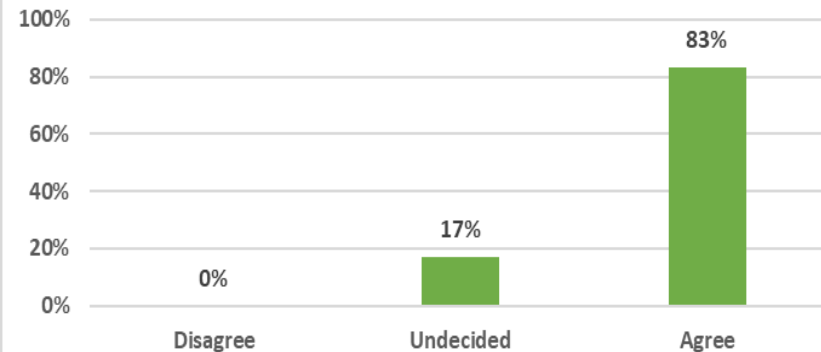
Model 1 Hospital CEO: Our hospital's use of NC-STeP consultants has been cost effective



Model 1 Hospital CEO: I would recommend NC-STeP to other hospitals

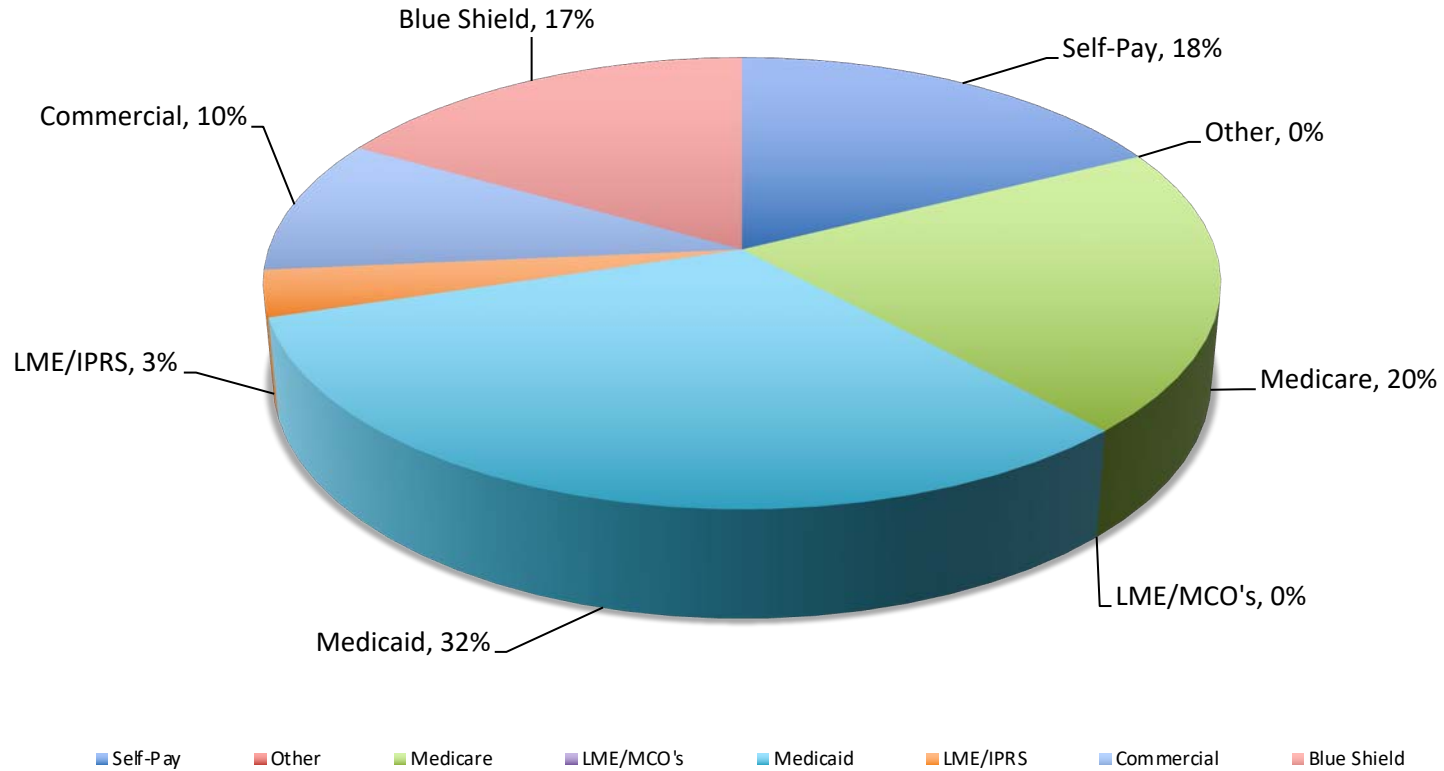


Model 1 Hospital CEO: I would pursue additional uses of telemedicine technology for other medical specialty areas



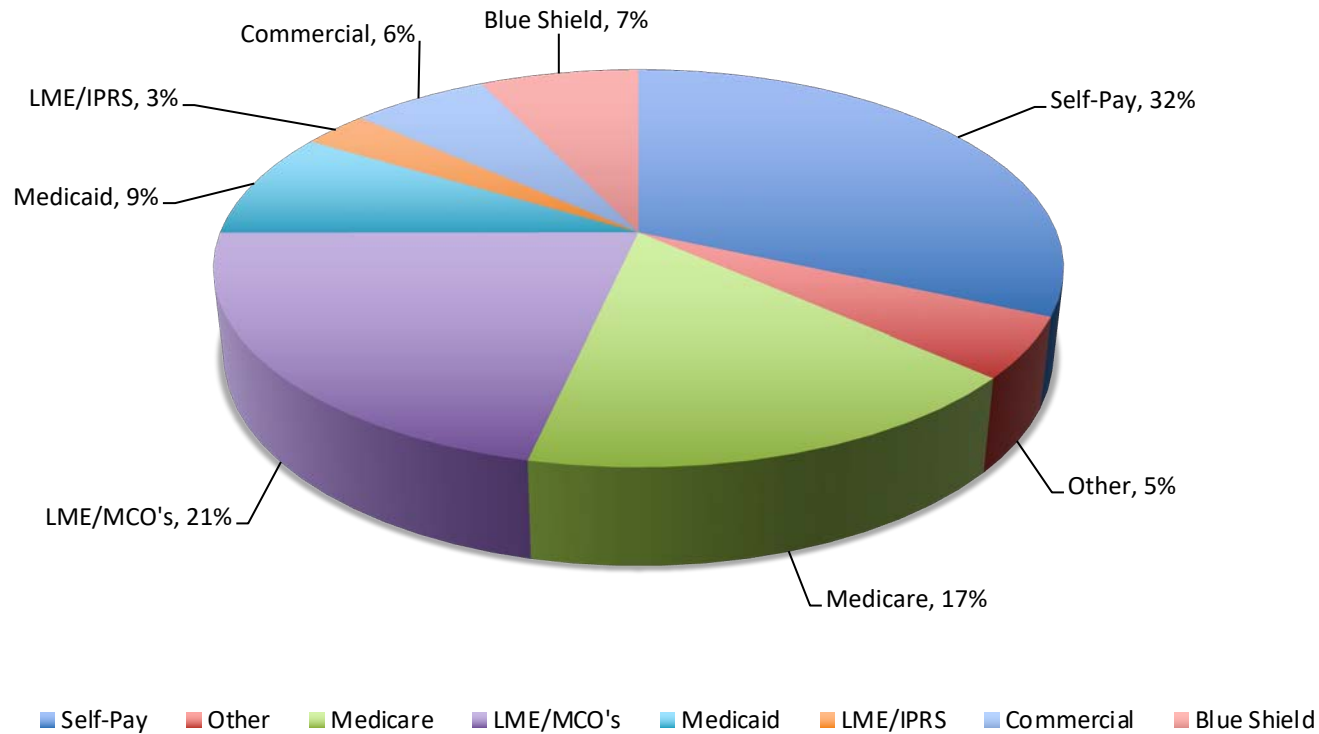
# NC-STeP Charge Mix

## QTD FY2024 - Quarter 1



# NC-STeP Charge Mix - Project to Date

Service Dates: October 1, 2013 – September 30, 2023





# Community-Based Sites as of September 30, 2023

EVALUATION CRITERIA	VALUES/MEASURES REACHED AS OF 09/30/2023
1. The number of full-time equivalent (FTE) providers supporting the program	<b>1.3 FTEs</b>
2. The number of community-based sites contracted	<b>22</b>
3. Number of patient visits with medical (psychiatric) doctor	<b>173</b> <b>PTD= 2,286</b>
4. The number return visits	<b>1,623</b> <b>PTD= 17,145</b>
5. The number of patient visits with a mid-level provider	<b>1,872</b> <b>PTD= 19,645</b>
6. The number of new patient visits	<b>419</b> <b>PTD= 4,849</b>

# NC-STeP Community Patient Visits

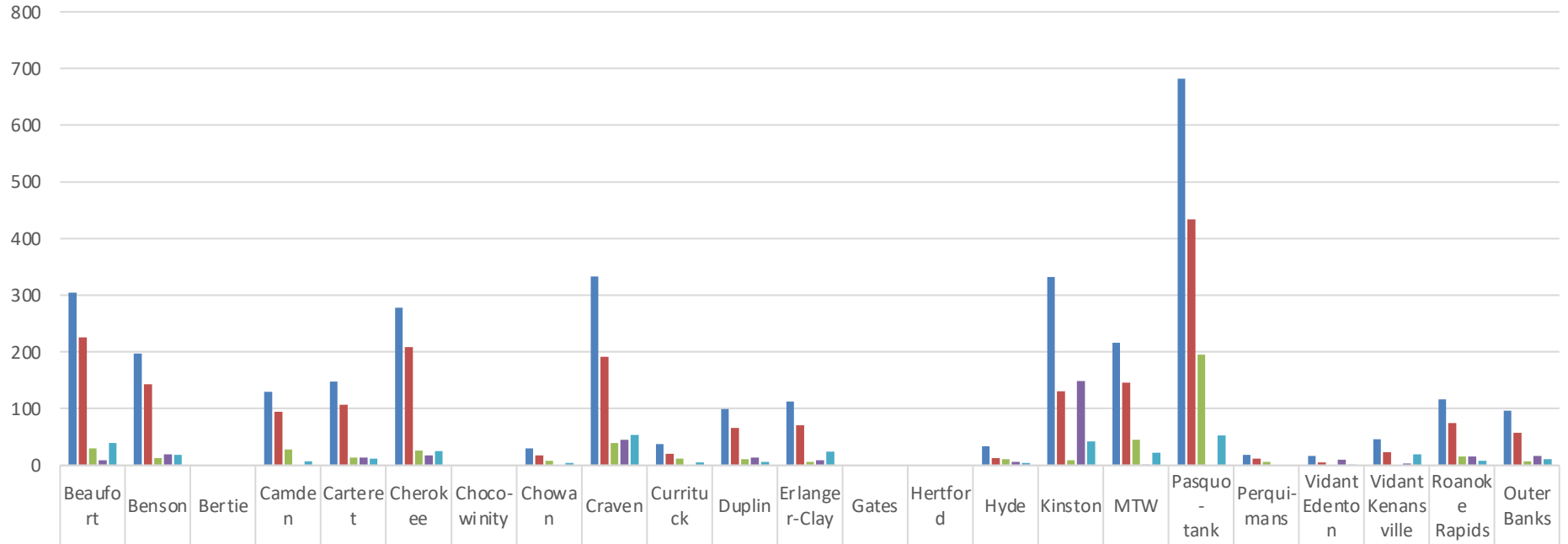
Patient Visits	Since project inception in October 2018	During Calendar Year 2018	During Calendar Year 2019	During Calendar Year 2020	During Calendar Year 2021	During Calendar Year 2022	During Quarter Jan- Mar 2023	During Quarter Apr- Jun 2023	During Quarter Jul- Sep 2023
With Medical Doctor	<b>2,286</b>	8	536	265	316	567	249	172	173
With Mid-Level Provider	<b>19,646</b>	7	2,006	3,217	4,122	4,670	1,904	1,848	1,872
<b>Total Patient Visits</b>	<b>22,036</b>	15	2,633	3,477	4,440	5,253* 17 visits did not specify provider	2,153	2,020* Adjusted for Duplin	2,045

Since project inception there are 109 visits that listed no provider and 5 visits that listed both a mid-level and a doctor.



## NC-Step Appointment by Site

### Appointments, Visits Kept, Rescheduled, Cancelled, No Show July - September 2023

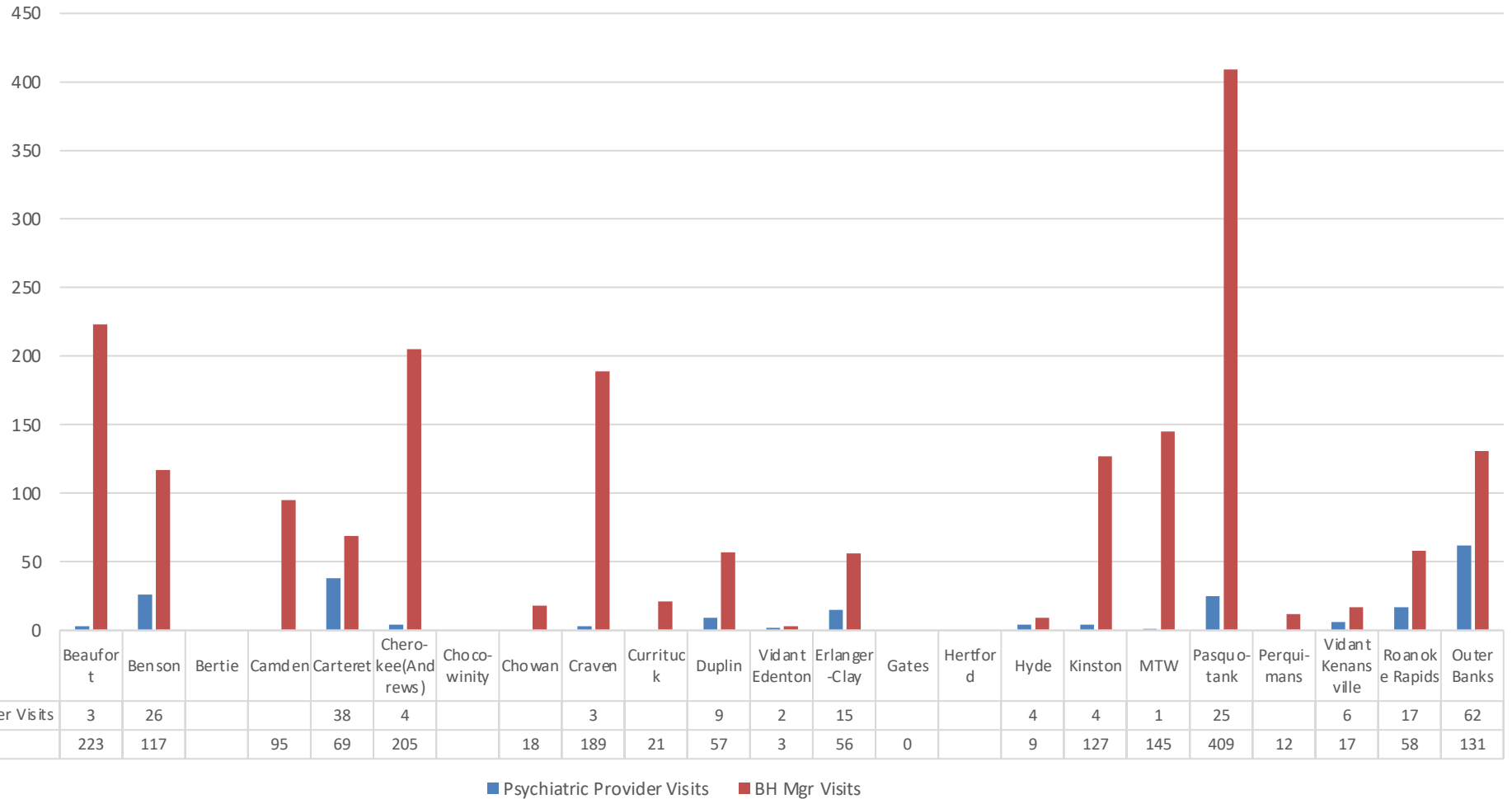


	Beaufort	Benson	Bertie	Camden	Carteret	Cherokee	Chocowinity	Chowan	Craven	Currituck	Duplin	Erlanger-Clay	Gates	Hertford	Hyde	Kinston	MTW	Pasquotank	Perquimans	Vidant Edenton	Vidant Kenansville	Roanoke Rapids	Outer Banks
Total Apts	305	197		130	148	278		30	333	38	99	113			34	332	216	682	19	17	46	117	97
Apts Kept	226	143		95	107	209		18	192	21	66	71			13	131	146	434	12	5	23	75	58
Apts Rescheduled	30	13		28	14	26		8	40	12	11	6			11	9	45	195	6			16	7
Apts Cancelled	9	20			14	18			45		14	9			6	149	2			10	3	16	17
Apts No Show	40	19		7	12	25		4	54	5	6	24			4	42	22	53	1	2	20	8	11

■ Total Apts   
 ■ Apts Kept   
 ■ Apts Rescheduled   
 ■ Apts Cancelled   
 ■ Apts No Show



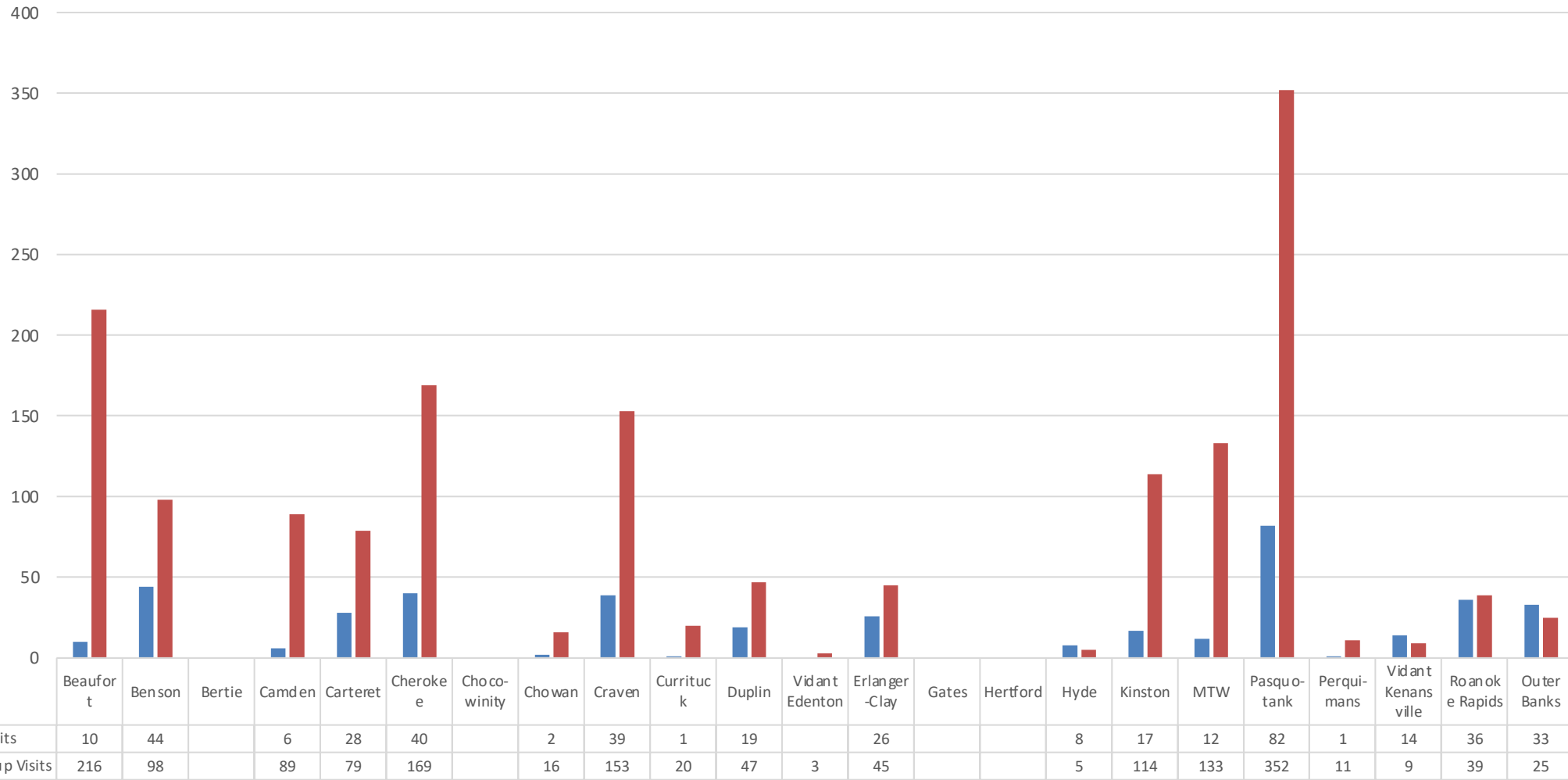
## NC-Step Community Visits by Site by Provider Type July - September 2023



# NC-STEP Community Visits by Site

## New and Follow-Up

### July - September 2023



■ New Visits   ■ Follow up Visits



# NC-STeP Status as of September 30, 2023

- 29 hospitals live
- 60,403 total psychiatry assessments since program inception
- 10,367 IVCs overturned
  - Cumulative return on investment = \$55,927,800  
(savings from preventing unnecessary hospitalizations)
- Three Clinical Provider Hubs with 23 consultant providers
- 32% of the patients served had no insurance coverage (since program inception)

# NC-STeP Status as of September 30, 2023

- 22 community-based sites.
- 21,931 total patient visits since program inception in October 2018.
  - 2,286 total patient visits with a psychiatrist
  - 19,645 total patient visits with a mid-level provider

# Hospital Status Report as of September 30, 2023

## Model 1 - Live



Hospital Name	Contract Date	Portal Go Live
Vidant Outer Banks Hospital	10/01/2013	08/08/2016
Vidant Bertie Hospital	10/01/2013	08/15/2016
Vidant Chowan Hospital	10/01/2013	08/15/2016
Vidant Edgecombe Hospital	10/01/2013	08/15/2016
Sentara Albemarle Medical Center	10/01/2013	08/17/2016
Vidant Beaufort Hospital	10/01/2013	08/22/2016
Vidant Duplin Hospital	10/01/2013	08/22/2016
St Lukes Hospital	03/01/2014	09/07/2016
DLP Harris Regional Medical	07/01/2015	10/14/2016
DLP Swain Community Hospital	07/01/2015	10/14/2016
Erlanger Murphy Medical Center	05/01/2015	10/26/2016
DLP Maria Parham Medical Center	07/01/2015	11/15/2016
J. Arthur Doshier Memorial Hospital	04/01/2015	01/07/2017
Ashe Memorial Hospital	06/01/2015	01/26/2017
Northern Hospital of Surry County	11/01/2015	03/07/2017
Halifax Regional Medical Center	03/15/2015	08/08/2017
Southeastern Regional Memorial	05/01/2014	08/08/2017
DLP Person Memorial Hospital	07/01/2015	08/17/2017
Carteret	02/01/2023	04/01/2023



# Hospital Status Report as of September 30, 2023

## Model 1 - Live



Hospital Name	Contract Date	Portal Go Live
Pender Memorial Hospital	09/01/2014	12/07/2017
DLP Maria Parham Franklin	03/01/2018	02/01/2019
Central Harnett Hospital	07/01/2019	02/21/2020
Betsy Johnson Hospital	07/01/2019	02/21/2020
Iredell Hospital	09/01/2109	04/17/2020
Park Ridge Health	10/01/2018	10/27/20
Hugh Chatham Hospital	03/01/2020	12/8/20

# Hospital Status Report as of September 30, 2023

## Model 2



Hospital Name	Go Live Date/Status
Cape Fear Valley Medical Center	06/2014
Cape Fear Valley Bladen Hospital	07/2014
Cape Fear Valley Hoke Hospital	06/2016

# Hospital Status Report as of September 30, 2023

## Graduated



Hospital Name	Hospital Name
Alleghany Memorial Hospital	Martin County General
Carolina East	Nash General Hospital
Mission Health	Sampson
Columbus Regional	UNC Hillsborough
Davie Medical	WakeMed Apex
DLP Rutherford Regional Medical Center	WakeMed Briar Creek
FirstHealth Montgomery Memorial Hospital	WakeMed Cary
FirstHealth Moore Regional Hospital	WakeMed Garner
FirstHealth Regional Hospital – Hoke	WakeMed North Healthplex
FirstHealth Richmond Memorial Hospital	WakeMed Raleigh
FirstHealth Sandhills Regional Medical	WakeMed Raleigh Children's ED
Lexington	WakeMed Psychiatric Observation Unit
Wilson Memorial Hospital	DLP Haywood Hospital
UNC Chatham	Novant Brunswick
Novant Clemmons	Novant Forsyth Medical
Novant Kernersville	Novant Presbyterian Hospital
Novant Rowan	Novant Thomasville
Cone Health Behavioral Health Hospital	Cone Health MedCenter High Point
Wesley Long Hospital	Annie Penn Hospital
Moses H. Cone Memorial Hospital	Women's Hospital – Cone Health
Alamance Regional Medical Center	UNC Johnson – Clayton

# Hospital Status Report as of September 30, 2023

## No Information Available



Hospital Name	Program Status	NC-STeP Model
Caldwell Memorial	TBD	TBD
Cherokee Indian Hospital	TBD	TBD
New Hanover	TBD	TBD
Novant Franklin Medical	TBD	TBD
Onslow Memorial	TBD	TBD
Scotland Health	TBD	TBD
Wilkes Regional Medical	TBD	TBD

# Community Based Site Report as of September 30, 2023

## Under Contract



Albemarle Regional Health Services – Camden	Aug-18	Live
Albemarle Regional Health Services – Pasquotank	Aug-18	Live
Hyde County Health Department	Aug-18	Live
Martin County Health Department	Aug-18	Live
Craven County Health Department	Apr-19	Live
Duplin County Health Department	May-19	Live
Albemarle Regional Health Services – Gates	Nov-19	Live
Erlanger Health – Andrews	Aug-20	Live
Beaufort County Health Department	Sep-20	Live
Albemarle Regional Health Services – Chowan	Nov-19	Live
Albemarle Regional Health Services – Currituck	Nov-19	Live
Albemarle Regional Health Services – Perquimans	Nov-19	Live
Albemarle Regional Health Services – Bertie	Nov-19	Live
Albemarle Regional Health Services – Hertford	Nov-19	Live
Vidant Family Medicine – Chocowinity	Jan-21	Live
Carteret OB-GYN Associates, PA	Jan-21	Live
ECU Health Women’s Edenton (Broad St.)	Dec-21	Live
ECU Health Women’s Edenton (Earnhardt Dr.)	Apr-21	Live
ECU Health Women’s Kenansville	Dec-21	Live
Benson Health	Mar-22	Live
ECU Health Kinston	Mar-22	Live
Roanoke Rapids	Jun-22	Live
Outer Banks Women's Care	Jul-22	Live

# Community Based Site Report as of September 30, 2023

## Terminated



Hospital Name	Contract Start Date	Termination Date
Macon County Health Department	February 2019	July 2020
Wilson County Health Department	February 2020	May 2021

## Contact

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*Professor and Chair Emeritus*

Department of Psychiatry and Behavioral Medicine  
Brody School of Medicine | East Carolina University

*Executive Director*

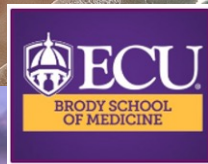
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Phone: 252.744.2660 | e-mail: [saeeds@ecu.edu](mailto:saeeds@ecu.edu)

Website: <http://www.ecu.edu/psychiatry>

Mail: 600 Moye Boulevard, Suite 4E-65,  
Greenville, NC 27834





NORTH CAROLINA  
STATEWIDE TELEPSYCHIATRY PROGRAM

