Appendix Table 1. Adjusted Utilization Outcomes for Emergency Department Telepsychiatry Patients Treated in South Carolina from March 2009-June 2013 including those that received telepsychiatry but did not have a matched control (N=16,327)

Outcome:	Estimated effect of telepsychiatry	95% CI	p-value
Odds of admission (OR)	.41	.19 –- .88	.022
LOS (days)	-.43	-.73 –- -.12	.006
Combined effect (days)	-.87	-1.27 –- -.45	<.001
30-day outpatient follow up (OR)	5.55	4.48 –- 6.86	<.001
90-day outpatient follow up (OR)	5.99	4.87 –- 7.34	<.001

OR: odds ratio
p-values are derived from robust standard errors clustered at the hospital level (61 clusters)
All models include hospital random effects and are adjusted for weekend versus weekday visit, sex, age, and race.

Appendix Table 2. Adjusted Cost Outcomes for Emergency Department Telepsychiatry Patients Treated in South Carolina from March 2009-June 2013 including those that received telepsychiatry but did not have a matched control (N=16,327)

Outcome:	Estimated effect of telepsychiatry	95% CI	p-value
Inpatient costs in the 30 days following index ED visit	-$1,586	-$3,964 –- -$791	.191
Total health care costs in the 30 days following index ED visit, index visit included	-$368	-$2,451 –- $3,188	.798

p-values are derived from robust standard errors clustered at the hospital level (61 clusters)
All models include hospital random effects and are adjusted for weekend versus weekday visit, sex, age, and race.