

## Meeting Minutes

Tuesday, September 15, 2020 | 10:00 - 12:00 am

Virtual Zoom Only Meeting

Member attendance					
Sen. Randi Becker	Y	Kathleen Daman	Y	Dr. Ricardo Jimenez	Y
Sen. Annette Cleveland	N	Dr. Josh Frank	N	Dr. Geoff Jones	N
Rep. Marcus Riccelli	Y	Joelle Fathi	Y	Dr. Catherine (Ryan) Keay	N
Rep. Joe Schmick	Y	Karen Gifford	Y	Scott Kennedy	Y
Dr. John Scott	Y	Dr. Frances Gough	Y	Mark Lo	Y
Dr. Chris Cable	Y	Sheila Green-Shook	Y	Denny Lordan	Y
Jae Coleman	N	Emily Stinson	N	Adam Romney	Y
Stephanie Cowen	Y	Sheryl Huchala	Y	Cara Towle	Y
				Lori Wakashige	N

Non-Member Presenters: Rep. Mia Gregerson (D-33), Sabrina Roach (National Digital Inclusion Alliance), Sean Graham (WSMA), Christopher Chen (HCA), Micah Matthews (Legislative Director, WA Medical Commission), Leo Morales (UW & Latino Center for Health), Nicole LaGrone (WSTC & UW Medicine)

Public attendees (alphabetical by first name):

Chad Gabelein (Multicare), Erin Jones (Independent Consultant), Hugh Ewart (Seattle Children's Hospital), Jennifer Crown (Optometric Physicians of Washington), Joana Ramos (Washington State Coalition for Language Access), Jodi Kunkel (HCA), Kai Neander (Providence), Lauren Baba (UW), Leslie Emerick (Independent Lobbyist), Lia Carpeneti (Community Health Plan of Washington), Lynn Kovacevich-Renne (WA Podiatric Medical Association), Sara Stewart (Melanie Stewart and Associates), Samir Junejo (WA State), Shannon Thompson (WMHCA), Sophie Doumit (WSDA), Stephanie Shusan (CHPW), Tracie Drake (WA DoH)

Meeting began at 10:01 am

# WashingtonState Telehealth Collaborative

## Welcome and Attendance

John Scott [[0:00](#)]

## Review of Meeting Minutes July 2020

All [[2:33](#)]

Dr. Scott (Chair) reviews minutes. Dr. Ricardo Jimenez (SeaMar) motions to approve minutes. Seconded by Dr. Francis Gough (Molina Health Care). Unanimously approved.

### Action Items:

- Ms. LaGrone (Collaborative Program Manager) to post approved July notes on Collaborative Website

## Sen. Randi Becker Send-Off

All [[5:05](#)]

Dr. Scott (Chair) reviews Sen. Becker's long history as a telehealth champion and visionary over her career as Senator. Sponsored and passed 8 bills directly related to telehealth including payment parity, expansion of originating sites, training standards, and proxy credentialing to name a few. She served for 12 years on health care committee and was chair for four. Because of her work, Washington has some of the most progressive telehealth policies in the country.

Rep. Schmick (R-09), Rep. Riccelli (D-03), Cara Towle (UWM), Denny Lordan (Providence) and Dr. Scott (Chair) shared their thoughts and memories working alongside Sen. Becker and thanked her for her work. Sean Graham (WSMA) announced Sen. Becker is nominated as the WSMA Legislator of the Year Award.

### Action Items:

- None

## Policy Update: Broadband Access

Rep. Marcus Riccelli (D-03), Rep. Mia Gregerson (D-33), Russ Elliot (Director, WA Office of Broadband) [[22:23](#)]

**Rep. Gregerson (D-33)** shared updates on efforts to address digital equity and welcomed participation from health care sector in digital equity workgroup.

- Rep. Gregerson sponsored [HB 2414](#) last year, based on [Digital Equity Act](#) proposed by Sen. Murray (D-WA). Focuses more on devices and digital literacy than infrastructure, complementing the efforts of other departments and legislators.

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- Since April, workgroup I-ACT has met to discuss needs and formulate plan for digital equity policy, programming, and funding. Included range of participants from different sectors – education, elders, employment, and tribal groups. Group working with [National Digital Inclusion Alliance](#) and looking at other models used in programs around the country.
- Hope to increase telehealth participation in I-ACT to help identify opportunities for collaboration. For example, identifying how to leverage [K-20 network](#) for healthcare programs. Example given of schools handing out hotspots to students – could be used for telehealth as well.

## Questions:

- Is I-ACT working with Sen. Carlyle on [SB 5935](#)? Yes, his bill is focused on infrastructure, whereas I-ACT is working on building vocabulary around devices and exploring digital literacy programs.

**Russ Elliott, Director of the Office of Broadband** shared updates from his efforts to [collect data on internet access, speed, and pricing across Washington](#). His office has collected more than 30,000 data points in the past month, which will then be used to identify areas with the most need and help leverage conversations with internet providers. Individuals reporting to the broadband coverage map can also report lack of access due to high costs.

- Discussed the importance of building infrastructure that will be able to handle future speed expansion and meet the requirements of [SB 5511](#) – which sets minimum speed goals across the state by 2028.
- Office is also actively reaching out to communities that need access but don't know how to get started such as some tribal communities.
- Washington in unique position with emerging technologies – exploring options with SpaceX, Microsoft, and Amazon.

## Questions:

- Upload/download speeds on map are higher than what some health care organizations are using, how are cut-off points developed? Assumes more than one person in household needs video conference capabilities – Overall approach to internet needs require looking at applications vs. speeds. For example, some telemedicine requires 100 mb/s upload speed.

## Action Items:

- Follow up with Rep. Gregerson and Sabrina Roach on increasing health care representation at I-ACT workgroup meetings
- Follow up with Rep. Gregerson and Sabrina Roach on presenting at November 15 meeting

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## Policy Update: Other

Sean Graham (WSHA), Micah Matthews (Washington Medical Commission), Nicole LaGrone (WA TH Collaborative) [[50:31](#)]

Sean Graham (WSHA)

- Gov. Inslee's 4 State Telehealth Alliance with Washington, Colorado, Oregon, and Nevada. [Press release](#) outlines principles of agreement – equity and access highlighted as issues. WSHA followed up with governor's office for more information and informed them of Collaborative's expertise if needed. No concrete next steps at this point.

Chris Chen (HCA)

- HCA also has not had any directives or concrete ways forward with 4-State alliance. Our policies are ahead of other states.
- HCA gathering feedback from ACH and community and planning for future of telehealth program. No specific updates.
- Refugee Health Program out of DOH – work with providers, Harborview health point and International Rescue Committee. HCA shared telehealth policies with Refugee Health Program.

Micah Matthews (WMC)

- Currently working to create telemedicine rules out of existing guidelines and policies, as requested by various stakeholders. First official rulemaking meeting to be held, but have draft of existing policies and guidelines.
- Commission issues statement encouraging use of telehealth and FAQ. And pandemic regulatory intent statement which encourages providers to focus on treating the patients and to not be overly burdened with regulatory standards.
- Medical licensing application now available only online, also trimmed the data required to apply for the license by 60-70%. Now relying instead on national database for verification. Changes have resulted in reduction in waiting times, for a new doctor it's been cut in half.
- Training requirements of SB 6061 – reached out to HSQA for feedback on who is obligated to complete telehealth training.

Nicole LaGrone (Collaborative Program Manager)

Policy items to discuss at next telehealth meeting:

- Equity in Telehealth – ADA requirements and LEP
- Nurse Licensure Compact
- Remote patient monitoring and store and forward

Action Items:

- Follow up with Micah Matthews on HSQA decision on SB 6061 scope

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- Follow up with members on speakers for Nov meeting policy items

## Equity in Telehealth

Dr. Leo Morales (Professor and Assistant Dean, Office of Healthcare Equity, UW & Co-Director, Latino Center for Health) [[1:04:19](#)]

Dr. Morales confirmed there is not a lot of data to share yet; however, he introduced a framework to help identify potential inequities in telehealth access and usage.

- Helpful to think about potential inequities in telehealth within a social Ecological Model – posits health can be conceptualized across levels from the society as a whole, down to the individual level.
- **Telehealth Societal, Community, and Health System Factors** – Some of the challenges include Internet access and speed, quality of telehealth experience, creating virtual spaces where marginalized groups feel welcome. Also, patients report portal navigation complexity and how to best prepare for telehealth Visit.
  - For example: Internet access varies across state. In Eastern Washington counties with limited internet access and have higher proportions of Latinos.
- **Family and Individual Factors** – personal technology, privacy within living circumstances, limited English proficiency, disabilities, and support in how they access the visit itself.
- Data from University of California San Francisco show access to healthcare for certain groups has declined since the introduction of telehealth such as 65+, Non-English language preference, Medicare, and Medicaid populations.

Question/Discussion:

- **How can we help?** Need more assessment about where disparity is showing up. Coupled with community engagement. Community based organizations have valuable information and insights into this area.
  - SeaMar – We do have a lot of information here at SeaMar, and would be open to collaborate and also help identify ways to collect data on some of the gaps and make sure we aren't leaving anyone behind.
- **What are the drivers of those gaps?** Medicare might not have ability to connect, others face infrastructure, and financial gaps where internet is available but we can't afford it.
- Largest concentration of Latinos are in rural areas, these are state level issues – too difficult to solve this on a single clinic level.
- **Can we have statewide data collection?** Sen. Becker - Would have to do a budget request to hire actuarial to go in. May have some resources already.
- Comment that some of these barriers mirror those in education as well.

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## Action Items:

- Follow Up with Sen. Becker on resources for state level data collection on telehealth uptake, particularly for Medicare, Medicaid, LEP, and 65+

## Collaborative Training Updates

Nicole LaGrone (WA TH Collaborative) [[1:27:34](#)]

- **Collaborative collaborating with NRTRC who will host interactive training on their website.** NRTRC does not have a limit on the number of people who can access the training and can download a certificate of completion. Once content is in final stage, we will send it out to member's for final review and sign off.
- **Behavioral Health Institute creating BH Specific Training** – separate training needed given the variance in regulations around behavioral health such as prescriptions, credentialing, reimbursement and privacy. Will need to clarify when BH vs. Medical training is appropriate.
- **Training Outline Update** – adding when telemedicine is not appropriate, conducting a physical exam via telemedicine, and interpreter services.
- **Survey Responses from providers offering telemedicine in WA** – overwhelmingly largest obstacle was helping patients join the visit, troubleshooting IT issues with them, and the lack of physical exam, and when to refer someone to in person.
- **Challenges to training update** – training needs to apply to broad range of health care professionals and current Medicare reimbursement policies are not confirmed.
- **Feedback on Training Content:**
  - **Medicare** – It changes every year – could link to where factsheet and physician fee schedule are posted to keep it ever green.
  - **When is Telemedicine Appropriate?** – Trying to establish guidelines without being too prescription. Current list of “Common Uses for telemedicine” may be too limiting. Collaborative suggests editing slide to more general guidance - If you can provide appropriate medical advice without an in person exam, then it is important. What information do you need to make a diagnosis or therapeutic decision.
  - **Communications Plan** – Have preliminary list of organizations. Need to contact specialty groups.

## Questions:

- **What is the timeline for the training?** Needs to be up and available by Jan 1. Will get further clarification from Washington Medical Commission.
- **Are tele-presenters included?** We are waiting on feedback from the Washington Medical Commission.

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- **Will the training be downloadable for other institutions to upload to their own training platforms?** To be determined.
- **Will Medicare coverage be required as part of institutional training?** TBD. No issues as long as it meets the requirements of SB 6061.

## Action Items:

- Program Manager to send out google document of communications plan to members.
- Training review team to share training draft with members for final review.

## Wrap Up

Nicole LaGrone (WA TH Collaborative) [[1:56:17](#)]

- Next meeting on November 17, 1 – 3 pm
- Draft Agenda Items
  - Broadband discussion
  - Nurse Licensure Compact
  - Telehealth and ADA
  - Remote Patient Monitoring & eConsults

## Public Comment Period

All

- None

Meeting adjourned at 11:57 am

Next meeting: November 17, 2020. 1 pm – 3 pm.  
Via Zoom.