Meeting Minutes
Tuesday, November 27
9:30-11:30am
University of Washington, Health Sciences Library, Room T229
Seattle, WA

Member attendance:

<table>
<thead>
<tr>
<th>Name</th>
<th>Status</th>
<th>Location</th>
<th>Zoom</th>
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<tbody>
<tr>
<td>Sen. Randi Becker</td>
<td>y</td>
<td>Chad Gabelein</td>
<td>zoom</td>
<td>Denny Lordan</td>
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<tr>
<td>John Boze</td>
<td>zoom</td>
<td>Dr. Frances Gough</td>
<td>y</td>
<td>Sarah Orth</td>
<td>y</td>
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<tr>
<td>Dr. Chris Cable</td>
<td>n</td>
<td>Sheila Green-Shook</td>
<td>zoom</td>
<td>Adam Romney</td>
<td>y</td>
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<tr>
<td>Sen. Annette Cleveland</td>
<td>n</td>
<td>Sheryl Huchala</td>
<td>zoom</td>
<td>Rep. Joe Schmick</td>
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<tr>
<td>Stephanie Cowan</td>
<td>y</td>
<td>Dr. Richardo Jimenez</td>
<td>n</td>
<td>Dr. John Scott</td>
<td>y</td>
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<tr>
<td>Kathleen Damen</td>
<td>y</td>
<td>Dr. Geoff Jones</td>
<td>n</td>
<td>Cara Towle</td>
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<td>Brodie Dychinco</td>
<td>zoom</td>
<td>Dr. Catherine (Ryan) Keay</td>
<td>zoom</td>
<td>Lori Wakashige</td>
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<tr>
<td>Joelle Fathi</td>
<td>y</td>
<td>Scott Kennedy</td>
<td>n</td>
<td>Rep. Marcus Riccelli</td>
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<td>Jamie Neill</td>
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Public attendees: David Arbaugh (OCHIN), Stafford Strong (WA State Senate), Dr. Joshua Frank (American College of Emergency Physicians), Traci Drake (DOH health, office of health professions), Marissa Ingalls (Coordinated Care), Sharron Lindsey, Leslie Emerick (WA State Hospice & Palliative Care & Home care association of WA), Lisa Roach (Providence systems telehealth), Michael Matella (The Everett Clinic), Nancy Lawton, Kathrine Weill, Ian Goodhew (UW Medicine), Evan Klein (WA State Senate), Suzanne Gallant (Swedish), Lena Rubinstein (Seattle Children’s)

Meeting convened at 9:33am.

I. Review of Meeting Minutes October 2018
   a. Minutes reviewed
   b. Ms. Fathi motioned for approval, Ms. Daman seconded approval
   c. Motion passed unanimously to approve meeting minutes
   d. ACTION: October 2018 meeting minutes to be posted on Telehealth Collaborative Website

II. Follow up on Telehealth Training (Sarah Orth, John Scott)
   a. Ms. Orth & Sen. Becker met and identified that this training should be more open to different provider types and not limited to Physicians. The training deck references the most common licensing types.
   b. Dr. Scott Reached out to Occupational Therapy, Physical Therapy, Speech Therapy to connect with their Telehealth experts and see their trainings.
c. To make the deck more comprehensive, the following items have been added:
   1. Additional billing requirements.
   2. More Credentialing & Privileging info
   3. Split up reimbursement info
   4. Hyperlinks throughout
   5. Web presence & webside manner examples
   6. Provider checklist included at the end

d. **Action:** Mr. Romney volunteered to review.

e. Make available as publicly as we can. Exploring making this into a CME. Not mandatory, but there if needed.

f. Dr. Scott reached out to MQAC to see if this could be made available on the MQAC website, still waiting to hear back. Ms. Drake shared that to add to DOH site it would have to be reviewed by DOH communications office first.

g. **Action:** Add this to WSHA WSNA, WSMA, NCQAC and MQAC websites.

h. **Action:** Ms. Fathi suggested adding the REVISED American Nurses Association telehealth principles when they are published in early 2019 to this deck she will send that to Ms. Orth.

i. **Action:** Send Dr. Scott & Ms. Neill edits this week. We can post to our community partners after Mr. Romney’s review.

j. Question: How does credit for the training get granted?

k. Suggestion: provide a certificate attendance. If this is provided once the training is complete, no one has to track it.

l. **Action:** Ms. Towle and Ms. Fathi will look into LMS systems used by School of Nursing & School of Med. Ms. Fathi will bring this up with the nursing commission. Ms. Fathi to inquire with Nursing Care Quality Assurance Commission about posting on their website. Ms. Fathi to inquire with the Washington State Nurses Association about loading the telehealth education content on their learning management system. We were going to wait on approaching the UW SON until we understand the outcome of other options, at this point; there will likely be a significant cost involved with UW SON. Ms. Towle to look into SOM.

m. **Our goal is to go live in January 2019 with a plan to revise at least annually.**

n. **Action:** Mr. Arbaugh will share this training with his group and so will Ms. Towle.

o. **Action:** Maybe some of the boards like Pharmacy Board, PT board, would be able to post this.

p. **Action:** If we are reaching out to Veterinary medicine and dentistry? Are they in our scope? Ms. Drake said they would be open to this and it might be something that they might want to put on their web page. It would be up to the individual boards and commissions to make that decision.

III. **Proxy Credentialing (Adam Romney)**

a. Mr. Romney walked us through his slide deck (please see attached slide deck for more details).

m. **Question:** Would a telemedicine provider need to have a hearing if they aren’t working out? This is largely a service contract; it should be laid out in writing in the contract.

n. **Question:** Once on staff providers have due process rights, do the telemedicine providers have to go through due process for the hospital and the telemedicine entity? This is largely a services contract between a hospital and a vendor. If you build in some terms into the service agreement to say the hospital has the ability to schedule and say who should be on the schedule. You can work through the scheduling language to address if we expressed concerns about a specific doctor in two consecutive notes, we will meet and discuss appropriate action. Ultimately, the hospital controls the schedule.

o. **Question:** Do the carriers have to address telemedicine differently? Mr. Romney said yes. CMS and Medicare have very specific privileging and credentialing rules. Given the type of telemedicine services currently covered by Molina, and following CMS rules they currently do not have a separate privileging and credentialing process for telemedicine providers.
p. **Action:** The Collaborative could provide a template agreement for some of the rural facilities. Also create some suggested bylaws if an update is needed to incorporate telemedicine. These would be created as a resource to see that the language will look like.

IV. **Discuss 2018 Telehealth Collaborative report:**
   a. **Action:** Review draft report and send Dr. Scott and Ms. Neill your edits.
   b. **Action:** Mr. Dychinco will send over some brief edits. Recalled reading that Store and Forward was out of scope for payment parity. He would like that brought up. In reviewing the draft legislation, it appears that store-and-forward is in scope for payment parity. He would like it to be reflected that that was not particularly discussed in the actual collaborative meetings.

V. **Bills Proposed by Sen. Becker:**
   a. **Action:** Please provide Senator Becker information on any areas in the Payment Parity Bill we have agreement and disagreement on. This will be dropped as a bill for hearings unless we get different feedback.
   b. Ms. Orth & Sen. Becker wrote up 2 new bills. **Action:** Ms. Neill will scan and send to the group.
   c. RCW 70.41.230 Telehealth Privileging and credentialing.
      1. This bill allows a distant site and originating site to share privileging.
      2. The only change is that it is now including credentials.
      3. Currently law only has privileging, this would add credentialing.
      4. Would bless proxy credentialing for providers, not limited to doctors.
   d. New Bill providing training for Telehealth services.
      1. Specifically mentions medical doctors, doctors of Osteopath, physician's assistance, certified and nurse practitioners who provide clinical services by telehealth.
      2. Training required would involve an Initial training, peer review process, and an acknowledgement of understanding form.
      3. This training would need to be repeated every 3 years. Still discussing who keeps track of this training. Want it to be completed electronically. Allows 3rd parties to provide training.
      4. If a system already has training in place they can use that training and could earn CME.
      5. This is really to fill the gap for the systems that don't have training.
      6. Question: Are Physician's assistants included? Yes. Recommended that the provider is responsible for keeping track of training. Should follow recertification guidelines.
      7. Question: When a provider goes through a vendor for training does the vendor report that to the state? Does the state keep track? In the bill it is noted that the training is not complete until the vendor submits the records to the department.
      8. Question: If you do the training with your license renewal, would you need the department to keep the records? Theoretically the vendor would notify the department anyway.
      9. At NQAC, they audit records; they do not hold records for continuing education. Physicians would have to maintain their own records. If you are audited you have to provide it to the department. It would be a challenge to make this a requirement if telemedicine is not at that facility.
      10. Recommend using the language from the suicide bill with respect to tracking training.
      11. Question: Is there standardized content? What does the training need to cover? It shall include training on current law, liability consent, patient location protocols and other criteria established by the department. Sen. Becker wanted added, "In conjunction with the WA State telehealth collaborative."
      12. Change language to include all healthcare professionals that require licensure in WA State for clinical practice. Site to the licensure RCW.
13. Question: Would telehealth vendors be required to do this training? Yes, almost all of them have it already.

14. Decision: The Medical Commission would need to approve the training; this should be called out in the RCW. We could set a standard in the RCW. Is it truly the honor system? Need to think about a backend reinforcement.

15. This will be run through the DOH and MQAC with these revisions.

16. **Action:** When we have the hearings on these, Sen. Becker is asking everyone to call in to the chairs and ask them to hear these bills, and come in and testify so they know there was a big effort to do this.

17. Question: What is the current routine for CME audits? The Medical Commission audits all professionals each year with random audits. One concern is how can we get proof that someone is providing telemedicine? It would be great to have a standard for all telehealth practitioners.

18. May want to add into the RCW that in the setting of a vendor of telehealth services, who are providing services within the state of Washington, can go through one of the registered vendors with the state for their training to provide options. This would make it easier for providers to gain training.

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**VI. Advice on Telehealth Technical Assistance Center (John Scott)**

a. Question: What was Sen. Becker’s vision? A peer to peer, where people have a place to go and look at what others are doing.

b. Have an NRTRC come speak with us.

c. **Action:** Dr. Scott will look at what NRTRC has done.

d. There is the technology resource center for telehealth in Alaska. That could be a resource for us.

e. **Decision:** Ms. Towle will report out on the last NRTRC at our next meeting.

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**VII. Discuss Proposed 2019 Collaborative Schedule (Jamie Neill)**

a. Ms. Neill shared her proposed 2019 meeting schedule with the collaborative (see below).

b. **Action:** Please look at the proposed dates and times and let Ms. Neill know if there are any major conflicts. Also let her know if you are able to host a collaborative meeting on one of these dates.

c. If anyone would like to host we have portable technology that we can use for these meetings if needed.

d. Potentially have one meeting in Vancouver, WA. **Action:** Ms. Wakashige will look into that.

e. Ms. Orth volunteered to host a meeting at Seattle Children’s in 2019.

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**Proposed 2019 Schedule**

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<tr>
<td><strong>9:30-11:30, Thursday, Jan 3 2019</strong></td>
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<tr>
<td><strong>2-4pm Friday, Feb 8 2019</strong></td>
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<tr>
<td><strong>2-4pm Friday, March 22</strong></td>
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<tr>
<td><strong>1-3pm, Monday, May 6, 2019</strong></td>
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<td><strong>9:30-11:30am, Thursday, June 27</strong></td>
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VIII. Public Comment Period
   a. Question: can we get a copy of the proposed legislation? **Action:** Sen. Becker will update and share with the collaborative.

    **Next meeting:** January 3, 9:30-11:30am At Mary Bridge Children's Hospital, 317 Martin Luther King Jr Way, Tacoma, WA 98405

    Meeting adjourned: 11:20am