The Northwest Regional Telehealth Resource Center

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2022 11ᵗʰ Annual NRTRC Conference

Pre-Conference Grant Writing Workshop

Hosted by Teryl Eisinger, former CEO of the National Organization of State Office of Rural Health (NOSORH).

Telemedicine as a Human(e) Centered Construct

Adrienne Boissy, MD MA CMO Qualtrics

- ▶ Takeaway's
  - ▶ Relate to your patient, be a good human
  - ▶ The work is about telemedicine, but it's rooted in how we care for other people
  - ▶ In telehealth, it is necessary to apply the six domains of healthcare quality as outlined by the Institute of Medicine
  - ▶ Unless 20% of what you do is meaningful, you are at risk for burnout
  - ▶ Create your Joy Pie

An Overview from Telehealth Policy Leaders

Mei Kwong, JD, Execitive Director for Center for Connected Health Policy, CCHP
Kyle Zebley, Senior VP, Public Policy American Telemedicine Association, ATA
Ben Steinhafel, Director of Policy and External Affairs, The Center for Telehealth and eHealth Law, CTel

- Telehealth policy that defined and restricted telehealth to rural areas and within the four walls of a provider's office was progressive in 1997 but is "wildly outdated" in 2020.

- There are misconceptions on originating site restrictions as well as several misconceptions that telehealth is cost-increasing, along with fears of fraud and abuse.

- Those working in telehealth, start engaging with state representatives - share data with them on cost and utilization. Help state representatives learn the telehealth landscape in their state.

- Note that the 151-day extension after the PHE takes us through mid-January, meaning that all bills will need to be reintroduced.

- Educate and support policy makers to ensure that some of the extended telehealth benefits become permanent.

- Check the [Center for Connected Health Policy](#)'s comprehensive compilation of state-specific telehealth policies, including information on the states that reimburse for live video, audio-only, store and forward, RPM, communications-based technologies, payment parity, and more.

- States control what commercial payers may do with regard to reimbursement.

Care Reimagined

Kristi Henderson, SVP &CEO, Optum Everycare

- Takeaway's
  - Look at the data - if we can increase care and access, can we reduce hospitalizations
  - How can we build telehealth from the consumers eyes
  - Meet patients where they are-the human connection of what we do with telehealth
  - The work is about telemedicine, but it's rooted in how we care for other people
  - Aim for near-immediate access to a provider, a whole system of care needs to occur locally-Healthcare is complex

Telehealth and Innovation: A CMS Update

Ashby Wolfe, MD, MPP, MPH, Regional Chief Medical Officer Center for Medicare & Medicaid Services

- Takeaway's

  - The Physician Fee Schedule 2023 Proposed Rule includes the work CMS is planning to address concerns in our communities across the nation especially as it relates to equity

  - Currently (i.e., during the PHE), all healthcare practitioners who are authorized to bill Medicare for their professional services may also furnish and bill for telehealth services

  - CMS is looking at better ways to engage with state Medicaid agencies

  - Dr. Wolfe mentioned the resource Creating a Roadmap for the End of the COVID-19 Public Health Emergency, which includes a link to several factsheets that include information about which waivers and flexibilities have already been terminated, have been made permanent, or will end at the end of the PHE

Tribal Session Crossing the Digital Divide

Anthony Torres, Special Projects Manager, Utah Navajo Health System

- ▶ Takeaway's
  - ▶ In relation to lying fiber, "Technical challenges and financial challenges were not the hardest part of the project. The regulatory constraints were."
  - ▶ Fiber optic connectivity is the long-term plan, but in most cases tribal lands are rugged and frontier, which is why microwave-based technology is a great solution as it can cover great distances and does not require asking permissions from landowners
  - ▶ If you provide telecommunications to people who are on tribal lands, ask if they are satisfied with their connectivity
  - ▶ Regulatory issues are commonly the barrier, work with local service providers to find a resolution

Virtual Pariah-Self-Disrupting to Achieve Success with Direct to Consumer Telehealth

Tim Lovell, MBA, Connect Care Operations Intermountain Healthcare

- Principles of success in building a virtual practice
  - Make telehealth a strategic priority
  - Be what consumers want
  - Disrupt without abandoning values
  - Form a high-performing team
  - Promote your service
  - Deliver on the promise
  - Prove your value
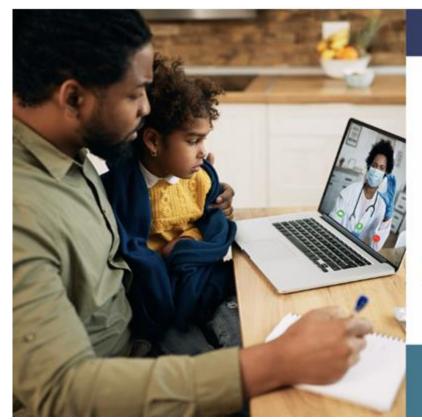 - Continually improve and disrupt

Break Out Sessions:

- Technology Showcase hosted by The Telehealth Technology Assessment Center (TTAC)

- Lessons Learned: Building a Comprehensive Telehealth Quality Program

- Bridging the Digital Divide with Human Centered Design

- Enhancing Telehealth Fluency Using Professional Empathy Practices

- Sustaining Project ECHO

- School Based Telehealth

- Building a Comprehensive Telehealth Program

- Implementation of Virtual ICU during COVID-19

- TeleNICU

- Innovation Among Early Adopters of Telemedicine in Public Libraries

- Understanding the Impact of Social Determinants of Health on Broadband Access

  - For a full list of breakout sessions see the agenda

Quality Improvement (QI) Course

- Session 1: The Model for Telehealth Improvement. January 19, 2023, Noon - 1:30 p.m. (M.T.)

- Session 2: PDSAs - The Heart of Improvement and Data - Your Telehealth Performance Enhancer February 16, 2023, Noon - 1:30 p.m. (M.T.)

- Session 3: Telehealth Process Improvement MappingMarch 16, 2023, Noon - 1:30 p.m. (M.T.)

**Space is limited to 35 spots.
Early Bird Cost $125**

Questions?

NRTRC Advisory Board