



October 17th, 2019 3:00 pm

Location: 450 W. State St., 7th Floor,
Conference Room 7A

Meeting Minutes:

Member Attendees: Dr. Ted Epperly, Dr. Andrew Baron (phone), Denise Chuckovich, Dr. Keith Davis, Larry Tisdale, Neva Santos (phone), Russ Duke (proxy for Nikole Zogg), Patt Richesin (phone), Yvonne Ketchum-Ward, Dillon Lietchty (proxy for Chris Thomas), Matt Bell, Dr. Mike Hajjar, Lisa Hettinger, Randall Hudspeth, Susie Pouliot, Dr. Karl Watts, Matt Wimmer

OHPI Staff: Shelby-Lyn Besler, Mary Sheridan, Ann Watkins, Stephanie Sayegh

Guests: Norm Varin, Jenni Gudapati, Rhonda Robinson-Beale, Prudence Vincent, Janet Reis, Krista Stadler, Linda Rowe, Luke Kilcup, Mary Ann Reuter (phone), Cynthia York (phone), Corey Surber (phone), Elke Shaw-Tulloch, Dave Jeppesen

Summary of Motions/Decisions:

Motion:

Motion: Susie Pouliot moved to accept the minutes of the September 19, 2019, meeting of the Healthcare Transformation Council of Idaho as presented.

Second: Denise Chuckovich

Outcome:

Passed

Motion: Larry Tisdale moved that HTCI explore the viability of forming a workgroup to address next steps in developing a rural value-based budget model.

Second: Matt Bell

Passed

Motion: Randy Hudspeth moved to accept Craig Belcher from Regence Blue Shield as the third Co-Chair for the Telehealth Task Force.

Second: Dr. Karl Watts

Passed

Agenda Topics:

Welcome and Opening Remarks; Roll Call; Introductions; Review of Minutes; Action Items, and Agenda Review- *Dr. Ted Epperly, Co-Chair of the HTCI*

Legislative services report review and discussion- *Mary Sheridan, IDHW*

- ◆ Goal 1: Increase the percentage of value-based payments in Idaho to 50% by June 2023.
 - Identify and prioritize cost drivers that can be improved through collaboration between payers and/or providers
 - Increase adoption of value-based payments models
- ◆ Goal 2: Improve healthcare quality, access, and the health of Idahoans.
 - Identify barriers to Telehealth expansion and develop solutions to increase adoption and utilization.
 - Develop a core set of clinical quality metrics to encourage alignment by payers.
- ◆ Financial Analysis RFP was submitted to DHW contracts unit today. The purpose of the RFP is to identify a contractor to conduct data collection, aggregation, and analysis of payer data based upon the Health Care Payment Learning Action Network (HCP-LAN) categories and to assess and report on progress and evolution to value-based payment models.

JFAC presentation update- *Elke Shaw-Tulloch, IDHW*

- ◆ Elke provided a presentation about the Office of Healthcare Policy Initiatives (OHPI) and HTCI to the Joint Finance and Appropriations Committee (JFAC) on 10/9/19. She focused on value-based healthcare initiatives and provided a high-level overview of the logic model, goals, objectives and initiatives. Elke also included information about the transfer of OHPI to the Division of Public Health, Bureau of Rural Health and Primary Care.
- ◆ Representative Youngblood, JFAC Co-Chair, expressed interest and support for value-based healthcare and telehealth adoption efforts.
- ◆ Matt Wimmer stated JFAC members asked questions which indicated a high level of interest in value-based payment and how the patient experience is improved and differs under a value-based model of care.
- ◆ Going forward it will be important to provide further context as to the complexities of migrating to value-based payment models.
- ◆ Mary Sheridan stated that progress on goals, initiatives and related metrics will be tracked and reported on a quarterly basis.

Value-Based Healthcare Forum Update and Next Steps- *Mary Sheridan, IDHW*

- ◆ Mary Sheridan solicited feedback and takeaways from HTCI members who attended the Value-Based Healthcare Forum held at Boise State University on October 8-9, 2019. The event was sponsored by BSU and DHW with funding support from the Blue Cross of Idaho Foundation Rural Health Initiative. Presenters from other states such as Oregon, Pennsylvania and Maryland discussed their value-based models and how global budgets have been integrated into their models.
 - Dr. Andrew Baron stated the speakers were very informative and felt their presentations created value and demonstrated effective models that improved cost and quality.

- Russ Duke was impressed with how rural areas were able to extend their successes in achieving goals and explaining the steps on how they reached them. Russ stated it was encouraging to see how they operationalized these models in rural areas with relatively small systems, engaged healthcare providers in these designs, and invested in community health.
- Larry Tisdale stated not every state can achieve the same result, but we can learn from other states to design something that works specifically for Idaho.
- Dr. Karl Watts stated it was very educational and presenters shared ground level strategies and plans that can be operationalized. Dr. Watts also stated it was also positive to engage in conversation with other Idaho attendees and to discuss strategies and ways to implement in Idaho.
- Matt Bell stated it is great Idaho is thinking outside of the box and open to listening to other states on how they have achieved success with their value-based healthcare designs.
- Susie Pouliot shared that the forum really highlighted and underscored the need for education and communication on how to prepare physicians, health systems and independent practices for this level of change. Susie also felt the telehealth presentation really demonstrated advancements in telehealth.
- Yvonne Ketchum-Ward felt the forum was very good and focused on ideas that could be implemented in Idaho. She stated it also demonstrated the need for additional training and the provision of specific tools to move value-based payment forward.
- Neva Santos echoed many of the same comments, felt it was very worthwhile, and triggered a lot of great conversations.
- ◆ Patt Richesin explained that the themes presented at the Value-Based Healthcare Forum aligned with the soon to be introduced funding opportunities being developed by CMMI. A rural health RFI will be announced this fall by CMMI to fund innovative models that address implementation of value-based healthcare in rural areas.
- ◆ Patt Richesin proposed that HTCI form a new workgroup and convene stakeholders to develop a plan for creating a budget model for rural delivery systems involving CAHs and outpatient providers to stabilize and allow for innovation of health care delivery that addresses unique rural issues in Idaho. Following discussion and input by many members, HTCI members agreed to establish a new workgroup.

Telehealth Task Force Co-Chair Appointment- *Ann Watkins IDHW*

- ◆ HTCI members supported the selection of Craig Belcher, Regence Blue Shield, as the third Telehealth Task Force co-chair. Craig will co-chair with Jenni Gudapati and Krista Stadler.

Payer Provider Workgroup (PPW) Update- *Norm Varin and Dr. Kelly McGrath, Co-Chairs of PPW*

- ◆ Norm Varin spoke about the need to continue to engage payers and providers and to find successful opportunities to collaborate. The PPW will discuss different potential opportunities

and will prioritize three initiatives based on the ability for the group to impact them through collaboration. The Division of Public Health data presentation at the October 16 meeting helped to determine the path to move forward. Norm appreciated the individuals who attend the meetings are a regular basis because they are all very engaged in the discussion.

Review and Discussion of Metrics to Evaluate HTCI progress- Dr. Ted Epperly, Co-Chair of HTCI

- ◆ Dr. Epperly opened the discussion on how to identify metrics to evaluate HTCI progress. The following ideas were suggested by members:
 - Track the percent of primary care spend and shifts in spending.
 - Track avoidable emergency department utilization and/or avoidable hospitalizations.
 - Track the shift from inpatient to outpatient care (ambulatory services) by payments. Identify innovation in communities (e.g., avoiding unnecessary emergency department visits, social determinants of health models, distance monitoring, and creating toolkits that can be deployed.)
 - Measuring and defining access to care and transitions of care. Is there a national model for defining access?
 - Identify measures impacted by Medicaid expansion.
 - Foundational measures, such as blood pressure, behavioral health. Simple measures of health.
 - Number of patient-centered medical homes.
 - Idaho Health Data Exchange (IHDE) data and number of practices and providers using IDHE.
 - Measures that are basic to peoples' health e.g. a measure of are you healthy or are you not? Develop a metric to show improvement
 - Track the number of practices engaged in telehealth and/or percentage of population with a telehealth visit in the last year.
 - Medicaid metrics from IDHW strategic plan.
 - Emergency department avoidance.
 - Develop a rural-specific measurement.
- ◆ Following the discussion, it was suggested that a scorecard could be developed to measure progress. This strategy was implemented during the Statewide Healthcare Innovation Plan.

Closing- Dr. Ted Epperly

Dr Epperly polled the group about the possibility of scheduling a November meeting. The group agreed to conducting a meeting on November 21, 2109.

- ◆ Next meetings are scheduled for November 21 and December 19, 2019, from 3:00 p.m. – 5:00 p.m.

Meeting Adjourned: 5:06 pm

DRAFT



Healthcare Transformation Council of Idaho

Action Items

November 21, 2019 3:00PM

■ Action Item 1 – October HTCI Meeting Minutes

HTCI members will be asked to adopt the minutes from the October 17, 2019, HTCI meeting:

Motion: I, _____ move to accept the minutes of the October 17, 2019, meeting of the Healthcare Transformation Council of Idaho as presented.

Second: _____

■ Action Item 2 – Letter of Support

HTCI members will be asked to approve a proposal to submit a letter of support for the Department to receive SUPPORT Act funds.

Motion: I, _____ move to submit a letter of support to the Joint Finance and Appropriations Committee for the Department to receive SUPPORT Act funds.

Second: _____

■ Action Item 3 – Telehealth Task Force Charter Adoption

HTCI members will be asked to accept the Telehealth Task Force Charter.

Motion: I, _____ move to accept Telehealth Task Force Charter as presented.

Second: _____

■ Action Item 4 – Rural Value-Payment Model Workgroup Co-Chairs

HTCI members will be asked to approve co-chairs of the new Rural Value-Based Payment Model Workgroup.

Motion: I, _____ move to approve Larry Tisdale and Patt Richesin as co-chairs of the new value-based payment model workgroup.

Second: _____

SUPPORT Act – Idaho Projects

November 21, 2019

SUPPORT Act – Background

1. President Trump signed the SUPPORT Act in October of 2018
2. Medicaid is working with the Governor's Opioid Advisory Group, Public Health, Behavioral Health, Board of Pharmacy, and the Office of Drug Policy, law enforcement and paramedics to strategize on how we could maximize this funding opportunity
3. CMS approved funding to help Medicaid fund health IT infrastructure to combat the opioid epidemic
4. Medicaid can make changes to our funding request if we need any additional functionality
5. This funding is only available until September 30, 2020
6. Medicaid is collaborating with the Governor's Opioid Advisory Group to align the projects with the Governor's strategic plan

What is the SUPPORT Act?

- The SUPPORT Act is a bipartisan bill aimed at addressing the nation's opioid epidemic.
- The SUPPORT Act provides funding to enable the free flow of pharmacy information to front-line clinicians, paramedics, law enforcement and public health officials through health IT infrastructure.
- One of the best tools to help detect and prevent opioid abuse is the prescription monitoring program (PMP). Idaho's PMP is run by the Board of Pharmacy.
- IHDE can connect the dots between a patient's health history and prescription (PMP) data.

Suggested Projects for Idaho:

Project	Medicaid Partners	Project Detail
Project 1: IHDE Enhancements	IHDE	Integrates prescription data into IHDE to truly coordinate care across Idaho with data analytics, enhanced reporting for measures/outcomes and a better tool to inform providers on how to help their patients struggling with substance use disorder or opioid use disorder.
Project 2: Behavioral Health Integration into Primary Care Settings	Public Health	Provides training to physicians on prescribing opioids and treatment of pain management and technical assistance for primary care clinics to develop viable integrated behavioral health models.
Project 3: Mobile Health Integration (Law Enforcement)	Office of Drug Policy/Sheriff	Implements an outreach program and software that is a combination of police, rehab specialists, and administrators that leverages the existing relationships between police and their communities to assist individuals and their families plagued by opioid addiction in accessing treatment.
Project 4: Mobile Health Integration (Paramedics)	Behavioral Health/Paramedics	Implements software to give paramedics access to files (arrest records, pharmacy data, doctor visits, etc.) and the software connects individuals/families impacted by opioids to a database of community based programs (housing, transportation, food, etc.).
Project 5: Idaho Board of Pharmacy – Gateway Fee Support	Idaho Board of Pharmacy	Idaho Board of Pharmacy is funding implementation fees and first year license fees for providers' offices, clinics, and other healthcare facilities to integrate their electronic medical records (EMR) or electronic health records (EHR) with the Gateway system.

Next steps:

1. Need approval from legislature for spending authority
2. Coordinate with the Governor's Opioid Advisory Council
 - Review and revise projects or initiate new projects based on feedback from the Council
 - Set up reoccurring stakeholder meetings
 - Gather requirements, create a high level timeline
 - Staffing and contracting for support of projects
3. Decide how we measure success
 - Set up reporting

Questions?



HTCI

HEALTHCARE TRANSFORMATION
COUNCIL OF IDAHO

**Overview of Telehealth Task Force Charter and
Proposed Membership Structure for the
November 21, 2018 HTCI Meeting**

Initiative: Increase Telehealth Adoption

Goal 2: Improve healthcare quality, access, and the health of Idahoans.

Objective 1: Identify the barriers to telehealth program expansion in Idaho and develop solutions to increase adoption and utilization. Telehealth services increase healthcare access and provide a cost-effective delivery strategy in value-based systems.

Telehealth Task Force Co-Chairs:

- Craig Belcher, Regence Blue Shield**
- Jenni Gudapati, BSU Value-Based Healthcare Program**
- Krista Stadler, St. Luke's Virtual Care Center**

Telehealth Task Force Charter Highlights

- Develop pre-implementation plan, TTF charter, framework for meeting cadence and structure, timeline, deliverables, goals, objectives and operational parameters to achieve successful launch of the Telehealth Task Force in January 2020.
- Review current literature, legislation and regulatory or structural impediments and create a baseline packet of information for TTF members.
- Invite and confirm TTF Members, Subject Matter Experts and Ex Officio Legislators.
- Report ongoing progress to Payer Provider Workgroup and HTCI.
- Develop and deliver a final report that includes solution-based recommendations that point to immediate and longer term goals, outline next steps and required resources for continued adoption and expansion of telehealth in Idaho.

Telehealth Task Force (TTF) Timeline

- **TTF will meet monthly from January-June 2020 and focus on solutions and recommendations to advance telehealth in Idaho.**
- A pre-work packet on known barriers (e.g. reimbursement, definitions, legislation and rules, implementation and sustainment costs, alignment to current business models) and other relevant materials regarding the telehealth landscape will be distributed to members prior to launch of TTF in January.
- **A final report with TTF recommendations will be presented to HTCI and HCPC in August, 2020.**

Telehealth Task Force (TTF)

Subject Matter Experts

- Twenty-four Subject Matter Experts (SME's) will be invited to present @ the TTF meetings held in February – May, 2020.
- The SMES will be asked to utilize a standardized slide template on what recommendations that they have to remove the barriers of telehealth and respond to the following question – **If you could put any telehealth solution in place what would you do and why and include a specific use case of a patient?**
- Subject Matter Experts will be invited to provide feedback on the draft of the TTF final report.

Telehealth Task Force (TTF)

Subject Matter Experts

To be as inclusive as possible, an open call for Subject Matter Experts will include the following:

- Medicaid
- Medicare
- Commercial Carriers
- Self-Funded Employers
- Associations
- Physicians from Health Systems/Independent Clinic Physicians/Other Healthcare Professionals
- Sites of Care – Hospitals, Long Term Care, Rehab Facilities, Home Health Entities, Hospice, Schools, EMS and Veterans Administration
- Specialties – Behavioral Health, CHEMS, Oral Health
- Representatives from Rural/Urban Geographic Areas
- Department of Health and Welfare
- Health IT and Telehealth Subject Matter Experts
- Others

Telehealth Task Force (TTF) Membership

- **Identification of potential TTF members is underway.**
- **A 12 member taskforce is proposed.**
- **4 representatives from the healthcare sector** include:
 - 1) Jenni Gudapati, educational institution/value-based payment Boise State University
 - 2) Krista Stadler, health system e.g. St. Luke's Virtual Care Center
 - 3) Craig Belcher, Regence Blue Shield commercial payer
 - 4) Susie Pouliot or another designee from Idaho Medical Association
- **8 additional individuals from other industry sectors** representing various roles or professions and geographic areas of Idaho e.g. Human Resources, COOs, CFOs and or research and development/innovation.

Telehealth Task Force (TTF)

- **Idaho Employers/Industries identified to be approached about TTF participation are:**
 - 1) Idaho Power (backup Albertsons)**
 - 2) Agri-Beef Business (backup Simplot)**
 - 3) Clearwater Analytics (Boise)**
 - 4) Lighthouse Foodservice (No. Idaho)**
 - 5) Hecla Mining (No Idaho)**
 - 6) Clear Spring Trout Farms (small business - Hagerman)**
 - 7) Chobani Yogurt (Magic Valley/Twin Falls)**
 - 8) Tourism Industry (potential CDA resort or another TBD)**
 - 9) Insurance Broker (representing small business clientele)**

Telehealth Task Force (TTF)

Ex-Officio Legislative Representation:

- 2 ex officio members representing the Legislature: Potential legislative members identified **(e.g. one Representative and one Senator)** – Representative Youngblood (Nampa), Representative Erpelding (Boise), Representative Blanksma (Hammett) and Senator Agenbroad (Nampa), Senator Nelson (Moscow) or Senator Crabtree (Grangeville)
- Refer to the TTF Proposed Membership structure document included in your packet for further information.
- If you have names for consideration for TTF membership or SMES, please submit to Ann.Watkins@dhw.idaho.gov

Telehealth Task Force (TTF)

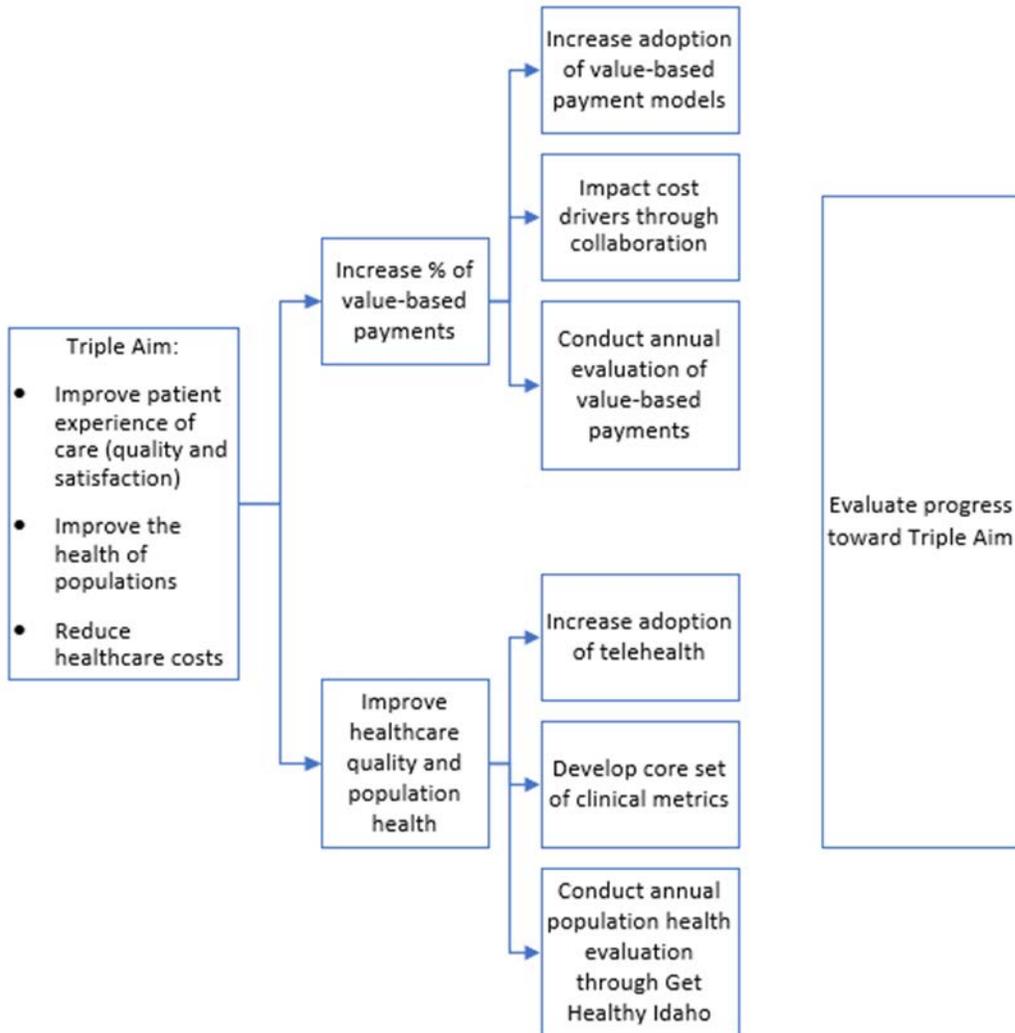
- **Action Item: Approval of HTCI Charter and Proposed Membership Structure. Copies of the proposed charter and membership structure and potential SMEs are included as attachments in the HTCI agenda packet.**
- Questions or feedback, please contact: Jenni Gudapati @ JenniGudapati@boisestate.edu or Ann.Watkins@dhw.idaho.gov

Telehealth Task Force (TTF) Charter

Task Force Summary:

Co-Chairs:	Craig Belcher, Jenni Gudapati, Krista Stadler
OHPI Staff Lead:	Ann Watkins
TTF Charge (from HTCI):	Identify the drivers and opportunities to telehealth services adoption and expansion in Idaho for providers, clinics, specialists, hospitals, and other health system partners and recommend mitigation strategies to increase adoption and utilization.
HTCI Alignment:	<ul style="list-style-type: none">• Promote and support transformation by identifying opportunities for innovation that will help shape the future of healthcare.• Promote alignment of the delivery system and payment models to drive sustainable healthcare transformation.• Recommend and promote strategies to reduce overall health care costs.
Accountable to:	<ul style="list-style-type: none">• Report progress monthly to the Payer Provider Workgroup and HTCI
Context:	<ul style="list-style-type: none">• Telehealth has the potential to help overcome the specific challenges of provider shortages and rural and frontier community isolation.• Telehealth can help improve access to primary care, specialists, hospitals, community health centers, sub-acute settings, etc. and support patient and provider education and share real time actionable data.• There are complex issues surrounding telehealth which must be addressed by stakeholder collaboration to thrive within a very complex healthcare system.• Continued and coordinated growth of telehealth as a resource for addressing healthcare needs in the state is urgent.• In July 2019, the Health Transformation Council of Idaho (HTCI) with endorsement by the Health Quality Planning Council (HCPC) approved the formation of a Telehealth Task Force.

Logic Model Diagram



Goals, Objectives, and Actions:

Goal: Improve healthcare quality, access, and the health of Idahoans.

Objective 1: Identify the drivers for telehealth services expansion in Idaho and recommend solutions to increase adoption and utilization.

Strategy	Action to be Taken (Accountable Group)	Timeline
Secure grant funding to conduct environmental scan to assess telehealth usage in Idaho, with a focus on substance/opioid use disorder treatment.	<p>Assess alignment with CMS Medicaid SUPPORT Act Funds Action: CMS review and determination (IDHW)</p> <p>Implement state procurement process to secure vendor, pending CMS approval Action: vendor contract established (IDHW)</p> <p>Conduct environmental scan, pending CMS approval Action: final report presented to HTCI and Telehealth Taskforce (IDHW)</p>	<p>September 2019</p> <p>December 2019</p> <p>April 2020</p>
Develop pre-implementation plan, charter, and goals for Telehealth Taskforce (TTF)	<p>Develop TTF Charter (TTF Co-Chairs)</p> <p>Develop TTF Agendas, Facilitators, Subject Matter Experts and Presenters (TTF Co-Chairs)</p> <p>Submit TTF Charter for review by the Payer Provider Workgroup (DHW TTF Resource)</p> <p>Submit TTF Charter to HTCI for review and approval (DHW TTF Resource)</p>	<p>October 2019</p> <p>November 2019</p> <p>November 2019</p> <p>December 2019</p>
Identify IDHW programs with telehealth components and assure inclusion in statewide planning efforts.	Survey IDHW programs to ascertain telehealth usage and identify IDHW staff to participant on the TTF (IDHW)	November-December 2019
Identify members and convene telehealth taskforce	<p>Identify TTF members and submit final member roster for HTCI review (TTF Co-Chairs)</p> <p>Convene TTF (TTF Co-Chairs)</p>	<p>October-December 2019</p> <p>January 2020</p>
Create the taskforce pre-work package that identifies known barriers to telehealth adoption and provide initial resource literature to the taskforce members.	Packet delivered at least two weeks prior to first meeting. (TTF Co-Chairs, IDHW TTF Resource)	December 2019

Identify solutions and strategies to increase adoption and utilization	Conduct monthly meetings in order to identify Idaho-specific solutions and strategies based on drivers and opportunities related to specific use cases (TTF)	January- June 2020
	Submit regular progress reports to HTCI (IDHW TTF Resource)	December- August 2020
	Draft action-oriented final report with specific recommendations that will result in driving utilization by removing barriers to implementation and sustainability	June-August 2020
	Share TTF recommendations with HTCI (target: TTF co-chair presentation to HTCI) and HQPC	August 2020

Planned Scope:

Deliverable 1: Develop pre-implementation plan, TTF charter, framework for meeting cadence and structure, timeline, deliverables, goals, objectives and operational parameters to achieve successful launch of the Telehealth Task Force in January 2020.

Description:

Create vision and operating plan for the Telehealth Task Force (TTF) that aligns with the charge given by HTCI

Document scope and operating framework of the TTF in an agreed upon charter that includes: Goals, Objectives, Actions/Strategies, Scope, Deliverables, Timeframes, Milestones, Membership and Meeting Approach/Logistics

Timeframe:

<i>Anticipated Dates</i>	<i>Description</i>
Sept - Nov 2019	Co-Chairs and Staff Lead Develop Draft TTF Charter Determine framework for TTF initiative
Nov – Dec 2019	Forward Draft Charter to PPW and HTCI for review and feedback. Recruit TTF members, Identify facilitators, subject matter experts and or presenters by topic area/category Establish TTF meeting calendar for Jan-June 2020 Conduct literature review Determine funding viability for environmental scan for telehealth utilization in Idaho. Identify materials to be shared with TTF members prior

	to TTF kickoff in January, develop agenda for first meeting, identify subject matter experts to present at meetings and confirm their participation. Develop presentation materials and guidelines for subject matter expert (SME) presentations Solicit SME's and begin scheduling presentations
Jan 2020	Launch TTF in January Review TTF Charter and Approve/Provide Overview of Topic Categories, Review Calendar for Presentation of Topics
Feb - May 2020	Review and elicit feedback from TTF members, subject matter experts, presenters using predefined presentation format that seeks to focus on structured detailed discussion rather than presentations
May/June 2020	Finalize strategy(ies) to impact TTF identified barriers, solutions, targets and deliverables
June 2020	Develop final TTF recommendations and strategy(ies) for next steps Draft findings, report and recommendations for presentation to PPW and HTCI members in August 2020.
July 2020	Review draft of report Incorporate edits and prepare final report
August 2020	Report findings to HTCI

Milestones:

- Recruit TTF members by December 13, 2019
- Secure Facilitators, Subject Matter Experts and Presenters for January, February and March meetings by December 13, 2019 and complete selection of Facilitators, Subject Matter Experts and Presenters for April and May meetings by February 1, 2020
- Conduct literature review and complete by December 31, 2019
- Baseline – uses of telehealth in Idaho, conduct an environmental scan to determine this
- Identify topics that TTF is to explore that can influence and impact barriers, challenges and opportunities (December 2019)
- Refine deliverables and framework for TTF by November 12, 2019.
- Calendar the date for each deliverable e.g. when this topic will be presented to the task force to be finalized by December 13, 2019.
- Develop a strategy and timeline for each topic/deliverable to be finalized by December 13, 2019.
Monitor and report progress to HTCI and PPW related to TTF framework, design and anticipated body of work on a regular basis.

Deliverable 2: Complete a review of current literature, legislation and other potential regulatory or structural impediments in order create a baseline packet of information for TTF members that will inform and allow the TTF membership to evaluate and recommend any needed changes.

Description: Review of the Idaho Telehealth Support Act and other Idaho legislation, Non-Idaho state legislation and policies, National policy/descriptions, Idaho

Association Telehealth documents and other potential regulatory or structural impediments

Timeframe:

Anticipated Dates *Description*

December/January 2020 **Review the Idaho definitions of telehealth, common terminology and vernacular** as well as the Idaho Telehealth Support Act and other materials in order to prepare the TTF members to consider the need for revisions or modifications throughout the TTF SME presentations

Milestones:

- Define scope of this activity
- Identify gaps
- Develop a strategy and timeline for each target
- Report progress to Payer Provider Workgroup and then HTCI

Deliverable 3: Collaboratively develop and deliver a final report that includes solution-based recommendations that point to immediate and longer team goals, outline recommended next steps and required resources for continued adoption and expansion of telehealth in Idaho.

Description:

The TTF will review and gather objective and subjective information in order to collaboratively draft a final recommendations report that to the best of their ability represents all types of healthcare entities and those who have a vested interest in health care. The TTF will evaluate, at a minimum, the following areas through literature review and structured subject matter expert testimony and use case analysis.

- Assessment of telehealth utilization in the State of Idaho (IDHW survey only)
- Current barriers to telehealth adoption and utilization
- Potential use cases for telehealth in Idaho
- Cost of implementing and sustaining telehealth solutions
- Business model transformation and reimbursement strategies and impact/alignment of telehealth findings
- Billing codes review and crosswalk findings/recommendations
- Policy/legislation review and recommendations
- Vernacular review and recommendations
- Community engagement review and recommendations
- Telehealth implementation challenges

Timeframe:

Anticipated Dates *Description*

May/June 2020 Finalize strategy(ies) to impact TTF identified barriers, solutions, targets and deliverables

June 2020 Develop final TTF recommendations and strategy(ies) for next steps

	Draft findings, report and recommendations for presentation to PPW and HTCI members in August 2020.
July 2020	Review draft of report
	Incorporate edits and prepare final report
August 2020	Report findings to HTCI

Membership and Composition:

General Information

1) TTF Membership

TTF will consist of representatives from the following mix of business stakeholder groups and will not exceed 12 members (including three co-chairs) with no more than one representative from each site. Consideration was given to business geographic location, size, self-insured status and community presence/engagement.

INSERT BUSINESS NAMES HERE (to be completed once TTF members are identified).

Members should be in a role at the perspective company that had direct oversight and accountability for one of the following areas; workforce health and safety, operations and/or finance (example of titles- Human Resources, Chief Operating Officers, Chief Financial Officers)

2) Subject Matter Experts

Targeted and open call subject matter experts will be invited to present on relevant telehealth topics at one of the four meetings e.g. January – April 2020 to highlight telehealth barriers, gaps in service and potential solutions to increase adoption and utilization of telehealth in Idaho. Targeted Subject Matter Experts will be identified from the following categories or organizations:

- Medicaid
 - Medicare
 - Commercial Carriers
 - Self-Funded Employer
 - Representatives from the following organizations:
 - Idaho Hospital Association
 - Idaho Medical Association
 - Idaho Primary Care Association
 - Idaho Academy of Family Physicians
 - Veterans Administration
 - Educational Institutions
 - Physicians from Health Systems
 - Independent Clinic Physicians
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- Other Healthcare Professionals
 - Rural/Urban Geographic Areas
 - Department of Health and Welfare
 - Health IT and Telehealth Subject Matter Experts

Subject Matter Experts who participate and share their expertise with the TTF will be invited to provide feedback on the TTF final recommendations and action-oriented final report.

Member Selection

Co-Chair Invitation; subject to approval of membership categories by the HTCI

Terms

Membership shall be extended to individuals and organizations by the co-chairs as needed to address the initiative(s) of the task force. There are no set terms or limits for this workgroup.

Expectations of Members

- Members must participate in 75% of all meetings scheduled for the Telehealth Task Force.
 - Members’ designee may participate in up to 25% of the meetings scheduled within the task force meeting time frame.
 - Members are encouraged to send the same designee to the meetings instead of different individuals.
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Meeting Times and Locations:

- To be determined within the pre-implementation planning phase (e.g. October – December 2019).
- Distribute meeting times and locations and post those dates on the HTCI website.
- Include information about in person and on-line participation for TTF members

Communication Channels:

- Distribute proposed charter and solicit participation from potential task force members during the pre-implementation phase (e.g. October – December 2019)
- Announce approved task force members, task force progress, and the completion and dissolution of the task force via the HTCI website, HTCI and PPW meeting reporting mechanisms.
- Delivery of monthly progress report to HTCI and PPW
- Identify other communication channels for consideration to convey the work of the TTF as deemed appropriate.
- Identify communication channels for ongoing communication for Telehealth issues at the sunset of the TTF.

Agendas and Notes:

- Solicit administrative agenda items from TTF members 10 days before meeting
- Prepare agenda and distribute prereading materials no less than 48 hours before meeting
- Post meeting notes and agendas on HTCI website

Final Report:

- Prepare a final report which captures the work of the TTF and recommendations for future action.
- Provide a link to the task force’s final report once complete and approved by HTCI.

Resourcing:

It is anticipated that existing staff resources allocated will be adequate to facilitate and support the Telehealth Task Force. Based on the final outcomes of the evaluation and corresponding recommendations there may be additional resources, research, publications and projects, etc. identified to address the adoption barriers within telehealth.

Change Management:

Changes to scope must be approved by HTCI.

Version Information:

Version	Author	Summary	Date
1.0	Watkins	Initial Drafting	09/09/2019
1.1	Watkins	Revision with TTF Co-Chair feedback	10/16/2019
1.2	Watkins	Revisions with TTF Co-Chair feedback	10/21/2019
1.3	TTF Co-Chairs	Review by TTF Co-Chairs	11/5/2019 and 11/12/2019

Final Acceptance:

Name/Signature	Title	Date	Approved via Email
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>

Telehealth Task Force (TTF) Proposed Membership

Subject Matter Expert Presentations and Ex Officio Legislative Members

TTF Charge: Identify the drivers, challenges and opportunities to telehealth program adoption and expansion in Idaho for providers, clinics, specialists, hospitals, and other health system partners and recommend mitigation strategies to increase adoption and utilization.

TTF Membership Composition: 12-member task force - **It is critical that a broad base of diverse stakeholders be assembled to address solutions to increase the deployment and utilization of telehealth in Idaho.**

Members from Healthcare Sector:

- 1) Jenni Gudapati, **educational institution**/value-based payment Boise State University
- 2) Krista Stadler, **health system** e.g. St. Luke's Virtual Care Center
- 3) Craig Belcher, Regence Blue Shield **commercial payer**
- 4) Susie Pouliot or another designee from **Idaho Medical Association**

Other Industry Sectors/Telehealth Utilizers in Idaho:

8 individuals representing various roles or professions and geographic areas of Idaho e.g. Human Resources, COOs, CFOs and or research and development/innovation.

These Idaho industries currently utilize telehealth or may be a future utilizer of telehealth for their employee base.

Idaho Employers/Industries identified to be approached about TTF participation are as follows:

- 1) Idaho Power (backup Albertsons)
- 2) Agri-Beef Business (backup Simplot)
- 3) Clearwater Analytics (Boise)
- 4) Lighthouse Foodservice (No Idaho)
- 5) Hecla Mining (No Idaho)
- 6) Clear Spring Trout Farms (small business - Hagerman)
- 7) Chobani Yogurt (Magic Valley/Twin Falls)
- 8) Tourism Industry (potential CDA resort or another TBD)
- 9) Insurance Broker (representing small business sector clientele)

Ex-Officio Legislative Representation:

- **2 ex officio members representing the Legislature:** Potential legislative members identified (e.g. one Representative and one Senator) – Representative Youngblood (Nampa), Representative Erpelding (Boise), Representative Blanksma (Hammett) and Senator Agenbroad (Nampa), Senator Nelson (Moscow) or Senator Crabtree (Grangeville)

Pre-Implementation prior to launch of TTF in January 2020:

A packet of key materials will be shared with TTF members prior to the launch of the TTF in January 2020. Content will include known barriers information, use cases, data (if available), literature review of topics applicable to task force charge.

Outputs: Prepare a final report which captures use cases, data (if available), barriers to implementation that have Subject Matter Experts have experienced or anticipate experiencing, summary of ideas to remove barriers and/or implement innovative ways of solving the problem.

Subject Matter Experts:

Subject Matter Experts will be invited to present on relevant telehealth topics at one of the four meetings e.g. January – April 2020 to highlight telehealth barriers, gaps in service and potential solutions to increase adoption and utilization of telehealth in Idaho.

10 Minute Presentations: Subject Matter Experts will be asked to develop a five- slide presentation which points out drivers, challenges, opportunities for telehealth adoption and expansion in Idaho and solution-based recommendations to consider for implementation. Subject Matter Experts will be invited to provide feedback on the TTF final report.

To be as inclusive as possible, an open call for Subject Matter Experts will include the following:

- Medicaid
- Medicare
- Commercial Carriers
- Self-Funded Employers
- Associations such as:
 - Idaho Hospital Association
 - ATA
 - Association of Idaho Chambers of Commerce
 - Broker's Association
 - County/City Government Associations
 - Idaho Medical Association
 - Idaho Oral Health Alliance
 - Idaho Primary Care Association
 - Idaho Academy of Family Physicians
 - Idaho Center for Nursing
 - Broker's Association
 - Association of City and County Governments
 - Non-Profit Association
 - National Telehealth Resource Center
 - Small Business Association

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- Educational Institutions
 - Physicians from Health Systems/Independent Clinic Physicians/Other Healthcare Professionals
 - Sites of Care – Hospitals, Long Term Care, Rehab Facilities, Home Health Entities, Hospice, Schools, EMS and Veterans Administration
 - Specialties – Behavioral Health, CHEMS, Oral Health
 - Representatives from Rural/Urban Geographic Areas
 - Department of Health and Welfare Subject Matter Experts
 - Health IT and Telehealth Subject Matter Experts – Local HIMSS Chapter, Broadband Taskforce, Department of Commerce, Cyber Security
 - Influencers – Maxine Belle, Dr. John Rusche, Casey Meza
 - Other – Venture Capital, Local Disruptors, Other State Organizations, Other Healthcare organizations, INL
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