Telehealth Roundtable

Combating the COVID-19 Pandemic
Staff Introductions

Kari Parker
Resource & Training Specialist
kparker@communitycareks.org

Terri Kennedy, PMP
Director of the HCCN
tkennedy@communitycareks.org

Trisha Harkness, CISSP, PCMH CCE
Health IT & Systems Specialist
tharkness@communitycareks.org

Jonathan Smith, MPH
Director of Healthcare Transformation
jsmith@communitycareks.org
Agenda

1. Introductions
2. KMAP Bulletins & Upcoming Webinars
3. Telehealth Data for Stakeholders: Updated Request Form
4. KMMC Patient Experience Project Overview & Update
5. Planning Our Telehealth Summit
6. Open Discussion/Questions
7. November/December Meeting Update

A few housekeeping notes:
- Please mute your lines unless contributing to discussion or asking a question
- We will be recording this session
Policy Update From the Kansas State Board of Healing Arts: Policy 21-02

- Earlier this month, KSBHA approved Policy 21-02, which provides guidance for telemedicine use that has expanded rapidly this year in response to the COVID-19 pandemic. The guidance validates the use of telemedicine as an appropriate modality to provide care, so long as the licensee is able to maintain the same standard as in-person care to the patient.

- It is important for a licensee to know and recognize when not to practice telemedicine and recommend an in-person visit.

- Licensee should use a HIPAA-compliant electronic platform.

- Kansas licensees intending to practice telemedicine to patients located outside of Kansas should check with the applicable state regulatory agency.
Policy Update From the Kansas State Board of Healing Arts:
Policy 21-02

- Process and Documentation Guidance
  - Provide a statement to patients regarding risks, limitations, alternatives, and benefits of the telemedicine encounter; document patient’s consent (verbal or written) to proceed
  - Verify the identity and location of patient
  - Ask patient if anyone is within hearing distance
  - Provide licensee’s name, location, and professional credentials
  - Means of communication of each telemedicine visit
  - Fully document the visit according to established medical record requirements
  - If an in-person visit is recommended but patient cannot or will not appear in-person, document making the request for an in-person visit, risks that were explained, and patient’s refusal
Upcoming Webinars

1. Special and Vulnerable Populations Diabetes Task Force: Diabetes Continuum of Care - Increase Patient Technology and Digital Health Literacy
   - Tuesday, October 27th @ 1pm
   - Registration: Diabetes Continuum of Care: Increase Patient Technology and Digital Health Literacy

2. The Great Lakes Mental Health Technology Transfer Center Network: Telehealth-Lessons Learned and Current Initiatives
   - Tuesday, October 27th @ 9:30am
   - Registration: Telehealth-Lessons Learned and Current Initiatives

   - Tuesday, November 10th @ 1pm
   - Registration: Telehealth Hack - Licensure and Patient-Provider Relationships

NACHC Elevate: Elevate 2020 is coming to a close, but you don’t have to continue your journey alone. Join Elevate 2021 for access to offerings you have come to know, such as monthly webinars and elective series, and new offerings such as self-paced learning modules, an innovation track, and additional pathways to take your transformation journey even further. Continue Your Transformation Journey
Telehealth Resources for Rural Patients Served in FQHCs

- Link to resource from HITEQ: https://hiteqcenter.org/Resources/HITEQ-Resources/telehealth-resources-for-rural-patients-served-in-federally-qualified-health-centers

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**Rural Communities and Healthcare**

Individuals living in rural U.S. communities, who account for fifteen percent of the population, face unique and significant challenges to health and wellbeing. Compared to individuals living in other areas, on average, individuals in rural populations have a higher average age, have higher rates of poverty, are more likely to have disabilities, and are less likely to be employed.\(^1\)\(^2\) Impacted by these and other factors, individuals in rural areas tend to have poorer health outcomes than the non-rural population, experiencing a higher risk of death due to heart disease, cancer, stroke, chronic respiratory disease, and unintentional injury.\(^3\)

While accessing quality healthcare is of utmost importance for rural populations, rural areas encounter barriers to care including consistent provider shortages, hospital closures, and lack of proximity to local providers.\(^4\) Access to primary and behavioral health providers are especially inadequate. Estimates from the National Ambulatory Medical Care Survey in 2012, found that the supply of primary care physicians in nonmetropolitan areas was 39.8 per 100,000 population, as opposed to 53.4 per 100,000 in large metropolitan areas.\(^5\)

Similarly, a snapshot of the rural population by the National Rural Health Association found that for every 100,000 rural patients, there were 30 specialists, compared to 260 per 100,000 urban patients.\(^6\)

Federally Qualified Health Centers are a primary provider of health care to rural populations. According to the Health Resources and Services Administration (HRSA) Bureau of Primary Health Care, in 2019, approximately one in five rural residents were served by health centers.\(^7\)

**Challenges with Telehealth Provision in Rural Areas**

The Digital Divide

With the challenges of provider shortages and lack of accessible facilities, telehealth presents an opportunity for health centers serving rural area to expand health services, integrate primary care with subspecialty services, and improve care management.\(^8\) Telehealth provision in rural communities is particularly important and in demand during the COVID-19 pandemic as many health centers have had to quickly transition to providing remote services. While telehealth has the potential to improve healthcare provision and access, many rural areas lack the reliable broadband connection and devices necessary for high quality telehealth provision.
Telehealth Data: Updated Request Form

- We have added August and September to the telehealth data request form.

- We will continue to update the form as the months go on to make sure that we have data to support our advocacy efforts to keep telehealth regulations expanded.

- If you have Azara, let us know if you would like for us to fill out the telehealth data request form with telehealth data from Azara.
Speaking of Azara....

Azara added a new dashboard this week to help centers with weekly survey submissions to HRSA.
As we have discussed on many telehealth roundtables, statewide stakeholders are in search of data that can shed light on the impact of expanded telehealth regulations. Having patient satisfaction data related to telehealth is one of the biggest needs for stakeholders.

The KanCare Meaningful Measures Collaborative (KMMC) has partnered with 4 Kansas health centers to better understand patient experiences with behavioral health services provided via telehealth.

Sydney McClendon with KMMC has joined us to provide an overview on how things are going.
2021 Telehealth Summit

- Telehealth Summit is tentatively scheduled for January 20th – 22nd, 2021.

- Planning Committee
  - Would you like to participate in the Telehealth Summit planning committee?

- We would like your input for topics and speakers.
  - Go to www.pollev.com/app and enter CCARE197
  - Or text CCARE197 to 22333
What topics or speakers would you like to see at the Telehealth Summit? i.e. funding, evaluating your telehealth program, Remote Patient monitoring, promoting telehealth, technology demo, ROI, etc.
Open Discussion/Questions
Telehealth Across State Lines

- **What if my patient is in a different state?**
  - CMS waiver allows health care providers to furnish telehealth and other services using communications technology wherever the patient is located, including at home, even across state lines.
  - **However** ... practicing across state lines is subject to requirements set by the states involved
    - FSMB’s [U.S. States and Territories Modifying Requirements for Telehealth in Response to COVID-19](http://example.org) (Last updated on 10/16/2020)
November/December Meeting Update

- Due to the holidays coming up, our next telehealth roundtable will be on December 10th @ 3pm

- You should have already received an updated calendar invitation.

- Let us know if you would like to present or have a topic you would like for us to discuss.
Thank You!