Date: Wednesday March 3, 2025
Meeting Purpose: Virginia State Telehealth Plan Steering Committee Meeting #3

Meeting Location: Virtual

Attendees:

Lisa Price Stevens	Department of Medical Assistance Services
Mary Ochsner Krampen	Bay Rivers Telehealth Alliance
Tim Perkins	Virginia Department of Emergency Medical Services
Allyson Flinn	Medical Society of Virginia
Kathy Wibberly	Mid Atlantic Telehealth Resource Center
Karen Rheuban	University of Virginia, Rheuban Center for Telehealth
Sandra Serna	Virginia Department of Health
Art Kellermann	Virginia Health Workforce Development Authority
Ray Lamura	Broadband Association of Virginia
Amanda Mueller	Virginia Department of Behavioral Health and Developmental Services
Christian Chisholm	Virginia Neonatal Perinatal Collaborative
Kandi Chamberlain	Virginia Department of Health
Ericca Facetti	Health Catalyst
Tamarah Holmes	Virginia Department of Housing and Community Development

Virginia Telehealth Network Staff Attending: Mara Servaites, Robin Cummings, Tom Anesta

Welcome, and Agenda,
Mara welcomed everyone and passed off to Robin to introduce topics.

Broadband & Technology Access
Comments on resources:
● The Supreme Court is set weigh in on the Universal Service Fund which is likely to be a lengthy process regardless of outcomes, but is at risk

Thoughts on 2021 Telehealth Plan's Broadband & Technology components:
- FCC Rural Healthcare Program is approaching its cap
- Recommended keeping "2.2.1.1 Investigate coverage by all payers including Medicaid, CHIP, and third party insurance, and create a report detailing services currently allowed and those services recommended to be covered via telehealth by all payers" in the updated plan
- Look for payer alignment between Medicaid, Medicare, and third party insurers to make this landscape less complex
  - Having multiple healthcare systems will make this elusive
  - The complexity of the system with Federal and State guidance and amendments means that services can't simply be changed
- Highlight potential cost savings with utilization of telehealth platforms
- Medicaid data showed that adding telehealth coverage did not increase costs during the public health emergency

Thoughts on the Virginia Digital Opportunity Plan:
- Currently there is no official broadband access plan but still on task to get universal coverage across the State
- There has been a huge demand for new funding related to broadband access
- The Virginia Department of Housing and Community Development is still collecting proposals to support utilization of internet with telehealth and telemedicine and would act as the initial funder
  - The grant program at present remains in the Federal Budget
  - Mammography for Southwest Virginia is one example
  - State Universities, Federally Qualified Health Centers, as well as State Agencies have been eligible partners

Discussion on the ideal state for broadband and technology access:
- There is overwhelming demand for digital navigators across state agencies and organizations
  - For telemedicine there needs to be specialization and expertise from navigators to facilitate telehealth
- Libraries have had success adding privacy pods
- Allocating funds to hiring digital navigators needs to be accompanied by a sustainability plan to ensure these positions are maintained longer term
- Pharmacies and pharmacists are established community hubs and a natural extension for incorporating telemedicine that would cross benefit the pharmacy business model
  - There are still pharmacy deserts in Virginia
  - The Appalachian College of Pharmacy is currently piloting community pharmacy projects
- The EPA is funding climate resilience hubs, public spaces in rural areas, to serve as emergency and disaster locations which can also facilitate telemedicine

- There is a need for a centralized point for scheduling (mobile app) to connect patients to all these various hubs and ensure they are available

Supporting High Needs Areas

Thoughts on identifying Virginia's high need areas?

- HPSA designation is focused on primary care but doesn't capture specialty scare deserts like maternity care or chronic disease management
  - VDH has a maternal healthcare desert map
  - VDH and the State Office of Rural Health can overlay additional data to paint a more accurate picture of need areas
  - Maternity care deserts are designated based on driving distance not necessarily on services meeting patient needs
- The Virginia Mental Health Access Program's ECHO model offers e-consults for provider-to-provider assistance and training and could be a model to apply elsewhere