

Date: Wednesday March 19, 2025

Meeting Purpose: Virginia State Telehealth Plan Steering Committee Meeting #3

Meeting Location: Virtual

Attendees:

Lisa Price Stevens	Department of Medical Assistance Services
Tim Perkins	Virginia Department of Emergency Medical Services
Kathy Wibberly	Mid Atlantic Telehealth Resource Center
Art Kellermann	Virginia Health Workforce Development Authority
Amanda Mueller	Virginia Department of Behavioral Health and Developmental Services
Ericca Facetti	Health Catalyst
Tamarah Holmes	Virginia Department of Housing and Community Development
Rufus Phillips	Virginia Association of Free and Charitable Clinics
Carter Batey	CareFirst BlueCross BlueShield

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.

Sustainability, Quality, Efficacy

- One goal should be to highlight ways to prevent unnecessary ED visits and hospitalizations by connecting patients to primary care via telehealth
 - Under current federal policy EMS only gets paid if they deliver a patient to the ER which is a major hurdle and would be difficult to change
 - New Mexico is a leader in this space and worth looking into
 - EMS remains at a technological disadvantage, and even more so in rural areas, and getting ambulances and hospitals to be able to more seamlessly communicate is an important initial step
 - EMS still needs better broadband coverage
 - Once there is better access to technology and telehealth adoption, EMS would need a path for reimbursement for these services
- How telehealth services are connected and tracked is important, especially outcomes



- State guidelines for individuals who utilize relay services would be beneficial for providers
- The West Virginia Connects Platform is a model to look at
 - A one stop shop for all of a patient's visits, referrals, etc. to help close loops with various providers
- A "how to" guide would be helpful to assist providers initiating hybrid or virtual models
- Important to provide guidance to telehealth providers regarding patient access needs (e.g., Relay Service)
- Consider an interagency group coordinating telehealth efforts among state agencies
 - Incorporate private sector as well
 - Having an entity like VTN help with coordination and perspective is beneficial

Workforce Optimization

- GO Virginia and the Blue Ridge Partnership are holding discussions around workforce optimization although not much around telehealth and may be a good partner
- Virginia Health Catalyst is leading conversations in this space through their Future Public Health Task Force; the Primary Care Coalition convened by the Virginia Center for Health Innovation is another potential resource for ideas
- Many opportunities to work with career pipeline for veteran populations
- Many opportunities to enhance peer recovery and substance use disorder services work
- Virginia Health Workforce Development Authority is a good connection point for pipeline efforts; Area Health Education Centers (AHECs) may be another resource to consider

How to Measure Success

- While there are many professional health care organizations in Virginia there are no metrics for what training or best practices health care provider graduates are getting
 - At a minimum an inventory on who is doing what would be beneficial
 - o How do we get this into health provider training program curriculums?
 - And if we teach students where can they practice it?
 - Create infrastructure of practicum sites and internships that have telehealth as a true training component
- Without some certainty around Medicare and what it will cover, it is going to be difficult to line up long term investment in infrastructure

Recap & Next Steps

 VTN is meeting with additional VA Agencies and will continue to refine comments and feedback and present to board of health June 12th