

SCTA Advisory Council Meeting

Thursday, May 20, 2021, 1-3PM

Microsoft Teams:

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Phone Conference ID: 144 079 763#

Attendees: John Magill (member-at-large), Meera Narasimhan (USC), Mandy Williams (SC DHHS), Amelia Bischoff (Prisma Health), Ashley Springs (McLeod Health), Andrew Atz (SC Children's Hospital Collaborative), Kevin Bennett (SC CRPH), Katie King (MUSC Health), Don Godish (SCETV), Jeff Miles (McLeod Health), Kathy Schwarting (PCC), Mark Wess (Prisma Health), Ragan Richardson (SCTA/MUSC), Rick Foster (member-at-large), Ryan Burnaugh (KMSO), Stewart Cooner (SCDMH), Angelia Owens (KMSO), Jimmy McElligott (MUSC), Sonya Frankowski (SCTA)

Agenda

1. Welcome, Introductions, and Wins

- a. The Council welcomed new members Kevin Bennett from SC Center for Rural and Primary Healthcare, Andrew Atz of SC Children's Hospital Collaborative, and welcomed back John Magill as member-at-large.
- b. PCC announced it was recently named an outstanding rural network of the year by the National Rural Broadband Association.
- c. SCETV received it's second Southeast Regional Emmy nomination for it's story on an app providing mental health treatment to firefighters.
- d. MUSC's Telehealth Center of Excellence application was submitted for a five year renewal.
- e. MUSC and PCC will partner to hold a biannual webinar on telehealth research efforts in the state as part of the recently awarded AHRQ grant. The first webinar will be held in June!

2. Strategic Plan Structure

- a. The group reviewed the 2021 Q1 and Q2 planning tactics outlined in the strategy document, and confirmed that we are on track with July 2021 milestone of workplan completion with tactics outlined through CY2022.
- b. The Council reviewed the drafted workplan tactics during the meeting the general theme is for telehealth services to continue operations and regular reporting, with more focused tactical work outlined for support strategies: outcomes, technology & broadband infrastructure, education, and advocacy & awareness.

- c. Support strategy tactics are generally focused on identifying data to assess service and access gaps, to inform future telehealth service deployment, expansion, and/or optimization.
- d. Advocacy and awareness will continue to advance conversation with legislators and telehealth stakeholders around permanently solidifying the expanded telehealth coverage and reimbursement landscape.
- e. Partners were asked to review the draft tactics in more depth and provide any feedback as we move forward in operationalizing the new strategy format.

3. Statewide eConsult pilot - SCTA + ReferWell Partnership

- a. Jimmy McElligott provided an overview of the statewide eConsult pilot project in partnership with ReferWell, which aims to expand access to specialty-informed care in South Carolina through asynchronous provider-to-provider consultations around a patient's care plan.
- b. The current pilot project includes 5 specialty areas (neurology, rheumatology, endocrinology, hematology, and genetics with Greenwood Genetic Counseling), and all SC specialists have been loaded into the platform for referral functionality. An outreach effort is underway to introduce the initiative and engage additional provider participation.
- c. Overall the group was receptive to the effort and the potential value it could bring to the state, although council members did remark that the current reimbursement landscape around interprofessional consultation may be a challenge, as currently only Medicare reimburses for the eConsult service.

4. Telehealth Reimbursement + Legislative Update

- a. Ryan Burnaugh provided a general overview and update on the SCTA's legislative and advocacy activities to date
 - In March the SCTA and SCHA began working on advocacy to remove originating site and provider type restrictions from telehealth payment policies as well as to push for equitable payment. Initial conversations with legislators were positive, although there was some hesitancy around introducing anything potentially controversial due to an already challenging legislative docket.
 - Bullet points were drafted to smooth over the language and mitigate any potential conflict. After continued socializations and conversations, ultimately there were not enough days left in legislative session to introduce a bill, though the Sine Die resolution does make space for COVID-related bills to be discussed out of session.
 - At present, we have been offered to hold a stakeholder meeting with legislative representation and Alliance of Health Plans during the off season to discuss the needs and ask in preparation for next legislative session.

b. Other Advocacy Avenues -

- In addition to the facilitated stakeholder meeting, meetings will continue with willing stakeholders to advance the conversation.
- There is an upcoming meeting with leadership from BCBSSC, and SCTA leaders also hope to coordinate meetings with Medicaid and Alliance for Health Plans leadership to discuss needs and concerns with the ask.
- The Council reiterated that South Carolina is one of only seven states without some form of telehealth legislation, and that this past year has shown that

- patients value telehealth as an appropriate and convenient piece of the care delivery model removing access would be a patient dissatisfier that health plans should consider.
- Council members were generally in agreement with the proposed next steps, and agreed that the controversial environment during the recent legislative session was not conducive to introducing the telehealth legislation.
- c. Tele-ICU APP supervision -
 - The group also discussed incorporating Proviso language to allow temporary waivers for out of state physician and advanced practice provider collaborations on a case-by-case basis for those participating in the SCTA-supported Tele-ICU programs. The Council was in support of this proviso.

Next SCTA Advisory Council Meeting:

Thursday, August 19, 2021 from 1-3PM Microsoft Teams