

Rural Health Transformation Team Meeting Summary

Mtg Date: Tues, July 11, 2019, 10A-12PM

Attendees: Joy Barresi Saucier, Art Blank (ph), Jay Bradshaw, Nicole Breton, Andy Coburn, Connie Coggins, Tim Crowley (ph), Glen Cyr, Nancy Dickey (ph), Kris Doody, Elsie Flemings, Katie Fulham Harris, Sara Gagne-Holmes, Olivia Alford, Mark Green, Lisa Harvey McPherson, Tom Judge, Megan Garratt-Reed, Jeanne Lambrew, Danielle Louder, Liz Neptune, Sandy Nesen (ph), Lisa Letourneau, Catherine Ryder, Stephen Sears, Jeff Sedlack, Sarah Taylor (*Unable to attend: M. Probert, P. Saucier*)

After member introductions, Commissioner Lambrew opened the meeting by outlining the Department of Health and Human Services' purpose for convening the group: to provide input and advice as DHHS undertakes an initiative to transform rural health care. Lisa Letourneau then reviewed the previous and ongoing efforts that provide a foundation for this work, and it was agreed that participants would provide updates on several related state and national projects, including the American Hospital Association's Rural Health Task Force, The Veterans Administration's regional planning process, and upcoming research by the Rural Telehealth Research Center.

Following the discussion of previous efforts, the Department provided an overview of a proposed framework for the initiative. First, in recognition of the need for broad community input into the process, the Department outlined plans to hold public Rural Health Listening Sessions in several areas of the state over the course of the summer and early fall. Participants provided advice about the structure of the meetings, and expressed willingness to assist with planning and logistics. The Department will be collaborating with several Team member organizations on the planning of the sessions, and will share additional details with the full group as soon as they are available.

Next, the group reviewed the three areas of focus for statewide infrastructure improvement: telehealth, primary care, and workforce issues. Regarding telehealth, participants suggested a particular focus on improving the availability and uptake of telehealth and telemonitoring in home settings and noted that Medicare reimbursement policies are a barrier to uptake more broadly. It was agreed that the Department would work with Team members to develop a list of specific Medicare regulatory changes that would be helpful. Team members also agreed about the workforce challenges described and noted the need to think beyond current paradigms for provider education and care delivery. The Department will explore opportunities to build alternative education and training pathways and to support non-professional workforce and will assess whether there are any current barriers in licensing that should be evaluated. On primary care, the Department will continue to communicate about the "Primary Cares" initiative developed by the federal Center for Medicare and Medicaid Innovation and will be considering other opportunities to better support primary care at the state level. During the discussion, the group also repeatedly noted that both transportation (emergency, non-emergency, and non-medical) is an ongoing challenge for rural communities. The Department will include a discussion of these issues on the next Transformation Team meeting agenda.

After discussing statewide priorities, the Department provided an overview of a proposed initiative to develop regional models of care, beginning with an initial focus on maternal and perinatal care. Attendees agreed with the approach and focus and noted the relationship to the previous conversations about telehealth and workforce. The Department coordinate with other related projects in the state and will provide a proposed plan based on additional research of regional models in other states and countries.

Finally, the Department described its interest in providing leadership for community-driven payment pilots to better support the provision of health care in rural areas. Meeting participants suggested that this workstream should begin with conversations about innovative new models for the delivery of care, which could be followed by discussion of the payment and regulatory changes needed to support them. The Department agreed, and to reflect that focus will begin referring to this section of the initiative as care model pilots. The Department will continue research and monitoring of federal efforts in this area and will begin to solicit public feedback on the concept during Listening Sessions.

In closing, the Department committed to providing regular email updates to the Transformation Team, and to convene the group again in the fall to review progress.