Welcome Address

Diana Camacho, MPH
Senior Program Officer
California Health Care Foundation
Objectives for the Meeting

• Review the Coalition’s work in 2021
• Provide an update on legislative and regulatory developments in California telehealth in 2021
• Allow members and other attendees to share their priorities for telehealth policy, advocacy and action in 2022
• Finalize the Coalition’s priorities for 2022
<table>
<thead>
<tr>
<th>Title</th>
<th>Speakers</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Welcome Address</td>
<td>Mei Wa Kwong, Center for Connected Health Policy</td>
<td>9:00-9:15</td>
</tr>
<tr>
<td></td>
<td>Diana Camacho, California Health Care Foundation</td>
<td></td>
</tr>
<tr>
<td>Year in Review</td>
<td>Anthony Magit, Rady Children’s Hospital</td>
<td>9:15-9:30</td>
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<tr>
<td></td>
<td>Lisa Matsubara, Planned Parenthood Affiliates of California</td>
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</tr>
<tr>
<td>Legislation and Regulation Round-Up</td>
<td>Amy Durbin, Center for Connected Health Policy</td>
<td>9:30-9:50</td>
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<td></td>
<td>Robby Franceschini, BluePath Health</td>
<td></td>
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<tr>
<td>Voices from the Field</td>
<td>Joe Garbanzos, AARP of California (moderator)</td>
<td>9:50-10:30</td>
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<tr>
<td></td>
<td>Gabriella Barbosa, The Children’s Partnership</td>
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<td></td>
<td>Nghia Do, YouthMindsAlliance</td>
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<td></td>
<td>Nancy Netherland, Kids and Caregivers</td>
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<td></td>
<td>Claudia Page, California Children’s Trust</td>
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<td></td>
<td>Jennifer Raymond, Children’s Hospital Los Angeles</td>
<td></td>
</tr>
<tr>
<td>Future of Telehealth in Medi-Cal</td>
<td>Anthony Magit, Rady Children’s Hospital (moderator)</td>
<td>10:30-11:20</td>
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<tr>
<td></td>
<td>Leticia Alejandrez, California Emerging Technology Fund</td>
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<td></td>
<td>Paul Glassman, California Northstate University</td>
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<td>Beth Malinowski, California Primary Care Association</td>
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<td>Rajiv Pramanik, Contra Costa Health Plan</td>
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<td>Sylvia Trujillo, OCHIN</td>
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<td></td>
<td>Carol Yarbrough, UCSF Health</td>
<td></td>
</tr>
<tr>
<td>DHCS Overview of Medi-Cal Telehealth Policy</td>
<td>Lisa Murawski, California Department of Health Care Services</td>
<td>11:20-11:40</td>
</tr>
<tr>
<td>A Conversation on How the Digital Divide Affects California’s Health System</td>
<td>Shayna Englin, 42 COMMS</td>
<td>11:40-12:10</td>
</tr>
<tr>
<td></td>
<td>Katie Heidorn and Marissa Kraynack, Insure the Uninsured Project</td>
<td></td>
</tr>
<tr>
<td>Keynote Address from Our 2021 State Telehealth Champion</td>
<td>Senator Anna M. Caballero, District 12</td>
<td>12:10-12:40</td>
</tr>
<tr>
<td>Coalition Priorities for 2022</td>
<td>Mei Wa Kwong, Center for Connected Health Policy</td>
<td>12:40-12:55</td>
</tr>
<tr>
<td>Outlook for 2022: Coalition Members Share Their Priorities for the Coming Year</td>
<td>Misty Humphries, UC Davis Health (moderator)</td>
<td>12:55-1:40</td>
</tr>
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<td></td>
<td>Sarah Bridge, Association of California Healthcare Districts</td>
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<td></td>
<td>David Ford, California Medical Association</td>
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<td></td>
<td>Linnea Koopmans, Local Health Plans of California</td>
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<td></td>
<td>Mike Kurliand, West Health</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Lisa Moore, UC Office of the President</td>
<td></td>
</tr>
<tr>
<td>Call to Action</td>
<td>Coalition staff and committee chairs</td>
<td>1:40-2:00</td>
</tr>
</tbody>
</table>
Thank you to our sponsors!
2021 in Review: Coalition Accomplishments

Anthony Magit, MD, MPH
Chief Physician Integration Officer
Rady Children’s Hospital of San Diego
(Education Committee Chair)

Lisa Matsubara, JD
General Counsel and VP of Policy
Planned Parenthood Affiliates of California
(Legislation Committee Chair)
2021 Accomplishments

Administration

✓ Hosted monthly membership meetings. Guest speakers included
  • Srinath Adusumalli: Patient Characteristics Associated with Telemedicine Access for Primary and Specialty Ambulatory Care During the COVID-19 Pandemic (February)
  • Rafael Gomez: Reimbursing FQHCs for Telehealth Post-COVID-19 Pandemic: Medi-Cal’s Options (April)
  • Ella Schwartz: Patient Monitoring in the Safety Net (August)
  • Yohualli Balderas-Medina Anaya: Meeting Them Where They Are on the Web: Addressing Structural Barriers for Latinos in Telehealth Care (September)

✓ Continue to convene our Broadband Committee to create principles and policy priorities for the Coalition, discuss policy developments and analyze legislation

✓ Hosted monthly Legislation and Education & Regulation Committee meetings to discuss strategy, review legislation, and develop effective stakeholder educational materials

✓ Goal Met for Year, raising $25,000 to support staff hours
2021 Accomplishments, cont’d

Advocacy

- Endorsed seven state bills and submitted letters of support
  - SB 365 (Caballero)
  - AB 14 (Aguiar-Curry et al.)
  - SB 4 (Gonzalez)
  - SB 28 (Caballero)
  - AB 32 (Aguiar-Curry et al.)
  - AB 1264 (Aguiar-Curry)
  - SB 371 (Caballero)

Member Engagement and Outreach

- Membership expansion to 159 organizations, representing payers, consumer groups, clinics, hospitals, academic institutions, children, seniors, and provider constituencies
2021 Accomplishments, cont’d

Stakeholder Fact Sheets

- Disseminated eight new fact sheets
  - DHCS Telehealth Proposal Fact Sheet
  - AB 133 Fact Sheet
  - Alternative Modalities: Text-based Communications Fact Sheet
  - Alternative Modalities: Audio-only Telehealth Fact Sheet
  - Alternative Modalities: E-consult Fact Sheet
  - Telehealth Payment Parity Fact Sheet
  - Broadband in California: Understanding the Digital Divide Fact Sheet
  - SB 156 Fact Sheet
2021 Accomplishments, cont’d

Webinars

✓ **Hosted four webinars**, educating an average of over 150 attendees at each event about telehealth
  • Telehealth in Medi-Cal: What’s Next After COVID-19? (March 2021)
  • Alternative Modalities: Going Beyond Live Video & RPM (May 2021)
  • What’s Next in CA Telehealth Policy: AB 133 Medi-Cal Agreement (August 2021)
  • The Digital Divide and Telehealth (October 2021)

Policy Briefing

✓ **Hosted a policy briefing** entitled “Telehealth Policy for a Post-Pandemic California” in October, garnering 89 participants, including representatives from state government agencies and the Legislature
Legislation and Regulation Round-Up

Amy Durbin, MPP  
Policy Advisor  
Center for Connected Health Policy

Robby Franceschini, JD, MPH  
Director of Policy  
BluePath Health
## California Legislative Developments (1/3)
### Telehealth-Related Bills

<table>
<thead>
<tr>
<th>Bill No.</th>
<th>Coalition Support?</th>
<th>Recent Developments</th>
<th>Brief Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>SB 365 (Caballero)</td>
<td>✅</td>
<td>Vetoed by Governor. (10/6)</td>
<td>Requires Medi-Cal e-consult reimbursement</td>
</tr>
<tr>
<td>AB 457 (Santiago)</td>
<td></td>
<td>Approved by the Governor. Chaptered by Secretary of State. – Chapter 439, Statues of 2021. (10/1)</td>
<td>Creates Protection of Patient Choice in Telehealth Provider Act</td>
</tr>
<tr>
<td>AB 523 (Nazarian)</td>
<td></td>
<td>Vetoed by Governor. (10/6)</td>
<td>Requires DHCS to make all COVID PACE program changes permanent, including telehealth flexibilities</td>
</tr>
<tr>
<td>SB 801 (Roth)</td>
<td></td>
<td>Approved by the Governor. Chaptered by Secretary of State – Chapter 647, Statutes of 2021. (10/7)</td>
<td>For purposes of telehealth, defines health care provider to additionally include an associate clinical social worker and an associate professional clinical counselor</td>
</tr>
</tbody>
</table>
## California Legislative Developments (2/3)

### Broadband Bills

<table>
<thead>
<tr>
<th>Bill No.</th>
<th>Coalition Support?</th>
<th>Recent Developments</th>
<th>Brief Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>AB 14</strong> (Aguiar-Curry et al.)</td>
<td>✅</td>
<td>Approved by the Governor. Chaptered by Secretary of State – Chapter 658, Statutes of 2021. (10/8)</td>
<td>Revises law regarding California Advanced Services Fund (CASF) Amendments remove provisions related to definition of un/underserved areas (see standards in SB 156); make certain provisions effective only if SB 4 is passed; make bill an urgency statute.</td>
</tr>
<tr>
<td><strong>SB 4</strong> (Gonzalez)</td>
<td>✅</td>
<td>Approved by the Governor. Chaptered by Secretary of State – Chapter 671, Statutes of 2021. (10/8)</td>
<td>Revises law regarding California Advanced Services Fund (CASF) Amendments remove VOIP surcharge provisions and deaf and disabled telecoms provisions (see AB 14); makes bill effective only if AB 14 is passed.</td>
</tr>
<tr>
<td><strong>SB 28</strong> (Caballero)</td>
<td>✅</td>
<td>Approved by the Governor. Chaptered by Secretary of State – Chapter 673, Statutes of 2021. (10/8)</td>
<td>Rural Broadband and Digital Infrastructure Video Competition Reform Act of 2021 Amendments remove provisions requiring state agencies to identify resources for broadband networks; remove DIVCA provisions except for those related to collection of more granular franchisee data</td>
</tr>
<tr>
<td><strong>AB 537</strong> (Quirk)</td>
<td></td>
<td>Approved by the Governor. Chaptered by Secretary of State - Chapter 467, Statutes of 2021. (10/4)</td>
<td>Requires that the time period for city/county approval of collocation or siting applications for wireless telecommunications facilities be deemed approved if the city/county fails to approve within the standard set by the FCC Amendments remove provisions related to judicial review.</td>
</tr>
<tr>
<td><strong>SB 378</strong> (Gonzalez)</td>
<td></td>
<td>Approved by the Governor. Chaptered by Secretary of State – Chapter 677, Statutes of 2021. (10/8)</td>
<td>Broadband: methods of fiber installation Amendments make slight changes to the definition of “reasonable fee”</td>
</tr>
<tr>
<td><strong>SB 556</strong> (Dodd)</td>
<td></td>
<td>Vetoed by the Governor. In Senate. Consideration of Governor’s veto pending. (10/4)</td>
<td>Seeks to ensure local governments provide access and quickly permit approval of small wireless facility siting applications Amendments clarify definition of “traffic signal pole,” clarify reasons for denials; reasons for levying fees</td>
</tr>
</tbody>
</table>

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## California Legislative Developments (3/3)
### Two-Year Bills

<table>
<thead>
<tr>
<th>Bill No.</th>
<th>Coalition Support?</th>
<th>Recent Developments</th>
<th>Brief Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>AB 32</strong> (Aguiar Curry et al.)</td>
<td>☑️</td>
<td>Two-year bill</td>
<td>Makes permanent Covid-19 telehealth flexibilities</td>
</tr>
<tr>
<td><strong>AB 34</strong> (Muratsuchi)</td>
<td></td>
<td>Two-year bill</td>
<td>Authorizes the issuance of bonds in the amount of $10,000,000,000 pursuant to the State General Obligation Bond Law to support the 2022 Broadband for All Program</td>
</tr>
<tr>
<td><strong>AB 1264</strong> (Aguilar-Curry)</td>
<td>☑️</td>
<td>Two-year bill</td>
<td>Creates CHHS Agency Project ECHO grant program for children’s hospitals</td>
</tr>
<tr>
<td><strong>AB 410</strong> (Fong)</td>
<td></td>
<td>Two-year bill</td>
<td>Nurse Licensure Compact</td>
</tr>
<tr>
<td><strong>AB 552</strong> (Quirk-Silva)</td>
<td></td>
<td>Two-year bill</td>
<td>Integrated School-Based Behavioral Health Partnership Program</td>
</tr>
<tr>
<td><strong>AB 935</strong> (Maienschein)</td>
<td></td>
<td>Two-year bill</td>
<td>Requires health plans and insurers to provide access to a telephone mental health consultation program for children and pregnant/post-partum women</td>
</tr>
<tr>
<td><strong>AB 1117</strong> (Wicks)</td>
<td></td>
<td>Two-year bill</td>
<td>Establishes Healthy Start: Toxic Stress and Trauma Resiliency for Children Program</td>
</tr>
<tr>
<td><strong>AB 1131</strong> (Wood)</td>
<td></td>
<td>Two-year bill</td>
<td>Requires participation in statewide health information exchange network</td>
</tr>
<tr>
<td><strong>AB 1252</strong> (Chau)</td>
<td></td>
<td>Two-year bill</td>
<td>Defines privacy protections for personal health record information</td>
</tr>
<tr>
<td><strong>SB 371</strong> (Caballero)</td>
<td>☑️</td>
<td>Two-year bill</td>
<td>Creates a Deputy Secretary for Health Information Technology to coordinate health information technology efforts regarding hie, broadband, and telehealth</td>
</tr>
<tr>
<td><strong>SB 508</strong> (Stern)</td>
<td></td>
<td>Two-year bill</td>
<td>Authorizes a local education agency (LEA) to provide mental health services and includes telehealth as an approved modality</td>
</tr>
</tbody>
</table>
AB 133 – Extends Medicaid Expansions
- Extends temporary Medi-Cal telehealth policies to December 31, 2022
- DHCS to convene advisory group
- Protects pre-COVID-19 policies, including store-and-forward
- Allows DHCS to authorize RPM with a separate fee schedule

Other Provisions
- Requires local jail provide DSH clinician access to conduct evaluation through telehealth
- Creates Children & Youth Behavioral Initiative – Incentivizes school-based telehealth
- Health Information Exchange and Health Information Technology Advisory Group
- Data requested from providers to inform health care workforce policy

AB 457 – Expands Private Payer Protections
- Updates private payer law - removes contract specific language
- Ensures patient choice and third party telehealth provider protections
2021 CALIFORNIA TELEHEALTH LEGISLATION

- **Broadband SB 156**
  - $6 billion
  - Middle Mile Broadband Infrastructure – construction of state-owned open-access broadband middle mile ($3.25 Billion)
  - Broadband Last Mile Support – Last mile funding ($2 billion total, staggered out over 2021-24)
  - Loan Loss Reserve – Allows counties to acquire funding for acquisition, construction and improvement of broadband infrastructure and operate a broadband services ($750 million)
## CALIFORNIA MEDICAID TELEHEALTH POLICY

<table>
<thead>
<tr>
<th>PRE-COVID-19</th>
<th>COVID-19</th>
<th>PROPOSED</th>
</tr>
</thead>
<tbody>
<tr>
<td>Live Video &amp; Store &amp; Forward Reimbursed at parity; Provider chooses when appropriate to use. FQHC/RHC Limited use of both modalities</td>
<td>Live Video &amp; Store &amp; Forward Reimbursed at parity; Provider chooses when appropriate to use. FQHC/RHC allowed to use both modalities</td>
<td>Live Video, Store &amp; Forward along w/audio-only, reimbursed at parity, pending new DHCS billing protocols</td>
</tr>
<tr>
<td>FQHCs/RHCs limited in where patient located at time of service. Home not eligible</td>
<td>FQHC/RHC home eligible originating site for all modalities</td>
<td>FQHC/RHC may use all modalities with no site limitations and reimbursed at PPS rate</td>
</tr>
<tr>
<td>No audio-only.</td>
<td>Audio-only reimbursed for services &amp; parity</td>
<td>Audio-only reimbursed at parity, subject to new DHCS billing protocols</td>
</tr>
<tr>
<td>No RPM.</td>
<td>No RPM.</td>
<td>RPM covered subject to separate fee schedule</td>
</tr>
</tbody>
</table>
California Workgroup Process

Workgroup Charge

The charge of the workgroup is to advise DHCS on how to refine its telehealth policies to ensure the policies are designed optimally for a post-PHE world.

- Billing and coding protocols: What codes and modifiers should be used to delineate when services are delivered by telehealth and whether services are video or audio-only.
- Ongoing monitoring and evaluation: How DHCS should measure and review telehealth utilization to facilitate consumer protection and Medi-Cal program stewardship.
- Utilization management: What standards and protections should be in place to ensure expanded telehealth coverage increases access, supports high-quality care, and reduces health disparities, among other goals.

Find more information on the advisory group here: https://www.dhcs.ca.gov/provgovpart/Pages/TelehealthAdvisoryWorkgroup.aspx

Language of AB 133:
For purposes of informing the 2022–23 proposed Governor’s Budget, released in January 2022, the department shall convene an advisory group to provide recommendations to inform the department in establishing and adopting billing and utilization management protocols for telehealth modalities to increase access and equity and reduce disparities in the Medi-Cal program. The advisory group shall analyze the impact of telehealth in increased access for patients, changes in health quality outcomes and utilization, best practices for the appropriate mix of in-person visits and telehealth, and the benefits or liabilities of any practice or care model changes that have resulted from telephonic visits.

Topics for Workgroup Advisement

- **Topic 1:** Identify billing and coding protocols that will provide more comprehensive and specific information about telehealth utilization
  - Issues to be Addressed
    - Limitations in understanding current telehealth use and impact due to inconsistent and optional use of telehealth modifiers within certain delivery systems
    - Inability to differentiate between video and audio modalities

- **Topic 2:** Identify monitoring policies to support consumer protection and program integrity
  - Lack of monitoring capabilities to support consumer protections and analyze utilization outliers
  - Limited evidence base on the quality of “telehealth-only” or third-party telehealth providers and potential impact on coordination of care

- **Topic 3:** Identify other policies that will help achieve DHCS guiding principles for telehealth
  - Ensure Medi-Cal beneficiaries have equitable access to in-person care or care via the telehealth modality that best suits their needs and meets standard of care
# State & Federal Telehealth Policy Changes in COVID-19

## Federal

<table>
<thead>
<tr>
<th>Medicare Issue</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Geographic Limit</td>
<td>Waived</td>
</tr>
<tr>
<td>Site limitation</td>
<td>Waived</td>
</tr>
<tr>
<td>Provider List</td>
<td>Expanded</td>
</tr>
<tr>
<td>Services Eligible</td>
<td>Added additional 80 codes</td>
</tr>
<tr>
<td>Visit limits</td>
<td>Waived certain limits</td>
</tr>
<tr>
<td>Modality</td>
<td>Live Video, Phone, some srvs</td>
</tr>
<tr>
<td>Supervision requirements</td>
<td>Relaxed some</td>
</tr>
<tr>
<td>Licensing</td>
<td>Relaxed requirements</td>
</tr>
<tr>
<td>Tech-Enabled/Comm-Based</td>
<td>More codes eligible for phone &amp; allowed PTs/OTs/SLPs &amp; other use</td>
</tr>
</tbody>
</table>
| (not considered telehealth, but uses telehealth technology) | - DEA – PHE prescribing exception/allowed phone for suboxone for OUD  
- HIPAA – OCR will not fine during this time |

## State (Most Common Changes)

<table>
<thead>
<tr>
<th>Medicaid Issue</th>
<th>Change</th>
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</thead>
<tbody>
<tr>
<td>Modality</td>
<td>Allowing phone</td>
</tr>
<tr>
<td>Location</td>
<td>Allowing home</td>
</tr>
<tr>
<td>Consent</td>
<td>Relaxed consent requirements</td>
</tr>
<tr>
<td>Services</td>
<td>Expanded types of services eligible</td>
</tr>
<tr>
<td>Reimbursement</td>
<td>Parity</td>
</tr>
<tr>
<td>Providers</td>
<td>Allowed other providers such as allied health pros</td>
</tr>
<tr>
<td>Licensing</td>
<td>Waived some requirements</td>
</tr>
</tbody>
</table>

- Private payer orders range from encouragement to cover telehealth to more explicit mandates
- Relaxed some health information protections

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2021 Trends

**Federal Activity**
- CCHP tracking over 100 pieces of federal telehealth legislation
- Re-introduction of bills to make some of the temporary changes permanent
  - Removing originating site restrictions, adding audio-only, parity, mental health focus
- CMS Proposed Physician Fee Schedule
  - Extending some temporary eligible telehealth services – just Category 3 until end of CY 2023
  - Expansions for audio-only and FQHC/RHCs but many caveats and limited to mental health

**State Activity**
- Payment parity
  - Reimbursement limits by service, provider, modality
- Audio-Only
- Licensing for out of state providers
- Data requirements/workgroups established
- Broadband (infrastructure, affordability, digital literacy)
PERMANENT FEDERAL TELEHEALTH POLICY UPDATES

**ADMINISTRATIVE**

- **Physician Fee Schedule Changes**
  - Added some services from the temporary list to the permanent list
  - Created a “Category 3” for approval of services. Temporarily allows some services to continue to determine if they should be permanent
  
  *Proposed changes extend Category 3 until end of CY 2023 and allow audio-only for mental health services with many caveats*

**LEGISLATIVE**

- **HR 133**
  - Added rural emergency to originating site
  - Expansion of mental health services to be without geographic restriction and allows the home
    - BUT - one in-person visit with telehealth provider within 6-month period prior to telehealth encounter
  - Additional funding for broadband and FCC Telehealth COVID-19 Program
PERMANENT STATE UPDATES:
MEDICAID REIMBURSEMENT BY SERVICE MODALITY
(Fee-for-Service)

Live Video
50 states and DC

Store and Forward*
22 states

Remote Patient Monitoring*
28 states

Allow audio-only*
22 states

*Some states reimburse this modality solely as part of Communication Technology-Based Services, which have their own separate codes and reimbursement rates.

As of Fall 2021

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STATE REIMBURSEMENT REQUIREMENTS FOR PRIVATE PAYERS

43 states and DC have telehealth private payer laws

Parity is difficult to determine:

- Parity in services covered vs. parity in payment
- Many states make their telehealth private payer laws "subject to the terms and conditions of the contract"

As of Fall 2021
Payment Parity and Audio-Only
- Expanding coverage to audio-only (RI, KY, TN)
  - WA HB 1196: Expands existing payment parity laws to include audio-only as well – also for RHCs

Licensing/flexibility for out of state providers (WV, KS, NY)
- AZ HB 2454: Allows out-of-state providers to deliver services via telehealth under certain circumstances
- At least 10 states entered into one or more licensing compacts

Data requirements/workgroups established (MN, MD, RI, AZ)
- NV SB 5 – Requires Dept. to establish an electronic tool to analyze certain data concerning access to telehealth and creation of a data dashboard for analysis of data related to telehealth access by different groups and populations

Limited extension of emergency policies (MD & MN – audio-only and parity – until June 30, 2023)
- CT HB 5596: Extends some policies allowing audio-only until June 30, 2023

Updating Private Payer Laws
- Many with limits by service, provider, modality – most private payer
- Prohibiting insurers from contracting with just one telehealth company (AR, AZ)
Federal Policy Items to Watch

• Infrastructure Investment and Jobs Act of 2021 (H.R. 3684)
  • Broadband policy provisions include
    • Broadband deployment grants for states
    • Broadband data mapping
    • Report on Universal Service Fund
    • Broadband deployment locations map

• Build Back Better Act- Framework and Ongoing Discussions
  • Potential social policy expansions include
    • Expanded Medicare benefits (dental and vision)
    • Increased funding for Medicaid home and community-based services for seniors and person with disabilities
    • Federal tax credits for residents in states that did not expand Medicaid under ACA
| Voices from the Field: How to Engage Patients, Families and Caregivers in Telehealth, Policy and Research |
|---|---|
| Gabriella Barbosa, JD  
Managing Director of Policy  
The Children’s Partnership | Claudia Page  
Director, Safety Net and Innovation  
California Children’s Trust |
| Nghia Do  
Founder  
YouthMindsAlliance and High School Senior | Jennifer Raymond, MD, MCR  
Chief of the Division of Endocrinology  
Chair of the Virtual Care Committee  
Children’s Hospital Los Angeles |
| Nancy Netherland  
Founder  
Kids and Caregivers | Joe Garbanzos, State President (volunteer)  
AARP of California (Moderator) |
The Future of Telehealth in Medi-Cal: A Checkpoint with DHCS Telehealth Advisory Workgroup Members

Leticia Alejandrez
Director of Telehealth and Human Services
California Emerging Technology Fund

Paul Glassman DDS, MA, MBA
Professor and Associate Dean for Research and Community Engagement
California Northstate University

Beth Malinowski, MPH
Director of Government Affairs
California Primary Care Association

Rajiv Pramanik, MD
Chief Health Informatics Officer
Contra Costa Health Services

Sylvia Trujillo, JD, MPP
Director, Policy
OCHIN & California Telehealth Network

Carol Yarbrough MBA, CPC, CCA, OCS, CHC
Business Operations Manager, Telehealth
UCSF Health

Anthony Magit, MD, MPH
Chief Physician Integration Officer
Rady Children’s Hospital of San Diego
(Moderator)
DHCS Overview of Telehealth Advisory Workgroup

Lisa Murawski
Chief, Benefits Division
Department of Health Care Services
Lunch and Learn: A Conversation on How the Digital Divide Affects California’s Health System

Katie Heidorn, MPA
Executive Director
Insure the Uninsured Project (ITUP)
About ITUP: Mission and Vision

Mission

Promote innovative and workable policy solutions that expand health care access and improve the health of all Californians.

Vision

ITUP believes that all Californians should have a fair opportunity to live their healthiest lives.
ITUP Values

ITUP seeks a health system that is:

- **Universal** – All Californians are eligible for comprehensive health coverage and services, including primary, specialty, behavioral, oral, and vision health services, as well as services that address the social determinants of health
- **Equitable** – All Californians receive health care coverage, treatment, and services that address the social determinants of health regardless of health status, age, ability, income, language, race, ethnicity, gender identity, sexual orientation, immigration status, and geographic region
- **Accessible** – All Californians have access to coverage options and services that are available, timely, and appropriate
- **Effective** – Health, health care, and related services that address the social determinants of health are person-centered, value-based, coordinated, and high-quality
- **Affordable** – Coverage and services are affordable for consumers at the point of purchase and care; and, at the health system level for public and private purchasers
Policy Priority Areas

**Coverage and Access**
- 10 Statewide and Regional Coverage Snapshots
- Regional Workgroups
- 2020 Enrollment and Coverage Notes from the Field
- 2020 Telehealth Notes from the Field
- 2021 Notes from the Field
- Enrollment Policy Forum
- Telehealth Policy Forum
- Medicare Fact Sheet

**Delivery System Transformation**
- CalAIM Summary Blog
- Community Health Workers Fact Sheet
- Public Health and Delivery System Integration Fact Sheet
- Community-Based Organization Fact Sheet

**The Future of Health**
- Broadband for Health Fact Sheet
- Broadband Policy Forum
- Health Information Exchange Fact Sheet
- Health Information Exchange Policy Forum

*Save-the-Date: ITUP Broadband and Health Policy Forum*  
9 – 11am, Thurs., Nov. 17, 2021
Why Focus on Broadband?

• **Our Goal:** Achieve an Equitable and Accessible Health System by Closing the Digital Divide

• **Connectivity and Access to Devices**
  • Needed to Fulfill the Potential of:
    • Telehealth
    • Health Information Exchange
    • Health Access and Equity
    • Future Health Innovations

• **Address the Social Determinants of Health**, including economic mobility and education
Digital Divide Consumer Impacts

• Slow Broadband Speed
  • As of December 2019, 96.5% of Californian households reach the 25/3 Mbps broadband access
  • However, only 73.8% of Californian households in rural regions of the state have access to this broadband availability

• Lack of Affordability
  • In 2019, 30% of Californians don't have access to low-cost broadband

• Lack of Access to Devices
  • More than 1 in 10 Californians don't have a computer

• Lack of Access to Internet
  • 889,000 CA residents do not have internet providers where they live, including 365,000 in LA County
Figure 1. Historical Redlining Perpetuates Digital and Health Inequities
Broadband Speed

More is Faster!!!

**Gbps > Mbps > Kbps**

**NOTE:** The Federal Communications Commission (FCC) sets sufficient broadband speeds at 25 Mbps download speeds and 3 Mbps upload speeds.
### How much broadband speed do residents need?

<table>
<thead>
<tr>
<th></th>
<th>LIGHT</th>
<th>MEDIUM</th>
<th>HEAVY</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 device</td>
<td>8 Mbps</td>
<td>8 Mbps</td>
<td>25 Mbps</td>
</tr>
<tr>
<td>2 devices</td>
<td>8 Mbps</td>
<td>25 Mbps</td>
<td>25 Mbps</td>
</tr>
<tr>
<td>3 devices</td>
<td>25 Mbps</td>
<td>25 Mbps</td>
<td>50+ Mbps</td>
</tr>
<tr>
<td>4 devices</td>
<td>25 Mbps</td>
<td>50+ Mbps</td>
<td>50+ Mbps</td>
</tr>
</tbody>
</table>

* Download speeds only.

Source: [Insert source here]
Types of Broadband

- **Fiber-Optic Internet Networks (Fiber):**
  - Considered the gold standard
  - Network uses glass strands to send information
  - Useful life = decades
  - Most scalable technology to make sure future bandwidth needs are met
  - Fiber infrastructure can be ‘lit’ or active, or can be ‘dark’ and inactive

- **Phone Lines:**
  - Also Known As: Digital Subscriber Lines (DSL)
  - Internet connection through phone lines
  - Uses frequencies that degrade over distances
  - Consumer needs to be located within a mile of the central office supporting the DSL to have sufficient speeds

- **Cable Modem System:**
  - Cable television services offer internet access
  - Network is based on neighborhoods, where essentially the whole community shares on connection
  - Results in slower, often insufficient speeds for consumers
Anchor Institutions: Anchor institutions are flagship community institutions that are sometimes connected to fiber even when fiber services are not commercially available to the broader community. Because of this, they can act as a connection to the Internet backbone. Health care facilities, schools, and libraries are examples of anchor institutions.

Digital Equity: The state of all members of a community having equal access and sufficient digital literacy to use communication technologies.

Internet Service Providers (ISPs): An entity that provides broadband services to subscribers/consumers.

Unserved Household: The California Public Utilities Code defines an unserved household as a household for which no facility-based broadband service at speeds of at least 6Mbps downstream and 1Mbps upstream.
Key Definitions for Health

**Last Mile:** The portion of the internet which connects ISPs’ shared infrastructure to end users, such as homes or businesses. For example, in a cellular wireless network, the last mile is the wireless connection between a base station and an individual mobile device. Sometimes this is also called the “first mile.”

**Middle Mile:** This is a term most often referring to the network connection between the region and/or local network to the core network, or, the greater internet. For instance, in a rural area, the middle mile would likely connect the town’s network to a larger metropolitan area where it interconnects with major ISPs.

**Municipal Network:** A broadband network owned by a local government, or “municipality”. These networks take many forms, from modest networks serving a few businesses to networks that are available at every address across a community. Some are run by the municipality and others are managed by an ISP under contract.
How to Engage?

• California Public Utilities Commission
  • Regional Broadband Consortia
  • Disadvantaged Communities Advisory Group
    • Meets Monthly (1pm, Nov. 19)

• California Department of Technology
  • Middle-Mile Advisory Committee
    • Meets Monthly (1 – 2:30pm, Nov. 17)

• CA Broadband Council (Meets Ad Hoc)

• Legislature
  • Senator Lena Gonzalez (SB 4)
  • Assemblymember Cecilia Aguiar-Curry (AB 14)

• Budget
  • Newsom Administration and Legislature (SB 156)
Learn More

California Research Bureau: https://www.library.ca.gov/Content/pdf/crb/reports/Broadband_in_California_May_%202021.pdf

Community Networks Fact Sheets and Other Resources: https://muninetworks.org/content/resources

Community Networks Glossary: https://muninetworks.org/glossary

Electronic Frontier Foundation Key Terms: https://www.eff.org/wp/case-fiber-home-today-why-fiber-superior-medium-21st-century-broadband


Thank You!

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2021 State Champion Award Presentation

Senator Anna M. Caballero
California Senate District 12
Coalition Policy Priorities for 2022

Mei Wa Kwong, JD
Executive Director
Center for Connected Health Policy
Coalition Policy Priorities for 2022

Draft Policy Priorities and Example Work

➢ Maintain and expand coverage of telehealth modalities
  ➢ Advocate for continued coverage of telehealth modalities across all types of coverage
  ➢ Support continued FQHC/RHC coverage for telehealth
  ➢ Work with members to highlight patient stories on webinars, other materials aimed at policymakers and consumers

➢ Build the evidence base for telehealth in California
  ➢ Showcase research and evaluation findings from California organizations on monthly calls
  ➢ Create educational materials focused on quality and health outcome measurement for telehealth programs

➢ Bridge the digital divide to ensure patient and provider internet access
  ➢ Monitor and provide comments/recommendations on the implementation of SB 156 middle-mile and last-mile work
  ➢ Showcase the inequitable distribution of internet access/telehealth for certain communities (i.e., communities of color, the disabled community, older adults)

➢ Ensure California maintains leadership at the state level on telehealth policy
  ➢ Advocate for state coordination on telehealth and related health technology issues
  ➢ Conduct outreach to state agency telehealth leaders
  ➢ Highlight telehealth’s role in various state health reform and other initiatives (e.g., CalAIM ECM/ILOS, Medi-Cal procurement, payment reform)
Outlook for 2022: Coalition Members Share Their Priorities for the Coming Year

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Call to Action

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