



Telehealth Workgroup Charter

Version:	Draft
Revision Date:	September 26, 2014

Table of Contents

1	Overview	2
2	Introduction	3
2.1	Purpose of this document	3
2.2	List of Related Documents	3
2.3	Acronyms	3
3	Telehealth Domain Workgroup	4
3.1	Charter	4
3.2	Primary Work Activities	4
3.3	Key Deliverables	5
4	Telehealth Issues	5
4.1	Telehealth Issues	5
4.2	Harmonization with State and Federal laws	6
4.3	Technical infrastructure	6
5	Telehealth Domain Workgroup Risks	6
	Appendix I – ANY additional information to add here?	7

List of Tables

Table 1: Related Documents	3
Table 2: Acronyms	3

1 Overview

The North Dakota Health Information Network (NDHIN) is committed to implementing a secure statewide health information exchange of “protected health information”(PHI) that is consistent with state and federal privacy and security laws as well as the Principles articulated in the Office of National Coordinator for Health Information Technology’s, *Nationwide Privacy and Security Framework for Electronic Exchange of Individually Identifiable Health Information (Privacy and Security Framework)*.

The Telehealth Domain Workgroup of the NDHIN will review a number of issues that must be addressed in order ensure that a comprehensive approach for Telehealth services, while leveraging the NDHIN to meet the needs of its stakeholders.

DRAFT

2 Introduction

2.1 Purpose of this document

The purpose of the document is to define the charter, statement of work, and scope for the Telehealth domain workgroup.

2.2 List of Related Documents

The following documents are important to this project and provide additional information for review.

Table 1: Related Documents

Document Name	Version/Date
Health Information Exchange Strategic and Operational 2012 Plan Update	Draft June 5, 2012
Health Information Exchange Strategic and Operation Plan	December 6, 2010

2.3 Acronyms

Table 2: Acronyms

Acronym	Description
AHRQ	Agency for Healthcare Research and Quality
CDC	Centers for Disease Control and Prevention
CFR	Code of Federal Regulations
DHHS	Department of Health and Human Services
DURSA	Telehealth and Reciprocal Agreement
GINA	Genetic Information Nondiscrimination Act
HIE	Health Information Exchange
HIPAA	Health Information Portability and Accountability Act
HITAC	Health Information Technology Advisory Committee
HITECH	Health Information Technology for Economic and Clinical Health
NDHIN	North Dakota Health Information Network
PHI	Protected Health Record
RTI	Response to Intervention
NwHIN	Nationwide Health Information Network

3 Telehealth Domain Workgroup

The Health Information Technology Advisory Committee (HITAC) has formed a Telehealth Domain Workgroup to provide assistance during the implementation of the North Dakota HIE Strategic and Operational Plan (SOP).

In Section 9.4.5 of the SOP, under Rural Trust, the following is stated:

The following strategies for building and promoting services via Telehealth for all of ND help create policies that provide equitable HIE services to all regions in North Dakota

- Use tele-health when available to improve access to medical and
- health services Leverage the clinic,-hospital, LTC, health care and public health systems current connections to the ND communities to educate and treat patients
- Consistent and frequent communications and education about the process

In July 2014, the HITAC approved the Telehealth Domain Workgroup.

3.1 Charter

The Telehealth Domain Workgroup has five areas of responsibility:

- Review state, federal, and other pertinent regulations/guidance
- Develop recommendations and resources for the use of telehealth including recommendations utilizing the services of the NDHIN
- Recommend future additional services/functionality required by the NDHIN
- Recommend applicable changes to HITAC policies and procedures
- Coordinate with other HITAC workgroups, including those states that share our borders.

3.2 Primary Work Activities

The primary work activities of the Telehealth Domain Workgroup are as follows:

- Identify the unmet Telehealth requirements and needs and the role of NDHIN in ND Telehealth service provision
- Recommend changes to policies and procedures for usage of Telehealth for ND and bordering states
- Review and recommend changes to policies and procedures to achieve harmonization of state, neighboring states and federal laws
- Obtain legal opinions as required to complete the workgroup's work
- Coordinate with the Clinical, Communication & Education, Legal & Policy, Technical Infrastructure, Finance, data, and Governance Domain Workgroups

3.3 Key Deliverables

Key deliverables and expected outcomes from the Telehealth Workgroup are as follows:

- Recommendations for how Telehealth in the ND will be supported and used
- Recommendations for changes to North Dakota laws to meet federal standards and guidelines
- Recommendations to the IT domain workgroup regarding Telehealth business process changes for their incorporation into the technology platform
- Develop best practices for Telehealth in ND.

4 Telehealth Issues

The Telehealth Domain Workgroup has identified the following issues that will need to be addressed in order to implement the NDHIN. Resolution of these issues will require the expertise and input from one or more of the other domain workgroups, with final decisions made by HITAC.

4.1 Telehealth Issues

1. With the advent of Accountable Care Organizations, Home Health, MediQHome and other payment reforms, how does the NDHIN and Telehealth support these endeavors? Some sample questions include the following:
 - a. What are considered allowable telehealth services?
 - b. What home-based services will be considered?
 - i. What issues do these service options bring to the NDHIN?
 - ii. What “direct to consumer” services will be supported?
2. What are the required Telehealth needs, what is available and where are the gaps?
 - a. Not sure if I understand what is meant by “required telehealth needs”
 - b. Are the gaps really in the available telehealth services, or is it more in the available providers within the state...so really more in the healthcare gaps (i.e. behavioral health/mental health services)?
 - c. Are there disparity needs that Telehealth could address?
 - d. Essential services that may be supplied via Telehealth such as sexual assault guided exam, genetic counseling, audiology infant screening – all seen as a best practice.
 - e.
3. What are the barriers to Telehealth?
 - a. Being viewed as “separate” care
 - b. Wide-spread reimbursement, for all providers
 - c. Viewing telehealth networks as separate organizations
 - d. Unbalanced network/connectivity infrastructure
 - e. Progression of technology exceeding the policies regulating it

4.2 Harmonization with State and Federal laws

The Telehealth Workgroup will review and recommend changes to NDHIN policies and procedures to achieve harmonization of state and federal laws.

- There is state-state comparison information available thru ATA and CTel

4.3 Technical infrastructure

The Telehealth Workgroup will review and recommend additions and changes to the Telehealth and NDHIN infrastructure to meet the needs of stakeholders.

- What services are available
- What additions are required
- How can providers work together to ensure Telehealth services are provided efficiently and appropriately

5 Telehealth Domain Workgroup Risks

Understanding how changing environmental factors may impact any strategy is crucial to creating a plan that is supported by diverse stakeholders.

- Technology capabilities exceed the ability of regulatory policy to manage
- Regulations curtail creativity in the delivery of quality care at a distance
- Responsibility for regulation is placed with those not familiar with patient care/needs (i.e. those who are not providers)
- Financial needs (limited resources, reducing costs) become unbalanced with patient safety
- Current stakeholders list is not all-inclusive (??)

Appendix I – Any additional information to add here?

DRAFT