



# Interstate Telehealth Working Group

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AUGUST 31, 2021

# AGENDA

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10:00	Convene and Attendance
10:05	Approve Minutes
10:10	Sub-Groups Updates and Discussion Telehealth Licenses – Jessa Barnard National Licensure Compacts – Ken Lawenda Regional Reciprocity Agreements – Sarah Kessler Waiver of Licensure – Lynn Stanley Other Policy Options & International Practice – Chris Gilding
11:40	Sub-Group Form: Statutory Criteria
11:55	Next Steps and Adjourn

# Regional Reciprocity Subgroup Update

## Goal or Topic of Discussion

- To consider all aspects and impacts of Vermont partaking in regional reciprocity agreements

## Summary of Discussion

- Agreements that already exist
- Impacts on different providers and licensure
- Impacts on patients and providers at a system level

## Deliverables , Recommendations & Action Items

- To review current data (from GMCB and Dartmouth) and statutory language from Colorado's continued care work
- Agenda items for our next meeting are to review agreement considerations/definitions and opportunities, impacts, benefits and barriers to such

# Telehealth Licensure Subgroup Update

## Goal or Topic of Discussion

- First meeting of the group – introduced ourselves and the topic of Interstate Telehealth Licenses and that some states have enacted legislation to create telehealth licenses

## Summary of Discussion

- Level set what telehealth licenses allow: out-of-state licensees can care for patients located in VT but does not allow VT clinicians to care for established patients located out of state; members raised comments around disciplinary enforcement, patient safety, cost to administer these licenses
- Discussed sources of more information to inform the pro/cons of this regulatory structure

## Deliverables , Recommendations & Action Items

- OPR to provide text of statutes other states have enacted and any information from licensing bodies in those states that OPR can obtain
- After next meeting (to discuss what other states have enacted) members to help gather feedback from national professional associations or professional associations in those states with telehealth licenses

# National Licensure Compacts Subgroup Update

## Goal or Topic of Discussion

- The Goal of the ITWG National Licensure Compacts Sub- Group is to better understand the benefits and challenges of Interstate Compacts. To Be able to examine the impact on oversight and enforcement, including fiscal impact. In addition , the impact on patient care and continuity of care.

## Summary of Discussion

- The first meeting was to study and evaluate Licensure Compacts and to research policies and associated benefits and challenges with a focus on statutory considerations like quality, efficacy, best practices. The second meeting Lauren Layman introduced statutory considerations worksheet which can be used to present policy ideas that come out of sub-group discussions.

## Deliverables , Recommendations & Action Items

- Benefits of Compacts
- Develop a graph including an accounting of all the Compacts that are out there, which ones are out there, how many states in each one . In addition a column with considerations how does the compact change the disciplinary process. Have a section to adopt Compacts for each Profession.
- Points to Consider for future discussion – How OPR/ Medical Board would be notified when a compact license holder from another state comes to work in Vermont. Enforcement issues for Compact workers who are not licensed in VT. The effect of Compacts on other professionals in the state. Support of Compacts by the legislature and associations.
- Action Items – OPR to send for our next meeting a link to the council of State Governments National Center for Interstate Compacts, as well as the statutory considerations worksheet.

# Waiver of Licensure Subgroup Update

## Goal or Topic of Discussion

This subgroup addressed the possibility of a license waiver for providers licensed in other states and the necessary provisions to ensure client/patient safety.

## Summary of Discussion

### Benefits:

- Easier continuity of care
- Fewer “hoops” for providers who are time-limited or in crisis/emergency situation
- Access to specific practices that are not available from a Vermont provider
- access to providers in the context of a diminishing healthcare workforce in Vermont

### Challenges:

- Less oversight and accountability
- Who is responsible when there is a complaint
- Is there a registration process/rules
- Fragmented care (challenges for coordination across healthcare team)
- ensuring patient safety

## Deliverables , Recommendations & Action Items

This subgroup needs further information on waiver policies of other states.

### Recommendations:

- All out of state providers practicing using telehealth in Vermont must register with the Office of Professional Regulation.
- Providers must submit proof of licensure and that they are in good standing within one business day of the patient visit.
- Out of state providers must obtain licensure in Vermont after 20 patient visits .
- This policy shall sunset in 2 (or 3) years in order to be reassessed by the Vermont Legislature.
- It is recommended there be a nominal fee associated with registering with the Office of Professional Regulation to defray costs.
- Whenever possible, the out-of-state provider should obtain necessary patient release and share information about treatment with the client's care team, including primary care.

# Other Policy Options & International Practice

Subgroup Update

## Goal or Topic of Discussion

- To better understand what international policies exist as they pertain to licensing

## Summary of Discussion

- Is a Telehealth specific license possible
- Utilize models that already exist
- Qualification standards
- Potential Liabilities

## Deliverables , Recommendations & Action Items

- Review National vs. International policies that are in place.

reciprocity agreements. In evaluating potential options for implementation in Vermont, the Working Group shall consider the following issues:

(1) impacts and ethical considerations related to patient care and continuity of care;

(2) whether to limit to health care professionals with preexisting patient relationships;

(3) impacts on State regulatory oversight and enforcement, including the fiscal impacts;

(4) effects on prescribing;

(5) differences between the various states and U.S. territories in scopes of practice, qualifications, regulation, and enforcement;

(6) different policy options for facilitating interstate practice, including the potential for reciprocity with health care professionals licensed in Vermont;

(7) whether to explore the international practice of health care professionals using telehealth; and

(8) other issues relevant to facilitating the interstate practice of health care professionals.

# Act 21

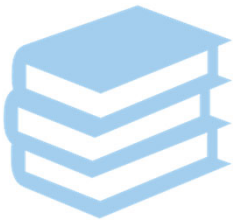
## STATUTORY CRITERIA



# Statutory Criteria Worksheet

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- For each policy (general or specific) ask
  - What ethical considerations related to patient care are implicated by this policy?
  - What ethical considerations related to continuity of care are implicated by this policy?
  - Should this policy be limited to health care professionals with pre-existing patient relationships with the patient?
  - What impact does this policy have on State regulatory oversight and enforcement?
  - What fiscal impact does this policy have?
  - What effect does this policy have on prescribing?
  - Would variations in state regulations of the profession (e.g., scopes of practice, qualifications for licensure, regulation, enforcement) create concerns or barriers to implementing this policy? How so? What, if any, adaptations in the policy prevent or mitigate these concerns or barriers?





# Worksheet and Report

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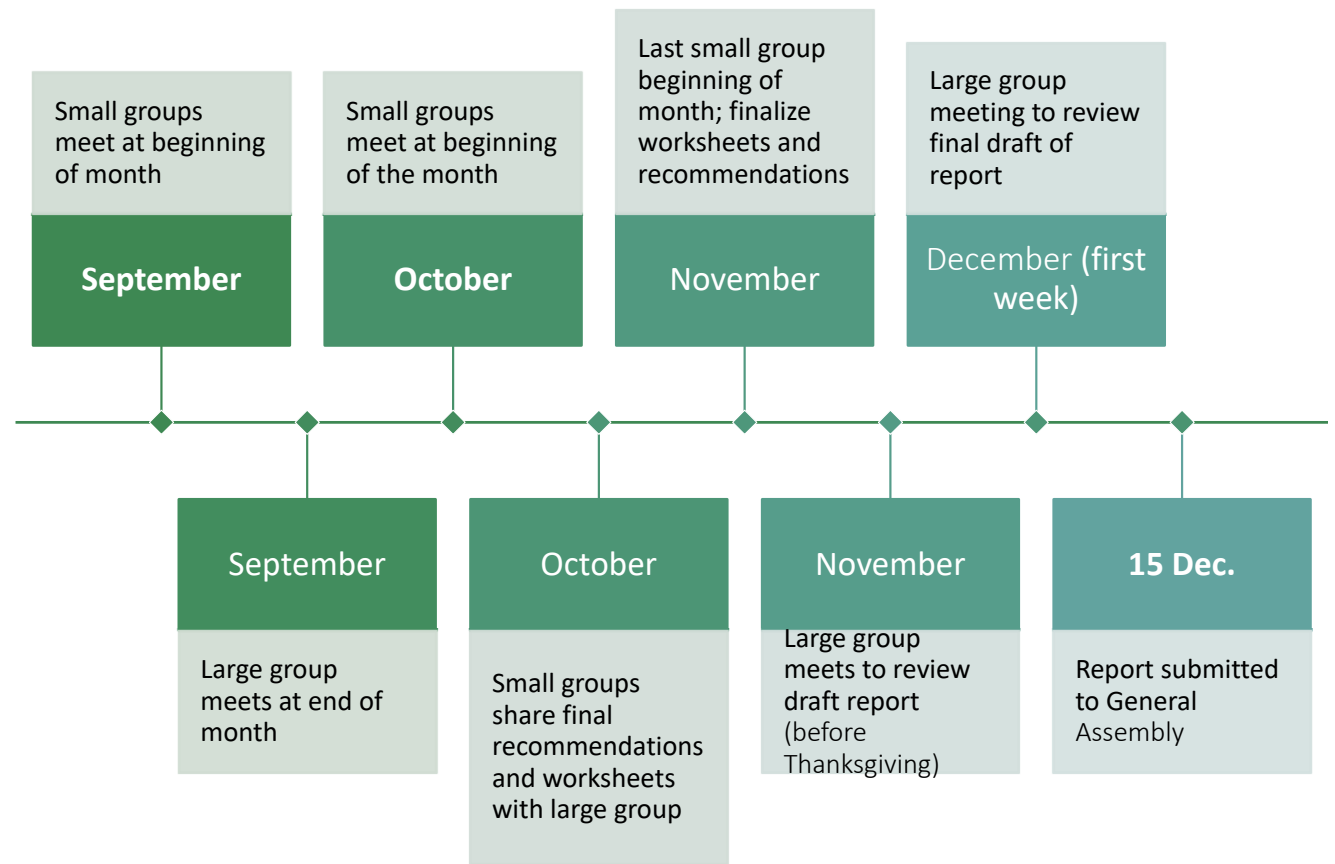
## ➤ **Worksheet:**

- Please research responses to the questions. Dig deep! Include useful resources in the worksheet.
- OPR will be sending a list of useful resources to get you started.
- If found, please include multiple perspectives and supporting arguments for and against those perspectives.

## ➤ **Report:**

- OPR will use the worksheets and group discussions to compile the report to the General Assembly.
- The report will provide legislators with a reference for evaluating each policy and its impact on the statutory criteria (e.g., what impact do compacts have on prescribing?).

# Timeline



# Next Steps

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Subgroups to work on statutory criteria form at early September meeting

Next Working Group meeting Tuesday, September 28<sup>th</sup> at 10:00