



## **Interstate Telehealth Working Group**

June 29, 2021

Approved Minutes

### **Members Present:**

Sebastian Arduengo, Department of Financial Regulation  
Tammy Austin, Board of Allied Mental Health  
Dean Barcelow, Optometrist  
Jessa Barnard, Vermont Medical Society  
Lauren Bode, Vermont Pharmacy  
Patricia Breneman, Vermont Department of Health  
William Chatoff, Board of Pharmacy  
Rebecca Copans, Blue Cross and Blue Shield of Vermont  
Michele Degree, Green Mountain Care Board  
Lisa Ferron, Blue Cross and Blue Shield of Vermont  
Devon Green, Vermont Association of Hospitals and Health Systems  
Kent Henderson, Vermont Veterinary Medical Association Government Relations Committee  
David Herlihy, Executive Director, Board of Medical Practice  
Lauren Hibbert, Director, Office of Professional Regulation  
Lauren Layman, Office of Professional Regulation  
Ken Lawenda, Board of Optometry  
Jeanne Kennedy, Cigna  
Agatha Kessler, Office of Professional Regulation  
Sarah Kessler, University of Vermont Health Network  
Kirke McVay, Vermont Mental Health Health Counselor  
Sam Peisch, Health Care Advocate  
Carrie Phillips, Executive Director, Board of Pharmacy  
Reid Plimpton, NorthEast Telehealth Resource Center  
Meredith Roberts, Executive Director, American Nursing Association - Vermont  
Linda Waite-Simpson, Vermont Veterinary Medical Association  
Lynn Stanley, Executive Director, National Association of Social Workers  
Hillary Wolfey, VPQHC  
Todd Young, University of Vermont Health Network

### **I. Introductions & Background to the Interstate Telehealth Working Group**

Chair Hibbert started the meeting and members of the working group introduced themselves to the group. Director Hibbert, Lauren Layman and Agatha Kessler presented materials on the background of the ITWG, including the purpose of the working group and the status of telehealth regulation in Vermont.

## **II. Discussion**

The group discussed Working Group logistics, including how to organize the subgroup work. The Working Group considered either dividing work up by “modality” or by “consideration.”

### Modalities

1. Creation of telehealth licenses
2. Waiver of licensure
3. National licensure compacts, and
4. Regional reciprocity agreements

### Considerations

1. Impacts and ethical considerations related to patient care and continuity of care
2. Preexisting patient relationships limitations
3. Impacts on State regulatory oversight and enforcement, including the fiscal and prescribing impacts
4. Differences between the various states and U.S. territories in scopes of practice, qualifications, regulation, and enforcement
5. Different policy options for facilitating interstate practice, including the potential for reciprocity with health care professionals licensed in Vermont
6. Whether to explore the international practice of health care professionals using telehealth

The Group further discussed what data and information would be useful to collect prior to the next meeting, identifying:

- Telehealth regulation trends in other states and regionally
- Telehealth compacts/work scopes
- Federal telehealth regulation

The group discussed the economic impact on Vermont providers if access to out-of-state providers is expanded. The group recognized that the financial health of local providers is a factor to consider while working towards reducing barriers to care through telehealth policy, though the needs of Vermont patients must be a central consideration.

Todd Young from the UVM Health Network offered to provide summary data on where their patients receive care outside of Vermont.

## **III. Next Steps**

OPR staff will prepare information about telehealth regulation in other states and on the federal level.

OPR staff will work with Todd Young to evaluate summary data on where patients receive care outside of Vermont.

OPR staff will send a doodle poll to schedule the next meetings.