Welcome & Intros

- Welcome and Introductions
- Operating Principles
- Goals for today (see detailed agenda)

Timeline Overview

Jan. 15: Interim Report Due To Legislature

- Preliminary themes, qualitative findings to date, and emerging questions
- Audio Only reimbursement recommendation

Q1 2023: Key Research Scoped

- Research partners
- Literature Review
- Quantitative analysis
- Stakeholder Interview
- Community Engagement

Q2 - Q3 2023: Work Underway, Themes Emerge

- Stakeholder interviews
- Community engagement
- Quantitative analysis

Q4 2023: Finalize Findings

- Final report due Jan. 15, 2024

DRAFT - Recommendations to Legislature

- **Until evidence becomes more clear, continue payment parity for audio-only**
- **Continue studying telehealth to inform long-term policymaking**

Key Theme #1

- **Audio-only Telehealth is Filling Narrow But Important Access Challenges**
  - Mode only reimbursable since 2020 (limited data)
  - Current data shows audio-only is essential to telehealth access for some Minnesotans in Greater MN, people of color and older adults. Often ties to digital inequity.
  - Potential challenges: potential for fraud, over-reliance
  - More data, research needed to evaluate impact on quality and outcomes

Key Theme #2

- **Patients, Health Care Providers Appreciate Telehealth's Benefits**
  - Interview data shows Minnesotans have appreciated expansion of telehealth that occurred during the pandemic.
  - Patients appreciate the convenience and are overall satisfied with telehealth.
  - Providers believe telehealth has allowed them to be innovative, particularly on care delivery and increased access.

Key Theme #3

- **Telehealth's Benefits for Mental Health Care and Substance Use Disorder Care are Especially Strong**
  - While overall telehealth usage has subsided somewhat from peak of pandemic, use for mental health and substance use disorder care remains very strong.
  - Providers noted increased access in specialized services for people in Greater MN and those with transportation and other barriers to in-person visits.
  - Helps address provider shortages in some areas.

Key Theme #4

- **Placing Relative Value on Telehealth l Will Take Added Research and Consideration**
  - Patients, providers, and payers differ on perspectives of costs as compared with in-person visits.
  - Patients perceive that telehealth visits should require lower co-pay or lower costs than in-person care.
  - Providers consistently favor payment parity.
  - Payers express hesitance on any government or statutory mandates on payment parity.

Telehealth Policy Context

- **Telehealth services and many regulations are not new, but they changed rapidly during the pandemic.**
  - Expanded telehealth services are showing positive results beyond the pandemic
  - Many regulations enabling them remain temporary emergency measures.

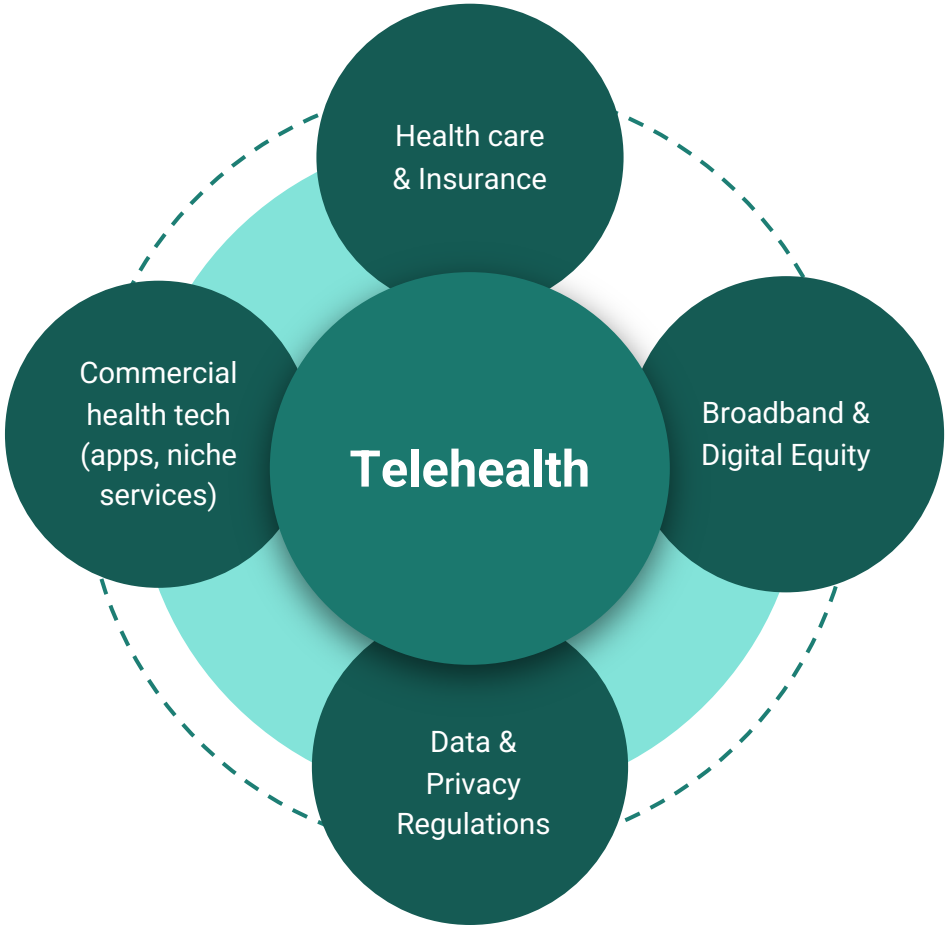
Telehealth Impact

- **Telehealth impacts access, quality, satisfaction, and equity in health care.**
  - Nearly 1 in 3 Minnesotans have used telehealth since the onset of the pandemic.
  - Minnesotans are relying on telehealth for more than primary care.
  - Telehealth reduced barriers to care and increased patient engagement.
  - Quality data is emerging, but more expected in 2023.

Quality & Outcomes

- **Quality and Outcomes: Early results show promise, especially for some conditions.**
  - Services showing strong promise: mental health, substance use disorders, pediatric patients and providers, chronic condition management (e.g. hypertension, diabetes, asthma).
- **Improved access supports improved outcomes.**
- **Telehealth is not equally suited for all conditions or health care needs.**

Telehealth Sits at Nexus of Rapidly Changing Systems



Looking Ahead: Context Continues to Shift

- **Consumer and provider preferences for in-person vs. online services remain in flux.**
- **Ongoing health care workforce shortages raise ethical and capacity questions** in how much telehealth might supplant, vs supplement, in-person care delivery.
- **Long-term impact on patients' health outcomes remains unknown.**

Looking Ahead: Risks

- **Must ensure telehealth does not exacerbate or introduce new disparities.**
- **Telehealth has potential to improve equitable health care access, outcomes. But digital divide risks making access disparities worse.**
  - Telehealth can improve access to: specialists, racially and culturally diverse medical professionals, provider choice, care for people with transportation barriers or those juggling multiple variables.

Future Research Questions

- Will patients' satisfaction with telehealth continue past the pandemic?
- How much did the pandemic herald a generational shift in preferences for online vs. in-person services?
- Will providers remain willing to deliver telehealth services?
- Will telehealth affect access to inpatient care and will that have equity implications?
- What does emerging research continue to tell us about impact on health care access, quality, outcomes, and equity?

2023 Work Plan

- **Multiple lines of investigation :**
  - Literature Review
  - Quantitative & Actuarial
  - Technical Advisory Group (TAG) Discussions
  - Community Engagement and Stakeholder Interviews
  - MDH Listening Sessions
- **Continued consultation with Department of Commerce and DHS**

Discussion

- What stands out as most surprising to you?
- How does your experience compare with these findings?
- What research questions do you hope the TAG will explore in our meetings as we build on this research in 2023?