CIVITAS Networks for Health

May Network News

May 17, 2023

Housekeeping Reminders

- This is a Zoom webinar
- All webinar participants are automatically muted, and your video is not displayed
- If you would like to ask the presenters a question, please use the Q&A function on the task bar
- Use the chat feature to introduce yourself name, organization and location, share resources, etc.
- If you have any questions following the webinar, please reach out to <u>contact@civitasforhealth.org</u>

Agenda

- Welcome and Civitas Updates Lisa Bari, Chief Executive Officer and Jolie Ritzo, Senior Director of Network Engagement
- Workgroups and Councils Update Jolie Ritzo
- Civitas Member News Lisa Bari and Jolie Ritzo
- Spotlight Presentation Advancing the Adoption of Age-Inclusive Telehealth, *Liane Wardlow*, Senior Director of Clinical Research and Telehealth

Civitas Updates

Civitas Speaking Engagements

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MAY 22-25, 2023 VIRTUALLY ON ZOOM REGISTER AT <u>WEDI.ORG</u>





The Sequoia Project invites others to join the Data Usability Taking Root movement

There are three ways organizations can get involved:

- 1. Supporters can amplify the importance of data usability and participate in the further development of guidance;
- 2. Implementers can participate in a community of practice while operationalizing data usability guidance; and
- 3. Sponsors can invest in the growth of the movement.

The Sequoia Project's Data Usability Workgroup Published a Final Implementation Guide in December of 2022.

For more information, you can contact The Sequoia Project at <u>TakingRoot@sequoiaproject.org</u> or subscribe to updates at <u>https://sequoiaproject.org</u>.



Upcoming Events

- The invitation for our second Public Policy Briefing of 2023 is forthcoming. Hold June 27th from 1:00 – 2:00 p.m. ET on your calendar!
- Network News occurs on the third Wednesday of every month from 1:00 – 2:00 p.m. ET, next instance is June 21.



2023 Annual Conference Virtual Pre-Conference Sessions

- This year's Civitas Annual Conference will feature virtual preconference sessions as part of our registration package and hybrid offering.
- Both in-person and virtual registrants are invited to join us for three pre-conference events this summer over Zoom. You must be registered for the annual conference to access these sessions.
 - 1. Data Exchange and Networks Building a Healthy California for All

June 15th, 2023, from 3:00 – 4:30 p.m.

2. Partnerships and Comprehensive Data Sharing to Address SDOH

July 13, 2023, from 3:00 – 4:30 p.m.

 Leveraging Health Information Exchange to Improve Patient Attribution, Quality Measurement, and Reporting July 27, 2023, from 3:00 – 4:30 p.m.



In Partnership with Chesapeake Bay Region Members

AGENDA NOW AVAILABLE!



Register today for The Civitas Networks for Health 2023 Annual Conference

August 20 - 23 National Harbor, MD

In Partnership with Chesapeake Bay Region Members

REGISTRATION IS OPEN!

14 days left to register at the Early Bird Rates!

THE CIVITAS NETWORKS FOR HEALTH 2023 ANNUAL CONFERENCE IN PARTNERSHIP WITH CHESAPEAKE BAY REGION MEMBERS



In Partnership with Chesapeake Bay Region Members

August 20-23 National Harbor, MD

Sponsorship Opportunities Available!

- Networking Area Sponsorship (NEW!)
- Unconference Break Sponsorship (NEW!)
- Civitas SB&T members interested in taking advantage of the silver sponsorship should reach out to <u>kkroell@civitasforhealth.org</u> with any questions or concerns.
- Link to the Sponsorship Prospectus



Gravity Project Pilots Affinity Group

- Gravity Project Pilots Affinity Group Monthly Meetings, currently hosted by Civitas, are from 2:30pm – 4:00 pm ET on the last Thursday of the month. The next meeting will be Thursday, May 25th.
- The Affinity Group is a peer-to-peer learning forum for entities participating in real world testing of Gravity terminology and technical standards.
- Sign up for the Group <u>here</u>.





Workgroups and Councils Update

Civitas Workgroups and Councils

Digital Measures Workgroup

 The group reviewed the Core Quality Measures Collaborative report focused on measure alignment. We discussed opportunities for HIEs, QIOs, and other members to develop a response to the report outlining ways to support implementation.

Health Data Research Workgroup

 Tom Carton, Chief Data Officer of LPHI and Principal Investigator of REACHnet presented. The group finalized the survey questions for the Civitas member research compendium and decided on next steps.

Marketing and Communications Workgroup

 Colin Hung, CMO and Chief Editor for HITMC, and Jordan Rowe, Communications Strategist at Civitas Networks for Health, gave an indepth presentation on social media basics and strategy.

Civitas Workgroups and Councils

Public Health Workgroup

- The workgroup held their inaugural meeting on April 10.
- Discussed charter highlights, future meeting topics, and Aaron Seib presented briefly about the CDC's MedMorph Track at the Connectathon.

Social Determinants of Health and Interoperability Workgroup

- There was a discussion on the Cross-Sector Data Sharing Interoperability and updates were provided on the Gravity Project including pilot sites and goals for 2023.
- The Annual SDOH Survey is still open! <u>Please respond</u> on behalf of your organization!

Standards and Technology Operations Workgroup

 The workgroup will discuss how members are currently using FHIR as well as what's on the horizon for Civitas members as federal policy accelerates FHIR implementation.

Civitas Workgroups and Councils

Emerging Leaders Council

• The Emerging Leaders Council is currently working through updating the charter for 2023, planning out a new round of nominations, and preparing for the Civitas Annual Conference.

Government Relations and Advocacy Council

 The Government Relations and Advocacy Council continues to keep the group up to date on relevant government relations, Congressional, and policy updates.

Civitas Member News

Member News

- Arkansas SHARE's partnership with the Department of Children and Family Services (DCFS) is helping improve care coordination for children in foster care through automated reports.
- <u>Bamboo Health</u> has been selected as the 2023 "Best Care Management Solution Provider" by MedTech Breakthrough, a leading market intelligence organization.
- The Bree Collaborative Foundation for Health Care Quality has developed an Evaluation Survey Question Bank where organizations can draw from and share evaluation questions, with the goal of aligning evaluations of implementation projects.
- Colorado Community Managed Care Network (CCMCN) was recently featured in Civitas' Networks for Health Member Spotlight series to discuss their efforts to improve interoperability and health care technology within the state of Colorado.
- <u>CyncHealth Nebraska</u> used its PDMP technology to help address challenges related to the COVID-19 pandemic by expanding HIE capabilities.

Member News

- Several members of Civitas Networks for Health community were recognized at the annual <u>HITMC (Healthcare and IT Marketing) Awards.</u>
 - Jolie Ritzo, Senior Director of Network Engagement at <u>Civitas Networks for Health</u>, was awarded Marketer of the Year.
 - Morgan Searles, Senior Strategic Communications Manager at <u>HIMSS</u>, received the Marketing Rising Star award.
 - **Tina Feldmann,** Vice President of Corporate and Product Marketing at <u>Kno2</u>, won the HITMC Community Member of the Year award.
 - Angie Bass, Chief Strategy Officer at <u>Velatura</u> Health Information Exchange Corporation, won the Trailblazer of the year award.
 - Raven Dyer, Marketing Specialist at Optum, won the Marketer Rising Star award...
- healtheConnect Alaska was awarded a new contract by the Alaska Department of Health (DOH) to expand interoperability services.

Member News

- Intersystems teamed up with J2 Interactive and other key partners to support quality care for veterans nationwide.
- The Michigan Health Information Network (MiHIN) announced that the Nottawaseppi Huron Band of the Potawatomi (NHBP) has been formally onboarded to the state-designated health information exchange.
- <u>Stratis Health</u> announced its 2023 Building Healthier Communities Award recipients in conjunction with National Minority Health Month.
- <u>Telligen</u> announced the acquisition of CircleTalk, a program that promotes healthy aging through connections that combat social isolation.
- VITL announced the launch of Vermont's first two-way immunization data sharing connection between the Vermont Department of Health and Northeastern Vermont Regional Hospital in St. Johnsbury.

Spotlight Presentation: West Health Institute







Advancing the Adoption of Age-Inclusive Telehealth

In Partnership with:



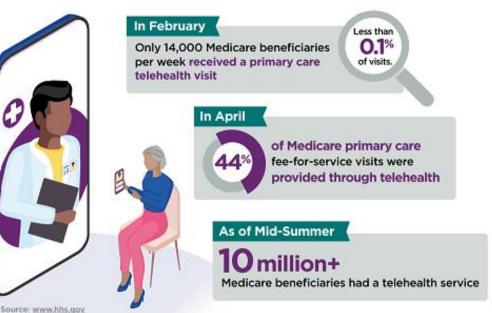




COVID-19 Spurred Adoption & Improved Attitudes Towards Telehealth

TELEHEALTH USAGE INCREASED WHEN COVID-19 EMERGED

Primary care providers and patients are on the fast track to widespread telehealth adoption.



The COVID effect

For the longest time, it seemed as if getting older adults to use digital health technologies was a fruitless effort. However, the tide is turning on adoption thanks to the pandemic. Here's some recent data that suggests a turnaround has begun.

Pre pandemic:

20%

- of adults 65 and older had used a health app
- of Baby Boomers were willing to try virtual care from tech companies²
- <mark>4%</mark>
- of adults 65 and older had participated in a telehealth visit $\overset{\circ}{}$

Post pandemic:

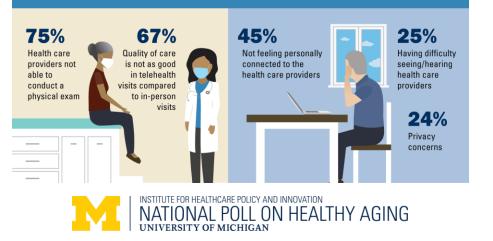
- 92% of a firs
 - of adults 65 and older reported using virtual care for the first time during the pandemic
- 60% of seniors embraced technology more during the COVID pandemic than before ⁵
- **30%** of adults 65 and older had participated in a telehealth visit '

HEALTH EVOLUTION

2 https://www.accenture.com/_acremedia/PDF-1307Accenture-2020-Digital-Health-Consumer-Survey gs://hip.umich.odu/hwss/45-adultus-over-85-lack-carline-medical-accounts-could-hip-them-sign-could-10-adultuhttps://www.pwc.com/us-find/adultus-touth-industrian/Narary/acsost/in-2021-consumer-survey-Insight-abatt 5 https://www.haathinsuruna.com/earning-contentraintick/modiare-eligible-senior

Yet Many Older Adults & Providers Are Still 'Unready' for Telehealth

Concerns about telehealth visits AMONG ADULTS AGE 50–80 SURVEYED IN JUNE 2020



"UNREADY" for Telehealth:

A National Health and Aging Trends Study calculated how many individuals were "unready" for telehealth. Leading reasons include:

- Had difficulty hearing well enough to use a telephone—even with hearing aids
- Had problems speaking or making oneself understood
- Had possible or probable dementia
- Had difficulty seeing well enough to read a newspaper or watch television—even with glasses

HOW DO WE ADDRESS CONCERNS ABOUT TELEHEALTH DELIVERY?

Telehealth systems, programs, and technology must be designed to be age-inclusive to ensure that ALL older adults have access to safe, person-centered, and equitable technology-enabled care.

C4TA & CE4TA Timeline

Exacerbated by the COVID-19 pandemic, an already worrisome trend created an urgent need for action: there waws no organized body of experts or adequate guidance to implement telehealth safely and effectively for older adults.

WHI, UVA, and MATRC established the Collaborative for Telehealth and Aging (C4TA) of experts from health systems, academic institutions, member organizations, and nonprofit foundations to help advance health for older adults by advising the development of guidelines, tools, and best practices for telehealth.

The C4TA created the Principles and Guidelines to Advance Telehealth for Older Adults, a first of its kind guidance targeted to providers and health systems outlining tangible changes to existing practices around telehealth.

The official launch of the Center of Excellence for Telehealth and Aging (CE4TA), a hub of resources and tools that we aspire to grow into a robust platform for thought leadership and community engagement around telehealth for older adults.



https://ce4ta.matrc.org/

2020

2021

2022

2023

CELETER OF EXCELLENCE FOR TELEHEALTH AND AGING Members of the Collaborative for Telehealth & Aging

AARP: Joe Garbanzos	Milken Institute Center for the Future of Aging: Diane Ty, Lauren Dunning	
AcademyHealth: Margo Edmunds	Mount Sinai, Icahn School of Medicine: Veronica Rivera	
AMDA: Suzanne Gillespie	National PACE Association: Mia Phifer	
AGS and New Horizons Long Term Care Facilities: Swati Gaur	Patient & Family Centered Care Partners: Ting Pun, Stephen Hoy	
ASA: Peter Kaldes	Stanford School of Medicine: Kendell Cannon	
Avel eCare: Victoria Walker	The George Washington University: Leah Steckler, Neal Sikka	
Columbia University: Harold Pincus	The John A. Hartford Foundation: Rani Snyder, Nancy Wexler	
Dartmouth-Hitchcock Medical Center: Kevin Curtis, Katelyn Darling	Thomas Jefferson University: Kristin Rising	
Dispatch Health: Adam Perry	USAging: Courtney Baldridge, Marisa Scala-Foley	
Dow Rummel Village : Josh Hofmeyer	University of California Berkeley: David Lindeman	
Geisinger: David Fletcher	University of North Carolina Health: Kevin Biese, Barbara Edson	
Jefferson Health: Frank Sites	University of Maryland: Howard Goldman	
Johns Hopkins University School of Medicine: Bruce Leff	University of Rochester: Dallas Nelson	
LeadingAge: Scott Code, Robyn Stone	University of Virginia Geriatrics: Laurie Archbald-Pannone	
Massachusetts General/ Harvard University: Christine Ritchie	Vandalia Health: Rebecca Harless	
Medically Home: Linda DeCherrie	Veterans Affairs Pittsburgh Healthcare System: Steven Handler	
MedWand: Michael Kurliand	West Health Institute: Zia Agha, Jon Zifferblatt, Liane Wardlow	

Mid-Atlantic Telehealth Resource Center: Kathy Hsu Wibberly

Principles & Guidelines for Telehealth & Aging

PRINCIPLE 1

Person-Centered Care

The older adult being served is at the center of all decision-making. The older adult's care preferences, goals, wishes, abilities, support system, and conditions are accounted for.

Person-Centered Care Guidelines:

Person-centered telehealth...

- 1. Accounts for older adults' healthcare goals, care preferences, and 'what matters
- 2. Promotes high-value use cases that drive older-adult-focused goals, incorporating payer and provider perspectives
- 3. Supports coordination and continuity of care
- 4. Ensures that older adults and their caregivers are prepared and understand what to expect from a telehealth encounter
- 5. Promotes opportunities to use telehealth to increase access to care while reducing avoidable costs
- 6. Reduces time to access providers across healthcare settings
- 7. Incorporates older adults' family and caregivers when appropriate and consistent with the older adults' wishes

PRINCIPLE 2

Equitable and Accessible Care

Everyone should have equal access to the same level of high-guality care, regardless of age, ability, socio-economic status, health and technology literacy, or rural, suburban or urban locations.

Equitable and Accessible Care Guidelines:

Equitable and accessible telehealth.

- 1. Accounts for older adults' physical and cognitive differences 2. Accounts for cultural and linguistic differences of older adults' and their
- caregivers
- 3. Accounts for technology literacy and readiness older adults' and their caregivers
- 4. Uses telehealth to address needs across all settings, including the home, as promptly as possible
- 5. Ensures that staff and providers engage in on-going education on best practices for using telehealth with older adults
- 6. Accounts for differences in access to technology and connectivity

PRINCIPLE 3

Integrated and Coordinated Care

Integrated and coordinated care should include active participation from patients, caregivers, and providers across the care continuum. Systems should be set up to facilitate access to the information and support necessary to provide quality care to older adults.

Integrated and Coordinated Care Guidelines:

Integrated and coordinated telehealth.

- 1. Facilitates telehealth providers have access to older adults' health history
- 2. Facilitates safe, coordinated transitions of care
- 3. Integrates into the care continuum / provider practice
- 4. Connects crucial stakeholders throughout the entire process 5. Supports staff working at the top of their licenses to drive efficiency

https://ce4ta.matrc.org/principle-and-guidelines/

Received: 11 August 2022 Revised: 11 October 2022 Accented: 14 October 2022

DOI: 10.1111/jgs.1812

SPECIAL ARTICLES

Journal of the American Geriatrics Society

Development of telehealth principles and guidelines for older adults: A modified Delphi approach

Liane Wardlow PhD¹ | Bruce Leff MD² | Kevin Biese MD³ Carly Roberts MPH¹ | Laurie Archbald-Pannone MD⁴ | Christine Ritchie MD⁵ | Linda V. DeCherrie MD⁶ | Neal Sikka MD⁷ | Suzanne M. Gillespie MD RD⁸ | The Collaborative for Telehealth and Aging

The COVID-19 pandemic elevated telehealth as a prevalent care delivery modality

for older adults. However, guidelines and best practices for the provision of health-

care via telehealth are lacking. Principles and guidelines are needed to ensure that

telehealth is safe, effective, and equitable for older adults. The Collaborative for

Telehealth and Aging (C4TA) composed of providers, experts in geriatrics, tele-

health, and advocacy, developed principles and guidelines for delivering telehealth

to older adults. Using a modified Delphi process, C4TA members identified three

principles and 18 guidelines. First, care should be person-centered; telehealth pro-

grams should be designed to meet the needs and preferences of older adults by

considering their goals, family and caregivers, linguistic characteristics, and readi-

ness and ability to use technology. Second, care should be equitable and accessible;

telehealth programs should address individual and systemic barriers to care for

older adults by considering issues of equity and access. Third, care should be inte-

grated and coordinated across systems and people; telehealth should limit fragmen-

tation, improve data sharing, increase communication across stakeholders, and

address both workforce and financial sustainability. C4TA members have diverse

perspectives and expertise but a shared commitment to improving older adults'

lives. C4TA's recommendations highlight older adults' needs and create a roadmap

for providers and health systems to take actionable steps to reach them. The next

steps include developing implementation strategies, documenting current tele-

health practices with older adults, and creating a community to support the dis-

semination, implementation, and evaluation of the recommendations.

¹Clinical Research, West Health Institute, Abstract

²The Center for Transformative Geriatric Research, Johns Honkins University School of Medicine, Baltimore, MD, USA ³Emergency and Geriatric Medicine, rsity of North Carolina Health, Chanel Hill NC USA ⁴Internal and Geriatric Medicine. University of Virginia, Charlottesville,

La Jolla, CA, USA

VA, USA ⁵Palliative Care and Geriatric Medicine Massachusetts General Hospital and Harvard University, Boston, MA, USA

6Clinical Strategy and Implementation, Medically Home, New York, New York, USA 7Emergency Medicine, The George

Washington University, Washington, DC. USA 8AMDA The Society for Post Acute and Long Term Care, Columbia, MD, USA

Correspondence Liane Wardlow, Clinical Research, Wes Health Institute, Rd La Jolla, CA 92037.

Email: lwardlow@westhealth.org

Funding information West Health Institute

KEVWORDS

equity, inclusion, health care delivery, technology, telehealth

Members of the Collaborative for Telehealth and Aging and their Affiliations are provided in Table S1. The principles and guidelines reported here were previously presented at the Mid-Atlantic Telehealth Resource Center's Annual Meeting (May, 2022

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The Center of Excellence for Telehealth & Aging





- Letters of support
- https://ce4ta.matrc.org

Join the Movement to Champion Age-Inclusive Telehealth

Pledge of Support for Age-Inclusive Telehealth Practices

Despite tremendous challenges presented by the COVID-19 pandemic, providers showed their commitment to caring for older adults by innovating and increasingly using telehealth as a tool to safely connect with, and care for, older adults. We applaud this use of telehealth and the commitment providers have shown to older adults.

As the public health emergency comes to an end, providers now have time to assess their telehealth programs to ensure that telehealth is delivered in a manner that is age-inclusive in that it accounts for older adults' unique needs. "Age-inclusive telehealth" is defined by the following core principles: care should be equitable and accessible, person-centered, and integrated and coordinated across people and systems. Delivering age-inclusive telehealth is not only the right thing to do for older adults, but it also improves outcomes such as enabling easier access to care, reduced wait times, lower cancellation rates, reduced potentially avoidable hospitalizations, improved provider efficiency, enhanced communication with caregivers and patients, and facilitated health outreach and education.

The Collaborative for Telehealth and Aging, which was convened by West Health Institute, the University of is a group of over 40 experts, representing more than 30 organizations dedicated to caring and advocating for older adults. Collaborative members endorsed the core principles of age-inclusive telehealth and developed <u>18 provider-focused guidelines</u> designed to help providers deliver telehealth to older adults in ways that are consistent with these principles. To support ageinclusive telehealth delivery, the Collaborative partners also launched the <u>Center of Excellence For Telehealth</u> and Aging, which provides free, practical tools, extensive, vetted resources, and a community of like-minded experts to help organizations enhance their telehealth offerings and showcase their achievements in improving telehealth care for older adults.

Virginia, and the Mid-Atlantic Telehealth Resource Center.

If you also believe in these principles for delivering ageinclusive telehealth, please show others by signing this pledge letter. Signing this pledge demonstrates your public commitment to providing telehealth services that are guided by the principles of equity and accessibility, person-centeredness, and integration and coordination of people and systems for older adults inside your organization.

By making this pledge, you will become one of the industry's leaders demonstrating the high value you place on the care of older adults, and showing your leadership in helping define what high-quality technology-enabled care for older adults should look like.

By signing below,	[insert organization name], pledges its		
commitment to delivering age-inclusive telehealth to the best of its ability.			
Signed:			
Print Name:			

WHAT DOES THE PLEDGE MEAN FOR MY ORGANIZATION?

- Patients will benefit from telehealth that is person-centered, equitable, accessible, and, integrated and coordinated.
- Demonstrate to the nation (and to your community) your commitment to, and leadership in, delivering age-inclusive telehealth.
- Be amongst the nation's leaders in age-inclusive telehealth.
- Have exclusive opportunities to engage with other leaders and experts who can support you on your journey.

TO SIGN THE PLEDGE VISIT:

https://ce4ta.matrc.org/pledge/

Advancing the Adoption of Age-Inclusive Telehealth

17 Organizations Have Signed the Pledge





Thank You



FOR MORE INFORMATION VISIT THE CENTER OF EXCELLENCE FOR TELEHEALTH & AGING:

https://ce4ta.matrc.org/

In Partnership with:







Discussion / Q&A



Poll: Did you learn something valuable or new, make a new connection, and/ or was this a valuable use of your time?



CIVITAS Networks for Health



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