#### DEPARTMENT OF HEALTH

# Minnesota Study of Telehealth Expansion and Payment Parity

#### TECHNICAL ADVISORY GROUP (TAG) CHARTER

## **Technical Advisory Group Purpose**

The Minnesota Department of Health (MDH) will convene a group of subject matter experts as a Technical Advisory Group (TAG) to the Minnesota Study of Telehealth Expansion and Payment Parity requested by the Legislature in the 2021 session. The purpose of the TAG is to provide strategic and technical advice to MDH as it studies the impact of telehealth policies on Minnesotans through a lens of quality, access, and affordability, with special attention to the impacts on Minnesota's communities of color, the disabled community, and on rural residents. The TAG will be comprised of members who represent perspectives of Minnesota health care users, providers, payers, and researchers.

# **Context: Legislative Directive**

In the 2021 session, the Minnesota Legislature directed MDH to study telehealth expansion and payment parity (Laws of Minnesota 2021, First Special Session. chapter 7, article 6, section 27). The legislation directs MDH, in consultation with the Minnesota Department of Human Services (DHS) and the Minnesota Department of Commerce (Commerce), to "study the impact of telehealth expansion and payment parity under this article on the coverage and provision of health care services under private sector health insurance."

In broad terms, the MDH study will evaluate the impact of telehealth expansion and payment parity, under private sector health insurance, on:

- Access to health care services, quality of care, health outcomes, patient satisfaction, and value-based payments and innovation in health care delivery
- Impact on health care disparities and equitable access to health care services for underserved communities
- Whether audio-only communication as a permitted option for delivering services:
  - Supports equitable access to health care services—including behavioral health services, for the elderly, rural communities, and communities of color.
  - Eliminates barriers to care for vulnerable and underserved populations without reducing the quality-of-care, worsening health outcomes, or decreasing satisfaction with care.

# **Role of the TAG**

The TAG will provide input to MDH and its contractors on the design and analysis of the telehealth study. TAG members will be asked to lend their expertise on topics such as research questions, study design and materials, interpreting findings, and final recommendations.

### What TAG Members Can Expect From MDH

MDH is committed to supporting thoughtful and thorough consideration of the many aspects of telehealth care delivery and its impacts, and to supporting the TAG to effectively contribute to the process. We are making the following commitments to the TAG:

- Neutral Facilitation + Administration. MDH has contracted with SDK, a Minnesota public affairs firm, to provide facilitation and administration to the TAG. SDK will make materials available prior to meetings, provide summary notes of TAG meetings to members and the public, and assist in ensuring a transparent record of feedback received through the process.
- *Clear, Timely Information*. In making relevant information available, MDH and its contractors will provide any reading material and agendas with sufficient time to prepare for meetings. MDH and SDK will provide occasional updates between meetings.
- Feedback On How Input Is Reflected. MDH will consider all input received related to the telehealth study. All input received will be documented and MDH will provide the TAG will clear responses to the input, both acknowledging what is incorporated and explaining why any feedback is not incorporated.

# What MDH Expects From TAG Members

MDH understands that telehealth is a complex and evolving form of health care delivery that will continue to evolve even after the study, as infrastructure to support telehealth and data on telehealth as a method of care delivery continues to expand. We hope that productive TAG contributors will strengthen the study by adhering to the following promises:

- Represent your experience, expertise, and profession. TAG members are asked to contribute from a broader perspective and not on behalf of a particular organization. TAG members have been selected for unique professional and personal expertise. Bring that expertise and professional capacity to TAG discussions.
- Share stories of your experience. Expertise is informed by direct experiences. Share lessons of research, clinical practice, and professional or personal experiences that can help inform the telehealth study design and interpretation.

• Respect the TAG as a venue for study and understanding. MDH-HEP will rely on the TAG as a venue to discuss the telehealth data and analysis. There will be other venues to offer feedback on the study as well. While the results of the study are intended to inform the legislature, the TAG will be a scientific venue separate from the feedback of individual provider systems, insurers, and associations.

### **Anticipated Meetings and Time Commitment**

The TAG will meet twice in 2022 and most likely every other month through the end of 2023. All meetings will be held virtually for approximately two hours. MDH and SDK will provide any reading material and agendas with sufficient time to prepare for meetings. The meetings will be public but not recorded. Meeting summaries will be shared with TAG members and the public.

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