

HRSA/SWTRC Update

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What is HRSA?

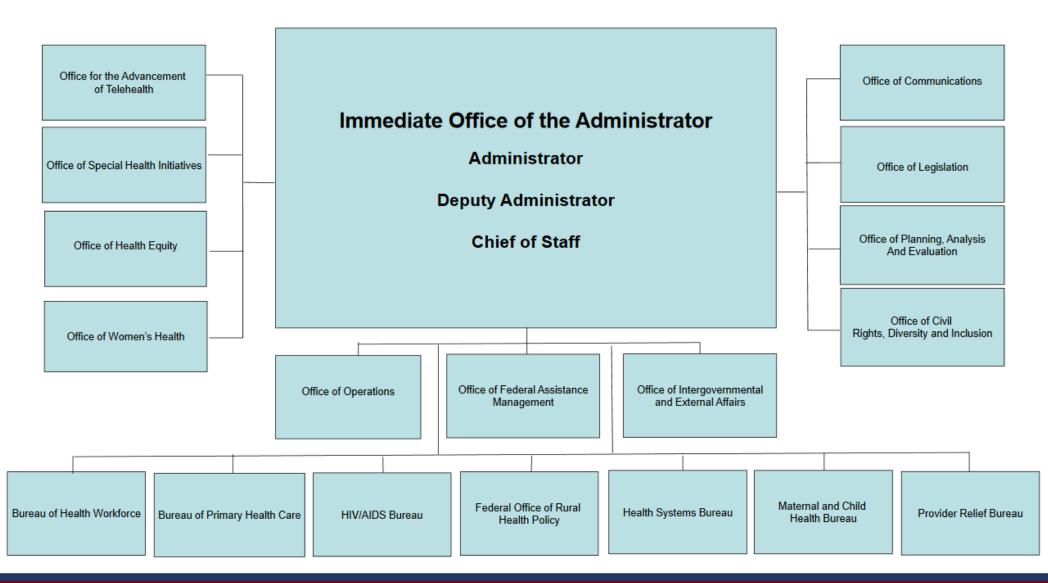
- Agency US Dept Health & Human Services
 - Starting 1943 multiple agencies improve health needy
 - HRSA created 1982 when Health Resources Administration & Health Services Administration merged = <u>Health Resources & Services Administration</u>
 - Primary federal agency for improving health care to people geographically isolated, economically or medically vulnerable
 - Supports training health professionals, distribution providers to areas needed most & improvements health care delivery
 - Oversees organ, bone marrow & cord blood donation
 - Compensates individuals harmed by vaccination & maintains databases that protect against health care malpractice, waste, fraud & abuse







Health Resources and Services Administration





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Office for the Advancement of Telehealth (OAT)

- 1998 Dr. Dena Puskin founded Federal Office for the Advancement of Telehealth (OAT) in ORH where she served as its Director until 2010
- Current leadership: HRSA Administrator Diana Espinosa OAT Director Heather Dimeris



- Will have new division Telehealth Innovation & Services (TIS) Division
- OAT Leadership: McNeely, Carnes, Nott
- New Tribal Advisory Council
- HRSA works with: FCC, USDA, National Telecom & Info Admin, DOD/VA, Interagency Policy Council, operational divisions



Michael McNeely, TIS Division Director (OAT)



Prog Coord TRCs



Louise Nott, TRC Project Officer









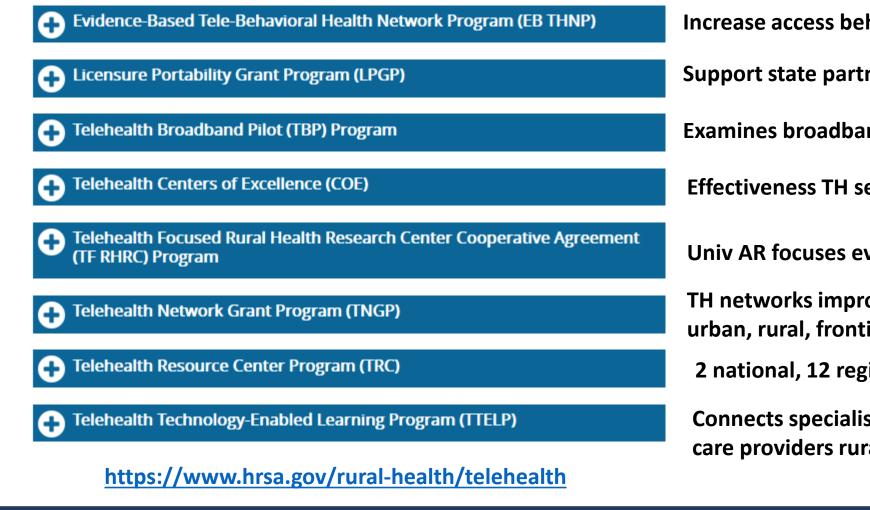
CDR Heather Dimeris, OAT Director

Diana Espinosa, HRSA Administrator

HRSA Telehealth Programs

rizona

Rogram



Increase access behavioral health & evaluate

Support state partnerships make TH more accessible

Examines broadband capacity for TH in AK, MI, TX, WV

Effectiveness TH services rural areas – UMMC & MUSC

Univ AR focuses eval & Univ IA evidence

TH networks improve services medically underserved in urban, rural, frontier communities

2 national, 12 regional deliver TH technical assistance

Connects specialists academic med ctrs with primary care providers rural & underserved areas for training

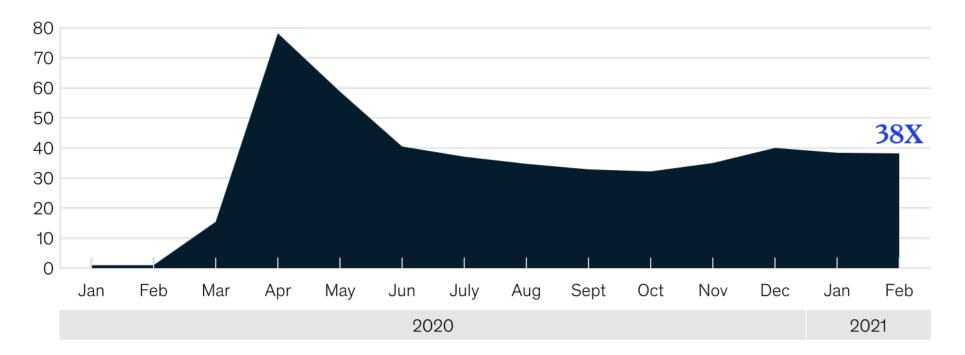






Growth in telehealth usage peaked during April 2020 but has since stabilized.

Telehealth claims volumes, compared to pre-Covid-19 levels (February 2020 = 1)¹



¹ Includes cardiology, dental/oral, dermatology, endocrinology, ENT medicine, gastroenterology, general medicine, general surgery, gynecology, hematology, infectious diseases, neonatal, nephrology, neurological medicine, neurosurgery, oncology, ophthalmology, orthopedic surgery, poisoning/drug tox./comp. of TX, psychiatry, pulmonary medicine, rheumatology, substance use disorder treatment, urology. Also includes only evaluation and management visits; excludes emergency department, hospital inpatient, and physiatry inpatient claims; excludes certain low-volume specialties. Source: Compile database; McKinsey analysis

McKinsey & Company





Aug 18th: Biden-Harris Administration Invests over \$19 Mil to Expand Telehealth Nationwide & Improve Health in Rural, Other Underserved Communities

- <u>Telehealth Technology-Enabled Learning Program (TTELP</u>): Approximately \$4.28 million is being awarded to 9 health organizations to build sustainable tele-mentoring programs and networks in rural and medically underserved communities. The funding will help specialists at academic medical centers provide training and support to primary care providers in rural, frontier, and other underserved areas to help treat patients with complex conditions ranging from long COVID to substance use disorders in their communities.
- <u>Telehealth Resource Centers (TRCs</u>): \$4.55 million is being awarded to 12 regional and 2 national Telehealth Resource Centers. TRCs provide information, assistance, and education on telehealth to organizations and individuals who are actively providing or want to provide telehealth services to patients. Each regional TRC will offer a wide range of assistance targeted to local community needs. The two national TRCs will provide expert resources on telehealth policy (such as reimbursement, licensing, and privacy) and telehealth technology (such as equipment, cybersecurity, and integration with other systems).
- Evidence-Based Direct to Consumer Telehealth Network Program (EB TNP): Approximately \$3.85 million is being awarded to 11 organizations to help health networks increase access to telehealth services and to assess the effectiveness of telehealth care for patients, providers, and payers. The EB TNP program will expand access to health services in primary care, acute care, and behavioral health care.
- <u>Telehealth Centers of Excellence (COE) program</u>: \$6.5 million is being awarded to 2 organizations to assess telehealth strategies and services to improve health care in rural medically underserved areas that have high chronic disease prevalence and high poverty rates. The Telehealth COEs will be located in academic medical centers and will serve as telehealth incubators to pilot new telehealth services, track outcomes, and publish telehealth research. The COEs will establish an evidence-base for telehealth programs and a framework for future telehealth programs.





FCC COVID-19 Telehealth Program

- Established <u>\$200 mil COVID-19 Telehealth Program</u> to help HC providers provide connected care services to patients at their homes or mobile locations in response to pandemic
- Provided immediate support to eligible providers responding to pandemic by fully funding telecom services, information services, devices to provide critical connected care services
- Since beginning approved 539 funding applications in 47 states + DC & Guam: El Rio Santa Cruz Neighborhood Health Center; Navajo Nation Department of Health; Jewish Family & Children's Services; Lake Powell Medical Center; Creek Valley Health Clinic; North Country HealthCare; Serenity First Counseling Prevention & Support Coalition
- Round 2 = <u>\$249.95 mil</u> factored in hardest hit & lowest-income areas, Tribal communities, previously unfunded states & territories; Tuba City Regional Health Care



Federal Communications Commission



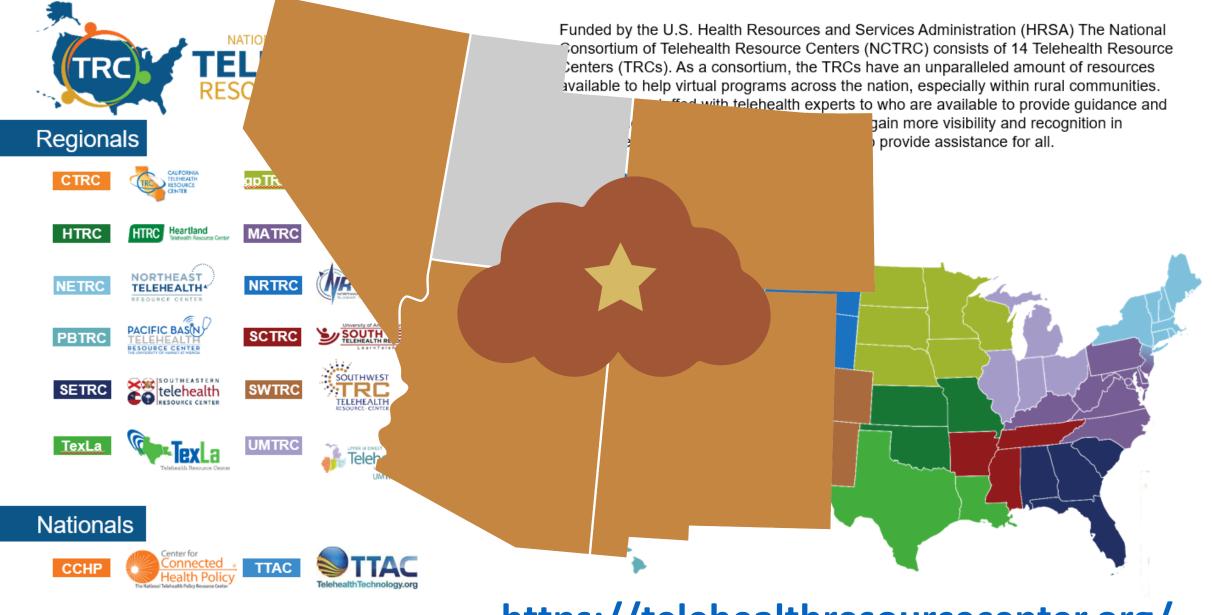
Southwest Telehealth Resource Center (SWTRC)

- Continuously funded since 2009
- Subsidiary of ATP
- Weinstein & Krupinski Co-Directors
- Originally grant now cooperative agreement with emphasis on sustainability
- Have received periodic supplements with most recent for COVID response
- September 2021 most recent 3-year funding period
- <u>https://southwesttrc.org/</u>

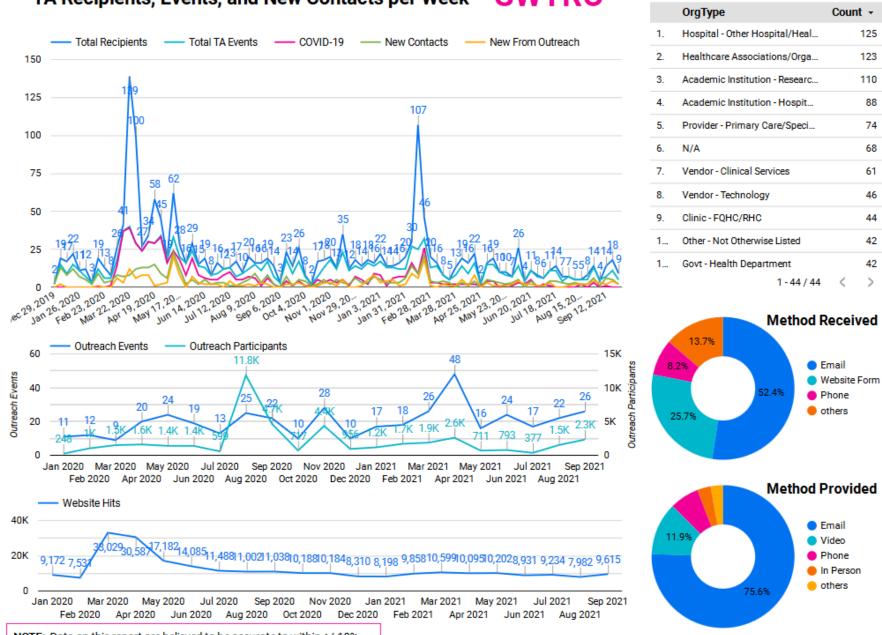








https://telehealthresourcecenter.org/



Jan 1, 2020 - Sep 30, 2021

TA Recipients, Events, and New Contacts per Week SWTRC

NOTE: Data on this report are believed to be accurate to within +/-10%.

COVID Innovations & Initiatives

Telemedicine COVID-19 Resources

Welcome to the Southwest Telehealth Resource Center / Arizona Telemedicine Program Telemedicine COVID-19 Resources web pages. We update these pages regularly with information for healthcare providers (including statespecific info) and consumers. You'll see the main sections listed below and the subsections listed to the left as you click on a main section. Check back often for updates!

FOR HEALTHCARE PROVIDERS

STATE-SPECIFIC INFORMATION

CONSUMER RESOURCES

COVID-19 NEWSLETTERS



SWTRC COVID-19 UPDATES SEPTEMBER 2021

Bringing You Up To Date Regional Information



Virtual Office Hours

Presented by

News From Around Our Region and Nationally

The Southwest Telehealth Resource Center, the Northwest Regional Telehealth Resource Center, Arizona Telemedicine Program, and the Arizona Department of Health Services

Fact Sheets









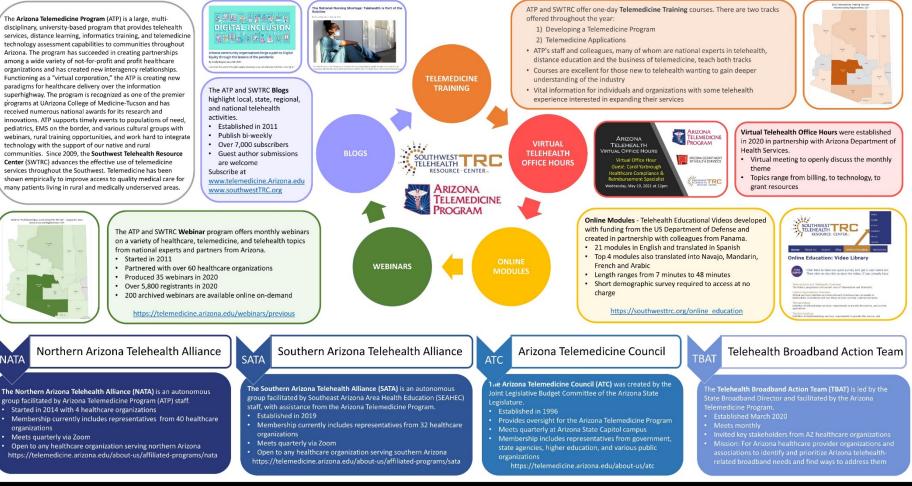
NATA

organizations

Arizona Telemedicine Program Connects Communities Throughout Arizona With Healthcare Resources Arizona Telemedicine Program and Southwest Telehealth Resource Center, University of Arizona College of Medicine - Tucson



The Arizona Telemedicine Program (ATP) is a large, multidisciplinary, university-based program that provides telehealth services, distance learning, informatics training, and telemedicine technology assessment capabilities to communities throughout Arizona. The program has succeeded in creating partnerships among a wide variety of not-for-profit and profit healthcare organizations and has created new interagency relationships. Functioning as a "virtual corporation," the ATP is creating new paradigms for healthcare delivery over the information superhighway. The program is recognized as one of the premier programs at UArizona College of Medicine-Tucson and has received numerous national awards for its research and innovations. ATP supports timely events to populations of need, pediatrics, EMS on the border, and various cultural groups with webinars, rural training opportunities, and work hard to integrate technology with the support of our native and rural communities. Since 2009, the Southwest Telehealth Resource Center (SWTRC) advances the effective use of telemedicine services throughout the Southwest. Telemedicine has been shown empirically to improve access to quality medical care for many patients living in rural and medically underserved areas.





New Mexico Telehealth Alliance



Wednesday Sept. 22 12 -1:30 pm via Zoom



Register

Wednesday, Sept. 29

12 to 1 pm • Free • Via Zoom

Expanding Your Telemedicine Services

Dr. Elizabeth Krupinski, Southwest Telehealth Resource Center Dr. Van Roper, University of New Mexico



Wednesday, September 29, 2021 12:00 PM Expanding Your Telemedicine Services







Health Choice Arizona Tribal Program



Tribal Summit Tribal Summit Flagstaff, AZ Sept 16-17





Blog



Telemedicine ICU Care: A Medical Student's Perspective



Arizona Healthcare Professionals Learn about House Bill 2454 Effect on Telemedicine



Why College Students Should Make the Most of Telehealth

SWTRC Blogs

The National Nursing Shortage: Telehealth is Part of the Solution



6 Students, 2 Professors, and COVID: An Unforgettable Service-Learning Immersion



Maximizing Telemedicine Benefits



	Time	#Published	#Subscribers
ATP	2 nd & 4 th Thursday (since 11/2013)	214	5090
SWTRC	SOW Legacy grant once a month - 1 st Wed SOW Covid-19 grant once a month - 3 rd Wed	121	2524
Newsletter	SOW Covid- 19 grant Bi-monthly - 2 nd Wed (6)	11	Aug, Sept, Oct, Nov, Dec, Jan, Feb, Mar, May, July, Sept,





Rethinking Curriculum, Competency, and Culture in the Virtual Care Era

New and Emerging Areas in Medicine Series

Quality Frameworks for

Virtual Care

Telehealth Competencies Across the Learning Continuum



Tomorrow/s Doctors Tomorrow/s (



Summary

- Multi-disciplinary team continuously evolving
- Go-to resource for training, information & advice
- Highly collaborative supporting regional partners
- ATP Service Provider Directory growing, widely used & touted by OAT
 - https://telemedicine.arizona.edu/servicedirectory
- In demand for presentations, committees, reviews & consultation
- SWTRC/ATP driving & leading telemedicine innovation throughout southwest, nationally & internationally







Thank you!

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