



Idaho Telehealth Council

Reimbursement Subcommittee Meeting Minutes:

Subject: Idaho Telehealth Council Reimbursement Subcommittee **DATE:** October 21, 2015

LOCATION: 450 W State St, Boise, ID 83702

Attendees: Stacey Carson, Telehealth Council Chairman – Idaho Hospital Association
Melissa Christian – Regence BlueShield
Kathy McGill – Department of Insurance
David Morledge, PhD – Neurostatus, LLC
Tiffany Whitmore Seibert – Saint Alphonsus Health System
Matt Wimmer – IDHW Division of Medicaid

Teleconference: Ken Schaecher, MD, Co-Chair – Select Health
Tracey Sessions, Co-Chair – Idaho State Hospital South
Casey Meza – Kootenai Health
Debbie Ransom – IDHW Division of Licensing and Certification

Members Absent: Marc Chasin, MD – St. Luke’s Health System
Rick Goodwin, MS – Eastern Idaho RMC
Rhonda Robinson Beale, MD – Blue Cross of Idaho
Molly Steckel – Idaho Medical Association

DHW Staff: Kate Creswell, Project Coordinator – Office of Healthcare Policy Initiatives

STATUS: Draft 10/29/15

Agenda Topics:

Welcome and Introductions – Stacey Carson, Telehealth Council Chair

- Co-Chair Tracey Sessions welcomed everyone.
- Participants provided brief introductions.

Payer Reimbursement Matrix

- The payer reimbursement matrix was discussed and it was determined that because only two responses were received, discussion of the matrix would be postponed until additional responses can be collected.
 - Matt Wimmer and Melissa Christian will try to submit their responses by Friday, October 23rd.
 - Dr. Schaecher will contact Blue Cross to collect their responses.

Patient Identification and Benefit Verification

- Stacey Carson, ITC Chair, asked if the Idaho Board of Medicine’s proposed rules will provide the necessary guardrails for sufficient patient identification and benefit verification. The subcommittee determined that although the proposed rules do not directly address the concerns of patient identification and benefit verification, a photo id and insurance card would be adequate.
- The subcommittee discussed that it is the provider’s responsibility to verify and validate eligibility, which led to the discussion of fraud and abuse.

Appropriate Reimbursement Parameters

- Stacey Carson, ITC Chair, asked if the payers were considering all service delivery models when submitting their responses to the payer reimbursement matrix.
 - Regence Blue Shield used the direct to consumer model and Select Health used a combination of models.
- The subcommittee determined that this is more of an issue for government programs. Co-Chair Dr. Schaecher asked if the subcommittee would like to provide general recommendations regarding appropriate reimbursement parameters to the Council. The subcommittee decided it was not necessary to provide recommendations of appropriate reimbursement parameters.

Next Steps

- Dr. Schaecher will speak with Intermountain Health to find out how they currently verify eligibility.
- Kate Creswell will collect information pertaining to patient identification, benefit verification, and the relative incidence of fraud/abuse, as well as any recommended processes in place to avoid fraud.

There being no further business Co-Chair Dr. Schaecher adjourned the meeting at 4:57 pm.