TELEHEALTH 20/20: NEW PERSPECTIVES, INNOVATION INSIGHTS AND EXPANDED VISION OF CARE DELIVERY

2020 TELEHEALTH VIRTUAL CONFERENCE
APRIL 15-17
## PRE-CONFERENCE SCHEDULE AT A GLANCE

### PRE-CONFERENCE WORKSHOPS | WEDNESDAY, APRIL 15, 2020

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<th>Time</th>
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<tr>
<td>10:00AM-4:30PM PDT</td>
<td>CONCURRENT SESSIONS</td>
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<tr>
<td>10:00AM-12:00PM PDT</td>
<td>RURAL HEALTH “STATE OF THE REGION” PANEL</td>
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<td>MODERATOR: ALIA FRY</td>
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<td>PRESENTERS: JOHN R. GRAHAM, HHS Regional Director, IEA; MARY SHERIDAN, Bureau Chief, Idaho Dept. of Health and Welfare; ROSE LOCKLEAR, Oregon Office of Rural Health; MATT MCCULLOUGH, Associate Director, NRTRC and UETN; KIMBERLY MIYAZAWA FRANK, Regional Administrator, ACF; RACHELLE ZYLSTRA, Regional Administrator, ACL; SHARON TURNER, Regional Administrator, HRSA; DAVID DICKINSON, Regional Administrator, SAMHSA; TAMMY ARNDT, Director, Northwest Telehealth; DARRYL MEANS, Regional Administrator, CMS</td>
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<td>11:00AM-12:00PM PDT</td>
<td>TELEHEALTH TECHNOLOGY SHOWCASE</td>
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<td>HOSTED BY TTAC: DORIS BARTA AND JORDAN BERG, National Telehealth Technology Assessment Resource Center (TTAC)</td>
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<tr>
<td>1:00PM-3:00PM PDT</td>
<td>REMOTE PATIENT MONITORING WORKSHOP</td>
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<td>BONNIE BRITTON, MATRC Board Member and Reconnect4Health</td>
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<tr>
<td>1:00PM-4:30PM PDT</td>
<td>TELEHEALTH 101</td>
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<tr>
<td>1:00PM</td>
<td>HOW TO GET STARTED IN TELEHEALTH, CINDY ROLEFF, MS, BSN, RN-BC, Alaska Native Tribal Health Consortium</td>
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<tr>
<td>1:30PM</td>
<td>ENGAGEMENT, EVALUATION &amp; REPORTING, CARA TOWLE, MSN, RN, MA, University of Washington</td>
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<tr>
<td>2:00PM</td>
<td>GETTING PAID FOR TELEHEALTH, CATHERINE BRITAIN, Telehealth Alliance of Oregon</td>
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<tr>
<td>2:30PM</td>
<td>BREAK</td>
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<tr>
<td>2:45PM</td>
<td>LEGAL AND REGULATORY CONSIDERATIONS, DEB LAMARCHE, Northwest Regional Telehealth Resource Center</td>
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<tr>
<td>3:15PM</td>
<td>CLINICAL WORKFLOWS, JENNIFER ERICKSON, DO, University of Washington</td>
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<tr>
<td>3:45PM</td>
<td>TELEHEALTH TECHNOLOGY BASICS, TAMMY ARNDT, Northwest TeleHealth</td>
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<tr>
<td>4:15PM</td>
<td>WRAP UP: Q&amp;A AND RESOURCES, ALL</td>
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## Conference Schedule

### Conference Day 1 | Thursday, April 16, 2020

Many presentations fit multiple tracks. Read descriptions for details.

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### 8:45AM-9:00AM PDT

**Welcome**

DEB LAMARCHE, *NRTRC* and CATHERINE BRITAIN, *TAO*

Plenary sessions

### 9:00AM-10:50AM PDT

**Policy Panel: Updates for COVID-19 on the Latest Policies and Challenges in the Dynamic Field of Telehealth.**

20-minute presentations, followed by 30 minutes of Q&A

MEI WA KWONG, JD, *Center for Connected Health Policy*; EMILY WEIN, JD, *Foley & Lardner*; RENÉ QUASHIE, JD, *Consumer Technology Association*; JEFFREY MITCHELL, JD, *Fletcher, Heald & Hildreth*

Plenary sessions

### 11:00AM-12:00PM PDT

**National Consortium of Telehealth Resource Centers Webinar: COVID-19 and Telebehavioral Health**

Not part of or hosted by the NRTRC Virtual Conference. However, because it may be of interest to many of our participants, we will schedule around it. NOTE: Requires separate registration in advance: [https://zoom.us/webinar/register/WN_r7ZvYelkQeKr6GDZqFZmA](https://zoom.us/webinar/register/WN_r7ZvYelkQeKr6GDZqFZmA)

### 12:15PM-1:15PM PDT

**Lunch / Vendor Presentations**

Virtual conference sponsors and exhibitors will provide attendees with an opportunity to learn about their products and ask questions. Please support our sponsors and learn something at the same time!

- ZOOM – GEORGE LILLIG, Head of Healthcare
- WGU – JEANNIE BELCHER, NW Regional Manager, Partnership Team
- POLY – SHAWN AMMONS, Account Manager
- AMWELL – KELLY LEWIS, Vice President, Virtual Sales
- JOTFORM: CORONAVIRUS RESPONDERS PROGRAM – CHAD REID, Vice President, Marketing and Communications
- SIMPLEVISIT

### 1:15PM-2:00PM PDT

**Concurrent Sessions**

1. **Treating SNF Patients in Place with Telehealth**
   - WAASEM GHANNAM MD, MBD, MHSA, *TeleHealth Solution* and RON EMERSON, RN, BSN, *AMD Global Telemedicine*
   - Caring for distinct populations

2. **Transitioning Care to Tele-Oncology: One Physician’s Experience During the COVID-19 Pandemic**
   - ANA MARIA LOPEZ, MD, MPH, MACP, Professor and Vice Chair, Medical Oncology, Sidney Kimmel Medical College
   - Emerging applications

### 2:05PM-2:45PM PDT

**How to Start Your Telebehavioral Health Service (or Take Your Current Service to the Cloud)**

JONATHAN NEUFELD, PHD, *Program Director, Great Plains Telehealth Resource and Assistance Center*

Plenary sessions

### 2:45PM-3:00PM PDT

**Break**

### All Times Pacific Daylight Time (PDT)
### CONFERENCE SCHEDULE

#### CONFERENCE DAY 1 | THURSDAY, APRIL 16, 2020

Many presentations fit multiple tracks. Read descriptions for details.

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**3:00PM-3:45PM PDT**

**CONCURRENT SESSIONS**

**1** UTILIZATION OF TELEMENTAL HEALTH FOR SUICIDE PREVENTION  
SASHA ROJAS, PHD; MARILYN PICCIRILLO, MA; ERIKA SHEARER, PHD; JEAN KIM, PHD; VA Puget Sound  
Telebehavioral health

**2** CHALLENGES AND POTENTIAL SOLUTIONS FOR EVALUATING THE PATIENT EXPERIENCE AFTER PROVIDER-PROVIDER TELEHEALTH CONSULTATION FOR PAIN MANAGEMENT  
DALE LANGFORD, PHD; University of Washington, WA  
The patient and/or caregiver experience

**3:55PM-4:30PM PDT**

**CONCURRENT SESSIONS**

**3** COVID-19 TRANSMISSION PREVENTION USING TELEHEALTH CAPABILITIES  
CHERYL LEDWARD, MBA, MTECH; KRISTIN DASCOMB, MD, PHD; TODD VENTO, MD, MPH, FACP, FIDSA; ANDREW DAVIS, BS, LSSGB; KERRY PALAKANIS, DNP, FNP-C; Intermountain Healthcare  
Emerging applications

**4** GRANT ASSISTANCE – TIPS AND TRICKS TO FINDING AND SECURING GRANT FUNDING  
DANA SATTERWHITE, Learn Design Apply, Inc.  
The business of telehealth

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#### CONFERENCE DAY 2 | FRIDAY, APRIL 17, 2020

**8:45AM-9:00AM PDT**

**WELCOME DAY 2**  
DEB LAMARCHE, NRTRC  
Plenary sessions

**9:00AM-9:45AM PDT**

**TELEHEALTH TECHNOLOGY DURING COVID-19:**  
DORIS BARTA, TTAC, moderator; JORDAN BERG, TTAC; DON PATTEN, Minet and Willamette Valley Fiber  
Plenary sessions

**9:50AM-10:20AM PDT**

**CONCURRENT SESSIONS**

**A** ACCESS TO CARE VIA TELEHEALTH: AN ACCOUNTABLE CARE ORGANIZATION EXAMINES APPLICATION OF TELEHEALTH SERVICES IN A HIGH POVERTY, TRANSIENT POPULATION.  
MICHELLE HAGER, Blue Cirrus Consulting  
Caring for distinct populations

**B** ADDED COST OR VALUE ADD?: EXPLORING THE FINANCIAL IMPACT OF A DISCOUNTED, DIRECT-TO-CONSUMER TELEHEALTH PROGRAM  
TIM LOVELL, MBA, Intermountain Healthcare  
The business of telehealth
## CONFERENCE SCHEDULE

### CONFERENCE DAY 2 | FRIDAY, APRIL 17, 2020

Many presentations fit multiple tracks. Read descriptions for details.

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### 10:20AM-10:40AM PDT BREAK

### 10:45AM-11:15AM PDT CONCURRENT SESSIONS

1. **IMPROVING ACCESS TO GENDER AFFIRMING CARE**
   - CRYSTAL BEAL, MD, *QueerDoc*
   - Caring for distinct populations

2. **TELEMEDICINE: ACCESS TO WOUND CARE IN RURAL HEALTHCARE COMMUNITIES**
   - ALYSSA FRANCIS, MSA, *Cutiscare*
   - Emerging applications

### 11:20AM-12:00PM PDT CONCURRENT SESSIONS

1. **REMOVING OBSTACLES TO ENGAGEMENT: WHAT MAKES AN EFFECTIVE TELEHEALTH INTERVENTION FOR OLDER ADULTS?**
   - A. DILLON, S. PANDYA, K. NGUYEN, C. SCAVONE, A. RICHARDSON, A. SHEPHERD and H. DODGE, PHD; *Oregon Health & Science University*
   - Caring for distinct populations

2. **LEVERAGING DATA AND TECHNOLOGY TO CREATE PERSONALIZED EXPERIENCES IN THERAPY**
   - SYED MOHAMMED AND SHELLI DRY, *Enable My Child*
   - The patient and/or caregiver experience

### 12:00PM-12:45PM PDT KEYNOTE: RECYCLEHEALTH: HOW TO REDUCE EWASTE, HELP UNDERSERVED POPULATIONS, AND CONDUCT RESEARCH WHILE HAVING FUN

- LISA GUALTIERI, PHD, SCM, *Assistant Professor, Tufts University School of Medicine and founder, RecycleHealth.com*

- Plenary sessions

### 12:45PM-1:00PM PDT WRAP UP

- CONFERENCE ADJOURNED
  - Plenary sessions

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**ALL TIMES PACIFIC DAYLIGHT TIME (PDT)**
HRSA REGION 10 “STATE OF THE REGION” PANEL
The Health Resources and Services Administration’s (HRSA) Region 10 Office of Regional Operations presents Region 10 “State of the Region”, a panel to provide a region-wide perspective on telehealth activities and resources. Telehealth is especially critical in remote areas to extend the delivery of health care services, health education, and specialty care. As providers and provider organizations expand and enhance their capabilities, telehealth effectively works to improve care coordination and access to health care services. As telehealth tools increase, lessons learned and promising practices shared by expert users become necessary to ensure regional and national fidelity.

This session seeks to provide a forum for experts to share their expertise in the use and impacts of telehealth programs, HHS and HRSA resources, and will include a state-level perspective panel who will share information on assessments, lessons learned, and how other rural health stakeholders can move forward in their use of telehealth programs. This session will also include an opportunity to hear from HHS Region 10 Regional Administrators who will share agency specific resource and program updates. The combination of these two sessions will result in increased awareness and understanding of telehealth resources, programs, and networking opportunities to support the use of telehealth.

REMOTE PATIENT MONITORING WORKSHOP
Bonnie will share her extensive experience and knowledge to provide a comprehensive “how-to” on remote patient monitoring (RPM). Learn how to stand up a Remote Patient Monitoring Program quickly and efficiently. Bonnie Britton is one of the nation’s leading experts in RPM. In this two hour workshop she will review the policies and regulations for RPM, the importance of creating a sustainable model and practical steps for setting up a program.

TELEHEALTH TECHNOLOGY SHOWCASE
Hosted and taught by the expert staff of the National Telehealth Technology and Assessment Resource Center (TTAC), this is usually delivered as a hands-on experience. Given our current circumstances, TTAC has developed a virtual workshop that offers a chance to experience telemedicine equipment and peripherals used in a clinical setting and also devices used in direct to consumer applications. This will also be an opportunity to ask questions of TTAC staff.

TELEHEALTH 101
Gain practical knowledge with this comprehensive overview. For those new to telehealth or looking for a refresher, this workshop will provide information on how to create and/or grow telehealth programs. Tools, tips and lessons learned will be incorporated into a discussion of the various components of setting up a telemedicine program.

Workshop modules will cover:

• How to Get Started in Telehealth. Essential considerations for developing a telehealth service, or seeking one.
• Engagement, Evaluation & Reporting. Learn about the importance of communications when creating, delivering, and sustaining a telehealth program.
• Legal and Regulatory Considerations. Will cover a broad range of need-to-know topics, including licensure, credentialing & privileging, informed consent, prescribing, malpractice, and privacy and security.
• Telehealth Workflow. Similarities and differences with in-person care. A detailed look at setting up a telehealth clinic.
• Telehealth Technology Basics. A guide for the novice and refresher for the experts. Learn about the type of equipment and things to consider when selecting equipment.
• Wrap-up, Q&A, and Resources. Participants will leave with checklists and resources.
SESSION DESCRIPTIONS

CONFERENCE DAY 1 | THURSDAY, APRIL 16, 2020

SESSION DESCRIPTIONS

**WELCOME! TELEHEALTH POLICY PANEL: UPDATES ON THE LATEST POLICIES AND CHALLENGES IN THE DYNAMIC FIELD OF TELEHEALTH**

If telehealth was considered a dynamic field before, it is on fire since the emergence of COVID-19. Nationally renowned telehealth policy experts will present the latest updates and challenges in telehealth reimbursement, remote patient monitoring, clinical decision support, FDA, cybersecurity and broadband for healthcare in light of the current public health emergency. Each expert will present for 20 minutes, followed by 30 minutes of Q&A from the audience.

**VENDOR PRESENTATIONS**

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**TREATING SNF PATIENTS IN PLACE WITH TELEHEALTH**

Hospital readmissions are a huge challenge for healthcare organizations costing millions of dollars/year in penalties and lost revenue while putting patients at risk for delirium, stress and discomfort. Statistically, 30 day hospital readmissions for elderly patients markedly increases morbidity and development of secondary complications. This session will showcase how 91.5% of post-acute care patients are being treated in place, through the use of telehealth in facilities across the nation. Learn how skilled nursing facilities leverage telemedicine technology and tele-hospitalists to reduce unnecessary transfers to the hospital, and have dropped readmission rates to less than 9%. Dr. Waseem Ghannam, hospitalist physician, will provide data to prove how telehealth has made an impact on their patient care, and resulted in hospital savings of over $8 million and SNF rehab payments saved of over $2 million. In addition, specific use case examples will be shared of improved patient outcomes and reduction in readmission rates. To ensure you get started off in the right direction, there are critical factors that every organization needs to address. Ron Emerson at AMD Telemedicine will provide best practice models and key considerations that need to be discussed within your organization, prior to committing to and implementing telehealth.

**TRANSITIONING CARE TO TELE-ONCOLOGY: ONE PHYSICIAN’S EXPERIENCE DURING THE COVID-19 PANDEMIC**

Telemedicine services allow for care at a distance. As our clinical practice faced the COVID-19 pandemic, we quickly mobilized to tele-oncology visits in the outpatient and inpatient setting. This presentation will share lessons learned by reviewing facilitating structural, clinician, and patient factors as well as barriers.

**HOW TO START YOUR TELEBEHAVIORAL HEALTH SERVICE (OR TAKE YOUR CURRENT SERVICE TO THE CLOUD)**

Meeting behavioral health needs can be a challenge for rural and underserved communities. Learn how to find, vet and work with telebehavioral health providers. Ample time during this session will be dedicated for Q&A for participants. Speaker Jonathan Neufeld will have presented earlier in the day on a National Consortium of TRCs webinar so will be available to discuss questions and issues arising from both presentations.

**UTILIZATION OF TELEMENTAL HEALTH FOR SUICIDE PREVENTION**

The highest rates of suicide occur in rural and remote areas where individuals have limited access to specialized mental health services.1 Despite advancements in expanding access to evidence-based mental health treatments via video based technology (e.g., Clinical Video Telehealth; CVT), there is limited work specific to addressing suicide risk. Most CVT studies exclude individuals experiencing suicidal ideation or recent suicidal behavior. Considering the Department of Veterans Affairs (VA) is a national leader in CVT efforts, we explored differences in suicidal behavior among Veterans receiving in-person or CVT mental health treatment. Suicide risk was indexed by a Suicide Behavior Report (SBR) at three time points: 6 months prior to first CVT appointment in 2017, during treatment in 2017, and 12 months following first appointment in 2017). Fisher’s exact test and a discrete time survival analysis via the Kaplan-Meier method were used to determine whether suicide risk differed as a function of telehealth status. Overall, results indicated that suicide risk does not differ among Veterans receiving CVT versus in-person treatment. As such, clinical providers should be ready to attend to and provide evidence-based treatments for suicide risk via CVT. Clinical recommendations and best practices for suicide prevention via CVT will be presented.
CHALLENGES AND POTENTIAL SOLUTIONS FOR EVALUATING THE PATIENT EXPERIENCE AFTER PROVIDER-PROVIDER TELEHEALTH CONSULTATION FOR PAIN MANAGEMENT

Primary care providers are at the forefront of pain management, providing 70-95% of chronic pain care. Providers may be isolated in their practice and limited or delayed access to pain specialist consultation is an acknowledged regional crisis. University of Washington (UW) TelePain – a provider-to-provider pain management education and consultation program - was created in response to this challenge. TelePain is a weekly video conference program offered by UW’s Division of Pain Medicine and sponsored by the Washington State Health Care Authority (HCA). The ultimate goal is to improve providers’ capacity to deliver safe, compassionate, measurement- and evidence-based pain care. With support from the HCA, we continue to explore ways to determine the impact of TelePain on the patient experience. A key challenge is that TelePain has no direct relationship with patients and must rely on busy providers to engage patients in these efforts. In order to facilitate patient-centered, measurement-based care and capture quantitative patient-reported outcomes (PROs), we are currently adapting a UW web-based multidimensional PRO tool (PainTracker) for use by providers who present a case at TelePain. We anticipate that this approach will incentivize participation, improve measurement-based care, and provide much needed data to support the value of TelePain.

COVID-19 TRANSMISSION PREVENTION USING TELEHEALTH CAPABILITIES

Any outbreak requires a robust public health response. Even small outbreaks have significant risk and cost impacts that place strain on a healthcare system. The role of telemedicine care in disaster response to limit exposure, protect patients and caregivers and thereby protect the healthcare system was first tested by Intermountain Healthcare during a measles outbreak in 2018/2019 and again most recently during the COVID-19 pandemic, both viruses being highly infectious in nature. The ability of telehealth care to rapidly identify high risk cases and implement targeted control measures before patients physically entered the healthcare system, became evident when our preexisting transmission prevention workflow was adapted and deployed during this emerging pandemic. This session will focus on how we leveraged our telehealth platforms to manage the onset of the COVID crisis through the development of a crisis management center to facilitate prompt public health interventions during a period of increasing community transmission.

GRANT ASSISTANCE – TIPS AND TRICKS TO FINDING AND SECURING GRANT FUNDING

Learn about potential grant programs and funding sources that are aimed at technology opportunities, how to apply for those grants and what to do once you receive the grant. We will learn share best practices when approaching grant funding, how to plan ahead for a grant application and how to best leverage matching funds. We will review the “How-Tos” of alternative funding, relevant grant programs and tips and tricks to securing grant funding. Please come ready to discuss and ask questions. Especially timely for clinics and practices just starting telehealth.

TELEHEALTH TECHNOLOGY DURING COVID-19

Technical experts will share information and guidance on telehealth tools and options for broadband resources for those starting or expanding telehealth to provide care while staying safe. While the emphasis will be on immediate needs, speakers will also discuss the value of include longer term thinking when implementing technology.

ACCESS TO CARE VIA TELEHEALTH: AN ACCOUNTABLE CARE ORGANIZATION EXAMINES APPLICATION OF TELEHEALTH SERVICES IN A HIGH POVERTY, TRANSIENT POPULATION

MyCare Family (Merrimack Valley Accountable Care Organization (MVACO)) is a partnership between Greater Lawrence Family Health Center (GLFHC) and Lawrence General Hospital (LGH) in Lawrence Massachusetts, a diverse high poverty community, with 76% of the population Hispanic. Socioeconomic factors and a recent community disaster contribute to
high disease burden and mortality rates including Diabetes, Behavioral Health, Asthma and Opioid Addiction. Recognizing the critical needs of the population, MyCare Family sought to develop a collaborative partner telehealth services strategy. The plan would address the critical disease states of clients, Emergency Department overuse, transient behaviors, language barriers, homelessness and lack of transportation. Through stakeholder interviews and studies, current service needs, existing services community needs, strategic priorities and ROI were analyzed with a determination that clients lacked access to care in major areas including: Dermatology, Behavioral Health and Language Services. From an ACO perspective dependence is on providing services through partners. The project results included a clear picture and path defining telehealth services for high quality sustainable access to care and positive clinical and financial return on investment. The results demonstrate how an ACO can propel telehealth as a successful collaborative partner with providers and community services in a challenging patient environment.

ADDED COST OR VALUE ADD?: EXPLORING THE FINANCIAL IMPACT OF A DISCOUNTED, DIRECT-TO-CONSUMER TELEHEALTH PROGRAM

On-demand, direct-to-consumer video (or virtual) visits represent one of the largest outpatient telehealth services. Due to the absence of an in-person physical examination, some question the effectiveness, efficiency and value of virtual care visits to both systems and to patients. To address these questions, we conducted a retrospective, cross-sectional review of Intermountain Healthcare’s virtual care program, Connect Care. This presentation will share the results of the study plus some of our own analysis on patient experience and cost savings. Using SelectHealth claims data, we reviewed the total cost of care across urgent, primary, emergency and virtual care and found no differences in follow-up rates between virtual and urgent care and no differences in antibiotic use between virtual and urgent or primary care. Virtual care was significantly lower than all other care settings in utilization of laboratory and imaging services, index visit cost and total costs over 21 days. This study affirmed lower cost for virtual care without an associated increase in overall follow-up rates of antibiotic use when compared with urgent or primary care.

IMPROVING ACCESS TO GENDER AFFIRMING CARE

For transgender and gender diverse people (TG/GD) social determinants of health such as SES, access to transportation, health insurance status, geographical location, and intersectional issues affect access to life-saving gender affirming care. By leveraging social media and telemedicine, providers can improve access to expert, individualized, affirming care from the safety of patient’s own home. By offering sliding scale telemedicine services with transparent pricing, the effects of SES status and health insurance status can be reduced. Telemedicine minimizes the effect of transportation and geographical location barriers. Social media exposure allows transparency around the provider and clinic’s views and values decreasing fear of discrimination. Telemedicine based gender affirming care offers improved access to care in areas where care is otherwise minimal or limited by social determinants of health helping improve the quality of life of TG/GD people!

TELEMEDICINE: ACCESS TO WOUND CARE IN RURAL HEALTHCARE COMMUNITIES

Telemedicine in rural healthcare communities have significantly improved the options in how patients are cared for and it is shown numerous times through studies that patients have better outcomes when they are cared for in their own communities. By utilizing telemedicine in the wound care setting, patients who would usually travel upwards of 5 hours from Billings, Montana or 350-400 miles, can be seen in the comfort of their providers office to obtain the care they need to heal from chronic wounds. The program has developed relationships to serve both Native and non-Native patients. In this presentation, the attendees will have the opportunity to be presented with a visual timeline and experience what it takes to develop and deliver a telemedicine program to rural and frontier health communities.

REMOVING OBSTACLES TO ENGAGEMENT: WHAT MAKES AN EFFECTIVE TELEHEALTH INTERVENTION FOR OLDER ADULTS?

Telehealth may be in the unique position to implement innovative, user-friendly approaches for combating social isolation and cognitive decline. Our team has been conducting randomized controlled clinical trials over the past 10 years, examining the impact of social interaction on brain health. Currently, our i-CONECT (Internet-Based Conversational Engagement Clinical Trial) Study is seeking to understand whether addressing isolation and loneliness in older adults by harnessing
telehealth technologies can improve cognitive functions and prevent dementia. Having completed our first year of the newly launched intervention project, we have received interesting responses and feedback from participants which have helped us to create meaningful engagement through video conferencing. We will discuss the lessons we have learned on how to create and measure quality engagement in video chats, and our approaches to addressing the social determinants of cognitive decline through interactive conversational techniques aimed at specific brain functions. We will also present our in-house developed video chat application that is specially designed to alleviate technological barriers and make engaging in conversation as easy as tapping a button.

LEVERAGING DATA AND TECHNOLOGY TO CREATE PERSONALIZED EXPERIENCES IN THERAPY

When supported with AI and machine learning technology, teletherapy allows providers to design and deliver highly-tailored treatment plans. Today’s modern telehealth platforms go far beyond simple tasks like session logging, patient record keeping, scheduling, and video conferencing. Computer vision technology can track a patient’s microexpressions in real-time, while natural language processing (NLP) can analyze and index session dialogue. All of this data is stored and analyzed in detail to help therapists personalize patient sessions and continuously develop a predictive treatment plan, resulting in better patient experiences with higher treatment efficacy and shorter duration. Dr. Shelli Dry, OTD and Director of Clinical Operation at Enable My Child, will share insights on how providers can take a human-centric approach when integrating emerging technologies into the patient experience. Referencing her work, Dr. Dry’s presentation will provide a roadmap for creating engaging, personalized, and data-driven experiences for patients through:

• An exploration of how modern teletherapy can be deployed at the patient-level across various points of treatment
• Insights into how AI, machine learning, and other forms of emerging technology can be leveraged to customize the patient experience.
• Case studies demonstrating how these strategies have transformed patient outcomes in the real world.

KEYNOTE: RECYCLEHEALTH: HOW TO REDUCE EWASTE, HELP UNDERSERVED POPULATIONS, AND CONDUCT RESEARCH WHILE HAVING FUN

CONFERENCE WRAP-UP
TAMMY ARNDT

*Director, Northwest TeleHealth*

Tammy Arndt is Director of Northwest TeleHealth, a regional video conference network, providing a platform of connectivity to thirty-three communities in Eastern Washington and Northern Idaho. Utilizing collaborative tools and established protocols, Northwest TeleHealth facilitates and supports healthcare administration, distance education, and clinical services to improve access to healthcare and promote healthy communities.

With over 20 years’ experience in the healthcare industry, Tammy has a pragmatic approach to program development and delivery. Focusing on workflow integration of virtual services, she has facilitated the successful launch of multiple telemedicine programs, extending care to rural hospitals, clinics, and patient’s homes. Tammy is proud to represent Northwest TeleHealth, a founding organization of the NRTRC, and Eastern Washington on the advisory board.

DORIS T. BARTA

*Director, National Telehealth Technology Assessment Resource Center (TTAC)*

Doris T. Barta is the Director of the National Telehealth Technology Assessment Center. She has over 25 years’ experience working in the telehealth field, serving in the capacity of a telehealth network director as well as in the role of fund development for telehealth. Ms. Barta also served as the Principal Investigator for the Northwest Telehealth Resource Center for 10 years. She brings a wealth of experience in program planning and operations to the Technology Assessment Center team.

CRYSTAL BEAL, MD

*QueerDoc*

Dr. Crystal Beal, a Board-Certified Family Medicine Physician, attended Florida State University College of Medicine in Tallahassee, Florida. While there, they helped found the LGBTQ medical student group. After medical school, they completed their training at Valley Family Medicine Residency Program in Washington state. Continuing to see gaps in care for the LGBTQAAI2S+ community, Dr. Beal sought extensive additional training in sexual health, queer health, and gender affirming care including self-study, continuing medical education trainings, and shadowing experts in the community including Seattle Children’s Gender Clinic. Dr. Beal provides high-quality, expert, and affirming gender care through their private practice, QueerDoc. Dr. Beal started QueerDoc as an online doctor’s office providing culturally competent and individualized gender affirming care and queer medicine, like hormone therapy, PrEP, and STI screening. QueerDoc’s mission is to raise the bar in gender affirming care and increase access to high quality care by leveraging novel models of care like telemedicine.

JORDAN BERG

*Technology Assessment Specialist, National Telehealth Technology Assessment Resource Center (TTAC)*

Jordan Berg is the Technology Assessment Specialist at National Telehealth Technology Assessment and Resource Center (TTAC), one of two National Telehealth Resource Centers. TTAC provides in-depth objective assessments for all types of telehealth technology. Jordan has over a decade of hands on experience working with the Alaska Tribal Health System and six years’ experience working in telemedicine. Jordan is passionate about working with people, helping them to understand, evaluate, and assimilate telemedicine technology.
Catherine Britain
*Executive Director, Telehealth Alliance of Oregon, CSBritain Consulting*

Catherine Britain is a co-founder and a past president of the Telehealth Alliance of Oregon (TAO) and currently serves as the Executive Director. She is the principal and owner of CSBritain Consulting. The Telehealth Alliance of Oregon (TAO) provides telehealth education and policy building while encouraging collaboration between payers, providers, patients and regulators throughout the state. Catherine also serves on the NRTRC Advisory Board.

Bonnie Britton, MSN, RN, ATAF
*Board Advisor and Consultant for the Mid Atlantic Telehealth Resource Center (MATRC) and Executive Director, Reconnect 4 Health*

Bonnie Britton, MSN, RN, ATAF, is recognized as a Telehealth pioneer and expert. She has dedicated the past 21½ years of her career as a nurse, advancing the adoption and implementation of Remote Patient Monitoring both nationally and internationally. Bonnie was the 13th inductee into the American Telemedicine Association’s (ATA) College of Fellows in 2010. Bonnie is a previous ATA Board Member, chaired the ATA Home Telehealth SIG and the ATA Home Telehealth Clinical Guideline Development Committee, co-chaired the ATA Home Telehealth Satisfaction Item Bank, and participated as a member of the ATA Policy Committee, Awards Committee, and Nominating Committee. She currently serves as a Board Advisor and Consultant for the Mid-Atlantic Telehealth Resource Center (MATRC). Bonnie has also successfully implemented CMS’s Chronic Care Management programs.

Kristin Dascomb, MD, PHD
*Medical Director - Infection Prevention, Intermountain Healthcare*

Dr. Kristin Dascomb is an infectious diseases physician and the Director of Infection Prevention for Intermountain Healthcare, overseeing infection prevention and control programs for 23 hospitals. She also serves as the Medical Director for Intermountain’s nationally certified Infectious Diseases containment unit that serves as a regional center providing care for patients with conditions such as Ebola and other hemorrhagic fevers. She also oversees pandemic influenza preparedness for Intermountain Healthcare.

Andrew Davis, BS, LSSGB
*Project Coordinator, Intermountain Healthcare*

Andrew is a proud Utah native. He is currently pursuing double master’s degrees in Business and Healthcare Administration (MBA/MHA) and a Graduate Certificate of Information Systems (GCIS). Andrew has been working at Intermountain Healthcare since May 2019 as a project Coordinator in their Telehealth department.

David Dickinson
*Regional Administrator - SAMHSA*

David A. Dickinson, MA, has over 40 years of experience in the field of behavioral health, working in clinical service delivery as a counselor, program manager, and agency director, as well as serving in leadership positions in State government in Kansas and Washington. His clinical career also included service delivery in California, Colorado, and Oregon. Prior to his position as SAMHSA Regional Administrator for DHHS Region X, David served as the Director of the Division of Behavioral Health and Recovery (DBHRI) in the Department of Social and Health Services, State of Washington.
ANNIE DILLON
*Intervention Coordinator, Oregon Health & Science University*

Annie Dillon is an intervention coordinator with the I-CONECT Study within the Layton Aging & Alzheimer’s Disease Center at Oregon Health & Science University. Her work within the study consists of ensuring the fidelity of the intervention across conversation staff and participants. Previous to her role as a coordinator, Annie joined I-CONECT as a conversation staff conducting video chats with participants. Outside of I-CONECT, Annie is in pursuit of her masters of public health at the OHSU-PSU School of Public Health.

HIROKO DODGE, PHD
*Overall Principle Investigator, Oregon Health and Science University*

Dr. Dodge is Professor of Neurology at Oregon Health Sciences University. She has been continuously funded by the National Institutes of Health (NIH) as Principal Investigator for behavioral intervention clinical trials, examining whether stimulations through face-to-face social interactions using webcams/Internet could improve cognitive functions. One of the series of projects is I-CONECT. These NIH-funded projects target socially isolated older adults, who are less likely to participate in clinical trials despite their high risk of cognitive decline. She also has research cohorts in Okinawa, Japan where she conducts cross-cultural comparative studies on healthy cognitive aging, supported by the Japan Grants-in-Aid for Scientific Research. She holds a fellow status at the Gerontological Society of America and serves as an editorial board member for multiple dementia journals.

SHELLI DRY, OTD
*Director of Clinical Operations, Enable My Child*

Shelli received her Master of Education degree in special education from the University of Louisville. She earned her doctorate in occupational therapy from Eastern Kentucky University. Since 1998, she has dedicated her career to pediatrics and mental health. She has worked in numerous pediatrics practice settings, such as Neonatal Intensive care Unit (NICU), Acute Care pediatrics, Early Intervention, and in various school settings. Since 2005, she has operated her own successful business. She also coordinates evaluation teams for the New Jersey Early Intervention System and provides training to new therapists. Her interests include early childhood development and working with children with autism and Down syndrome. Shelli has earned a distinguished reputation within the mental health community as well as with local government health lawmakers and the media. Considered one of the most knowledgeable experts in her field in the US, she is often consulted for her opinion on public policy changes. She’s made TV and radio appearances as an expert on children’s mental health. She has also researched and published articles on the need for access to proven and affordable therapy services. Her publications concerning how this could be achieved online help make her the perfect fit for Enable My Child (EMC).

RON EMERSON, RN, BSN
*Global Director of Strategic Development, AMD Global Telemedicine*

Ron Emerson RN BSN is Global Director of Strategic and Partner Development for AMD Global Telemedicine. He is a former member of the board of Directors for the American Telemedicine Association and Chair of the Industry Council. He has more than 20-years experience in the healthcare industry. He is recognized as a thought leader in Telehealth, having developed a variety of innovative telehealth applications, and consulted on telehealth deployments worldwide. He also held the position of Executive Director for a large telemedicine operation in the United States, where he was responsible for the efficient provision of services to 350 sites. Mr. Emerson was the previous recipient of the American Telemedicine Association Industry Council Award for his leadership in the advancement of Telehealth.
JENNIFER ERICKSON, DO  
*Psychiatrist, Acting Assistant Professor, University of Washington*

Jennifer Erickson DO has a Bachelor’s in Neuroscience from Washington State University, and completed her osteopathic medical degree at Western University of Health Sciences, with a residency at the University of New Mexico and a fellowship in Psychosomatic Medicine at Mount Sinai Beth Israel in New York. She currently works at the University of Washington Medical Center and UWNC using the collaborative care model and telemedicine. Her interests include neuropsychiatry, population health, and telemedicine.

ALYSSA FRANCIS, MSA  
*Program Director, CutisCare USA*

Alyssa Francis is the Program Director for a Billings based Wound Healing and Hyperbaric Medicine Center. Within this capacity she oversees the program development, marketing efforts, and ongoing operations of a successful clinical program. She has spent nearly 20 years in the healthcare field working in direct patient care in both clinical and hospital settings, health insurance sectors, and information technology as well as in the roles of a business and technical project manager. She studied at Montana State University Billings earning a Bachelor of Science degree and then a Master of Science in Administration from the University of South Dakota focusing on organizational leadership and development. She also teaches as a part-time instructor for Montana State University Billings for both the College of Business and for the English, Philosophy and Modern Language department. Her passion is providing unique and innovative ways to help support rural communities obtain access to health care services.

WASEEM GHANNAM, MD, MBD, MHSA  
*CEO & Co-Founder, Telehealth Solution*

Dr. Ghannam obtained his Medical Degree from St. Matthew’s University and completed his training at Cabarrus Family Medicine in Concord, NC. During his medical training, Dr. Ghannam also completed a Masters of Business Administration from Davenport University and a Masters in Health Services Administration from St. Joseph’s College of Maine. Dr. Ghannam began his career as part of a private hospitalist group. There he developed an interest in bridging the gap for local hospitals with physician staffing needs. He and his business partner Dr. Jason Perlman founded The Hospitalist Solution, which gave North Carolina hospitals a one-call solution for their short- to medium-term hospitalist staffing needs. Dr. Ghannam is a patient-focused physician with a particular interest in creating ways for physicians and patients to interact and be cared for without geographical constraints. Dr. Ghannam is constantly seeking innovations in technology that can provide unparalleled care. When he is not involved in patient care, Dr. Ghannam is very active with his two children, attending professional sporting events, and enjoying lake activities.

JOHN R. GRAHAM  
*HHS Regional Director – IEA*

John R. Graham was appointed Regional Director, Region 10, on April 1, 2018. He previously served as Acting Assistant Secretary for Planning and Evaluation during the Administration’s first year. He has almost two decades experience as a financial, economic, and policy analyst in the health sector. Working at a number of well-known non-profit research institutes, Graham has led research on topics including payment reform, regulation of drugs and medical devices, health information technology, and comparing international health systems. His short articles on health policy have appeared in media including the Wall Street Journal, Washington Post, and Forbes, where he contributed a regular column until joining the Administration in March 2017.
LISA GUALTIERI, PHD, SCM
Assistant Professor, Tufts University School of Medicine and founder, RecycleHealth.com
Lisa Gualtieri, PhD, ScM, is an assistant professor at Tufts University School of Medicine in the Department of Public Health and Community Medicine. She conducts research on the use of activity trackers with underserved populations; the integration of tracker data into clinical care; and the impact of digital literacy skills on adoption of digital health by older adults. Dr. Gualtieri is the founder of RecycleHealth, a non-profit that collects trackers to donate to underserved populations. She serves on the FDA’s General Hospital and Personal Use Devices Panel. Dr. Gualtieri has a PhD in computer science from Harvard University, a ScM in computer science from Brown University, and a BA in Mathematics from the University of Massachusetts. She tweets at @lisagualtieri.

MICHELLE HAGER
Managing Partner, Blue Cirrus Consulting
Michelle Hager is the Managing Partner of Blue Cirrus Consulting LLC. Since founding the company in 2010, Michelle has led Blue Cirrus to become a trusted management consulting partner and leading Telehealth advisory firm within the healthcare industry nationwide. She is dedicated to her passion for educating healthcare providers, advocates and legislators on the benefits and value of Telehealth services. She is a frequent invited speaker at conferences across the country to include: National HIMSS, ATA, Regional TRC Events, APHA, and ASHP. Michelle is a participating member on the Advisory Board of Center for Telehealth and e-Health Law, ATA Industry Council, National HIMSS Telehealth Workgroup and is the currently President of the South Carolina HIMSS Chapter. She has her Bachelor’s Degree from Florida State University and in her free time enjoys spending time with her husband Brad, son Ethan and their Pug Miko.

JEAN KIM, PHD
Clinical Psychologist, VA Puget Sound, Seattle Division
Jean Kim, Ph.D. is a clinical psychologist on the VA Puget Sound – Seattle Division’s Promoting Access to Telemental Health (PATH) team and the national webSTAIR team. She received her PhD in Clinical Psychology from the University of Southern California. She completed her internship at the VA Puget Sound – American Lake Division, with a rotation in telemental health, and completed her postdoctoral fellowship in Telehealth and Rural Outreach at the VA Puget Sound – Seattle Division. Her clinical and research interests include culture and mental health, with a special interest in technology-based interventions as a way of increasing access to care for diverse populations.

MEI WA KWONG, JD
Executive Director, Center for Connected Health Policy
Mei Wa Kwong, JD has over two decades of experience in state and federal policy work. She is the Executive Director for the Center for Connected Health Policy (CCHP), the federally designated National Telehealth Policy Resource Center. She has written numerous policy briefs, crafted state legislation and led several coalition efforts on a variety of issues. Ms. Kwong has published articles on telehealth policy, is recognized as an expert in her field and has been consulted by state and federal lawmakers on telehealth legislation and policy. Ms. Kwong is a graduate of the George Washington University Law School.
DEB LAMARCHE
Program Director and Principal Investigator, Northwest Regional Telehealth Resource Center
Deb has 24 years of experience in telehealth since its inception at the University of Utah in 1996. She worked with health care providers to implement diverse telehealth applications such as telestroke, prison telemedicine, and distance education for nursing Ph.D. programs. During her tenure as Associate Director of the Utah Telehealth Network, a service of the Utah Education and Telehealth Network, the telehealth network has grown from a single site to an extensive network connecting rural and critical access hospitals, clinics, community health centers and local health departments. Deb enjoys the opportunity to work with telehealth colleagues throughout the northwest.

DALE LANGFORD, PHD
Research Assistant Professor, University of Washington
I am a Research Assistant Professor in the Division of Pain Medicine at the University of Washington (UW) in Seattle. I have a diverse background in pain research, from basic behavioral research evaluating the social modulation of pain in laboratory mice to clinical pain research in patients with cancer and chronic non-cancer pain. Most recently, I joined the UW’s Center of Excellence in Pain Education for its last two years of funding to evaluate outcomes of various learning activities developed by the CoEPE to improve pain education across prelicensure health disciplines. I have also been a part of the UW TelePain planning team for over two years, working to summarize provider outcomes and implement methods to evaluate patient-reported outcomes. I conducted my postdoctoral fellowship in Physiological Nursing at University of California, San Francisco and earned my PhD in Experimental Psychology/Behavioral Neuroscience at McGill University (Montreal, Quebec, Canada).

CHERYL LEDWARD, MBA, MTECH
Clinic Manager, Intermountain Healthcare
A native from South Africa, Cheryl immigrated to Utah 6 years ago. Cheryl has 32 years experience in the healthcare industry and has held clinical, sales and operational positions during her professional career. She earned an MBA - Healthcare and an MTech degree. Cheryl is the clinic manager for Connect Care, Intermountain Healthcare’s virtual urgent care practice, the busiest urgent care across the Intermountain Healthcare system.

ROSE LOCKLEAR
Field Services Program Manager, Oregon Office of Rural Health
Rose Locklear joined the Oregon Office of Rural Health (ORH) in 2017 after completing two internships at ORH as part of her master’s degree in Public Health at Oregon State University. She began as a Program Coordinator at ORH to help Oregon’s rural and frontier Critical Access Hospitals increase access and provide support to providers through telehealth programming and Project ECHO. The initial focus of this work was to assess hospital’s health information technology and providers’ training and support needs. Rose currently oversees ORH’s Annual Forum on Aging as well as the Rural and Frontier Listening Tour. She also serves on state and regional Telehealth and Project ECHO governing boards. Rose holds masters’ degrees in Public Health and Kinesiology from Oregon State University and is based in central Oregon.
ANA MARIA LOPEZ, MD, MPH, MACP
Professor and Vice Chair, Medical Oncology, Sidney Kimmel Medical College, and Chief of Cancer Services, Jefferson Health New Jersey, Sidney Kimmel Cancer Center, NCI Designated, Thomas Jefferson University

Dr. Lopez has dedicated her career to ameliorating health inequities through community-based participatory research and through clinical trials that assess telecommunications technology to facilitate access to clinical care and education. Dr. Lopez has recognized expertise in cancer prevention and telemedicine, and has approximately 70 peer-reviewed journal articles and multiple book chapters. She has been continuously funded in health disparities research. Dr. Lopez is the former Medical Director of the Arizona Telemedicine Network at the University of Arizona and former Associate Vice President for Health Equity and Inclusion at the University of Utah Health Sciences Center. Dr. Lopez earned her MD from the Sidney Kimmel Medical College of Thomas Jefferson University, trained in Internal Medicine and Hematology and Oncology, completed a Master of Public Health (Health Policy and Administration), and was awarded a Cancer Prevention and Etiology Fellowship (T32, NCI) at the University of Arizona. She is the immediate Past President of American College of Physicians.

TIM LOVELL, MBA
Director, Telehealth Operations, Intermountain Healthcare

Tim directs operations for Intermountain’s direct-to-consumer telehealth services including on demand and scheduled visits across a range of specialties, primary and urgent care. His ongoing focus is on delivering services that increase patient access and convenience at more affordable costs. Prior to joining Intermountain, Tim lead human capital initiatives for American Express in the US and the UK as an HR Business Partner as part of their Global Leadership Development program. He also helped launch ambulatory EMR services for INHS for 400 providers across the Inland Northwest. Tim holds an MBA in Organizational Behavior and a BS in Information System’s Management and Spanish from Brigham Young University. He and his wife have five children.

MATT McCULLOUGH
Associate Director, Utah Telehealth Network and the Northwest Regional Telehealth Resource Center

Mr. McCullough recently became the new Associate Director of the Utah Education and Telehealth Network, where he is responsible for Telehealth operations, strategic planning, and development of new services and sites. Previous to this role, he worked at the Utah Department of Health, where he was the Director of the Utah Office of Primary Care and Rural Health. In this role, he supported all of the rural hospitals and clinics in the state with federal and state resources to improve quality of care, financial and operational capacity, and workforce development. He also worked in local government at the City of Farmington, Utah where he was the GIS and IT Administrator for over 9 years. He is currently a PhD candidate at the University of Utah, where he is finishing up a doctorate degree in Medical Geography. His research interests are in Type 1 Diabetes, access to care, and spatial statistics. He lives in Layton Utah with his wife and their five children and he enjoys landscape photography and the outdoors, including hiking, camping, and skiing.

DARRYL MEANS
Regional Administrator – CMS

Mr. Means is the Northwest Regional Administrator at the Centers for Medicare & Medicaid Services (CMS). He is the executive leader responsible for overseeing Medicare and Medicaid programs, agency initiatives, business and partnership development, and outreach and education throughout the region. Mr. Means’ background includes a distinguished leadership career in the United States Air Force, as well as leadership positions in the private health insurance and technology sectors. Mr. Means joined CMS in 2009. He’s earned a Bachelor of Arts Degree in Technology Management from St. Leo, University, a Master Degree in Health Administration, and a Graduate Certificate in Organizational Leadership from Chapman University.
JEFFREY MITCHELL, JD  
_Counsel, Fletcher, Heald & Hildreth, PLC_  
Mr. Mitchell has been practicing telecommunications law since 1999, specializing in federal and state broadband policies and regulation. Since 2010, Mr. Mitchell’s practice has focused on expanding support for telehealth through the Federal Communications Commission’s Rural Health Care Program (RHC). He has successfully represented numerous statewide broadband healthcare networks that obtained federal grants and other funding through the Department of Commerce and the RHC. Mr. Mitchell has also represented competitive carriers in various matters before the FCC. Mr. Mitchell joined Fletcher, Heald & Hildreth in 2019. From 2003 to 2010 he held various positions at USAC, including Associate General Counsel, Director of Outsourced Audits, and Director of the Rural Health Care Pilot Program. Mr. Mitchell grew up in Ann Arbor, Michigan, and is a graduate of the University of Washington and Georgetown University Law Center.

KIMBERLY MIYAZAWA FRANK  
Kimberly Miyazawa Frank is the Regional Administrator of Region 10, Administration for Children & Families (ACF), supporting Alaska, Idaho, Oregon, Washington, and 272 Tribal Nations. Focused on the national priorities of prevention and economic mobility, she leads the Seattle team; and with program leadership, executes cross-program strategies to enhance states' human services supports. With a leadership approach reflecting the Aloha Spirit, she has committed her career to improving outcomes for families via human capital, organizational, and community development. Previous leadership roles have been with the Aspen Institute, Hawaii Department of Human Services, Pālama Lāna‘i, and as CEO of the YWCA of O‘ahu. Miyazawa Frank has led a business consultancy and worked with the Gallup Organization and Towers Perrin. She is a former litigation attorney and serves on the boards of local and national non-profits. She holds a BS from Miami University and a JD from Rutgers School of Law.

SYED MOHAMMED  
_Founder / CEO, Enable My Child_  
Having lived in a dozen countries, Founder and CEO, Syed Mohammed is a culturally diverse individual. He came to the US in 2001 to complete a Bachelor of Science degree in computer science from Binghamton University. Since 2003, he has been an entrepreneur. He’s been involved in every aspect of developing, launching, marketing, and growing delivery systems of health care for brands including Pfizer, Novartis, and Noven. Maintaining high customer satisfaction has always been a career focus. Now his focus is on a health care service that he has a personal connection with: Enable My Child. Even with a doctor for a father, his difficulties weren’t diagnosed as stemming from ADHD until he was an adult. His goal is to help children with social, cognitive, emotional, behavioral, and developmental disorders get professional treatment that sets them up for success while they’re young.

JONATHAN NEUFELD, PHD  
_Program Director, Great Plains Telehealth Resource and Assistance Center_  
Jonathan Neufeld, PhD, is Program Director of the Great Plains Telehealth Resource and Assistance Center. Dr. Neufeld joined gpTRAC in February of 2017, having previously served as the Clinical Director of the Upper Midwest Telehealth Resource Center in Indianapolis. He has consulted on a wide range of projects related to rural health and telehealth over the past 15 years. He has presented at numerous regional and national conferences and published peer-reviewed articles in the fields of telemedicine, clinical decision support, mental health services evaluation, and clinical outcomes. Dr. Neufeld was formerly the Vice President of Information Technology and Integrated Care at Oaklawn Psychiatric Center in Goshen, Indiana. In this role, he oversaw the IT programs and services at Oaklawn as well as leading a team of clinicians providing mental and behavioral health services in primary care settings.
across Elkhart and St. Joseph Counties. Oaklawn has been using telehealth technology since 2011. Dr. Neufeld received his PhD in Clinical Psychology from Ohio University and completed a Postdoctoral Fellowship in Integrated Primary Care in the Department of Family and Community Medicine at UC Davis Medical Center in Sacramento, California.

KHOA NGUYEN  
Lead Technology Coordinator, Oregon Health and Science University

Khoa Nguyen is the Lead Technology Coordinator and Senior Research Assistant with the I-CONECT Study. Before working at Oregon Health & Science University, he was rooted in the tech industry, focused on IT and QA testing. After earning his degrees in Biology and Social Science from Portland State University, he was able to shift his knowledge and skills towards assisting in clinical research. As the technology coordinator, his responsibilities include designing, testing, and maintaining the video chat software, connecting with research subjects while implementing I-CONECT technology in their homes, and providing IT knowledge and support for staff. In his spare time, you can find him tinkering with his car or fiddling with computers.

KERRY PALAKANIS, DNP, FNP-C  
Executive Director, Connect Care, Intermountain Healthcare

Dr. Kerry Palakanis is the Executive Director of Connect Care at Intermountain Healthcare in Utah where she heads up the direct to consumer telehealth product lines. She is a Family nurse practitioner who has worked for over 28 years in family practice specializing in rural health and telemedicine. Dr. Palakanis has served as a featured speaker at State and National programs on issues related to rural health care delivery and telemedicine, has provided testimony to state and federal legislature on telemedicine bills, has received state and federal grants for telemedicine programs, piloted remote patient monitoring grant program; consulted in the development of a national chronic disease management and collaborates with various companies to develop/initiate innovative programs to provide connectivity and telehealth solutions.

SUPRIYA PANDYA  
Senior Intervention Coordinator, Oregon Health and Science University

Supriya Pandya has been a part of the I-CONECT study since March 2018. She began as a conversation staff member and went on to become the Senior Intervention Coordinator. After getting her Bachelor of Arts in Biochemistry with a minor in Neuroscience from Occidental College, she moved back to her hometown of Portland, OR to pursue a career at Oregon Health and Science University’s Layton Aging and Alzheimer’s Disease Center. She has been essential to the conception and design of techniques that the I-CONECT staff have been use to engage older adults.

DON PATTEN  
General Manager, Monmouth – Independence Networks (MINET)

Don Patten has brought to MINET a 25+ year history of overseeing the implementation of a wide range of video, broadband data and telephone services. He has been adept at exploring and securing new collaborative alliances that benefit from the deftness of MINET’s high speed fiber network. Currently Don and MINET are engaged in expanding the original footprint of MINET, via public/private partnership, into Dallas, Oregon. Don is committed to making high-speed broadband available to the unserved, underserved, or overlooked rural areas of Oregon. Don was born, raised, educated and developed much of his business acumen in South Dakota. He holds a bachelor’s degree in business administration and has done graduate studies in marketing. Married, Don and his wife Nancy are the parents of two sons located in South Dakota and Texas and a daughter living in Oregon.
MARILYN PICCIRILLO, MA
Psychology Intern, VA Puget Sound, Seattle Division

My research program centers on the implementation of statistical methods in clinical settings to model psychological symptoms on an individual (n = 1) level to develop person-specific assessment and interventions. I also have conducted research to better understand the impact of stigma surrounding self-injury and suicidality. Currently, I am working with mentors and collaborators at the VA Puget Sound to examine provider attitudes towards the implementation of the REACH VET program—an algorithm-based approach designed to identify Vets at risk for suicide and other outcomes. I am also involved in suicide prevention projects focused on understanding predictors of Veteran readmission to our inpatient Psychiatry unit, as well as examining the impact of suicide risk on the utilization of telehealth services.

RENÉ QUASHIE, JD
Vice President, Policy & Regulatory Affairs, Digital Health, Consumer Technology Association

René Quashie works at the junction where health, technology, law and policy meet. He provides guidance and counsel on key policy, legal/regulatory, and technical issues relating to digital health and wellness technology products, services, software and apps. Specifically, he works with CTA’s Health and Fitness Technology Division, which supports the consumer health technology industry through advocacy, education, research, standards work, policy initiatives and more. The Division includes some of the leading names in tech and health, such as Google, Philips, Doctor on Demand, Omron Healthcare, and Validic. CTA works closely with the Food and Drug Administration, the Centers for Medicare and Medicaid Services, the Office of the National Coordinator and other related government agencies. Mr. Quashie also works with other health and tech associations and stakeholders on various initiatives, including artificial intelligence, telehealth, mobile health, and interoperability.

avery richardson
Research Assessor, Oregon Health and Science University

Avery Richardson joined the I-CONECT Study in October 2018, originally working alongside the Intervention team as a Conversation Staff member. His past roles have included working as an Intervention Coordinator and Recruitment Specialist. He has most recently transitioned to a Research Assessor role within the study. His current duties entail performing neurocognitive evaluations, screening participants for eligibility, and obtaining informed consent, amongst other essential duties. He is working towards obtaining his master’s in public health and M.D. to ultimately become a ‘jack of all trades’ primary care physician, and work in an underserved, urban metropolitan setting.

SASHA ROJAS, PHD
Telehealth and Rural Outreach Fellow, VA Puget Sound, Seattle Division

Sasha Rojas, PhD is a postdoctoral fellow in the in Telehealth and Rural Outreach Fellowship at VA Puget Sound, Seattle Division. She completed her doctoral internship at VA Puget Sound – Seattle Division and received her doctorate in Clinical Psychology from the University of Arkansas. During her graduate training, under the mentorship of Drs. Matthew Feldner and Ellen Leen-Feldner, she conducted research to better understand the processes involved in suicide risk, with a specific interest in cross-cultural differences and access to suicide-specific care for underserved populations. Under the mentorship of Dr. Mark Reger, Sasha extended her program of work to exploring suicide risk among veterans, with a particular interest in clinical video telehealth (CVT) as a modality for veterans at risk for suicide. Sasha is currently exploring CVT as a modality to deliver evidence-based suicide-specific treatments for suicidal veterans who present with barriers to in-person care.
CINDY ROLEFF, MS, BSN, RN-BC  
AFHCAN Telehealth Program Development Manager, Alaska Native Tribal Health Consortium  
Cindy is the Telehealth Program Development Manager for the Alaska Native Tribal Health Consortium (ANTHC). ANTHC is a non-profit Tribal health organization that partners with over 175,000 Alaska Native and American Indian people and the Tribal health organizations of the Alaska Tribal Health System in providing health services.
She has worked in telehealth for the past ten years and has a total of more than 30 years of nursing experience. Cindy’s team offers telehealth program development and training services to all of the Alaska Tribal health organizations and clinics. Her team provides these services for both video and store & forward telehealth which are used broadly in primary care and in over 30 specialty care areas.
She has also designed, coordinated and taught classes and courses on dozens of clinical and telehealth topics to local, national and international audiences. Cindy holds a Bachelor of Arts in Child Psychology and a Bachelor of Science in Nursing from the University of Minnesota. She also holds a Master of Science in Business Organizational Management from the University of LaVerne. Her board certification is in Nursing Professional Development.

DANA SATTERWHITE  
Grant Consultant, Learn Design Apply, Inc.  
Dana Satterwhite has worked in the video conferencing field for 10 years and has always specialized in finding funding for technology initiatives. Prior to working with the LDA Grants team, Dana worked with the Tandberg and Cisco Grants teams. She is passionate about working with her customers to find the best possible funding opportunities for them. In addition to her experience with grant funding, Dana also spent time working at Facebook on the marketing team managing large-scale events for Facebook’s clients. Dana lives with her family in Seattle, WA where she attended the University of Washington and received her Bachelors of Arts in English.

COLTON SCAVONE  
Research Assessor, Oregon Health and Science University  
Colton Scavone began working with I-CONECT as a conversation staff member on the intervention team in 2017. Since this time, he has taken on other roles as I-CONECT has grown, such as aiding in the development of procedures. Currently, as an assessment specialist, his main responsibilities include preforming neuropsychological evaluations, obtaining informed consent, administering assessments to determine subject eligibility, and to evaluate those deemed eligible. Colton aspires to obtain a PhD in clinical psychology, and hopes to someday, continue his contribution to research as a clinician. As an outdoor enthusiast, his free time is often prioritized by activities such as hiking, camping, and traveling.

ERIKA SHEARER, PHD  
Clinical Psychologist, VA Puget Sound, Seattle Division  
Erika M Shearer, PhD is a staff psychologist on the Promoting Access through Telemental Health (PATH) team at the VA Puget Sound Health Care System (VAPSHCS), American Lake Division. She received her PhD in clinical psychology from the University of Nevada, Reno and completed a postdoctoral fellowship in Rural Veteran and Telemental Health at the VAPSHCS, Seattle Division. Her areas of expertise and interest include using telehealth technologies to provide and increase access to mental health services, adapting evidence-based therapies to the clinical video telehealth modality, and Acceptance and Commitment Therapy. She is recognized by the VA as a VISN 20 regional trainer and national consultant for the ACT for Depression VA Training and Dissemination effort, Telehealth Master Preceptor, and provides telehealth training and consultation throughout and outside of the VA Health Care System.
ALYX SHEPHERD
Research Coordinator, Oregon Health and Science University

Alyx Shepherd is a Research Coordinator with the I-CONECT Study. She obtained her Bachelor of Arts Degree in Anthropology and Asian American Studies at the California State University of Fullerton in 2016. She is working to obtain her Ph.D. in Neuroscience to ultimately open a private practice focused on integrative intervention methods in neurorehabilitation. In her free time, she enjoys studying foreign languages, critiquing Netflix films and composing piano music.

MARY SHERIDAN
Idaho Department of Health and Welfare

Mary Sheridan, RN, MBA, is the Bureau Chief of the Bureau of Rural Health & Primary Care, Division of Public Health, Idaho Department of Health and Welfare, since 2003. She is passionate about understanding rural health issues and seeking resources to help address unmet needs. Mary is honored to recently serve on the National Advisory Committee on Rural Health and Human Services. The committee advises the Secretary of Health and Human Services on strategies to address health issues in rural areas. Mary is past president of the National Organization of State Offices of Rural Health and continues to serve on the board.

CARA TOWLE, MSN, RN, MA
Associate Director, Psychiatry Consultation & Telepsychiatry, University of Washington

Cara Towle, MSN, RN, MA, has worked in telemedicine since 1996, starting with international telehealth programs at USCF and Stanford, then joining the University of Washington in 2001 to focus on rural telehealth programs. Through 2015, she served as the first Director for Telehealth Services at the UW, and since 2016 has focused on developing innovative telepsychiatry initiatives. She is a founding member of the NRTRC; and is a board member of the Washington State Telehealth Collaborative.

SHARON TURNER
Regional Administrator - HRSA

Sharon Turner has a passion for serving vulnerable and underserved populations and has over 30 years’ experience in public health and human services. Ms. Turner has been with Health Resources and Services Administration (HRSA) since 2004 and currently serves as the Regional Administrator for Region 10 covering the states of Alaska, Idaho, Oregon and Washington. She is responsible for providing oversight to HRSA’s Office of Regional Operations which primarily works to provide on-the-ground outreach to increase the reach, impact, and awareness of HRSA programs. In addition to her experience with HRSA, Ms. Turner has worked with Kansas City’s leading Universities and Hospitals such as The University of Kansas, The University of Missouri-Kansas City and Children’s Mercy Hospital, and Truman Medical Centers. She is a Social Worker, and has obtained Dual Masters Degrees: Masters in Social Work from the University of Missouri-Kansas City and Master’s in Public Administration from Park University.

TODD VENTO, MD, MPH, FACP, FIDSA
Medical Director, ID TeleHealth, Associate Medical Director, Intermountain Connect, Intermountain Healthcare

Dr. Todd Vento is a public health and infectious diseases physician who serves as the Director of Intermountain’s Infectious Diseases Telehealth Program and Medical Director for Intermountain’s Telehealth Specialty/Subspecialty Services. He oversees Telehealth programs for 23 Intermountain hospitals and several healthcare systems in the Intermountain West region. He is a retired Army Medical Officer with extensive international health experience as a consultant for military and civilian humanitarian programs on five continents.
EMILY WEIN, JD  
Of Counsel, Foley & Lardner LLP  
Emily H. Wein is of counsel and a health care lawyer with Foley & Lardner LLP, and member of the firm’s national Telemedicine & Digital Health Industry Team. Within the telehealth and digital health space, she focuses on state telehealth practice requirements, Medicare and Medicaid enrollment, fraud and abuse matters as well as Medicare coverage and reimbursement. Her clients consist of both institutional facilities as well as smaller private provider groups. Previously, she spent five years as in-house counsel at a nationally-known academic medical center health system, where she led the development of its virtual care service programs, including tele-stroke and tele-cardiology.

RACHELLE ZYLSTRA  
Regional Administrator – ACL  
RaChelle (Shelly) Zylstra, a relative newcomer to federal service, has worked in government programs which serve older adults and people with disabilities for nearly forty years. Currently the Regional Administrator for the Administration for Community Living, she was trained in the sciences with degrees in Nutrition, Chemistry, Medical Science, and Environmental Biochemistry and completed her PhD in Geriatric Nutrition in 1995. In her career, she has developed programs and systems which serve community members with innovation, cost-effectiveness, and excellent outcomes. Shelly has strong relationships with tribal communities and has worked closely with many to develop programs to serve their people.
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