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Recommendations for MCA Broadband Action and Digital Equity Planning Consideration

On behalf of the Maine Telehealth and Telemonitoring Advisory Group

The Maine Telehealth and Telemonitoring Advisory Group (TH/TM Advisory) was established in 2017 by Title 5, section 12004-I, subsection 38-A and reports to the Maine DHHS Commissioner, as well as annually to the Maine Legislature. With members representing a diverse set of stakeholders across the state, including telehealth and rural health, health systems and integrated medical care, behavioral health, home health, pharmacy, providers who regularly use digital health solutions, and non-profit advocacy organizations, the TH/TM Advisory is charged with: 1) Evaluating technical difficulties related to telehealth and telemonitoring services; and 2) Making recommendations to the Department to improve telehealth and telemonitoring services statewide.

Given the vital role that adequate connectivity plays in the wide-spread adoption of telehealth and existing gaps in digital equity for many across the state, the TH/TM Advisory appreciates the opportunity to provide recommendations for Maine's Broadband Action and Digital Inclusion planning. One of the few silver linings of the pandemic has been the massive expansion of telehealth utilization, and integration of digital technology into our healthcare delivery systems. Yet it has also called even stronger attention to the digital divide, with millions of people across the U.S. facing significant barriers to telehealth, due to either lack of access to affordable broadband or other hurdles to getting online. However, with once-in-a-generation resources committed by state and federal entities ([making more than \\$100 billion available to close the digital divide](#)), there are significant resources to help states make virtual health available to all, and adhering to the concept that digital equity = health equity,

Affordable broadband with wraparound support (e.g. access to devices and digital literacy programs) could expand access to cost-efficient virtual health for rural and underserved communities across the state. Maine's favorable telehealth policy landscape would also provide opportunities for boosting complementary services such as digital health data management and analytics as well as population health management. These in turn could improve chronic-condition management and care quality and outcomes while lowering costs and encouraging people to engage more actively in their healthcare. In order to help address key barriers to telehealth utilization and expansion, the Maine TH/TM Advisory makes the following recommendations for the MCA's consideration in its state-wide Broadband Action and Digital Equity Planning processes:

- 1. Support building digital navigation skills into healthcare and social services roles.** Over the course of the pandemic, stakeholders, including consumers and healthcare providers, have frequently cited digital navigation as a top priority to help ensure equitable access and effective use of telehealth solutions. Some hospitals and clinics are piloting digital navigator roles as key components of their health equity strategies. The MCA can help support development of models as well as share best practices in conjunction with healthcare organizations and providers to offer lasting benefits to patients struggling with

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patient portals, telehealth visits, and using recommended digital tools to improve their health.

a. Leverage existing experts and organizations, such as the National Digital Equity Center, National Digital Inclusion Alliance, Maine Regional and Tribal Broadband Partners, and others to expand the number of Digital Navigators available to provide trainings for consumers, as well as direct support professionals, maintain helplines, etc.

b. Provide resources (TA, funding, etc.) to local agencies to offer creative digital support programs for caregivers to be offered in easily accessible locations (e.g. schools, libraries, town offices, etc.).

c. Support a Digital Navigator pilot in healthcare settings and build/promote best practices through the Maine Digital Equity Taskforce, in partnership with the Maine Telehealth and Telemonitoring Advisory Group and Northeast Telehealth Resource Center.

2. Encourage the State to incorporate subsidized broadband programs into a broader universal benefits application. The State should make it easier for residents to sign up for benefits for which they are entitled, including those related to internet access, like the Affordable Connectivity Program. MCA programs like ACP4ME could be included in a broader universal benefits application so that a household applying for one benefit is alerted to its eligibility for another. For example, people applying for MaineCare, WIC or other benefits can be informed that they qualify for another benefit. Connecting benefits and reducing the need to complete multiple applications will improve resident interactions with technology.

3. Work with the healthcare sector on best practices for engaging residents in telehealth or digital health care tools. The TH/TM Advisory is acutely aware of the common issue among healthcare providers that their systems are not designed from patient perspectives. The pandemic demonstrated that reliance on patient portals or access to registration for vaccines through online systems are deeply inequitable and inadequate. The MCA, and specifically its Digital Equity Task Force, should work with the TH/TM Advisory, Northeast Telehealth Resource Center and healthcare partners to ensure that providers have access to best practices and systems that patients can use.

4. Work with State and local partners, including healthcare organizations, to create best practices for moving to web-based forms or applications to support residents with low-digital literacy skills. Any online form or system that residents/patients interact with should be multilingual, intuitive, and compliant with standards for people with varying abilities. Additionally, those partners should recognize the human element needed by many

to access and use these systems, particularly for vital services and programs, and partners should create opportunities for residents to provide feedback on improving these systems.

5. Encourage telehealth solution and service providers to implement design functionality, content, user interface, and service-access best practices with, and for, patients from historically marginalized racial and ethnic groups. Telehealth design must meet the need for varying levels of patient digital literacy. Promoting transparency and equity in privacy and security policies can help address hesitancy among some patients who are concerned about the safety and security of telehealth visits.

6. Advocate for the design of telehealth solutions to help those who have difficulty accessing technology. The needs of these patient groups should be considered (e.g. older adults, people with vision and/or hearing impairments or other disabilities, or people with limited-English proficiency). Measure and strengthen digital literacy, with emphasis on creating programs designed with and for these patient groups. Internet access and device ownership only benefit patients if they know how to use them.

Telehealth Access Points ([TAPs](#)) should be considered to ensure connectivity for individuals who may not have access at their place of residence. A Telehealth Access Point (TAP) is a dedicated public space for individuals to access a telehealth appointment. TAPs are often facilitated by community anchor institutions such as libraries. These spaces consist of an adequate internet connection, a device with working camera, speaker and microphone, as well as privacy considerations in the form of a dedicated room or kiosk where the telehealth visit can be conducted. TAPs may also have support staff to assist an individual through a telehealth appointment if needed. The MCA, Regional and Tribal Broadband Access Partners, Northeast Telehealth Resource Center and other stakeholders should promote TAP locations throughout the state in their respective outreach efforts. In addition, “telehealth rooms” developed through Maine Housing requirements can be integrated as essential TAPs locations.

7. Advocate for laws/rules which require health plans to cover telehealth services on the same basis and at the same rate as in-person services. Continuity of care can be undermined if patients are directed to separately contracted telehealth providers even when their regular providers can deliver services via telehealth themselves. These rules/laws should ensure that providers are paid fairly and equitably, regardless of whether the service is performed via audio-only, two-way audio-video, or in-person. Fair and equitable payments will help ensure patients can receive the right care via the most appropriate and accessible modality at the right time.

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8. Encourage policymakers to address regulatory, policy and infrastructure barriers to fair telehealth access, updating regulations that govern broadband access and infrastructure and policies that determine clinician eligibility for licensure. This could include promoting community and corporate partnerships to improve broadband access and reversing policies that prohibit audio-only telehealth for services.

9. Encourage leveraging of telehealth and digital technologies to promote equitable care delivery, using digital tools to close gaps in care and drive health equity forward. For example, ensuring digital technologies are interoperable across clinical portals and telehealth platforms and gathering patient data outside of patient visits, through use of allied health professionals or artificial intelligence, to understand when patients need to be engaged.

10. Continue MCA's strong outreach efforts to ensure underserved populations are reached and heard with respect to digital access needs, barriers, and recommendations, and how MCA and partners can better work with communities without digital access. Work with Regional and Tribal Broadband Partners and others to measure the impact of this outreach and subsequent training over time.

The TH/TM Advisory applauds the MCA for its strong focus on digital equity and inclusion, and for its commitment to integrating input across all sectors, including healthcare, education, and business into Maine's short and long-term strategic planning processes. We believe the intensive outreach efforts and focus on building regional and local supports for broadband expansion and digital equity will result in a strong return on investment, allowing Maine to leverage significant funds and resources to ensure high-speed, affordable connectivity for every community, and thereby helping ensure Maine people get the care they need, when and where they need it.

On behalf of the Maine Telehealth and Telemonitoring Advisory, many thanks for the opportunity to provide input into this important process to help ensure digital equity and health equity for all.