

**PENNSYLVANIA LONG-TERM CARE COMMISSION
RECOMMENDATION TEMPLATE**

SUBMITTED BY: Senate Commission on Long Term Care	
PROPOSED RECOMMENDATION STATEMENT: Use technology more effectively to mobilize and integrate community resources and to share information among providers, individuals and family caregivers across settings of care.	
GOAL: Leverage technology to assist with improving access to services, providing services in a more cost effective manner, increase consumer and family engagement, and provide outcome data.	
STRATEGIES TO ACHIEVE THIS GOAL: <ul style="list-style-type: none">• Pennsylvania should cover Telehealth and tele monitoring under all HCBS waivers.• Pennsylvania should expand its Meaningful Use Incentive Program using State Innovation Model (SIM) funding to promote the use of Health Information Exchange (HIE) and use of Electronic Health Records (EHR) between primary, acute, and long term care support and services (LTCSS) providers.• The Pennsylvania Health Care Cost Containment Council¹ should develop outcome based measures for all LTCSS programs similar to its (PHC4) reports on hospitals and managed care plans.• Pennsylvania should develop a LTCSS website that provides report card type information to consumers and family members on provider outcomes to assist them in selecting providers.	
RATIONALE: The use of Telehealth and tele monitoring will allow greater access to necessary primary, acute, and LTCSS services, provide services in a more cost effective manner, and in a more convenient manner by reducing travel time for consumers in rural and/or remote areas. Greater use of HIE and EHR will assist with more timely care provision and better health outcomes. Ultimately, for LTCSS recipients, use of HIE and EHR should result in better care coordination and care transitions.	
PROS: <ul style="list-style-type: none">• Improved access to services.• More cost effective provision of services.• More consumer friendly provision of services.• Ability to capture data and report outcomes.	CONS: <ul style="list-style-type: none">• Certain LTCSS providers have less formal infrastructure.• Provider staffing and financial resources to support initiative.• Financial resources for incentive program.• Financial resources for fiscal impact of adding telemedicine and tele monitoring to all the waiver programs.• State staff resources to develop the program.• PHC4 staff resources to develop and administer LTCSS reporting.

¹ PHC4 is a statutorily formed independent state agency, which was formed to assist in addressing rising healthcare costs. Its charge includes collecting, analyzing and providing the public with data about the cost and quality of health care in Pennsylvania.

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CONCRETE OR MEASURABLE OUTCOMES:

- Percent of HCBS waivers that cover telemedicine/tele monitoring
- Percent of LTCSS providers who have operational EHR
- Percent of LTCSS providers who connect to HIE
- Percent of acute care and nursing facility discharges to community setting

ANTICIPATED COSTS OR BUDGET IMPACT:

- Increased HCBS waiver expenditures – this is an unbudgeted item
- Funding for Meaningful Use Incentive Program – some funding may be available if Pennsylvania is awarded a SIM grant in round 2
- State staff resources to modify waivers, support SIM initiatives, develop necessary policy and procedures – some funding may be available if Pennsylvania is awarded a SIM grant in round 2
- PHC4 reporting - some funding may be available if Pennsylvania is awarded a SIM grant in round 2
- Cost to develop a website

TIMELINE FOR IMPLEMENTATION:

Timeframe	Activity
Fall 2014	Pennsylvania receives notification of round 2 SIM grant awards.
Fall 2014	DPW determines fiscal and operational impact of adding Telehealth/tele monitoring to HCBS waivers.
Fall 2014	Departments prepare FY 2015/2016 budget proposals.
December 31, 2014	Long Term Care Commission report provided to Governor Corbett.
January 2015	State begins work on HIE/EHR activities.
February 2015	FY 2015/2016 Governor's budget proposal includes identified LTCC initiatives.
Spring 2015	DPW begins modifications to add Telehealth/tele monitoring to HCBS waiver applications in anticipation of budget approval.
July 2015	FY 2015/2016 budget signed into law, which includes necessary funding for HCBS waiver expenditures and other costs and establishes PHC4 reporting requirement for LTCSS providers.
Spring 2015	State begins educating LTCSS providers on HIE/EHR.
Summer 2015 – Winter 2016	HCBS waiver modifications submitted to and approved by CMS.
Summer 2016	LTCSS providers begin participating in HIE/EHR initiative.
Summer 2017	LTCSS providers begin submitting data to PHC4.
January 2018	Initial LTCSS report available and results posted on LTCSS website.

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NOTES: This recommendation requires support from the Department of Health and Pennsylvania Health Care Cost Containment Council. These entities should be consulted for their input.

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