

**New Mexico Telehealth Commission**  
**Thursday, November 21, 2005**  
**TVI Workforce Development Center, Albuquerque, NM**  
**Meeting Minutes**

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**Meeting called to order at 9:14 a.m.**

**Roll call/quorum**

Present: Commissioners: Steve Adelsheim, Richard Lueker, Jane Breen Pierce , Tony Davis, Kathleen Manygoats, Dale Alverson, Dwayne Jordan, Terry Maness, Tomas Torres, Mark Duran, Craig Wingate, Danice Picraux, Edward Lopez, Robert Mayer, Lowell Gordon (in attendance for Pam Hyde), Stephen Easley, Ferdi Serim, Jeannette Velarde.

**Absent:** Commissioners: Paul Ehrlich, Charles Ferrell, Patricio Larragoite, John Tiernan, Frank Pullara, Lynne Anker-Unnever, Danny Sandoval.

**Staff Attendance:**

Dorothy Danfelser  
Deb Gallegos  
Karen Gonzales  
Teresa Henke  
Camille Maes

**Audience Attendance:**

Matt Bailey  
Phyllis Schubert  
Jeff Blair  
Maggie Gunter  
Crawford Spooner  
Debra Hall, MD  
Anna Sandoval-Vigil  
Diane Fields  
Patrick Chavez  
Arturo Gonzales  
Diane Fields  
Al Sandoval  
Terry Boulanger  
Steven Kanig  
Dan Jaco  
Marvin Martinez

**I. Welcome/Roll Call/Audience Introductions**

Chairman Duran welcomed the Telehealth Commission and members of the audience to the fifth meeting of the NM Telehealth Commission. Members of the audience and staff were invited to introduce themselves and the organization that they represent. The major objective of this meeting is to discuss legislative recommendations.

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**II. Approval of October Minutes**

The minutes from the November 1<sup>st</sup> Telehealth Commission meeting were reviewed and approved by the Telehealth Commission with one change: Craig Wingate attended the ITC with Mark Duran, not Dr. Easley.

**III. Chairman's Report/Explanation of the Agenda**

Chairman Duran reported that he has met with the HHS Cabinet Secretaries. The Telehealth Commission is not a policy maker although the Secretaries are in agreement that the Commission can recommend certain goals and objectives and guidelines. The Telehealth Commission has established itself as a hardworking entity that is doing the best for the State of NM. The Commission will take a break until January and then will work on the recommended Guidelines for Legislation. Today's agenda reflects new proposals for the legislative language, a review of existing proposals, and a proposal blending some of the major components.

The chairman introduced the legislative proposal agenda section by commenting that the consortium of groups organizing as a RHIO was being allowed to make a bold and aggressive presentation to the Telehealth Commission at the invitation and direction of the chairman. The chairman asked the Commission to give it full consideration and thanked the Commission for their patience as stakeholders continue to be reached out to by the Commission to accomplish a proposal that contained health information exchange elements as well as telehealth components to arrive at a comprehensive legislative proposal.

**IV. Legislative Program Proposal Presentations-**

- a.** Consortium of Groups organizing a RHIO, Presentation by Commissioner Alverson. A big problem in New Mexico is a lack of readily available electronic health information within and between health systems. Patient information, drug reactions, radiology and many other services are duplicated. There are standards that have been established that New Mexico can use. Proposed Solution-NM RHIO Grande proposes to create an integrated health information infrastructure, which combines electronic health record systems, health information exchange networks and Telehealth networks. With RHIO it is possible to seamlessly have a patient's records with any physician. There will be access to hospitals, clinics and medical records. He gave examples on how these records would be readily available.
- B.** NMTHC Program Subcommittee Presentation by Commissioner Adelsheim Child and Adolescent Pediatric Telehealth Network (CAPTN). CAPTN will provide children, adolescents, and their families in rural areas with crucial access to limited health resources via a continuum of telehealth structure and services. Goals include outreach, training, and education. The infrastructure will consist of rural services hubs, clinical service hubs, and central support capacity to coordinate linkage of rural service hubs with clinical service hubs to ensure access to community – prioritized care.
- C.** Other Legislative Proposal Presentation: Presentation by Commissioner Wingate Telehealth in NM: A blended proposal for your consideration

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Commissioner Wingate presented a proposal that consolidated the best ideas from the other proposals in three areas: Program development, Technology development and Organizational development.

Program Development

He proposed the creation of “living laboratories” from the four existing programs which address some of NM’s highest health priorities: SBIRT, ECHO, New Heart, and REACH. These laboratories will help develop a clear understanding of how to build the specialty hub. Chosen programs must commit to working closely with the Telehealth Office of Planning and Accountability. These would lead to the formation of specialty hubs, which include the four existing telehealth programs, and the development of the CAPTN program.

The specialty hubs make up the core of an integrated model in which four main service components are developed and integrated: Clinical Consult, Case Conference, Outreach, Training and Education, and Electronic Medical Records/Health Information Exchange. The specialty hubs would eventually support numerous rural facilities. Rural facilities would be considered in a multi level framework in which the levels determine the approach. Initial development will focus on geographically diverse rural health clinics SBHC, and tribal health centers.

Goals for the clinical programs include:

- ✓ Maintain clear focus on NM highest health priorities
- ✓ Realize all programmatic components and core values from CAPTN proposal
- ✓ Support and leverage NM Telehealth innovators whenever appropriate

Technology Development

Telehealth site/support funds will be at different levels depending on equipment needs, requirements, and capabilities. Electronic Medical Records/Health Information Exchange funds will go to planning, network design, architecture, and pilot implementations/rollouts.

Organizational Development

The Telehealth Services Coordination Center will provide:

- ✓ Provider outreach and recruitment
- ✓ Training and user education
- ✓ Network and scheduling efficiency
- ✓ Coordination of technical delivery

The Office of Planning and Accountability will be a state office and will:

- ✓ Develop assumptions and projections
- ✓ Identify and mitigate obstacles to success
- ✓ Data acquisition, audit, analysis and reporting
- ✓ Development and reporting of Cost/Benefit analysis
- ✓ Growth planning, strategies and tactics for success
- ✓ Development of Business Cases/Business plans in pursuit of other funding

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- ✓ Development of templated tools for planning, analysis and reporting by specialty hubs, rural facilities, state government.

Chairman Duran asked Commissioner Easley to re-explain the legislative proposal from the Standards Committee that passed at the previous Telehealth Commission meeting. It is a 4-page request for funding for development of architecture and an implementation plan for a health information network in New Mexico.

**V. Legislative Program Collaborative cross-talk discussion**

The Commission members identified similarities and differences in the proposals. The similarities and differences are summarized in an addendum to the minutes, attached.

After discussion on the different proposals, Chairman Duran suggested, under the auspices of a bold proposal to Governor, the Telehealth Commission advance all of the components heard today with the associated dollar amounts, minus redundancies and capital.

- RHIO
- CAPTN
- The parts of the Standards Committee proposal that are not already incorporated
- The parts of the blended proposal that are not already incorporated

*Commissioner Jordan made the motion to accept, and Commissioner Alverson seconded the motion.*

**Break for lunch. Return at 1:15**

Commissioner Duran suggested discussing dollar amounts before getting into a discussion of which legislative proposal to submit. Waiting to put forth proposals has forced partnering entities to move to a place where they are able to generate proposals. The Commission is only talking about Year One proposals. The Commission continued to discuss the proposals and dollar amounts.

RHIO	\$9.85M
CAPTN	\$4.0M
Standards	\$500,000
Advancement of current models	\$2.0M
Office of Accountability	\$600,000
Rural Outreach	\$200,000
Total	\$17.15M minus capital outlay

Chairman Duran explained the question in front of the commission is an advancement of proposals with dollar amounts as the Telehealth Commission agenda for the 2006 Legislative sessions. A “Yes” vote means the proposal will be advanced. Voting no could mean any number of things; including piecing together blended proposals, etc.

Commissioner Serim made a motion to call question. The motion passed unanimously.

Chairman Duran entertained a motion to advance the aggregate that includes all of programs discussed.

**Motion fails 6 in favor to 11 opposed**

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The Commission then focused on the challenge of creating a proposal to be submitted that is agreeable to the majority. Much discussion ensued with many ideas proposed. Chairman Duran named an ad hoc subcommittee to create the proposal in the coming week. Commissioners Wingate and Easley (co-chairs), Adelsheim, Torres, Maness, and Alverson will make up the legislative program subcommittee. The chairman asked Jeff Blair to serve as an advisory member to the legislative program subcommittee. Chairman Duran asked for a motion to table crafting a blended proposal.

**The Commission unanimously passed motion to table motion on crafting blended proposal.**

**Legislative capital outlay proposal presentation**

Chairman Duran suggested \$5-7M for capital outlay to fund telehealth sites in New Mexico, to include equipment and infrastructure, where money would be appropriated either through a fund/grant process or a process identified by the Governor's office. He will create a paragraph on the capital outlay subject and email to Commissioners.

Meeting adjourned at 3:45pm