

## **Rural Health Services Task Force**

### **Meeting Notes**

June 25, 2019

#### **Members Present:**

Ena Backus, Director of Health Care Reform, Agency of Human Services  
Robin Lunge, J.D., MHCDS, Board Member, GMCB  
John Olson, Chief, State Office of Rural Health & Primary Care, VT Dept. of Health  
Michael Fisher, Chief Health Care Advocate, Office of the Health Care Advocate  
Steve Gordon, President & CEO, Brattleboro Memorial Hospital  
Melissa Volansky, MD, Stowe Family Practice, Executive Medical Director, CHSLV  
Jessa Barnard, Executive Director, Vermont Medical Society (member to be designated)  
Tony Morgan, Executive Director, The Rutland Free Clinic  
Dillon Burns, Director, Mental Health Services of Vermont Care Partners  
Kate Burkholder, LADC, Treatment Associates, Inc  
Dr. Rick Barnett, Licensed Psychologist-Doctorate, Licensed Alcohol/Drug Counselor  
Laura Pelosi, Vermont Health Care Association

By Phone: Dan Bennet, President and CEO, Gifford Medical Center

Absent: Vermont home health agencies Representative

Public Present: Rep. Lucy Rogers; Spencer Weppeler, OneCare VT; Jeff Tieman, VAHHS; Howard Weiss-Tisman, VPR; Rebecca Lewandoski, Downs Rachlin Martin PLLC

#### **I. Task Force Organization**

- Appointed Robin Lunge Chair of Rural Health Services Task Force.
- Meeting Schedule
  - June – Sept: monthly
  - October – end of year: bi-weekly
  - Schedule for the calendar year so that members can schedule accordingly
- Meetings Location
  - Extend beyond Montpelier and include public meetings
  - Teleconferencing available for members who cannot attend in person
  - Public meetings may include a subset of Task Force membership, if travel is difficult
- Meeting Format
  - Each meeting to address specific topic and led by designated member of Task Force
  - Start each meeting with summary of background materials followed by group discussion. Members come prepared, but key information to be shared at the meeting
  - Public Comment at each meeting
  - Notes taken at each meeting and circulated to the Task Force
  - Every member encouraged to talk and share their perspective
- Guiding Principles
  - The Task Force will:

- recognize there are several challenges facing rural health care, not all of which can be addressed in this process. The focus should be placed on the areas that can produce results and that members identify as common/high impact.
- leverage work that has already been done and coordinate with relevant work in progress.
- consider diverse perspectives of rural health care, including hospitals, providers and patients.
- Recommendations should be clear and actionable, including both immediate and long-term proposals.

## **II. Priority Areas**

The Task Force discussed several priority areas, including:

- Workforce (primary care, nursing)
- Telehealth
- Funding (reimbursement rates)
- Integration/Care Coordination
- Mental Health/Substance Abuse
- Social Determinants/Homelessness
- All Payer Model and health care reform

## **III. Next Steps**

- Robin will facilitate an email to members soliciting additional information related to priorities, themes, necessary data and best practices related to each topic.
- Abigail will send meeting requests for the remainder of the calendar, taking into consideration requested scheduling preferences.