

**POLICY METADATA**

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| 1. Policy Type: Division Wide          | 5. Last revised Date: 7/1/2016        |
| 2. Policy Status: Effective 1/1/2017   | 6. Revision Approval Date: 12/15/2016 |
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| 4. Initial Effective Date: 3/5/2013    |                                       |

**POLICY INTENT/RATIONALE**

This policy defines Medicaid coverage criteria for telehealth services.

**POLICY**

Idaho Medicaid, in accordance with IDAPA rule, reimburses for specific services via telehealth. A link of services covered by Idaho Medicaid via telehealth can be found below under References.

**BACKGROUND**

Idaho Administrative Code allows Medicaid to cover specific services delivered via telehealth technology, which will help ensure that all participants receive the best possible care regardless of geographic location.

**Mental Health**

- Since August 2003, Idaho Medicaid has reimbursed physicians in mental health clinics for two services via telehealth technology – pharmacological management and psychotherapy (20-30 minutes).
- Effective January of 2008, the Department allowed physicians to provide psychiatric telehealth services in sites other than mental health clinics. The 2008 policy also added the psychiatric diagnostic interview as an allowable service for telehealth.
- In May 2009, IDAPA rules were amended to include requirements that only physicians could bill for psychiatric telehealth services.
- In January 2013, the American Medical Association changed the psychiatric CPT procedure codes and descriptions so the procedure codes allowed for telehealth changed.
- Effective September 1, 2013, Idaho Administrative Rules (IDAPA) for behavioral health services were amended. The change allowed for the provision of behavioral health services delivered via telehealth methods under a managed care contract.
- Effective July 1, 2016, in IDAPA 16.03.09 (section 855.10) rules for school-based Community Based Rehabilitation Services (CBRS) were promulgated to allow CBRS supervision to be delivered via telehealth in the educational environment. CBRS supervision is included in the CBRS reimbursement rate. While CBRS supervision may be delivered via telehealth, it is not separately reimbursable.

**Developmental Disabilities**

The Bureau of Developmental Disability Services (BDDS) implemented children’s system Redesign in July of 2011. The focus was to ensure quality by enhancing requirements for provider qualifications. To ensure that the requirement for higher qualified providers would not be a barrier to services, Idaho Medicaid promulgated

IDAPA rules to allow reimbursement for two services delivered via telehealth technology – therapeutic consultation and crisis intervention.

### **Primary Care**

Effective February 1, 2016 in IDAPA 16.03.09 (subsections 210.09, 500.02 and 502.08) rules were promulgated to allow primary care services to be delivered via telehealth. Providers of telehealth services must be licensed by the Idaho Board of Medicine.

### **Therapy Services**

Effective July 1, 2016, rules were promulgated in IDAPA 16.03.09 (section 732.04.f) to allow licensed occupational and physical therapists, and speech language pathologists to provide certain services through telehealth. To ensure quality and program integrity, additional guidance for telehealth therapy services is published in the Idaho Medicaid Provider Handbooks.

### **Interpretation Services & Technical Specifications**

Effective January 1, 2017, Idaho Medicaid's Telehealth Policy was updated to include interpretive services and to clarify the technical specifications for telehealth service delivery. These updates were made to increase access to Medicaid services.

## **GENERAL REQUIREMENTS**

- Telehealth services must provide services equal in quality to services provided in-person.
- All Medicaid rules, regulations and policies apply to services delivered via telehealth unless specifically detailed within this policy.
- All Idaho licensure board rules apply. Nothing in this policy shall override any licensure requirements.
- Telehealth services and equipment must comply with HIPAA privacy requirements, and the following standards must be met.

## **TECHNICAL REQUIREMENTS**

- Video must be provided in real-time with full motion video and audio that delivers high-quality video images that do not produce lags, choppy, blurry, or grainy images, or irregular pauses in communication.
- Transmission of voices must be clear and audible.
- Telehealth services that cannot be provided as effectively as in person services, due to technical software bandwidth or equipment limitations are not covered by Idaho Medicaid.

## **PROVIDER REQUIREMENTS**

- Performing providers at the distant site, who regularly provide telehealth services to Idaho Medicaid participants are required to maintain current Idaho licensure, as applicable, follow all applicable licensure rules and maintain standards of care within the identified scope of practice.
- **Exception:** Providers of therapeutic consultation and crisis intervention for children's developmental disabilities services must meet staff qualifications in IDAPA 16.03.010.685.05 and 06.
- Performing providers at the distant site must disclose to the patient the performing provider's identity, their current location, telephone number and Idaho license number, as applicable.
- Telehealth providers must have in place a systematic quality assurance and improvement program

relative to telehealth services that is documented, implemented and monitored.

- Providers are to develop and document evaluation processes and participant outcomes.
- Advanced Practice Registered Nurses, Physician Assistants (PA) and Certified Nurse Midwives (CNM) who are enrolled as Healthy Connections primary care providers will be reimbursed for telehealth services in accordance with the General Provider and Participant handbook.
- Physical therapy, occupational therapy, and speech therapy provided using telehealth may only be performed by a therapist who is licensed by the Idaho Board of Occupational Licensing

## DOCUMENTATION REQUIREMENTS

- The individual treatment record must include written documentation of the services provided, participant consent, and mode of delivery. The documentation must be of the same quality as is originated during an in-person visit.
- The mode of communication (i.e., telehealth) must be noted in the records.
- If an operator who is not an employee of the involved agency is needed to run the teleconferencing equipment or is present during the conference or consultation, that individual must sign a confidentiality agreement.
- Before an initial visit using telehealth, the practitioner who delivers the service to a participant shall ensure that any written information is provided to the participant in a form and manner which the participant can understand using reasonable accommodations when necessary.
- Healthy Connections referral policy applies to services provided via telehealth. See the General Provider and Participant section of the Idaho Medicaid Provider Handbook for details.
- All documentation must be made available upon request of the Department.

## REIMBURSEMENT

- No reimbursement will be made for the use of equipment at either the originating or distant sites.
- Reimbursement is not available for a telephone conversation, electronic mail message (e-mail), text messages or facsimile transmission (fax) between a physician and a participant.
- Only one eligible provider may be reimbursed for the same service per participant per date of service.
- Services that may have been interrupted and/or terminated early due to equipment problems will not be reimbursed.

## PATIENT RIGHTS

Appropriate consents must be obtained from the participant after disclosures regarding the delivery models, provider qualifications, treatment methods, or limitations and telehealth technologies. If the participant (or legal guardian) indicates at any point that he wants to stop using the technology, the service should cease immediately and an alternative (in-person) appointment should be scheduled. The partial, interrupted service is not reimbursable.

## APPLICABLE SERVICES

1. **Physician/Non-physician Practitioner Services:** Telehealth may be used in the provision of the following services when provided by a physician or by a non-physician practitioner.
  - Primary Care Services
  - Specialty Services

- Psychotherapy with evaluation and management
  - Psychiatric diagnostic interview
  - Pharmacological management
2. **Therapeutic Consultation and Crisis Intervention:** Telehealth may be used to provide Therapeutic Consultation and Crisis Intervention for children with developmental disabilities. The provider can be a Developmental Disabilities Agency, an independent Medicaid provider under agreement with the Department, or under the Infant Toddler Program. The performing provider must have a Doctoral or Master's degree in psychology, education, applied behavioral analysis, or in a related discipline with one thousand five hundred (1500) hours of relevant coursework or training, or both, in principles of child development, learning theory, positive behavior support techniques, dual diagnosis, or behavior analysis (may be included as part of degree program), and two years relevant experience in designing and implementing comprehensive behavioral therapies for children with DD and challenging behavior.
  3. **Therapy Services:** Telehealth may be used to provide speech therapy services provided by a licensed speech language pathologist as well as therapeutic procedures and activities provided by licensed occupational therapists and licensed physical therapists. Evaluations must be performed as an in-person visit to the participant and is not covered through telehealth.
  4. **CBRS Supervision in the Educational Environment:** Telehealth may be used to provide CBRS supervision provided in the educational setting. The supervisor must meet the qualifications identified in IDAPA 16.03.09.855.10.
  5. **Interpretive Services:** Telehealth may be used to provide interpretive services in conjunction with a reimbursable Medicaid service and in accordance with IDAPA 16.03.09, IDAPA 16.03.10, the Idaho Medicaid Provider Handbooks and the Idaho Medicaid Interpretive Services Policy.

## CONDITIONS TO ALLOW PAYMENT, PEND OR DENY CLAIMS

1. **Payment for telehealth services is limited to the specific procedure codes (HCPCS or CPT) in the list of telehealth codes found here:**  
<http://www.healthandwelfare.idaho.gov/Providers/MedicaidProviders/MedicaidFeeSchedule/tabid/268/Default.aspx>
  - Claims must include a HCPCS modifier GT appended to the procedure code. (GT: Via interactive audio and video telecommunications systems)
  - FQHC, RHC or IHS providers must include the GT modifier with the CPT codes reported with their encounter. The GT modifier should not be reported in conjunction with the encounter code (T1015).
2. **Conditions that would be automatically denied or denied after review:**
  - Telehealth services provided and billed without a GT modifier.
  - Only one eligible provider may be reimbursed for the same service per participant per date of service
  - Telehealth services billed by more than one eligible provider per participant per date of service for a service provided, unless it is medically necessary for the participation of more than one provider on that day.
  - Origination or distant site charges submitted.
  - Service interrupted and /or terminated early.
  - Services billed that are not within this policy are subject to recoupment, sanctions or both, in accordance with IDAPA 16.05.07.
  - Therapy evaluations performed using telehealth.

- Interpretation services performed in conjunction with a health care related service not reimbursed by Idaho Medicaid.

## DEFINITIONS

1. **Distant site:** the site at which a provider delivering telehealth services is located at the time the service is provided. Reimbursement will not be available for the use of equipment.
2. **HIPAA:** Health Insurance Portability and Accountability Act. All existing confidentiality requirements and protections that apply to written medical records shall apply to services delivered by telecommunications, including the actual transmission of any service, any recordings made during the time of transmission and any other electronic records.
3. **Originating site:** An originating site is the location of an eligible Medicaid participant at the time the service furnished via a telecommunications system occurs.
4. **Qualified Healthcare Provider:** A qualified healthcare provider in terms of this telehealth policy is one who is enrolled with Idaho Medicaid and who is qualified to provide one of the telehealth services covered by Idaho Medicaid.
5. **Synchronous Interaction:** Real-time communication through interactive technology that enables a provider and a patient at two locations separated by distance to interact simultaneously through two-way video and audio transmission.
6. **Telehealth:** Health care services delivered by a provider to a participant through the use of electronic communications, information technology, synchronous interaction between a provider at a distant site and a patient at an originating site.

## REFERENCES

### *Federal Regulations:*

- 42 CFR 410.78 – Telehealth Services
- 42 CFR 414.65 – Payment for Telehealth Services
- 45 CFR Section 92 – Non-Discrimination Regulations

### *Medicare Manual:*

- Chapter 12, Medicare Claims Processing Manual (Pub. 100-4)  
<http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/index.html>
- Chapter 15, Section 270 – Medicare Benefit Manual - Telehealth Services  
<http://www.cms.gov/Medicare/Medicare-General-Information/Telehealth/index.html>

### *Idaho Medicaid Physician Services Rules*

- IDAPA 16.03.09.500: <http://adminrules.idaho.gov/rules/current/16/0309.pdf>
- IDAPA 16.03.09.502: <http://adminrules.idaho.gov/rules/current/16/0309.pdf>

### *Children's Developmental Disability Services Rules:*

- IDAPA 16.03.10.683.05: <http://adminrules.idaho.gov/rules/current/16/0310.pdf>  
Telehealth resources may be used by a therapeutic consultant to provide consultation as appropriate and necessary.
- IDAPA 16.03.10.683.06: <http://adminrules.idaho.gov/rules/current/16/0310.pdf> Telehealth resources

may be used by a crisis interventionist to provide consultation in a crisis situation.

**Therapy Services Rules:**

- IDAPA 16.03.09.732.04.f: <http://adminrules.idaho.gov/rules/current/16/0309.pdf>

**School Based Services:**

- IDAPA 16.03.09.855.10: <http://adminrules.idaho.gov/rules/current/16/0309.pdf>

**Information Release:**

- MA 16-20: effective January 1, 2017
- [MA16-07: effective July 1, 2016](#)
- [MA 15-11: effective December 31, 2015](#)

**Idaho Medicaid Provider Handbooks:**

- <https://www.idmedicaid.com>

**Federal Medicaid Website:**

- [www.Medicaid.gov](http://www.Medicaid.gov)

**Other Resources:**

- Idaho Telehealth Access Act: Idaho Code, Title 54, Chapter 57:  
<http://legislature.idaho.gov/idstat/Title54/T54CH57.htm>
- American Telemedicine Association: <http://www.americantelemed.org/>
- Information about Other States:  
[www.ctel.org/surveyexpertise/reimbursement/medicaid-reimbursement](http://www.ctel.org/surveyexpertise/reimbursement/medicaid-reimbursement)