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## **CCHP Releases Fall 2017 Edition of 50 State Telehealth Laws and Reimbursement Policies Report**

**Sacramento, CA** – Sacramento, CA – An updated version of the fifth edition of the Center for Connected Health Policy's (CCHP) [State Telehealth Laws and Reimbursement Policies Report](#) will be available tomorrow, November 7, 2017. CCHP's report is the most comprehensive report on state telehealth laws, regulations and Medicaid policies available and contains the most current and up to date information for all 50 states and the District of Columbia. The full report will be available at no cost to the public on CCHP's website, which also includes a state interactive map to more easily access this information. CCHP also will make available an updated easy to read two-page [fact sheet](#) and [infographic](#) summarizing the report's key findings.

This round of updates revealed that while each state's laws, regulations and Medicaid program policies continue to vary, some progress has been made, with the addition of two state Medicaid programs providing reimbursement for store-and-forward. Some states are veering away from standard definitions, such as Maryland which now allows reimbursement of asynchronous dermatology, ophthalmology and radiology, but excludes these specialties from the definition of store and forward. Other states have passed wide ranging laws requiring telehealth reimbursement in their Medicaid program in recent years, but Medicaid programs have yet to respond with official regulation or documentation in their provider manuals indicating they are actually reimbursing services via telehealth. Most states have also moved away from requiring the patient be located in a rural area, and some have also relaxed requirements on originating sites, with a few states allowing the patient's home and/or school to serve as an originating site. Finally, states are beginning to move away from the GT modifier and are utilizing either the newly adopted CMS place of service code 02 or the 95 modifier adopted by the American Medical Association, or a combination of two or more.

### **SOME OF THE OTHER NOTABLE FINDINGS FROM THE REPORT INCLUDE:**

#### ***Medicaid Reimbursement:***

- 48 states and Washington DC provide reimbursement for some form of live video in Medicaid fee-for-service.
- 15 states reimburse for store and forward delivered services. States that only provide reimbursement for teleradiology were not counted in this number.
- 21 states reimburse for remote patient monitoring (RPM).
- 9 states reimburse for all three.

- 32 states provide a transmission and/or facility fee.
- 6 states have geographic/rural restrictions.
- 22 states and DC limit reimbursement to a specific list of facilities.

***Private Payer Reimbursement:***

- 36 states and DC have laws that govern private payer reimbursement of telehealth. This number has increased by two since April 2017, although additional states have made modifications to their private payer law. Some laws require reimbursement be equal to in-person coverage, however not all laws mandate reimbursement.

[The Center for Connected Health Policy](#) (CCHP) is the federally designated National Telehealth Policy Resource Center. CCHP seeks to advance state and national telehealth policy to promote improvements in health systems and greater health equity. In its work as the federally designated National Telehealth Policy Resource Center, CCHP provides technical assistance to twelve regional telehealth resource centers nationwide. This project is made possible by Grant #G22RH30365 from the Office of the Advancement of Telehealth, Health Resources and Services Administration, Department of Health and Human Services. CCHP was created in 2008 by the [California HealthCare Foundation](#), who remains its lead funder. CCHP is a program of the [Public Health Institute](#).

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