TELEHEALTH 201: Medicaid Telehealth Policy



Center for Connected Health Policy THE NATIONAL TELEHEALTH POLICY RESOURCE CENTER

CENTER FOR CONNECTED HEALTH POLICY (CCHP)

Mei Wa Kwong, JD, *Executive Director, CCHP*

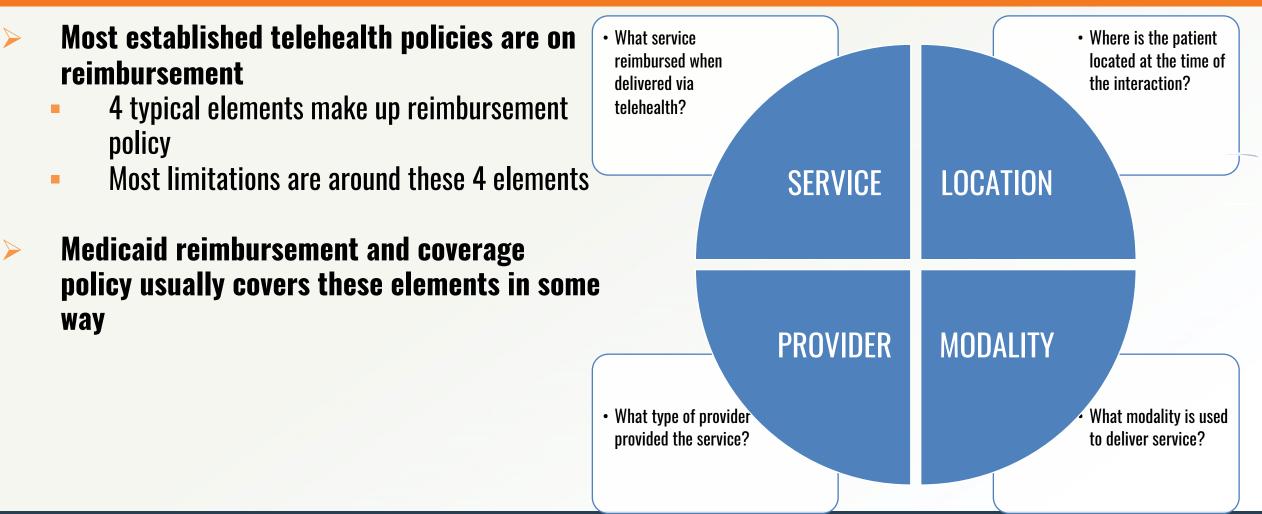
is a non-profit, non-partisan organization that seeks to advance state and national telehealth policy to promote improvements in health systems and greater health equity.

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ELEMENTS OF TELEHEALTH REIMBURSEMENT POLICY





MEDICAID

Medicaid is provides health coverage for low-income adults, children, pregnant women, elderly and people with disabilities

- Administered by the states, there are federal requirements
- It is funded by both federal AND state funds

Medicaid Telehealth Policy

- States have great leeway in how they formulate their Medicaid telehealth policies
- Medicaid reimbursement for telehealth delivered services "must satisfy federal requirements of efficiency, economy and quality of care."
- States are not required to submit a state plan amendment (SPA) if they decide to reimburse for telehealth the same way as they do for in-person
- CMS Toolkit for Medicaid and CHIP
- Medicaid.gov page on telehealth and state Medicaid



MEDICAID REIMBURSEMENT BY SERVICE MODALITY (Fee-for-Service)







As of September 2021



AUDIO-ONLY MEDICAID POLICY (10/1/2021)



Look up policy by:

Topic 🗸

Federal State 🗸



Telephone Medicaid Reimbursement

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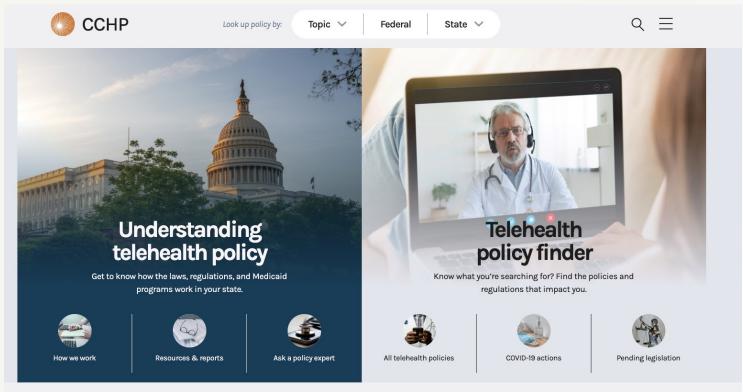
Eighteen state Medicaid programs now allow for telephone reimbursement in some ways. Sometimes they only reimburse specific specialties such as mental health, or for specific services such as case management. Medicare and three out of the fifteen states are counted as reimbursing for telephone as a result of reimbursement for a CTBS code that allows for audio-only interaction. Map based on research conducted between June 2021 and September 2021.

- No reimbursement for telephone
- Reimbursement for telephone
- Telephone only reimbursed through CTBS



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Thank You!

www.cchpca.org info@cchpca.org

