

# Alaska



## At A Glance

### MEDICAID REIMBURSEMENT

- Live Video: Yes
- Store-and-Forward: Yes
- Remote Patient Monitoring: Yes (Unclear if Medicaid implementing policy)
- Audio Only: Yes

### PRIVATE PAYER LAW

- Law Exists: Yes
- Payment Parity: No

### PROFESSIONAL REQUIREMENTS

- Licensure Compacts: None
- Consent Requirements: Yes

### STATE RESOURCES

1. Medicaid Program: Alaska Medicaid
2. Administrator: Alaska Dept. of Health and Social Services, Division of Public Assistance
3. Regional Telehealth Resource Center: Northwest Regional Telehealth Resource Center

# Private Payer

## DEFINITIONS

*Last updated 06/19/2024*

“Telehealth” means the practice of health care delivery, evaluation, diagnosis, consultation, or treatment, using the transfer of health care data through audio, visual, or data communications, performed over two or more locations between providers who are physically separated from the recipient or from each other or between a provider and a recipient who are physically separated from each other.

SOURCE: AK Statute Sec. 47.05.270(e), (Accessed Jun. 2024).

## REQUIREMENTS

*Last updated 06/19/2024*

A health care insurer that offers, issues for delivery, or renews in the state a health care insurance plan in the group or individual market shall provide coverage for benefits provided through telehealth by a health care provider licensed in this state and may not require that prior in-person contact occur between a health care provider and a patient before payment is made for covered services.

SOURCE: AK Statute, Sec. 21.42.422 (Accessed Jun. 2024).

## PARITY

*Last updated 06/19/2024*

### SERVICE PARITY

A health care insurer that offers, issues for delivery, or renews in the state a health care insurance plan in the group or individual market shall provide coverage for benefits provided through telehealth by a health care provider licensed in this state and may not require that prior in-person contact occur between a health care provider and a patient before payment is made for covered services.

SOURCE: AK Statute, Sec. 21.42.422 (Accessed Jun. 2024).

## PAYMENT PARITY

No Reference Found

# Medicaid

## OVERVIEW

*Last updated 06/19/2024*

Alaska reimburses for Live Video, Store & Forward & audio-only. They also reimburse for patient-initiated services in some circumstances. It is unclear if they reimburse for remote patient monitoring.

In Sept. 2023, Medicaid updated their telehealth regulations to comply with statute. They are currently working on telehealth guidance and reviewing their provider manuals. In the meantime, their Telehealth Coverage and Reimbursement FAQs is meant to answer the most common questions.

## DEFINITIONS

*Last updated 06/19/2024*

“Telehealth” means the practice of health care delivery, evaluation, diagnosis, consultation, or treatment using the transfer of medical data, audio, visual, or data communications at two or more locations between a provider and recipient who are physically separated from each other.

SOURCE: AK Admin Code 7 AAC 110.639, (Accessed Jun. 2024).

“Telehealth” means the practice of health care delivery, evaluation, diagnosis, consultation, or treatment, using the transfer of health care data through audio, visual, or data communications, performed over two or more locations between providers who are physically separated from the recipient or from each other or between a provider and a recipient who are physically separated from each other.

SOURCE: AK Statute Sec. 47.05.270(e), (Accessed Jun. 2024).

“Alaska Medicaid will pay for telemedicine services delivered in the following manner:

- Interactive method: Provider and patient interact in ‘real-time’ using video/camera and/or dedicated audio conference equipment.

- Store-and-forward method: The provider sends digital images, sounds, or previously recorded video to a consulting provider at a different location. The consulting provider reviews the information and reports back his or her analysis.
- Self-monitoring method: The patient is monitored in his or her home via a telemedicine application, with the provider indirectly involved from another location.”

Note: Manual is under review.

SOURCE: State of AK Dept. of Health and Social Svcs., Alaska Medical Assistance Provider Billing Manuals for Physician Services, p. 31 (5/2013), (Accessed Jun. 2024).

Telemedicine means the practice of health care delivery, evaluation, diagnosis, consultation, or treatment, using the transfer of medical data through audio, video [visual], or data communications that are engaged in over two or more locations between providers who are physically separated from the patient or from each other.

SOURCE: AK Admin. Code, Title 7, 12.449; 12.490; 86.090, (Accessed Jun. 2024).

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## LIVE VIDEO

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*Last updated 06/19/2024*

### POLICY

The department shall pay for all services covered by the medical assistance program provided through telehealth in the same manner as if the services had been provided in person (see Eligible Services Section below for eligible services).

The department shall adopt regulations for services provided by telehealth, including setting rates of payment. Regulations calculating the rate of payment for a rural health clinic or federally qualified health center must treat services provided through telehealth in the same manner as if the services had been provided in person, including calculations based on the rural health clinic's or federally qualified health center's reasonable costs or on the number of visits for recipients provided services, and must define “visit” to include a visit provided by telehealth. The department may not decrease the rate of payment for a telehealth service based on the location of the person providing the service, the location of the eligible recipient of the service, the communication method used, or whether the service was provided asynchronously or synchronously. The department may exclude or limit coverage or reimbursement for a service provided by telehealth, or limit the telehealth modes that may be used for a particular service, only if the department

1. specifically excludes or limits the service from telehealth coverage or reimbursement by regulations adopted under this subsection;
2. determines, based on substantial medical evidence, that the service cannot be safely provided using telehealth or using the specified mode; or
3. determines that providing the service using the specified mode would violate federal law or render the service ineligible for federal financial participation under applicable federal law.

All services delivered through telehealth under this section must comply with the Health Insurance Portability and Accountability Act of 1996 (P.L. 104-191).

SOURCE: AK Statute Sec. 47.07.069, (Accessed Jun. 2024).

Subject to the requirements of 7 AAC 110.620 – 7 AAC 110.639, the department will pay for a service delivered by means of one of the following telehealth modalities if the modality and use of the modality meet the requirements of P.L. 104 – 191 (Health Insurance Portability and Accountability Act of 1996 (HIPAA)):

- synchronous: live or interactive, through a real-time, interactive
  - two-way audio-video technology that includes, at a minimum, an operational camera, microphone, speaker or headphones, and capability to view video feed;
  - two-way audio-only technology that allows for oral communication between the provider and the recipient;

SOURCE: AK Admin. Code, Title 7, 110.625. (Accessed Jun. 2023).

Alaska Medicaid will pay for a covered medical service furnished through telemedicine application if the service is:

- Covered under traditional, non-telemedicine methods;
- Provided by a treating, consulting, presenting or referring provider;
- Appropriate for provision via telemedicine

Note: Manual is under review.

Source: State of AK Dept. of Health and Social Svcs, Alaska Medical Assistance Provider Billing Manuals for Physician, PA, ARNP Services (5/13), p. 31, (Accessed Jun. 2024).

On July 13th, 2023, the Department of Health (DOH) adopted revised regulations for Medicaid coverage and payment for healthcare services provided through telehealth. These regulations went into effect September 1st, 2023. The department is in process of amending current telehealth guidance and updating system rules to accommodate these changes. This document is intended to answer common questions regarding

Alaska Medicaid coverage and reimbursement of services provided through a telehealth modality as of September 1st, 2023.

## What are the covered modalities for telehealth services?

Synchronous through a real-time, interactive:

- Two-Way Audio-Video Technology: Includes, at minimum, an operational camera, microphone, speaker or headset, and capability to view video feed, or
- Two-Way Audio Only Technology: Includes an operational microphone and speaker or headphones.

Asynchronous:

- Store-and-Forward: The transfer between healthcare providers of recorded digital images, video, or sounds from one location to another.

Patient-Initiated Online Digital Services:

- Synchronous or asynchronous: Evaluation, assessment, and management services of an established patient through a secure platform such as an electronic record portal, secure electronic mail, or digital application.

SOURCE: Alaska Medicaid Frequently Asked Questions Coverage of Telehealth Modalities, Sept. 19, 2023), (Accessed Jun. 2024).

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## ELIGIBLE SERVICES/SPECIALTIES

Subject to the requirements of 7 AAC 110.620 – 7 AAC 110.639, the department will pay for a service delivered by means of a telehealth modality if the service

- Would be covered under 7 AAC 105 – 7 AAC 160 if delivered in person; and
- Is delivered in compliance with
  - The same requirements of 7 AAC 105 – 7 AAC 160, including prior authorization requirements and service limitations, as if the service was delivered in person; and
  - The requirements of AS 08.01, AS 08.68, AS 47.07, and 7 AAC 105 – 7 AAC 160, including the telehealth requirements and limitations of 7 AAC 110.620 – 7 AAC 110.639, as applicable to the service, the provider, and the mode of delivery.

SOURCE: AK Admin. Code, Title 7, 110.620. (Accessed Jun. 2024).

The department shall pay for all services covered by the medical assistance program provided through telehealth in the same manner as if the services had been provided in



person, including

1. behavioral health services;
2. services covered under home and community-based waivers;
3. services covered under state plan options under 42 U.S.C. 1396-1396p (Title XIX, Social Security Act);
4. services provided by a community health aide or a community health practitioner certified by the Community Health Aide Program Certification Board;
5. services provided by a behavioral health aide or behavioral health practitioner certified by the Community Health Aide Program Certification Board;
6. services provided by a dental health aide therapist certified by the Community Health Aide Program Certification Board;
7. services provided by a chemical dependency counselor certified by a certifying entity for behavioral health professionals in the state specified by the department in regulation;
8. services provided by a rural health clinic or a federally qualified health center;
9. services provided by an individual or entity that is required by statute or regulation to be licensed or certified by the department or that is eligible to receive payments, in whole or in part, from the department;
10. services provided through audio, visual, or data communications, alone or in any combination, or through communications over the Internet or by telephone, including a telephone that is not part of a dedicated audio conference system, electronic mail, text message, or two-way radio;
11. assessment, evaluation, consultation, planning, diagnosis, treatment, case management, and the prescription, dispensing, and administration of medications, including controlled substances; and
12. services covered under federal waivers or demonstrations other than home and community-based waivers.

The department shall adopt regulations for services provided by telehealth, including setting rates of payment. Regulations calculating the rate of payment for a rural health clinic or federally qualified health center must treat services provided through telehealth in the same manner as if the services had been provided in person, including calculations based on the rural health clinic's or federally qualified health center's reasonable costs or on the number of visits for recipients provided services, and must define "visit" to include a visit provided by telehealth. The department may not decrease the rate of payment for a telehealth service based on the location of the person providing the service, the location of the eligible recipient of the service, the communication

method used, or whether the service was provided asynchronously or synchronously. The department may exclude or limit coverage or reimbursement for a service provided by telehealth, or limit the telehealth modes that may be used for a particular service, only if the department

1. specifically excludes or limits the service from telehealth coverage or reimbursement by regulations adopted under this subsection;
2. determines, based on substantial medical evidence, that the service cannot be safely provided using telehealth or using the specified mode; or
3. determines that providing the service using the specified mode would violate federal law or render the service ineligible for federal financial participation under applicable federal law.

All services delivered through telehealth under this section must comply with the Health Insurance Portability and Accountability Act of 1996 (P.L 104-191).

SOURCE: AK Statute Sec. 47.07.069, (Accessed Jun. 2024).

See list of telehealth services allowed in Alaska Medicaid' temporary telehealth services fee schedule for FY 2024.

SOURCE: Alaska Medicaid, Telehealth Services: Temporary Fee Schedule, Effective 9/1/2023, (Accessed Jun. 2024).

Check behavioral health fee schedules and Section 1115 Medicaid Waiver Services Administrative Manuals for services allowed via telehealth.

SOURCE: Medicaid Provider Assistance Information, Division of Behavioral health, Fee Schedules [fee schedules listed at bottom of page], (Accessed Jun. 2024).

Eligible services:

- An initial visit
- One follow-up visit;
- A consultation to confirm a diagnosis;
- Diagnostic, therapeutic or interpretive service;
- A psychiatric or substance abuse assessments;
- Psychotherapy
- Pharmacological management services on an individual recipient basis.

Note: Manual is under review.



SOURCE: State of AK Dept. of Health and Social Svcs., Alaska Medical Assistance Provider Billing Manuals for Physician, ARNP, PA Services (5/13), p. 31, (Accessed Jun. 2024).

Dental services do not require the use of the telemedicine modifier.

Note: Manual is under review.

SOURCE: AK Dept. of Health and Social Svcs. Dental Services. Tribal Services Manual (1/3/17), pg. 97, (Accessed Jun. 2024).

For patient-initiated online digital service, whether synchronous or asynchronous, the following are not reimbursable:

- Nonevaluative or nonmanagement services including appointment scheduling and electronic communication of test results;
- Provider-initiated online digital service;
- Patient-initiated online digital service within the postoperative period of a completed procedure or within seven days of an in-person visit and related to the illness, injury, or other reason for that visit.

The department will not pay

- for the use, or any costs associated with the use, of technological equipment and systems associated with the delivery of a service by means of a telehealth modality;
- a provider for communication with that provider's supervising provider or communication with a provider who is acting in a supervisory capacity;
- a supervising provider or a provider who is acting in a supervisory capacity for communication with a supervisee or for review of a supervisee's work;
- a provider participating in a telehealth encounter whose sole purpose is to facilitate the telehealth encounter between the recipient and a rendering provider or a consulting provider;
- for a failed or unsuccessful telehealth connection or transmission;
- for the following services when provided by means of a telehealth modality:
  - chiropractic services;
  - dental services;
  - private-duty nursing services;
  - pharmacy dispensing services;
  - durable medical equipment and related services;
  - prosthetic and orthotic devices and related services;

- transportation services;
- accommodation services;
- personal care services;
- home health services;
- community First Choice services;
- home and community-based waiver services, except for
  - care coordination services under 7 AAC 130.240;
  - day habilitation services under 7 AAC 130.260;
  - employment services under 7 AAC 130.270; or
  - intensive active treatment services under 7 AAC 130.275;
- long term services and supports targeted case management services, except for case management services provided under 7 AAC 128.010(b)(2).

SOURCE: AK Admin. Code, Title 7, 110. 625 & 635 (Accessed Jun. 2024).

#### Alaska Medicaid will not pay for

- The use of telemedicine equipment and systems
- Services delivered by telephone when not part of a dedicated audio conference system
- Services delivered by facsimile
- The following services provided by telemedicine application:
  - Direct entry midwife
  - Durable medical equipment (DME)
  - End-stage renal disease
  - Home and community-based waiver
  - Personal care assistant
  - Pharmacy
  - Private duty nursing
  - Transportation and accommodation
  - Vision (includes visual care, dispensing, or optician services)

Note: Manual under review.

SOURCE: State of AK Dept. of Health and Social Svcs., Alaska Medical Assistance Provider Billing Manuals for Physician, ARNP and PA Services (5/13), pg. 31-32 (Jun. 2024).

The department will pay in accordance with 7 AAC 145.020 for a service delivered by means of a telehealth modality by a rendering provider or a consulting provider in accordance with 7 AAC 110.620 – 7 AAC 110.639 as set out under 7 AAC 145.020.

The department will pay a rendering provider or a consulting provider in the same manner as payment is made for the same service provided through in-person mode of delivery, not to exceed 100 percent of the rate established under 7 AAC 145.050.

SOURCE: AK Admin Code, Title 7, 145.270, (Accessed Jun. 2024).

The department will not pay a physician for experimental therapy, nonmedical outpatient therapy, or nonmedical counseling, including any of the following services:

- interaction between recipient and provider by means of the Internet, except as provided in 7 AAC 110.620 – 7 AAC 110.639 for telehealth services.

SOURCE: Alaska Admin Code, Title 7, 110.445, (Accessed Jun. 2024).

## **Non-Emergency Medical Transportation and Escort Coverage**

Clarifies types of services feasible for telehealth throughout the document.

SOURCE: Alaska Medicaid Policy Clarification Non-Emergency Medical Transportation, Sept. 18, 2023 (revised 11/29/23), (Accessed Jun. 2024).

## **Does Alaska Medicaid cover problem focused exams delivered through a telehealth modality?**

Patient Initiated: Yes, service may be covered under CPT code 99441-99443.

Scheduled Visit or Provider Initiated: Yes, Problem focused evaluation and management services (CPT 99202-99205 and 99211-99215) are covered when delivered through Two-Way Audio-Video Technology or through store-and-forward.

## **Are therapy services (PT, OT, SLP) covered when delivered through a telehealth modality?**

Yes: Therapy services (PT, OT, SLP) are covered when delivered through Two-Way Audio-Video Technology if the service is identified on the Telehealth Services Temporary Fee Schedule.

Use the same procedure codes as you would for an in-person encounter and apply a procedure modifier of either GT or 95.

**Are initial hospital services reimbursable if performed via telehealth?**

Yes: The professional component may be reimbursed using CPT codes 99221-99223 when services are delivered through Two-Way Audio-Video Technology.

**Are initial nursing facility care services reimbursable if performed via telehealth?**

Yes: The professional component may be reimbursed using CPT codes 99304-99306 when services are delivered through Two-Way Audio-Video Technology.

**Can ventilator management services be conducted via a telehealth mode of delivery?**

Yes: Ventilator management is reimbursable when performed via telehealth. Only the healthcare provider managing the ventilator may be reimbursed for ventilator management; any bedside adjustments are not separately reimbursable.

SOURCE: Alaska Medicaid Frequently Asked Questions Coverage of Telehealth Modalities, Sept. 19, 2023, (Accessed Jun. 2024).

**DME Oxygen Guidelines and Concerns**

Telehealth is included of definition of face-to-face encounter between the treating practitioner and the beneficiary and the encounter must be used for the purpose of gathering subjective and objective information associated with diagnosing, treating, or managing a clinical condition for which the DMEPOS is ordered.

SOURCE: Alaska Dep. of Health, Letter to DME Providers, RE Review of Oxygen Guidelines and Concerns, Dec. 29, 2023, (Accessed Jun. 2024).

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**ELIGIBLE PROVIDERS**

Subject to the requirements of 7 AAC 110.620 – 7 AAC 110.639, to be eligible for payment under 7 AAC 105 – 7 AAC 160 for providing a service by means of a telehealth modality, a provider must meet the following requirements:

- the provider must have an active license under AS 08 or AS 47, an active certification in the state, or an active license under the applicable laws of the jurisdiction in which the provider is located;
- the provider must be enrolled under 7 AAC 105.210;
- the provider, if licensed under AS 08 and required under 12 AAC 02.600, must be registered under 12 AAC 02.600 (telemedicine business registry);

- the service must be delivered within the rendering provider's, and if applicable, consulting provider's scope of licensure or certification;
- a claim submitted to the department must include applicable telehealth modifiers and place-of-service coding;
- if the rendering provider or consulting provider determines, during a telehealth encounter, that a service extends beyond the scope of that provider's license or certification, the provider must discontinue the encounter and refer the recipient to an appropriate provider; the rendering provider or consulting provider may bill only for the portion of the encounter that was within that provider's scope of license or certification and only if the rendered portion of the encounter met all criteria of a separately billable service;
- except as otherwise provided in 7 AAC 105 – 7 AAC 160, a recipient must be present during and participate in a telehealth encounter;
- the provider must comply with all record keeping requirements set out under 7 AAC 105.230 for all telehealth services rendered;
- the rendering provider and consulting provider, when delivering a service by means of a synchronous telehealth modality, must annotate the patient's clinical record with the method of delivery, the recipient's location during the delivery of the service, and confirmation that the recipient has consented to a telehealth method of delivery.

SOURCE: AK Admin. Code, Title 7, 110. 630 (Accessed Jun. 2024).

## **How do I bill for a services when a telehealth modality was used?**

### Procedure Code Modifier:

- Two-Way Audio-Video Technology: GT or 95
- Store-and-Forward: GQ
- Two-Way Audio Only Technology : FQ and 93

Procedure Codes Defined as Audio Only: Failure to include either modifier FQ or modifier 93 will result in denial of payment for audio only services.

Patient Initiated Online Digital Services: Do not use telehealth modifiers when billing CPT codes 98970 – 98972 and 99421 – 99423.

Telehealth for Acute Stroke: Use procedure code modifier G0 (G-Zero) and the appropriate telehealth modifier (GT, 95, GQ, or FQ).

Helpful Hint: Modifier G0 (G-Zero) often gets confused with GO (G-Oh). Please ensure the appropriate modifier is utilized when billing either G0 (G-Zero) or GO (G-Oh).

**Are services provided by therapy assistants covered when provided via a telehealth modality?**

Yes: Services provided by enrolled physical and occupational therapy assistant and speech language pathology assistant are covered to the same extent as the supervising therapist.

**Are outpatient rehabilitation Hospitals able to bill telehealth for therapy services (OT, PT, SLP) using a UB-04 or 837I and are there any additional requirements for identifying the claim as a telehealth claim?**

Yes: Therapy services provided in an outpatient rehabilitation hospital setting are covered when delivered through Two-Way Audio-Video Technology for services identified on the Telehealth Services Temporary Fee Schedule.

Additional Requirements: Effective for dates of service on and after 7/1/2023, claims submitted with therapy revenue codes 042X, 043X, and 044X will require an appropriate CPT/HCPCS procedure code in form locator 44, HCPCS/Accommodation Rates/HIPPS Rate Codes.

**Can direct entry midwives provide telehealth services?**

Yes: Effective 9/1/2023 services provided by direct entry midwives are covered if identified on the Telehealth Services Temporary Fee Schedule.

**Can optometrists provide telehealth services?**

Yes: Effective 9/1/2023 services provided by optometrists are covered if identified on the Telehealth Services Temporary Fee Schedule.

**Do I need to register with the Telemedicine Business Registry to offer telehealth services?**

Yes, in most cases: All businesses engaged in or planning to engage in distance delivery of health care to a patient located in Alaska must register with the state's Telemedicine Business Registry. Providers who are an employee of a business do not need to register.

Providers subject to Telemedicine Business Registry requirements:

Alaska-licensed audiologist or speech-language pathologist; behavior analyst; chiropractor; professional counselor; dentist or dental hygienist; dietitian or nutritionist; naturopath; marital and family therapist; physician, podiatrist, osteopath, or physician assistant; direct-entry midwife; nurse or advanced practice registered nurse



(APRN); dispensing optician; optometrist; pharmacist; physical therapist or occupational therapist; psychologist or psychological associate; social worker; or a physician licensed in another state.

\* This information is based off of May 22nd, 2023, DCCED publication. See DCCED's Telehealth Information Webpage for updates.

SOURCE: Alaska Medicaid Frequently Asked Questions Coverage of Telehealth Modalities, Sept. 19, 2023, (Accessed Jun. 2024).

The department shall pay for all services covered by the medical assistance program provided through telehealth if the department pays for those services when provided in person, including:

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1. services provided by a community health aide or a community health practitioner certified by the Community Health Aide Program Certification Board;
2. services provided by a behavioral health aide or behavioral health practitioner certified by the Community Health Aide Program Certification Board;
3. services provided by a dental health aide therapist certified by the Community Health Aide Program Certification Board;
4. services provided by a chemical dependency counselor certified by a certifying entity for behavioral health professionals in the state specified by the department in regulation;
5. services provided by a rural health clinic or a federally qualified health center;
6. services provided by an individual or entity that is required by statute or regulation to be licensed or certified by the department or that is eligible to receive payments, in whole or in part, from the department;

SOURCE: AK Statute Sec. 47.07.069, (Accessed Jun. 2024).

The role of the provider falls into three categories:

1. Referring Provider: Evaluates a patient, determines the need for a consultation, and arranges services of a consulting provider for the purpose of diagnosis and treatment.
2. Presenting Provider: Introduces a patient to the consulting provider during an interactive telemedicine session (may assist in the telemedicine consultation).
3. Consulting Provider: Evaluates the patient and/or medical data/images using telemedicine mode of delivery upon recommendation of the referring provider.

NOTE: Manual is under review.



SOURCE: AK Dept. of Health and Social Svcs. Billing for Telemedicine Services. Section II: Professional Claims Management, Feb. 6, 2020 (section revised 6/12), pg. 20, (Accessed Jun. 2024).

## **Mental Health**

An entity designated by the department under AS 47.30.520 – 47.30.620 may provide community mental health services authorized under AS 47.30.520 – 47.30.620 through telehealth to a patient in this state.

If an individual employed by an entity designated by the department under AS 47.30.520 – 47.30.620, in the course of a telehealth encounter with a patient, determines that some or all of the encounter will extend beyond the community mental health services authorized under AS 47.30.520 – 47.30.620, the individual shall advise the patient that the entity is not authorized to provide some or all of the services to the patient, recommend that the patient contact an appropriate provider for the services the entity is not authorized to provide, and limit the encounter to only those services the entity is authorized to provide. The entity may not charge a patient for any portion of an encounter that extends beyond the community mental health services authorized under AS 47.30.520 – 47.30.620.

A fee for a service provided through telehealth under this section must be reasonable and consistent with the ordinary fee typically charged for that service and may not exceed the fee typically charged for that service.

An entity permitted to provide telehealth under this section may not be required to document a barrier to an in-person visit to provide health care services through telehealth. The department may not limit the physical setting from which an entity may provide health care services through telehealth.

Nothing in this section requires the use of telehealth when an individual employed by an entity designated by the department under AS 47.30.520 – 47.30.620 determines that providing services through telehealth is not appropriate or when a patient chooses not to receive services through telehealth.

SOURCE: AK Statute Sec. 47.30.585, (Accessed Jun. 2024).

## **Uniform Alcoholism and Intoxication Treatment**

A public or private treatment facility approved under AS 47.37.140 may provide health care services authorized under AS 47.37.030 – 47.37.270 through telehealth to a patient in this state.

If an individual employed by a public or private treatment facility approved under AS 47.37.140, in the course of a telehealth encounter with a patient, determines that some or all of the encounter will extend beyond the health care services authorized under AS 47.37.030 – 47.37.270, the individual shall advise the patient that the facility is not authorized to provide some or all of the services to the patient, recommend that the patient contact an appropriate provider for the services the facility is not authorized to provide, and limit the encounter to only those services the facility is authorized to provide. The facility may not charge a patient for any portion of an encounter that extends beyond the health care services authorized under AS 47.37.030 – 47.37.270.

A fee for a service provided through telehealth under this section must be reasonable and consistent with the ordinary fee typically charged for that service and may not exceed the fee typically charged for that service.

A facility permitted to practice telehealth under this section may not be required to document a barrier to an in-person visit to provide health care services through telehealth. The department may not limit the physical setting from which a facility may provide health care services through telehealth.

Nothing in this section requires the use of telehealth when an individual employed by a facility approved under AS 47.37.140 determines that providing services through telehealth is not appropriate or when a patient chooses not to receive services through telehealth.

SOURCE: AK Statute Sec. 47.37.145, (Accessed Jun. 2024).

Various services are allowed via telehealth for Alaska Behavioral Health and Substance Use Disorder (SUD) Providers. See manuals.

SOURCE: State of Alaska Department of Health and Social Services Division of Behavioral Health Services, Alaska Behavioral Health Providers Services Standards & Administrative Procedures for Behavioral Health Provider Services & SUD Services [see both documents], (Accessed Jun. 2024).

Stand-alone vaccine counseling may be covered when provided via telehealth if the appropriate telehealth modifier and place of service are reported on the claim.

Stand-alone vaccine counselling, rendered in person or telehealth, is not separately reimbursable if the vaccine associated with the counselling is administered within one month of counseling.

SOURCE: Alaska Medicaid Provider Billing Manual, Immunization Services, pg. 12, (Accessed Jun. 2024).

## Tribal FQHC

### **Will my facility be able to continue to provide telemedicine (video-audio synchronous) and telephonic (audio-only) behavioral health services as a Tribal FQHC?**

Refer to the most current guidance document on telehealth:

[https://extranet.sp.dhss.alaska.gov/hcs/medicaidalaska/Provider/Updates/20230919\\_Telehealth\\_Services](https://extranet.sp.dhss.alaska.gov/hcs/medicaidalaska/Provider/Updates/20230919_Telehealth_Services)

### **Telehealth Services. Will my facility be able to provide telemedicine (video-audio synchronous), telephonic (audio-only), and store and forward telehealth services and be reimbursed for those services as a Tribal FQHC?**

Yes, telehealth services regulations were effective 9/1/2023. Refer to the most current guidance on telehealth services:

<https://extranet.sp.dhss.alaska.gov/hcs/medicaidalaska/Provider/Sites/Telehealth.html>

### **Can a Tribal FQHC provide services off-site after February 11, 2025?**

Yes, please refer to telehealth regulations that were effective 9/1/2023

<https://aws.state.ak.us/OnlinePublicNotices/Notices/Attachment.aspx?id=142671>

SOURCE: Alaska Medicaid, FAQs on Tribal FQHCs, (Accessed Jun. 2024).

This manual includes information about Alaska Medical Assistance for the following types of providers and services:

- Telemedicine

Dental telemedicine services do not require use of the telemedicine modifier.

SOURCE: State of Alaska Department of Health and Social Services Division, Alaska Medical Assistance Provider Billing Manual, Tribal Facility Services, Policies and Procedures, Feb. 18, 2021, (Accessed Jun. 2024).

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## ELIGIBLE SITES

### **How do I bill for a services when a telehealth modality was used?**

Place of Service Code:

- Place of Service Code 02: Telehealth- member not located at home during encounter
- Place of Service Code 10: Telehealth – member is located at home during encounter

SOURCE: Alaska Medicaid Frequently Asked Questions Coverage of Telehealth Modalities, Sept. 19, 2023, (Accessed Jun. 2024).

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## GEOGRAPHIC LIMITS

No reference found.

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## FACILITY TRANSMISSION FEE

The department will not pay

- for the use, or any costs associated with the use, of technological equipment and systems associated with the delivery of a service by means of a telehealth modality;
- a provider for communication with that provider's supervising provider or communication with a provider who is acting in a supervisory capacity;
- a supervising provider or a provider who is acting in a supervisory capacity for communication with a supervisee or for review of a supervisee's work;
- a provider participating in a telehealth encounter whose sole purpose is to facilitate the telehealth encounter between the recipient and a rendering provider or a consulting provider;
- for a failed or unsuccessful telehealth connection or transmission

SOURCE: AK Admin. Code, Title 7, 110.635. (Accessed Jun. 2024).

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## STORE-AND-FORWARD

*Last updated 06/19/2024*

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### POLICY

The department shall pay for all services covered by the medical assistance program provided through telehealth in the same manner as if the services had been provided in person, including...

- services provided through audio, visual, or data communications, alone or in any combination, or through communications over the Internet or by telephone, including a telephone that is not part of a dedicated audio conference system, electronic mail, text message, or two-way radio

SOURCE: AK Statute Sec. 47.07.069, (Accessed Jun. 2024).

Alaska Medicaid will reimburse for Store & Forward telehealth, which is defined as the “provider sends digital images, sounds, or previously recorded video to a consulting provider at a different location. The consulting provider reviews the information and reports back his or her analysis.”

Note: Manual is under review.

SOURCE: State of AK Dept. of Health and Social Svcs., Alaska Medical Assistance Provider Billing Manuals for Physician, ARNP and PA Services (5/13), p. 31, (Accessed Jun. 2024).

Subject to the requirements of 7 AAC 110.620 – 7 AAC 110.639, the department will pay for a service delivered by means of one of the following telehealth modalities if the modality and use of the modality meet the requirements of P.L 104 – 191 (Health Insurance Portability and Accountability Act of 1996 (HIPAA)): ...

- asynchronous: a store-and-forward, through the transfer from one location to another, of recorded digital images, data, video, or sounds to allow a consulting provider to obtain information, analyze it, and report back to the rendering provider.

For patient-initiated online digital service, whether synchronous or asynchronous, the following are not reimbursable:

- nonevaluative or nonmanagement services including appointment scheduling and electronic communication of test results;
- provider-initiated online digital service;
- patient-initiated online digital service within the postoperative period of a completed procedure or within seven days of an in-person visit and related to the illness, injury, or other reason for that visit.

SOURCE: Alaska Admin Code. Title 7, Sec. 110.625. (Accessed Jun. 2024).

## **What are the covered modalities for telehealth services?**

Asynchronous:

- Store-and-Forward: The transfer between healthcare providers of recorded digital images, video, or sounds from one location to another.

Patient-Initiated Online Digital Services:

- Synchronous or asynchronous: Evaluation, assessment, and management services of an established patient through a secure platform such as an electronic record portal, secure electronic mail, or digital application.

## **What is a patient-initiated online digital service?**

An online digital service is meant to expand a patient's options to communicate health concerns and request clarification. They also enhance a provider's ability to evaluate and manage a patient's healthcare where an in-person or telehealth encounter is not warranted.

- **Separately Reimbursable Communications:** Patient-initiated internet-based communications (e.g., patient portal messaging, text messaging, or email) for healthcare related reasons such as medication questions, prescription generation, clarification on test results, and reporting symptoms.
- **Non-Covered Communications:** Use of online digital services for nonevaluative, non-management administrative functions such as updating the patient's insurance or scheduling an appointment are not reimbursable.
- **Provider Initiated Communications:** Providers are not prohibited from initiating communication through methods such as internet communications, electronic mail, and text messages but these are not reimbursable services.

### **What provider types are authorized to bill for patient initiated online digital services?**

CPT Codes 98970-98972: Covered for behavioral health aides under the direction of a physician, psychologists, and school districts enrolled as a school-based services provider. Federally Qualified Health Centers and Rural Health Centers may be reimbursed at their encounter rate for services provided by licensed clinical social workers, marital and family therapists, professional counselors, and psychologists.

CPT Codes 99421-99423: Covered for advanced practice registered nurses, audiologists, Community Health Aides, direct entry midwives, optometrists, physicians, physician assistants, and podiatrists. Federally Qualified Health Centers and Rural Health Clinic may be reimbursed at the facility's encounter rate for services provided by a rendering providers listed here.

### **When are patient-initiated online digital services separately reimbursable?**

Patient-initiated online digital services are separately reimbursable if the communication is:

- **Established Patient:** Only reimbursable for an established patient,
- **Evaluative in Nature:** The purpose is to evaluate, assess, or manage the member's healthcare,
- **Patient-Initiated:** Call must be initiated by the member or member's guardian without prompting, and



- No other Affiliated Service: Not separately reimbursable if affiliated to another evaluation and management service, assessment, or procedure.

Online digital services are not separately reimbursable if they are within seven days of (before or after) an in-person or telehealth (asynchronous or synchronous) visit directly related to the illness, injury, or other reason for that visit.

SOURCE: Alaska Medicaid Frequently Asked Questions Coverage of Telehealth Modalities, Sept. 19, 2023, (Accessed Jun. 2024).

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## ELIGIBLE SERVICES/SPECIALTIES

Procedure Code Modifier:

- Two-Way Audio-Video Technology: GT or 95
- Store-and-Forward: GQ
- Two-Way Audio Only Technology : FQ and 93

Procedure Codes Defined as Audio Only: Failure to include either modifier FQ or modifier 93 will result in denial of payment for audio only services.

Patient Initiated Online Digital Services: Do not use telehealth modifiers when billing CPT codes 98970 – 98972 and 99421 – 99423.

Telehealth for Acute Stroke: Use procedure code modifier G0 (G-Zero) and the appropriate telehealth modifier (GT, 95, GQ, or FQ).

Helpful Hint: Modifier G0 (G-Zero) often gets confused with GO (G-Oh). Please ensure the appropriate modifier is utilized when billing either G0 (G-Zero) or GO (G-Oh).

SOURCE: Alaska Medicaid Frequently Asked Questions Coverage of Telehealth Modalities, Sept. 19, 2023, (Accessed Jun. 2024).

The department will not pay

- for the use, or any costs associated with the use, of technological equipment and systems associated with the delivery of a service by means of a telehealth modality;
- a provider for communication with that provider's supervising provider or communication with a provider who is acting in a supervisory capacity;
- a supervising provider or a provider who is acting in a supervisory capacity for communication with a supervisee or for review of a supervisee's work;



- a provider participating in a telehealth encounter whose sole purpose is to facilitate the telehealth encounter between the recipient and a rendering provider or a consulting provider;
- for a failed or unsuccessful telehealth connection or transmission;
- for the following services when provided by means of a telehealth modality:
  - chiropractic services;
  - dental services;
  - private-duty nursing services;
  - pharmacy dispensing services;
  - durable medical equipment and related services;
  - prosthetic and orthotic devices and related services;
  - transportation services;
  - accommodation services;
  - personal care services;
  - home health services;
  - community First Choice services;
  - home and community-based waiver services, except for
    - care coordination services under 7 AAC 130.240;
    - day habilitation services under 7 AAC 130.260;
    - employment services under 7 AAC 130.270; or
    - intensive active treatment services under 7 AAC 130.275;
- long term services and supports targeted case management services, except for case management services provided under 7 AAC 128.010(b)(2).

SOURCE: AK Admin. Code, Title 7, 110. 635 (Accessed Jun. 2024).

A consulting provider may send data he/she has received during a store-and-forward telemedicine consultation to another consulting provider (with equal or greater scope of practice as determined by his/her occupational license or level of expertise within their field of specialty).

NOTE: Manual is under review.

SOURCE: AK Dept. of Health and Social Svcs. Billing for Telemedicine Services. Section II: Professional Claims Management, Feb. 6, 2020, pg. 20, (Accessed Jun. 2024).

Covered telemedicine services are limited to:

- An initial visit
- One follow-up visit;
- A consultation made to confirm diagnosis;
- Diagnostic, therapeutic or interpretive service;
- A psychiatric or substance abuse assessment;
- Psychotherapy; or
- Pharmacological management services on an individual recipient basis.

Note: Manual is under review.

SOURCE: State of AK Dept. of Health and Social Svcs., Alaska Medical Assistance Provider Billing Manuals for Physician, ARNP, PA Services (5/13), p. 31, (Accessed Jun. 2024).

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## GEOGRAPHIC LIMITS

No Reference Found

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## TRANSMISSION FEE

The department will not pay

- for the use, or any costs associated with the use, of technological equipment and systems associated with the delivery of a service by means of a telehealth modality;
- a provider for communication with that provider's supervising provider or communication with a provider who is acting in a supervisory capacity;
- a supervising provider or a provider who is acting in a supervisory capacity for communication with a supervisee or for review of a supervisee's work;
- a provider participating in a telehealth encounter whose sole purpose is to facilitate the telehealth encounter between the recipient and a rendering provider or a consulting provider;
- for a failed or unsuccessful telehealth connection or transmission

SOURCE: AK Admin. Code, Title 7, 110.635. (Accessed Jun. 2024).

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## REMOTE PATIENT MONITORING

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*Last updated 06/19/2024*

**POLICY**

Alaska Medicaid will pay for telemedicine services delivered in the following manner: ...

- Self-monitoring method: The patient is monitored in his or her home via a telemedicine application, with the provider indirectly involved from another location.

Note: Manual is under review.

SOURCE: State of AK Dept. of Health and Social Svcs., Alaska Medical Assistance Provider Billing Manuals for Physician, ARNP, PA Services (5/13), p. 31, (Accessed Jun. 2024).

\* A provider has notified CCHP that Alaska Medicaid currently only pays for the RPM device and not the actual service. This has not been verified.

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**CONDITIONS**

No Reference Found

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**PROVIDER LIMITATIONS**

No Reference Found

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**OTHER RESTRICTIONS**

No Reference Found

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**EMAIL, PHONE & FAX**

*Last updated 06/19/2024*

Procedure Code Modifier:

- Two-Way Audio-Video Technology: GT or 95
- Store-and-Forward: GQ
- Two-Way Audio Only Technology : FQ and 93

Procedure Codes Defined as Audio Only: Failure to include either modifier FQ or modifier 93 will result in denial of payment for audio only services.

Patient Initiated Online Digital Services: Do not use telehealth modifiers when billing CPT codes 98970 – 98972 and 99421 – 99423.

Telehealth for Acute Stroke: Use procedure code modifier G0 (G-Zero) and the appropriate telehealth modifier (GT, 95, GQ, or FQ).

Helpful Hint: Modifier G0 (G-Zero) often gets confused with GO (G-Oh). Please ensure the appropriate modifier is utilized when billing either G0 (G-Zero) or GO (G-Oh).

**If my business limits telehealth to two-way audio only and online digital services, do I need to register my business on the Telehealth Registry?**

Yes: Two-way audio only and online digital services are considered forms of telehealth and require your business to be on the telehealth registry.

**Does Medicaid cover patient-initiated telephone services?**

Yes: Medicaid covers patient-initiated telephone services for established patients. Refer to the Telehealth Services Temporary Fee Schedule, for more information on who can be reimbursed for these services.

**What is a patient-initiated telephone service?**

Patient-initiated telephone service CPT codes are meant to be used when an evaluation, management, or assessment is done over the phone with a patient who has contacted the provider for a healthcare related reason.

- Separately Reimbursable Communications: Patient-initiated telephone-based communication for evaluation, management, or assessment of a patient who has reported a healthcare problem. Documentation must include the healthcare discussion that occurred, and the evaluation, management, or assessment provided.
- Non-Covered Communications: Patient-initiated telephone-based communication for healthcare reasons that do not involve an evaluation, management, or assessment of the patient and administrative functions such as updating the patient's insurance, scheduling, and appointments.
- Provider Initiated Communications: Providers are not prohibited from initiating telephone-based communication, but these functions are not reimbursable services.

**What provider types are authorized to bill for patient-initiated telephone services?**

CPT Codes 98966-98968: Covered for behavioral health aides under the direction of a physician, psychologists, and school districts enrolled as a school-based services provider. Federally Qualified Health Centers and Rural Health Centers may be reimbursed at their encounter rate for services provided by licensed clinical social workers, marital and family therapists, professional counselors, and psychologists.

CPT Codes 99441-99443: Covered for advanced practice registered nurses, audiologists, Community Health Aides, direct entry midwives, optometrists, physicians, physician assistants, and podiatrists. Federally Qualified Health Centers and Rural Health Clinic may be reimbursed at the facility's encounter rate for services provided by a rendering providers listed here.

### **When are patient-initiated telephone services separately reimbursable?**

Two-Way Audio Only services that are patient-initiated are separately reimbursable when billed using CPT codes 98966-98968 or 99441-99443. Per AMA coding guidelines, patient-initiated telephone services are separately reimbursable if the communication meets all of the below criteria:

Established Patient: Member is an established patient

Evaluative in Nature: Service is to evaluate, assess, or manage the member's health

Patient-Initiated: Call must be patient initiated without prompting

No other Affiliated Service: Not separately reimbursable if affiliated to another evaluation and management service, assessment, or procedure. The online digital service is not reimbursable if the communication:

- leads to another in-person or telehealth (asynchronous or synchronous) visit related to the illness, injury, or other reason within 24 hours or soonest available,
- is related to an in-person or telehealth (asynchronous or synchronous) during the previous 7 days, or
- is related to a surgery or procedure occurring within the post-operative or global period.

### **Is there a limit to how many patient-initiated telephone services may be reimbursed?**

Yes: Alaska Medicaid will reimburse up to 1 patient-initiated telephone service per day, per member.

SOURCE: Alaska Medicaid Frequently Asked Questions Coverage of Telehealth Modalities, Sept. 19, 2023, (Accessed Jun. 2024).

The department shall pay for all services covered by the medical assistance program provided through telehealth in the same manner as if the services had been provided in person, including ...

- Services provided through audio, visual, or data communications, alone or in any combination, or through communications over the Internet or by telephone, including a telephone that is not part of a dedicated audio conference system, electronic mail, text message, or two-way radio

SOURCE: AK Statute Sec. 47.07.069, (Accessed Jun. 2024).

Alaska Medicaid will not pay for

- The use of telemedicine equipment and systems
- Services delivered by telephone when not part of a dedicated audio conference system
- Services delivered by facsimile

Note: Manual is under review.

SOURCE: State of AK Dept. of Health and Social Svcs., Alaska Medical Assistance Provider Billing Manuals for Physician, ARNP, PA Services (5/13), p. 31, (Accessed Jun. 2024).

Subject to the requirements of 7 AAC 110.620 – 7 AAC 110.639, the department will pay for a service delivered by means of one of the following telehealth modalities if the modality and use of the modality meet the requirements of P.L 104 – 191 (Health Insurance Portability and Accountability Act of 1996 (HIPAA)):

- synchronous: live or interactive, through a real-time, interactive ...
  - two-way audio-only technology that allows for oral communication between the provider and the recipient

SOURCE: AK Admin Code, Title 7, 625 (Accessed Jun. 2024).

## Tribal FQHC

**Will my facility be able to continue to provide telemedicine (video-audio synchronous) and telephonic (audio-only) behavioral health services as a Tribal FQHC?**

Refer to the most current guidance document on telehealth:

[https://extranet.sp.dhss.alaska.gov/hcs/medicaidalaska/Provider/Updates/20230919\\_Tel](https://extranet.sp.dhss.alaska.gov/hcs/medicaidalaska/Provider/Updates/20230919_Tel)

**Telehealth Services. Will my facility be able to provide telemedicine (video-audio synchronous), telephonic (audio-only), and store and forward telehealth services**

## and be reimbursed for those services as a Tribal FQHC?

Yes, telehealth services regulations were effective 9/1/2023. Refer to the most current guidance on telehealth services:

<https://extranet.sp.dhss.alaska.gov/hcs/medicaidalaska/Provider/Sites/Telehealth.html>

SOURCE: Alaska Medicaid, FAQs on Tribal FQHCs, (Accessed Jun. 2024).

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## CONSENT REQUIREMENTS

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*Last updated 06/19/2024*

### What type of informed consent is required when providing services via telehealth?

Alaska Medicaid requires providers to obtain consent for delivering services through a telehealth modality prior to services being rendered. Receipt of consent must be documented in the member's file and may be obtained for a period of time agreed upon between the member/member representative and provider or may be for a single visit. Both written and verbal consent is acceptable for the purposes of telehealth.

- Verbal Consent: Consent may be obtained verbally in most scenarios. The patient's clinical record must confirm that the member consented to a telehealth mode of delivery.
- Written Consent: Some services, regardless of the mode of delivery, may require written consent. Providers should refer to their scope of practice requirements for any written consent requirements.

SOURCE: Alaska Medicaid Frequently Asked Questions Coverage of Telehealth Modalities, Sept. 19, 2023, (Accessed Jun. 2024).

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## OUT OF STATE PROVIDERS

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*Last updated 06/19/2024*

### When can an out-of-state provider not licensed in Alaska provide services to a member located in Alaska?

Physicians who are licensed in another state may practice telehealth without an Alaska license if:

- The physician and patient have an established physician-patient relationship and the physician has previously conducted an in-person examination of the patient; or
- If the patient has a suspected or diagnosed life-threatening condition for which the patient has been referred by an Alaska-licensed physician to a physician licensed in another state and the visit relates to that condition.



SOURCE: Alaska Medicaid Frequently Asked Questions Coverage of Telehealth Modalities, Sept. 19, 2023, (Accessed Jun. 2024).

Subject to the requirements of 7 AAC 110.620 – 7 AAC 110.639, to be eligible for payment under 7 AAC 105 – 7 AAC 160 for providing a service by means of a telehealth modality, a provider must meet the following requirements:

1. the provider must have an active license under AS 08 or AS 47, an active certification in the state, or an active license under the applicable laws of the jurisdiction in which the provider is located;
2. the provider must be enrolled under 7 AAC 105.210;
3. the provider, if licensed under AS 08 and required under 12 AAC 02.600, must be registered under 12 AAC 02.600 (telemedicine business registry);
4. the service must be delivered within the rendering provider's, and if applicable, consulting provider's scope of licensure or certification;
5. a claim submitted to the department must include applicable telehealth modifiers and place-of-service coding;
6. if the rendering provider or consulting provider determines, during a telehealth encounter, that a service extends beyond the scope of that provider's license or certification, the provider must discontinue the encounter and refer the recipient to an appropriate provider; the rendering provider or consulting provider may bill only for the portion of the encounter that was within that provider's scope of license or certification and only if the rendered portion of the encounter met all criteria of a separately billable service;
7. except as otherwise provided in 7 AAC 105 – 7 AAC 160, a recipient must be present during and participate in a telehealth encounter;
8. the provider must comply with all record keeping requirements set out under 7 AAC 105.230 for all telehealth services rendered;
9. the rendering provider and consulting provider, when delivering a service by means of a synchronous telehealth modality, must annotate the patient's clinical record with the method of delivery, the recipient's location during the delivery of the service, and confirmation that the recipient has consented to a telehealth method of delivery.

SOURCE: AK Admin. Code, Title 7, 110. 630 (Accessed Jun. 2024).

The Travel Service Authorization Request form has been updated to include a section for providers to declare what telehealth considerations were done prior to requesting travel.

SOURCE: AK MMIS Fiscal Agent Transition Town Hall, Dec. 20, 2023, & Travel Service Authorization Request Form, (Accessed Jun. 2024).

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## MISCELLANEOUS

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*Last updated 06/19/2024*

## **Are there additional documentation requirements when a service is provided via a telehealth modality?**

Yes: Telehealth services are documented episodes of care and require the same clinical documentation as seeing a member in-person, identified in 7 AAC 105.230, plus documentation that describes the telehealth visit, including:

- Modality: Delivery method (e.g., two-way audio-video or Two-Way Audio Only, and patient initiated online digital services)
- Location: Member/provider location during encounter (e.g., home, clinic)
- Consent: Record of the member giving consent for the telehealth encounter

## **Does documentation need to include the physical address when documenting the location of the encounter?**

No: documentation should identify where the patient and provider are located (e.g., home, clinic), but the address of the locations are not needed.

## **Who may prescribe a substance via telehealth? Under what conditions?**

Annual in-person exam is not required when:

- Alaska-licensed physicians (including osteopaths and podiatrists) and physician assistants may prescribe a controlled substance via telehealth if the provider complies with AS 08.64.364 and federal law.
- Alaska-licensed APRNs may prescribe a controlled substance via telehealth if the provider complies with AS 08.68.710 and federal law.
- Prescription, dispensation, and administration of a controlled substance may not be conducted via telehealth except by physicians (including osteopaths and podiatrists), physician assistants, or APRNs.
- Alaska-licensed dentists and optometrists may only prescribe a controlled substance via telehealth subsequent to an in-person exam.

SOURCE: Alaska Medicaid Frequently Asked Questions Coverage of Telehealth Modalities, Sept. 19, 2023), (Accessed Jun. 2024).

## **Medical Assistance Reform Program**

The department shall identify the areas of the state where improvements in access to telehealth would be most effective in reducing the costs of medical assistance and improving access to health care services for medical assistance recipients. The

department shall make efforts to improve access to telehealth for recipients in those locations. The department may enter into agreements with Indian Health Service providers, if necessary, to improve access by medical assistance recipients to telehealth facilities and equipment.

SOURCE: Alaska Statute 47.05.270, (Accessed Jun. 2024).

# Professional Requirements

## DEFINITIONS

*Last updated 06/19/2024*

“Telehealth” means the practice of health care delivery, evaluation, diagnosis, consultation, or treatment, using the transfer of health care data through audio, visual, or data communications, performed over two or more locations between providers who are physically separated from the recipient or from each other or between a provider and a recipient who are physically separated from each other.

SOURCE: AK Statute Sec. 47.05.270(e), (Accessed Jun. 2024).

### Business Registry

“Telemedicine services” means the delivery of health care services using the transfer of medical data through audio, visual, or data communications that are performed over two or more locations by a provider who is physically separated from the recipient of the health care services.

SOURCE: AK Statute, Sec. 44.33.381(c) (Accessed Jun. 2024).

### Speech-Language Pathology

“Asynchronous telemedicine” means the capturing and transmitting of data for the later viewing or interpreting by a person licensed or registered under AS 08.11.

SOURCE: AK Admin. Code, Title 12, Sec. 07.090. (Accessed Jun. 2024).

## CONSENT REQUIREMENTS

*Last updated 06/19/2024*

### Speech-Language Pathology

A licensee or registrant who provides telemedicine services under 12 ACC 07.020 shall document the efforts to obtain the client's consent to send all records to the client's primary care provider, if the licensee or registrant is not the client's primary care provider.

If a client provides consent under (a) of this section, the licensee or registrant who provides telemedicine services shall obtain that consent in writing signed by the client or the client's legal guardian.

SOURCE: AK Admin. Code, Title 12, Sec. 07.030 (Accessed Jun. 2023)

### **Nursing – APRN**

The board may not impose disciplinary sanctions on an advanced practice registered nurse for rendering a diagnosis, providing treatment, or prescribing, dispensing, or administering a prescription drug that is not a controlled substance to a person without conducting a physical examination if

- the advanced practice registered nurse or another licensed health care provider in the medical practice is available to provide follow-up care; and
- the advanced practice registered nurse requests that the person consent to sending a copy of all records of the encounter to the person's primary care provider if the prescribing advanced practice registered nurse is not the person's primary care provider and, if the person consents, the advanced practice registered nurse sends the records to the person's primary care provider

SOURCE: AK Statute Sec. 08.68.710, (Accessed Jun. 2023).

### **Nursing – APRN**

For a telehealth encounter, an APRN must complete and document

- the patient's informed consent to use telehealth technologies;
- a clinical history and review of systems establishing diagnoses and identifying conditions and contraindications to recommended treatment;
- a plan of care that lists all recommendations and prescriptions issued by electronic means;
- the patient and provider locations at the time of the telehealth visit; and
- the provider-patient relationship prior to prescribing.

SOURCE: AK Admin Code Title 12, 44.925 (Accessed Feb. 2024).

### **Psychology**

Licensees shall obtain informed consent of the recipient before providing distance professional services. To be effective, informed consent must be, understandable by the recipient, discuss the benefits and risks of entering into distance professional services, and address the use of telephone, online synchronous provision of psychological services, electronic billing, text, and email contact with a recipient.

SOURCE: AK Admin Code Title 12, 60.415, (Accessed Jun. 2024).

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## ONLINE PRESCRIBING

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*Last updated 06/19/2024*

A health care provider licensed in this state may provide health care services within the health care provider's authorized scope of practice to a patient in this state through telehealth without first conducting an in-person visit.

A physician licensed in another state may provide health care services through telehealth to a patient located in the state as provided in this subsection, subject to the investigative and enforcement powers of the department under AS 08.01.087, and subject to disciplinary action by the State Medical Board under AS 08.64.333. The privilege to practice under this subsection extends only to

1. ongoing treatment or follow-up care related to health care services previously provided by the physician to the patient and applies only if
  - a. the physician and the patient have an established physician patient relationship; and
  - b. the physician has previously conducted an in-person visit with the patient; or
2. a visit regarding a suspected or diagnosed life-threatening condition for which
  - a. the patient has been referred to the physician licensed in another state by a physician licensed in this state and that referral has been documented by the referring physician; and
  - b. the visit involves communication with the patient regarding diagnostic or treatment plan options or analysis of test results for the life threatening condition.

If a health care provider determines in the course of a telehealth encounter with a patient under this section that some or all of the encounter will extend beyond the health care provider's authorized scope of practice, the health care provider shall advise the patient that the health care provider is not authorized to provide some or all of the services to the patient, recommend that the patient contact an appropriate provider for the services the health care provider is not authorized to provide, and limit the encounter to only those services the health care provider is authorized to provide. The

health care provider may not charge for any portion of an encounter that extends beyond the health care provider's authorized scope of practice.

A fee for a service provided through telehealth under this section must be reasonable and consistent with the ordinary fee typically charged for that service and may not exceed the fee typically charged for that service.

A physician, podiatrist, osteopath, or physician assistant licensed under AS 08.64 may prescribe, dispense, or administer through telehealth under this section a prescription for a controlled substance listed in AS 11.71.140 – 11.71.190 if the physician, podiatrist, osteopath, or physician assistant complies with state and federal law governing the prescription, dispensing, or administering of a controlled substance.

An advanced practice registered nurse licensed under AS 08.68 may prescribe, dispense, or administer through telehealth under this section a prescription for a controlled substance listed in AS 11.71.140 – 11.71.190 if the advanced practice registered nurse complies with state and federal law governing the prescription, dispensing, or administering of a controlled substance.

Except as authorized under (e) and (f) of this section, a health care provider licensed under this title may not prescribe, dispense, or administer through telehealth under this section a controlled substance listed in AS 11.71.140 – 11.71.190.

SOURCE: AK Statute Sec. 08.02.130, (Accessed Jun. 2024).

The nursing board shall

- adopt regulations necessary to implement this chapter, including regulations ...
  - establishing guidelines for rendering a diagnosis, providing treatment, or prescribing, dispensing, or administering a prescription drug to a person without conducting a physical examination under AS 08.68.710; the guidelines must include a nationally recognized model policy for standards of care of a patient who is at a different location than the advanced practice registered nurse

SOURCE: AK Statute Sec. 08.68.100, (Accessed Jun. 2024).

## Nursing

The board may not impose disciplinary sanctions on an advanced practice registered nurse for rendering a diagnosis, providing treatment, or prescribing, dispensing, or administering a prescription drug that is not a controlled substance to a person without conducting a physical examination if



- the advanced practice registered nurse or another licensed health care provider in the medical practice is available to provide follow-up care; and
- the advanced practice registered nurse requests that the person consent to sending a copy of all records of the encounter to the person's primary care provider if the prescribing advanced practice registered nurse is not the person's primary care provider and, if the person consents, the advanced practice registered nurse sends the records to the person's primary care provider

The board may not impose disciplinary sanctions on an advanced practice registered nurse for prescribing, dispensing, or administering a prescription drug that is a controlled substance if the requirements under (a) of this section and 15 AS 08.68.705 are met and the advanced practice registered nurse prescribes, dispenses, or administers the controlled substance.

Notwithstanding (a) and (b) of this section, an advanced practice registered nurse may not prescribe, dispense, or administer a prescription drug in response to an Internet questionnaire or electronic mail message to a person with whom the advanced practice registered nurse does not have a prior provider-patient relationship.

SOURCE: AK Statute Sec. 08.68.710, (Accessed Jun. 2024).

The guiding principles for telemedicine practice in the American Medical Association (AMA), Report 7 of the Council on Medical Service (A-14), Coverage of and Payment for Telemedicine, dated 2014, and the Federation of State Medical Boards (FSMB), Model Policy for the Appropriate Use of Telemedicine Technologies in the Practice of Medicine, dated April 2014, are adopted by reference as the standards of practice when providing treatment, rendering a diagnosis, prescribing, dispensing, or administering a prescription or controlled substance without first conducting an in-person physical examination under AS 08.64.364.

During a public health emergency declared by the governor or commissioner of health and social services, an appropriate licensed health care provider need not be present with the patient to assist a physician or physician assistant with examination, diagnosis, and treatment if the physician or physician-assistant is prescribing, dispensing, or administering buprenorphine to initiate or continue treatment for opioid use disorder and the physician or physician assistant

- is a waived practitioner under 21 U.S.C 823(g)(2) (Drug Addiction Treatment Act (DATA));
- documents all attempts to conduct a physical examination under AS 08.64.364(b), the reason why the examination cannot be performed, and the reason why another health care provider cannot be present with the patient; and
- requires urine or oral toxicology screening as part of the patient's medication adherence plan.



SOURCE: AK Admin. Code, Title 12, Sec. 40.943 (Accessed Jun. 2024).

The board may not impose disciplinary sanctions on a physician or physician assistant for rendering a diagnosis, providing treatment, or prescribing, dispensing, or administering a prescription drug that is not a controlled substance to a person without conducting a physical examination if

- the physician, physician assistant, or another licensed health care provider in the medical practice is available to provide follow-up care; and
- the physician or physician assistant requests that the person consent to sending a copy of all records of the encounter to the person's primary care provider if the prescribing physician or physician assistant is not the person's primary care provider and, if the person consents, the physician or physician assistant sends the records to the person's primary care provider.

The board may not impose disciplinary sanctions on a physician or physician assistant for prescribing, dispensing, or administering a prescription drug that is a controlled substance if the requirements under (a) of this section and AS 08.64.363 are met.

Notwithstanding (a) and (b) of this section,

- Notwithstanding (a) and (b) of this section,
- a physician or physician assistant may not prescribe, dispense, or administer a prescription drug in response to an Internet questionnaire or electronic mail message to a person with whom the physician or physician assistant does not have a prior physician-patient relationship.

SOURCE: Alaska Statute Sec. 08.64.364 (Accessed Jun. 2024).

For purposes of AS 08.64.240(b) and AS 08.64.326, "unprofessional conduct" means an act or omission by an applicant or licensee that does not conform to the generally accepted standards of practice for the profession for which the applicant seeks licensure or a permit under AS 08.64 or which the licensee is authorized to practice under AS 08.64. "Unprofessional conduct" includes the following:

- providing treatment, rendering a diagnosis, or prescribing medications based solely on a patient-supplied history that a physician licensed in this state received by telephone, facsimile, or electronic format
- for a physician or physician assistant, prescribing, dispensing, or furnishing a prescription medication without first conducting a physical examination of the person, unless the licensee has a patient-physician or patient-physician assistant relationship with the person; this paragraph does not apply to prescriptions written or medications issued
- For use in emergency treatment;

- For expedited partner therapy for sexually transmitted diseases;
- In response to an infectious disease investigation, public health emergency, infectious disease outbreak, or act of bioterrorism; or
- by a physician or physician assistant practicing telemedicine under AS 08.64.364;

SOURCE: AK Admin. Code, Title 12, Sec. 40.967. (Accessed Jun. 2024).

## Nursing

In accordance with the American Association of Nurse Practitioners, Position Statement: Telehealth, dated 2022, adopted by reference, an APRN shall, for the purpose of rendering a diagnosis, providing treatment, or prescribing, dispensing, or administering a prescription drug to a person without conducting a physical examination under AS 08.68.710, provide the same standard of care to a patient who is at a different location as would be provided to that patient in person.

An APRN may practice telehealth if

- the APRN is licensed by the board; and
- the APRN or another licensed health care provider is available to provide follow-up care.

For a telehealth encounter, an APRN must complete and document

- The patient's informed consent to use telehealth technologies;
- A clinical history and review of systems establishing diagnoses and identifying conditions and contraindications to recommended treatment;
- A plan of care that lists all recommendations and prescriptions issued by electronic means;
- The patient and provider locations at the time of the telehealth visit; and
- The provider-patient relationship prior to prescribing.

An APRN practicing telehealth shall comply with P.L 104 – 191 (Health Insurance Portability and Accountability Act of 1996 (HIPAA)) and medical record retention rules. Transmissions, including patient electronic mail, prescriptions, and laboratory results must be secure within existing technology, including the use of password-protected, encrypted electronic prescriptions or other reliable authentication techniques.

In this section, a “provider-patient relationship” is established when there is an in-person health examination or examination by telehealth technology of the patient by the APRN or another licensed health care provider and the patient record is available to the treating APRN.

SOURCE: AK Admin Code Title 12, 44.925 (Accessed Jun. 2024).

## Optometry Board

### An optometrist conducting a patient visit through telehealth

- shall, before treating the patient, establish an optometrist-patient relationship verbally, in writing, or by conducting an in-person exam;
- shall verify the patient's identity;
- shall maintain confidentiality of patient records as required by state and federal law;
- shall provide patient services through telehealth at the same quality as would be provided in person; if a patient service through telehealth cannot be provided at the same quality as it would be in person, the optometrist shall advise the patient in accordance with AS 08.02.130(c);
- shall make or identify a diagnosis at the time of the patient visit;
- may not determine an ophthalmic prescription used to correct a refractive error based solely on an examination conducted through telehealth;
- shall provide complete patient records of a patient visit conducted through telehealth in a timely manner in accordance with state and federal law.

SOURCE: AK Admin Code Title 12, 48.370, (Accessed Jun. 2024).

## Who may prescribe a controlled substance via telehealth? Under what conditions?

### When an initial in-person exam is not required:

- Alaska-licensed physicians (including osteopaths and podiatrists) and physician assistants may prescribe a controlled substance via telehealth if the provider complies with AS 08.64.364 and federal law.
- Alaska-licensed APRNs may prescribe a controlled substance via telehealth if the provider complies with AS 08.68.710 and federal law.
- Prescription, dispensation, and administration of a controlled substance may not be conducted via telehealth except by physicians (including osteopaths and podiatrists), physician assistants, or APRNs. Alaska-licensed dentists and optometrists may only prescribe a controlled substance via telehealth subsequent to an in-person exam.

SOURCE: Alaska Department of Commerce, Community and Economic Development, Division of Corporations, Business and Professional Licensing, Telehealth Information, (Accessed Jun. 2024)

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## CROSS-STATE LICENSING

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*Last updated 06/19/2024*

A health care provider licensed in this state may provide health care services within the health care provider's authorized scope of practice to a patient in this state through telehealth without first conducting an in-person visit.

A physician licensed in another state may provide health care services through telehealth to a patient located in the state as provided in this subsection, subject to the investigative and enforcement powers of the department under AS 08.01.087, and subject to disciplinary action by the State Medical Board under AS 08.64.333. The privilege to practice under this subsection extends only to

- ongoing treatment or follow-up care related to health care services previously provided by the physician to the patient and applies only if
  - the physician and the patient have an established physician patient relationship; and
  - the physician has previously conducted an in-person visit with the patient; or
- A visit regarding a suspected or diagnosed life-threatening condition for which
  - the patient has been referred to the physician licensed in another state by a physician licensed in this state and that referral has been documented by the referring physician; and
  - the visit involves communication with the patient regarding diagnostic or treatment plan options or analysis of test results for the life threatening condition.

If a health care provider determines in the course of a telehealth encounter with a patient under this section that some or all of the encounter will extend beyond the health care provider's authorized scope of practice, the health care provider shall advise the patient that the health care provider is not authorized to provide some or all of the services to the patient, recommend that the patient contact an appropriate provider for the services the health care provider is not authorized to provide, and limit the encounter to only those services the health care provider is authorized to provide. The health care provider may not charge for any portion of an encounter that extends beyond the health care provider's authorized scope of practice.

A fee for a service provided through telehealth under this section must be reasonable and consistent with the ordinary fee typically charged for that service and may not exceed the fee typically charged for that service.

SOURCE: AK Statute Sec. 08.02.130, (Accessed Jun. 2024).

The board may sanction a physician licensed in another state who provides health care services through telehealth (see statute for list of criteria and repercussions).

SOURCE: AK Statute Sec. 08.64.333, (Accessed Jun. 2024).

## Emergency Medical Services

An individual certified or licensed under this chapter may practice within the individual's authorized scope of practice under this chapter through telehealth with a patient in this state if the individual's certification or license is in good standing.

If an individual certified or licensed under this chapter determines in the course of a telehealth encounter with a patient that some or all of the encounter will extend beyond the individual's authorized scope of practice, the individual shall advise the patient that the individual is not authorized to provide some or all of the services to the patient, recommend that the patient contact an appropriate provider for the services the individual is not authorized to provide, and limit the encounter to only those services the individual is authorized to provide. The individual certified or licensed under this chapter may not charge for any portion of an encounter that extends beyond the individual's authorized scope of practice.

A fee for a service provided through telehealth under this section must be reasonable and consistent with the ordinary fee typically charged for that service and may not exceed the fee typically charged for that service.

An individual certified or licensed under this chapter may not be required to document a barrier to an in-person visit to provide health care services through telehealth. The department or the council may not limit the physical setting from which an individual certified or licensed under this chapter may provide health care services through telehealth.

SOURCE: AK Statute Sec. 18.08.100, (Accessed Jun. 2024).

## Optometry Board

A person in or outside the state may not practice, attempt to practice, or offer to practice optometry in the state through telehealth without first obtaining a license from the board.

SOURCE: AK Admin Code Title 12, 48.370, (Accessed Jun. 2024).

## Psychology

To be eligible to practice telepsychology with clients physically present in this state, a psychologist or psychological associate must meet the requirements under AS 08.01.085 and

- be licensed under AS 08.86.130 as a licensed psychologist or under AS 08.86.160 as a licensed psychological associate; and
- complete general competency training in the practice of telepsychology, totaling a minimum of four hours.

The provision of professional services in this state by a person licensed under AS 08.86 through digital, telephonic, or electronic means, regardless of the location of the client, constitutes the practice of psychology in this state. Licensees are required to comply with all statutes, regulations, and rules of the state where the client is physically located.

SOURCE: AK Admin Code Title 12, 60.405 & 410, (Accessed Jun. 2024).

## **Professional counselors**

Before providing distance professional services, an individual must ...

- be either licensed in good standing or working as a supervisee under a board-approved supervisor as set out in AS 08.29.

SOURCE: AK Admin Code Title 12, 62.400, (Accessed Jun. 2024).

## **When may a physician not licensed in Alaska provide services to a patient located in Alaska? What happens if a patient has a complaint about that care?**

- Physicians who are licensed in another state may practice telehealth without an Alaska license if:
  - The physician and patient have an established physician-patient relationship and the physician has previously conducted an in-person examination of the patient; or
  - If the patient has a suspected or diagnosed life-threatening condition for which the patient has been referred by an Alaska-licensed physician to a physician licensed in another state and the visit relates to that condition.
- The State Medical Board has augmented authority to:
  - Sanction the practice of a physician who is practicing telehealth without a license who is found to be in violation of law, and
  - Allow the board to recover from a physician the cost of proceedings resulting in a sanction of unlicensed practice under this new provision, including the costs of investigation by the board and department and hearing costs.

## **My patient is vacationing in Alaska. Do I need an Alaska license to treat them remotely while they are on vacation?**



Yes, except as noted directly above relating to when a physician can provide services to a patient located in Alaska without an Alaska license. Alaska laws are based on where the patient receives service. Individual licensing boards may offer special courtesy licenses or opportunities for an out-of-state provider to consult with an Alaska provider if the patient requires special health care services while physically located in our state. For more information on the requirements of these licensed professions, please visit that specific program's link at the DCCED/CBPL Professional Licensing website to review statutes, regulations, announcements, and more.

### **Do I need an Alaska license to prescribe to a patient located in the state? Can an out-of-state pharmacy transfer a prescription to an Alaska pharmacy?**

Alaska pharmacies may only fill prescriptions issued directly from prescribers who do not hold an Alaska license if that prescription is not a controlled substance.

Unless the out-of-state pharmacy is licensed in the state of Alaska or has entered into a Shared Pharmacy Services Agreement, an Alaska pharmacy may only fill a prescription from a pharmacy licensed in another state that is not an Alaska Schedule I or II controlled substance.

### **What is the Telemedicine Business Registry, and who has to register?**

All businesses engaged in or planning to engage in distance delivery of health care to a patient located in Alaska must register with the state's Telemedicine Business Registry. A provider who is an employee of a business does not need to individually register; however, the employer does. "Telemedicine services" means the delivery of health care services using the transfer of medical data through audio, visual, or data communications that are performed over two or more locations by a provider who is physically separated from the recipient of the health care services. AS 44.33.381

### **Do I also need an Alaska business license?**

If your business would like to provide telemedicine services to Alaska-based clients, a valid Alaska business license is required before submitting the Telemedicine Business Registry application. To register, please provide your Alaska Business License number on the Telemedicine Business Registry license application. Applications for a business license may be obtained through the Business Licensing Section of this division.

SOURCE: Alaska Department of Commerce, Community and Economic Development, Division of Corporations, Business and Professional Licensing, Telehealth Information, (Accessed Jun. 2024).

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## **LICENSURE COMPACTS**

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*Last updated 06/19/2024*

No Reference Found

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## **PROFESSIONAL BOARDS STANDARDS**

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*Last updated 06/19/2024*

### Medical Board

SOURCE: AK Admin. Code, Title 12, Sec. 40.943 (Accessed Jun. 2024).

### Audiology & Speech-Language Pathology

SOURCE: AK Admin. Code, Title 12, Sec. 07.020. (Accessed Jun. 2024).

### Physical therapists and occupational therapy

SOURCE: AK Admin Code Title 12, Sec. 54. 530 & 825 (Accessed Jun. 2024).

### Board of Nursing

SOURCE: AK Admin Code Title 12, 44.925 (Accessed Jun. 2024).

### Optometry Board

SOURCE: AK Admin Code Title 12, 48.370, (Accessed Jun. 2024).

### Psychology Practice

SOURCE: AK Admin Code Title 12, 60.400-415, (Accessed Jun. 2024).

### Professional Counselors (requirements for distance professional services)

SOURCE: AK Admin Code Title 12, 62.400, (Accessed Jun. 2024).

## **What are the standards for telehealth delivery?**

A provider may deliver health care services via telehealth without an initial in-person exam if the provider holds an Alaska license. For these visits:

- The provider must only provide services within their authorized scope of practice.
- Fees for telehealth services must be reasonable and consistent with ordinary fees for the same in-person service.
- There is no requirement to document the barrier to in-person health care delivery.
- There is no limitation to the physical setting from which telehealth may be delivered.
- Neither the patient nor the provider is required to use telehealth to deliver health care services.

## To whom do these telehealth standards apply?

Alaska-licensed audiologist or speech-language pathologist; behavior analyst; chiropractor; professional counselor; dentist or dental hygienist; dietitian or nutritionist; naturopath; marital and family therapist; physician, podiatrist, osteopath, or physician assistant; direct-entry midwife; nurse or advanced practice registered nurse (APRN); dispensing optician; optometrist; pharmacist; physical therapist or occupational therapist; psychologist or psychological associate; social worker; or a physician licensed in another state.

SOURCE: Alaska Department of Commerce, Community and Economic Development, Division of Corporations, Business and Professional Licensing, Telehealth Information, (Accessed Jun. 2024).

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## MISCELLANEOUS

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*Last updated 06/19/2024*

A health care provider may not be required to document a barrier to an in-person visit to provide health care services through telehealth. The department or a board may not limit the physical setting from which a health care provider may provide health care services through telehealth.

SOURCE: AK Statute Sec. 08.02.130, (Accessed Jun. 2024).

To be registered on the telemedicine business registry established and maintained under AS 44.33.381, and before providing telemedicine services to a recipient located in this state, a business performing telemedicine services must submit to the department

- a complete registration on a form provided by the department; the registration must include the business's name, address, and contact information;
- a copy of the business's valid business license issued under AS 43.70 and 12 AAC 12; and
- the applicable fee established in 12 AAC 02.106.

A business performing telemedicine services must register with the name it is using to perform telemedicine services in this state. A business operating under multiple names to perform telemedicine services shall file a separate registration for each name.

If the name, address, or contact information of a business on the telemedicine business registry changes, the business performing telemedicine services must submit to the department, not later than 30 days after the change or termination:

- a complete report, on a form provided by the department, of each change; and

- the applicable fee established in 12 AAC 02.106.

A business that fails to comply timely with (c) of this section may not perform telemedicine services in this state and must submit a new application under (a) of this section before resuming the provision of telemedicine services to a recipient located in this state.

If a business terminates the performance of telemedicine services in this state, the business shall notify the department, requesting that the department remove the business from the telemedicine business registry. If a business gives notification under this subsection, the business must submit a new application under (a) of this section before resuming the provision of telemedicine services to a recipient located in this state.

See telemedicine business registry webpage for more information on applying. [page under construction as of Feb. 2024].

SOURCE: AK Admin Code. Sec. 600, (Accessed Jun. 2024).

The following fees are established for registration under AS 44.33.381 (telemedicine business registry) for businesses performing telemedicine services in this state;

- initial registration fee, \$50;
- fee to report changes in the information on the initial registration, \$50.

SOURCE: AK Admin Code 12-02.106 (Accessed Jun. 2024).

A person who is licensed or registered under AS 08.11 may provide telemedicine services to a client in the state if:

- The telemedicine services are of the same scope, nature, and quality as those services provided in person;
- The quality of electronic transmissions used to provide telemedicine services allow the licensee or registrant to provide services equivalent to those provided in person;
- The licensee or registrant has the skill and ability to operate the equipment used to provide telemedicine services;
- The licensee or registrant assesses the client's level of comfort in receiving telemedicine services and makes appropriate adjustments to the treatment plan based on that assessment;
- The licensee or registrant ensures the presence of a telemedicine facilitator who is physically present with the client when appropriate;

- The licensee or registrant ensures that the client can contact a licensed health care provider in person as part of the client's treatment plan;
- The licensee or registrant ensures that the electronic transmissions used to provide telemedicine services have sufficient security to ensure the protection of the client's medical records as if the client were receiving in-person treatment; and
- The licensee or registrant does not provide telemedicine services solely through written correspondence; however, written correspondence may be used to supplement telemedicine services.

Nothing in this section prevents the use of asynchronous telemedicine.

SOURCE: AK Admin code 12-07.020 (Accessed Jun. 2024).

See telerehabilitation regulations for supervision requirements.

SOURCE: AK Admin Code Title 12, Sec. 54. 520. (Accessed Jun. 2024).

## Federally Qualified Health Center (FQHC)

### DEFINITION OF VISIT

*Last updated 02/27/2024*

“Visit” means the aggregate of face-to-face encounters, occurring on the same calendar day and at a single location, between the health clinic recipient and one or more rural health clinic professionals; for purposes of this paragraph, “aggregate of face-to-face encounters” does not include

- multiple face-to-face encounters in which, after the first encounter, the recipient suffers an additional illness or injury requiring additional diagnosis or treatment;
- a face-to-face encounter for dental or mental health diagnosis or treatment that occurs on the same calendar day and single location as one or more face-to-face encounters for medical diagnosis or treatment; or
- charity care.

SOURCE: AK Admin Code Title 7, Sec. 145.739 (Accessed Feb. 2024).

### MODALITIES ALLOWED

*Last updated 02/27/2024*

#### Live Video

Submitting a claim for a telemedicine service is identical to the way a claim would be submitted for a face-to-face visit. Depending on the method of telemedicine used and the role of the provider in the consultation determines whether a modifier should be added to the procedure code. The role of the provider falls into three categories:

- Referring Provider: Evaluates a patient, determines the need for a consultation, and arranges services of a consulting provider for the purpose of diagnosis and treatment.
- Presenting Provider: Introduces a patient to the consulting provider during an interactive telemedicine session (may assist in the telemedicine consultation).
- Consulting Provider: Evaluates the patient and/or medical data/images using telemedicine mode of delivery upon recommendation of the referring provider.

NOTE: Manual is under review.

SOURCE: AK Dept. of Health and Social Svcs. Billing for Telemedicine Services. Section II: Professional Claims Management [listed under FQHC tab], Feb. 6, 2020, pg. 20, (Accessed Feb. 2024).

The department shall pay for all services covered by the medical assistance program provided through telehealth if the department pays for those services when provided in person, including: ...

- services provided by a rural health clinic or a federally qualified health center.

SOURCE: AK Statute Sec. 47.07.069, (Accessed Feb. 2024).

Will my facility be able to continue to provide telemedicine (video-audio synchronous) and telephonic (audio-only) behavioral health services as a Tribal FQHC?

Refer to the most current guidance document on telehealth:

[https://extranet.sp.dhss.alaska.gov/hcs/medicaidalaska/Provider/Updates/20230919\\_Telehealth\\_Services](https://extranet.sp.dhss.alaska.gov/hcs/medicaidalaska/Provider/Updates/20230919_Telehealth_Services)

Telehealth Services. Will my facility be able to provide telemedicine (video-audio synchronous), telephonic (audio-only), and store and forward telehealth services and be reimbursed for those services as a Tribal FQHC?

Yes, telehealth services regulations were effective 9/1/2023. Refer to the most current guidance on telehealth services:

<https://extranet.sp.dhss.alaska.gov/hcs/medicaidalaska/Provider/Sites/Telehealth.html>

SOURCE: AK Medicaid, FAQs on Tribal FQHCs, 2/12/24, (Accessed Feb. 2024).

## Store and Forward



A consulting provider may send data he/she has received during a store-and-forward telemedicine consultation to another consulting provider (with equal or greater scope of practice as determined by his/her occupational license or level of expertise within their field of specialty).

SOURCE: AK Dept. of Health and Social Svcs. Billing for Telemedicine Services. Section II: Professional Claims Management [listed under FQHC tab], Feb. 6, 2020, pg. 20, (Accessed Feb. 2024).

The department shall pay for all services covered by the medical assistance program provided through telehealth if the department pays for those services when provided in person, including: ...

- services provided by a rural health clinic or a federally qualified health center.
- services provided through audio, visual, or data communications, alone or in any combination, or through communications over the Internet or by telephone, including a telephone that is not part of a dedicated audio conference system, electronic mail, text message, or two-way radio;

SOURCE: AK Statute Sec. 47.07.069, (Accessed Feb. 2024).

### **What provider types are authorized to bill for patient initiated online digital services?**

CPT Codes 98970-98972: Covered for behavioral health aides under the direction of a physician, psychologists, and school districts enrolled as a school-based services provider. Federally Qualified Health Centers and Rural Health Centers may be reimbursed at their encounter rate for services provided by licensed clinical social workers, marital and family therapists, professional counselors, and psychologists.

CPT Codes 99421-99423: Covered for advanced practice registered nurses, audiologists, Community Health Aides, direct entry midwives, optometrists, physicians, physician assistants, and podiatrists. Federally Qualified Health Centers and Rural Health Clinic may be reimbursed at the facility's encounter rate for services provided by a rendering providers listed here.

SOURCE: Alaska Medicaid Frequently Asked Questions Coverage of Telehealth Modalities, Sept. 19, 2023), (Accessed Feb. 2024).

Telehealth Services. Will my facility be able to provide telemedicine (video-audio synchronous), telephonic (audio-only), and store and forward telehealth services and be reimbursed for those services as a Tribal FQHC?

Yes, telehealth services regulations were effective 9/1/2023. Refer to the most current guidance on telehealth services:  
<https://extranet.sp.dhss.alaska.gov/hcs/medicaidalaska/Provider/Sites/Telehealth.html>

SOURCE: AK Medicaid, FAQs on Tribal FQHCs, 2/12/24, (Accessed Feb. 2024).

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## Remote Patient Monitoring

No reference found.

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## Audio-Only

The department shall pay for all services covered by the medical assistance program provided through telehealth if the department pays for those services when provided in person, including: ...

- services provided by a rural health clinic or a federally qualified health center.
- services provided through audio, visual, or data communications, alone or in any combination, or through communications over the Internet or by telephone, including a telephone that is not part of a dedicated audio conference system, electronic mail, text message, or two-way radio;

SOURCE: AK Statute Sec. 47.07.069, (Accessed Feb. 2024).

## What provider types are authorized to bill for patient-initiated telephone services?

CPT Codes 98966-98968: Covered for behavioral health aides under the direction of a physician, psychologists, and school districts enrolled as a school-based services provider. Federally Qualified Health Centers and Rural Health Centers may be reimbursed at their encounter rate for services provided by licensed clinical social workers, marital and family therapists, professional counselors, and psychologists.

CPT Codes 99441-99443: Covered for advanced practice registered nurses, audiologists, Community Health Aides, direct entry midwives, optometrists, physicians, physician assistants, and podiatrists. Federally Qualified Health Centers and Rural Health Clinic may be reimbursed at the facility's encounter rate for services provided by a rendering providers listed here.

SOURCE: Alaska Medicaid Frequently Asked Questions Coverage of Telehealth Modalities, Sept. 19, 2023), (Accessed Feb. 2024).

Will my facility be able to continue to provide telemedicine (video-audio synchronous) and telephonic (audio-only) behavioral health services as a Tribal FQHC?

Refer to the most current guidance document on telehealth:

[https://extranet.sp.dhss.alaska.gov/hcs/medicaidalaska/Provider/Updates/20230919\\_Telehealth\\_Services](https://extranet.sp.dhss.alaska.gov/hcs/medicaidalaska/Provider/Updates/20230919_Telehealth_Services)

Telehealth Services. Will my facility be able to provide telemedicine (video-audio synchronous), telephonic (audio-only), and store and forward telehealth services and be reimbursed for those services as a Tribal FQHC?

Yes, telehealth services regulations were effective 9/1/2023. Refer to the most current guidance on telehealth services:

<https://extranet.sp.dhss.alaska.gov/hcs/medicaidalaska/Provider/Sites/Telehealth.html>

SOURCE: AK Medicaid, FAQs on Tribal FQHCs, 2/12/24, (Accessed Feb. 2024).

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## SAME DAY ENCOUNTERS

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*Last updated 02/27/2024*

“Visit” means the aggregate of face-to-face encounters, occurring on the same calendar day and at a single location, between the health clinic recipient and one or more rural health clinic professionals; for purposes of this paragraph, “aggregate of face-to-face encounters” does not include

- multiple face-to-face encounters in which, after the first encounter, the recipient suffers an additional illness or injury requiring additional diagnosis or treatment;
- a face-to-face encounter for dental or mental health diagnosis or treatment that occurs on the same calendar day and single location as one or more face-to-face encounters for medical diagnosis or treatment; or
- charity care.

SOURCE: AK Admin Code Title 7, Sec. 145.739 (Accessed Feb. 2024).

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## ELIGIBLE ORIGINATING SITE

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*Last updated 02/27/2024*

**Live Video**

Submitting a claim for a telemedicine service is identical to the way a claim would be submitted for a face-to-face visit. Depending on the method of telemedicine used and the role of the provider in the consultation determines whether a modifier should be added to the procedure code. The role of the provider falls into three categories:

- Referring Provider: Evaluates a patient, determines the need for a consultation, and arranges services of a consulting provider for the purpose of diagnosis and treatment.
- Presenting Provider: Introduces a patient to the consulting provider during an interactive telemedicine session (may assist in the telemedicine consultation).

NOTE: Manual is under review.

SOURCE: AK Dept. of Health and Social Svcs. Billing for Telemedicine Services. Section II: Professional Claims Management [listed under FQHC tab], Feb. 6, 2020, pg. 20, (Accessed Feb. 2024).

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## ELIGIBLE DISTANT SITE

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*Last updated 02/27/2024*

### Live Video:

Submitting a claim for a telemedicine service is identical to the way a claim would be submitted for a face-to-face visit. Depending on the method of telemedicine used and the role of the provider in the consultation determines whether a modifier should be added to the procedure code. The role of the provider falls into three categories:

- Consulting Provider: Evaluates the patient and/or medical data/images using telemedicine mode of delivery upon recommendation of the referring provider.

NOTE: Manual is under review.

SOURCE: AK Dept. of Health and Social Svcs. Billing for Telemedicine Services. Section II: Professional Claims Management [listed under FQHC tab], Feb. 6, 2020, pg. 20, (Accessed Feb. 2024).

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## FACILITY FEE

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*Last updated 02/27/2024*

No facility fee for any entities.

See: AK Medicaid Live Video, Facility Transmission Fee

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## PPS RATE

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*Last updated 02/27/2024*

No reference found.

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## HOME ELIGIBLE

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*Last updated 02/27/2024*

Alaska Medicaid covers services provided away from the FQHC/RHC site in the following situations

- An FQHC physician, physician assistant, or advanced nurse practitioner providing services in a nursing facility

Services provided off-site are also covered when provided to a homebound recipient under the following conditions:

- The United States Department of Health and Human Services determines there is a shortage of home health agencies in the recipient's home community
- Services are provided by a registered nurse, a licensed practical nurse, or a licensed vocational nurse who is employed by or receives compensation for the services from the clinic
- Services are approved under a written plan of care
  - established by a supervising physician, physician assistant, or advanced nurse practitioner and reviewed every 60 days by a supervising physician
  - signed by the advanced nurse practitioner, physician assistant, or supervising physician
  - Services are limited as per 42 C.F.R. 405.2416(b-c)

Alaska Medicaid considers recipients homebound if they are confined to their home due to a medical or health condition. Recipients in inpatient hospitals or long-term care facilities are not considered homebound.

Note: Manual under review.

SOURCE: AK Dept. of Health and Social Services, FQHC/RHC, Services Provided Off Site (10/2017), (Accessed Feb. 2024).

The department will pay the following providers for the following home health services:

- a public or private organization that meets the requirements of (a) of this section may provide comprehensive home health services identified in 7 AAC 125.310(a);
- a rural health clinic or federally qualified health center enrolled under 7 AAC 140.200 may provide limited home health care services identified in 7 AAC 125.310(a)(2).

SOURCE: AK Admin Code Title 7, Sec. 125.300, (Accessed Feb. 2024).

Can a Tribal FQHC provide services off-site after February 11, 2025?

Please refer to telehealth regulations that were effective 9/1/2023

<https://aws.state.ak.us/OnlinePublicNotices/Notices/Attachment.aspx?id=142671>

SOURCE: AK Medicaid, FAQs on Tribal FQHCs, 2/12/24, (Accessed Feb. 2024).

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## PATIENT-PROVIDER RELATIONSHIP

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*Last updated 02/27/2024*

No reference found.