

Florida



At A Glance

MEDICAID REIMBURSEMENT

- Live Video: Yes
- Store-and-Forward: Yes
- Remote Patient Monitoring: Yes
- Audio Only: No

PRIVATE PAYER LAW

- Law Exists: Yes
- Payment Parity: No

PROFESSIONAL REQUIREMENTS

- Licensure Compacts: CC, NLC, PSY
- Consent Requirements: No

FQHCs

- Originating sites explicitly allowed for Live Video: No
- Distant sites explicitly allowed for Live Video: No
- Store and forward explicitly reimbursed: No
- Audio-only explicitly reimbursed: No
- Allowed to collect PPS rate for telehealth: No

STATE RESOURCES

1. Medicaid Program: Florida Medicaid
2. Administrator: Florida Dept. of Children and Families
3. Regional Telehealth Resource Center: Southeast Telehealth Resource Center

Private Payer

DEFINITIONS

Last updated 02/23/2024

“Telehealth” means the use of synchronous or asynchronous telecommunications technology by a telehealth provider to provide health care services, including, but not limited to, assessment, diagnosis, consultation, treatment, and monitoring of a patient; transfer of medical data; patient and professional health-related education; public health services; and health administration. The term does not include e-mail messages or facsimile transmissions.

SOURCE: FL Statute 456.47, (Accessed Feb. 2024).

REQUIREMENTS

Last updated 02/24/2024

Contracts between health insurers or health maintenance organizations and telehealth providers must be voluntary and must be voluntary between the health maintenance organization and the provider and must establish mutually acceptable payment rates or payment methodologies for services provided through telehealth. Any contract provision that distinguishes between payment rates or payment methodologies for services provided through telehealth and the same services provided without the use of telehealth must be initialed by the telehealth provider.

SOURCE: FL Statute 641.31 (45). & 627.42396. (Accessed Feb. 2024).

Effective January 1, 2024, the Division of State Group Insurance shall continue to allow service delivery through telehealth in its health benefits contracts.

SOURCE: FL Senate Bill 2500, (Accessed Feb. 2024).

PARITY

Last updated 02/23/2024

SERVICE PARITY

Insurers and providers must mutually agree on payment rates and payment methodologies for telehealth delivered services.

SOURCE: FL Statute 641.31 (45). & 627.42396. (Accessed Feb. 2024).

PAYMENT PARITY

Any contract provision that distinguishes between payment rates or payment methodologies for services provided through telehealth and the same services provided without the use of telehealth must be initialed by the telehealth provider.

SOURCE: FL Statute 641.31. & 641.42396. (Accessed Feb. 2024).

Medicaid

OVERVIEW

Last updated 02/23/2024

FL Medicaid reimburses for real time interactive telemedicine according to administrative code, however there is no indication of reimbursement in any Medicaid Manual. A recently released Medicaid notice to clarify Medicaid policy post-COVID public health emergency states that FL Medicaid will continue to cover store-and-forward and remote patient monitoring services, but will no longer cover audio-only telehealth services.

DEFINITIONS

Last updated 02/23/2024

Telemedicine is the practice of health care delivery by a practitioner who is in a site other than the site where a recipient is located, using interactive telecommunications equipment that minimally includes real time, two-way interactive communication between a recipient and a practitioner using audio and video equipment.

SOURCE: FL Medicaid, Alert, Ending of Federal Public Health Emergency: Updated Co-Payment and Telemedicine Guidance for Medical and Behavioral Health Providers, May 4, 2023, (Accessed Feb. 2024).

Telemedicine – The practice of health care delivery by a practitioner who is located at a site other than the site where a recipient is located for the purposes of evaluation, diagnosis, or treatment.

SOURCE: FL Admin Code 59G-1.057. (Accessed Feb. 2024).

Substance Abuse Services

“Telehealth” as defined in Section 456.47(1)(a), F.S.

“Telehealth” means the use of synchronous or asynchronous telecommunications technology by a telehealth provider to provide health care services, including, but not limited to, assessment, diagnosis, consultation, treatment, and monitoring of a patient; transfer of medical data; patient and professional health-related education; public health services; and health administration. The term does not include e-mail messages or facsimile transmissions.

SOURCE: FL Admin Code 65D-30.002 & FL Statute 456.47, (Accessed Feb. 2024).

Children’s Medical Services

Telemedicine is “the use of telecommunication and information technology to provide clinical care to individuals at a distance, and to transmit the information needed to provide that care.”

SOURCE: FL Admin Code 64C-8-001(6). (Accessed Feb. 2024).

LIVE VIDEO

Last updated 02/23/2024

POLICY

During the federal PHE, the Agency provided expansive coverage for telemedicine services. Effective May 11, 2023, Florida Medicaid will cover telehealth services in accordance with the Agency’s promulgated Telemedicine rule and will no longer cover audio-only telehealth services. Florida Medicaid will continue to cover store-and-forward and remote patient monitoring services.

As a reminder, Statewide Medicaid Managed Care (SMMC) plans may provide more expansive coverage than what is in Agency rule, including telemedicine and waiving co-payments. However, SMMC plans may not be more restrictive than Agency rule.

SOURCE: FL Medicaid, Alert, Ending of Federal Public Health Emergency: Updated Co-Payment and Telemedicine Guidance for Medical and Behavioral Health Providers, May 4, 2023, (Accessed Feb. 2024).

FL Medicaid reimburses for real time, two-way, interactive telemedicine.

Providers must include the GT modifier.

SOURCE: FL Admin Code 59G-1.057. (Accessed Feb. 2024).

ELIGIBLE SERVICES/SPECIALTIES

List of eligible community behavioral health services is provided in Provider Alert. See alert for procedure codes, modifiers and telemedicine modifiers.

SOURCE: FL Medicaid, Alert, Community Behavioral Health Telemedicine-Eligible Services, May 12, 2023, (Accessed Feb. 2024).

Florida Medicaid reimburses the practitioner who is providing the evaluation, diagnosis, or treatment recommendation located at a site other than where the recipient is located.

SOURCE: FL Admin Code 59G-1.057. (Accessed Feb. 2024).

Alcohol and/or drug screenings can be delivered with a telehealth place of service.

SOURCE: FL Medicaid Alert, Screening, Brief Intervention, and Referral to Treatment (SBIRT) Continuing Medical Education (CME) Opportunity for Providers, Apr. 13, 2023, (Accessed Feb. 2024).

ELIGIBLE PROVIDERS

Telemedicine is available for use by all providers of Florida Medicaid services that are enrolled in or registered with the Florida Medicaid program and who are licensed within their scope of practice to perform the service.

SOURCE: FL Admin Code 59G-1.057. (Accessed Feb. 2024).

ELIGIBLE SITES

Screening, Brief Intervention, and Referral to Treatment (SBIRT) Continuing Medical Education (CME) Opportunity for Providers

The place of service is open for office visits, telehealth, all hospital settings and clinics, and ambulatory surgical centers.

SOURCE: FL Medicaid, Alert, Screening, Brief Intervention, and Referral to Treatment (SBIRT) Continuing Medical Education (CME) Opportunity for Providers, July 7, 2023, (Accessed Feb. 2024).

GEOGRAPHIC LIMITS

No Reference Found

FACILITY/TRANSMISSION FEE

No Reference Found

STORE-AND-FORWARD

Last updated 02/23/2024

POLICY

Florida Medicaid will continue to cover store-and-forward and remote patient monitoring services.

SOURCE: FL Medicaid, Alert, Ending of Federal Public Health Emergency: Updated Co-Payment and Telemedicine Guidance for Medical and Behavioral Health Providers, May 4, 2023, (Accessed Feb. 2024).

ELIGIBLE SERVICES/SPECIALTIES

No Reference Found

GEOGRAPHIC LIMITS

No Reference Found

TRANSMISSION FEE

No Reference Found

REMOTE PATIENT MONITORING

Last updated 02/23/2024

POLICY

Florida Medicaid will continue to cover store-and-forward and remote patient monitoring services.

SOURCE: FL Medicaid, Alert, Ending of Federal Public Health Emergency: Updated Co-Payment and Telemedicine Guidance for Medical and Behavioral Health Providers, May 4, 2023, (Accessed Feb. 2024).

Subject to the availability of funds and subject to any limitations or directions provided in the General Appropriations Act, the agency must provide coverage for a continuous glucose monitor under certain circumstances.

SOURCE: FL Statute Sec. 409.9063, (Accessed Feb. 2024).

CONDITIONS

Subject to the availability of funds and subject to any limitations or directions provided in the General Appropriations Act, the agency must provide coverage for a continuous glucose monitor under the Medicaid pharmacy benefit for the treatment of a Medicaid recipient if:

- The recipient has been diagnosed by his or her primary care physician, or another licensed health care practitioner authorized to make such diagnosis, with Type 1 diabetes, Type 2 diabetes, gestational diabetes, or any other type of diabetes that may be treated with insulin; and
- A health care practitioner with the applicable prescribing authority has prescribed insulin to treat the recipient's diabetes and a continuous glucose monitor to assist the recipient and practitioner in managing the recipient's diabetes.

SOURCE: FL Statute Sec. 409.9063, (Accessed Feb. 2024).

PROVIDER LIMITATIONS

No Reference Found

OTHER RESTRICTIONS

Coverage under this section includes the cost of any necessary repairs or replacement parts for the continuous glucose monitor.

To qualify for continued coverage under this section, the Medicaid recipient must participate in follow-up care with his or her treating health care practitioner, in person or through telehealth, at least once every 6 months during the first 18 months after the first prescription of the continuous glucose monitor for the recipient has been issued under this section, to assess the efficacy of using the monitor for treatment of his or her diabetes. After the first 18 months, such follow-up care must occur at least once every 12 months.

SOURCE: FL Statute Sec. 409.9063, (Accessed Feb. 2024).

EMAIL, PHONE & FAX

Last updated 02/23/2024

Florida Medicaid will cover telehealth services in accordance with the Agency's promulgated Telemedicine rule and will no longer cover audio-only telehealth services.

SOURCE: FL Medicaid, Alert, Ending of Federal Public Health Emergency: Updated Co-Payment and Telemedicine Guidance for Medical and Behavioral Health Providers, May 4, 2023, (Accessed Feb. 2024).

No reimbursement for telephone, chart review, electronic mail messages or facsimile transmissions.

SOURCE: FL Admin Code 59G-1.057. (Accessed Feb. 2024).

CONSENT REQUIREMENTS

Last updated 02/23/2024

No Reference Found

OUT OF STATE PROVIDERS

Last updated 02/23/2024

No Reference Found

MISCELLANEOUS

Last updated 02/23/2024

Substance Abuse Services – Telehealth

Providers shall maintain policies and procedures outlining how they will provide services through telehealth as described in subsection 65D-30.003(1), F.A.C.

Providers delivering services through telehealth shall provide the service to the same extent the service would be delivered if provided through an in-person service delivery with a provider.

Providers delivering any services by telehealth are responsible for the quality of the equipment and technology employed. Providers are responsible for its safe use. Providers utilizing telehealth equipment and technology must be able meet or exceed the prevailing standard of care. Service providers must meet the following additional requirements:

Must be capable of two (2)-way, real-time electronic communication, and the security of the technology must be in accordance with applicable federal confidentiality regulations 45 CFR §164.312;

The interactive telecommunication equipment must include audio and high-resolution video equipment which allows the staff providing the service to clearly understand and view the individual receiving services;

SOURCE: FL Admin Code Sec. 65D-30.004. (Accessed Feb. 2024).

No reimbursement for equipment used to provide telemedicine services.

SOURCE: FL Admin Code 59G-1.057. (Accessed Feb. 2024).

Telehealth Minority Maternity Care Pilot Programs

By July 1, 2022, the department shall establish a telehealth minority maternity care pilot program in Duval County and Orange County which uses telehealth to expand the capacity for positive maternal health outcomes in racial and ethnic minority populations. The department shall direct and assist the county health departments in Duval County and Orange County to implement the programs. The pilot programs shall adopt the use of telehealth or coordinate with prenatal home visiting programs to provide services and education to eligible pregnant women up to the last day of their postpartum periods and provide training to participating health care practitioners and other perinatal professionals.

SOURCE: FL Statute 383.2163. (Accessed Feb. 2024).

Early Learning Mental Health Assistance Program

Contracts or interagency agreements with one or more local community behavioral health providers or providers of Community Action Team services to provide a behavioral health staff presence and services at district schools. Services may include, but are not limited to, mental health screenings and assessments, individual counseling, family counseling, group counseling, psychiatric or psychological services, trauma-informed care, mobile crisis services, and behavior modification. These behavioral health services may be provided on or off the school campus and may be supplemented by telehealth as defined in s. 456.47(1).

Policies of the school district which must require that in a student crisis situation, school or law enforcement personnel must make a reasonable attempt to contact a mental health professional who may initiate an involuntary examination pursuant to s. 394.463, unless the child poses an imminent danger to themselves or others, before initiating an involuntary examination pursuant to s. 394.463. Such contact may be in person or through telehealth. The mental health professional may be available to the school district either by a contract or interagency agreement with the managing entity, one or more local community-based behavioral health providers, or the local mobile response team, or be a direct or contracted school district employee.

SOURCE: FL Statute Sec. 1006.041. (Accessed Feb. 2024).

Professional Requirements

DEFINITIONS

Last updated 02/23/2024

“Telehealth” means the use of synchronous or asynchronous telecommunications technology by a telehealth provider to provide health care services, including, but not limited to, assessment, diagnosis, consultation, treatment, and monitoring of a patient; transfer of medical data; patient and professional health-related education; public health services; and health administration. The term does not include e-mail messages or facsimile transmissions.

SOURCE: FL Statute 456.47, (Accessed Feb. 2024).

Substance Abuse Services

“Telehealth” as defined in Section 456.47(1)(a), F.S. (see above).

SOURCE: FL Admin Code 65D-30.002, (Accessed Feb. 2024).

Children’s Medical Services

“Telemedicine” means “the use of telecommunication and information technology to provide clinical care to individuals at a distance and to transmit the information needed to provide that care.

SOURCE: FL Admin Code 64C-8.001. (Accessed Feb. 2024).

Professional Counselor Licensure Compact

“Telehealth” means the application of telecommunication technology to deliver professional counseling services remotely to assess, diagnose, and treat behavioral health conditions.

SOURCE: FL Statute 491.017 (Article II (25)). (Accessed Feb. 2024).

CONSENT REQUIREMENTS

Last updated 02/23/2024

No Reference Found

ONLINE PRESCRIBING

Last updated 02/23/2024

A telehealth provider may use telehealth to perform a patient evaluation. If a telehealth provider conducts a patient evaluation sufficient to diagnose and treat the patient, the telehealth provider is not required to research a patient’s medical history or conduct a physical examination of the patient before using telehealth to provide health care services to the patient.

A telehealth provider may not use telehealth to prescribe a controlled substance listed in Schedule II of s. 893.03 unless the controlled substance is prescribed for the following:

1. The treatment of a psychiatric disorder;
2. Inpatient treatment at a hospital licensed under chapter 395;
3. The treatment of a patient receiving hospice services as defined in s. 400.601; or
4. The treatment of a resident of a nursing home facility as defined in s. 400.021.

SOURCE: FL Statute 456.47. (Accessed Feb. 2024).

Only a physician may perform or induce a termination of pregnancy. A physician may not use telehealth as defined in s. 456.47 to perform an abortion, including, but not limited to, medical abortions. Any medications intended for use in a medical abortion must be dispensed in person by a physician and may not be dispensed through the United States Postal Service or by any other courier or shipping service.

SOURCE: FL Statute Sec. 390.011, (Accessed Feb. 2024).

Medical Marijuana

A qualified physician may issue a physician certification only if the qualified physician:

- Conducted an examination of the patient and a full assessment of the medical history of the patient. Before issuing an initial certification to a patient, the qualified physician must conduct an in-person physical examination of the patient. For certification renewals, a qualified physician who has issued a certification to a patient after conducting an in-person physical examination may conduct subsequent examinations of that patient through telehealth as defined in s. 456.47. For the purposes of this subparagraph, the term “in-person physical examination” means an examination conducted by a qualified physician while the physician is physically present in the same room as the patient. (see statute for more requirements).

A qualified physician must evaluate an existing qualified patient at least once every 30 weeks before issuing a new physician certification. A qualified physician who has issued a certification to the patient after conducting an in-person physical examination as defined in subparagraph (a)1. may conduct the evaluation through telehealth as defined in s. 456.47. A physician must:

- Determine if the patient still meets the requirements to be issued a physician certification under paragraph (a).
- Identify and document in the qualified patient’s medical records whether the qualified patient experienced either of the following related to the medical use of marijuana:
 - An adverse drug interaction with any prescription or nonprescription medication; or
 - A reduction in the use of, or dependence on, other types of controlled substances as defined in s. 893.02.
- Submit a report with the findings required pursuant to subparagraph 2. to the department. The department shall submit such reports to the Consortium for Medical Marijuana Clinical Outcomes Research established pursuant to s. 1004.4351.

SOURCE: FL Statute Sec. 381.986, (Accessed Feb. 2024).

CROSS-STATE LICENSING

Last updated 02/24/2024

A health care professional not licensed in this state may provide health care services to a patient located in this state using telehealth if the health care professional registers with the applicable board, or the department if there is no board, and provides health care services within the applicable scope of practice established by Florida law or rule.

The board, or the department if there is no board, shall register a health care professional not licensed in this state as a telehealth provider if the health care professional: See law for specific provider requirements.

A provider registered under this subsection shall maintain professional liability coverage or financial responsibility, that includes coverage or financial responsibility for telehealth services provided to patients not located in the provider's home state, in an amount equal to or greater than the requirements for a licensed practitioner under s. 456.048, s. 458.320, or s. 459.0085, as applicable.

A health care professional registered under this subsection may not open an office in this state and may not provide in-person health care services to patients located in this state.

A pharmacist registered under this subsection may only use a pharmacy permitted under chapter 465, a nonresident pharmacy registered under s. 465.0156, or a nonresident pharmacy or outsourcing facility holding an active permit pursuant to s. 465.0158 to dispense medicinal drugs to patients located in this state.

A health care professional who is not licensed to provide health care services in this state but who holds an active license to provide health care services in another state or jurisdiction, and who provides health care services using telehealth to a patient located in this state, is not subject to the registration requirement under this section if the services are provided:

- In response to an emergency medical condition as defined in s. 395.002; or
- In consultation with a health care professional licensed in this state who has ultimate authority over the diagnosis and care of the patient.

SOURCE: FL Statute 456.47, (Accessed Feb. 2024).

The out-of-state telehealth provider registration is for health care practitioners licensed outside of Florida ONLY. Florida licensees can already provide telehealth services to patients in Florida that they can treat in person.

Health care practitioners with an out-of-state license or certification that falls under section 456.47(1)(b), F.S, qualify for an out-of-state telehealth provider registration number when they meet the following requirements: See webpage for requirements.

SOURCE: Florida Board of Medicine. (Accessed Feb. 2024).

FAQs related to out-of-state telehealth providers can be found on the FL Health Source website.

LICENSURE COMPACTS

Last updated 02/23/2024

Member of the Nurses Licensure Compact.

SOURCE: Current NLC States & Status. Nurse Licensure Compact. (Accessed Feb. 2024).

Member of the Counseling Compact.

SOURCE: Counseling Compact Map. (Accessed Feb. 2024).

Psychology Interjurisdictional Compact.

SOURCE: PSYPACT, Map, (Accessed Feb. 2024).

* See Compact websites for implementation and license issuing status and other related requirements.

PROFESSIONAL BOARDS STANDARDS

Last updated 02/24/2024

Health Professional Telehealth Practice Standards and Related Requirements

SOURCE: FL Statute 456.47. (Accessed Feb. 2024).

Florida Department of Health Telehealth Frequently Asked Questions

SOURCE: FL Department of Health. Telehealth FAQs. (Accessed Feb. 2024).

MISCELLANEOUS

Last updated 02/23/2024

Mental health and substance abuse facilities are authorized to release individuals subject to involuntary examination upon documented approval of a provider. The release may be approved through telehealth.

SOURCE: FL Statute 394.463(2)(f) (Accessed Feb. 2024).

Federally Qualified Health Center (FQHC)

DEFINITION OF VISIT

Last updated 02/23/2024

Encounter: A face-to-face contact between a recipient and a health care professional who exercises independent judgment in the provision of health services to the individual recipient. For a health service to be defined as an encounter, the provision of the health service shall be recorded in the recipient's record and completed on site.

Categorically, encounters are:

1. An encounter between a physician and a recipient during which medical services are provided for the prevention, diagnosis, treatment, and rehabilitation of illness or injury.
2. Midlevel practitioner. An encounter between an advanced registered nurse practitioner (ARNP) or a physician's assistant (PA) and a recipient when the ARNP or PA exercises independent judgement in providing health services
3. An encounter between a dentist and a recipient for the purpose of prevention, assessment, or treatment of a dental problem, including restoration.
4. Mental Health. An encounter between a licensed psychologist or licensed clinical social worker and recipient for the diagnosis and treatment of mental illness.

SOURCE: Florida FQHC and RHC Reimbursement Plan. July 1, 2014. (Accessed Feb. 2024).

MODALITIES ALLOWED

Last updated 02/23/2024

Live Video

No explicit reference to telehealth for FQHCs/RHCs.

Generally, FL Medicaid reimburses for real time, two-way, interactive telemedicine.

See: FL Medicaid Live Video

Store and Forward

A Medicaid notice indicates store-and-forward is covered, however no explicit reference is made for FQHCs.

See: FL Medicaid Store-and-Forward.

Remote Patient Monitoring

A Medicaid notice indicates remote patient monitoring is covered, however no explicit reference is made for FQHCs.

See: FL Medicaid RPM

Audio-Only

No reimbursement for telephone, chart review, e-mail or fax.

See: FL Medicaid Email, Phone, & Fax

SAME DAY ENCOUNTERS

Last updated 02/23/2024

Florida Medicaid reimburses for services provided through the fee-for-service delivery system at an encounter rate. Providers may be reimbursed for up to one medical, one dental, and one behavioral health visit provided to a recipient on the same day.

SOURCE: FL Admin Code 59G-4.100. (Accessed Feb. 2024).

Medicaid reimburses up to three encounters per day, per recipient for the following:

- Adult health screenings
- Behavioral health
- Child Health Check-Up screenings
- Chiropractic
- Dental
- Family planning

- Immunizations
- Medical primary care
- Prenatal care and obstetric care
- Optometric
- Podiatry
- Registered nurse services

This service is one of the minimum covered services for all Managed Medical Assistance plans serving Medicaid enrollees.

SOURCE: AHCA FL Medicaid's Covered Services and HCBS Waivers – FQHC Services. (Accessed Feb. 2024).

ELIGIBLE ORIGINATING SITE

Last updated 02/23/2024

No Reference Found.

ELIGIBLE DISTANT SITE

Last updated 02/23/2024

No Reference Found.

FACILITY FEE

Last updated 02/23/2024

No Reference Found.

PPS RATE

Last updated 02/23/2024

No explicit reference to telehealth found.

Florida Medicaid reimburses for services provided through the fee-for-service delivery system at an encounter rate. Costs relating to the following services are excluded from the encounter rate: Ambulance services; Home health services; WIC certifications and recertifications; Any health care services rendered away from the center, at a hospital, or a nursing home. (These services include off- site radiology services and off- site clinical

laboratory services. However, the health care rendered away from the center may be billed under other Florida Medicaid programs, if eligible.)

SOURCE: FL Admin Code 59G-4.100, & Florida FQHC and RHC Reimbursement Plan. July 1, 2014. (Accessed Feb. 2024).

Medicaid reimburses for ambulatory primary care health care and related diagnostic services to a medically underserved population.

Medicaid reimburses up to three encounters per day, per recipient for the following:

- Adult health screenings
- Behavioral health
- Child Health Check-Up screenings
- Chiropractic
- Dental
- Family planning
- Immunizations
- Medical primary care
- Prenatal care and obstetric care
- Optometric
- Podiatry
- Registered nurse services

This service is one of the minimum covered services for all Managed Medical Assistance plans serving Medicaid enrollees.

SOURCE: AHCA FL Medicaid's Covered Services and HCBS Waivers – FQHC Services. (Accessed Feb. 2024).

HOME ELIGIBLE

Last updated 02/23/2024

No Reference Found.

PATIENT-PROVIDER RELATIONSHIP

Last updated 02/23/2024

No Reference Found.

For general information about prescribing see: Florida Professional Requirements Online Prescribing