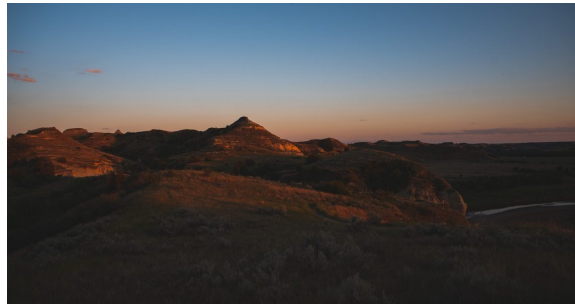


North Dakota



At A Glance

MEDICAID REIMBURSEMENT

- Live Video: Yes
- Store-and-Forward: Yes
- Remote Patient Monitoring: Yes
- Audio Only: Yes

PRIVATE PAYER LAW

- Law Exists: Yes
- Payment Parity: No

PROFESSIONAL REQUIREMENTS

- Licensure Compacts: CC, APRN, EMS, IMLC, NLC, PSY, PTC
- Consent Requirements: Yes

FQHCs

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

STATE RESOURCES

1. Medicaid Program: North Dakota Medicaid
2. Administrator: North Dakota Dept. of Human Services
3. Regional Telehealth Resource Center: Great Plains Telehealth Resource and Assistance Center

Private Payer

DEFINITIONS

Last updated 02/19/2024

Telehealth:

- Means the use of interactive audio, video or other telecommunications technology that is used by a health care provider or health care facility at a distant site to deliver health services at an originating site and that is delivered over a secure connection that complies with the requirements of state and federal laws.
- Includes the use of electronic media for consultation relating to the health care diagnosis or treatment of a patient in real-time or through the use of store-and-forward technology.
- Does not include the use of electronic mail, facsimile transmissions, or audio-only unless for the purpose of e-visits or a virtual check-in.

SOURCE: ND Century Code Sec. 26.1-36-09.15(1)(g). p. 20 (Accessed Feb. 2024).

REQUIREMENTS

Last updated 02/19/2024

An insurer may not deliver, issue, execute, or renew a policy that provides health benefits coverage unless that policy provides coverage for health services delivered by means of telehealth which is the same as the coverage for health services delivered by in-person means.

A policy is not required to provide coverage for health services that are not medically necessary, subject to the terms and conditions of the policy.

SOURCE: ND Century Code Sec. 26.1-36-09.15. p. 21 (Accessed Feb. 2024).

Telehealth. The organization may pay for audio and video telecommunications instead of a face-to-face “hands on” appointment for CPT codes designated by the American medical association as telehealth codes. As a condition of payment, the patient must be present and participating in the telemedicine appointment. The professional fee payable is equal to the fee schedule amount for the service provided. The organization may pay the originating site a facility fee at the scheduled amount.

SOURCE: ND Admin. Code 92-01-02-34 (3d) p. 34 (Accessed Feb. 2024).

Insurance carriers must start or continue to provide covered services via telehealth visits. These services include, but are not limited to the following:

- Office visits for patients
- Physical therapy plan evaluation
- Occupational therapy plan evaluation
- Speech therapy plane valuation
- Behavioral health and substance use disorder treatment
- Diabetes Education
- Nutrition Counseling.

In addition to traditional telehealth services carriers must expand telehealth under the CMS guidance and now offer coverage for e-visits and virtual check-ins. Insurance carriers shall establish reasonable requirements for the coverage of these virtual check-ins and e-visits in accordance with the guidance issued by CMS on March 17, 2020. See bulletin for required codes.

SOURCE: ND Insurance Department. Bulletin 2021-1. June 2, 2021, Expansion of Telehealth Services, (Accessed Feb. 2024).

Comprehensive medication management services may be provided via telehealth as defined in section 26.1 – 36 – 09.15 and may be delivered into an enrollee’s residence.

SOURCE: ND Statute Sec. 26.1.11-02 (Accessed Feb. 2024).

PARITY

Last updated 02/19/2024

SERVICE PARITY

An insurer may not deliver, issue, execute, or renew a policy that provides health benefits coverage unless that policy provides coverage for health services delivered by means of telehealth which is the same as the coverage for health services delivered by in-person means.

Payment or reimbursement of expenses for covered health services delivered by means of telehealth under this section may be established through negotiations conducted by the insurer with the health services providers in the same manner as the insurer establishes payment or reimbursement of expenses for covered health services that are delivered by in-person means.

This section does not require:

- a. A policy to provide coverage for health services that are not medically necessary, subject to the terms and conditions of the policy;
- b. A policy to provide coverage for health services delivered by means of telehealth if the policy would not provide coverage for the health services if delivered by in-person means;
- c. A policy to reimburse a health care provider or health care facility for expenses for health services delivered by means of telehealth if the policy would not reimburse that health care provider or health care facility if the health services had been delivered by in-person means; or
- d. A health care provider to be physically present with a patient at the originating site unless the health care provider who is delivering health services by means of telehealth determines the presence of a health care provider is necessary.

SOURCE: ND Century Code Sec. 26.1-36-09.15(2)(3) & (5). p. 21 (Accessed Feb. 2024).

Insurance carriers must start or continue to provide covered services via telehealth visits. These services include, but are not limited to the following:

- Office visits for patients
- Physical therapy plan evaluation
- Occupational therapy plan evaluation
- Speech therapy plane valuation
- Behavioral health and substance use disorder treatment
- Diabetes Education
- Nutrition Counseling.

In addition to traditional telehealth services carriers must expand telehealth under the CMS guidance and now offer coverage for e-visits and virtual check-ins. Insurance carriers shall establish reasonable requirements for the coverage of these virtual check-ins and e-visits in accordance with the guidance issued by CMS on March 17, 2020. See bulletin for required codes.

SOURCE: ND Insurance Department. Bulletin 2021-1. June 2, 2021, Expansion of Telehealth Services, (Accessed Feb. 2024).

PAYMENT PARITY

No explicit payment parity. See above 'coverage parity' section for text regarding payment or reimbursement of expenses being negotiated by the insurer.

Medicaid

OVERVIEW

Last updated 11/15/2023

North Dakota reimburses for live video telemedicine for most services, with a few exceptions.

They provide reimbursement for store-and-forward through online digital evaluation and management services in specific circumstances. Asynchronous teledentistry is required to be covered by a recently passed legislation, and recently incorporated into the dental provider manual.

Home health telemonitoring is covered though not much detail is provided.

Audio-only is allowed for established patients through Dec. 31, 2024.

DEFINITIONS

Last updated 02/19/2024

Digital Health consists of online digital evaluation and management (E/M) services which are patient-initiated services with health care professionals. These are not real time services. Patients initiate services through HIPAA-compliant secure platforms which allow digital communication with the health care professional. Online digital evaluation and management services are for established patients only. These services do not include nonevaluative electronic communications of test results, scheduling of appointments, or other communication that does not include evaluation and management.

Synchronous Telehealth is two-way, real-time interactive communication between a patient and their health care provider using technology such as interactive video/television, audio/visual secure online digital portals, and videoconferencing. Synchronous telehealth involves two collaborating sites: an "originating site" and a "distant site." The patient is located at the originating site and the health care professional is located at the distant site.

Telehealth is an umbrella term which includes digital health and synchronous two-way real-time interactive audio/visual services. It does not include store and forward services.

SOURCE: ND Div. of Medical Assistance, Telehealth, (Jan. 2024), (Accessed Feb. 2024).

Synchronous teledentistry (D9995) is delivery of patient care and education where there is live, two-way interaction between the patient and at least one dental, medical, or health caregiver at one physical location and an overseeing supervising or consulting dentist or dental provider at another location.

SOURCE: North Dakota Human Services Dental Manual, Teledentistry, pg. 12-13 (Jan. 2024) & North Dakota Department of Human Services: Teledentistry Policy. (July 2023), (Accessed Feb. 2024).

The communication is real-time and continuous between all participants who are working together as a group. Synchronous teledentistry must use both audio and visual means. The totality of the communication of the information exchanged between the providers or others and the member during the synchronous teledentistry service must be of an amount and nature that would be sufficient to meet the key components and/or requirements of the same service when rendered via an in-person interaction.

SOURCE: North Dakota Department of Human Services: Teledentistry Policy. (July 2023), (Accessed Feb. 2024).

LIVE VIDEO

Last updated 02/19/2024

POLICY

All qualified telehealth services must:

- Meet the same standard of care as in-person care.
- Be medically appropriate and necessary with supporting documentation included in the patient's clinical medical record.
- Be provided via secure and appropriate equipment to ensure confidentiality and quality in the delivery of the service. The service must be provided using a HIPAA-compliant platform.
- Use appropriate coding as noted in the following tables. Health care professionals must follow CPT®/HCPCS coding guidelines.

SOURCE: ND Div. of Medical Assistance, Telehealth, (Jan. 2024), (Accessed Feb. 2024).

ELIGIBLE SERVICES/SPECIALTIES

ND Medicaid covered codes are published here: [Telehealth Covered Services](#) [unable to locate list on this page].

See excel document of Telehealth Covered Services in Telehealth Policies section on Manuals Webpage.

Institutional Claims:

- Applicable Revenue Codes(s): 780 – Telehealth – facility charges related to the use of telehealth.
- Applicable Modifiers:
 - GT or 95: Via interactive audio and video telecommunication systems. Billed by performing health care professional for real-time interaction between the professional and the patient who is located at a distant site from the reporting professional. Modifiers are not required for Medicare primary claims

Services that are not covered:

- Store and forward (G2010)
- Virtual check-in (G2012)
- Interprofessional Services
- Digital Assessment and Management Services

SOURCE: ND Div. of Medical Assistance, Telehealth, (Jan. 2024), (Accessed Feb. 2024).

Dentistry

Teledentistry code D9995 or D9996 is required when billing ND Medicaid. Service authorization is not required. See manual for covered services.

Patient records must include the CDT® Code(s) that reflect the teledentistry encounter. The claim submission must include all applicable CDT® codes. ND Medicaid will reimburse CDT® code D9995 or D9996 once per date of service. Claim submissions must be billed using place of service (POS)/place of treatment codes:

- 02 Teledentistry provided in a location other than the patient's home.
- 10 Telehealth provided in patient's home.

Claims with any other place of service will be denied.

Non Covered Services

- Examinations via online/email/electronic communication
- Patient contact with dentist who provides the consultation using audio means only (no visual component)
- Virtual check-in

SOURCE: North Dakota Human Services Dental Manual, Teledentistry, pg. 12-13 (Jan. 2024), (Accessed Feb. 2024).

Medicaid Services Rendered in Schools

Health Services billed by schools can be delivered via telehealth; however, no originating site fee is allowed. See Telehealth policy for additional information.

SOURCE: ND Div. of Medical Assistance, School Based Medicaid, p.6, (Jan. 2024), (Accessed Feb. 2024).

Home Health Services

A face-to-face encounter for the initial ordering of home health services, must occur no more than 90 days before or 30 days after the start of home health services. Face-to face encounters: ...

- May be performed via telehealth or in-person, telephone encounters are insufficient.

SOURCE: ND Div. of Medical Services, Home Health and Private Duty Nursing, (Jan. 2024), (Accessed Feb. 2024).

Behavioral Health

Behavioral Health Manual indicates codes that can be delivered via telehealth.

SOURCE: ND Div. of Medical Assistance, Behavioral Health, (Jan. 2024), (Accessed Feb. 2024).

Substance Use Disorder

Substance use manual indicates codes that can be delivered via telehealth.

Telehealth coverage for partial hospitalization is limited to 50% or 10 hours of the weekly 20 hours of structured programming requirement.

SOURCE: ND Div. of Medical Assistance, Substance Use Disorder, (Jan. 2024), (Accessed Feb. 2024).

Pharmacy Manual

Medication Therapy Management (MTM) services: Face-to-Face (including telehealth) visit is required for new patients (CPT 99605).

Allowed for Reimbursement:

- Synchronous telehealth visits with real-time audio/visual conferencing

SOURCE: ND Medicaid Pharmacy Medical Billing Manual, Dec. 2023, (Accessed Feb. 2024).

1915(I) Medicaid State Plan Amendment Home and Community Based Behavioral Health Services

Remote service delivery is allowable as specified within each service. Remote support/telehealth limits, codes, and modifiers are available at https://www.hhs.nd.gov/sites/www/files/documents/1915i/1915i%20Codes.Rates__Limits.pdf

SOURCE: ND Medicaid, 1915(I) Medicaid State Plan Amendment Home and Community Based Behavioral Health Services, Jan. 2024, (Accessed Feb. 2024).

ELIGIBLE PROVIDERS

Payment will be made only to the distant health care professional during the telehealth session. No payment is allowed to a professional at the originating site if their sole purpose is the presentation of the patient to the professional at the distant site

Telehealth services provided by an Indian Health Service (IHS) facility or a Tribal 638 Clinic functioning as the distant site, are reimbursed at the All-Inclusive Rate (AIR), regardless of whether the originating site is outside the “four walls” of the facility or clinic.

Revenue code 0780 should only be reported along with Q3014 when the FQHC is the originating site. When providing telehealth services to patients located in their homes or another facility, FQHCs and RHCs should continue to bill the revenue codes listed in the FQHC and RHC portions of this manual along with the CPT® or HCPCS code for the service rendered appended with modifier GT or 95.

Refer to the FQHC and RHC portions of this manual for the revenue codes to bill for the various services.

SOURCE: ND Div. of Medical Assistance, Telehealth, (Jan. 2024), (Accessed Feb. 2024).

FQHCs and RHCs – Dentistry

Revenue code 0780 should only be reported along with Q3014 when the FQHC is the originating site. When providing teledentistry services to patients located in their homes

or another facility, FQHCs and RHCs should continue to bill the revenue code listed below along with the CDT® code for the service rendered appended with modifier GT or 95.

Revenue Code 512: Dental Clinic.

One dental encounter is allowed per day. The encounter must be a face to face encounter to qualify for payment. Asynchronous teledentistry performed as a stand-alone service does not qualify for an encounter payment. At least one covered service must be performed as a face to face service to qualify for the dental encounter payment.

SOURCE: North Dakota Human Services Dental Manual, Teledentistry, pg. 12-13 (Jan. 2024), (Accessed Feb. 2024).

Indian Health Services

Coverage and payment of services provided through telehealth is on the same basis as those provided through face-to-face contact.

SOURCE: ND Div. of Medical Assistance, General Information Provider Manual, (Jan. 2024), (Accessed Feb. 2024).

ELIGIBLE SITES

POS listed:

- 02: Telehealth provided in a location other than the patient's home.
- 10: Telehealth provided in patient's home

Payment will be made only to the distant health care professional during the telehealth session. No payment is allowed to a professional at the originating site if their sole purpose is the presentation of the patient to the professional at the distant site

SOURCE: ND Div. of Medical Assistance, Telehealth, (Jan. 2024), (Accessed Feb. 2024).

Dentistry

Claim submissions must be billed using place of service (POS)/place of treatment codes:

- 02 Teledentistry provided in a location other than the patient's home.
- 10 Telehealth provided in patient's home.

Claims with any other place of service will be denied.

FQHCs and RHCs – Dentistry

Revenue code 0780 should only be reported along with Q3014 when the FQHC is the originating site. When providing teledentistry services to patients located in their homes or another facility, FQHCs and RHCs should continue to bill the revenue code listed below along with the CDT® code for the service rendered appended with modifier GT or 95.

Revenue Code 512: Dental Clinic.

One dental encounter is allowed per day. The encounter must be a face to face encounter to qualify for payment. Asynchronous teledentistry performed as a stand-alone service does not qualify for an encounter payment. At least one covered service must be performed as a face to face service to qualify for the dental encounter payment.

SOURCE: North Dakota Human Services Dental Manual, Teledentistry, pg. 12-13 (Jan. 2024), (Accessed Feb. 2024).

Teledentistry

Claim submissions must be billed using place of service (POS)/place of treatment codes:

- 02 Teledentistry provided in a location other than the patient's home.
- 10 Telehealth provided in patient's home.

Claims with any other place of service will be denied.

Place of Service code 02 or 10 is recorded in Box # 38 on the claim form or electronic equivalent.

Federally Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs) – Revenue code 0780 should only be reported along with Q3014 when the FQHC is the originating site. When providing teledentistry services to patients located in their homes or another facility, FQHCs and RHCs should continue to bill the revenue code listed below along with the CDT® code for the service rendered appended with modifier GT or 95.

Revenue Code 521: Clinic visit by member to RHC/FQHC.

One dental encounter is allowed per day. The encounter must be a face to face encounter to qualify for payment. Asynchronous teledentistry performed as a stand-alone service does not qualify for an encounter payment. At least one covered service must be performed as a face to face service to qualify for the dental encounter payment.

SOURCE: North Dakota Department of Human Services: Teledentistry Policy. (July 2023), (Accessed Feb. 2024).

Pharmacy Manual

For services delivered via synchronous telehealth:

- Both the origination site (where the member is located) and the distant site (where the provider is located) must meet the geographic location, privacy, and space requirements outlined above
- Provider is responsible for supplying audio and video equipment permitting two-way, real-time interactive communication between the origination and distant sites

SOURCE: ND Medicaid Pharmacy Medical Billing Manual, Dec. 2023, (Accessed Feb. 2024).

GEOGRAPHIC LIMITS

No Reference Found

FACILITY/TRANSMISSION FEE

Q3014 is allowed: Telehealth originating site facility fee (If applicable. Cannot be billed if patient is outside of the healthcare facility, or for digital health services).

* HCPCS Code Q3014 must be billed in conjunction with Revenue Code 780 to indicate the originating site facility fee.

Payment will be made to the originating site as a facility fee only in the following places of service office, inpatient hospital, outpatient hospital, or skilled nursing facility/nursing facility. There is no additional payment for equipment, technicians, or other technology or personnel utilized in the performance of the telehealth service.

Payment is made for services provided by licensed professionals enrolled with ND Medicaid within their licensed scope of practice only. All service limits set by ND Medicaid apply to telehealth services.

SOURCE: ND Div. of Medical Assistance, Telehealth, (Jan. 2024), (Accessed Feb. 2024).

Teledentistry

Federally Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs) – Revenue code 0780 should only be reported along with Q3014 when the FQHC is the originating site. When providing teledentistry services to patients located in their homes or another

facility, FQHCs and RHCs should continue to bill the revenue code listed below along with the CDT© code for the service rendered appended with modifier GT or 95.

SOURCE: North Dakota Department of Human Services: Teledentistry Policy. (July 2023) & North Dakota Human Services Dental Manual, Teledentistry, pg. 12-13 (Jan. 2024), (Accessed Feb. 2024).

Medicaid Services Rendered in Schools

Health Services billed by schools can be delivered via telehealth; however, no originating site fee is allowed. See Telehealth policy for additional information.

SOURCE: ND Div. of Medical Assistance, School Based Medicaid, p.6, (Jan. 2024), (Accessed Feb. 2024).

STORE-AND-FORWARD

Last updated 11/15/2023

POLICY

Digital Health consists of online digital evaluation and management (E/M) services which are patient-initiated services with health care professionals. These are not real time services. Patients initiate services through HIPAA-compliant secure platforms which allow digital communication with the health care professional. Online digital evaluation and management services are for established patients only. These services do not include nonevaluative electronic communications of test results, scheduling of appointments, or other communication that does not include evaluation and management.

SOURCE: ND Div. of Medical Assistance, Telehealth, (Jan. 2024), (Accessed Feb. 2024).

Teledentistry

Asynchronous (store-and-forward) teledentistry (D9996) is the transmission of recorded health information (i.e., radiographs, photographs, digital impressions) through a HIPAA compliant electronic communications system to a practitioner, who uses the information to evaluate a patient's condition or render a service outside of a real-time or live interaction.

SOURCE: North Dakota Human Services Dental Manual, Teledentistry, pg. 12-13 (Jan. 2024), (Accessed Feb. 2024). & North Dakota Department of Human Services: Teledentistry Policy. (July 2023), (Accessed Feb. 2024).

Medical assistance coverage must include payment for the following services: ...

- Asynchronous teledentistry to reduce barriers to dental care through outreach programs and to integrate oral health into general health care settings to identify and refer treatment needs.

SOURCE: ND Statute Sec. 50-24.1-45 (Accessed Feb. 2024).

ELIGIBLE SERVICES/SPECIALTIES

Digital Health Evaluation and Management Services

Cumulative online digital evaluation and management (E/M) services occurring within a seven-day period beginning with the health care professional's review of the patient-generated inquiry. Included services not separately billable:

- For the same or a related problem within seven days of a previous E/M service,
- Related to a surgical procedure occurring within the postoperative period of a previously completed procedure,
- Any subsequent online communication that does not include a separately reported E/M service.
- E/M services related to the patient's inquiry provided by qualified health care professionals in the same group practice.

Separate reimbursement may be allowed for:

- Online digital inquiries initiated for a new problem within seven days of a previous online digital E/M service.

Permanent documentation storage (electronic or hard copy) of the encounter is required.

Services that are not covered:

- Store and forward (G2010)
- Virtual check-in (G2012)
- Interprofessional Services
- Digital Assessment and Management Services

SOURCE: ND Div. of Medical Assistance, Telehealth, (Jan. 2024), (Accessed Feb. 2024).

Dentistry

Teledentistry code D9995 or D9996 is required when billing ND Medicaid. Service authorization is not required. See manual for covered services.

Patient records must include the CDT® Code(s) that reflect the teledentistry encounter. The claim submission must include all applicable CDT® codes. ND Medicaid will reimburse CDT® code D9995 or D9996 once per date of service. Claim submissions must be billed using place of service (POS)/place of treatment codes:

- 02 Teledentistry provided in a location other than the patient's home.
- 10 Telehealth provided in patient's home.

Claims with any other place of service will be denied.

Non Covered Services

- Examinations via online/email/electronic communication
- Patient contact with dentist who provides the consultation using audio means only (no visual component)
- Virtual check-in

SOURCE: North Dakota Human Services Dental Manual, Teledentistry, pg. 12-13 (Jan. 2024), (Accessed Feb. 2024).

GEOGRAPHIC LIMITS

No Reference Found

TRANSMISSION FEE

No Reference Found

REMOTE PATIENT MONITORING

Last updated 02/19/2024

POLICY

Home Health Services

Home Health Telemonitoring will be covered within the same limits noted above. Home Telemonitoring is not allowed for the initial home Health evaluation visit or for the discharge visit. In addition, Home Health Telemonitoring is limited to no more than forty percent (40%) of the total visits during each certification period.

SOURCE: ND Div. of Medical Services, Home Health and Private Duty Nursing, (Jan. 2024), (Accessed Feb. 2024).

CONDITIONS

No Reference Found

PROVIDER LIMITATIONS

No Reference Found

OTHER RESTRICTIONS

No Reference Found

EMAIL, PHONE & FAX

Last updated 02/19/2024

Audio-Only Telephone Services can be delivered by using older-style “flip” phones or a traditional “land-line” phones that only support audio-based communication. Only certain services are covered using audio-only telephone services (see linked list of covered services below).

Services must be initiated by an established patient or guardian of the established patient.

Do not report this service if:

- It is decided that the patient will be seen within 24 hours or at the next available urgent visit appointment,
- There is an E/M service for the same or a similar problem within the previous seven days

- The patient is within a postoperative period and related to the surgical procedure.

Modifier 93 is allowed: Synchronous telehealth service rendered via telephone or other real-time interactive audio-only (is also allowed on institutional claims).

Audio-only telephone services (CPT™ 99441-99443) are only available through December 31, 2024.

Services that are not covered:

- Store and forward (G2010)
- Virtual check-in (G2012)
- Interprofessional Services
- Digital Assessment and Management Services

SOURCE: ND Div. of Medical Assistance, Telehealth, (Jan. 2024), (Accessed Feb. 2024).

Dentistry

Non Covered Services

- Examinations via online/email/electronic communication
- Patient contact with dentist who provides the consultation using audio means only (no visual component)
- Virtual check-in

SOURCE: North Dakota Human Services Dental Manual, Teledentistry, pg. 12-13 (Jan. 2024), (Accessed Feb. 2024).

Medicaid Services Rendered in Schools

Non-Covered Services ...

- Communications between the provider and Medicaid member that do not maintain actual visual contact, unless allowed as a telehealth audio-only service

SOURCE: ND Div. of Medical Assistance, School Based Medicaid, p. 4, (Jan. 2024), (Accessed Feb. 2024).

Home Health and Private Duty Nursing

Telephonic encounters are not covered by ND Medicaid.

SOURCE: ND Div. of Medical Services, Home Health and Private Duty Nursing, (Jan. 2024), (Accessed Feb. 2024).

Targeted Case Management

Telephone calls, in person and email contacts are allowable costs under transitional care management (TCM) for making collateral contacts.

SOURCE: North Dakota Department of Human Services: Targeted Case Management – Individuals with a serious mental illness or serious emotional disturbance. (Oct. 2023) P. 8, & Targeted Case Management Child Welfare, (Oct. 2023) p. 6 (Accessed Feb. 2024).

Teledentistry

Noncovered Services:

- Examinations via online/email/electronic communication
- Patient contact with dentist who provides the consultation using audio means only (no visual component)
- Virtual check-in

SOURCE: North Dakota Human Services Dental Manual, Teledentistry, pg. 12-13 (Jan. 2024), (Accessed Feb. 2024). & North Dakota Department of Human Services: Teledentistry Policy. (July 2023), (Accessed Feb. 2024).

Pharmacy Manual

Allowed for reimbursement:

- Audio-only telephone visits allowed for established patients only (CPT 99606 and 99607)

SOURCE: ND Medicaid Pharmacy Medical Billing Manual, Dec. 2023, (Accessed Feb. 2024).

CONSENT REQUIREMENTS

Last updated 02/19/2024

No Reference Found

OUT OF STATE PROVIDERS

Last updated 02/19/2024

Telehealth services provided to members while they are located in the State of North Dakota by ND Medicaid enrolled out of state telehealth providers are not considered out of state care. The requirement to request authorization for out of state services does not apply in these situations. If the service itself requires service authorization the provider is still required to obtain authorization prior to rendering the service.

SOURCE: ND Medicaid, Out of State Services, Jan. 2024, (Accessed Feb. 2024).

MISCELLANEOUS

Last updated 02/19/2024

No reference found.

Professional Requirements

DEFINITIONS

Last updated 02/19/2024

“Telemedicine” means the practice of medicine using electronic communication, information technologies, or other means between a licensee in one location and a patient in another location, with or without an intervening health care provider. The term includes direct interactive patient encounters as well as asynchronous store-and-forward technologies and remote monitoring.

SOURCE: ND Admin Code Sec. 50-2-15-01 (Accessed Feb. 2024).

Stroke system of care task force

Telemedicine services means the use of interactive audio, video, and other electronic media used for the purpose of diagnosis, consultation, or treatment of acute stroke. The stroke system of care task force shall recommend eligible essential health care services for acute stroke care provided through telemedicine services.

SOURCE: ND Century Code Sec. 23-43-05. (Accessed Feb. 2024).

North Dakota uses federal definitions for “internet” and “practice of telemedicine” set in the Ryan Haight Online Pharmacy Consumer Protection Act of 2008.

SOURCE: ND Century Code Sec. 19-02.1-15.1(1)(d). (Accessed Feb. 2024).

The term ‘practice of telemedicine’ means, for purposes of this title, the practice of medicine in accordance with applicable Federal and State laws by a practitioner (other than a pharmacist) who is at a location remote from the patient and is communicating with the patient, or health care professional who is treating the patient, using a telecommunications system referred to in section 1834(m) of the Social Security Act. See statute for additional requirements.

SOURCE: Ryan Haight Online Pharmacy Consumer Protection Act of 2008 [Pub. L 110-425; 21 U.S.C. 802-803]. (Accessed Feb. 2024).

Physical Therapy:

“Telehealth” is the use of electronic communications to provide and deliver health-related information and health care services, including physical therapy-related information and services, over any distance. Telehealth encompasses health care and health promotion activities, including education, advice, reminders, interventions, and the monitoring of interventions.

SOURCE: ND Admin. Code 61.5-01-02-01. (Accessed Feb. 2024).

Chiropractic Examiners

“Telehealth” means the use of electronic communications to provide and deliver chiropractic related information and chiropractic services, including chiropractic-related information and services, over any distance. Telehealth encompasses chiropractic care and chiropractic promotion activities, including education, advice, reminders, interventions, and the monitoring of interventions.

SOURCE: ND Century Code 43-06-01, (Accessed Feb. 2024).

Physicians

“Telemedicine” means the practice of medicine using electronic communication, information technologies, or other means between a licensee in one location and a patient in another location, with or without an intervening health care provider.

“Telemedicine” includes direct interactive patient encounters, asynchronous store-and-forward technologies, and remote monitoring.

SOURCE: ND Century Code 43-17-01, (Accessed Feb. 2024).

Medical Nutrition Therapy and Nutrition Care Services

“Telehealth” means the use of electronic information and telecommunications technologies to provide services under this chapter to support clinical health care, patient and professional health-related education, public health, and health administration between a licensee in one location and an individual in another location.

SOURCE: ND Century Code Ch. 43-44-01 (Accessed Feb. 2024).

CONSENT REQUIREMENTS

Last updated 02/19/2024

Physical Therapy:

“Consultation by telehealth” means that a physical therapist renders professional or expert opinion or advice to another physical therapist or professional health care provider via electronic communications or computer technology from a distant location. The patient’s written or verbal consent will be obtained and documented prior to such consultation. All records used or resulting from a consultation by means of telehealth are part of a patient’s record and are subject to applicable confidentiality requirements.

SOURCE: ND Admin. Code 61.5-01-02-01(3). (Accessed Feb. 2024).

ONLINE PRESCRIBING

Last updated 02/19/2024

“In-person medical evaluation” means a medical evaluation that is conducted with the patient in the physical presence of the practitioner, without regard to whether portions of the evaluation are conducted by other practitioners, and must include one of the following actions: ... The referring practitioner has performed an examination in the case of a consultant practitioner issuing a prescription or drug order when providing services by means of telemedicine.

“Valid prescription” means a prescription that is issued for a legitimate medical purpose in the usual course of professional practice by a practitioner who has conducted an in-person medical evaluation of the patient.

SOURCE: ND Century Code Sec. 19-02.1-15.1(c) & (f) (Accessed Feb. 2024).

A licensee practicing telemedicine shall establish a bona fide relationship with the patient before the diagnosis or treatment of a patient. A licensee practicing telemedicine shall verify the identity of the patient seeking care and shall disclose, and ensure the patient has the ability to verify, the identity and licensure status of any licensee providing medical services to the patient.

Before initially diagnosing or treating a patient for a specific illness or condition, an examination or evaluation must be performed. An examination or evaluation may be performed entirely through telemedicine, if the examination or evaluation is equivalent to an in-person examination.

- An examination utilizing secure videoconferencing or store-and-forward technology for appropriate diagnostic testing and use of peripherals that would be deemed necessary in a like in-person examination or evaluation meets this standard, as does an examination conducted with an appropriately licensed intervening health care provider, practicing within

the scope of the provider's profession, providing necessary physical findings to the licensee. An examination or evaluation consisting only of a static online questionnaire or an audio conversation does not meet the standard of care.

- Once a licensee conducts an acceptable examination or evaluation, whether in-person or by telemedicine, and establishes a patient-licensee relationship, subsequent followup care may be provided as deemed appropriate by the licensee, or by a provider designated by the licensee to act temporarily in the licensee's absence. In certain types of telemedicine utilizing asynchronous store-and-forward technology or electronic monitoring, such as teleradiology or intensive care unit monitoring, it is not medically necessary for an independent examination of the patient to be performed.

A licensee practicing telemedicine is subject to all North Dakota laws governing the adequacy of medical records and the provision of medical records to the patient and other medical providers treating the patient.

A licensee must have the ability to make appropriate referrals of patients not amenable to diagnosis or complete treatment through a telemedicine encounter, including a patient in need of emergent care or complementary in-person care.

SOURCE: ND Century Code Sec. 43-17-44, (Accessed Feb. 2024).

A controlled substance that is a prescription drug may not be delivered, distributed, or dispensed by means of the internet without a valid prescription, but nothing in this subsection may be construed to imply that one in-person medical evaluation by itself demonstrates that a prescription has been validly issued for a legitimate medical purpose within the usual course of professional practice.

This section applies to the delivery, distribution, and dispensing of a controlled substance by means of the internet from a location whether within or outside this state to a person or an address in this state.

Nothing in this section applies to the delivery, distribution, or dispensing of a controlled substance by a practitioner engaged in the practice of telemedicine in accordance with applicable federal and state laws.

“Valid prescription” means a prescription that is issued for a legitimate medical purpose in the usual course of professional practice by a:

- Practitioner who has conducted at least one in-person medical evaluation of the patient; or
- Covering practitioner.

“Covering practitioner” means, with respect to a patient, a practitioner who conducts a medical evaluation, other than an in-person medical evaluation, at the request of a practitioner who:

- Has conducted at least one in-person medical evaluation of the patient or an evaluation of the patient through the practice of telemedicine, within the previous twenty-four months; and
- Is temporarily unavailable to conduct the evaluation of the patient.

SOURCE: North Dakota Century Code, Sec. 19-03.1-22.4, (Accessed Feb. 2024).

A licensee who has performed a telemedicine examination or evaluation meeting the requirements of this chapter may prescribe medications according to the licensee's professional discretion and judgment. Opioids may only be prescribed through telemedicine if done so as a federal food and drug administration-approved medication-assisted treatment for opioid use disorder. Opioids may not be prescribed through a telemedicine encounter for any other purpose.

Licensees who prescribe controlled substances, as defined by North Dakota law, in circumstances allowed under this rule, must comply with all state and federal laws regarding the prescribing of controlled substances, and must participate in the North Dakota prescription drug monitoring program.

SOURCE: ND Admin Code Sec. 50-02-15-02, (Accessed Feb. 2024).

CROSS-STATE LICENSING

Last updated 02/19/2024

Medical Nutrition Therapy and Nutrition Care Services

An individual providing services regulated by this chapter via telehealth shall comply with, and is subject to, all licensing and disciplinary provisions of this chapter.

SOURCE: ND Century Code Ch. 43-44-19 p. 11 (Accessed Feb. 2024).

LICENSURE COMPACTS

Last updated 02/19/2024

Member of the Physical Therapy Compact.

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

Member of the Nurses Licensure Compact.

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

Member of the Interstate Medical Licensure Compact.

SOURCE: The IMLC. Interstate Medical Licensure Compact. (Accessed Feb. 2024).

Member of Emergency Medical Services Compact.

SOURCE: Interstate Commission for EMS Personnel Services, EMS Compact Member States, (Accessed Feb. 2024).

Member of Advanced Practice Registered Nurse (APRN) Compact

SOURCE: NCSBN, APRN Compact, (Accessed Feb. 2024).

Member of Counseling Compact

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

Member of Psychology Interjurisdictional Compact

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

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

PROFESSIONAL BOARDS STANDARDS

Last updated 02/19/2024

North Dakota statute outlines telehealth standard of care and professional ethics for dentists.

SOURCE: ND Century Code Ch. 43-28-11.3 (Accessed Feb. 2024).

North Dakota statute outlines telemedicine standard of care and professional ethics for physicians, resident physicians and physician assistants.

SOURCE: ND Century Code Sec. 43-17-44, (Accessed Feb. 2024).

North Dakota statute describes when use of telehealth for the provision of medical nutrition therapy and nutrition care services is allowed.

SOURCE: ND Century Code Ch. 43-44-19 (Accessed Feb. 2024).

Veterinary Board

Veterinary medicine includes telemedicine, laser therapy, chemotherapy, and rehabilitation services.

SOURCE: ND Admin Code Sec. 87-06-02, (Accessed Feb. 2024).

MISCELLANEOUS

Last updated 02/19/2024

Under the Worker's Compensation Act, the originating sites may receive a facility fee at the scheduled amount.

SOURCE: ND Admin. Code 92-01-02-34 (3d). p. 35 (Accessed Feb. 2024).

Dentistry

Each patient shall have access to health provider information as it pertains to their treating doctor or potential doctors. Any entity utilizing telehealth shall provide upon request of a patient the name of the dentist, telephone number, practice address, and state license number of any dentist who was involved with the provision of services to a patient before or during the rendering of dental services.

SORUCE: ND Admin. Code 20-02-01-9, (Accessed Feb. 2024).

Federally Qualified Health Center (FQHC)

DEFINITION OF VISIT

Last updated 02/19/2024

Encounter in this chapter means a face-to-face visit or synchronous telehealth visit during which a qualifying encounter service is rendered. FQHCs may furnish services that qualify as a medical, dental, or behavior health encounter. Each encounter includes services and supplies incident to the service.

SOURCE: ND Medicaid General Information, Federally Qualified Health Center, Jan. 2024, (Accessed Feb. 2024).

FQHCs and RHCs – Dentistry

One dental encounter is allowed per day. The encounter must be a face to face encounter to qualify for payment. Asynchronous teledentistry performed as a stand-alone service does not qualify for an encounter payment. At least one covered service must be performed as a face to face service to qualify for the dental encounter payment.

SOURCE: North Dakota Human Services Dental Manual, Teledentistry, pg. 12-13 (Jan. 2024), (Accessed Feb. 2024).

MODALITIES ALLOWED

Last updated 02/19/2024

Live Video

Revenue code 0780 should only be reported along with Q3014 when the FQHC is the originating site. When providing telehealth services to patients located in their homes or another facility, FQHCs and RHCs should continue to bill the revenue codes listed in the FQHC and RHC portions of this manual along with the CPT® or HCPCS code for the service rendered appended with modifier GT or 95.

Refer to the FQHC and RHC portions of this manual for the revenue codes to bill for the various services.

SOURCE: ND Medicaid, Telehealth, Jan. 2024, (Accessed Feb. 2024).

FQHCs and RHCs – Dentistry

Revenue code 0780 should only be reported along with Q3014 when the FQHC is the originating site. When providing teledentistry services to patients located in their homes or another facility, FQHCs and RHCs should continue to bill the revenue code listed below along with the CDT® code for the service rendered appended with modifier GT or 95.

Revenue Code 512: Dental Clinic.

One dental encounter is allowed per day. The encounter must be a face to face encounter to qualify for payment. Asynchronous teledentistry performed as a stand-alone service does not qualify for an encounter payment. At least one covered service must be performed as a face to face service to qualify for the dental encounter payment.

SOURCE: North Dakota Human Services Dental Manual, Teledentistry, pg. 12-13 (Jan. 2024), (Accessed Feb. 2024).

See: ND Medicaid Live Video

Store and Forward

Store-and-forward is reimbursed through digital health evaluation and management services but unclear if FQHCs can bill this service specifically.

FQHCs and RHCs – Dentistry

One dental encounter is allowed per day. The encounter must be a face to face encounter to qualify for payment. Asynchronous teledentistry performed as a stand-alone service

does not qualify for an encounter payment. At least one covered service must be performed as a face to face service to qualify for the dental encounter payment.

SOURCE: North Dakota Human Services Dental Manual, Teledentistry, pg. 12-13 (Jan. 2024), (Accessed Feb. 2024).

See: ND Medicaid Store and Forward

Remote Patient Monitoring

Telemonitoring is a covered service under home health services for ND Medicaid but no reference was found to whether or not FQHCs can be reimbursed for remote patient monitoring.

See: ND Medicaid Remote Patient Monitoring

Audio-Only

Audio-only is covered in specific circumstances, but no direct reference to FQHCs, so unclear if FQHCs would be reimbursed.

See: ND Medicaid Audio-Only

SAME DAY ENCOUNTERS

Last updated 02/19/2024

If the only services rendered during a visit are “incident to” services, the visit does not qualify for claiming of an encounter. Services provided “incident to” are included in the encounter and cannot be billed separately (e.g. laboratory services, x-rays, and procedures performed during the visit).

Face-to-face services with more than one health professional and/or multiple services with the same health professionals on the same day and at a single location constitute a single encounter.

Payment is limited to one medical visit, one dental visit, and one mental health visit a day except when a member suffers an illness or injury requiring additional diagnosis or treatment after the member’s first encounter.

Medical nutritional therapy or a diabetes self-management training provided on the same day as a medical encounter is not eligible for a separate encounter. If medical nutritional therapy or diabetes self-management training is the only medical service provided, a medical encounter may be claimed. Diabetes self-management training may be provided by a credentialed registered nurse under supervision of a licensed practitioner. Bill diabetes self-management training rendered by a registered nurse under the supervising licensed practitioner's NPI.

SOURCE: ND Medicaid General Information, Federally Qualified Health Center, Jan. 2024, (Accessed Feb. 2024).

ELIGIBLE ORIGINATING SITE

Last updated 11/15/2023

FQHCs and RHCs

Revenue code 0780 should only be reported along with Q3014 when the FQHC is the originating site.

SOURCE: ND Medicaid, Telehealth, Jan. 2024, (Accessed Feb. 2024).

FQHCs and RHCs – Dentistry

Revenue code 0780 should only be reported along with Q3014 when the FQHC is the originating site. When providing teledentistry services to patients located in their homes or another facility, FQHCs and RHCs should continue to bill the revenue code listed below along with the CDT® code for the service rendered appended with modifier GT or 95.

Revenue Code 512: Dental Clinic.

SOURCE: North Dakota Human Services Dental Manual, Teledentistry, pg. 12-13 (Jan. 2024), (Accessed Feb. 2024).

See: ND Medicaid Live Video Eligible Sites.

ELIGIBLE DISTANT SITE

Last updated 02/19/2024

FQHCs and RHCs

Revenue code 0780 should only be reported along with Q3014 when the FQHC is the originating site. When providing telehealth services to patients located in their homes or another facility, FQHCs and RHCs should continue to bill the revenue codes listed in the

FQHC and RHC portions of this manual along with the CPT® or HCPCS code for the service rendered appended with modifier GT or 95.

Refer to the FQHC and RHC portions of this manual for the revenue codes to bill for the various services.

SOURCE: ND Medicaid, Telehealth, Jan. 2024, (Accessed Feb. 2024).

Payment to FQHCs for covered services furnished to members is made by means of an all-inclusive rate for each encounter. Encounter in this chapter means a face-to-face visit or synchronous telehealth visit during which a qualifying encounter service is rendered. FQHCs may furnish services that qualify as a medical, dental, or behavior health encounter. Each encounter includes services and supplies incident to the service.

SOURCE: ND Medicaid General Information, Federally Qualified Health Center, Jan. 2024, (Accessed Feb. 2024).

FQHCs and RHCs – Dentistry

Revenue code 0780 should only be reported along with Q3014 when the FQHC is the originating site. When providing teledentistry services to patients located in their homes or another facility, FQHCs and RHCs should continue to bill the revenue code listed below along with the CDT® code for the service rendered appended with modifier GT or 95.

Revenue Code 512: Dental Clinic.

One dental encounter is allowed per day. The encounter must be a face to face encounter to qualify for payment. Asynchronous teledentistry performed as a stand-alone service does not qualify for an encounter payment. At least one covered service must be performed as a face to face service to qualify for the dental encounter payment.

SOURCE: North Dakota Human Services Dental Manual, Teledentistry, pg. 12-13 (Jan. 2024), (Accessed Feb. 2024).

See: ND Medicaid Live Video Eligible Providers

FACILITY FEE

Last updated 02/19/2024

Revenue code 0780 should only be reported along with Q3014 when the FQHC is the originating site.

SOURCE: ND Medicaid, Telehealth, Jan. 2024, (Accessed Feb. 2024).

FQHCs and RHCs – Dentistry

Revenue code 0780 should only be reported along with Q3014 when the FQHC is the originating site. When providing teledentistry services to patients located in their homes or another facility, FQHCs and RHCs should continue to bill the revenue code listed below along with the CDT® code for the service rendered appended with modifier GT or 95.

SOURCE: North Dakota Human Services Dental Manual, Teledentistry, pg. 12-13 (Jan. 2024), (Accessed Feb. 2024).

See: ND Medicaid Live Video Facility/Transmission Fee

PPS RATE

Last updated 02/19/2024

Payment to FQHCs for covered services furnished to members is made by means of an all-inclusive rate for each encounter. Encounter in this chapter means a face-to-face visit or synchronous telehealth visit during which a qualifying encounter service is rendered. FQHCs may furnish services that qualify as a medical, dental, or behavior health encounter. Each encounter includes services and supplies incident to the service.

SOURCE: ND Medicaid General Information, Federally Qualified Health Center, Jan. 2024, (Accessed Feb. 2024).

HOME ELIGIBLE

Last updated 02/19/2024

FQHCs and RHCs

Revenue code 0780 should only be reported along with Q3014 when the FQHC is the originating site. When providing telehealth services to patients located in their homes or another facility, FQHCs and RHCs should continue to bill the revenue codes listed in the FQHC and RHC portions of this manual along with the CPT® or HCPCS code for the service rendered appended with modifier GT or 95.

Refer to the FQHC and RHC portions of this manual for the revenue codes to bill for the various services.

SOURCE: ND Medicaid, Telehealth, Jan. 2024, (Accessed Feb. 2024).

FQHCs and RHCs – Dentistry

Revenue code 0780 should only be reported along with Q3014 when the FQHC is the originating site. When providing teledentistry services to patients located in their homes or another facility, FQHCs and RHCs should continue to bill the revenue code listed below along with the CDT© code for the service rendered appended with modifier GT or 95.

Revenue Code 512: Dental Clinic.

One dental encounter is allowed per day. The encounter must be a face to face encounter to qualify for payment. Asynchronous teledentistry performed as a stand-alone service does not qualify for an encounter payment. At least one covered service must be performed as a face to face service to qualify for the dental encounter payment.

SOURCE: North Dakota Human Services Dental Manual, Teledentistry, pg. 12-13 (Jan. 2024), (Accessed Feb. 2024).

PATIENT-PROVIDER RELATIONSHIP

Last updated 02/19/2024

No reference found.