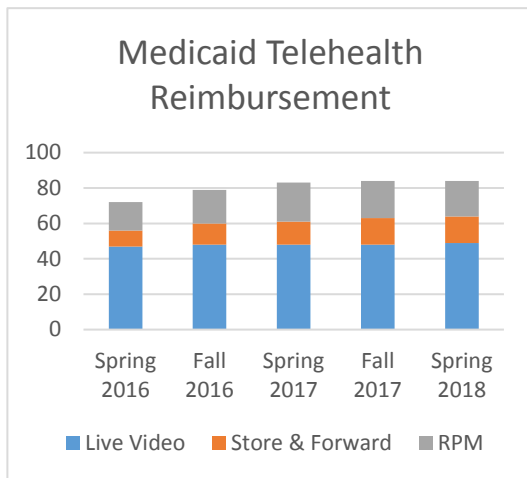


50 State Scan of Telehealth Reimbursement Laws and Medicaid Policies - Factsheet

Telehealth policy trends continue to vary from state-to-state, with no two states alike in how telehealth is defined, reimbursed or regulated.



Medicaid Policy Trends

Live video Medicaid reimbursement continues to far exceed reimbursement for store-and-forward and remote patient monitoring (RPM). Since CCHP's Fall 2017 update, **1 state** (RI) added reimbursement for live video. **1 state** (GA) added reimbursement for store-and-forward, however HI was removed from the list because CCHP could not locate any official Medicaid policy indicating they are actively reimbursing for store-and-forward. For RPM, CCHP removed New York from the list due to no evidence the Medicaid program is implementing a previously passed laws that included RPM reimbursement. No new states were added. Note that both HI and NY have approved State Plan Amendments authorizing the Medicaid program to reimburse for store-and-forward and RPM, but CCHP was unable to locate any official, active written policy. CCHP will update their status once their Medicaid programs release official policy to their providers.

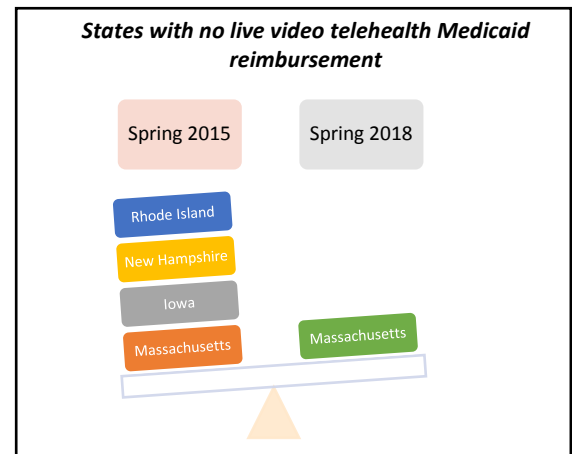
Many of the reimbursement policies that do exist continue to have restrictions and limitations, creating a barrier to utilizing telehealth to deliver services.

The current state of Medicaid reimbursement:

- **49 states** and Washington DC provide reimbursement for some form of live video in Medicaid fee-for-service
- **15 states** reimburse for store and forward delivered services. States that only provide reimbursement for teleradiology were not counted in this number
- **20 states** reimburse for remote patient monitoring (RPM)
- **9 states** reimburse for all three
- **32 states** provide a transmission and/or facility fee

Despite the large number of states reimbursing for live video telehealth, restrictions are still prevalent. One of the most common restrictions is a limitation on where the patient is located, referred to as the originating site. While most states have dropped Medicare's rural geographic requirement, many Medicaid programs have limited the type of facility that can serve as an originating site, often excluding a patient's home from eligibility. However, ten states (DE, CO, MD, MI, MN, MO, NY, TX, WA and WY) have recently added policies to explicitly allow the home to be an eligible originating site under certain circumstances.

- **4 states** have geographic restrictions or require the patient and provider to be a certain distance apart
- **6 states** have eliminated their geographic requirement since February 2013.
- **23 states** limit reimbursement to a specific list of facilities, and has remained constant since April 2017.



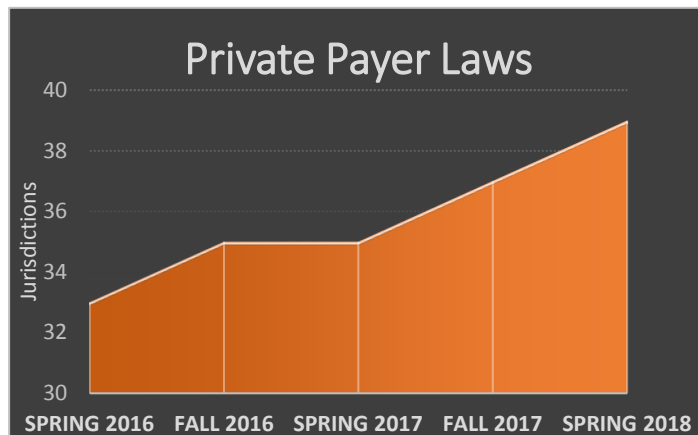
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Other common telehealth restrictions include:

- The specialty that telehealth services can be provided for
- The types of services or CPT codes that can be reimbursed (office visit, inpatient consult, etc.)
- The type of providers that can be reimbursed (e.g. physician, nurse, etc.)

Private Payer Reimbursement

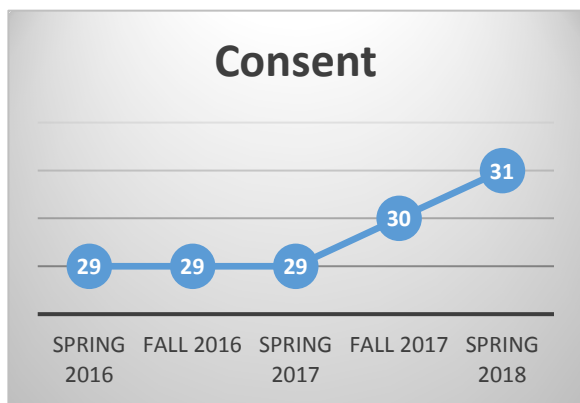
39 jurisdictions have laws that govern private payer reimbursement of telehealth. This is an increase of two states since Fall 2017. Some laws require reimbursement be equal to in-person coverage, however most only require parity in covered services, not reimbursement amount, and depending on how the law is written, may provide payers with the ability to limit the amount of that coverage. Not all laws mandate reimbursement.



Other Telehealth Policy Trends

Online Prescribing

Most states consider an online questionnaire only as insufficient to establish the patient-provider relationship and prescribe medication. Some states allow telehealth to be used to conduct a physical exam, while others do not. More and more states are passing legislation directing healthcare professional boards to adopt practice standards for its providers who utilize telehealth. Medical and Osteopathic Boards often address issues of prescribing in such regulatory standards.

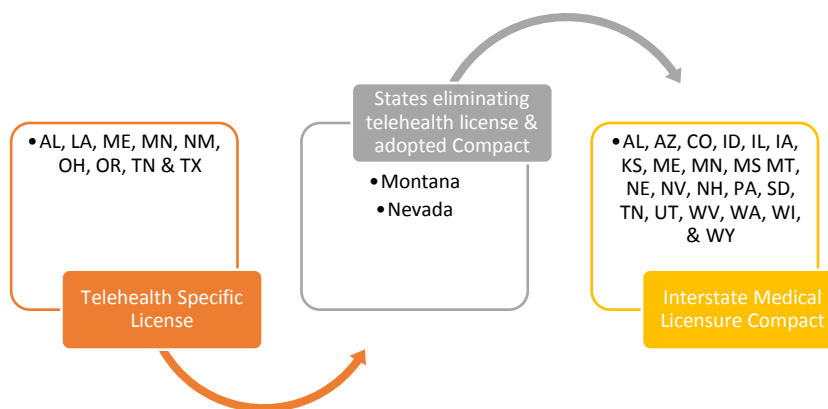


Consent

31 States have a consent requirement in either Medicaid policy, law or regulation, an increase of one state (WA) since Fall 2017.

Licensure

9 state boards issue licenses related to telehealth. **3 states** dropped their telemedicine license and adopted the Interstate Medical Licensure Compact in 2016. Tennessee’s Medical board dropped their telemedicine license, however the TN Osteopathic Board will continue to issue them. **22 states** have adopted the Compact, which is an expedited licensure process.



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