States that reimburse for telehealth since Fall have a and the District of Psychology or CPT Physical Medicine and Osteopathic Medicine (PM&O).


Private Law Reimbursement

39 states and the District of Columbia have laws that govern private payor reimbursement of telehealth. There was no increase since Fall 2018. Some laws require reimbursement be equal to in-person coverage, however most only require parity in covered services, not reimbursement amount. Not all laws mandate reimbursement.

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. Some states have relaxed requirements for prescribing controlled substances used in medication-assisted therapy (MAT) as a result of the opioid epidemic. More and more states are passing legislation directing healthcare professionals to adopt practice standards for their providers who utilize telehealth. Medical and Osteopathic Boards often address issues of prescribing in such regulatory standards.

Medicaid Policy Trends

Live video Medicaid reimbursement continues to far exceed reimbursement for store-and-forward (S&F) and remote patient monitoring (RPM). Massachusetts’ Medicaid program recently began reimbursing for mental and behavioral health delivered via telehealth. Eleven state Medicaid programs reimburse for store-and-forward and twenty-one states reimburse for remote patient monitoring (RPM), with additional states having laws requiring Medicaid reimbursement for store-and-forward or RPM, yet no official written policies indicating that such policy has been implemented.

Many of the reimbursement policies that do exist continue to have restrictions and limitations, creating a barrier to utilizing telehealth to deliver services. 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, Medicaid programs have limited the type of facility that can serve as an originating site, often excluding a patient’s home from eligibility. However, fourteen states (DE, CO, MO, ID, MI, MN, MT, NH, NC, IN, SC, TX, VT, WA and WV) have policies to explicitly allow the home to be an eligible originating site under certain circumstances.

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Licensor

Nine state boards issue licenses related to telehealth allowing an out-of-state licensed provider to offer services via telehealth. Licensure Compacts have become increasingly common. For example:

29 States and D.C.: Interstate Medical Licensure Compact
33 States: Nurse Licensure Compact
25 States: Physical Therapy Compact
9 States: Psychology Interjurisdictional Comp act (PSYFACCT)

Consen:

38 States and D.C. have a consent requirement in either Medicaid policy, law, or regulation, and an increase of one, (New Mexico) state since Fall 2018.

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Other Common Telehealth Restrictions

The current state telehealth services can be be provided for:

- The types of services or CPT codes that can be reimbursed (e.g. telepsychiatry, counseling, etc.)
- The types of providers that can be reimbursed (e.g. physician, nurse, etc.)