

TELEHEALTH REIMBURSEMENT POLICIES



State of Utah Health Reform Task Force

May 28, 2015

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cchpca.org



We are an independent, **public interest** organization that strives to advance state and national telehealth policies that:

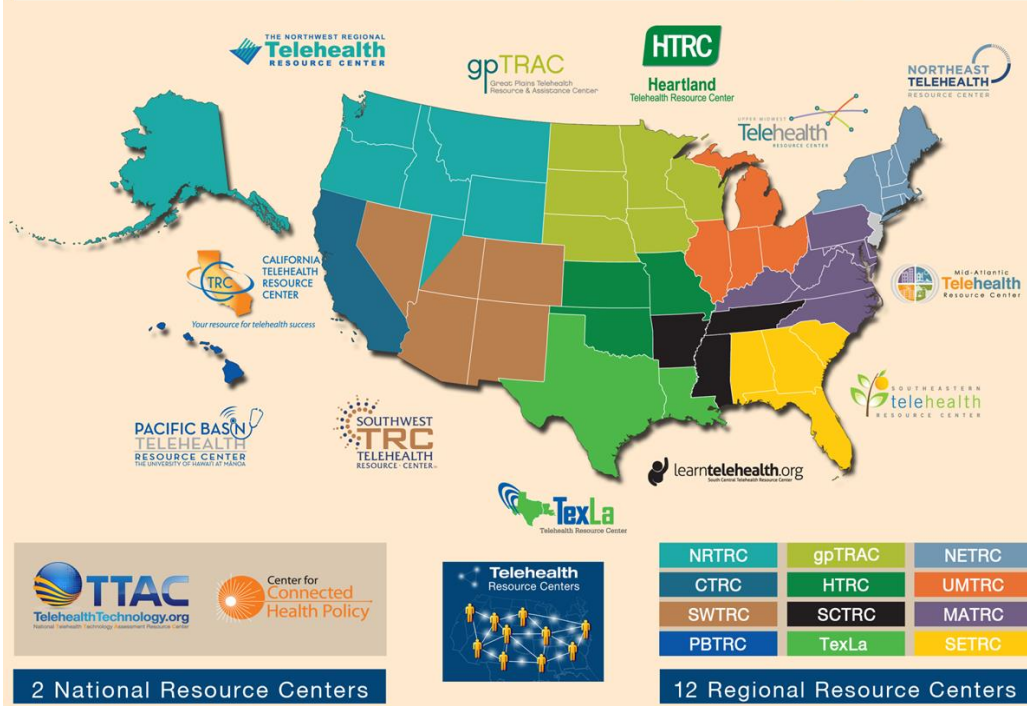
- promotes better systems of care & improved health outcomes & provide greater **health equity of access to quality, affordable care...**
- We conduct independent research, policy analysis, and provide assistance and education



Telehealth Resource Centers

Home | Operations Tools | Reimbursement | Legal & Regulatory | Marketing | Training | Program Development | Webinars

TelehealthResourceCenters.org



- Established in 2006, funded by the Office for the Advancement of Telehealth
- Twelve regional centers
- One national technology assessment center
- Collectively form a network of telehealth program expertise and experience
- Independently serve a designated region

TelehealthResourceCenter.org



HRSA/OAT Grant 2012-2016: National Telehealth Policy Resource Center



[POLICY MAP >>](#)

[REIMBURSEMENT >>](#)

[About the Program](#)

[What is Telehealth](#)

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[Legal Issues](#)

[Health Information Technology](#)

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Telehealth technologies are valuable assets to help achieve the “Triple Aim” of improved quality of care, better health outcomes, and lowered costs.

[Learn More >>](#)





Remote Patient Monitoring Research Catalogue and Quality Assessment

January 2015

- Published in a peer reviewed journal no earlier than 2007
- Study must be US-based
- There must be a minimum of a sample size of 50 in the study (if a comparison group is used, at least 30 in both the control and test groups)
- The study period must be no less than 6 months
- The study is designed focus on one or more of the Triple Aim goals of outcomes, quality or cost
- Studies that only used interventions consisting of telephone, mobile apps or health education systems were excluded
- Databases – PubMed & EBESCO



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TELEHEALTH MODEL STATUTE

**ISSUES AND LANGUAGE
RECOMMENDATIONS**

Telehealth Is Defined Broadly



Telehealth is a means for enhancing health care, public health, and health education delivery and support at a distance using telecommunication technologies.



TELEHEALTH MODALITIES

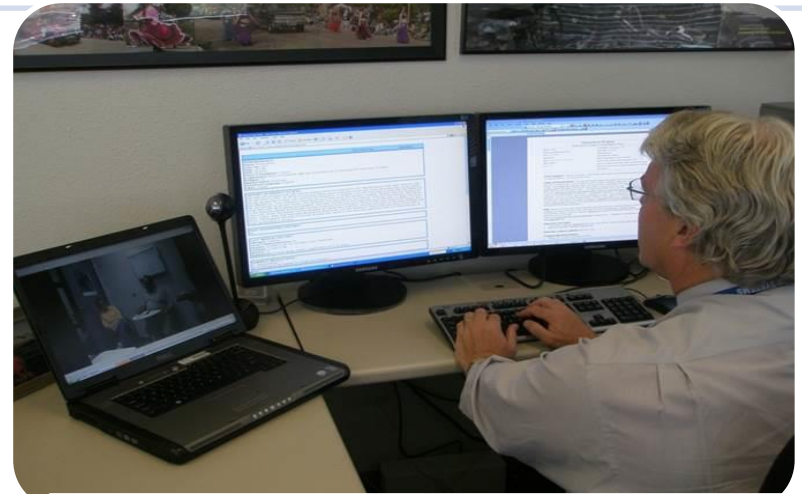


Live Video

Variety of high-speed digital telecommunications

Outpatient or inpatient specialty consultation

Most commonly used



Store-and-Forward

Often low bandwidth, still images, can store video clips.

Best used in dermatology, ophthalmology, pathology, and radiology.

Exploring new avenues, such as psychiatry



TELEHEALTH MODALITIES



Remote Patient Monitoring

Hospital emergency departments, intensive care units, and skilled nursing facilities

At-home management of patients with chronic conditions

Keeping people healthy and at home



Mobile Health (mHealth)

Health care, public health, and health education

Supported by cell phones, tablet computers, PDAs, and other mobile communication devices

Can be targeted (promoting healthy behavior and disease management) to wide-scale (disease outbreak alerts)



EXPANDS LOCATIONS FOR TELEHEALTH

Rural and Urban
Primary Care Clinics

Emergency
Medical Services,
Disaster Sites

Hospitals,
Emergency
Rooms, Intensive
Care Units

Prisons/Jails/
Youth Authorities

Home Bound
Patients, Skilled
Nursing, and Sub-
Acute Facilities

Regional Centers,
Cancer Centers

Schools,
Community Sports
Events



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STATE TELEHEALTH POLICIES

As of February, 2015

Telehealth State-by-State Policies, Laws, & Regulations

Laws
Regs
Pending
Bills
State &
Federal



Telehealth Policy

National Policy

- State Laws and Reimbursement Policies
- Medicare
- Medicaid
- Legal Barriers
- Information Technology

California Policy

- Medi-Cal
- Telehealth Advancement Act

Home » Telehealth Policy » National Policy » State Laws and Reimbursement Policies

State Laws and Reimbursement Policies

The Center for Connected Health Policy helps you stay informed about telehealth-related laws, regulations, and Medicaid programs. We cover current and pending rules and regulations for the U.S. and all fifty states.



All **Current** Laws and Policies



All **Pending** Legislation and Regulations



Full Report
"State Telehealth Laws and Reimbursement Policies"



Calendar

Telemedicine and Telehealth Service Provider Showcase »

OCTOBER 6-7, 2014

Phoenix, Arizona

Join CCHP's executive director, Mario Gutierrez, at the Hyatt Regency in Phoenix, AZ for his panel presentation on telemedicine and telehealth policy.

[more »](#)

California Primary Care Association's Annual Conference »

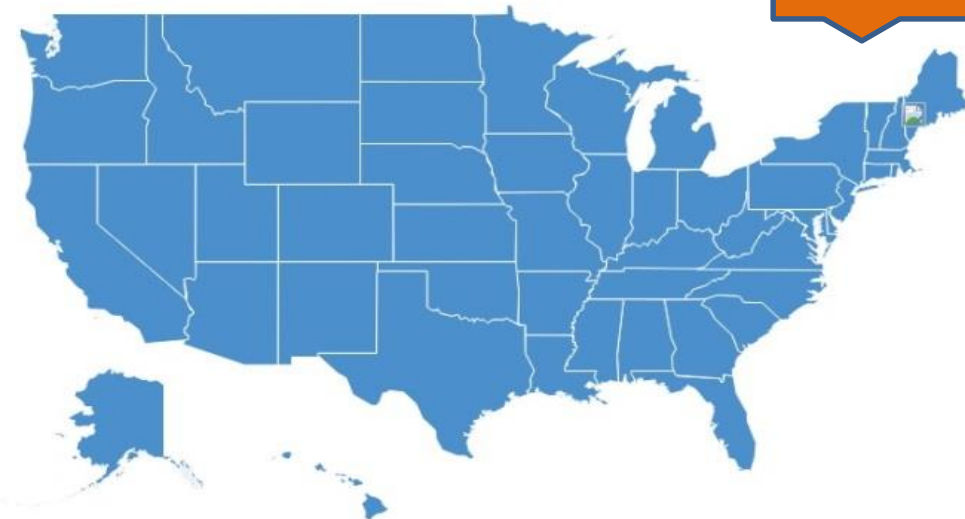
OCTOBER 9-10, 2014

Sacramento, CA

CCHP will be exhibiting with the California Telehealth Resource



Law and Policies by State:



Interactive
Policy Map

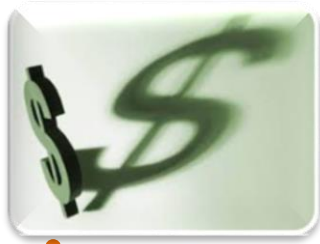




How is the Service Defined?

- ❖ 43 states have a definition for “telemedicine”
- ❖ 28 states & DC have a definition for “telehealth”
- ❖ 2 states, New Jersey & Rhode Island have no definition for either

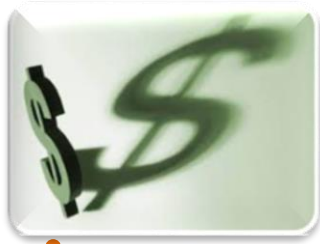




Reimbursement by Service Modality

Live Video: Now 46 States & DC





Reimbursement by Service Modality

Store & Forward: Only in 9 states





Reimbursement by Service Modality

Remote Patient Monitoring: 14 States





Parity in Payment with In-Person

24 states and DC now have telehealth private payer parity laws...Most common policy change at state level

- **Parity is difficult to determine**
 - Parity in services covered vs. parity in payment
 - Many states make their telehealth private payer laws “subject to the terms and conditions of the contract”



Determining Parity

- CCHP identified 7 states with *unconditional* parity in payment language (HI, MS, MO, MT, VT, VA & TN)
 - Example: Hawaii - Reimbursement for services provided through telehealth shall be equivalent to reimbursement for the same services provided via face-to-face contact between a health care provider and a patient. (Sec. 431:10A-116.3)



FSMB Interstate Licensure Compact

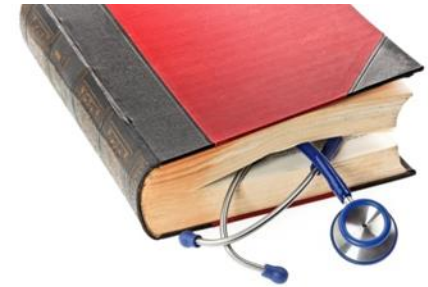
- Creates an Interstate Commission to implement an expedited licensure process.
- Details of Compact will be formed once 7th state passes the Compact language and the Interstate Commission is formed from 2 representatives from each member state.
- Current status
 - 7 states have passed now passed the language.
 - Idaho, Montana, South Dakota, **Utah**, West Virginia, Wyoming
 - 10 states have pending legislation to adopt the language.





Other Areas of Policy Analysis

- Consent issues (oral or written)
- Transmission and facility fees
- Location of service provided
- Online prescribing
- Most common reimbursements:
consultations, mental health, and radiology



Examples of Promising Telehealth



Laws

- **Mississippi SB 2646 (2014)**

- Requires all health insurance and employee benefit plans to cover store-and-forward telemedicine and RPM, in addition to live video.
 - Store and forward must be reimbursed to the same extent as if performed in-person
 - RPM reimbursement must include a minimum daily rate of \$10.
- Prohibits geographic restrictions.



Examples of Promising Telehealth Laws

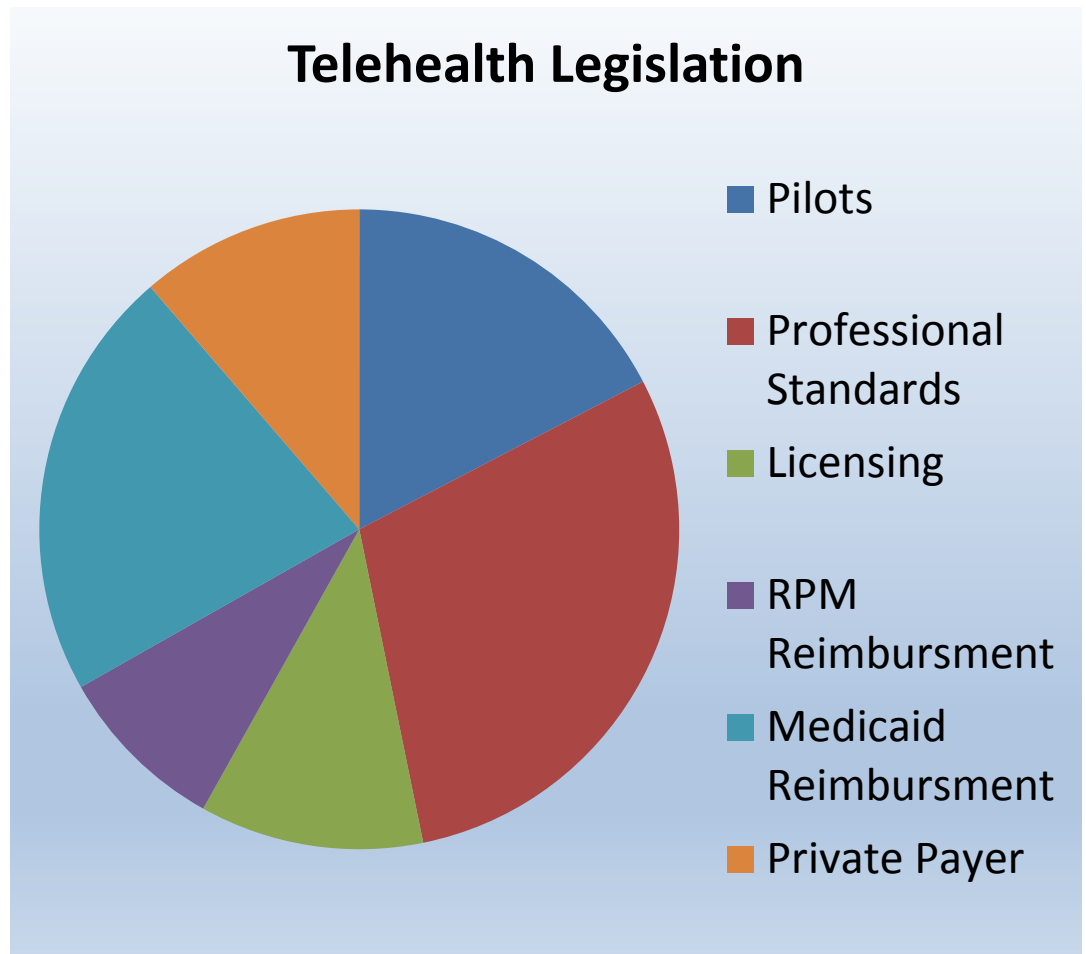
- CA Telehealth Advancement Act of 2011 (AB 415):
 - Replaced “telemedicine” with “telehealth”, and defined it broadly enough to include Store & Forward and RPM.
 - Definition is also broad enough to include email and phone, although not explicit.
 - Removed limits on the location where telehealth services take place.
 - Includes all CA licensed professionals as telehealth providers
 - Requires telehealth reimbursement by private payers and Medicaid, subject to the terms and conditions of the contract.



Pending Legislation

- Over 200 bills introduced in 42 states.
- Most common legislation addresses:
 - Reimbursement
 - Telehealth professional standards (need for in-person exam, prescribing, etc.)
 - Pilot Projects
 - Cross-state Licensing

Telehealth Legislation



CURRENT TELEHEALTH POLICIES



STATUTE DEFINITION

- "Digital health service means the electronic transfer, exchange, or management of related data for diagnosis, treatment, consultation, educational, public health, or other related purposes."
- [*Source: UT Code Annotated Sec. 26-9f-102*](#)

As Defined in the Medicaid Program

- Telehealth or Telemedicine is a technological method of providing auditory and visual connection between the skilled home health care nurse at a Telehealth site and the patient living in a **rural** Utah area Source: [Utah Medicaid Provider Manual: Home Health Agencies, p. 18 \(Jan. 2015\).](#)
- “Telemedicine is two-way, **real-time** interactive communication between the patient and the physician or practitioner at the distant site. This electronic communication uses interactive telecommunications equipment that includes, at a minimum, audio and video equipment.” Source: [Utah Medicaid Provider Manual. Section I. General Information \(Jan. 2015\), pg. 13.](#)



REIMBURSEMENT POLICIES

- **Live Video:** Yes for MD & Nurse Practitioner
- **Store/Forward:** No
- **Remote Monitoring:** Yes, But...

There is reimbursement in the UT Medicaid Telehealth Skilled Nurse Pilot Project for Patients in Rural Areas. Patients must meet a number of specific requirements to be eligible.

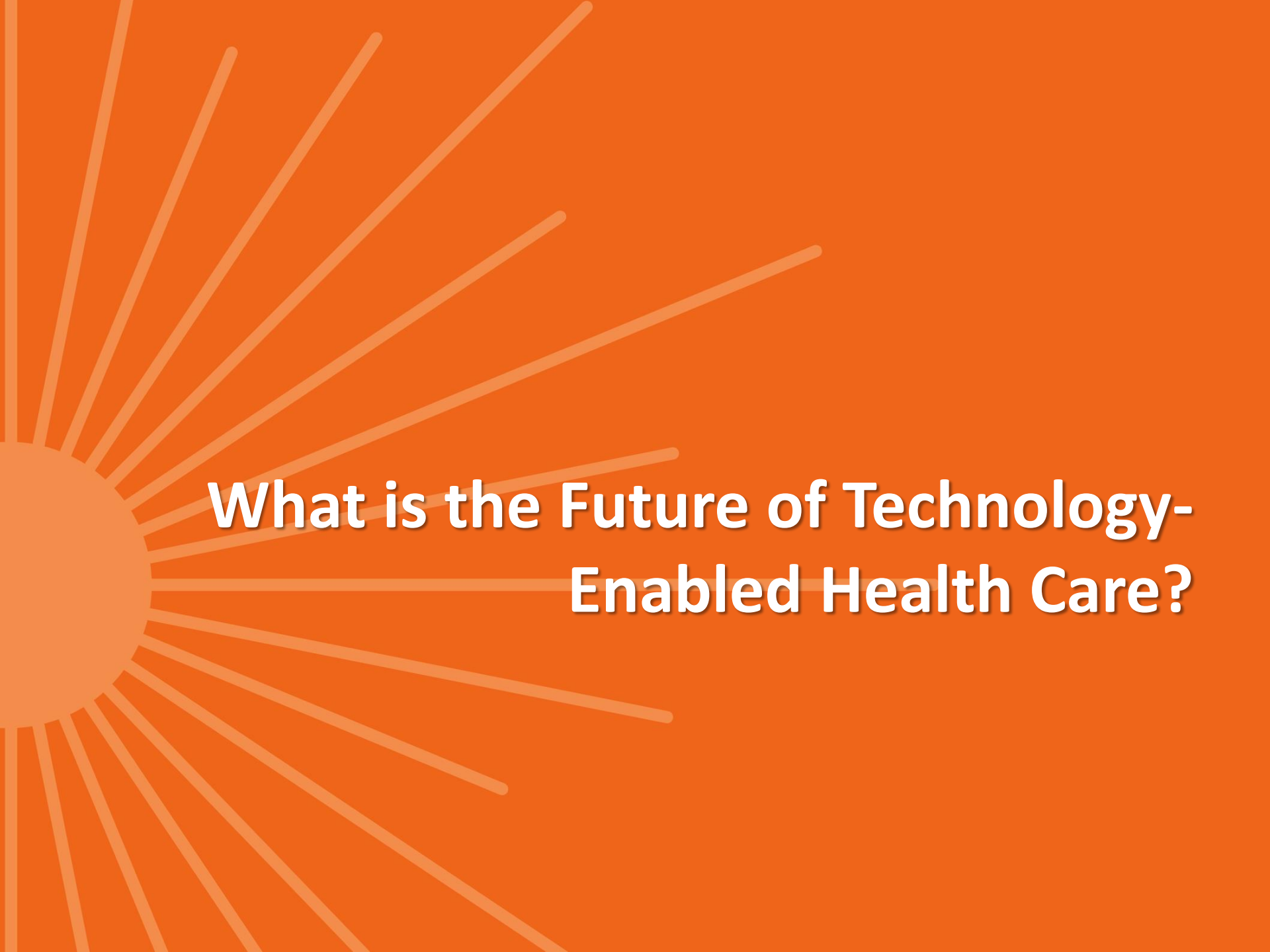


Cross-State Licensing

An out-of-state physician may practice without a Utah license if:

- The physician is licensed in another state, with no licensing action pending and at least 10 years of professional experience;
- The services are rendered as a public service and for a noncommercial purpose;
- No fee or other consideration of value is charged, expected or contemplated, beyond an amount necessary to cover the proportionate cost of malpractice insurance;
- The physician does not otherwise engage in unlawful or unprofessional conduct



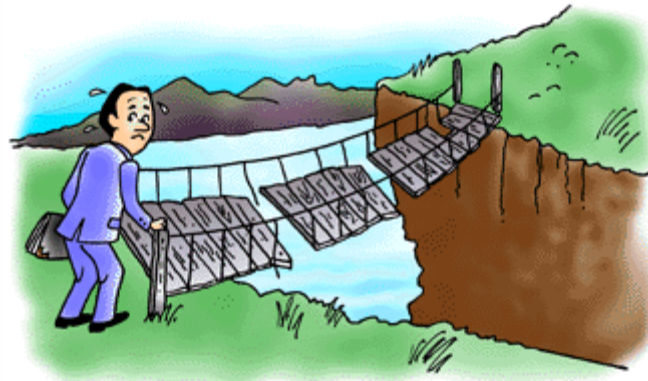
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What is the Future of Technology-Enabled Health Care?

Federal And State Policy: Volume-to-Value

Volume-based

- Pay for service (volumes)
- Cost-based reimbursement
- Hospital/physician independence
- Inpatient focus
- Stand-alone care systems
- Illness care



Value-based

- Pay for results (quality/efficiency)
- Shared risk
- Partnerships and collaborations
- Continuum of care
- Community health improvement (HIT)
- Wellness care



TeleHealth is *Essential* to the Future of Health Care



*Advances in telecommunications technologies can help **redistribute** health care **expertise** to where and when it is needed, and create greater **value***



Virtual Care Anywhere



- 75 million Virtual Medical Visits in N. America-2014
-Deloitte



Mercy-St. Louis Virtual Care Center A Hospital Without Beds



Thank You!

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