

#### **Utah Medicaid and Telehealth**

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### Overview of Medicaid and Telehealth



- The Medicaid State Plan

   (approved to include telehealth since October 1, 1999)
  - For patients residing in rural areas, Medicaid provides limited coverage of:
    - Telehealth home care for diabetic patients
    - Telehealth services for Children with Special Health Care Needs
  - Services must meet Utah Health Information Network standards for telehealth
- Telehealth services are also provided by the Prepaid Mental Health Plans

#### **Recent CMS Guidance**



- "Telemedicine seeks to improve a patient's health by permitting two-way, real time interactive communication between patient, and the physician or practitioner at the distant site"
- Viewed as a cost-effective alternative that states can choose to cover under Medicaid
- States are not required to submit a separate
  State Plan Amendment, if they decide to
  reimburse for telemedicine services the same
  way/amount that they pay for face-to-face
  services/visits/consultations

#### **CMS** Guidance (continued)



- Modeled on Medicare's definition of telehealth services (42 CFR 410.78)
- Requires at a minimum, audio and video equipment

#### Telehealth Infrastructure Enhancements



- During the 2014 session the Utah legislature appropriated \$1,000,000 in one-time funding for telehealth infrastructure enhancements to enhance the feasibility of providing Medicaid services via telehealth
- Medicaid will be responsible for purchasing and implementing the telehealth equipment

# Purchasing and Placement of Telehealth Equipment



- Utah Education and Telehealth Network (UETN) staff will make recommendations on the purchase and placement of telehealth equipment across the state
- Recommendations will be reviewed by the UETN Board
- The UETN Board recommendations will be reviewed and approved by the Medicaid Director
- It is anticipated that CMS will match some of the funds but will need to approve capital infrastructure purchases
- It is likely the agency will need carry forward authority on this appropriation

## Utah Education and Telehealth Network



- During the 2014 session the Utah legislature appropriated \$35,000 in state funds
  - Appropriation will be matched with federal funds as an administrative expense
  - Funds will allow Medicaid to contract with UETN to promote telehealth use within Medicaid
  - Medicaid will work with UETN to understand and eliminate barriers to promote the use of telehealth

## **Examples of Potential Telehealth Purchases\***



- The following examples are potential telehealth equipment purchases:
  - High definition videoconferencing bridge
    - To support the growing need for multi-point connections, expanding current capacity
    - For patient care collaboration and mentoring, health professional training and education and meetings

## **Examples of Potential Telehealth Purchases\***



- Web-based videoconferencing platform
  - Deploy state-wide secure, easy-to-use videoconferencing on mobile devices and laptops that is interoperable with traditional videoconferencing
  - Expands options for telehealth to patients in their homes, clinicians, students, small clinics, behavioral health centers and health departments

## **Examples of Potential Telehealth Purchases\***



- Network reliability
  - Improve redundancy of the network core
  - Hospitals and clinics rely on the telehealth network to access electronic medical records
- Tablets
  - For telehealth use by patients, such as families of children with special health care needs

\*Source: Utah Telehealth Network Advisory Board

#### Role of Telehealth



- Telemedicine is viewed as a cost-effective alternative to the more traditional face-to-face way of providing medical care (e.g., face-to-face consultations or examinations between provider and patient)
- Telehealth has the potential to reduce patient transportation costs and reduce the need for more costly hospital visits and health treatments
- Looking to the future of the Medicaid ACO model and/or any expansion of Medicaid eligibility requires continued emphasis on providing care in the most efficient and effective manner