MEDICAID SERVICES MANUAL
TRANSMITTAL LETTER

November 12, 2015

TO: CUSTODIANS OF MEDICAID SERVICES MANUAL

FROM: TAMMY MOFFITT, CHIEF OF PROGRAM INTEGRITY

SUBJECT: MEDICAID SERVICES MANUAL CHANGES
CHAPTER 3400 - TELEHEALTH SERVICES

BACKGROUND AND EXPLANATION

Revisions to Medicaid Services Manual (MSM) Chapter 3400 are being proposed to align with the Nevada's 78th Legislative Session. Policy is being updated to include services that are clinically appropriate and within a health care professionals scope of practice. This establishes parity between face-to-face and telehealth services. All health care services provided via telehealth follow policy as outlined in the appropriate MSM chapter.

These changes are effective December 1, 2015.

MATERIAL TRANSMITTED	MATERIAL SUPERSEDED
MTL 30/15 CHAPTER 3400 - TELEHEALTH SERVICES	MTL 19/14 CHAPTER 3400 - TELEHEALTH SERVICES

Manual Section	Section Title	Background and Explanation of Policy Changes, Clarifications and Updates
3403.1	**Telehealth Policy**	Adds a definition of "telehealth." Specifies that telehealth services must be clinically appropriate, within the health care professional's scope of practice and must follow policy as outlined in appropriate MSM chapter. Throughout MSM 3400 "physician or provider" has been updated to say "health care professional."
3403.2	**Telehealth Services at Originating Site**	Adds definition of "originating site." Removed list of originating sites in order to expand what qualifies as an originating site.

Manual Section	Section Title	Background and Explanation of Policy Changes, Clarifications and Updates
3403.3	**Telehealth Service Providers at Distant Site**	Adds definition of "distant site." Clarified that telehealth services must be clinically appropriate. Removed list of providers who can provide telehealth services at a distant site as policy is being expanded to all qualified providers for all appropriate services.
3403.4	**Covered Telehealth Services**	Adds language to clarify that telehealth services must be appropriate and follow the standard of care for the provider. Services follow policy outlined in their specific MSM chapter. The list of services was deleted as services via telehealth are expanded to all clinically appropriate services.
3403.5	**Coverage and Limitations**	Deleted language related to Diabetes Self Management Training as it is unnecessary and outdated. It remains an allowable service via telehealth and coverage is outlined in MSM 600, Physician Services.
3403.8	**Prior Authorization**	Statement added to clarify that prior authorization for services provided via telehealth follow the same guidelines as services provided in person.

DIVISION OF HEALTH CARE FINANCING AND POLICY

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TELEHEALTH SERVICES

3400 INTRODUCTION

Telehealth is the use of a telecommunications system to substitute for an in-person encounter for professional consultations, office visits, office psychiatry services, and a limited number of other medical services.

All providers participating in the Medicaid and Nevada Check Up (NCU) programs must offer services in accordance with the rules and regulations of the Division of Health Care Financing and Policy (DHCFP).

Telehealth services are an optional benefit within the DHCFP.

All Medicaid policies and requirements (such as prior authorization, etc.) are the same for NCU. For further clarification, please refer to the NCU Manual, Chapter 1000.

3401 AUTHORITY

The State Legislature grants authority to the relevant professional licensure boards to set the standard of practice for licensed professionals in the Nevada Revised Statutes (NRS) for the following specialists:

a. NRS-Chapter 449-Hospitals;

b. NRS-Chapter 629-Healing Arts Generally;

c. NRS-Chapter 630-Physicians and Physician Assistants;

d. NRS-Chapter 632-Nursing;

e. NRS-Chapter 633-Osteopathic Medicine; and

f. NRS-Chapter 641-Psychologists, Social Workers.

3402 RESERVED

3403 POLICY

3403.1 TELEHEALTH POLICY

The Division of Health Care Financing and Policy (DHCFP) reimburses for telehealth services. The originating site must be located in rural, suburban or urban locations with no geographical restrictions within the state of Nevada. "Telehealth" is defined as the delivery of service from a provider of health care to a patient at a different location through the use of information and audio-visual communication technology, not including standard telephone, facsimile, or electronic mail. Services provided via telehealth must be clinically appropriate and within the health care professional's scope of practice. Services provided via telehealth have parity with face-to-face health care services. Health care professionals must follow the appropriate Medicaid Services Manual (MSM) policy for the specific service they are providing.

The distant site is the site where the provider delivering services is located at the time the service is provided via a telecommunications system.

Photographs must be specific to the patient's condition and adequate for rendering or confirming a diagnosis or a treatment plan. Dermatologic photographs (e.g., photographs of a skin lesion) may be considered to meet the requirement of a single media format under this instruction.

Reimbursement for the DHCFP covered telehealth services must satisfy federal requirements of efficiency, economy and quality of care.

All participating providers must adhere to requirements of the Health Insurance Portability and Accountability Act (HIPAA). The DHCFP may not participate in any medium not deemed appropriate for protected health information by the DHCFP's HIPAA Security Officer.

3403.2 TELEHEALTH SERVICES AT ORIGINATING SITE

The originating site is the location where an eligible Medicaid/Nevada Check Up (NCU) recipient is at the time the service is being furnished (via a telecommunications system).

a. Telehealth services may substitute for an in-person encounter at an originating site. "Originating site" is defined as the location of the site where a patient is receiving telehealth services from a provider of health care located at a distant site. To be reimbursed a facility fee as an originating site, the originating site must be a qualified Medicaid provider that is appropriate for the scope of practice being provided via telehealth.

3403.3 TELEHEALTH SERVICE PROVIDERS AT DISTANT SITE

The reimbursement amount for the professional service provided (via a telecommunications system) by the physician or provider at the distant site is equal to the current physician fee schedule amount for the service. Reimbursement for telehealth services should be made at the same amount as when these services are furnished without the use of a telecommunications system. The service must be within a provider's scope of practice under state law, must be clinically appropriate and follow standard of practice. When the health care professional at the distant site is licensed or otherwise authorized under state law to provide a covered telehealth service, then he or she may bill for and receive reimbursement for this service when delivered via a telecommunications system.

The "distant site" is defined as the location of the site where a telehealth provider of health care is providing telehealth services to a patient located at an originating site. The behavioral health provider at the distant site must be licensed to furnish the service under Nevada state law. The behavioral health provider at the distant site who is licensed or otherwise authorized under Nevada state law to furnish a covered telehealth service may bill and receive reimbursement for the service when it is delivered (via a telecommunications system).

3403.4 COVERED TELEHEALTH SERVICES

Telehealth services must be appropriate and provided within a manner that maintains the standard of care required of the provider of health care. All services provided via telehealth must follow policy outlined in the appropriate Medicaid Services Manual (MSM) Chapter.

3403.5 COVERAGE AND LIMITATIONS

The following coverage and limitations pertain to telehealth services:

a. The medical examination of the patient is under the control of the health care professional at the distant site.

b. While the distant physician or provider may request a telepresenter, a telepresenter is not required as a condition of reimbursement.

1. Subsequent Hospital Care

a. Subsequent hospital care is limited to one telehealth visit every three calendar days.

b. The frequency limit of the benefit is not intended to apply to consulting physicians or providers, who should continue to report initial or follow-up inpatient telehealth consultations.

2. Subsequent Nursing Facility Care

   a. Subsequent nursing facility care is limited to one telehealth visit every 30 calendar days.

   b. Subsequent nursing facility care services reported for a federally-mandated periodic visit under 42 Code of Federal Regulations (CFR) 483.40(c) may not be furnished through telehealth.

   c. The frequency limit of the benefit is not intended to apply to consulting physicians or providers who should continue to report initial or follow-up inpatient telehealth consultations.

3. Inpatient Telehealth Consultations

   a. Inpatient telehealth consultations are furnished to beneficiaries in hospitals or SNF (via telehealth) at the request of the physician of record, the attending physician, or another provider.

   b. The health care professional who furnishes the initial inpatient consultation (via telehealth) cannot be the health care professional of record or the attending health care professional.

   c. Counseling and coordination of care with other health care professionals or agencies is included as well, consistent with the nature of the problem(s) and the patient's needs.

4. Licensed Clinical Psychologist (LCP), Licensed Clinical Social Worker (LCSW) and clinical staff employed and determined by a state mental health agency to meet established class specification qualifications of a Mental Health Counselor, Clinical Social Worker or Psychological Assistant

   a. LCPs, LCSWs and clinical staff employed and determined by a state mental health agency to meet established class specification qualifications of a Mental Health Counselor, Clinical Social Worker or Psychological Assistant may bill and receive reimbursement for individual psychotherapy (via a telecommunications system), but may not seek reimbursement for medical evaluation and management services. Refer to MSM Chapter 400 for medical coverage requirements.

5. End Stage Renal Disease (ESRD)

a. ESRD visits must include at least one face-to-face visit to examine the vascular access site by a provider; however an interactive audio/video telecommunications system may be used for providing additional visits.

b. Medical records must indicate that at least one of the visits was furnished face-to-face by a provider. Refer to MSM Chapter 600 for medical coverage requirements.

6. Smoking Cessation

a. Smoking cessation counseling services are covered only for pregnant women. Refer to MSM Chapter 600 for medical coverage requirements.

3403.6 NON COVERED SERVICES

A. Services delivered using telecommunications, but not requiring the recipient to be present during the consultant's evaluation.

B. Interpretation and report of radiology and diagnostic testing.

C. Asynchronous telecommunications in single media format, such as:

1. telephone calls;

2. images transmitted via facsimile machines (faxes); and

3. text messages (electronic mail).

3403.7 RECIPIENT RESPONSIBILITY

To be eligible for telehealth services, recipients must present from a qualifying originating site as defined in Section 3403.2(a).

3403.8 PRIOR AUTHORIZATION

Telehealth services follow the same prior authorization requirements as services provided in person. Utilization of telehealth services does not require prior authorization. However, individual services delivered (via telehealth) may require prior authorization. It is the provider's responsibility to refer to the individual medical coverage policies through the MSM for coverage requirements.

3404 HEARINGS

Please reference Medicaid Services Manual (MSM) Chapter 3100, Hearings for Medicaid recipient hearing procedures.