

Telemedicine Benefits to Change for Texas Medicaid on or after June 1, 2017

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Note: *Texas Medicaid managed care organizations (MCOs) must provide all medically necessary, Medicaid-covered services to eligible clients. Administrative procedures such as prior authorization, pre-certification, referrals, and claims/encounter data filing may differ from traditional Medicaid (fee-for-service) and from MCO to MCO. Providers should contact the client's specific MCO for details.*

Effective for dates of service on or after June 1, 2017, telemedicine benefits will change for Texas Medicaid.

Overview of Benefit Changes

Major changes to this medical benefit policy include the following:

- Updated patient and distant site guidelines
- Addition of patient health information security guidelines
- Clarification of documentation requirements
- Procedure code updates

Patient Site

Established Medical Site

Telemedicine medical services provided at an established medical site may be used for all client visits, including initial evaluations to establish a defined physician-client relationship between a distant site provider and a client.

Client's Private Home

A client's private home is not considered an established medical site, except when the medical services provided in the home (including a group or institutional setting where the client is a resident) are limited to mental health services.

For medical services other than mental health services to be provided in the client's home, including a group or institutional setting where the client is a resident, the following requirements must be met:

- A patient site presenter is present
- There is a defined physician-client relationship as defined in Title 22 Texas Administrative Code (TAC) 174.8
- The patient site presenter has sufficient communication and remote medical diagnostic technology to allow the physician to carry out an adequate physical examination that is appropriate for the client's presenting condition, while seeing and hearing the client in real time. The following communications do not meet this requirement:
 - An online questionnaire

- Questions and answers exchanged through email, electronic text, or chat
- Telephonic evaluation or consultation with a client
- The physical examination will be held to the same standard of acceptable medical practices as those in traditional clinical settings

Procedure code Q3014 is not a benefit if the patient site is the client's home.

School-Based Setting

Telemedicine medical services provided in a school-based setting by a physician, even if the physician is not the client's primary care physician or provider, are benefits if all of the following criteria are met:

- The physician is an authorized health-care provider enrolled in Texas Medicaid
- The client is a child who is receiving the service in a primary or secondary school-based setting
- The parent or legal guardian of the client provides consent before the service is provided
- A health professional is present with the client during treatment

Telemedicine services provided in a school-based setting are also a benefit if the physician delegates provision of services to a nurse practitioner, clinical nurse specialist, or physician assistant, as long as the nurse practitioner, clinical nurse specialist, or physician assistant is working within the scope of their professional license and within the scope of their delegation agreement with the physician.

Other Site

For telemedicine medical services provided at a site other than an established medical site, the following will apply:

- Patient-site presenters are not required for pre-existing conditions previously diagnosed by a physician through a face-to-face visit
- All clients must be seen by a physician for an in-person evaluation at least once a year
- Telemedicine medical services may not be used to treat chronic pain with scheduled drugs

A distant site provider may treat an established client's new symptoms that are unrelated to the client's pre-existing condition. The client must be advised to see a physician in a face-to-face visit within 72 hours. A distant site provider may not provide continuing telemedicine medical services for these new symptoms if the client has not seen a physician within 72 hours. If the client's symptoms are resolved within 72 hours, and continuing treatment for the acute symptoms is no longer necessary, then a follow-up face-to-face visit is not required.

A distant site provider who provides telemedicine medical services at a site other than an established medical site for a previously diagnosed medical condition must do one of the following:

- See the client one time in a face-to-face visit before providing telemedicine medical care
- See the client without an initial face-to-face visit, as long as the client has received an in-person evaluation by another physician who has referred the client for additional care and the referral is documented in the medical record

Patient Site Presenter

For new conditions, the patient site presenter must be readily available onsite at the established medical site to assist with care.

Note: *Readily available means the patient site presenter is in the same room as the client or at the discretion of the licensed or certified professional providing the service, is not in the same room as the client but within the proximity determined by the licensed or certified professional providing the telemedicine service.*

A distant site provider delegating tasks to a patient site presenter must ensure that the patient site presenter is properly supervised.

It is at the discretion of the distant site provider if a patient site presenter is necessary for follow-up evaluation or treatment of a previously diagnosed condition.

If the only services provided are related to mental health services, a patient site presenter is not required, except in cases of behavioral emergencies, as defined by Title 25 TAC 415.253.

Distant Site

A distant site provider is the physician, or physician assistant, nurse practitioner, or clinical nurse specialist who is supervised by and has delegated authority from a licensed Texas physician, who uses telemedicine to provide health-care services to a client in Texas. Hospitals may also serve as the distant site provider.

If the distant site provider is unable to obtain all pertinent clinical information necessary for the practice of medicine at an acceptable level of safety through a telemedicine visit, the distant site provider must inform the client before the conclusion of the telemedicine visit. The distant site provider must also advise the client to obtain an additional in-person medical evaluation to meet the client's medical needs.

Required Acknowledgements

Distant site providers that communicate with clients through email or other electronic method must provide clients with written notification of the physician's privacy practices prior to evaluation and treatment. A good faith effort must be made to obtain the client's written acknowledgement of the notice, including by email response.

Before providing services, distant site providers who use telemedicine medical services must give their clients notice regarding telemedicine medical services, including the risks and benefits of being treated via telemedicine, how to receive follow-up care or assistance in the event of an adverse reaction to the treatment or in the event of an inability to communicate as a result of a technological or equipment failure. A signed and dated notice, including an electronic acknowledgement, by the client establishes a presumption of notice.

Patient Health Information Security

If a patient site presenter is not required for the telemedicine visit, the software system used by the distant site provider must allow secure authentication of the distant site provider and the client.

If a patient site presenter is required for the telemedicine visit, the software system used by both the distant and patient site providers must allow secure authentication of the distant site provider and the client.

The physical environments of the client and the distant site provider must ensure that the client's protected health information remains confidential. A parent or responsible adult may be physically located in the patient site or distant site environment during a telemedicine visit with a child.

A parent or responsible adult must provide written or verbal consent to the distant site provider to allow any other individual, other than the distant site provider, the patient site presenter, or a representative of the distant site provider or patient site presenter, to be physically present in the distant or patient site environment during a telemedicine visit with a child.

An adult client must also provide written or verbal consent to the distant site provider to allow any other individual, other than the distant site provider, the patient site presenter, or a representative of the distant site provider or patient site presenter, to be physically present in the distant or patient site environment during a telemedicine visit.

Providers of telemedicine services must maintain the confidentiality of protected health information (PHI) as required by Federal Register 42, Code of Federal Regulations (CFR) Part 2, 45 CFR Parts 160 and 164, Chapters 111 and 159 of the Texas Occupations Code, and other applicable federal and state law.

Providers of telemedicine services must also comply with the requirements for authorized disclosure of PHI relating to clients in state mental health facilities and residents in state supported living centers, which are included in, but not limited to, 42 CFR Part 2, 45 CFR Parts 160 and 164, Texas Health and Safety Code §611.004, and other applicable federal and state law.

All client health information generated or utilized during a telemedicine visit must be stored by the distant site provider in a client health record using software that complies with Health Insurance Portability and Accountability Act (HIPAA) confidentiality and data encryption requirements, as well as with the United States Health and Human Services (HHS) rules implementing HIPAA.

Documentation Requirements

Distant site providers must document in the medical record an adequate and complete medical history for the client before providing treatment.

Medical records must include copies of all relevant client-related electronic communications, including relevant client-physician email, prescriptions, laboratory and test results, evaluations and consultations, and records of past care and instructions. When possible, telemedicine encounters that are recorded electronically must also be included in the medical record.

If a client has a primary care provider and the client, or their parent or legal guardian, provides consent to a notification, a telemedicine provider must notify the client's primary care provider of any telemedicine services provided.

For telemedicine services provided to a child in a school-based setting, the notification provided by the telemedicine physician to the child's primary care provider must include a summary of the service, exam findings, prescribed or administered medications, and client instructions. If the child does not have a primary care provider, the notification must be provided to the child's parent or legal guardian. In addition to providing treatment information, the notification must include a list of primary care providers from which the child's parent or legal guardian may select a primary care provider.

Procedure Code Benefits

Procedure codes 99354, 99355, 99356, and 99357 will be a benefit for distant-site telemedicine providers, when billed with modifier 95.

Procedure code G0459 will no longer be a benefit for services provided by a psychologist in the office setting.

Preventive health visits under Texas Health Steps (THSteps) are not benefits if performed using telemedicine medical services. Health care or treatment using telemedicine medical services after a THSteps preventive health visit for conditions identified during a THSteps preventive health visit is a benefit. Services provided through telemedicine for abnormalities identified during these preventive health visits may be reimbursed separately to the distant site provider if an acute care evaluation and management procedure code is billed.

For more information, call the TMHP Contact Center at 1-800-925-9126.