Oklahoma Health Care Authority

Telemedicine
Telemedicine

- Policy: OAC 317:30-3-27
- Billing
- Technology
Telemedicine Applicability & Scope

- The purpose of the SoonerCare telemedicine is to improve access to health care services by enabling the provision of medical specialty care in rural or underserved areas to meet the needs of members and providers alike, while complying with all applicable federal and state statutes and regulations.

- Telemedicine services are not an expansion of SoonerCare covered services - but an option for the delivery of certain covered services. SoonerCare views telemedicine no differently than an office visit or outpatient consultation.

- If there are technological difficulties in performing an objective thorough medical assessment or if the member refuses to give consent to receive services via telemedicine, hands-on-assessment and/or care must be provided for the member.
Telemedicine Applicability & Scope

- Quality of health care must be maintained regardless of the mode of delivery.

- A telemedicine encounter must comply with the Health Information Portability and Accountability Act (HIPAA) and must include an originating site, distant site, and certified or licensed health care professional to present the member at the originating site to the rendering provider located at the distant site.
Telemedicine Definitions

(1) Distant site - the site where the specialty physician/practitioner providing the professional service is located at the time the service is provided via audio/video telecommunications.

(2) Certified or licensed health care professional - an individual who has successfully completed a prescribed program of study in any variety of health fields and who has obtained an Oklahoma state license or certificate indicating his or her competence to practice in that field.

(3) Originating site - the location of the SoonerCare member at the time the service is being performed by a contracted provider via audio/video telecommunications.
Telemedicine Definitions

(4) **Telehealth** - the use of telecommunication technologies for clinical care (telemedicine), patient teaching and home health, health professional education (distance learning), administrative and program planning, and other diverse aspects of a health care delivery system.

(5) **Telemedicine** - the practice of health care delivery, diagnosis, consultation and treatment and the transfer of medical data through interactive audio, video or data communications that occur in the real-time or near real-time and in the physical presence of the member.

(6) **Telemedicine network** - a network infrastructure, consisting of computer systems, software and communications equipment to support telemedicine services.
Telemedicine Definitions

(7) **Store and forward** - the asynchronous transmission of medical information to be reviewed at a later time. A camera or similar device records (stores) an image(s) that is then sent (forwarded) via telecommunications media to another location for later viewing. The sending of x-rays, computed tomography scans, or magnetic resonance images are common store and forward applications. The original image may be recorded and/or forwarded in digital or analog format and may include video "clips" such as ultrasound examinations, where the series of images that are sent may show full motion when reviewed at the receiving location.

(8) **Interactive telecommunications** - multimedia communications equipment that includes, at a minimum, audio/video equipment permitting two-way, real-time or near real-time service or consultation between the member and the practitioner.
Telemedicine Definitions

(9) **Underserved area** - an area that meets the definition of a medically underserved area (MUA) or medically underserved population (MUP) by the U.S. Department of Health and Human Services (HHS).
http://www.hrsa.gov/shortage/

(10) **Medical specialty** - a doctor or surgeon who continued medical training beyond a general medical degree and specialized in a specific area of medicine such as surgery, neurology, cardiology, rheumatology, dermatology, oncology, and other specialized fields. For purposes of SoonerCare telemedicine this does not include providers of primary care type services rather tertiary type care.
Location of Facility

- Telemedicine is intended to overcome geographical barriers, connecting SoonerCare member with specialty providers who are not in the same physical location.

- Reimbursement for telemedicine services is available only when the originating site is located in a geographic area where there is a lack of medical/psychiatric/behavioral health expertise and the distance from the originating and distant site is greater than 20 miles apart, with few exceptions. The OHCA may make an exception to this requirement based on geographic limitations and service constraints.
Eligible Services

Services that are eligible for reimbursement are limited to the following:

- consultations
- office visits
- individual psychotherapy
- psychiatric diagnostic interview examinations and testing
- behavioral health assessments
- behavioral health service plan development
- pharmacologic management
- high risk obstetrical services
Coverage

(1) An interactive telecommunications system is required as a condition of coverage.

(2) Coverage for telemedicine services is limited to members in rural areas, underserved areas, or geographic areas where there is a lack of medical specialty, psychiatric, or behavioral health expertise locally.

(3) Office and outpatient visits that are conducted via telemedicine are counted toward the applicable benefit limits for these services.
Authorized Originating Sites

Per SoonerCare policy only the following facilities are eligible to be an originating site:

- The office of a physician or practitioner
- A hospital
- A school
- An outpatient behavioral health clinic
- A critical access hospital
- A rural health clinic (RHC)
- A federally qualified health center (FQHC)
- An Indian Health Service facility, a Tribal health facility or an Urban Indian clinic (I/T/U)
Originating Sites Requirements

- An appropriate certified or licensed health care professional at the originating site is required to present the member to the physician or practitioner at the distant site and remain available as clinically appropriate. (i.e. RN, LPN, CNS, Certified Case Manager, etc.)

- The originating site must provide pertinent health information and/or records to the distant site provider via a secure HIPAA complaint transmission.
Authorized Distant Sites Providers

Authorized distant site specialty physicians and practitioners are contracted:

- Physicians
- Advanced Registered Nurse Practitioners
- Physicians Assistants
- Genetic Counselors
- Licensed Behavioral Health Professionals
- Dieticians

For purposes of SoonerCare telemedicine, paraprofessionals or individuals under supervisions are not considered authorized distant site specialty providers.
Appropriate Distant Sites

Appropriate distant sites include but are not limited to:

- Hospitals
- Clinic
- Outpatient Behavioral Health Agencies
- Medical site (Office of a physician or practitioner)
- Approved mobile medical units

- A private home is not an acceptable distant site.
- A facility that does not guarantee HIPAA compliance is not an acceptable distant site.
- If an agency has an originating and distant site the site must be geographically located in separate cities and/or counties, and must meet current distance requirements.
Conditions

The following conditions apply to all services rendered via telemedicine:

- As a condition of payment the member must be physically present at the originating site and must participate in the telemedicine visit.

- For SoonerCare reimbursement, telemedicine connections to rural areas must be located within Oklahoma and the health providers must be licensed in Oklahoma or practice at an I/T/U.

- Services must be provided by a distant site provider located at an appropriate site.
Conditions

- The health care practitioner must obtain written consent from the SoonerCare member prior to the initial visit that states that the member agrees to participate in the telemedicine-based office visit. The consent form must include a description of the risks, benefits and consequences of telemedicine and be included in the member's medical record.

- An appropriate certified or licensed health care professional (e.g. paraprofessional, nurse assistant) at the originating site is required to present the member to the physician or practitioner at the distant site and remain available as clinically appropriate.

- The parent/guardian need not attend the telemedicine session unless attendance is therapeutically appropriate.

- No new provider contract required for SoonerCare contracted providers.
Conditions

- Sites **must** have the proper security measures, appropriate administrative, physical and technical safeguards that ensure the confidentiality, integrity, and security of electronic protected health information (ePHI).

- Sites are clinical environments, the location of the room for the encounter at both ends **must** ensure comfort, privacy, and confidentiality.

- The member retains the right to withdraw at any time.

- SoonerCare telemedicine **must** ensure that the standard of care delivered via telemedicine is equivalent to any other type of care that can be delivered to the SoonerCare member, considering the specific context, location and timing, and relative availability of in-person care.
Conditions

- All existing confidentiality protections apply.

- The member has access to all transmitted medical information, with the exception of live interactive video as there is often no stored data in such encounters.

- There will be no dissemination of any member images or information to other entities without written consent from the member.

- Distance from the originating and distant site must be greater than 20 miles apart, geographic limitations and service constraints may be considered as exceptions to this rule.
Billing

- All services rendered using telehealth technology from the distant site must be billed with the appropriate modifier “GT”.

- Physicians/practitioners must submit the appropriate CPT procedure code for covered professional telehealth services along with the “GT” modifier. By coding and billing the “GT” modifier with the covered telehealth procedure code, the distant site physician/practitioner certifies that the member was present at an eligible originating site when the telehealth service was furnished.
Billing

- If the technical component of an X-ray, ultrasound or electrocardiogram is performed at the originating site during a telemedicine transmission, the technical component and a telemedicine facility fee are billed by the originating site. The professional component of the procedure and the appropriate visit code are billed by the distant site.

- Post payment review may result in adjustments to payment when a telemedicine modifier is billed inappropriately or not billed when appropriate.
Billing

- OHCA letters [2009-06](#) and [2012-43](#) provide additional guidance for telemedicine related billing.

- Only telemedicine services provided utilizing an OHCA approved network are eligible for reimbursement.
Reimbursement – Originating Site

- Originating or Origination refers to the site where the member or patient is physically located.

- An originating site facility fee will be paid to the originating site when the appropriate telemedicine facility fee code is used.

- The originating site is required to submit claims for the facility fee with HCPCS code Q3014 (telehealth originating site facility fee)

- Origination fee is $22.59 (from OHCA fee schedule)
Reimbursement

- Hospital outpatient - payment for facility fee is paid according to fee schedule.

- FQHCs and RHCs - payment is paid separately from the center or clinic all-inclusive rate.

- I/T/Us - payment is reimbursed outside the OMB rate.

- Physicians’/practitioners ‘offices - payment for facility fee is paid according to fee schedule.
Reimbursement – Distant Site

- Distant refers to the site where the medical professional is physically located.

- No new provider contract is required for SoonerCare contracted providers.

- By coding and billing the “GT” modifier with a covered telemedicine procedure code, the distant site physician/practitioner certifies that the member was present at an eligible originating site when the telemedicine services was furnished.

- Professional services performed via telemedicine are paid at the same rate as face to face services.
Non-Covered Services

- Telephone conversation
- Electronic mail message
- Facsimile
- Unencrypted, non-HIPAA complaint Internet-Based communications
- Video cell phone interactions
- Outpatient surgical services
Non-Covered Services

- Home Health services
- Well child checkups, and preventive services
- Laboratory services
- Audiologist services
- Care coordination services
- Physical, speech, or occupational therapy services

- The cost of telemedicine equipment and transmission is not reimbursable by SoonerCare.
Store and Forward Technology

Services delivered using telecommunication technology but not requiring the patient to be present during their implementation are covered the same as services delivered when on-site at the medical facility.

A service may be considered to be a physician’s service where the physician either examines the member in person or is able to visualize some aspect of the member’s condition without the interposition of a third person’s judgment. Direct electroencephalogram tapes, tissue samples, etc.

For example, the interpretation by a physician of an actual electrocardiogram or electroencephalogram reading that has been transmitted electronically is a covered service.

SoonerCare does not consider these services telemedicine and will not reimburse an originating site fee for these services.
Documentation

- Documentation must be maintained at the **originating and the distant** locations to substantiate the services provided.

- Documentation **must** indicate the services were rendered via telemedicine, the location of the originating and distant sites, and which OHCA approved network was used.

- All other SoonerCare documentation guidelines apply to the services rendered via telemedicine. Examples include but are not limited to:
  - Chart notes
  - Start and stop times
  - Service provider's credentials
  - Provider's signature
  - Signed member consent form
Technology

- In order to be an approved telemedicine network, an applicant must be contracted with the OHCA and meet certain technical and privacy standards stated within the contract in order to ensure the highest quality of care.

- Only telemedicine services provided utilizing an **OHCA approved network** are eligible for reimbursement.

- Interactive audio and video telecommunications must be used, permitting real-time communication between the distant site physician or practitioner and the SoonerCare member.
Technology

- All interactive video telecommunication must comply with HIPAA patient privacy regulations at the originating site, the distant site, and the transmission process.

- All communications must be on a secured Virtual Private Network (VPN) that complies with HIPAA Encryption and Redundancy requirements.

- The telemedicine equipment and transmission speed must be technically sufficient to support the service billed. If a peripheral diagnostic scope is required to assess the member, it must provide adequate resolution or audio quality for decision making. Staff involved in the telemedicine visit must be trained in the use of the telemedicine equipment and must be competent in its operation.
Technology

Standard equipment:
- Video conferencing device
- Monitor based on the room size and layout
- Lighting based on the room size and layout
- Video camera and microphone
- Network with a minimum band width of 384kbps designated connection using the H.323 Internet protocol
Technology

- Contract Between the Oklahoma Health Care Authority and Telemedicine Technology Entity (OHCA Provider Enrollment – OHCA Website)

- OHCA site review to inspect and evaluate the telecommunications system in order to ensure compliance with OHCA standards and Federal guidelines (OHCA Information Services)
Network and Provider Enrollment

**Network:**
1. Complete Network Assessment Form
   a) Include date of last risk assessment
   b) Complete risk mitigation
   c) Provide high-level network diagram
2. Complete Provider Network Agreement
3. Review SoonerCare reimbursement checklist for telemedicine
4. Submit to OHCA Contracts Unit

**Provider:**
1. Complete SoonerCare provider contract if you are not a contracted provider
   a) Check if you plan to use telemedicine
   b) Identify role (i.e. distant site, originating site)
2. Fax Risk Assessment form

Providers do not need to complete a separate contract to provider services using telehealth technology.
Telemedicine Network Contract

- A telemedicine network contract must be signed and submitted to OHCA
- OHCA will conduct an on site visit to inspect equipment at the network’s location
- The inspection form will be attached to the contract with an approval before the network provider can begin to bill telemedicine services
Need Help?

Contacts for Assistance

Provider Services and Billing – Amanda Bell-Willett
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