

Maryland

Medicaid Program: MD Medicaid Assistance Program

Program Administrator: MD Dept. of Social Services

Regional Telehealth Resource Center: Mid-Atlantic Telehealth Resource Center

Covers the States of: Delaware, Kentucky, Maryland, New Jersey, North Carolina, Pennsylvania, Virginia, and West Virginia as well as the District of Columbia

www.matrc.org

Medicaid Telehealth Reimbursement

Summary

Maryland Medicaid covers live video telehealth conducted by specific providers and in specific originating sites. Although the Medicaid program does not reimburse for store-and-forward, dermatology, ophthalmology and radiology are excluded from the definition of store-and-forward. Maryland Medicaid does reimburse for remote patient monitoring for patients with certain chronic conditions and exhibiting certain risk factors.

Definitions

Telemedicine means, as it relates to the delivery of health care services, the use of interactive audio, video, or other telecommunications or electronic technology:

1. By a health care provider to deliver a health care service that is within the scope of practice of the health care provider at a site other than the site at which the patient is located; and
2. That enables the patient to see and interact with the health care provider at the time the health care service is provided to the patient.

Source: MD Health General Code 15-105.2. (Accessed Apr. 2019).

“Telehealth means the delivery of medically necessary somatic or behavioral health services to a patient at an originating site by distant site provider, through the use of technology-assisted communication.”

Source: Code of Maryland Admin. Regs. Sec. 10.09.49.02. (Accessed Apr. 2019).

Live Video

Policy

Reimbursement for telehealth is required for services appropriately delivered through telehealth and may not exclude from coverage a health care service solely because it is through telehealth.

The Department may require providers to submit a registration form to include information required for the processing of telehealth claims.

Source: MD General Health Code Sec. 15-105.2 & Insurance Code 15-139. (Accessed Apr. 2019).

Managed Care

MCOs shall provide coverage for medically necessary telemedicine services.

Source: Code of Maryland Admin. Regs. Sec. 10.09.67.31. (Accessed Apr. 2019).

Maryland Medicaid provides a telehealth program that employs a “hub-and-spoke” model. Communication must be in real-time, and the participant must be at an originating site with a telepresenter.

Source: MD Medicaid Telehealth Program. Telehealth Provider Manual, p. 1. Updated May 2, 2018. (Accessed Apr. 2019).

Mental Health

The Department shall grant approval to a telemental health provider to be eligible to receive State or federal funds for providing interactive telemental health services.

Source: Code of Maryland Admin. Regs. Sec. 10.21.30.03. (Accessed Apr. 2019).



Covered Services - Somatic and behavioral health services: Providers must contact the participant's Healthchoice MCO or Beacon Health Option with questions regarding prior authorization requirements for telehealth services.

Source: MD Medicaid Telehealth Program. Telehealth Provider Manual, p. 2. Updated May 2, 2018. (Accessed Apr. 2019).

Medically necessary services are covered by the Maryland Medical Assistance Program as long as they are:

- Distinct from services provided by the originating site provider;
- Able to be delivered using technology-assisted communication; and
- Clinically appropriate to be delivered via telehealth;

Source: Code of Maryland Admin. Regs. Sec. 10.09.49.05. (Accessed Apr. 2019).

Services should be billed with the GT modifier.

Source: Code of Maryland Admin. Regs. Sec. 10.09.49.11. (Accessed Apr. 2019).

Mental Health Eligible Services:

- Diagnostic interview
- Individual therapy
- Family therapy
- Group therapy, up to 8 individuals
- Outpatient evaluation and management
- Outpatient office consultation
- Initial inpatient consultation
- Emergency department services

Source: Code of Maryland Admin. Regs. Sec. 10.21.30.09. (Accessed Apr. 2019).

Recently Approved Legislation (Now Effective – Expires in two years at the end of September 30, 2020)

If the Department specifies by regulation the types of health care providers eligible to receive reimbursement, the types of health care providers shall include:

- Primary care providers; and
- Psychiatrists who are providing assertive community treatment or mobile treatment services to program recipients located in a home or community-based setting.

Health services provided by a psychiatrist described above is equivalent to the same health care service when provided through in-person consultation.

Source: MD General Health Code Sec. 15-105.2(b)(4)(ii) & Senate Bill 704 (2018). (Accessed Apr. 2019).

Eligible distant site provider:

- Nurse midwife
- Nurse practitioner
- Psychiatric nurse practitioner
- Physician
- A physician assistant
- A provider fluent in American Sign Language providing telehealth services to a deaf or hard of hearing participant

The following sites can register as distant site providers:

- A community-based substance use disorder provider;
- An opioid treatment program;
- An outpatient mental health center; or
- A Federally Qualified Health Center.



Telehealth providers must be enrolled in the Maryland Medical Assistance Program and register as an originating or distant site via an online form before rendering telehealth services. Additionally, providers billing for behavioral health services must register with the Department’s administrative service organization (ASO) before rendering behavioral health services.

Source: MD Medicaid Telehealth Program. Telehealth Provider Manual, p. 3. Updated Mar 2, 2018. & Code of Maryland Admin. Regs. Sec. 10.09.49.07. (Accessed Apr. 2019).

Mental Health

Eligible Providers:

- Outpatient mental health centers
- Telemental health (TMH) providers who are individual psychiatrists

Telemental health providers may be private practice, part of a hospital, academic, health or mental health care system. Public Mental Health System (PMHS) approved community-based providers or individual practitioners may engage in agreements with TMH providers for services. Fee-for-service reimbursement shall be at an enhanced rate, as stipulated by the Department, provided all applicable provisions of this chapter are met and funds are available.

Source: Code of Maryland Admin. Regs. Sec. 10.21.30.03-04. (Accessed Apr. 2019).

Eligible originating sites:

- College or university student health or counseling office
- Community-based substance use disorder provider
- Deaf or hard of hearing participant’s home or any other secure location approved by the participant and provider
- Elementary, middle, high or technical school with a supported nursing, counseling or medical office
- Local health department
- FQHC
- Hospital, including emergency department
- Nursing facility
- Private office of a physician, physician assistant, psychiatric nurse practitioner, nurse practitioner, or nurse midwife
- Opioid treatment program
- Outpatient mental health center
- Renal dialysis center
- Residential crisis services site

Telehealth providers must be enrolled in the Maryland Medical Assistance Program and register as an originating or distant site via an online form before rendering telehealth services. Additionally, providers billing for behavioral health services must register with the Department’s administrative service organization (ASO) before rendering behavioral health services.

Source: MD Medicaid Telehealth Program. Telehealth Provider Manual, p. 2-3. Updated May 2, 2018. & Code of Maryland Admin. Regs. Sec. 10.09.49.07. (Accessed Apr. 2019).

A School-based Health Center (SBHC) with FQHC or local health department sponsoring entities may register as originating sites and bill the telehealth transmission fee code after the SBHC receives approval from MSDE enrolls as a Medicaid provider.

Source: MD Medicaid Telehealth Program FAQs. p. 3, Updated May 2, 2018. (Accessed Apr. 2019).



Medicaid Telehealth Reimbursement

Live Video	Eligible Sites	<p>Mental Health Eligible Originating Sites:</p> <ul style="list-style-type: none"> • County government offices appropriate for private clinical evaluation services; • Critical Access Hospital; • Federally Qualified Health Center; • Hospital; • Outpatient mental health center; • Physician's office; • Rural Health Clinic; • Elementary, middle, high, or technical school with a supported nursing, counseling or medical office; or • College or university student health or counseling office. <p>Source: Code of Maryland Admin. Regs. Sec. 10.21.30.05. (Accessed Apr. 2019).</p>
	Geographic Limits	<p>Mental Health To be eligible a beneficiary must reside in one of the designated rural geographic areas or whose situation makes person-to-person psychiatric services unavailable.</p> <p>Source: Code of Maryland Admin. Regs. Sec. 10.21.30.05. (Accessed Apr. 2019).</p>
	Facility/Transmission Fee	<p>Originating sites may bill for a transmission fee code Q3014.</p> <p>Source: MD Medicaid Telehealth Program. Telehealth Provider Manual. p. 5, Updated May 2, 2018. (Accessed Apr. 2019).</p> <p>Originating sites are eligible for a transmission fee. Fee set in COMAR 10.09.07D; or by the Health Services Cost Review Commission for sites located in regulated space.</p> <p>Transmission fees paid to the originating site may be used to pay for: Line or per minute usage charges or both; and any additional programmatic, administrative, clinical or contingency support at the originating site.</p> <p>Source: Code of Maryland Admin. Regs. Sec. 10.09.49.11. (Accessed Apr. 2019).</p>
Store-and-Forward	Policy	<p>The department may provide reimbursement for services delivered through store-and-forward technology.</p> <p>Source: Health General Code 15-105.2. (Accessed Apr. 2019).</p> <p>Maryland Medicaid does not cover store-and-forward, however dermatology, ophthalmology and radiology are covered under Physician services of COMAR.</p> <p>Source: MD Medicaid Telehealth Program. Telehealth Provider Manual. p. 5, Updated May 2, 2018. (Accessed Apr. 2019).</p>
	Eligible Services/Specialties	<p>MD Medicaid does not cover store-and-forward. However, dermatology, ophthalmology and radiology are excluded from definition of store-and-forward. They do reimburse for these services according to COMAR 10.09.02.07.</p> <p>Source: Code of Maryland Admin. Regs. Sec. 10.09.49.10. (Accessed Apr. 2019).</p>



Medicaid Telehealth Reimbursement

Store-and-Forward	Geographic Limits	No reference found.
	Transmission Fee	No reference found.
Remote Patient Monitoring	Policy	<p>The department may provide reimbursement for services delivered through remote patient monitoring technology.</p> <p>Source: Health General Code 15-105.2. (Accessed Apr. 2019).</p> <p>MD Medicaid reimburses for remote patient monitoring for certain chronic conditions.</p> <p>Source: Remote Patient Monitoring. MD Department of Health. (Accessed Apr. 2019).</p> <p>No reimbursement for home health monitoring services under telehealth manual.</p> <p>Source: MD Medicaid Telehealth Program. Telehealth Provider Manual. Updated May 2, 2018. p. 5, (Accessed Apr. 2019).</p>
	Conditions	<p>Medicaid recipients diagnosed with one of the following conditions qualify:</p> <ul style="list-style-type: none"> • Chronic Obstructive Pulmonary Disease • Congestive Heart Failure • Diabetes (Type 1 or 2) <p>The participant must be enrolled in Medicaid, consent to RPM, have an internet connection and capability to use monitoring tools and have one of the following scenarios within the most recent 12-month period:</p> <ul style="list-style-type: none"> • Two hospital admissions with the same qualifying medical condition as the primary diagnosis • Two emergency room department visits with the same qualifying medical condition as the primary diagnosis • One hospital admission and one emergency department visit with the same qualifying medical condition as the primary diagnosis. <p>Source: MD Home Health Transmittal No. 64. Jan. 10, 2018. (Accessed Apr. 2019).</p>
	Provider Limitations	<p>Eligible Providers:</p> <ul style="list-style-type: none"> • Home Health Agencies • Hospitals • Clinics • Federally Qualified Health Centers • Managed Care Organizations • Health Professionals (Physicians, Nurses, Physician Assistants) <p>Source: Remote Patient Monitoring. MD Department of Health. (Accessed Apr. 2019).</p>



Medicaid Telehealth Reimbursement

Remote Patient Monitoring	Other Restrictions	<p>Preauthorization required.</p> <p>RPM reimbursement rate covers equipment installation, participant education for using the equipment, and daily monitoring of the information transmitted for abnormal data measurements.</p> <p>Reimbursement does not include RPM equipment, upgrades to RPM equipment or internet service for participants.</p> <p>Source: MD Home Health Transmittal No. 64. Jan. 10, 2018. (Accessed Apr. 2019).</p>
Email / Phone / Fax	<p>No reimbursement for email. No reimbursement for telephone. No reimbursement for FAX.</p> <p>No reimbursement for email, phone or telephone conversations between providers.</p> <p>Source: MD Medicaid Telehealth Program. Telehealth Provider Manual. Updated May 2, 2018. p. 6, (Accessed Apr. 2019).</p>	
Consent	<p>The originating site must obtain consent. If the participant is unable to provide consent, the medical record must contain in writing an explanation as to why the participant was unable to consent to telehealth services.</p> <p>Source: MD Medicaid Telehealth Program. Telehealth Provider Manual. Updated May 2, 2018. p. 1-2, (Accessed Apr. 2019).</p> <p>Consent is required unless there is an emergency.</p> <p>Source: Code of Maryland Admin. Regs. Sec. 10.09.49.06. (Accessed Apr. 2019).</p> <p>Mental Health An individual must voluntarily consent to telemental health services, which must be documented in the individual's medical record.</p> <p>Source: Code of Maryland Admin. Regs. Sec. 10.21.30.05. (Accessed Apr. 2019).</p>	
Out of State Providers	<p>No reference found.</p>	



Technology requirements for providers:

- A camera with specific resolution, focus, and zoom capabilities
- Have display monitor sufficient in size
- Bandwidth speed and image resolution sufficient to provide quality video
- Audio equipment that ensures clear communication, unless engaging with a participant who is deaf or hard of hearing
- Creates audio transmission with less than 300 millisecond delay
- Secure and HIPAA compliant telehealth communication

Must ensure HIPAA compliance.

Provider manual outlines various telehealth provider scenarios.

Source: MD Medicaid Telehealth Program. Telehealth Provider Manual. Updated May 2, 2018. p. 3-4 & 9-10 (Accessed Apr. 2019).

Providers of health care services delivered through telehealth must use video and audio transmission with less than a 300 millisecond delay. Other minimum technology requirements apply.

Source: Code of Maryland Admin. Regs. Sec. 10.09.49.08. (Accessed Apr. 2019).

Providers may not store at originating or distant site video images or audio portion of telemedicine services for future use.

Source: Code of Maryland Admin. Regs. Sec. 10.09.49.09. (Accessed Apr. 2019).

Telehealth means, as it relates to the delivery of health care services, the use of interactive audio, video or other telecommunications or electronic technology by a licensed health care provider to deliver a health care service within the scope of practice of the health care provider at a location other than the location of the patient. Telehealth does not include audio-only telephone conversation between a health care provider and a patient; an electronic mail message between a health care provider and a patient; or a facsimile transmission between a healthcare provider and patient.

Source: MD Insurance Code 15-139. (Accessed Apr. 2019).

Insurers must provide coverage under a health insurance policy for health care services appropriately delivered through telehealth and may not exclude coverage solely because it is provided through telehealth and not in-person. The health care services appropriately provided through telehealth must include counseling for substance use disorder.

A health insurer can undertake utilization review, including preauthorization to determine the appropriateness of any health care service whether delivered in-person or through telehealth if the appropriateness is determined in the same manner.

A health insurance policy or contract may not distinguish between patients in rural or urban locations in providing coverage under the policy or contract for health care services delivered through telehealth.

Source: MD Insurance Code Annotated Sec. 15-139. (Accessed Apr. 2019).



Private Payer Laws	Parity	Service Parity	<p>Insurers must reimburse a health care provider for the diagnosis, consultation and treatment of an insured patient that can be appropriately provided through telehealth.</p> <p>Source: MD Insurance Code Annotated Sec. 15-139(c)(1). (Accessed Apr. 2019).</p>
		Payment Parity	<p>No explicit payment parity.</p>
Professional Regulation/Health & Safety	Definitions	<p>Audiologists, Hearing Aid Dispensers and Speech Language Pathologists: “Telehealth means the use of telecommunications and information technologies for the exchange of information from one site to another, for the provision of health care to an individual from a provider through hardwire or Internet connection.”</p> <p>Source: MD Health Occupations Annotated Sec. 2-101(u). (Accessed Apr. 2019).</p> <p>Board of Physicians: “Telemedicine means the practice of medicine from a distance in which intervention and treatment decisions and recommendations are based on clinical data, documents, and information transmitted through telecommunications systems.”</p> <p>Source: Code of Maryland Admin. Regs. Sec. 10.32.05.02. (Accessed Apr. 2019).</p> <p>Perinatal and Neonatal Referral Center Standards: “Telemedicine” means the use of interactive audio, video, or other telecommunications or electronic technology by a licensed health care provider to deliver a health care service within the scope of practice of the health care provider at a site other than the site at which the patient is located, in compliance with COMAR 10.32.05.and including at least two forms of communication.</p> <p>Source: MD COMAR Sec. 30.08.12.01. (Accessed Apr. 2019).</p>	
		<p>Board of Examiners for Audiologists, Hearing Aid Dispensers and Speech Language Pathologists Telehealth providers must inform patients and consultants of the following:</p> <ul style="list-style-type: none"> • The inability to have direct, physical contact with the patient is a primary difference between telehealth and direct in-person service delivery; • The knowledge, experiences, and qualifications of the consultant providing data and information to the provider of the telehealth services need not be completely known to and understood by the provider; • The quality of transmitted data may affect the quality of services provided by the provider; • That changes in the environment and test conditions could be impossible to make during delivery of telehealth services. <p>Telehealth services may not be provided by correspondence only.</p> <p>Source: Code of MD Reg., 10.41.06.04. (Accessed Apr. 2019).</p> <p>Except when providing interpretive services, the physician must obtain and document patient consent.</p> <p>Source: Code of Maryland Admin. Regs. Sec. 10.32.05.06(D). (Accessed Apr. 2019).</p>	
	Consent		



Online Prescribing

A physician-patient relationship can be established through real-time auditory communications or real-time visual and auditory communications.

Source: Code of Maryland Admin. Regs. Sec. 10.32.05.05 (Accessed Apr. 2019).

Cross-State Licensing

Member of the Interstate Medical Licensure Compact.

Source: Interstate Medical Licensure Compact. The IMLC. SB 234 (2018). (Accessed Apr. 2019).

Member of Nurse Licensure Compact.

Source: Nurse Licensure Compact. Current NLC States and Status. NCSBN. (Accessed Apr. 2019).

MD has exceptions to its MD-only licensed physicians for physicians practicing in the adjoining states of Delaware, Virginia, West Virginia, and Pennsylvania if the physician does not have an office or other regularly appointed place in the State to meet patients and the same privileges are extended to licensed physicians in Maryland by the adjoining state.

Source: MD Health Occupations Code Annotated Sec. 14-302 (2012). (Accessed Apr. 2019).

A physician providing services through telemedicine must have a Maryland license if they are located in Maryland, or if the patient is in Maryland.

Source: Code of Maryland Admin. Regs. Sec. 10.32.05.03. (Accessed Apr. 2019).

Miscellaneous

Specific standards apply for physicians utilizing a website to communicate with patients.

Source: Code of Maryland Admin. Regs. Sec. 10.32.05.04 (Accessed Apr. 2019).

Professional Telehealth-Specific Regulations

- Board of Examiners for Audiologists, Hearing Aid Dispensers and Speech Language Pathologists (**Source:** COMAR 10.41.06). (Accessed Apr. 2019).
- Board of Physicians (**Source:** COMAR 10.32.05) (Accessed Apr. 2019).

