# District of Columbia

Medicaid Program: District of Columbia Medicaid

Program Administrator: District of Columbia Dept. of Health Care Financing

Regional Telehealth Resource Center: Mid-Atlantic Telehealth Resource Center www.matrc.org

# D.C. Policy At-a-Glance

ME	EDICAID REIMBURSEME	NT	PRIVATE P	AYER LAW	PROFESSIONAL REQUIREMENTS	
LIVE VIDEO	STORE-AND-FORWARD	REMOTE PATIENT MONITORING	LAW EXISTS	PAYMENT PARITY	LICENSURE COMPACTS	CONSENT REQUIREMENT
<b>Ø</b>	8	8	<b>⊘</b>	8	IMLC	<b>Ø</b>

# D.C. Detailed Policy

Summary

Medicaid shall cover and reimburse for healthcare services appropriately delivered through telehealth if the same services would be covered when delivered in person. Although this law was amended to expand reimbursement to store-and-forward and remote patient monitoring, it was not funded under an approved budget and financial plan and therefore did not go into effect.

Source: DC Code 31-3863. (Accessed Sept. 2020).

"Telehealth" means the delivery of healthcare services through the use of interactive audio, video, or other electronic media used for the purpose of diagnosis, consultation, or treatment; provided, that services delivered through audio-only telephones, electronic mail messages, or facsimile transmissions are not included.

Source: DC Code Sec. 31-3861. (Accessed Sept. 2020).

**Medicaid Telehealth Reimbursement** 

Telehealth is defined as the delivery of healthcare services through the use of interactive audio, video, or other electronic media used for the purpose of diagnosis, consultation, or treatment, provided, that services delivered through audio-only telephones, electronic mail messages, or facsimile transmissions are not included. For the purposes of coverage by the Department of Health Care Finance (DHCF), telehealth and telemedicine shall be deemed synonymous.

Source: Physicians Billing Manual. DC Medicaid. (09/14/2020) Sec. 15.9. Pgs. 67. (Accessed Sept. 2020).

Telemedicine is a service delivery model that delivers healthcare services through a two-way, real time interactive video-audio communication for the purpose of evaluation, diagnosis, consultation, or treatment.

Source: DC Municipal Regulation. Title 29, Ch. 9, Sec. 910.2. (Accessed Sept. 2020). & Physicians Billing Manual. DC Medicaid. (09/14/2020) Sec. 15.9.1. Pgs. 68. (Accessed Sept. 2020).

Live Video

Specialties

DC Medicaid must reimburse for health services through telehealth if the same service would be covered when delivered in person.

Source: DC Code Sec. 31-3863. (Accessed Sept. 2020).

The DC Medical Assistance Program will reimburse telemedicine services, if the Medicaid beneficiary meets the following conditions:

- Be enrolled in the DC Medicaid Program;
- Be physically present at the originating site at the time the telemedicine service is rendered; and
- Provide written consent to receive telemedicine services in lieu of in-person healthcare services, consistent with all applicable DC laws.

Source: DC Municipal Regulation. Title 29, Ch. 9, Sec. 910.5. (Accessed Sept. 2020). & Physicians Billing Manual. DC Medicaid. (09/14/2020) Sec. 15.9.3. P. 68. (Accessed Sept. 2020).

Medicaid shall cover and reimburse for healthcare services appropriately delivered through telehealth if the same services would be covered when delivered in person.

Source: DC Code Sec. 31-3863. (Accessed Sept. 2020).

### Covered Services:

- · Evaluation and management
- Consultation of an evaluation and management of a specific healthcare problem requested by an originating site provider
- Behavioral healthcare services including, but not limited to, psychiatric evaluation and treatment, psychotherapies, and counseling
- · Rehabilitation services including speech therapy

Source: DC Municipal Regulation. Title 29, Ch. 9, Sec. 910.11 & Physicians Billing Manual. DC Medicaid. (09/14/2020) Sec. 15.9.6. P. 69. (Accessed Sept. 2020).

Distant site providers may only bill for the appropriate codes outlined (see manual and guidance).

Source: DC Dept. of Health Care Finance. Telemedicine Provider Guidance. P. 3. (Mar. 2020), DC Municipal Regulation. Title 29, Ch. 9, Sec. 910.12 & Physicians Billing Manual. DC Medicaid. (09/14/2020) Sec. 15.9.8. P. 69-70. (Accessed Sept. 2020).

### **Education-Related Services**

The following reimbursement parameters apply for services delivered under the Office of the State Superintendent of Education through the Strong Start DC Early Intervention Program.

- The LEA shall only bill for distant site services listed in Appendix A that are allowable healthcare services to be delivered at DCPS/DCPCS;
- The LEA shall provide an appropriate primary support professional to attend the
  medical encounter with the member at the originating site. In instances where
  it is clinically indicated, an appropriate healthcare professional shall attend the
  encounter with the member at the originating site.

Source: DC Dept. of Healthcare Finance. Telehealth Provider Guidance. p. 4 & 6 (Mar. 2020). (Accessed Sept. 2020).

## **Newly Passed Legislation**

Health insurance coverage through Medicaid or the DC Healthcare Alliance program shall cover and reimburse health care services and expense for:

- Home visits via telehealth, face-to-face interaction, or digital health for a pregnant woman; and
- Provider delivered digital health interventions that are used to directly manage a patient's pregnancy.

Source: DC Official Code Sec. 31-3861 & B 23-0326 (2020 Session). (Accessed Sept. 2020).

Live Video

Newly Passed Legislation (Projected Law Date is Nov. 16, 2020 - Takes effect following Mayor approval, a 30-day period of congressional review and publication the DC Register) Health insurance coverage through Medicaid or the D.C. Healthcare Alliance program shall cover and reimburse health care services and expenses for:

- Home visits via telehealth, face-to-face interaction, or digital health for a pregnant
- Provider delivered digital health interventions that are used to directly manage a patient's pregnancy.

Source: DC B 23-0326 (2020 Session). (Accessed Sept. 2020).

# Telemedicine providers must comply with the following:

- Be an enrolled Medicaid provider and comply with requirements including having a completed, signed Medicaid Provider Agreement
- Comply with technical, programmatic and reporting requirements
- Be licensed: and
- Comply with any applicable consent requirements, including but not limited to providing telemedicine services at DC public schools or public charter schools.

Source: DC Municipal Regulation. Emergency Regulation. Title 29, Ch. 9, Sec. 910.6. (Accessed Sept. 2020).

D.C. Medicaid enrolled providers are eligible to deliver telemedicine services, using fee-forservice reimbursement, at the same rate as in-person consultations. All reimbursement rates for services delivered via telemedicine are consistent with the District's Medical State Plan and implementing regulations.

Source: Physicians Billing Manual. DC Medicaid. (09/14/2020) Sec. 15.9.4. P. 68-69 & DC Dept. of Healthcare Finance. Telehealth Provider Guidance. p. 4 (Jul. 2020). (Accessed Sept. 2020).

The following providers are considered an eligible distant site provider:

- Hospital
- Nursing facility
- Federally Qualified Health Center
- Physician Group/Office
- Nurse Practitioner Group/Office
- **DCPS**
- DCPCS: and
- MHRS provider, ASARS provider and ASTEP provider certified by DBH and eligible to provide behavioral health services set forth under the State Plan

Source: DC Municipal Regulation. Title 29, Ch. 9, Sec. 910.8 & Physicians Billing Manual. DC Medicaid. (09/14/2020) Sec. 15.9.3. P. 68 & DC Dept. of Healthcare Finance. Telehealth Provider Guidance. p. 3 (Mar. 2020) (Accessed Sept. 2020). Source: DC Dept. of Healthcare Finance. Telehealth Provider Guidance. p. 4 & 6 (Mar. 2020). (Accessed Sept. 2020).

When a beneficiary's home is the originating site, the distant site provider shall ensure the technology in use meets the minimum requirements.

Source: DC Municipal Regulation. Title 29, Ch. 9, Sec. 910.30. (Accessed Sept. 2020).

Eligible Services / Specialties

## **Recently Adopted Rule**

The beneficiary's home may serve as the originating site. When the originating site is the beneficiary's home the distant site provider is responsible for ensuring that the technology in use meets the minimum requirements set forth in Subsection 910.3.

Source: DC Municipal Regulation. Title 29, Ch. 9, Sec. 910 & 910.30. (Accessed Sept. 2020).

Medicaid Telehealth Reimbursement	Live Video	Eligible Sites	<ul> <li>Must be an approved telemedicine provider. The following providers are considered an eligible originating site, as well as eligible distant site provider: <ul> <li>Hospital</li> <li>Nursing facility</li> <li>Federally Qualified Health Center</li> <li>Clinic</li> <li>Physician Group/Office</li> <li>Nurse Practitioner Group/Office</li> <li>District of Columbia Public Schools (DCPS)</li> <li>District of Columbia Public Charter Schools (DCPCS)</li> <li>Mental Health Rehabilitation Service (MHRS) provider, Adult Substance Abuse Rehabilitation Service (ASARS) provider, and Adolescent Substance Abuse Treatment Expansion Program (ASTEP) provider certified by the Department of Behavioral Health (DBH) and eligible to provide behavioral health services set forth under the District of Columbia Medicaid State Plan (State Plan).</li> </ul> </li> </ul>
		Eligible Sites	<ul> <li>The beneficiary's home or other settings identified in guidance published on the DHCF website.</li> <li>Source: DC Municipal Regulation. Title 29, Ch. 9, Sec. 910.7 &amp; Physicians Billing Manual. DC Medicaid. (09/14/2020) Sec. 15.9.3. P. 68 &amp; DC Dept. of Healthcare Finance. Telehealth Provider Guidance. p. 2 (Mar. 2020). (Accessed Sept. 2020).</li> <li>When a beneficiary's home is the originating site, the distant site provider shall ensure the technology in use meets the minimum requirements set forth in Subsection 910.13.</li> <li>In the event the beneficiary's home is the originating site, the distant site provider must bill using the GT modifier and specify the place of service '02'.</li> <li>Source: DC Dept. of Healthcare Finance. Telehealth Provider Guidance. p. 4 &amp; 6 (Mar. 2020). (Accessed Sept. 2020).</li> <li>When DCPS or DCPCS is the originating site provider, a primary support professional (an individual designated by the school) shall be in attendance during the patient's medical encounter.</li> <li>Source: DC Municipal Regulation. Title 29, Ch. 9, Sec. 910.17. (Accessed Sept. 2020).</li> </ul>
		Geographic Limits	No reference found.
		Facility/Transmission Fee	Although facility fees were included under enacted legislation B22-233, it did not become law because it was "not funded" under an approved budget.  Source: DC Code Sec. 31-3866. (Accessed Sept. 2020).  No transaction or facility fee.  Source: Source: DC Municipal Regulation. Title 29, Ch. 9, Sec. 910.28. (Accessed Sept. 2020). & Physicians Billing Manual. DC Medicaid. (09/14/2020) Sec. 15.9.7. P. 69 & DC Dept. of Healthcare Finance. Telehealth Provider Guidance. p. 6 (Mar. 2020). (Accessed Sept. 2020).



Medicaid Telehealth Reimbursement	Remote Patient Monitoring	Provider Limitations	No reference found.		
		Other Restrictions	No reference found.		
	Email / Phone / Fax	DC Medicaid does not reimburse for service delivery using audio-only telephones, e-mail messages or facsimile transmissions.  Source: DC Code Sec. 31-3861 & Physicians Billing Manual. DC Medicaid. (09/14/2020) Sec. 15.9 p. 67. (Accessed Sept. 2020).			
	Consent	Written consent required.  Source: DC Municipal Regulation. Title 29, Ch. 9, Sec. 910.5. (Accessed Sept. 2020). & Physicians Billing Manual. DC Medicaid. (09/14/2020) Sec. 15.9.2. P. 68 & DC Dept. of Healthcare Finance. Telehealth Provider Guidance. p. 2 (Mar. 2020). (Accessed Sept. 2020).			
	Out of State Providers	For healthcare services rendered outside of the District, the provider of the services shall meet any licensure requirements of the jurisdiction in which the patient is physically located.  Source: DC Municipal Regulation. Title 29, Ch. 9, Sec. 910.9. (Accessed Sept. 2020).  "For services rendered outside of the District, providers shall meet any licensure requirements of the jurisdiction where he/she is physically located and the jurisdiction where the patient is physically located."  Source: Physicians Billing Manual. DC Medicaid. (09/14/2020) Sec. 15.9. P. 67-68. (Accessed Sept. 2020).			
	Miscellaneous	FQI ing reir Wh tan	ere an FQHC provides an allowable healthcare service at the originating or distant site, the HC shall be reimbursed the applicable rate (PPS, APM or FFS). If an FQHC is both the originat- and distant site, and both sites render the same healthcare service, only the distant site will be inbursed.  en DCPS or DCPCS provides any of the allowable healthcare services at the originating or distant, the provider shall only be reimbursed for distant site healthcare services that are Mediceligible and are to be delivered in a licensed education agency.		

Miscellaneous

When an originating site and a distant site are CSAs, and the same provider identification number is used for a serviced delivered via telemedicine, only the distant site provider shall be eligible for reimbursement of the allowable healthcare services described within this section.

Source: DC Municipal Regulation. Title 29, Ch. 9, Sec. 910.24, 25, 26 & 27. (Accessed Sept. 2020).

Special reimbursement parameters for FQHCs:

- When FQHC is originating site: An FQHC provider must deliver an FQHC-eligible service in order to be reimbursed the appropriate PPS or fee for service (FFS) rate at the originating site:
- When FQHC is distant site: An FQHC provider must deliver an FQHC-eligible service\* in order to be reimbursed the appropriate PPS or FFS rate; and
- When FQHC is Originating and Distant Site: In instances where the originating site is an FQHC, the distant site is an FQHC, and both sites deliver a service eligible for the same clinic visit/encounter all-inclusive PPS code, only the distant site will be eligible to be reimbursed for the appropriate PPS rate for an FQHC-eligible service.

Source: Physicians Billing Manual. DC Medicaid. (09/14/2020) Sec. 15.9.5. Pgs. 69 & DC Dept. of Healthcare Finance. Telehealth Provider Guidance. p. 4 (Feb. 2018). (Accessed Sept. 2020).

Telemedicine section also appears in Provider Manuals on:

- FQHCs (FQHC Billing Manual Version 2.00, 09/14/2020, p. 49-52 Accessed Sept. 2020).
- Clinics (Clinic Billing Manual Version 4.06, 09/14/2020, p. 49-52 Accessed Sept. 2020).
- Inpatient Hospital (Inpatient Hospital Billing Manual Version 6.01, 09/14/2020, p. 50-53 Accessed Sept. 2020).
- Outpatient Hospital (Outpatient Hospital Billing Manual Version 5.0, 09/14/2020, p. 71-73 Accessed Sept. 2020).
- Long Term Care (Long Term Care Billing Manual Version 5.03, 09/14/2020, p. 54-57 Accessed Sept. 2020).

See regulation and telemedicine guidance for specific technology requirements.

A provider is required to develop a confidentiality compliance plan.

DHCF is required to send a Telemedicine Program Evaluation survey to providers, effective Jan. 1, 2017.

Source: DC Municipal Regulation. Title 29, Ch. 9, Sec. 910.13, 14 & 15 & DC Dept. of Healthcare Finance. Telehealth Provider Guidance. p. 6-7 (Mar. 2020). (Accessed Sept. 2020).

# )efinitio

Miscellaneous

"Telehealth" means the delivery of healthcare services through the use of interactive audio, video, or other electronic media used for the purpose of diagnosis, consultation, or treatment; provided, that services delivered through audio-only telephones, electronic mail messages, or facsimile transmissions are not included.

Source: DC Code Sec. 31-3861. (Accessed Sept. 2020).

Requirements

Health insurers are required to pay for telehealth services if the same service would be covered when delivered in-person.

A health insurer may require a deductible, copayment, or coinsurance that may not exceed the amount applicable to the same service delivered in-person. A health insurer shall not impose any annual or lifetime dollar maximum on coverage for telehealth services other than an annual or lifetime dollar maximum that applies in the aggregate to all items and services under the health benefits plan.

Source: DC Code Sec. 31-3862. (Accessed Sept. 2020).

Private Payer Laws	rity	A health insurer must reimburse a provider for the diagnosis, consultation or treatment the patient when the service is delivered by telehealth.  Source: DC Code Sec. 31-3862. (Accessed Sept. 2020).		
Private Pa	Parity	Payment Parity	No explicit payment parity.	
	Definitions	Telemedicine - The practice of medicine by a licensed practitioner to provide patient care, treatment or services, between a licensee in one location and a patient in another location with or without an intervening healthcare provider, through the use of health information and technology communications, subject to the existing standards of care and conduct.  Source: DC Regs. Sec. 17-4699. (Accessed Sept. 2020).		
Professional Regulation/Health & Safety	Consent	Must obtain and document consent.  Source: DC Regs. Sec. 17-4618.2 (Accessed Sept. 2020).		
	Online Prescribing	A physician shall perform a patient evaluation to establish diagnoses and identify underlying conditions or contraindications to recommended treatment options before providing treatment or prescribing medication for a patient utilizing the appropriate standards of care, except when performing interpretive services.  A physician-patient relationship can be established through real-time telemedicine.  Source: DC Code Sec. 17-4618.3 & 4 (Accessed Sept. 2020).		
	Cross-State Licensing	Member of the Interstate Medical Licensure Compact. – Implementation delayed.  Source: Interstate Medical Licensure Compact. (Accessed Sept. 2020).  Must have license to practice medicine in the District of Columbia.  Source: DC Regs. Sec. 17-4618.1. (Accessed Sept. 2020).		
	Miscellaneous	Prof	fessional Board Telehealth-Specific Regulations  Department of Health (applies to the Board of Medicine)  Source: DCMR Title 17, Ch. 46 Sec. 4618). (Accessed Sept. 2020).	