

Montana

Medicaid Program: Montana Medicaid

Program Administrator: MT Dept. of Public Health and Human Services

Regional Telehealth Resource Center: Northwest Regional Telehealth Resource Center <https://www.nrtrc.org/>

Montana At-a-Glance

| MEDICAID REIMBURSEMENT | | | PRIVATE PAYER LAW | | PROFESSIONAL REQUIREMENTS | |
|------------------------|-------------------|---------------------------|-------------------|----------------|---------------------------|---------------------|
| LIVE VIDEO | STORE-AND-FORWARD | REMOTE PATIENT MONITORING | LAW EXISTS | PAYMENT PARITY | LICENSING COMPACT | CONSENT REQUIREMENT |
| ✓ | ✗ | ✗ | ✓ | ✗ | IMLC, NLC, PTC | ✗ |

Montana Detailed Policy

| | | |
|-----------------------------------|----------------------|--|
| Medicaid Telehealth Reimbursement | Summary | <p>Montana Medicaid reimburses for live video under some circumstances. There is no reimbursement for store-and-forward or remote patient monitoring based on the definition for telemedicine.</p> |
| | Definitions | <p>Telemedicine is the use of interactive audio-video equipment to link practitioners and patients located at different sites.</p> <p>Source: MT Dept. of Public Health and Human Svcs., <i>Medicaid and Medical Assistance Programs Manual, General Information for Providers, Telemedicine</i> (Feb. 2020). (Accessed Mar. 2020).</p> <p>Healthy Montana Kids Telemedicine is “the use of a secure interactive audio and video, or other telecommunications technology by a health care provider to deliver health care services at a site other than the site where the patient is located. Does not include audio only (phone call), e-mail, and/or facsimile transmission.”</p> <p>Source: MT Children's health Insurance Plan, <i>Healthy Montana Kids (HMK). Evidence of Coverage</i> (Nov., 2017), p. 11. (Accessed Mar. 2020).</p> |
| | Live Video Policy | <p>MT Medicaid reimburses for medically necessary telemedicine services to eligible members. Providers must be enrolled as Montana Healthcare Programs providers and be licensed in the state of Montana.</p> <p>Telemedicine should not be used when face-to-face services are medically necessary. Members should establish relationships with primary care providers who are available on a face-to-face basis.</p> <p>The originating and distant providers may not be within the same facility or community. The same provider may not be the “pay to” for both the originating and distance provider.</p> <p>Source: MT Dept. of Public Health and Human Svcs., <i>Medicaid and Medical Assistance Programs Manual, General Information for Providers, Telemedicine</i> (Feb. 2020). (Accessed Mar. 2020).</p> |



Eligible Services / Specialties

Healthy Montana Kids

Services provided by telemedicine are allowed for non-surgical medical services and behavioral health outpatient services.

Source: MT Children's health Insurance Plan, Healthy Montana Kids (HMK). Evidence of Coverage (Nov., 2017), p. 24 & 30. (Accessed Mar. 2020).

Telehealth services are available for Physical, Occupational and Speech Therapy when ordered by a physician or mid-level practitioner. The order is valid for 180 days.

Source: MT Dept. of Public Health and Human Svcs., Medicaid and Medical Assistance Programs Manual, Therapies Manual, Covered Services (Feb. 2020). (Accessed Mar. 2020).

The availability of services through telemedicine in no way alters the scope of practice of any health care provider; or authorizes the delivery of health care services in a setting or manner not otherwise authorized by law.

Source: MT Dept. of Public Health and Human Svcs., Medicaid and Medical Assistance Programs Manual, Physician Related Svcs., Telemedicine (Feb. 2020). (Accessed Mar. 2020).

Eligible Providers

Providers must be enrolled as Montana Healthcare Programs providers and be licensed in the State of Montana in order to:

- Treat a Montana Healthcare Programs member; and
- Submit claims for payment to Montana Healthcare Programs

Source: MT Dept. of Public Health and Human Svcs., Medicaid and Medical Assistance Programs Manual, Physician Related Svcs., Telemedicine (Feb. 2020). (Accessed Mar. 2020).

Eligible Sites

Telemedicine can be provided in a member's residence; the distance provider is responsible for the confidentiality requirements. See Facility/Transmission fee section for list of eligible originating sites for facility fee.

Source: MT Dept. of Public Health and Human Svcs., Medicaid and Medical Assistance Programs Manual, General Information for Providers, Telemedicine (Feb. 2020) (Accessed Mar. 2020).

Geographic Limits

The originating and distant providers may not be within the same facility or community. The same provider may not be the pay to for both the originating and distance provider.

Source: MT Dept. of Public Health and Human Svcs., Medicaid and Medical Assistance Programs Manual, General Information for Providers, Telemedicine (Feb. 2020) & Montana Healthcare Programs Notice. July 26, 2017. (Accessed Mar. 2020).



The following provider types can bill the originating site fee:

- Outpatient hospital
- Critical access hospital*
- Federally qualified health center*
- Rural health center*
- Indian health service*
- Physician
- Psychiatrist
- Mid-levels
- Dieticians
- Psychologists
- Licensed clinical social worker
- Licensed professional counselor
- Mental health center
- Chemical dependency clinic
- Group/clinic
- Public health clinic
- Family planning clinic

*Reimbursement for Q3014 is a set fee and is paid outside of both the cost to charge ratio and the all-inclusive rate.

Originating site providers must include a specific diagnosis code to indicate why a member is being seen by a distance provider and this code must be requested from the distance site prior to billing for the telemedicine appointment.

The originating site provider may also, as appropriate, bill for clinical services provided on-site the same day that a telemedicine originating site service is provided. The originating site may not bill for assisting the distant site provider with an examination, including for any services that would be normally included in a face-to-face visit.

Source: MT Dept. of Public Health and Human Svcs., Medicaid and Medical Assistance Programs Manual, General Information for Providers, Telemedicine (Feb. 2020). (Accessed Mar. 2020).

Source: MT Dept. of Public Health and Human Svcs., Medicaid and Medical Assistance Programs Manual, General Information for Providers, Sec. 5.1 (May 2019). (Accessed Mar. 2020).

No reimbursement for infrastructure or network use charges.

Source: MT Dept. of Public Health and Human Svcs., Medicaid and Medical Assistance Programs Manual, Physician Related Svcs., Billing Procedures (Sep. 2017). (Accessed Mar. 2020).

FQHCs and RHCs can bill a telehealth originating site code if applicable.

Source: MT Dept. of Public Health and Human Svcs., Medicaid and Medical Assistance Programs Manual, Rural Health Clinics & Federally Qualified Health Center, Billing Procedures (Jan, 2020). (Accessed Mar. 2020).

There is no reimbursement for store-and-forward based on the definition for telemedicine restricting the service to interactive audio-video.

Source: MT Dept. of Public Health and Human Svcs., Medicaid and Medical Assistance Programs Manual, General Information for Providers, Telemedicine (Feb. 2020). (Accessed Mar. 2020).

No reference found.



Medicaid Telehealth Reimbursement

| Store-and-Forward | Geographic Limits | No reference found. |
|---------------------------|----------------------|--|
| | Transmission Fee | No reference found. |
| Remote Patient Monitoring | Policy | <p>There is no reimbursement for remote patient monitoring based on the definition for telemedicine restricting the service to interactive audio-video.</p> <p>Source: MT Dept. of Public Health and Human Svcs., Medicaid and Medical Assistance Programs Manual, General Information for Providers, Telemedicine (Feb. 2020). (Accessed Mar. 2020).</p> |
| | Conditions | No reference found. |
| | Provider Limitations | No reference found. |
| | Other Restrictions | No reference found. |



Medicaid Telehealth Reimbursement

Email / Phone / Fax

Telemedicine reimbursement does not include:

- Consultation by telephone
- Facsimile machine transmissions
- Crisis hotlines

Source: MT Dept. of Public Health and Human Svcs., Medicaid and Medical Assistance Programs Manual, General Information for Providers, Telemedicine (Feb. 2020). (Accessed Mar. 2020).

No reimbursement for telephone services in home.

Source: MT Dept. of Public Health and Human Svcs., Medicaid and Medical Assistance Programs Manual, Audiology Svcs., Rural Health Clinics & Federally Qualified Health Center, Covered Services (Jan. 2020); Physical Therapy, Occupational Therapy and Speech Therapy, Covered Services (Aug. 2017); Hospital Outpatient Services, Covered Services (Jan. 2020); Hospital Inpatient Services, Covered Services (Jan. 2020); Physician Services, Covered Services (Sept. 2017); Federally Qualified Health Center, Covered Services (Jan. 2020). (Accessed Mar. 2020).

Consent

No reference found.

Out of State Providers

Providers must be licensed in the state of Montana.

Any out of state distance providers must be licensed in the State of Montana and enrolled in Montana Healthcare Programs in order to provide telemedicine services to Montana Healthcare Programs members. Providers must contact the Montana Department of Labor and Industry to find out details on licensing requirements for their applicable professional licensure.

Source: MT Dept. of Public Health and Human Svcs., Medicaid and Medical Assistance Programs Manual, General Information for Providers, Telemedicine (Feb. 2020). (Accessed Mar. 2020).

Miscellaneous

Effective Jan. 1, 2017 the new place of service code is "02".

Source: MT Dept. of Public Health and Human Svcs., Program Notice. Feb. 7, 2017. (Accessed Mar. 2020).

If a rendering provider's number is required on the claim for a face-to-face visit, it is required on a telemedicine claim.

Source: MT Dept. of Public Health and Human Svcs., Medicaid and Medical Assistance Programs Manual, General Information for Providers, Telemedicine (Feb. 2020). (Accessed Mar. 2020).

Confidentiality requirements apply (see manual).

Source: MT Dept. of Public Health and Human Svcs., Medicaid and Medical Assistance Programs Manual, General Information for Providers, Telemedicine (Feb. 2020). (Accessed Mar. 2020).

Private Payer Laws

Definitions

Telemedicine means the use of interactive audio, video, or other telecommunications technology that is:

- Used by a health care provider or health care facility to deliver health care services at a site other than the site where the patient is located; and
- Delivered over a secure connection that complies with the requirements of HIPPA.
 - The term includes the use of electronic media for consultation relating to the health care diagnosis or treatment of a patient in real-time or through the use of store-and-forward technology.
 - The term does not include the use of audio-only telephone, e-mail, or facsimile transmissions.

Source: MT Code Annotated Sec. 33-22-138(6)(d). (Accessed Mar. 2020).



Requirements

Eligible providers under the parity law include:

- Physicians
- Physician Assistants
- Podiatrists
- Pharmacists
- Optometrists
- Physical Therapists
- Occupational Therapists
- Speech-language Pathologists and Audiologists
- Psychologists
- Social Workers
- Licensed Professional Counselors
- Nutritionists
- Addiction Counselors
- Registered professional nurse
- Advanced practice registered nurse
- Genetic counselor certified by the American board of genetic counseling
- Diabetes educator certified by the national certification board for diabetes
- Dentists & Dental Hygienists

Eligible facilities under this law include:

- Critical access hospital
- Hospice
- Hospital
- Long-term care facility
- Mental health center
- Outpatient center for primary care
- Outpatient center for surgical services

A health insurer is not:

- Required to provide coverage for services that are not medically necessary, subject to the terms and conditions of the policy.
- Permitted to require a health care provider to be physically present with the patient at the site where the patient is located unless the distant site provider determines that the presence of a health care provider is necessary.

Source: MT Code Sec. 33-22-138. (Accessed Mar. 2020).

Parity

Service Parity

Private payers are required to provide coverage for services delivered through telemedicine if the services are otherwise covered by the policy, certificate, contract, or agreement.

Coverage must be equivalent to the coverage for services that are provided in-person by a health care provider or health care facility.

Source: MT Code Sec. 33-22-138. (Accessed Mar. 2020).

Payment Parity

No explicit payment parity.



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|-----------------------|---|
| Definitions | <p>Telemedicine means the practice of medicine using interactive electronic communication, information technology, or other means between a licensee in one location and a patient in another location with or without an intervening health care provider. Telemedicine typically involves the application of secure videoconferencing or store-and-forward technology, as defined in 33-22-138. The term does not mean an audio-only telephone conversation, an e-mail or instant messaging conversation, or a message sent by facsimile transmission.</p> <p>Source: MT Code Sec. 37-3-102(13). (Accessed Mar. 2020).</p> |
| Consent | <p>No reference found.</p> |
| Online Prescribing | <p>No reference found.</p> |
| Cross-State Licensing | <p>Member of the Interstate Medical licensure Compact.</p> <p>Source: The IMLC. Interstate Medical Licensure Compact. (Accessed Mar. 2020).</p> <p>Member of the Nurse Licensure Compact.</p> <p>Source: Current NLC States and Status. Nurse Licensure Compact. (Accessed Mar. 2020).</p> <p>Member of the Physical Therapy Compact.</p> <p>Source: Compact Map. Physical Therapy Compact. (Accessed Mar. 2020).</p> |
| Miscellaneous | <p>Professional Board Telehealth-Specific Regulations</p> <ul style="list-style-type: none"> • MT Board of Speech-Language Pathology (MT Admin Rules, Sec. 24.222.9 (Accessed Mar. 2020)). |

