

# New Hampshire

**Medicaid Program:** New Hampshire Medicaid

**Program Administrator:** Dept. of Health and Human Services

**Regional Telehealth Resource Center:** Northeast Telehealth Resource Center [www.netrc.org](http://www.netrc.org)

## New Hampshire Policy 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, PSYPACT	✘

## New Hampshire Detailed Policy

Medicaid Telehealth Reimbursement	Summary	<p>New Hampshire Medicaid follows the Center for Medicare and Medicaid Services requirements and Federal regulations for the use of telehealth and telemedicine. Reimbursement is available for live video under some circumstances. New Hampshire statute has a definition for store-and-forward and remote patient monitoring. It states that remote patient monitoring shall only be covered in the event that the patient has already established care at an originating site via face-to-face in-person service; and by which an individual shall be construed to prohibit the Medicaid program from providing coverage for only those services that are medically necessary and subject to all other terms and conditions of the coverage. However, no further specific information is provided.</p> <p><b>Source:</b> NH Revised Statutes 167:4-d (Accessed Mar. 2020).</p>
	Definitions	<p>“Telehealth services” shall comply with 42 C.F.R. section 410.78, except for 42 C.F.R. section 410.78(b)(4). The use of the term “telemedicine” shall comply with the Centers for Medicare and Medicaid Services requirements governing the aforementioned telehealth services.</p> <p><b>Source:</b> NH Revised Statutes 167:4-d (Accessed Mar. 2020).</p>
	Live Video	Policy



Eligible Services / Specialties

“Telehealth services” shall comply with 42 C.F.R. section 410.78, except for 42 C.F.R. section 410.78(b)(4). This sections limits telehealth services to specific CPT/HCPSC codes.

New Hampshire Medicaid is required by statute to provide coverage for Medicaid-covered services provided within the scope of practice of a physician or other health care provider. It must be an appropriate application of telehealth services, as determined by the department based on CMS regulations and also includes psychotherapeutic services.

- Primary care & substance use disorder shall only be covered in the event that the patient has already established care at an originating site via face-to-face in-person service; and
- By which an individual shall receive medical services from a physician or other health care provider who is an enrolled Medicaid provider without in-person contact with that provider.

The department shall adopt rules to carry out this section.

**Source:** *NH Revised Statutes 167:4-d & Centers for Medicare and Medicaid Services. Medicare Learning Network Booklet, p. 6-9. (Jan. 2019). (Accessed Mar. 2020).*

Eligible Providers

“Telehealth services” shall comply with 42 C.F.R. section 410.78, except for 42 C.F.R. section 410.78(b)(4). This sections limits providers that can be reimbursed for telehealth to the following:

- Physician
- Physician assistant
- Nurse practitioner
- Clinical nurse specialist
- Nurse-midwife
- Clinical psychologist and clinical social worker (may not seek payment for medical evaluation and management services)
- Registered dietician or nutrition professional
- Certified registered nurse anesthetist

**Source:** *NH Revised Statutes 167:4-d & 42 CFR Sec. 410.78(b)(2) & Centers for Medicare and Medicaid Services. Medicare Learning Network Booklet, p. 6-9. (Jan. 2019). (Accessed Mar. 2020).*

Eligible Sites

“Originating site” means the location of the patient, whether or not accompanied by a health care provider, at the time services are provided by a health care provider through telemedicine, including, but not limited to, a health care provider’s office, a hospital, or a health care facility, or the patient’s home or another nonmedical environment such as a school-based health center, a university-based health center, or the patient’s workplace.

**Source:** *NH Revised Statutes 167:4-d (Accessed Mar. 2020).*

Geographic Limits

New Hampshire Medicaid does not follow 42 CFR 410.78(b)(4), listing geographic and site restrictions on originating sites.

**Source:** *NH Revised Statutes 167:4-d (Accessed Mar. 2020).*



# Medicaid Telehealth Reimbursement

## Store-and-Forward

Facility/Transmission Fee

New Hampshire Medicaid complies with the Centers for Medicare and Medicaid Service requirements for telehealth. Based on the Medicare requirements, originating sites are eligible for a facility fee.

**Source:** NH Revised Statutes 167:4-d & Centers for Medicare and Medicaid Services. Medicare Learning Network Booklet, p. 10. (Jan. 2019). (Accessed Mar. 2020).

Policy

New Hampshire statute addressing Medicaid has a definition for for store-and-forward as it pertains to telemedicine and as an exception to 42 CFR 410.78.

Store-and-forward means the use of asynchronous electronic communications between a patient at an originating site and a health care service provider at a distant site for the purpose of diagnostic and therapeutic assistance in the care of patients. This includes the forwarding and/or transfer of stored medical data from the originating site to the distant site through the use of any electronic device that records data in its own storage and forwards its data to the distant site via telecommunication for the purpose of diagnostic and therapeutic assistance.

**Source:** NH Revised Statutes 167:4-d (SB – 258) (Accessed Mar. 2020).

Eligible Services/Specialties

No reference found.

Geographic Limits

No reference found.

Transmission Fee

No reference found.



## Medicaid Telehealth Reimbursement

Remote Patient Monitoring	Policy	<p>“Remote patient monitoring” means the use of electronic technology to remotely monitor a patient’s health status through the collection and interpretation of clinical data while the patient remains at an originating site. Remote patient monitoring may or may not take place in real time. Remote patient monitoring shall include assessment, observation, education and virtual visits provided by all covered providers including licensed home health care providers.</p> <p>Remote patient monitoring shall only be covered in the event that the patient has already established care at an originating site via face-to-face in-person service; and by which an individual shall be construed to prohibit the Medicaid program from providing coverage for only those services that are medically necessary and subject to all other terms and conditions of the coverage.</p> <p><b>Source:</b> <i>NH Revised Statutes 167:4-d (SB – 258) (Accessed Mar. 2020).</i></p>
	Conditions	No reference found.
	Provider Limitations	No reference found.
	Other Restrictions	No reference found.
Email / Phone / Fax	<p>Telehealth services” shall comply with 42 C.F.R. section 410.78, except for 42 C.F.R. section 410.78(b)(4). This section excludes telephone, facsimile machines and electronic mail systems from the definition of an interactive telecommunications system.</p> <p><b>Source:</b> <i>NH Revised Statutes 167:4-d &amp; 42 CFR Sec. 410.78(a)(3). (Accessed Mar. 2020).</i></p>	



Medicaid Telehealth Reimbursement	Consent	No reference found.	
	Out of State Providers	No reference found.	
	Miscellaneous	<p>As of December 1, 2013, New Hampshire Medicaid transitioned to a managed care model of administration under three health plans. These plans each have their own telehealth coverage policy.</p> <p><b>Source:</b> <i>Provider Quick Reference Guide. (Accessed Mar. 2020).</i></p>	
Private Payer Laws	Definitions	<p>“Telemedicine, as it pertains to the delivery of health care services, means the use of audio, video, or other electronic media for the purpose of diagnosis, consultation, or treatment. Telemedicine does not include the use of audio-only telephone or facsimile.”</p> <p><b>Source:</b> <i>NH Revised Statutes Annotated, 415-J:2. (Accessed Mar. 2020).</i></p>	
	Requirements	<p>An insurer offering a health plan in this state may not deny coverage on the sole basis that the coverage is provided through telemedicine if the health care service would be covered if it were provided through in-person consultation between the covered person and a health care provider.</p> <p>For the purposes of this chapter, covered services include remote patient monitoring and store and forward.</p> <p><b>Source:</b> <i>NH Revised Statutes Annotated, 415-J:3 (Accessed Mar. 2020).</i></p>	
	Parity	Service Parity	<p>Insurers may not deny coverage for services on the sole basis that the coverage is provided through telemedicine if the health care service would be covered if it were provided through in-person consultation between the covered person and a health care provider.</p> <p>Covered services includes remote patient monitoring and store-and-forward.</p> <p><b>Source:</b> <i>NH Revised Statutes Annotated, 415-J:3 (SB – 258) (Accessed Mar. 2020).</i></p>
		Payment Parity	No explicit payment parity.



## Definitions

Telemedicine means the use of audio, video, or other electronic media for the purpose of diagnosis, consultation, or treatment. Telemedicine shall not include the use of audio-only telephone or facsimile.

**Source:** *NH Revised Statutes Annotated, 329:1-d-I (Accessed Mar. 2020).*

## Consent

Patient consent is required prior to forward medical records to the patient's primary care or treating provider, if appropriate.

**Source:** *NH Revised Statutes Annotated, 329:1-d-V(c) (Accessed Mar. 2020).*

## Online Prescribing

"Physician-patient relationship" means a medical connection between a licensed physician and a patient that includes an in-person or face-to-face 2-way real-time interactive communication exam, a history, a diagnosis, a treatment plan appropriate for the licensee's medical specialty, and documentation of all prescription drugs including name and dosage. A licensee may prescribe for a patient whom the licensee does not have a physician-patient relationship under the following circumstances:

- Writing admission orders for a newly hospitalized patient;
- For a patient of another licensee for whom the prescriber is taking call;
- For a patient examined by a physician assistant, nurse practitioner, or other licensed practitioner; or
- For medication on a short-term basis for a new patient prior to the patient's first appointment or when providing limited treatment to a family member in accordance with the American Medical Association Code of Medical Ethics.

Prescribing drugs to individuals without a physician-patient relationship shall be unprofessional. The definition of a physician-patient relationship shall not apply to a physician licensed in another state who is consulting to a New Hampshire licensed physician with whom the patient has a relationship.

**Source:** *NH Revised Statutes Annotated, Sec. 329:1-c. (Accessed Mar. 2020).*

It is unlawful to prescribe through telemedicine a controlled drug classified in schedule II through IV.

The prescribing of a non-opioid controlled drug classified in schedule II through IV by means of telemedicine shall be limited to prescribers as defined in RSA 329:1-d, I and RSA 326-B:2, XII(a), who are treating a patient with whom the prescriber has an in-person practitioner-patient relationship, for purposes of monitoring or follow-up care, or who are treating patients at a state designated community mental health center pursuant to RSA 135-C or at a Substance Abuse and Mental Health Services Administration (SAMHSA)-certified state opioid treatment program, and shall require an initial in-person exam by a practitioner licensed to prescribe the drug. Subsequent in-person exams shall be by a practitioner licensed to prescribe the drug at intervals appropriate for the patient, medical condition, and drug, but not less than annually.

The prescribing of an opioid controlled drug classified in schedule II through IV by means of telemedicine shall be limited to prescribers as defined in RSA 329:1-d, I and RSA 326-B:2, XII(a), who are treating patients at a SAMHSA-certified state opioid treatment program. Such prescription authority shall require an initial in-person exam by a practitioner licensed to prescribe the drug and subsequent in-person exams shall be by a practitioner licensed to prescribe the drug at intervals appropriate for the patient, medical condition, and opioid, but not less than annually.

See Statute for specific requirements for physicians providing services via telemedicine, and those issuing a prescription for spectacle lenses, or contact lenses by means of telemedicine.

**Source:** *NH Revised Statutes Annotated, 329:1-d. (Accessed Mar. 2020).*



## Online Prescribing

A prescription of a non-opioid controlled drug classified in schedule II through IV via telemedicine shall be limited to certain practitioners who are treating a patient with whom the prescriber has an in-person practitioner-patient relationship, for purposes of monitoring or follow-up care, and who are treating patients at a state designated community mental health center or a Substance Abuse and Mental Health Services Administration-certified state opioid treatment program, and shall require an initial in-person exam by a practitioner licensed to prescribe the drug.

A prescription of an opioid controlled drug classified in schedule II through IV via telemedicine shall be limited to prescribers who are treating patients at a Substance Abuse and Mental Health Services Administration-certified state opioid treatment program, and shall require an initial in-person exam by a practitioner licensed to prescribe the drug.

Subsequent in-person exams must be by a practitioner licensed to prescribe the drug at intervals appropriate for the patient, medical condition, and drug, but not less than annually.

**Source:** *NH Revised Statutes Annotated 318-B:2(XVI).* (Accessed Mar. 2020).

## Cross-State Licensing

Member of the Nurse Licensure Compact.

**Source:** *Current NLC States and Status. Nurse Licensure Compact.* (Accessed Mar. 2020).

Member of the Physical Therapy Compact.

**Source:** *Compact Map. Physical Therapy Compact.* (Accessed Mar. 2020).

Member of the Interstate Medical Licensure Compact.

**Source:** *The IMLC. Interstate Medical Licensure Compact.* (Accessed Mar. 2020).

Member of the Psychology Interjurisdictional Compact (PSYPACT).

**Source:** *PSYPACT. Legislative Updates.* (Accessed Mar. 2020).

An out-of-state physician providing services via telemedicine or teleradiology shall be deemed to be in the practice of medicine and required to be licensed in New Hampshire. This does not apply to physicians who provide consultation services.

**Source:** *NH Revised Statutes Annotated, 329:1-d-II & NH Revised Statutes Annotated, 329:1-b* (Accessed Mar. 2020).

## Miscellaneous

A board of medical imaging professionals and radiation therapists shall adopt rules relative to standards of care for the practice of telemedicine or telehealth.

**Source:** *NH Revised Statutes Annotated, 328-J:7-XIII.* (Accessed Mar. 2020).

