

320-I TELEHEALTH AND TELEMEDICINE

REVISION DATE: 12/21/2022

EFFECTIVE DATE: October 1, 2019

REFERENCES: 42 U.S.C. 1396d, A.R.S. § 36-3602, A.R.S. § 36-3605,

A.R.S. § 36-3606, A.R.S. § 36-3607, AMPM 310-P, AMPM Policy 431, AMPM

670, AMPM 820, ACOM 436.

PURPOSE

This policy describes covered Telehealth and Telemedicine services for Division of Developmental Disability (DDD) members who are eligible for Arizona Long Term Care System (ALTCS). This policy applies to DDD's Administrative Services Subcontractors (AdSS).

DEFINITIONS

1. "Asynchronous" means the transfer of data from one site to another through the use of a camera or similar device that records an image that is sent via Telecommunication to another site for consultation. Asynchronous applications would not be considered Telemedicine but may be utilized to deliver services. Asynchronous services are rendered after the initial collection of



- data from the member and are provided without real-time interaction with the member.
- 2. "Consulting Provider" means any Arizona Health Care Cost Containment System (AHCCCS)-registered provider who is not located at the Originating Site who provides an expert opinion to assist in the diagnosis or treatment of a member.
- 3. "Distant Site" means the site at which the physician or other licensed practitioner delivering the service is located at the time the service is provided via Telecommunications system."
- 4. "Originating Site" means the location of the patient at the time the service being furnished via a Telecommunications system occurs. Telepresenters may be needed to facilitate the delivery of this service. The Place of Service (POS) on the service claim is the Originating Site.
- 5. "Synchronous" means the real time two-way interaction between the member and provider, using interactive audio and video.



- applications) means the transfer of medical data from one site to another through the use of a camera, electronic data collection system such as an Electrocardiogram (ECG), or other similar device, that records an image which is then sent via Telecommunication to another site for consultation. Services delivered using Telecommunications Technology, but not requiring the member to be present during their implementation, are not considered Telemedicine.
- 7. "Teledentistry" means the acquisition and transmission of all necessary subjective and objective diagnostic data through interactive audio, video or data communications by a AHCCCS-registered dental provider to a distant dentist for triage, dental treatment planning, and referral.
- 8. "Telehealth" means the use of Telecommunications and information technology to provide access to health assessment, diagnosis, intervention, consultation, supervision and information across distances.



9. "Telemedicine" means the practice of health care delivery, diagnosis, consultation and treatment and the transfer of medical data between the Originating and Distant Sites through real time interactive audio, video or data communications that occur in the physical presence of the member.

POLICY

A. TELEHEALTH

- The AdSS shall cover medically necessary, non-experimental, and cost-effective services delivered via Telehealth for Division covered services.
- The AdSS shall cover services delivered via Telehealth in rural and urban regions; there are no geographic restrictions for Telehealth.
- 3. The AdSS shall not limit or deny the coverage of services provided through Telehealth and shall apply the same limits or exclusions on a service provided through Telehealth that are applicable to an in-person encounter for the same service,



except for services for which the weight of evidence determines the service not to be appropriate to be provided through Telehealth, based on:

- a. Practice guidelines,
- b. Peer-reviewed clinical publications or research, or
- Recommendations by the telehealth advisory committee on telehealth best practices.
- The AdSS shall not permit services delivered via Telehealth to replace member or provider choice for healthcare delivery modality.
- 5. The AdSS shall ensure a provider makes a good faith effort in determining both of the following:
 - a. Whether a service should be provided through Telehealth instead of in-person. The provider shall use clinical judgment in considering whether the nature of the services necessitates physical interventions and close observation and the circumstances of the member, including:
 - i. Diagnosis,



- ii. Symptoms,
- iii. History,
- iv. Age,
- v. Physical location, and
- vi. Access to Telehealth.
- b. The communication medium of Telehealth and whenever reasonably practicable, the Telehealth communication medium that allows the provider to most effectively assess, diagnose and treat the member. Factors the provider may consider in determining the communication medium include:
 - The member's lack of access to or inability to use technology, or
 - ii. Limits in Telecommunication infrastructure necessary to support interactive Telehealth encounters.
- 6. The AdSS may allow a provider who is not licensed within the State of Arizona to provide Telehealth services to a member located in the State if the following conditions are met:



- a. The provider is an AHCCCS-registered provider, and
- b. The provider complies with all requirements listed within A.R.S. § 36-3606.

B. TELEMEDICINE SERVICES

- The AdSS shall cover Telemedicine services, including health care delivery, diagnosis, consultation, treatment, and the transfer of medical data through real-time synchronous interactive audio and video communications that occur in the physical presence of the member.
- The AdSS shall reimburse providers at the same level of payment for equivalent services as identified by Healthcare Common Procedure Coding System (HCPCS) whether provided via Telemedicine or in-person.

C. ASYNCHRONOUS SERVICES

 The AdSS shall provide reimbursement for consultation limited to clinically appropriate services that are provided without real-time interaction. Reimbursement is limited to the following services:



- a. Dermatology,
- b. Radiology,
- c. Ophthalmology,
- d. Pathology,
- e. Neurology,
- f. Cardiology,
- g. Behavioral Health,
- h. Infectious Diseases, or
- i. Allergy/Immunology.

D. E-CONSULT SERVICES

The AdSS shall cover medically necessary e-consult visits, to aid
in the coordination of care between a Primary Care Provider
(PCP) and a specialist, and to improve timely access to specialty
providers.

E. REMOTE PATIENT MONITORING SERVICES

 The AdSS shall cover both synchronous and asynchronous remote patient monitoring.



- 2. The AdSS shall limit coverage of equipment and/or supplies for remote patient monitoring to when:
 - The service being provided is an AHCCCS covered service eligible for remote monitoring, and
 - b. The equipment and/or supplies are AHCCCS covered items.

F. AUDIO-ONLY SERVICES

- The AdSS shall cover audio-only services if a Telemedicine
 encounter is not reasonably available due to the member's
 functional status, the member's lack of technology or
 Telecommunications infrastructure limits, as determined by the
 provider.
- 2. The AdSS shall reimburse providers at the same level of payment for equivalent in-person mental health and substance use disorder services, as identified by HCPCS, if provided through Telehealth using an audio-only format.



G. TELEDENTISTRY SERVICES

- The AdSS shall cover Teledentistry for members eligible for Early and Periodic Screening, Diagnostic and Treatment (EPSDT) when provided by an AHCCCS-registered dental provider.
- 2. The AdSS shall cover Teledentistry including the provision of preventative and other approved therapeutic services by the AHCCCS-registered Affiliated Practice Dental Hygienist, who provides dental hygiene services under an affiliated practice relationship with a dentist.
- 3. The AdSS shall not use Teledentistry to replace the dental examination by the dentist. Limited exams may be billed through the use of Teledentistry. Periodic and comprehensive examinations cannot be billed through the use of Teledentistry alone.

H. CONDITIONS AND LIMITATIONS

 The AdSS shall ensure all Telehealth reimbursable services are provided by an AHCCCS-registered provider within their scope of practice.



- The AdSS shall cover Non-Emergency Transportation (NEMT) to and from the Originating Site where applicable.
- 2. The AdSS shall ensure services provided through Telehealth or resulting from a Telehealth encounter are subject to all applicable statutes and rules that govern prescribing, dispensing and administering prescription medications and devices.
- The AdSS shall ensure informed consent standards for Telehealth services adhere to all applicable statutes and policies governing informed consent.
- 4. The AdSS shall ensure privacy and confidentiality standards for Telehealth services adhere to all applicable statutes and policies governing healthcare services, including the Health Insurance Portability and Accountability Act (HIPAA).
- 5. The AdSS shall not place POS restrictions for a Distant Site.
- 6. The AdSS may qualify Telehealth as a Federally Qualified Healthcare Center/Rural Health Clinic (FQHC/RHC) visit, if all other applicable conditions in this Policy are met.



I. SUPPLEMENTAL INFORMATION

- The AHCCCS Telehealth code set defines which codes are billable, the applicable modifier(s) and place of service that providers must use when billing for the following services when provided through remote patient monitoring:
 - a. Telemedicine services,
 - b. Asynchronous services,
 - c. E-consult services,
 - d. Remote patient monitoring services, and
 - e. Audio-only services.
- Telehealth includes such technologies as telephones, facsimile machines, electronic mail systems, and remote patient monitoring devices, which are used to collect and transmit patient data for monitoring and interpretation. While they do not meet the Medicaid definition of Telemedicine, they are often considered under the broad umbrella of Telehealth services.
 Even though such technologies are not considered Telemedicine, they may nevertheless be covered and reimbursed as part of a



Medicaid coverable service, such as laboratory service, x-ray service or physician services.

Signature of Chief Medical Officer: Anthony Dekker (Dec 19. 202