

## **320-I TELEHEALTH AND TELEMEDICINE**

REVISION DATES: 4/2/2025, 12/21/2022, 10/17/2017

REVIEW DATES: 1/2/2024, 11/7/2023

EFFECTIVE DATE: May 13, 2016

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 320-I; AMPM 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).

### **DEFINITIONS**

1. "Asynchronous" means transmission of recorded health history through a secure electronic communications system between a practitioner, usually a specialist, and a Member or other practitioner, in order to evaluate the case or to render consultative and therapeutic services outside of a Synchronous interaction.
2. "Audio-Only" means the practice of Synchronous healthcare delivery through interactive communication that relies solely on sound, without the inclusion of video or visual components.

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 Telehealth.
4. "E-Consults" means Asynchronous, non-face-to-face consultations, including the transmission of a Member's health information without being in the presence of a Member, between a Primary Care Provider (PCP) and a specialist, to discuss a Member's health condition(s) and treatment, using a secure electronic communication platform.
5. "Member" means the same as "Client", a person receiving developmental disabilities services from the Division as specified in A.R.S. § 36-551.
6. "Originating Site" means the location of the Member at the time the service is being furnished via Telehealth or where the Asynchronous service originates.
7. "Place of Service" or "POS" means a two-digit code that is placed on healthcare professional claims forms by all insurance companies, including Medicare, Medicaid, and private payers, to indicate the setting in which a service was provided or received.

8. "Provider" means a person, institution, or group engaged in the delivery of services, or ordering and referring to those services, who has an agreement with AHCCCS to provide services to AHCCCS Members.
9. "Remote Patient Monitoring" means personal health and medical data collection from a Member in one location via electronic communication technologies, which is transmitted to a Provider in a different location for use in providing improved chronic disease management, care, and related support. Such monitoring is either Synchronous or Asynchronous and enables the monitoring of Members outside of conventional clinical settings, such as in the home.
10. "Synchronous" means the real time two-way interaction between the Member and Provider, using interactive audio and video.
11. "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 dentist at a Distant Site for triage, dental treatment planning, and referral.

12. “Telehealth” means healthcare services delivered via Asynchronous, Audio-Only, Remote Patient Monitoring, Teledentistry, or Telemedicine.
13. “Telehealth Advisory Committee” means a group of people, staffed and supported by AHCCCS, that advises on best practices and the integration and improvement of Telehealth services in Arizona.
14. “Telemedicine” means the practice of Synchronous, real-time healthcare delivery, diagnosis, consultation and treatment and the transfer of medical data through interactive audio and video communications that occur in the physical presence of the Member.

## **POLICY**

### **A. TELEHEALTH**

1. The Division shall cover Telehealth services that are:
  - a. Medically necessary;
  - b. Non-experimental;
  - c. Cost-effective;

- d. Provided by AHCCCS-registered Providers within their scope of practice; and
  - e. Covered by AHCCCS.
2. The Division shall cover services delivered via Telehealth in rural and urban regions.
  3. The Division shall not place geographic restrictions on the coverage of services being delivered via Telehealth.
  4. The Division 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
    - c. Recommendations by the Telehealth Advisory Committee on Telehealth best practices.

5. The Division shall not permit services delivered via Telehealth to replace Member or Provider choice for healthcare delivery modality.
6. The Division shall ensure a Provider determines both of the following:
  - a. Whether a service should be provided through Telehealth instead of in-person;
  - b. Whether the nature of the services necessitates physical interventions and close observation and the circumstances of the Member based on clinical judgment, including:
    - i. Diagnosis;
    - ii. Symptoms;
    - iii. History;
    - iv. Age;
    - v. Physical location; and
    - vi. Access to Telehealth.
  - c. 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 while considering the following factors:

- i. The Member's lack of access to or inability to use technology; or
  - ii. Limits in Telecommunication infrastructure necessary to support interactive Telehealth encounters.
7. The Division 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 registered with AHCCCS; and
  - b. The Provider complies with all requirements listed within A.R.S. § 36-3606.

**B. TELEMEDICINE SERVICES**

1. The Division shall cover the following Telemedicine services, including:
  - a. Healthcare delivery;
  - b. Diagnosis;
  - c. Consultation;
  - d. Treatment; and

- e. The transfer of medical data through real-time Synchronous interactive audio and video communications that occur in the physical presence of the Member.
2. The Division shall reimburse Provider 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 at an office or facility setting.
3. The Division shall require Providers to use the AHCCCS Telehealth code set for determining the following when billing for Telemedicine services provided to Members:
  - a. Billable codes;
  - b. Applicable modifiers; and
  - c. Place of service (POS).

**C. ASYNCHRONOUS SERVICES**

1. The Division shall provide reimbursement for Asynchronous consultation limited to clinically appropriate services that are provided without real-time interaction from the Member. 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.
2. The Division shall require Providers to use the AHCCCS Telehealth code set for determining the following when billing for Asynchronous services provided to Members:
- a. Billable codes;
  - b. Applicable modifiers; and
  - c. POS.

**D. E-CONSULT SERVICES**

1. The Division shall cover medically necessary E-Consult visits, to aid in the coordination of care between a PCP and a specialist, and to improve timely access to specialty Providers.

2. The Division shall require Providers to use the AHCCCS Telehealth code set for determining the following when billing for services provided to Members via E-Consult:
  - a. Billable codes;
  - b. Applicable modifiers; and
  - c. POS.

**E. REMOTE PATIENT MONITORING SERVICES**

1. The Division shall cover both Synchronous and Asynchronous Remote Patient Monitoring.
2. The Division shall limit coverage of equipment and supplies for Remote Patient Monitoring when:
  - a. The service being provided is a Division covered service eligible for Remote Patient Monitoring; and
  - b. The equipment and supplies are Division covered items.
3. The Division shall require Providers to use the AHCCCS Telehealth code set for determining the following when billing for services provided to Members via Remote Patient Monitoring:
  - a. Billable codes;
  - b. Applicable modifiers; and

- c. POS.

**F. AUDIO-ONLY SERVICES**

1. The Division shall cover Audio-Only services if a Provider determines that a Telemedicine encounter is not reasonably available due to the following:
  - a. The Member's functional status;
  - b. The Member's lack of technology; or
  - c. Telecommunications infrastructure limits.
2. To submit a claim for Audio-Only services, the Provider shall make Telehealth services available to Members through Telemedicine.
3. The Division shall reimburse Providers at the same level of payment for equivalent in-person office or facility setting mental health and substance use disorder services, as identified by HCPCS, if provided through Telehealth using an Audio-Only format.
4. The Division shall require Providers to use the AHCCCS Telehealth code set for determining the following when billing for Audio-Only services provided to Members:

- a. Billable codes;
- b. Applicable modifiers; and
- c. POS.

**G. TELEDENTISTRY SERVICES**

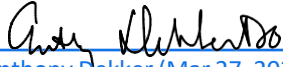
1. The Division shall cover Teledentistry for Members eligible for Early and Periodic Screening, Diagnostic and Treatment (EPSDT) when provided by an AHCCCS-registered dental Provider.
2. The Division shall cover Teledentistry including the provision of preventative and other approved therapeutic services by the AHCCCS-registered Affiliated Practice Dental Hygienist, who provides dental hygiene services under an affiliated practice relationship with a dentist.
3. The Division shall not use Teledentistry to replace the dental examination by the dentist.
4. The Division shall not allow periodic and comprehensive dental examinations to be billed through the use of Teledentistry alone.
5. The Division may allow Providers to bill for limited dental exams through the use of Teledentistry when appropriate.

**H. CONDITIONS AND LIMITATIONS**

1. The Division shall ensure all Telehealth reimbursable services are provided by an AHCCCS-registered Provider within their scope of practice.
2. The Division shall cover Non-Emergency Transportation (NEMT) to and from the Originating Site where applicable.
3. The Division 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.
4. The Division shall ensure informed consent standards for Telehealth services adhere to all applicable statutes and policies governing informed consent.
5. The Division 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).
6. The Division shall not place POS restrictions for a Distant Site.

**I. SUPPLEMENTAL INFORMATION**

1. 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.
2. Refer to AMPM 431 for more information on oral healthcare for EPSDT aged Members including covered dental services.
3. Refer to AMPM 431 for more information on Affiliated Practice Dental Hygienist.
4. Telehealth may qualify as a Federally Qualified Healthcare Center/Rural Health Clinic (FQHC/RHC) visit, if all other applicable conditions in this Policy are met. Refer to AMPM 670.

  
Anthony Dekker (Mar 27, 2025 15:37 PDT)  
Signature of Chief Medical Officer

Anthony Dekker

Name

Mar 27, 2025

Date