

California

Medicaid Program: Medi-Cal

Program Administrator: California Dept. of Health Care Services (DHCS)

Regional Telehealth Resource Center: California Telehealth Resource Center

Covers the State of: California

www.caltrc.org

Medicaid Telehealth Reimbursement

Summary

Medi-Cal allows providers to decide what modality, live video or store-and-forward, will be used to deliver eligible services to a Medi-Cal enrollee as long as the service is covered by Medi-Cal and meets all other Medi-Cal guidelines, policies, can be properly provided via telehealth, and meets the procedural and definition components of the appropriate CPT or HCPCS code. Additional requirements apply for specific programs (such as FQHCs/RHCS and Indian Health Services). Medi-Cal also reimburses for one specific e-consult code.

Definitions

“Telehealth” means the mode of delivering health care services and public health via information and communication technologies to facilitate the diagnosis, consultation, treatment, education, care management and self-management of a patient’s health care while the patient is at the originating site, and the health care provider is at a distant site. Telehealth facilitates patient self-management and caregiver support for patients and includes synchronous interactions and asynchronous store-and-forward transfers.

“Asynchronous store-and-forward” is the transmission of a patient’s medical information from an originating site to the health care provider at a distant site without the presence of the patient. Consultations via asynchronous electronic transmission initiated directly by patients, including through mobile phone applications, are not covered under this policy.

“E-consults” fall under the auspice of store-and-forward. E-consults are asynchronous health record consultation services that provide an assessment and management service in which the patient’s treating health care practitioner (attending or primary) requests the opinion and/or treatment advice of another health care practitioner (consultant) with specific specialty expertise to assist in the diagnosis and/or management of the patient’s health care needs without patient face-to-face contact with the consultant. E-consults between health care providers are designed to offer coordinated multidisciplinary case reviews, advisory opinions and recommendations of care. E-consults are permissible only between health care providers.

Source: CA Department of Health Care Services. *Medi-Cal Part 2 General Medicine Manual. Telehealth (Aug. 2019). Pg. 1. (Accessed Aug. 2019).*



Medi-Cal allows the distant site provider to decide whether the services should take place by live-video, store-and-forward, or in person if certain conditions are met.

Source: CA Department of Health Care Services. *Medi-Cal Part 2 General Medicine Manual. Telehealth (Aug. 2019). Pg. 1.* (Accessed Aug. 2019).

Family PACT

Family PACT telehealth policy mirrors the fee-for-service policy.

Source: Sec. 14132.72 of the Welfare and Institutions Code. (Accessed Mar. 2019).

Managed Care

Existing Medi-Cal covered services may be provided via a telehealth modality (includes live video) if certain conditions are met (as outlined in fee-for-service manual).

Source: CA Department of Health Care Services (DHCS). *All Plan Letter 19-009: Telehealth Services Policy. Aug. 5, 2019.* (Accessed Aug. 2019).

Federally Qualified Health Center (FQHC) & Rural Health Clinic (RHC)

Synchronous live video is covered as a face-to-face visit.

Source: CA Department of Health Care Services (DHCS). *Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHC) Outpatient Services Manual. Aug. 2019. Pg. 12.* (Accessed Aug. 2019).

Indian Health Services, Memorandum of Understanding Agreement (IHS-MOA)

Synchronous live video is covered as a face-to-face visit.al).

Source: CA Department of Health Care Services (DHCS). *Indian Health Services, Memorandum of Agreement (MOA) 638, Clinics Manual. Aug. 2019. Pg. 10.* (Accessed Aug. 2019).

Managed Care

Existing Medi-Cal covered services may be provided via a telehealth modality (includes live video) if certain conditions are met (as outlined in fee-for-service manual).

Source: CA Department of Health Care Services (DHCS). *All Plan Letter 19-009: Telehealth Services Policy. Aug. 5, 2019.* (Accessed Aug. 2019).

Local Education Agency: Speech Therapy

Speech therapy services must be delivered through synchronous telemedicine (real-time).

Source: CA Department of Health Care Services (DHCS). *Local Education Agency (LEA) Billing and Reimbursement Overview. Aug. 2019. Pg. 12.* (Accessed Aug. 2019).

Dental Services

The Department of Health Care Services has opted to permit the use of teledentistry (including live video) as an alternative modality for the provision of select dental services when the beneficiary requests it or if the health care provider believes the service is clinically appropriate.

Source: CA Department of Health Care Services (DHCS). *Denti-Cal Manual. Aug. 2019. Pg. 14-15.* (Accessed Aug. 2019).

Medi-Cal will reimburse for services provided via live video.

Source: Sec. 14132.72 of the Welfare and Institutions Code.



All benefits or services are covered for live video under fee-for-service Medi-Cal, including any Treatment Authorization Request (TAR) requirements. The decision that services can be appropriately provided by the selected telehealth modality is based on the provider's belief it is clinically appropriate due to evidence-based medicine and best practices. Additionally, for the telehealth delivered service to be eligible for Medi-Cal reimbursement, it must:

- Be a service Medi-Cal reimburses for in general
- Meet the general definition and components of the CPT or HCPCS code used
- Comply with all laws regarding confidentiality of health care information and patient's rights to medical information

Source: CA Department of Health Care Services. *Medi-Cal Part 2 General Medicine Manual. Telehealth (Aug. 2019). Pg. 6. (Accessed Aug. 2019).*

Federally Qualified Health Center (FQHC) & Rural Health Clinic (RHC)

CA Department of Health Care Services (DHCS). Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHC) Outpatient Services Manual. Aug. 2019. Pg. 12. (Accessed Aug. 2019).

Source: Department of Health Care Services. *Home Health Agencies (HHA) Provider Handbook. (May 2016). & Department of Health Care Services. Durable Medical Equipment (DME): An Overview. (June 2018), (Accessed Feb. 2019).*

Indian Health Services, Memorandum of Understanding Agreement (IHS-MOA)

Services provided through synchronous telehealth for an established patient are subject to the same program restrictions, limitations and coverage that exist when the service is provided in-person.

Source: CA Department of Health Care Services (DHCS). *Indian Health Services, Memorandum of Agreement (MOA) 638, Clinics Manual. Aug. 2019. Pg. 10. (Accessed Aug. 2019).*

Dental Services

Synchronous live transmissions are covered. Live transmissions are limited to 90 minutes per beneficiary per provider, per day. They may be provided at the beneficiary's request or if the health care provider believes the service is clinically appropriate. All dental information transmitted during the delivery of services become part of the patient's dental record maintained by the Medi-Cal provider at the distant site.

Source: CA Department of Health Care Services (DHCS). *Denti-Cal Manual. Aug. 2019. Pg. 14-15. (Accessed Aug. 2019).*

Live video telehealth may be used to deliver a face-to-face encounter related to the primary reason a recipient requires home health services or a durable medical equipment item.

Source: Department of Health Care Services. *Home Health Agencies (HHA) Provider Handbook. (Mar. 2018), Pg. 3. & Department of Health Care Services. Durable Medical Equipment (DME): An Overview. (June 2017), Pg. 5. (Accessed Aug. 2019).*

CA Children's Services Program lists eligible CPT/HCPCS codes in Numbered Letters 16-1217 & 09-0718. Codes specifically include tele-speech, tele-auditory verbal therapy, tele-auditory habilitation and tele-auditory rehabilitation services in the home, with the parent or guardian working with the speech therapist at the distant site.

Source: Department of Health Care Services. *Numbered letter 16-1217 to the CA Children's Services Program and Genetically Handicapped Persons Program (GHPP). Dec. 22, 2017 & Number Letter 09-0718 to CA Children's Services Program. Jul. 10, 2018. (Accessed Aug. 2019).*

Drug Medi-Cal certified providers may receive reimbursement for individual counseling provided through telehealth. However, implementation is dependent on the extent of federal participation and federal approval. The Department of Health Care Services must adopt regulations by July 1, 2022 to implement this section in accordance with the Administrative Procedure Act.

Source: *Sec. 14132.731 of the Welfare and Institutions Code.*



Providers must meet all of the following criteria:

- The provider rendering covered benefits or services must meet the requirements of B&P 2290.5(a)(3) or equivalent requirements under California law in which the provider is considered licensed (ex: Behavior Analyst Certification Board).
- Provider must be licensed in California, enrolled as a Medi-Cal rendering provider or non-physician medical practitioner (NMP) and affiliated with an enrolled Medi-Cal provider group.
- The enrolled Medi-Cal provider group for which the health care provider renders services via telehealth must meet all Medi-Cal program enrollment requirements and must be located in California or a border community.

For purposes of telehealth [the distant site] can be different from the administrative location.

Source: CA Department of Health Care Services. *Medi-Cal Part 2 General Medicine Manual. Telehealth (Aug. 2019). Pg. 3. (Accessed Aug. 2019).*

Federally Qualified Health Center (FQHC) & Rural Health Clinic (RHC)

All providers eligible to deliver covered FQHC/RHC services.

Source: CA Department of Health Care Services (DHCS). *Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHC) Outpatient Services Manual. Aug. 2019. Pg. 11. (Accessed Aug. 2019).*

Indian Health Services, Memorandum of Understanding Agreement (IHS-MOA)

All providers eligible to deliver available services offered under IHS-MOA services.

Source: CA Department of Health Care Services (DHCS). *Indian Health Services, Memorandum of Agreement (MOA) 638, Clinics Manual. Aug. 2019. Pg. 9. (Accessed Aug. 2019).*

Local Education Agency: Speech Therapy

Only a licensed speech-language pathologist can be reimbursed for speech therapy services delivered via telehealth.

Source: CA Department of Health Care Services (DHCS). *Local Education Agency (LEA) Billing and Reimbursement Overview. Aug. 2019. Pg. 12. (Accessed Aug. 2019).*

Dental Services

Enrolled Denti-Cal billing providers may submit documents for services rendered utilizing teledentistry. Allied dental professionals may render limited services via teledentistry so long as such services are within their scope of practice, and are rendered under the general supervision of a licensed dentist.

Source: CA Department of Health Care Services (DHCS). *Denti-Cal Manual. Aug. 2019. Pg. 14-15. (Accessed Aug. 2019).*

Psychiatrists may bill for services delivered through telehealth in accordance with the Medicaid state plan.

Source: *Sec. 14132.73 of the Welfare and Institutions Code.*

For purposes of reimbursement for covered treatment or services provided through telehealth, the type of setting where services are provided for the patient or by the health care provider is not limited (Welfare and Institutions Code [WIC] Section 14132.72(e)). This may include, but is not limited to, a hospital, medical office, community clinic, or the patient’s home.

Source: CA Department of Health Care Services. *Medi-Cal Part 2 General Medicine Manual. Telehealth (Aug. 2019). Pg. 1. (Accessed Aug. 2019).*

Federally Qualified Health Center (FQHC) & Rural Health Clinic (RHC)

Setting not limited. Refers to fee-for-service policy.

Source: CA Department of Health Care Services (DHCS). *Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHC) Outpatient Services Manual. Aug. 2019. Pg. 11. (Accessed Aug. 2019).*

Indian Health Services, Memorandum of Understanding Agreement (IHS-MOA)

Setting not limited. Refers to fee-for-service policy.

Source: CA Department of Health Care Services (DHCS). *Indian Health Services, Memorandum of Agreement (MOA) 638, Clinics Manual. Aug. 2019. Pg. 9. (Accessed Aug. 2019).*



Live Video	Geographic Limits	<p>CA Children’s Services Program lists eligible CPT/HCPCS codes related to tele-speech, tele-auditory verbal therapy, tele-auditory habilitation and tele-auditory rehabilitation services in the home, with the parent or guardian working with the speech therapist at the distant site.</p> <p>Source: Department of Health Care Services. Number Letter 09-0718 to CA Children’s Services Program. (Jul. 10, 2018). (Accessed Feb. 2019).</p>
	Facility/Transmission Fee	<p>Medi-Cal will reimburse the originating site a facility fee, and originating and distant site for live video transmission costs.</p> <p>Source: CA Department of Health Care Services. Medi-Cal Part 2 General Medicine Manual. Telehealth (Aug. 2019). Pg. 10-11. (Accessed Aug. 2019).</p> <p>FQHC & RHC/IHS-MOA These sites are not eligible for the facility or transmission fee.</p> <p>Source: CA Department of Health Care Services (DHCS). Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHC) Outpatient Services Manual. Aug. 2019. Pg. 12. (Accessed Aug. 2019).</p> <p>Local Education Agency: Speech Therapy The facility and transmission fee are not covered.</p> <p>Source: CA Department of Health Care Services (DHCS). Local Education Agency (LEA) Billing and Reimbursement Overview. Aug. 2019. Pg. 12. (Accessed Aug. 2019).</p>
Store-and-Forward	Policy	<p>Medi-Cal allows the distant site provider to decide whether the services should take place by live-video, store-and-forward, or in person.</p> <p>Source: CA Department of Health Care Services. Medi-Cal Part 2 General Medicine Manual. Telehealth (Aug. 2019). Pg. 1. (Accessed Aug. 2019).</p> <p>Face-to-face contact between a health care provider and a patient is not required under the Medi-Cal program for health care services provided by asynchronous store-and-forward. Services appropriately provided through the store-and-forward process are subject to billing and reimbursement policies developed by the department.</p> <p>Source: Welfare and Institutions Code Sec. 14132.725 (AB 744, 2019 Legislative Session).</p> <p>Family PACT Family PACT telehealth policy mirrors the fee-for-service policy.</p> <p>Source: CA Department of Health Care Services. Family Planning, Access, Care and Treatment Program. Benefits Manual. Aug. 2019, Pg. 6. (Accessed. Aug. 2019).</p> <p>Managed Care Existing Medi-Cal covered services may be provided via a telehealth modality (includes store-and-forward) if certain conditions are met (as outlined in fee-for-service manual).</p> <p>Source: CA Department of Health Care Services (DHCS). All Plan Letter 19-009: Telehealth Services Policy. Aug. 5, 2019. (Accessed Aug. 2019).</p> <p>Federally Qualified Health Center (FQHC) & Rural Health Clinic (RHC) Store-and-forward covered for specific specialties for established patients. E-consult is not covered.</p> <p>Source: CA Department of Health Care Services (DHCS). Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHC) Outpatient Services Manual. Aug. 2019. Pg. 12. (Accessed Aug. 2019).</p> <p>Indian Health Services, Memorandum of Understanding Agreement (IHS-MOA) Store-and-forward covered for specific specialties for established patients. E-consult is not covered.</p> <p>Source: : CA Department of Health Care Services (DHCS). Indian Health Services, Memorandum of Agreement (MOA) 638, Clinics Manual. Aug. 2019. Pg. 10. (Accessed Aug. 2019).</p>



Local Education Agency: Speech Therapy

Store-and-forward, including e-consult, is not reimbursable.

Source: CA Department of Health Care Services (DHCS). *Local Education Agency (LEA) Billing and Reimbursement Overview*. Aug. 2019. Pg. 12. (Accessed Aug. 2019).

Dental Services

The Department of Health Care Services has opted to permit the use of teledentistry (includes store-and-forward) as an alternative modality for the provision of select dental services.

Source: CA Department of Health Care Services (DHCS). *Denti-Cal Manual*. Aug. 2019. Pg. 14-15. (Accessed Aug. 2019).

All benefits or services are covered under Medi-Cal through live video or store-and-forward. The decision that services can be appropriately provided by the selected telehealth modality is based on the distant site provider’s belief it is clinically appropriate due to evidence-based medicine and best practices. Additionally, for the telehealth delivered service to be eligible for Medi-Cal reimbursement, it must:

- Be a service Medi-Cal reimburses for in general
- Meet the general definition and components of the CPT or HCPCS code used
- Comply with all laws regarding confidentiality of health care information and patient’s rights to medical information

E-consult code 99451 in conjunction with the GQ modifier (indicating store-and-forward) is reimbursed, when the following requirements are met for distant and originating site providers:

- Originating Site Providers must create and maintain the following:
 - A record that the e-consult is the result of patient care that has occurred or will occur and relates to ongoing patient management; and
 - A record of a request for an e-consult by the health care provider at the originating site
- Distant Site providers must create and maintain the following:
 - A record of the review and analysis of the transmitted medical information with written documentation of the date of service and time spent; and
 - A written report of case findings and recommendations with conveyance to the originating site.

See manual for instances when e-consult is not reimbursable.

If more than one contact or encounter is required to complete the e-consult request, the entirety of the service and cumulative discussion and review time should be reported only once using CPT code 99451. E-consults are not applicable for FQHCs, RHCs, or IHS-MOA clinics.

Source: CA Department of Health Care Services. *Medi-Cal Part 2 General Medicine Manual. Telehealth* (Aug. 2019). Pg. 1. (Accessed Aug. 2019).

Federally Qualified Health Center (FQHC) & Rural Health Clinic (RHC)

Reimbursement is permitted for established patients for teleophthalmology, teledermatology and teledentistry, when it is furnished by a billable provider at the distant site.

Asynchronous store-and-forward reimbursement may not be used to “establish” a patient, with the exception of a homeless, homebound or a migratory or seasonal worker (HHMS). E-consult is not a reimbursable telehealth service of FQHCs/RHCs.

Source: CA Department of Health Care Services (DHCS). *Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHC) Outpatient Services Manual*. Aug. 2019. Pg. 12. (Accessed Aug. 2019).



Store-and-Forward

Eligible Services/Specialties

Vision Care

Teleophthalmology by store-and-forward is covered for three specific CPT codes. Information can be reviewed by a physician or optometrist at a distant site. If the reviewing optometrist identifies a disease or condition requiring consultation or referral pursuant to Section 3041 of the Business and Professions Code, a referral must be made with an appropriate physician and surgeon or ophthalmologist, as required.

Source: CA Department of Health Care Services (DHCS). *Denti-Cal Manual*. Aug. 2019. Pg. 14-15. (Accessed Aug. 2019).

Dental Services

Reimburses for specific teledentistry codes via store-and-forward (see manual).

Source: CA Department of Health Care Services (DHCS). *Denti-Cal Manual*. Aug. 2019. Pg. 14-15. (Accessed Aug. 2019).

Geographic Limits

No reference found.

Transmission Fee

The originating site is eligible for a facility fee. A transmission fee is only reimbursed for live video; therefore, store-and-forward is not eligible.

Source: CA Department of Health Care Services. *Medi-Cal Part 2 General Medicine Manual. Telehealth*. (Aug. 2019), Pg. 11. (Accessed Aug. 2019).

FQHC & RHC/IHS-MOA

These sites are not eligible for the facility or transmission fee.

Source: CA Department of Health Care Services (DHCS). *Indian Health Services, Memorandum of Agreement (MOA) 638, Clinics Manual*. Aug. 2019. Pg. 10 & *Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHC) Outpatient Services Manual*. Aug. 2019. Pg. 12. (Accessed Aug. 2019).

Vision Care

The facility fee is reimbursable to the originating site. Transmission costs incurred from providing telehealth services via audio/video communication is also reimbursable.

Source: CA Department of Health Care Services, *Vision Care: Professional Services Manual*. (Aug. 2019), Pg. 6. (Accessed Aug. 2019).

Dental Care

Transmission costs associated with store-and-forward are not reimbursable.

Source: CA Department of Health Care Services (DHCS). *Denti-Cal Manual*. Aug. 2019. Pg. 14-15. (Accessed Aug. 2019).



Medicaid Telehealth Reimbursement

Remote Patient Monitoring	Policy	No reference found.
	Conditions	No reference found.
	Provider Limitations	No reference found.
	Other Restrictions	No reference found.
Email / Phone / Fax	<p>Recently Passed Legislation Telephonic services must be reimbursed when provided by specific entities during or immediately following an emergency, subject to the Department obtaining federal approval and matching funds.</p> <p>Source: <i>Welfare and Institutions Code Sec. 14132.723 (AB 1494 – 2019 Legislative Session).</i></p>	
Consent	<p>Providers must obtain either verbal or written consent from patients before utilizing telehealth. If a healthcare provider at the originating or distant site maintains a general consent agreement that addresses the use of telehealth that is sufficient for documentation of patient consent and must be kept in the patient’s medical file.</p> <p>For teleophthalmology, teledermatology or teledentistry services or benefits delivered via asynchronous store-and-forward, the patient must be notified of their right to request and receive interactive communication with the distant specialist physician, optometrist or dentist and the communication may occur during the time of the consultation or within 30 days of the patient being notified of the consultation results.</p> <p>Source: <i>CA Department of Health Care Services. Medi-Cal Part 2 General Medicine Manual. Telehealth. (Aug. 2019), Pg. 5. (Accessed Aug. 2019).</i></p>	



Consent

Federally Qualified Health Center (FQHC) & Rural Health Clinic (RHC)

Refer to fee-for-service policy. All consent for homeless, homebound or migratory or seasonal workers (HHMS) must be documented.

Source: CA Department of Health Care Services (DHCS). *Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHC) Outpatient Services Manual*. Aug. 2019. Pg. 12. (Accessed Aug. 2019).

Indian Health Services, Memorandum of Understanding Agreement (IHS-MOA)

Refer to fee-for-service policy. All consent for homeless, homebound or migratory or seasonal workers (HHMS) must be documented.

Source: CA Department of Health Care Services (DHCS). *Indian Health Services, Memorandum of Agreement (MOA) 638, Clinics Manual*. Aug. 2019. Pg. 10. (Accessed Aug. 2019).

Vision Care

A record of the written or verbal request for the consultation by the referring provider or other source. Verbal and written informed consent from the patient or the patient’s legal representative if the consulting provider has ultimate authority over the care or primary diagnosis of the patient.

Source: CA Department of Health Care Services, *Vision Care: Professional Services Manual*. (Jun. 2017), Pg. 5. (Accessed Aug. 2019).

Local Education Agency: Speech Therapy

Consent must be obtained for the student’s parent or guardian. The student’s written consent to telehealth is not required.

Source: CA Department of Health Care Services (DHCS). *Local Education Agency (LEA) Telehealth*. Aug. 2019. Pg. 2. (Accessed Aug. 2019).

Out of State Providers

Provider must be licensed in CA, enrolled as a Medi-Cal rendering provider or non-physician medical practitioner (NMP) and affiliated with an enrolled Medi-Cal provider group. The enrolled Medi-Cal provider group for which the health care provider renders services via telehealth must meet all Medi-Cal program enrollment requirements and must be located in California or a border community.

Source: CA Department of Health Care Services. *Medi-Cal Part 2 General Medicine Manual. Telehealth*. (Aug. 2019), Pg. 3. (Accessed Aug. 2019)

Miscellaneous

Specific documentation requirements apply to substantiate the corresponding technical and professional components of billed CPT or HCPCS codes. Providers are not required to document a barrier to in-person visit for Med-Cal coverage or to document the cost effectiveness of telehealth or store-and-forward. The distant site provider is, however, responsible for billing Medi-Cal for the covered services and supplying the appropriate supporting documentation.

Source: CA Department of Health Care Services. *Medi-Cal Part 2 General Medicine Manual. Telehealth*. (Aug. 2019), Pg. 4. (Accessed Aug. 2019).

Telehealth services and supports are among the services and supports authorized to be included by individual program plans developed for disabled individuals by regional centers that contract with the State Department of Developmental Disabilities.

Source: *Welfare and Institutions Code Sec. 4512.*

Medicaid must ensure that all managed care covered services are available and accessible to enrollees of Medicaid managed care plans in a timely manner. Telecommunications technologies can be used as a means to meet time and distance standards in some circumstances. See regulation for details.

Source: *CA Welfare and Institutions Code Sec. 14197.*

Recently Passed Legislation

Telehealth services, telephonic services and other specified services must be reimbursed when provided by specific entities during or immediately following an emergency, subject to the Department obtaining federal approval and matching funds. The Department is required to issue guidance for entities to facilitate reimbursement for telehealth or telephonic services in emergency situations by July 1, 2020.

Source: *Welfare and Institutions Code Sec. 14132.723 (AB 1494 – 2019 Legislative Session).*



Definitions

“Telehealth means the mode of delivering health care services and public health via information and communication technologies to facilitate the diagnosis, consultation, treatment, education, care management, and self-management of a patient’s health care while the patient is at the originating site and the health care provider is at a distant site. Telehealth facilitates patient self-management and caregiver support for patients and includes synchronous interactions and asynchronous store-and-forward transfers.”

Source: CA Business & Professions Code Sec. 2290.5.

Requirements

Recently Passed Legislation

A health care service plan shall not require that in-person contact occur between a health care provider and a patient before payment is made for the covered services appropriately provided through telehealth, subject to the terms and conditions of the contract entered into between the enrollee or subscriber and the health care service plan, and between the health care service plan and its participating providers or provider groups.

A health care service plan shall not limit the type of setting where services are provided for the patient or by the health care provider before payment is made for the covered services appropriately provided through telehealth, subject to the terms and conditions of the contract entered into between the enrollee or subscriber and the health care service plan, and between the health care service plan and its participating providers or provider groups.

Applies to Medi-Cal Managed Care.

Source: CA Health & Safety Code Sec. 1374.13 (AB 744 - 2019 Legislative Session).

Recently Passed Legislation (Effective Jan. 1, 2021)

Coverage shall not be limited only to services delivered by select third-party corporate telehealth providers.

Insurers are not required to cover telehealth services provided by an out-of-network provider, unless coverage is required under other provisions of law.

Does not apply to Medi-Cal managed care.

Source: CA Health & Safety Code Sec. 1374.14 & Insurance Code 10123.855 (AB 744, 2019 - Legislative Session).

Parity

Service Parity

Private payers cannot require that in-person contact occur before covering a telehealth delivered service, but it is subject to the terms and conditions of the contract.

Source: CA Health & Safety Code Sec. 1374.13.

Recently Passed Legislation (Effective Jan. 1, 2021)

A contract issued, amended, or renewed on or after January 1, 2021, between a health care service plan and a health care provider for the provision of health care services to an enrollee or subscriber shall specify that the health care service plan shall reimburse the treating or consulting health care provider for the diagnosis, consultation, or treatment of an enrollee or subscriber appropriately delivered through telehealth services on the same basis and to the same extent that the health care service plan is responsible for reimbursement for the same service through in-person diagnosis, consultation, or treatment.

Does not apply to Medi-Cal managed care.

Source: CA Health & Safety Code Sec. 1374.14 & Insurance Code 10123.855 (AB 744 - 2019 Legislative Session).



Private Payer Laws	Parity	<p>Payment Parity</p> <p>Recently Passed Legislation (Effective Jan. 1, 2021) Services that are the same, as determined by the provider’s description of the service on the claim, shall be reimbursed at the same rate whether provided in person or through telehealth. When negotiating a rate of reimbursement for telehealth services for which no in-person equivalent exists, a health care service plan and the provider shall ensure the rate is consistent with subdivision (h) of Section 1367.</p> <p>Does not apply to Medi-Cal managed care.</p> <p>Source: CA Health & Safety Code Sec. 1374.14 & Insurance Code 10123.855 (AB 744 - 2019 Legislative Session).</p>
Professional Regulation/Health & Safety	Definitions	<p>“Telehealth means the mode of delivering health care services and public health via information and communication technologies to facilitate the diagnosis, consultation, treatment, education, care management, and self-management of a patient’s health care while the patient is at the originating site and the health care provider is at a distant site. Telehealth facilitates patient self-management and caregiver support for patients and includes synchronous interactions and asynchronous store-and-forward transfers.”</p> <p>Source: CA Business & Professions Code Sec. 2290.5.</p>
	Consent	<p>The originating site provider must obtain and document verbal or written patient consent prior to service delivery.</p> <p>Source: CA Business & Professions Code Sec. 2290.5.</p> <p>Occupational Therapy An occupational therapist must obtain patient’s consent prior to providing services via telehealth.</p> <p>Source: CA Code of Regulations, Title 16, Div. 39, Art. 8, Sec. 4172(b).</p> <p>Behavioral Sciences A licensee must obtain informed consent from a client upon initiation of telehealth services.</p> <p>Source: CA Code of Regulations, Title 16, Div. 18, Art. 1, Sec. 1815.5.</p>
	Online Prescribing	<p>Providers are prohibited from prescribing or dispensing dangerous drugs or dangerous devices on the Internet without an appropriate prior examination and medical indication.</p> <p>Source: CA Business & Professions Code Sec. 2242.1(a).</p> <p>Recently Passed Legislation An appropriate prior examination does not require a synchronous interaction between the patient and the licensee and can be achieved through the use of telehealth, including, but not limited to, a self-screening tool or a questionnaire, provided that the licensee complies with the appropriate standard of care.</p> <p>Source: CA Business & Professions Code Sec. 2242 (AB 1264 – 2019 Legislative Session).</p> <p>Recently Passed Legislation Public university student health centers are required to offer abortion by medication techniques on-site, which may be performed through telehealth services, on or after Jan. 1, 2023.</p> <p>Source: CA Education Code, Sec. 99250 (SB 24 – 2019 Legislative Session).</p> <p>Remote Dispensing Site Pharmacies Remote dispensing site pharmacies are permitted to dispense or provide pharmaceutical care services in medically underserved areas. A supervising pharmacy must provide telepharmacy services to the remote dispensing site pharmacy and shall not be located greater than 150 road miles from the remote dispensing site pharmacy.</p> <p>Source: CA Business & Professionals Code Sec. 4130-4135.</p>



No reference found.

Recently Passed Legislation

Any individual, partnership, corporation or other entity that provides dental services through telehealth shall make available the name, telephone number, practice address and California state license number of any dentist who will be involved in the provision of services to a patient prior to the rendering of services and when requested by a patient.

Source: *CA Business and Professions Code, Sec. 1683.1 (AB 1519 - 2019 Legislative Session).*

Recently Passed Legislation

All laws and regulations governing professional responsibility, unprofessional conduct, and standards of practice that apply to a health care provider under the health care provider's license shall apply to that health care provider while providing telehealth services.

Source: *CA Business and Professions Code, Sec. 2290.5 (AB 1519 - 2019 Legislative Session).*

Professional regulation with telehealth specific standards

- CA Board of Occupational Therapy (**Source:** *Title 16, Div. 39, Sec. 4172*)
- CA Board of Behavioral Sciences (**Source:** *Title 16, Div. 18, Art. 1, Sec. 1815.5*)