## Medicaid Telehealth Reimbursement

### Summary

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.

### Definitions

**Telemedicine** is the use of interactive audio-video equipment to link practitioners and patients located at different sites.


**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.”


### Live Video Policy

MT Medicaid reimburses for medically necessary telemedicine services to eligible members. Providers must be enrolled as Montana Medicaid providers.

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.

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.

## Medicaid Telehealth Reimbursement

### Healthy Montana Kids

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


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


### Eligible Services / Specialties

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


### Eligible Providers

Telemedicine can be provided in a member’s residence; the distance provider is responsible for the confidentiality requirements.


### Eligible Sites

The originating and distant providers may not be within the same facility or community.

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

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.


No reimbursement for infrastructure or network use charges.


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


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


No reference found.
<table>
<thead>
<tr>
<th>Medicaid Telehealth Reimbursement</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Store-and-Forward</strong></td>
<td>No reference found.</td>
</tr>
<tr>
<td><strong>Geographic Limits</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Transmission Fee</strong></td>
<td>No reference found.</td>
</tr>
<tr>
<td><strong>Policy</strong></td>
<td>There is no reimbursement for remote patient monitoring based on the definition for telemedicine restricting the service to interactive audio-video.</td>
</tr>
<tr>
<td><strong>Conditions</strong></td>
<td>No reference found.</td>
</tr>
<tr>
<td><strong>Provider Limitations</strong></td>
<td>No reference found.</td>
</tr>
<tr>
<td><strong>Other Restrictions</strong></td>
<td>No reference found.</td>
</tr>
</tbody>
</table>

Medicaid Telehealth Reimbursement

Telemedicine reimbursement does not include:

- Consultation by telephone
- Facsimile machine transmissions
- Crisis hotlines


No reimbursement for telephone services in home.


Consent

No reference found.

Out of State Providers

Providers must be licensed in the state of Montana.


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


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


Confidentially requirements apply (see manual).


Miscellaneous

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.

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.


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.


No explicit payment parity.
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.


---

**Consent**

No reference found.

---

**Online Prescribing**

No reference found.

---

**Cross-State Licensing**

Member of the Interstate Medical licensure Compact.

**Source:** The IMLC. Interstate Medical Licensure Compact. (Accessed Sept. 2019).

Member of the Nurse Licensure Compact.


Member of the Physical Therapy Compact.


---

**Miscellaneous**

**Professional Board Telehealth-Specific Regulations**

- MT Board of Speech-Language Pathology **(MT Admin Rules, Sec. 24.222.9 (Accessed Sept. 2019).)**