New Jersey

Medicaid Program: New Jersey Medicaid

Program Administrator: New Jersey Dept. of Human Services

Regional Telehealth Resource Centers:

• Mid-Atlantic Telehealth Resource Center: DC, Delaware, Kentucky, Maryland, New Jersey, North Carolina, Pennsylvania, Virginia, West Virginia

www.matrc.org

• Northeast Telehealth Resource Center Covers the States of: Connecticut, Maine, Massachusetts, New Hampshire, New Jersey, New York, Rhode Island & Vermont

www.netrc.org

ummary

New Jersey Medicaid reimburses for live video and remote patient monitoring under certain circumstances. Store-and-forward is not explicitly included in reimbursement; however, it could be covered within the definition of telemedicine. Individual Medicare managed care plans may have their own individual policies regarding telehealth and telemedicine.

initions

Telemedicine means the delivery of a health care service using electronic communications, information technology, or other electronic or technological means to bridge the gap between a health care provider who is located at a distant site and a patient who is located at an originating site, either with or without the assistance of an intervening health care provider. Telemedicine does not include the use, in isolation, of audio-only telephone conversation, electronic mail, instant messaging, phone text or facsimile transmission.

Telehealth means the use of information and communications technologies, including telephones, remote patient monitoring devices or other electronic means to support clinical health care, provider consultation, patient and professional health related education, public health, health administration and other services.

Source: NJ Statute C.30:4D-6K(e) & NJ Statute C.45:1-61. (Accessed Sept. 2019).

Medicaid Telehealth Reimbursement

Policy

NJ Medicaid must provide coverage and payment for telemedicine or telehealth delivered services on the same basis as when the services are delivered through in-person contact and consultation in NJ. The reimbursement rate may not exceed the rate of in-person contact. Reimbursement is provided either to the individual practitioner who delivered the reimbursable services, or to the agency, facility, or organization that employs the individual practitioner, as appropriate.

NJ Medicaid and NJ FamilyCare programs may limit coverage to services that are delivered by participating health care providers, but may not charge a deductible, copayment, or coinsurance for a health care service, delivered through telemedicine or telehealth, in an amount that exceeds the deductible, copayment, or coinsurance amount that is applicable to an in-person consultation.

The commissioner will apply for a State Plan amendment as necessary to implement this.

Source: NJ Statute C.30:4D-6k. (Accessed Sept. 2019).

Medicaid Telehealth Reimbursement	Live Video	Eligible Services / Specialties	Psychiatric Services Telepsychiatry may be utilized by mental health clinics and/or hospital providers of outpatient mental health services to meet their physician related requirements including but not limited to intake evaluations, periodic psychiatric evaluations, medication management and/or psychotherapy sessions for clients of any age. Before any telepsychiatry services can be provided, each participating program must establish related policies and procedures. Mental health clinics and hospital providers are limited to billing for services permitted by the Division of Medical Assistance and Health Services. Source: NJ Division of Medical Assistance and Health Services. Newsletter. Vol. 23, No. 21, December 2013 (Accessed Sept. 2019). For the Screening and Outreach Program, designed to provide clinical assessment and crisis stabilization services to consumers, a psychiatric evaluation may be completed through the use of telepsychiatry, provided that the screening service has a Division-approved plan setting forth its policies and procedures for providing a psychiatric assessment via telepsychiatry that meets certain criteria (see regulation). Source: NJAC 10:31-2.3. (Accessed Sept. 2019).
		Eligible Providers	 Psychiatric Services Psychiatrist Psychiatric Advanced Practice Nurse Source: NJ Division of Medical Assistance and Health Services. Newsletter. Vol. 23, No. 21, December 2013 (Accessed Sept. 2019).
		Eligible Sites	Psychiatric Services A patient may receive services at the mental health clinic or outpatient hospital program. Source: NJ Division of Medical Assistance and Health Services. Newsletter. Vol. 23, No. 21, December 2013 (Accessed Sept. 2019).
		Geographic Limits	No reference found.



Medicaid Telehealth Reimbursement	Remote Patient Monitoring	Policy	Insurers and NJ Medicaid must provide reimbursement for telemedicine or telehealth on the same basis as, and at a provider reimbursement rate that does not exceed the provider reimbursement rate that is applicable, when services are delivered through in-person contact and consultation. Remote patient monitoring is included within definition of telehealth. Source: NJ Statute C.30:4D-6k. (Accessed Sept. 2019).
		Conditions	No reference found.
		Provider Limitations	No reference found.
		Other Restrictions	No reference found.
	Email / Phone / Fax	Telemedicine does not include the use, in isolation, of audio-only telephone conversation, electronic mail, instant messaging, phone text or facsimile transmission. Telehealth includes the use of telephones. Source: NJ Statute C.45:1-61. (Accessed Sept. 2019).	
	Consent	atry pat	ormed consent is required for telepsychiatry. If a patient chooses not to participate in telepsychi- y, they must be provided alternative face-to-face options and services. If they choose to partici- e, they must be informed of the location of the psychiatrist/advanced practice nurse providing telepsychiatry service. Source: NJ Division of Medical Assistance and Health Services. Newsletter. Vol. 23, No. 21, December 2013 (Accessed Sept. 2019).

A psychiatrist or psychiatric APN may be off-site, but must be licensed in the State of New Jersey.

Source: NJ Division of Medical Assistance and Health Services. Newsletter. Vol. 23, No. 21, December 2013 (Accessed Sept. 2019).

New Jersey's Medicaid program consists of five managed care health plans. Individual telehealth policies may vary between health plans.

Source: NJ Medicaid & Managed Care. Division of Medical Assistance and Health Services. (Accessed Sept. 2019).

An initial face-to-face visit is not required to establish a provider-patient relationship. The provider must review and be familiar with the patient's history and medical records, when applicable, prior to the provision of any telehealth services.

Source: NJ Division of Medicaid Assistance and Health Services. Newsletter. Vol. 28, No. 17, September 2018 (Accessed Sept. 2019).

Psychiatric Services

If a physical evaluation is required as part of a psychiatric assessment, the hosting provider must have a registered nurse available to share the results of the physical evaluation.

NJ Medicaid does not reimburse for any costs associated with the provision of telepsychiatry services.

Additional requirements are listed in the telepsychiatry memo.

Source: NJ Division of Medical Assistance and Health Services. Newsletter. Vol. 23, No. 21, December 2013 (Accessed Sept. 2019).

Definitions

Telemedicine means the delivery of a health care service using electronic communications, information technology, or other electronic or technological means to bridge the gap between a health care provider who is located at a distant site and a patient who is located at an originating site, either with or without the assistance of an intervening health care provider. Telemedicine does not include the use, in isolation, of audio-only telephone conversation, electronic mail, instant messaging, phone text or facsimile transmission.

Telehealth means the use of information and communications technologies, including telephones, remote patient monitoring devices or other electronic means to support clinical health care, provider consultation, patient and professional health related education, public health, health administration and other services.

Source: NJ Statute C.26:2S-29(e). & NJ Statute C.45:1-61. (Accessed Sept. 2019).

Requirements

A carrier that offers a health benefits plan shall provide coverage and payment for health care services delivered to a covered person through telemedicine or telehealth, on the same basis as, and at a provider reimbursement rate that does not exceed the provider reimbursement rate that is applicable, when the services are delivered through in-person contact and consultation. Reimbursement payments under this section may be provided either to the individual practitioner who delivered the reimbursable services, or to the agency, facility, or organization that employs the individual practitioner who delivered the reimbursable services, as appropriate.

A carrier may limit coverage to services that are delivered by health care providers in the health benefits plan's network, but may not charge any deductible, copayment, or coinsurance for a health care service, delivered through telemedicine or telehealth, in an amount that exceeds the deductible, copayment, or coinsurance amount that is applicable to an in-person consultation.

Source: NJ Statute C.26:2S-29. (Accessed Sept. 2019).

Private Payer Laws
onal Regulation/Health & Safety

Insurers must provide coverage and payment for health services delivered through telemedicine or telehealth on the same basis as when the services are delivered through in-person contact and consultation.

A health care plan is not prohibited from providing coverage only for services that are medically necessary, subject to the terms and conditions of the plan.

A health care plan may not require a covered person to use telemedicine or telehealth in lieu of receiving an in-person service from an in-network provider.

Source: NJ Statute C.26:2S-29. (Accessed Sept. 2019).

TThe above also applies to contracts purchased by the State Health Benefits Commission and the School Employees' Health Benefits Commission.

Source: NJ Statute C.52:14-17.29w & C.52:14-17.46.6h (Accessed Sept. 2019).

Reimbursement must be made for health care services delivered through telemedicine or telehealth, on the same basis as, and at a provider reimbursement rate that does not exceed the provider reimbursement rate for in-person contact.

A health care plan may limit coverage to services that are delivered by health care providers in a plan's network, but may not charge any deductible, copayment, or coinsurance for a health care service in an amount that exceeds the deductible, copayment, or coinsurance amount that is applicable to an in-person consultation.

Source: NJ Statute C.26:2S-29. (Accessed Sept. 2019).

The above also applies to contracts purchased by the State Health Benefits Commission and the School Employees' Health Benefits Commission.

Source: NJ Statute C.52:14-17.29w & C.52:14-17.46.6h (Accessed Sept. 2019).

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Parity

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Telehealth means the use of information and communications technologies, including telephones, remote patient monitoring devices or other electronic means to support clinical health care, provider consultation, patient and professional health related education, public health, health administration and other services.

Source: NJ Statute C.45:1-61. (Accessed Sept. 2019)

Sonsent

With a patient's oral, written, or digital consent, the patient's medical information may be forwarded directly to the patient's primary care provider or health care provider of record, or, up on request by the patient, to other health care providers.

Source: NJ Statute C.45:1-62. (Accessed Sept. 2019).

Cross-State Licensing

The prescription of Schedule II controlled substances through telemedicine or telehealth is authorized only after an initial in-person examination, and subsequent in-person visit with the patient is required every three months for the duration of prescription. Does not apply when prescribing stimulant for use by a minor under the age of 18 provided the health care provider is using live video when treating the patient and the health care provider has obtained written consent for the waiver form the minor patient's parent or guardian.

Source: NJ Statute C.45:1-62(e). (Accessed Sept. 2019).

A provider patient relationship shall include:

- Properly identifying the patient, using at minimum the patient's name, date of birth, phone number, and address.
- Disclosing and validating the provider's identity and credentials, such as license, title, specialty, and board certifications.
- · Review of patient's medical records, prior to initiating contact.
- Determining whether the provider will be able to meet the standard of care, prior to initiating contact, for each unique patient encounter.

See statute for exceptions.

Source: NJ Statute C.45:1-63(3)(a). (Accessed Sept. 2019).

Member of the Physical Therapy Compact.

Source: Compact Map. Physical Therapy Compact. (Accessed Sept. 2019).

Must be licensed in the State of New Jersey. Subject to New Jersey jurisdiction if either the patient or the provider is located in NJ at the item services are provided.

Source: NJ Statute C.45:1-62. (Accessed Sept. 2019).

Each telehealth or telemedicine organization operating in the State shall annually register with the Department of Health and submit an annual report. See statute for details.

Source: NJ Statute C.45:1-64. (Accessed Sept. 2019).

The Telemedicine and Telehealth Review Commission shall review information reported by telemedicine and telehealth organizations and make recommendations to improve the effectiveness and quality of telemedicine and telehealth services provided by New Jersey.

Source: NJ Statute C.45:1-65. (Accessed Sept. 2019).

Telemedicine practice standards indicate live video is allowed. Store-and-forward allowed when used in combination with two-way audio without video, if after assessing and reviewing the patient's medical records, the provider determines that the provider is able to meet the same standard of care as if the health care service was being provided in-person.

See statute for additional telemedicine/telehealth practice standards.

Source: NJ Statute C.45:1-62(c)(2). (Accessed Sept. 2019).

A mental health screener, screening service, or screening psychiatrist subject to C.30:4-27.1:

- Shall not be required to obtain a separate authorization in order to engage in telemedicine or telehealth for mental health screening purposes; and
- Shall not be required to request and obtain a waiver from existing regulations, prior to engaging in telemedicine or telehealth.

Source: NJ Statute C.45:1-62(f) (Accessed Sept. 2019).