

Ohio

Medicaid Program: Ohio Medicaid

Program Administrator: Ohio Department of Job and Family Services

Regional Telehealth Resource Center: Upper Midwest Telehealth Resource Center

Covers the States of: Illinois, Indiana, Michigan & Ohio

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Medicaid Telehealth Reimbursement

Summary

Ohio Medicaid reimburses for live video telemedicine. They do not provide reimbursement for store-and-forward or remote patient monitoring.

Definitions

“Telehealth” is the direct delivery of health care services to a patient via secure, synchronous, interactive, real-time electronic communication comprised of both audio and video elements. The following activities are not considered telehealth:

- The delivery of health care service by electronic mail, telephone call, or facsimile transmission;
- Conversations between practitioners regarding a patient without the patient present either physically or via secure, synchronous, interactive, real-time electronic communication.

Source: OAC 5160-1-18(4). (Accessed Sept. 2019).

“Telemedicine” is the direct delivery of services to a patient via synchronous, interactive, real-time electronic communication that comprises both audio and video elements.

Source: Fact Sheet: Telemedicine Billing Guidance (Dec. 2016) (Accessed Sept. 2019).

“Telehealth service” means a health care service delivered to a patient through the use of interactive audio, video, or other telecommunications or electronic technology from a site other than the site where the patient is located.

Source: OH Revised Code, Sec. 5164.95. (Accessed Sept. 2019).

Live Video

Policy

Ohio Medicaid covers live video telemedicine for certain eligible providers, specific services and at specified originating sites.

Source: OH Fact Sheet: Telemedicine Billing Guidance (Dec. 2016) & OH Admin Code 5160-1-18. (Accessed Sept. 2019).

The department of Medicaid is required to establish standards for Medicaid payment for health care services the department determines are appropriate to be covered when provided as telehealth services.

Source: Revised Code, Sec. 5164.95.(B) (Accessed Sept. 2019).

Ohio Medicaid pays for eligible Medicaid-covered services provided through telehealth and identified in a student’s approved individualized education program (IEP).

Inmates of a penal facility or a public institution are not eligible for reimbursement for telehealth services.

Source: OH Admin Code 5160-1-18(D). (Accessed Sept. 2019).



Eligible Services / Specialties

See fact sheet for list of eligible CPT codes.

Source: OH Fact Sheet: Telemedicine Billing Guidance (Dec. 2016). (Accessed Sept. 2019).

The following services are eligible for payment when delivered through telehealth from the practitioner site:

- Services provided by a patient centered medical home
- Evaluation and management of a new patient described as “office or other outpatient visit” with medical decision making not to exceed moderate complexity
- Inpatient or office consultation for a new or established patient when providing the same quality and timeliness of care to the patient other than by telehealth is not possible
- Mental health or substance use disorder services described as “psychiatric diagnostic evaluation” or “psychotherapy”

Source: OH Admin Code 5160-1-18(D). (Accessed Sept. 2019).

Eligible Providers

Eligible Distant Site Providers

- Physicians (MD, DO)
- Psychologists
- Federally Qualified Health Center (medical and mental health)

Source: OH Fact Sheet: Telemedicine Billing Guidance (Dec. 2016). (Accessed Sept. 2019).

The following practitioners are eligible to render services through telehealth:

- Physician
- Psychologist
- Physician Assistant
- Clinical nurse specialist, certified nurse-midwife or certified nurse practitioner
- Licensed independent social worker, licensed independent chemical dependency counselor, licensed independent marriage and family therapist, or licensed professional clinical counselor

The following provider types are eligible to bill for services rendered through telehealth:

- A practitioner listed in the previous list
- A professional medical group
- A FQHC or RHC
- The following ambulatory health care clinics: (1) Public health department; (2) primary care clinic; (3) Family planning clinic

Source: OH Admin Code 5160-1-18(D). (Accessed Sept. 2019).

Eligible Sites

“Patient site” is the physical location of the patient at the time a health care service is provided through the use of telemedicine. The patient site may be one of the following locations:

- The office or service location of a:
 - Physician;
 - Psychologist;
 - Physician assistant;
 - Clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner; or
 - Licensed independent social worker, licensed independent chemical dependency counselor, licensed independent marriage and family therapist, or licensed professional clinical counselor



Eligible Sites

- The patient’s home
- School
- Inpatient hospital
- Outpatient hospital
- Nursing facility
- Intermediate care facility for individuals with an intellectual disability (ICF/IID)

The “practitioner site” is the physical location of the treating practitioner at the time a health care service is provided through the use of telehealth. The practitioner site shall not be the same location as the patient site.

Source: OAC 5160-1-18. (Accessed Sept. 2019).

Provider types eligible as an originating site, either using a Q3014 HCPCS code or a GQ modifier:

- Primary Care Clinic
- Outpatient Hospital
- Rural Health Clinic (Medical)
- Federally Qualified Health Clinic (Medical)
- Physician
- Professional Medical Group
- Podiatrist
- Optometrist

See fact sheet for additional billing rules.

Source: Fact Sheet: Telemedicine Billing Guidance (Dec. 2016), (Accessed Sept. 2019).

Excluded places of service for originating or distant site providers:

- Home (originating or distant site)
- Inpatient hospital
- Nursing facility
- Inpatient psychiatric hospitals
- Other POS exclusions for E&M and psychiatric codes

Source: Fact Sheet: Telemedicine Billing Guidance (Dec. 2016), (Accessed Sept. 2019).

Geographic Limits

No reference found.

Facility/Transmission Fee

Originating site eligible for a facility fee using HCPCS code Q3014. See transmittal letter for additional billing rules.

Source: Fact Sheet: Telemedicine Billing Guidance (Dec. 2016), (Accessed Sept. 2019).

No institutional (facility) claim may be submitted by the distant site provider for the health care service delivered through the use of telehealth.

Source: OAC Ann. 5160-1-18(D). (Accessed Sept. 2019).



Medicaid Telehealth Reimbursement

		Store-and-Forward
Remote Patient Monitoring	Policy	<p>Telemedicine is defined as being “synchronous, interactive, real-time”, excluding the use of store-and-forward technology.</p> <p>Source: OAC 5160-1-18. & Fact Sheet: Telemedicine Billing Guidance (Dec. 2016) (Accessed Sept. 2019).</p>
	Eligible Services/Specialties	No reference found.
	Geographic Limits	No reference found.
	Transmission Fee	No reference found.
Remote Patient Monitoring	Policy	No reference found.
	Conditions	No reference found.



Medicaid Telehealth Reimbursement

Remote Patient Monitoring	Provider Limitations	No reference found.
	Other Restrictions	No reference found.
Email / Phone / Fax	<p>Electronic mail, telephone and facsimile transmission are not telemedicine.</p> <p>Source: <i>OH Admin. Code 5160-1-18(A)(4)(a).</i> (Accessed Sept. 2019).</p>	
Consent	No reference found.	
Out of State Providers	No reference found.	
Miscellaneous	No reference found.	



Private Payer Laws

Definitions

Recently Passed Legislation

“Telemedicine services” means a mode of providing health care services through synchronous or asynchronous information and communication technology by a health care professional, within the professional’s scope of practice, who is located at a site other than the site where the recipient is located.

Source: OH Revised Code Annotated, 3902.30(A)(5). (HB – 166). (Accessed Sept. 2019).

Requirements

Recently Passed Legislation

A health benefit plan must provide coverage for telemedicine services on the same basis and to the same extent that the plan provides coverage for in-person health care services. Plans cannot exclude coverage for a service solely because it is provided as a telemedicine service.

A health benefit plan may not impose any annual or lifetime benefit maximum on telemedicine services other than what is imposed on all benefits under the plan.

Source: OH Revised Code Annotated, 3902.30. (HB – 166). (Accessed Sept. 2019).

Parity

Service Parity

Recently Passed Legislation

A health benefit plan must provide coverage for telemedicine services on the same basis and to the same extent that the plan provides coverage for in-person health care services. Plans cannot exclude coverage for a service solely because it is provided as a telemedicine service.

Source: OH Revised Code Annotated, 3902.30. (HB – 166). (Accessed Sept. 2019).

Payment Parity

None.

Professional Regulation/Health & Safety

Definitions

Physicians – Obtaining a Telemedicine certificate by an out of state provider.

“The practice of telemedicine” means the practice of medicine in this state through the use of any communication, including oral, written, or electronic communication, by a physician located outside this state.

Source: OH Revised Code Annotated, 4731.296(A). (Accessed Sept. 2019).

Physical Therapy Practice

“Telehealth means the use of electronic communications to provide and deliver a host of health-related information and healthcare services, including, but not limited to physical therapy related information and services, over large and small distances.”

Source: OH Admin. Code 4755-27-01(10). (Accessed Sept. 2019).

Speech Language Pathology

Telehealth means the use of telecommunications and information technologies for the exchange of information from one site to another for the provision of audiology or speech-language pathology services to an individual from a provider through hardwire or internet connection.

Source: OH Admin. Code 4753-2-01(A)(10). (Accessed Sept. 2019).).



Speech Language Pathology

A provider is required to inform the patient of specific telehealth limitations..

Source: *OH Admin. Code 4753-2-01(D). (Accessed Sept. 2019).*

Informed consent is required (“patient’s agreement or signed authorization”). Must be documented in patient’s record.

Source: *OH Admin. Code 4731-11-09. (Accessed Sept. 2019).*

A physician shall not prescribe, personally furnish or otherwise provide, or cause to be provided any controlled substance or non-controlled substance to a person on whom the physician has never conducted a physical examination, with the exceptions listed below.

Non-Controlled Substances Exceptions

Prescribing is allowed when a patient is remote from the physician by complying with the following:

- Establish the patient’s identity and physical location;
- Obtain the patient’s informed consent;
- Forward medical record to patient’s primary care provider (upon consent);
- Conduct an appropriate evaluation;
- Establish or confirm a diagnosis and treatment plan;
- Document information in patient’s medical record;
- Provide or recommend appropriate follow-up care;
- Make medical record of the visit available to patient; and
- Use appropriate technology sufficient to conduct all steps.

Additional restrictions apply for controlled substances. See regulation.

Source: *OH Admin. Code 4731-11-09. (Accessed Sept. 2019).*

A patient evaluation performed within the previous twenty-four months via telemedicine by a health-care provider acting within the scope of their professional license is acceptable for satisfying the criteria to be an “active patient”.

Source: *OAC 4731-11-01(D). (Accessed Sept. 2019).*

Ohio issues telemedicine certificates that allow the holder to engage in the practice of telemedicine in the state. Providers with telemedicine certificates cannot practice in OH without a special activity certificate.

The OH Medical Board may issue, without examination, a telemedicine certificate to a person who meets all of the following requirements:

1. Holds a current, unrestricted license to practice medicine and surgery or osteopathic medicine and surgery or osteopathic medicine and surgery issued by another state that requires license holders to complete at least fifty hours of continuing medical education every two years.
2. The person’s principal place of practice is in that state.
3. The person does not hold a license issued under this chapter authorizing the practice of medicine and surgery or osteopathic medicine and surgery in this state.
4. The person meets the same age, moral character, and educational requirements individuals must meet under sections 4731.09 and 4731.14 of the Revised Code and, if applicable, demonstrates proficiency in spoken English in accordance with section 4731.142 of the Revised Code.

Source: *OH Revised Code Annotated, Sec. 4731.296. (Accessed Sept. 2019).*



The [state medical] board shall convert a telemedicine certificate to a license issued under section 4731.14 of the Revised Code on receipt of a written request from the certificate holder. Once the telemedicine certificate is converted, the holder is subject to all requirements and privileges attendant to a license issued under section 4731.14 of the Revised Code, including continuing medical education requirements.

Source: *OH Revised Code Ann. 4731-296(F). (Accessed Sept. 2019).*

Physical Therapy

Physical therapists and physical therapist assistants must hold a valid OH physical therapy license to treat a patient located in Ohio via telehealth.

Source: *OH Admin. Code 4755-27-01(10)(b). (Accessed Sept. 2019).*

Professional Board Telehealth-Specific Regulations

- State Board of Speech Language Pathology and Audiology (*OH Admin. Code 4753-2-01 (Accessed Sept. 2019)*)

