

# Washington

**Medicaid Program:** Washington Apple Health

**Program Administrator:** Washington State Health Care Authority

**Regional Telehealth Resource Center:** Northwest Regional Telehealth Resource Center

**Covers the States of:** Alaska, Idaho, Montana, Oregon, Utah, Washington, and Wyoming

<https://www.nrtrc.org>

## Medicaid Telehealth Reimbursement

### Summary

Washington Medicaid (Apple Health) reimburses for live video, store-and-forward, and remote patient monitoring under some circumstances.

Client must be present and participating in telemedicine visit. Clients under the Family Planning, TAKE CHARGE, First Steps, and School Based Health Care Service program are eligible for telemedicine through fee-for-service.

For patients with managed care plan coverage, telemedicine services will not be reimbursed separately. All services must be arranged and provided by primary care providers. It is not mandatory that the plan pay for telehealth services.

**Source:** WA State Health Care Authority, *Medicaid Provider Guide, Physician-Related Svcs./Health Care Professional Svcs.*, p. 90 (Jul. 2019); (Accessed Aug. 2019).

Telemedicine is covered by the Department.

**Source:** WA Admin. Code Sec. 182-531-0100. (Accessed Aug. 2019).

### Definitions

“Telemedicine is when a health care practitioner uses HIPAA-compliant interactive real-time audio and video telecommunications (including web-based applications) or store-and-forward technology to deliver covered services that are within his or her scope of practice to a client at a site other than the site where the provider is located.”

**Source:** WA Admin. Code Sec. 182-531-1730. WA State Health Care Authority, *Medicaid Provider Guide, Physician-Related Svcs./Health Care Professional Svcs.*, p. 90 (Jul. 2019); *School Based Health Care Services*, p. 31 (Jan. 1, 2019) (Accessed Aug. 2019).

#### Home Health Services

“Telemedicine means the use of tele-monitoring to enhance the delivery of certain home health skilled nursing services through:

- The collection of clinical data and the transmission of such data between a patient at a distant location and the home health provider through electronic processing technologies. Objective clinical data that may be transmitted includes, but is not limited to, weight, blood pressure, pulse, respirations, blood glucose, and pulse oximetry; or
- The provision of certain education related to health care services using audio, video, or data communication instead of a face-to-face visit.”

**Source:** WA Admin. Code Sec. 182-551-2010. (Accessed Aug. 2019)

Manuals for Federally Qualified Health Centers (FQHCs), Maternity Support Services, Medical Nutrition Therapy, and Outpatient Hospital Services refer to agency’s telemedicine coverage policy in the Physician-related services manual.

**Source:** WA State Health Care Authority, *Medicaid Provider Guide. Federally Qualified Health Centers Manual, Jul. 1, 2019, pg. 65; Maternity Support Services Manual, Apr. 1, 2019, pg. 31; Medical Nutrition Therapy Manual, Jul. 1, 2019, pg. 17; Outpatient Hospital Services Manual, Jul. 1, 2019 pg. 36.*



Policy

Live video is covered for patients with fee-for-service coverage when it is medically necessary. The referring provider is responsible for determining and documenting medical necessity.

**Source:** WA State Health Care Authority, Medicaid Provider Guide, Physician-Related Svcs./Health Care Professional Svcs., p. 93 (Jul. 2019).

Eligible Services / Specialties

**Applied Behavior Analysis (ABA) for Clients Age 20 and Younger**

Eligible telemedicine services:

- Program supervision when the child is present
- Family training, which does not require the child’s presence

See ABA fee schedule for telemedicine billing instructions.

**Source:** WA State Health Care Authority, Medicaid Provider Guide, Applied Behavior Analysis for Clients 20 and Younger, p. 35 (Jul. 2019) & WAC 182-531A-1200. (Accessed Aug. 2019).

**Behavioral Health**

Behavioral health administrative services organizations and managed care organizations who have a contract with the department shall reimburse a provider for behavioral health services provided to a covered person who is under 18 years old through telemedicine or store-and-forward if:

- The behavioral health administrative services organization or managed care organization provides coverage for behavioral health services when provided in-person; and
- The service is medically necessary.

**Source:** Revised Code of WA Sec. 71.24.335(1). (Accessed Aug. 2019).

**Teledentistry**

Teledentistry can be delivered through a synchronous or asynchronous method. The agency covers teledentistry as a substitute for an in-person, face-to-face, hands-on encounter when medically necessary.

A dentist or authorized dental provider may delegate allowable tasks to dental hygienists and Expanded Function Dental Assistants through teledentistry. Delegation of tasks must be under general supervision.

See manual for acceptable CPT codes.

**Source:** WA State Health Care Authority, Medicaid Provider. Dental-Related Services, p. 83-84. (Jul, 2019). (Accessed Aug. 2019).

Eligible Providers

**Rural Health Clinics (RHCs)**

RHCs are authorized to serve as an originating site for telemedicine services. RHCs may receive the encounter rate when billing as a distant site provider if the service being billed is encounter eligible. Clients enrolled in an agency-contracted MCO must contact the MCO regarding whether or not the plan will authorize telemedicine coverage.

**Source:** WA State Health Care Authority, Medicaid Provider Guide, p. 44, Jul. 2019. (Accessed Aug. 2019).



Eligible Sites

Eligible Originating Sites:

- Clinics;
- Dental offices;
- Home or any location determined appropriate by the individual receiving the service;
- Hospitals—inpatient or outpatient;
- Neurodevelopmental centers;
- Schools;
- Rural health clinic;
- Federally qualified health center;
- Physician’s or other health care provider’s office;
- Community mental health center/chemical dependency settings;
- Skilled nursing facility; or
- Renal dialysis centers, except an independent renal dialysis center

Originating site providers are responsible for determining and documenting that telemedicine is medically necessary.

**Source:** RCW 41.05700(3) & WAC 182-531-1730.(3) & WA State Health Care Authority, Medicaid Provider Guide, Physician-Related Svcs./Health Care Professional Svcs., p. 90-91 (Jul. 2019). (Accessed Aug. 2019).

**School-Based Health Care Services (SBHS)**

When the originating site is a school, the school district must submit a claim on behalf of both the originating and distant site. The location of the student and provider must be documented. The SBHS program allows the following approved originating sites:

- The school for students age three through 20 (Part B and C services)
- The home for students age birth through two (Part C services only)

See manual for specific scenarios and appropriate modifiers.

**Source:** WA State Health Care Authority, Medicaid Provider Guide, School Based Health Care Services, p. 32-33 (Jan. 1, 2019), (Accessed Aug. 2019).

Geographic Limits

An urban or rural distinction must not be placed on the originating site.

**Source:** Revised Code of WA Sec. 41.05700(5) (Accessed Aug. 2019).

Facility/Transmission Fee

Facility fees are available for originating sites, except inpatient hospitals, skilled nursing facilities, homes or other locations determined appropriate by the individual receiving service, but not specified as an eligible originating site.

**Source:** WA State Health Care Authority, Medicaid Provider Guide, Physician-Related Svcs./Health Care Professional Svcs., p. 92 (Jul. 2019). (Accessed Aug. 2019).

Rural Health Clinics that serve as an originating site for telemedicine services are paid an originating site facility fee. Charges for the originating site facility fee may be included on a claim, but the originating site facility fee may not be included on the cost report.

**Source:** WA State Health Care Authority, Medicaid Provider Guide, p. 44, Jul. 2019. (Accessed Aug. 2019).

**School-Based Health Care Services (SBHS)**

When the originating site is a school, the school district will receive a telemedicine fee per completed telemedicine transmission.

**Source:** WA State Health Care Authority, Medicaid Provider Guide, School Based Health Care Services, p. 32 (Jan. 1, 2019), (Accessed Aug. 2019).

**Dental Related Services**

The facility fee is included in the CPT code. There is no separate facility fee for teledentistry.

**Source:** WA State Health Care Authority, Medicaid Provider Guide, Dental Services, p. 84 (July 1, 2019). (Accessed Sept. 2019).



Store-and-Forward

Policy

Washington Medicaid reimburses for some store-and-forward services under certain circumstances.

**Source:** WA State Health Care Authority, Medicaid Provider Guide, Physician-Related Svcs./Health Care Professional Svcs., p. 91 (Jul. 2019). & WA State Health Care Authority, Medicaid Provider. Dental-Related Services, p. 83. (Jul. 2019) (Accessed Aug. 2019)).

WA Medicaid pays for store-and-forward for teledermatology or when all of the following conditions are met:

- There is an associated office visit that can be done either in-person or via asynchronous telemedicine.
- The transmission of information is HIPAA compliant.
- Written informed consent is obtained.

If the consultation results in a face-to-face visit in-person or via telemedicine with the specialist within 60 days of the store-and-forward consult, the agency does not pay for the consult.

**Source:** WA State Health Care Authority, Medicaid Provider Guide, Physician-Related Svcs./Health Care Professional Svcs., p. 94 (Jul. 2019). (Accessed Aug. 2019).

Eligible Services/Specialties

WA Apple Health pays for store-and-forward for teledermatology. Teledermatology services via store-and-forward must be billed with GQ modifier and 02 POS Code from the distant site. The sending provider bills as usual with the E&M code and no modifier.

See manual for acceptable CPT/HCPCS codes.

**Source:** WA State Health Care Authority, Medicaid Provider Guide, Physician-Related Svcs./Health Care Professional Svcs., p. 94 (Jul. 2019). (Accessed Aug. 2019).

**Teledentistry**

Teledentistry can be delivered through a synchronous or asynchronous method. The agency covers teledentistry as a substitute for an in-person, face-to-face, hands-on encounter when medically necessary.

See manual for acceptable CPT codes.

**Source:** WA State Health Care Authority, Medicaid Provider. Dental-Related Services, p. 83-84. (Jul. 2019) (Accessed Aug. 2019).

**Behavioral Health Organizations**

Store-and-forward reimbursable only for covered services specified in the negotiated agreement between the behavioral health administrative services organization and health care provider.

**Source:** RCW 71.24.335(2(b)).

Geographic Limits

No reference found.



# Medicaid Telehealth Reimbursement

Remote Patient Monitoring	Store-and-Forward	<p>The originating site for store-and-forward is not eligible to receive an originating site fee.</p> <p><b>Source:</b> WA State Health Care Authority, Medicaid Provider Guide, Physician-Related Svcs./Health Care Professional Svcs., p. 94 (Jul. 2019). (Accessed Aug. 2019).</p>
	Transmission Fee	
	Policy	<p>The Medicaid agency covers the delivery of home health services through telemedicine for clients with a high risk of sudden change in medical condition which could compromise health outcomes and prescription drug monitoring.</p> <p><b>Source:</b> WA State Health Care Authority, Medicaid Provider Guide, Home Health Svcs. (Acute Care Svcs.), p. 29 (Jul. 2019). (Accessed Aug. 2019).</p>
	Conditions	<p>Services are provided for clients who have been diagnosed with an unstable condition, and who may be at risk for hospitalization or a more costly level of care.</p> <p>Coverage is limited to one telemedicine interaction, per patient, per day, based on the ordering licensed practitioner's care plan.</p> <p><b>Source:</b> WA State Health Care Authority, Medicaid Provider Guide, Home Health Svcs. (Acute Care Svcs.), p. 29 (Jul. 2019). (Accessed Aug. 2019).</p>
	Provider Limitations	<p>Must be provided by a Registered Nurse or Licensed Practical Nurse.</p> <p>The Medicaid agency does not require prior authorization for the delivery of home health services through telemedicine.</p> <p><b>Source:</b> WA State Health Care Authority, Medicaid Provider Guide, Home Health Svcs. (Acute Care Svcs.), p. 29-30 (Jul. 2019). (Accessed Aug. 2019).</p>
Other Restrictions	<p>Eligible Services:</p> <ul style="list-style-type: none"> <li>• Assessment and monitoring of clinical data including, but not limited to, vital signs, pain levels and other biometric measures specified in the plan of care;</li> <li>• Assessment of response to previous changes in the plan of care;</li> <li>• Detection of condition changes based on the telemedicine encounter that may indicate the need for a change in the plan of care;</li> <li>• Implementation of a management plan.</li> </ul> <p><b>Source:</b> WA State Health Care Authority, Medicaid Provider Guide, Home Health Svcs. (Acute Care Svcs.), p. 30 (Jul. 2019). (Accessed Aug. 2019).</p> <p>Home health monitoring is not covered in Applied Behavior Analysis Program for clients Age 20 or younger.</p> <p><b>Source:</b> WA State Health Care Authority, Medicaid Provider Guide, Applied Behavior Analysis for Clients 20 and Younger, p. 36 (Jul. 2019). (Accessed Aug. 2019).</p>	



# Medicaid Telehealth Reimbursement

## Email / Phone / Fax

No reimbursement for email.  
 No reimbursement for telephone.  
 No reimbursement for FAX.

**Source:** WA State Health Care Authority, Medicaid Provider Guide, Physician-Related Svcs./Health Care Professional Svcs., p. 90 (Jul. 2019). (Accessed Aug. 2019).

## Consent

Written consent must be obtained for store-and-forward.

**Source:** WA State Health Care Authority, Medicaid Provider Guide, Physician-Related Svcs./Health Care Professional Svcs., p. 93 (Jul. 2019). (Accessed Aug. 2019).

## Out of State Providers

No reference found.

## Miscellaneous

“Use place of service (POS) 02 to indicate that a billed service was furnished as a telemedicine service from a distant site. Distant site practitioners billing for telemedicine services under Critical Access Hospital (CAH) optional payment method must use the GT modifier. Add modifier 95 if the distant site is designated as a nonfacility.”

**Source:** WA State Health Care Authority, Medicaid Provider Guide, Physician-Related Svcs./Health Care Professional Svcs., p. 93 (Jul. 2019). (Accessed Aug. 2019).

Additional Documentation Requirements for Telemedicine:

- Verification that the service was provided via telemedicine
- The location of the client and a note of any medical personnel with the client
- The location of the provider
- The names and credentials (MD, ARNP, RN, PA, CNA, etc.) of all people involved in the telemedicine visit, and their role in the encounter at both the originating and distant sites

**Source:** WA State Health Care Authority, Medicaid Provider Guide, Physician-Related Svcs./Health Care Professional Svcs., p. 91 (Jul. 2019). (Accessed Aug. 2019).

“If a provider from the originating site performs a separately identifiable service for the client on the same day as telemedicine, documentation for both services must be clearly and separately identified in the client’s medical record.”

**Source:** WA State Health Care Authority, Medicaid Provider Guide, Physician-Related Svcs./Health Care Professional Svcs., p. 92 (Jul. 2019). (Accessed Aug. 2019).



“Telemedicine” means the delivery of health care services through the use of interactive audio and video technology, permitting real-time communication between the patient at the originating site and the provider, for the purpose of diagnosis, consultation, or treatment. For purposes of this section only, “telemedicine” does not include the use of audio-only telephone, facsimile, or email.

**Source:** WA Rev. Code Sec. 48.43.735.(8(g)) (Accessed Aug. 2019).

Insurers (including employee health plans and Medicaid Managed Care) must reimburse a provider for services delivered through telemedicine or store-and-forward if:

- The plan provides coverage when provided in-person;
- The health care service is medically necessary;
- The health care service is a service recognized as an essential health benefit under section 1302(b) of the federal patient protection and affordable care act (ACA);
- The health care service is determined to be safely and effectively provided through telemedicine or store-and-forward technology according to generally accepted health care practices and standards, and the technology used to provide the health care service meets the standards required by state and federal laws governing the privacy and security of protected health information.

**Source:** RCW 48.43.735.(1) (Accessed Aug. 2019).

#### Eligible Originating Sites

- Hospital
- Rural health clinic
- Federally qualified health center
- Physician’s or other health care provider’s office
- Community mental health center
- Skilled nursing facility
- Renal dialysis center, except an independent renal dialysis center
- Home or any location determined appropriate by the individual receiving the service
- Originating sites may not distinguish between rural and urban originating sites

**Source:** RCW 48.43.735.(3) (Accessed Aug. 2019).

An originating site (other than a home) can charge a facility fee, but it is subject to a negotiated agreement between the originating site and the health plan.

**Source:** RCW 48.43.735.(4) (Accessed Aug. 2019).

If the services are provided via store-and-forward, there must be an associated office visit between the patient and referring health care provider.

**Source:** RCW 48.43.735.(2(a)) (Accessed Aug. 2019).



Private Payer Laws	Parity	Service Parity	<p>Services must be considered an essential health benefit under the ACA and be determined to be safely and effectively provided through telemedicine or store-and-forward.</p> <p><b>Source:</b> RCW 48.43.735.(1(c)) (Accessed Aug. 2019).</p>
		Payment Parity	<p>No explicit payment parity.</p>
Professional Regulation/Health & Safety	Definitions		<p>“Telemedicine means the delivery of health care (or behavioral health) services through the use of interactive audio and video technology, permitting real-time communication between the patient at the originating site and the provider, for the purpose of diagnosis, consultation, or treatment. For purposes of this section only, ‘telemedicine’ does not include the use of audio-only telephone, facsimile, or email.”</p> <p><b>Source:</b> RCW 70.41.020(13) &amp; WAC 246-335-610.(21) (Accessed Aug. 2019).</p> <p><b>Hospice</b></p> <p>“Telehealth” means a collection of means or methods for enhancing health care, public health, and health education delivery and support using telecommunications technology. Telehealth encompasses a broad variety of technologies and tactics to deliver virtual medical, health, and education services.</p> <p>“Telemedicine” means the delivery of health care services through the use of interactive audio and video technology, permitting real-time communication between the patient at the originating site and the provider, for the purpose of diagnosis, consultation, or treatment.</p> <p><b>Source:</b> WAC 246-335-610.(20) &amp; (21) (Accessed Aug. 2019).</p> <p><b>Physical and Occupational Therapy</b></p> <p>“Telehealth means providing physical therapy [or occupational therapy] via electronic communication where the physical [occupational] therapist or physical [or occupational] therapist assistant and the patient are not at the same physical location.”</p> <p><b>Source:</b> WAC 246-915-187(3(a)) &amp; 246-847-176.(1) (Accessed Aug. 2019).</p>
		Consent	<p>Patient consent should be obtained and documented prior to the telemedicine encounter.</p> <p><b>Source:</b> Washington Medical Quality Assurance Commission, Guidelines for Appropriate Use of the Internet in Medical Practice (Accessed Aug. 2019).</p>





## Online Prescribing

The WA Medical Quality Assurance Commission has issued guidelines on the use of the Internet in medical practices. A guideline does not have the force of law, but can be considered by the Commission to be the standard of practice in the state.

A documented patient evaluation, including history and physical evaluation adequate to establish diagnoses and identify underlying conditions and/or contra-indications to the treatment recommended/provided, must be obtained prior to providing treatment, including issuing prescriptions, electronically or otherwise.

Treatment and consultation recommendations made in an online setting, including issuing a prescription via electronic means, will be held to the same standards of appropriate practice as those in in-person settings.

Treatment, including issuing a prescription, based solely on an online questionnaire or consultation does not constitute an acceptable standard of care.

**Source:** Washington Medical Quality Assurance Commission, *Guidelines for Appropriate Use of the Internet in Medical Practice* (Accessed Aug. 2019).

For purposes of authorizing the medical use of marijuana, a physician must complete an in-person physical exam or a remote physical exam when certain conditions are met.

**Source:** Revised Code Washington Sec. 69.51A.030. HB 1094 (2019 session). (Accessed Aug. 2019).

## Cross-State Licensing

Member of the Interstate Medical Licensure Compact.

**Source:** The IMLC. (Accessed Aug. 2019).

Member of Physical Therapy Compact.

**Source:** PT Compact. Compact Map. (Accessed Aug. 2019).

## Miscellaneous

Beginning Jan. 1, 2020, a health care professional who provides clinical services through telemedicine may complete a telemedicine training. By January 1, 2020, the telemedicine collaborative shall make a telemedicine training available on its web site for use by health care professionals who use telemedicine technology. If a health care professional completes the training, the health care professional shall sign and retain an attestation. The training:

- Must include information on current state and federal law, liability, informed consent, and other criteria established by the collaborative for the advancement of telemedicine, in collaboration with the department and the Washington state medical quality assurance commission;
- Must include a question and answer methodology to demonstrate accrual of knowledge; and
- May be made available in electronic format and completed over the internet.

The training may be incorporated into existing telemedicine training programs, provided that the training meets the requirements in subsection (2) of this section.

**Source:** SB 5386 (2019 Session).

WA State requires a provider directory to be updated monthly. For each health plan, the associated provider directory must include information about available telemedicine services and specifically described for each provider.

**Source:** WAC 284-43-204. (Accessed Aug. 2019).



Collaborative for the advancement of telemedicine was created to develop recommendations on improving reimbursement and access to care, and review the concept of telemedicine payment parity.

**Source:** SB 6163 -2018. (Accessed Aug. 2019)

**Source:** SB 6399 – 2018. (Accessed Aug. 2019)

#### **Professional Board Telehealth-Specific Regulations**

- Physical Therapy Practice Board (WAC 246-915-187) (Accessed Aug. 2019).
- Occupational Therapy Practice Board (WAC 246-847-176) (Accessed Aug. 2019).

