Objectives

• Identify clinical applications of, and state Medicaid best practices for, telemental and behavioral health
• Determine the opportunities for innovation with sound policy making
• Outline effective approaches for statewide improvements
About ATA

The American Telemedicine Association (ATA) is the leading international resource and advocate promoting the use of advanced remote medical technologies.

ATA and our members work to fully integrate telemedicine into transformed healthcare systems to improve quality, equity and affordability of healthcare throughout the world.

• Established in 1993
• Over 8,000 members world-wide
About ATA

Convener
• 13 Special Interest Groups (SIGs)
• 3 Regional Chapters
• 4 Councils
• State Forums
• Annual Meeting (Minneapolis – May 2016)
• Fall Forum (D.C. – September 2015)

Accreditation Program

Practice Guidelines
• 14 e.g. urgent care, mental, rehabilitation, diabetic retinopathy

Public Policy
• Multi-state
• Federal
• International
Some Problems Addressed

• Barriers of time and distance
• Professional shortages
• Disparities in access to care
• Quality of care
• Hospital readmits, ER overuse
• Costs of delivery
• Convenience and patient choice
Where can you find telemedicine today?
Military

• Largest user of telemedicine nationally
• Favorable policies in areas of home telehealth, mental and behavioral health and licensure portability
• Veterans Administration (VA)
• Department of Defense (DoD)
Healthcare Facilities

- Access to specialty care
  - Stroke
  - Dermatology
  - ICU
  - Psychiatry
  - OB/GYN
  - Alcohol and substance abuse counseling
- Hospitals, community health centers, rural health clinics, provider’s office
- Care coordination
- Integrated care
- Networks of care
Telehealth in the Home and Remote Patient Monitoring

- 25 state Medicaid plans cover telehealth in the home
- 17 state Medicaid plans cover remote patient monitoring
- Better health outcomes and cost savings

- Clinical applications: Primary and urgent care, Skilled nursing, mental and behavioral health, telerehabilitation, obstetrical care and monitoring, long term and post-acute care, chronic disease management
Direct-to-Consumer

- Diagnostic medical device peripherals
- Clinical applications: Primary care, mental and behavioral health, speech-language therapy, dermatology
- Cost and convenience
Mobile Applications (mHealth)

- FDA - 2013 final guidance on regulation of mHealth apps
- 13 state Medicaid plans cover and reimburse for store-and-forward
- Wellness, screenings, medication management, consumer engagement, population health
School-based Telehealth

- 2000 SBHCs nationally
- 25 million children currently eligible for Medicaid
- 18 state and community-based programs using school-based telehealth
- 16 state Medicaid plans cover telehealth in schools
- Clinical applications: Primary care, mental and behavioral health, dentistry, speech-language therapy
Telehealth in Practice
Practice Guidelines

Clinical

Technical

Administrative
Clinical

- Identity and location verification
- Patient appropriateness
- Linguistic and cultural competency
- Informed consent
- Physical environment
- Care coordination
- Emergency management
- Referrals
Technical

- Video conferencing
- Connectivity
- Privacy
Administrative

- Qualification and training
- Documentation and record keeping
- Payment and billing
Coverage and Payment in Health Plans
Telemedicine in State Regulated Health Plans

• Medicaid
  – No federal statute or regulation on telemedicine coverage in Medicaid
  – States have a lot of flexibility and may offer comparable coverage and reimbursement of telemedicine-provided services to that of in-person
  – Telemedicine is not a new service or benefit. It is a way of delivering already covered services
  – State FOCUS: Reduction in costs and improvements in quality
50 State Medicaid Models Today

- All cover imaging
- 48 states cover something
  - 48 telemental health
  - 25 home telehealth
  - 17 remote patient monitoring
  - 13 store-and-forward
State Composite Ratings for Medicaid Telemental and Behavioral Health Coverage

[Map showing ratings for Medicaid - Mental/Behavioral]

- **A (8 states and DC)**
- **B (39 states)**
- **C (1 state)**
- **F (2 states)**
As of November 2014, 16 states have a total of 20 approved Medicaid health home models.

<table>
<thead>
<tr>
<th>States with Approved Health Home SFAs</th>
<th>Alabama, Idaho, Iowa (2), Kansas, Maine, Maryland, Missouri (2), New York, North Carolina, Ohio, Oregon, Rhode Island (3), South Dakota, Vermont, Washington, Wisconsin</th>
</tr>
</thead>
</table>
Telemedicine in State Regulated Health Plans

• Good Parity Model – Keep it Simple!
  – Coverage and reimbursement of telemedicine-provided services comparable to that of in-person services
  – Broad definition of telemedicine if necessary
  – Inclusive of all licensed and certified health care providers
  – No limits on patient or provider location
  – Applies the same terms for copayment, deductible, lifetime max, and coinsurance


**States with proposed/pending legislation:** In 2015, Arkansas (ENACTED), Connecticut (ENACTED), Delaware (ENACTED), Illinois, Indiana (ENACTED), Iowa, Massachusetts, Minnesota (ENACTED), Nevada (ENACTED), New Jersey, North Carolina, Ohio, Pennsylvania, Rhode Island, and Washington (ENACTED)

*Coverage applies to certain health services and/or rural areas only.
Telemedicine in State Regulated Health Plans

- Opportunities for State-wide Improvements
  - State-wide Networks
    - North Carolina
    - South Carolina
    - South Dakota
  - Medicare-Medicaid Dual Eligibles
    - Virginia
  - Capitated payments
  - Direct-to-consumer models
    - Primary/urgent care
    - Mental and behavioral health
    - Diagnostic screening and prevention
  - Non-medical facility based care
    - School
    - Home
    - Retail pharmacy
  - State Employee Health Plans
  - Workers Compensation
Licensure and Scope
The State of Telemedicine in Your Professional Board
The State of Telehealth in Your Professional Board

• Health professions have a licensing/certification body in 50-61 jurisdictions:
  – Medicine (M.D., D.O., PA)
  – Nursing (RN, NP, APRN, Clinical Nurse Specialist)
  – Psychology
  – Social Work
  – Marriage and Family Therapy
  – Occupational Therapy
  – Physical Therapy
  – Speech Language Pathology and Audiology
The State of Telemedicine in Your Professional Board

• Hold telemedicine to the same standard as in-person care
  – Remote supervision of other health professionals
  – Establishing a provider-patient relationship
  – Prescribing
  – Initial and follow-up visits
  – Telepresenter
  – Patient informed consent
  – Provider and patient location
  – Technology allowed
Interstate Licensure
Compact Models

• National
  – Department of Defense
• Expedited
  – Federation of State Medical Boards
• Reciprocity
  – Regional e.g. D.C./MD/VA
• Mutual Recognition
  – National Council for State Boards of Nursing
  – Association for State and Provincial Psychology Boards
  – National Association of State Emergency Medical Services Officials
  – Federation of State Boards of Physical Therapy
The State of Telemedicine in Your Professional Board

400 +
ATA Public Resources

www.americantelemed.org/policy/state-policy-resource-center

- 2015 ATA Policy Priorities
- State Policy Toolkits
- State Gaps Analyses
- State Legislative Matrix
- (Members Only)
  - State Legislative and Regulatory Trackers
  - Monthly State Webinar
- State Policy Checklist
- ATA Wiki
- Telemedicine Practice Guidelines

- State Medicaid Best Practices
  - Telemental and Behavioral
  - Remote Patient Monitoring and Home Video Visits
  - Store-and-forward
  - School-based
  - Managed Care
  - Telestroke
  - High-risk Pregnancies
  - Telerehabilitation
Join Us in Washington, D.C.!

ATA 2015 Fall Forum
Washington, DC: Sept. 16-18, 2015
Latoya S. Thomas
Director, State Policy Resource Center
LThomas@AmericanTelemed.org
202-223-3333