

# HOW TELEHEALTH POLICY IN THE UNITED STATES IS STRUCTURED

CCHP VIDEO LEARNING SERIES  
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## CENTER FOR CONNECTED HEALTH POLICY (CCHP)

is a non-profit, non-partisan organization that seeks to advance state and national telehealth policy to promote improvements in health systems and greater health equity.

# DISCLAIMERS

- **Any information provided in today's talk is not to be regarded as legal advice. Today's talk is purely for informational purposes.**
- **Always consult with legal counsel.**
- **CCHP has no relevant financial interest, arrangement, or affiliation with any organizations related to commercial products or services discussed in this program.**

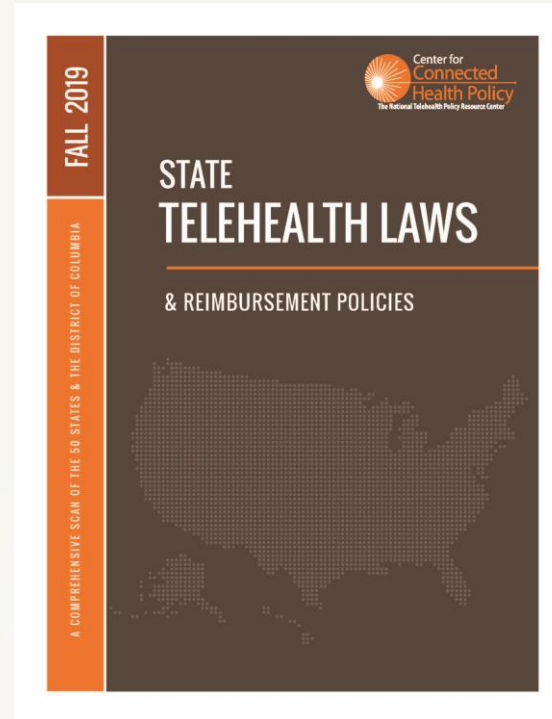
# ABOUT CCHP

- Established in 2009
- Program under the Public Health Institute
- Became federally designated national telehealth policy resource center in 2012
- Work with a variety of funders and partners



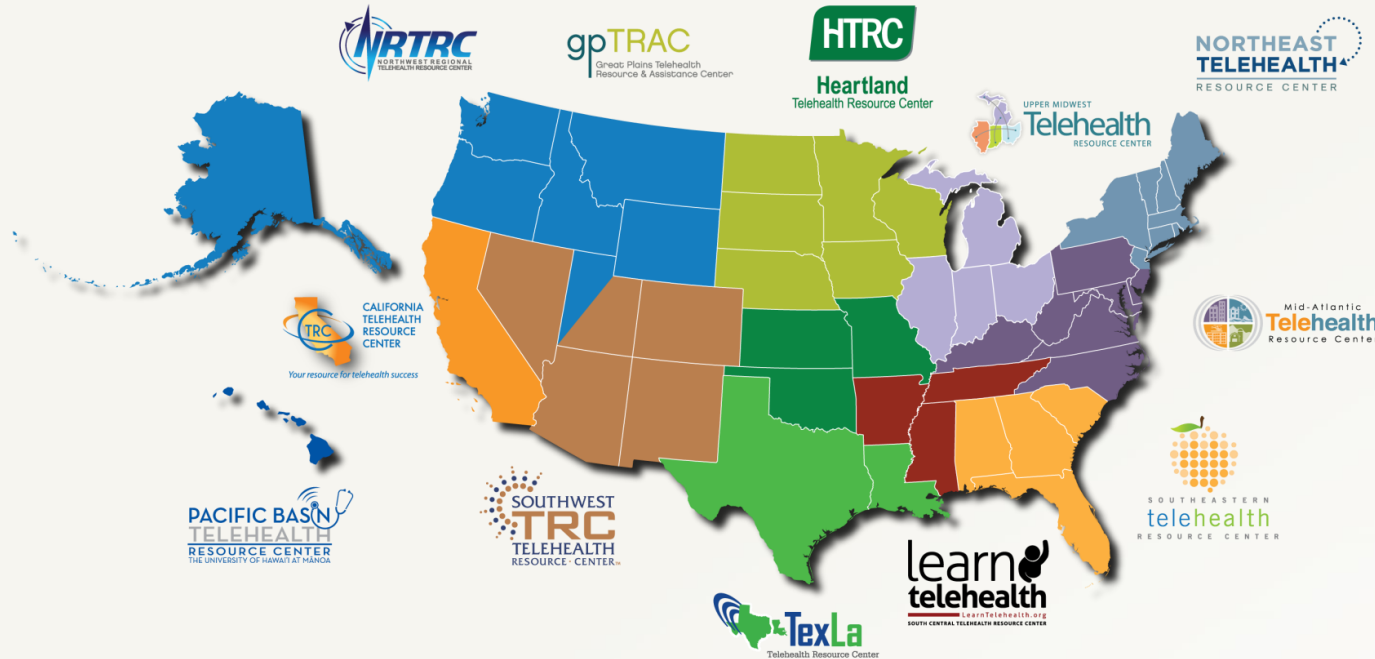
# CCHP PROJECTS

- 50 State Telehealth Policy Report
- Administrator National Consortium of Telehealth Resource Centers
- Convener for California Telehealth Policy Coalition



# NATIONAL CONSORTIUM OF TRCS

TelehealthResourceCenter.org



*Funding from HRSA/Federal Office of Rural Health Policy/Office for the Advancement of Telehealth*



2 National Resource Centers

|       |        |       |
|-------|--------|-------|
| NRTRC | gpTRAC | NETRC |
| CTRC  | HTRC   | UMTRC |
| SWTRC | SCTRAC | MATRC |
| PBTRC | TexLa  | SETRC |

12 Regional Resource Centers

# TELEHEALTH STATE-BY-STATE POLICIES, LAWS & REGULATIONS

The screenshot displays the website's navigation bar with options for 'CURRENT STATE LAWS & POLICIES' and 'LEGISLATION & REGULATION TRACKING'. The main header includes the Center for Connected Health Policy logo and navigation links for 'ABOUT', 'TELEHEALTH POLICY', 'RESOURCES', and 'CONTACT'. A search bar is also present. Below the header, a text block explains the site's purpose: 'CCHP helps you stay informed about telehealth-related laws, regulations and Medicaid programs. The map and search options allow you to view the current state laws and regulations for all fifty states and the District of Columbia. To view the full report, visit the 50 State Report PDF.' The central feature is the 'Interactive Policy Map', which shows a map of the United States with a legend indicating 'Policy Exists/Explicitly Allowed' (orange) and 'No Policy Exists or Not Explicitly Allowed' (grey). A search filter panel on the left allows users to search by filter (All 50 States & D.C., All Categories, All Topics) or by keyword, with an 'APPLY' button. A 'CITE CCHP' button is located to the right of the map. A note at the bottom states 'Data Last Updated Oct 29, 2018' and includes a disclaimer: '\*Key applicable only to topics indicated with an asterisk in drop down menu.'

## Search by Category & Topic

### Medicaid Reimbursement

- Live Video
- Store & Forward
- Remote Patient Monitoring Reimbursement

### Private Payer Reimbursement

- Private Payer Laws
- Parity Requirements

### Professional Regulation/Health & Safety

- Cross-State Licensing
- Consent
- Prescribing
- Misc (Listing of Practice Standards)

*Information updated through February 2020*



**How we engage with each other has fundamentally changed due to COVID-19.**

# POLICY LANDSCAPE IN THE UNITED STATES

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# TELEHEALTH POLICY LANDSCAPE IN THE US

## FEDERAL



## STATE



# TELEHEALTH POLICY LANDSCAPE IN THE US



# TELEHEALTH POLICY LANDSCAPE IN THE US

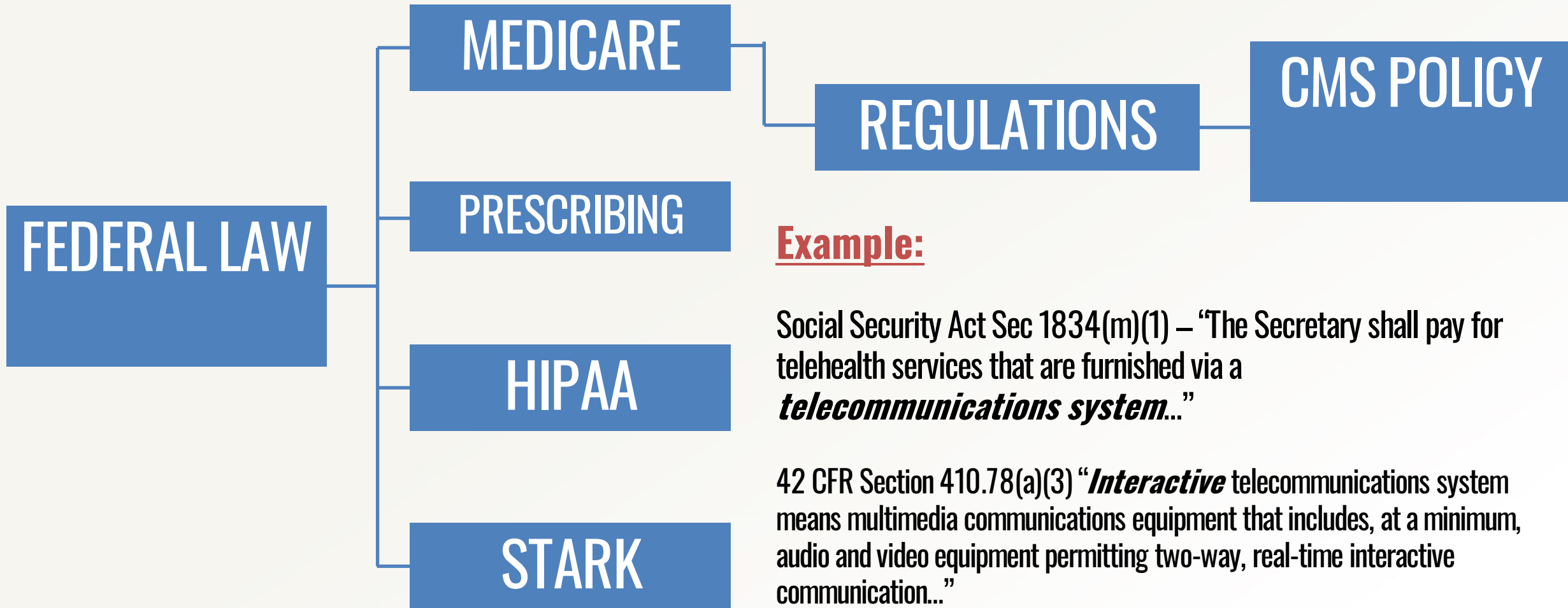


- Patchwork quilt among the states
- Policy on the Federal Level Differs

# TELEHEALTH POLICY LANDSCAPE IN THE US



# SOURCES OF EXISTING TELEHEALTH POLICY

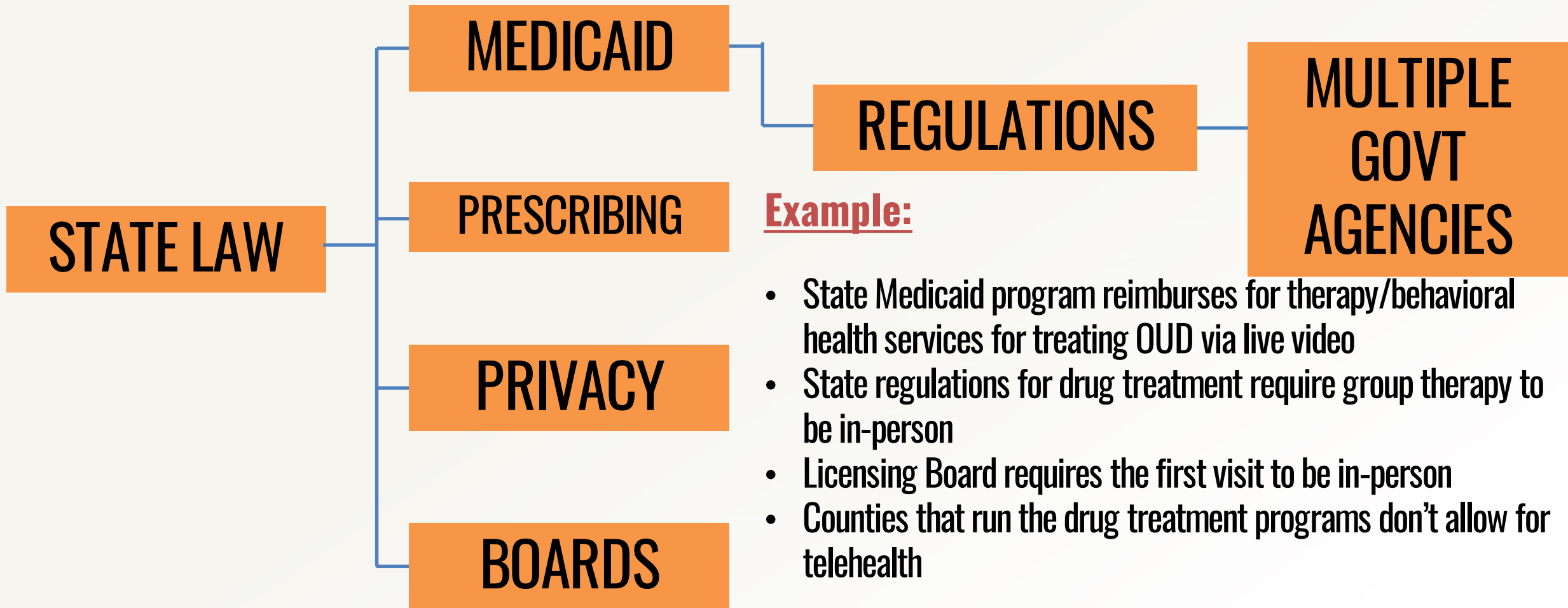


## Example:

Social Security Act Sec 1834(m)(1) – “The Secretary shall pay for telehealth services that are furnished via a *telecommunications system*...”

42 CFR Section 410.78(a)(3) “*Interactive* telecommunications system means multimedia communications equipment that includes, at a minimum, audio and video equipment permitting two-way, real-time interactive communication...”

# SOURCES OF EXISTING TELEHEALTH POLICY



# SOME TELEHEALTH POLICY AREAS

- **Reimbursement**
- **Licensure/Credentialing**
- **Prescribing/provider-patient relationship establishment**
- **Privacy/Security**
- **Malpractice**
- **Lack of inclusion of telehealth during national/state emergency policies**

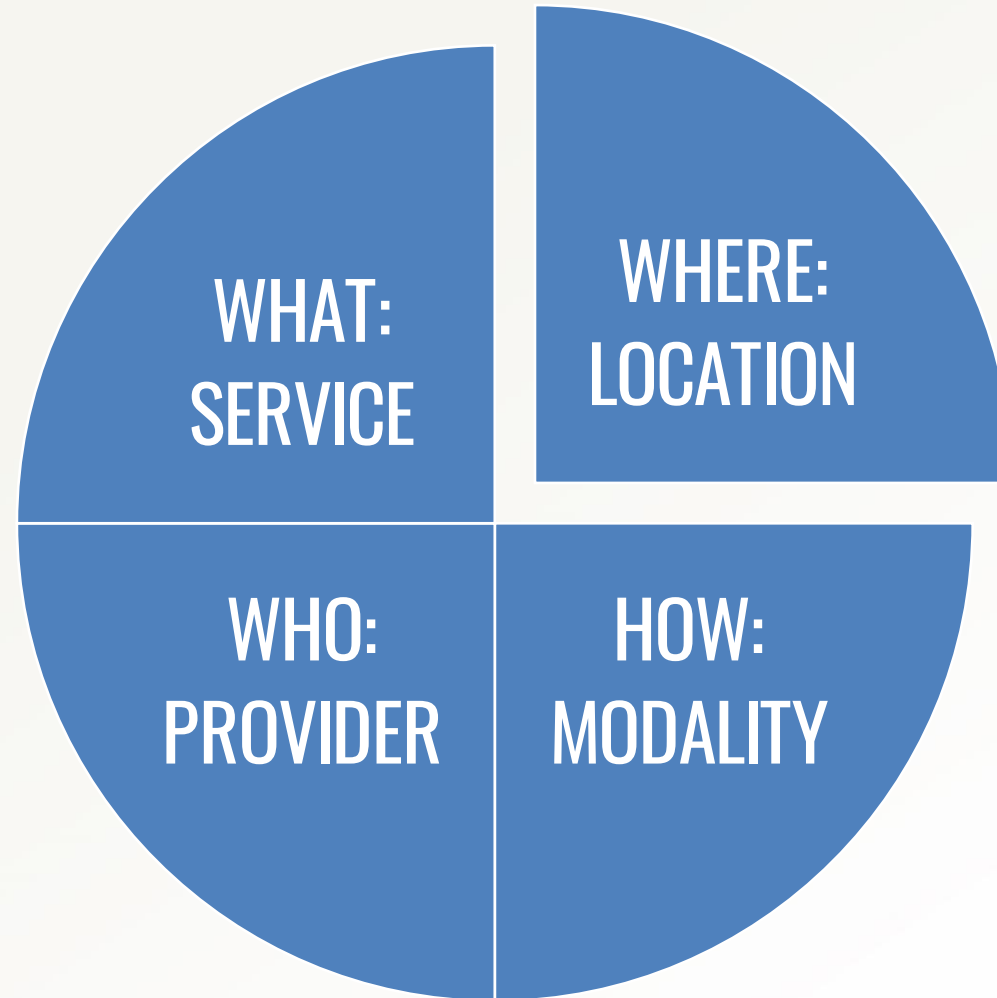
# REIMBURSEMENT

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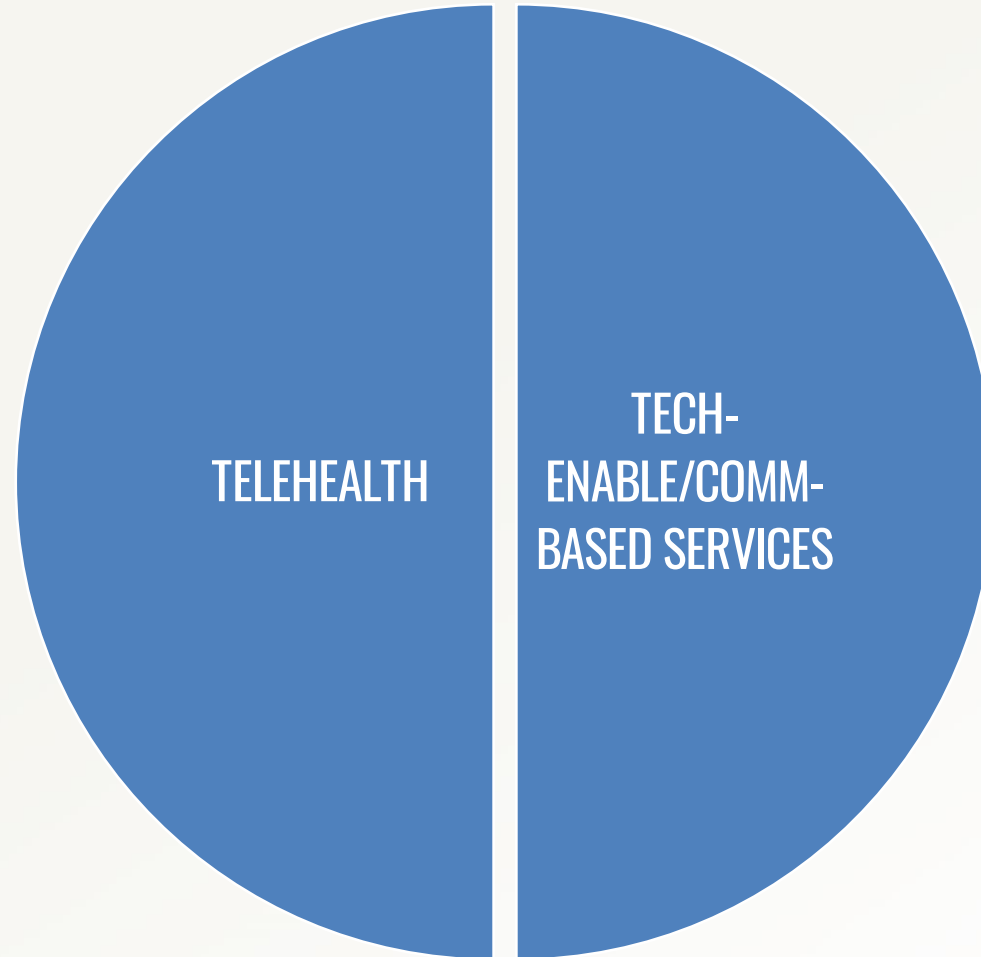
# EXISTING TELEHEALTH POLICY

Much of the telehealth policy that exists revolves around reimbursement. The elements that usually make up the policy is based on who, what, where and how.



# MEDICARE TELEHEALTH POLICY

The Medicare policy on the use of technology to provide services is in two buckets



# MEDICAID REIMBURSEMENT BY SERVICE MODALITY (Fee-for-Service)



## Live Video

50 states and DC



## Store and Forward

Only in 16 states



## Remote Patient Monitoring

23 states

*As of February 2020*

# REIMBURSEMENT REQUIREMENTS FOR PRIVATE PAYERS



**42 states and DC**  
**have telehealth private payer laws**

*Some go into effect at a later date.*

**Parity is difficult  
to determine:**

Parity in services covered vs.  
parity in payment

Many states make their telehealth  
private payer laws  
*"subject to the terms and conditions  
of the contract"*

*As of February 2020*

# TELEHEALTH POLICY CHANGES IN COVID-19

## FEDERAL

| MEDICARE ISSUE  | CHANGE   |
|---|--|
| Geographic Limit  | Waived   |
| Site limitation   | Waived   |
| Provider List   | Expanded   |
| Services Eligible   | Added additional 80 codes  |
| Visit limits  | Waived certain limits  |
| Modality  | Live Video, Phone, some srvs                                     |
| Supervision requirements  | Relaxed some   |
| Licensing   | Relaxed requirements   |
| Tech-Enabled/Comm-Based (not considered telehealth, but uses telehealth technology) | More codes eligible for phone & allowed PTs/OTs/SLPs & other use |

- DEA – PHE prescribing exception/allowed phone for suboxone for OUD
- HIPAA – OCR will not fine during this time

## STATE (Most Common Changes)

| MEDICAID ISSUE | CHANGE   |
|----------------|--|
| Modality       | Allowing phone                                     |
| Location       | Allowing home                                      |
| Consent        | Relaxed consent requirements                       |
| Services       | Expanded types of services eligible                |
| Providers      | Allowed other providers such as allied health pros |
| Licensing      | Waived some requirements                           |

- Private payer orders range from encouragement to cover telehealth to more explicit mandates
- Relaxed some health information protections

# POST-COVID-19 WORLD

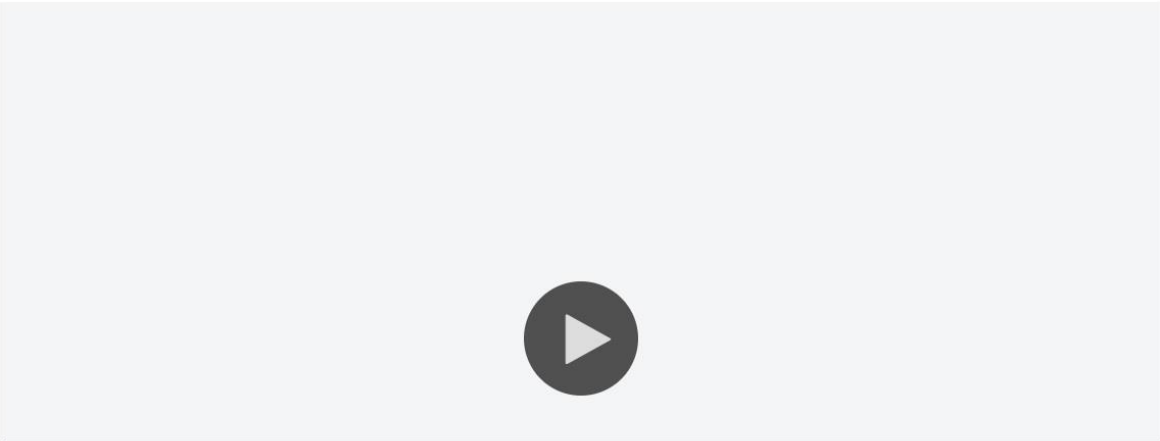
U.S. SENATE COMMITTEE ON  
Health, Education  
Labor & Pensions

CHAIRMAN RANKING MEMBER HEARINGS COMMITTEE ACTIONS ABOUT

Home / Hearings

FULL COMMITTEE HEARING  
Telehealth: Lessons from the COVID-19 Pandemic

Date: Wednesday, June 17, 2020  
Time: 10:00 AM  
Location: 430 Dirksen Senate Office Building



COMMITTEE HEARING  
Watch Video

- Executive orders/waivers will begin to expire unless extended
- The next steps, what can be done and how quickly
- Senate HELP Committee Hearing
- Physician Fee Schedule proposals for FY 2021 (July 2020)

# POST-COVID-19 WORLD



# CCHP

- CCHP Website – [cchpca.org](http://cchpca.org)
- Telehealth Federal Policies - <https://www.cchpca.org/resources/covid-19-telehealth-coverage-policies>
- State Emergency Waivers/Guidances - <https://www.cchpca.org/resources/covid-19-related-state-actions>
- Subscribe to the CCHP newsletter at [cchpca.org/contact/subscribe](http://cchpca.org/contact/subscribe)





# Thank You!

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