



Center for Connected Health Policy
**TELEHEALTH & MEDICAID:
A POLICY WEBINAR SERIES**

Patient Engagement & Education During the Public Health Emergency (PHE)

January 29, 2021



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.

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- Today's webinar will be recorded and slides presented here will be made publicly available as resources at cchpca.org.
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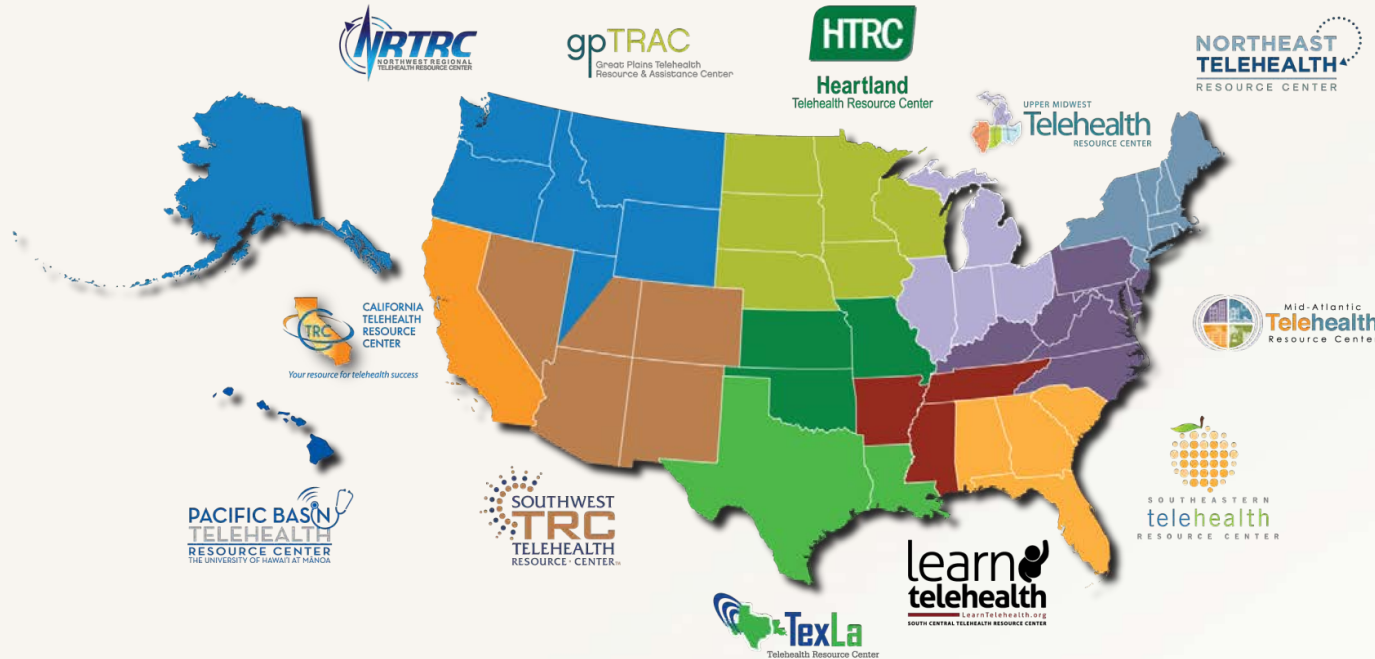
About CCHP

- Established in 2009 by the California Health Care Foundation
- Program under the Public Health Institute
- Became federally designated national telehealth policy resource center in 2012 through a grant from HRSA
- Work with a variety of funders and partners



NATIONAL CONSORTIUM OF TRCS

TelehealthResourceCenter.org



2 National Resource Centers

NRTRC	gpTRAC	NETRC
CTRC	HTRC	UMTRC
SWTRC	SCTRC	MATRC
PBTRC	TexLa	SETRC

12 Regional Resource Centers

The CCHP Team



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Telehealth & Medicaid: A Policy Webinar Series

February 5, 2021: What's Next? A Roadmap for Medicaid Telehealth Policy Beyond the Pandemic



Image source: American Psychological Association

This webinar series was made possible by grant number GA5RH37470 from the Office for the Advancement of Telehealth, Health Resources and Services Administration, U.S. Department of Health & Human Services.



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Today's Webinar



Presentation #1: Increasing Access to Telehealth During the COVID-19 Pandemic

Michelle Probert, MPP, Director, MaineCare, Maine DHHS

Sarah Grant, Director of Communications, MaineCare, Maine DHHS

Presentation #2: Telehealth COVID Update

Traylor Rains, JD, Deputy State Medicaid Director, Oklahoma Health Care Authority



Presentation #3: Transforming Medicaid Telehealth Policy During COVID-19

Chethan Bachireddy, MD, MSC, Chief Medical Officer, Virginia Department of Medical Assistance Services (Medicaid)

The Office of MaineCare Services

Increasing Access to Telehealth
During the COVID-19 Pandemic
January 29, 2021



MaineCare's Telehealth Coverage

In response to COVID-19 MaineCare made several policy changes that enhanced its already robust telehealth coverage policy

Telehealth Feature	Pre-PHE	PHE
Payment Parity	✓	✓
Beneficiary Home Permitted	✓	✓
All Providers within Scope of License	✓	✓
All Services that can be Effectively Delivered	✓	✓
FQHC/RHC Encounter Billing	✓	✓
Out-of-State Providers Allowed	✓	✓
Audio-Only Permitted	✓	✓
Remote Patient Monitoring	✓	✓
Sec 80 Pharmacy Services delivery via telehealth (including SUD services)		✓
Coverage of Telephone E/M services		✓
Addition of FQHC code G0071 for 5-minute check-in		✓
Addition of codes so dental practices can bill for triage and screening services conducted via telehealth		✓
Store and Forward		✓

Increasing Telehealth Awareness

Many providers were not aware of MaineCare's comprehensive telehealth policy. Provider outreach and education was a high priority early in the public health emergency.

- Detailed guidance and information available online.
- Leveraging stakeholders such as the MaineCare Advisory Committee and the New England Telehealth Resource center.
- Weekly Town Hall meetings hosted by the Offices of Behavioral Health and Child and Family Services.

MaineCare's COVID-19 Website

Telehealth

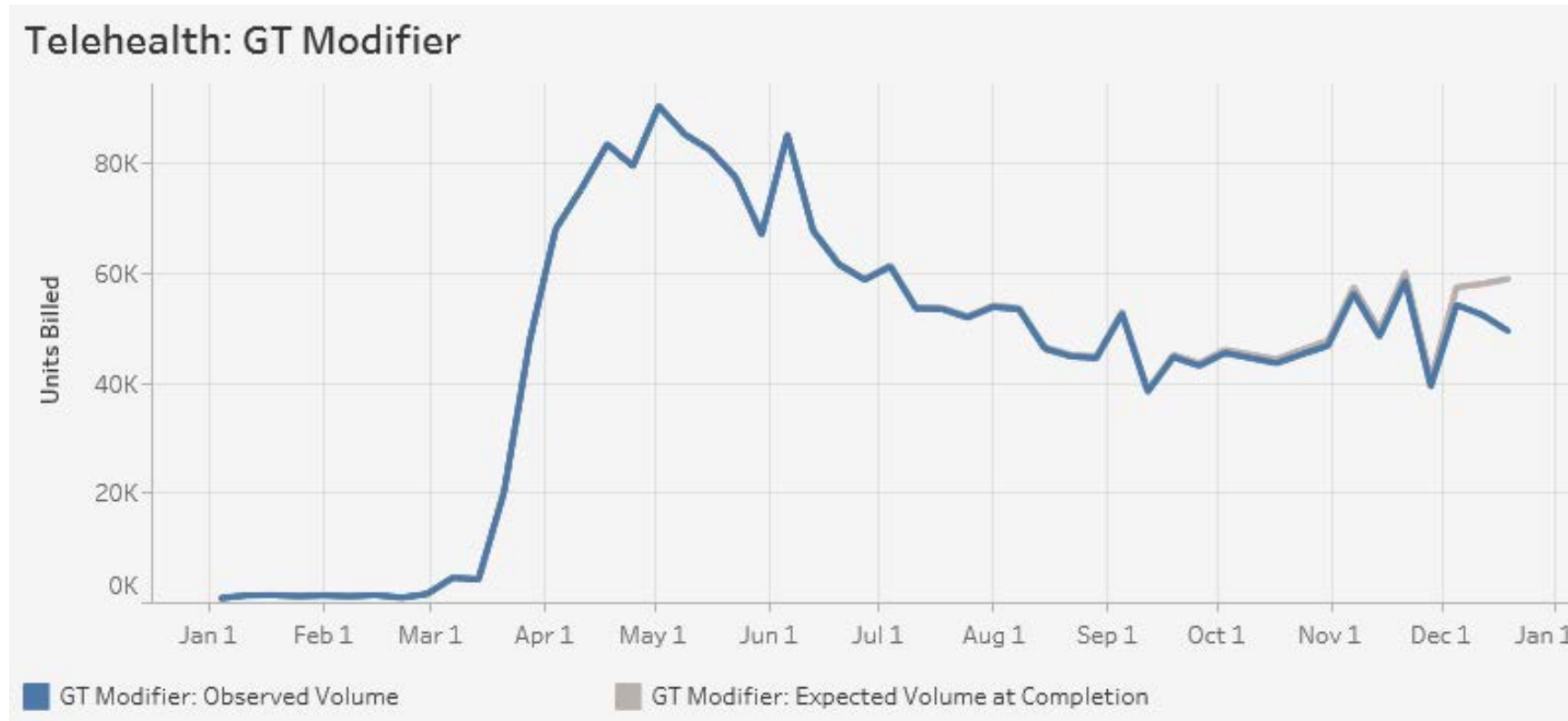
- [Telehealth Guidance for HCBS Providers](#) - May 28, 2020
- [CMS Guidance on Telehealth \(PDF\)](#)
- [FCC Guidance on COVID-19 Application Process \(PDF\)](#) - April 17, 2020
- [MaineCare Telehealth New Codes and Information \(PDF\)](#) - Updated April 16, 2020
- [MaineCare Telehealth and COVID-19 Guidance \(PDF\)](#) - Updated April 16, 2020
- [NETRC Telehealth Implementation Toolkit - Maine Edition](#) - April 9, 2020
- [NETRC's Provider's Guide \(PDF\)](#) - Updated April 9, 2020
- [CMS Telehealth Video](#) - April 3, 2020
- [Telehealth Best Practices for Providers](#) - April 2, 2020
- Telehealth Townhall for Maine Healthcare Providers - March 26, 2020
 - [Recording](#)
 - [Presentation Slide Deck \(PDF\)](#)
 - [NETRC Town Hall Q&A Summary \(PDF\)](#)

Telehealth Data Highlights

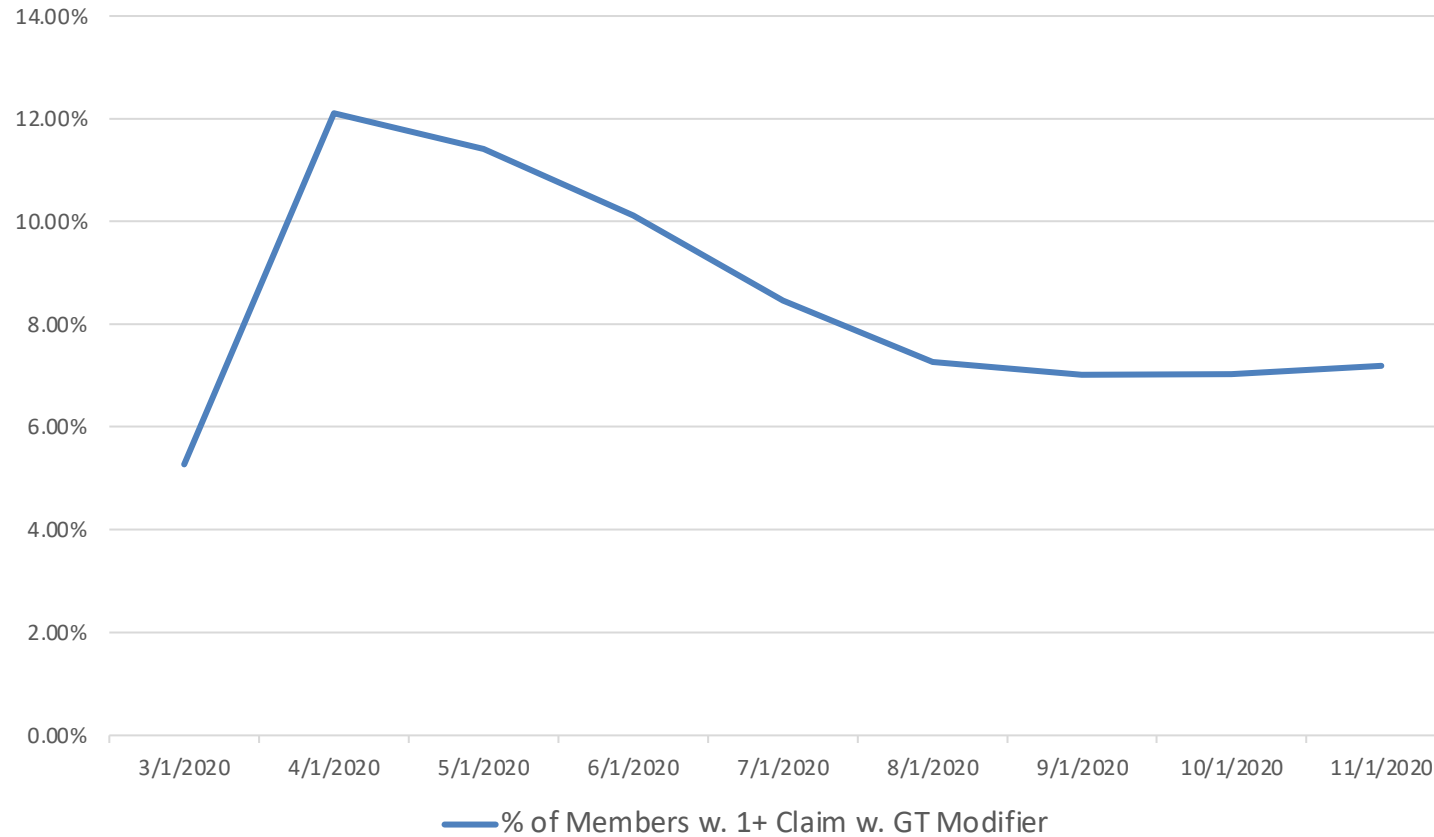
Telehealth Utilization: Jan 2020 – Jan 2021

Increased Access Through Telehealth:

- Telephone-Only Evaluation and Management services, including for dental care
- Well-Child visits
- Prescriptions, including MAT



At Peak During the Pandemic, 12% of MaineCare Members Used Telehealth



Maine led the country in children's telehealth utilization

Preliminary data suggest that, among children, services delivered via telehealth per 1,000 beneficiary months from March through June 2020 varied across states

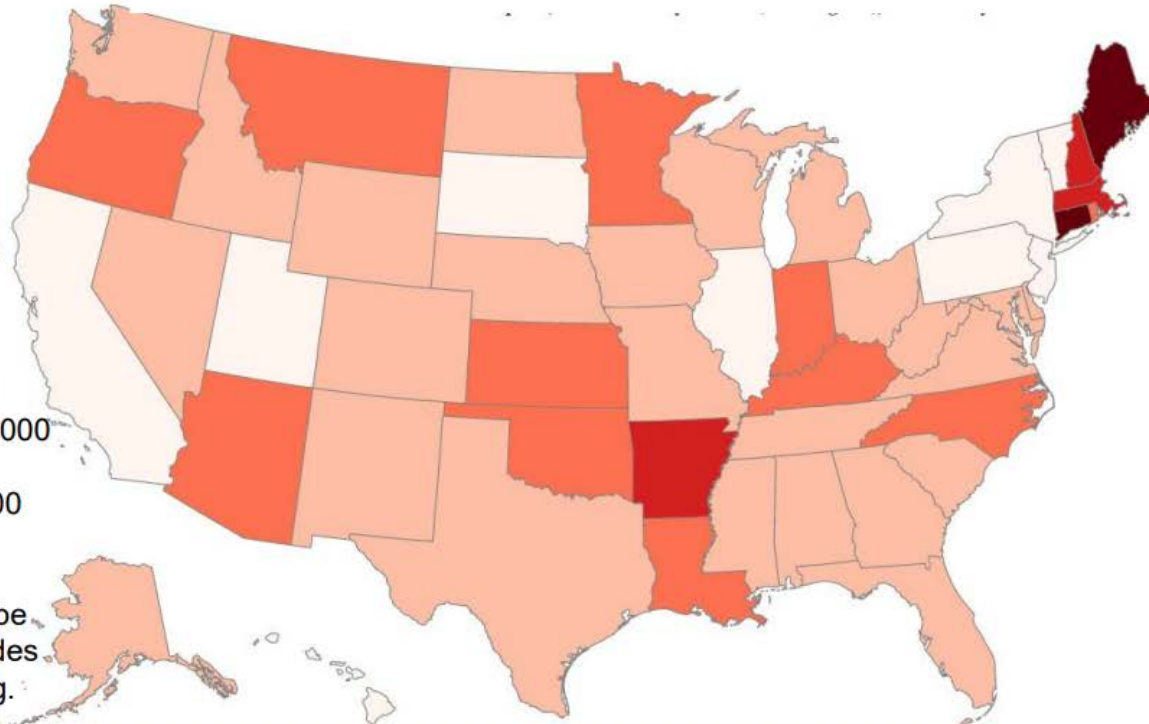
of services delivered via telehealth per 1,000 beneficiary months (age 18 and under), March – June 2020



Telehealth rates among children peaked in April for nearly all states and began to fall in May.

Across states in April 2020, Maine had the highest monthly rate at 402 services per 1,000 child beneficiaries, and Vermont had the lowest monthly rate at 23 services per 1,000 child beneficiaries.

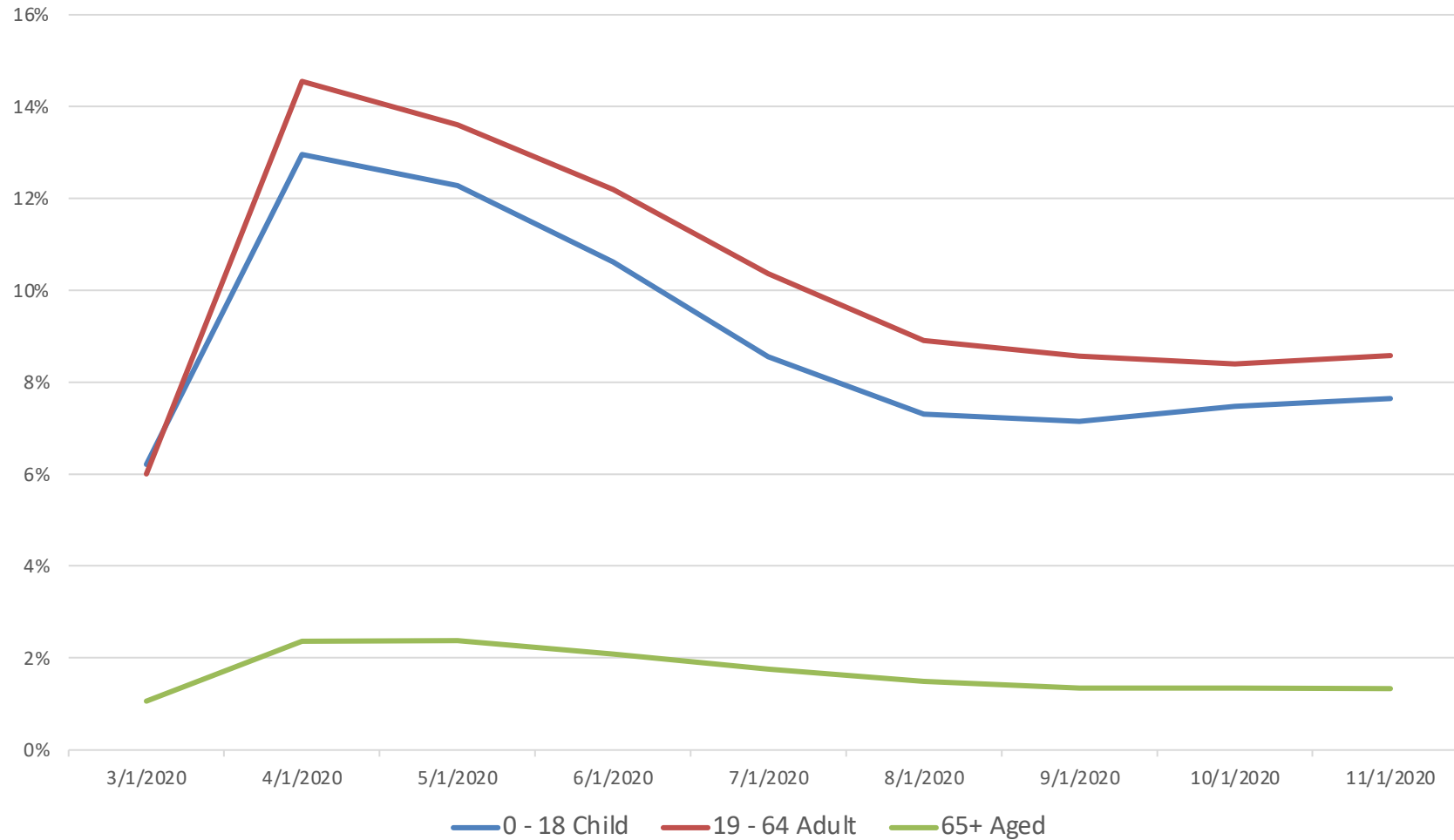
Note: Data for recent months are likely to be adjusted upward due to claims lag; see slides 5 and 11 for additional details on claims lag.



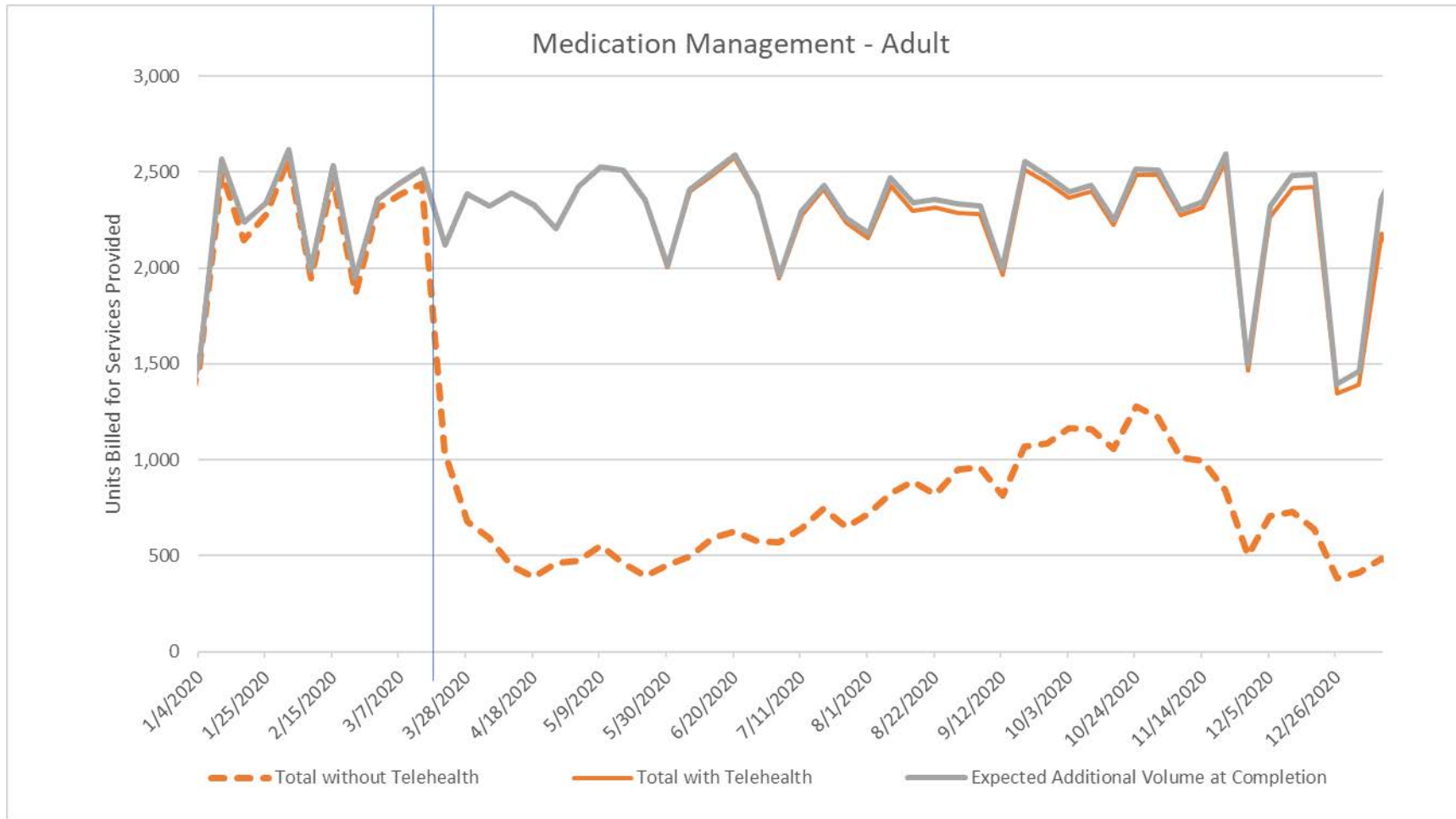
Notes: These data are preliminary. Data are sourced from the T-MSIS Analytic Files v4 in AREMAC, using final action claims. They are based on August T-MSIS submissions with services through the end of July. Recent dates of service have very little time for claims runout and we expect large changes in the results after each monthly update. Because data for July are mostly incomplete, results are only presented through June. There is significant variation in how quickly states submit claims to CMS. It is possible that this variation in claims lag is responsible for the differences in utilization across states.

8

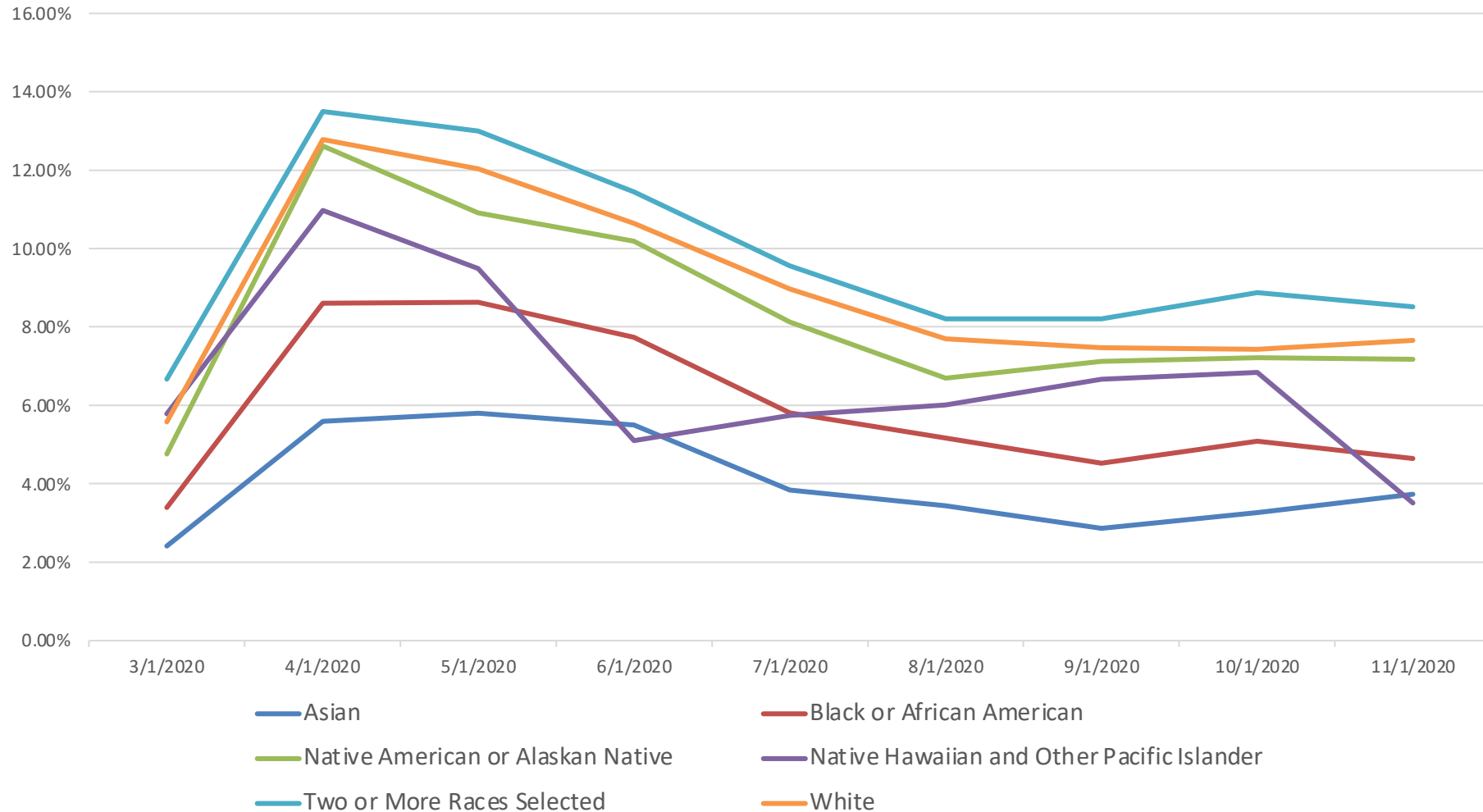
MaineCare Members Ages 65+ Were 1/6th as Likely as Other Members to Use Telehealth



Telehealth Enabled Utilization of Medication Management Services to Remain Constant.



Multiracial and White Members have had the Highest Rates of Telehealth Use

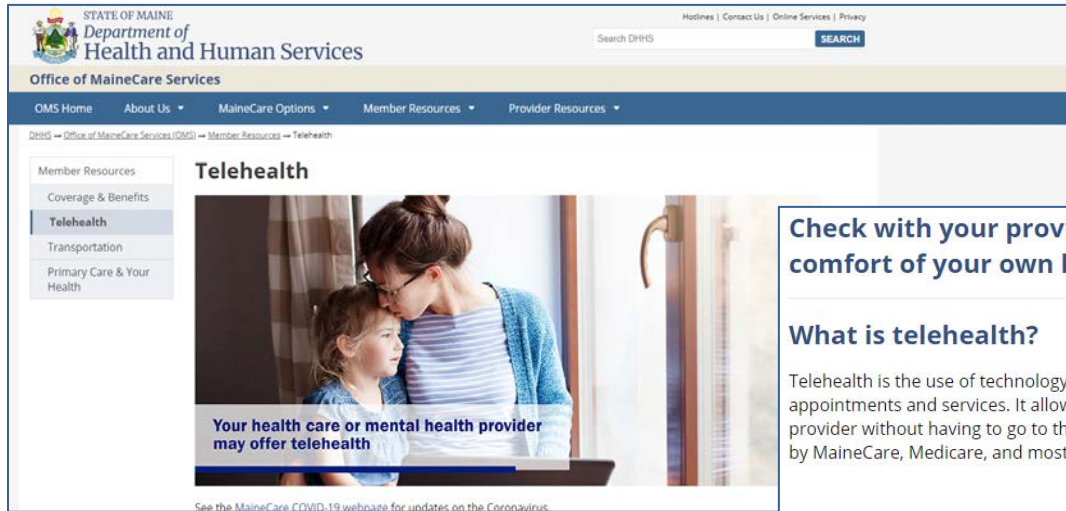


Members with English as Their Primary Language Over 50% More Likely to Use Telehealth



Telehealth Outreach Campaign

Member Outreach: Telehealth Website



Check with your provider today—you may be able to see your doctor from the comfort of your own home.

What is telehealth?

Telehealth is the use of technology for health care appointments and services. It allows you to “see” your care provider without having to go to their office. Visits are covered by MaineCare, Medicare, and most insurance companies.



What kind of appointments can I have using telehealth?



Conversations with your doctor about your chronic health care, diagnosis and treatment of new illnesses, and other medical care



Physicals, mental health, substance use disorder treatment and some developmental disability services



Routine child check-ups and developmental services

How do I use telehealth?



Mobile apps, such as MD Live, FaceTime, WhatsApp, video chat, and Skype



Video conferencing platforms such as Zoom or WebEx



Patient portal message and telephone calls without video are considered “virtual health” visits

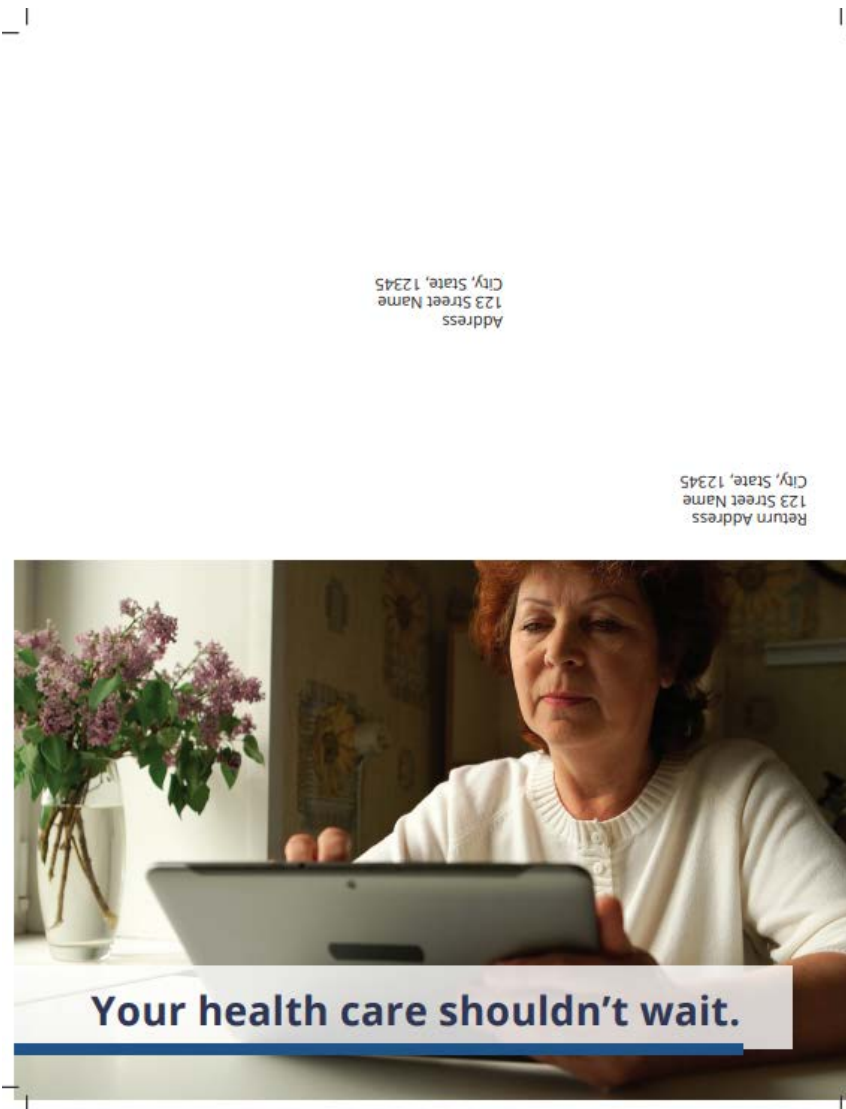
Website visits since June:

- 22,750 total page views
- 15,585 unique page views
- Telehealth FAQ PDF downloaded 114 times

Website traffic from:

- Direct link: 19,734
- Google: 1,194
- Facebook: 341

Direct Mailer: mailed to 177,531 homes in June



You may be able to receive your health care through telehealth.

Check with your provider today—you may be able to see them from the comfort of your own home.

WHAT is telehealth?

Telehealth is the use of technology for health care appointments and services. It allows you to "see" your health care provider without having to go to their office. This can be done using your computer, tablet, or by phone. Visits are covered by MaineCare, Medicare, and most insurance companies.

WHAT KIND OF APPOINTMENTS can I have using telehealth?

- Conversations with your doctor about your chronic health condition, diagnosis and treatment of new illnesses, and other medical care.
- Mental health, substance use disorder treatment, and some developmental disability services.
- Routine child check-ups and developmental screenings.

HOW do I ask for a telehealth appointment?


- 1 Call your health care provider and ask if you can use telehealth for your appointment. This may also be an option for your children's health care needs.
- 2 Your provider can explain the best way to use telehealth for your appointment.

QUESTIONS? Learn more at maine.gov/dhhs/telehealth


Paid Outreach

Online Display Ads

No waiting room.



Ask if your provider offers telehealth. [Learn more](#)



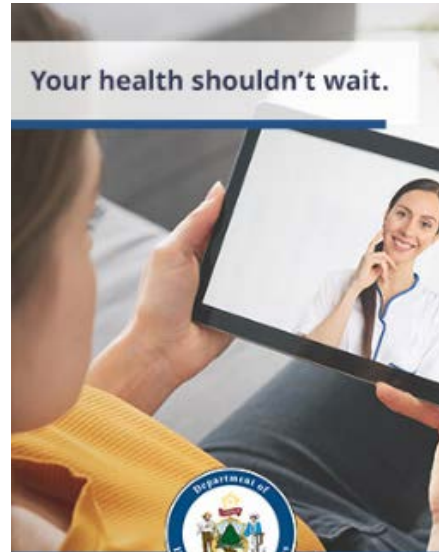
Health from home.



Ask if your provider offers telehealth. maine.gov/dhhs/telehealth




Your health shouldn't wait.



Ask if your provider offers telehealth.

[Learn more at maine.gov/dhhs/telehealth](https://maine.gov/dhhs/telehealth)

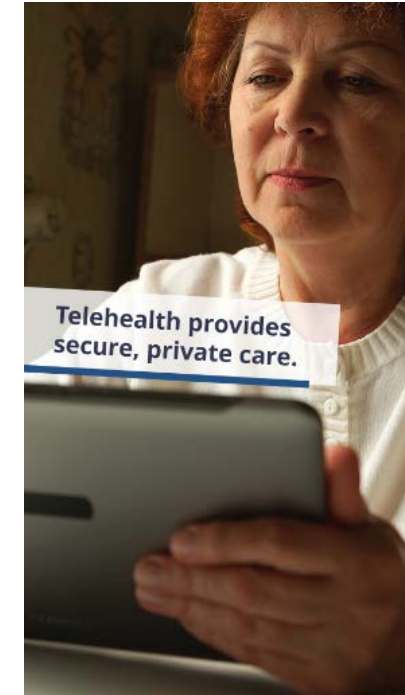


Instagram "Stories"

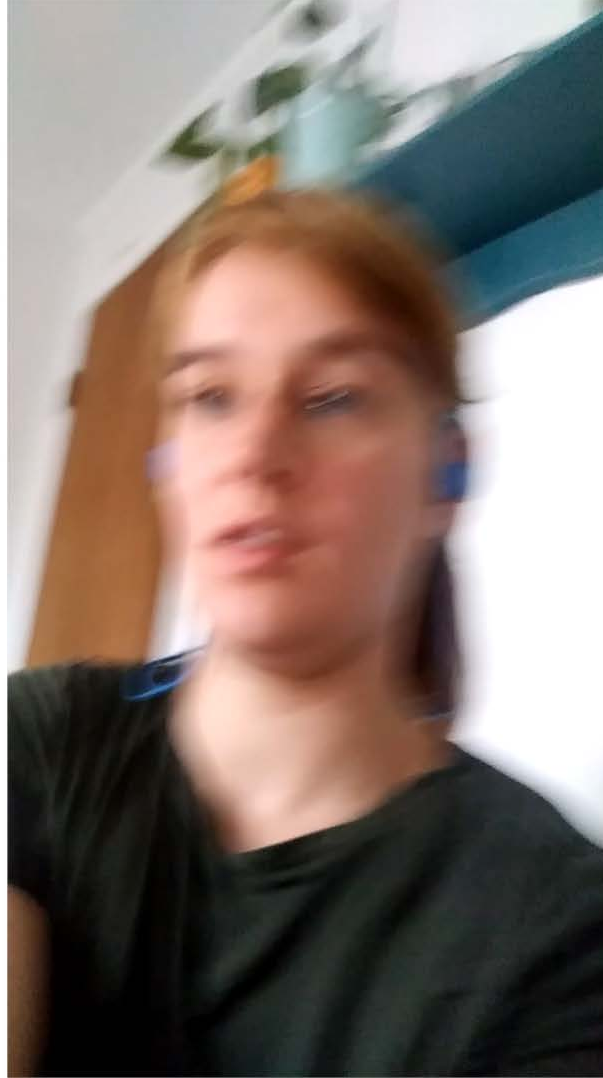
Your physical and mental health are important.



Telehealth provides secure, private care.



Videos



Questions?

Michelle Probert

Director, Office of MaineCare Services

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Sarah Grant

Director of Communications, Office of MaineCare Services

Sarah.grant@maine.gov

Please submit questions using the Q&A function.



OKLAHOMA'S EXPANSION OF TELEHEALTH DURING THE PUBLIC HEALTH EMERGENCY

Traylor Rains, Deputy State Medicaid Director

January 22, 2021



STEPS TAKEN TO INCREASE ACCESS DURING PUBLIC HEALTH EMERGENCY

- Once the Public Health Emergency (PHE) was declared, OHCA immediately opened up most medical and behavioral health codes for Telehealth. OHCA continues to extend the use of the Telehealth as the PHE is extended.
- OHCA received 1135 Waiver Authority to allow reimbursement through Telehealth outside of the 4 walls for Tribal 638 Clinics.
- OHCA took advantage of federal flexibilities allowing FQHCS to utilize telephonic services by waiving the “Face to Face” requirement.

TELEHEALTH UTILIZATION – MARCH TO OCTOBER 2020 VS 2019

	March to October			
	2020	2019	Change	Percent
Total Members	167,022	10,464	156,558	1,496.2%
Total Claims	977,374	24,333	953,041	3,916.7%
Total Reimbursements	\$ 66,921,176	\$ 1,961,778	\$ 64,959,399	3,311.3%
Average Claims Per Member	5.9	2.3		
Average Reimbursement Per Member	\$ 401	\$ 187		
Average Reimbursement Per Claim	\$ 68	\$ 81		
Active Telemedicine Providers	10,439	596	9,843	1651.5%

October 2020 Total Enrollment	950,015
Percent Served Telemedicine	17.6%

TOP 10 PROCEDURE CODES USED

Procedure Code Desc	Number of Claims (2020)	Procedure Code Desc	Number of Claims (2019)
Behavioral Health Counseling And Therapy (Alcohol/Drug), 15 Minutes	493,889	Established Patient Office Or Other Outpatient Visit, Typically 15 Minutes	9,446
Established Patient Office Or Other Outpatient Visit, Typically 15 Minutes	87,409	Established Patient Office Or Other Outpatient, Visit Typically 25 Minutes	6,175
Established Patient Office Or Other Outpatient Visit, Typically 25 Minutes	73,539	Behavioral Health Counseling And Therapy (Alcohol/Drug), 15 Minutes	2,849
Treatment Of Speech, Language, Voice, Communication, And/Or Hearing Processing Disorder	53,578	New Patient Office Or Other Outpatient Visit, Typically 45 Minutes	1,055
Psychosocial Rehabilitation Services, 15 Minutes	48,595	New Patient Office Or Other Outpatient Visit, Typically 30 Minutes	1,050
Therapeutic Activities (One-On-One) To Improve Function, 15 Minutes	30,005	Telehealth Originating Site Facility Fee	676
Physician Telephone Patient Service, 11-20 Minutes	16,983	Established Patient Office Or Other Outpatient Visit, Typically 10 Minutes	640

Telephonic services Provided March – October 2020

Members Served	Number of Claims	Billing Providers	Total Reimbursement
28,717	47,341	1,087	\$1,720,712

WHAT'S NEXT?

- Provider education regarding use of HIPAA compliant platforms after Public Health Emergency ends.
- Evaluate need for continued use of telehealth after PHE.
- Member and Provider satisfaction surveys



OKLAHOMA

Health Care Authority

Traylor Rains, Deputy State Medicaid Director
Traylor.Rains@okhca.org

GET IN TOUCH

4345 N. Lincoln Blvd.
Oklahoma City, OK 73105

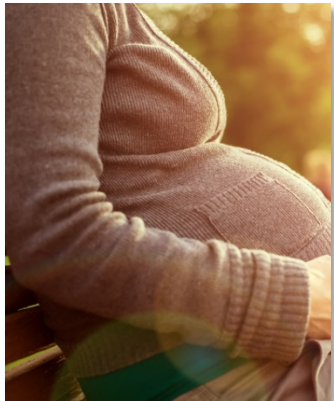
okhca.org
mysooner care.org

Agency: 405-522-7300
Helpline: 800-987-7767



Questions for Oklahoma HCA?

Please submit questions using the Q&A function.



TRANSFORMING MEDICAID TELEHEALTH POLICY DURING COVID-19

January 29, 2021


CHETHAN BACHIREDDY, MD, MSC

CHIEF MEDICAL OFFICER
DEPARTMENT OF MEDICAL
ASSISTANCE SERVICES

DMAS Telehealth Policy During COVID-19

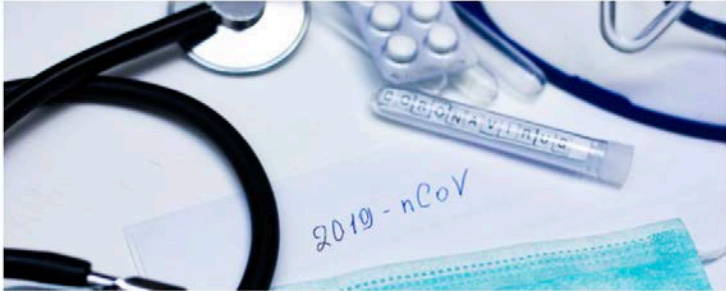
- ❑ Home as an originating site
- ❑ Use of audio in addition to audio-visual modalities for Medicaid-covered services
- ❑ Payment parity with in-person visits
- ❑ Provider-provider consultation including eConsults
- ❑ Remote Patient Monitoring for suspected or confirmed COVID-19

Getting the Word Out



DMAS
INNOVATION • QUALITY • VALUE

Department of Medical Assistance Services




Virginia Medicaid encourages providers to consider telehealth as an option to ensure access for our members. Telehealth offers many benefits to both providers and Medicaid members:

- Medicaid members can receive streamlined evaluations and care for COVID-19.
- Medicaid members can maintain care for chronic diseases and other routine health needs.
- Providers and patients can stay connected while social distancing rules are in place.
- Providers and patients stay safe and reduce the potential of exposure to COVID-19.


[Learn More](#)

For more information, visit the [COVID-19 page for providers](#) on the DMAS website.


Virginia Medicaid is taking action to fight COVID-19




No co-pays for any Medicaid or FAMIS covered services




No pre-approvals needed and automatic approval extensions for many critical medical services




Outreach to higher risk and older members to review critical needs



90 day supply of many routine prescriptions



Ensuring members do not inadvertently lose coverage due to lapses in paperwork or a change in circumstances





Encouraging use of telehealth

Medicaid covers all COVID-19 testing and treatment. Call your doctor. **DMAS**

What Is Telehealth? A Message from Virginia Medicaid and Our Partners

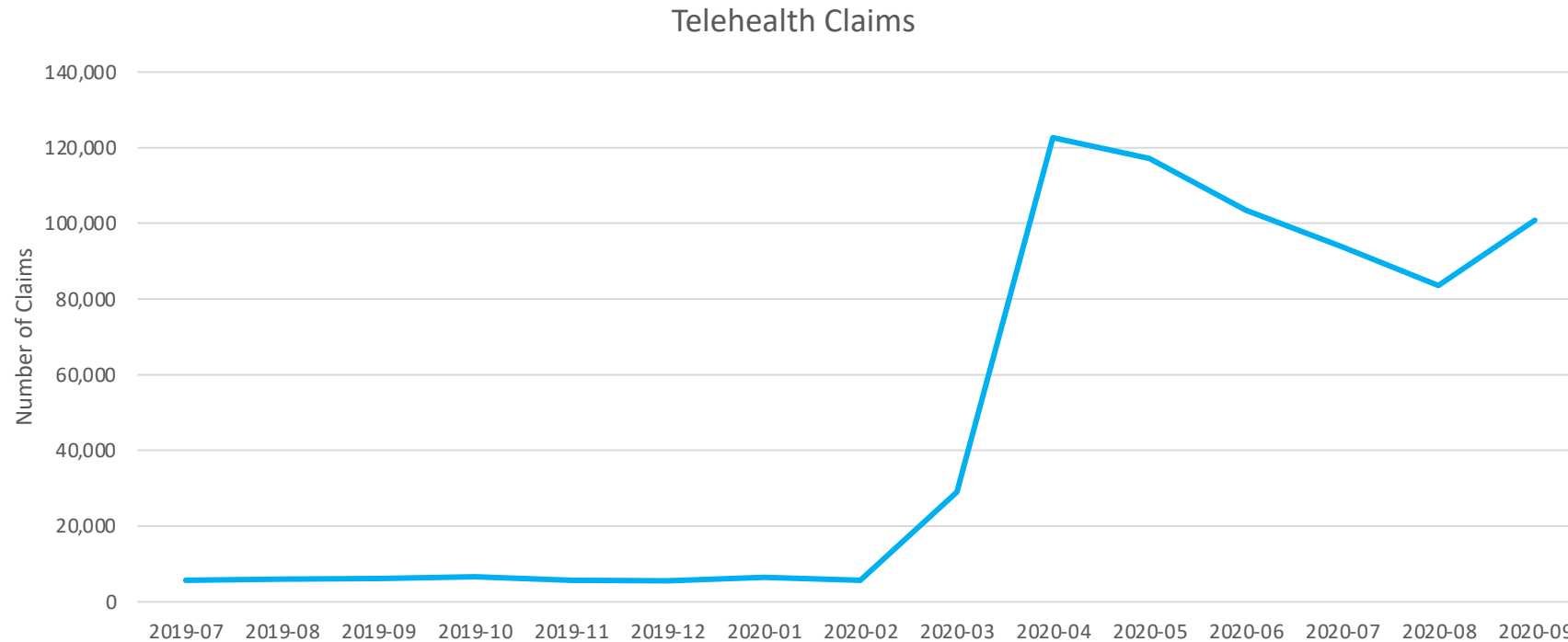
Press **esc** to exit full screen

What is Telehealth?



Telehealth Has Increased 15x During COVID-19

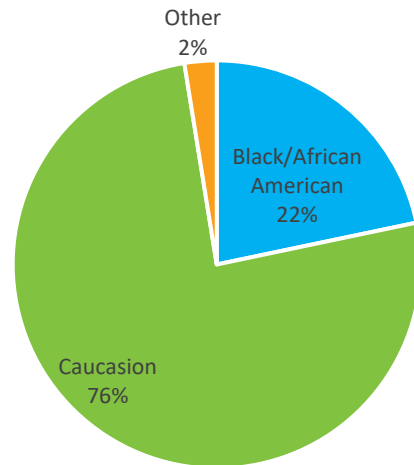
Providers have conducted over **900,000** telehealth visits to Medicaid members for a wide range of conditions. The **top 3** services are related to outpatient E&M, psychotherapy, and speech language therapy.



Telemedicine Has Been a Force for Equity

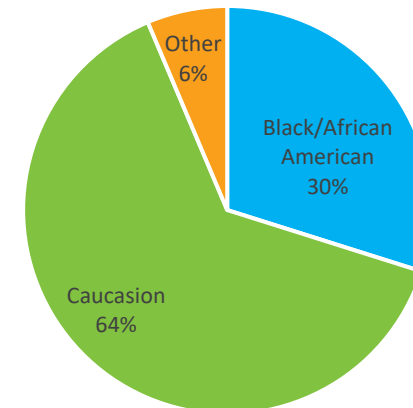
Compared to other groups, **African-American** members have experienced particularly rapid uptake of telehealth.

Telehealth claims: July, 2019 - Feb, 2020



22% of all telehealth

Telehealth claims: March, 2020 - Sep, 2020



30% of all telehealth

Lessons Learned

- ❑ Telehealth can be rapidly scaled.
- ❑ Providers, patients and payers have a new understanding of telehealth's possibilities and limitations.
- ❑ Providers are anxious about whether telehealth authorities will be made permanent.
- ❑ Patients do not always have reliable access to broadband.
- ❑ Providers, patients and payers will need to collaborate and learn together to improve telehealth delivery. This will take time and humility.

Looking Forward

❑ Telehealth goals:

- Increase and sustain members' **equitable access** to services while maintaining (and improving) **quality** through **coverage** and **evaluation**.
- Increase and sustain **providers' willingness** to offer services delivered via telehealth by establishing appropriate **incentives** and **certainty**.

❑ Key operating principles:

- Telehealth is a modality, governed by many of the same requirements/parameters as services delivered in-person.
- Existing policy tools, resources, etc., should be leveraged.
- Telehealth policy development allows for inherent uncertainty.
- Establish robust Monitoring & Evaluation structures to make data-driven corrections on a continuous basis.
- Simplicity is paramount.

Questions for Virginia DMAS?

Please submit questions using the Q&A function.

Panel Q&A

Please submit questions using the Q&A function.

Webinar Recordings and Resources

The screenshot shows the CCHP website's search results page. At the top, there is a navigation bar with the CCHP logo and links for ABOUT, TELEHEALTH POLICY, PROJECTS, RESOURCES, and CONTACT. A search bar is located on the right side of the navigation bar. Below the navigation bar, the page title is 'Resources Results'. The main content area shows '14 Resource Results'. The first result is a video titled 'VIDEO: Current Status of Federal and California Telehealth Policy During COVID-19', dated December 15, 2020. The description states: 'CCHP's executive director reviews the current status of telehealth policy in 2020 and what lies ahead. View the slides of the presentation here.' The second result is a video titled 'VIDEO: CCHP Animated Video on Telehealth Reimbursement Basics', dated December 11, 2020. The description states: 'CCHP knows that telehealth policy is complicated, especially when it comes to the way that reimbursement...'. On the right side of the search results, there is a search bar with the placeholder text 'ENTER A SEARCH TERM...'. Below the search bar is a 'Filter Resource Results' section with several checkboxes: Bill Analysis, Fact Sheet, Legislative / Regulatory Update, News, Newsletter, Report, Publication & Policy Brief, and Video (which is checked). There is a '> CITE CCHP' button next to the checkboxes and a 'GO' button at the bottom of the filter section.

Subscribe to CCHP's email listserv or stay tuned to CCHP's resources page for recordings of this webinar and presentation slide decks!

Click [here](#) to access CCHP's resources page for this webinar.

<https://www.cchpca.org/resources/search-telehealth-resources>

Join us February 5, 2021 for *What's Next? A Roadmap for Medicaid Telehealth Policy Beyond the Pandemic!*



Presentation #1

Joanne Jee, MPH, Principal Analyst, MACPAC

Presentation #2

Dr. Sara Salek, Chief Medical Officer, Arizona Health Care Cost Containment System (AHCCCS)



Presentation #3

Tracy Johnson, PhD, Medicaid Director, Colorado Department of Health Care Policy and Financing (CO Medicaid)

Presentation #4

Lori Coyner, Medicaid Director, Oregon Health Plan, Oregon Health Authority



Thank You!



OKLAHOMA
Health Care Authority

VIRGINIA'S MEDICAID PROGRAM
DMAS
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