



Medicaid Coverage of Telemedicine



Medicaid and CHIP Payment and Access Commission

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Overview

- Federal guidelines for Medicaid coverage of telemedicine
- State coverage of telemedicine
- Barriers and considerations
- Future work

Federal Guidelines for Medicaid Coverage of Telemedicine

- Telemedicine is “a cost-effective method of providing medical care through use of two-way, real-time interactive telecommunication ...between Medicaid enrollees and a provider...”
- Providers must practice within the scope of their state practice law and licensing rules

Federal Guidelines for Medicaid Coverage of Telemedicine (continued)

- Payment for telemedicine must satisfy federal Medicaid requirements for efficiency, economy, and quality of care
- States should “use the flexibility inherent in federal law to create innovative payment methodologies for services that incorporate telemedicine technologies”

State Coverage of Telemedicine

States have significant flexibility to determine

- Whether to cover telemedicine
- What modalities to cover
- Restrictions and conditions of payment

Variation in State Medicaid Coverage of Telemedicine

Modality	Description	Number of states
Live video (Synchronous)	Real-time interaction between a patient, caregiver, or provider with a provider using audiovisual technology.	48 states, the District of Columbia
Store and forward (Asynchronous)	Secure transmission of data (e.g. x-rays) from a patient care site to specialists in another site for evaluation.	13 states
Remote patient monitoring	Patient health and medical data (e.g. vital signs) are collected in one location and transmitted to a provider in another location. Often used for chronic disease management.	22 states
Mobile health (mHealth)	The use of mobile devices such as smartphones (e.g. for health education or reminders to take medications). Devices or apps may also be used to capture vital signs.	Not available

Notes: As of March 2017.

Source: Center for Connected Health Policy, The National Telehealth Policy Resource Center (CCHP). 2017. *State telehealth laws and reimbursement policies. A comprehensive scan of the 50 states and District of Columbia.*

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State Restrictions and Conditions of Medicaid Payment for Telemedicine

- Specialties
- Services
- Providers
- Originating sites
- Distance and geography requirements

Commonly Cited Barriers to Use of Telemedicine

- Coverage and payment
- Connectivity and technology
- Licensure
- Concerns about cost and quality

Future Work

- Narrow focus on telemedicine?
- Are there federal policy levers to encourage greater use of telemedicine in Medicaid? If so, what are they?
- What additional research on Medicaid coverage of telemedicine should MACPAC pursue?



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