

## Colorado

**Medicaid Program:** Colorado Medicaid

**Program Administrator:** Colorado Dept. of Health Care Policy and Financing

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<b>Definition of telemedicine/telehealth</b>	
<p>“Telemedicine means the delivery of medical services and any diagnosis, consultation, or treatment using interactive audio, interactive video, or interactive data communication.”</p> <p><i>Source: CO Revised Statutes 12-36-102.5 (2012).</i></p> <p><b><u>Effective on or after Jan. 1, 2017:</u></b></p> <p>Telehealth means a mode of delivery of healthcare services through telecommunications systems, including information, electronic, and communication technologies, to facilitate the assessment, diagnosis, consultation, treatment, education, care management, or self-management of a covered person’s health care while the covered person is located at an originating site and the provider is located at a distant site. The term includes synchronous interactions and store-and-forward transfers. Telehealth does not include the delivery of health care services via telephone, facsimile machine or electronic mail.</p> <p><i>Source: CO Revised Statutes 10-16-123(2) (h) (4) (e) (I &amp; II) (2015).</i></p> <p><b><u>Workers’ Compensation</u></b></p> <p>Telemedicine is the use of medical information exchanged from one site to another via electronic communications to improve, maintain or assist patients’ health status.</p> <p>Closely associated with telemedicine is the term “telehealth”, which is often used to encompass a broader definition of remote health care that does not always involve clinical services. Videoconferencing, transmission of still images, e-health including patient portals, remote monitoring of vital signs and continuing medical education are all considered part of telemedicine and telehealth.</p> <p><i>Source: 7 CO Regs. Rule 18.</i></p>	<p>Telehealth services include the installation and on-going remote monitoring of clinical data through technologic equipment in order to detect minute changes in the client’s clinical status that will allow Home Health agencies to intercede before a chronic illness exacerbates requiring emergency intervention or inpatient hospitalization.</p> <p><i>Source: CO Medical Assistance Program, Home Health Billing Manual, p. 11 (Apr. 2016), (Accessed Aug. 2016).</i></p> <p>Telemedicine is a way of giving services to Health First Colorado (Colorado’s Medicaid Program) clients who live a significant distance away from the providers they need to see. Telemedicine involves two providers: an “originating provider” and a “distant provider.” The provider where the client is located is the originating provider and the provider in another location is the distant provider. Providers must have special equipment to provide telemedicine services. Telemedicine does not mean visits by telephone or fax.</p> <p>...</p> <p>Telemedicine services are provided “live” by audio-video communications between two providers. The distant provider is a consultant to the originating provider. Sometimes the distant provider may be the only provider involved in the visit, such as with mental health sessions. Providers such as doctors, nurse practitioners and mental health providers can provide services if they have the special equipment.</p> <p><i>Source: CO Department of Health Care Policy and Financing. “Telemedicine”. (Accessed Aug. 2016).</i></p> <p>Telehealth allows for the monitoring of a member’s health status remotely via equipment, which transmits data from the member’s home to the member’s home health agency. The purpose of providing telehealth</p>

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<p>"Telehealth" means a mode of delivery of health care services through telecommunication systems, including information, electronic, and communication technologies, to facilitate the assessment, diagnosis, consultation, treatment, education and care management of a resident's health care when the resident and practitioner are located at different sites. Telehealth includes 'telemedicine' as defined in Section 12-36-102.5(8), C.R.S."</p> <p><i>Source: 6 CO Regs. Rule 1011-1. Ch. 5.</i></p>	<p>services is to assist in the effective management and monitoring of members whose medical needs can be appropriately and cost-effectively met at home through the frequent monitoring of data and early intervention.</p> <p><i>Source: CO Department of Health Care Policy and Financing. "Home Health Telehealth". (Accessed Aug. 2016). &lt;<a href="https://www.colorado.gov/pacific/hcpf/home-health-telehealth">https://www.colorado.gov/pacific/hcpf/home-health-telehealth</a>&gt;</i></p>
<b>Live Video Reimbursement</b>	
<p>Health plans for patients in counties with 150,000 or fewer residents cannot require face-to-face contact between a provider and a patient for services that could be appropriately provided through telemedicine, subject to the terms and conditions of the health benefit plan.</p> <p><i>Source: CO Revised Statutes 10-16-123 (2012).</i></p> <p><i>(also see Medicaid column &amp; "Private Payers" section)</i></p> <p><b><u>Effective Jan. 1, 2017:</u></b></p> <p>A health benefit plan that is issued, amended or renewed shall not require in-person contact between a provider and a covered person for services appropriately provided through telehealth, subject to the terms and conditions of the plan.</p> <p><i>Source: CO Revised Statutes 10-16-123(2) (a) (2015).</i></p>	<p>Colorado Medicaid will reimburse for medical and mental health services. Services shall be subject to reimbursement policies developed by the medical assistance program.</p> <p>Reimbursement must be the same as in-person services.</p> <p><i>Source: CO Revised Statutes 25.5-5-320 (2012).Dec.</i></p> <p>Telemedicine services must be provided "live". The patient and the distant provider interact with one another in real time through an audio-video communications circuit. Peripherals may be included, such as transmission of a live ultrasound exam.</p> <p><i>Source: CO Medical Assistance Program, Telemedicine Manual, p. 2 (Dec. 2015), (Accessed Mar. 2016).</i></p> <p>Only the Health First CO providers that have special telemedicine equipment can serve clients through telemedicine.</p> <p>A list of approved services is available to providers, which include preventive and routine medical care, psychotherapy and obstetrical ultrasounds.</p> <p><i>Source: CO Department of Health Care Policy and Financing. "Telemedicine". (accessed Aug. 2016) &lt;<a href="https://www.colorado.gov/pacific/hcpf/telemedicine">https://www.colorado.gov/pacific/hcpf/telemedicine</a>&gt;</i></p> <p>Colorado Medicaid does not pay for provider or patient education when education is the only service provided via telemedicine.</p> <p>No enrolled managed care organization may require face-to-face contact between a provider and a client for services appropriately provided through telemedicine if:</p> <ul style="list-style-type: none"> <li>• The client resides in a county with a population of 150,000 or fewer residents and</li> <li>• The county has the technology necessary to provide telemedicine services.</li> </ul> <p>The use of telemedicine is not required when in-person care by a participating provider is available to an</p>

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	<p>enrolled client within a reasonable distance.</p> <p>The originating site can bill for assisting the distant site provider with an exam.</p> <p>See telemedicine manual for specific billing instructions.</p> <p><i>Source: CO Medical Assistance Program, Telemedicine Manual, p. 2-6 (Dec. 2015), (Accessed Aug. 2016).</i></p>
<b>Store and Forward Reimbursement</b>	
<p>No reimbursement based upon definition of “telemedicine” which describes telemedicine as “interactive” implying that it happens in real time.</p> <p><i>Source: CO Revised Statutes 12-36-102.5 (2012).</i></p> <p><b>Effective Jan. 1, 2017:</b></p> <p>A health benefit plan that is issued, amended or renewed shall not require in-person contact between a provider and a covered person for services appropriately provided through telehealth, subject to the terms and conditions of the plan. Reimbursement based upon the definition of “telehealth”.</p> <p><i>Source: CO Revised Statutes 10-16-123(2) (a) (2015).</i></p>	<p>The CO Medical Assistance Program will only reimburse for “live” telemedicine, excluding store and forward. Peripherals, such as transmission of a live ultrasound exam, may be reimbursed.</p> <p><i>Source: CO Medical Assistance Program, Telemedicine Manual, p. 2 (Dec. 2015), (Accessed Aug. 2016).</i></p>
<b>Remote Patient Monitoring Reimbursement</b>	
<p>(see Medicaid column)</p>	<p>The CO Medical Assistance Program will reimburse for Remote Patient Monitoring at a flat fee set by the state board when all these requirements are met:</p> <ul style="list-style-type: none"> <li>• The patient is receiving services from a home health provider for at least one of the following: congestive heart failure, chronic obstructive pulmonary disease, asthma, or diabetes;</li> <li>• The patient requires monitoring at least five times weekly to manage the disease, as ordered by a physician or podiatrist;</li> <li>• The patient has been hospitalized two or more times in the last 12 months for conditions related to the disease;</li> <li>• The patient or caregiver misses no more than five monitoring events in a 30-day period;</li> <li>• The patient’s home has space for all program equipment and full transmission capability.</li> </ul> <p><i>Source: (Reimbursement): CO Revised Statutes 25.5-5-321.</i>  <i>Source: (Requirements): 10 CO Code of Regulation 2505-10.</i></p> <p>Eligible member must meet the following criteria:</p> <ul style="list-style-type: none"> <li>• Must receive home health services from provider who has opted to provide telehealth services</li> <li>• Member must require frequent and on-going monitoring/management of their disease or</li> </ul>

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	<p>condition</p> <ul style="list-style-type: none"> <li>• Member's home or caregiver must be willing and able to comply with vital sign self-monitoring</li> <li>• Member must have an eligible condition</li> </ul> <p><i>Source; CO Department of Health Care Policy and Financing. "Home Health Telehealth". (Accessed Aug. 2016). &lt;<a href="https://www.colorado.gov/pacific/hcpf/home-health-telehealth">https://www.colorado.gov/pacific/hcpf/home-health-telehealth</a>&gt;</i></p> <p>Additional restrictions apply. See Colorado Code of Regulations for more information.</p> <p>Medicaid Home Health will reimburse for services only if the patient has no other insurance.</p> <p><i>Source: 10 CO Code of Regulation 2505-10.</i></p> <p>CO Medicaid reimburses telehealth monitoring for qualified clients (see above requirements).</p> <p>Acute home health agencies and long-term home health agencies are reimbursed for the initial installation and education of telehealth monitoring equipment and can be billed once per client per agency. The agency can also bill for every day they receive and review the client's clinical information.</p> <p>No prior authorization needed, but agencies should notify the Department or its designee when a client is enrolled in the service.</p> <p><i>Source: CO Medical Assistance Program, Home Health Billing Manual, p. 7 &amp; 11-12 (Sept. 2015), (Accessed Aug. 2016).</i></p>
<b>Email/Phone/FAX</b>	
<p>Private payers and the managed care system are not required to cover telephone or FAX services.</p> <p><i>Source: CO Revised Statutes 10-16-123 and Colorado Revised Statutes 25.5-5-414 (2012).</i></p> <p><b><u>Effective on or after Jan. 1, 2017</u></b></p> <p>Telehealth does not include the delivery of health care services via telephone, facsimile machine or electronic mail.</p> <p><i>Source: CO Revised Statutes 10-16-123(2) (h) (4) (e) (II) (2015).</i></p>	<p>No reimbursement for telephone. No reimbursement for FAX.</p> <p><i>Source: CO Medical Assistance Program, Telemedicine Manual, p. 2 (Dec. 2015), (Accessed Aug. 2016).</i></p>
<b>Online Prescribing</b>	
<p>Pharmacists are prohibited from dispensing prescription drugs if they know, or should have known, that it was on the basis of an internet-based questionnaire, an Internet-based consult, or a telephone consultation, all without a valid pre-existing patient-practitioner relationship.</p>	<p>No reference found.</p>

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<p><i>Source: 3 CO Code of Regulation 719-1 (2012).</i></p> <p><b><u>Workers' Compensation</u></b> The physician-patient relationship/psychologist-patient relationship can be established through live audio/video services.</p> <p><i>Source: 7 CO Regs. Rule 18.</i></p>	
<b>Consent</b>	
<p>Providers shall give all first-time patients a written statement that includes the following:</p> <ul style="list-style-type: none"> <li>• The patient may refuse telemedicine services at any time, without loss or withdrawal of treatment;</li> <li>• All applicable confidentiality protections shall apply to the services;</li> <li>• The patient shall have access to all medical information from the services, under state law.</li> </ul> <p><i>Source: CO Revised Statutes 25.5-5-320 (2012).</i></p> <p><b><u>Workers' Compensation</u></b> The patient needs to give consent.</p> <p><i>Source: 7 CO Regs. Rule 18.</i></p>	<p>The Medicaid requirement for face-to-face contact between provider and client may be waived prior to treating the client through telemedicine for the first time. The rendering provider must furnish each client with all of the following written statements which must be signed by the client or the client's legal representative:</p> <ul style="list-style-type: none"> <li>• The client retains the option to refuse the delivery of health care services via telemedicine at any time without affecting the client's right to future care or treatment and without risking the loss or withdrawal of any program benefits to which the client would otherwise be entitled.</li> <li>• All applicable confidentiality protections shall apply to the services.</li> <li>• The client shall have access to all medical information resulting from the telemedicine services as provided by applicable law for client access to his or her medical records.</li> </ul> <p>These requirements do not apply in an emergency.</p> <p><i>Source: CO Medical Assistance Program, Telemedicine Manual, p. 3 (Dec. 2015), (Accessed Aug. 2016).</i></p>
<b>Location</b>	
<p><b><u>Workers' Compensation</u></b> Services provided via telecommunications technologies are not covered if the client has access to comparable service within 30 miles of his/her place of residence.</p> <p>Telehealth facilities can bill for the originating site fee if the site is in a:</p> <ul style="list-style-type: none"> <li>• County outside of a Metropolitan Statistical Area (MSA), or</li> <li>• A Health Professional Shortage Area, either located outside of an MSA or in a rural census tract, as determined by the office of Rural Health Policy within the Health Resources and Services Administration (HRSA)</li> </ul> <p>Authorized originating sites include:</p> <ul style="list-style-type: none"> <li>• The office of a physician or practitioner</li> <li>• A hospital</li> <li>• A critical access hospital (CAH)</li> <li>• A rural health clinic (RHC)</li> </ul>	<p>No enrolled managed care organization may require face-to-face contact between a provider and patient for services provided through telemedicine if:</p> <ul style="list-style-type: none"> <li>• The member resides in a county with a population of 150,000 or fewer residents; and</li> <li>• The county has the technology necessary to provide telemedicine services</li> </ul> <p><i>Source: CO Medical Assistance Program, Telemedicine Manual, p. 3 (Dec. 2015), (Accessed Aug. 2016).</i></p> <p>All Health First Colorado (Colorado's Medicaid Program) clients can receive services through the use of telemedicine, whether they live in rural or urban areas.</p> <p><i>Source: CO Department of Health Care Policy and Financing. "Telemedicine". (accessed Aug. 2016)</i> &lt;<a href="https://www.colorado.gov/pacific/hcpf/telemedicine">https://www.colorado.gov/pacific/hcpf/telemedicine</a>&gt;</p>

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<ul style="list-style-type: none"> <li>• A federally qualified health center (FQHC)</li> <li>• A hospital based or critical access hospital based renal dialysis center (including satellite)</li> <li>• A skilled nursing facility (SNF)</li> <li>• Community Mental Health Center</li> </ul> <p><i>Source: 7 CO Regs. Rule 18.</i></p>	
<b>Cross-State Licensure</b>	
No reference found.	No reference found.
<b>Private Payers</b>	
<p>Health plans for patients in counties with 150,000 or fewer residents cannot require face-to-face contact between a provider and a patient for services that could be appropriately provided through telemedicine.</p> <p>These services are subject to all terms and conditions of the health plans.</p> <p><i>Source: CO Revised Statutes 10-16-123 (2012).</i></p> <p><b><u>Effective Jan. 1, 2017:</u></b></p> <p>A health benefit plan that is issued, amended or renewed shall not require in-person contact between a provider and a covered person for services appropriately provided through telehealth, subject to the terms and conditions of the plan.</p> <p><i>Source: CO Revised Statutes 10-16-123(2) (a) (2015).</i></p>	No reference found.
<b>Site/Transmission Fee</b>	
<p><b><u>Effective Jan. 1, 2017:</u></b></p> <p>A carrier shall include in the payment for telehealth interactions reasonable compensation to the originating site for the transmission cost incurred during the delivery of health care services through telehealth except for when the originating site is a private residence.</p> <p><i>Source: CO Revised Statutes 10-16-123(2) (c) (2015).</i></p>	<p>The CO Medical Assistance Program will reimburse for transmission costs, at a rate set by their state department.</p> <p><i>Source: CO Revised Statutes 25.5-5-320 (2012).</i></p> <p>The originating site may bill for a facility fee. Eligible providers for a facility fee includes:</p> <ul style="list-style-type: none"> <li>• Physician</li> <li>• Clinic</li> <li>• Osteopath</li> <li>• FQHC</li> <li>• Psychologist</li> <li>• MA Psychologist</li> <li>• Physician Assistant</li> <li>• Nurse Practitioner</li> <li>• Rural Health Clinic</li> </ul> <p>CO Medicaid pays a transmission fee when certain CPT codes are billed. See Telemedicine Manual for specific code list.</p>

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	<p><i>Source: CO Medical Assistance Program, Telemedicine Manual, p. 4-6 (Dec. 2015), (Accessed Aug. 2016).</i></p>
<b>Miscellaneous</b>	
<p><b><u>Effective Jan. 1, 2017:</u></b></p> <p>A provider is not required to document or demonstrate that a barrier to in-person care exists to trigger coverage under a health benefit plan for services provided through telehealth.</p> <p><i>Source: CO Revised Statutes 10-16-123(2) (c) (2015).</i></p>	<p>No reference found.</p>

**Comments:** Colorado law includes in its definition of “health care services” the rendering of services via telemedicine.

*CO Revised Statutes 10-16-102 (2012).*