

# Utah

**Medicaid Program:** Utah Medicaid

**Medicaid Program Administrator:** Utah Dept. of Health

**Regional Telehealth Resource Center:**

Northwest Regional Telehealth Resource Center  
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STATE LAW/REGULATIONS	MEDICAID PROGRAM
<b>Definition of telemedicine/telehealth</b>	
<p>"Digital health service means the electronic transfer, exchange, or management of related data for diagnosis, treatment, consultation, educational, public health, or other related purposes."</p> <p><i>Source: UT Code Annotated Sec. 26-9f-102.</i></p>	<p>Telehealth or Telemedicine is a technological method of providing auditory and visual connection between the skilled home health care nurse at a Telehealth site and the patient living in a rural Utah area.</p> <p><i>Source: Utah Medicaid Provider Manual: Home Health Agencies, p. 18 (Jan. 2016). (Accessed Aug. 2016).</i></p> <p>Telemedicine "is two-way, real-time interactive communication between the member and the physician or authorized provider at the distant site. This electronic communication uses interactive telecommunications equipment that includes, at a minimum, audio and video equipment."</p> <p><i>Source: Utah Medicaid Provider Manual: Section I: General Information, p. 47 (July. 2016). (Accessed Aug. 2016).</i></p>
<b>Live Video Reimbursement</b>	
<p>Providers are eligible for reimbursement under Utah's Medical Assistance Program.</p> <p><i>Source: UT Code Annotated Sec. 26-18-13.</i></p>	<p>Utah Medicaid covers medically necessary physician and nurse practitioner services delivered via telemedicine.</p> <p>Limitations:</p> <ul style="list-style-type: none"> <li>• Must be HIPAA compliant</li> <li>• Must comply with Utah Health Information Network Standards for Telehealth</li> </ul> <p>The provider at the originating site receives no additional reimbursement for the use of telemedicine.</p> <p><i>Source: Utah Medicaid Provider Manual: Section I: General Information, p. 47 (July. 2016). (Accessed Aug. 2016).</i></p>
<b>Store and Forward Reimbursement</b>	
<p>No reference found.</p>	<p>Utah Medicaid defines telemedicine as "two-way, real time interactive communication" excluding store and forward from the definition.</p> <p><b><u>Home Health:</u></b></p>

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	<p>Asynchronous transmission of telehealth data such as radiology or electrocardiogram is not a covered service for the Medicaid Telehealth home health care project.</p> <p><i>Source: Utah Medicaid Provider Manual: Home Health Agencies, p. 20 (Jan. 2016). (Accessed Aug. 2016).</i></p>
<b>Remote Patient Monitoring Reimbursement</b>	
<p>(see Medicaid column)</p>	<p><b><u>Skilled Nurse Pilot Project for Patients in Rural Areas</u></b></p> <p>There is reimbursement in the UT Medicaid Telehealth Skilled Nurse Pilot Project for Patients in Rural Areas. Beneficiaries diagnosed with diabetes are eligible for participation. Utilization management preauthorization required.</p> <p>Patient eligibility requirements:</p> <ul style="list-style-type: none"> <li>• Patients diagnosed with diabetes and meets criteria (see below)</li> <li>• Live in a rural area</li> <li>• Requires two or more home care nursing visits per week</li> <li>• Agrees to participate in Telehealth home care services</li> </ul> <p>Participation Criteria:</p> <ul style="list-style-type: none"> <li>• Must be physically able to use equipment</li> <li>• Ability to follow directions, push two colored buttons</li> <li>• Hear and see</li> <li>• Apply the blood pressure cuff or stethoscope appropriately</li> <li>• Want to participate in the telehealth project</li> <li>• If patient is unable to use equipment, may still be included in pilot if they have a full time care giver.</li> <li>• Skilled nurse must determine if beneficiary care needs and quality of care delivery will be met through telehealth.</li> </ul> <p>The following services are covered for Telehealth home care patients:</p> <ul style="list-style-type: none"> <li>• Monitoring for compliance in taking medications, foot condition/assessment of wounds or inflamed areas, blood glucose monitoring</li> <li>• Education which may include a review in knowledge of the disease process, diet or nutritional counseling</li> <li>• Exercise and activity, diet /activity adjustment in illness/stress, medication, and glucometer use evaluation</li> </ul>

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	<ul style="list-style-type: none"> <li>• RN visits are covered for Telehealth home care reimbursement.</li> </ul> <p>Home health care has a four-hour limit for all education purposes, which may include some diabetes training.</p> <p><i>Source: Utah Medicaid Provider Manual: Home Health Agencies, p. 18-20 (Jan. 2016). (Accessed Aug. 2016).</i></p> <p>Home telemetry for outpatient long-term cardiac monitoring is allowed with prior authorization. Criteria include:</p> <ul style="list-style-type: none"> <li>• Must be ordered by a BC/BE neurologist</li> <li>• Client must have had a stroke or TIA with no identifiable cause</li> <li>• Client should have already had 24 hour monitoring done previously</li> <li>• Client should not be currently taking anti-coagulated or Warfarin for any other reason</li> <li>• Client should not have a known contraindication for Warfarin</li> <li>• Outpatient long-term cardiac monitoring may only be authorized for the 30 day test</li> <li>• Data from the test must be reviewed and interpreted by a BC/BE cardiologist</li> </ul> <p><i>Source: Utah Medicaid Provider Manual: Physician Manual, p. 65 (Jul. 2016). (Accessed Aug. 2016).</i></p> <p>Patients must need more than two home health agency visits per week. Telehealth home health services are limited to diabetic monitoring and education. The agency must provide at least two in-person visits per week by a home health nurse, and may use telehealth home health services only as a supplement to the in-person visits.</p> <p><i>Source: UT Admin. Code R414-42-3. (Accessed Aug. 2016).</i></p>
<b>Email/Phone/FAX</b>	
No reference found.	No reference found.
<b>Online Prescribing</b>	
<p>Providers must first obtain information in the usual course of professional practice that is sufficient to establish a diagnosis, to identify conditions, and to identify potential risks to the proposed treatment.</p> <p>Internet-based questionnaires or interactions on toll-free telephone numbers, when there exists no other bona fide patient-practitioner relationship or bona fide referral by a practitioner involved in an existing patient-practitioner relationship, are prohibited.</p>	No reference found.

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<i>Source: UT Code Annotated Sec. 58-1-501.</i>	
<b>Consent</b>	
No reference found.	No reference found.
<b>Location</b>	
No reference found.	No reference found.
<b>Cross-State Licensing</b>	
<p>An out-of-state physician may practice without a Utah license if:</p> <ul style="list-style-type: none"> <li>• The physician is licensed in another state, with no licensing action pending and at least 10 years of professional experience;</li> <li>• The services are rendered as a public service and for a noncommercial purpose;</li> <li>• No fee or other consideration of value is charged, expected or contemplated, beyond an amount necessary to cover the proportionate cost of malpractice insurance;</li> <li>• The physician does not otherwise engage in unlawful or unprofessional conduct.</li> </ul> <p><i>Source: UT Code Annotated Sec. 58-67-305.</i></p> <p>A mental health therapist licensed in another state can provide short term transitional mental health therapy or transitional substance use disorder counseling remotely if:</p> <ul style="list-style-type: none"> <li>• The mental health therapist is present in the state where he/she is licensed;</li> <li>• The client relocates to Utah, and was a client immediately before the relocation;</li> <li>• The therapy or counseling is provided for a maximum of 45 days after the client relocates;</li> <li>• Within 10 days of the client's relocation, the mental health therapist provides a written notice to the Division of Occupational and Professional Licensing of their intent to provide therapy/counseling remotely; and</li> <li>• The mental health therapist does not engage in unlawful or unprofessional conduct.</li> </ul> <p><i>Source: Laws of UT. 68-61-307</i></p> <p>Utah adopted the Federation of State Medical Board (FSMB)'s model language for an interstate medical licensure compact.</p> <p><i>Source: UT House Bill 121 (2015). MN Statute Sec 58-67b-101-125.</i></p>	No reference found.
<b>Private Payers</b>	

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No reference found.	No reference found.
<b>Site/Transmission Fee</b>	
No reference found.	<p>The provider at the originating site receives no additional reimbursement for the use of telemedicine.</p> <p><i>Source: Utah Medicaid Provider Manual: Section I: General Information, p. 47 (July. 2016). (Accessed Aug. 2016).</i></p> <p><b>Home Health Services:</b> No payment made for transmission expense or facility charge.</p> <p><i>Source: Utah Medicaid Provider Manual: Home Health Agencies, p. 20 (Jan. 2016). (Accessed Aug. 2016).</i></p>
<b>Miscellaneous</b>	
<p>If a hospital participates in telemedicine, it shall develop and implement policies governing the practice of telemedicine in accordance with the scope and practice of the hospital.</p> <p>These policies shall address security, access and retention of telemetric data, and define the privileging of all health professionals who participate in telemedicine.</p> <p><i>Source: UT Code R432-100-33.</i></p> <p>A Health Reform Task Force (comprised of House and Senate members) shall review and make recommendations on telehealth services.</p> <p><i>Source: UT Code Annotated Sec. 49.1(b) HB 0036.</i></p>	

COMMENTS:

During the 2016 legislative session the Utah Education and Telehealth Network was appropriated \$1,160,000 in one time funding.

*Source: UT HB Bill 277 (2016).*