

Nebraska

Medicaid Program: Nebraska Medicaid

Program Administrator: NE Dept. of Health and Human Services

Regional Telehealth Resource Center:

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STATE LAW/REGULATIONS	MEDICAID PROGRAM
Definition of telemedicine/telehealth	
<p>Telehealth means the use of medical information electronically exchanged from one site to another, whether synchronously or asynchronously, to aid a health care practitioner in the diagnosis or treatment of a patient. Telehealth includes services originating from a patient’s home or any other location where such patient is located, asynchronous services involving the acquisition and storage of medical information at one site that is then forwarded to or retrieved by a health care practitioner at another site for medical evaluation, and telemonitoring.</p> <p><i>Source: NE Rev. Statute, 71-8503. (LB 1076) & LB 257 (2015).</i></p> <p>Telehealth consultation means any contact between a patient and a health care practitioner relating to the health care diagnosis or treatment of such patient through telehealth.</p> <p><i>Source: NE Rev. Statute, 71-8503. (LB 1076)</i></p>	<p>Telehealth consultation means any contact between a client and a health care practitioner relating to the health care diagnosis or treatment of such client through telehealth. For the purposes of telehealth, a consultation includes any service delivered through telehealth.</p> <p><i>Source: NE Admin. Code Title 471, Ch. 1, Manual Letter #52-2016. (Accessed Oct. 2017).</i></p> <p>Telemonitoring is the remote monitoring of a client's vital signs, biometric data, or subjective data by a monitoring device which transmits such data electronically to a health care practitioner for analysis and storage.</p> <p><i>Source: NE Admin. Code Title 471, Ch. 1,</i></p>
Live Video Reimbursement	
<p>In-person contact is not required for reimbursable services under the Medicaid program, subject to reimbursement policies developed. This policy also applies to managed care plans who contract with the Department only to the extent that:</p> <ul style="list-style-type: none"> • Services delivered via telehealth are covered and reimbursed under the fee-for-service program and • Managed care contracts are amended to add coverage of services delivered via telehealth <p>Reimbursement shall, at a minimum, be set at the same rate as a comparable in-person consult and the rate must not depend on the distance between the health care practitioner and the patient.</p>	<p>Nebraska Medicaid provides coverage for telehealth at the same rate as in-person services when the technology meets industry standards and is HIPAA compliant.</p> <p>Medicaid will reimburse a consulting health care provider if after obtaining and analyzing the transmitted information, the consulting provider reports back to the referring health care practitioner. Payment is not made to the referring health care practitioner who sends the medical documentation.</p> <p>Practitioner consultation is not covered for behavioral health when the client has an urgent psychiatric condition requiring immediate attention by a licensed</p>

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<p><i>Source (authorization and reimbursement): NE Revised Statutes Sec. 71-8506.</i></p> <p><u>Children’s Behavioral Health</u> The Department shall adopt rules and regulations providing for telehealth services for children’s behavioral health.</p> <p>Source: Revised Statutes of NE. Sec. 71-8509..</p> <p>A trained staff member must be immediately available to a child receiving telehealth behavioral health service. This requirement may be waived by a legal guardian and in cases where there is a threat that the child may harm themselves, a safety plan must be developed.</p> <p><i>Source: Revised Statutes of NE. Sec. 71-8509</i></p>	<p>mental health practitioner.</p> <p><i>Source: NE Admin. Code Title 471, Ch. 1, Manual Letter #52-2016. (Accessed Oct. 2017).</i></p> <p>ACT Team interventions may be provided via telehealth.</p> <p><i>Source: NE Admin. Code Title 471, Ch. 35, Manual Letter #89-2008. (Accessed Oct. 2017).</i></p> <p>A safety plan must be developed for clients, (except children receiving behavioral health services).</p> <p><i>Source: Physician Provider Handbook, Manual Letter 63-2014 (accessed Oct. 2017).</i></p> <p><u>Federally Qualified Health Centers & Rural Health Clinics</u> FQHC & RHC core services provided via telehealth are not covered under the encounter rate.</p> <p><i>Source: NE FQHC Provider Handbook, Manual Letter 11-2010 & NE RHC Provider Handbook, Manual Letter 11-2010. (Accessed Oct. 2017).</i></p> <p><u>Assertive Community Treatment (ACT)</u></p> <p>ACT Team Interventions may be provided via telehealth when provided according to certain regulations.</p> <p><i>Source: NE Mental Health & Substance Abuse Provider Handbook, Ch. 35 Rehabilitative Psychiatric Services, Manual Letter 89-2008. (Accessed Aug, 2016).</i></p>
Store and Forward Reimbursement	
<p>(see Medicaid column)</p>	<p>Nebraska Medicaid will reimburse for tele-radiology when it meets the American College of Radiology standards for tele-radiology. There is no other reference to reimbursing for other specialties.</p> <p><i>Source: NE Admin. Code Title 471, Ch. 1, Manual Letter #52-2016. (Accessed Oct. 2017).</i></p>
Remote Patient Monitoring Reimbursement	
<p>No reference found.</p>	<p>Medicaid will reimburse for telemonitoring when all of the following requirements are met:</p> <ul style="list-style-type: none"> • Telemonitoring is covered only when the services are from the originating site; • The client is cognitively capable to operate the equipment or has a willing and able person to assess in the transmission of electronic data; • The originating site has space for all program equipment; • The provider maintains a client’s record supporting the medical necessity of the service. <p>Paid at daily per diem-rate and includes:</p> <ul style="list-style-type: none"> • Review and interpretation of client data;

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	<ul style="list-style-type: none"> • Equipment and all supplies; • Medically necessary visits to the home by a health care practitioner; • Training on the use of the equipment. <p>No additional or separate payment is allowed.</p> <p><i>Source: NE Admin. Code Title 471, Ch. 1, Manual Letter #52-2016. (Accessed Oct. 2017).</i></p>
Email/Phone/FAX	
<i>(see Medicaid column)</i>	<p>No reimbursement for email. No reimbursement for telephone. No reimbursement for FAX.</p> <p><i>Source: NE Admin. Code Title 471, Ch. 1.</i></p>
Online Prescribing	
<p>Prescribing drugs to individuals the physician has never met, based solely on answers to questions provided by the internet, telephone, or FAX, or without first establishing a proper physician-patient relationship, is prohibited.</p> <p><i>Source: NE Admin. Code Title 172, Ch. 88.</i></p> <p><i>(also see Medicaid column)</i></p>	<p>Prescriptions over the Internet: Neither the prescribing health care practitioner service nor the pharmacy service is covered when the health care practitioner prescribing the medication has only reviewed an e-mail message or e-mail questionnaire about the client.</p> <p><i>Source: NE Admin. Code Title 471, Ch. 1.</i></p>
Consent	
<p>Written patient consent required prior to any service delivery.</p> <p><i>Source: NE Revised Statutes Sec. 71-8505 (2012).</i></p> <p><i>(also see Medicaid column)</i></p>	<p>Written or email consent required before initial service delivery. Must include this information:</p> <ul style="list-style-type: none"> • A list of alternative care options, including in-person services; • All existing laws and protections including: confidentiality protections; patient access to all medical information from the consult; • Whether the telehealth consultation will be recorded. • Patient shall be informed of all parties present at both ends of the consult, and the patient may exclude anyone from either site; • For telehealth behavioral health services, a safety plan must be developed. • Special rules apply for a child who is receiving telehealth behavioral health services. <p>Sample patient consent form available in Manual Appendix.</p> <p><i>Source: NE Admin. Code Title 471, Ch. 1, Manual Letter #52-2016. (Accessed Oct. 2017).</i></p>
Location	

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	<p>Health care practitioners must assure that the originating sites meet the standards for telehealth, including providing a place where the client's right for confidential and private services is protected.</p> <p>Out-of-State Telehealth Services are covered:</p> <ul style="list-style-type: none"> • When the distant site is located in another state and the originating site is located in Nebraska. • When the Nebraska client is located at an originating site in another state, whether or not the provider's distant site is located in or out of Nebraska. <p><i>Source: NE Admin. Code Title 471, Ch. 1, Manual Letter #52-2016. (Accessed Oct. 2017).</i></p>
Cross-State Licensing	
<p>NB adopted the Interstate Medical Licensure Compact.</p> <p><i>Source: LB 88 (2017)</i></p>	<p>No reference found.</p>
Private Payers	
<p>Insurers prohibited from denying coverage solely because a service is delivered through telehealth.</p> <p><i>Source: LB 92 (2017).</i></p> <p>Private payers and self-funded employee benefit plans must provide, upon request, a description of the telehealth and telemonitoring services covered under the relevant policy. The description must include:</p> <ul style="list-style-type: none"> • Description of services in telehealth and telemonitoring; • Exclusions or limitations (including limitation on transmission costs); • Requirements for licensing status; • Requirements for signed written consent. <p><i>Source: LB 257 (2015).</i></p>	<p>No reference found.</p>
Site/Transmission Fee	
<p>(see Medicaid column)</p>	<p>Nebraska Medicaid reimburses for transmission costs for two-way, real-time interactive communication, unless provided by an internet service provider.</p> <p>An originating site fee is paid to the Medicaid-enrolled facility hosting the client.</p> <p><i>Source: NE Admin. Code Title 471, Ch. 1, Manual Letter #52-2016. (Accessed Oct. 2017).</i></p> <p><u>Federally Qualified Health Centers & Rural Health Clinics</u> Telehealth transmission cost related to non-core services will be the lower of:</p>

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	<ul style="list-style-type: none"> • The provider's submitted charge; or • The maximum allowable amount <p><i>Source: NE FQHC Provider Handbook, Manual Letter 11-2010 & NE RHC Provider Handbook, Manual Letter 11-2010. (Accessed Oct. 2017).</i></p> <p>Managed Care Telehealth transmission is covered as a part of the behavioral health benefits package.</p> <p><i>Source: NE Admin. Code Title 482, 5-004.</i></p>
Miscellaneous	
<p>A stroke system of care task force shall recommend eligible essential health care services for acute stroke care provided through telehealth.</p> <p><i>Source: LB 722 (2016).</i></p>	

Comments:

NE Medicaid does provide an outpatient cardiac rehabilitation program consisting of physical exercise or conditioning and concurrent telemetric monitoring are considered a valuable therapeutic modality. When a program is provided by a hospital to its outpatients, the service is covered as an outpatient service.

Source: NE Admin. Code Title 471, Ch. 10 Hospital Services & Physician Provider Handbook, Manual Letter 48-95. (Accessed Aug., 2016).