

New York

Medicaid Program: New York Medicaid

Medicaid Program Administrator: New York State Dept. of Health

Regional Telehealth Resource Center

Northeast Telehealth Resource Center

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STATE LAW/REGULATIONS	MEDICAID PROGRAM
Definition of telemedicine/telehealth	
<p><u>Related to Credentialing and Privileging health care practitioners providing telemedicine</u></p> <p>“Telemedicine means the delivery of clinical health care services by means of real time two-way electronic audio-visual communications which facilitate the assessment, diagnosis, consultation, treatment, education, care management and self-management of a patient’s health care, while such patient is at the originating site and the health care provider is at a distant site.”</p> <p><i>Source: NY Consolidated Law Service Public Health Sec. 2805-u.</i></p> <p>The term “telehealth” means the use of electronic information and communication technologies by telehealth providers to deliver health care services, which shall include the assessment, diagnosis, consultation, treatment, education, care management and/or self-management of a patient. Telehealth shall not include delivery of health care services by means of audio-only telephone communication, facsimile machines, or electronic messaging alone, though use of these technologies is not precluded if used in conjunction with telemedicine, store and forward technology or remote patient monitoring.</p> <p><i>Source: NY Public Health Law Article 29 – G Section 2999-cc</i></p> <p>Telemedicine means the use of synchronous, two-way electronic audio visual communications to deliver clinical health care services, which shall include the assessment, diagnosis, and treatment of a patient, while such a patient is at the originating site and a telehealth provider is at a distant site.</p> <p><i>Source: NY Public Health Law Article 29 – G Section 2999-cc</i></p>	<p>“Telemedicine is the use of interactive audio and video telecommunications technology to support "real time" interactive patient care and consultations between healthcare practitioners and patients at a distance. The distant site or "hub" is where the medical specialist providing the consultation or service is located. The originating site or "spoke" is where the referring health professional and patient are located.”</p> <p><i>Source: NY Dept. of Health, Medicaid Update, Vol. 31, Number 3, March 2015, p. 18. (Accessed Mar. 2017).</i></p> <p>For the home telehealth program, term “telehealth” means the use of electronic information and communication technologies by telehealth providers to deliver health care services, which shall include the assessment, diagnosis, consultation, treatment, education, care management and/or self-management of a patient. Telehealth shall not include delivery of health care services by means of audio-only telephone communication, facsimile machines, or electronic messaging alone, though use of these technologies is not precluded if used in conjunction with telemedicine, store and forward technology or remote patient monitoring.</p> <p><i>Source: NY Public Health Law Article 29 – G Section 2999-cc.</i></p>
Live Video Reimbursement	
<p>A health plan shall not exclude from coverage services that are provided via telehealth if they would otherwise</p>	<p>Reimbursement policy applies to fee-for-service. Managed care plans may cover telemedicine at their</p>

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<p>be covered under a policy. Telehealth means the use of electronic information and communications technologies by a health care provider to deliver health services to an insured individual while such individual is located at a site that is different from the site where the health care provider is located.</p> <p><i>Source: NY Insurance Law Article 32 Section 3217-h & Article 43 Section 4306-g.</i></p> <p>Medicaid: Subject to federal financial participation and the approval of the director of the budget, the commissioner shall not exclude from the payment of medical assistance funds the delivery of health care services through telehealth, as defined in subdivision four of section two thousand nine hundred ninety-nine-cc of the public health law.</p> <p><i>Source: Social Services Law Article 367-u.</i></p> <p>Office of Alcoholism and Substance Abuse Services Telepractice services may be authorized by the Office of Alcoholism and Substance Abuse Services for the delivery of certain addiction services provided by practitioners employed by or under contract by the Office as long as the practitioner and patient are in sites approved by the Office pursuant to a plan submitted by a certified program in application for a telepractice designation.</p> <p><i>Source: Title 14 NYCRR Part 830.</i></p>	<p>own option and establish their own payment guidelines and structure.</p> <p>* Also see "Misc." section.</p> <p>New York Medicaid will reimburse for live video services for medically necessary services provided to patients in:</p> <ul style="list-style-type: none"> • Hospitals (emergency room, outpatient department, Inpatient) established under Article 28 of the New York Public Health Law; • Diagnostic and Treatment Centers (D&TCs) established under Article 28 of the New York Public Health Law; • FQHCs that have "opted into" NY Medicaid Ambulatory Patient Groups (APG); • Non-FQHC School Based Health Centers (SBHCs) • Practitioner offices; • Article 28 facilities providing dental services; <p>Providers who may deliver telemedicine services include:</p> <ul style="list-style-type: none"> • Physician specialists, including psychiatrists; • Certified Diabetes Educators (CDEs); • Certified Asthma Educators (CAEs or A-ECs) • Clinical Psychologists; • Dentists; • Psychiatric Nurse Practitioners; • Genetic Counselors; • Licensed Clinical Social Workers (LCSW) and Licensed Master Social Workers (LMSW) only when employed by an Article 28 clinic. LCSWs and LMSW can only provide services to Medicaid enrollees under age 21 and pregnant women up to 60 days post-partum. <p><i>Source: NY Dept. of Health, Medicaid Update, Vol. 31, Number 3, March 2015, p. 18-19. (Accessed. Mar. 2017).</i></p> <p>Medicaid will cover genetic counseling services via telemedicine.</p> <p><i>Source: NY Dept. of Health, Medicaid Update, Vol. 31, Number 8, July 2015, p. 15. (Accessed. Mar. 2017).</i></p> <p>Telepsychiatric services must meet certain conditions to be eligible for Medicaid reimbursement.</p> <p><i>Source: NY Regulations Title 14 NYCRR Section 599.17.</i></p> <p>For the Home Telehealth program, a telehealth provider is:</p> <ul style="list-style-type: none"> • Licensed physician • Licensed physician assistant

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	<ul style="list-style-type: none"> • Licensed dentist • Licensed nurse practitioner • Licensed registered professional nurse • Licensed podiatrist • Licensed optometrist • Licensed psychologist • Licensed social worker • Licensed speech language pathologist or audiologist • Licensed midwife • Certified diabetes educator • Certified asthma educator • Certified genetic counselor • Hospital • Home care services agency • Hospice • Or any other provider as determined by the Commissioner. <p><i>Source: NY Public Health Law Article 29 – G Section 2999-cc.</i></p> <p><u>Mental Health</u></p> <p>Telepsychiatry services may be authorized by the office for assessment and treatment services provided by physicians or nurse practitioners, where the patient is physically located at an originating/spoke site licensed by the Office of Mental Health, and the physician or nurse practitioner is physically located at a distant/hub site that participates in the New York State Medicaid program.</p> <p>A provider of service must obtain prior written authorization. See regulation for requirements.</p> <p>A notation must be made in the clinical record that indicates that the service was provided via telepsychiatry and which specifies the time the service was started and the time it ended.</p> <p>A provider of services approved to utilize telepsychiatry services must have written protocols and procedures that address informed consent, confidentiality, security of electronic transmission, psychiatric emergencies, prescribing medications via telepsychiatry, procedures for first evaluations for involuntary commitments, patient rights, quality of care, and a contingency plan. See regulation for further details.</p> <p>Notice of contracts or agreements between originating/spoke sites shall be provided by the distant/hub provider of services within 30 days after execution of such contract to the Field Office serving the area where such provider of services is located.</p>

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	<p>Telepsychiatry shall not be utilized in Personalized Recovery Oriented Services program or Assertive Community Treatment programs.</p> <p><i>Source: NY Code of Rules and Regs. Title 14, Sec. 596.</i></p>
Store and Forward Reimbursement	
<p>Private payers may, but are not mandated to, reimburse for store-and forward delivered services.</p> <p><i>Source: NY Insurance Law Article 32 Section 3217-h & NY Insurance Law Article 43 Section 4306-g.</i></p> <p>Medicaid: Store and forward included within definition of “telehealth” in statute requiring Medicaid not exclude from payment the delivery of services through telehealth.</p> <p><i>Source: Social Services Law Article 367-u. http://public.leginfo.state.ny.us/lawssrch.cgi?NVLWO:</i></p> <p>For the home telehealth program, store and forward services may be reimbursed.</p> <p><i>Source: NY Public Health Law Article 29 – G Section 2999-dd</i></p> <p>The patient must be present for telepsychiatry services. Telepsychiatry is also defined as “live” and “real time”.</p> <p><i>Source: NY Code of Rules and Regs. Title 14, Sec. 596.</i></p>	<p>NY Medicaid is authorized to establish fees to reimburse the cost of telehealth store and forward technology, per a State Plan Amendment submitted and approved by CMS. Store and forward technology may be utilized in the specialty areas of dermatology, ophthalmology and other disciplines, as determined by the Commissioner. Services must reduce the need for on-site or in-office visits.</p> <p>* Also see “Misc.” section.</p> <p><i>Source: CMS Approved state plan amendment 16-0015. Attachment 3.1A. https://www.medicaid.gov/State-resource-center/Medicaid-State-Plan-Amendments/Downloads/NY/NY-16-0015.pdf</i></p> <p>NY Department of Health is encouraging Medicaid Managed Care (MMC) plans to allow for telehealth services. They are allowing MMC plans to request reimbursement of additional cost effective alternative telehealth services.</p> <p><i>Source: NY Department of Health Memorandum, Telehealth Innovation in Medicaid Managed Care, Sept. 18, 2017. Accessed Oct. 2017.</i></p>
Remote Patient Monitoring Reimbursement	
<p>Medicaid: RPM included within definition of “telehealth” in statute requiring Medicaid not exclude from payment the delivery of services through telehealth.</p> <p>See Comments section at the bottom of the document.</p> <p><i>Source: Social Services Law Article 367-u.</i></p> <p>Private payers may, but are not mandated to, reimburse for remote patient monitoring services.</p> <p><i>Source: NY Insurance Law Article 32 Section 3217-h & NY Insurance Law Article 43 Section 4306-g.</i></p> <p>Demonstration rates of payment or fees shall be established for telehealth services provided by a certified home health agency, a long term home health care program or AIDS home care program, or for telehealth services by a licensed home care services agency under contract with such an agency or program, in order to ensure the availability of technology-based</p>	<p>NY Medicaid is authorized to establish fees to reimburse the cost of telehealth remote patient monitoring, per a State Plan Amendment submitted and approved by CMS.</p> <p>Remote patient monitoring (RPM) can include synchronous or asynchronous electronic information and communication technologies to collect personal health information and medical data. RPM may be provided by a facility licensed under Article 28 of Public Health Law or by a physician, nurse practitioner, midwife or physician assistant who has examined the patient and with whom has an established relationship.</p> <p>* Also see “Misc.” section.</p> <p><i>Source: CMS Approved state plan amendment 16-0015. Attachment 3.1A. https://www.medicaid.gov/State-resource-center/Medicaid-State-Plan-Amendments/Downloads/NY/NY-16-0015.pdf</i></p>

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<p>patient monitoring, communication and health management. Reimbursement is provided only in connection with Federal Food and Drug Administration-approved and interoperable devices that are incorporated as part of the patient’s plan of care.</p> <p><i>Source: NY Consolidated Law Service Public Health Sec. 3614.</i></p> <p>For the home telehealth program, store and forward services may be reimbursed.</p> <p><i>Source: NY Public Health Law Article 29 – G Section 2999-dd.</i></p>	
Email/Phone/FAX	
<p>Per the definition of telehealth, health care services by means of audio-only telephone communication, facsimile machines, or electronic messaging alone are not included in the definition of telehealth. The use of these technologies is not precluded if used in conjunction with telemedicine, store and forward technology or remote patient monitoring.</p> <p><i>Source: NY Public Health Law Article 29 – G Section 2999-cc</i></p>	<p>No payment for telephone.</p> <p><i>Source: NY Medicaid Program. Physician Policy Guidelines. Version 2015-4. Oct. 15, 2015. P. 19. (Accessed. Mar. 2017/Mar. 2017).</i></p> <p>Telepsychiatry services does not include telephone, video cell phone, or e-mail.</p> <p><i>Source: NY Code of Rules and Regs. Title 14, Sec. 596.</i></p>
Online Prescribing	
No reference found.	No reference found.
Consent	
No reference found.	<p><u>Mental Health</u> Part of obtaining approval for telepsychiatry services is obtaining informed consent.</p> <p><i>Source: NY Code of Rules and Regs. Title 14, Sec. 596.</i></p>
Location	
<p>Originating sites are limited to:</p> <ul style="list-style-type: none"> • Licensed health facilities in Articles 28 (hospitals) and 40 (hospice); • A facility as defined in Section 1.03, subdivision six of the Mental Hygiene Law which includes and place in which services for the mentally disabled are provided and includes but is not limited to a psychiatric center, development center, institute, clinic, ward, institution or building; • Certified and non-certified day and residential programs funded or operated by the office for people with developmental disabilities. • Private physician’s or dentist’s offices located in New York; • Public, private and charter elementary and secondary schools, school age childcare programs and child day care centers within the state of New York; • Adult care facility licensed under title two of article 	<p>New York Medicaid allows Medicaid Managed Care Organizations to request approval for an “in lieu of” policy to develop and implement innovative telehealth models if they are cost effective. This can include an expanded originating site to the patient’s home.</p> <p><i>Source: Telehealth NYS State. PowerPoint Presentation (Nov. 2017) & Cost Effective Alternative Services (in lieu of) Policy (Sept. 9, 2017).</i></p> <p>See law/regulation column for full list of eligible originating sites.</p>

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<p>seven of the social services law;</p> <ul style="list-style-type: none"> The patient’s place of residence located within the state of New York or other temporary location located within or outside the state of New York. <p><i>Source: NY Public Health Law Article 29 – G Section 2999-cc</i></p>	
Cross-State Licensing	
No reference found.	No reference found.
Private Payers	
<p>A health plan shall not exclude from coverage services that are provided via telehealth if they would otherwise be covered under a policy. Telehealth means the use of electronic information and communications technologies by a health care provider to deliver health services to an insured individual while such individual is located at a site that is different from the site where the health care provider is located.</p> <p><i>Source: NY Insurance Law Article 32Section 3217-h & NY Insurance Law Article 43 Section 4306-g.</i></p>	No reference found.
Site/Transmission Fee	
No reference found.	<p>Transmission fee may be billed under certain circumstances.</p> <p><i>Source: NY Dept. of Health, Medicaid Update, Vol. 31, Number 3, March 2015, p. 21. (Accessed. Mar. 2017).</i></p> <p>The originating site can bill for administrative expenses only when a telepsychiatric connection is being provided and a physician or NP is not present at the originating site with the patient at the time of the encounter.</p> <p><i>Source: NY Code of Rules and Regs. Title 14, Sec. 596.</i></p>
Miscellaneous	
<p>The Department of Health, Office of Mental Health and Office of Alcoholism and Substance Abuse Services and Office of People with Developmental Disabilities required to coordinate on the issuance of a single guidance document that will:</p> <ol style="list-style-type: none"> Identify any differences in regulations or policies issued by the agencies including reimbursement; and Be designed to assist consumers, providers and health plans in understanding and facilitating the appropriate use of telehealth in addressing barriers to care. <p><i>Source: NY Public Health Law Article Section 2999-dd (SB 7507 – 2018).</i></p>	<p>New York hospitals acting as originating (spoke) sites must ensure that all physicians at distant (hub) sites are appropriately credentialed and privileged.</p> <p><i>Source: NY Dept. of Health, Medicaid Update, Vol. 31, Number 3, March 2015, p. 19. (Accessed Mar. 2017).</i></p> <p>New York Medicaid allows Medicaid Managed Care Organizations to request approval for an “in lieu of” policy to develop and implement innovative telehealth models if they are cost effective. This can include an expanded originating site to the patient’s home and/or additional telehealth modalities.</p> <p><i>Source: Telehealth NYS State. PowerPoint Presentation (Nov. 2017) & Cost Effective Alternative Services (in lieu of) Policy (Sept. 9, 2017).</i></p>

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	<p>* NY Medicaid is expected to publish a Medicaid Update article outlining expanded telehealth coverage and reimbursement policy.</p> <p><i>Source: Telehealth NYS State. PowerPoint Presentation (Nov. 2017)</i></p>