

New York

Medicaid Program: New York Medicaid

Program Administrator: New York State Dept. of Health

Regional Telehealth Resource Center: Northeast Telehealth Resource Center

Covers the States of: Connecticut, Maine, Massachusetts, New Hampshire, New Jersey, New York, Rhode Island & Vermont

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Medicaid Telehealth Reimbursement	Summary	<p>New York Medicaid offers live video reimbursement and some reimbursement for home health services.</p>
	Definitions	<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.</p> <p>Source: NY Dept. of Health, Medicaid Update, Vol. 31, Number 3, March 2015, p. 18. (Accessed Sept. 2018).</p>
	Live Video	<p>Policy</p> <p>Reimbursement policy applies to fee-for-service. Managed care plans may cover telemedicine at their own option and establish their own payment guidelines and structure.</p> <p>Telemedicine consultations are covered when medically necessary and when the following requirements are met:</p> <ul style="list-style-type: none"> • The patient must be physically present at the originating “spoke” site; the consulting practitioner is located at the “hub” site. • The practitioner at the “hub” site, who is performing the consultation, must be licensed in New York State, enrolled in New York State Medicaid and credentialed and privileged at both the “hub” and “spoke” sites according to the applicable setting-specific standards. • The request for the telemedicine consultation, the medical necessity for the telemedicine consultation and the findings of the distant “hub site” practitioner must be documented in the patient’s medical record. • The telemedicine consultation must be “real time,” and provided via a fully interactive, secure two-way audio visual telecommunication system (“store-and-forward” is not covered by Medicaid). <p>Source: NY Dept. of Health, Medicaid Update, Vol. 31, Number 3, March 2015, p. 18-19. (Accessed. Sept. 2018).</p>

NY Medicaid will reimburse for medically necessary services if patient is in a certain location (see live video eligible site section) and certain requirements are met (see live video policy section).

Source: NY Dept. of Health, Medicaid Update, Vol. 31, Number 3, March 2015, p. 18-19. (Accessed Sept. 2018).

Medicaid will cover genetic counseling services via telemedicine.

Source: NY Dept. of Health, Medicaid Update, Vol. 31, Number 8, July 2015, p. 15. (Accessed Sept. 2018).

Medicaid will reimburse the “spoke” site the Federal Prospective Payment System (PPS) rate. The “spoke” site will be responsible for paying the consulting practitioner, who is located at the “hub” site. Telepsychiatric services must meet certain conditions to be eligible for Medicaid reimbursement.

Source: NY Regulations Title 14 NYCRR Section 599.17.

Providers who may deliver telemedicine services include:

- 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.

Source: NY Dept. of Health, Medicaid Update, Vol. 31, Number 3, March 2015, p. 18-19. (Accessed Sept. 2018).

Home Telehealth

Subject to the approval of the state director of the budget, the commissioner may authorize the payment of medical assistance funds for demonstration rates or fees established for home telehealth services as defined in Section 2999-cc.

Source: NY Statute, Social Services Law SOS §367-u.

For the Home Telehealth program, a telehealth provider is:

- Licensed physician
- Licensed physician assistant
- 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
- Physical or occupational therapist
- Or any other provider as determined by the Commissioner.

Source: NY Public Health Law Article 29 – G Section 2999-cc. (Accessed Sept. 2018).

Eligible Providers

Telepsychiatric services must meet certain conditions to be eligible for Medicaid reimbursement.

Source: NY Regulations Title 14 NYCRR Section 599.17.(Accessed Sept. 2018).

Eligible Sites

New York Medicaid will reimburse for live video services for medically necessary services provided to patients in:

- 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;

Source: NY Dept. of Health, Medicaid Update, Vol. 31, Number 3, March 2015, p. 18-19. (Accessed. Sept. 2018).

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.

Source: NY Dept. of Health, Medicaid Update, Vol. 31, Number 3, March 2015, p. 18. (Accessed Sept. 2018).

Geographic Limits

No reference found.

Facility/Transmission Fee

Code Q3014 may be billed under certain circumstances.

Source: NY Dept. of Health, Medicaid Update, Vol. 31, Number 3, March 2015, p. 21. (Accessed. Sept 2018).

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.

Source: NY Code of Rules and Regs. Title 14, Sec. 596. (Accessed Sept. 2018).

Medicaid Telehealth Reimbursement

Store-and-Forward	Policy	<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>Source: CMS Approved state plan amendment 16-0015. Attachment 3.1A. (Accessed Sept. 2018).</p>
	Eligible Services/Specialties	<p>For the home telehealth program, store-and-forward services may be reimbursed.</p> <p>Source: NY Public Health Law Article 29 – G Section 2999-dd. (Accessed Sept. 2018).</p>
	Geographic Limits	<p>No reference found.</p>
	Transmission Fee	<p>No reference found.</p>
Remote Patient Monitoring	Policy	<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>Source: CMS Approved state plan amendment 16-0015. Attachment 3.1A. (Accessed Sept. 2018).</p> <p>RPM included within definition of “telehealth” in statute requiring Medicaid not exclude from payment the delivery of home health services through telehealth.</p> <p>Source: Social Services Law Article 367-u. (Accessed Sept. 2018).</p>

Medicaid Telehealth Reimbursement

Remote Patient Monitoring	Conditions	No reference found.
	Provider Limitations	No reference found.
	Other Restrictions	No reference found.
Email / Phone / Fax	<p>No payment for telephone.</p> <p>Source: NY Medicaid Program. Physician Policy Guidelines. Version 2015-4. Oct. 15, 2015. P. 19. (Accessed. Sept. 2018).</p> <p>Telepsychiatry services does not include telephone, video cell phone, or e-mail.</p> <p>Source: NY Code of Rules and Regs. Title 14, Sec. 596. (Accessed Sept. 2018).</p>	
Consent	<p>Mental Health</p> <p>Part of obtaining approval for telepsychiatry services is obtaining informed consent.</p> <p>Source: NY Code of Rules and Regs. Title 14, Sec. 596. (Accessed Sept. 2018).</p>	
Out of State Providers	No reference found.	

Medicaid Telehealth Reimbursement	Miscellaneous	<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>Source: NY Department of Health Memorandum, Telehealth Innovation in Medicaid Managed Care, Sept. 18, 2017. (Accessed Sept. 2018).</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>Source: NY Dept. of Health, Medicaid Update, Vol. 31, Number 3, March 2015, p. 19. (Accessed Sept. 2018).</p> <p>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>Source: Social Services Law Article 367-u. (Accessed Sept. 2018).</p>	
		Definitions	<p>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>Source: NY Insurance Law Article 32 Section 3217-h & Article 43 Section 4306-g. (Accessed Sept. 2018).</p>
		Requirements	<p>A health plan shall not exclude from coverage services that are provided via telehealth if they would otherwise be covered under a policy, provided that an insurer may exclude coverage of a service by a health care provider where the provider is not otherwise covered under the policy.</p> <p>An insurer may subject the coverage of a service to reasonable utilization management and quality assurance requirements that are consistent with those established for the same service not delivered via telehealth.</p> <p>Source: NY Insurance Law Article 32 Section 3217-h & NY Insurance Law Article 43 Section 4306-g. (Accessed Sept. 2018).</p>
Private Payer Laws	Parity	Service Parity	<p>A health plan shall not exclude from coverage services that are provided via telehealth if they would otherwise be covered under a policy, provided that an insurer may exclude coverage of a service by a health care provider where the provider is not otherwise covered under the policy.</p> <p>Source: NY Insurance Law Article 32 Section 3217-h & NY Insurance Law Article 43 Section 4306-g. (Accessed Sept. 2018).</p>
		Payment Parity	<p>No explicit payment parity.</p>

Definitions

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.

Source: NY Public Health Law Article 29 – G Section 2999-cc. (Accessed Sept. 2018).

Related to Credentialing and Privileging Health Care Practitioners Providing Telemedicine

“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.”

Source: NY Consolidated Law Service Public Health Sec. 2805-u.(Accessed Sept. 2018).

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.

Source: NY Public Health Law Article 29 – G Section 2999-cc. (Accessed Sept. 2018).

Under Public Health, originating sites are limited to:

- 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 seven of the social services law;
- 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.

Source: NY Public Health Law Article 29 – G Section 2999-cc. (Accessed Sept. 2018).

Consent

No reference found.

Online Prescribing

Office of Alcoholism and Substance Abuse Services (OASAS)

OASAS Telepractice Standards outlines practitioner requirements for prescribing buprenorphine.

Source: NY Office of Alcoholism and Substance Abuse Services. Telepractice Standards for OASAS Designated Providers. Aug. 2018. (Accessed Sept. 2018).

No reference found.

Telepsychiatry shall not be utilized in certain personalized Recovery Oriented Services program or Assertive Community Treatment programs.

Source: *NY Code of Rules and Regs. Title 14, Sec. 596. (Accessed Sept. 2018).*

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.

Source: *NY Public Health Law Article 29 – G Section 2999-cc. (Accessed Sept. 2018).*

Office for People with Developmental Disabilities (OPWDD)

Telehealth is a new mechanism that is available to deliver clinical care.

Source: *OPWDD. Emergency/Proposed Regulations. 679.1(c)(4). Regulations are effective through the revision process.*

Office of Alcoholism and Substance Abuse Services (OASAS)

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.

Source: *Title 14 NYCRR, §830.5 (Accessed Sept. 2018).*

OASAS has specific telepractice standards for its providers. See regulation for details.

Source: *NY Office of Alcoholism and Substance Abuse Services. Telepractice Standards for OASAS Designated Providers. Aug. 2018. Accessed Sept. 2018.*

For the home telehealth program, store-and-forward services may be reimbursed.

Source: *NY Public Health Law Article 29 – G Section 2999-dd. (Accessed Sept. 2018).*

The patient must be present for telepsychiatry services for Medicaid reimbursement. Telepsychiatry is also defined as “real-time”.

Source: *NY Code of Rules and Regs. Title 14, Sec. 596. (Accessed Sept. 2018).*

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 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.

Source: *NY Consolidated Law Service Public Health Sec. 3614-3c. (Accessed Sept. 2018).*

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:

- 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.

Source: *NY Public Health Law Article Section 2999-dd (SB 7507, 2018). (Accessed Sept. 2018).*

Independent Practitioner Services for Individuals with Developmental Disabilities (IPSIDD) are prohibited from being delivered via telehealth.

Source: *14 NYCRR § 635-13.4. (Accessed Sept. 2018).*

Each agency that operates a clinic treatment facility shall provide the Office for People with Developmental Disabilities (OPWDD) information it requests, including but not limited to the following: services provided by CPT/HCPCS and/or CDT codes, where such services were delivered, including the location of both the provider and the individual when services are delivered via telehealth, (i.e., on-site or at a certified satellite site, or, prior to April 1, 2016, off-site) and revenues by funding source or payee. These data shall correspond to the identical time period of the cost report.

Source: *14 NYCRR § 679.6. (Accessed Sept. 2018).*

