

Arizona

Medicaid Program: Arizona Health Care Cost Containment System (AHCCCS)

Program Administrator: Arizona Health Care Cost Containment System Administration

Regional Telehealth Resource Center: Southwest Telehealth Resource Center

Covers the States of: Arizona, Colorado, Nevada, New Mexico, & Utah

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Medicaid Telehealth Reimbursement

Summary

Arizona Health Care Cost Containment System (AHCCCS) reimburses for live video for certain services delivered at specific originating sites by specific providers. They reimburse for store-and-forward for specific specialties and for remote patient monitoring for patients with chronic heart failure. Restrictions apply for all the above.

All services provided via telemedicine must be reasonable, cost effective and medically appropriate. Services are billed by the consulting provider. Tele-presenter services are not billable.

Source: AZ Health Care Cost Containment System, AHCCCS Fee-For-Service Provider Manual, Ch. 10: Individual Practitioner Services, (10-41), (4/12/2019) & IHS/Tribal Provider Billing Manual (8/42), (4/12/2019). (Accessed Aug. 2019).

Definitions

Service delivery via telemedicine can be in one of two models: Real time means the interactive, two-way transfer of information and medical data, which occurs at two sites simultaneously: the hub site and spoke site ... Diagnostic, consultation and treatment services are delivered through interactive, audio, video and/or communication.

Store-and-forward means transferring medical data from one site to another through the use of a camera or similar device that records (stores) an image that is sent (forwarded) via telecommunication to another site for consultation.

Source: AZ Health Care Cost Containment System, AHCCCS Fee-For-Service Provider Manual, Ch. 10: Individual Practitioner Services, (10-41), (4/12/2019) & IHS/Tribal Provider Billing Manual, (8/42), (4/12/19). (Accessed Aug. 2019).

Telemedicine is “the practice of health care delivery, diagnosis, consultation and treatment and the transfer of medical data through interactive audio, video or data communications that occur in the physical presence of the member, including audio or video communications sent to a health care provider for diagnostic or treatment consultation.”

Telehealth (or telemonitoring) is “the use of telecommunications and information technology to provide access to health assessment, diagnosis, intervention, consultation, supervision and information across distance. Telehealth includes such technologies as telephones, facsimile machines, electronic mail systems, and remote member monitoring devices, which are used to collect and transmit member data for monitoring and interpretation. While they do not meet the Medicaid definition of telemedicine they are often considered under the broad umbrella of telehealth services. Even though such technologies are not considered telemedicine, they may nevertheless be covered and reimbursed as part of a Medicaid coverable service.”

Telecommunications technology is “the transfer of medical data from one site to another through the use of a camera, electronic data collection system such as an Electrocardiogram (ECG), or other similar device, that records (stores) an image which is then sent (forwarded) via telecommunication to another site for consultation which includes store-and-forward. Services delivered using telecommunications technology, but not requiring the member to be present during their implementation, are not considered telemedicine.”



Definitions

Teledentistry “the acquisition and transmission of all necessary subjective and objective diagnostic data through interactive audio, video or data communications by an AHCCCS registered dental provider to a distant dentist for triage, dental treatment planning, and referral.”

a. Teledentistry includes the provision of preventive and other approved therapeutic services by the AHCCCS registered Affiliated Practice Dental Hygienist, who provides dental hygiene services under an affiliated practice relationship with a dentist.

b. Teledentistry does not replace the dental examination by the dentist; limited, periodic, and comprehensive examinations cannot be billed through the use of Teledentistry alone.

Source: AZ Health Care Cost Containment System, AHCCCS Medical Policy for AHCCCS Covered Services, Ch. 300, (320-22-23). Oct. 2016. (Accessed Aug. 2019).

Telemedicine means the practice of health care delivery, diagnosis, consultation, and treatment and the transfer of medical data through interactive audio, video, and data communications that occur in the physical presence of the patient.

Telecommunication technology means “the transfer of medical data from one site to another through the use of a camera, or other similar device, that records (stores) an image which is then sent (forwarded) via telecommunication to another site for teleconsultation. Services delivered using telecommunications technology, but not requiring the member to be present during the consultant’s evaluation, are not considered telemedicine.”

Source: AZ Health Care Cost Containment System Telehealth Policy. Mar. 2015. Pg. 5-6 (Accessed Aug. 2019).

Policy

Fee for Service Provider Manual

AHCCCS will reimburse for medically necessary services provided via live video in their fee for service program.

Source: AZ Health Care Cost Containment System, AHCCCS Fee-For-Service Provider Manual, Ch. 10: Individual Practitioner Services, (10/41), (4/12/2019) & IHS/Tribal Provider Billing Manual, (8/42), (4/12/19). (Accessed Aug. 2019).

Live Video

Eligible Services / Specialties

Eligible services:

- Cardiology;
- Dermatology;
- Endocrinology;
- Hematology/oncology;
- Home Health (listed in fee-for-service manual, but not in policy manual)
- Infectious diseases;
- Neurology;
- Obstetrics/gynecology;
- Oncology/radiation;
- Ophthalmology;
- Orthopedics;
- Pain clinic;
- Pathology;
- Pediatrics and pediatric sub-specialties;
- Radiology;
- Rheumatology;
- Surgery follow-up and consults;
- Behavioral health services
 1. Diagnostic consultation and evaluation;
 2. Psychotropic medication adjustment and monitoring;
 3. Individual and family counseling;
 4. Case management



Behavioral health services are covered for AHCCS and KidsCare patients.

Source: AZ Health Care Cost Containment System, AHCCCS Fee-For-Service Provider Manual, Ch. 10: Individual Practitioner Services, (10/41-42), (4/12/2019); IHS/Tribal Provider Billing Manual, (8/42), (4/12/2019). (Accessed Aug. 2019); AZ Medical Policy for AHCCCS Covered Services. Telehealth and Telemedicine (Accessed Aug. 2019)

Additional Covered Services (listed in IHS Telehealth Training Manual)

- Behavioral Health
- Inpatient consultation
- Medical Nutrition Therapy (MTN)
- Office, outpatient, and surgery follow-up-consultations
- Pain management
- Pharmacy management

Telehealth policy lists covered codes in Attachment A.

Source: AZ Health Care Cost Containment System IHS Telehealth Training Manual. p.7, Mar. 2015. (Accessed Aug. 2019).

AHCCCS Policy Manual

AHCCCS covers real-time teledentistry for Early and Periodic Screening, Diagnostic and Treatment (EPSDT) aged members when provided by a registered dental providers.

Source: AZ Medical Policy for AHCCCS Covered Services. Telehealth and Telemedicine Ch 300, (320-26), Oct. 2016. (Accessed Aug. 2019)

Teledentistry services will be reimbursed for enrollees under the age of 21.

Source: AZ Statute, Sec. 36-2907.13. (Accessed Aug. 2019).

IHS Telehealth Training Manual

Eligible Providers

- Physician
- Registered nurse practitioner
- Physician assistant
- Certified nurse midwife
- Clinical psychologist
- Licensed clinical social worker
- Licensed marriage and family therapist
- Licensed professional counselor

Out-of-state providers may provide and bill for spoke and/or hub telehealth services.

Source: AZ Health Care Cost Containment System Telehealth Policy. p.9, Mar. 2015. (Accessed Aug. 2019).

Fee-for-Service Provider Manual & IHS/Tribal Provider Billing Manual

The patient's primary care provider (PCP), attending physician, other medical professional employed by the PCP, or an attending physician who is familiar with the patient's condition may be present.

Other medical professionals:

- Registered nurses;
- Licensed practical nurses;
- Clinical nurse specialists;
- Registered nurse midwives;
- Registered nurse practitioners;
- Physician assistants;
- Physical, occupational, speech, and respiratory therapists;
- Trained telepresenter familiar with the member's medical condition.

Source: AZ Health Care Cost Containment System, AHCCCS Fee-For- Service Provider Manual, Ch. 10: Individual Practitioner Services, (10-42), (4/12/2019) & IHS/Tribal Provider Billing Manual (8/44), (4/12/2019). (Accessed Aug. 2019).



Medicaid Telehealth Reimbursement

Live Video	Eligible Providers	<p>Telehealth and telemedicine may qualify as a FQHC/RHC visit if it meets the requirements as specified in AMPM Policy 320-!.</p> <p>Source: AZ Health Care Cost Containment System, AHCCCS. <i>Provider Qualifications and Provider Requirements</i>. Ch. 600. Pg. 3. (Accessed Aug. 2019).</p>
	Eligible Sites	<p>IHS Telehealth Training Manual Eligible hub or spoke sites for Indian Health Services or tribal providers:</p> <ul style="list-style-type: none"> • Indian Health Service clinic; • Tribally-governed facility; • Urban clinic for Native Americans; • Physician or other provider office; • Hospital; • Federally Qualified Health Center (FQHC). <p>Source: AZ Health Care Cost Containment System <i>Telehealth Policy</i>. p.8, Mar. 2015. (Accessed Aug. 2019).</p> <p>Fee for service manual definitions:</p> <p>Hub site – “the location of the telemedicine consulting provider, which is considered the place of service.”</p> <p>Spoke site – “the location where the recipient is receiving the telemedicine service.”</p> <p>Source: AZ Health Care Cost Containment System, <i>AHCCCS Fee-For- Service Provider Manual, Ch. 10: Individual Practitioner Services, (10-41), (4/12/2019)</i> & <i>IHS/Tribal Provider Billing Manual, (8/43), (4/12/2019)</i>. (Accessed Aug. 2019).</p>
	Geographic Limits	<p>No reference found.</p>
Store-and-Forward	Facility/Transmission Fee	<p>IHS Telehealth Training Manual A facility fee is not an AHCCCS covered service.</p> <p>Source: AZ Health Care Cost Containment System <i>Telehealth Policy</i>. p.7 Mar. 2015. (Accessed Mar. 2019).</p>
	Policy	<p>AHCCCS will reimburse for store-and-forward in their fee-for-service program.</p> <p>Source: AZ Health Care Cost Containment System, <i>AHCCCS Fee-For-Service Provider Manual, Ch. 10: Professional and Technical Services, (10-41), (4/12/2019)</i> & <i>IHS/Tribal Provider Billing Manual, (8/43), (4/12/2019)</i>. Pg. 43. (Accessed Aug. 2019).</p>



Store-and-Forward

Eligible Services/Specialties

The same services are covered for store-and-forward, as for real time, except for the field of Behavioral Health Services.

Real time telemedicine is the only type of reimbursement available in the field of Behavioral Health Services.

Source: AZ Health Care Cost Containment System, AHCCCS Fee-For- Service Provider Manual, Ch. 10: Professional and Technical Services, (10-41-42), (4/12/2019) & IHS/Tribal Provider Billing Manual, (8/43), (4/12/2019) & AHCCCS Covered Behavioral Health Services Guide. Nov. 2017. Pg. 22. (Accessed Aug. 2019).

AHCCS Medical Policy Manual

AHCCCS only covers store-and-forward for (and is subject for review) the following:

- Dermatology
- Radiology
- Ophthalmology
- Pathology

AHCCCS does not consider asynchronous or “store-and-forward” applications to be telemedicine, but it may be utilized to deliver services.

Source: Arizona Health Care Cost Containment System. AHCCCS Medical Policy Manual for AHCCCS Covered Services, Ch. 300, Policy 320 Services With Special Circumstances, (320-21 & 25). Oct. 2016. (Accessed Aug. 2019).

Eligible Services/Specialties

The following exceptions may be eligible for reimbursement, but are not considered a “telemedicine service”:

- A provider in the role of tele-presenter may be providing a separately billable service, such as an electrocardiogram or an X-ray. The service is covered, but not the tele-presenting.
- A consulting distant-site provider may offer a service that does not require real-time patient interaction. Reimbursement only for dermatology, radiology, ophthalmology, and pathology. It is subject to review by AHCCCS Medical Management.
- When a patient in a rural area presents within three hours of onset of stroke symptoms, AHCCCS will reimburse the consulting neurologist if the consult is placed for assistance in determining appropriateness of thrombolytic therapy even when the patients’ condition is such that real-time video interaction cannot be achieved.
- Additional exceptions for Behavioral Services apply.

Source: AZ Health Care Cost Containment System, AHCCS Medical Policy Manual, Medical Policy for AHCCCS Covered Services, Ch. 300, Policy 320: Services With Special Circumstances, (320-24 & 25). Oct. 2016. (Accessed Aug. 2019).

Geographic Limits

No reference found.

Transmission Fee

No reference found.



Medicaid Telehealth Reimbursement

Remote Patient Monitoring	Policy	<p>Telemonitoring is considered necessary for members with Congestive Heart Failure (CHF).</p> <p>Source: AZ Health Care Cost Containment System. AHCCCS Medical Policy Manual for AHCCCS Covered Services, Ch. 300, Policy 320 Services With Special Circumstances, (320-27). Oct. 2016. (Accessed Aug. 2019).</p>
	Conditions	<p>The following conditions must be met for Congestive Heart Failure (CHF) patients:</p> <ol style="list-style-type: none"> 1. Observation/inpatient admission with primary or secondary discharge diagnosis of CHF within the past two months, or readmission within the past six months; AND 2. A symptom level at the New York Heart Association class II or greater; CHF is identified by one of the specified ICD-10 diagnostic codes (see manual). <p>Source: AZ Health Care Cost Containment System. AHCCCS Medical Policy Manual for AHCCCS Covered Services, Ch. 300, Policy 320 Services With Special Circumstances, (320-23). Oct. 2016. (Accessed Aug. 2019).</p>
	Provider Limitations	<p>No reference found.</p>
	Other Restrictions	<p>Other limitations apply. See manual.</p> <p>Source: AZ Health Care Cost Containment System. AHCCCS Medical Policy Manual for AHCCCS Covered Services, Ch. 300, Policy 320 Services With Special Circumstances, (320-27 & 28). Oct. 2016. (Accessed Aug. 2019).</p>
Email / Phone / Fax	<p>No reference found.</p>	
Consent	<p>If there will be a recording of the interactive video service, a separate consent must be obtained. See manual for full requirements.</p> <p>Source: AZ Health Care Cost Containment System. AHCCCS Medical Policy Manual for AHCCCS Covered Services, Ch. 300, Policy 320 Services With Special Circumstances, p. 180 (320-24). Oct. 2016. (Accessed Aug. 2019).</p> <p>Prior oral informed consent is required for delivery of behavioral health services through telemedicine.</p> <p>Source: AZ Health Care Cost Containment System. AHCCCS General and Informed Consent, Ch. 320-Q. 1/25/19. (Accessed Aug. 2019).</p>	



Medicaid Telehealth Reimbursement

Out of State Providers

For teledentistry services: A consultation by a non-Arizona licensed provider may occur if:

- It is to a specific patient in the AHCCCS program;
- The provider is registered with AHCCCS;
- The provider is licensed in the state the consultation is being provided from, or the provider is employed by an Indian Health Services, Tribal or Urban Indian Health program and appropriately licensed based on IHS and Tribal facility requirements.
- At the time of service delivery via real time teledentistry, the member's dental provider may designate a trained telepresenter to present the case to the consulting dentist if the member's primary dentist or other dental professional who is familiar with the member's dental condition, is not present. The telepresenter must be familiar with the member's dental condition in order to present the case accurately.

Source: AZ Health Care Cost Containment System, AHCCS Medical Policy Manual, Medical Policy for AHCCCS Covered Services, Ch. 300, Policy 320: Services With Special Circumstances, (320-26). Oct. 2016. (Accessed Aug. 2019).

Miscellaneous

Contractors shall develop and maintain a network of providers that utilizes telemedicine to support an adequate provider network. Telemedicine shall not replace provider choice and/or member preference for physical delivery.

Source: AZ Medical Policy for AHCCCS Covered Services. Telehealth and Telemedicine (320-23). (Accessed Aug. 2019)

Behavioral Health Medical Record Requirements include the requirement for members receiving services via telemedicine, to have copies of electronically recorded information of direct, consultative or collateral clinical interviews.

Source: AZ Medical Policy for AHCCCS. Ch. 940: Quality Management and Performance Improvement Program. Pg. 7. (1/23/19). (Accessed Aug. 2019).

Private Payer Laws

Definitions

Effective Until January 1, 2021

"Telemedicine means the interactive use of audio, video or other electronic media for the purpose of diagnosis, consultation or treatment. Does not include the sole use of an audio-only telephone, a video-only system, a facsimile machine, instant messages or electronic mail."

Source: AZ Rev. Statutes. Sec. 20-841.09 & AZ Rev. Statute Sec. 20-1057.13 & 20-1376.05 & 20-1406.05. (Accessed Aug. 2019)

Effective After January 1, 2021

[Telemedicine] means the interactive use of audio, video or other electronic media, including asynchronous store-and-forward technologies and remote patient monitoring technologies, for the purpose of diagnosis, consultation or treatment. [Telemedicine] does not include the sole use of an audio-only telephone, a video-only system, a facsimile machine, instant messages or electronic mail.

Source: AZ Senate Bill 1089 (2019). (Accessed Aug. 2019).

Under Arizona Administrative Code, Department of Insurance, Health Care Services Organizations Oversight, "telemedicine means diagnostic, consultation, and treatment services that occur in the physical presence of an enrollee on a real-time basis through interactive audio, video, or data communication."

Source: AZ Admin. Code Sec. R20-6-1902. (Accessed Aug. 2019).

Requirements

Effective Until January 1, 2021

All contracts (Health Care Service Organizations and policies) must provide coverage for specified health care services that are provided through telemedicine if the health care service would be covered were it provided through in-person consultation between the subscriber and a health care provider and provided to a subscriber receiving the service in Arizona. Only applies to specific conditions and settings. A contract may limit the coverage to those health care providers who are members of the corporation's provider network.



Services provided through telemedicine or resulting from a telemedicine consultation shall comply with Arizona licensure requirements, accreditation standards and any practice guidelines of a national association of medical professionals promoting access to medical care for consumers via telecommunications technology or other qualified medical professional societies to ensure quality of care.

Source: AZ Rev. Statutes, Sec. 20-841.09 & AZ Rev. Statute Sec. 20-1057.13 & 20-1376.05 & 20-1406.05. (Accessed Aug. 2019).

Health Care Service Organizations (HCSO) are allowed, but not mandated, to provide access to covered services through telemedicine, telephone, and email.

Source: AZ Admin. Code Sec. R20-6-1915. (Accessed Mar. 2019).

Effective After January 1, 2021

All contracts (Health Care Service Organizations and policies) issued, delivered or renewed on or after January 1, 2018 must provide coverage for health care services that are provided through telemedicine if the health care service would be covered were it provided through in-person consultation between the subscriber and a health care provider and provided to a subscriber receiving the service in this state. A corporation may not limit or deny coverage of health care services provided through telemedicine and may apply only the same limits or exclusions on a health care service provided through telemedicine that are applicable to an in-person consultation for the same health care service. The contract may limit the coverage to those health care providers who are members of the corporation’s provider network.

Source: AZ Senate Bill 1089 (2019). (Accessed Aug. 2019).

Health Care Service Organizations (HCSO) are allowed, but not mandated, to provide access to covered services through telemedicine, telephone, and email.

Source: AZ Admin. Code Sec. R20-6-1915. (Accessed Aug. 2019).

Effective Until January 1, 2021

No parity. Requirement for telehealth coverage only applies to the following conditions and settings:

- Trauma
- Burn
- Cardiology
- Infectious diseases
- Mental health disorders
- Neurologic diseases including strokes
- Dermatology
- Pulmonology
- Urology (Eff. Jan. 2020)
- Pain Medicine
- Substance Abuse

Source: AZ Rev. Statutes, Sec. 20-841.09 & AZ Rev. Statute Sec. 20-1057.13 & 20-1376.05 & 20-1406.05. (Accessed Aug. 2019).

Effective After January 1, 2021

Health care services must be covered through telemedicine if the health care service would be covered when delivered in-person. Services provided through telemedicine or resulting from a telemedicine consultation are subject to all of Arizona’s laws and rules governing prescribing, dispensing and administering prescription pharmaceuticals and devices and shall comply with Arizona licensure requirements, accreditation standards and any practice guidelines of a national association of medical professionals promoting access to medical care for consumers via telecommunications technology or other qualified medical professional societies to ensure quality of care. This section does not apply to limited benefit coverage as defined in section 20-1137.

Source: AZ Senate Bill 1089 (2019). (Accessed Aug. 2019).



Private Payer Laws	Parity	Payment Parity	No explicit payment parity.
Professional Regulation/Health & Safety	Definitions	<p>Under Arizona Statute, Public Health & Safety, “telemedicine means the practice of health care delivery, diagnosis, consultation and treatment and the transfer of medical data through interactive audio, video or data communications that occur in the physical presence of the patient, including audio or video communications sent to a health care provider for diagnostic or treatment consultation.”</p> <p>Source: <i>AZ Revised Statute Sec. 36-3601. (Accessed Aug. 2019).</i></p> <p>Under the Board of Behavioral health, “telepractice” means providing behavioral health services through interactive audio, video or electronic communication that occurs between the behavioral health professional and the client, including any electronic communication for evaluation, diagnosis and treatment, including distance counseling, in a secure platform, and that meets the requirements of telemedicine pursuant to section 36-3602.</p> <p>Source: <i>AZ Revised Statute Sec. 32-3251(15). (Accessed Aug. 2019).</i></p>	
	Consent	<p>Providers must obtain and document verbal or written consent before delivery of services. Verbal consent should be documented on the patient’s medical record.</p> <p>The consent requirement does not apply in the following circumstances:</p> <ul style="list-style-type: none"> • If the telemedicine interaction does not take place in the physical presence of the patient. • In an emergency situation in which the patient or the patient’s health care decision maker is unable to give informed consent. • To the transmission of diagnostic images to a health care provider serving as a consultant or the reporting of diagnostic test results by that consultant. <p>Source: <i>AZ Revised Statute Sec. 36-3602. (Accessed Aug. 2019).</i></p>	
	Online Prescribing	<p>Physicians are prohibited from issuing a prescription to patients without having a physical or mental health status examination to establish a provider-patient relationship.</p> <p>The physical or mental health status examination can be conducting during a real-time telemedicine encounter, unless the examination is for purpose of obtaining a written certification from the physician for medical marijuana.</p> <p>Source: <i>Arizona Revised Statute Sec. 32-1401(tt) (Accessed Aug. 2019).</i></p>	



An out-of-state doctor may engage in a single or infrequent consultation with an Arizona physician.

Source: *AZ Revised Statute Sec. 32-1421. (Accessed Aug. 2019).*

Arizona adopted the interjurisdictional Compact of the Association of State and Provincial Psychology Boards (PSYPACT).

Source: *PSYPACT. Legislative Updates. (Accessed Aug. 2019).*

Member of the Interstate Medical Licensure Compact.

Source: *Interstate Medical Licensure Compact. The IMLC. (Accessed Aug. 2019).*

Member of Nurse Licensure Compact.

Source: *Nurse Licensure Compact. Current NLC States and Status. (Accessed Aug. 2019).*

Member of Physical Therapy Compact.

Source: *PT Compact. Compact Map. (Accessed Aug. 2019).*

Arizona explicitly prohibits the use of telemedicine to provide an abortion.

Source: *AZ Revised Statute Sec. 36-3604 (2012). (Accessed Aug. 2019).*

Professional regulation with telehealth specific standards

- Board of Psychologist Examiners (**Source:** *AZ Reg. Sec. R4-26-109. (Accessed Aug. 2019).*)

