

New Jersey

Medicaid Program: New Jersey Medicaid

Program Administrator: New Jersey Dept. of Human Services

Regional Telehealth Resource Centers: Northeast Telehealth Resource Center www.netrc.org

Mid-Atlantic Telehealth Resource Center www.matrc.org

New Jersey At-a-Glance

MEDICAID REIMBURSEMENT			PRIVATE PAYER LAW		PROFESSIONAL REQUIREMENTS	
LIVE VIDEO	STORE-AND-FORWARD	REMOTE PATIENT MONITORING	LAW EXISTS	PAYMENT PARITY	LICENSURE COMPACTS	CONSENT REQUIREMENT
✓	✗	✗	✓	✗	PTC, NLC	✓

New Jersey Detailed Policy

Medicaid Telehealth Reimbursement	Summary	<p>New Jersey Medicaid reimburses for live video and remote patient monitoring under certain circumstances. Store-and-forward is not explicitly included in reimbursement; however, it could be covered within the definition of telemedicine. Individual Medicare managed care plans may have their own individual policies regarding telehealth and telemedicine.</p>
	Definitions	<p>Telemedicine means the delivery of a health care service using electronic communications, information technology, or other electronic or technological means to bridge the gap between a health care provider who is located at a distant site and a patient who is located at an originating site, either with or without the assistance of an intervening health care provider. Telemedicine does not include the use, in isolation, of audio-only telephone conversation, electronic mail, instant messaging, phone text or facsimile transmission.</p> <p>Source: NJ Statute C.30:4D-6K(e) – cites: NJ Statute C.45:1-61. (Accessed Sept. 2020).</p> <p>Telehealth is defined as the use of electronic communication technologies to support clinical health care, provider consultation, patient and professional health-related education, public health, health administration and other services. Telemedicine and telehealth are often used interchangeably but telemedicine, a subset of telehealth, is considered the clinical application of electronic technology to provide long distance clinical health services. Telehealth is the broader application of communication technology, beyond clinical diagnostics and patient monitoring and shall be used throughout this newsletter to refer to both telemedicine and telehealth services.</p> <p>Source: NJ Division of Medical Assistance and Health Services. Newsletter Vol. 28, No. 17, Sept. 2018. (Accessed Sept. 2020).</p>



The State Medicaid and NJ FamilyCare programs shall provide coverage and payment for health care services delivered to a benefits recipient through telemedicine or telehealth, on the same basis as, and at a provider reimbursement rate that does not exceed the provider reimbursement rate that is applicable, when the services are delivered through in-person contact and consultation in New Jersey. Reimbursement payments under this section may be provided either to the individual practitioner who delivered the reimbursable services, or to the agency, facility, or organization that employs the individual practitioner who delivered the reimbursable services, as appropriate.

The State Medicaid and NJ FamilyCare programs may limit coverage to services that are delivered by participating health care providers, but may not charge any deductible, copayment, or coinsurance for a health care service, delivered through telemedicine or telehealth, in an amount that exceeds the deductible, copayment, or coinsurance amount that is applicable to an in-person consultation.

The commissioner will apply for a State Plan amendment as necessary to implement this.

Source: NJ Statute C.30:4D-6k. (Accessed Sept. 2020).

The offsite provider is responsible for determining that the billable service meets all required standards of care. If the provider cannot meet that standard of care via telehealth, the provider shall notify the patient to seek a face-to-face appointment. When a physical evaluation is required, the telehealth provider may utilize an individual licensed to provide physical evaluations (e.g. RN) who is onsite.

Source: NJ Division of Medical Assistance and Health Services. Newsletter Vol. 28, No. 17, Sept. 2018, p. 2. (Accessed Sept. 2020).

Psychiatric Services

Telepsychiatry may be utilized by mental health clinics and/or hospital providers of outpatient mental health services to meet their physician related requirements including but not limited to intake evaluations, periodic psychiatric evaluations, medication management and/or psychotherapy sessions for clients of any age.

Before any telepsychiatry services can be provided, each participating program must establish policies and procedures, regarding elements noted in the newsletter, such as confidentiality requirements, technology requirements and consent.

Mental health clinics and hospital providers are limited to billing for services permitted by the Division of Medical Assistance and Health Services.

Source: : NJ Division of Medical Assistance and Health Services. Newsletter. Vol. 23, No. 21, December 2013. (Accessed Sept. 2020).

For the Screening and Outreach Program, the psychiatric assessment maybe completed through the use of telepsychiatry, provided that the screening service has a Division-approved plan setting forth its policies and procedures for providing a psychiatric assessment via telepsychiatry that meets the following criteria (see regulation).

Source: NJAC 10:31-2.3. (Accessed Sept. 2020).

A provider may use interactive, real-time, two-way audio in combination with asynchronous store-and-forward technology, without video communication, if the provider has determined that the provider is able to meet the accepted standard of care provided if the visit was face-to-face.

Source: NJ Division of Medical Assistance and Health Services. Newsletter Vol. 28, No. 17, Sept. 2018, p. 2. (Accessed Sept. 2020).



Eligible Providers

Psychiatric Services

- Psychiatrist
- Psychiatric Advanced Practice Nurse

The practitioner may be offsite but must be a practitioner currently licensed to practice within the State of New Jersey. When consumers receiving telepsychiatry services are under the care of a multidisciplinary treatment team, the psychiatrist or psychiatric APN providing telepsychiatry services must have regular communication with them and be available for consultation.

The clinician cannot bill for services directly.

Source: NJ Division of Medical Assistance and Health Services. Newsletter. Vol. 23, No. 21, December 2013. (Accessed Sept. 2020).

Eligible Sites

For the provision of services, providers are expected to follow the same rules they would follow if the patient visit was face-to-face. This includes instances when a license is for an entity such as an independent clinic. This license is for a specific address and is not tied to specific personnel. In this instance, the service may only be billed when provided at the address listed on the license. When billed by the clinic, the service provider (for example a physician) may provide services from a remote location but the patient must receive those services while physically present at the independent clinic (licensed location). Independent practitioners have a person specific license that is not tied to a specific address. Services billed by independent practitioners do not have location restrictions. The patient and/or the provider may be at any location as long as the provider is licensed to practice in New Jersey.

Source: NJ Division of Medical Assistance and Health Services. Newsletter Vol. 28, No. 17, Sept. 2018, p. 2. (Accessed Sept. 2020).

Psychiatric Services

A patient must receive services at the mental health clinic or outpatient hospital program and the mental health clinic/hospital must bill for all services under their Medicaid provider number. The clinician cannot bill for services directly.

Source: NJ Division of Medical Assistance and Health Services. Newsletter. Vol. 23, No. 21, December 2013. (Accessed Sept. 2020).

Geographic Limits

No reference found.

Facility/Transmission Fee

All costs associated with the provision of telehealth services, including but not limited to the contracting of professional services and the telecommunication equipment, are the responsibility of the provider and are not directly reimbursable by NJFC.

Source: NJ Division of Medical Assistance and Health Services. Newsletter Vol. 28, No. 17, Sept. 2018, p. 4. (Accessed Sept. 2020).



Medicaid Telehealth Reimbursement

Store-and-Forward

Transmission Fee

No reference found.

Geographic Limits

No reference found.

Eligible Services/Specialties

No reference found.

Policy

“Asynchronous store and forward technology” is defined as the acquisition and transmission of a patient’s medical information either to, or from, an originating site to the provider at the distant site, where the provider can review the information without the patient being present. Information includes transmission of images, diagnostics, data and other information necessary to the medical process.

A provider may use interactive, real-time, two-way audio in combination with asynchronous store-and-forward technology, without video communication, if the provider has determined that the provider is able to meet the accepted standard of care provided if the visit was face-to-face. The interactive audiovisual equipment must provide for two-way communication at a minimum bandwidth of 384 kbps (kilobits per second).

Source: NJ Division of Medical Assistance and Health Services. Newsletter Vol. 28, No. 17, Sept. 2018. (Accessed Sept. 2020).

Insurers and NJ Medicaid must provide reimbursement for telemedicine or telehealth on the same basis as, and at a provider reimbursement rate that does not exceed the provider reimbursement rate that is applicable, when services are delivered through in-person contact and consultation. Store-and-forward is not explicitly included, but could fit into these definitions.

Source: NJ Statute C.30:4D-6k. (Accessed Sept. 2020).



Medicaid Telehealth Reimbursement

Remote Patient Monitoring	Policy	<p>Insurers and NJ Medicaid must provide reimbursement for telemedicine or telehealth on the same basis as, and at a provider reimbursement rate that does not exceed the provider reimbursement rate that is applicable, when services are delivered through in-person contact and consultation. Remote patient monitoring is included within definition of telehealth.</p> <p>Source: NJ Statute C.30:4D-6k. (Accessed Sept. 2020).</p>
	Conditions	No reference found.
	Provider Limitations	No reference found.
	Other Restrictions	No reference found.
Email / Phone / Fax	<p>Telephones, facsimile machines, and electronic mail systems do not meet the definition of an interactive telecommunications system. Sessions may not be recorded.</p> <p>Source: NJ Division of Medical Assistance and Health Services. Newsletter Vol. 28, No. 17, Sept. 2018, p. 2. (Accessed Sept. 2020).</p> <p>Telemedicine does not include the use, in isolation, of audio-only telephone conversation, electronic mail, instant messaging, phone text or facsimile transmission.</p> <p>Telehealth includes the use of telephones.</p> <p>Source: NJ Statute C.45:1-61. (Accessed Sept. 2020).</p>	
Consent	<p>Consumers must provide informed consent to participate in any service utilizing telepsychiatry. Should a client choose not to participate, they must be made aware of other face to face options and services. If they choose to participate, the clients must be informed and aware of the location of the psychiatrist/APN providing the telepsychiatry service.</p> <p>Source: NJ Division of Medical Assistance and Health Services. Newsletter. Vol. 23, No. 21, December 2013. (Accessed Sept. 2020).</p>	



A psychiatrist or psychiatric APN may be off-site, but must be licensed in the State of New Jersey.

Source: NJ Division of Medical Assistance and Health Services. Newsletter. Vol. 23, No. 21, December 2013. (Accessed Aug. 2020).

See Newsletter for specific documentation, prescribing and technology requirements, as well as requirements to meet the standard of care as a traditional face-to-face visit.

A mental health screener, screening service, or screening psychiatrist subject to the provisions of P.L.1987, c.116 (C.30:4-27.1 et seq.) shall not be required to obtain a separate authorization in order to engage in telemedicine or telehealth for mental health screening purposes, and shall not be required to request and obtain a waiver from existing regulations, prior to engaging in telemedicine or telehealth.

An initial face-to-face visit is not required to establish a provider-patient relationship. The provider must review and be familiar with the patient’s history and medical records, when applicable, prior to the provision of any telehealth services.

Source: NJ Division of Medical Assistance and Health Services. Newsletter Vol. 28, No. 17, Sept. 2018, p. 3-4. (Accessed Sept. 2020).

New Jersey’s Medicaid program consists of five managed care health plans. Individual telehealth policies may vary between health plans.

Source: NJ Medicaid & Managed Care. Division of Medical Assistance and Health Services. (Accessed Sept. 2020).

Psychiatric Services

If a physical evaluation is required as part of a psychiatric assessment, the hosting provider must have a registered nurse available to complete and share the results of the physical evaluation.

NJ Medicaid does not reimburse for any costs associated with the provision of telepsychiatry services including but not limited to the contracting of professional services and the telecommunication equipment are the responsibility of the provider and are not directly reimbursable by New Jersey Medicaid.

Additional requirements are listed in the telepsychiatry memo.

Source: NJ Division of Medical Assistance and Health Services. Newsletter. Vol. 23, No. 21, December 2013. (Accessed Sept. 2020).

Telemedicine means the delivery of a health care service using electronic communications, information technology, or other electronic or technological means to bridge the gap between a health care provider who is located at a distant site and a patient who is located at an originating site, either with or without the assistance of an intervening health care provider. Telemedicine does not include the use, in isolation, of audio-only telephone conversation, electronic mail, instant messaging, phone text or facsimile transmission.

Telehealth means the use of information and communications technologies, including telephones, remote patient monitoring devices or other electronic means to support clinical health care, provider consultation, patient and professional health related education, public health, health administration and other services.

Source: NJ Statute C.26:2S-29(e) cites NJ Statute C.45:1-61. (Accessed Sept. 2020).



Requirements

A carrier that offers a health benefits plan shall provide coverage and payment for health care services delivered to a covered person through telemedicine or telehealth, on the same basis as, and at a provider reimbursement rate that does not exceed the provider reimbursement rate that is applicable, when the services are delivered through in-person contact and consultation. Reimbursement payments under this section may be provided either to the individual practitioner who delivered the reimbursable services, or to the agency, facility, or organization that employs the individual practitioner who delivered the reimbursable services, as appropriate.

A carrier may limit coverage to services that are delivered by health care providers in the health benefits plan's network, but may not charge any deductible, copayment, or coinsurance for a health care service, delivered through telemedicine or telehealth, in an amount that exceeds the deductible, copayment, or coinsurance amount that is applicable to an in-person consultation.

Source: NJ Statute C.26:2S-29. (Accessed Sept. 2020).

Parity

Service Parity

Insurers must provide coverage and payment for health services delivered through telemedicine or telehealth on the same basis as when the services are delivered through in-person contact and consultation.

A health care plan is not prohibited from providing coverage only for services that are medically necessary, subject to the terms and conditions of the plan.

A health care plan may not require a covered person to use telemedicine or telehealth in lieu of receiving an in-person service from an in-network provider.

Source: NJ Statute C.26:2S-29. (Accessed Sept. 2020).

The above also applies to contracts purchased by the State Health Benefits Commission and the School Employees' Health Benefits Commission.

Source: NJ Statute C.52:14-17.29w & C.52:14-17.46.6h. (Accessed Sept. 2020).

Payment Parity

Reimbursement must be made for health care services delivered through telemedicine or telehealth, on the same basis as, and at a provider reimbursement rate that does not exceed the provider reimbursement rate for in-person contact.

A health care plan may limit coverage to services that are delivered by health care providers in a plan's network, but may not charge any deductible, copayment, or coinsurance for a health care service in an amount that exceeds the deductible, copayment, or coinsurance amount that is applicable to an in-person consultation.

Source: NJ Statute C.26:2S-29. (Accessed Sept. 2020).

The above also applies to contracts purchased by the State Health Benefits Commission and the School Employees' Health Benefits Commission.

Source: NJ Statute C.52:14-17.29w & C.52:14-17.46.6h. (Accessed Sept. 2020).



<p>Definitions</p>	<p>Telemedicine means the delivery of a health care service using electronic communications, information technology, or other electronic or technological means to bridge the gap between a health care provider who is located at a distant site and a patient who is located at an originating site, either with or without the assistance of an intervening health care provider. Telemedicine does not include the use, in isolation, of audio-only telephone conversation, electronic mail, instant messaging, phone text or facsimile transmission.</p> <p>Telehealth means the use of information and communications technologies, including telephones, remote patient monitoring devices or other electronic means to support clinical health care, provider consultation, patient and professional health related education, public health, health administration and other services.</p> <p>Source: NJ Statute C.45:1-61. (Accessed Sept. 2020).</p>
<p>Consent</p>	<p>With a patient’s oral, written, or digital consent, the patient’s medical information may be forwarded directly to the patient’s primary care provider or health care provider of record, or, upon request by the patient, to other health care providers.</p> <p>Source: NJ Statute C.45:1-62. (Accessed Sept. 2020).</p>
<p>Online Prescribing</p>	<p>The prescription of Schedule II controlled substances through telemedicine or telehealth is authorized only after an initial in-person examination, and subsequent in-person visit with the patient is required every three months for the duration of prescription. Does not apply when prescribing stimulant which is a Schedule II controlled dangerous substance for use by a minor under the age of 18 provided the health care provider is using interactive, real-time, two-way audio and video technologies when treating the patient and the health care provider has obtained written consent for the waiver of these in-person examination requirements from the minor patient’s parent or guardian.</p> <p>Source: NJ Statute C.45:1-62(e). (Accessed Sept. 2020).</p> <p>A provider patient relationship shall include:</p> <ul style="list-style-type: none"> • Properly identifying the patient, using at minimum the patient’s name, date of birth, phone number, and address. • Disclosing and validating the provider’s identity and credentials, such as license, title, specialty, and board certifications. • Review of patient’s medical history and available medical records, prior to initiating contact and initial encounter. • Determining whether the provider will be able to meet the same standard of care as care provided in-person, using telehealth or telemedicine, prior to initiating contact, for each unique patient encounter. <p>See statute for exceptions.</p> <p>Source: NJ Statute C.45:1-63(3). (Accessed Sept. 2020).</p>
<p>Cross-State Licensing</p>	<p>Member of Nurse Licensure Compact. (Partial Implementation)</p> <p>Source: NCSBN, Nurse Licensure Compact. (Accessed Sept. 2020).</p> <p>Member of the Physical Therapy Compact.</p> <p>Source: Compact Map. Physical Therapy Compact. (Accessed Sept. 2020).</p> <p>Must be licensed in the State of New Jersey. Subject to New Jersey jurisdiction if either the patient or the provider is located in NJ at the item services are provided.</p> <p>Source: NJ Statute C.45:1-62(2)(b). (Accessed Sept. 2020).</p>



Each telehealth or telemedicine organization operating in the State shall annually register with the Department of Health and submit an annual report. See statute for details.

Source: *NJ Statute C.45:1-64. (Accessed Sept. 2020).*

The Telemedicine and Telehealth Review Commission shall review information reported by telemedicine and telehealth organizations and make recommendations to improve the effectiveness and quality of telemedicine and telehealth services provided by New Jersey.

Source: *NJ Statute C.45:1-65. (Accessed Sept. 2020).*

Statutory Telehealth Practice Standards for Health Care Providers

Telemedicine services shall be provided using interactive, real-time, two-way communication technologies.

A health care provider engaging in telemedicine or telehealth may use asynchronous store-and-forward technology to allow for the electronic transmission of images, diagnostics, data, and medical information; except that the health care provider may use interactive, real-time, two-way audio in combination with asynchronous store-and-forward technology, without video capabilities, if, after accessing and reviewing the patient's medical records, the provider determines that the provider is able to meet the same standard of care as if the health care services were being provided in person.

See statute for additional telemedicine/telehealth practice standards.

Source: *NJ Statute C.45:1-62(c)(2). (Accessed Sept. 2020).*

A mental health screener, screening service, or screening psychiatrist subject to C.30:4-27.1:

- Shall not be required to obtain a separate authorization in order to engage in telemedicine or telehealth for mental health screening purposes; and
- Shall not be required to request and obtain a waiver from existing regulations, prior to engaging in telemedicine or telehealth.

Source: *NJ Statute C.45:1-62(f). (Accessed Sept. 2020).*

Regulatory Board-Specific Telehealth Practice Standards

- Orthotics and Prosthetics Board of Examiners (**Source:** *51 NJR 13:44H-11.1. (Accessed Sept. 2020).*)
- Board of Marriage and Family Therapy Examiners (**Source:** *51 NJR 13:34D-8. (Accessed Sept. 2020).*)

