



AT A GLANCE

MEDICAID PROGRAM

Arkansas Medicaid

PROGRAM ADMINISTRATOR

Arkansas Department of Human Services

REGIONAL TELEHEALTH RESOURCE CENTER

[South Central Telehealth Resource Center](#)

MEDICAID REIMBURSEMENT

Live Video: Yes

Store-and-Forward: No

Remote Patient Monitoring: Yes

PRIVATE PAYER LAW

Law Exists: Yes

Payment Parity: No

PROFESSIONAL REQUIREMENTS

Licensure Compacts: PTC, NLC, PSYPACT

Consent Requirements: Yes

COVID-19

ORIGINATING SITE

Last updated 10/05/2021

Department of Human Services: [Telemedicine COVID-19 Response Manual](#)

STATUS: Active, until Dec. 31, 2021

Division of Developmental Disabilities Services: [COVID-19 Response Manual](#)

STATUS: Active until Dec. 31, 2021

Medicaid: [Telemedicine Requirements for Physicians](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21.](#)

Medicaid: [Telemedicine requirements for Behavioral Health Providers](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21.](#)

Medicaid: [Behavioral Health FAQ's](#)

STATUS: Varies. Some answers based on Executive Orders have expired. Some policies continue in Telemedicine COVID-19 response manual.

Medicaid: [Telemedicine Requirements for Nurse Practitioners](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21.](#) Some policies continue in Telemedicine COVID-19 response manual.

Medicaid: [Telemedicine for Occupational, Physical, and Speech Therapy licensed Assistants](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21.](#) Some policies continue in Telemedicine COVID-19 response manual.

PROVIDER TYPE

Last updated 10/05/2021

Department of Human Services: [Telemedicine COVID-19 Response Manual](#)

Status: Active, until Dec. 31, 2021

Division of Developmental Disabilities Services: [COVID-19 Response Manual](#)

STATUS: Active until Dec. 31, 2021

Medicaid: [Telemedicine requirements for Behavioral Health Providers](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21](#).

Medicaid: [Telemedicine for Occupational, Physical and Speech Therapy](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21](#). Some policies continue in Telemedicine COVID-19 response manual.

Medicaid: [Telemedicine for Occupational, Physical, and Speech Therapy licensed Assistants](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21](#). Some policies continue in Telemedicine COVID-19 response manual.

Medicaid: [Telemedicine for FQHCs and RHCs](#)

STATUS: Expired

SERVICE EXPANSION

Last updated 10/05/2021

Department of Human Services: [Telemedicine COVID-19 Response Manual](#)

STATUS: Active, until Dec. 31, 2021

Division of Developmental Disabilities Services: [COVID-19 Response Manual](#)

STATUS: Active until Dec. 31, 2021

HB 1176: [Ensures that reimbursement in the Medicaid program for certain behavioral and mental health services provided via telemedicine continues after the PHE.](#)

STATUS: Enacted.

Medicaid: [Telemedicine Requirements for Physicians](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21](#). Some policies continue in [Telemedicine COVID-19 response manual](#).

Medicaid: [Telemedicine requirements for Behavioral Health Providers](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21](#). Some policies continue in [Telemedicine COVID-19 response manual](#).

Medicaid: [Behavioral Health FAQ's](#)

STATUS: Varies. Some answers based on Executive Orders have expired. Some policies continue in [Telemedicine COVID-19 response manual](#).

Medicaid: [Telemedicine to Provide Marital/Family Behavioral Health Counseling Services](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21](#). Some policies continue in [Telemedicine COVID-19 response manual](#).

Medicaid: [Telemedicine to Provide Mental Health Diagnosis](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21](#). Some policies continue in [Telemedicine COVID-19 response manual](#).

Medicaid: [Behavioral Health Well-Check Services](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21](#).

Medicaid: [POS for Telemedicine Delivery of Substance Abuse Assessments](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21](#). Some policies continue in [Telemedicine COVID-19 response manual](#).

Medicaid: [Telemedicine Requirements for Nurse Practitioners](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21](#). Some policies continue in [Telemedicine COVID-19 response manual](#).

Medicaid: [Telemedicine for Occupational, Physical and Speech Therapy](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21](#). Some policies continue in [Telemedicine COVID-19 response manual](#).

Medicaid: [Telemedicine for Occupational, Physical, and Speech Therapy licensed Assistants](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21](#). Some policies continue in [Telemedicine COVID-19 response manual](#).

Medicaid: [Telemedicine for Applied Behavioral Analysis Therapy](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21](#). Some policies continue in [Telemedicine COVID-19 response manual](#).

Medicaid: [Telemedicine for Crisis Intervention](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21](#). Some policies continue in [Telemedicine COVID-19 response manual](#).

Medicaid: [Telemedicine for FQHCs and RHCs](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21](#).

AUDIO-ONLY DELIVERY

Last updated 10/05/2021

Department of Human Services: [Telemedicine COVID-19 Response Manual](#)

Status: Active, until Dec. 31, 2021

Division of Developmental Disabilities Services: [COVID-19 Response Manual](#)

STATUS: Active until Dec. 31, 2021

Medicaid 1915(c) Waiver: [Appendix K Autism Waiver](#)

STATUS: Active, until Dec. 31, 2021.

HB 1176: [Reimbursement for Audio-Visual Technology & Telephone Services](#)

STATUS: Some sections permanent, but one section expires the later of the end of the state Public Health Emergency or Dec. 31, 2021.

Medicaid: [Telemedicine Requirements for Physicians](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21](#). Some policies continue in [Telemedicine COVID-19 response manual](#).

Medicaid: [Behavioral Health FAQ's](#)

STATUS: Varies. Some answers based on Executive Orders have expired. Some policies continue in [Telemedicine COVID-19 response manual](#).

Medicaid: [Telemedicine Requirements for Nurse Practitioners](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21](#). Some policies continue in [Telemedicine COVID-19 response manual](#).

Medicaid: [Telemedicine for Occupational, Physical, and Speech Therapy licensed Assistants](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21](#). Some policies continue in [Telemedicine COVID-19 response manual](#).

EASING PRESCRIBING REQUIREMENTS

Last updated 10/05/2021

Department of Human Services: [Telemedicine COVID-19 Response Manual](#)

Status: Active, until Dec. 31, 2021

Medicaid: [Telemedicine Requirements for Physicians](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21](#). Some policies continue in [Telemedicine COVID-19 response manual](#).

Medicaid: [Telemedicine Requirements for Nurse Practitioners](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21](#). Some policies continue in [Telemedicine COVID-19 response manual](#).

Medical Board: [Telemedicine & Controlled Prescribing and Relationship](#)

STATUS: Expired

EAISING CONSENT REQUIREMENTS

Last updated 10/05/2021

Medicaid: [Behavioral Health FAQ's](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21](#).

CROSS-STATE LICENSING

Last updated 10/05/2021

Medicaid: [Telemedicine Requirements for Physicians](#)

STATUS: Expired, [last PHE declaration ended on 9/29/21](#).

Medical Board: [Border State Temporary License for Telemedicine](#)

STATUS: Expired

PRIVATE PAYER

Last updated 10/05/2021

Department of Insurance: [Reimbursement for Telemedicine](#)

STATUS: RESCINDED – By Bulletin [No. 20-2020](#)

Department of Insurance: [Telemedicine Coverage](#)

STATUS: Expired

Office of the Governor: [Executive Suspending Telemedicine Requirements](#)

STATUS: Expired

Office of the Governor: [Executive Order to renew Executive Order 20-05](#)

STATUS: Expired

Office of The Governor: [Executive Order to Renew the Disaster and Public Health Emergency to Mitigate the Spread and Impact of COVID-19](#)

STATUS: Expired

Office of The Governor: [Executive Order 21-14 Declaring a Statewide PHE](#)

STATUS: Expired

MISCELLANEOUS

Last updated 10/05/2021

HCR 1003: [Terminates the public health emergency and the related executive orders, including one on telehealth.](#)

STATUS: Pending

HB 1063: [Amends Telemedicine Act and authorizes reimbursement for telemedicine via telephone](#)

STATUS: Enacted & Implements Permanent Policy

Medicaid 1915(c) Waiver: [Appendix K AR Community and Employment Supports Waiver and Autism Waiver](#)

STATUS: Active, until Dec. 31, 2021

Medicaid

OVERVIEW

Last updated 10/05/2021

Arkansas Medicaid reimburses for live video when the telemedicine service is comparable to an in-person service. Store-and-forward and remote patient monitoring is included in Medicaid's definition of telemedicine, but there was no specific information found regarding reimbursement of the modalities.

DEFINITIONS

Last updated 10/05/2021

Telemedicine is defined as the use of electronic information and communication technology to deliver healthcare services including without limitation, the assessment, diagnosis, consultation, treatment, education, care management, and self-management of a patient. Telemedicine includes store-and-forward technology and remote patient monitoring.

SOURCE: [AR Medicaid Provider Manual, Section I General Policy, Rule 105.190, Updated Aug. 1, 2018 \(Accessed Oct. 2021\)](#) & [Section III Billing Documentation, Rule 305.000, Updated Aug. 1, 2018](#) & [PASSE Program \(3/1/19\)](#) & [AR Admin. Rule 016.06.18 \(Accessed Oct. 2021\)](#).

Provider-Led Arkansas Shared Savings Entity (PASSE) Program

The following activities will not be considered a reportable encounter when delivered to a member of the PASSE:

- Audio-only communication including without-limitation, interactive audio;
- A facsimile machine;
- Text messaging; or
- Electronic mail systems

Virtual services are telemedicine, telehealth, e-consulting, and provider home visits that are part of a patient care treatment plan and are provided at the individual's home or in a community setting. These services are provided using mobile secure telecommunication devices, electronic monitoring equipment, and include clinical provider care, behavioral health therapies, speech, occupational and physical therapy services, and treatment provided to an individual at their residence.

SOURCE: [PASSE Program, Sec. II, p. 8-9, \(3/1/19\)](#). (Accessed Oct. 2021).

Rural Health Centers

Arkansas Medicaid defines telemedicine services as medical services performed as electronic transactions in real time.

SOURCE: [AR Medicaid Provider Manual. Section II Rural Health. Rule 211.300. ,p. 6, Updated Oct. 13, 2003. \(Accessed Oct. 2021\).](#)

Telemedicine means the use of electronic information and communication technology to deliver healthcare services, including without limitation the assessment, diagnosis, consultation, treatment, education, care management and self-management of a patient. Telemedicine includes store-and-forward and remote patient monitoring. Telemedicine does not include the use of audio-only communication including without limitation interactive audio; a facsimile machine; text messaging; or electronic mail systems.

SOURCE: [AR Code 23-79-1601\(7\). \(Accessed Oct. 2021\).](#)

LIVE VIDEO

Last updated 10/06/2021

POLICY

Arkansas Medicaid provides payment to a licensed or certified healthcare professional or a licensed or certified entity for services provided through telemedicine if the service provided through telemedicine is comparable to the same service provided in-person.

Coverage and reimbursement for services provided through telemedicine will be on the same basis as for services provided in-person. While a distant site facility fee is not authorized under the Telemedicine Act, if reimbursement includes payment to an originating site (as outlined in the above paragraph), the combined amount of reimbursement to the originating and distant sites may not be less than the total amount allowed for healthcare services provided in-person.

SOURCE: [AR Medicaid Provider Manual. Section I General Policy. Rule 105.190. ,p. 13 Updated Aug. 1, 2018. & AR Admin. Rule 016.06.18. p. 6 \(Accessed Oct. 2021\).](#)

Arkansas Medicaid shall provide payment for telemedicine healthcare services to licensed or certified healthcare professionals or entities that are authorized to bill Arkansas Medicaid directly for healthcare services. Coverage and reimbursement for healthcare services provided through telemedicine shall be reimbursed on the same basis as healthcare services provided in-person.

SOURCE: [Section III Billing Documentation. Rule 305.000. ,p.8 Updated Aug.1, 2018. \(Accessed Oct. 2021\).](#)

Rural Health Centers

In order for a telemedicine encounter to be covered by Medicaid, the practitioner and the patient must be able to see and hear each other in real time.

SOURCE: [AR Medicaid Provider Manual. Section II Rural Health. Rule 211.300. p. 6 Updated Oct. 13, 2003. \(Accessed Oct. 2021\).](#)

ELIGIBLE SERVICES/SPECIALTIES

Arkansas Medicaid must provide coverage and reimbursement for healthcare services provided through telemedicine on the same basis as they provide coverage and reimbursement for health services provided in-person.

SOURCE: [AR Code 23-79-1602\(c\). \(Accessed Oct. 2021\).](#)

Telemedicine is listed as an allowed delivery mode under the Outpatient Behavioral Health Services manual to inpatient hospital patients and to nursing home residents. Certain services can only be provided via telemedicine to patients 21 and above or 18 and above. See the manual for more information.

SOURCE: [AR Medicaid Provider Manual. Section II OBHS. Rule 252.100 & 111. Updated Mar. 1, 2019. \(Accessed Oct. 2021\).](#)

Rural Health Centers

Arkansas Medicaid covers RHC encounters and two ancillary services (fetal echography and echocardiology) as “telemedicine services”. Physician interpretation of fetal ultrasound is covered as a telemedicine service if the physician views the echography or echocardiography output in real time while the patient is undergoing the procedure.

SOURCE: [AR Medicaid Provider Manual. Section II Rural Health. Rule 211.300. Updated Oct. 13, 2003. \(Accessed Oct. 2021\).](#)

Patient-Led Arkansas Shared Savings Entity (PASSE) Program

Virtual services can be provided using mobile secure telecommunication devices, electronic monitoring equipment and include clinical provider care, behavioral health therapies, speech, occupational and physical therapy services, and treatment provided to an individual at their residence. They may include the provision of on-going care management, remote telehealth monitoring and consultation, face to face or through the use secure web-based communication and mobile telemonitoring technologies to remotely monitor and evaluate the patient's functional and health status.

SOURCE: [PASSE Program, p. II-9, \(3/1/19\). \(Accessed Oct. 2021\).](#)

Telemedicine for group therapy provided to adults who are participants in a program or plan authorized and funded under 42 U.S.C. § 1396a, as approved by the United States Secretary of Health and Human Services, may only be permitted if the Centers for Medicare and Medicaid Services allows telemedicine for group therapy provided to adults. Telemedicine shall not be used for group therapy provided to a child who is eighteen (18) years of age or younger.

SOURCE: [AR CODE 17-80-404](#) as amended by [HB 1068 \(2021\). \(Accessed Oct. 2021\).](#)

ELIGIBLE PROVIDERS

The professional or entity at the distant site must be an enrolled Arkansas Medicaid Provider.

SOURCE: [AR Medicaid Provider Manual. Section I General Policy. Rule 105.190. Updated Aug. 1, 2018. \(Accessed Oct. 2021\)](#) & [Section III Billing Documentation. Rule 305.000. Updated Aug. 1, 2018. \(Accessed Oct. 2021\)](#) & [AR Admin. Rule 016.06.18. \(Accessed Oct. 2021\).](#)

The distant site provider should use the GT modifier and Place of Service 02 when billing CPT or HCPCS codes.

SOURCE: [AR Medicaid Provider Manual. Section III Billing Documentation. Rule 305.000. Updated Aug. 1, 2018. \(Accessed Oct. 2021\)](#) & [AR Admin. Rule 016.06.18](#), p. 10. (Accessed Oct. 2021.)

Patient-Led Arkansas Shared Savings Entity (PASSE) Program

The provision of virtual care can include an interdisciplinary care team or be provided by individual clinical service provider.

SOURCE: [PASSE Program, p. II-9 \(3/1/19\).](#) [\(Accessed Oct. 2021\).](#)

Medication-Assisted Treatment for Opioid Use Disorder

Providers are encouraged to use telemedicine services when in-person treatment is not readily accessible.

SOURCE: [AR Admin. Rule 230.000 p. 12 \(9/1/2020\)](#) [\(Accessed Oct. 2021\).](#)

The Arkansas Medicaid Program shall reimburse for the following behavioral and mental health services provided via telemedicine:

1. Counseling and psychoeducation provided by a person licensed as:
 - a. A psychologist;
 - b. A psychological examiner;
 - c. A professional counselor;
 - d. An associate counselor;
 - e. An associate marriage and family therapist;
 - f. A marriage and family therapist;
 - g. A clinical social worker; or
 - h. A master social worker;
1. Crisis intervention services;
2. Substance abuse assessments;
3. Mental health diagnosis assessments for an individual under twenty-one (21) years of age; and
4. Group therapy for individuals who are eighteen (18) years of age or older under the current service definition determined by the Arkansas Medicaid Program and when provided via audio-visual technology that is compliant with the HIPPA and composed of beneficiaries of similar age and clinical presentation to qualified beneficiaries.

SOURCE: [AR Code 20-77-112](#) & [AR HB 1176 \(2021\), p. 2](#) [\(Accessed Oct. 2021\).](#)

ELIGIBLE SITES

Patient-Led Arkansas Shared Savings Entity (PASSE) Program

Virtual and telehealth services can be provided at the individual’s home or in a community setting.

SOURCE: [PASSE Program, II-9 \(3/1/19\)](#). (Accessed Oct. 2021).

“Originating site” means a site at which a patient is located at the time healthcare services are provided to him or her by means of telemedicine, which includes the home of a patient.

SOURCE: [AR Code 23-79-1601\(4\)](#) as amended by [HB 1068 \(2021\)](#). (Accessed Oct. 2021).

GEOGRAPHIC LIMITS

No Reference Found

FACILITY/TRANSMISSION FEE

Payment will include a reasonable facility fee to the originating site operated by a licensed or certified healthcare professional or licensed or certified healthcare entity if the professional or entity is authorized to bill Arkansas Medicaid directly for healthcare services. There is no facility fee for the distant site.

SOURCE: [AR Medicaid Provider Manual, Section I General Policy, Rule 105.190, Updated Aug. 1, 2018](#), & [Section III Billing Documentation, Rule 305.000, Updated Aug. 1, 2018](#). (Accessed Oct. 2021). & [AR Admin. Rule 016.06.18](#) p. 6 (Accessed Oct. 2021).

The originating site submits a telemedicine claim under the billing providers “pay to” information using HCPCS code Q3014. For outpatient services, the distant provider must also use Place of Service code 22 with the originating site billing Q3014. In the case of in-patient services, HCPCS code Q3014 is not separately reimbursable because it is included in the hospital per diem. See manual for further instructions.

SOURCE: [AR Medicaid Provider Manual, Section III Billing Documentation, Rule 305.000, p. 8, Updated Aug. 1, 2018](#). (Accessed Oct. 2021) & [AR Admin. Rule 016.06.18](#) p. 10 (Accessed Oct. 2021).

Federally Qualified Health Centers

Use procedure code T1014 and type of service code Y (paper claims only) to indicate telemedicine charges. The charge associated with the procedure code should be an amount attributable to the telemedicine service, such as line (or wireless) charges. Medicaid will deny the charge and capture it in the same manner as with ancillary charges.

SOURCE: [AR Medicaid Provider Manual, Section II FQHC, Rule 262.120, Updated Nov. 1, 2017, p. 33 \(Accessed Oct. 2021\)](#).

Arkansas Medicaid must provide a reasonable facility fee to an originating site operated by a licensed healthcare entity or healthcare professional.

SOURCE: [AR Code 23-79-1602\(d\)\(1\), \(Accessed Oct. 2021\)](#).

STORE-AND-FORWARD

Last updated 10/05/2021

POLICY

Store-and-forward technology is the transmission of a patient's medical information from a healthcare provider at an originating site to a healthcare provider at a distant site.

SOURCE: [AR Medicaid Provider Manual, Section I General Policy, Rule 105.190, Updated Aug. 1, 2018](#), & [AR Admin. Rule 016.06.18, \(Accessed Oct. 2021\)](#).

Although store-and-forward is included in Medicaid's definition of telemedicine, no information was found regarding reimbursement of store-and-forward.

Patient-Led Arkansas Shared Savings Entity (PASSE) Program

Virtual providers can use secure web-based communication to remotely monitor and evaluate the patient's functional and health status.

SOURCE: [PASSE Program, P. II-9, \(3/1/19\), \(Accessed Oct. 2021\)](#).

ELIGIBLE SERVICES/SPECIALTIES

No Reference Found

GEOGRAPHIC LIMITS

No Reference Found

TRANSMISSION FEE

No Reference Found

REMOTE PATIENT MONITORING

Last updated 10/07/2021

POLICY

Remote patient monitoring means the use of electronic information and communication technology to collect personal health information and medical data from a patient at an originating site that is transmitted to a healthcare provider at a distant site for use in the treatment and management of medical conditions that require frequent monitoring.

SOURCE: [AR Medicaid Provider Manual, Section I General Policy, Rule 105.190, Updated Aug. 1, 2018](#), & [AR Admin. Rule 016.06.18, p. 6 \(Accessed Oct. 2021\)](#).

Although remote patient monitoring is included in Medicaid's definition of telemedicine, no information was found regarding reimbursement of store-and-forward.

Patient-Led Arkansas Shared Savings Entity (PASSE) Program

Virtual providers can use mobile telemonitoring technologies to remotely monitor and evaluate the patient's functional and health status.

SOURCE: [PASSE Program, p. II-9 \(3/1/19\)](#). (Accessed Oct. 2021).

CONDITIONS

No Reference Found

PROVIDER LIMITATIONS

No Reference Found

OTHER RESTRICTIONS

No Reference Found

EMAIL, PHONE & FAX

Last updated 10/07/2021

Once a professional relationship is established, the healthcare provider may provide healthcare services through telemedicine, including interactive audio, if the healthcare services are within the scope of practice for which the healthcare provider is licensed or certified and in accordance with the safeguards established by the healthcare professionals licensing board. The use of interactive audio is not reimbursable under Arkansas Medicaid.

SOURCE: [AR Medicaid Provider Manual, Section I General Policy, Rule 105.190, p. I-14 Updated Aug. 1, 2018.](#) & [AR Admin. Rule 016.06.18, p. 7 \(Accessed Oct. 2021\).](#)

Provider-Led Arkansas Shared Savings Entity (PASSE) Program

The following activities will not be considered a reportable encounter when delivered to a member of the PASSE:

- Audio-only communication including without-limitation, interactive audio;
- A facsimile machine;
- Text messaging; or
- Electronic mail systems

SOURCE: [PASSE Program, p. II-8, \(3/1/19\). \(Accessed Oct. 2021\).](#)

CONSENT REQUIREMENTS

Last updated 10/07/2021

A provider must obtain informed consent, as required by applicable state and federal laws, rules and regulations.

SOURCE: [AR Medicaid Provider Manual. Section I General Policy. Rule 105.190. p. 15 Updated Aug. 1, 2018. \(Accessed Oct. 2021\).](#) & [AR Admin. Rule 016.06.18. p. 7 \(Accessed Oct. 2021\).](#)

Provider-Led Arkansas Shared Savings Entity (PASSE) Program

Virtual and telehealth services are provided in lieu of providing the same services at a practice site or provided at the individual's place of residence. Therefore, these services must have patient consent, documented in the patient integrated medical records, and submitted as a claims or encounter from a contracted provider as medically necessary service.

SOURCE: [PASSE Program, p. II-9, \(3/1/19\). \(Accessed Oct. 2021\).](#)

OUT OF STATE PROVIDERS

Last updated 10/05/2021

A healthcare provider treating patients in Arkansas through telemedicine shall be fully licensed or certified to practice in Arkansas and is subject to the rules of the appropriate state licensing or certification board. This requirement does not apply to the acts of a healthcare provider located in another jurisdiction who provides only episodic consultation services.

SOURCE: [AR Medicaid Provider Manual. Section I General Policy. Rule 105.190. p. 15 Updated Aug. 1, 2018. \(Accessed Oct. 2021\).](#) & [AR Admin. Rule 016.06.18. p. 8 \(Accessed Oct. 2021\).](#)

MISCELLANEOUS

Last updated 10/07/2021

The distant site provider is prohibited from utilizing telemedicine with a patient unless a professional relationship exists between the provider and patient. See manual for ways to establish the relationship. A professional relationship is established if the provider performs a face-to-face examination using real time audio and visual telemedicine technology that provides information at least equal to such information as would have been obtained by an in-person examination; or if the establishment of a professional relationship is permitted via telemedicine under the guidelines outlined in ASMB regulations. Telemedicine may be used to establish the professional relationship only for

situations in which the standard of care does not require an in-person encounter and only under the safeguards established by the healthcare professional's licensing board (See ASMB Regulation 38 for these safeguards including the standards of care). See manual for full list of requirements on establishing a professional relationship. Special requirements also exist for providing telemedicine services to a minor in a school setting (see manual).

A healthcare provider providing telemedicine services within Arkansas shall follow applicable state and federal laws, rules and regulations regarding:

1. Informed consent;
2. Privacy of individually identifiable health information;
3. Medical record keeping and confidentiality, and
4. Fraud and abuse.

SOURCE: [AR Medicaid Provider Manual, Section I General Policy, Rule 105.190, p. 13-15 Updated Aug. 1, 2018.](#) & [AR Admin. Rule 016.06.18, p.6-8 \(Accessed Oct. 2021\).](#)

Patient-Led Arkansas Shared Savings Entity (PASSE) Program

If the PASSE allows the use of telemedicine, the PASSE must document what services the PASSE allows, the settings allowed, and the qualifications for individuals to perform services via telemedicine.

SOURCE: [PASSE Program, II-26, \(3/1/19\).](#) (Accessed Oct. 2021).

Private Payer

DEFINITIONS

Last updated 10/07/2021

Telemedicine means the use of electronic information and communication technology to deliver healthcare services, including without limitation the assessment, diagnosis, consultation, treatment, education, care management and self-management of a patient. Telemedicine includes store-and-forward and remote patient monitoring. Telemedicine does not include the use of audio-only communication, unless the audio-only

communication is real-time, interactive, and substantially meets the requirements for a healthcare service that would otherwise be covered by the health benefit plan.

As with other medical services covered by a health benefit plan, documentation of the engagement between patient and provider via audio-only communication shall be placed in the medical record addressing the problem, content of conversation, medical decision-making, and plan of care after the contact.

The documentation described is subject to the same audit and review process required by payers and governmental agencies when requesting documentation of other care delivery such as in-office or face-to-face visits:

- A facsimile machine;
- Text messaging; or
- Email.

SOURCE: [AR Code 23-79-1601\(7\)](#). & [AR HB 1063 \(2021\)](#). (Accessed Oct. 2021).

REQUIREMENTS

Last updated 10/07/2021

A health plan shall cover the telehealth-delivered healthcare services on the same basis it would if the services were delivered in-person. A health benefit plan is not required to reimburse for a healthcare service provided through telemedicine that is not comparable to the same service provided in-person. A health benefit plan may voluntarily reimburse for healthcare services provided through means of telephone, facsimile, text message or electronic mail.

A healthcare plan must provide a reasonable facility fee to an originating site operated by a healthcare professional or licensed healthcare entity if licensed to bill the health benefit plan.

A health benefit plan cannot prohibit its providers from charging patients directly for services provided by audio-only communication that aren't reimbursed by the plan.

A health plan may not impose:

- An annual or lifetime dollar maximum on coverage for services provided through telemedicine unless it applies to the aggregate of all items and services covered

- A deductible, copayment, coinsurance, benefit limitation or maximum benefit that is not equally imposed upon other healthcare services; or
- A prior authorization requirement that exceeds the requirements for in-person healthcare services.
- A requirement for a covered person to choose any commercial telemedicine service provider or a restricted network of telemedicine-only providers rather than the covered person's regular doctor or provider of choice; or
- A copayment, coinsurance, or deductible that is not equally imposed upon commercial telemedicine providers as those imposed on network providers.

SOURCE: [AR Code Sec. 23-79-1602. \(Accessed Oct. 2021\).](#) as amended by [AR HB 1063 \(2021\). \(Accessed Oct. 2021\).](#)

PARITY

Last updated 08/12/2021

SERVICE PARITY

Health plans must reimburse “on the same basis” if the service were delivered in-person. A health benefit plan is not required to reimburse for a healthcare service provided through telemedicine that is not comparable to the same service provided in-person.

SOURCE: [AR Code 23-79-1602\(c\). \(Accessed Aug. 2021\).](#)

PAYMENT PARITY

The combined amount of reimbursement that a health benefit plan allows for the compensation to the distant site and the originating site shall not be less than the total amount allowed for healthcare services provided in-person.

SOURCE: [AR Code 23-79-1602\(d\)\(2\). \(Accessed Aug. 2021\).](#)

Professional Requirements

DEFINITIONS

Last updated 10/07/2021

“Telemedicine means the use of electronic information and communication technology to deliver healthcare services, including without limitation the assessment, diagnosis, consultation, treatment, education, care management and self-management of a patient. Telemedicine includes store-and-forward technology and remote patient monitoring.”

“Telemedicine” does not include the use of audio-only electronic technology by a physician to renew a written certification that was previously issued to the same patient.

SOURCE: [AR Code Sec. 17-80-402. \(Accessed Oct. 2021\).](#)

The Board of Examiners in Speech-Language Pathology and Audiology defines “telepractice” as tele-speech, teleaudiology, teleSLP, telehealth or telerehabilitation when used separately or together.

It defines “telepractice service” as the application of telecommunication technology equivalent in quality to services delivered face-to-face to deliver speech-language pathology or audiology services, or both, at a distance for assessment, intervention or consultation, or both.

SOURCE: [AR Code Sec. 17-100-103. \(Accessed Oct. 2021\).](#)

CONSENT REQUIREMENTS

Last updated 10/08/2021

The healthcare professional shall follow applicable state and federal laws, rules and regulations for informed consent.

SOURCE: [AR Code 17-80-404. \(Accessed Oct. 2021\).](#)

ONLINE PRESCRIBING

Last updated 10/08/2021

A distant site provider will not utilize telemedicine to treat a patient located in Arkansas unless a professional relationship exists between the healthcare provider and the patient or as otherwise meets the definition of a professional relationship as defined in Section 17-80-402. Existence of a professional relationship is not required in the following circumstances:

- Emergency situations where life or health of the patient is in danger or imminent danger or
- Simply providing information in a generic nature not meant to be specific to an individual patient.

A professional relationship can be established when:

- The healthcare professional who is licensed in Arkansas has access to a patient's personal health record maintained by a healthcare professional and uses any technology deemed appropriate by the healthcare professional, including the telephone, with a patient located in Arkansas to diagnose, treat, and if clinically appropriate, prescribe a noncontrolled drug to the patient
- For purposes of this subchapter, a health record may be created with the use of telemedicine and consists of relevant clinical information required to treat a patient, and is reviewed by the healthcare professional who meets the same standard of care for a telemedicine visit as an in-person visit

A professional relationship cannot be established only through:

- An internet questionnaire
- Email message
- Patient generated medical history
- Text messaging
- Facsimile machine
- Any combination of means listed above

See statute for additional avenues to establish the professional relationship.

SOURCE: [AR Code 17-80-402 & 403](#) as amended by [HB 1063 \(2021 Session\)](#) (Accessed Oct. 2021).

A proper physician or physician assistant/patient relationship can be established via real time audio and audio and visual telemedicine technology that provides information at least equal to such information as would have been obtained by an in-person examination.

SOURCE: [AR Rules and Regulation. Sec. 060.00.16. p.4 \(Accessed Oct. 2021\)](#).

A patient completing a medical history online and forwarding it to a physician is not sufficient to establish the relationship, nor does it qualify as store-and-forward technology.

A Provider using telemedicine may NOT issue a prescription for any controlled substances defined as any scheduled medication under schedules II through V unless the Provider has

seen the patient for an in-person exam or unless a relationship exists through consultation or referral; on-call or cross-coverage situations; or through an ongoing personal or professional relationship.

SOURCE: [AR Rules and Regulation. Sec. 060.00.16. Reg. 38. \(Accessed Oct. 2021\).](#)

When abortion inducing drugs are used, the initial administration must occur in the same room and in the physical presence of the prescribing physician.

SOURCE: [AR Code Annotated Section 20-16-603\(b\)\(1\). \(Accessed Oct. 2021\).](#)

Without a prior and proper patient-provider relationship, providers are prohibited from issuing prescriptions solely in response to an Internet questionnaire, an Internet consultation, or a telephone consultation.

SOURCE: [AR Code Annotated Sec. 17-92-1003\(14\)\(B\). \(Accessed Oct. 2021\).](#)

Medical Marijuana Certification

“Telemedicine” does not include the use of audio-only electronic technology by a physician to renew a written certification that was previously issued to the same patient.

“Telehealth certification” means the electronic assessment of a patient by a practitioner in connection with an application for a registry identification card under § 5 of Arkansas Constitution, Amendment 98, also known as the “Arkansas Medical Marijuana Amendment of 2016”.

SOURCE: [AR Code 17-80-402](#) as amended by [SB 703 \(2021\). \(Accessed Oct. 2021\).](#)

Drug-induced, chemical and surgical abortions shall not be performed by telemedicine.

SOURCE: [AR Admin Code 007 05 CARR 004. p. 22 \(Accessed Oct. 2021\).](#)

When a physician or other licensed prescriber authorizes or provides new prescriptions or refill medications to a pharmacy that is not physically located in this state or to a pharmacy that utilizes common carriers to deliver medications through the mail for a new patient who has not previously received pharmacist services or prescriptions filled through that pharmacy, that pharmacy shall:

- Establish a professional relationship between a pharmacist and the patient by telephone or telemedicine consult

See statute for additional requirements.

SOURCE: [AR Code 17-1-92-120](#) as amended by [SB 617 \(2021\)](#). [\(Accessed Oct. 2021\)](#).

CROSS-STATE LICENSING

Last updated 10/08/2021

An out-of-state physician utilizing an electronic medium who performs an act that is part of a patient care service that was initiated in Arkansas, including interpretation of an X-ray, that would affect the diagnosis or treatment, is engaged in the practice of medicine and subject to regulation by the Arkansas State Medical Board. This section does not apply to:

- The acts of a medical specialist located in another jurisdiction who provides only episodic consultation services;
- The acts of a physician located in another jurisdiction who is providing consultation services to a medical school;
- Decisions regarding the approval of coverage under any insurance or health maintenance organization plan;
- A service to be performed which is not available in the state;
- A physician physically seeing a patient in person in another jurisdiction; or
- Other acts exempted by the board by rule.

SOURCE: [AR Code Revised 17-95-206](#). [\(Accessed Oct. 2021\)](#).

Healthcare providers must be fully licensed or certified in Arkansas to provide services in the state unless the out-of-state provider is only providing episodic consultation services.

SOURCE: [AR Code 17-80-404\(d\)](#). [\(Accessed Oct. 2021\)](#).

LICENSURE COMPACTS

Last updated 10/07/2021

Member of Nurse Licensure Compact.

SOURCE: [Nurse Licensure Compact. Current NLC States and Status](#). [\(Accessed Oct. 2021\)](#).

Member of Physical Therapy Licensure Compact.

SOURCE: [PT Compact. Compact Map](#). [\(Accessed Oct. 2021\)](#).

Member of the Psychological Interjurisdictional Compact.

SOURCE: [Psypact Compact Map](#) & [AR HB 1760 \(2021\)](#). (Accessed Oct. 2021).

MISCELLANEOUS

Last updated 10/08/2021

No Reference Found

PROFESSIONAL BOARDS STANDARDS

Last updated 10/08/2021

For all medical professionals, see the 'Appropriate Use of Telemedicine' standards in statute.

SOURCE: [AR Code 17-80-404](#), (Accessed Oct. 2021).

AR Board of Examiners in Speech-Language Pathology and Audiology

SOURCE: [Rules and Regulations Board of Examiners in Speech-Language Pathology and Audiology, Sec. 12](#). (Accessed Oct. 2021).

AR Board of Physical Therapy

SOURCE: [Rule 007.36.20](#). (Accessed Oct. 2021).

AR Board of Nursing: Advanced Practice Registered Nurse

SOURCE: [Rule 67.00.17-005, Sec 14](#). (Accessed Oct. 2021).