

Ohio

Medicaid Program: Ohio Medicaid

Program Administrator: Ohio Department of Job and Family Services

Regional Telehealth Resource Center: Upper Midwest Telehealth Resource Center www.umtrc.org

Ohio Policy At-a-Glance

MEDICAID REIMBURSEMENT			PRIVATE PAYER LAW		PROFESSIONAL REQUIREMENTS	
LIVE VIDEO	STORE-AND-FORWARD	REMOTE PATIENT MONITORING	LAW EXISTS	PAYMENT PARITY	LICENSING COMPACT	CONSENT REQUIREMENT
✓	✗	✗	✓	✗	✗	✓

Ohio Detailed Policy

Medicaid Telehealth Reimbursement	Summary	Ohio Medicaid reimburses for live video telemedicine. They do not provide reimbursement for store-and-forward or remote patient monitoring
	Definitions	<p>Telehealth is the direct delivery of services to a patient via secure, synchronous, interactive, real-time electronic communication with both video and audio elements. This service can be utilized for all individuals enrolled in the Ohio Medicaid program and specific requirements may be found in Administrative Code rule 5160-1-18.</p> <p>Source: <i>The Ohio Department of Medicaid. Telehealth Billing Guide. Revised 6/25/19. (Accessed Feb. 2020).</i></p> <p>“Telehealth” is the direct delivery of health care services to a patient via secure, synchronous, interactive, real-time electronic communication comprised of both audio and video elements. The following activities are not considered telehealth:</p> <ul style="list-style-type: none"> • The delivery of health care service by electronic mail, telephone call, or facsimile transmission; • Conversations between practitioners regarding a patient without the patient present either physically or via secure, synchronous, interactive, real-time electronic communication. <p>Source: <i>OAC 5160-1-18(4). (Accessed Feb. 2020).</i></p> <p>“Telehealth service” means a health care service delivered to a patient through the use of interactive audio, video, or other telecommunications or electronic technology from a site other than the site where the patient is located.</p> <p>Source: <i>OH Revised Code, Sec. 5164.95. (Accessed Feb. 2020).</i></p>



Policy

Ohio Medicaid covers live video telemedicine for certain eligible providers, specific services and at specified originating sites.

Source: *The Ohio Department of Medicaid. Telehealth Billing Guide. Revised 6/25/19. (Accessed Feb. 2020).*

The department of Medicaid is required to establish standards for Medicaid payment for health care services the department determines are appropriate to be covered when provided as telehealth services.

Source: *OH Revised Code, Sec. 5164.95.(B) (Accessed Feb. 2020).*

Ohio Medicaid pays for eligible Medicaid-covered services provided through telehealth and identified in a student’s approved individualized education program (IEP).

Inmates of a penal facility or a public institution are not eligible for reimbursement for telehealth services.

Source: *OH Admin Code 5160-1-18(D). (Accessed Feb. 2020).*

Teledentistry

The department is required to establish standards for Medicaid payment for services provided through teledentistry.

Source: *OH Revised Code, Sec. 5164.951. (Accessed Feb. 2020).*

Eligible Services / Specialties

See fact sheet for list of eligible CPT codes.

Only one professional or institutional claim may be paid for a service delivered using telehealth. If the practitioner site does not bill the Ohio Department of Medicaid (ODM) directly (i.e., holds a contractual agreement with the practice), the patient site or practice who holds the contractual agreement may instead bill for the service delivered using telehealth.

Source: *The Ohio Department of Medicaid. Telehealth Billing Guide. Revised 6/25/19. (Accessed Feb. 2020).*

The following services are eligible for payment when delivered through telehealth from the practitioner site:

- When provided by a patient centered medical home, evaluation and management of a new patient described as “office or other outpatient visit” with medical decision making not to exceed moderate complexity.
- Evaluation and management of an established patient described as “office or other outpatient visit” with medical decision making not to exceed moderate complexity.
- Inpatient or office consultation for a new or established patient when providing the same quality and timeliness of care to the patient other than by telehealth is not possible
- Mental health or substance use disorder services described as “psychiatric diagnostic evaluation” or “psychotherapy”

Source: *OH Admin Code 5160-1-18(D). (Accessed Feb. 2020).*

Eligible Providers

Eligible providers:

- Physician and Psychiatrist
- Podiatrist
- Psychologist
- Physician Assistant
- Clinical Nurse Specialist
- Certified Nurse Midwife
- Certified Nurse Practitioner



- Licensed Independent Social Worker
- Licensed Independent Chemical Dependency Counselor
- Licensed Independent Marriage and Family Therapist
- Licensed Professional Clinical Counselor

Types of providers able to bill:

- Rendering practitioners listed above
- Professional Medical Group
- Federally Qualified Health Center
- Rural Health Clinic
- Public Health Department
- Primary Care Clinic
- Family Planning Clinic

There are special billing rules for FQHC and RHC billing (see manual).

For institutional claims, Ohio Medicaid will pay according to the Enhanced Ambulatory Patient Grouping (EAPG) pricing for:

- Licensed Clinical Psychologist
- Licensed Independent Social Worker (LISW)
- Licensed Independent Marriage and Family Therapist (LIMFT)
- Licensed Professional Clinical Counselor (LPCC)
- Licensed Independent Chemical Dependency Counselor (LICDC)

Source: *The Ohio Department of Medicaid. Telehealth Billing Guide. Revised 6/25/19. (Accessed Feb. 2020).*

The following practitioners are eligible to render services through telehealth:

- Physician
- Psychologist
- Physician Assistant
- Clinical nurse specialist, certified nurse-midwife or certified nurse practitioner
- Licensed independent social worker, licensed independent chemical dependency counselor, licensed independent marriage and family therapist, or licensed professional clinical counselor

The following provider types are eligible to bill for services rendered through telehealth:

- A practitioner listed in the previous list
- A professional medical group
- A FQHC or RHC
- The following ambulatory health care clinics: (1) Public health department; (2) primary care clinic; (3) Family planning clinic

Source: *OH Admin Code 5160-1-18(B). (Accessed Feb. 2020).*

“Patient site” is the physical location of the patient at the time a health care service is provided through the use of telehealth. The patient site may be one of the following locations:

- The office or service location of a:
 - Physician;
 - Psychologist;
 - Physician assistant;
 - Clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner; or
 - Licensed independent social worker, licensed independent chemical dependency counselor, licensed independent marriage and family therapist, or licensed professional clinical counselor

Eligible Sites

- The patient’s home
- School
- Inpatient hospital
- Outpatient hospital
- Nursing facility
- Intermediate care facility for individuals with an intellectual disability (ICF/IID)

The “practitioner site” is the physical location of the treating practitioner at the time a health care service is provided through the use of telehealth. The practitioner site shall not be the same location as the patient site.

Source: OAC 5160-1-18. (Accessed Feb. 2020).

Eligible Locations

- Practitioner’s office
- Patient’s home
- School
- Federally qualified health center (FQHC)
- Rural health clinic (RHC)
- Public health department
- Primary care clinic
- Family planning clinic
- Inpatient hospital
- Outpatient hospital
- Nursing facility
- Intermediate care facility for individuals with intellectual disability (ICF/IID)

Penal facility or public institution such as a jail or prison are excluded places of service. “Other place of service” (Code 99) is also not allowed. There are no other place of service restrictions as long as the patient is active, the practice is a patient centered medical home and the service provided is an inpatient or office consultation.

Source: The Ohio Department of Medicaid. Telehealth Billing Guide. Revised 6/25/19. (Accessed Feb. 2020).

Geographic Limits

No reference found.

Facility/Transmission Fee

No reference found.



Medicaid Telehealth Reimbursement

		Store-and-Forward
Remote Patient Monitoring	Policy	<p>Telehealth is defined as being “synchronous, interactive, real-time”, excluding the use of store-and-forward technology.</p> <p>Source: OAC 5160-1-18. (Accessed Feb. 2020). & The Ohio Department of Medicaid. Telehealth Billing Guide. Revised 6/25/19. (Accessed Feb. 2020).</p>
	Eligible Services/Specialties	No reference found.
	Geographic Limits	No reference found.
	Transmission Fee	No reference found.
Remote Patient Monitoring	Policy	No reference found.
	Conditions	No reference found.



Medicaid Telehealth Reimbursement

Remote Patient Monitoring	Provider Limitations	No reference found.
	Other Restrictions	No reference found.
Email / Phone / Fax	<p>Electronic mail, telephone and facsimile transmission are not telehealth.</p> <p>Source: <i>OH Admin. Code 5160-1-18(A)(4)(a). (Accessed Feb. 2020).</i></p>	
Consent	No reference found.	
Out of State Providers	No reference found.	
Miscellaneous	No reference found.	



Private Payer Laws	Definitions	<p>“Telemedicine services” means a mode of providing health care services through synchronous or asynchronous information and communication technology by a health care professional, within the professional’s scope of practice, who is located at a site other than the site where the recipient is located.</p> <p>Source: OH Revised Code Annotated, 3902.30(A)(5). (Accessed Feb. 2020).</p>	
	Requirements	<p>A health benefit plan shall provide coverage for telemedicine services on the same basis and to the same extent that the plan provides coverage for in-person health care services. Plans cannot exclude coverage for a service solely because it is provided as a telemedicine service.</p> <p>A health benefit plan may not impose any annual or lifetime benefit maximum on telemedicine services other than what is imposed on all benefits under the plan.</p> <p>Source: OH Revised Code Annotated, 3902.30. (Accessed Feb. 2020).</p>	
	Parity	Service Parity	<p>A health benefit plan shall provide coverage for telemedicine services on the same basis and to the same extent that the plan provides coverage for in-person health care services. Plans cannot exclude coverage for a service solely because it is provided as a telemedicine service.</p> <p>Source: OH Revised Code Annotated, 3902.30 (Accessed Feb. 2020).</p>
		Payment Parity	None.
Professional Regulation/Health & Safety	Definitions	<p>Physical Therapy Practice “Telehealth means the use of electronic communications to provide and deliver a host of health-related information and healthcare services, including, but not limited to physical therapy related information and services, over large and small distances.”</p> <p>Source: Source: OH Admin. Code 4755-27-01(10). (Accessed Feb. 2020).</p> <p>Speech Language Pathology Telehealth means the use of telecommunications and information technologies for the exchange of information from one site to another for the provision of audiology or speech-language pathology services to an individual from a provider through hardwire or internet connection.</p> <p>Source: Source: OH Admin. Code 4753-2-01(A)(10). (Accessed Feb. 2020).</p>	
	Consent	<p>Speech Language Pathology A provider is required to inform the patient of specific telehealth limitations.</p> <p>Source: OH Admin. Code 4753-2-01(D). (Accessed Feb. 2020).</p> <p>In order to prescribe a drug that is not a controlled substance to a patient the physician has never conducted a physical examination on, and who is located remote from the physician, the physician must obtain informed consent (“patient’s agreement or signed authorization”). Must be documented in patient’s record.</p> <p>Source: OH Admin. Code 4731-11-09. (Accessed Feb. 2020).</p>	



Online Prescribing

A physician shall not prescribe, personally furnish or otherwise provide, or cause to be provided any controlled substance or non-controlled substance to a person on whom the physician has never conducted a physical examination, with the exceptions listed below.

Non-Controlled Substances Exceptions

Prescribing is allowed when a patient is remote from the physician by complying with the following:

- Establish the patient's identity and physical location;
- Obtain the patient's informed consent;
- Forward medical record to patient's primary care provider (upon consent);
- Conduct an appropriate evaluation;
- Establish or confirm a diagnosis and treatment plan;
- Document information in patient's medical record;
- Provide or recommend appropriate follow-up care;
- Make medical record of the visit available to patient; and
- Use appropriate technology sufficient to conduct all steps.

Separate exceptions exist for prescribing controlled substances when the patient is remote from the physician. See regulation.

Source: OH Admin. Code 4731-11-09. (Accessed Feb. 2020).

A patient evaluation performed within the previous twenty-four months via telemedicine by a health-care provider acting within the scope of their professional license is acceptable for satisfying the criteria to be an "active patient".

Source: OAC 4731-11-01(D). (Accessed Feb. 2020).

Cross-State Licensing

Physical therapists and physical therapist assistants must hold a valid OH physical therapy license to treat a patient located in Ohio via telehealth.

Source: OH Admin. Code 4755-27-01(10)(b). (Accessed Feb. 2020).

Miscellaneous

A health care professional providing telemedicine services shall not charge a facility fee, an origination fee, or any fee associated with the cost of the equipment used to provide telemedicine services to a health plan issuer covering telemedicine services.

Source: OH Revised Code, Sec. 4731.2910. (Accessed Feb. 2020).

Professional Board Telehealth-Specific Regulations

- State Board of Speech Language Pathology and Audiology (OH Admin. Code 4753-2-01 - Accessed Feb. 2020)

