#### MEDICAL ASSISTANCE PROGRAM

#### State of Mississippi

# DESCRIPTIONS OF LIMITATIONS AS TO AMOUNT, DURATION AND SCOPE OF MEDICAL CARE AND SERVICES PROVIDED

#### **Telehealth Service**

- 1) Telehealth service is defined as the practice of health care delivery by a provider to a beneficiary who is under the care of a provider at a different geographical location.
- 2) The Division of Medicaid covers medically necessary health services to eligible Medicaid beneficiaries as specified in the State Plan. If a service is not covered in an in-person setting, it is not covered if provided through telehealth.
- 3) Telehealth service must be delivered in a real-time communication method that is:
  - a. Live;
  - b. Interactive; and
  - c. Audiovisual.
- 4) The originating or spoke site is defined as the physical location of the beneficiary at the time the telehealth service is provided via telecommunications system. Telehealth services are covered in the following originating sites:
  - a. Office of a physician or practitioner;
  - b. Outpatient Hospital (including a Critical Access Hospital (CAH));
  - c. Rural Health Clinic (RHC);
  - d. Federally Qualified Health Center (FQHC);
  - e. Community Mental Health/Private Mental Health Centers;
  - f. Therapeutic Group Homes;
  - g. Indian Health Service Clinic; or
  - h. School-based clinic.
- 5) The distant or hub site is defined as the physical location of the provider delivering the telehealth service via telecommunications system.
- 6) Telehealth services must be delivered by a participating Medicaid provider acting within their scope-of-practice at both the originating and distant site.
- 7) The following are not considered telehealth services and are not covered:
  - a. Telephone conversations;
  - b. Chart reviews;
  - c. Electronic mail messages;
  - d. Facsimile transmission;
  - e. Internet services for online medical evaluations; or
  - f. The installation or maintenance of any telecommunication devices or systems.

## State of Mississippi

#### METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES –OTHER TYPES OF CARE

### **Telehealth Services**

Payment for telehealth services is made as follows:

The originating or spoke site provider is paid a Mississippi Medicaid telehealth originating site facility fee per completed transmission. The originating site provider may not bill for an encounter or Evaluation and Management (E&M) visit unless a separately identifiable service is performed.

The distant or hub site provider is paid the current applicable Mississippi Medicaid fee for the telehealth service provided.

The Mississippi Medicaid telehealth originating site facility fee was calculated by an actuarial firm using the May 2013 Bureau of Labor Statistics (BLS) mean wage for Nurse Practitioners in MS adjusted by 35% for benefits and 2% for wage growth at half of the rate for 30 minute increments and is effective for services provided on or after January 1, 2015. The Mississippi Medicaid telehealth originating site facility fee is updated July 1 of each year based on the annual percentage change in the Medicare physician fee schedule for Level III Established Patient E&M code effective on January 1 of each year.

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of telehealth services. All rates are published on the Division of Medicaid's website at <u>http://www.medicaid.ms.gov/providers/fee-schedules-and-rates/</u>.