



Medicaid Access to Care and Delivery Reforms

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House Public Health Committee

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Medicaid Access to Care

Promoting access to care in rural and underserved areas

- Medicaid telemedicine and telehealth services
- Delivery System Reform Incentive Payment (DSRIP) projects
- Contract requirements for Medicaid Managed Care Organizations



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Medicaid Coverage

Typically, Medicaid distance medicine covers medical evaluation and management, and psychotherapy services, including:

- Psychiatric evaluations, medication management, and psychotherapy
- Acute care disease management, such as for allergies, sinus infections, and skin conditions
- Follow up care for a condition that has already been diagnosed, such as for diabetes
- Consultations with specialists for patients receiving emergency or inpatient care



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Telemedicine vs. Telehealth

Medicaid covers both telemedicine and telehealth services

Telemedicine

Eligible Providers:
Physicians or providers under a physician's delegation or supervision, including physician assistants, nurse practitioners, certified nurse specialists;
multispecialty groups; and hospitals

Reimbursement:
Potential for two charges – one at physician site and one at patient site

Telehealth

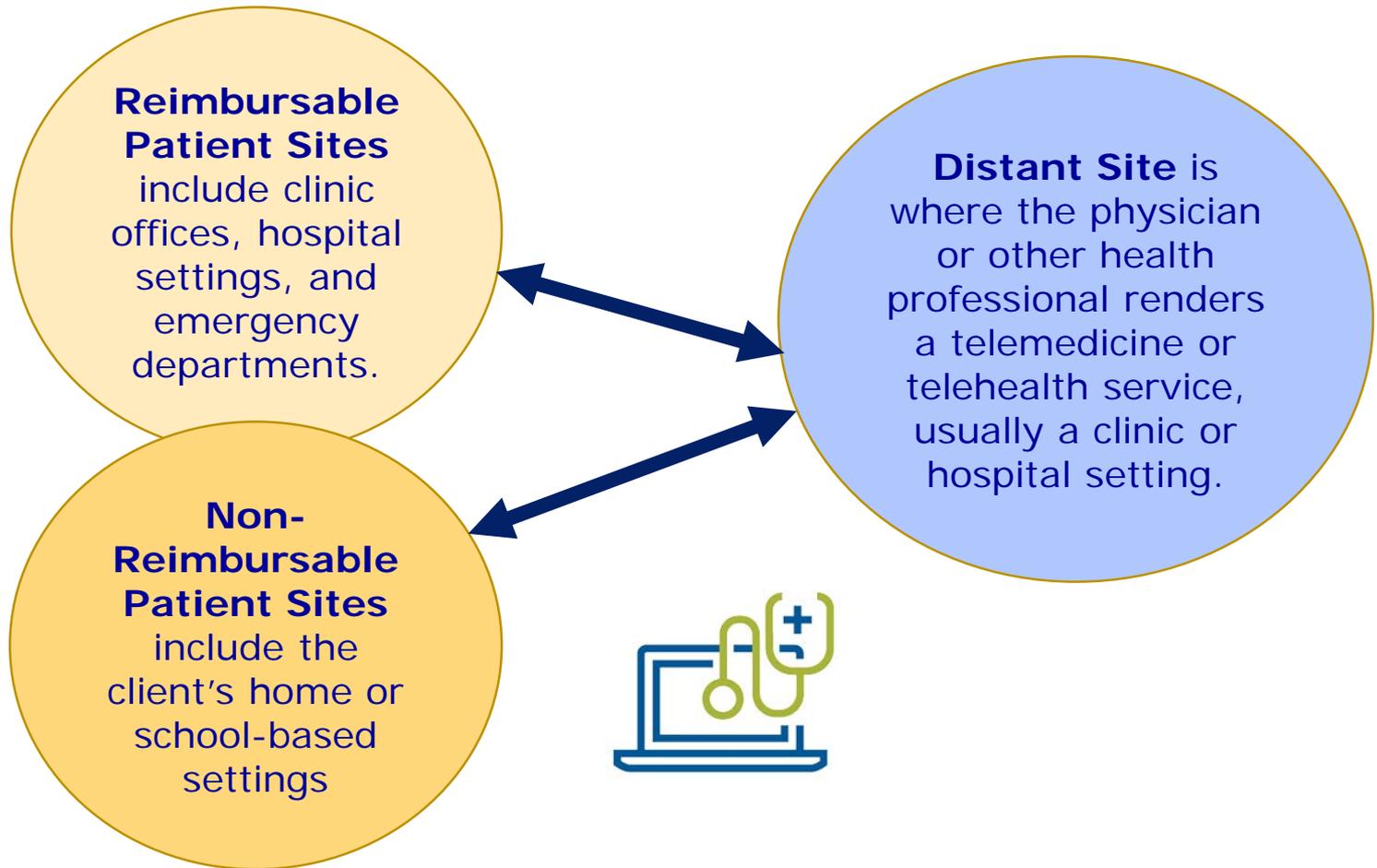
Eligible Providers:
Licensed professional counselors, licensed marriage and family counselors, licensed clinical social workers, psychologists, registered nurses, midwives, and dieticians

Reimbursement:
One charge at the provider site



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Patient & Distant Sites



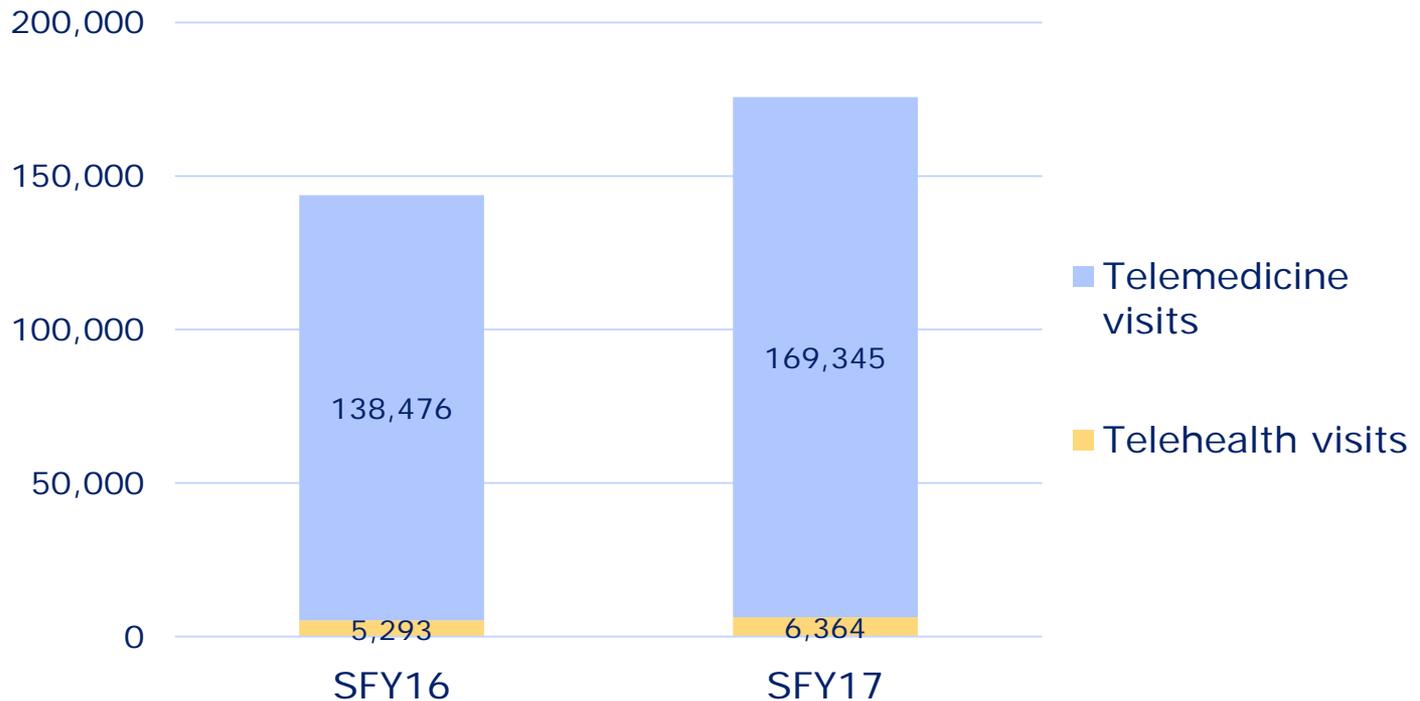
Health professionals are required at the patient site when telemedicine services are delivered to a child in a school-based setting.



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Medicaid Utilization

Texas Medicaid telemedicine and telehealth visits increased over 20 percent between State Fiscal Year 2016 to 2017

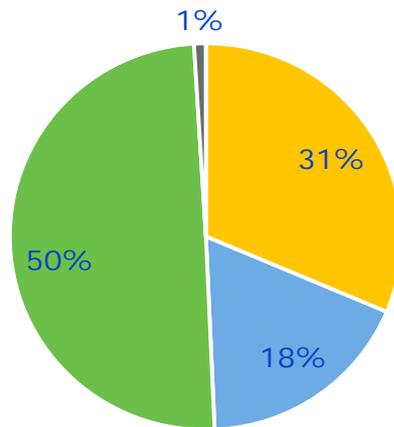




Patient & Provider Locations

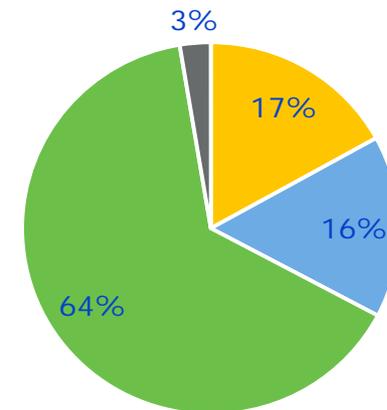
Nearly a third of Medicaid distance medicine patients live in rural areas. Eighty percent of Medicaid distance medicine providers practice in urban areas.

Patient location, SFY 17



■ Rural ■ Suburban ■ Urban ■ Unknown

Provider location, SFY 17



■ Rural ■ Suburban ■ Urban ■ Unknown



Legislation

85th Legislature, Regular Session, 2017

SB 1107

- Removes patient site presenter requirements as a condition of Texas Medicaid reimbursement.
 - Exception for school-based telemedicine services.
- Removes requirements for initial in-person, face-to-face visit between the physician and patient prior to telemedicine service as a condition of Texas Medicaid reimbursement.
- Allows a valid prescription to be generated from a telemedicine service for Texas Medicaid clients.

SB 922

- Adds occupational therapists and speech-language pathologists for Texas Medicaid distant site provider reimbursement for telehealth services delivered to children in school-based settings.



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DSRIP

1115 Waiver provides funding to support reforms to the delivery of care to Medicaid clients

- Approximately 80 DSRIP projects focused on telemedicine in the first six years of the 1115 waiver.
- In rural areas, providers received funds to address challenges. Examples include:
 - Hiring primary care physicians and specialty care physicians
 - Opening clinics or expanding clinic hours
 - Training and deploying community health workers
 - Implementing telemedicine networks, mobile crisis teams, or mobile health units
- DSRIP providers must report on quality outcome measures, including population health measures.