



WISCONSIN DEPARTMENT
of HEALTH SERVICES

Marjorie
Blaschko, LPC

Division of
Medicaid
Services

July 6, 2020

Telehealth Expansion

Stakeholder Engagement
Input Session

Agenda

- Overview of Telehealth Expansion
- Policy information specific to Crisis Intervention Services
- Input from attendees
- Questions from attendees

Questions During This Input Session

- During this meeting, send your questions and comments via Chat and they will be read and shared with others.

Questions After This Input Session

After this input session, send your questions and comments to dhstelehealth@dhs.wisconsin.gov:

- Use “Telehealth Crisis Intervention Services” in the subject line.
- Include the presentation date within your email if possible.

Overview of Telehealth Expansion

Expanded Telehealth Policy Vision

The expansion of telehealth services in Wisconsin broadens the definition of what is considered telehealth:

- Current definition
- Interactive services
- Remote patient monitoring
- Asynchronous services
- Provider-to-provider consults
- Medicare

Telehealth Definition

- A practice of health care delivery, diagnosis, consultation, treatment, or transfer of medically relevant data by means of audio, video, or data communications that are used either during a patient visit or consultation or are used to transfer medically relevant data about a patient.
- Division of Medicaid Services (DMS) may consider reimbursement for audio-only phone, fax, or email.

Interactive Services

Telehealth is delivered using multimedia communication technology that permits two-way, real-time, interactive communications between a provider at a distant site and the Medicaid member or the member's provider.

Interactive Services (Cont.)

- Current Policy: DMS reimburses for select services.
- New Policy: DMS will reimburse for additional functionally equivalent telehealth services.

Remote Patient Monitoring

Technology is used to collect medical and other forms of health data from individuals in one location and electronically transmit that information securely to health care providers in a different location for assessment and recommendations.

Remote Patient Monitoring (Cont.)

- Current Policy: DMS reimburses the majority of remote patient monitoring services.
- New Policy: DMS will reimburse for additional remote patient monitoring services.

Asynchronous Services

This is a mode of interaction used between two or more parties in which the exchange of information does not require simultaneous interactive participation.

Asynchronous Services (Cont.)

- Current Policy: DMS reimburses limited services delivered via asynchronous/store-and-forward telehealth.
- New Policy: DMS will reimburse for specific remote patient monitoring and asynchronous services.

Provider-to-Provider Consults

A patient's treating provider requests the opinion and/or treatment advice of a consultant with specific specialty expertise to assist the treating provider **without the need for the patient's face-to-face contact with the consultant.**

Provider-to-Provider Consults (Cont.)

- Current Policy: DMS does not reimburse separately for consultations between providers regarding a member.
- New Policy: DMS may reimburse separately for consultations between providers regarding a member.

Medicare

Services already covered under Medicare will be covered under Medicaid when possible.

Medicare (Cont.)

- Current Policy: DMS reimburses for select Medicare services delivered via telehealth.
- New Policy: DMS will reimburse for additional services covered under Medicare.

Transitioning to New Policy



The following priority service areas have been identified based on need and opportunity:

- School-based services
- Provider-to-provider consults
- Pharmacy medication therapy management
- Medicare parity
- Targeted case management
- Therapies (Occupational therapy, physical therapy, speech therapy)
- Home and community-based services
- Behavioral health (Mental health, substance abuse, behavioral treatment)
- Remote patient monitoring
- Dentistry
- Select asynchronous services

Policy Information Specific to Crisis Intervention Services

Crisis Intervention-Specific Policy

- Crisis Intervention Services-specific policy is required under Wis. Admin. Code ch. DHS 34 for the following:
 - Telephone service
 - Mobile crisis
 - Walk-in service
 - Short-term voluntary or involuntary hospital care

Crisis Intervention-Specific Policy (Cont.)

- Linkage and care coordination
- Services for children and adolescents and their families
- Current permanent policy covers Crisis Intervention Services rendered by professionals in Division of Quality Assurance-certified programs (S9484)

Crisis Intervention-Specific Policy (Cont.)

- Current temporary policy covers:
 - Audio-only services
 - All enrolled professional and paraprofessional providers
- Expanded telehealth policy will cover all enrolled professional providers

Program Area-Specific Policy

- Policy under consideration:
 - Audio-only services
 - Mobile crisis
 - Walk-in services
 - Services delivered by paraprofessionals

Input From Attendees

DHS Would Like to Know

Question 1

Do you have any comments or concerns on ForwardHealth's proposed definition of "face-to-face equivalence"?

DHS Would Like to Know (Cont.)

“Face-to-face equivalence for interactive telehealth services exists when a service is delivered from outside the physical presence of a Medicaid participant by using audio, video, or telecommunication technology, but only if there is no reduction in quality, safety, or effectiveness. Documentation must support the service rendered.”

DHS Would Like to Know (Cont.)

Question 2

What additional service areas should ForwardHealth consider for coverage in the next wave of telehealth implementation?

DHS Would Like to Know (Cont.)

Question 3

Can mobile crisis services be delivered via telehealth and still meet the intent of the service (that is, providing “on-site, in-person, and immediate” services)?

DHS Would Like to Know (Cont.)

Question 4

Can walk-in services be delivered via telehealth and still meet the requirement of being “face-to-face support and intervention”?

Questions From Attendees

What questions do you have?

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Resources

- Submit additional questions and concerns to our email box at dhstelehealth@dhs.wisconsin.gov.
- A DHS webpage and listserv are coming soon.

Thank you for your input.

Your input will help us with:

- Determining policy.
- Establishing best practices.
- Creating technical assistance.
- Sharing FAQs and resources.