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State/Territory Name: Maryland

State Plan Amendment (SPA) #: 13-30 Telemedecine

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Summary Form – CMS 179
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
150 S. Independence Mall West
Suite 216, The Public Ledger Building
Philadelphia, Pennsylvania 19106-3499



Region III/Division of Medicaid and Children's Health Operations

SWIFT #121920134014

MAR 10 2014

Charles J. Milligan Jr.
Deputy Secretary
Health Care Financing
Maryland Department of Health and Mental Hygiene
201 West Preston Street, Room 525
Baltimore, MD 21201

Dear Mr. Milligan:

Enclosed is a copy of the approved State Plan Amendment (SPA), Transmittal Number 13-30. This SPA adds Telemedicine Services to Maryland's State Plan. The effective date for this amendment is October 1, 2013.

If you have questions about this SPA, please contact Lieutenant Commander Andrea Cunningham of my staff at (215) 861-4325.

Sincerely,

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TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER: 13-30	2. STATE Maryland
	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE October 1, 2013	

5. TYPE OF PLAN MATERIAL (Check One):
 NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS NEW PLAN AMENDMENT
 COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION: N/A	7. FEDERAL BUDGET IMPACT: a. FFY 2013: \$ 2,372 b. FFY 2014: \$ 4,744
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8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Att 3.1A pg 9C-1 to 9C-3 Att. 4.19B pg 3 b	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): NEW
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10. SUBJECT OF AMENDMENT: The addition of Telemedicine Services to Maryland's State Plan

11. GOVERNOR'S REVIEW (Check One):
 GOVERNOR'S OFFICE REPORTED NO COMMENT
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL
 OTHER, AS SPECIFIED:
 Susan J. Tucker, Executive Director
 Office of Health Services

12. SIGNATURE OF STATE AGENCY OFFICIAL: <i>CSJ</i>	16. RETURN TO: Susan J. Tucker, Executive Director OHS - DHMH 201 W. Preston St., 1 st floor Baltimore, MD 21201
13. TYPED NAME: Charles J. Milligan, Jr.	
14. TITLE: Deputy Secretary, Office of Health Care Financing	
15. DATE SUBMITTED: 12/18/13	

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED: 12/18/13	18. DATE APPROVED: MAR 10 2014
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PLAN APPROVED -- ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL: OCTOBER 1, 2013	20. SIGNATURE OF REGIONAL OFFICIAL: <i>[Signature]</i>
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21. TYPED NAME: [REDACTED] R. DUCHO

23. REMARKS:
 Pen and ink corrections requested by State administrators
 Gr boxex 7 and 8.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY State of
Maryland

Telemedicine

Description of Telemedicine Services

- 1) The following programs are approved for telemedicine services:
 - a. The Rural Access Telemedicine Program, which provides eligible participants in designated rural geographic areas access to specialists when none are available to provide timely consultation and diagnostic evaluation; and
 - b. The Cardiovascular Disease and Stroke Telemedicine Program, which provides services to participants when no specialist is available to provide timely consultation and diagnostic evaluation for cardiovascular disease or stroke care.
- 2) The Program covers the following:
 - a. Medically necessary services and procedures covered under the Title XIX State Plan that are delivered via telemedicine; and
 - b. A telemedicine transmission fee for originating site providers
- 3) A service that requires prior authorization when performed in an office setting will be subject to the same requirement when performed via telemedicine.
- 4) Maryland Medicaid participants must consent to telemedicine services unless there is an emergency that prevents obtaining consent.

Definition of Services and Service Areas

- 1) Telemedicine is the practice of health care delivery by a practitioner, who is located at a distant site, to a site where the patient is located, known as the originating site, for the purpose of:
 - a. Consultation;
 - b. Evaluation;
 - c. Diagnosis; or
 - d. Recommendation of treatment.
- 2) Telemedicine must be delivered in a communication method that is:
 - a. Live;
 - b. Interactive; and
 - c. Audiovisual.
- 3) Telemedicine services are limited to the following approved telehealth originating sites:
 - a. For the Rural Access Telemedicine Program:
 1. FQHC;
 2. Hospitals, including emergency departments;
 3. Physicians;

4. Nurse practitioners;
 5. Nurse midwives;
 6. Free-standing renal dialysis centers;
 7. Local health departments; and
 8. Nursing facilities.
- b. For the Cardiovascular Disease and Stroke Telemedicine Program:
1. Maryland hospitals
- 4) For the purposes of the Rural Access Telemedicine Program, the following jurisdictions are designated rural geographic areas of Maryland:
- a. Allegany County;
 - b. Calvert County;
 - c. Caroline County;
 - d. Carroll County;
 - e. Cecil County;
 - f. Charles County;
 - g. Dorchester County;
 - h. Frederick County;
 - i. Garrett County;
 - j. Harford County;
 - k. Kent County;
 - l. Queen Anne's County;
 - m. Somerset County;
 - n. St. Mary's County;
 - o. Talbot County;
 - p. Washington County;
 - q. Wicomico County; and
 - r. Worcester County.
- 5) Distant site providers are defined as the following:
- a. For the Rural Access Telemedicine Program:
 1. Providers must be licensed as:
 - i. FQHCs;
 - ii. Physicians;
 - iii. Nurse practitioners; and/or
 - iv. Nurse midwives.
 - b. For the Cardiovascular Disease and Stroke Telemedicine Program:
 1. Providers must be licensed physicians.
 - c. For both telemedicine programs, distant site providers must only be located in the following areas:
 1. Maryland;
 2. The District of Columbia, or;
 3. A contiguous state to Maryland

Qualifications for Telemedicine Providers

TN # 13-30

Supersedes TN # NEW

Approval Date MAR 10 2014

Effective Date OCT 01 2013

Providers shall:

1. Be enrolled in the appropriate telemedicine program(s) (Maryland Medicaid Rural Access Telemedicine Program and/or the Maryland Medicaid Cardiovascular Disease and Stroke Telemedicine Program);
2. Meet all requirements for their discipline as specified in the Medicaid State Plan;
3. As Originating and Distant site providers, be engaged in agreements;
4. Act within their scope of practice;
5. Be licensed to practice medicine in the State of Maryland; and
6. Attest that their equipment follow all minimum guidelines provided within the most recent telemedicine manual.

Limitations

- 1) The program will not reimburse for the acquisition of equipment necessary to facilitate telemedicine interaction.
- 2) A service provided through telemedicine is subject to the same program coverage limitations that exist for the service when provided in an office setting.
- 3) The Program will not cover any of the following related to telemedicine service delivery:
 - a. Telemedicine services that are interrupted by technical difficulties;
 - b. Consultation that occurs during ambulance transport;
 - c. Services that cannot reasonably be delivered using telemedicine;
 - d. Transmission fees for distant site providers; or
 - e. Services that do not meet the Program's definition of telemedicine.
- 4) Services will not be considered telemedicine if they are:
 - a. Telephone conversations,
 - b. Chart reviews,
 - c. Electronic mail messages,
 - d. Facsimile transmissions, or
 - e. Internet services for online medical evaluations.

TN # 13-30Supersedes TN # NEW

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY
ACT State of Maryland

Methods and Standards for Establishing Payment Rates - Telemedicine Services

Effective for services provided on or after October 1, 2013, payments for Telemedicine Services as defined per Section 3.1A pg 9C-1 shall be paid as followed. The fee schedule for telemedicine-provided services is the same as services provided in the office setting and is available at the Maryland Medicaid Provider Information Page at the link below and is the same for both governmental and private individual practitioners, except where otherwise noted in the Medicaid State Plan.

<https://mmcp.dhmh.maryland.gov/SitePages/Provider%20Information.aspx>

1. The telemedicine originating site facility fee is 100 percent of Medicare when provided in community out-patient settings.
2. The telemedicine originating site facility fee is 94 percent when provided in a hospital setting.
3. If either the delivering or originating site telemedicine fee methodology conflicts with State-defined reimbursement methodology for the particular provider type, the existing reimbursement methodology will apply.
4. Separate reimbursement is not made for the use of technological equipment and system associated with a telemedicine application to render the service.

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