TO: All Medicaid Providers Billing for Services under the Fee Schedule

FROM: Melisa Byrd, Senior Deputy Director and State Medicaid Director

DATE: March 13, 2020

SUBJECT: Medicaid-Reimbursable Telemedicine Services: Reimbursement for Healthcare Services Delivered to a Beneficiary in their Home via Telemedicine

The purpose of this transmittal is to notify all Medicaid providers of changes to the standards governing Medicaid reimbursement of health services provided to a beneficiary in their home via telemedicine pursuant to new rules promulgated on March 12, 2020 and December 13, 2019. On March 12, 2020, DHCF adopted an emergency and proposed rule that established authority for Medicaid reimbursable services to be delivered in a beneficiary’s home to ensure the health, safety, and welfare of residents is not threatened by a lapse of in-person access to covered healthcare services due to the threat of infection with COVID-19. On December 13, 2019, DHCF issued final rules to establish the authority to provide Medicaid reimbursable services via telemedicine. This transmittal provides additional guidance related to these new authorities to support adoption.

The March 13, 2020 emergency and proposed rule authorizes Medicaid to reimburse providers for health services delivered to a beneficiary in their home via telemedicine and clarifies that distant site providers are responsible for ensuring that technology in use meets the standard of care when the beneficiary’s home is the originating site. In addition, the rule outlines the standards governing eligibility for Medicaid beneficiaries receiving healthcare services via telemedicine under the Medicaid fee-for-service and MCO program.

This emergency and proposed rulemaking updates DHCF’s Medicaid-Reimbursable Telemedicine Services Notice of Final Rulemaking, which was published in the DC Register on Friday, December 13, 2019. Per the notice, the final rule was adopted on November 26, 2019 and became effective for eligible services rendered on or after that date. This final rule memorializes standards governing the provision of certain Medicaid reimbursable services via telemedicine, including eligible providers, services, and expected processes for service delivery and reimbursement. The attached telemedicine provider guidance document provides additional guidance and information regarding providers authorized to bill for services delivered via telemedicine, services that can be delivered via telemedicine, and how providers should bill for these services.
If you have any questions regarding this transmittal, please contact Jordan Kiszla in the Health Care Reform and Innovation Administration at Jordan.Kiszla@dc.gov or by telephone at 202-442-9055.

cc: Medical Society of the District of Columbia
    DC Hospital Association
    DC Primary Care Association
    DC Health Care Association
    DC Home Care Association
    DC Behavioral Health Association
    DC Coalition of Disability Service Providers