



Community Care Plan

The **Health Plan** with a Heart



Provider Guide to Telemedicine

Overview

Telemedicine involves the provision of healthcare services where the practitioner and patient are in different locations. Practitioners who are licensed within their scope of practice are eligible to offer telemedicine services. These services must be conducted through interactive telecommunications equipment that includes both audio and video capabilities, allowing for real-time, two-way communication. Providers must ensure that their telemedicine technology complies with the technical safeguards outlined in 45 CFR § 164.312 to protect patient data privacy and security.

Covered Services

Providers may use telemedicine for the following services, in accordance with the standards outlined in AHCA's Medicaid Services Coverage and Limitations Handbook:

- Practitioner services
- Behavioral health services
- Dental services

Requirements

- Currently contracted and credentialed through the CCP MMA network
- Appropriately licensed in the State of Florida
- The equipment used must meet the definition of telecommunication equipment as specified in the AHCA contract

Telemedicine Billing

Reimbursement is provided for telemedicine services carried out via interactive telecommunications equipment, including audio and video features that allow two-way, real-time communication between patient and practitioner.

Florida Medicaid reimburses the practitioner who provides the evaluation, diagnosis or treatment recommendation and is at a site other than where the recipient is located. Practitioners must include modifier GT procedure code. The practitioner must implement telemedicine fraud and abuse protocols.

Providers must ensure the following for telemedicine billing:

- Conduct two-way, real-time interactive communication with the patient, involving both audio and video
- Use HIPAA-compliant technology
- Obtain informed consent from the patient for telemedicine
- Offer the patient the option between a face-to-face visit or telemedicine, and document the choice in the medical record
- Use Modifier GT on the CMS-1500 claim form

Reimbursement is not provided for telephone conversations, chart reviews, emails, or faxes. Referral, notification, and prior authorization requirements still apply, and telemedicine services must align with the provider's scope of practice.

We agree to expand telemedicine options by covering store-and-forward and remote patient monitoring services, when appropriate. As part of our quality program, we will cover:

Remote Patient Monitoring

- The collection and interpretation of physiological data (e.g., ECG, blood pressure, glucose monitoring) that is digitally stored and/or transmitted by the patient or caregiver to a qualified healthcare professional.
- For example, a home health provider may equip patients with chronic conditions with tablets that transmit data on their vital signs, such as blood pressure and heart rate, directly to healthcare professionals for ongoing monitoring.

Store-and-Forward

- The asynchronous transmission of medical information allows it to be reviewed by a physician or practitioner at a distant site at a later time. This means medical information will be electronically transmitted to a secure location for storage before being sent to another doctor for review.
- For example, medical information like digital images, documents, and pre-recorded videos can be transmitted electronically.

Benefits of Telemedicine for patients

- No travel expenses or time
- Privacy
- No exposure to other potentially contagious patients
- Less time away from work

Benefits of Telemedicine for providers

- Enhanced Revenue
- Improved patient follow-up and health outcomes
- Reduction in missed appointments and cancellations

Enrollees Welcome Packet

- Enrollees will receive a welcome packet and an onboarding call informing them of their eligibility for telemedicine services
- CCP's website also provides information about the telemedicine services available to our enrollees, along with instructions on how they can access these services from any location

Compliance

Compliance will be monitored through the following methods:

- Annual oversight audits
- Tracking and monitoring of provider and member complaints
- Reporting any findings to the Quality Improvement Committee

Resources

Additional provider education and resources on telemedicine are available through the following links:

Agency for Healthcare Administration website:

- http://ahca.myflorida.com/medicaid/review/specific_policy.shtml

Provider Academy via the web portal:

- <https://www.ccpcares.org/top-pages/providers/providers%20academy>

The telemedicine attestation request form is available at: [CCPcares.org](https://www.ccpcares.org)

For questions or assistance, please contact your Provider Operations representative or the Provider Operations Hotline at 1-855-919-9506.