



AT A GLANCE

MEDICAID PROGRAM

Michigan Medicaid

ADMINISTRATOR

Michigan Dept. of Community Health

REGIONAL TELEHEALTH RESOURCE CENTER

[Upper Midwest Telehealth Resource Center](#)

MEDICAID REIMBURSEMENT

Live Video: Yes

Store-and-Forward: No

Remote Patient Monitoring: No

PRIVATE PAYER LAW

Law Exists: Yes

Payment Parity: No

PROFESSIONAL REQUIREMENTS

Licensure Compacts: IMLC

Consent Requirements: Yes

COVID-19

ORIGINATING SITE

Last updated 02/28/2021

Medicaid: [General Telemedicine Policy](#)

STATUS: Active, until 30 days after end of MI State of Emergency

Office of the Governor: [Executive Order on Telehealth](#)

STATUS: Rescinded

Medicaid: [Telemedicine Reimbursement for FQHCs, RHCs, Tribal Health Centers](#)

STATUS: Active, time limited policy and MDHHS will notify providers of its termination

Medicaid: [Medicaid Compliance with Interim Final Rule CMS-5531: Improving Care Planning for Medicaid Home Health Services; COVID-19 Response: Temporary Waiver of Beneficiary Signature for Home-Delivered DMEPOS](#)

STATUS: Active, time limited policy and MDHHS will notify providers of its termination

Medicaid: [Correction to Bulletin MSA 20-35, Medicaid Compliance with Interim Final Rule CMS-5531: Improving Care Planning for Medicaid Home Health Services;](#)

STATUS: Active, time limited policy and MDHHS will notify providers of its termination

Medicaid 1915(c) Waiver: [Appendix K -MI Health Link Home and Community Based Services Waiver](#)

STATUS: Expired February 28, 2021

Medicaid 1915(c) Waiver: [Appendix K – MI Choice](#)

STATUS: Expired February 28, 2021

Medicaid 1915(c) Waiver: Appendix K – [Habilitation Supports, Children’s Waiver Program \(CWP\) Waiver for Children with Serious Emotional Disturbances \(SEDW\)](#)

STATUS: Expired February 28, 2021

PROVIDER TYPE

Last updated 02/28/2021

Medicaid: [General Telemedicine Policy](#).

STATUS: Active, until 30 days after end of MI State of Emergency

Medicaid: [Telemedicine Policy Changes, Physical, Occupational and Speech Therapy](#)

STATUS: Active, time limited policy and MDHHS will notify providers of its termination

Medicaid: [Telemedicine Reimbursement for FQHCs, RHCs, Tribal Health Centers](#)

STATUS: Active, time limited policy and MDHHS will notify providers of its termination

Medicaid: [Medicaid Compliance with Interim Final Rule CMS-5531: Improving Care Planning for Medicaid Home Health Services; COVID-19 Response: Temporary Waiver of Beneficiary Signature for Home-Delivered DMEPOS](#)

STATUS: Active, time limited policy and MDHHS will notify providers of its termination

Medicaid: [Correction to Bulletin MSA 20-35, Medicaid Compliance with Interim Final Rule CMS-5531: Improving Care Planning for Medicaid Home Health Services;](#)

STATUS: Active, time limited policy and MDHHS will notify providers of its termination

Medicaid 1915(c) Waiver: [Appendix K – MI Choice](#)

STATUS: Expired February 28, 2021

Medicaid 1915(c) Waiver: Appendix K – [Habilitation Supports, Children’s Waiver Program \(CWP\) Waiver for Children with Serious Emotional Disturbances \(SEDW\)](#)

STATUS: Expired February 28, 2021

SERVICE EXPANSION

Last updated 02/28/2021

Medicaid: [General Telemedicine Policy](#).

STATUS: Active, until 30 days after end of MI State of Emergency

Medicaid: [Specialty Behavioral Health Supports and Services](#)

STATUS: Active, time limited policy and MDHHS will notify providers of its termination

Office of the Governor: [Executive Order on Telehealth](#)

STATUS: Rescinded

Medicaid: [Limited Oral Evaluation via Telemedicine](#)

STATUS: Active, time limited policy however expiration date not specified

Medicaid: [Behavioral Health Telepractice; Telephone Services](#)

STATUS: Active, time limited policy and MDHHS will notify providers of its termination

Medicaid: [Telemedicine Policy Changes, Physical, Occupational and Speech Therapy](#)

STATUS: Active, time limited policy and MDHHS will notify providers of its termination

Medicaid: [Telemedicine Policy Rate Change](#)

STATUS: Active, time limited policy however expiration date not specified

Medicaid: [Telemedicine Policy Change for Audiology](#)

STATUS: Active, time limited policy and MDHHS will notify providers of its termination

Medicaid: [Medicaid Compliance with Interim Final Rule CMS-5531: Improving Care Planning for Medicaid Home Health Services; COVID-19 Response: Temporary Waiver of Beneficiary Signature for Home-Delivered DMEPOS](#)

STATUS: Active, time limited policy and MDHHS will notify providers of its termination

Medicaid: [Correction to Bulletin MSA 20-35, Medicaid Compliance with Interim Final Rule CMS-5531: Improving Care Planning for Medicaid Home Health Services;](#)

STATUS: Active, time limited policy and MDHHS will notify providers of its termination

Medicaid 1915(c) Waiver: Appendix K – [Habilitation Supports, Children’s Waiver Program \(CWP\) Waiver for Children with Serious Emotional Disturbances \(SEDW\)](#)

STATUS: Expired February 28, 2021

AUDIO-ONLY DELIVERY

Last updated 02/28/2021

Medicaid: [Telemedicine Policy Expansion](#)

STATUS: Active, until 30 days after end of MI State of Emergency

Medicaid: [Relaxing Face-to-Face Requirement \(Update\)](#)

STATUS: Active, time limited policy and MDHHS will notify providers of its termination

Medicaid: [Specialty Behavioral Health Supports and Services](#)

STATUS: Active, time limited policy and MDHHS will notify providers of its termination

Office of the Governor: [Executive Order on Telehealth](#)

STATUS: Rescinded

Medicaid: [Limited Oral Evaluation via Telemedicine](#)

STATUS: Active, time limited policy however expiration date not specified

Medicaid: [Behavioral Health Telepractice; Telephone Services](#)

STATUS: Active, time limited policy and MDHHS will notify providers of its termination

Medicaid: [Telemedicine Reimbursement for FQHCs, RHCs, Tribal Health Centers](#)

STATUS: Active, time limited policy and MDHHS will notify providers of its termination

Medicaid: [Medicaid Compliance with Interim Final Rule CMS-5531: Improving Care Planning for Medicaid Home Health Services; COVID-19 Response: Temporary Waiver of Beneficiary Signature for Home-Delivered DMEPOS](#)

STATUS: Active, time limited policy and MDHHS will notify providers of its termination

Medicaid: [Correction to Bulletin MSA 20-35, Medicaid Compliance with Interim Final Rule CMS-5531: Improving Care Planning for Medicaid Home Health Services;](#)

STATUS: Active, time limited policy and MDHHS will notify providers of its termination

Medicaid 1915(c) Waiver: [Appendix K -MI Health Link Home and Community Based Services Waiver](#)

STATUS: Expired February 28, 2021

Medicaid 1915(c) Waiver: [Appendix K – MI Choice](#)

STATUS: Expired February 28, 2021

Medicaid 1915(c) Waiver: Appendix K – [Habilitation Supports, Children’s Waiver Program \(CWP\) Waiver for Children with Serious Emotional Disturbances \(SEDW\)](#)

STATUS: Expired February 28, 2021

EASING PRESCRIBING REQUIREMENTS

Last updated 09/02/2021

Office of the Governor: [Executive Order on Telehealth](#)

STATUS: Rescinded

Office of Governor: [Executive order Encouraging Telehealth Services](#)

STATUS: Rescinded

EASING CONSENT REQUIREMENTS

Last updated 02/28/2021

Medicaid: [General Telemedicine Policy](#)

STATUS: Active, until 30 days after end of MI State of Emergency

Medicaid: [Relaxing Face-to-Face Requirement \(Update\)](#)

STATUS: Active, time limited policy and MDHHS will notify providers of its termination

Office of the Governor: [Executive Order on Telehealth](#)

STATUS: Rescinded

Office of Governor: [Executive order Encouraging Telehealth Services](#)

STATUS: Rescinded

Medicaid 1915(c) Waiver: Appendix K – [Habilitation Supports, Children’s Waiver Program \(CWP\) Waiver for Children with Serious Emotional Disturbances \(SEDW\)](#)

STATUS: Expired February 28, 2021

CROSS-STATE LICENSING

Last updated 09/02/2021

Office of the Governor: [Executive Order on Telehealth](#)

STATUS: Rescinded

PRIVATE PAYER

Last updated 09/02/2021

Office of the Governor: [Executive Order on Telehealth](#)

STATUS: Rescinded

MISCELLANEOUS

Last updated 09/02/2021

HB 6030: [Liability Insurance](#)

STATUS: Enacted

SB 1024: [Liability Insurance](#)

STATUS: Died

Medicaid

OVERVIEW

Last updated 09/01/2021

Michigan Medicaid reimburses for live video telemedicine for certain healthcare professionals, for patients located at certain originating sites for specific services. There is no reimbursement for store-and-forward or remote patient monitoring.

DEFINITIONS

Last updated 09/01/2021

“Telemedicine” means the use of an electronic media to link patients with health care professionals in different locations. To be considered telemedicine under this section, the health care professional must be able to examine the patient via a health insurance portability and accountability act of 1996, Public Law 104-191 compliant, secure interactive audio or video, or both, telecommunications system, or through the use of store and forward online messaging.

SOURCE: [MI Compiled Law Services, Section 330.1100\(d\)](#), (Accessed Sept. 2021).

“Telemedicine” means that term as defined in section 3476 of the insurance code:

“Telemedicine means the use of an electronic media to link patients with health care professionals in different locations. To be considered telemedicine, the health care professional must be able to examine the patient via a HIPPA compliant, secure real-time, interactive audio or video, or both, telecommunications system, or through the use of store and forward online messaging.”

SOURCE: [MI Compiled Law Svcs. Sec. 500.3476\(2\)\(b\)](#) (Accessed Sept. 2021).

“Telemedicine is the use of telecommunication technology to connect a patient with a health care professional in a different location. MDHHS requires a real time interactive system at both the originating and distant site, allowing instantaneous interaction between the patient and health care professional via the telecommunication system. Telemedicine should be used primarily when travel is prohibitive for the beneficiary or there is an imminent health risk justifying immediate medical need for services.”

SOURCE: [MI Dept. of Health and Human Services, Medicaid Provider Manual, p.1718, Jul. 2021 \(Accessed Sept. 2021\).](#)

Assertive Community Treatment Program (ACT)

Telepractice is the use of telecommunications and information technologies for the provision of psychiatric services to ACT consumers and is subject to the same service provisions as psychiatric services provided in-person.

SOURCE: [MI Dept. of Health and Human Services, Medicaid Provider Manual, p. 349 Jul. 2021 \(Accessed Sept. 2021\).](#)

Behavioral Health Treatment Services (BHT)

Telepractice is the use of telecommunications and information technologies for the exchange of encrypted patient data for the provision of services (e.g., access or travel to needed medical services may be prohibitive). Telepractice must be obtained through real-time interaction between the child’s physical location (patient site) and the provider’s physical location (provider site). Telepractice services are provided to patients through hardwire or internet connection.

SOURCE: [MI Dept. of Health and Human Services, Medicaid Provider Manual, p. 477 Jul. 2021 \(Accessed Sept. 2021\).](#)

Medication Therapy Management

Telepractice is the use of telecommunications and information technologies for the exchange of encrypted patient data for the provision of services. Telepractice must be obtained through real-time interactions between the beneficiary's physical location (origin site) and the pharmacist provider's physical location (distant site). Telepractice services are provided to beneficiaries through hardwire or internet connection.

SOURCE: [MI Dept. of Health and Human Services, Medicaid Provider Manual, p. 1643 Jul. 2021 \(Accessed Sept. 2021\).](#)

Speech, Language and Hearing Therapy

“Telepractice is the use of telecommunications and information technologies for the exchange of encrypted patient data for the provision of speech, language and hearing services. Telepractice must be obtained through real-time interaction between the patient's physical location (patient site) and the provider's physical location (provider site).” Services are provided to patients through hardwire or internet connection.

SOURCE: [MI Dept. of Health and Human Services Medicaid Provider Manual, p. 1814 Jul. 2021 \(Accessed Sept. 2021\).](#)

Child Therapy

Telepractice/Telehealth is the use of telecommunications and information technologies for the exchange of encrypted patient data for the provision of services (e.g., access or travel to needed therapy services may be prohibitive). Telepractice/Telehealth must be obtained through real-time interaction between the child's/family's physical location and the provider's physical location. Telepractice/Telehealth services are provided to patients through hardwire or internet connection.

SOURCE: [MI Dept. of Health and Human Services Medicaid Provider Manual, p. 334, Jul. 2021. \(Accessed Sept. 2021\).](#)

LIVE VIDEO

Last updated 02/28/2021

POLICY

MDHHS requires a real time interactive system at both the originating and distant site, allowing instantaneous interaction between the patient and health care professional via the telecommunication system. Telemedicine should be used primarily when travel is

prohibitive for the beneficiary or there is an imminent health risk justifying immediate medical need for services.

Source: [Dept. of Health and Human Services, Medicaid Provider Manual, p. 1688. Jan. 2021 \(Accessed Feb. 2021\).](#)

Assertive Community Treatment Program

All telepractice interactions shall occur through real-time interactions between the ACT consumer and the physician/nurse practitioner/clinical nurse specialist from their respective physical location. Psychiatric services are the only ACT services that are approved to be provided in this manner.

SOURCE: [MI Dept. of Health and Human Services, Medicaid Provider Manual, p. 355-356 Jan. 2021 \(Accessed Feb. 2021\).](#)

ELIGIBLE SERVICES/SPECIALTIES

Michigan Medicaid reimburses for the following service categories via live video:

- ESRD-related services
- Behavior change intervention
- Behavioral Health and/or Substance Use Disorder Treatment
- Education Services, Telehealth
- Inpatient consultations
- Nursing facility subsequent care
- Office or other outpatient consultations
- Office or other outpatient services
- Psychiatric diagnostic procedures
- Subsequent hospital care
- Training service – Diabetes (see Diabetes Self-Management Education Training Program section in Hospital Chapter specific program requirements)

Where face-to-face visits are required (such as ESRD and nursing facility related services), the telemedicine service may be used in addition to the required face-to-face visit but cannot be used as a substitute. There must be at least one face-to-face hands-on visit (i.e., not via telemedicine) by a physician, physician's assistant or advanced practice registered nurse per month to examine the vascular site for ESRD services. The initial visit for nursing facility services must be face-to-face.

Providers at the distant site can only bill services listed in the Telemedicine Services database.

Procedure codes and modifier information is contained in the MDHHS Telemedicine Services Database.

SOURCE: [Dept. of Health and Human Services, Medicaid Provider Manual, p. 1688- 1689, Jan. 2021 \(Accessed Feb. 2021\).](#)

Speech-Language and Audiology Services

Speech, language and hearing services may be reimbursed. Requires an annual referral from a physician.

SOURCE: [MI Dept. of Health and Human Services, Medicaid Provider Manual, p. 1784, Jan. 2021 \(Accessed Feb. 2021\).](#)

Assertive Community Treatment Program

The telepractice modifier, 95, must be used in conjunction with ACT encounter reporting code H0039 when telepractice is used.

SOURCE: [MI Dept. of Health and Human Services, Medicaid Provider Manual, p. 355 Jan. 2021 \(Accessed Feb. 2021\).](#)

Telepractice for BHT Services

Telepractice services must be prior authorized. Telepractice must be obtained through real-time interaction between the child's physical location (patient site) and the provider's physical location (provider site). Telepractice services are provided to patients through hardwire or internet connection. It is the expectation that providers, facilitators, and staff involved in telepractice are trained in the use of equipment and software prior to servicing patients, and services provided via telepractice are provided as part of an array of comprehensive services that include in-person visits and assessments with the primary

supervising BHT provider. Qualified providers of behavioral health services are able to arrange telepractice services for the purposes of teaching the parents/guardians to provide individualized interventions to their child and to engage in behavioral health clinical observation and direction (i.e. increase oversight of the provision of services to the beneficiary to support the outcomes of the behavioral plan of care developed by the primary supervising BHT provider).

SOURCE: [MI Dept. of Health and Human Services, Medicaid Provider Manual, p. 482-483 Jan. 2021 \(Accessed Feb. 2021\).](#)

Child Therapy

A child mental health professional may provide child therapy on an individual or group basis with a family-driven, youth-guided approach. Telepractice/Telehealth is approved for Individual Therapy or Family Therapy using approved children's

evidence-based practices (i.e., Trauma Focused Cognitive Behavioral Therapy, Parent Management Training-Oregon, Parenting Through Change) and utilizes the GT modifier when reporting the service. Qualified providers of children's evidence-based practices have completed their training in the model, its implementation via telehealth, and are able to provide the practice with fidelity.

SOURCE: [MI Dept. of Health and Human Services Medicaid Provider Manual, p. 338, Oct. 1, 2020 \(Accessed Feb. 2021\).](#)

Psychiatric Collaborative Care Model (CoCM) Services

Provider care management services provided by a Behavioral Health Care Manager can be provided in a non-face-to-face interaction. Weekly consults with the psychiatric consultant may also be non-face-to-face. Non-face-to-face weekly to monthly follow-up by the behavioral health care manager that must include monthly screening with validated rating scale, monitoring of goals and/or medication, and may include recommended evidence-based therapies.

SOURCE: [MI Dept. of Health and Human Services Medicaid Provider Manual, p. 1682-1683, Jan. 2021 \(Accessed Feb. 2021\).](#)

ELIGIBLE PROVIDERS

Tribal 638 facilities that elect to operate under the Tribal FQHC alternative payment methodology (APM) must update their provider enrollment information in CHAMPS by selecting the “Tribal FQHC” subspecialty. Tribal FQHCs can change their enrollment status in CHAMPS at any time.

Distant site services provided by qualified Medicaid-enrolled practitioners may be covered when the qualified practitioner is employed by the clinic or working under the terms of a contractual agreement with the clinic. Tribal FQHCs must maintain all practitioner contracts and provide them to MDHHS upon request. Refer to the Practitioner chapter of the Medicaid Provider Manual for additional information on distant site providers. Telemedicine service(s) provided at the distant site that qualify as a face-to-face visit may generate the AIR payment.

SOURCE: [MI Medical Services Administration Bulletin MSA 20-60, pg. 2-3 Sept. 1, 2020 \(Accessed Feb. 2021\)](#).

Physicians and practitioners are eligible to be distant site providers.

SOURCE: [Dept. of Health and Human Services Medicaid Provider Manual, p. 1689, Jan. 2021 \(Accessed Feb. 2021\)](#).

Telepractice for BHT Services

Qualified providers include:

- Board certified behavior analysts
- Board certified assistant behavior analysts
- Licensed psychologists
- Limited licensed psychologists
- Qualified behavioral health professionals

Occupational, physical and speech therapists are not included in this policy.

A facilitator trained in telepractice technology must be physically present with the patient during the entire telepractice session.

SOURCE: [MI Dept. of Health and Human Services, Medicaid Provider Manual, p. 483 Jan. 2021 \(Accessed Feb. 2021\)](#).

Medication Therapy Management (MTM)

In the event that the beneficiary is unable to physically access a face-to-face care setting, an eligible pharmacist may provide MTM services via telepractice. Services must be provided through hardwire or internet connection.

SOURCE: [Dept. of Health and Human Services, Medicaid Provider Manual, p. 1613, Jan. 2021 \(Accessed Feb. 2021\)](#).

Prepaid Inpatient Health Plans/Community Mental Health (PIHP/CMH) can be either originating or distant sites. Practitioners must meet the provider qualifications for the covered service provided via telemedicine.

SOURCE: [MI Dept. of Health and Human Services, Medicaid Provider Manual, p. 346, Jan. 2021 \(Accessed Feb. 2021\)](#).

Speech-Language and Audiology Services

Eligible providers:

- A fully licensed speech-language pathologist
- Licensed Audiologist in Michigan
- Speech language pathologist and/or audiology candidate under the direction of a qualified SLP or audiologist. All documentation must be reviewed and signed by the appropriately licensed SLP or licensed audiologist.
- A limited licensed speech language pathologist under the direction of a fully licensed SLP or audiologist. All documentation must be reviewed and signed by the appropriately licensed supervising SLP or licensed audiologist.

SOURCE: [MI Dept. of Health and Human Services, Medicaid Provider Manual, p. 1784, Jan. 2021 \(Accessed Feb. 2021\)](#).

Federally Qualified Health Centers/ Rural Health Centers

An RHC and FQHC can be either an originating or distant site for telemedicine services.

SOURCE: [MI Dept. of Health and Human Services, Medicaid Provider Manual, p. 671 & 1747 Jan. 2021 \(Accessed Feb. 2021\)](#).

Child Therapy

A child mental health professional may provide child therapy on an individual or group basis with a family-driven, youth-guided approach. It is the expectation that providers

involved in telepractice/telehealth are trained in the use of equipment and software prior to servicing children/families.

SOURCE: [MI Dept. of Health and Human Services Medicaid Provider Manual, p. 340, Jan. 2021 \(Accessed Feb. 2021\)](#).

School-Based Services and Caring 4 Students Providers

Telepractice specifically applies to the SBS and C4S programs. See bulletin for requirements.

SOURCE: [MI Dept. of Health and Human Services. Bulletin 20-15, Behavioral Health Telepractice, May 5, 2020 \(Accessed Feb. 2021\)](#).

ELIGIBLE SITES

Newly Passed Legislation (Effective Now)

Beginning October 1, 2020, telemedicine services are covered under the medical assistance program and Healthy Michigan program if the originating site is an in-home or in-school setting, in addition to any other originating site allowed in the Medicaid provider manual or any established site considered appropriate by the provider.

SOURCE: [MI Compiled Laws Sec. 400.105h. \(HB 5416 – 2020 Session\)](#). (Accessed Feb. 2021).

Tribal 638 Facilities

Tribal FQHCs are eligible to receive all-inclusive rate (AIR) reimbursement for clinic services provided outside of the four walls of the facility, including telemedicine and services provided by contracted employees.

SOURCE: [MI Medical Services Administration Bulletin MSA 20-60, Sept. 1, 2020 \(Accessed Feb. 2021\)](#).

Eligible originating sites:

- County mental health clinics or publicly funded mental health facilities;
- Federally Qualified Health Centers;
- Hospitals (inpatient, outpatient, or Critical Access Hospitals);
- Physician or other providers' offices, including medical clinics;

- Hospital-based or CAH-based Renal Dialysis Centers;
- Rural Health Clinics;
- Skilled nursing facilities;
- Tribal Health Centers

SOURCE: [MI Dept. of Health and Human Services, Medicaid Provider Manual, p. 1689, Jan. 2021 \(Accessed Feb. 2021\).](#)

Speech-Language and Audiology Services

The patient site may be located within the school, at the patient's home or any other established site deemed appropriate by the provider.

The room must be free from distractions so as not to interfere with the telepractice session. A facilitator must be trained in the use of the telepractice technology and physically present at the patient site during the entire telepractice session to assist the patient at the direction of the SLP or audiologist.

SOURCE: [MI Dept. of Health and Human Services, Medicaid Provider Manual, p. 1784, Jan. 2021 \(Accessed Feb. 2021\).](#)

Prepaid Inpatient Health Plans/Community Mental Health (PIHP/CMH) can be either originating or distant sites.

SOURCE: [MI Dept. of Health and Human Services, Medicaid Provider Manual, p. 346, Jan. 2021 \(Accessed Feb. 2021\).](#)

Behavioral Health Therapy

Eligible patient site:

- Center
- Clinic
- Patient's home
- Any other established site deemed appropriate by the provider

Room must be free of distractions. A trained facilitator must be physically present at the patient site during the entire telepractice session.

SOURCE: [MI Dept. of Health and Human Services, Medicaid Provider Manual, p. 483, Jan. 2021 \(Accessed Feb. 2021\).](#)

Federally Qualified Health Centers/ Rural Health Centers

An RHC or FQHC can be either an originating or distant site for telemedicine services.

SOURCE: [MI Dept. of Health and Human Services, Medicaid Provider Manual, p. 671 & 1747, Jan. 2021 \(Accessed Feb. 2021\).](#)

School-Based Services and Caring 4 Students Providers

Allowable telepractice originating sites include the school, the beneficiary's home, or any other established site deemed appropriate by the provider. It must be a room free from distractions so as not to interfere with the telepractice session.

SOURCE: [MI Dept. of Health and Human Services, Bulletin 20-15, Behavioral Health Telepractice, May 5, 2020 \(Accessed Feb. 2021\).](#)

GEOGRAPHIC LIMITS

No Reference Found

FACILITY/TRANSMISSION FEE

Originating site may bill for a facility fee. MDHHS will reimburse the originating site provider the lesser of charge or the current Medicaid fee screen.

SOURCE: [Dept. of Health and Human Services, Medicaid Provider Manual, p. 273, Jan. 2021 \(Accessed Feb. 2021\).](#)

STORE-AND-FORWARD

Last updated 02/28/2021

POLICY

Telecommunication systems using store-and-forward technology are not included in MI Medicaid's telemedicine policy.

SOURCE: [Dept. of Health and Human Services, Medicaid Provider Manual, p. 1688, Jan. 2021 \(Accessed Feb. 2021\)](#).

ELIGIBLE SERVICES/SPECIALTIES

No Reference Found

GEOGRAPHIC LIMITS

No Reference Found

TRANSMISSION FEE

No Reference Found

REMOTE PATIENT MONITORING

Last updated 02/28/2021

POLICY

Newly Passed Legislation (Now Effective)

“Remote patient monitoring means digital technology to collect medical and other forms of health data from an individual in 1 location and electronically transmit that information via a health insurance portability and accountability act of 1996, Public Law 104-191 compliant, secure system to a health care provider in a different location for assessment and recommendations.”

The Department of Health and Human Services must provide coverage for remote patient monitoring services through the medical assistance program and Healthy Michigan program.

SOURCE: [MI Compiled Laws Sec. 400.105g \(HB 5415 - 2020 Session\)](#). (Accessed Feb. 2021).

CONDITIONS

No Reference Found

PROVIDER LIMITATIONS

No Reference Found

OTHER RESTRICTIONS

No Reference Found

EMAIL, PHONE & FAX

Last updated 09/02/2021

Interprofessional Telephone/Internet/Electronic Health Record Consultations

Interprofessional telephone/Internet/electronic health record consultations, including e-Consults, are a type of asynchronous telemedicine service in which the beneficiary's Medicaid-enrolled treating physician (e.g., attending or primary) or practitioner requests the opinion and/or treatment advice of a Medicaid enrolled physician or practitioner with the specialty expertise to assist in the diagnosis of a condition and/or management of the beneficiary's condition without beneficiary face-to-face contact with the consultant. The service concludes with a written report from the consultant to the treating physician/requesting provider.

The beneficiary for whom the service is requested may be either a new patient to the consulting provider or an established patient with a new problem. Service time is based on the total review and interprofessional communication time. The review of beneficiary information, including but not limited to medical records, laboratory studies, imaging studies, medications, and pathology specimens, is included in the service and should not be separately reported. The written or verbal request for the consult must be documented in the beneficiary's medical record by the treating physician/requesting provider. Providers must consult with the American Medical Association (AMA) coding guidelines to ensure

appropriate reporting of these services. Providers should not report interprofessional telephone/Internet/electronic health record consultations when the sole purpose of the communication is to arrange a transfer of care or other face-to-face service.

SOURCE: [Medical Services Administration \(MSA\) Bulletin 21-24 Aug. 2021. \(Accessed Sept. 2021\).](#)

CONSENT REQUIREMENTS

Last updated 09/02/2021

In accordance with Section 16284 of Public Act No. 359 of 2016, telemedicine services, including asynchronous telemedicine, must be provided only with direct or indirect beneficiary consent and this consent must be properly documented in the beneficiary's medical record in accordance with applicable standards of practice.

SOURCE: [Medical Services Administration \(MSA\) Bulletin 21-24 Aug. 2021. \(Accessed Sept. 2021\).](#)

OUT OF STATE PROVIDERS

Last updated 09/02/2021

Telemedicine services must be provided by a health care professional who is licensed, registered or otherwise authorized to engage in his or her health care profession in the state where the patient is located.

SOURCE: [Dept. of Health and Human Services, Medicaid Provider Manual, p. 1719, Jul. 2021 \(Accessed Sept. 2021\).](#)

Behavioral Health Therapy

Providers of telepractice services must be currently certified by the Behavior Analyst Certification Board (BACB), be a QBHP, be fully licensed in MI as a fully licensed psychologist, or be a practitioner who holds a limited license and is under the direction of a licensed psychologist.

SOURCE: [Dept. of Health and Human Services, Medicaid Provider Manual, p. 477, Jul. 2021 \(Accessed Sept. 2021\).](#)

MISCELLANEOUS

Last updated 09/02/2021

No reimbursement for remote access for surgical procedures, and use of robotics.

SOURCE: [Dept. of Health and Human Services, Medicaid Provider Manual, p. 1718, Jul. 2021 \(Accessed Sept. 2021\)](#).

Private Payer

DEFINITIONS

Last updated 09/02/2021

“Telemedicine means the use of an electronic media to link patients with health care professionals in different locations. To be considered telemedicine, the health care professional must be able to examine the patient via a HIPPA compliant, secure interactive audio or video, or both, telecommunications system, or through the use of store and forward online messaging.”

SOURCE: [MI Compiled Law Svcs. Sec. 500.3476\(2\)\(b\) \(Accessed Sept. 2021\)](#).

REQUIREMENTS

Last updated 09/02/2021

Insurers and group or nongroup health care corporations shall not require face-to-face contact between a health care professional and a patient for services appropriately provided through telemedicine, as determined by the insurer or health care corporation. Telemedicine services must be provided by a health care professional who is licensed, registered, or otherwise authorized to engage in his or her health care profession in the state where the patient is located. Telemedicine services are subject to all terms and conditions of the contract.

SOURCE: [MI Compiled Law Services Sec. 500.3476\(1\) & Sec. 550.1401k\(1\) \(Accessed Sept. 2021\)](#).

PARITY

Last updated 09/02/2021

SERVICE PARITY

Insurers and health care corporations must cover services appropriately provided through telemedicine, as determined by the insurer or health care corporation.

SOURCE: [MI Compiled Law Services Sec. 500.3476](#) & [Sec. 550.1401k. \(Accessed Sept. 2021\)](#).

PAYMENT PARITY

No explicit payment parity.

Professional Requirements

DEFINITIONS

Last updated 02/28/2021

“Telehealth” means the use of electronic information and telecommunication technologies to support or promote long-distance clinical health care, patient and professional health-related education, public health, or health administration. Telehealth may include, but is not limited to, telemedicine. As used in this subdivision, “telemedicine” means that term as defined in section 3476 of the insurance code of 1956, 1956 PA 218, MCL 500.3476.

SOURCE: [MI Compiled Laws Sec. 333.16283\(c\)](#) & [MI Insurance Code 500.3476. \(Accessed Feb. 2021\)](#).

CONSENT REQUIREMENTS

Last updated 02/28/2021

A health professional shall not provide a telehealth service without directly or indirectly obtaining consent for treatment. This does not apply to a health professional who is providing a telehealth service to an inmate who is under the jurisdiction of the department of corrections and is housed in a correctional facility.

SOURCE: [MI Compiled Laws Sec. 333.16284. \(Accessed Feb. 2021\)](#).

ONLINE PRESCRIBING

Last updated 09/02/2021

Providers must have an existing physician-patient or dentist-patient relationship. See statute for additional requirements.

SOURCE: [MI Compiled Laws Sec. 333.17751\(2\)\(a\).](#) (Accessed Sept. 2021).

Schedule 2 to 5 controlled substances cannot be prescribed unless the prescribing is in a bona fide prescriber-patient relationship with the patient. If a licensed prescriber prescribes a controlled substance under this subsection, the prescriber shall provide follow-up care to the patient to monitor the efficacy of the use of the controlled substance as a treatment of the patient's medical condition. If the licensed prescriber is unable to provide follow-up care, he or she shall refer the patient to the patient's primary care provider for follow-up care or, if the patient does not have a primary care provider, he or she shall refer the patient to another licensed prescriber who is geographically accessible to the patient for follow-up care.

SOURCE: [MI Compiled Laws Sec. 333.7303a.](#) (Accessed Sept. 2021).

A health professional providing telehealth service to a patient may prescribe the patient a drug if both the following are met:

- The health professional is a prescriber who is acting within the scope of his or her practice; and
- If the health professional is prescribing a controlled substance, the health professional must meet the requirements of this act applicable to that health professional for prescribing a controlled substance.

If the health professional considers it medically necessary, he or she shall provide the patient with a referral for other health care services that are geographically accessible to the patient, including, but not limited to, emergency services. After providing a telehealth service, the health professional, or a health professional who is acting under the delegation of the delegating health professional, shall make himself or herself available to provide follow-up health care services to the patient or refer the patient to another health professional for follow-up health care services.

SOURCE: [MI Compiled Laws, Sec. 16285.](#) (Accessed Sept. 2021).

Genetic Counseling

A licensee providing a telehealth service may prescribe a drug if the licensee is a prescriber acting within the scope of his or her practice and in compliance with section 16285 of the code, MCL 333.16285, and if he or she does both of the following:

If medically necessary, refers the patient to a provider that is geographically accessible to the patient.

Makes himself or herself available to provide follow-up care services to the patient, or to refer the patient to another provider, for follow-up care.

A licensee providing any telehealth service shall do both of the following:

- Act within the scope of his or her practice.
- Exercise the same standard of care applicable to a traditional, in-person health care service.

SOURCE: [MI Administrative Code 338.2455. \(Accessed Sept. 2021\).](#)

CROSS-STATE LICENSING

Last updated 09/02/2021

No Reference Found

LICENSURE COMPACTS

Last updated 09/02/2021

Member of Interstate Medical Licensure Compact.

Section repealed effective March 28, 2022.

SOURCE: [Interstate Medical Licensure Compact, Compact Map; Act No. 563 \(2018 Session\); & Act No. 368 \(2018 Session\).](#) (Accessed Sept. 2021).

MISCELLANEOUS

Last updated 02/28/2021

Recently Passed Legislation (Effective Now)

A health care provider or health care facility that provides health care services (including telehealth) in support of this state's response to the COVID-19 pandemic is not liable for an injury, including death, sustained by an individual by reason of those services, regardless of how, under what circumstances, or by what cause those injuries are sustained, unless it is established that the provision of the services constituted willful misconduct, gross negligence, intentional and willful criminal misconduct, or intentional infliction of harm by the health care provider or health care facility.

SOURCE: [MI HB 6159 \(2020 Session. \(Accessed Feb. 2021\)\).](#)

PROFESSIONAL BOARDS STANDARDS

Last updated 02/28/2021

Michigan Board of Podiatric Medicine and Surgery

SOURCE: [MI Admin. Code Sec. 338.8145. \(Accessed Feb. 2021\).](#)