



MEDICAID PROGRAM

Virgin Islands Medical Assistance Program (VIMAP) Telemedicine and Telehealth Policy Statement

Background:

In response to the need to limit the spread of community COVID-19 the Centers for Medicare & Medicaid Services (CMS) has expanded the options and flexibilities for Medicaid programs to broaden their use of telemedicine and telehealth services so that Medicaid beneficiaries can receive a wider range of services from Medicaid providers without having to travel to a health care facility. These policy options build on the President's emergency declaration, the Department of Health and Human Services public health emergency declaration, and the direction of Governor Bryan to maintain maximum social distancing. The VIMAP intends to take advantage of these policy options to ensure that all Virgin Island Medicaid beneficiaries, particularly those at high risk from COVID-19, are able take advantage of easily accessible benefits that can keep you healthy while also helping to contain the community spread of the virus.

Policy:

The VIMAP will cover medically necessary **telemedicine** services between a Medicaid beneficiary and their physician or, other medical practitioner, that is within their scope of practice under Virgin Islands law and Medicaid program requirements. These providers must be enrolled as Medicaid providers with VI MAP. Telemedicine services include a real-time, interactive electronic communication using interactive telecommunication equipment that includes at a minimum audio and video equipment (e.g., cell phones and computers and communications software such as face time, skype, zoom, etc.) in lieu of a face-to-face encounter at a health care facility. In this situation, the provider would be at a distant site and the Medicaid patient would be at the originating site.

The VIMAP will also cover medically necessary **telehealth** services between a Medicaid beneficiary and their physician or other medical practitioner that is within their scope of practice under Virgin Islands law and Medicaid program requirements. These providers must be enrolled as Medicaid providers with VI MAP. Telehealth services include using such technologies as telephones, facsimile machines, electronic mail systems, and remote monitoring devices, to collect and transmit medical data for monitoring and interpretation, and to perform follow-up and virtual check-ins with Medicaid patients.

The difference between telemedicine and telehealth is that in telemedicine, the interaction between the patient and the provider occurs in real time. Whereas, telehealth communications are data transmissions about the patient's status where the patient and the provider may not be in simultaneous communication. In either event, these services provided to Medicaid beneficiaries are covered by the

VIMAP. The service has to be medically necessary and appropriate, the beneficiary must be eligible, the provider must be enrolled, and the service provided with the provider's scope of practice.

The VIMAP will not require a referral or a VIMAP prior authorization for telemedicine or telehealth services to be provided by Medicaid providers to Medicaid beneficiaries. While any VIMAP provider may provide a telemedicine or telehealth service when medically necessary, we would expect that these services will be provided primarily by the Department of Health (DOH) Clinics, Federally Qualified Health Centers (FQHCs), physicians and other practitioners, and our hospitals.

Reimbursement:

The VIMAP will reimburse physicians or other medical practitioners for their telemedicine or telehealth services in the same manner as when that service is performed in a face-to-face setting. For example, if a physician completes an "office visit" via telemedicine that physician would be reimbursement for that "office visit" at the allowable Medicaid rate for that service. Similarly, if an FQHC complete a "patient visit/encounter" via telemedicine the FQHC would receive its applicable rate for that visit/encounter. Providers should use the Place of Service (POS) code 02-Telehealth, to indicate the billed service was furnished as a professional telehealth service from a distant site.

In summary, we are strongly encouraging our Medicaid provider community and our Medicaid beneficiaries to utilize the provision of medically necessary telemedicine or telehealth services to the greatest extent possible. The use of these services will not only support the ease of access to Medicaid benefits but will support the over health of our community and its citizens be containing the community spread of COVID-19.

If you have any questions please contact: (340)227-4686 and (340)725-5675.