



Frequently Asked Questions About Medicaid Telehealth

Updated June 25, 2021

These frequently asked questions apply only to services provided through Maryland Medicaid HealthChoice or Fee-for-Service and the Public Behavioral Health System. For information on Medicare or commercial telehealth services, contact the provider directly.

What will happen to COVID-19 telehealth practices allowed during Maryland's state of emergency when it ends on July 1, 2021?

The Governor's executive order on telehealth ends on July 1, 2021. However, [Senate Bill 3](#), entitled Preserve Telehealth Act of 2021 that was passed during the 2021 legislative session takes effect the same day. This bill requires an insurer, nonprofit health service plan, and health maintenance organization, to continue to provide coverage for telehealth services, regardless of the patient's location, or originating site, when receiving a telehealth service. There should not be any coverage interruption for telehealth services currently provided. For more information, see [HB 123/SB3](#)

What is an originating site?

An originating site is the Medicaid participant's location when receiving a telehealth service. The location can be anywhere within Maryland. Approved originating sites for telehealth include:

- A participant's home, or any other secure location as agreed upon by the participant and the provider.
- A college or university student health or counseling office
- A community-based substance use disorder provider
- A deaf or hard of hearing participant's home or any other secure location as approved by the participant and the provider
- An elementary, middle, high or technical school with a supported nursing, counseling or medical office
- A local health department
- A Federally Qualified Health Center (FQHC)
- A hospital, including the emergency department
- A nursing facility
- A private office (physician, physician assistant, psychiatric nurse practitioner, nurse practitioner or nurse midwife)

- An opioid treatment program
- An outpatient mental health center (OMHC)
- A renal dialysis center
- A residential crisis services site

Is there a preference for the kind of technology to use for telehealth services?

A provider should use technology in this order:

1. Audio-visual technology that meets all [COMAR 10.09.49](#) requirements
2. Audio-visual technology using a notebook computer or smartphone
3. Audio-only telephone

All telehealth services must be in real time and allow for the participant and provider to interact.

What video apps can a provider use for a telehealth visit?

According to the [U.S. Department of Health and Human Services](#), while the rules for COVID-19 telehealth are in effect, you can use FaceTime, Facebook Messenger video chat, Google Hangouts video, Zoom or Skype. A provider must inform the participant that these third-party apps may not protect their privacy. A provider must give the participant a clear explanation of the telehealth service and its confidentiality limitations, including the use of non-HIPAA compliant technology.

Are there any apps or services that assure privacy or are HIPAA compliant?

- Skype for Business/Microsoft Teams
- Updox
- VSee
- Zoom for Healthcare
- Doxy.me
- Google G Suite Hangouts Meet
- Cisco Webex Meetings / Webex Teams

Are there any apps that a provider should not use for a telehealth visit?

A provider should not use an app that is public facing like Facebook Live, Twitch or TikTok.

Can all providers offer telehealth?

A provider must check with their professional licensing board to see if telehealth is within their scope of practice. A provider must have a Maryland license or certification to practice. An eligible provider may only offer services within the scope of their practice.

Are there any geographic restrictions on telehealth services?

The provider and the participant must be in Maryland.

Are there differences in standards between a telehealth visit and a face-to-face visit?

A provider must follow the same standards of practice when providing telehealth and in-person services. A provider must document a participant's medical records just as they would for an in-person visit.

Any service provided through telehealth is subject to the same program restrictions, preauthorization, limitations and coverage that exist for the service when provided in-person.

Do telehealth services require preauthorization?

Some services like mental health and substance use disorder services require prior authorization from MDH or Optum.

Do telehealth services have any consent requirements?

The provider must document the participant's consent to receive telehealth services in their medical record. A participant may give verbal consent. A parent or guardian may give consent.

Are all services available by telehealth audio only?

A provider can perform clinical evaluations, refer a patient to health care services, provide treatment and issue most prescriptions. However, some services are not eligible for audio- or telephone-only telehealth including but not limited to physical therapy services, Early and Periodic Screening, Diagnostic and Treatment (EPSDT) occupational therapy services and EPSDT speech language pathology services.

Can providers take on new telehealth patients only?

A provider may not use the audio-only telephone service option to expand services.

Are there any reasons Medicaid may not pay a provider for telehealth services?

A provider must be an enrolled Medicaid provider, and if providing behavioral health services enrolled with Optum, on the date of service to receive payment.

Maryland Medicaid or Optum will not pay for telehealth services when technical difficulties

prevent the delivery of part or all the telehealth session.

For more information, visit [Maryland Medicaid Telehealth Program](#).