

## Emergency State Actions Addressing Telehealth/Licensure Waivers

STATE	Is there an existing state telehealth coverage mandate?	Emergency State Action on Coverage of Telehealth Services?	Emergency State Action on Telehealth Reimbursement Parity?	Emergency State Action to Include Audio-only Phone?	Emergency changes in originating sites requirements?	Emergency Licensure Waiver?
<b>ALABAMA</b>	NO	No. State <a href="#">guidance</a> issued 3/13/20 does not address telehealth. Only standards of care.				Yes. <a href="#">Guidance</a> issued by the Alabama Board of Examiners in Psychology allows individuals licensed in another jurisdiction to practice up to 60 days without an Alabama license. Registration is required.
<b>ALASKA</b>	YES for telemental health services provided by commercial health plans using audio &/or video  Alaska Stat. § 21.42.422	<a href="#">Bill</a> signed by Governor on March 16, 2002 amends Alaska Stat. § 21.42.422 which mandates coverage for telehealth and does not require prior in-person contact. References definition of telehealth under Alaska Stat. § 47.05.270(e)		Alaska Stat. § <a href="#">47.05.270(e)</a> defines “telehealth” to include audio-only communications, indicating that telephone calls are permitted.		
<b>ARIZONA</b>	YES for all health care services organizations & disability insurers; may	<a href="#">Executive Order 2020-15</a> dated 3/25/20 expands telemedicine to require	<a href="#">Executive Order 2020-15</a> dated 3/25/20 also requires insurers to pay the same		<a href="#">Executive Order 2020-15</a> dated 3/25/20 recognizes	

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	limit to in-network providers; excludes audio-only phones  Ariz. Stat. §§ 20-841.09, 20-1057.13, 20-1376.05, 20-1406.05	insurers to cover telehealth services on the same basis as in-person services. This also applies to Medicaid.  <u>Telemedicine</u> is defined as health care services for mental health disorders. AZ 20-1057.13	reimbursement rate for telehealth services. This also applies to Medicaid.		the patient's home as an eligible originating site.	
<b>ARKANSAS</b>	YES for all policies offered by commercial insurers, self-funded government & church plans & Medicaid programs; includes reimbursement parity required only for physician services; insurers have discretion to cover audio-only phone, email or text messaging  Ark. Code §§ 23-79-1601, 1602	<u>Executive Order 20-05</u> dated 3/13/20 suspends the provisions of the Telemedicine Act under Ark. Code Ann. 17-80-401, et seq.  Guidance by the <u>Board of Psychology</u> states: For 120 days from 3/20/2020, licensees will not be required to submit a new Statement of Intent (SOI) to practice Telepsychology in Arkansas. Licensees must comply with APA Telepsychology Guidelines;		Yes, per <u>Executive Order 20-05</u>		

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		Arkansas Telemedicine Act, HIPAA, and any other rules, statutes, or orders pursuant to the practice of psychology.				
<b>CALIFORNIA</b>	<p>YES for all commercial health plans and Medicaid plans; requires reimbursement parity.</p> <p>Cal Bus &amp; Prof Code § 2290.5            Cal Health &amp; Safety Code §1374.13, §1374.14            Cal Ins Code § 10123.85, § 10123.855            Cal Wel &amp; Inst Code § 14132.725</p>	<p>An <a href="#">announcement</a> dated 3/21/20, commercial and Medi-Cal managed care plans were directed to allow members to obtain health care via telehealth.</p> <p>The California Board of Psychology issued <a href="#">guidance</a> for trainees and supervisors regarding service delivery (using HIPAA compliant video) and face-to-face supervision requirements (using video or phone).</p>	Yes			<p><a href="#">Executive Order No. N-39-20</a> dated 3/30/20 grants authority to the Department of Consumer Affairs to temporarily waive licensing requirements for health care providers during the declared public health emergency.</p> <p>The order encourages out-of-state providers to register with the <a href="#">California Health Corps</a> to provide non-COVID-19 services to California residents at designated health care sites.</p> <p>No further information yet available on the California</p>

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						Board of Psychology website.
<b>COLORADO</b>	<p>YES for commercial health plans, state employee health plans and Medicaid; requires reimbursement parity; includes patient's home as an eligible originating site.</p> <p>CRS § 10-16-123            CRS § 25.5-5-320            CRS § 25.5-5-414</p>	<p><a href="#">Executive Order No. D2020-20</a> dated 4/1/20 temporarily suspends any all limitations to telehealth services, including exclusions as to what services are covered and the requirement that only HIPAA-compliant platforms may be used for services to be covered.</p> <p>This waiver expires on May 1, 2020 unless extended by executive order.</p>	<p><a href="#">CMS Section 1135 Medicaid Waiver approved</a> 3/26/20 allows for reimbursement of payable claims by out of state licensed providers not enrolled in the state Medicaid program subject to certain conditions for the duration of the public health emergency.**</p>	<p><a href="#">Guidance</a> issued by the Department of Health Care Policy &amp; Financing allows telephone-only service and live chat for Colorado Health First (Medicaid). However, pediatric behavioral health care providers may not use audio-only phone or live chat with their patients.</p>		<p><a href="#">Executive Order No. D2020-20</a> dated 4/1/20 also temporarily suspends the 20-day limitation in the temporary practice provision for mental health providers (C.R.S. § 12-245-217(2)(e)(II)) to allow out-of-state licensed psychologists and other licensed mental health providers to individuals in Colorado.</p> <p>This waiver expires on May 1, 2020 unless extended by executive order.</p>
<b>CONNECTICUT</b>	<p>YES for commercial health plans</p> <p>CT. Gen. Stat. § § 19a-906, 38a-499a and 38a-526a</p>			<p><a href="#">Executive Order</a> No. 7G dated 3/19/20 allows audio-only telephone for Medicaid.</p>		<p><a href="#">Order</a> issued by Dept. of Public Health dated 3/23/20 temporarily suspends licensure requirements for 60 days for professions including psychology.</p>

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<b>DELAWARE</b>	YES for commercial health plans; requires reimbursement parity; and allows audio-only phone  Del. Code Title 18, Ch. 33					A joint <a href="#">order</a> issued 3/24/20 by the Department of Health and Human Services and Emergency Management Agency allows out-of-state mental health providers with an active license to provide in-person and telemedicine mental health services. Further, all mental health providers who held a Delaware license within the last 5 years which is now inactive, expired or lapsed may provide services.  Online registration form is available <a href="#">here</a> .
<b>DISTRICT OF COLUMBIA</b>	YES for all commercial health plans and Medicaid  DC Code §§ 31-3861 et seq.					<a href="#">Administrative Order 2020-02</a> dated 3/20/20 temporarily waives licensing requirements for out-of-state licensed health care professionals (in good standing) providing services (including telehealth) to DC

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						patients in a facility or telehealth services to existing patients who are in DC.
<b>FLORIDA</b>	It merely states that for insurers that provide telehealth coverage, any provider contract provision that would cause telehealth reimbursement to be different than reimbursement for the same services provided in person must be agreed to and initialed by the provider; also establishes a registration system for out-of-state providers delivering telehealth to FL residents  Fla. Stat. §627.42396 Fla. Stat. §641.31(45)	n/a				<a href="#">Executive Order 20-003</a> dated 3/20/20 granting 30-day licensure waiver for out-of-state licensed health care providers.  See also <a href="#">Executive Order 20-002</a> dated 3/16/20
<b>GEORGIA</b>	YES for commercial health plans including state	n/a		In the <a href="#">DCH Telehealth Guidance for</a>	In the <a href="#">DCH Telehealth Guidance to All Providers</a>	(No. Only physicians and nurses.)

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	<p>employee health benefit plans; allows for audio-only phone</p> <p>OGCA §33-24-56.4</p>			<p><a href="#">Medicaid/PeachCare for Kids®/Fee-for-service Providers</a> dated 3/18/20, Georgia Medicaid is temporarily allowing the use of telephones, video cellphone communications and other audio and video technology to deliver telehealth services during the public health emergency..</p>	<p>dated 3/26/20, Georgia Medicaid is temporarily waiving any restrictions on originating sites (where the patient is located) and distant sites (where the provider is located) during the public health emergency.</p> <p>Qualified providers should continue to follow all applicable licensure rules specific to their profession. Services delivered from distant sites will be billed using the provider billing address associated with the enrolled Medicaid practice or facility. Claims must be billed using the associated procedure code, GT modifier and place of service code 02 to indicate telehealth delivery.</p>	

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<b>HAWAII</b>	<p>YES for commercial health plans &amp; Medicaid; includes reimbursement parity</p> <p>HRS §431:10A-116.3 HRS §432:1-601.5 HRS §432D-23.5</p>	n/a				
<b>IDAHO</b>	NO					No. <a href="#">Executive Order</a> dated 3/23/20 waives regulations for several professions, but NOT psychologists or other mental health providers.
<b>ILLINOIS</b>	<p>If an insurer chooses to provide telehealth coverage, then it must not impose additional requirements for the insured to access telehealth services.</p> <p>IL Comp. Stat. Ann. §5/356z.22</p>	<a href="#">Executive Order 2020-09</a> dated 3/19/20 requires coverage for telehealth services provided by in-network providers.	According to <a href="#">Executive Order 2020-09</a> , insurers are required to cover the costs of all telehealth services and may not impose cost-sharing for services rendered by in-network providers.	<p><a href="#">Executive Order 2020-09</a> dated 3/19/20 allows audio or video communication technology to provide telehealth services.</p> <p>While providers are allowed to use any non-public remote communications technology during this public health emergency, they are still encouraged to use encryption and privacy</p>	<a href="#">Executive Order 2020-09</a> removes any limitations to the patient's location for receiving telehealth services. See Section 1	<a href="#">IL DFPR Guidance</a> dated 3/30/20 interprets Executive Order 2020-09 to permit an out-of-state health care provider not licensed in Illinois to continue to provide health care services to an existing patient in Illinois via telehealth where there is a previously established provider/patient relationship for the duration

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				<p>protections for telehealth. Public facing video communication applications like Facebook Live, Twitch, or TikTok are not allowed.</p>		<p>of the declared public health emergency.</p>
<b>INDIANA</b>	<p>YES for commercial health plans</p> <p>Ind. Code Ann. §§ 27-8-34, 27-13-1-34, 27-13-7-22</p>	<p><a href="#">Executive Order No. 20-05</a> dated 3/19/20 allows mental health professionals to practice via telehealth.</p> <p><a href="#">Executive Order No. 20-13</a> dated 3/30/20 authorizes the state Family and Social Services Administration to suspend restrictions to expanded telehealth services under Medicaid; instructs the state Department of Insurance to request health insurers to provide coverage for expanded telehealth services during the public health emergency.</p>		<p><a href="#">Executive Order No. 20-13</a> dated 3/30/20 allows audio-only phone to provide telehealth services.</p>		<p><a href="#">Executive Order No. 20-05, No. 20-13</a> allow out-of-state providers to practice in Indiana if they are licensed in good standing elsewhere. Out-of-state licensed providers must register with the Indiana Professional Licensing Agency via its <a href="#">website</a>.</p>

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<b>IOWA</b>	YES for commercial health plans; coverage & reimbursement parity for Medicaid  Iowa Code. Ann § 514C.32 Iowa Admin. Code §441-78.55(249A)	n/a				
<b>KANSAS</b>	YES for commercial health plans and Medicaid  Kan. Stat. Ann. §§ 40-2.211, 40-2.213	See <a href="#">Insurance Commissioner bulletin</a> dated 3/23/20 encouraging providers to check with each insurer for its coverage/billing policies.  <b>Are health insurers covering telehealth services due to COVID-19?</b> The Commissioner of Insurance does not have the authority to mandate expansion of telehealth services or modifications in reimbursement amounts. However, we know many health insurers, but not all,				<i>Note while <a href="#">Executive Order No. 20-08</a> (3/20/20) temporarily waives licensing requirements for out-of-state licensed physicians and other professions regulated by the KS Board of Healing Arts; however, this does not include the Kansas Behavioral Sciences Board under which psychology is housed.</i>

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		<p>are voluntarily making changes to allow telehealth services and to modify their payment practices to reimburse those services at the same level as in-person services. We encourage everyone to check with their health insurer regarding the coverage of telehealth services.</p>				
<b>KENTUCKY</b>	<p>YES for commercial health plans (including self-insured plans as permitted by ERISA) and Medicaid; includes reimbursement parity</p> <p>Ky Rev Stat § 304.17A-138 Ky Rev Stat § 304.17A-005</p>	<p>Insurance Commissioner issued <a href="#">guidance</a> dated 3/18/20 stating that insurers cannot require that the patient have a prior relationship with the provider in order to have services delivered through telehealth, if the provider determines that telehealth would be medically appropriate.</p>		<p>Insurance Commissioner issued <a href="#">guidance</a> dated 3/18/20 temporarily waiving state requirements for HIPAA compliance consistent with the <a href="#">OCR guidance</a> so long as providers use telehealth such as non-public facing audio or video communication products in good faith.</p>		<p>No, <a href="#">guidance from the Kentucky Board of Examiners of Psychology</a> dated 3/13/20 provides that out-of-state licensed psychologists must comply with existing temporary non-resident registration process to provide services, including telehealth, in Kentucky. The Board has temporarily waived the registration fee.</p>

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						Board <a href="#">memorandum</a> dated 3/25/20 allows out-of-state licensed psychologists employed by the state to provide services immediately upon written notification to the Board and verification of holding an IPC, CPQ or ABPP board certification; out-of-state licensed psychologists to practice temporarily pursuant to the ARC-APA disaster response network upon notification to the Board; and encourages licensees to use telehealth to provide services including electronic supervision to supervisees.
<b>LOUISIANA</b>	The law provides that reimbursement for telehealth shall not be denied for the physician at the originating site and shall not be less than 50%	<a href="#">Executive Order No. JBE 2020-32</a> dated 3/19/20 compels all licensing boards to promulgate any rules necessary to promote and facilitate use of telehealth in	<a href="#">CMS Section 1135 Waiver</a> approved 3/23/20 allows for reimbursement of payable claims by out of state licensed providers not enrolled in the state	Medicaid Director issued a <a href="#">provider update</a> dated 3/17/20 allowing for the use of audio-only phone to deliver telehealth services when an interactive	Medicaid has no originating site limitations.	<a href="#">Executive Order No. 25 JBE 2020</a> dated 3/11/20 grants authority to Department of Health to take any and all actions during the public health emergency but no

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	<p>of the normal rate of an in-person office visit. No mention of the distant site physician or inclusion of other health care providers.</p> <p>La. Rev. Stat. Ann. § 22:1821(F)</p>	<p>delivering health care services.</p>	<p>Medicaid program subject to certain conditions for the duration of the public health emergency.</p>	<p>audio/video system is not available.</p>		<p>mention of emergency licensure waivers for out-of-state providers.</p> <p>Louisiana State Board of Examiners of Psychologists has established an <a href="#">online application process</a> for out-of-state licensed psychologists to apply for emergency temporary registration to provide temporary services, including telepsychology. The Board will waive the requirement that the temporary practice request be associated with an organized relief effort.</p>
<b>MAINE</b>	<p>YES for all commercial health plans and Medicaid; includes reimbursement parity</p> <p>24-A Me. Rev. Stat. § 4316</p>	<p>State <a href="#">guidance</a> dated 3/12/20 from Maine Bureau of Insurance emphasizes existing state law mandates coverage of telehealth services</p>		<p>Under the existing state mandate, audio-only phone would be permitted only if the scheduled telehealth service is not technologically</p>	<p>There are no restrictions on where the patient must be to receive telehealth services.</p>	

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				<p>available at the time of service.</p> <p>MaineCare <a href="#">guidance</a> dated 3/16/20 states audio-only phone is permitted for telehealth services.</p>		
<b>MARYLAND</b>	<p>YES for commercial health plans and Medicaid; reimbursement parity is required.</p> <p>Md. Code Ann. Ins. § 15-139 Md. Code Ann. Health Gen. §15-105.2 COMAR 10.09.49</p>	<p><a href="#">DOH guidance</a> states that behavioral health providers must contact the Medicaid behavioral health managed care organization with questions regarding prior authorization requirements for telehealth services.</p>		<p><a href="#">Executive Order No. 20-03-20-01</a> dated 3/20/20 expressly allows for reimbursement of audio-only health care services under Medicaid.</p> <p>Maryland Department of Health <a href="#">guidance</a> dated 3/25/20 allows for notebook computers, smartphones or audio-only phones for Medicaid telehealth services during the public health emergency.</p> <p>If Medicaid participants cannot access cellphone based video technology,</p>	<p><a href="#">DOH guidance</a> dated 3/21/20 (and previous guidance dated 2/12/20) allows temporary expansion of Medicaid (FFS &amp; managed care) originating sites to include the patient's home</p>	<p><a href="#">Executive order</a> dated 3/16/20 temporarily waives licensure requirements for out-of-state licensed health care providers for those working at a MD health care facility.</p> <p>Otherwise, seek a temporary health care license; boards are ordered to expedite processing during the public emergency period</p>

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				audio-only telephone calls are permitted.		
<b>MASSACHUSETTS</b>	<p>The law is permissive, meaning that an insurer is not required to provide coverage for telehealth services. But if an insurer chooses to provide coverage for telehealth services, it may limit coverage to in-network providers and coverage shall be consistent with in-person services.</p> <p>Mass. Gen. Laws. Ann. Ch. 175 §47BB</p> <p>Medicaid does provide coverage &amp; reimbursement parity for telehealth.</p>	<p><a href="#">Executive Order</a> dated 3/15/20 mandates all commercial insurers including BCBS and HMOs to cover in-network telehealth services.</p> <p>Basic <a href="#">guidance</a> for MassHealth managed care entities (Medicaid)</p>	<p><a href="#">Executive Order</a> dated 3/15/20 requires that reimbursement for telehealth services must be the same as in-person.</p>	<p><a href="#">Executive Order</a> dated 3/15/20 cannot impose specific requirements on telehealth technologies used so audio-only phone is allowed.</p>		<p><a href="#">Executive Order</a> dated 3/17/20 indicates psychologists or other specified providers may continue to see students previously enrolled in a MA college or university who have returned to their home state.</p> <p>Massachusetts has an existing <a href="#">temporary practice provision</a> allowing out-of-state licensed psychologist to provide services for a fee of no more than one day a month. Any session in a day counts as an entire day (but a psychologist could schedule sessions for multiple clients in one day and only use one day).</p>

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<b>MICHIGAN</b>	YES for commercial health plans  MCLS § 500.3476 MCLS § 550.1401k			The existing state law mandating telehealth coverage already allows for audio-only phone.	<a href="#">Executive order</a> dated 3/12/20 allows Medicaid patients to receive telehealth services at home.	<a href="#">Executive Order 2020-13</a> grants additional flexibility to LARA/DHHS regarding decisions about licensing, registration, and workflow requirements  <a href="#">Executive Order 2020-30</a> temporarily waives state licensure requirements and allows out-of-state licensed providers in good standing to practice in Michigan for the duration of the public health emergency.
<b>MINNESOTA</b>	YES for commercial health plans and Medicaid; includes reimbursement parity  Minn. Rev. Stat. § 62A.672 Minn. Rev. Stat. § 256B.0625				<a href="#">2020 SF 4334</a> signed into law on 3/17/20 adds patient's home to list of eligible originating sites for telehealth.  This provision became effective on 3/18/20 and expires 2/1/21.	

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<b>MISSISSIPPI</b>	YES for all commercial health plans including state employee benefit plans and Medicaid but may limit coverage to services from in-network providers  Miss. Code Ann. §§ 83-9-351, 83-9-353					MS Board of Psychology issued <a href="#">guidance</a> dated 3/17/20 temporarily waiving the 30-day limit on temporary practice for out-of-state licensed psychologists during public health emergency period. But must still apply for <a href="#">Temporary Practice Certificate</a> from the Board which will expedite review/approval process.
<b>MISSOURI</b>	YES for all commercial health plans including state employee and retiree health benefit plans and Medicaid/ MOHealthNet; includes reimbursement parity; BUT may restrict coverage to services from in-network providers  R.S.Mo. § 376.1900 R.S.Mo. § 208.670			MO HealthNet Division (Medicaid) in its telehealth <a href="#">guidance revised 3/26/20</a> is temporarily allowing the use of telephone for telehealth services.	In addition to already allowing the patient's home as an originating site, MO HealthNet Division (Medicaid) in its telehealth <a href="#">guidance revised 3/26/20</a> is temporarily allowing allowing quarantined providers and/or providers working from alternate sites or facilities to provide and bill for telehealth services. These services should be	Pursuant to <a href="#">Executive Order 20-04</a> , Missouri Department of Insurance <a href="#">bulletin</a> dated 3/20/20 temporarily waives licensing requirements for out-of-state licensed providers during the COVID-19 public health crisis.  MO HealthNet Division (Medicaid) in its telehealth <a href="#">guidance revised 3/26/20</a> is temporarily allowing out-of-

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					billed as distant site services using the provider number	state licensed providers to deliver telehealth services.
<b>MONTANA</b>	YES for commercial health plans; includes reimbursement parity  Mont. Code Ann. § 33-22-138			<a href="#">Executive order</a> dated 3/20/20 allows for use of audio-only phone in providing telehealth services. <a href="#">Medicaid Director guidance</a> recognizes audio-only phone and secure messaging for telehealth services during public health emergency period.		Montana has developed an <a href="#">interstate licensure registration system</a> for out-of-state licensed providers for the duration of the public health emergency.
<b>NEBRASKA</b>	YES for commercial health plans including self-funded employee benefit plans (not preempted by ERISA)  Neb. Rev. Stat. § 44-7, 107 Neb. Rev. Stat. § 44-312	<a href="#">Department of Insurance notice dated 3/23/20</a> invokes the emergency exception to the state law requirement that a provider obtains a patient's signed written statement agreeing to telehealth and prohibits insurers from denying coverage due to lack of such written statement.		Department of Behavioral issued <a href="#">guidance</a> dated 3/22/20 expanded the kinds of services that may be delivered via telehealth and allows audio-only phone when telehealth is unavailable.		<a href="#">Executive Order No. 20-10</a> temporarily waives state licensing requirements and allows out-of-state licensed health care providers to work in Nebraska during the state of emergency so long as they are in good standing and free from disciplinary action in the states where they are licensed.

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						<a href="#">Telehealth FAQ revised 4/1/20</a> allows those out-of-state licensed providers permitted to practice pursuant to Executive Order 20-10 to use telehealth. ?xzhjk;’ 8765
<b>NEVADA</b>	YES for commercial health plans including small employer health benefit plans and industrial insurance and Medicaid  Nev. Rev. Stat. Ann. §§ 689A.0463, 6898.0369, 689C.195, 616C.730, 695A.265, 695B.1904, 695C.1708, 695D.216, 695G.162	Emergency <a href="#">regulation</a> dated 3/5/20 prohibiting insurers for charging out-of-pocket costs for provider visits, etc. and requiring insurers to notify patients and network providers about available benefits including telehealth services.  Check specific commercial insurer for individual guidance.				
<b>NEW HAMPSHIRE</b>	YES for commercial health plans including state employee health benefit plans, and Medicaid	<a href="#">Emergency Order #8</a> requires all health insurers, health benefit plans & Medicaid (including managed care plans) to	<a href="#">Emergency Order #8</a> requires reimbursement parity without any cost-sharing.	<a href="#">Emergency Order #8</a> allows all modes of telehealth, including video and audio, audio- only, or other electronic media.	<a href="#">Emergency Order #8</a> expansively defines “originating site” to include patients’ homes, schools and clinical settings.	<a href="#">Executive Order #15</a> allows for temporary authorization for out-of-state providers to provide medically necessary

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	RSA 415-J:1 et seq.	allow in-network providers to provider telehealth services during the state of emergency.				services and provide services through telehealth including NH students enrolled in schools within or outside of the state.
<b>NEW JERSEY</b>	<p>YES for commercial health plans including state employee health benefit plans and school employee health benefit plans, and Medicaid/NJ FamilyCare programs; includes reimbursement parity; but allows insurers to limit coverage to services provided by participating providers</p> <p>N.J. Stat. § 45:1-6            N.J. Stat. § 26:2S-29            N.J. Stat. § 52:14-17.29w            N.J. Stat. § 52:14-17.46.6h            N.J. Stat. § 30:4D-6k</p>	<p><a href="#">Insurance Commissioner bulletin 20-07</a> dated 3/22/20 requires insurers to review plans for network adequacy; to grant any requested in-plan exceptions for individuals to access out-of-network telehealth providers if network telehealth providers are not available; and to encourage in-network providers to use telehealth whenever possible and clinically appropriate.</p>	<p><a href="#">Insurance Commissioner bulletin 20-07</a> dated 3/22/20 requires insurers to waive any cost-sharing for telehealth service; and to ensure reimbursement parity for telehealth services.</p> <p>It also prohibits insurers from imposing any restriction on telehealth reimbursement that requires the provider who is delivering the services to be licensed in a particular state, so long as the provider is in compliance with recently enacted A3860 and A3862 and this guidance.</p>	<p>Effective immediately, emergency legislation (<a href="#">A3860</a>) allows for the use of telephone to deliver telehealth services during the COVID-19 public health emergency.</p> <p><a href="#">Insurance Commissioner bulletin 20-07</a> dated 3/22/20 requires insurers to update their policies to allow for telephone-only services within the definition of telehealth and to not impose any specific requirements on the technologies used to deliver telemedicine and/or telehealth services (including any limitations on</p>		<p>Effective immediately, emergency legislation (<a href="#">A3860</a>) allows out-of-state licensed providers in good standing to deliver telehealth services to patients in NJ (subject to certain conditions) during the COVID-19 public health emergency.</p> <p>Under this emergency legislation, an out-of-state provider may only provide telehealth services and bill for the encounter if it involves an existing patient or the screening, diagnosis or treatment of COVID-19.</p>

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				audio-only or live video technologies) during the state of emergency and public health emergency declared pursuant to EO 103.		<p>Emergency legislation (<a href="#">A3682</a>) orders NJ Division of Consumer Affairs to expedite licensing for out-of-state individuals and to waive certain requirements, such as a criminal history record background check of an individual and payment of certain fees for the license, certificate of registration or certification.</p> <p>There is an <a href="#">online application process</a> for accelerated temporary licensure for out-of-state licensed health care professionals to provide services via telehealth or in-person.</p>
<b>NEW MEXICO</b>	YES for all commercial health plans including state employee health benefit plans and any form of self- insurance, and	NM Department of Insurance issued <a href="#">guidance</a> dated 3/6/20 state that insurers should encourage network providers to utilize	NM State Medicaid Program and Superintendent of Insurance issued new <a href="#">requirement</a> dated 3/20/20 calling for reimbursement	NM State Medicaid Program and Superintendent of Insurance issued new <a href="#">requirement</a> dated 3/20/20 allowing for phone or		<a href="#">Executive Order 2020-004</a> compels the Department of Health et al to credential out-of-state professionals during the declared public

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	<p>Medicaid (FFS and managed care) plans; includes reimbursement parity</p> <p>N.M. Stat. Ann. §13-7-14            N.M. Stat. Ann. §59A-22-49.3            N.M. Stat. Ann. §59A-23-7.12            N.M. Stat. Ann. §59A-46-50.3            NMAC §§ 8.310.2.12(M), 8.308.9.18</p>	<p>telehealth services &amp; take other proactive measures.</p>	<p>parity for telehealth services.</p>	<p>computer video to deliver telehealth services.</p>		<p>emergency (see NMSA §12-10-11).</p> <p>No specific guidance on DOH explaining credentialing process.</p>
<b>NEW YORK</b>	<p>YES for commercial health plans and Medicaid</p> <p>NY CLS Ins Law §3217-h            NY CLS Ins Law § 4306-g            NY CLS Pub Health § 2999-dd            NY CLS Pub Health § 4406-g            NY CLS Soc Serv § 367-u(2)</p>			<p>NY Office of the Professions has existing <a href="#">guidance</a> recognizing audio-only phone, e-mail, chat and videoconferencing for telepractice.</p> <p>NY Office of Mental Health has issued supplemental <a href="#">guidance</a> dated 3/17/20 allowing use of phone and/or commonly available</p>		<p>Recent executive orders temporarily waive state licensing requirements for certain medical providers; however, <a href="#">NYSED Office of the Professions</a> emphasize that all other licensed professionals must have a NYS license to provide services.</p>

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				video apps for delivery of telehealth services to Medicaid patients during public health emergency period.		
<b>NORTH CAROLINA</b>	NO	<a href="#">Insurance Commissioner advisory bulletin No. 20-B-05</a> dated 3/12/20 compels insurers to remove all barriers to care, including ensuring their telehealth programs with participating providers are robust and will be able to meet any increased demand. <sup>1</sup>				YES - <a href="#">Executive Order No. 116</a> dated 3/10/20 temporarily waives NC licensing requirements for out-of-state licensed health care & behavioral health care personnel.

<sup>1</sup> [BCBS NC 3/13/2020](#): (in effect for 30 days) telehealth will be paid at parity with office visits, provided they are medically necessary, meet criteria in the [updated Blue Cross NC Telehealth Corporate Reimbursement Policy](#), and occur on or after March 6, 2020.

- These temporary measures include virtual care encounters for patients that can replace in-person interactions across appropriate care settings, including outpatient clinics, hospitals, and the emergency departments.
- Please do not file telehealth claims with Blue Cross NC until March 21, 2020 and use Telehealth as Place of Service (02).
- For providers or members who don't have access to secure video systems, telephone (audio-only) visits can be used for the virtual visit. Please use both Telehealth as Place of Service and CR (catastrophe/disaster-related) modifier for audio-only visits.
- If you believe an eligible telehealth claim has been improperly denied, please resubmit it after March 21, 2020.
- Some commercial members can access MDLIVE or TeleDoc as a virtual care benefit, as noted on their member ID card. Federal Employee Program (FEP) members can only access virtual care through the Teledoc service.
- Teledoc offers both video and audio virtual services. You can view COVID-19 benefits for the [Federal Employee Program here](#).

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<b>NORTH DAKOTA</b>	<p>YES for commercial health plans including public employee health benefit plans; requires for negotiations between insurers and providers to be conducted in same manner for telehealth as for in-person services</p> <p>N.D. Cent. Code §26.1-36-09.15</p>	<p><a href="#">Executive Order 2020-05.1</a> dated 3/20/20 specifies that insurers shall cover virtual check-ins and e-visits for established patients &amp; shall not subject telehealth (including virtual check-ins &amp; e-visits) to any cost-sharing requirements for established patients.</p>		<p><a href="#">Executive Order 2020-05.1</a> dated 3/20/20 also allows for audio-only phone to provide telehealth services, prohibits insurers from imposing any specific requirements on telehealth technologies used, and expands state’s “secured connection” requirement to be consistent OCR’s guidance.</p>		<p><a href="#">Executive Order 2020-05.1</a> dated 3/19/20 temporarily suspends licensing requirements for out-of-state licensed health care professionals (in good standing) to provide health care services, including telehealth, to ND residents.</p> <p>ND Department of Health has set up an <a href="#">online emergency licensure application process</a>.</p>
<b>OHIO</b>	<p>YES for commercial health plans but limited to telehealth services provided by physicians, nurse practitioners and physician assistants; includes reimbursement parity</p> <p>Ohio Rev. Stat. Ann. § 3902.30 (effective Jan. 1, 2021)</p>	<p><a href="#">Insurance Commissioner bulletin 2020-02</a> dated 3/11/20 encourages insurers to implement early adoption of Ohio’s telehealth coverage mandate law that goes into effect as of Jan. 1, 2021.</p> <p>It is important to note that the coverage mandate is limited to services provided</p>	<p><a href="#">Insurance Commissioner bulletin 2020-02</a> dated 3/11/20 reminds insurers that the coverage mandate includes reimbursement parity for telehealth services.</p>	<p>Departments of Health and Medicaid announced <a href="#">emergency orders</a> (3/14/20) reducing restrictions on telehealth, ensuring that every Ohioan has access to behavioral health care via telehealth services by landline or cell phone as authorized by <a href="#">Executive Order 2020-05D</a> dated 3/19/20</p>		<p>Ohio Board of Psychology issued <a href="#">follow-up guidance</a> dated 3/20/20 confirming that licensing requirements have NOT been waived.</p> <p>However, out-of-state licensed psychologists may apply for a <a href="#">Non-Resident Temporary Permit</a> to practice in Ohio in-person or via telehealth. The time</p>

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		by physicians, nurse practitioners & physician assistants.		<p><a href="#">Medicaid emergency rule No. 5160-1-21</a> dated 3/20/20 temporarily allows audio-only phone and other video technologies consistent with recent OCR guidance.</p> <p>Ohio Board of Psychology issued <a href="#">advisory guidance</a> dated 3/11/20 stating that under the current COVID-19 public health emergency, Ohio-licensed psychologists may use their professional judgment, on a case-by-case basis, to use audio-only phone to ensure client welfare and continuity of care when the client and psychologist are prohibited from meeting in-person because of efforts to contain COVID-19.</p> <p>This bulletin also confirms that telecommunications</p>		limit has been temporarily extended to 90 days/ calendar year. This also may be extended to supervisees practicing psychology under supervision.

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				may be used for psychological work and training supervision.		
<b>OKLAHOMA</b>	YES for commercial health plans, disability insurer programs, workers compensation programs, and Medicaid (FFS) programs  36 Okla. St. Ann. §§ 6802, 6803					
<b>OREGON</b>	YES for commercial health plans including public health benefit plans and school employees benefit plans  Or. Rev. Stat. §§ 743A.058, 743A.185  For Medicaid telehealth coverage, see Or. Admin. Code §§ 410-123-1265, 410-172-0850	<a href="#">Guidance</a> jointly issued by the Oregon Health Authority (OHA) and the Department of Business and Consumer Services (DCBS) requires commercial and Medicaid health plans to cover all telehealth services provided by network providers whenever possible and clinically appropriate; to allow telehealth access for existing and new patients; to	Joint OHA-DCBS <a href="#">guidance</a> encourages reimbursement rates for telehealth services to mirror payment rates for an equivalent office visit or that providers and health plans quickly agree on applicable reimbursement rates.	Joint OHA-DCBS <a href="#">guidance</a> requires commercial and Medicaid health plans to waive encryption requirements and to allow all modes of telehealth delivery including synchronous video, telephone-based service delivery, and other appropriate methods (e.g., Google Hangouts, FaceTime, and Skype pursuant to	Joint OHA-DCBS <a href="#">guidance</a> instructs insurers to remove related to originating sites to allow patients to receive services at home, in a nursing home, or where they are physically present and can receive the service; and to enable providers to deliver telehealth service from their own home.	Oregon’s Secretary of State has issued a <a href="#">Temporary Administrative Order OBP 4-2020</a> dated 3/26/20 establishing a temporary emergency visitor’s permit for psychologists licensed in other states (in good standing) to provide services through confidential electronic communications to persons located in Oregon.

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		<p>ensure provider networks to ensure robust telehealth services are available; and to ensure patients maintain access to behavioral health services for the duration of the COVID-19 outbreak.</p>		<p>recent OCR guidance) for the duration of the COVID-19 outbreak.</p> <p>Oregon Health Plan (Medicaid) issued <a href="#">guidance</a> dated 3/20/20 confirming certain telephone services will now be covered:</p> <ul style="list-style-type: none"> <li>• 99441-99443 for providers who can provide evaluation and management services;</li> <li>• 98966-98968 for other types of providers, including nonphysician behavioral health providers</li> </ul> <p>Oregon Health Authority <a href="#">guidance</a> dated 3/23/20 expanding telehealth to include telephone services provided by IHS/Tribal providers, FQHCs and Rural Health Clinics during the public health crisis.</p>		<p>There is no registration fee for the emergency visitor’s permit.</p> <p>The online application is available <a href="#">here</a>.</p> <p>The emergency visitor’s permit will expire on 09/26/2020 (180 days from the effective date of the administrative order).</p> <p>A person permitted to practice under the emergency visitor’s permit may use the title “Emergency Visiting Psychologist.”</p> <p>By registering with the Board, out-of-state psychologists are subject to the Board’s jurisdiction for services provided to persons in Oregon.</p>

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PENNSYLVANIA	NO	<p><a href="#">Joint Bulletin No. 2020-03</a> from the Insurance Department and the Department of Health encourages insurers to “review their respective participating telehealth service provider arrangements, provide coverage of costs related to telehealth services and be prepared to meet any increased demand for telehealth services.”</p> <p>DHS- Office of Mental Health and Substance Abuse Services Issued <a href="#">Telehealth Guidelines Related to COVID-19</a> dated 3/15/20 temporarily suspending any Medicaid program limits of the amount of services, the types of providers and the services (procedure codes) that can be provided via telehealth.</p>		<p>DHS- Office of Mental Health and Substance Abuse Services Issued <a href="#">Telehealth Guidelines Related to COVID-19</a> dated 3/15/20 allowing Medicaid providers to use phone-based video technology such as FaceTime or Skype to provide services and if video is unavailable, phone only services.</p> <p>The policy will remain in effect for 90 days or while a valid emergency disaster declaration related to the COVID-19 virus remains in effect, whichever is earlier.</p>	<p>Department of Behavioral Services issued similar <a href="#">guidance</a> dated 3/18/20 allowing Medicaid patients to receive telehealth services at home.</p>	<p>Department of State's Bureau of Professional and Occupational Affairs (BPOA) issued <a href="#">guidance</a> dated 3/18/20 that temporarily expands the existing 14-day temporary practice provision, allowing out-of-state licensed health care professionals to deliver services to Pennsylvania patients via telemedicine during the coronavirus emergency.</p> <p>Out-of-state providers must notify the appropriate Pennsylvania board prior to practicing telehealth into the state.</p> <p>Department of State issued <a href="#">guidance</a> dated 3/22/20 temporarily suspending certain licensing requirements for supervision, allowing the use of electronic means,</p>

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						<p>preferably on a HIPAA-compliant platform, but if that is not possible, then by online methods such as Skype or Facetime to conduct the required weekly in-person meetings with psychology residents.</p> <p>Department of State issued an additional <a href="#">temporary waiver dated 3/26/20</a> that allows certain mental health trainees (including psychology) who are receiving clinical supervision for experience qualifications for licensure may provide teletherapy services so long as they are receiving supervision from a supervisor who complies with all required state regulatory requirements.</p>

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<b>RHODE ISLAND</b>	YES for commercial health plans; allows for the patient’s home as an originating site “where medically appropriate”  R.I. Gen. Laws §§ 27-81-1 et seq.	Yes. <a href="#">Executive Order</a> dated 3/18/20 mandates telehealth services.  This Executive Order will remain in effect until 4/17/20 unless renewed, modified or terminated by subsequent executive order.	Yes – <a href="#">Executive Order</a> dated 3/18/20 requires reimbursement parity for telehealth services provided by in-network providers.	Yes -- <a href="#">Executive Order</a> dated 3/18/20 allows for audio-only phone.	Yes -- <a href="#">Executive Order</a> dated 3/18/20 waives the patient site requirement and allows patients to receive telehealth services in any location.	<a href="#">Announcement</a> by Governor & Department of Health dated 3/18/20 expands the existing temporary practice provision (up to 10 days/year and not more than 5 consecutive days), allowing out-of-state licensed providers (in good standing) to obtain a 90-day temporary license subject to a one-time renewal.
<b>SOUTH CAROLINA</b>				<a href="#">Guidance</a> issued by SC Medicaid Office dated 3/19/20 allows for telehealth and telephone only care for established patients who need check-ins subject to the following limitations:  These codes should not be billed if the telephonic encounter originates from a related E/M service provided within the preceding seven days nor if		<a href="#">Guidance</a> issued by the Board of Psychology stating that it will suspend enforcement of South Carolina licensing provisions for psychologists who are licensed out-of-state, who have an established client relationship with an individual now in South Carolina, to allow continuity of care by means of telecommunication for the

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				<p>it leads to an E/M service or procedure within the subsequent 24 hours. Up to three encounters will be allowed every 30 days, and services may be provided regardless of the Medicaid member's location.</p> <p>Telephonic crisis management continues to be available through the community mental health, LIP, and rehabilitative behavioral health services benefits. Medical necessity requirements related to the provision of crisis management continue to apply.</p>		duration of the public health emergency.
<b>SOUTH DAKOTA</b>	<p>YES for commercial health plans</p> <p>S.D. Codified Laws §§ 58-17-167 to 58-17-170</p>					

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STATE	Is there an existing state telehealth coverage mandate?	Emergency State Action on Coverage of Telehealth Services?	Emergency State Action on Telehealth Reimbursement Parity?	Emergency State Action to Include Audio-only Phone?	Emergency changes in originating sites requirements?	Emergency Licensure Waiver?
<b>TENNESSEE</b>	YES for commercial health plans and Medicaid managed care plans; includes reimbursement parity  Tenn. Code Ann. §56-7-1002	<a href="#">Executive Order No. 20-20</a> dated 3/26/20 temporarily waives Tenn. Code Ann. § 63-1-155(a)(1) allowing any TN licensed health care provide to deliver services using telehealth.  <a href="#">Executive Order No. 20-15</a> dated 3/19/20 encourages insurers to cover telehealth services irrespective of a provider’s network status. See Section 38.		<a href="#">Executive Order No. 20-15</a> dated 3/19/20 encourages providers to follow recent CMS guidance regarding the use of equipment and everyday communications technologies that may be used for the provision of telemedicine services. See Section 38.	<a href="#">Executive Order No. 20-15</a> dated 3/19/20 encourages insurers to cover telehealth services irrespective of originating site. See Section 38.	<a href="#">Executive Order No. 20-15</a> dated 3/19/20 temporarily waiving licensing requirements for out-of-state licensed health care professionals to provide telehealth services. See subsection 38.
<b>TEXAS</b>	YES for commercial plans including self-insured plans (to extent permitted by ERISA)  Tex. Ins. Code §§ 1455.001 to 1455.006		Texas Department of Insurance <a href="#">Emergency Rule 2020-6287</a> dated 3/17/20 temporarily establishes reimbursement and documentation parity for in-person services.  This emergency rule may not be in effect for longer than 120 days, with the	Texas Department of Insurance <a href="#">Emergency Rule 2020-6287</a> dated 3/17/20 temporarily prohibits insurers from limiting, denying or reducing for telehealth services based on the health professional's choice of platform for delivering the service or procedure.		

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			possibility for a 60-day extension.	This emergency rule may not be in effect for longer than 120 days, with the possibility for a 60-day extension.		
<b>UTAH</b>	<p>YES for commercially health plans (expanded to include telepsychological services as recognized by CMS effective Jan 1, 2021)</p> <p>Utah Code Ann. § 31A-22-649            Utah Code Ann. § 31A-22-649.5            Utah Code Ann. § 36-60-102            Utah Code Ann. § 36-60-103</p>			<p>Department of Commerce Division of Occupational and Professional Licensing <a href="#">Guidance</a> permits the health care providers to use a telehealth service that does not comply with the security and privacy standards required by federal and state law, so long as the healthcare provider notifies the patient that the service does not comply with those standards, allows the patient to decline using the service, and takes reasonable steps to ensure that the service provided is secure and private.</p>		<p>Department of Commerce <a href="#">Division of Occupational and Professional Licensing (DOPL) Guidance</a> states that out-of-state licensed mental health professionals may work in Utah within their scope of practice without restrictions or conditions may practice in Utah for the duration of the declared emergency by obtaining a DOPL Time-limited Emergency License. See <i>Practice Exemptions During Declared Emergency - Mental Health</i>.</p> <p>This emergency license expires upon the earlier of 180 days, 30 days from the</p>

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						<p>end of the declared emergency, or upon 10 days' notice from DOPL.</p> <p>The emergency license application is available online <a href="#">here</a>.</p>
<b>VERMONT</b>	<p>YES for all commercial health plans including self-funded or publicly funded plans and Medicaid; may limit coverage to telehealth services delivered by in-network providers; originating site is defined to include the patient's home and the patient's workplace</p> <p>8 V.S.A. § 4100k</p>	No				
<b>VIRGINIA</b>	<p>YES for commercial health plans; reimbursement parity included</p> <p>Va. Code Ann. § 38.2-3418</p>	<p><a href="#">Medicaid Director Memo</a> dated 3/19/20 states that DMAS will reimburse for Medicaid-covered services delivered via telehealth</p>		<p><a href="#">DMAS</a> will allow for telehealth (including telephonic) delivery of all behavioral health services with several exceptions.</p>	<p><a href="#">DMAS Guidance</a> to Allow Home as Originating Site:</p> <p>During the current emergency, DMAS will allow</p>	

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		<p>where the following conditions are met:</p> <p>To the extent feasible under the circumstances, providers must assure the same rights to confidentiality and security as provided in face-to-face services. Providers must ensure the patient’s informed consent to the use of telehealth and advise members of any relevant privacy considerations.</p>		<p>Services that will be allowable via telehealth include:</p> <ul style="list-style-type: none"> <li>○ Care coordination, case management, and peer services</li> <li>○ Service needs assessments (including the Comprehensive Needs Assessment and the</li> <li>○ IACCT assessment in mental health and the Multidimensional Assessment in ARTS) and all treatment planning activities</li> </ul>	<p>the home as the originating site. This is particularly important for members who are quarantined, those who are diagnosed with or demonstrating symptoms of COVID-19, or those who are at high risk of serious illness from COVID-19.</p> <p>Clinicians shall use clinical judgment when determining the appropriate use of home as the originating site. No originating site fee shall be paid for telehealth in the home.</p>	
<b>WASHINGTON</b>	<p>YES for commercial health plans BUT only if the plan covers the comparable in-person service; the telehealth service is medically necessary; the telehealth service is recognized as an essential</p>		<p><a href="#">Executive Order 20-29 on Telemedicine (Amending Proclamation 20-05)</a> temporarily suspends and waives the January 1, 2021 implementation date for the newly enacted 2020 SB 5385 and requires that health</p>		<p>Existing state law mandating telehealth coverage already recognizes the patient’s home as an eligible originating site.</p>	<p>Washington has enabled its <a href="#">emergency volunteer health care practitioners</a> program which allows out of state providers to practice in Washington with restrictions around compensation. It requires an application.</p>

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	<p>health benefit as defined by PPACA; the service is determined to be provided safely and effectively via telehealth according to generally accepted health care practices and standards.</p> <p><a href="#">2020 SB 5385</a> amending Wash. Rev. Code § 48.43.735 will require reimbursement parity for telehealth services for commercial health plans beginning Jan. 1, 2021.</p>		<p>plans to institute reimbursement parity immediately. This waiver will remain in effect until 4/24/20.</p>			
<b>WEST VIRGINIA</b>	NO	<p>Medicaid Commissioner <a href="#">memorandum</a> dated 3/12/20 allows for psychological testing in Medicaid through the “Telehealth Modality” for procedure codes 96130, 96131, 96136, 96137, 96132, 96113 and 96146 through May 31, 2020.</p>				<p>WV Board of Examiners of Psychology issued <a href="#">Guidance</a> to allow telepsychology if HIPAA compliant, and allow temporary practice of 10 days or 80 hours.</p>

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		(Bureau of Medical Services will reevaluate after that)  The other services the state is allowing appear to be all E&M services.				
WISCONSIN	NO	No – <a href="#">Insurance Commissioner Bulletin</a> dated 3/6/20 states: Health Plan Issuers are reminded to review provisions in current policies regarding the delivery of health care services via telehealth and ensure their telehealth programs with participating providers are robust and will be able to meet any increased demand.				
WYOMING	NO					No -- Wyoming Board of Psychology <a href="#">guidance</a> dated 3/25/20 is that since the Practice Act does not specifically prohibit

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						telepsychology, it may be provided where appropriate. One must be licensed in WY in order to treat a client located in WY.

### Glossary

**Telehealth Coverage Mandate:** A state law that prohibits insurers from refusing to cover a health care service because it was provided using telehealth if that same service is otherwise covered as an in-person service. There is some variability among state laws about what kinds of health plans are covered, what kinds of technologies are included in the definition of telehealth, what are eligible services and/or providers, whether coverage may be limited to an insurer’s in-network providers, and whether reimbursement parity is required. So it is important to review your own state’s laws.

**Reimbursement Parity:** A state policy requiring that the reimbursement rate for telehealth services be the same as comparable in-person services.

**Originating Site:** The location where the patient is at the time when telehealth services are delivered.

**Distant Site:** The location where the provider is at the time when telehealth services are delivered.

**Licensure Waiver:** State action temporarily suspending state-based licensing requirements for out-of-state licensed providers during the declaration of a public health emergency.

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