

# TELEMEDICINE – FREQUENTLY ASKED QUESTIONS

## Q: What is Telemedicine?

**A:** Telemedicine is the use of telecommunications to deliver health services to students in different locations.

- It is the expectation that medical health professionals (direct service staff), facilitators (parents/guardians) and students are trained to effectively utilize equipment and software prior to the delivery of the electronic service/treatment.

## Q: Are Telepractice or Telehealth services different from Telemedicine?

**A:** **Telepractice** is a term that was originally coined by Michigan schools. On 8/13/2020 this term was retired.

**Telehealth** is different from **telemedicine** in that it refers to a broader scope of remote health care services than **telemedicine**. **Telemedicine** refers specifically to remote clinical services, while **telehealth** can refer to remote non-clinical services.

Effective 8/13/2020 Michigan's school services program will refer to use of telecommunications to deliver health services to students in different locations as Telemedicine.

## Q: Are the services provided by a qualified health professional deliver via Telemedicine eligible for Medicaid billing?

**A:** **YES**, health and behavioral services qualify for billing.

## Q: Can a speech-language pathologist bill Medicaid for Telemedicine services?

**A:** **YES**, speech-language pathologists, audiologists, counselors, occupational therapists, physical therapists, psychologists, and social workers are all qualified to bill Medicaid for reimbursable Telemedicine services.

- For a full list of billable services, please refer to your practitioner tip sheet. Tip sheets are available at: <https://www.resa.net/administrative-support/medicaid/medicaid-school-staff>

## Q: Can Social Workers bill Medicaid if the Telemedicine service takes place over the phone?

**A:** **YES**, counselors, psychologists and social workers can bill Medicaid for audio only Telemedicine services. *(Check your practitioner tip sheet for eligible procedure codes)*

Speech language pathologists, audiologists, occupational therapists, and physical therapists aren't allowed to bill Medicaid for audio only (phone) services. These staff bill Medicaid when their service includes audio and visual (Google Classroom, Zoom, or WebEx) technologies.

## Q: Does **MISTAR Q Service Tracker** differentiate between regular and Telemedicine services?

**A:** **YES**, when you bill Telemedicine services, you select from a list of service codes with that applicable Telemedicine modifier.

- Modifier 95 describes audio and visual Telemedicine services
- Modifier 93 describes audio only Telemedicine services.

**Q: Are schools required to obtain a Telemedicine specific prescription/referral for Medicaid Billing?**

**A: NO**, if the student has an active prescription/referral for occupational therapy, physical therapy, or speech-language-hearing therapy on file, a separate prescription/referral is not required.

**Q: Are providers required to obtain a separate consent to render Telemedicine services?**

**A: NO**, consent specific to Telemedicine is not required. The normal consent to treat is all that is required.

**Q: Are providers required to obtain a separate consent to bill for Telemedicine Medicaid services?**

**A: NO**, consent specific to Telemedicine is not required. The normal consent to bill is all that is required.

**Q: May districts accept digital or electronic signatures when obtaining consent?**

**A: YES**, districts may accept digital or electronic signatures for consent. The electronic signature must be able to be traced back to the source.

Before disclosure of personally identifiable information, consent must be obtained, signed, and dated.

This consent may include a record and signature in electronic form that:

- 1) Identifies and authenticates a particular person as the source of the electronic consent; and
- 2) Indicates such person's approval of the information contained in the electronic consent, i.e., disclosure of the child's personally identifiable information to the agency responsible for the administration of the State's public benefits or insurance program (e.g., Medicaid) for billing purposes to pay for services.

Additionally, the electronic consent must include a statement that the parent understands and agrees that the district and the intermediate school district may access the child's public benefits to pay for services.