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Services

House Bill 4 – Medicaid and CHIP Teleservices

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Background (1 of 3)

House Bill (HB) 4 (87th Legislative Session, 2021):

- The Texas Health and Human Services Commission (HHSC) allowed the use of telemedicine, telehealth, and audio-only for many new Medicaid services during the COVID-19 Public Health Emergency (PHE).
- HB4 requires HHSC to allow more services to be delivered using telemedicine, telehealth, and audio-only methods on a permanent basis after the PHE ends if clinically appropriate and cost-effective.



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Background (2 of 3)

Senate Bill (SB) 670 (86th Legislative Session, 2021):

- Managed Care Organizations (MCOs) have the responsibility to determine which services could be delivered through telemedicine, telehealth, and audio-only methods.
- Under SB670 MCOs cannot:
 - Deny reimbursement to health care providers for a Medicaid service or procedure just because it was delivered via telemedicine or telehealth
 - Deny or reduce reimbursement for a covered health care service or procedure based upon the network provider's choice of platform; and



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Background (3 of 3)

Senate Bill (SB) 670 (86th Legislative Session, 2021):

- Under SB670 MCOs:
 - Must ensure that telemedicine and telehealth services promote and support patient-centered medical homes.



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HB4 Timeline (1 of 3)

Phase I: Analysis - Winter 2022

- HHSC released guidance about certain services that are approved for telemedicine, telehealth, and audio-only delivery methods on an ongoing basis.
- HHSC began releasing draft rules and other policy updates.



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HB4 Timeline (2 of 3)

Phase II: Analysis - Spring 2022

- HHSC will ask stakeholders for input about additional services that were available for remote delivery during the PHE to help determine whether permanent telemedicine, telehealth, and audio-only delivery methods would be cost-effective and clinically appropriate.
- HHSC will release guidance about additional services that are approved for telemedicine, telehealth, and audio-only delivery methods.



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HB4 Timeline (3 of 3)

Phase III: Rulemaking - Summer 2022

- Rules required by legislation will be posted for public comment.

Phase IV: Finalizing Policy - Fall 2022

- HHSC expects to finalize formal policy changes after providing an opportunity for stakeholder input on posted rules and policies.



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Requirements for Teleservices under HB4

- Per standards of care, all telemedicine and telehealth activities must be clinically appropriate, safe, and agreed to by the client receiving services or by the legally authorized representative (LAR).
- Telemedicine and telehealth requires consent from the client or the client's parent or LAR.
- Providers must be able to defer to the needs of the person receiving services, allowing the mode of service delivery (synchronous audio-visual or in-person) to be accessible, person- and family-centered, and primarily driven by the person in service's choice and not provider convenience.



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Teleservice Allowances: Therapies

Service	Allowance(s)	Relevant Guidance
Physical Therapy (PT) Occupational Therapy (OT) Speech Therapy (ST)	<ul style="list-style-type: none"> • Synchronous Audio-Visual modality for PT, OT, and ST • Certain activities are excluded • Telephone (audio-only) is not allowed 	Information Letter No. 2022-08 (January 19, 2022) titled <i>HB4: Physical Therapy, Occupational Therapy, Speech Therapy Services Delivered by Synchronous Audio-Visual</i>
CLASS Specialized Therapies <ul style="list-style-type: none"> • Recreational therapy • Music therapy • Behavior support • Dietary services • Cognitive rehabilitation therapy 	<ul style="list-style-type: none"> • Synchronous Audio-Visual modality for CLASS Specialized Therapies • Telephone (audio-only) is only permitted for therapy activities that are provided to the individual's LAR or others involved in their care such as a caregiver or family member. These activities should coincide with allowed billable activities within the CLASS handbook. 	Information Letter forthcoming at end of April 2022 to transition COVID-19 flexibility to ongoing policy via interim guidance



Teleservice Allowances: Assessments (1 of 2)

Service	Allowance(s)	Relevant Guidance
Pre-Enrollment and Enrollment Assessments	None – all must be done in person Current COVID-19 Flexibility will remain in place through the end of the federal Public Health Emergency (PHE)	Information Letter forthcoming at end of April 2022 to notify providers that COVID-19 Flexibility will end when PHE ends
Renewal Assessments in HCS, TxHmL and CLASS: <ul style="list-style-type: none"> • Renewal ID/RC assessments • Renewal, revised and transfer IPCs 	<ul style="list-style-type: none"> • Allows Synchronous Audio-Visual modality • Telephone (audio-only) is not allowed 	Information Letter forthcoming at end of April 2022 to transition COVID-19 flexibility to ongoing policy via interim guidance
Renewal Assessments in DBMD: <ul style="list-style-type: none"> • Renewal ID/RC assessments • Renewal, revised and transfer IPCs 	None – all must be done in person Current COVID-19 Flexibility will remain in place through the end of the federal Public Health Emergency (PHE)	Information Letter forthcoming at end of April 2022 to notify providers that COVID-19 Flexibility will end when PHE ends



Teleservice Allowances: Assessments (2 of 2)

Service	Allowance(s)	Relevant Guidance
Comprehensive nursing assessments	<p>None – all must be done in person</p> <p>Current COVID-19 Flexibility will remain in place through the end of the federal Public Health Emergency (PHE)</p>	Information Letter forthcoming at end of April 2022 to notify providers that COVID-19 Flexibility will end when PHE ends
Focused nursing assessments	<ul style="list-style-type: none"> • Allows Synchronous Audio-Visual modality • Telephone (audio-only) is not allowed 	Information Letter forthcoming at end of April 2022 to transition COVID-19 flexibility to ongoing policy via interim guidance



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Teleservice Allowances: Case Management

Service	Allowance(s)	Relevant Guidance
Quarterly Required Case Management Visits in HCS, TxHmL, CLASS and DBMD	None – all must be done in person Current COVID-19 Flexibility will remain in place through the end of the federal Public Health Emergency (PHE)	Information Letter forthcoming at end of April 2022 to notify providers that COVID-19 Flexibility will end when PHE ends



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Resources

- **HHSC Website**
 - <https://www.hhs.texas.gov/services/health/medicaid-chip/provider-information/medicaid-chip-teleservices>
- **HHSC Email**
 - [HHSC MCS House Bill 4@hhs.texas.gov](mailto:HHSC_MCS_House_Bill_4@hhs.texas.gov)



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Thank You
