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House Bill 4 – Medicaid and CHIP Teleservices

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February 8, 2023

Background

- The Health and Human Services Commission (HHSC) allowed remote delivery for many services during the COVID-19 public health emergency (PHE).
- House Bill (H.B.) 4 requires HHSC to allow more services to be delivered remotely on a permanent basis after the PHE ends if clinically appropriate and cost-effective.



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Medicaid Teleservices Prior to H.B. 4

- Telehealth and telemedicine were allowed prior to the PHE for many services
 - Synchronous audio-visual delivery
 - Examples include physician office visits (telemedicine) and psychotherapy (telehealth)
- Medicaid Managed Care Organizations (MCOs) have the responsibility to determine which services can be delivered remotely in managed care, in alignment with Senate Bill (S.B.) 670, 86th Legislature



H.B. 4 Implementation Timeline

Phase 1

Winter 2022

- Completed initial analysis
- Issued interim guidance to providers
- Issued direction to MCOs
- Began rule and policy development
- Posted draft rules for informal public comment for managed care assessment and service coordination

Phase 2

Spring 2022

- Implemented Rural Health Clinic changes
- Submitted state plan amendments
- Posted draft rules for informal public comment for teleservices, including behavioral health audio-only delivery
- Issued additional interim guidance

Phase 3

Summer 2022

- Posted medical benefit policies for public comment
- Issued final provider notices about medical benefit policy changes

Phase 4

Fall 2022-Spring 2023

- Implement MCO contract changes, Medicaid provider manual, and 1915c waiver manual changes
- Post proposed rules for formal public comment for managed care assessment and service coordination and Medicaid behavioral health audio-only services
- Adopt rules



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Medicaid Behavioral Health FFS Policy Changes

Policy Requirements

- Must be clinically appropriate and safe, as determined by the clinician
- Providers must defer to needs of person receiving services and modality must be driven by client choice and consent
- Delivery method should be accessible, person- and family-centered
- Services must align with licensure and regulatory requirements
- Certain audio-only services restricted to clients with existing clinical relationship



Medicaid Behavioral Health FFS Policy Changes

New Audio-Visual and Audio-Only Allowances Effective 9/1/22

Screening, Brief Intervention, and Referral to Treatment Services

Health and Behavior Assessment and Intervention Services

Healthy Texas Women (HTW) and HTW PLUS services that are allowed in Medicaid FFS

Psychiatric Diagnostic Evaluation Services*

Psychiatric Evaluation & Management (E&M) Services and Pharmacological Management Services for a mental health or SUD condition*

Psychotherapy Services*

* Requires existing clinical relationship for delivery via audio-only technology.



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Medicaid Behavioral Health FFS Policy Changes

New Audio-Visual and Audio-Only Allowances Effective 9/1/22

Mental Health Rehabilitation Services**

Peer Specialist Services**

Mental Health Targeted Case Management**

New Audio-Visual Allowances Effective 9/1/22

Substance Use Disorder (SUD) counseling***

SUD comprehensive assessment

Neurobehavioral, Neuropsychological, and Psychological Testing

** Requires approval by the supervising clinician and requires existing clinical relationship for delivery via audio-only technology.

***Audio-only is allowed in TMPPM, but must also be allowed in licensing rules before it should be used



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Other Medicaid State Plan FFS Policy Changes

New Audio-Visual and Audio-Only Allowances Effective 9/1/22

Case Management for Children and Pregnant Women (CPW) Follow-up Visit

New Audio-Visual Allowances Effective 9/1/22*

Several physical, occupational, and speech therapy services

CPW Comprehensive Visit

Certain School Health and Related Services, including physical, occupation, and speech therapy*

Physician E&M Services for Family Planning, Prenatal, and Postnatal

Early Childhood Intervention Targeted Case Management

* SHARS updates effective 10/1/22



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Behavioral Health Rule Update

- **Medicaid Health Services Provided via Telemedicine and Telehealth including Audio-only Delivery Methods**
 - Implements rules related to behavioral health audio-only services and other teleservices updates
 - Effective January 23, 2023



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Managed Care Rule Update

- **Telecommunications for Managed Care Service Coordination and Assessments**
 - Implements rules related to use of teleservices in managed care assessments and service coordination
 - Draft rules were posted for informal public comment in February - March 2022
 - Draft rules were posted for formal comment December 30, 2022 - January 30, 2023
 - Effective date expected in spring 2023



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Stakeholder Engagement

HHSC is implementing HB4 in phases and continues to seek stakeholder input

Dedicated mailbox to receive input
[HHSC MCS HOUSE BILL 4@hhs.texas.gov](mailto:HHSC_MCS_HOUSE_BILL_4@hhs.texas.gov)

A webpage on the HHS site outlining ways to give input
<https://www.hhs.texas.gov/services/health/medicaid-chip/provider-information/medicaid-chip-teleservices>



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Thank You
