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House Bill 4 – Medicaid and CHIP Teleservices

Erica Brown, *Deputy Director*
Office of Policy

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 asked 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 released 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

- Additional rules required by legislation will be posted for public comment.
- HHSC expects to finalize formal policy changes after providing an opportunity for stakeholder input on posted rules and policies.



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Interim Guidance

- Interim guidance allows a policy to be implemented while public comment, rule development, and contract amendment processes are in progress.
- This can provide a bridge between a flexibility allowed temporarily in a PHE and ongoing policy.



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Winter Notices Issued (1 of 2)

- **MCO**

- Medicaid MCO Reminder – SB 670
- CHIP Notice
- Behavioral Health Audio-Only Services

- **FFS Interim Guidance**

- Therapies
 - Several physical, occupational, and speech therapy services
 - Audio-only is not allowed
 - Also allowed for the Intellectual and Developmental Disability (IDD) Waiver Programs



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Winter Notices Issued (2 of 2)

- **FFS Interim Guidance** (cont.)
 - Behavioral Health
 - Substance Use Disorder (SUD) counseling and assessment audio-visual
 - Screening, Brief Intervention, and Referral to Treatment (SBIRT) Services audio-visual and audio-only
 - Health and Behavior Assessment and Intervention (HBAI) audio-visual and audio-only



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Spring Notices Issued

- Rural health clinic distant services for telemedicine and telehealth and patient site fees for telemedicine
- FFS Interim Guidance for Behavioral Health - synchronous audio-visual or telephone (audio-only) delivery for
 - Psychiatric Diagnostic Evaluation with & without medical services
 - Psychotherapy (individual, family, and group)
 - Peer Specialist Services
 - Mental Health Rehabilitation Services, excluding day programming for acute care needs
 - Mental Health Targeted Case Management Services
 - Psychiatric Evaluation & Management Services and Pharmacological Management Services for psychiatric care only



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Stakeholder Engagement (2 of 2)

Winter and Spring

Interim guidance to be issued for most services and benefits

2022

Policy development through rules and benefit policy updates

Continued opportunities for input



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Rule Update (1 of 2)

- **22R055 Telecommunications for Managed Care Service Coordination and Assessments**
 - Implements rules related to use of teleservices in managed care assessments and service coordination
 - Draft posted for informal public comment February 24, 2022, through March 10, 2022
 - Formal comment period expected summer 2022



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Rule Update (2 of 2)

- **22R075 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
 - Draft posted for informal public comment April 8, 2022, through April 22, 2022
 - Formal comment period expected fall 2022



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Policy Updates

- Updates to the Texas Medicaid Provider Procedures Manual (TMPPM) will be posted this summer for public comment including policies regarding:
 - Physician Evaluation and Management
 - Behavioral Health
 - Therapies



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Stakeholder Engagement

HHSC is implementing HB4 in phases and will seek stakeholder input



Dedicated mailbox to receive input
HHSC_MCS_HOUSE_BILL_4@hhs.texas.gov



A webpage on the HHS site
outlining ways to give input



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Thank You
