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**New Jersey Telemedicine Law
2017-2020**

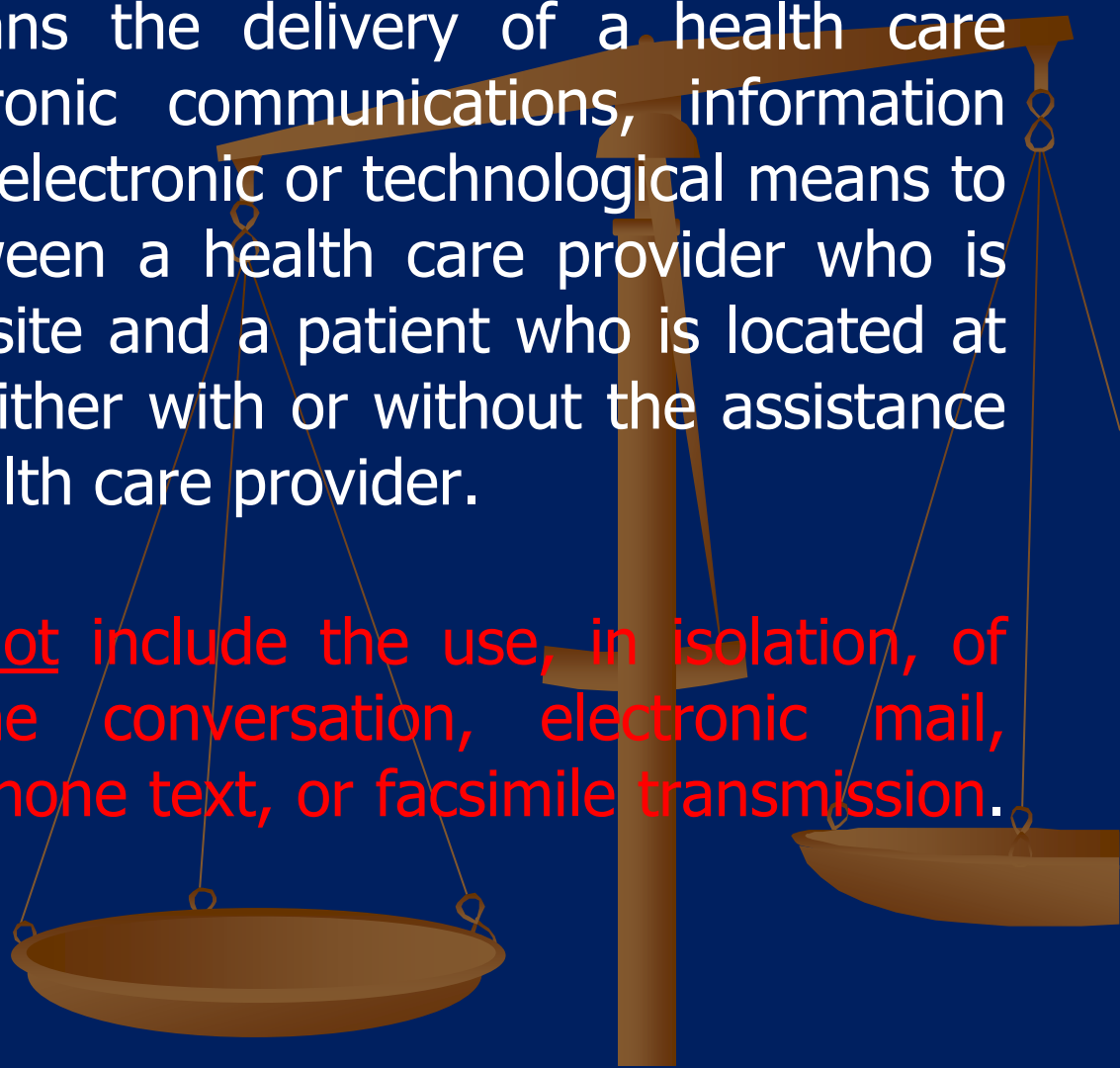


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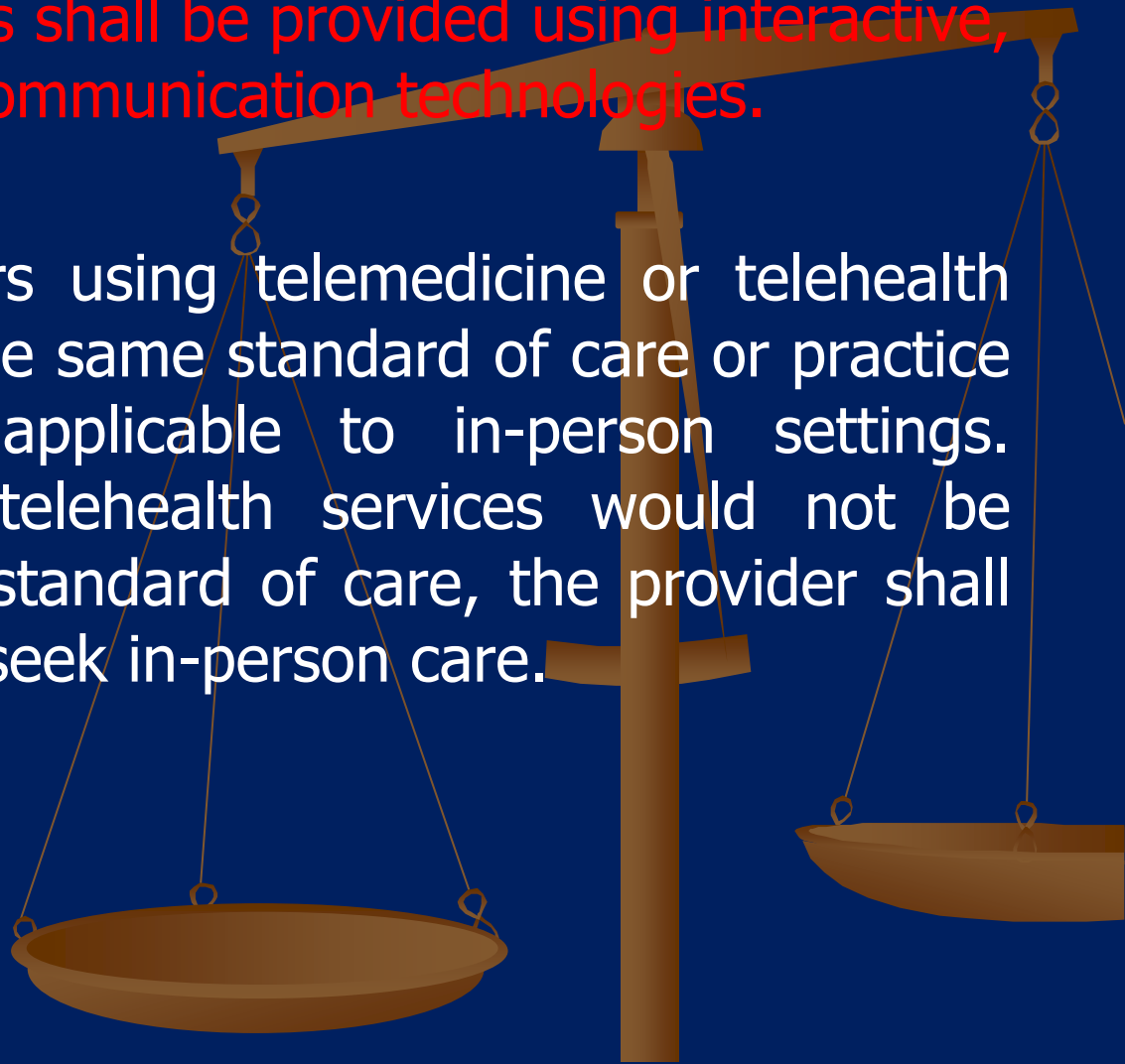
July 2017 Telemedicine Law

- "Telemedicine," means the delivery of a health care service using electronic communications, information technology, or other electronic or technological means to bridge the gap between a health care provider who is located at a distant site and a patient who is located at an originating site, either with or without the assistance of an intervening health care provider.
- Telemedicine does not include the use, in isolation, of audio-only telephone conversation, electronic mail, instant messaging, phone text, or facsimile transmission.



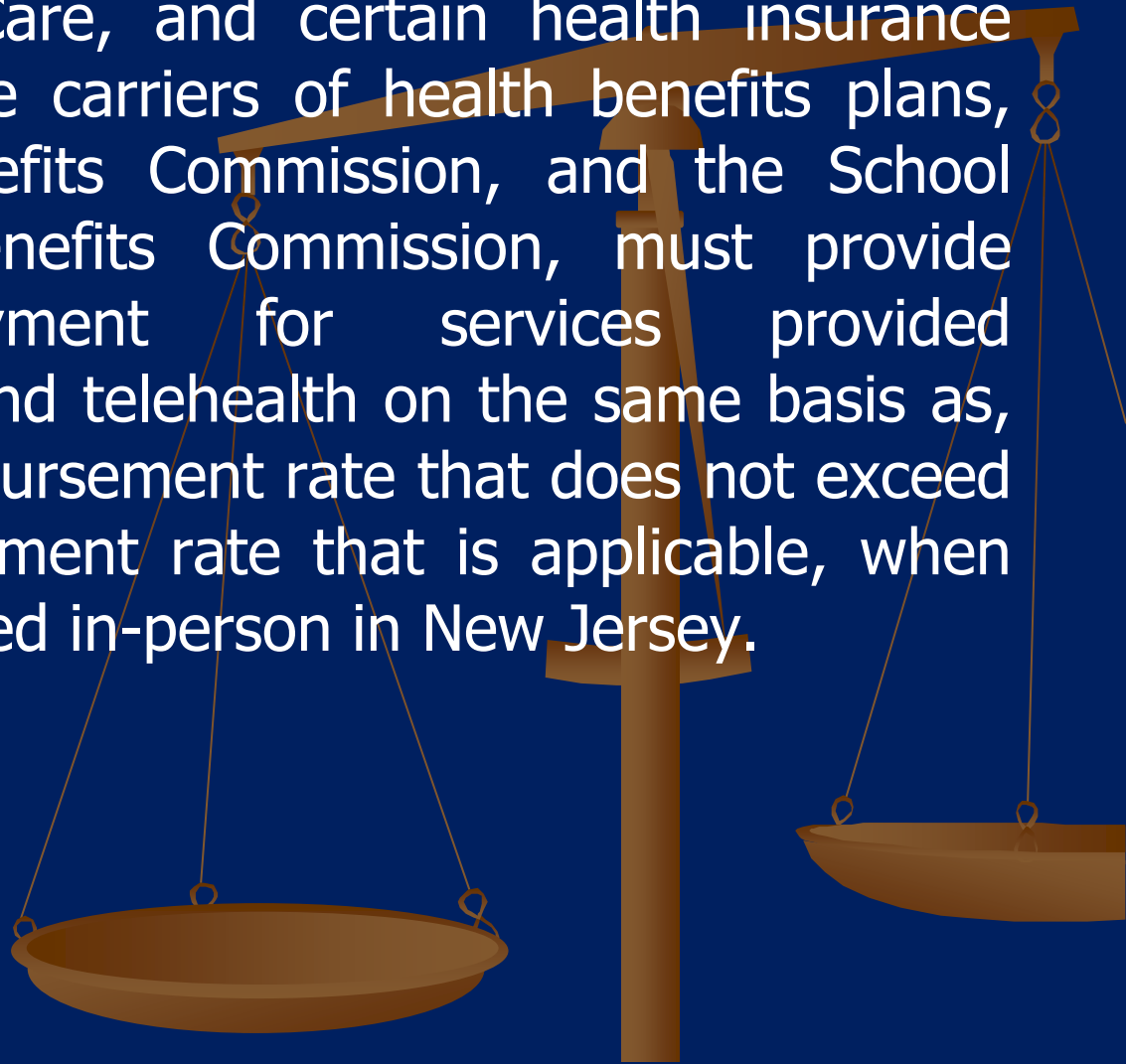
2017 Law

- Telemedicine services shall be provided using interactive, real-time, two-way communication technologies.
- Health care providers using telemedicine or telehealth shall be subject to the same standard of care or practice standards as are applicable to in-person settings. If telemedicine or telehealth services would not be consistent with this standard of care, the provider shall direct the patient to seek in-person care.



2017 Law

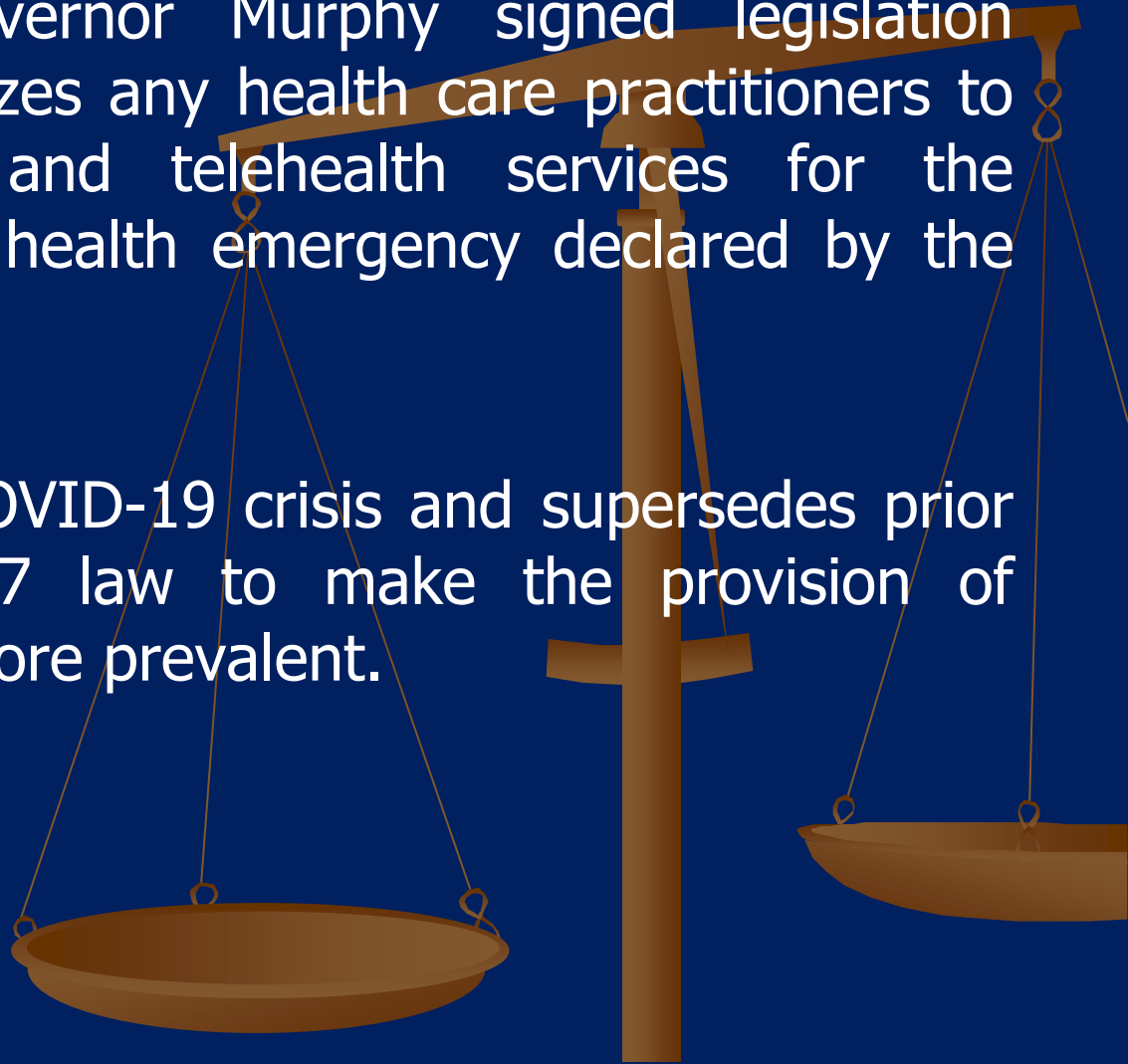
Medicaid, NJ FamilyCare, and certain health insurance providers, including the carriers of health benefits plans, the State Health Benefits Commission, and the School Employees' Health Benefits Commission, must provide coverage and payment for services provided through telemedicine and telehealth on the same basis as, and at a provider reimbursement rate that does not exceed the provider reimbursement rate that is applicable, when the services are delivered in-person in New Jersey.



March 2020 Law

March 20, 2020, Governor Murphy signed legislation (A3860), which authorizes any health care practitioners to provide telemedicine and telehealth services for the duration of the public health emergency declared by the Governor.

Law enacted due to COVID-19 crisis and supersedes prior provisions in the 2017 law to make the provision of telehealth easier and more prevalent.

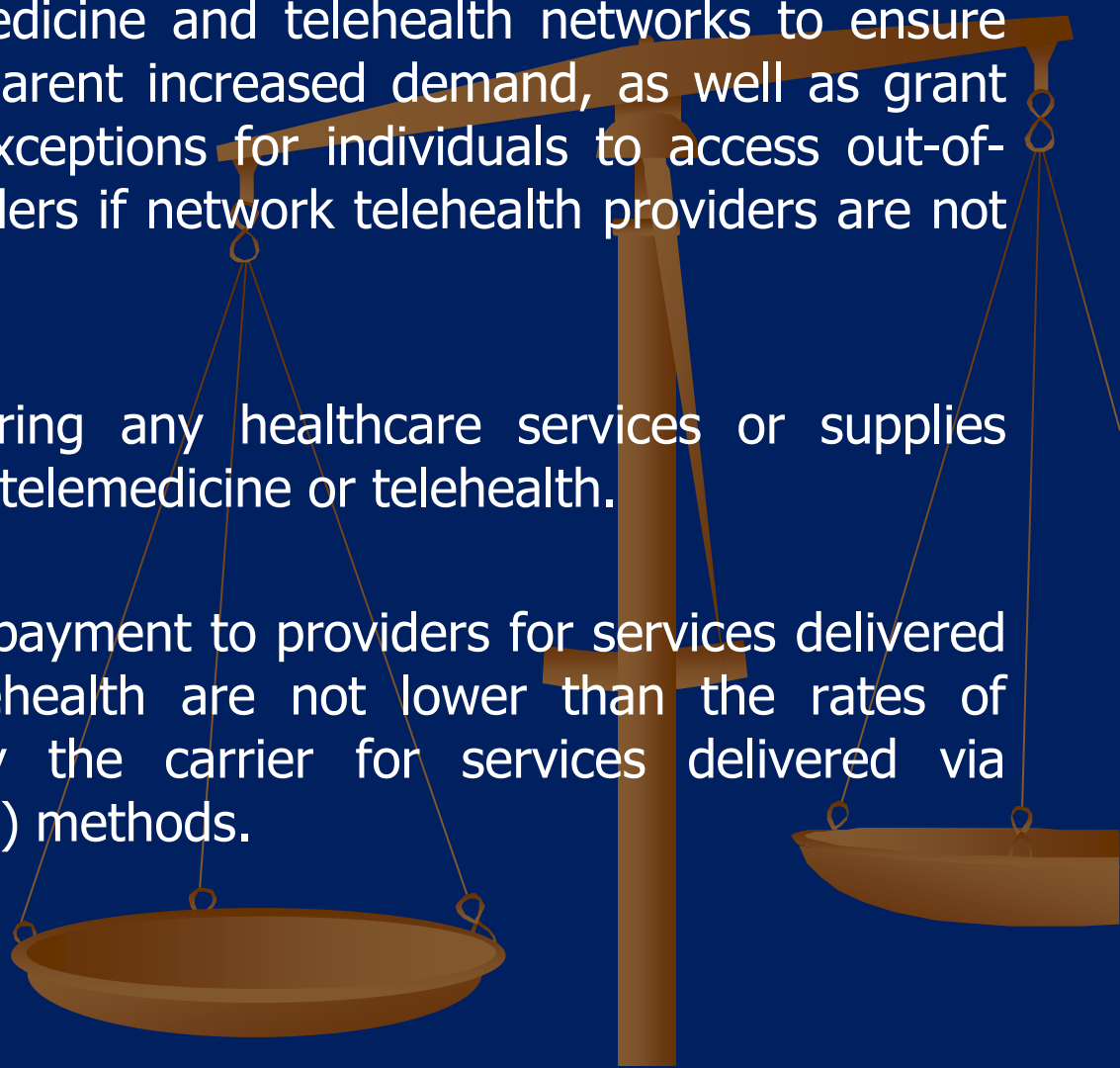


Medicaid, Medicaid MCO, NJ Family Care

- Must provide reimbursement to providers for telehealth in the same manner as for face-to-face services as long as the services are performed to the same standard of care as if the services were rendered in-person.
- Waive site of service requirements for telehealth, allowing NJ licensed clinicians to provide telehealth from **any** location and allowing individuals to receive services via telehealth from **any** location.
- Permit use of alternative technologies for telehealth such as telephonic and video technology commonly available on smart phones and other devices.

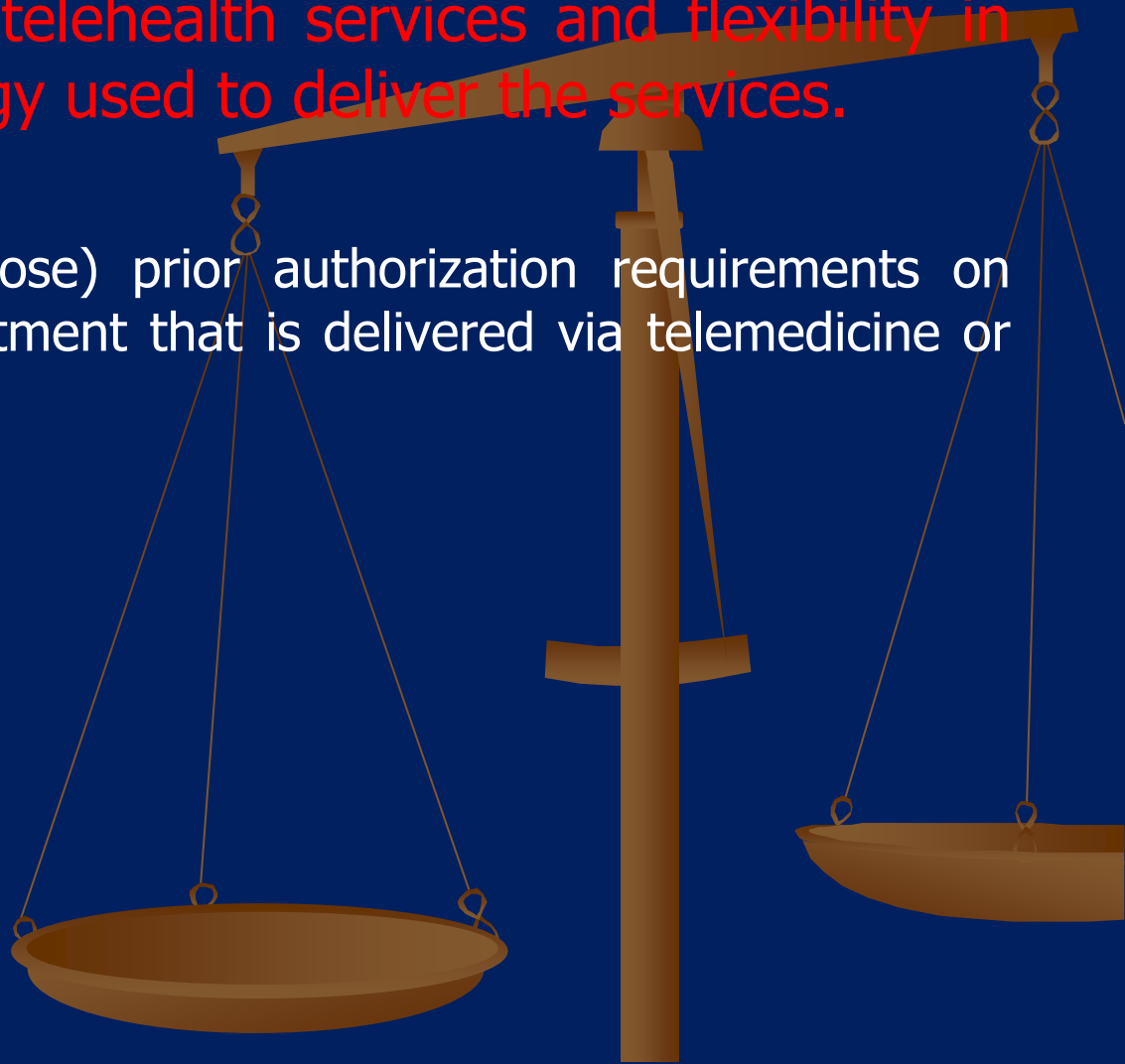
Major Medical Insurance

- Must review their telemedicine and telehealth networks to ensure adequacy, given the apparent increased demand, as well as grant any requested in-plan exceptions for individuals to access out-of-network telehealth providers if network telehealth providers are not available.
- Cover, without cost-sharing any healthcare services or supplies delivered or obtained via telemedicine or telehealth.
- Ensure that the rates of payment to providers for services delivered via telemedicine or telehealth are not lower than the rates of payment established by the carrier for services delivered via traditional (i.e., in-person) methods.



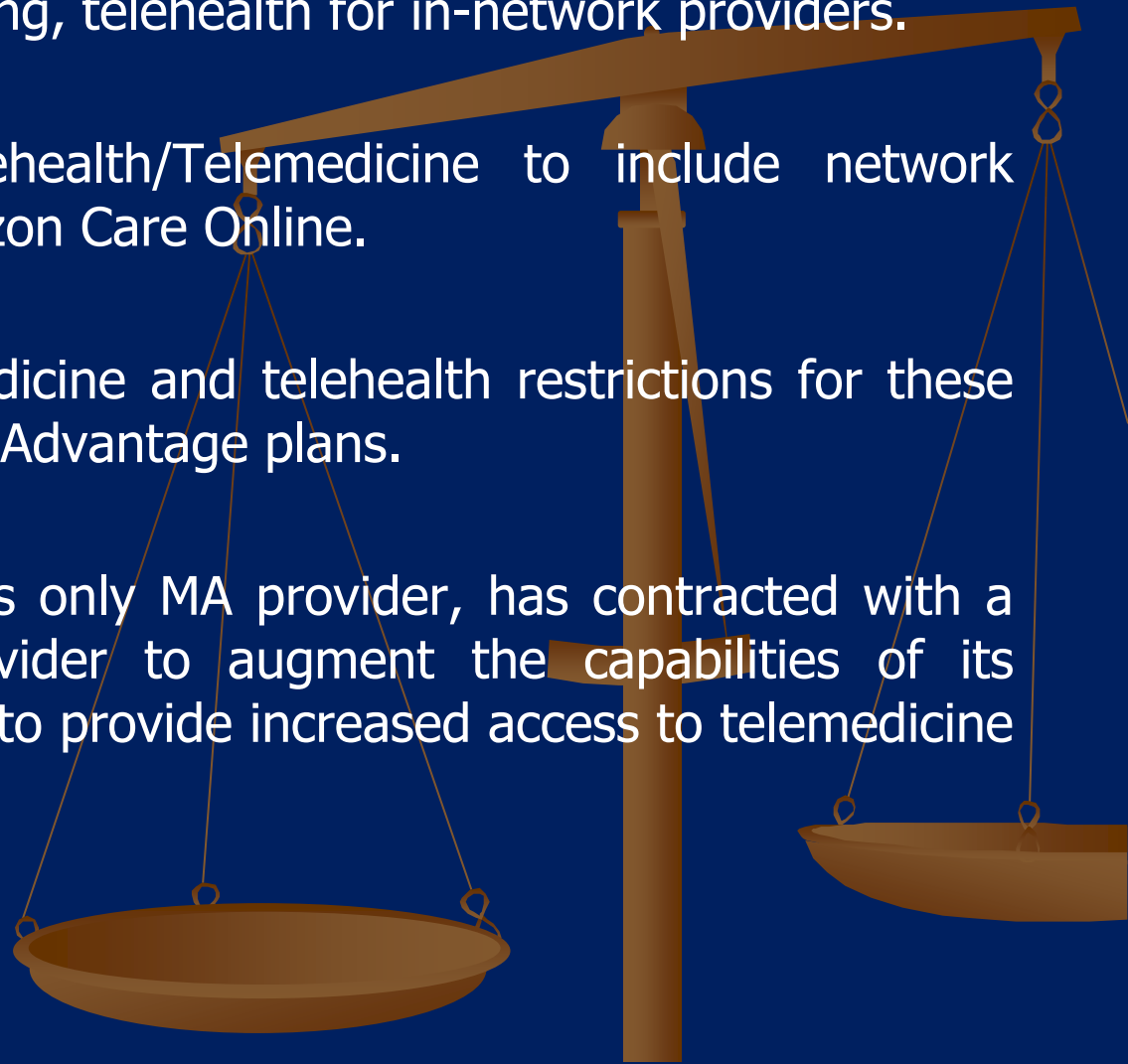
Major Medical Insurance

- Allow for telephonic telehealth services and flexibility in the specific technology used to deliver the services.
- Eliminate (may not impose) prior authorization requirements on medically necessary treatment that is delivered via telemedicine or telehealth.



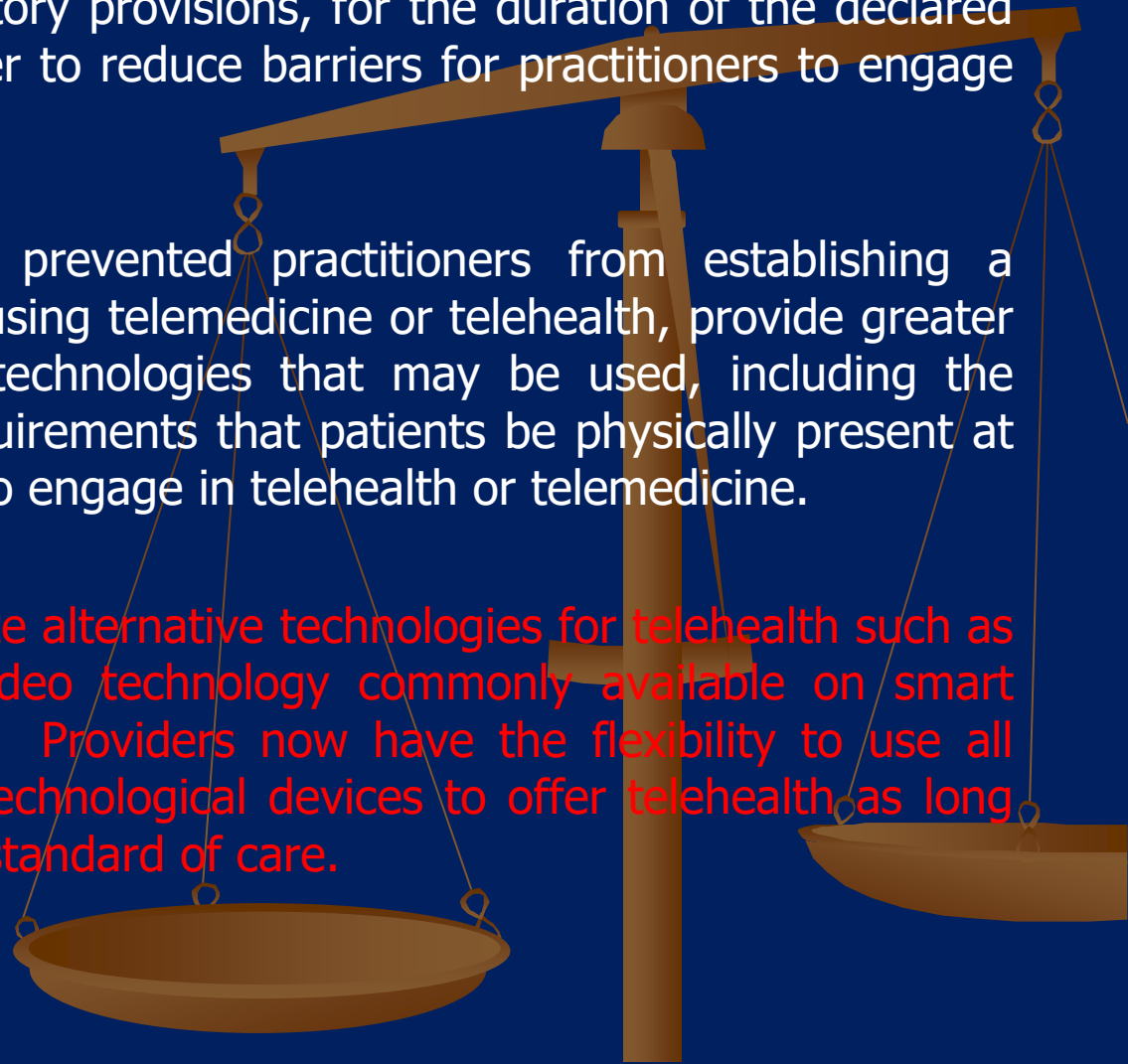
NJSHBP / NJSEHBP

- Cover, without cost-sharing, telehealth for in-network providers.
- Expand access to Telehealth/Telemedicine to include network providers outside of Horizon Care Online.
- CMS has relaxed telemedicine and telehealth restrictions for these products in the Medicare Advantage plans.
- Aetna, the SHBP/SEHBP's only MA provider, has contracted with a digital telemedicine provider to augment the capabilities of its current network in order to provide increased access to telemedicine services.



NJ Division of Consumer Affairs

- Waive statutory and regulatory provisions, for the duration of the declared state of emergency, in order to reduce barriers for practitioners to engage in telemedicine.
- Eliminate restrictions that prevented practitioners from establishing a doctor/patient relationship using telemedicine or telehealth, provide greater flexibility in the types of technologies that may be used, including the telephone, and remove requirements that patients be physically present at a specific address in order to engage in telehealth or telemedicine.
- Encourage licensees to utilize alternative technologies for telehealth such as audio-only telephone or video technology commonly available on smart phones and other devices. Providers now have the flexibility to use all available and appropriate technological devices to offer telehealth as long as these services meet the standard of care.



Conclusion

- Questions and Answers?
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