

State Medicaid Managed Care Advisory Committee



Network Adequacy and Access to Care Subcommittee
February 7, 2024

Summary

This meeting highlighted Texas Medicaid's dedication to network adequacy and the integration of telemedicine and telehealth, emphasizing a comprehensive approach to healthcare delivery. The discussions spanned HHSC's network adequacy monitoring processes, Senate Bill 760's reporting requirements, and the evolution of telemedicine/telehealth, including legislative milestones. Key points also covered the use of billing modifiers for telemedicine and telehealth services, the significance of distance site teleservices in expanding access to care, and the permanent adoption of telehealth flexibilities post-COVID-19. The committee reinforced Texas Medicaid's commitment to offering a wide range of health services and ensuring telemedicine and telehealth services uphold the same standard of care as in-person services.

- [Subcommittee Agenda](#)

Network Adequacy Measures and Report

- [Presentation](#)
- **Overview:** The committee discussed HHSC's oversight process for monitoring network adequacy in managed care contracts, emphasizing the importance of quarterly performance reports to ensure member access to care.
- **SB 760 Report Requirements:** Discussion on the biannual report requirements under Senate Bill 760, focusing on Medicaid managed care network adequacy compliance.

Overview of Texas Medicaid Telemedicine and Telehealth Billing

- **Presentation**
- **Historical Context and Legislative Framework:** The evolution of telemedicine/telehealth within Texas Medicaid was outlined, highlighting key legislative milestones and providing guidance for provider practices.
- **Legislation Highlighted:**
 - HB 2386 (1997): Authorized audio-visual remote delivery.
 - SB 293 (2011): Expanded teleservices, including authorization for remote delivery.
 - SB 670 (86th Legislative Session): Prohibited denial of reimbursement for teleservices based solely on the method of delivery.
- **COVID-19 Flexibilities:** Authorization by HHSC for the use of telemedicine, telehealth, and audio-only platforms during the COVID-19 public health emergency was highlighted, with HB 4 making these flexibilities permanent.
- **Procedure Codes and Modifiers:** Explanation of the use of modifiers in the American Medical Association's Current Procedural Terminology (CPT) for telemedicine and telehealth services:
 - Modifier 95: For real-time interactive audio and video telecommunication.
 - Modifier 93: For audio-only non-behavioral health or telemedicine services.
 - Modifier FQ: For audio-only behavioral health or telehealth services.
- **Distance Site Teleservices:** The importance of increasing access to specialized care through remote healthcare professionals was emphasized, noting how this approach reduces travel for clients and enables timely consultations.

Comprehensive Health Care Commitment

- Overall Commitment: Texas Medicaid's commitment to providing comprehensive health care services, including medical, behavioral health, and therapy services for individuals across all age groups, was a focal point of discussion.
- Standard of Care: The committee emphasized the importance of maintaining the same standard of care for telemedicine and telehealth services as for in-person services.

Provider Licensing and Practice

- Providers offering healthcare services remotely through teleservices must be licensed, certified, or otherwise entitled to practice in the state of Texas.
- Additionally, establishing a valid practitioner-patient relationship is essential and can be achieved through various means, including prior in-person visits or through current telemedicine services.