Frequently Asked Questions

What is Telehealth?
Telehealth refers to the remote diagnosis and treatment of patients by means of telecommunications technology, typically through videoconference or phone call. Telehealth has the ability to expand access to care, improve the efficiency of care, and has been an essential tool for enabling patients to continue to receive care at a time when in-person appointments are not advisable for public health reasons. This bill may have the capacity to make telehealth services permanently available for Massachusetts patients after the COVID-19 state of emergency has ended.

- **Will Telehealth be covered by any insurance provider?**
  Insurance carriers, including MassHealth, are required to cover telehealth services for any service that is a covered in-person benefit. As long as a health plan covers “in-person” services, it must cover it via telehealth.

- **Will insurance cover behavioral health (mental health and addiction) services?**
  Yes, as long as the service is covered for in-person services by the health plan.

- **If the patient prefers an in-person visit, can a provider still schedule telehealth?**
  There’s no specific rule about this – it’s a determination left to the patient and their healthcare provider. Essentially if telehealth service is a covered benefit, then the patient can access it through their plan. Whether telehealth or in-person service makes more sense is really a clinical decision left to the patient and their provider. The bill does make it clear that a patient may decline telehealth services in order to see a provider in-person.
• **Will Telehealth be reimbursed at the same rate as if it were an in-person visit.**
  Yes, until July of 2022. The Health Policy Commission will assess that provision as part of its telehealth study in the interim.

• **Will insurance coverage require prior authorization?**
  Coverage may include utilization review, including prior authorization, but only in the same manner it is used for the in-person service. In short, if it’s not used for the in-person service, it cannot be used for the telehealth service. If it is used for the in-person service, it can be used in the same manner for the telehealth service. The “may” is important – some carriers may choose not to use prior authorization in certain instances.

• **Is Telehealth to be offered by all insurance carriers?**
  Yes, insurance carriers, including MassHealth, are required to cover telehealth services for any service that is a covered in-person benefit.

• **How will this address any federal law or regulations such as for Medication Assisted Treatment/Recovery Services**
  If MAT is a covered benefit under a health plan, then it will also be offered via telehealth as long as it doesn’t violate federal law. Because MAT is also federally regulated in certain instances, there might be different case-by-case scenarios.

• **Will the House of Representatives create its own bill or work from this one?**
  The House of Representatives is likely to do a bill.

Questions:
Maryanne Frangules, MOAR Executive Director
maryanne@moar-recovery.org

Trevi Hall, MOAR Western MA Regional Coordinator
Trevi@moar-recovery.org

7/7/2020