

Telemedicine In Workers' Compensation



Montana Department of
LABOR & INDUSTRY

Telemedicine Regulations/Guides

Does your Jurisdiction have Telemedicine Regulations/Guides	
Colorado	Yes
Idaho	No
Indiana	No
Montana	No
New York State	No
North Dakota	Yes
Tennessee	Yes
Washington	Yes



Colorado

TELEHEALTH

(1) “Telehealth” and “Telemedicine” are defined in Rules 162(X) and (Y). The healthcare services listed in Appendix P of CPT® and Division Z-codes (when appropriate) may be provided via telehealth or telemedicine. The provider shall append modifier 95 to the services listed in Appendix P to indicate synchronous telemedicine service rendered via a real-time interactive audio and video telecommunications system.

All healthcare services provided through telehealth or telemedicine shall comply with the applicable requirements found in the Colorado Medical Practice Act and Colorado Mental Health Practice Act, as well as the rules and policies adopted by

North Dakota

ND Admin Rule 92-01-02-34 states:

(3) Medical service providers shall request prior authorization directly from the claims analyst for the items listed in this subsection. The claims analyst shall respond to requests within fourteen days.

(d) Telemedicine. The organization may pay for audio and video telecommunications instead of a face-to-face "hands on" appointment for the following appointments: office or other outpatient visits; new and established evaluation and management visits; individual psychotherapy visits; and pharmacologic management visits. As a condition of payment, the patient must be present and participating in the telemedicine appointment. The professional fee payable is equal to the fee schedule amount for the service provided. The organization may pay the originating site a facility fee, not to exceed twenty dollars.

Tennessee

0800-02-17-.05 PROCEDURE CODES, ADOPTION OF THE CMS MEDICARE PROCEDURES, GUIDELINES AND AMOUNTS.

(5) Telehealth: the definitions, licensing and processes for the purpose of these rules shall be the same as adopted by the Tennessee Department of Health. Payments shall be based upon the applicable Medicare guidelines and coding for the different service providers with the exception of any geographic restriction.

Washington

Coverage of teleconsultations

Teleconsultations are covered in the same manner as face-to-face consultations, but in addition, all of the following conditions must be met:

The consultant must be a:

- Doctor as described in [WAC 296-20-01002](#), or
- ARNP, or
- PhD Clinical Psychologist, or
- Consulting DC who is an approved consultant with L&I, and

The referring provider must be one of the following:

- MD, or
- DO, or
- ND, or
- DPM, or
- OD, or
- DMD, or
- DDS, or
- DC, or
- ARNP, or
- PA, or
- PhD Clinical Psychologist, and

The patient must be present at the time of the consultation, and

The exam of the patient must be under the control of the consultant, and

Interactive audio and video telecommunications must be used allowing real time communication between the patient and the consultant, and

The consultant must submit a written report documenting this service to the referring provider, and must send a copy to the insurer, and

A referring provider who isn't the attending must consult with the attending provider before making the referral.

Links: For more information about coverage of these services, see [WAC 296-20-045](#) and [WAC 296-20-051](#). Also, see [WAC 296-20-01002](#).

