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## TELEHEALTH AND TELEMEDICINE DEFINITIONS

This memorandum addresses the varying definitions of telehealth and telemedicine at the state and federal levels.

According to the National Conference of State Legislatures (NCSL), telehealth is defined differently by nearly all states and even by different entities within the federal government. Typically, “telemedicine” refers to clinical services, and “telehealth” encompasses a broader scope and can refer to remote non-clinical services, including provider training, administrative meetings, and continuing medical education, in addition to clinical services. Telehealth and telemedicine are often used interchangeably.<sup>1</sup>

NCSL and the Center for Connected Health Policy (CCHP) identify the following four primary types of telehealth applications:

- Real-time communication: enables patients to connect with providers *via* video conference, telephone, or a home health monitoring device;
- Store-and-forward: the transmission of data, images, sound, or video from one care site to another for evaluation;
- Remote patient monitoring: involves the collection of a patient’s vital signs or other health data while the patient is at home or another site, and the transfer of the data to a remote provider for monitoring and response as needed<sup>2</sup>; and
- Mobile health (mHealth): involves health care and public health practice and education supported by mobile communication devices (*i.e.* cell phones, tablet computers, and personal digital assistants [PDAs]), with applications ranging from targeted text messages promoting healthy behavior to wide-scale alerts of disease outbreak.<sup>3</sup>

Additionally, some states have broad definitions of telehealth while others limit the definition to certain types of technologies. Most states exclude or do not specifically include e-mail, telephone, and facsimile in the definition of telehealth.

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1 <http://www.ncsl.org/research/health/telehealth-policy-trends-and-considerations.aspx>

2 <http://www.ncsl.org/research/health/state-coverage-for-telehealth-services.aspx>

3 <http://www.cchpca.org/what-is-telehealth>

## **Kansas State Employee Health Plan Definitions**

### ***Aetna***

The Aetna Telemedicine Consultation Rider, which is part of the benefit descriptions associated with the 2018 Plan Year for the State Employee Health Plan (SEHP) under Plan A, provides the terms of coverage provided for telemedicine consultation through Teladoc. Aetna is contracting with Teladoc to be a network provider of telemedicine services.

The rider defines telemedicine to mean “the use of telecommunications technology to provide, enhance, or expedite health care services, as by accessing off-site databases, linking clinics or physicians’ offices to central hospitals, or transmitting x-rays or other diagnostic images for examination at another site.” Telemedicine consultation is defined as “a two-way real time interactive communication between the patient and the physician or practitioner located at a different location. This electronic communication uses interactive telecommunications equipment that includes audio and video.”<sup>4</sup>

### ***Blue Cross Blue Shield of Kansas***

The Telehealth Rider, which is part of the benefit descriptions associated with the 2018 Plan Year for the State Employee Health Plan under Plan A, Blue Cross Blue Shield of Kansas (BCBSKS), provides insight into how telemedicine services are covered and excluded pursuant to an insurance policy issued by BCBSKS. The rider provides the terms of coverage provided for Telehealth Service through American Well (AmWell) under the plan. BCBSKS is contracting with AmWell to be a network provider of telehealth services.

BCBSKS defines telemedicine and telemedicine consultation in the same manner as Aetna. Additionally, BCBSKS defines telehealth service as “the use of person to person electronic communication between the companies designated Telehealth provider and the member to provide HIPAA-compliant remote access for diagnosis, intervention, consultation, supervision and information in an outpatient setting. This electronic communication uses interactive telecommunications equipment that includes audio and video. Services do not include the means, or technology, or support required to receive such services.”<sup>5</sup>

## **Other States’ Definitions**

### ***California***

CCHP indicates California defines telehealth as “[t]he mode of delivering health care services and public health *via* information and communication technologies to facilitate the diagnosis, consultation, treatment, education, care management, and self-management of a patient’s health care while the patient is at the originating site and the health care provider is at a distant site. Telehealth facilitates patient self-management and caregiver support for patients and includes synchronous interactions and asynchronous store and forward transfers.”<sup>6</sup>

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4 <http://www.kdheks.gov/hcf/sehp/Vendors/Aetna.htm>

5 <http://www.kdheks.gov/hcf/sehp/Vendors/BCBSKS.htm>

6 <http://www.cchpca.org/what-is-telehealth>

NCSL's "2015 Telehealth Policy Trends and Considerations Report," citing information from CCHP, provides telehealth and telemedicine definitions for Georgia, Minnesota, and Nevada.

### **Georgia**

Ga. Code Ann. § 33-24-56.4 defines telemedicine as "the practice, by a duly licensed physician or other health care provider acting within the scope of such provider's practice, of health care delivery, diagnosis, consultation, treatment, or transfer of medical data by means of audio, video, or data communications which are used during a medical visit with a patient. Standard telephone, facsimile transmissions, unsecured e-mail, or a combination thereof do not constitute telemedicine services." Georgia's telemedicine policies apply to Medicaid and private payers.

### **Minnesota**

Minnesota telemedicine policies apply to both Medicaid and private payers. Minn. Stat. § 62A.671 defines telemedicine as "the delivery of health care services or consultations while the patient is at an originating site and the licensed health care provider is at a distant site. ... Telemedicine may be provided by means of real-time two-way interactive, audio and visual communications, including the application of secure video conferencing or store-and-forward technology to provide or support health care delivery, which facilitate the assessment, diagnosis, consultation, treatment, education, and care management of a patient's health care." Communications solely consisting of a telephone conversation, e-mail, or facsimile transmission do not constitute telemedicine consultations or services, regardless of whether the communication occurs between licensed health care providers or between a licensed health care provider and a patient.

### **Nevada**

Nev. Rev. Stat. 629.515 defines telehealth as "the delivery of services from a provider of health care to a patient at a different location through the use of information and audiovisual communication technology, not including standard telephone, facsimile or electronic mail." The definition applies to both Medicaid and private payer health insurance policies.

### **Additional State Resources**

An April 2017 CCHP report, "State Telehealth Laws and Reimbursement Policies," provides a scan of the 50 states and the District of Columbia. While for informational purposes only and not to be considered authoritative in nature, the report provides a highlight of the varying definitions used.<sup>7</sup>

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<sup>7</sup> <http://www.cchpca.org/state-laws-and-reimbursement-policies>

## Sample Federal Definitions

### ***Health Resources and Services Administration (HRSA)***

HRSA defines telehealth as “the use of electronic information and telecommunications technologies to support and promote long-distance clinical health care, patient and professional health-related education, public health, and health administration.”<sup>8</sup>

### ***Medicaid***

For the purpose of Medicaid, telemedicine means “the use of interactive telecommunications equipment that includes, at a minimum, audio and video equipment.” The definition is modeled on Medicare’s definition of telehealth services (42 CFR 410.78). The federal Medicaid statute does not recognize telemedicine as a distinct service.

Telehealth (or telemonitoring) is “the use of telecommunications and information technology to provide access to health assessment, diagnosis, intervention, consultation, supervision and information across distance.” Telehealth includes technologies used to collect and transmit patient data for monitoring and interpretation, such as telephones, facsimile machines, electronic mail systems, and remote patient monitoring devices. Although these technologies do not meet the Medicaid definition of telemedicine, they are often considered under the broad umbrella of telehealth services and may be covered and reimbursed as part of a Medicaid coverable service, such as laboratory service, x-ray service, or physician services (under section 1905(a) of the Social Security Act).<sup>9</sup>

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8 <https://www.hrsa.gov/rural-health/telehealth/index.html>

9 <https://www.medicaid.gov/medicaid/benefits/telemed/index.html>