

## 2013 DRAFTING REQUEST

### Assembly Amendment (AA-ASA1-AB458)

Received: 11/9/2013 Received By: tdodge  
Wanted: As time permits Same as LRB:  
For: Sandy Pasch (608) 266-7671 By/Representing: Fred Ludwig  
May Contact: Drafter: tdodge  
Subject: Mental Health - miscellaneous Addl. Drafters:  
Extra Copies:

Submit via email: YES  
Requester's email: Rep.Pasch@legis.wisconsin.gov  
Carbon copy (CC) to: tamara.dodge@legis.wisconsin.gov  
pam.kahler@legis.wisconsin.gov

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#### Pre Topic:

No specific pre topic given

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#### Topic:

Limitations on providers of mental health services by telehealth

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#### Instructions:

See attached.

---

#### Drafting History:

<u>Vers.</u>	<u>Drafted</u>	<u>Reviewed</u>	<u>Typed</u>	<u>Proofed</u>	<u>Submitted</u>	<u>Jacketed</u>	<u>Required</u>
/?	tdodge 11/9/2013	csicilia 11/11/2013		_____			
/P1	tdodge 11/11/2013		jfrantze 11/11/2013	_____	mbarman 11/11/2013		
/1		csicilia 11/11/2013	rschluet 11/11/2013	_____	lparisi 11/11/2013	lparisi 11/11/2013	

FE Sent For:

**<END>**

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/?	tdodge 11/9/2013	csicilia 11/11/2013		_____			
/P1			jfrantze 11/11/2013	_____	mbarman 11/11/2013		

FE Sent For:

*Handwritten notes:*  
1  
gs 11/11/13  
[Signature]  
<END>

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Pre Topic:

No specific pre topic given


Topic:

Limitations on providers of mental health services by telehealth

Instructions:

See attached.

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/?	tdodge	11/11 13		11/11			

FE Sent For:

<END>

## Dodge, Tamara

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**From:** Ludwig, Frederic  
**Sent:** Friday, November 08, 2013 4:33 PM  
**To:** Dodge, Tamara  
**Subject:** FW: Questions RE: AB 458

Think we could get an amendment that addresses the point made below to AB 458?

---

**From:** Ignatowski, Alex - DHS [<mailto:Alex.Ignatowski@dhs.wisconsin.gov>]  
**Sent:** Friday, November 08, 2013 4:29 PM  
**To:** Adrian, Scott  
**Cc:** Ludwig, Frederic  
**Subject:** RE: Questions RE: AB 458

Hi Scott – Below is a link to how we currently do reimbursement for these services. Look under the heading “Funding for Telehealth Medicaid Reimbursement”. This extra certification adds more oversight to the program and is currently used by the Medicaid program. Let me know if you have any other questions, thanks!

[http://www.dhs.wisconsin.gov/dsl\\_info/NumberedMemos/DDES/CY\\_2004/NMemo2004-14-DDES.htm](http://www.dhs.wisconsin.gov/dsl_info/NumberedMemos/DDES/CY_2004/NMemo2004-14-DDES.htm)

-Alex

---

**Alex Ignatowski**  
Legislative Advisor  
Department of Health Services  
Office: 608-266-3262  
Mobile: 608-301-6149  
[alex.ignatowski@wisconsin.gov](mailto:alex.ignatowski@wisconsin.gov)

---

**From:** Adrian, Scott [<mailto:Scott.Adrian@legis.wisconsin.gov>]  
**Sent:** Thursday, November 07, 2013 4:59 PM  
**To:** Ignatowski, Alex - DHS  
**Subject:** RE: Questions RE: AB 458

Great – thank you very much.

---

**From:** Ignatowski, Alex - DHS [<mailto:Alex.Ignatowski@dhs.wisconsin.gov>]  
**Sent:** Thursday, November 07, 2013 4:58 PM  
**To:** Adrian, Scott  
**Subject:** RE: Questions RE: AB 458

Hey Scott - Let me look into this and I will get back to you tomorrow.

Thanks!

---

**Alex Ignatowski**

Legislative Advisor  
Department of Health Services  
Office: 608-266-3262  
Mobile: 608-301-6149  
[alex.ignatowski@wisconsin.gov](mailto:alex.ignatowski@wisconsin.gov)

---

**From:** Adrian, Scott [<mailto:Scott.Adrian@legis.wisconsin.gov>]

**Sent:** Thursday, November 07, 2013 4:38 PM

**To:** Ignatowski, Alex - DHS

**Subject:** Questions RE: AB 458

Alex –

I am contacting you regarding AB 458, relating to mental health benefits and reimbursement for mental health services under the Medical Assistance program.

Rep. Pasch has concerns about providers who would be eligible to be reimbursed under this bill. She was wondering if DHS had any suggestions to tighten up the language for what kind of status providers need to have in Wisconsin.

For a provider not located in Wisconsin, they must be licensed, certified, or registered. Is there a way to tighten the language by using other criteria besides licensure? (Reprimands? Complaints? Fines? ) or in addition to?

Rep. Pasch is looking to find other criteria that would be more stringent than simply licensure to protect from unscrupulous providers scamming MA dollars from our state through fraud.

Any thoughts and ideas are most welcome and appreciated.

Thanks –

Scott Adrian  
Office of Rep. Sandy Pasch  
Assistant Democratic Leader  
608-266-7671



WISCONSIN  
DEPARTMENT OF  
HEALTH SERVICES



Information  
memos

## DDES Memo Series 2004-14

Numbered  
memos

September 20, 2004

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STATE OF WISCONSIN  
Department of Health and Family Services  
Division of Disability and Elder Services

To:

Area Administrators/Assistant Area Administrators  
Bureau Directors  
County Departments of Community Programs Directors  
County Departments of Developmental Disabilities Services  
Directors  
County Departments of Human Services Directors  
County Departments of Social Services Directors  
Grassroots Empowerment Project  
Licensing Chiefs/Section Chiefs  
Mental Health and AODA Coordinators  
Mental Health and Substance Abuse Certified Programs  
NAMI-Wisconsin  
State Council on Alcohol and Other Drug Abuse  
State Council on Mental Health  
Tribal Chairpersons/Human Services Facilitators  
WAODA  
Wisconsin Family Ties  
Interested Parties

From:

Sinikka Santala  
Administrator

Re: Mental Health And Substance Abuse Telehealth – Criteria  
For Certification

### Document Summary

**The purpose of this memo is to provide background information on Mental Health and Substance Abuse Telehealth and share the attached Request for Approval to Use Telehealth. This request form outlines the specific requirements that certified mental health and substance abuse programs must follow if they want to use**

**telehealth technology as a means of service provision with consumers.**

The purpose of this memo is to provide background information on Mental Health and Substance Abuse Telehealth and share the attached Request for Approval to Use Telehealth. This request form outlines the specific requirements that certified mental health and substance abuse programs must follow if they want to use telehealth technology as a means of service provision with consumers. County agencies, providers, state staff, consumers and family members have reviewed and commented on this criterion and the Wisconsin County Human Service Association has endorsed the Template.

**What is Telehealth**

Mental Health and Substance Abuse Telehealth is generally described as the use of telecommunication equipment to link mental health and/or substance abuse providers and consumers in different locations. Telehealth is sometimes referred to as telepsychiatry, however treatment professionals other than psychiatrists may use telehealth. Psychologists, Master level therapists, AODA counselors, psychiatric nurses and other staff who are part of a certified program can provide Telehealth services. Telehealth technology allows for the provision of quality behavioral health services, including interactive consultation between a consumer and a professional, assessments, pharmacological management, clinical counseling and consumer screening, with greater access and frequency, and without the additional cost of staff travel or unnecessary consumer transport.

Telehealth has been used in the provision of mental health and substance abuse services in other states for a number of years. The first implementation of telepsychiatry was conducted in the early 1950s at the Nebraska Psychiatric Institute, where they investigated the potential of closed-circuit television as a teaching aid. Ten years later, the first telepsychiatry consultations were performed at the Institute. Telehealth is not new technology that we are testing in Wisconsin. This technology is widely used in Nebraska, Montana, Oregon, Texas, South Carolina, and other states with great success.

**Benefits of Telehealth**

Telehealth has been proven to result in many benefits to consumers as well as treatment professionals and funding agencies. Some of the benefits include:

- increase access to child, geriatric, deaf, forensic and specialty staff;



- reduce travel costs, staff time, and per diem costs for consultants;
- increase elements of continuity of care and professional contact;
- increase urban to rural areas skill pools through information transfer;
- increase speed and accuracy of diagnosis and treatment; and,
- increase access to select skills such as sign language, diagnosis, treatment and consultation.

For example, a number of counties in rural Wisconsin have a difficult time recruiting psychiatrists, and when they do they often must pay the psychiatrist from the time they leave their home until they reach the county and begin to provide services. This means the county agency may use significant fiscal resources just for travel time without the psychiatrist even seeing a consumer. Telehealth will allow the county to more easily attract a qualified psychiatrist and pay only for the time the person is actually seeing consumers. In addition, if the consumer is in need of hospitalization, the psychiatrist may be more available, through telehealth consultation, to the admitting hospital, as well as with the other treatment professionals, family members, natural supports, etc.

Telehealth will also enhance the ability of small, remote, rural counties to access specialty services such as child and geriatric psychiatry. This technology should assist in better diagnostic services, correct medication determinations and more successful treatment planning for those individuals most in need.

### **Services Provided Through Telehealth**

Telehealth services can be provided to consumers involved in any certified mental health and/or substance abuse programs, such as outpatient services, crisis services, community support services, day treatment programs, inpatient, etc. All staff employed by these programs may provide services via telehealth, provided they have received the necessary training and meet program certification standards. Specific staff providing the services should be outlined in the plan, as required in the certification process.

### **Funding for Telehealth**

#### **Medicaid Reimbursement**

The Division of Health Care Financing will reimburse for Medicaid-covered services provided via telehealth in the same way it reimburses for face-to-face contacts provided that the following requirements are met.

34 - Emergency mental health service program

- The agency is a certified program under one of the following program standards: HFS 34, 36, 40, 61, 63, or 75 (except does not include 75.15), Wis. Admin. Code. Professional staff providing telehealth must be part of one of these certified programs.

36 Comprehensive community services program

- Medicaid will only accept claims for telehealth from providers that are certified under HFS 34, 36, 40, 61, or 75 (except does not include 75.15). Medicaid will not accept claims from individual professional staff.

40 mental health day treatment services program for children

- The HFS certified program is certified for telehealth by the Bureau of Quality Assurance.

61 program organized under 46.23 51.42, 51.437

- The service is a service that is covered under one of the Medicaid mental health or substance abuse benefits: outpatient mental health, outpatient substance abuse, pharmacologic management, mental health day treatment, substance abuse day treatment, crisis intervention, community support program, comprehensive community services, or child/adolescent day treatment services.

Outpatient psychotherapy clinic certified under DHS 35

- The service is not group therapy.
- The provider indicates the "GT" modifier on the claim detail for the specific procedure code. The "GT" modifier definition is "Via interactive audio and video telecommunication systems."

Community support program

- Providers must continue to follow all Medicaid coverage policies and all other requirements for each particular service.

75 certified community substance abuse prevention and treatment services

If you have any questions regarding reimbursement, please contact Christine S. Wolf, LICSW, MH/SA Policy Analyst, Division of Health Care Financing, P. O. Box 7850, Madison, WI 53701, or email her at [wolfcs@wisconsin.gov](mailto:wolfcs@wisconsin.gov).

except narcotic treatment service for opiate addiction

**Insurance Reimbursement**

For insurance billings for telehealth services the agency will need to check with individual policies to determine if telehealth is covered.

- prevention service, emergency outpatient service
- medically managed inpatient detoxification service
- medically monitored residential detoxification service
- ambulatory detoxification service
- residential intoxication monitoring service
- medically managed inpatient treatment service
- medically monitored treatment service

**Process for Telehealth Certification**

Only certified mental health and/or substance abuse services, or agencies planning to be certified as a mental health and/or substance abuse provider, may apply for telehealth certification. The first step in the process is for the agency to write a plan addressing each section in the attached template. Once the plan is completed it should be sent to the Bureau of Quality

- day treatment services
- outpatient treatment service
- transitional residential treatment service

~~Assurance (BQA) Program Certification Unit, 2917 International Lane #300, Madison, WI 53704.~~

UPDATED ADDRESS AS OF 2013:

**Attn: Sally Andrews  
Behavioral Health Certification Section  
Division of Quality Assurance  
Department of Health Services  
P.O. Box 2969  
1 W. Wilson St.  
Madison, WI 53701-2969**

It is strongly suggested for agencies interested in using telehealth as a means of service provision to establish a stakeholder advisory committee, which should include consumers and family members. The purpose of this committee is to help write the plan for certification and to determine how and when telehealth will be used, and for which services.

Provider's electing to utilize telehealth must demonstrate compliance with an approved plan to the Bureau of Quality Assurance during a site review or other unannounced focus visits.

### **Key Points for Certification**

There are several provisions in the attached template that are important for successful application of telehealth for mental health and/or substance abuse services. These include:

1. Certified services shall meet the requirements for the corresponding Administrative Code, e.g. HFS 75, HFS 34, HFS 61, etc
2. It is critical that agencies meet the minimum transmission standards to ensure that the telehealth service is of high quality and as close to a face to face visit as possible.
3. All staff using telehealth for service provision must receive orientation and ongoing training on the use of the equipment, the clinical application of telehealth, safety and security during telehealth visits, privacy and confidentiality, back-up procedures if there is equipment failure, and consumer preparation for telehealth.
4. Consumers must be educated about the provision of services provided through telehealth, the history of telehealth, success rate of telehealth services and how telehealth sessions are conducted.
5. The agency has an ongoing method for obtaining consumer satisfaction on telehealth visits and evaluating the results of this survey process.

6. Consumers are given the choice of having a face to face visit with a professional or seeing this person via telehealth.

Regional Office Contact:  
Area Administrator/Assistant Area Administrator

Central Office Contact:  
Area Administration  
Office of Strategic Finance  
Department of Health and Family Services  
PO Box 7850 Room 633  
Madison, WI 53707-7850  
Telephone – 608-261-7812

MEMO WEB SITE:  
<http://www.dhs.wisconsin.gov/partners/local.htm>

Attachment:  
[Form DDE-2589](#)(fillable Word document) - renamed OQA-2589  
(January, 2007)

cc:  
Mark Hale, BQA  
Chris Wolf, DHCF

[Return to Numbered Memos Index](#)

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**Protecting and promoting the health and safety of the people of Wisconsin**  
The Official Internet site of the Wisconsin Department of Health Services



State of Wisconsin  
2013 - 2014 LEGISLATURE



LRBa1196? P1  
TJD:.....

In: 11/9/13

Due  
Mon. 11/11  
a.m. ASAP

RMNR  
y's

**PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION**  
**ASSEMBLY AMENDMENT,**  
**TO ASSEMBLY SUBSTITUTE AMENDMENT 1,**  
**TO ASSEMBLY BILL 458**

⑨ #. Page 2, line 9: before "is a" insert:

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fulltime

- 1 At the locations indicated, amend the substitute amendment as follows:
- 2 **1.** Page 2, line 9: delete "paragraph, "telehealth"" and substitute "paragraph: ⑩
- 3 **a.** "Mental health service" means a service that is covered under one of the Medical
- 4 Assistance mental health or substance abuse benefits under s. 49.46 (2) of outpatient
- 5 mental health, outpatient substance abuse, pharmacologic management, mental
- 6 health day treatment, substance abuse day treatment, crisis intervention, service
- 7 provided by a community support program or community based-psychosocial service
- 8 program, community recovery services, psychotherapy and alcohol and other drug
- 9 abuse services, child or adolescent day treatment services, or any other mental
- 10 health or substance abuse benefit described in s. 49.46 (2). **b.** "Telehealth".



**Dodge, Tamara**

---

**From:** Ludwig, Frederic  
**Sent:** Monday, November 11, 2013 8:51 AM  
**To:** Dodge, Tamara  
**Subject:** RE: Draft review: LRB a1196/P1 Topic: Limitations on providers of mental health services by telehealth

Hi Tami,

Looks great by us. Can we get this in an introducible form?

Fred

---

**From:** LRB.Legal  
**Sent:** Monday, November 11, 2013 8:14 AM  
**To:** Rep.Pasch  
**Subject:** Draft review: LRB a1196/P1 Topic: Limitations on providers of mental health services by telehealth

**Following is the PDF version of draft LRB a1196/P1.**



State of Wisconsin  
2013 - 2014 LEGISLATURE



LRBa1196(P1) 01

TJD:cjs:jf

PMR

In: 11/11  
Due Today AM.

steps

**PRELIMINARY DRAFT - NOT READY FOR INTRODUCTION**

**ASSEMBLY AMENDMENT ,**

**TO ASSEMBLY SUBSTITUTE AMENDMENT 1,**

**TO ASSEMBLY BILL 458**

I have  
no changes.  
-TJD

- 1 At the locations indicated, amend the substitute amendment as follows:
- 2 **1.** Page 2, line 9: delete “paragraph, “telehealth”” and substitute “paragraph.”.
- 3 **2.** Page 2, line 9: before “is a” insert:
- 4 “a. “Mental health service” means a service that is covered under one of the
- 5 Medical Assistance mental health or substance abuse benefits under s. 49.46 (2) of
- 6 outpatient mental health, outpatient substance abuse, pharmacologic management,
- 7 mental health day treatment, substance abuse day treatment, crisis intervention,
- 8 service provided by a community support program or community based–psychosocial
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- 10 drug abuse services, child or adolescent day treatment services, or any other mental
- 11 health or substance abuse benefit described in s. 49.46 (2).





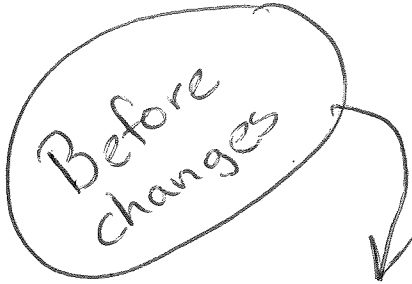


State of Wisconsin  
2013 - 2014 LEGISLATURE



LRBa1196/1  
TJD:cjs:rs

**ASSEMBLY AMENDMENT 2,  
TO ASSEMBLY SUBSTITUTE AMENDMENT 1,  
TO ASSEMBLY BILL 458**




November 11, 2013 – Offered by Representative PASCH.

- 1           At the locations indicated, amend the substitute amendment as follows:
- 2           **1.** Page 2, line 9: delete “paragraph, “telehealth”” and substitute “paragraph.”.
- 3           **2.** Page 2, line 9: before “is a” insert:
- 4           “a. “Mental health service” means a service that is covered under one of the
- 5           Medical Assistance mental health or substance abuse benefits under s. 49.46 (2) of
- 6           outpatient mental health, outpatient substance abuse, pharmacologic management,
- 7           mental health day treatment, substance abuse day treatment, crisis intervention,
- 8           service provided by a community support program or community based–psychosocial
- 9           service program, community recovery services, psychotherapy and alcohol and other
- 10          drug abuse services, child or adolescent day treatment services, or any other mental
- 11          health or substance abuse benefit described in s. 49.46 (2).
- 12          b. “Telehealth”.

AMENDMENTS INFORMATION

Date of Intro	Amendment Number	Offered by	LRB No.	LRB Intro'ed
11-NOV-13	AA2-ASA1-AB458	Representatives Pasch and Sanfelippo.	a1196	YES

11-12-2013  
"corrected copy"  
requested by Kay (Acc office)  
(adding a sponsor)





**ASSEMBLY AMENDMENT 2,  
TO ASSEMBLY SUBSTITUTE AMENDMENT 1,  
TO ASSEMBLY BILL 458**

11-12-2013  
After changes

November 11, 2013 – Offered by Representatives PASCH and SANFELIPPO.

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- 10 drug abuse services, child or adolescent day treatment services, or any other mental
- 11 health or substance abuse benefit described in s. 49.46 (2).
- 12 **b.** “Telehealth”.