- WAC 182-551-2125 Home health services delivered using telemedicine. (1) The medicaid agency pays for the delivery of one home health service through telemedicine, per eligible client, per day, under WAC 182-501-0300 and the requirements in this section.
- (2) For clients to be eligible to receive home health services through telemedicine, the medicaid agency requires the client to:
- (a) Be diagnosed with an unstable condition causing the client to be at risk for hospitalization or a more costly level of care; and
- (b) Have a diagnosis or diagnoses where there is a high risk of sudden change in clinical status which could compromise health outcomes.
- (3) To receive payment for the delivery of home health services through telemedicine, the services must involve:
- (a) An assessment, problem identification, and evaluation which includes:
- (i) Assessment and monitoring of clinical data including, but not limited to, vital signs, pain levels and other biometric measures specified in the plan of care. Also includes assessment of response to previous changes in the plan of care; and
- (ii) Detection of condition changes based on the telemedicine encounter that may indicate the need for a change in the plan of care; and
- (b) Implementation of a management plan through one or more of the following:
 - (i) Teaching regarding medication management, as appropriate;
- (ii) Teaching regarding other interventions as appropriate to both the patient and the caregiver;
- (iii) Management and evaluation of the plan of care including changes in visit frequency or addition of other skilled services;
- (iv) Coordination of care with the ordering physician regarding findings;
- (v) Coordination and referral to other medical providers as needed; and
 - (vi) Referral to the emergency room as needed.
- (4) The medicaid agency does not require prior authorization for the delivery of home health services through telemedicine.
- (5) The medicaid agency does not pay for the purchase, rental, or repair of telemedicine equipment.
- (6) Electronic visit verification requirements are not applicable to home health services delivered through telemedicine. Other program rules may apply similar or the same record requirements to providers of home health services.

[Statutory Authority: RCW 41.05.021, 41.05.160, and P.L. 114-255. WSR 23-24-026, § 182-551-2125, filed 11/29/23, effective 1/1/24. Statutory Authority: RCW 41.05.021, 41.05.160, and 2021 c 157. WSR 23-04-048, § 182-551-2125, filed 1/26/23, effective 2/26/23. Statutory Authority: RCW 41.05.021, 41.05.160 and 42 C.F.R. Section 440.70. WSR 18-24-023, § 182-551-2125, filed 11/27/18, effective 1/1/19. Statutory Authority: RCW 41.05.021 and 41.05.160. WSR 16-03-035, § 182-551-2125, filed 1/12/16, effective 2/12/16. WSR 11-14-075, recodified as § 182-551-2125, filed 6/30/11, effective 7/1/11. Statutory Authority: RCW 74.08.090, chapter 74.09 RCW, and 2009 c 326. WSR 10-10-087, § 388-551-2125, filed 5/3/10, effective 6/3/10.]