

Fact Sheet

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Telehealth Policy Solutions for Children with Complex Medical Needs

For California's children with complex and chronic health conditions, obtaining access to timely coordinated care and necessary resources is often difficult, especially for families who grapple with financial or other challenges.

Telehealth—the use of technology to provide and coordinate health care at a distance—has

Telehealth is a proven tool for children with complex health needs and their families to get timely and affordable care. proven to be an effective tool in making specialized care and care coordination more accessible. Telehealth is being used to provide

quality care in areas such as behavioral health, neonatal care, disease management, and coordination of care.

In California, however, providers and families are not using telehealth to its full potential.

Barriers to wider adoption of telehealth include:

- Providers' lack of knowledge about telehealth and/or proficiency in using and billing for it;
- Families' lack of knowledge about the option to use telehealth;
- Lack of a mechanism for providers to bill for some services delivered via telehealth;
- Concerns by providers about the costs and maintenance of telehealth equipment; and
- Concerns related to ensuring patient privacy.

Policy Recommendations

Several options are available to overcome these barriers and further integrate telehealth into California's delivery system for children with special health care needs (CSHCN):

■ Provide comprehensive telehealth information to providers

California Children's Services (CCS), the primary state program responsible for coordinating care for children with chronic medical conditions, should continue efforts to clarify, consolidate, and centralize information on telehealth for providers, and conduct outreach to inform providers of its policies. Additionally, CCS should provide ongoing training for providers on telehealth reimbursement policies, how to bill, and other potential issues in providing care to children enrolled in CCS via telehealth.

■ Educate families

CCS should partner with community-based providers and family advocates who work with families of CSHCN to provide information to them regarding telehealth.

■ Expand the list of eligible billing codes

Only a limited number of Medi-Cal/CCS codes associated with clinical services are eligible for reimbursement when delivered using telehealth. This leaves many services that providers are legally able to provide via telehealth ineligible for reimbursement. CCS should create a process that includes stakeholders to evaluate clinical services

that can be delivered using telehealth and approve additional codes for reimbursement.

■ **Expand locations eligible for telehealth payment to include the patient's home**

Because of the complex medical needs of CSHCN, home-based care is particularly critical. When feasible, administering clinical services in the home can alleviate a significant burden on families. CCS should make patients' homes eligible originating sites for telehealth reimbursement.

■ **Expand the number of telehealth modalities that are reimbursable by Medi-Cal and the CCS program**

The Legislature and Administration should assess and update Medi-Cal/CCS reimbursement policies on an annual basis to include reimbursement for clinically appropriate telehealth applications. For example, store-and-forward and remote patient monitoring applications may be clinically appropriate in a variety of health care services; therefore, providers should be reimbursed for using these modes of telehealth to deliver such services.

■ **Convene a stakeholder workgroup**

CCS should convene a telehealth stakeholder workgroup to serve as a forum for CCS and stakeholders to identify policy barriers to wider adoption of telehealth and pursue solutions to these barriers.

■ **Implement local demonstration projects to identify best practices for how telehealth can be used to improve care for children enrolled in CCS**

The state CCS program should work with county CCS programs and stakeholders to implement demonstration projects to bring care to children, identify lessons and best practices, and explore ways to make such applications of telehealth scalable.

Full report available at: <http://www.lpfch.org/publication/realizing-promise-telehealth-children-special-health-care-needs>

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