STATE: <u>MINNESOTA</u> Supplement 6 to ATTACHMENT 3.1-A Effective: October 1, 2020 Page 1 TN: 20-11 Approved: Supersedes: 19-10 (17-17, 16-02)

Medical assistance covers medically necessary services and consultations delivered via telemedicine when performed by:

- a licensed health care provider; or
- a mental health practitioner working under the supervision of a mental health professional_r;
- a certified community health worker;
- <u>an alcohol and drug counselor and an alcohol and drug counselor</u> temp; recovery peers;
- student interns;
- mental health certified peer specialists and family peer
 specialists; rehabilitation workers in ARMHS;
- mental health behavioral aides operating in a CTSS program;
- <u>federally qualified health centers, rural health centers, and Indian</u> <u>Health providers; or a and</u>
- providers qualified in accordance with par. 13(d) of Attachment 3.1-A to provide a comprehensive assessment for substance use disorder services, in the same manner as if the service or consultation was delivered in person.

Coverage is limited to three telemedicine services per enrollee per calendar week, except that this limit does not apply to services necessary for the treatment and control of tuberculosis that are provided by a licensed health care provider and in a manner consistent with the recommendations and best practices specified by the Centers for Disease Control and Prevention and the Commissioner of the Minnesota Department of Health.

Telemedicine is the delivery of health care services while the patient is at an originating site and the health care provider is at a distant site. A communication between health care providers, or a health care provider and a patient that consists solely of a telephone conversation, e-mail, or facsimile does not constitute telemedicine services. 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, and or via telephone when social distancing or quarantine is necessary either for the provider or the patient and video communication is not feasible. Providers utilizing telemedicine must comply with criteria established by the Department in order to demonstrate that a quality assurance process and established protocols for patient safety have been addressed before, during, and after a particular service is delivered via telemedicine. STATE: <u>MINNESOTA</u> Supplement 6 to ATTACHMENT 3.1-B Effective: October 1, 2020 Page 1 TN: 20-11 Approved: Supersedes: 19-10 (17-17, 16-02)

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