



Ohio Revised Code

Section 5164.95 Standards for payments for telehealth services; eligible practitioners.

Effective: March 23, 2022

Legislation: House Bill 122 - 134th General Assembly

(A) As used in this section, "telehealth service" means a health care service delivered to a patient through the use of interactive audio, video, or other telecommunications or electronic technology from a site other than the site where the patient is located.

(B) The department of medicaid shall establish standards for medicaid payments for health care services the department determines are appropriate to be covered by the medicaid program when provided as telehealth services. The standards shall be established in rules adopted under section 5164.02 of the Revised Code.

In accordance with section 5162.021 of the Revised Code, the medicaid director shall adopt rules authorizing the directors of other state agencies to adopt rules regarding the medicaid coverage of telehealth services under programs administered by the other state agencies. Any such rules adopted by the medicaid director or the directors of other state agencies are not subject to the requirements of division (F) of section 121.95 of the Revised Code.

(C)(1) To the extent permitted under rules adopted under section 5164.02 of the Revised Code and applicable federal law, the following practitioners are eligible to provide telehealth services covered pursuant to this section:

(a) A physician licensed under Chapter 4731. of the Revised Code to practice medicine and surgery, osteopathic medicine and surgery, or podiatric medicine and surgery;

(b) A psychologist or school psychologist licensed under Chapter 4732. of the Revised Code or under rules adopted in accordance with sections 3301.07 and 3319.22 of the Revised Code;

(c) A physician assistant licensed under Chapter 4730. of the Revised Code;



- (d) A clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner licensed under Chapter 4723. of the Revised Code;
- (e) An independent social worker, independent marriage and family therapist, or professional clinical counselor licensed under Chapter 4757. of the Revised Code;
- (f) An independent chemical dependency counselor licensed under Chapter 4758. of the Revised Code;
- (g) A supervised practitioner or supervised trainee;
- (h) An audiologist or speech-language pathologist licensed under Chapter 4753. of the Revised Code;
- (i) An audiology aide or speech-language pathology aide, as defined in section 4753.072 of the Revised Code, or an individual holding a conditional license under section 4753.071 of the Revised Code;
- (j) An occupational therapist or physical therapist licensed under Chapter 4755. of the Revised Code;
- (k) An occupational therapy assistant or physical therapist assistant licensed under Chapter 4755. of the Revised Code.
- (l) A dietitian licensed under Chapter 4759. of the Revised Code;
- (m) A chiropractor licensed under Chapter 4734. of the Revised Code;
- (n) A pharmacist licensed under Chapter 4729. of the Revised Code;
- (o) A genetic counselor licensed under Chapter 4778. of the Revised Code;
- (p) An optometrist licensed under Chapter 4725. of the Revised Code to practice optometry under a therapeutic pharmaceutical agents certificate;



- (q) A respiratory care professional licensed under Chapter 4761. of the Revised Code;
 - (r) A certified Ohio behavior analyst certified under Chapter 4783. of the Revised Code;
 - (s) A practitioner who provides services through a medicaid school program;
 - (t) Subject to section 5119.368 of the Revised Code, a practitioner authorized to provide services and supports certified under section 5119.36 of the Revised Code through a community mental health services provider or community addiction services provider;
 - (u) Any other practitioner the medicaid director considers eligible to provide telehealth services.
- (2) In accordance with division (B) of this section and to the extent permitted under rules adopted under section 5164.02 of the Revised Code and applicable federal law, the following provider types are eligible to submit claims for medicaid payments for providing telehealth services:
- (a) Any practitioner described in division (C)(1) of this section, except for those described in divisions (C)(1)(g), (i), and (k) of this section;
 - (b) A professional medical group;
 - (c) A federally qualified health center or federally qualified health center look-alike, as defined in section 3701.047 of the Revised Code;
 - (d) A rural health clinic;
 - (e) An ambulatory health care clinic;
 - (f) An outpatient hospital;
 - (g) A medicaid school program;



(h) Subject to section 5119.368 of the Revised Code, a community mental health services provider or community addiction services provider that offers services and supports certified under section 5119.36 of the Revised Code;

(i) Any other provider type the medicaid director considers eligible to submit the claims for payment.

(D)(1) When providing telehealth services under this section, a practitioner shall comply with all requirements under state and federal law regarding the protection of patient information. A practitioner shall ensure that any username or password information and any electronic communications between the practitioner and a patient are securely transmitted and stored.

(2) When providing telehealth services under this section, every practitioner site shall have access to the medical records of the patient at the time telehealth services are provided.