# PRESS RELEASES



## State Medicaid Program and Superintendent of Insurance issue new requirements to promote telemedicine during COVID-19 emergency

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SANTA FE – New Mexico's Medicaid Program is now requiring managed care organizations to reimburse doctors, behavioral health providers and other health care professionals for telephone and video patient visits until the end of the COVID-19 public health emergency.

Health care providers who consult with patients via telephone or computer video must be paid the same rate as if they'd seen the patient in person, according to a Letter of Direction from Medicaid Director Nicole Comeaux to the state's managed care organizations, which cover about 680,000 New Mexicans in the state's Medicaid program.

Telemedicine is another way to prevent social contact and reduce the chances of spreading COVID-19.

"It's vitally important that Medicaid members – who make up almost half of all New Mexicans – have safe access to health care during the COVID-19 pandemic," Comeaux said. "We are working closely with our provider networks to ensure they're adequately supported, and we are also pursuing every federal option to

secure reimbursements for providers who are delivering needed health care to New Mexicans in unconventional settings."

Superintendent of Insurance Russell Toal informed insurance companies that cover New Mexicans with private health insurance that they, too, are expected to cover telehealth services at the same rate they pay for in-person services and comply with mental health parity laws during this public health emergency.

Mental health parity law requires health plans to cover mental health and addiction treatment services the same way they treat other medical services.

"All New Mexicans should receive the same protections under their health insurance plans, regardless of the source of their health coverage," Gov. Michelle Lujan Grisham said.

The Medicaid program and the Office of the Superintendent have worked closely to align strategies to protect New Mexicans and their health care providers and to maximize access to needed health care services while practicing social distancing.

Toal said behavioral health services are critically important during the public health emergency.

"Our office has received complaints from patients who need behavioral health services, and we will enforce regulatory requirements that require mental health parity and access to telemedicine," he said.

The Medicaid Letter of Direction also requires managed care organizations to:

- Waive all prior authorizations for members to obtain COVID-19 testing and treatment services (including inpatient and outpatient), and to alert providers of this provision;
- Expand nurse advice lines to operate 24 hours a day, seven days a week for the duration of the emergency if such functionality does not already exist;
- Coordinate with home care providers to ensure continued in-person services for those who need them while using telephone visits to the extent possible;
- Allow for replacement of durable medical equipment, prosthetics, orthotics and supplies when they are lost, destroyed, irreparably damaged or otherwise rendered unusable without the face-to-face

requirement for obtaining a new physician's order and new medical necessity documentation;

- Reimburse for prescriptions dispensed in amounts up to a 90-day supply (excluding controlled substances).

The New Mexico Human Services Department is also waiving the maximum-supply requirement for maintenance drugs and relaxing restrictions on early medication refills as follows:

- 30-day prescriptions may be refilled when the member has two weeks of medication on-hand, or what is allowed by the managed-care organization if less restrictive;

- 90-day prescriptions may be refilled when the member has three weeks of medication on-hand, or what is allowed by the managed-care organization if less restrictive.

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