

State Actions Affecting Occupational Therapy in Response to COVID-19—Updated as of June 14, 2021

AOTA is tracking actions being taken by governors, state legislatures, and state agencies in response to the COVID-19 pandemic. Key issues profiled below relate to licensure, telehealth, and payment for occupational therapy services. AOTA is collaborating with state occupational therapy associations to compile and distribute this information. AOTA and state associations are advocating with state governments to ensure that consumers are able to access OT services. Recent updates to this chart are highlighted in gray. For more information, contact AOTA's State Affairs staff at stpd@aota.org.

State	Licensing board updates	Updated Telehealth policies	Medicaid & Private Insurance policy updates
AL	<p>Governor Ivey announced that the COVID-19 public health order ended on May 31, 2021 and the state of emergency will end on July 6.</p> <p>Board questions related to telehealth and licensure: Board states that the practice act does not address telehealth, but also does not put limits on its use. Ethical and scope-of-practice guidelines for face-to-face provision of services apply to provision of services via telehealth (posted March 27, 2020).</p>	<p>Alabama Medicaid extended temporary telemedicine coverage for speech and occupational therapy providers.</p> <p>Alabama Department of Insurance press release and bulletin on cost-sharing and telehealth</p> <p>Medicaid rule temporarily suspending the prior authorization requirement for EPSDT providers to refer clients for Durable Medical Equipment, Supplies, Appliances, Prosthetics, Orthotics, and Pedorthics, and suspending requirements for a face-to-face visit in favor of telehealth.</p> <p>All previously published expiration dates related to the COVID-19 emergency have been extended by Alabama Medicaid. The new expiration date is the earlier of June 30, 2021, the conclusion of the COVID-19 national emergency, or any expiration date noticed by the Alabama Medicaid Agency.</p>	<p>Private Insurance: BCBS of AL allows in-network providers to provide medically necessary services that can be appropriately delivered, including occupational therapy.</p> <p>Health Issuer's Response to Coronavirus (COVID-19)</p> <p>Medicaid: On March 23, 2020, the federal government granted an 1135 disaster response waiver and a subsequent waiver on May 8, 2020.</p> <p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on April 6, 7, and 13, 2020; May 11 and 27, 2020; June 16, 2020; and October 30, 2020.</p> <p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on July 6, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on June 3, 2020 (allowing electronic means of service for OT and permitting out-of-state providers of OT); September 30, 2020; and January 19, 2021.</p>

<p>AK</p>	<p>On February 14, 2021, the Governor let the COVID-19 emergency declaration expire, but the legislature passed a bill to retroactively extend it so the state remained eligible for federal food assistance benefits. On April 30, Governor Dunleavy ended the COVID-19 Disaster Declaration. A Public Health Emergency was declared on May 1, 2021, and remains in effect until rescinded or until the federal public health emergency expires, whichever is sooner.</p> <p>Senate Bill 241 authorizes a professional licensing board, including the PT & OT Board, to grant a license on an expedited basis to an individual who holds a license in good standing in another state to the extent necessary to respond to the public health disaster emergency; authorizing a licensing board or the Commissioner of the Dept. of Commerce, Community, & Economic Development to take any action necessary to protect the public health and safety including 1) temporarily waiving or modifying continuing education requirements, 2) regulating the scope of practice of a licensee, or 3) requiring a licensee to arrange supervision by another licensee.</p> <p>Letter from PT/OT Board Chair reminding licensees that care must be provided in accordance with Health Mandate 015 (no longer in effect) and that the Board has waived the requirement to provide 60 hours of therapy services and completion of CE for the 2020 renewal cycle. (issued June 17)</p> <p>The Board issued COVID-19 Practice Guidelines for Licensees and Facilities on November 12, 2020.</p>	<p>Division of Corporations, Business and Professional Licensing Guidance on Telehealth and Licensing During COVID-19 (updated March 1, 2021, to be consistent with Governor's ending of the COVID-19 emergency)</p> <p>Department of Health and Social Services updated Temporary Expansion of Medicaid Telehealth Coverage—updated 4/13/21—which authorizes physical, occupational, and speech therapy services via live interactive modes of delivery. FAQs on coverage updated 4/13/21.</p> <p>Insurance Order R20-10 requiring health insurers to liberalize telehealth benefits during the public health emergency, directing insurers to cover telehealth service categories no less generously than required by Medicare under the federal public health emergency as long as the state public health emergency is in effect, and reminding insurers that HB 29 was signed into law and became effective on March 17, 2020. The law requires insurers to implement its requirements immediately. Bulletins 20-07 and 20-18 provide more information about the new law and coverage requirements. Order R21-01 extended Order R20-10 regarding telehealth until February 14, 2021, or when the Governor determines that a public health emergency no longer exists.</p> <p>Division of Insurance Telehealth Information for Healthcare Providers (click on “COVID-19 and Your Health Insurance” then click on “For Providers”, then click on “Telehealth Information for Healthcare Providers”)</p> <p>Enacted HB 76 extends the public health emergency and the Governor's emergency powers through December 31, 2021. This</p>	<p>Private insurance: State-regulated plans are encouraged to liberalize telehealth benefits (Bulletin 20-09).</p> <p>Bulletin B 20-11 to all insurers authorized to transact health insurance in the state requires insurers to provide greater flexibility and coverage of telehealth.</p> <p>Medicaid: On April 2, the federal government granted an 1135 disaster response waiver and a subsequent waiver with requests not approved initially on May 15 and waivers with additional flexibilities on May 29, June 3, June 15, August 19, and December 23, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on March 25, 2020; June 10, 2020; October 30, 2020; December 21, 2020; March 10, 2021; and March 25, 2021.</p> <p>Time-limited state plan amendments to respond to COVID-19 approved on May 7, 2020, and June 2, 2020.</p> <p>COVID-19 Outbreak Health Order No. 1 authorizing the suspension of various state laws and regulations, including several related to home health, by the appropriate state agency in a manner that best meets the needs of the state during the emergency. See Appendix A for law and regulation citations authorized to be suspended by the appropriate state agency.</p> <p>The Public Health Emergency declared on May 1, 2021 continues all necessary actions to address the effects of the COVID-19 pandemic, including maintaining authorities granted and</p>
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AZ	<p>EXECUTIVE ORDER 2020-17 CONTINUITY OF WORK News Release Executive Order 2020-17 Executive Order 2020-17 helps licensed professionals in the state stay licensed and defers certain requirements for six months.</p> <p>Information on Licensing Waivers from Board website:</p> <ul style="list-style-type: none"> - Fee waivers for those who have been financially impacted by COVID-19 are available. You must attest that you 	<p>Governor issued Executive Order 2020-07 (pdf) which says Department of Health Services in conjunction with the Department of Insurance requires that all insurers regulated by the state cover telemedicine visits at a lower cost-sharing point for consumers than the same in-office service to encourage utilization of telemedicine for the duration of the state's public health emergency. The Governor rescinded this provision of Executive Order 2020-07 because of the passage of HB 2454 (see below).</p> <p>Governor issued Executive Order 2020-15 (pdf) which requires all health insurance plans</p>	<p>Private insurance: Governor's Executive Order 2020-07 (video links) also requires insurance companies and health plans to cover out of network providers, including out of plan laboratories and telemedicine providers.</p> <p>Medicaid: On March 23, the federal government granted an 1135 disaster response waiver; another granting additional flexibilities on June 1; and another on July 9, 2020.</p> <p>1915(c) Appendix K waiver allowing flexibilities in the home and community-based services (HCBS) waiver granted on April 6, 2020.</p>

	<p>have been financially impacted by COVID-19 and cannot afford to pay licensing fees.</p> <ul style="list-style-type: none"> - Temporary waiver of fingerprint requirement is no longer available. If you are not able to find a fingerprinting service in your area, please contact the Board office at (602) 589-8352. - Temporary waiver of exam requirement is no longer available. Prometrics testing centers are now open in most areas. If you are not able to schedule an exam, please contact the Board office at (602) 589-8352. - Temporary waiver of continuing education requirement is no longer available. Continuing education hours can be completed online. <p>Executive Order 2021-02 requires state agencies to conduct a comprehensive review of any rules that were suspended during the Public Health Emergency for COVID-19 to determine if those rules should be permanently suspended and report findings to the Governor's Office by June 1, 2021.</p>	<p>regulated by the Arizona Department of Insurance and all Medicaid plans to provide coverage for all health care services provided through telemedicine if the health care service was covered were it provided in person. Telehealth services may be provided by any Arizona-licensed health care provider type, including occupational therapists. Expires upon termination of the Declaration of Public Health Emergency. The Governor rescinded this Executive Order because of the passage of HB 2454 (see below).</p> <p>Department of Insurance regulatory bulletin implementing EO 2020-07 and 2020-15 states that the telehealth requirements apply to short-term limited duration plans as well as other state-regulated plans.</p> <p>Governor's Executive Order 2020-29 requires all workers' compensation insurance plans, self-insurance plans, and Special Fund to provide coverage for all health care services that can be provided through telemedicine. The Governor rescinded this Executive Order because of the passage of HB 2454 (see below).</p> <p>Enacted legislation HB 2454 expands access to telemedicine for patients, ensures doctors receive equal compensation from insurance companies for telemedicine services, and allows out-of-state health care professionals to provide telemedicine in the state.</p>	<p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on April 1, 2020; April 9, 2020; May 22, 2020; July 28, 2020; August 4, 2020; September 3, 2020; March 2, 16, and 25, 2021; and April 20, 2021.</p> <p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on April 24, 2020.</p> <p>Arizona amended an 1115 demonstration waiver to provide EPSDT dental services to 21-year-olds during the PHE.</p>
AR	<p>Governor's Executive Order 21-07 stating that the public health and disaster emergency related to COVID-19 will be in effect until May 30, 2021, and then will expire.</p> <p>Governor's Executive Order 20-06, issued March 17, 2020, ordering all state agencies to identify provisions of any regulatory statute,</p>	<p>Executive Order 20-05 suspends provisions of state law requiring an in-person encounter, or face-to-face examination using real time audio and visual means to establish a professional relationship. This Order has been extended until the expiration of the State of Emergency. The state of emergency expired on May 30, 2021.</p>	<p>Private Insurance: BCBS of Arkansas and Health Advantage are encouraging members and health care providers to use audio-visual and telephone technology for certain services related to physical and/or behavioral health.</p> <p>Medicaid: Department of Human Services COVID-19 updates for providers and Public</p>

	<p>agency order, or rule that prevents, hinders, or delays the agency’s ability to render maximum assistance to the citizens of the state and post any such identified provisions on their websites. Any identified and posted provisions are suspended for the duration of the State of Emergency, per Executive Order 20-16, issued April 13, 2020. No provisions related to OT have been identified.</p>	<p>Arkansas State Medical Board Telemedicine information</p> <p>Department of Human Services Telemedicine COVID-19 Response Manual suspending rules related to allowable telemedicine services provided by licensed OT, PT, and speech therapists or assistants to established patients only with service and billing requirements (see page 6 of linked document). Rule suspensions are in effect until December 31, 2021.</p> <p>Enacted HB 1063 extends emergency measures enacted for the duration of the coronavirus pandemic that allows providers to treat patients via telehealth without first conducting an in-person exam. It also amends the definition of telemedicine to include “real-time interactive audio technology, including the telephone.”</p>	<p>Health Emergency rule suspensions. DHS also published an Emergency COVID-19 Response Manual to continue certain rule suspensions until December 31, 2021. Department of Human Services COVID-19 updates for providers and Public Health Emergency rule suspensions. DHS also published an Emergency COVID-19 Response Manual to continue certain rule suspensions until December 31, 2021. These rule suspensions include allowing extensions on re-evaluations and treatment prescriptions for OT, PT, and speech therapy (see section 243.000 of the Response Manual).</p> <p>On April 2, 2020, the federal government issued an 1135 disaster response waiver.</p> <p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on April 15, 2020; April 29, 2020 (addressing reimbursement for telephonic OT/PT/ST parental consultation and other reimbursement and benefit changes); July 30, 2020; September 22, 2020; March 16, 2021; and May 28, 2021.</p> <p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on July 10, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on April 13, 2020; June 22, 2020; August 10, 2020; and May 4, 25, & 26, 2021.</p>
CA	<p>Executive Order 40-20 authorizing the Director of the Dept. of Consumer Affairs to waive any continuing education requirements and any accompanying regulations for OT practitioners and other licensees. Issued March 30, 2020.</p>	<p>California All-Plan Letter directing plans to cover telehealth at the same rate as in-person; pay for telephone at the same rate as video if medically appropriate; and not to charge higher cost sharing for telehealth.</p>	<p>Medicaid: Section 1135 disaster response waivers approved on March 23, 2020; May 8, 2020; August 19, 2020; and March 12, 2021.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS)</p>

<p>Executive Order N-39-20 authorizing the Dept. of Consumer Affairs to amend scopes of practice and waive any licensing requirements for health care providers, including OTs and OTAs.</p> <p>Department of Consumer Affairs list of COVID-19 temporary waivers:</p> <ul style="list-style-type: none"> • 20-53 temporarily waives, for individuals whose active licenses expire between March 31, 2020, and October 31, 2020, any requirement that an individual renewing their license take and pass an examination to renew a license or complete or demonstrate compliance with any CE requirements to renew a license. • 20-91 temporarily waives any requirement, for an individual seeking to reactivate or restore a certain license including an OT or OTA license, that an individual 1) complete or demonstrate compliance with any CE requirements to reactivate or restore a retired, inactive, or canceled license, and 2) pay any fees to reactivate or restore a retired, inactive, or canceled license (including renewal delinquency, penalty, or late fees or any other statutory or regulatory fees). A license reactivated or restored pursuant to this waiver is valid until July 1, 2021, or when the State of Emergency ends, whichever is sooner. • 20-23 extends several timeframes and makes a Limited Permit a way for graduates to enter the workforce while waiting to take the NBCOT exam • 21-155 gives OT and OTA applicants whose applications were abandoned 	<p>All-Plan Letter regarding billing and delivery of telehealth services, including FAQs regarding eligible providers.</p> <p>Insurance Commissioner directed health insurance companies to provide increased telehealth access during COVID-19 emergency.</p> <p>Executive Order N-43-20 temporarily suspending the requirement for a health care provider to obtain verbal or written consent before the use of telehealth services and to document that consent, and requiring that a covered health care provider ensure that the delivery of telehealth services is consistent with the March 17, 2020 notification from the U.S. Office of Civil Rights that implemented discretion in the enforcement of HIPAA requirements</p> <p>Department of Health Care Services guidance on California Children’s Services Medical Therapy Programs, authorizing medical therapy providers to provide OT and PT services in non-school settings for the duration of the public health emergency.</p> <p>Medi-Cal guidance document on Payment for Telehealth and Virtual/Telephonic Communications Relative to COVID-19.</p>	<p>waivers granted on April 2, 2020; May 27, 2020; June 8, 2020; August 10, 2020; September 14 and 17, 2020; November 23, 2020; and March 10, 2021.</p> <p>Time-limited state plan amendments to respond to COVID-19 approved on May 13, 2020; August 20, 2020; March 16, 2021; March 26, 2021; and June 4, 2021.</p> <p>California amended an 1115 demonstration waiver to respond to COVID-19, allowing rehab services in temporary residential settings and suspending limits on SUD treatment services.</p> <p>Private Insurance: FAQs from the Commissioner of Insurance regarding cost-sharing, claims issues, coding of telehealth appointments, prior authorization, and in-network providers. (Issued October 2)</p>
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	<p>by the OT Board between June 2, 2021, and August 1, 2021 for failure to take and pass the NBCOT exam an additional 6 months after their application was received to submit a complete application.</p> <ul style="list-style-type: none"> • 21-116 extends expiration dates for limited permits issued between December 1, 2020 and March 31, 2021 to 6 months from the date of issuance by the CBOT. <p>CBOT COVID-19 general updates including general FAQs, FAQs about Executive Order 39-20, and links to additional information.</p>		
CO	<p>Executive Order 2020 038, which gave DORA the authority to adopt emergency rules impacting OT practitioners, has been extended and will expire July 1, 2021. Emergency rules previously issued under this Executive Order that expand the OT scope of practice to include services performed in certain settings as delegated by certain health care providers (including OTs and OTAs providing COVID vaccines) and that authorize DORA to issue a temporary license for OTs and OTAs who meet the initial licensure requirements, except for passage of the NBCOT exam have been re-adopted and are in effect for either 30 days after adoption or for the duration of the Governor’s declared State of Emergency, up to 120 days, whichever is longer. The re-adopted rules also stop issuance of temporary licenses as of April 27, 2021. OT and OTA applicants issued a temporary license after December 28, 2020 shall cease practice on July 1, 2021 if a permanent license has not been issued. Click here to download a Word version of the re-adopted emergency rules on temporary licenses.</p>	<p>Department of Regulatory Agencies Frequency Asked Questions on COVID-19 Telehealth Services</p> <p>Enacted SB 212 requires health insurance carriers, including Medicaid, to cover telehealth. The legislation prohibits carriers from imposing specific requirements or limitations on HIPAA-compliant technologies; requiring an established patient-provider relationship; or imposing additional certification, location, or training requirements as a condition of reimbursement. This bill codifies provisions in Executive Order 2020 020, which was extended by Executive Orders 2020 046, 2020 082, and 2020 116. All of these orders have expired. Rules adopted by the Medical Services Board as a result of the passage of SB 212 were adopted and went into effect on September 30. The rules make permanent the expanded telemedicine authorized during the COVID-19 emergency and as authorized in the Senate bill for select physician services provided in various settings and allow for interactive video, audio, or data communication in lieu of face-to-face communication between a patient and provider.</p>	<p>Private insurance: Insurance bulletin directing state-regulated plans to provide coronavirus–related telehealth without cost sharing; testing without cost sharing; and early prescription refills. An emergency regulation formalizing the bulletin’s provisions has been proposed. Due to the evolving situation related to the COVID-19 pandemic, DORA terminated a previously proposed permanent rule that would have codified the requirements of the bulletin and emergency rule (click on the italicized text under the Proposed rule heading).</p> <p>Medicaid: Section 1135 disaster response waivers approved on March 26, 2020; June 16, 2020; and April 16, 2021.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on March 26, 2020; April 14 and 21, 2020; May 28, 2020; June 18, 2020; September 28, 2020; January 14, 2021; and March 31, 2021.</p>

	<p>FAQs from DORA about the scope of practice expansion.</p>	<p>DORA Telehealth FAQ on COVID-19 and Insurance</p> <p>Health First Colorado temporarily expanded its telemedicine policy to add occupational therapy services (as well as physical therapy and home health hospice and pediatric behavioral therapy services) to the list of eligible interactive audiovisual telemedicine services.</p> <p>Department of Regulatory Agencies adopted emergency rule requiring carriers to reimburse providers for provision of telehealth services, including occupational therapy, using non-public facing audio or video communication products during the COVID-19 nationwide public health emergency. This emergency rule was extended on December 15, 2020. AOTA staff can find no record of it being extended further.</p> <p>State Telehealth for Providers webpage, including technology, HIPAA, and billing information</p>	<p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on April 21, 2020; May 6 and 20, 2020; October 1, 2020; March 16, 2021; April 15, 2021; and April 20, 2021.</p> <p>Time-limited CHIP state plan amendments to respond to COVID-19 approved on June 10, 2020, April 14, 2021; and May 28, 2021.</p> <p>Executive Order 2020 68 suspends certain statutes that would require certain enrollees to be disenrolled from Medicaid. Subsequent Executive Order extended this order for 30 days from May 27, 2021.</p>
CT	<p>Executive Order No. 70 authorizing the Commissioner of Public Health to waive licensing, renewal, and inspection requirements to ensure the adequate provision of health care during the state of emergency (issued March 27). Related Department of Public Health Order, providing that licenses not renewed during the current public health emergency shall not expire until 6 months after the public health emergency is declared to be over. Department of Public Health webpage information regarding suspension of license renewal requirements under Executive Order No. 70 and the related Dept. of Public Health Order</p>	<p>Enacted HB 6001 extends telehealth flexibilities granted by previous Executive Orders (No. 7F and No. 7FF) until March 2021. HB 6001 makes many emergency measures by the Governor permanent such as: 1) expanding the list of care providers able to use telehealth including occupational therapists and therapy assistants; 2) allowing coverage for services delivered over an audio-only phone and other audio-visual telemedicine platforms; 3) allowing care providers to use telehealth from any location; and 4) requiring reimbursement parity for telehealth services, and preventing insurers from seeking co-pays or deductibles or reducing the amount of reimbursement to providers. HB</p>	<p>Medicaid: Section 1135 disaster response waivers issued on March 27, 2020; May 12, 2020; June 12, 2020; and August 21, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on March 23, 2020; September 24, 2020; November 5, 2020; March 24, 2021; and May 4, 2021.</p> <p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on August 13, 2020, and February 22, 2021.</p>

	<p>Executive Order 9S continues the temporary suspension, for the duration of the public health and civil preparedness emergency, of requirements for licensure of out-of-state providers, including occupational therapists. This order supersedes the same provision in Executive Order 7HHH. Commissioner of Public Health Order doing the same for the duration of the public health and civil preparedness emergency, unless sooner terminated by the Commissioner or unless the Governor sooner repeals or modifies the declared state of emergencies or Executive Order 9S.</p> <p>Executive Order 12B extends the temporary suspension of licensure requirements for out-of-state health care providers authorized in Order 9S until July 20, 2021.</p>	<p>5596 extends many of these provisions until June 30, 2023.</p> <p>The Governor previously extended the provisions of HB 6001 (Public Act 20-2 of the 2020 special session) that were scheduled to expire on March 15, 2021 until April 20, 2021 and then further until May 20, 2021. The Governor did not extend the provisions after May 20.</p>	<p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on August 27, 2020.</p>
DC	<p>The COVID-19 public health emergency expired on May 20 after the Mayor did not extend the order.</p> <p>Mayor's Administrative Order 2020-02 Waives licensure fees for health care providers appointed as temporary agents of DC; a temporary agent has a license in their home jurisdiction and is only providing services at a licensed health care facility (including telehealth) or has an existing relationship with a patient who has returned to DC and continues to require the health care provider's services.</p> <p>Notice on Board website: Licensure Waivers In response to COVID-19, DC Health has waived all licensure requirements for practitioners who are licensed in good standing in another jurisdiction. You can read more about the waiver process here.</p>	<p>The Mayor issued guidance on the use of telehealth in the District of Columbia stating that telehealth services are currently permissible in the District of Columbia provided such services are delivered in a manner consistent with standards of care and licensed-out-of-state health care providers obtain a license in DC to provide services to a client in located in DC.</p> <p>Dept. of Health Care Finance additional telemedicine resources, including link to adopted permanent rule regarding Medicaid-reimbursable telemedicine services (see pages 009734-009739), which adds the beneficiary's home as the originating site, clarifies that a distant site provider includes any provider staff working remotely, clarifies that the distant provider sites listed in the existing rule is non-exhaustive and that services provided by other Medicaid providers via telehealth are reimbursable, and clarifying that when the originating site is the beneficiary's home, the</p>	<p>Medicaid: A public notice to COVID-19 Medicaid providers regarding where to get information, coverage of testing, telemedicine coverage, and how beneficiaries can receive extra medicine or supplies.</p> <p>On April 3, the federal government granted an 1135 disaster response waiver (see more information from the Medicaid Director here). A subsequent waiver was granted on May 8, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on April 14, 2020; August 27, 2020; December 23, 2020; and January 19, 2021.</p> <p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on June 5, 2020; August 6, 2020; September 25, 2020; October 6, 2020; May 7, 2021.</p>

	<p>Adopted emergency rule in effect until May 5, 2021 authorizing each health occupations licensing board to exempt an applicant for renewal of a license from some or all of the required continuing education if the applicant fails to complete the CE requirement due to documented hardship, disability, serious illness, or other circumstances the Board deems appropriate; defining remote instruction; authorizing each board to approve and accept, under extraordinary circumstances, CE courses that are completed by remote instruction in place of any required in-person CE, if the Board determines that completing the in-person CE would pose an undue hardship or risk for the Board's health professionals. Permanent rule has been adopted and went into effect on April 9, 2021.</p>	<p>distant site provider is responsible for ensuring that the technology in use meets minimum existing requirements in current regulation.</p>	<p>Private insurance: Department of Insurance, Securities, and Banking order directing insurers to cover screening, testing, <i>and treatment</i> without cost sharing; cover a vaccine without cost sharing when available; provide robust telehealth with cost sharing that is not greater than for in-person services; and other requirements.</p>
DE	<p>Letter from Division of Professional Regulation to licensees regarding continuing education and licensure renewal</p>	<p>DMMA is revising telehealth policies to remove barriers created by requirements that patients present in-person before telehealth services may be provided and allow out-of-state health care providers to provide services if they hold an active license in another jurisdiction.</p> <p>Governor signed House Substitute 1 for House Bill 348 which extends several telehealth flexibilities until July 1, 2021: requires out-of-state practitioners to complete a Medical Request Form and follow any other regulations established by the Division of Professional Regulation; continues the suspension, established in the Second Modification of the State of Emergency, of the requirement that patients present in person and be located in the state before telemedicine services may be provided; allows for the in-person requirement to be waived if impractical; permits telemedicine services via non-smart phones or land line connections consistent with Tenth Modification of the State of Emergency; provides that</p>	<p>Private insurance: The Department of Insurance issued a bulletin to all insurance carriers in the state related to testing, telemedicine and telehealth, network adequacy and out of network services, utilization review, surprise medical bills, etc.</p> <p>Department of Insurance Bulletin No. 116: Additional Guidance Relating to COVID-19, specifically suspension of cancellations and nonrenewals, telehealth, and waiver of pre-authorization requirements.</p> <p>Medicaid: On March 27, the federal government issues an 1135 disaster response waiver. Another 1135 waiver with additional flexibilities granted on June 9, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on April 7, 2020; November 4, 2020; and January 19, 2021.</p>

		<p>professionals requiring direct supervision are not covered by the act; and requires telemedicine services permitted under the law to receive the same insurance coverage as under existing law. HB 160, which awaits action by the governor, would permanently codify key provisions of the emergency legislation (HB 348 2020).</p> <p>Dept. of Insurance Final Order adopting regulation amendments to align insurance regulations with the new telemedicine/telehealth law enacted by House Bill 348. Amendments are effective starting November 11, 2020, until July 1, 2021, unless extended by order of the Insurance Commissioner.</p> <p>Department of Insurance Bulletin: Passage of Telemedicine Statute</p>	<p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on May 27, 2020; September 24, 2020; April 13, 2021; May 5, 2021; and May 11, 2021.</p> <p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on June 24, 2020.</p> <p>Delaware was granted a COVID-related 1115 demonstration waiver, allowing the state to make retainer payments to habilitation and personal care providers.</p>
FL	<p>Notification of Renewal Deadline Extension (April 1, 2021): As part of the response efforts to the Novel Coronavirus 2019 (COVID-19), State Surgeon General Scott Rivkees issued Emergency Order 21-001 extending the licensure renewal expiration date until June 30, 2021 for a professional license issued by the Department with upcoming licensure renewal deadlines.</p> <p>Governor's Executive Order 20-52 allowing medical professionals and workers with good and valid professional licenses issued by states other than Florida to render such services in Florida during this emergency for persons affected by this emergency with the condition that such services be rendered free of charge, and with the further condition that such services be rendered under the auspices of the American Red Cross or the Florida Department</p>	<p>Surgeon General issued an Emergency Order 20-002 that allows certain out-of-state health care professionals, including OTs and OTAs, to temporarily provide telehealth services to persons in Florida.</p> <p>Florida Medicaid has expanded telemedicine/telehealth services to behavior analysis services, therapy services, specified behavioral health services, and early intervention services. All flexibilities will continue until further notice.</p> <p>Governor issued Executive Order 20-85 to ensure that all state employees have access to telehealth services. Expires upon expiration of Executive Order 20-52, which was extended for another 60 days on April 27, 2021.</p> <p>Department of Insurance Informational Memorandum to state-regulated health insurers</p>	<p>Medicaid: On March 17, 2020, the federal government granted an 1135 disaster response waiver.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on April 17, 2020; January 19, 2021; and April 30, 2021.</p> <p>Time-limited Medicaid state plan amendment responding to COVID-19 approved on November 24, 2020.</p>

	<p>of Health. Extended for another 60 days on April 27, 2021.</p> <p>Board FAQs on continuing education, including questions regarding “live” continuing education activities.</p>	<p>encouraging them to broaden access to telehealth.</p> <p>Information on Out-of-State Telehealth Provider Registration for licensees licensed outside the state of Florida.</p>	
GA	<p>Emergency Rule on Continuing Education Requirements: Due to the State of Emergency regarding COVID-19, licensees who apply to renew licenses expiring March 31, 2020, shall have until June 30, 2020, the end of the lapsed late renewal period, to complete the continuing education requirements outlined within Rule 671-3-.08.</p>	<p>Enacted HB 307 authorizes health care providers to provide telemedicine services from home; authorizes patients to receive telemedicine services from their home, workplace, or school; allows for audio-only care under certain circumstances; prohibits requirement that patient have in-person consultation before receiving telemedicine services; prohibits more stringent utilization review requirements; prohibits separate deductibles for telemedicine services; prohibits requirement that health care providers use a specific telehealth platform or vendor; requires documentation by health care providers for telemedicine services that equals or exceeds in-person consultation</p> <p>Dept. of Community Health telehealth guidance for Medicaid providers: OTs are considered qualified providers and are permitted to provide Medicaid-reimbursed telehealth services during the Public Health Emergency. (dated March 26)</p>	<p>Medicaid: On April 1, 2020, the federal government granted an 1135 disaster response waiver and a subsequent waiver with requests not approved initially on May 14, 2020.</p> <p>Time-limited Medicaid state plan amendment responding to COVID-19 approved on May 20, 2020.</p> <p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on May 7, 2020, and May 26, 2021.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on April 9, 2020; June 15, 2020; July 27, 2020; and March 24 and 26, 2021.</p> <p>Georgia Medicaid COVID-19 FAQs on CMS waivers, provider enrollment (CMS has authorized the state to “provisionally, temporarily” enroll providers who are enrolled in another state Medicaid agency or Medicare for the duration of the national health emergency), telehealth, and co-pays. (updated May 15, 2020)</p>
Guam	<p>Executive Order regarding temporary appointment of health care personnel. Order also waives all licensing requirements, permits, or fees required by law, rule, or regulation for health care providers until the public health emergency terminates. Emergency has been extended until July 1, 2021.</p>	<p>No updates at this time</p>	<p>No updates at this time</p>

HI	<p>Governor's Nineteenth Emergency Proclamation suspending the Occupational Therapy Practice Act section requiring a license to practice in the state, to the extent necessary to allow out-of-state OTs and OTAs with current and active licenses or those previously licensed whose licenses are no longer current and active to practice in the state without a license provided the individuals have never had their license revoked or suspended and are hired by a specific health care facility or state or county entity. The previous suspension of statutes related to biennial renewal, failure to renew, restoration, inactive licensure, and conversion from registration were not extended. This suspension was in effect until June 8, 2021, but was not continued in a subsequent emergency proclamation.</p>	<p>The Department of Human Services Med-QUEST Division has issued a series of guidance documents related to telehealth:</p> <ul style="list-style-type: none"> - payment guidance for FQHCs; - general guidance on telehealth services provided by FQHCs; - COVID-19 action plan for Quest Integration health plans, including telehealth provisions; - guidance on billing codes including telehealth visit codes, on virtual check-ins and e-visits; and - telehealth guidance on telephonic services and services billable for non-physician health care providers including OTs. <p>Governor's Twenty-First Proclamation Related to the COVID-19 Emergency suspended various laws related to telehealth to the extent that the laws define telehealth as excluding the use of standard telephone contacts. These laws relate to coverage of telehealth services by the state's managed care and fee-for-service programs, by a health or sickness insurance plan, by an HMO, or by a mutual benefit society insurance plan. The law suspensions in this Proclamation are in effect until August 6, 2021, unless terminated or superseded by a separate proclamation, whichever comes first.</p>	<p>Medicaid: On March 26, the federal government granted an 1135 disaster response waiver.</p> <p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on April 30, 2020, and May 7, 2021.</p> <p>Hawaii was granted a COVID-related 1115 demonstration waiver, allowing the state to make retainer payments for personal care services; and extend the timeframes for functional status and level of care assessments and reassessments in HCBS.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on March 27, 2020; May 5 and 18, 2020; August 21, 2020; September 29, 2020; January 19, 2021; and March 24, 2021.</p>
ID	<p>No updates.</p>	<p>Governor's Executive Order 2020-13 makes all waivers of telehealth regulations that were issued during the coronavirus pandemic permanent.</p> <p>Idaho Department of Health and Welfare guidance on telehealth for occupational therapy providers and Medicaid providers generally. Also released are bulletins on reimbursement for diagnosis and treatment of COVID-19</p>	<p>Medicaid: On March 26, 2020, the federal government granted an 1135 disaster response waiver.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on September 9, 2020, and March 25, 2021.</p>

		<p>(includes telehealth reimbursement information) and telehealth HIPAA guidance.</p> <p>Department of Insurance bulletin on telehealth in private insurance to expand telehealth access to all in-network providers and expand how telehealth services can be received. Remains in effect as long as the Governor's emergency proclamation remains in effect.</p>	<p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on September 3, 2020; April 30, 2021; and May 28, 2021.</p> <p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on July 23, 2020.</p>
IL	<p>Dept. of Financial and Professional Regulation Proclamation suspending the permanent licensure requirements for various health care providers, including OTs and OTAs, who are licensed in another state, are in good standing, and working in response to the public health emergency declared by the Governor. Licensees are limited to providing treatment only in response to the COVID-19 outbreak. This proclamation has been extended until December 31, 2021. Executive Order 2020-23, which this proclamation is based on, has been extended through June 26, 2021.</p> <p>FAQ: Out of State Health Care Professional Temporary Practice Permit – COVID-19 (updated April 22, 2020)</p>	<p>The Illinois Department of Healthcare and Family Services Provider Notice of telehealth services expansion and of emergency rules regarding telehealth (issued March 20). Click here for the text of the telehealth emergency rules (see blue, underlined text at end of pdf). Additional guidance posted on the IDHFS website includes a Provider Notice (issued March 30) providing additional guidance for telehealth, virtual check-in, and online patient portal/E-visit billing, a news announcement from the Governor about the state's new remote patient monitoring program, FAQs about the above telehealth emergency rules, and a correction to the March 30 Provider Notice regarding telehealth billing.</p> <p>Executive Order 2020-09 requires all health insurance issuers regulated by the Department of Insurance to cover the costs of all Telehealth services rendered by in-network providers to deliver any clinically appropriate, medically necessary covered services and treatments; prohibits cost-sharing for telehealth services provided by in-network providers; applies to in-network, licensed occupational therapists (ILOTA received confirmation from IDFP that this executive order applies equally to OTAs and OTs). This Order has been extended until June 26, 2021.</p>	<p>Medicaid: On March 23, 2020, the federal government issued an 1135 disaster response waiver.</p> <p>Time-limited Medicaid state plan amendments responding to COVID-19 approved on April 24, 2020; December 14, 2020; and May 28, 2021.</p> <p>Time-limited CHIP state plan amendment approved on July 10, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on March 31, 2020; August 31, 2020; and January 19, 2021.</p>

		<p>Legislation (HB 3308) which would ensure coverage for clinically appropriate and medically necessary telehealth services at the same rate as in-person services has passed both chambers of the legislature and awaits governor’s action.</p> <p>Dept. of Financial and Professional Regulation Guidance for Out-of-State Health Care Providers using Telehealth Services in Illinois</p> <p>Department of Insurance Bulletin 2020-04: Requirements for Telehealth Services Under Executive Order 2020-09.</p> <p>FAQs on Executive Order 2020-09 regarding telehealth on Illinois state’s Coronavirus Response website</p>	
IN	<p>Notices pertinent to OT practitioners on Professional Licensing Agency website:</p> <p>1. Healthcare Licensing Requirements— Various code cites: Pursuant to Executive Order 20-05, all healthcare professionals that hold a valid license to practice in another state are not required to attain an Indiana license to practice their equivalent profession in Indiana. The individual cannot be suspended or barred from practicing in any State. (Subsequent Executive Order 20-13 requires out-of-state licensed providers to register with the appropriate Indiana licensing board under certain circumstances.)</p> <p>2. Fingerprinting- The Indiana Dept. of Administration has temporarily suspended all non-emergency status fingerprinting in order to comply with the Stay-At-Home Executive Order. This means that only applicants whose license has been deemed as emergency status (as determined by the Dept. of Administration) are able to receive fingerprinting at this time.</p>	<p>Indiana Health Coverage Programs (IHCP) enrolled providers may use specific billing guidance for providing services through telemedicine. This policy applies to both in- and out-of-state providers and all IHCP-covered services, and it includes both fee-for-service Medicaid as well as all managed care benefits. Subsequent FAQs, updated as of June 11, allow for OT, PT, and speech services to be provided via telemedicine, but only with a video component, which is required by the Governor’s Executive Order 20-13. An IHCP bulletin published on July 9 states that telemedicine flexibilities implemented as a result of COVID-19 will stay in place until the end of the Governor’s declared public health emergency. IHCP Bulletin published June 8, 2021 details telehealth policy expansions made permanent in SB 3.</p> <p>Enacted legislation (SB 3) prohibits Medicaid from specifying originating sites and distant sites for purposes of reimbursement; specifies certain activities as “healthcare services”; and</p>	<p>Medicaid: Executive Order 02-05 requires the Family and Social Services Administration (FSS) to:</p> <ul style="list-style-type: none"> • Waive all premium payment requirements for the Healthy Indiana Program (HIP) and the Children’s Health Insurance Program (CHIP) • Delay renewal processing for all Medicaid and HIP recipients • Suspend all Telehealth restrictions. <p>On March 25, 2020, the federal government granted an 1135 disaster response waiver and a subsequent waiver on May 13, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on May 28, 2020; October 29, 2020; December 15, 2020; and March 10 and 29, 2021.</p>

	<p>All non-emergency fingerprinting will be delayed until the Stay-At-Home order is lifted.</p> <p>COVID-19 Temporary Healthcare Provider Registry information</p> <p>Executive Order 20-13 authorizing a health care worker who retired within the past 5 years, surrendered their license, or whose license was inactive but not revoked, suspended, or relinquished to provide health care services in Indiana during the emergency without reinstatement or approval by the appropriate licensing board for a period of 90 days. Renewal is available in 30-day increments. Executive Order 21-07, issued on March 22, 2021, granted an additional 90-day period.</p> <p>Executive Order 21-14 renewed all previously issued COVID-19 related Executive Orders for another 30 day period beyond May 31, 2021.</p> <p>Department of Health Statewide Standing Order CSO-20-05 authorizing licensed health care providers, including OTs and OTAs, to administer vaccines as recommended by the CDC provided it is within their scope of practice. Additional information is provided in the Statewide Protocol for the Administration of Vaccines by Other Providers.</p>	<p>expanding the list of practitioners who can deliver services via telehealth (including OTs and OTAs), among other things. As a result of passage of this legislation, provisions in Executive Orders 20-05, 20-12, and 20-13 related to telehealth will remain in effect for 60 days from May 11, 2021 at which time they will be rescinded unless further extended.</p>	
IA	<p>Iowa Board of Physical and Occupational Therapy Guidance Related to Governor Reynold's Proclamations & COVID-19 related to license renewal, continuing education, background checks, and telehealth. (updated June 25, 2020)</p> <p>Dept. of Public Health Guidance on License Renewal and Continuing Education Requirements regarding legislation that passed in 2020 to extend the license renewal date for</p>	<p>Governor's Executive Order temporarily suspended regulatory provisions to the extent that they exclude from the definition of telehealth the provision of services via audio-only telephone services and requiring the Insurance Commissioner to ensure that any health carrier shall reimburse a health care professional for medically necessary, clinically appropriate covered services provided via telehealth or audio-only telephone service to a covered person on the same basis as if the</p>	<p>Medicaid: DHS is waiving all co-pays, premiums, and contributions for Iowa Health and Wellness Plan (IHWP), Medicaid for Employed People with Disabilities, Healthy and Well Kids in Iowa, and Dental Wellness Plan.</p> <p>On March 25, 2020, the federal government granted an 1135 disaster response waiver.</p>

<p>certain licensees: if your license expired in 2020 and you did not renew by your normal renewal date, you have until June 30, 2021 to complete CE and renew your license. Failure to renew your license by June 30 will result in your license becoming inactive July 1. You are not required to wait until June 30 and may renew online at any time (posted February 26, 2021).</p> <p>Governor's Executive Order temporarily continuing the suspension of certain statutory and regulatory requirements for OTs and OTAs to the extent they impose requirements for in-person continuing education as a condition of licensure renewal or impose continuing education deadlines or requirements that are unable to be satisfied due the disaster emergency. The order also suspends certain statutory and regulatory provisions to the extent they set an expiration date or renewal requirement for a license that expires during the duration of this proclamation and any further extension of this suspension. A subsequent Executive Order extended these temporary suspensions through June 26, 2021 (see sections 51 and 52).</p>	<p>services were provided in-person. A subsequent Executive Order extended these provisions until June 26, 2021 (see section 44)</p> <p>Governor's Executive Order temporarily suspended regulatory provisions that require Iowa licensure for an on out-of-state OT or OTA to provide OT services via telephone or electronic means to an Iowa resident. A subsequent Executive Order extended these provisions until June 26, 2021 (see section 57).</p> <p>The Iowa Medicaid Enterprise (IME) allows telehealth services to be provided for all Medicaid-covered benefits and provides guidance on billing.</p> <p>Insurance Bulletin 20-06 to increase the availability and usage of telehealth in the state.</p> <p>Department of Human Services informational letter to all Medicaid providers authorizing OTs to bill for telehealth services</p> <p>Department of Human Services FAQs on Telehealth, including the following: Are physical therapy (PT), occupational therapy (OT), and speech therapy (ST) services covered at this time for telehealth with both the IME and the MCOs? The Department intends for providers to utilize technology to facilitate appropriate care reimbursable within the Medicaid program during this public health emergency. Part of this emergency provision will allow services that by definition are direct contact services and are typically rendered in person to be rendered via telehealth when clinically appropriate and necessary to preserve the health and safety of our Medicaid member. Providers must practice within the scope of their practice and are</p>	<p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on May 18, 2020; July 20 and 24, 2020; and April 30, 2021.</p> <p>Time-limited CHIP state plan amendment approved on April 24, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on May 28, 2020; October 29, 2020; December 15, 2020; and March 10 and 29, 2021.</p>
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		<p>reminded that services must be documented in accordance with applicable documentation standards.</p> <p>Regarding billing: Bill the appropriate CPT or HCPS code with POS 02 and a 95 modifier.</p>	
KS	<p>KSBHA Emergency Actions and Guidance Statements to Facilitate Immediate Access to Care During the COVID-19 Emergency Declaration Period memorandum regarding temporary emergency licensure, prioritized licensing application processing for military service members and spouses, temporary licenses for OTs and OTAs who meet requirements for licensure or meet requirements for licensure except for the exam, continuing education deadline extensions, Board guidance statements, and general information. Updated May 11, 2021.</p> <p>Board of Healing Arts list of emergency actions and guidance statements for the COVID-19 emergency, including information about a temporary emergency license process, a license waiver process for qualified out-of-state providers licensed in other states and seeking to provide services via telemedicine to assist with the pandemic response, extension of CE deadlines, extension of license expiration and renewal deadlines, and the compliance confirmation process allowing qualified licensed health care providers licensed in another state to temporarily practice in Kansas.</p> <p>Governor's Executive Order 20-19 requires all state agencies to extend renewal deadlines for any occupational or professional license to any individual whose license was in good standing as of March 12, 2020 and that has expired or will expire during the State of Disaster Emergency; provides that such a license shall</p>	<p>Kansas Insurance Department COVID-19 FAQ: Are health insurers covering telehealth services due to COVID-19? The Commissioner of Insurance does not have the authority to mandate expansion of telehealth services or modifications in reimbursement amounts. However, we know many health insurers, but not all, are voluntarily making changes to allow telehealth services and to modify their payment practices to reimburse those services at the same level as in-person services. We encourage everyone to check with their health insurer regarding the coverage of telehealth services.</p> <p>How else are health insurers responding to COVID-19? The Department reached out to health insurers and learned they are implementing their contingency plans as need and are shifting employees to work from home, including claims processing and customer service. Many are also making changes to their internal policies regarding telemedicine and prescription drugs. For specific information on what your health insurer is doing, please visit their website. (Click on the above link and scroll to page 5 for links to insurers' websites)</p>	<p>Medicaid: On March 25, 2020, the federal government granted an 1135 disaster relief waiver. Medicaid: On March 24, 2020, the federal government granted an 1135 disaster response waiver.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on April 1, 2020; June 2 and 16, 2020; August 6, 2020; and January 19, 2021.</p> <p>Time-limited Medicaid state plan amendments responding to COVID-19 approved on May 11, 2020; June 11, 2020; April 1, 2021; and May 12, 2021.</p> <p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on May 1, 2020. Time-limited CHIP state plan amendment approved on May 1, 2020.</p>

	<p>remain valid until 90 days following the termination of the State of Disaster Emergency; requires all state agencies to waive any late or expiration fees associated with such licenses; and require state agencies to extend the deadlines for continuing education requirements until 90 days following the termination of the State of Disaster Emergency. Executive Order 21-09 continues these provisions until the earlier of the Order's rescission or the expiration of the statewide State of Disaster Emergency (currently May 28, 2021).</p> <p>Executive Order 20-23 requires all state agencies who work with or collaborate with KDADS to extend renewal deadlines for any occupational or professional license issued by a state agency, board, or other licensing authority within a state agency to a person or any non-profit business or organization.</p> <p>Executive Order 21-12 continues this order until the earlier of the Order's rescission or the expiration of the statewide State of Disaster Emergency (currently, May 28, 2021).</p>		
KY	<p>At the Board's March 24 meeting, the Board agreed to suspend the regulatory requirement that an OT supervisor of an OTA provide no less than 2 hours per month of face-to-face supervision. The Board also voted to suspend the regulatory requirement that an OT supervising a temporary permit holder provide at least 30 minutes of face-to-face supervision daily and to allow the 30 minute requirement and the 2 hour face-to-face supervision requirement for OTAs to be done via remote means (FaceTime, mobile call, Zoom, etc.) until after the State of Emergency.</p> <p>Governor's Office Press Release regarding re-opening plan: OT services may be resumed</p>	<p>Enacted HB 140 makes some telehealth measures implemented during the pandemic permanent. Requires reimbursement rates for telehealth to be equivalent to reimbursement rates for the same service provided in person.</p> <p>Memo from Kentucky Cabinet for Health and Family Services—Office of Inspector General regarding specific diagnoses considered emergent and urgent for purposes of continued PT, OT, and speech therapy services during the state of emergency.</p> <p>SB 150 provides that unless prohibited or limited by federal law, a health care provider who establishes a provider-patient relationship, may</p>	<p>Medicaid: The Department of Medicaid Services will waive all cost sharing associated with COVID-19, encourage the use of telehealth when possible, add specific codes related to telehealth on a temporary basis, and eliminate prior authorization for COVID-19 related services.</p> <p>Section 1135 disaster response waivers approved on March 25, 2020; December 18, 2020; and March 25, 2021.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS)</p>

<p>during Phase 1 of re-opening. KYOTA received clarification that OT services are considered part of “outpatient hospital services” under Phase 1.</p>	<p>remotely provide health care services to a patient through the use of telemedicine.</p> <p>Information from the Kentucky OT Board regarding temporary registration of out-of-state health care providers to provide services via telehealth to patients in Kentucky.</p> <p>Medicaid COVID-19 FAQs, including the following: 14. What about initial in-person meetings required for services such as occupational therapy, physical therapy, and speech and language pathology or PT 76 services? (see page 4) If appropriate and consistent with the guidance in these FAQs, the March 17, 2020 Provider letter, or executive orders, PT 76 can use telehealth. To the extent allowed or not restricted by executive order or licensing board action, DMS will allow for these facilities and providers to provide services via telehealth or other telecommunication method.</p> <p>26. We are an EPSDT provider of ST, OT & PT services. With the closing of certain facilities because of the Coronavirus we are wanting to provide our services through Telehealth. Will our current authorizations on clients still be valid and sufficient for the use of the Telehealth? Yes, DMS will require that current authorizations apply to services provided via telehealth.</p> <p>27. Can a physical and occupational therapist provide services in a home setting? (see page 6) Yes, with the changes made to telehealth services over the last year—including the previously existing allowances under 907 KAR 3:170— a physical and occupational therapist</p>	<p>waivers granted on March 25, 2020; July 29, 2020; March 24, 2021; and March 29, 2021.</p> <p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on April 29, 2020; June 4 and 22, 2020; March 23, 2021; April 13, 2021; and May 26, 2021.</p> <p>Time-limited CHIP state plan amendment to respond to COVID-19 approved June 10, 2020. Time-limited CHIP state plan amendment approved on June 10, 2020.</p> <p>Prior Authorization Guidance, updated April 21, 2021, from Medicaid stating that Prior Authorization may be required for medical or surgical inpatient admission and concurrent review, beginning June 1, 2020, and that PAs will remain in place for outpatient medical or surgical services/procedures.</p> <p>Private insurance: Executive Order 2020-220 states that all insurers shall ensure that provider networks are adequate to handle an increase in the need for health care services, including offering access to out-of-network services where appropriate.</p> <p>Department of Insurance guidance on EO 2020-220 allowing for use of additional non-public facing audio or video and waiving requirements for prior provider-patient relationship to receive telehealth.</p>
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		<p>can provide any service via telehealth unless that service is prohibited by the provider’s licensure and licensure board or if it is residential in nature.</p> <p>37. Can providers deliver services remotely during the COVID-19 state of emergency? (see page 8) Yes, DMS is allowing providers to deliver 1915(c) HCBS waiver services remotely for certain services. This can be done in situations where a participant is quarantined due to symptoms of or having been exposed to COVID-19 or as a precaution against spreading COVID-19. Services that could be provided via telehealth include: - Physical, Occupational or Speech Therapy, - Supported Employment, - Behavior supports and counseling services, - In-home services such as Personal Care or Homemaking (cueing and prompting support only) -Case Management.</p>	
LA	<p>Board website notice: For an orderly transition and continuity of care for Louisiana citizens, the LSBME will extend the duration of all temporary permits issued during the COVID public health emergency until 90 days after the termination of the declared health care emergency, whenever that is determined by the Governor or the judicial branch of the state of Louisiana.</p> <p>Governor’s Executive Order suspending state licensure laws, rules, and regulations for out-of-state or out-of-country medical professionals who hold a current license in good standing in their respective state or country and that they practice in good faith and within reasonable scope of their skills, training, or ability. Also temporarily suspends the requirement that a</p>	<p>Louisiana Medicaid encourages the use of telemedicine/telehealth for rendering physical therapy, occupational therapy, and speech therapy to members. Claims processing systems will be updated by March 24, 2020—before that date, providers should continue to submit claims and they will be recycled with no action needed by the provider.</p> <p>During State Board of Medical Examiners’ Emergency Board Meeting, Board approved a recommendation to allow OTAs to utilize telehealth in the provision of services to the patients managed by OT and OTAs. Board of Medical Examiners’ rule exemption regarding telehealth (see highlighted portion on page 6)</p>	<p>Medicaid: Louisiana Medicaid encourages the use of telemedicine/telehealth for rendering physical therapy, occupational therapy, and speech therapy to members. Claims processing systems will be updated by March 24, 2020 – before that date, providers should continue to submit claims and they will be recycled with no action needed by the provider.</p> <p>On March 23, the federal government granted an 1135 waiver; a subsequent waiver on May 11; and another waiver on August 7, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on April 14, 2020; July 7, 2020; October 28, 2020; November 16, 2020; January 14 and 19, 2021; and March 4 and 26, 2021.</p>

<p>licensing board have a quorum for decision-making and allows the Executive Director of the Board to temporarily suspend, waive, or amend a Board rule that would prohibit, limit, or interfere with the licensing of health care professionals to address the emergency. (See Section 6A and B). These provisions have been extended until June 23, 2021.</p> <p>Rule exemptions, as a result of the Governor’s State of Emergency Proclamation, authorizing emergency temporary permits for OTs and OTAs to provide services in Louisiana provided the OT or OTA holds a current, unrestricted license in good standing in another state.</p> <p>Louisiana State Board of Medical Examiners Plain Language Guidance Regarding Board Changes During the COVID-19 Crisis including establishing that OTs and OTAs can provide services via telehealth, waiving the fingerprinting requirement for obtaining a temporary license, suspending the 90-day limit on temporary licenses, and relaxing general Board enforcement standards under certain circumstances.</p> <p>Notice to Licensees re Continuing Education Requirements (posted October 19, 2020): Effective January 2021, all LSBME licensees (with the exception of Acupuncture, Physician Assistant and Genetic Counselor categories) will be required to use our continuing education tracker to track their annual hours of continuing medical education (CME) or continuing professional education (CPE). During the COVID-19 emergency, the board suspended its annual requirements for continuing education for the 2020 renewal year. The 2021 renewals cycle will arrive soon, and we will</p>	<p>Governor’s Proclamation 32 JBE 2020 suspends, for the duration of the emergency declaration, the requirement that an occupational licensing board that regulates the practice of a health care provider promulgate any rules necessary to provide for, promote, and regulate the use of telehealth in the delivery of health care services within the scope of practice regulated by the board; encouraging licensing boards to adopt emergency rules, if necessary, so that it will not be considered unethical or a violation of licensing standards, solely as a result of the provision of services via telehealth; and requiring that the practice administered via telehealth is within the scope of practice of the provider’s license, skill, training, and experience and must meet the standard of care provided if the services were provided in person (see section 3). These provisions have been extended until June 23, 2021.</p> <p>Emergency rule from Medicaid authorizing temporary coverage of services provided via an interactive telecommunications system, without the requirement of video if such action is determined to be necessary to ensure services meet recipients’ needs. (see page 501). This emergency rule was re-adopted, effective July 13, 2021.</p> <p>Department of Health Informational Bulletin regarding telemedicine/telehealth requirements for OTs (see page 5)</p>	<p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on April 20, 2020; June 26, 2020; February 22, 2021; and March 19, 2021.</p> <p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on May 24, 2020.</p> <p>Private insurance: Department of Insurance emergency rule waiving restrictions on audio-only and personal devices; patient-provider relationship requirements; and requiring telehealth to be covered on the same basis as in-person.</p>
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	<p>operate on a slightly different system as we transition to the new system.</p> <p>Beginning in January, we will be prorating your CE requirements for renewal on a one-time basis in order to give licensees a chance to catch up after the disruption during the pandemic. Licensees who renew in January must have completed 2 hours of professional education in the last 12 months in order to renew. For February renewals, licensees must have 4 hours, March renewals 6 hours, and so on. By the time licensees with October dates enter the renewal system, they should have all 20 hours (if physicians, other licensee groups require fewer hours). All licensees must meet this schedule of completion of hours, regardless of profession.</p> <p>All licensees are required to enroll in the continuing education tracker. All licensees may enroll in the zero cost option; those who wish to have more services attached to the tracker may opt for another plan.</p>		
ME	<p>Governor Mills announced that the COVID-19 State of Civil Emergency will not be extended beyond June 30, 2021.</p> <p>Updated Guidance and Retiring of COVID-19 Prevention Checklists from the Office of Professional and Occupational Regulation (posted May 26, 2021)</p> <p>Notice from the Office of Professional and Occupational Regulation regarding Governor's Executive Order 35 stating: all licensed health care providers may provide services via telehealth by video, audio, or electronic means; extending by 30 days until after the state of emergency is over, the expiration date of a license that is scheduled to expire during the</p>	<p>Governor's Executive Order 35, among licensing provisions also 1) authorizes OTs and OTAs to provide necessary health care services permitted by their licenses through the use of all modes of telehealth, including video and audio, audio-only, or other electronic media; and 2) suspends enforcement of privacy requirements that would prevent, hinder, or delay the delivery of telehealth services. Remains in effect until rescinded or the public health emergency is terminated.</p> <p>Office of Professional and Occupational Regulation posted telehealth resources from the Northeast Telehealth Resource Center, including links to guidance on reimbursement.</p>	<p>Medicaid: MaineCare providers are being encouraged to consider utilizing telehealth for the delivery of MaineCare-covered services when appropriate and necessary (updated April 16, 2020)</p> <p>Section 1135 disaster response waivers approved on May 28, 2020; April 7, 2020; and April 15, 2021.</p> <p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on May 8 and 20, 2020; January 15, 2021; and March 31, 2021.</p>

<p>declared state of emergency; and all temporary licenses issued by the OT board do not expire until 30 days after the state of emergency is over.</p> <p>Governor's Executive Order 35, among telehealth provisions also 1) authorizes the reactivation of a lapsed OT license if the license holder meets certain requirements; 2) authorizes the issuance of a temporary OT license to a person with an active license in another state for the provision of in-person services in Maine or services provided via telehealth; 3) authorizes OTs to renew their license without satisfying continuing education requirements; 4) extends the license renewal deadline for all licenses scheduled to expire during the state of emergency for 30 days following the conclusion of the state of emergency; and 5) provides that temporary licenses issued by the OT board during the state of emergency shall not expire prior to 30 days after the end of the state of emergency. This Executive Order was amended, effective February 3, 2021, to state that any active license scheduled to expire on or before March 20, 2021 may renew the license without completion of the required continuing education.</p> <p>Public Law Chapter 617 gives the Governor, during the COVID-19 state of emergency the authority to modify or suspend the requirements for professional or occupational licensing or registration by any agency, board, or commission if strict compliance with such requirements would in any way prevent, hinder, or delay necessary action in dealing with the emergency.</p>	<p>MaineCare Guidance relating to telehealth and telephone services during COVID-19 emergency period (updated April 16, 2020)</p>	<p>Time-limited state plan amendment granted to the CHIP program on April 4, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on April 24, 2020; September 22, 2020; and March 18, 2021.</p> <p>Private insurance: Bureau of Insurance Bulletin 442 reminding carriers of the telehealth and in-person parity requirement. Bureau of Insurance Supplemental Order authorizing the provision of remote health care services via telephonic communication and requiring parity in reimbursement for services provided in-person and via telephone.</p>
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<p>MD</p>	<p>Governor Hogan renewed the COVID-19 state of emergency until July 1, 2021 and announced that it would not be renewed further.</p> <p>Governor's Executive Order signed March 9, 2021 extending until June 30, 2021 all professional licenses that would otherwise expire prior to June 30, 2021 during the state of emergency and catastrophic health emergency and that would be renewable during the state of emergency and catastrophic health emergency in accordance with applicable law and regulation. This order supersedes the Governor's previous Executive Order issued on March 12, 2020, which is no longer in effect.</p> <p>Governor's Executive Order signed March 9, 2021, authorizing any person who holds a valid, unexpired license as a health care practitioner issued by another state may, at a Maryland health care facility, engage in activities authorized under their license without first obtaining a Maryland license from the applicable Maryland board under certain circumstances; requiring the health occupations boards to expedite all applications for temporary licenses from practitioners licensed in other states; authorizing any inactive practitioner, at a Maryland health care facility, to engage in activities that would have been authorized under their license without reinstating the inactive license under certain circumstances and requiring licensing boards to expedite requests to reinstate inactive licenses; authorizing a health care practitioner to engage in activities not authorized by their license at a health care facility under certain circumstances. The order supersedes the Governor's previous Executive Order issued on March 16, 2020, which is no longer in effect.</p>	<p>Enacted legislation COVID-19 Public Health Emergency Act of 2020, which, among other things, establishes or waives telehealth protocols.</p> <p>Executive Order 20-04-01-01 authorizing the Secretary of Health to authorize a health care practitioner to deliver health care services via telehealth and audio-only calls or conversations provided the services delivered are clinically appropriate and within the scope of practice of the health care provider and that the health care provider is licensed to provide the services in the state, complies with applicable standards of practice, documents the use of telehealth as a service delivery using the same documentation standards as an in-person visit, and, for audio-only calls, can interact with the patient at the time the service is delivered.</p> <p>Department of Health memorandum #1: temporary expansion of Medicaid Regulations to Permit Delivery of Telehealth Services to the Home.</p> <p>Department of Health memorandum #6: temporary expansion of remote patient monitoring services to include all health conditions capable of RPM monitoring, not just those named in regulation.</p> <p>Department of Health memorandum #4a: authorizing telephone services during State of Emergency</p> <p>Updated Maryland Dept. of Health FAQs on telehealth including links to Medicare, Medicaid, and private insurer's policies.</p> <p>Medicaid FAQs on telehealth includes the following:</p>	<p>Private Insurance: Insurance bulletin 20-36 extending the emergency regulations activated in Bulletin 20-05 (encourages the use of telehealth services) and some activated in Bulletin 20-06 until the emergency declaration is over, or a subsequent Bulletin is issued deactivating the pertinent regulations.</p> <p>Medicaid: On March 26, the federal government granted an 1135 waiver, with subsequent waivers issued on July 31, 2020, and August 31, 2020.</p> <p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on April 17, 2020, and May 4, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based (HCBS) waivers granted on April 23 and 24, 2020; September 2, 2020; October 1, 2020; December 7, 2020; and January 7 and 13, 2021.</p>
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	<p>Board statement on the use of telehealth during the COVID-19 pandemic</p>	<p>Are all services available by telehealth audio only? A provider can perform clinical evaluations, refer a patient to health care services, provide treatment, and issue most prescriptions. However, some services are not eligible for audio- or telephone-only telehealth including but not limited to physical therapy services, Early and Periodic Screening, Diagnostic and Treatment (EPSDT) occupational therapy services, and EPSDT speech-language pathology services.</p>	
MA	<p>On May 17, Governor Baker announced that the COVID-19 state of emergency will be ended on June 15. He issued a subsequent Executive Order, effective, May 29, which ends all previously issued COVID-19 Executive Orders and ends all rules, restrictions, and limitations issued by any state agency authorized by prior COVID-19 Orders to issue rules and polices implementing the provisions of the COVID-19 Orders. He also issued a modified Public Health Emergency to allow for the continuation of measures to facilitate COVID-19 testing and vaccination, to mandate special measures to protect higher risk populations, or to effectuate continued surveillance of COVID-19 in the state.</p> <p>Governor's Executive Order Extending the Registration of Certain Health Care Professionals, Executive Order 41 rescinded this Executive Order as of July 10. All licenses with a license that is scheduled to expire between March 10 and July 10 now expire on October 1. A license scheduled to expire on or after July 11 must be renewed on or before its original expiration date.</p> <p>Office of Human Services Order authorizing the issuance of a Massachusetts license to a</p>	<p>Governor signed into law legislation that makes permanent the telehealth expansion established in his Emergency Order issued on March 15, 2020. The Emergency Order has been rescinded.</p> <p>Division of Insurance Bulletin 2021-04 reminds private commercial insurance carriers of the guidelines to deliver telehealth services stated in the rescinded Emergency Order and states it will provide further guidance on acceptable provisions for telehealth services at a future date.</p> <p>MassHealth issued a series of All Provider Bulletins to implement the Governor's Emergency Order on telehealth: Bulletin 314 supersedes Bulletins 289, 291, 294, 298, and 303 and continues the coverage of clinically appropriate, medically necessary Mass Health covered telehealth services to Mass Health members and the associated billing policy until 90 beyond the final date of the state Public Health Emergency. Managed Care Entity Bulletin 60 supersedes previous MCE Bulletins on telehealth and requires managed care plans to maintain a telehealth policy consistent with that stated in All Provider Bulletin 314, including</p>	<p>Private insurance: State-regulated plans must offer testing and treatment without cost sharing; relax prior-authorization and out of network requirements; and promote telehealth. Federal law requires testing without cost sharing but does not waive cost sharing for coronavirus treatment. State-regulated plans are expected to expedite provider credentialing and suspend prior authorization requirements that delay patients moving out of acute care.</p> <p>Medicaid: On March 26, the federal government granted an 1135 waiver and a subsequent waiver on May 8. Another 1135 waiver with additional flexibilities granted in June and another in October and another in December.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers approved on April 29, 2020; June 17, 2020; and March 10 and 25, 2021.</p> <p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on July 15 and 20, 2020; August 18, 2020; October 27, 2020; December 10, 2020; January 19, 2021; February 12, 2021; March 25, 2021; April 8 and 27, 2021; and June 2, 2021.</p>

	<p>health care provider who is licensed in another state and authorizing the provision of services in-person or over state lines into Massachusetts and requiring the automatic renewal or reactivation, upon the licensee's request, of a Massachusetts health care provider license that was held by the licensee within the last 10 years and was not revoked, suspended, or surrendered. Issued April 3.</p>	<p>but not limited to extending benefits until 90 days beyond the final date of the Governor's declared state of emergency.</p> <p>MassHealth also released a series of provider-specific bulletins extending previously stated COVID-19 related flexibilities, including telehealth flexibilities, that are in effect until 90 days beyond the final date of the state Public Health Emergency. These include flexibilities for MassHealth members receiving therapist services (Therapist Bulletin 16), therapist services in a rehabilitation center (Rehabilitation Center Bulletin 13), durable medical equipment (DME Bulletin 26), or home health services (Home Health Agency Bulletins 63 and 64) on a fee-for-service basis.</p> <p>COVID-19 Early Intervention Telehealth Guidelines (scroll down until near the bottom of the page)</p> <p>Updated Guidance for HCBS Waiver Providers Delivering Telehealth/Remote Services During the COVID-19 Public Health Emergency (updated May, 2021).</p>	<p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on December 18, 2020.</p> <p>Massachusetts was granted a COVID-related 1115 demonstration waiver, allowing the state to provide geographically targeted services; vary the amount, duration, and scope of services provided to different groups; provide LTSS in alternative settings; make retainer payments for habilitation and personal care; and limit telehealth and mobile testing networks.</p> <p>MassHealth Early Intervention Bulletin announcing temporary extension of coverage for Early Intervention services to children who turn three between March 15 and August 31 and who meet other criteria and who are enrolled in MassHealth fee-for-service, Primary Care Clinician plan, or a Primary Care ACO. Coverage for Early Intervention services has also been temporarily extended for certain children enrolled in an MCO or Accountable Care Partnership Plan.</p>
MI	<p>LARA Bureau of Professional Licensing Clarification for Licensees (revised November 16, 2020) regarding licensing and telehealth changes no longer in effect as a result of the rescission of the COVID-19 state of emergency. Additional clarification on exemptions from Michigan licensure (revised November 10, 2020).</p> <p>All previously issued COVID-19 related Executive Orders are no longer in effect.</p>	<p>Department of Health and Human Services Bulletin 20-30 stating that Medicaid providers may use telephonic or simultaneous audio and video technology for functions that require in-person communication provided the patient or patient's legal representative provides verbal or written consent. This temporary policy does not apply to personal care services or other services that support ADLs.</p> <p>Governor Whitmer's administration expanded telemedicine by allowing Medicaid beneficiaries</p>	<p>Medicaid: 1135 waiver granted in April with a subsequent waiver in September to facilitate telehealth when neither the patient nor practitioner is physically onsite at the clinic.</p> <p>Time-limited state plan amendments responding to COVID-19 approved on June 5, 2020; September 30, 2020; October 12, 2020; December 14, 2020; March 19, 2021; and May 7 and 12, 2021.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS)</p>

<p>Statement from the Michigan OT licensing board regarding continuing education requirements. Previously issued Executive Orders that granted the authority to waive CE requirements are no longer in effect as of October 2, 2020. Licensees renewing after 11:59 pm on October 1, 2020, must have completed all required CE or have requested a waiver as permitted under law.</p> <p>Governor's Executive Directive 2020-8 requires autonomous agency heads to consider violations of law including violations of relevant COVID-19 executive orders and epidemic orders as evidence of a lack of suitability for licensing, to the extent permitted by law; requires state department directors and autonomous agency heads to consider noncompliance with a COVID-19 executive order or epidemic order to be presumptive evidence of a “public health hazard” or “imminent and substantial hazard to the public health, safety, and welfare requires summary suspension of a license; and requires that if a state department or autonomous agency which becomes aware of a credible complaint of a violation of law by a licensee, including a possible violation of a COVID-19 executive order or epidemic order, the director or agency head must refer the complaint to all relevant licensing authorities, insofar as otherwise consistent with law.</p>	<p>to receive services in their home. Additionally, insurance plans announced they will cover and encourage virtual care and telemedicine, as well as waive cost sharing for COVID-19 testing.</p> <p>Department of Health and Human Services Bulletin 20-09 allowing telemedicine services reimbursable on the current Medicaid fee schedule to be received in a client’s home. This bulletin is no longer in effect due to expiration of the declared COVID-19 State of Emergency.</p> <p>Department of Health and Human Services Bulletin 20-13 expanding telehealth services eligible for reimbursement to include OT services. This bulletin is no longer in effect due to expiration of the declared COVID-19 State of Emergency.</p> <p>Letter from Dept. of Health and Human Services clarifying the provisions of Executive Order 2020-17 (Temporary restrictions on non-essential medical and dental procedures) encourages clinicians to maximize the use of telehealth when re-opening a health care facility. Executive Order 2020-17 is no longer in effect.</p> <p>Executive Order 2020-138 authorizes and encourages all health care providers to use telehealth services when medically appropriate and upon obtaining patient consent. This Executive Order is no longer in effect.</p> <p>Governor Whitmer signed several bills into law that codify pieces of Executive Order 2020-86. HNB 5412 prohibits an insurer from requiring face-to-face contact between a licensed health care provider and patient for services appropriately provided via telemedicine, as determined by the insurer. HNB 5413 prohibits the same requirement from a group or nongroup</p>	<p>waivers granted on June 19, 2020; March 10, 11, and 29, 2021; and April 12, 2021.</p> <p>Michigan amended an 1115 demonstration waiver to respond to the emergency, allowing the state to expedite eligibility for LTSS; deliver LTSS in alternate settings; increase rates for HCBS; and other changes.</p>
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		<p>health care corporation certificate issued or renewed after December 31, 2012. HNB 5415 requires coverage for remote patient monitoring through the state medical assistance program and Healthy Michigan. HNB 5416 requires telemedicine services to be covered under the state medical assistance program and Healthy Michigan if the originating site is an in-home or in-school setting, in addition to another originating site allowed in the Medicaid provider manual or any established site considered appropriate by the provider.</p>	
MN	<p>Governor's Executive Order 20-23 authorizes all health-related licensing boards to defer CE requirements until the first reporting cycle following termination of the emergency as well as to accept and process applications for licensure without submission of a full set of fingerprints, provided all information as part of a criminal background check process is submitted. A subsequent Executive Order rescinded this Executive Order, effective May 27, 2021.</p> <p>Minnesota Board of Occupational Therapy Practice notice: Attention Full License Applicants! April 1, 2020 New information is available about the current state of the Criminal Background Check process. Please thoroughly review the information sent to the email address the board has on file.</p> <p>HF 4556, signed into law by the Governor in April (see section 13), gives the Commissioner of Health temporary emergency authority, beginning on the date the Governor declared a state of emergency, temporarily to delay, waive, or modify state laws related to licensing of health care professions including occupational therapy, and temporarily to grant</p>	<p>Memo to Health Insurance Carriers from the Department of Commerce and Department of Health urged health carriers to take necessary steps to expand the availability of telemedicine services for their enrollees and eliminate barriers to its use.</p> <p>SF 4334 signed into law provides coverage for telemedicine services and includes a patient's residence as an originating site.</p>	<p>Private Insurance: BCBS of MN has revised their "televideo consultations/telehealth/telemedicine services" and "telephone calls" reimbursement policies for Commercial and Medicare lines of business to add occupational therapy services.</p> <p>Medicaid: On March 27, the federal government granted an 1135 waiver and a subsequent waiver on May 8. Another 1135 waiver was granted in November and another in January 2021.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on March 27, 2020; April 30, 2020; May 8 and 14, 2020; June 11, 2020; July 6 and 17, 2020; August 12, 2020; October 7 and 29, 2020; December 15, 2020; January 7, 2021; and March 26 and 29, 2021.</p> <p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on April 6 and 20, 2020; May 4, 2020; June 25, 2020; July 15, 2020; September 30, 2020; December 8, 2020; March 4, 2021; and May 14, 2021.</p>

	variances on an individual or blanket basis to rules within the Commissioner’s jurisdiction that do not affect the health or safety of persons in a licensed program.		
MS	<p>Governor Reeves signed HB 1263 into law on March 25, 2021. The new law requires occupational licensing boards to issue a license to an applicant who establishes residence in Mississippi if the applicant holds a current license in good standing from another state, has been licensed by the other state for at least one year, and other conditions are met.</p> <p>From the Mississippi OT Association:</p> <ol style="list-style-type: none"> Using FaceTime for supervisory visits will be allowed during this time; The renewal period will not be extended at this time; For allowable CE sources, live webinars are not face-to-face. The face-to-face is 6 hours or 30%, Internet is 7 hours, the other 7 can be non live which is where the webinars come in; Any licensed OT in Mississippi can perform telehealth. Payment for those services is dependent on each third-party payor’s individual policies. <p>Letter from the MS Department of Health to MSOTA answering questions about CE requirements, renewals, and telehealth</p>	<p>The Mississippi Division of Medicaid will expand its coverage of telehealth services.</p> <p>Medicaid adopted temporary rule expanding coverage of remote patient monitoring services for specific chronic conditions during the declared public health emergency. A permanent rule went into effect on January 1, 2021.</p> <p>Insurance bulletin directing insurers to take action to increase the use of telemedicine; suspending limits on audio-only consultations; suspending in-network requirements; and covering telehealth on the same basis as in-person services. A subsequent bulletin extended these provisions as long as the Governor’s Emergency Proclamation from March 14 remains in effect.</p> <p>Mississippi Medicaid emergency telehealth policy that includes OTs as an approved provider type, who may render services to established patients.</p> <p>Updated finalized Medicaid rule on telehealth services, effective August 1, 2020. The updated rule clarifies provisions related to telepresenters, requires providers to provide the same info during a telehealth visit as would be provided if the visit was performed in person, requiring telehealth equipment to be HIPAA compliant, clarifying that a telehealth visit is not covered by Medicaid if the same service provided via telehealth is not covered in-person, and allowing additional coverage of telehealth services and additional telehealth flexibilities during a state of emergency declared by the Governor or the</p>	<p>Medicaid: On March 23, the federal government granted an 1135 waiver and a subsequent waiver with additional flexibilities on June 1.</p> <p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on May 7, 2020; June 30, 2020; July 15, 2020; and September 15, 2020.</p> <p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on July 22, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on April 7 and 16, 2020; July 6, 2020; August 7, 2020; September 30, 2020; and January 19, 2021.</p>

		<p>U.S. President. This rule does not codify the temporary inclusion of OTs as a telehealth provider to established patients.</p> <p>The Workers' Compensation Commission announced a temporary expansion of telemedicine services to include occupational therapists. This temporary expansion was extended on December 24, 2020. A permanent rule has also been proposed. The Commission proposed a further permanent expansion of telemedicine services by codifying billing codes to be used, requiring telemedicine providers to use an audio and video telecommunications system that permits real-time communication between the distant site and the patient, specifying authorized originating sites, requiring telemedicine services to include specific components, and the requiring that reimbursement for telemedicine services to be the same as if the services were provided in person. The permanent rule has been adopted and went into effect on April 26, 2021.</p> <p>The Dept. of Health adopted a rule requiring health provider entities/organizations offering telehealth services in the state to register with the Department of Health. Individual practitioners and organizations providing medical/health services via telehealth must ensure that the standard of care is maintained for a telehealth encounter consistent with the expectation of in-person care. Rule went into effect on May 19, 2021.</p>	
MO	<p>Governor's Executive Order 20-04 authorizes the Division of Professional Regulation and its Boards to temporarily waive or suspend the operation of any statutory requirement or administrative rule under their purview, upon approval of the Office of the Governor, in order to best serve public health and safety during</p>	<p>The Missouri HealthNet Division stated that they will allow any licensed health care provider, enrolled as a MO HealthNet provider, to provide telehealth services if the services are within the scope of practice for which the provider is licensed. They also issued guidance related to</p>	<p>Medicaid: The Department of Social Services has issued an order allowing any licensed healthcare provider in the United States to provide telemedicine or telehealth services.</p>

	<p>the period of the emergency and authorizes any executive agency, board, commission, or department to submit a written request to the Office of the Governor to temporarily waive any statutory requirement or administrative rule under their purview in order to best serve public health and safety during the period of the emergency. Such suspensions shall be effective upon written approval by the Office of the Governor. No law or rule suspensions impacting occupational therapy practice have been adopted. Executive Order 21-07 extended the above authorization until August 31, 2021.</p>	<p>billing for OT, PT, and speech provided via telehealth.</p> <p>Insurance Bulletin 20-07 requiring health carriers in the state to provide coverage for services provided via telehealth as if the service was provided in person and waiving the requirement that out-of-state providers obtain a license in the state to provide services via telehealth to a patient/client in the state. Governor's Executive Order 21-07 extends flexibilities in telemedicine until August 31, 2021.</p> <p>Missouri Consolidated Health Care Plan issued a series of emergency rules that add 100% coverage of virtual visits offered through the vendor's telehealth tool for the State Membership 750 Plan and 1250 Plan, for the Public Entity 750 Plan and 1250 Plan, and for State Membership Health Savings Accounts and Public Entity Health Savings Accounts. The rules also increase the out-of-pocket maximum for both Health Savings Accounts to \$8550. The emergency rules are effective until June 29, 2021. Permanent rules have been adopted and are effective May 30, 2021 (see pages 1907-1909 and 1910-1912 of the Missouri Register).</p>	<p>Section 1135 disaster response waivers granted on March 25, 2020; May 14, 2020; and March 16, 2021.</p> <p>Time-limited Medicaid state plan amendments responding to COVID-19 approved on May 4, 2020; June 17, 2020; September 1, 2020; November 10, 2020; March 16, 2021; and April 20, 2021.</p> <p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on June 16, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on May 22, 2020; September 3, 2020; October 29, 2020; and January 19, 2021.</p>
MT	<p>Application information for interstate licensure registration</p> <p>COVID-19 Information for Professional and Occupational Licensees, including re-opening information; emergency health care registration; temporary permits; options for individuals with lapsed, expired, or inactive licenses; and guidance on providing and billing for telehealth services.</p> <p>Proposed rule amendment that would authorize registered out-of-state volunteer professionals to accept remuneration for services provided</p>	<p>Enacted legislation, HB 43, expands access to telehealth services originally extended because of the COVID-19 pandemic.</p> <p>All Montana Medicaid covered services delivered via telemedicine/telehealth are reimbursable so long as such services are (a) medically necessary and clinically appropriate for delivery via telemedicine/telehealth, (b) comport with the guidelines set forth in the applicable Montana Medicaid provider manual, and (c) are not a service specifically required to be face-to-face as defined in the provider manual.</p>	<p>Private Insurance: BCBS of Montana, Pacific Source Health Plans, Montana Health CO-OP, and Allegiance Life & Health Insurance Company have voluntarily expanded their telehealth services.</p> <p>Medicaid: On March 30, the federal government granted an 1135 waiver. A subsequent waiver with additional flexibilities granted in June; and another waiver, regarding timeframes for functional needs assessments and reassessments, in November.</p>

	<p>during a state of emergency or disaster and exempting such volunteer professionals from Montana CE requirements. Rule has been adopted and went into effect on July 25.</p> <p>OT Licensing Board FAQs on continuing education, application for licensure, and telehealth (updated March 27, 2020). Note that the Board decided at its May 13 meeting that telehealth is a permissible method of delivering OT services.</p>	<p>Directive from the Governor to commercial health insurers, health plan sponsors, and health care providers 1) expanding the use of telehealth technology to include secure portal messaging, secure instant messaging, telephone conversations, or audio-visual conversations provided health care practitioners ensure that patients have the same rights to confidentiality and security as provided in regular office visits and consent and patient protocols are consistent with those for in-person visits; 2) waiving the requirement that an existing patient-provider relationship be established to provide telehealth services; 3) requiring parity between telemedicine and in-person services; and 4) authorizing any health care professionals, including OTs, licensed in Montana to provide services via telehealth.</p> <p>At its public meeting on May 13, the OT Practice Board voted to adopt advice provided by the Department of Labor and Industry Business Standards Division that telehealth is an alternative delivery method within the state OT scope of practice. This allows licensees to provide services via telehealth once the Governor's directive expires provided the licensee has determined, in their professional judgment, that it is safe to provide OT services to a client via telehealth. See Board statement on telehealth here.</p> <p>Governor's directive expanding telehealth AOTA staff have confirmed that under this order licensed OTs and OTAs are able to provide services via telehealth in Montana while the directive is in effect.</p>	<p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waiver granted on April 30, 2020; June 22, 2020; December 3, 2020; March 10 and 11, 2021; and May 25, 2021.</p> <p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on May 8, 2020; September 3, 2020; and March 16, 2021; and March 31, 2021.</p> <p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on July 8, 2020.</p>
NE	<p>Governor's Executive Order 20-37 temporarily suspends the provisions of the Uniform Credentialing Act and related regulations</p>	<p>General Statewide Telehealth – COVID-19 FAQs (updated April 1, 2020)</p>	<p>Medicaid: Nebraska Medicaid is temporarily modifying certain policies and expanding</p>

	<p>requiring that applicants for a credential successfully complete an exam prior to obtaining the credential to permit persons to obtain a provisional credential which remains active pending exam results or until 30 days after the lifting of the state of emergency, whichever is sooner, provided the applicant has completed all other requirements for licensure and registers to take the exam, but is unable to do so due to the lack of approved online testing or limited availability of in-person testing slots; temporarily defers provisions of the Uniform Credentialing Act and related regulations requiring credential holders or students seeking credentials complete courses or training or take exams in person until 30 days after the lifting of the state of emergency to permit education, training, and testing to continue using electronic or remote technology where possible; and temporarily defers the provisions of the Uniform Credentialing Act and related regulations requiring persons seeking credentials complete work or training with an onsite supervisor with face-to-face or direct supervision or under any type of practice agreement until 30 days after the lifting of the state of emergency to permit supervisors to provide remote supervision if the supervisor determines it appropriate. This order remains in effect until 30 days after the lifting of the state of emergency.</p> <p>FAQs Related to Executive Orders 20-10 and 20-37 and Credentialing (updated February 8, 2021)</p> <p>FAQs on Continuing Competency Waiver</p> <p>Provisional Licensure Information</p>	<p>Enacted legislation, LB 400, prohibits insurers from excluding coverage solely because a service is delivered through telehealth, including services originating from any location where the patient is located.</p> <p>Department of Health and Human Services released FAQs on Medicaid and Long term care services during the COVID-19 emergency, including FAQs clarifying providing occupational therapy services.</p> <p>Department of Insurance Notice that health care providers are not required to obtain a patient's signature on a written agreement prior to providing telehealth services for the duration of the Governor's declared State of Emergency.</p> <p>Medicaid Provider Bulletin 20-09 regarding temporary expansion of billable telehealth services to include PT, OT, and speech therapy services provided via telehealth.</p> <p>Nebraska Department of Insurance survey responses from private payers on telehealth policies</p> <p>Statewide Medicaid Telehealth COVID-19 FAQs: OT and PT services are allowed to be delivered via telehealth, which must include audio and visual components. Procedures including evaluation and re-evaluation may be done via telehealth.</p>	<p>coverage to include additional forms of clinical services.</p> <p>On April 2, the federal government granted an 1135 waiver. A subsequent waiver was granted on May 8.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on April 20, 2020; September 14, 2020; November 20, 2020; December 17, 2020; March 24, 2021; and April 15, 2021.</p> <p>Time-limited state plan amendments responding to COVID-19 approved on April 24, 2020; June 18, 2020; and November 2, 2020.</p> <p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on May 1, 2020.</p>
NV	<p>At its public meeting on April 4, 2020, the Board voted on two emergency actions: 1) to</p>	<p>OT Board announcement that telehealth practice is allowable by a licensed practitioner.</p>	<p>Medicaid: NV Medicaid has released guidelines on telehealth billing</p>

<p>implement a temporary license by endorsement process so out-of-state licensed OTs and OTAs can provide services in Nevada for up to 6 months without taking the Board’s jurisprudence exam; initial licensee fee would be waived if the temporary license expires after 6 months; and 2) to defer license renewal fees for 60 days for licenses renewed after June 30, 2020 through September 30, 2020 and until September 30, 2020 for licenses renewed prior to June 30, 2020. Deferral of renewal fees expired on September 30. See here for all Board-related COVID-19 updates.</p> <p>Governor’s Declaration of Emergency Directive 009 establishing that all licenses and permits issued by the State of Nevada that expire or are set to expire during the period the Declaration of Emergency is in effect shall be extended for a period of 90 days from the current expiration date, or 90 days from the date the state of emergency is terminated, whichever is later, if reduced government operations due to the state of emergency makes timely renewal of the license or permit impracticable or impossible. A subsequent Directive terminated this Directive on June 30, 2020. All licenses and permits that expired between March 12, 2020 and June 30, 2020 because reduced government operations due to the state of emergency made timely renewal of the license or permit impracticable or impossible, shall be deemed valid and expire on September 28, 2020.</p> <p>Emergency Directive 011 requires licensing boards regulating providers of medical services to temporarily waive certain licensing requirements to allow the practice of unskilled medical professionals during the pendency of COVID-19 crisis. The waiver and exemption</p>	<p>At its January 16, 2021, public meeting, the Board of Occupational Therapy voted to propose a new regulation on telehealth requirements for practice that apply to OTs and OTAs.</p> <p>Department of Health and Human Services released an update to their telehealth services amid COVID-19 allowing for physical therapy, occupational therapy, and speech therapy via telehealth. Subsequent memos were published for home health agencies and for Certified Community Behavioral Health Centers.</p> <p>Department of Health and Human Services Telehealth Resource Guide (posted March 18)</p> <p>Medicaid FAQs on COVID-19: QUESTION: Is telehealth a covered service for COVID-19? ANSWER: Yes, telehealth is currently an allowable Medicaid service. Providers must diagnose and treat within the scope of practice. New developments using this service delivery model are posted at dhcfp.nv.gov/COVID19 under the Provider links. More information about telehealth coverage is available in the Medicaid Services Manual (MSM) Chapter 3400.</p> <p>QUESTION: Is a telehealth visit covered if the patient participates from their home? ANSWER: Yes, the distant site (where the provider is located) is covered even when the patient participates from home. When the patient participates from home, there is no reimbursement for a facility fee.</p>	<p>Section 1135 disaster response waivers approved on April 7, 2020; December 18, 2020; and March 25, 2021.</p> <p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on June 18, 2020, and March 25, 2021.</p> <p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on June 4, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on April 14, 2020; August 19, 2020; and January 19, 2021.</p> <p>Private Insurance: Emergency regulation from the Commissioner of Insurance that 1) prohibits cost sharing or medical management to restrict access to screening, testing, or a vaccine for COVID-19; 2) requires health insurers to provide to each insured individual and provider of health care who participates in the insurer’s network information on available benefits, options for medical advice and treatment through telehealth, and preventative measures related to COVID-19; and 3) if the insurer issues a policy covering prescription drugs and uses a formulary, requires the insurer to cover a drug not on the formulary if no other prescription drug that is effective in treating the patient and that is on the formulary is available and the drug is not available because of supply chain disruption. This emergency rule has been adopted and expires when the declared state of emergency expires.</p>
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	<p>applies to qualified providers of medical services who currently hold a valid license in good standing in another state, whose licenses currently stand suspended for licensing fee delinquencies or failure to complete medical education requirements, and licensees who have retired in another state with their license in good standing. The Chief Medical Officer may approve the waiver and exemption of professional licensing requirements for any provider who has received training in another country but who is not licensed in the U.S., subject to credential verification. The Directive also allows all medical services providers in Nevada to practice outside their scope of practice within the limits of their competency to the extent necessary to augment and bolster the state's health care system during the COVID-19 crisis, waives certain fees, and prohibits the suspension of licensees for administrative reasons, including but not limited to continuing education requirements while the Directive is in effect and for 60 days thereafter.</p>		
NH	<p>Governor Sununu ended the COVID-19 state of emergency on June 11, 2021.</p> <p>Office of Professional Licensure and Certification (OPLC) COVID-19 Frequently Asked Questions regarding completion of continuing education requirements.</p> <p>OPLC information on applying for an emergency license</p> <p>Governor's Emergency Order 29 authorizing state boards, agencies, commissions, etc. to submit recommendations to the Governor describing which regulatory and statutory deadlines should be adjusted in response to the State of Emergency. Exhibit H lists modifications applicable to OPLC licensed</p>	<p>Insurance Department Bulletin 20-24-AB expanding coverage of telemedicine services to services provided by all provider types when covered by the health benefit policy and when clinically appropriate and prohibiting cost-sharing for a COVID-19 test or health care visit resulting in a test.</p> <p>Enacted HB 1623 makes the previous emergency orders allowing and reimbursing for telehealth permanent.</p>	<p>Medicaid: On March 23, the federal government granted an 1135 waiver; a subsequent waiver granting additional flexibilities was granted on May 26 and another on June 26, 2020.</p> <p>New Hampshire was granted a COVID-related 1115 demonstration waiver, allowing for retainer payments for personal care services.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on May 12, 2020, and January 13, 2021.</p> <p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on May 22,</p>

	<p>professionals, including waiver of all CE requirements for licenses scheduled to be renewed between March 13 and December 31, 2020, allowing CE for licensed professionals whose licenses do not expire between March 13 and December 31, 2020 to be obtained through remote instruction provided the CE otherwise satisfies the regular CE requirement.</p> <p>Emergency Order #46 authorizing the OPLC, upon request, to reactivate the license of any medical provider previously licensed in the state in the last 3 years whose license is no longer active, subject to certain conditions. The OPLC is also authorized to issue an emergency license to any medical provider previously licensed in another jurisdiction within the last 3 years whose license is no longer active, subject to certain conditions. According to OPLC, any health care professional who is not licensed in New Hampshire and has a current license in good standing in another jurisdiction is also eligible for an emergency license.</p>		<p>2020; June 2, 2020; July 15, 2020; and April 8, 2021.</p> <p>Emergency Order #30 requiring all insurance carriers regulated by the state, all health benefit plans, and all MCOs covering New Hampshire residents to consider all medically necessary, covered Alternative Care Sites (ACS) or services provided to transferred or diverted patients as in-network, requiring reimbursement at the in-network rate, prohibiting balance billing by out-of-network providers who are reimbursed at the in-network rate, and requiring acute care services provided in an ACS to be coded and reimbursed as acute care regardless of the setting.</p>
NJ	<p>Division of Consumer Affairs announcement of expedited licensure reciprocity for health care professionals, including OTs. Effective June 4, 2021, the Division will no longer accept new applications for Temporary Emergency Reciprocity Licenses for out-of-state licensees. Occupational therapy licenses granted under this authority will expire on June 30, 2021.</p> <p>Administrative Order and Notice of Rule Waiver from the Dept. of Consumer Affairs: Waives the supervision rule that requires face-to-face close, routine, or general supervision for OTAs who have practiced full time for more than 1 year. Supervision may instead be provided via telephonic or other two-way, real-time communication methods with a voice</p>	<p>Governor Murphy signed legislation (A5820/S3866) enabling the end of the COVID-19 Public Health Emergency and Executive Order 244 which ended the COVID-19 Public Health Emergency. Under the legislation the majority of executive orders issued will expire 30 days from June 4, 2021.</p> <p>Governor Murphy signed legislation (A3680 and A3682) to expand access to telehealth services.</p> <p>Insurance Bulletin 20-07: Use of Telemedicine and Telehealth to Respond to the COVID-19 Pandemic</p> <p>Medicaid Newsletter: Temporary Telehealth Guidelines, including authorizing licensing</p>	<p>Medicaid: Section 1135 disaster response waivers approved on March 23, 2020, and June 12, 2020.</p> <p>Time-limited Medicaid state plan amendment to respond to COVID-19 includes telehealth changes: Medicaid will reimburse for any service provided via telehealth and associated telecommunication at the same rate that would be paid had the service been provided in-person. No specific prior authorization is required based on telehealth modality. Documentation requirements and licensure standards remain unchanged.</p>

	<p>component. Waiver expires when the state of emergency or public health emergency declared by the Governor's Executive Order ends, whichever is later.</p> <p>Governor's Executive Order 112 authorizing the Dept. of Consumer Affairs to reactivate for the duration of the state of emergency or public health emergency, whichever is longer, the license of any health care professional previously licensed to practice in the state who retired from active practice within the last 5 years and who applies to DCA and who is approved by the appropriate licensing board and waiving certain licensing laws for such applicants. (issued April 1) AB5820/SB3866 keeps this executive order in effect until January 1, 2022.</p> <p>Governor's Executive Order 127 extending the expiration date of any emergency rule scheduled to expire during the public health emergency or within 90 days thereafter to 90 days after the last day of the public health emergency if the deadline would otherwise occur sooner. Such a deadline may be extended by an additional 30 days with written approval of the Governor upon request of the appropriate department or agency. (issued April 14) AB5820/SB3866 keeps this executive order in effect until January 1, 2022.</p>	<p>boards to expedite licensure of out-of-state licensed health care providers (published March 21).</p> <p>Temporary rule adopted by the Department of Education that allows services defined as "related services" (which includes OT services), to be provided to a student with a disability via telehealth during the declared State of Emergency</p> <p>Department of Consumer Affairs telehealth FAQs (updated October 30, 2020)</p> <p>Department of Consumer Affairs Notice of Rule Waiver/Suspension of specific telehealth rules as a result of Executive Order 103 (issued March 9), which authorizes the head of any state agency with authority to promulgate rules to waive, suspend, or modify any existing rule whose enforcement would be detrimental to the public welfare during the emergency.</p>	<p>Time-limited CHIP state plan amendment to respond to COVID-19 granted on July 8, 2020.</p>
NM	<p>Regulation and Licensing Department Boards and Commissions Procedures During COVID-19</p> <p>Governor's Executive Order 2020-004 authorizing credentialing of out-of-state professionals by the Department of Health and the Department of Homeland Security, in accordance with state law, who can render aid and necessary services during the state of</p>	<p>State Medicaid Department and the Superintendent of Insurance issued requirements for telehealth.</p> <p>The Board of Examiners for Occupational Therapy issued guidance for occupational therapy practitioners to utilize telehealth.</p> <p>Superintendent of Insurance Bulletin 2020-005: Utilization and Reimbursement of Telemedicine</p>	<p>Private insurance: State-regulated plans must waive cost sharing for testing and treatment of coronavirus, pneumonia, and influenza. Federal law requires testing without cost sharing but does not waive cost sharing for coronavirus treatment.</p> <p>BCBS of NM allows for telehealth services without copays, deductibles, or coinsurance on in-network covered telemedicine services.</p>

	<p>emergency. The state of emergency has been renewed until June 25, 2021.</p>	<p>during the COVID-19 public health emergency. Bulletin 2021-003 clarified many provisions of Bulletin 2020-005, particularly regarding coverage of behavioral health services provided via telehealth.</p>	<p>Medicaid: Section 1135 disaster response waivers approved on March 23, 2020, and July 1, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on March 27, 2020; May 5, 2020; August 31, 2020; October 26, 2020; and January 19, 2021.</p> <p>Time-limited Medicaid state plan amendments in response to COVID-19 granted on April 24, 2020; May 7, 13, and 22, 2020; June 16, 2020; October 30, 2020; November 4 and 5, 2020; December 17, 2020; and March 19, 2021.</p> <p>Adopted emergency rule regarding cost-sharing by health care insurer or managed health care plan testing and delivery of health care services for COVID-19. Permanent rule went into effect on July 1.</p>
NY	<p>Office of the Professions COVID-19 webpage including continuing education and examination information, information about renewal of limited and provisional permits, telepractice guidance, and links to COVID-19 FAQs, Governor’s Executive Orders, and other state COVID-19 webpages.</p> <p>Executive Order 202.10 authorizing any health care facility to allow students, in programs to become licensed in New York State to practice as a healthcare professional, to volunteer at the healthcare facility for educational credit as if the student had secured a placement under a clinical affiliation agreement, without entering into any such clinical affiliation agreement. This order has been extended until July 5, 2021.</p>	<p>New York State Office of the Professions COVID-19 FAQs for occupational therapy, including notice that OTs and OTAs may provide services via telehealth, OTAs may only do so during the State of Emergency. Additional telepractice guidance may be found here as well as a Telepractice Memo from the NYSED.</p> <p>Emergency regulations adopted by the Department of Financial Services prohibiting 1) an insurance policy or contract from charging an insured a co-payment, coinsurance, or annual deductible for in-network lab tests to diagnose COVID-19 and visits to diagnose COVID-19 at certain health care facilities, including through telehealth if covered under the policy or contract; and 2) an insurance policy or contract</p>	<p>Private insurance: Insurance circular letter to plans regulated by the state regarding testing; instructing plans to develop robust telehealth programs; directing them to verify that their provider networks are appropriate and offer out-of-network care when they are not; to provide a vaccine without cost sharing when available; and several other measures to promote access to care.</p> <p>Medicaid: Section 1135 disaster response waivers granted on March 26, 2020; June 15, 2020; June 22, 2020; August 4, 2020; October 6, 2020; and March 18, 2021.</p> <p>1915(c) Appendix K waivers allowing flexibilities in the home and community-based services</p>

	<p>Board of Regents announcement of adoption of emergency rules to excuse continuous experience requirements in Regulation 76.2(b) where such continuous experience cannot be completed due to the State of Emergency. Click here for proposal and text on page 17. This temporary rule has been extended until March 12, 2021. Rule has been permanently adopted, effective February 24, 2021.</p>	<p>from doing the same for an in-network service delivered via telehealth when such service would be covered if the service had been delivered in person. Both of these emergency regulations have been extended until July 6, 2021.</p> <p>New York Department of Health put out a comprehensive guidance regarding use of telehealth including telephonic services during the COVID-19 state of emergency—the guidance is intended to provide broad expansion for the ability of all Medicaid providers in all situations to use a wide variety of communication methods.</p> <p>Department of Health Bureau of Early Intervention stated that OTAs can provide telehealth services during the declared state of emergency.</p> <p>Workers’ Compensation Board emergency rule allowing OTs to provide care via telemedicine and to bill for services provided via telemedicine, using two-way audio and visual electronic communication, where medically appropriate. This rule has been extended until July 11, 2021.</p>	<p>(HCBS) waivers granted on April 7 and 21, 2020; July 16, 2020; August 18 and 25, 2020; September 4, 2020; and March 4, 10, 24, 26, and 29, 2021.</p> <p>Time-limited Medicaid state plan amendment to respond to COVID-19 approved on May 12, 2021.</p> <p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on June 8, 2020.</p>
NC	<p>OT Board announcement on continuing education: for the renewal period ending June 30, 2020, all OT practitioners may renew based on the continuing competence activities he or she has completed; renewal deadline has not been extended. Any continuing competence activity, including ethics, that was not completed on the June 30, 2020, renewal will be required for the June 30, 2021, renewal in addition to the continuing competence activity requirements for the 2021 renewal.</p>	<p>NC Medicaid is offering reimbursement for virtual patient communication and telephonic evaluation and management for the following beneficiaries seeking care where they are already an established patient: 1) beneficiaries actively experiencing mild symptoms of COVID-19; 2) beneficiaries who need routine, uncomplicated follow up and are not experiencing symptoms; 3) beneficiaries requiring behavioral health assessment and management.</p>	<p>Medicaid: Certain policy conditions have been modified, and coverage has expanded to include additional forms of clinical services.</p> <p>Press release from NC Medicaid announcing temporary 5% increase in fee-for-service reimbursement rates for occupational therapists and other providers.</p> <p>Section 1135 disaster response waivers approved on March 23, 2020, and August 28, 2020.</p>

	<p>Executive Order 130 authorizes 1) licensing boards to waive or modify enforcement of rules that would impair out-of-state licensees from practicing in the state, retired or inactive licensees from practicing in the state, skilled but unlicensed volunteers from providing care, and students at an appropriately advanced stage of professional study from providing care; and 2) the state OT board to waive the regulations on admission and licensure for the practice of OT. Any actions taken by the OT Board as a result of this Executive Order will be reported. A subsequent Executive Order allowed for out-of-state licensees, retired or inactive licensees, skilled but unlicensed volunteers, and students at an appropriately advanced stage of professional study to administer FDA-authorized COVID-19 vaccinations. Both Executive Orders have been extended until August 8, 2021.</p> <p>Board posted on May 6 that, as a result of Executive Order 130, it voted to 1) allow OT practitioners licensed in other states to provide OT services in NC as long as the practitioner completes the waiver form provided by the Board and is approved, and 2) to allow OT practitioners previously licensed in North Carolina and whose licenses were in good standing, but have been expired for less than 4 years to provide OT services in the state as long as the waiver form is completed and approved.</p>	<p>NC Medicaid temporarily modified its Telemedicine and Telepsychiatry Clinical Coverage Policy to provide guidance for outpatient specialized therapies (physical therapy, occupational therapy, speech language therapy, and audiology) that can now be delivered via telehealth.</p> <p>NC Medicaid bulletin #34 provides guidance on how to utilize codes for teletherapy claims.</p>	<p>North Carolina was granted a COVID-related 1115 demonstration waiver, allowing the state to provide geographically targeted services; vary the amount, duration, and scope of services provided to different groups; and make other changes to LTSS policies.</p> <p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on May 18, 2020 (allowing targeted rate increases including 5% rate increase for OT and other therapy services); August 18 and 20, 2020; September 4, 2020; January 5, 2021; and March 29, 2021.</p> <p>Time-limited CHIP state plan amendment responding to COVID-19 approved on April 24, 2020.</p> <p>1919(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on April 6, 2020; May 27, 2020; July 6, 2020; September 21, 2020; October 29, 2020; December 21, 2020; and March 10, 2021.</p>
ND	<p>Governor's Executive Order 2020-05.1: Temporarily suspends licensure requirements for licensed health care providers in the state, including OTs and OTAs, and OTs and OTAs licensed in good standing in other states seeking to provide service via telehealth to residents of the state. The Governor rescinded</p>	<p>Governor's Executive Order 2020-05.1: In order to expand health care and behavioral health services, the order states that insurance carriers cannot subject telehealth coverage to deductible, coinsurance, copayment, or other cost-sharing provisions. Carriers are also prevented from imposing any specific requirements on the technologies used to</p>	<p>Medicaid: North Dakota Medicaid COVID-19 temporary telehealth policy (3/25) guidance</p> <p>Section 1135 disaster response waivers approved on March 24, 2020, and May 22, 2020.</p>

	<p>this Executive Order on April 30, 2021 when he ended the State of Emergency.</p>	<p>deliver telehealth. The order allows the North Dakota Insurance Commissioner to issue guidance on implementing the requirements. The Governor rescinded this Executive Order on April 30, 2021 when he ended the State of Emergency.</p> <p>Insurance Department Bulletin 2021-1 rescinds Bulletin 2020-3 as a result of the Governor's signing HB 1465 and in consideration of ongoing federal guidance. Bulletin 2021-1 requires insurance carriers issuing benefit plans that offer telehealth services to apply the services consistent with the bulletin. It also requires the relaxation of HIPAA guidelines consistent with CMS guidance, that carriers start or continue to provide covered services, including OT plan evaluation, via telehealth, and states the definitions related to telehealth stated in HB 1465.</p>	<p>1915(c) Appendix K waivers allowing flexibilities in the home and community-based services (HCBS) waivers granted on April 7, 2020; August 18, 2020; and March 25, 2021.</p> <p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on April 8, 2020; November 24, 2020; and January 19, 2021.</p>
OH	<p>LICENSE RENEWALS - February 1, 2021 Recent legislation, House Bill 404, has extended the deadline for expiration of all licenses issued by the state of Ohio to July 1, 2021. As a result, the expiration dates have been adjusted in the Ohio eLicense system. Although the deadline to renew has been extended, the OTPTAT Board encourages you move forward with renewal as soon as possible, as maintenance of your license is an important professional responsibility. The deadline for completion of your required continuing education is unchanged.</p> <p>If you do not wish to renew your license, no further action is required from you at this time. However, you will continue to receive renewal reminders since your expiration date is approaching. Simply ignore these reminders if you do NOT wish to renew.</p>	<p>Permanent rule allowing OTs and OTAs to be eligible providers of telehealth services under Medicaid, but allowing only OTs to bill for such services went into effect in November, 2020.</p> <p>Department of Medicaid COVID emergency telehealth information webpage, including its Unified Telehealth Policy, a provider resource guide, and billing guidelines.</p> <p>Ohio OTPTAT Board statement on telehealth</p> <p>October 2020 Board newsletter including guidance on telehealth</p>	<p>Private insurance: Department of Insurance Bulletin on coverage of COVID-19 testing and treatment as an emergency medical condition</p> <p>Medicaid: Section 1135 disaster response waivers approved on April 22, 2020, and May 28, 2020.</p> <p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on May 22, 2020; March 31, 2021 (rescinding some provisions of first SPA); April 15 (rescinding some provisions of first SPA); May 7, 2021; and May 26, 2021.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on May 14, 2020; August 28, 2020; January 15, 2021; and March 25, 2021.</p>

	<p>If you have any questions, please contact us at Board@otptat.ohio.gov. If you need assistance logging in, please contact (855) 405-5514 Monday-Friday 8:00 AM to 5:00 PM.</p> <p>For OTAs: You must have completed twenty hours between July 1, 2018-June 30, 2020, including one hour of ethics, jurisprudence, or cultural competence, according to your practice act. The online renewal jurisprudence exam fulfills the ethics requirement: https://otptat.ohio.gov/Occupational-Therapy/OT-Jurisprudence-Exam. If you renew your license without completing your CE by June 30, you are out of compliance. If you are audited, you will have to submit an explanation which will be considered by the OT Section of the Board, and you may be subject to discipline. If you believe you qualify for a waiver due to hardship (see rule 4755-9-02), you may do so by logging into eLicense Ohio and choosing the option to request a CE waiver on your license record.</p>		
OK	<p>Governor Stitt ended the COVID-19 state of emergency effective May 4, 2021.</p> <p>Executive Order 2021-07, until March 12, 2021, authorizes any medical professional holding a license in a state that is a party to the Emergency Management Compact evidencing the meeting of qualifications for the practice of certain services to be deemed licensed to practice in Oklahoma as long as this order is in effect. Any medical professional should apply to the appropriate licensing board, which shall verify the license status of the applicant and, provided the applicant's license is in good standing, issue a temporary license to practice in the state. After extending this Executive Order on April 11, the Governor rescinded it</p>	<p>OHCA Global Messages on telehealth: Effective immediately and only as long as the national emergency surrounding COVID-19 exists, OHCA will allow certain PT and OT services to be rendered via telehealth when appropriate. Providers are encouraged to create internal policies and procedures regarding the use of telehealth. See messages from March 25, 2020, April 9, 2020, September 18, 2020, October 16, 2020 for billing guidance.</p> <p>OHCA SoonerCare expanded use of telehealth and telephonic services for health care services that can safely be provided via secure telehealth communication devices for all SoonerCare members during the COVID-19 national and state emergency through January 31, 2021. Because the federal public health emergency</p>	<p>Medicaid: Section 1135 disaster response waivers granted on March 24, 2020; June 8, 2020; and March 17, 2021.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on April 3 and 28, 2020; June 26, 2020; August 26, 2020; October 30, 2020; December 9, 2020; and January 14, 2021.</p> <p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on May 11, 2020; August 8, 2020; October 15, 2020; December 31, 2020; March 10, 2021; April 1 and 8, 2021; and May 12, 2021.</p>

	<p>when he ended the COVID-19 State of Emergency, effective May 4.</p> <p>Oklahoma Medical Board COVID-19 Pandemic Emergency Rules in effect from April 21, 2020 until Governor’s Executive Order 2020-13 or a succeeding Executive Order related to the COVID-19 pandemic expires. Temporary rules include a temporary waiver of application and licensure fees for temporary licensure applicants under the Emergency Management Compact and who are licensed in good standing in another US state or territory and a rule allowing OTs to utilize telehealth or telemedicine for follow-up care on current patients or clients to the extent not already allowed by applicable law or practice act.</p>	<p>has been extended, OHCA announced that expanded use of telehealth for most SoonerCare services will continue through April 30, 2021.</p> <p>Insurance bulletin 2020-02 encouraging HMOs and health insurers to 1) waive cost-sharing for COVID-19 tests, 2) review telehealth programs to ensure they will be able to meet demand, and 3) waive telehealth copayments.</p> <p>Executive Order 2020-20, as amended for the ninth time, required that telemedicine should be used to maximum potential and shall be allowed for non-established patients for the purposes of the COVID-19 response. This order was in effect until February 12, 2020. Subsequent Executive Order 2021-07 extended the state of emergency, but did not include a provision related to telehealth. Executive Order 2021-07 was rescinded when the Governor ended the state of emergency.</p> <p>Enacted SB 674 requires health benefit plans to provide coverage of health care services provided through telehealth. Additionally, this legislation requires an insurer to reimburse the health care professional on the same basis and at least the rate of reimbursement that the insurer is responsible for coverage if the service was provided in person.</p>	<p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on June 4, 2020.</p>
OR	<p>Occupational Therapy Licensing Board COVID-19 Updates and Information with links to information about vaccines, Governor’s Executive Orders, re-opening guidance, mask guidance, parameters within with OTs and OTAs can work as assistants for respiratory therapists, telehealth information, and links to AOTA free continuing education.</p>	<p>Oregon Department of Education School Occupational Therapy and Telehealth FAQs (updated December 28, 2020)</p> <p>Oregon Health Authority and Department of Education guidance on OT in schools</p> <p>HB 2508 (pending Governor action) would require Oregon Health Authority to ensure</p>	<p>Medicaid: Oregon Medicaid COVID-19 Provider Guide, including telehealth coverage and billing information for OT services provided via telehealth (updated May 18, 2021).</p> <p>Section 1135 disaster response waivers approved on March 25, 2020; August 20, 2020; December 2, 2020; and December 9, 2020.</p>

<p>Proposed permanent rule requiring Oregon OT practitioners to comply with the Governor’s Executive Orders during a declared emergency and stating that failure to do so is considered unprofessional conduct. Comments are due by April 23, 2021. This was previously a temporary rule that the Board has voted to make permanent. Rule has been adopted and goes into effect on May 10, 2021.</p> <p>Proposed temporary rule waiving the training requirements for an individual formerly licensed as a health care provider and who registers to provide emergency health care services during an emergency. Temporary rule expires on July 20, 2021.</p>	<p>reimbursement of health services delivered through telemedicine.</p> <p>Oregon Health Authority updated temporary emergency rule related to telemedicine services generally. State has come to an agreement with several health insurance companies to continue providing expanded telehealth opportunities through at least December 31, 2020. This temporary rule has been permanently adopted and went into effect on September 11. The OHA has adopted a new rule that repeals and replaces the current rule – the rule goes into effect on January 1. The new rule allows for synchronous and asynchronous telehealth technology; requires telehealth services to be medically and clinically appropriate for covered conditions for patients where an established relationship exists between provider and patient, to be reimbursed at the same rate as in-person services and to be culturally and linguistically appropriate; requires telehealth providers to be enrolled with OHA, to provide telehealth services within their Board’s scope of practice, and to obtain informed consent from the patient to receive telehealth services.</p> <p>Oregon Health Authority temporary emergency rule directing contracted Coordinated Care Organizations to reimburse their contracted physical and behavioral health providers at the same rate for telemedicine and telehealth services as they would for in-person. A permanent rule to keep this policy in place after the state of emergency has been adopted and went into effect on September 10. OHA has proposed a substantial revision to this rule that expands the types of covered telehealth technologies to include asynchronous technology, establishes specific requirements for the provision of and reimbursement of</p>	<p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on April 24, 2020; June 3, 2020; June 18, 2020; July 16 and 30, 2020; August 4, 2020; November 17, 2020; January 14, 2021; March 16, 2021; April 8, 2021; and May 7, 2021.</p> <p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on June 30, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on April 28, 2020; May 22, 2020; June 23, 2020; July 23, 2020; March 10, 2021; and March 26, 2021.</p>
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		<p>services provided via telehealth for the CCO's network providers, and authorizing flexibility in enforcing these rules in the event of a state of emergency. Rule has been adopted and goes into effect on January 1, 2021.</p> <p>Oregon Health Authority temporary emergency rule that authorizes reimbursement for occupational therapy services provided via telehealth to a Medicaid-eligible child under an IEP or IFSP. A permanent rule has been adopted and went into effect on October 5.</p> <p>Proposed permanent rule stating that all Medicaid rules deemed inconsistent by the Oregon Health Authority with certain CMS waivers related to COVID-19 and all emergency orders or declarations issued by the Governor or OHA related to COVID-19 are suspended. Rule has been adopted and went into effect on September 28.</p> <p>Adopted permanent rule that allows a face-to-face encounter in an Indian Health Service facility, a Federally Qualified Health Center, or a Rural Health Clinic to include a synchronous, two-way audiovisual link between the patient and provider. Rule went into effect on September 15.</p> <p>Telehealth Guidance from the Department of Consumer and Business Services and the Oregon Health Authority for state-regulated commercial plans and Medicaid plans</p> <p>OT Licensing Board telehealth links to rules, FAQs and AOTA's position paper on telehealth</p> <p>Oregon Health Authority telehealth FAQs on private insurance companies' telehealth policies.</p>	
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<p>PA</p>	<p>OT Board website posting (posted May 17, 2021): BPOA has received many questions from licensed professionals about what happens to licensing waivers if the COVID-19 emergency disaster declaration is ended. At this time, the emergency disaster declaration remains in place, and all waivers are currently effective. We will provide additional updates as more information becomes available.</p> <p>Department of State announcement of regulatory suspensions, including waiver of certain requirements to reactivate an OT or OTA license that has been expired for 4 years or less and temporary suspension of certain supervision requirements.</p> <p>Department of State announcement of automatic extension of temporary licenses for OTs and OTAs that were valid as of March 6, 2020, and any temporary license issued during the COVID-19 emergency. Such licenses shall expire no earlier than 90 days following the end of the emergency.</p> <p>BPOA COVID-19 FAQs regarding the processing of licensing applications, essential businesses, and testing and background checks for licensure.</p> <p>Expansion of OT Scope of Practice to Provide Assistance in Responding to COVID-19: As a result of a Governor's Executive Order (issued May 6), the scope of practice for occupational therapists has been expanded for the duration of the disaster emergency to include the performance of skills that OTs are trained for but in settings and under circumstances that are outside their normal scope of practice.</p>	<p>Department of State announcement of regulatory suspensions, including authorization of licensed health care providers, including OTs and OTAs, to provide services via telehealth and allowing licensed out-of-state providers to provide services via telehealth.</p> <p>Medical Assistance COVID-19 Coverage FAQs, including about telehealth and telemedicine</p> <p>Medicaid program issued guidance allowing telemedicine to be provided and billed for payment when delivered via the School-based ACCESS program for counseling and for occupational, physical, and speech therapy.</p> <p>Governor Wolf issued "Cross-Agency Telehealth Guidance" which outlines the use of telemedicine in the state.</p> <p>Telemedicine Guidelines Related to COVID-19 from the Office of Medical Assistance Programs (published March, 2020)</p>	<p>Medicaid: Section 1135 disaster response waivers approved on March 27, 2020; June 9, 2020; July 29, 2020; and October 6, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on March 18 and 31, 2020; May 6, 2020; June 16, 2020; July 23, 2020; August 20, 2020; December 7, 2020; January 19, 2021; and March 10, 11, 29, 2021.</p> <p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on June 2, 2020; and June 4, 2021.</p> <p>Time-limited CHIP state plan to respond to COVID-19 approved on May 18, 2020.</p> <p>Private Insurance: COVID-19 Health Insurance Information from the Departments of Aging, Insurance, and Human Services</p> <p>Insurance Department press release regarding guidance to insurers for consumer protection, clarity on telehealth policies. An accompanying notice urges health insurers covering Pennsylvania residents to continue exercising flexibility to make COVID-related and non-COVID-related available to enrollees and clarifying various policies related to COVID-19 including testing, vaccines, telehealth delivery, balance billing and surprise balance bills. This notice builds off a previously issued notice from March, 2020 that urged health insurers to take specific measures, including in the areas mentioned above, related to COVID-19.</p>
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RI	No updates at this time.	<p>Executive Order 20-06 requires clinically appropriate medically necessary telemedicine services delivered by in-network providers to be reimbursed at rates not lower than services delivered through in-person methods. Requires insurance carriers to establish reasonable requirements for the coverage of such services. This Executive Order has been extended until June 18, 2021.</p> <p>Insurance Bulletin 2020-01 requiring insurance carriers to permit in-network providers to deliver clinically appropriate, medically necessary care, including occupational therapy, via telemedicine to covered members and outlining billing and reimbursement requirements for telemedicine services.</p> <p>RIDOH website with link to Telemedicine Insurer Grid (Grid updated November, 2020)</p> <p>Office of Health Insurance Commissioner newsletter from July/August 2020 announcing Governor's proposal to amend the state's Telemedicine Act to allow many of the COVID-19 related policies to stay in place until June 30, 2021, and requires a review of telemedicine data, best practices, and recommendations to be submitted to the state legislature by December 31, 2020. The OHIC formed a subcommittee that met throughout 2020 and issued a report with recommendations for policy changes for the Governor's consideration.</p> <p>COVID-19 TeleHealth Delivery Policy and Procedure Guidance for RI Medicaid (updated and posted June 10, 2020)</p>	<p>Medicaid: Section 1135 disaster response waivers approved on March 25, 2020; May 15, 2020; and March 12, 2021.</p> <p>Rhode Island was granted a COVID-related 1115 demonstration waiver, allowing the state to vary the amount, duration, and scope of services provided to different groups; and provide retainer payments for personal care services.</p> <p>1915(c) Appendix K waiver allowing flexibilities in the home and community-based services (HCBS) waiver granted on March 24, 2020.</p> <p>Time-limited Medicaid state plan amendments responding to COVID-19 approved on April 8 and 15, 2020; May 13, 2020; August 25, 2020; and April 20, 2021.</p> <p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on March 24, 2020.</p> <p>The Office of the Health Insurance Commissioner and the Medicaid program are notifying health insurers issuing policies in the state to take some specific measures around telemedicine, removing barriers to accessing services, ensuring network adequacy, etc.</p> <p>Dept. of Health COVID-19 Health Benefit Changes summary</p> <p>Medicaid emergency rule temporarily allowing providers licensed and practicing outside the state and who are not excluded from providing services to a RI Medicaid enrollee to do so without paying a provider application fee, obtaining a criminal background check,</p>
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SC	<p>Governor McMaster announced on June 7 that the declared state of emergency will not be extended. The state of emergency ended on June 6.</p>	<p>Statement from South Carolina OT Board regarding telepractice. Updated Advisory opinion issued June 12, 2020.</p> <p>SCDHHS announced temporary modifications to policies related to telehealth coverage, which includes reimbursement for occupational therapy services.</p> <p>SCDHHS extended telehealth flexibilities to reimburse for services when care is provided by occupational therapy assistants.</p> <p>Medicaid Telehealth Documentation and Platform Requirements FAQs</p>	<p>Medicaid: Section 1135 disaster response waivers approved on March 31, 2020; June 15, 2020; and July 7, 2020.</p> <p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on April 21, 2020, and May 8, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on April 21, 2020; September 22, 2020; and January 15, 2021.</p>
SD	<p>Governor's Executive Order 2020-16 temporarily suspending the rule requiring the physical presence of an occupational therapist on the premises where a patient is being cared for by an occupational therapy assistant. (issued April 15, 2020). This provision has been extended for the duration of the state of emergency, which will end on June 30, 2021, unless extended by the Governor.</p> <p>Governor's Executive Order 2020-25 temporarily suspending certain laws requiring</p>	<p>Medicaid Coronavirus FAQs (updated June 8, 2021)</p> <p>Is a telemedicine visit covered for therapy services?</p> <p>South Dakota Medicaid has added temporary coverage of occupational therapy services via telemedicine for recipients and providers at high risk for COVID-19 or under quarantine or social distancing during a declared emergency for COVID-19. The service must be provided by means of "real-time" interactive telecommunications system. Use of</p>	<p>Medicaid: On March 24, the federal government granted an 11135 waiver. Subsequent waiver issued on August 31, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on April 6 and 29, 2020; July 21, 2020; August 20, 2020; December 16, 2020; and January 19, 2020.</p>

	<p>applicants to submit proof of completing examination requirements to prevent delaying licensure during the emergency. OTs and OTAs, as well as other health care providers, granted a license without having submitted such proof shall submit proof of examination to their respective licensing board by November 30, 2020 (issued May 26, 2020). These suspensions have been extended for the duration of the state of emergency, which will end on June 30, 2021 unless extended by the Governor.</p>	<p>telemedicine for the convenience of the provider or recipient is not covered.</p> <p>Governor's Executive Order 2020-07 temporarily suspending regulatory provisions of rules relating to Medicaid covered services which limit or restrict the provision of telehealth or telemedicine services which require face-to-face treatment, visits, interviews, and sessions with providers. (issued March 23)</p> <p>Governor's Executive Order 2020-16 temporarily suspending the law requiring that telehealth be utilized with a prior provider-patient relationship and suspending the law requiring real-time visual technology for telehealth services or prohibiting audio-only transmission thereof. (issued April 15)</p> <p>Enacted legislation SB 96 allows healthcare providers to treat patients via telehealth without first needing an in-person exam. SB 96 also revises the state's definition of telehealth to cover "interactive audio-video, interactive audio with store and forward, store-and-forward technology, and remote patient monitoring."</p>	<p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on May 28, 2020, and April 28, 2021.</p>
TN	<p>Executive Order 77 extended the below provisions until April 28, 2021. Executive Order 80 further extended them until May 31, 2021:</p> <ol style="list-style-type: none"> 1. Commissioner of Health is given the authority to allow a health care professional who is licensed in another state, and who would otherwise be subject to state licensing requirements, to engage in the practice of the individual's profession in Tennessee, if such individual is a health care professional who is assisting in the medical response to COVID-19 (see item 2) 2. Commissioner of Health is granted the authority to grant a license to a health care professional who has been out of practice 	<p>Executive Order 77 extended the below provision until April 28, 2021. Executive Order 80 further extended them until May 31, 2021:</p> <ol style="list-style-type: none"> 1. Health insurance carriers are urged to provide coverage of clinically appropriate, medically necessary covered services via telemedicine provided by all providers regardless of network status or originating site; carriers are urged not to impose prior authorization requirements on medically necessary treatment related to COVID-19 delivered by in-network providers via telemedicine; authorizes health care providers licensed in another state and temporarily authorized to practice in Tennessee to provide services via telemedicine to patients in 	<p>Medicaid: On March 31, the federal government granted an 1135 disaster response waiver. Subsequent waivers with additional flexibilities issued on June 9, 2020 and August 18, 2020.</p> <p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on April 30, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on May 7, 2020, and March 10, 2021.</p>

	<p>without requiring the profession to demonstrate continued competency or submit to an interview before the appropriate board, provided the individual meets all other requirements for a license (see item 7.3)</p> <p>3. Suspending any requirement that any continuing education credits and hours be obtained in-person or at a live event for credit and hours earned from March 12 through the expiration of the order, the Commissioner of Health is authorized to adopt policies necessary to comply with this provision. (see item 7.4). The Governor issued a limited state of emergency on May 28 which did not extend these provisions.</p> <p>Executive Order 68 authorizes the temporary suspension of provisions of Title 63 to the extent necessary to authorize individuals licensed under Title 63, including OTs and OTAs, to perform tasks outside their scope of practice if such tasks are performed in a licensed hospital pursuant to facility-specific COVID-19-related plan of delegation submitted by the Chief Medical Officer and approved by the Commissioner of Health or their designee. Licensees acting under such a plan of delegation are subject to discipline as if they were acting under their regular scope of practice. This provision was extended in Executive Order 80 until May 31, 2021, and then expired.</p> <p>Tennessee Office of the Commissioner of Health policy suspending continuing education audits of in-person/live hours through December 31, 2021.</p>	<p>Tennessee provided doing so is consistent with the providers' scope of practice (see Executive Order 15, item 38).</p> <p>2. State law is suspended, to the extent necessary, to allow telehealth or telemedicine services to be provided by any provider licensed as a Profession of the Healing Arts, which includes OT (see Executive Order 20, item 38.1). The Governor issued a limited state of emergency on May 28 which did not extend these provisions.</p> <p>Memo from TennCare announced MCOs are reimbursing for physical, speech, and occupational therapy that are appropriate to be delivered via telehealth.</p> <p>Memo from TennCare that TennCare and TennCare MCOs will extend their current telehealth coverage policies, including coverage of telephone only encounters through June 30, 2021 (includes links to private payer COVID-19 information websites).</p> <p>Enacted HB 8002 requires payers to cover telehealth services as they would cover in-person care, relaxes the definition of the originating site for telehealth, and mandates reimbursement parity for telehealth up to April 2022.</p> <p>The Bureau of Workers' Compensation proposed a new rule that provides the option for employees who sustained an injury arising out of and in the course and scope of employment to receive certain health care services via telehealth.</p>	<p>Executive Order 15, item 34, authorizes TennCare to create policies or modify existing policies as necessary to ensure that TennCare and CoverKids members continue to receive medically necessary services without disruption. This provision was extended in Executive Order 67 until December 29, 2020.</p>
TX	<p>Board website notice: If you are unable to renew your OT or OTA or PT or PTA license due to COVID-19, please contact the board by calling 512-305-6900.</p>	<p>Changes to Medicaid and CHIP services will be posted here (click on the Teleservices tab). Many flexibilities have been extended through June 30, 2021.</p>	<p>Private Insurance: Links to private insurers policies regarding waiver of cost-sharing and telemedicine</p>

		<p>Claims guidance from Texas Medicaid and Healthcare Partnership (TMHP) regarding occupational, physical, and speech therapy services. The flexibilities outlined in this guidance have been extended until June 30, 2021. Legislation sent to the Governor (HB 4) ensures that Medicaid recipients have the option to receive services as telemedicine medical service, telehealth services, or otherwise using telecommunications or information technology (includes occupational therapy services).</p> <p>Texas Department of Insurance information on workers' compensation, telehealth, and COVID-19.</p> <p>Texas Department of Insurance Coronavirus resources</p>	<p>Medicaid: Section 1135 disaster response waivers approved on March 30, 2020; May 22, 2020; July 23, 2020; September 30, 2020; November 25, 2020; and March 25, 2021.</p> <p>1915(c) Appendix K waivers allowing flexibilities in the home and community-based services (HCBS) waivers granted on June 8 and 10, 2020; August 12, 2020; October 21, 2020; March 31, 2021; April 13, 2021; and May 14, 2021.</p> <p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on June 15, 2020; August 21, 2020; October 23, 2020; December 17, 2020; March 25, 2021; and April 8, 2021.</p> <p>Texas was granted an 1115 demonstration waiver which extends day/dollar limits on COVID-related hospital stays.</p> <p>Medicaid and CHIP flexibilities for providers, including regarding teleservices, provider enrollment, prior authorizations, school and health related services, signature requirements for DME, informational handouts, and resources regarding 1135 waivers and Appendix K submissions to CMS.</p> <p>TMHP information on provider emergency enrollment. Providers who apply with the Public Health Emergency Application are automatically enrolled into both Texas Medicaid and the CSHCN Services Program unless they opt out of one as prompted in the application. Providers who maintain a license in good standing in the state where they practice may enroll. Providers do not need to be licensed in Texas to enroll with the Public Health Emergency Application.</p>
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<p>UT</p>	<p>Division of Occupational and Professional Licensing COVID-19 announcements regarding resumption of fingerprinting services and the lifting of the temporary suspension of “live” CE requirements as of June 1, 2021 (virtual or online CE will continue to be accepted by DOPL through December 31, 2021).</p> <p>DOPL notice of expedited licensure for formerly licensed health care professionals, including OTs. (Click on Practice Exemptions During Declared Emergency on left, then on Formerly Licensed Healthcare Professionals in the drop down list)</p>	<p>Emergency rule authorizes a Medicaid enrolled provider to deliver covered services via a synchronous or asynchronous telehealth platform as clinically appropriate. (See page 111-113 of linked pdf). This rule has been extended until November 10, but does not authorize asynchronous telehealth services (see page 221-223 of linked pdf). This rule (see pages 51-53 here for text) has been permanently adopted, only authorizing synchronous telehealth services, and went into effect on September 22.</p> <p>DOPL webpage notice of suspension of statutes/rules relating to telehealth services, (click on Telehealth in menu on left side of page) including links to Governor’s Executive Orders, rules, and Utah Telehealth Network’s COVID and Telehealth Resources webpage. This information has been removed from the DOPL website.</p> <p>Governor’s Executive Order suspending enforcement of requirement that a telehealth platform meet industry security and privacy standards including compliance with HIPAA and of the requirement that a provider be in compliance with laws, rules, and regulations regarding the provider’s licensed practice to the extent that it interferes with a provider’s ability to offer telehealth services. This Order has been renewed, as a result of the new State of Emergency declaration that went into effect on September 19, and is in effect until the end of the State of Emergency.</p> <p>State telehealth resources, including links to private payer guidance, Medicare, and Medicaid FAQs</p>	<p>Private Insurance: Several Utah health insurers are taking action on telehealth and copays.</p> <p>Medicaid: Section 1135 disaster response waivers issued on April 10, 2020; May 19, 2020; and June 12, 2020.</p> <p>1915(c) Appendix K waivers granted allowing flexibilities in home and community-based services (HCBS) waivers granted on April 17, 2020; July 22, 2020; and January 19, 2021.</p> <p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on May 18, 2020, and June 5, 2020.</p> <p>Time-limited CHIP state plan amendments to respond to COVID-19 approved on June 30, 2020, and April 15, 2021.</p> <p>Emergency rule, effective June 24, suspends any Medicaid administrative rule under certain chapters that conflict with emergency waivers or state plan amendments approved by CMS during the COVID-19 emergency, an executive order issued by the Governor during the state of emergency, or a legislative action issued during the state of emergency. Rule remains in effect during the declared COVID-19 emergency period. (See page 83–84). This rule has been permanently adopted and went into effect on September 7.</p> <p>Emergency rule effective June 24 that assures continued Medicaid coverage through the public health emergency period for anyone eligible and enrolled on March 18 or who subsequently becomes eligible and enrolls during the emergency period and any extensions.</p>
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<p>VT</p>	<p>Governor Scott rescinded all state COVID-19 restrictions and let the state of emergency expire on June 15, 2021.</p> <p>Office of Professional Regulation policy on continuing education: Online courses may be taken in lieu of required formal continuing education, and a continuing education renewal extension of up to 180 days is allowed if certain criteria are met.</p> <p>OPR Emergency Policy Related to Continuing Education Providers</p> <p>Office of Professional Regulation COVID-19 FAQs</p> <p>Governor signed into law a bill that establishes a temporary license for graduates of an approved education program during a period when licensing exams are not available and expands telehealth in the state by allowing out-of-state licensees to provide services to Vermont residents without obtaining a Vermont license.</p> <p>OPR webpage with information on how to apply for a temporary license.</p>	<p>Department of Vermont Health Access sent a memo to all Vermont Medicaid-participating providers regarding telehealth.</p> <p>Department of Vermont Health Access Memorandum on Medicaid Payments for Telephonic Services Furnished During the Emergency Response to COVID-19 (issued March 29, 2021)</p> <p>Department of Vermont Health Access Telehealth resources webpage</p> <p>COVID-19 emergency response legislation, HB 742, enacted in the state expands telehealth.</p> <p>Department of Financial Regulation emergency rule instructing insurance companies to cover services through telehealth or audio-only telephone on the same basis as in-person. This rule has been rescinded and superseded by Emergency Rule H-2020-06-E.</p> <p>Emergency Rule H-2020-06-E, among other provisions, expands patients' access to and providers' reimbursement for services delivered remotely through telehealth, audio-only telephone, and brief telecommunication services. This rule is in effect until July 1, 2021.</p> <p>Governor's Executive Order 01-20 declaring a state of emergency in the state and suspending relevant rules to the extent necessary to provide telemedicine to facilitate treatment of patients in place may be approved by the Commissioner of Health. This order has been extended until June 15, 2021.</p>	<p>Medicaid: On March 30, 2020, the federal government granted an 1135 waiver, and a subsequent waiver on May 28, 2020.</p> <p>Time-limited Medicaid state plan amendment to respond to COVID-19 approved on May 29, 2020.</p> <p>Vermont amended an 1115 demonstration waiver to respond to the emergency, allowing for virtual hearings and other changes.</p> <p>Private Insurance: Department of Financial Regulation emergency rule relaxing provider credentialing requirements to facilitate the reimbursement through commercial insurance during the State of Emergency for health care services provided by physicians or other health care professionals who hold an equivalent license in another state. Emergency rule has been extended until the last to terminate of a declared state of emergency in Vermont as a result of COVID-19, a declared federal public health emergency as a result of COVID-19, and a declared national emergency as a result of COVID-19.</p> <p>Department of Financial Regulation emergency rule requiring coverage of medically necessary COVID-19 treatment and testing and waiving or limiting cost-sharing for the same. This rule has been rescinded and superseded by Emergency Rule H-2020-06-E.</p> <p>Emergency Rule H-2020-06-E, among other provisions, expands health insurance coverage for and waives or limits cost sharing requirements directly related to COVID-19 diagnosis, treatment, and prevention. This rule is in effect until July 1, 2021.</p>
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VA	<p>Governor Northam announced that the COVID-19 state of emergency will not be extended past June 30, 2021.</p> <p>Board of Medicine COVID-19 notices, including links to an application for reactivation/reinstatement during the COVID emergency and to information about an out of state licensure exception for practitioners assisting in hospitals, licensed nursing facilities, and dialysis facilities.</p> <p>Governor's Executive Order 42, Promulgation of the Commonwealth of Virginia Emergency Operations Plan and Delegation of Authority authorizing the Director of the Department of Health Professions to issue temporary licenses to practice in Virginia for no longer than one year to certain health care providers and to waive licensure fees, authorizing an individual holding a license in another state to render aid during the emergency without compensation, and designating a license in good standing issued by another state to be an active license issued by Virginia to provide health care as a health care provider of the same type, provided such health care provider is engaged by a certain health care facility for the purpose of assisting that facility with disaster response operations. (see pages 7-8)</p> <p>Executive Order 57 authorizes an out-of-state license in good standing to be recognized as a Virginia license for licensees to provide care in certain healthcare facilities, and authorizing healthcare practitioners with an active license issued by another state to provide continuity of care to current patients who are Virginia residents through telehealth for the duration of the state of emergency declared in Executive Order 51.</p>	<p>Medicaid Memo from March 19, 2020, stating that DMAS is expanding coverage of telehealth as a method of service delivery under certain circumstances, waiving certain requirements related to telehealth, allowing a patient's home to be the originating site, and allowing early intervention service providers to use telehealth or remote care delivery for all ongoing services including occupational therapy. A subsequent Memo issued May 15, 2020 clarified that DMAS will reimburse for remote patient monitoring for suspected and confirmed cases of COVID-19 and provider-to-provider consultations for all conditions based on clinical judgment.</p> <p>Medicaid Memo issued March 5, 2021 extended various flexibilities until April 20, 2021, including flexibilities related to durable medical equipment and telehealth, behavioral health and addiction and recovery treatment services and telehealth, and the general telehealth flexibilities stated in the Memos issued on March 19, 2020 and May 15, 2020 (see above). A subsequent Memo issued on April 22, 2021 extended all flexibilities stated in this Memo through July 20, 2021.</p> <p>Amended Executive Order 57 allows health care practitioners with an active license issued by another state to provide continuity of care to their current patients who are Virginia residents through telehealth services. Amended further to remain in effect for the duration of the COVID-19 state of emergency.</p> <p>Enacted legislation (HB 5046/SB 5080) eliminates the originating site restrictions and the requirement that a care provider accompany a patient during the telehealth session. Expands the telehealth platform to allow care providers to treat the patient in their own homes or other locations. Mandates that payers cover telehealth</p>	<p>Medicaid: Memo was sent to all providers participating in Medicaid outlining provider flexibilities related to COVID-19, including expanded telehealth coverage, as well as the waiver of certain program requirements, including specified service authorizations and prescription drug limitations. Specific provider requirements are also being waived.</p> <p>Governor Northam is increasing access to health care by: 1) eliminating co-payments for services covered by Medicaid and FAMIS, including COVID-19 related treatment and others; 2) ensuring current Medicaid members do not inadvertently lose coverage due to lapse in paperwork or change in circumstances; and 3) waiving pre-approval requirements for many critical medical services, among other things. Remains in effect for the duration of the COVID-19 state of emergency.</p> <p>Section 1135 disaster response waivers approved on March 23, 2020; May 19, 2020; and March 12, 2021.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers approved on April 20 and 30, 2020; June 22, 2020; December 21, 2020; and March 24, 2021.</p> <p>Time-limited Medicaid state plan amendment to respond to COVID-19 approved on May 27, 2020.</p> <p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on May 8, 2020.</p>
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WA	<p>Governor's Executive Order 20-32 Health Care Worker Licensing temporarily waives and suspends certain laws and regulations, including 1) the requirement to complete continuing education if a license has been expired for one renewal cycle or less or if it has been expired for over three years, 2) the requirement that an individual seeking to renew a retired active license declare that they have only practiced intermittently or in an emergency during the previous renewal cycle and declare that continuing education requirements have been met, 3) the requirement for individuals seeking to renew their retired volunteer medical worker license declare that required continuing education or continuing competency requirements have been met, 4) the requirement that continuing education must be completed after the first post-discharge renewal for an individual seeking to return to active status from military status, and 5) the requirement that continuing education must be completed during the following renewal for an individual returning their license to active status from inactive military-related status. Proclamation 20-32.11 extends the waivers and suspensions originally identified in Proclamation 20-32 until termination of the state of emergency or until the Proclamation is rescinded.</p> <p>License Expiration Extension FAQ webpage.</p> <p>Application and FAQs on Emergency Volunteer Health Practitioners</p>	<p>Apple Health revised various policies on telehealth which go into effect on July 1, 2021:</p> <ul style="list-style-type: none"> - Telehealth requirements for PT, OT, and speech therapy during the COVID pandemic - Telemedicine and telehealth brief, including overviews of the updated telehealth and telemedicine policies, billing instructions for MCOs, best practices, resources, and information on HIPAA compliance - Clinical policy and billing for COVID-19 <p>Washington Health Care Authority news release issued March, 2020 on steps taken to support telehealth including Medicaid reimbursement, guidance for use by public school employees, and provider support.</p> <p>Governor Inslee signed SB 5385 which requires telemedicine claims to be reimbursed at the same level as care delivered face to face. Telemedicine claims also cannot be denied by insurance carriers. This legislation will go into effect immediately to help increase access to care during the COVID-19 outbreak. Executive Order 20-29 suspends the requirement that the law affects health plans issued or renewed on or after January 1, 2021. This Executive Order has been extended until December 31 or until the end of the State of Emergency, whichever comes first.</p> <p>Dept. of Labor and Industries announced that it will extend some of its temporary workers' compensation telehealth policies until December 31, 2021. This includes the policy regarding</p>	<p>Medicaid: On March 19, 2020, the federal government approved an 1135 waiver, with a subsequent waiver with additional flexibilities granted on June 22, 2020.</p> <p>On April 21, 2020, Washington was granted the first COVID-related 1115 demonstration waiver, allowing the state to provide geographically targeted services; vary the amount, duration, and scope of services provided to different groups; and make other changes to LTSS policies.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services waivers granted on March 19 and 23, 2020; April 21, 2020; June 10, 2020; August 3, 2020; November 10, 2020; January 19, 2021; March 10, 2021; March 26, 2021; and June 4, 2021.</p> <p>Medicaid state plan amendments to respond to COVID-19 approved on March 25, 2020; April 7, 13, & 24, 2020; July 30, 2020; October 23, 2020; March 23, 2021; May 12, 2021; and May 28, 2021.</p> <p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on July 15, 2020.</p> <p>Private Insurance: Insurance Commissioner's emergency order waiving cost sharing for testing; suspending prior authorization for testing and treatment; allowing early prescription refills; and allowing out-of-network care with no</p>

		<p>OTs, PTs, and SLPs using telerehab to initiate and deliver services after an attending provider's referral.</p> <p>Health Care Authority School-Based Services COVID-19 Billing FAQs (updated January 26, 2021.)</p>	<p>cost sharing if networks are insufficient. Applies to all state-regulated plans, <i>including short-term plans</i>. Extended until July 11, 2021.</p> <p>Insurance Commissioner's emergency order clarifying and expanding upon requirements of Emergency Order 20-01, including requiring insurance carriers to allow usage of non-HIPAA compliant communication platforms. Extended until June 27, 2021.</p> <p>Health insurance and Coronavirus FAQs</p>
WV	<p>Board Position on Telehealth: The Board's position on Telehealth has always been that there is nothing in our Code or Legislative Rules that prohibits telehealth as a method of providing services, as long as all provisions of the Code are complied with and the same standard of care is exercised. Our Rules do, however, require the OT be directly involved through a face-to-face visit with the patient during the initial evaluation. The Board has determined that in light of the current situation, video-conferencing could be considered face-to-face. Otherwise, it is up to the therapist to determine if in-person intervention is necessary, or if providing OT services by means of telehealth is in the best interest of the client.</p> <p>Also, in order to provide OT services to consumers in WV, practitioners must hold a current, valid WV OT or OTA license.</p>	<p>Department of Health and Human Services released a memo to WV Medicaid providers allowing non-emergent services to be rendered through Telehealth modality.</p> <p>Board of Occupational Therapy new telehealth rules (effective May 1, 2021)</p> <p>Enacted HB2024 expands the use of telemedicine by allowing medical personnel to participate in telemedicine visits, ensure parity between telemedicine and in-person visits, and to restrict the ability of medical professional boards to restrict telemedicine beyond what is in this statute.</p>	<p>Medicaid: Section 1135 disaster response waivers approved on March 30, 2020, and June 9, 2020.</p> <p>Time-limited Medicaid state plan amendment to respond to COVID-19 approved on August 13, 2020; December 17, 2020; April 8, 2021 (increasing payment rates for DME, dental services, ambulance services, occupational therapy, physical therapy, speech therapy, intermediate care facilities, and personal care services, effective July 1, 2020-December 31, 2020); and May 7, 2021.</p> <p>Time-limited CHIP state plan amendment responding to COVID-19 approved on June 10, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on March 19, 2020; July 21, 2020; August 3, 2020; November 3, 2020; and April 21, 2021.</p>
WI	<p>Governor Evers signed Assembly Bill 148 on March 26, 2021. The bill authorizes a Wisconsin occupational licensing board to issue a temporary license to a health care provider, including an OT or OTA, who is licensed in good standing in another state so</p>	<p>Bulletin From Office of the Commissioner of Insurance to Insurers, Agents, and Interested Parties states that some insureds may be using telehealth services, if offered, instead of in-person health care services. Health Plan issuers are reminded to review provisions in current</p>	<p>Medicaid: 1135 waiver granted on April 20 to waive prior authorization requirements; allow care in alternative (unlicensed) settings; suspend some nursing home screening requirements; and streamline enrollment of in-state and out-of-state providers. A subsequent</p>

<p>the provider can provide services within their scope of practice in Wisconsin, including via telehealth. Certain conditions must be met before the temporary license can be issued.</p> <p>Department of Safety and Professional Services COVID-19 Updates and Information, including statutes related to out-of-state licensed health care providers, insurance information, information for providers working in the state and practicing in the state solely during the national public health emergency, and Governor's emergency orders still in effect.</p> <p>Governor's Emergency Order #2 (issued October 1, 2020) authorizes 1) any health care provider with a valid and current license or credential issued by another state may practice under that license and within the scope of that license in Wisconsin, including via telehealth/telemedicine technology without first obtaining a credential from DSPS provided certain conditions are met; 2) a temporary interstate license or any otherwise valid health care provider license that expires during the emergency declaration shall remain valid for 30 days after the emergency declaration concludes; 3) any health care provider with a license that recently lapsed (within 5 years of expiration) who applies for DSPS reinstatement shall not be required to pay any late renewal fees and shall not be required to fulfill any continuing education requirements. Order is in effect for the duration of the federal public health emergency declared on July 23, 2020, including renewals, or until a superseding order is issued by the Governor or the Secretary of the Department of Health Services. DSPS has provided more information regarding this Emergency Order.</p>	<p>policies regarding the delivery of health care services via telehealth and ensure their telehealth programs can meet demands.</p> <p>A new memorandum, issued on October 13, from the Commissioner of Insurance recommends that insurers remove any barriers to insureds utilizing telehealth services and reminds insurers to review provisions in current policies regarding the delivery of health care services via telemedicine and ensure their programs with participating providers are robust and able to meet any demand. Insurers are also strongly encouraged not to deny coverage for a treatment or service provided via telehealth if the treatment or service is covered under the policy or plan if the service is provided in-person.</p> <p>ForwardHealth Update 2020-15 regarding additional services to be provided via telehealth, including occupational therapy, provided the service is a covered service that can be delivered with functional equivalency to the face-to-face services.</p> <p>Statement of Scope notice regarding the Wisconsin OT Affiliated Credentialing Board consideration of a permanent rule on telehealth to establish standards of practice and conduct for providing OT services using telehealth.</p>	<p>waiver with additional flexibilities granted on June 5, 2020.</p> <p>Time-limited Medicaid state plan amendments to respond to COVID-19 approved on May 7, 2020; June 12 and 30, 2020; May 19, 2021; and June 4, 2021.</p> <p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on August 19, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on May 20 and 22, 2020; and March 24, 2021.</p>
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<p>WY</p>	<p>Board website notice regarding telehealth</p> <p>Board Policy on Supervision posted on Board website (extended until July 1, 2021): The Board has received questions from occupational therapists and occupational therapy assistants regarding whether the Board would authorize remote supervision through a live audio and video connection during the declared state of emergency relating to the virus which causes COVID-19. The Board has not previously addressed whether supervision, required under Chapter 3, Sections 2 and 3 of the Board’s rules for occupational therapy assistants and limited licensees, may be accomplished remotely through a live audio and video connection. The Board’s rules do not specifically authorize remote supervision. However, they do not specifically prohibit it.</p> <p>Under the present circumstances, and in order to carry out the spirit of the Governor’s executive orders and federal Centers for Disease Control and Prevention guidelines related to social distancing, supervisors may use live audio and video connections to supervise occupational therapy assistants and limited licensees. It shall not be grounds for discipline that a supervisor, occupational therapy assistant, or limited licensee used a live audio and video connection to supervise or be supervised.</p> <p>The Board does not intend, by this policy, to definitively resolve whether remote supervision is permissible under its rules, but rather intends to allow limited licensees and occupational therapist assistants to practice during the declared state of emergency.</p>	<p>Insurance Department Bulletin 20-01 encouraged health insurers to liberalize telehealth benefits.</p> <p>Medicaid home health provider bulletin temporarily authorizing telehealth services, including telephonic services, to be used for home health care for state plan Medicaid providers, not for waiver providers (effective March 31, 2020).</p> <p>Bulletin for Federally Qualified Health Centers, Rural Health Centers, and Indian Health Services facilities temporarily authorizing the use of telehealth services during the state of emergency.</p> <p>Wyoming Medicaid newsletter notice regarding authorized originating sites of telehealth services and billing information. Originating sites include the office of a physician or other practitioner and skilled nursing facilities (effective January 1, 2021).</p>	<p>Medicaid: On March 27, 2020, the federal government granted an 1135 waiver; a subsequent waiver was approved on July 24, 2020.</p> <p>1915(c) Appendix K waivers allowing flexibilities in home and community-based services (HCBS) waivers granted on March 31, 2020; April 21 and 28, 2020; May 29, 2020; June 19, 2020; August 19, 2020; and January 15, 2021.</p> <p>Time-limited Medicaid state plan amendment to respond to COVID-19 approved on April 7, 2020.</p> <p>Time-limited CHIP state plan amendment to respond to COVID-19 approved on May 1, 2020.</p>
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<p>This policy shall remain in effect until July 1, 2020, or when the Governor of the State of Wyoming lifts the declared state of emergency related to the spread of COVID-19, whichever comes first. The Board may re-adopt this policy as necessary.</p> <p><u>Board statement on maintaining continuity of care during declared states of emergency (extended until July 1, 2021):</u></p> <p>The Board has received questions from occupational therapists licensed in other states regarding whether they may continue providing treatment to their clients in Wyoming who, for various reasons related to the COVID-19 outbreak, can no longer travel to them to receive care. As a policy matter, the Board strongly favors maintaining the continuity of care between an occupational therapist and a client, even if the occupational therapist is not licensed in Wyoming. Therefore, the Board hereby declares that it will not seek injunctive relief against an occupational therapist licensed in another state who continues to provide services to established clients, including through telehealth technology, during a declared state of emergency which prevents clients from traveling to their therapist.</p> <p>This policy does not authorize all unlicensed practice of occupational therapy in Wyoming. In particular, occupational therapists in other states who wish to provide services to clients in Wyoming must observe the following guidelines.</p> <ol style="list-style-type: none"> 1) The occupational therapist must have an established therapist-client relationship with the client in question. The therapist must have provided services to the client at least one time prior to providing services to the client in Wyoming. If the 		
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	<p>Board receives information that an occupational therapist licensed in another state has attempted to initiate a therapist-client relationship with a Wyoming citizen, the Board may seek an injunction against the occupational therapist.</p> <p>2) The occupational therapist must comply with Wyoming law and Chapter 3 and 7 of the Board's rules regarding the treatment of clients and holding client information confidential. If the Board receives information that an occupational therapist licensed in another state has violated Chapter 3 or 7 of its rules, the Board may seek an injunction against the occupational therapist.</p> <p>This policy shall remain in effect until July 1, 2020, or when the Governor of the State of Wyoming lifts the declared state of emergency related to the spread of COVID-19, whichever comes first. The Board may re-adopt this policy as necessary.</p>		
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