



MEMORANDUM

To: Mainstream Medicaid Managed Care (MMC) Plans
Health and Recovery Plans (HARP)
HIV-Special Needs Plans (HIV-SNP) *JB*

From: Jonathan Bick, Director
Division of Health Plan Contracting and Oversight

Date: December 17, 2018

Subject: Telehealth Innovation and 2018 Quality Incentive- Revised Statutory Citations

As you are aware, the 2018 Managed Care Quality Incentives (QI) include bonus points for telehealth innovation. Specifically, plans which submit and receive approval of a Telehealth Innovation Plan (TIP) will earn five (5) bonus points for their annual QI award. An additional one (1) QI bonus point will be earned if the TIP demonstrates enhanced access to services and seeks to improve outcomes for women with high risk pregnancies and/or children in their first 1000 days of life.

MMC Plans qualified for bonus points for their 2017 QI through submission and approval of their TIP. In 2018 MMC Plans may again qualify for QI bonus points by updating their TIP. HARP and HIV-SNP may qualify through an initial TIP in 2018. The TIP should demonstrate potential meaningful improvements in access, quality, outcomes and cost-effectiveness through telehealth services.

The TIP must comply with all telehealth laws and regulations including, but not limited to, OMH Part 596 regulations, provisions in the Medicaid Managed Care Model Contract, Public Health Law Article 29-G, and Social Services Law sections 365-a and 367-u.

Specifically, the TIP (updated or initial) must include the following components to be considered for approval:

1. A description of the linkages and synergies between the telehealth innovations and the plan's mission, goals and future state.
2. A list and summary of the plan's portfolio of telehealth projects currently in place and proposed, including incorporating expanded telehealth coverage in the benefit package pursuant to changes to Public Health Law Article 29-G and Social Services Law sections 365-a and 367-u:
 - a. additional originating and distant sites;

- b. additional practitioner types;
 - c. telehealth applications (store and forward technology and remote patient monitoring); and
 - d. as optional, the use of cost-effective alternative services, referred to as “in lieu of services” (ILS), for services not otherwise included in the benefit package.
3. An outline of the design, development and implementation approach of the telehealth projects, including milestones, timelines and adjustments.
 4. Inclusion of a description of the plan’s telehealth team and its engagement with providers, partners, members and/or other stakeholders.
 5. An explanation of how the plan will determine whether telehealth services are appropriate to the needs of the member.
 6. An outline of how the plan expects to monitor the provision of telehealth services including provider and contractor oversight; service access, utilization, and quality; patient outcomes; and cost-effectiveness.
 7. An explanation of the infrastructure that will support the telehealth innovations, and the plan’s technology-related standards required for providers to deliver services,
 8. A description of how the plan will ensure providers are appropriately trained to provide telehealth services

In order for your plan to qualify for QI bonus points, the TIP submission must be received by November 14, 2018 to OMCMail@health.ny.gov. DOH, OMH and OASAS look forward to partnering with you on this important and impactful initiative.