

Department of Legislative Services
Maryland General Assembly
2024 Session

FISCAL AND POLICY NOTE
Third Reader

House Bill 1078

(Delegate Woods, *et al.*)

Health and Government Operations

Finance

Maryland Medical Assistance Program - Remote Ultrasound Procedures and Remote Fetal Nonstress Tests

This bill requires Medicaid to provide remote ultrasound procedures and remote fetal nonstress tests using current procedural terminology (CPT) codes if (1) the patient is in a residence or a location other than the office of the patient’s provider and (2) the provider follows the same standard of care that the provider would follow when providing services on site. Medicaid must provide reimbursement for a remote fetal nonstress test in the same manner as an on-site fetal nonstress test. A remote fetal nonstress test must require the use of remote monitoring solutions that are cleared by the federal Food and Drug Administration (FDA) for on-label use for monitoring fetal heart rate, maternal heart rate, and uterine activity. Medicaid must issue guidance for providers to implement the bill.

Fiscal Summary

State Effect: The Maryland Department of Health (MDH) assumes that the target population for remote ultrasound procedures and fetal nonstress tests is accessing care as needed under current law, as discussed below. To the extent that a remote option decreases missed appointments and increases utilization of services, Medicaid expenditures (59.2% federal funds, 40.8% general funds) increase by a minimal amount beginning in FY 2025. Federal fund revenues increase accordingly.

Local Effect: None.

Small Business Effect: Minimal.

Analysis

Bill Summary: Medicaid must require that a provider offering a remote ultrasound procedure or remote fetal nonstress test use digital technology:

- to collect any health data from the patient and electronically transmit the information in a secure manner to a health care provider in a different location for interpretation and recommendations;
- that is compliant with the federal Health Insurance Portability and Accountability Act; and
- that is FDA approved.

Current Law: Medicaid currently covers synchronous telehealth services. Per Chapter 382 of 2023, telehealth flexibilities will continue through at least June 30, 2025. Medicaid provides coverage for health care services delivered through telehealth regardless of the participant's location at the time services are rendered and allows a distant-site provider to provide services to a participant from any location at which the services may be delivered through telehealth. Reimbursement for a telehealth service must be made on the same basis and at the same rate as if the service were delivered in person.

State Fiscal Effect: MDH advises that these services are currently covered under Medicaid's existing synchronous telehealth policy.

Under the bill, as the provider must follow the same standard of care that the provider would follow when providing the services on site, any remote ultrasound procedure and remote fetal nonstress test would be conducted by a trained health care provider and not directly by the patient. Thus, these services would not be considered a remote patient monitoring service. Based on the clinical nature of these services, these procedures would also not be completed asynchronously or used as a part of "Store and Forward" telehealth services. While not specified under the bill, MDH assumes that any remote ultrasounds under the bill are pregnancy-related ultrasounds of the uterus.

MDH assumes that the results of any testing will be interpreted by the health care professional receiving the results at the time of the test to ensure that, if medically necessary, urgent follow-up care can be received promptly. To bill for these services, providers will use the same CPT codes for in-person services but include coding modifiers, in addition to the standard radiology codes. The provider who performs the procedure will bill for the technical component, and the provider who interprets the results of the procedure will bill for the professional component.

Additional Information

Recent Prior Introductions: Similar legislation has not been introduced within the last three years.

Designated Cross File: None.

Information Source(s): Maryland Department of Health; Department of Legislative Services

Fiscal Note History: First Reader - March 5, 2024
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