

**59G-1.057 Telemedicine.**

(1) This rule applies to any person or entity prescribing or reviewing a request for Florida Medicaid services and to all providers of Florida Medicaid services that are enrolled in or registered with the Florida Medicaid program.

(2) Definition. Telemedicine – The practice of health care delivery by a practitioner who is located at a site other than the site where a recipient is located for the purposes of evaluation, diagnosis, or treatment.

(3) Who Can Provide. Practitioners licensed within their scope of practice to perform the service.

(4) Coverage. Florida Medicaid reimburses for telemedicine services using interactive telecommunications equipment that includes, at a minimum audio and video equipment permitting two-way, real time, interactive communication between a recipient and a practitioner.

(5) Exclusion. Florida Medicaid does not reimburse for:

(a) Telephone conversations, chart review(s), electronic mail messages, or facsimile transmissions.

(b) Equipment required to provide telemedicine services.

(6) Reimbursement. The following applies to practitioners rendering services in the fee-for-service delivery system:

(a) Florida Medicaid reimburses the practitioner who is providing the evaluation, diagnosis, or treatment recommendation located at a site other than where the recipient is located.

(b) Providers must include modifier GT on the CMS-1500 claim form, incorporated by reference in Rule 59G-4.001, F.A.C.

*Rulemaking Authority 409.919 FS. Law Implemented 409.905 FS. History–New 6-20-16.*