MHMR – Telehealth Workgroup
New Recommendation Worksheet

Fill in as many blanks as possible. Fields with an * are required in case we need to contact you for clarification. Thanks for your completing this worksheet prior to the next meeting.

Name*:

Topic: Telehealth Payment Parity

Background on topic: Per the Kansas Telemedicine Act, insurers are authorized to establish reimbursement for services in the same manner as reimbursement for covered in-person services, but payment parity (i.e., that telehealth services be reimbursed at the same rate as in-person services) is not required. The Special Committee has asked this workgroup to discuss telehealth payment parity and develop a recommendation for the State of Kansas.

Supporting Materials:
 - Kansas Telemedicine Act
 - House Bill 2208

WORKSHEET:

1. Suggest a Specific, Measurable, Achievable, Relevant, and Time-Bound (SMART) recommendation related to the topic.
   Example (using a completed 2020 recommendation): Establish coverage of telehealth for crisis services to allow for the use of telehealth with law enforcement and mobile crisis services. Explore virtual co-responder models for law enforcement to aid police departments and other law enforcement agencies as they respond to mental health crisis in rural and frontier communities.

2. Identify any research used to craft this recommendation.
   Example: Used background from the following article: Responding to Individuals in Behavioral Health Crisis via Co-Responder Models: The role of cities, counties, law enforcement and providers. *Policy Research, Inc. and National League of Cities.*

3. Identify additional research or information needed to clarify or discuss this recommendation.
   Example: It would be helpful to have information about the types of telehealth crisis codes open for Medicaid reimbursement.

4. Indicate people or groups (i.e., supplemental experts) who could discuss this recommendation.
   Example: Local law enforcement.

5. What kind of action or resources would be necessary to implement the recommendation (see rubric on next page)?
   Example: Would require state to submit a state plan amendment.

Mental Health Modernization and Reform, Working Group Recommendation Rubric, 2021

Recommendation:	
Rationale:	

Ease of Implementation *(Score 1-10):*	**Potential for High Impact** *(Score 1-10):*
Consider: ☐Program Change, (Easiest) ☐Pilot Program, ☐Program Overhaul, ☐New Program, (Most difficult) Will cost be a barrier to implementation? Does the recommendation include strategies for continuity? *(How does it consider sustainability?)* Which of the following mechanisms may affect the achievability of the recommendation? ☐ Legislative session ☐ Federal approval process ☐ Regulatory process ☐ Contracts ☐ Agency budget development ☐ Grant cycles ☐ Systems (e.g., IT)	Consider: Will it benefit a large population? ☐Yes ☐ No Will it significantly impact special populations? ☐Foster care ☐Rural communities ☐Urban communities ☐Limited English Proficient (LEP) persons ☐Low-income individuals ☐Children ☐Others? *(List here)* Does it serve those who have been disproportionately impacted by the issue? *(Does it address inequities?)* Could the recommendation produce savings in other areas?
How does this recommendation contribute to modernization?	
Action Lead: *[Who takes point on this recommendation?]*	**Key Collaborators:** *[Who should be included as decisions are made about how to implement this recommendation?]*
Intensity of Consensus: *[Is there group consensus that this recommendation is important for the modernization and reform of the behavioral health system in the state? Does a wide cross-section of stakeholders feel that this recommendation would be mutually beneficial? To be addressed during final review.]*	