



## PATRICK TESTIN

### STATE SENATOR

DATE: November 15, 2023

RE: **Testimony on 2023 Assembly Bill 500**

TO: Assembly Committee on Health, Aging, and Long-Term Care

FROM: Senator Patrick Testin

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Thank you Chairman Moses and Committee members for giving me the opportunity to testify on Assembly Bill 500.

Wisconsin has taken great steps to provide Medical Assistance recipients with greater access to health care from Wisconsin-licensed health care providers who treat patients via telehealth. This is a critical need, as Wisconsin continues to face historic health care provider shortages. By broadening the network of available licensed providers, this legislation will reduce wait times for Medical Assistance recipients to receive care. This, in turn, promotes successful health care outcomes.

Earlier this session, telehealth rules in Medicaid were finalized. Within the new rule, DHS permits health care providers who do not have a physical location in the state of Wisconsin to apply for certification as a Medical Assistance provider in order to treat Medical Assistance recipients via telehealth, so long as the provider holds a Wisconsin license and is in good standing with their respective licensing board.

This bill codifies the current administrative code into statute so Wisconsin-licensed health care providers and provider groups who are located outside have the power of statute behind them when attempting to enroll in the Medical Assistance program.

AB 500 is necessary in order to ensure the Wisconsin Medical Assistance program permanently modernizes provider and provider group enrollment rules to accommodate virtual care services.



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# ELLEN SCHUTT

STATE REPRESENTATIVE • 31<sup>ST</sup> ASSEMBLY DISTRICT

November 15, 2023

## **Testimony on Assembly Bill 500**

Thank you Chairman Moses and committee members for hearing Assembly Bill 500 today. This bill codifies current administrative code to allow Wisconsin-licensed health care providers and provider groups who are located outside the state of Wisconsin and offer telehealth services to patients in state to be able to be reimbursed in the medical assistance program.

Earlier this session, telehealth rules in Medicaid were finalized. Within the new rule, Department of Health Services (DHS) permits health care providers who do not have a physical location in the state of Wisconsin to apply for certification as a medical assistance provider in order to treat Medical Assistance recipients via telehealth, as long as the provider holds a Wisconsin license and is in good standing with their respective licensing board.

This bill prohibits DHS from requiring a health care provider or group that is licensed, certified, registered, or otherwise authorized to provide health care services in this state and that exclusively offers health care services in this state through telehealth to maintain a physical address or site in this state to be eligible for enrollment as a certified provider under the medical assistance program.

This bill is necessary in order to ensure the Wisconsin medical assistance program permanently modernizes provider and provider group enrollment rules to accommodate virtual care services.

Thank you for your consideration of Assembly Bill 500. I am happy to answer any questions you may have.



State of Wisconsin  
Department of Health Services

Tony Evers, Governor  
Kirsten L. Johnson, Secretary

**TO:** Members of the Assembly Committee on Health, Aging, and Long-Term Care

**FROM:** HJ Waukau, Legislative Director

**DATE:** November 15, 2023

**RE:** AB 500 relating to: provision of health services through telehealth by out-of-state providers under the Medical Assistance program.

The Department of Health Services (DHS) would like to submit written testimony for information only on Assembly Bill 500 (AB 500), regarding the provision of health services through telehealth by out-of-state providers under the Medical Assistance (MA) program. Under current administrative code, out-of-state health care providers that regularly provide services to Wisconsin MA recipients and that provide services to Wisconsin MA recipients through telehealth may apply for certification as a MA provider in Wisconsin regardless of the provider's location. During the COVID-19 pandemic the combination of technological advancements and the Public Health Emergency resulted in an increased utilization and expansion of coverage for telehealth modalities of service. This utilization expanded the availability of providers to connect with patients resulting in decreased scheduling delays, decreased appointment no-shows, and increased member access in provider shortage areas.

AB 500 would codify the administrative code provision, DHS 105.48(2m), by prohibiting DHS from requiring a health care provider that is licensed, certified, registered, or otherwise authorized to provide health care services in this state; and that exclusively offers health care services in this state through telehealth to maintain a physical address or site in this state to be eligible for enrollment as a certified provider under the MA program. Wisconsin Medicaid currently has existing provider enrollment processes in place to allow for providers with practice addresses outside of the state to enroll. These procedures allow for providers to enroll in one of three categories: in-state, border-status, or out-of-state. These general enrollment categories are not restricted depending on the provider's intent to provide in-person or telehealth services.

As the Department already has existing allowances in place to afford for out-of-state providers to enroll without requiring the provider to maintain a physical address in Wisconsin, this bill would align with existing authorities and serve as supporting regulation to the requirements in Wis. Stat. 49.45(61)(e)2, which prohibits DHS from requiring any additional certification or requirements for services provided solely through telehealth. It further maintains a parity established by 2019 Act 56 that providers, regardless of the service delivery method being in person or telehealth, may be certified when they are located outside of Wisconsin.

Since existing authorities do not prohibit telehealth-only providers from enrolling, this bill would align with the provisions already in place that do not limit geographic location for enrollment, unless otherwise limited by other existing authority requirements. For example, school medical services are limited to providers that are physically located in Wisconsin under Wis. Stat. 49.45(39). Any existing restrictions which would prohibit an out-of-state provider from enrolling are not expressly tied to the provision of services via telehealth.

DHS would like to thank the Committee for the opportunity to submit written testimony for information only and offers itself as a resource for the Committee.





**TO: Chairman Moses and members of the Assembly Health, Aging and Long-Term Care Committee**  
**FROM: Mercer May, Teladoc Health**  
**RE: Support for AB 500**  
**Date: November 15, 2023**

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Chairman Moses, and members of the Assembly Health, Aging and Long-Term Care Committee, thank you very much for the opportunity to provide testimony in support of Assembly Bill 500. My name is Mercer May; I am the Director of State Government Affairs at Teladoc Health.

For those of you unfamiliar with Teladoc Health, we are the world's oldest and largest telehealth company. Today in Wisconsin, roughly 135,000 Wisconsin Medicaid beneficiaries are eligible for one of Teladoc Health's services, with 122 Wisconsin-licensed physicians in our Medicaid managed care provider group supporting Molina and the Group Health Collaborative of Eau Claire. It is important to note that all Teladoc Health providers are licensed by their respective professional licensing boards in Wisconsin. **In short, our providers are your providers.**

Until recently, some Wisconsin-licensed providers struggled to enroll as an in-state Medicaid provider because the administrative code would not acknowledge an out-of-state address of a provider as eligible to enroll. If a Wisconsin-licensed provider was using a technology platform to treat patients in Wisconsin and the platform was technically headquartered out of state, then Wisconsin Medicaid policy would require the Wisconsin-licensed provider to hold a valid license in that other state to enroll as a Medicaid provider in this state. This policy was not workable with the evolution of telemedicine. **When telehealth is used, it is considered to be rendered at the physical location of the patient – not the provider's location and certainly not the headquarters of the software the provider uses to conduct a virtual visit.**

The Department of Health Services agreed that the Medicaid policy needed to change and addressed it in their larger telehealth administrative rule-making which was approved by this committee earlier in the year. The rule ensured that providers who are licensed in Wisconsin, who regularly provide services to Wisconsin Medicaid beneficiaries through telehealth can do so regardless of the provider's location.

Assembly Bill 500 would codify this administrative action by prohibiting DHS from requiring a health care provider or provider group consisting entirely of health care providers that are licensed, certified, registered, or otherwise authorized to provide health care services in Wisconsin and that exclusively offers health care services in this state through telehealth, to maintain a physical address or site in this state to be eligible for enrollment as a certified provider under the Medical Assistance program.

Similar language to what is being considered here this morning, has been introduced, passed, and signed into law during the 2023 Legislative Session in Virginia, Tennessee, Kentucky, and Indiana. Teladoc Health urges you to support AB 500 as a commonsense belts and suspenders measure that will save money, improve health outcomes, and mitigate provider shortages.

Chairman Moses and member, thank you for allowing me to testify today to share Teladoc Health's support for AB 500. I will be glad to answer any questions the Committee may have.