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What is the definition of “telemedicine” or “telehealth”?

Illinois statutes define “telemedicine” as “the performance of any of the activities . . . including but not limited to rendering written or oral opinions concerning diagnosis or treatment of a patient in Illinois by a person located outside the State of Illinois as a result of transmission of individual patient data by telephonic, electronic, or other means of communication from within [Illinois].”

[225 ILL. COMP. STAT. 60/49.5\(c\).](#)

In the Medicaid context, “telehealth” is defined as “the use of a telecommunication system to provide medical services between places of lesser and greater medical capability and/or expertise, for the purpose of evaluation and treatment. Medical data exchanged can take the form of multiple formats: text, graphics, still images, audio, and video. The information or data exchanged can occur in real time (synchronous) through interactive video or multimedia collaborative environments or in near real time (asynchronous) through ‘store and forward’ applications. . . .”

[Illinois Department of Healthcare and Family Services, *Handbook for Practitioners Rendering Medical Services*, ch. A-200 \(issued Oct. 2016\), at 8.](#)

COUNSELORS

What is the regulatory body in the state that governs the practice of counseling?

Updated link: [Illinois Department of Financial and Professional Regulation – Professional Counselor](#)

Does Medicaid provide coverage for telemental/telebehavioral/telepsychiatric health services? If so, what are the coverage criteria?

“For telemedicine services, the provider rendering the service at the distant site can be a physician, physician assistant, podiatrist, or APN who is licensed by the State of Illinois or by the state where the participant is located.”

[Illinois Department of Healthcare and Family Services, *Handbook for Practitioners Rendering Medical Services*, ch. A-200 \(issued Oct. 2016\), at 9.](#)

“For telepsychiatry services, the provider rendering the service at the distant site must be a physician licensed by the State of Illinois, or by the state where the patient is



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located, who has completed an approved general psychiatric residency program or a child and adolescent psychiatric residency program. . . .”

[Illinois Department of Healthcare and Family Services, *Handbook for Practitioners Rendering Medical Services*, ch. A-200 \(issued Oct. 2016\), at 9.](#)

The requirements for the provision of telepsychiatry services to Illinois Medicaid recipients include the following:

- A. A physician, licensed health care professional or other licensed clinician, mental health professional (MHP), or qualified mental health professional (QMHP) . . . must be present at all times with the patient at the originating site.
- B. The distant site provider must be a physician licensed by the State of Illinois or by the state where the patient is located and must have completed an accredited general psychiatry residency program or an accredited child and adolescent psychiatry residency program.
- C. The originating and distant site provider must not be terminated, suspended, or barred from the [Illinois Department of Healthcare and Family Services'] medical programs.
- D. The distant site provider must personally render the telepsychiatry service.
- E. Telepsychiatry services must be rendered using an interactive telecommunication system.
- F. Group psychotherapy is not a covered telepsychiatry service.

[ILL. ADMIN. CODE tit. 89, § 140.403\(b\)\(2\).](#)