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## DIGEST

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HB 589 Original

2020 Regular Session

Echols

**Abstract:** Provides for Medicaid policies and procedures relative to telehealth and Medicaid reimbursement for telehealth services.

Proposed law provides that, for its purposes, "telehealth" shall have the following meaning ascribed in the La. Telehealth Access Act (R.S. 40:1223.1 et seq. of present law):

"Telehealth" means a mode of delivering healthcare services that utilizes information and communication technologies to enable the diagnosis, consultation, treatment, education, care management, and self-management of patients at a distance from healthcare providers. Telehealth allows services to be accessed when providers are in a distant site and patients are in the originating site. Telehealth facilitates patient self-management and caregiver support for patients and includes synchronous interactions and asynchronous store and forward transfers.

Proposed law requires the La. Department of Health (LDH) to periodically review policies regarding Medicaid reimbursement for telehealth services to identify variations between permissible Medicaid reimbursement and reimbursement available to healthcare providers under the Medicare program.

Proposed law authorizes LDH to modify its administrative rules, policies, and procedures applicable to Medicaid reimbursement for telehealth services as necessary to provide for a reimbursement system that is comparable to that of the Medicare program.

Present law provides relative to policies and procedures instituted by LDH for the operation of the Medicaid managed care program of this state. Proposed law retains present law and adds thereto a requirement that LDH include in its Medicaid policies and procedures all of the following information relating to telehealth:

- (1) An exhaustive listing of the covered healthcare services which may be furnished through telehealth.
- (2) Processes by which providers may submit claims for reimbursement for healthcare services furnished through telehealth.
- (3) The conditions under which a managed care organization may reimburse a provider or facility that is not physically located in La. for healthcare services furnished to a La. Medicaid enrollee through telehealth.

(Adds R.S. 40:1255.1 and 1255.2 and R.S. 46:460.51(17) and 460.54(G))