

2020 Regular Session

HOUSE BILL NO. 530

BY REPRESENTATIVE ECHOLS

INSURANCE/HEALTH: Provides for coverage of healthcare services provided through telehealth or telemedicine

1 AN ACT

2 To enact Subpart B-1 of Part II of Chapter 6 of Title 22 of the Louisiana Revised Statutes,
3 to be comprised of R.S. 22:1841 through 1847, and to repeal R.S. 22:1821(F),
4 relative to payment of claims for services provided through telehealth or
5 telemedicine; to define key terms; to require reimbursement for healthcare services
6 provided through telehealth and telemedicine; to provide for reimbursement for
7 healthcare services provided through store-and-forward telemedicine; to provide for
8 reimbursement for healthcare services provided through remote patient monitoring;
9 and to provide for related matters.

10 Be it enacted by the Legislature of Louisiana:

11 Section 1. Subpart B-1 of Part II of Chapter 6 of Title 22 of the Louisiana Revised
12 Statutes, comprised of R.S. 22:1841 through 1847, is hereby enacted to read as follows:

13 SUBPART B-1. MEDICAL CLAIMS FOR SERVICES PROVIDED THROUGH
14 TELEHEALTH AND TELEMEDICINE

15 §1841. Definitions

16 For the purposes of this Subpart, the following definitions apply:

17 (1) "Health coverage plan" means any hospital, health, or medical expense
18 insurance policy, hospital or medical service contract, employee welfare benefit plan,
19 contract, or other agreement with a health maintenance organization or a preferred
20 provider organization, health and accident insurance policy, or any other insurance

1 contract of this type in this state, including a group insurance plan, a self-insurance
2 plan, and the Office of Group Benefits programs. "Health coverage plan" shall not
3 include a plan providing coverage for excepted benefits as defined in R.S. 22:1061,
4 limited benefit health insurance plans, and short-term policies that have a term of
5 less than twelve months.

6 (2) "Healthcare professional" means all of the following:

7 (a) An individual who is licensed or certified in this state to perform
8 healthcare services or authorized to assist a physician in providing telemedicine
9 medical services that are delegated and supervised by the physician.

10 (b) A licensed or certified healthcare professional acting within the scope of
11 the license or certification who does not perform a telehealth healthcare service or
12 telemedicine medical service.

13 (3) "Medication adherence management services" means the monitoring of
14 a patient's conformance with the healthcare professional's medication plan with
15 respect to timing, dosing, and frequency of medication-taking through electronic
16 transmission of data in a remote patient monitoring services program.

17 (4) "Platform" means the technology, system, software, application,
18 modality, or other method through which a healthcare professional remotely
19 interfaces with a patient when providing a healthcare service or procedure as a
20 telemedicine medical service or telehealth healthcare service.

21 (5) "Qualifying patient" means an individual who meets all the following
22 criteria:

23 (a) Be diagnosed, in the last eighteen months, with one or more chronic
24 conditions, as defined by the Centers for Medicare and Medicaid Services which
25 include but are not limited to sickle cell, mental health, asthma, diabetes, and heart
26 disease.

27 (b) Has a recent history of costly service use due to one or more chronic
28 conditions as evidenced by two or more hospitalizations, including emergency room
29 visits, in the last twelve months.

1 (c) The individual's attending healthcare professional recommends disease
2 management services through remote patient monitoring.

3 (6) "Qualified telemedicine equipment and network" means the telemedicine
4 equipment and network used for remote patient monitoring services that meets all
5 of the following requirements:

6 (a) Complies with applicable standards of the United States Food and Drug
7 Administration.

8 (b) Maintains telehealth equipment in good repair and free from safety
9 hazards.

10 (c) Installs only new or sanitized equipment in the patient's home setting.

11 (d) Accommodates language options other than English.

12 (e) Has available technical and clinical support services for the patient user
13 twenty-four hours a day, seven days a week.

14 (f) Has telemonitoring equipment that is both of the following:

15 (i) Capable of monitoring any data parameters in the plan of care.

16 (ii) An United States Food and Drug Administration Class II hospital-grade
17 medical device.

18 (7) "Remote patient monitoring services" means the delivery of home health
19 services using telecommunications technology to enhance the delivery of home
20 health care, including but not limited to all of the following:

21 (a) Monitoring of clinical patient data such as weight, blood pressure, pulse,
22 pulse oximetry, and other condition-specific data, such as blood glucose.

23 (b) Medication adherence monitoring.

24 (c) Interactive video conferencing with or without digital image upload.

25 (8) "Store-and-forward telemedicine services" means the use of
26 asynchronous computer-based communication between a patient and a consulting
27 healthcare professional or a referring healthcare professional and a medical specialist
28 at a distant site for the purpose of diagnostic and therapeutic assistance in the care
29 of patients who otherwise have no access to specialty care. Store-and-forward

1 telemedicine services involve the transferring of medical data from one site to
2 another through the use of a camera or similar device that records an image that is
3 sent by telecommunication to another site for consultation.

4 (5) "Telehealth" shall have the same meaning as defined in R.S. 40:1223.3.

5 (6) "Telemedicine" shall have the same meaning as defined in R.S. 37:1262.

6 §1842. Telehealth and telemedicine reimbursement

7 A.(1) Any health coverage plan delivered or issued for delivery in this state
8 shall provide coverage for a covered healthcare service or procedure delivered by a
9 preferred or contracted healthcare professional to a covered patient as a telemedicine
10 medical service or a telehealth healthcare service on the same basis and to the same
11 extent that the plan provides coverage for the service or procedure in an in-person
12 setting.

13 (2) A health coverage plan may limit coverage to healthcare professionals
14 in a telemedicine or telehealth network approved by the plan.

15 (3) Nothing in this Section shall be construed to prohibit a health coverage
16 plan from providing coverage for only those services that are medically necessary,
17 subject to the terms and conditions of the covered person's policy.

18 (4) In a claim for the services provided, the appropriate procedure code for
19 the covered services shall be included with the appropriate modifier indicating
20 interactive communication was used.

21 (5)(a) A payment, benefit, or reimbursement under a health coverage plan
22 shall not be denied to a healthcare professional conducting or participating in the
23 transmission at the originating healthcare facility or terminus who is physically
24 present with the individual who is the subject of the electronic imaging transmission
25 and is contemporaneously communicating and interacting with a healthcare
26 professional at the receiving terminus of the transmission.

27 (b) The payment, benefit, or reimbursement to the healthcare professional
28 at the originating facility or terminus shall not be less than seventy-five percent of

1 the reasonable and customary amount of payment, benefit, or reimbursement which
2 that healthcare professional receives for an intermediate office visit.

3 B. The health coverage plan shall not do any of the following:

4 (1) Exclude from coverage a covered healthcare service or procedure
5 delivered by a preferred or contracted healthcare professional to a covered patient
6 as a telemedicine medical service or a telehealth healthcare service solely because
7 the covered healthcare service or procedure is not provided through an in-person
8 consultation.

9 (2) Except as provided in Subsection D of this Section, limit, deny, or
10 reduce coverage for a covered healthcare service or procedure delivered as a
11 telemedicine medical service or telehealth healthcare service based on the healthcare
12 professional's choice of platform for delivering the service or procedure.

13 C.(1) A health coverage plan may require a deductible, copayment, or
14 coinsurance for a covered healthcare service or procedure delivered by a preferred
15 or contracted healthcare professional to a covered patient as a telemedicine medical
16 service or a telehealth healthcare service.

17 (2) The amount of the deductible, copayment, or coinsurance shall not
18 exceed the amount of the deductible, copayment, or coinsurance required for the
19 covered healthcare service or procedure provided through an in-person consultation.

20 (3) This Subsection shall not be construed to authorize a health coverage
21 plan to charge a separate deductible that applies only to a covered healthcare service
22 or procedure delivered as a telemedicine medical service or telehealth healthcare
23 service.

24 D. Notwithstanding any provision of Subsection A of this Section, a health
25 coverage plan shall not be required to provide coverage for a telemedicine medical
26 service or a telehealth healthcare service provided by only synchronous or
27 asynchronous audio interaction, including but not limited to any of the following:

28 (1) An audio-only telephone consultation.

29 (2) A text-only email message.

1 (3) A facsimile transmission.

2 E. A health coverage plan shall not impose an annual or lifetime maximum
3 on coverage for covered healthcare services or procedures delivered as telemedicine
4 medical services or telehealth healthcare services other than the annual or lifetime
5 maximum, if any, that applies in the aggregate to all items and services and
6 procedures covered under the plan.

7 F. Terminology in a health coverage plan that either discriminates against
8 or prohibits a method of transmitted electronic imaging, telehealth, or telemedicine
9 shall be void as against Louisiana's public policy of providing the highest quality
10 health care to the residents of the state.

11 §1843. Telemedicine medical services and telehealth healthcare services statement

12 A. Each issuer of a health coverage plan shall adopt and display in a
13 conspicuous manner on the health coverage plan issuer's internet website the issuer's
14 policies and payment practices for telemedicine medical services and telehealth
15 healthcare services.

16 B. This Section shall not require an issuer of a health coverage plan to
17 display negotiated contract payment rates for healthcare professionals who contract
18 with the issuer to provide telemedicine medical services or telehealth healthcare
19 services.

20 §1844. Store-and-forward telemedicine services

21 A. The legislature hereby finds that store-and-forward telemedicine services
22 allow a healthcare professional trained and licensed in a given specialty to review
23 forwarded images and patient history in order to provide diagnostic and therapeutic
24 assistance in the care of the patient without the patient being present in real time.

25 B.(1) Any health coverage plan delivered or issued for delivery in this state
26 shall provide coverage and reimbursement for the asynchronous telemedicine
27 services of store-and-forward telemedicine services.

1 (2) Store-and-forward telemedicine services shall be reimbursed to the same
2 extent that the services would be covered if they were provided through in-person
3 consultation.

4 (3)(a) Any patient receiving medical care by store-and-forward telemedicine
5 services shall be notified of the right to receive interactive communication with the
6 distant specialist healthcare professional and shall receive an interactive
7 communication with the distant specialist upon request. If requested,
8 communication with the distant specialist shall occur at the time of the consultation
9 or no more than thirty days after receipt of the patient's notification of the request
10 for the consultation.

11 (b) Telemedicine networks unable to offer the interactive consultation shall
12 not be reimbursed for store-and-forward telemedicine services.

13 C.(1) Healthcare professionals seeking reimbursement for store-and-forward
14 telemedicine services shall be licensed Louisiana providers that are affiliated with
15 an established Louisiana healthcare facility in order to qualify for reimbursement of
16 telemedicine services in the state.

17 (2) If a service is not available in Louisiana, then a health coverage plan may
18 decide to allow a non-Louisiana-based healthcare professional who is licensed to
19 practice in Louisiana reimbursement for those services.

20 §1845. Remote patient monitoring services

21 A. The legislature hereby finds all of the following:

22 (1) Remote patient monitoring services aim to allow more people to remain
23 at home or in other residential settings and to improve the quality and cost of their
24 care, including prevention of more costly care.

25 (2) The goal of remote patient monitoring services provided through
26 telehealth is to coordinate primary, acute, behavioral, and long-term social service
27 needs for high need, high cost patients.

28 B. Any health coverage plan delivered or issued for delivery in this state
29 shall provide coverage and reimbursement for remote patient monitoring services

1 using qualified telemedicine equipment and network for a qualifying patient pursuant
2 to the provisions of this Section.

3 C. To receive reimbursement for the delivery of remote patient monitoring
4 services through telehealth, all of the following conditions shall be met:

5 (1) The services shall consist of all of the following:

6 (a) An assessment, problem identification, and evaluation which includes all
7 of the following:

8 (i) Assessment and monitoring of clinical data including but not limited to
9 appropriate vital signs, pain levels, and other biometric measures specified in the
10 plan of care and an assessment of responses to previous changes in the plan of care.

11 (ii) Detection of condition changes based on the telehealth encounter that
12 may indicate the need for a change in the plan of care.

13 (b) Implementation of a management plan through one or more of the
14 following:

15 (i) Teaching regarding medication management as appropriate based on the
16 telehealth findings for that encounter.

17 (ii) Teaching regarding other interventions as appropriate to both the patient
18 and the caregiver.

19 (iii) Management and evaluation of the plan of care including changes in
20 visit frequency or addition of other skilled services.

21 (iv) Coordination of care with the ordering healthcare professional regarding
22 the telehealth findings.

23 (v) Coordination and referral to other healthcare professionals as needed.

24 (vi) Referral for an in-person visit or the emergency room as needed.

25 (2) The entity that will provide the remote monitoring services shall be a
26 Louisiana-based entity and have protocols in place to address all of the following:

27 (a) Authentication and authorization of users.

28 (b) A mechanism for monitoring, tracking and responding to changes in the
29 patient's clinical condition.

1 (c) A standard of acceptable and unacceptable parameters for the patient's
2 clinical parameters, which can be adjusted based on the patient's condition.

3 (d) How monitoring staff will respond to abnormal parameters for the
4 patient's vital signs, symptoms, or lab results.

5 (e) The monitoring, tracking, and responding to changes in the patient's
6 clinical condition.

7 (f) The process for notifying the prescribing healthcare professional for
8 significant changes in the patient's clinical signs and symptoms.

9 (g) The prevention of unauthorized access to the system or information.

10 (h) System security, including the integrity of information that is collected,
11 program integrity, and system integrity.

12 (i) Information storage, maintenance, and transmission.

13 (j) Synchronization and verification of patient profile data.

14 (k) Notification of the patient's discharge from the remote patient monitoring
15 services or the deinstallation of the remote patient monitoring unit.

16 D.(1) A remote patient monitoring prior authorization request form shall be
17 submitted to the health coverage plan to request coverage for remote patient
18 monitoring services.

19 (2) The request shall include all of the following:

20 (a) An order for home telemonitoring services, signed and dated by the
21 prescribing healthcare professional.

22 (b) A plan of care, signed and dated by the prescribing healthcare
23 professional, that includes telemonitoring transmission frequency and duration of
24 monitoring requested.

25 (c) The patient's diagnosis and risk factors that qualify the patient for home
26 telemonitoring services.

27 (d) An attestation that the patient is sufficiently cognitively intact and able
28 to operate the equipment or has a willing and able person to assist in completing
29 electronic transmission of data.

1 (e) An attestation that the patient is not receiving duplicative services
2 through another provider.

3 E.(1) Remote patient monitoring services shall receive reimbursement at a
4 daily monitoring rate of a minimum of ten dollars per day each month and sixteen
5 dollars per day when medication adherence management services are included, not
6 to exceed thirty-one days per month.

7 (2) A one-time telehealth installation and training fee for remote patient
8 monitoring services shall also be reimbursed at a minimum rate of fifty dollars per
9 patient, with a maximum of two installation and training fees per calendar year.

10 (3) Only Louisiana-based telehealth or telemedicine programs affiliated with
11 a Louisiana healthcare facility shall be eligible for the reimbursement rates provided
12 for in this Subsection.

13 §1846. Coverage for asynchronous telehealth and telemedicine services

14 A. A health coverage plan may charge a deductible, co-payment, or
15 coinsurance for a healthcare service provided through store-and-forward
16 telemedicine services or remote patient monitoring services if the amount charged
17 does not exceed the deductible, co-payment, or coinsurance applicable to an
18 in-person consultation.

19 B. A health coverage plan may limit coverage for store-and-forward
20 telemedicine services or remote patient monitoring services to healthcare providers
21 in a telemedicine network approved by the plan.

22 C. Nothing in this Subpart shall be construed to prohibit a health coverage
23 plan from providing coverage for only those store-and-forward telemedicine services
24 or remote patient monitoring services that are medically necessary, subject to the
25 terms and conditions of the covered person's policy.

26 D. No geographic restrictions shall be placed on the delivery of telemedicine
27 services in the home setting other than requiring the patient reside within the state
28 of Louisiana.

1 E. In a reimbursement claim for store-and-forward telemedicine services or
2 remote patient monitoring services provided, the appropriate procedure code for the
3 covered service shall be included with the appropriate modifier indicating telehealth
4 or telemedicine services were used.

5 §1847. Exclusions

6 The provisions of this Subpart shall not apply to any plan providing coverage
7 for excepted benefits as defined in R.S. 22:1061, limited benefit health insurance
8 plans, and short-term policies that have a term of less than twelve months.

9 Section 2. R.S. 22:1821(F) is hereby repealed in its entirety.

DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

HB 530 Original

2020 Regular Session

Echols

Abstract: Requires health insurance coverage for services provided through telehealth or telemedicine.

Proposed law defines "health coverage plan", "healthcare professional", "medication adherence management services", "platform", "qualifying patient", "qualified telemedicine equipment and network", "remote patient monitoring services", "store-and-forward telemedicine services", "telehealth", and "telemedicine".

Proposed law requires any health coverage plan delivered or issued for delivery in this state to provide coverage for a covered healthcare service or procedure delivered by a preferred or contracted healthcare professional to a covered patient as a telemedicine medical service or a telehealth healthcare service on the same basis and to the same extent that the plan provides coverage for the service or procedure in an in-person setting subject to the limitations established by proposed law.

Proposed law provides an exception for a telemedicine medical service or a telehealth healthcare service provided by only synchronous or asynchronous audio interaction, including but not limited to an audio-only telephone consultation, a text-only email message, or a facsimile transmission.

Proposed law requires an issuer of a health coverage plan to adopt and display in a conspicuous manner on the health coverage plan issuer's internet website the issuer's policies and payment practices for telemedicine medical services and telehealth healthcare services.

Proposed law requires any health coverage plan delivered or issued for delivery in this state to provide coverage and reimbursement for the asynchronous telemedicine services of store-and-forward telemedicine services to the same extent that the services would be covered if they were provided through in-person consultation, subject to the limitations established by proposed law.

Proposed law provides that any patient receiving medical care by store-and-forward telemedicine services may request interactive communication with the distant specialist healthcare professional and prohibits any telemedicine network unable to offer the interactive consultation from being reimbursed for store-and-forward telemedicine services.

Proposed law requires any health coverage plan delivered or issued for delivery in this state to provide coverage and reimbursement for remote patient monitoring services using qualified telemedicine equipment and network for a qualifying patient, subject to the limitations established by proposed law.

Proposed law requires remote patient monitoring services through telehealth to consist of an assessment, problem identification, and evaluation and the implementation of a management plan.

Proposed law requires the entity that will provide the remote monitoring services to be a Louisiana-based entity and have certain enumerated protocols in place.

Proposed law requires a remote patient monitoring prior authorization request form to be submitted to the health coverage plan to request coverage for remote patient monitoring services.

Proposed law requires remote patient monitoring services to be reimbursed at a daily monitoring rate of a minimum of \$10 per day each month and \$16 per day when medication adherence management services are included, not to exceed 31 days per month, and a one-time telehealth installation and training fee for remote patient monitoring services at a minimum rate of \$50 per patient, with a maximum of two installation and training fees per calendar year.

Proposed law limits eligibility for the reimbursement rates to only La.-based telehealth or telemedicine programs affiliated with a La. healthcare facility.

Proposed law does not apply to any plan providing coverage for excepted benefits, limited benefit health insurance plans, and short-term policies that have a term of less than 12 months.

Present law prohibits a reimbursement under a health coverage plan from being denied to a healthcare provider conducting or participating in the transmission at the originating healthcare facility or terminus who is physically present with the patient and is contemporaneously communicating and interacting with a healthcare professional at the receiving terminus of the transmission. Further requires the reimbursement to the healthcare professional at the originating facility or terminus to be not less than 75% of the reasonable and customary amount of reimbursement which that healthcare professional receives for an intermediate office visit.

Proposed law retains present law but relocates the provisions to a new citation.

(Adds R.S. 22:1841-1847; Repeals R.S. 22:1821(F))