

2022 Regular Session

HOUSE BILL NO. 304

BY REPRESENTATIVE FRIEMAN

INSURANCE/HEALTH: Provides relative to health coverage plan benefits for physical therapy services delivered via telehealth

1 AN ACT

2 To enact Subpart B-2 of Part II of Chapter 6 of Title 22 of the Louisiana Revised Statutes
3 of 1950, to be comprised of R.S. 22:1845.1, relative to payment of claims for
4 physical therapy services provided through telehealth; to prohibit maximum amounts
5 of coverage and other conditions for coverage relative to telehealth services that are
6 inapplicable to in-person services; to authorize enforcement and rulemaking; to
7 provide for definitions; and to provide for related matters.

8 Be it enacted by the Legislature of Louisiana:

9 Section 1. Subpart B-2 of Part II of Chapter 6 of Title 22 of the Louisiana Revised
10 Statutes of 1950, comprised of R.S. 22:1845.1, is hereby enacted to read as follows:

11 SUBPART B-2. COVERAGE AND PAYMENT PARITY

12 FOR PHYSICAL THERAPY DELIVERED VIA TELEHEALTH

13 §1845.1 Telehealth coverage and reimbursement; prohibitions and limitations;
14 rulemaking

15 A. A health coverage plan shall pay for covered services provided via
16 telehealth to an insured person. Telehealth coverage and payment shall be equivalent
17 to the coverage and payment for the same service provided in person unless the
18 telehealth provider and the health coverage plan contractually agree to an alternative
19 payment rate for telehealth services.

1 B. Benefits for a service provided as telehealth may be subject to a
2 deductible, copayment, or coinsurance. A deductible, copayment, or coinsurance
3 applicable to a particular service provided through telecommunications technology
4 shall not exceed the deductible, copayment, or coinsurance required by the health
5 coverage plan for the same service when provided in person.

6 C. A health coverage plan shall not impose an annual dollar maximum on
7 coverage for healthcare services covered under the health coverage plan that are
8 provided as telehealth, other than an annual dollar maximum that applies to the same
9 services when provided in person by the same provider.

10 D. A health coverage plan shall require a healthcare professional to be
11 licensed or otherwise authorized to practice physical therapy in this state to be
12 eligible to receive payment for telehealth services.

13 E. Payment made pursuant to this Section shall be consistent with any
14 provider network arrangements that have been established for the health coverage
15 plan.

16 F. A health coverage plan shall not do any of the following:

17 (1) Require a previously established in-person relationship or the provider
18 to be physically present with a patient or client, unless the provider determines that
19 it is necessary to perform that service in person.

20 (2) Require prior authorization, medical review, or administrative clearance
21 for telehealth that would not be required if that service were provided in person.

22 (3) Require demonstration that it is necessary to provide services to a patient
23 or client as telehealth.

24 (4) Require a provider to be employed by another provider or agency in
25 order to provide telehealth services that would not be required if that service were
26 provided in person.

27 (5) Restrict or deny coverage based solely on the communication technology
28 or application used to provide the telehealth service.

1 (6) Impose specific requirements or limitations on the technologies used to
2 provide telehealth services.

3 (7) Impose additional certification, location, or training requirements as a
4 condition of payment for telehealth services.

5 (8) Require a provider to be part of a telehealth network.

6 G. Nothing in this Section shall be construed to require a health coverage
7 plan to do either of the following:

8 (1) Provide coverage for telehealth services that are not medically necessary.

9 (2) Reimburse any fees charged by a telehealth facility for transmission of
10 a telehealth encounter.

11 H. The department may take any action authorized in this Title to enforce the
12 provisions of this Section and the commissioner may, in compliance with the
13 Administrative Procedure Act, R.S. 49:950 et seq., promulgate and adopt rules as are
14 necessary or advisable to effectuate the provisions of this Section.

15 I. For purposes of this Section, the following definitions apply:

16 (1) "Health coverage plan" has the same meaning as provided for in R.S.
17 22:1841.

18 (2) "Telehealth" has the same meaning as provided for in R.S. 40:1223.3.

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 304 Original

2022 Regular Session

Frieman

Abstract: Requires health benefits and payment parity equal to in-person services for physical therapy delivered via telehealth.

Proposed law requires a health coverage plan (plan) to pay for covered services provided via telehealth to an insured person. Requires equivalency for telehealth coverage and payment for the same service provided in person, unless the telehealth provider and plan contractually agree to an alternative payment rate. Provides that services via telehealth may be subject to a deductible, copayment, or coinsurance not in excess of the deductible, copayment, or coinsurance required by the plan for in-person services.

Proposed law prohibits a plan from imposing an annual dollar maximum on coverage for healthcare services provided as telehealth, other than an annual dollar maximum that applies to the same services when provided in person by the same provider.

Proposed law requires a plan to provide payment for telehealth services to healthcare professionals licensed or otherwise permitted to practice physical therapy in this state. Further requires telehealth payments to be consistent with any provider network arrangements that have been established for the plan.

Proposed law prohibits a plan from doing any of the following:

- (1) Requiring a previously established in-person relationship or the provider to be physically present with a patient or client, unless the provider determines that it is necessary to perform that service in person.
- (2) Requiring prior authorization, medical review, or administrative clearance for telehealth that would not be required if that service were provided in person.
- (3) Requiring demonstration that it is necessary to provide services to a patient or client as telehealth.
- (4) Requiring a provider to be employed by another provider or agency in order to provide telehealth services that would not be required if that service were provided in person.
- (5) Restricting or denying coverage based solely on the communication technology or application used to provide the telehealth service.
- (6) Imposing specific requirements or limitations on the technologies used to provide telehealth services.
- (7) Imposing additional certification, location, or training requirements as a condition of payment for telehealth services.
- (8) Requiring a provider to be part of a telehealth network.

Nothing in proposed law requires a plan to provide coverage for telehealth services that are not medically necessary or to reimburse any fees charged by a telehealth facility for transmission of a telehealth encounter.

Proposed law authorizes the Department of Insurance to take any action authorized in the La. Insurance Code to enforce the provisions of proposed law and further authorizes the commissioner, in accordance with the APA, to promulgate and adopt rules as necessary or advisable to effectuate proposed law.

Proposed law defines "health coverage plan" and "telehealth".

(Adds R.S. 22:1845.1)