

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; to provide for exceptions; to provide for effectiveness; and  
8 to provide for related matters.

9 Be it enacted by the Legislature of Louisiana:

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

12 SUBPART B-2. COVERAGE AND PAYMENT PARITY

13 FOR PHYSICAL THERAPY DELIVERED VIA TELEHEALTH

14 §1845.1. Telehealth coverage and reimbursement; prohibitions and limitations;  
15 exceptions; rulemaking

16 A. A health coverage plan shall pay for covered physical therapy services  
17 provided via telehealth to an insured person. Telehealth coverage and payment shall  
18 be equivalent to the coverage and payment for the same service provided in person  
19 unless the telehealth provider and the health coverage plan contractually agree to an  
20 alternative 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; however, a health coverage plan

1 may restrict physical therapy services via telehealth when the services are being  
2 provided solely by telephone.

3 (6) Impose specific requirements or limitations on the technologies used to  
4 provide telehealth services; however, a health coverage plan may require the  
5 provider to demonstrate that the technology used to provide telehealth services is  
6 both safe and secure.

7 (7) Impose additional certification, location, or training requirements as a  
8 condition of payment for telehealth services; however, this Paragraph does not  
9 prohibit a health coverage plan from providing additional reimbursement incentives  
10 to providers with an enhanced certification, training, or accreditation.

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

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

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

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

17 H. A health coverage plan is not required to provide coverage or  
18 reimbursement for any of the following procedures or services provided via  
19 telehealth:

20 (1) A modality that is a type of electrical, thermal, or mechanical energy.

21 (2) Manual therapy, massage, dry needling, or other invasive procedures.

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

26 J. For purposes of this Section, the following definitions apply:

27 (1) "Health coverage plan" has the same meaning as provided for in R.S.  
28 22:1841.

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

1 Section 2. This Act shall apply to any new health coverage plan issued on and after  
2 January 1, 2023. Any health coverage plan in effect prior to January 1, 2023, shall convert  
3 to conform to the provisions of this Act on or before the renewal date, but no later than  
4 January 1, 2024.

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## 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)]

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HB 304 Reengrossed

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 physical therapy 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. However, proposed law authorizes a health coverage plan to restrict physical therapy services via telehealth when the services are being provided solely by telephone.

- (6) Imposing specific requirements or limitations on the technologies used to provide telehealth services. However, proposed law authorizes a health coverage plan to require a provider to demonstrate that the technology used to provide telehealth services is both safe and secure.
- (7) Imposing additional certification, location, or training requirements as a condition of payment for telehealth services. However, proposed law does not prohibit a health coverage plan from providing additional reimbursement incentives to providers with an enhanced certification, training, or accreditation.
- (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 does not require a health coverage plan to provide coverage or reimbursement for any of the following procedures or services provided via telehealth:

- (1) A modality that is a type of electrical, thermal, or mechanical energy.
- (2) Manual therapy, massage, dry needling, or other invasive procedures.

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".

Proposed law requires a current health coverage plan to conform to the provisions of proposed law by Jan. 1, 2024.

Effective Jan. 1, 2023.

(Adds R.S. 22:1845.1)

#### Summary of Amendments Adopted by House

The Committee Amendments Proposed by House Committee on Insurance to the original bill:

- 1. Authorize a health coverage plan to restrict physical therapy services via telehealth when the services are being provided solely by telephone.
- 2. Authorize a health coverage plan to require a provider to demonstrate that the technology used to provide telehealth services is both safe and secure.
- 3. Add that proposed law does not prohibit a health coverage plan from providing additional reimbursement incentives to providers with an enhanced certification, training, or accreditation.
- 4. Require any health coverage plan in effect prior to Jan. 1, 2023, to conform to the provisions of proposed law on or before the renewal date, but no later than Jan. 1, 2024.
- 5. Make technical changes.

The House Floor Amendments to the engrossed bill:

1. Add that proposed law does not require a health coverage plan to provide coverage or reimbursement for procedures or services provided via telehealth by modalities of electric, thermal, or mechanical energy or for manual therapy, massage, dry needling, or other invasive procedures.
2. Make technical changes.