

2023 Regular Session

HOUSE BILL NO. 41

BY REPRESENTATIVE FRIEMAN

Prefiled pursuant to Article III, Section 2(A)(4)(b)(i) of the Constitution of Louisiana.

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

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AN ACT

To amend and reenact the heading of Subpart B-2 of Part II of Chapter 6 of Title 22 of the Louisiana Revised Statutes of 1950 and R.S. 22:1845.1(Section heading) and to enact R.S. 22:1845.2, relative to coverage and payment parity for services delivered through telehealth; to provide relative to occupational therapy services; to prohibit maximum amounts of coverage and other conditions relative to telehealth services that are inapplicable to in-person services; to authorize enforcement and rulemaking; to provide for definitions; to provide for exceptions; to provide for effectiveness; to provide for technical changes; and to provide for related matters.

Be it enacted by the Legislature of Louisiana:

Section 1. The heading of Subpart B-2 of Part II of Chapter 6 of Title 22 of the Louisiana Revised Statutes of 1950 and R.S. 22:1845.1(Section heading) are hereby amended and reenacted and R.S. 22:1845.2 is hereby enacted to read as follows:

SUBPART B-2. COVERAGE AND PAYMENT PARITY FOR ~~PHYSICAL THERAPY~~
~~DELIVERED VIA~~ SERVICES PROVIDED THROUGH TELEHEALTH

§1845.1. Telehealth coverage and reimbursement for physical therapy; prohibitions and limitations; exceptions; rulemaking

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§1845.2. Telehealth coverage and reimbursement for occupational therapy; prohibitions and limitations; exceptions; rulemaking

1 A. A health coverage plan shall pay for covered occupational therapy
2 services provided via telehealth to an insured person. Telehealth coverage and
3 payment shall be equivalent to the coverage and payment for the same service
4 provided in person unless the telehealth provider and the health coverage plan
5 contractually agree to an alternative payment rate for telehealth services.

6 B. Benefits for a service provided as telehealth may be subject to a
7 deductible, copayment, or coinsurance. A deductible, copayment, or coinsurance
8 applicable to a particular service provided through telecommunications technology
9 shall not exceed the deductible, copayment, or coinsurance required by the health
10 coverage plan for the same service when provided in person.

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

15 D. A health coverage plan shall require a healthcare professional to be
16 licensed or otherwise authorized to practice occupational therapy in this state to be
17 eligible to receive payment for telehealth services.

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

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

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

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

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

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

4 (5) Restrict or deny coverage based solely on the communication technology
5 or application used to provide the telehealth service; however, a health coverage plan
6 may restrict occupational therapy services via telehealth when the services are being
7 provided solely by telephone.

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

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

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

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

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

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

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

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

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

27 I. The department may take any action authorized in this Title to enforce the
28 provisions of this Section and the commissioner may, in compliance with the

1 Administrative Procedure Act, R.S. 49:950 et seq., promulgate and adopt rules as are
2 necessary or advisable to effectuate the provisions of this Section.

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

4 (1) "Health coverage plan" has the same meaning as provided for in R.S.
5 22:1841.

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

7 Section 2. This Act shall apply to any new health coverage plan issued on and after
8 January 1, 2024. Any health coverage plan in effect prior to January 1, 2024, shall convert
9 to conform to the provisions of this Act on or before the renewal date, but no later than
10 January 1, 2025.

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 41 Original

2023 Regular Session

Frieman

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

Proposed law requires a health coverage plan (plan) to pay for covered occupational therapy services provided via telehealth to an insured person. Requires payment for services provided via telehealth to be equal to the payment for services 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 occupational 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 plan to restrict occupational therapy services via telehealth when the services are provided solely by telephone.
- (6) Imposing specific requirements or limitations on the technologies used to provide telehealth services. However, proposed law authorizes a 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 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.

Proposed law does not require a plan to cover telehealth services that are not medically necessary nor to reimburse fees charged by a telehealth facility for transmission of a telehealth service.

Proposed law does not require a 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 Dept. of Insurance to take any action authorized in the La. Insurance Code to enforce the provisions of proposed law and further authorizes the commissioner of insurance, 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 applies to any new health coverage plan issued on or after Jan. 1, 2024. Further requires any plan in effect prior to Jan. 1, 2024, to conform to the provisions of proposed law on or before the renewal date, but no later than Jan. 1, 2025.

Proposed law makes technical changes.

Effective August 1, 2023.

(Amends the heading of Subpart B-2 of Part II of Chapter 6 of Title 22 of the La. Revised Statutes of 1950 and R.S. 22:1845.1(Section heading); Adds R.S. 22:1845.2)