

---

## 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)