DIGEST

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HB 530 Original	2020 Regular Session	Echols
IID 550 Oliginal	2020 Regular Session	LUIIUIS

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

<u>Proposed law</u> 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".

<u>Proposed law</u> 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.

<u>Proposed law</u> 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.

<u>Proposed law</u> 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.

<u>Proposed law</u> 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.

<u>Proposed law</u> 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.

<u>Proposed law</u> 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 <u>proposed law</u>.

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

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

<u>Proposed law</u> 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.

<u>Proposed law</u> 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.

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

<u>Proposed law</u> 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.

<u>Present law</u> 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))