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

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

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

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

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

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

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

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

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

(4) Require 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) Restrict or deny coverage based solely on the communication technology or application used to provide the telehealth service; however, a health coverage plan

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may restrict occupational therapy services via telehealth when the services are being
provided solely by telephone.

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

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

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

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

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

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

H. A health coverage plan is not required 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.

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

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

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

(2) "Telehealth" has the same meaning as provided for in R.S. 40:1223.3.
Section 2. This Act shall apply to any new health coverage plan issued on and after January 1, 2024. Any health coverage plan in effect prior to January 1, 2024, shall convert to conform to the provisions of this Act on or before the renewal date, but no later than January 1, 2025.

SPEAKER OF THE HOUSE OF REPRESENTATIVES

PRESIDENT OF THE SENATE

GOVERNOR OF THE STATE OF LOUISIANA

APPROVED: ____________________

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