

SENATE BILL 570

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CF HB 658

By: **Senator Middleton**

Introduced and read first time: February 2, 2017

Assigned to: Finance

A BILL ENTITLED

1 AN ACT concerning

2 **Maryland Medical Assistance Program – Telehealth – Requirements**

3 FOR the purpose of altering certain coverage and reimbursement requirements for health
4 care services delivered through telemedicine under the Maryland Medical Assistance
5 Program; requiring the Department of Health and Mental Hygiene to provide
6 coverage of and reimbursement for certain health care services that are delivered
7 through telehealth; deeming a health care service provided through telehealth to be
8 equivalent to a certain health care service for a certain purpose; requiring the
9 Department to submit a certain amendment to the Medicaid State Plan to a certain
10 federal agency; prohibiting the Department from limiting eligibility for
11 reimbursement of certain health care services under the Program on a certain basis;
12 repealing a requirement that certain regulations specify certain types of health care
13 providers eligible to receive certain reimbursement under the Program; requiring
14 the Department to develop and make available to the public on the Department's
15 Web site a certain directory; altering certain definitions; and generally relating to
16 the Maryland Medical Assistance Program and telehealth.

17 BY repealing and reenacting, with amendments,
18 Article – Health – General
19 Section 15–105.2
20 Annotated Code of Maryland
21 (2015 Replacement Volume and 2016 Supplement)

22 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
23 That the Laws of Maryland read as follows:

24 **Article – Health – General**

25 15–105.2.

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



(a) The Program shall reimburse health care providers in accordance with the requirements of Title 19, Subtitle 1, Part IV of this article.

(b) (1) (i) In this subsection the following words have the meanings indicated.

(ii) “Health care provider” means a person who is licensed, certified, or otherwise authorized under the Health Occupations Article to provide health care in the ordinary course of business or practice of a profession [or in an approved education or training program].

(iii) 1. [“Telemedicine”] **“TELEHEALTH”** means, as it relates to the delivery of health care services, the use of interactive audio, video, or other telecommunications or electronic technology[:

A. By] **BY** a health care provider to deliver a health care service that is within the scope of practice of the health care provider at a [site] **LOCATION** other than the [site at which the patient is located; and

B. That enables the patient to see and interact with the health care provider at the time the health care service is provided to the patient] **LOCATION OF THE PATIENT.**

2. [“Telemedicine”] **“TELEHEALTH”** does not include:

A. An audio-only telephone conversation between a health care provider and a patient;

B. An electronic mail message between a health care provider and a patient; or

C. A facsimile transmission between a health care provider and a patient.

(2) [To the extent authorized by federal law or regulation, the provisions of § 15–139(c) through (f) of the Insurance Article relating to coverage of and reimbursement for health care services delivered through telemedicine shall apply to the Program and managed care organizations in the same manner they apply to carriers.

(3) Subject to the limitations of the State budget and to the extent authorized by federal law or regulation, the] **THE** Department [may authorize] **SHALL PROVIDE** coverage of and reimbursement for health care services that are **APPROPRIATELY** delivered through **TELEHEALTH, INCLUDING HEALTH CARE SERVICES THAT ARE DELIVERED THROUGH** store and forward technology or remote patient monitoring.

1 **(3) FOR THE PURPOSE OF REIMBURSEMENT, A HEALTH CARE**
2 **SERVICE PROVIDED THROUGH TELEHEALTH IS DEEMED TO BE EQUIVALENT TO THE**
3 **SAME HEALTH CARE SERVICE WHEN PROVIDED THROUGH AN IN-PERSON**
4 **CONSULTATION.**

5 **(4) THE DEPARTMENT SHALL SUBMIT TO THE FEDERAL CENTERS**
6 **FOR MEDICARE AND MEDICAID SERVICES AN AMENDMENT TO THE MEDICAID**
7 **STATE PLAN THAT STRIKES ALL PROVISIONS IN THE MEDICAID STATE PLAN THAT**
8 **RELATE TO COVERAGE OF AND REIMBURSEMENT FOR HEALTH CARE SERVICES**
9 **PROVIDED THROUGH TELEHEALTH.**

10 **[(4) (i)] (5) The Department may [specify by regulation the types of**
11 **health care providers eligible to receive reimbursement for health care services provided to**
12 **Program recipients under this subsection] NOT LIMIT ELIGIBILITY FOR**
13 **REIMBURSEMENT OF HEALTH CARE SERVICES PROVIDED THROUGH TELEHEALTH**
14 **UNDER THIS SECTION BASED ON THE TYPE OF SETTING IN WHICH THE HEALTH CARE**
15 **SERVICES ARE PROVIDED TO PROGRAM RECIPIENTS.**

16 **[(ii) If the Department specifies by regulation the types of health care**
17 **providers eligible to receive reimbursement for health care services provided to Program**
18 **recipients under this subsection, the types of health care providers specified shall include**
19 **primary care providers.]**

20 **[(5)] (6) (I) The Department may require a health care provider to**
21 **submit a registration form to the Department that includes information required for the**
22 **processing of claims for reimbursement for health care services provided to Program**
23 **recipients under this subsection.**

24 **(II) THE DEPARTMENT SHALL DEVELOP AND MAKE AVAILABLE**
25 **TO THE PUBLIC ON THE DEPARTMENT'S WEB SITE A DIRECTORY THAT LISTS THE**
26 **HEALTH CARE PROVIDERS WHO ARE REGISTERED AS PROVIDING HEALTH CARE**
27 **SERVICES TO PROGRAM RECIPIENTS THROUGH TELEHEALTH UNDER**
28 **SUBPARAGRAPH (I) OF THIS PARAGRAPH.**

29 **[(6)] (7) The Department shall adopt regulations to carry out this**
30 **subsection.**

31 **SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect**
32 **October 1, 2017.**