

2016 -- S 2577 SUBSTITUTE A

LC004674/SUB A

STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2016

A N A C T

RELATING TO INSURANCE -- TELEMEDICINE COVERAGE REIMBURSEMENT ACT

Introduced By: Senators Goldin, Satchell, Coyne, and Miller

Date Introduced: February 25, 2016

Referred To: Senate Health & Human Services

It is enacted by the General Assembly as follows:

1 SECTION 1. Title 27 of the General Laws entitled "INSURANCE" is hereby amended
2 by adding thereto the following chapter:

3 CHAPTER 81

4 THE TELEMEDICINE COVERAGE ACT

5 **27-81-1. Title.** -- This act shall be known as and may be cited as the "Telemedicine
6 Coverage Act".

7 **27-81-2. Purpose.** -- The general assembly hereby finds and declares that:

8 (1) The advancements and continued development of medical and communications
9 technology have had a profound impact on the practice of medicine and offer opportunities for
10 improving the delivery, cost, and accessibility of health care, particularly in the area of
11 telemedicine.

12 (2) Geography, weather, availability of specialists, transportation, and other factors can
13 create barriers to accessing the appropriate health care, including behavioral health care, and one
14 way to provide, ensure, or enhance access to health care given these barriers is through the
15 appropriate use of technology to allow health care consumers access to qualified health care
16 providers.

17 (3) There is a need in this state to embrace efforts that will encourage health insurers and
18 health care providers to support the use of telemedicine, and that will also encourage all state
19 agencies to evaluate and amend their policies and rules to remove any regulatory barriers

1 prohibiting the use of telemedicine services.

2 **27-81-3. Definitions.** -- As used in this chapter:

3 (1) "Distant site" means a site at which a health care provider is located while providing
4 health care services by means of telemedicine.

5 (2) "Health care facility" means an institution providing health care services or a health
6 care setting, including, but not limited to, hospitals and other licensed inpatient centers,
7 ambulatory surgical or treatment centers, skilled nursing centers, residential treatment centers,
8 diagnostic, laboratory and imaging centers, and rehabilitation and other therapeutic health
9 settings.

10 (3) "Health care professional" means a physician or other health care practitioner
11 licensed, accredited or certified to perform specified health care services consistent with state
12 law.

13 (4) "Health care provider" means a health care professional or a health care facility.

14 (5) "Health care services" means any services included in the furnishing to any individual
15 of medical, podiatric, or dental care, or hospitalization, or incident to the furnishing of that care or
16 hospitalization, and the furnishing to any person of any and all other services for the purpose of
17 preventing, alleviating, curing, or healing human illness, injury, or physical disability.

18 (6) "Health insurer" means any person, firm or corporation offering and/or insuring health
19 care services on a prepaid basis, including, but not limited to, a nonprofit service corporation, a
20 health maintenance organization, or an entity offering a policy of accident and sickness insurance.

21 (7) "Health maintenance organization" means a health maintenance organization as
22 defined in chapter 41 of this title.

23 (8) "Nonprofit service corporation" means a nonprofit hospital service corporation as
24 defined in chapter 19 of this title, or a nonprofit medical service corporation as defined in chapter
25 20 of this title.

26 (9) "Originating site" means a site at which a patient is located at the time health care
27 services are provided to them by means of telemedicine, which can be a patient's home where
28 medically appropriate; provided, however, notwithstanding any other provision of law, health
29 insurers and health care providers may agree to alternative siting arrangements deemed
30 appropriate by the parties.

31 (10) "Policy of accident and sickness insurance" means a policy of accident and sickness
32 insurance as defined in chapter 18 of this title.

33 (11) "Store-and-forward technology" means the technology used to enable the
34 transmission of a patient's medical information from an originating site to the health care provider

1 at the distant site without the patient being present.

2 (12) "Telemedicine" means the delivery of clinical health care services by means of real
3 time two-way electronic audiovisual communications, including the application of secure video
4 conferencing or store-and-forward technology to provide or support health care delivery, which
5 facilitate the assessment, diagnosis, treatment, and care management of a patient's health care
6 while such patient is at an originating site and the health care provider is at a distant site,
7 consistent with applicable federal laws and regulations. Telemedicine does not include an audio-
8 only telephone conversation, email message or facsimile transmission between the provider and
9 patient, or an automated computer program used to diagnose and/or treat ocular or refractive
10 conditions.

11 **27-81-4. Coverage of telemedicine services.** -- (a) Each health insurer that issues
12 individual or group accident and sickness insurance policies for health care services and/or
13 provides a health care plan for health care services shall provide coverage for the cost of such
14 covered health care services provided through telemedicine services, as provided in this section.

15 (b) A health insurer shall not exclude a health care service for coverage solely because
16 the health care service is provided through telemedicine and is not provided through in-person
17 consultation or contact, so long as such health care services are medically appropriate to be
18 provided through telemedicine services and as such may be subject to the terms and conditions of
19 a telemedicine agreement between the insurer and the participating health care provider or
20 provider group.

21 (c) Benefit plans offered by a health insurer may impose a deductible, copayment, or
22 coinsurance requirement for a health care service provided through telemedicine.

23 (d) The requirements of this section shall apply to all policies and health plans issued,
24 reissued, or delivered in the state of Rhode Island on and after January 1, 2018.

25 (e) This chapter shall not apply to short-term travel, accident-only, limited or specified
26 disease, or individual conversion policies or health plans, nor to policies or health plans designed
27 for issuance to persons eligible for coverage under Title XVIII of the Social Security Act, known
28 as Medicare, or any other similar coverage under state or federal governmental plans.

29 **27-81-5. Severability.** -- If any provision of this chapter or of any rule or regulation
30 made under this chapter, or its application to any person or circumstance is held invalid by a court
31 of competent jurisdiction, the remainder of the chapter, rule, or regulation and the application of
32 the provision to other persons or circumstances shall not be affected by this invalidity. The
33 invalidity of any section or sections or parts of any section or sections shall not affect the validity
34 of the remainder of the chapter.

1 SECTION 2. This act shall take effect upon passage.

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EXPLANATION
BY THE LEGISLATIVE COUNCIL
OF

A N A C T

RELATING TO INSURANCE -- TELEMEDICINE COVERAGE REIMBURSEMENT ACT

1 This act would require health insurance policies, plans or contracts issued, reissued or
2 delivered on or after January 1, 2018, to include provisions for the reimbursement of telemedicine
3 services in the same manner as such policies, plans or contracts reimburse for health care services
4 provided through in-person consultation or contact.

5 This act would take effect upon passage.

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