

House File 2160 - Introduced

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BY BERRY and MURPHY

A BILL FOR

1 An Act relating to telemedicine relative to professional
2 licensure, insurance coverage, and reimbursement under the
3 medical assistance program.

4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. LEGISLATIVE FINDINGS. The general assembly
2 finds and recognizes all of the following:

3 1. Telemedicine services are those services that use
4 electronic technology to overcome a geographic distance
5 between patients and health care providers for the purpose of
6 intervention, clinical management, or assessing, monitoring,
7 or educating patients.

8 2. The provision of telemedicine services results in
9 demonstrated cost-effectiveness, improvements in disease
10 management, and improved patient outcomes and studies have
11 demonstrated significant reductions in hospitalizations and
12 otherwise necessary medical care as a result of telemedicine
13 intervention.

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

21 4. There is a need in this state to embrace efforts that
22 will encourage health insurers and health care providers to
23 support the use of telemedicine and that will also encourage
24 all state agencies to evaluate and amend their policies and
25 rules to remove any regulatory barriers prohibiting the use of
26 telemedicine services.

27 Sec. 2. NEW SECTION. 147.161 Telemedicine.

28 1. A health care professional licensed by a board created
29 under this chapter, as appropriate to the scope of practice
30 of the profession, may employ the technology of telemedicine
31 by applying telemedicine within the professional's scope
32 of practice or by using telemedicine technology under the
33 direction and supervision of another health care professional
34 who is using telemedicine technology within the supervising
35 professional's scope of practice. A health care professional's

1 employment of telemedicine technology acting under the
2 direction and supervision of another health care professional
3 who is using telemedicine technology within that health care
4 professional's scope of practice shall not be interpreted
5 as practicing the supervising professional's health care
6 profession without a license. However, any health care
7 professional employing telemedicine technology must be trained,
8 educated, and knowledgeable regarding the health care service
9 provided and technology used and shall not perform duties for
10 which the professional does not have sufficient training,
11 education, and knowledge. Failure to have sufficient training,
12 education, and knowledge is grounds for disciplinary action by
13 the respective board.

14 2. The department, in consultation with those boards that
15 exercise regulatory or rulemaking authority over a profession
16 within whose scope of practice telemedicine may be employed,
17 shall adopt rules, as necessary, to implement the requirements
18 of this section relating to the provision of telemedicine
19 services by such professionals and shall amend any rules that
20 conflict with the authorization of the use of telemedicine as
21 provided in this section.

22 3. As used in this section, "*telemedicine*" or "*telemedicine*
23 *services*", as it pertains to the delivery of health care
24 services, means synchronous video conferencing, remote patient
25 monitoring, transmission of asynchronous health images, or
26 other health transmissions supported by mobile devices, or
27 other telecommunications technology used for the purpose of
28 diagnosis, consultation, treatment, transfer of medical data,
29 or exchange of medical education information by means of audio,
30 video, or data communications. "*Telemedicine*" or "*telemedicine*
31 *services*" does not include an audio-only telephone call,
32 electronic mail message, or facsimile transmission.

33 **Sec. 3. NEW SECTION. 514C.30 Telemedicine services.**

34 1. Notwithstanding the uniformity of treatment requirements
35 of section 514C.6, a contract, policy, or plan providing for

1 third-party payment or prepayment for health, medical, or
2 surgical coverage benefits shall not require face-to-face
3 contact between a health care provider and a patient as a
4 prerequisite for payment for services appropriately provided
5 through telemedicine in accordance with generally accepted
6 health care practices and standards prevailing in the
7 applicable professional community at the time the services are
8 provided. Health care services provided through in-person
9 consultations or through telemedicine shall be treated as
10 equivalent services for the purposes of coverage.

11 2. This section shall not be interpreted as preventing
12 a third-party payment provider from imposing deductibles or
13 copayment or coinsurance requirements for a health care service
14 provided through telemedicine if the deductible, copayment,
15 or coinsurance does not exceed the deductible, copayment, or
16 coinsurance applicable to an in-person consultation for the
17 same health care service.

18 3. The provisions of this section shall apply to all of the
19 following classes of third-party payment provider contracts,
20 policies, or plans delivered, issued for delivery, continued,
21 or renewed in this state on or after January 1, 2015:

22 a. Individual or group accident and sickness insurance
23 providing coverage on an expense-incurred basis.

24 b. An individual or group hospital or medical service
25 contract issued pursuant to chapter 509, 514, or 514A.

26 c. An individual or group health maintenance organization
27 contract regulated under chapter 514B.

28 d. An individual or group Medicare supplemental policy,
29 unless coverage pursuant to such policy is preempted by federal
30 law.

31 e. A plan established pursuant to chapter 509A for public
32 employees.

33 4. This section shall not apply to accident-only, specified
34 disease, short-term hospital or medical, hospital confinement
35 indemnity, credit, dental, vision, long-term care, basic

1 hospital, and medical-surgical expense coverage as defined
2 by the commissioner, disability income insurance coverage,
3 coverage issued as a supplement to liability insurance,
4 workers' compensation or similar insurance, or automobile
5 medical payment insurance.

6 5. The commissioner of insurance shall adopt rules pursuant
7 to chapter 17A as necessary to administer this section.

8 Sec. 4. MEDICAID PROGRAM — REIMBURSEMENT FOR
9 TELEMEDICINE. The department of human services shall adopt
10 rules to provide for coverage of telemedicine services
11 under the Medicaid program. The rules shall provide that
12 face-to-face contact between a health care provider and a
13 patient is not required as a prerequisite for payment for
14 services appropriately provided through telemedicine in
15 accordance with generally accepted health care practices
16 and standards prevailing in the applicable professional
17 community at the time the services are provided. Health care
18 services provided through in-person consultations or through
19 telemedicine shall be treated as equivalent services for the
20 purposes of reimbursement. For the purposes of this section,
21 "telemedicine" or "telemedicine services" means the same as
22 defined in section 514C.30, as enacted in this Act.

23 Sec. 5. STUDY ON USE OF TELEMEDICINE. The department of
24 public health, in collaboration with the department of human
25 services and the division of insurance of the department of
26 commerce, shall convene and conduct a study regarding options
27 for implementing telemedicine services and coverage. The
28 department of public health shall submit a final report of its
29 findings and recommendations to the governor and the general
30 assembly by December 15, 2014.

31

EXPLANATION

32 The inclusion of this explanation does not constitute agreement with
33 the explanation's substance by the members of the general assembly.

34 This bill relates to telemedicine. The bill provides
35 legislative findings regarding the use of telemedicine

1 services.

2 The bill provides that a health care professional licensed
3 by a professional licensing board under Code chapter 147
4 (health-related professions), as appropriate to the scope
5 of practice of the profession, may employ the technology of
6 telemedicine by applying telemedicine within the professional's
7 scope of practice or by employing telemedicine technology
8 under the direction and supervision of another health care
9 professional who is using telemedicine technology within the
10 supervising professional's scope of practice. A health care
11 professional's employment of telemedicine technology under the
12 direction and supervision of another health care professional
13 who is acting within that health care professional's scope of
14 practice shall not be interpreted as practicing the supervising
15 professional's health care profession without a license. A
16 health care professional employing telemedicine technology must
17 be trained, educated, and knowledgeable regarding the health
18 care service provided and technology used and is prohibited
19 from performing duties for which the professional does not have
20 sufficient training, education, and knowledge. Failure to have
21 sufficient training, education, and knowledge is grounds for
22 disciplinary action by the respective board.

23 The bill directs the department of public health, in
24 consultation with those boards that exercise regulatory or
25 rulemaking authority over a profession within whose scope
26 of practice telemedicine may be employed, to adopt rules,
27 as necessary, to implement the requirements relating to the
28 provision of telemedicine services by such professionals and to
29 amend any rules that conflict with the authorization of the use
30 of telemedicine as provided in the bill.

31 The bill defines "telemedicine" or "telemedicine services"
32 for the purpose of the professional licensure provisions.

33 The bill provides that beginning January 1, 2015, a
34 contract, policy, or plan providing for third-party payment or
35 prepayment for health, medical, or surgical coverage benefits

1 shall not require face-to-face contact between a health
2 care provider and a patient as a prerequisite for payment
3 for services appropriately provided through telemedicine in
4 accordance with generally accepted health care practices
5 and standards prevailing in the applicable professional
6 community at the time the services are provided. Health care
7 services provided through in-person consultations or through
8 telemedicine shall be treated as equivalent services for the
9 purposes of coverage.

10 The provision is not to be interpreted as preventing a
11 third-party payment provider from imposing deductibles or
12 copayment or coinsurance requirements for a health care service
13 provided through telemedicine if the deductible, copayment,
14 or coinsurance does not exceed the deductible, copayment, or
15 coinsurance applicable to an in-person consultation for the
16 same health care service. The section applies to individual
17 or group accident and sickness insurance providing coverage
18 on an expense-incurred basis; an individual or group hospital
19 or medical service contract issued pursuant to Code chapter
20 509, 514, or 514A; an individual or group health maintenance
21 organization contract regulated under Code chapter 514B; an
22 individual or group Medicare supplemental policy, unless
23 coverage pursuant to such policy is preempted by federal law;
24 and a plan established pursuant to Code chapter 509A for public
25 employees. The provision does not apply to accident-only,
26 specified disease, short-term hospital or medical, hospital
27 confinement indemnity, credit, dental, vision, long-term
28 care, basic hospital, and medical-surgical expense coverage
29 as defined by the commissioner, disability income insurance
30 coverage, coverage issued as a supplement to liability
31 insurance, workers' compensation or similar insurance, or
32 automobile medical payment insurance.

33 The commissioner of insurance is directed to adopt rules
34 pursuant to Code chapter 17A as necessary to administer the
35 provision. The bill defines telemedicine services for the

1 purpose of the insurance provision.

2 The bill directs the department of human services to
3 adopt rules to provide for coverage of telemedicine services
4 under the Medicaid program. The rules are to provide that
5 face-to-face contact between a health care provider and a
6 patient is not required as a prerequisite for payment for
7 services appropriately provided through telemedicine in
8 accordance with generally accepted health care practices
9 and standards prevailing in the applicable professional
10 community at the time the services are provided. Health care
11 services provided through in-person consultations or through
12 telemedicine are to be treated as equivalent services for the
13 purposes of reimbursement.

14 The bill directs the department of public health, in
15 collaboration with the department of human services and
16 the division of insurance of the department of commerce, to
17 convene and conduct a study regarding options for implementing
18 telemedicine services and coverage. The department of public
19 health is directed to submit a final report of its findings and
20 recommendations to the governor and the general assembly by
21 December 15, 2014.