

House File 600 - Introduced

HOUSE FILE 600
BY COMMITTEE ON HUMAN
RESOURCES

(SUCCESSOR TO HF 218)

A BILL FOR

1 An Act relating to telehealth and professional licensure,
2 insurance coverage, and reimbursement under the medical
3 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. Access to health care facilities and health care
4 professionals is critically important to the citizens of Iowa.

5 2. Telehealth uses electronic technology to overcome a
6 geographic distance between patients and health care providers
7 for the purpose of intervention, clinical management, or
8 assessing, monitoring, or educating patients.

9 3. The provision of telehealth results in demonstrated
10 cost-effectiveness, improvements in disease management,
11 and improved patient outcomes and studies by the American
12 telemedicine association and others have demonstrated
13 significant reductions in hospitalizations and otherwise
14 necessary medical care as a result of telehealth intervention.

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

22 5. Additionally, the utilization of telehealth will
23 further the maintenance and improvement of the physical
24 and economic health of patients in medically underserved
25 communities by retaining the source of health care in local
26 areas, strengthening the health infrastructure, and preserving
27 health-care-related jobs.

28 6. A need exists in this state to embrace efforts that
29 will encourage health insurers and health care professionals
30 to support the use of telehealth and that will also encourage
31 all state agencies to evaluate and amend their policies and
32 rules to remove any regulatory barriers prohibiting the use of
33 telehealth.

34 7. Recognition exists that the full potential of delivering
35 health care services through telehealth cannot be realized

1 without the assurance of payment and the resolution of existing
2 legal and policy barriers to such payment.

3 8. The purpose of the Iowa telehealth Act is to provide a
4 framework for health care professionals to utilize in providing
5 telehealth to Iowans in a manner that provides efficient and
6 effective access to quality health care.

7 Sec. 2. NEW SECTION. 147B.1 Title.

8 This chapter shall be known and may be cited as the "*Iowa*
9 *Telehealth Act*".

10 Sec. 3. NEW SECTION. 147B.2 Definitions.

11 As used in this chapter, unless the context otherwise
12 requires:

13 1. "*Distant site*" means the site at which a health care
14 professional delivering the service is located at the time the
15 telehealth service is provided.

16 2. "*Health care professional*" means a person who is
17 licensed, certified, or otherwise authorized or permitted by
18 the law of this state to administer health care in the ordinary
19 course of business or in the practice of a profession, or
20 in an approved education or training program, as long as the
21 person is operating within the person's professional scope of
22 practice.

23 3. "*Remote patient monitoring*" means using telehealth to
24 enable the health care professional to monitor and manage a
25 patient's medical, functional, and environmental needs if such
26 needs can be appropriately met through telehealth intervention.

27 4. "*Store-and-forward telehealth*" means the use of
28 asynchronous communications between a patient and a health care
29 professional or between a referring health care professional
30 and a medical specialist at a distant site, supported by
31 telecommunications technology for the purpose of diagnosis,
32 consultation, treatment, or therapeutic assistance in the
33 care of the patient, including the transferring of medical
34 data from one site to another through the use of a camera
35 or similar device that records or stores an image that is

1 sent or forwarded via telecommunications to another site for
2 consultation.

3 5. "*Telehealth*" means the use of real-time, interactive
4 audio or video telecommunications or electronic technology,
5 remote patient monitoring, or store-and-forward telehealth by
6 a health care professional to deliver health care services
7 to a patient within the scope of practice of the health care
8 professional, for the purposes of diagnosis, consultation,
9 treatment, transfer of medical data, or exchange of medical
10 education information. "*Telehealth*" does not include an
11 audio-only telephone call, electronic mail message, or
12 facsimile transmission.

13 Sec. 4. NEW SECTION. 147.163 **Telehealth.**

14 1. A health care professional licensed by a board created
15 under this chapter, as appropriate to the scope of practice
16 of the profession, may employ the technology of telehealth by
17 applying telehealth within the professional's scope of practice
18 or by using telehealth technology under the direction and
19 supervision of another health care professional who is using
20 telehealth technology within the supervising professional's
21 scope of practice. A health care professional's employment
22 of telehealth acting under the direction and supervision of
23 another health care professional who is using telehealth within
24 that health care professional's scope of practice shall not be
25 interpreted as practicing the supervising professional's health
26 care profession without a license. However, any health care
27 professional employing telehealth must hold a current valid
28 license to practice the respective profession in the state and
29 be trained, educated, and knowledgeable regarding the health
30 care service provided and technology used and shall not perform
31 duties for which the professional does not have sufficient
32 training, education, and knowledge. Failure to have sufficient
33 training, education, and knowledge is grounds for disciplinary
34 action by the respective board.

35 2. The applicable board that exercises regulatory or

1 rulemaking authority over an affected profession under this
2 chapter, or the department in the absence of an applicable
3 board, shall adopt rules to administer this chapter.

4 3. The standard of care for a professional using telehealth
5 to provide health care services to a patient shall be the same
6 as the standard of care required of that professional for the
7 provision of in-person health care services to a patient.

8 4. The type of setting where telehealth is provided for the
9 patient or by the health care professional shall not be limited
10 if the delivery of health care services is appropriately
11 provided through telehealth.

12 5. This chapter shall not be construed to conflict with or
13 supersede provisions otherwise applicable to the licensure of
14 health care professionals.

15 6. This chapter shall not be construed to alter the scope
16 of practice of any health care professional, authorize the
17 delivery of health care services in a setting or manner not
18 otherwise authorized by law, or limit a patient's right to
19 choose in-person contact with a health care professional for
20 the delivery of health care services for which telehealth is
21 available.

22 7. If a health care professional provides services pursuant
23 to and in compliance with section 135.24 via telehealth in
24 accordance with this chapter, the provisions of section 135.24
25 including those relating to immunity from civil liability shall
26 apply to such health care professional.

27 Sec. 5. NEW SECTION. 514C.30 Telehealth.

28 1. Notwithstanding the uniformity of treatment requirements
29 of section 514C.6, a contract, policy, or plan providing for
30 third-party payment or prepayment for health, medical, or
31 surgical coverage benefits may provide coverage for services
32 provided as telehealth if the services would be covered if
33 provided in-person. If coverage is provided for telehealth
34 under this section, coverage shall not require in-person
35 contact between a health care professional and a patient as a

1 prerequisite for payment for services appropriately provided
2 through telehealth in accordance with generally accepted health
3 care practices and standards prevailing in the applicable
4 professional community at the time the services are provided.
5 If coverage is provided under this section, health care
6 services provided through in-person consultations or through
7 telehealth shall be treated as equivalent services for the
8 purposes of coverage.

9 2. If health care coverage is provided for telehealth under
10 this section, all of the following shall apply:

11 *a.* 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 telehealth if the deductible, copayment, or
15 coinsurance does not exceed the deductible, copayment, or
16 coinsurance applicable to in-person consultation for the same
17 health care service. A third-party payment provider shall not
18 impose annual or lifetime maximums on coverage of telehealth
19 unless the annual or lifetime maximum applies in the aggregate
20 to all items and services under the contract, policy, or plan.

21 *b.* This section shall not be interpreted to require a
22 third-party payment provider to provide reimbursement for
23 a health care service that is not a covered benefit or to
24 reimburse a health care professional who is not a covered
25 provider under the contract, policy, or plan.

26 *c.* This section shall not be interpreted to preclude a
27 third-party payment provider from performing utilization review
28 to determine the appropriateness of telehealth in the delivery
29 of health care services if the determination is made in the
30 same manner as those regarding the same health care service
31 when delivered in person.

32 *d.* This section shall not be interpreted to authorize a
33 third-party payment provider to require the use of telehealth
34 when the health care professional determines use of telehealth
35 is not appropriate.

1 e. The provisions of this section shall apply to all of the
2 following classes of third-party payment provider contracts,
3 policies, or plans delivered, issued for delivery, continued,
4 or renewed in this state on or after January 1, 2016:

5 (1) Individual or group accident and sickness insurance
6 providing coverage on an expense-incurred basis.

7 (2) An individual or group hospital or medical service
8 contract issued pursuant to chapter 509, 514, or 514A.

9 (3) An individual or group health maintenance organization
10 contract regulated under chapter 514B.

11 (4) An individual or group Medicare supplemental policy,
12 unless coverage pursuant to such policy is preempted by federal
13 law.

14 (5) A plan established pursuant to chapter 509A for public
15 employees.

16 f. This section shall not apply to accident-only, specified
17 disease, short-term hospital or medical, hospital confinement
18 indemnity, credit, dental, vision, long-term care, basic
19 hospital, and medical-surgical expense coverage as defined
20 by the commissioner, disability income insurance coverage,
21 coverage issued as a supplement to liability insurance,
22 workers' compensation or similar insurance, or automobile
23 medical payment insurance.

24 3. The commissioner of insurance shall adopt rules pursuant
25 to chapter 17A as necessary to administer this section.

26 4. For the purposes of this section, "*health care*
27 *professional*" and "*telehealth*" mean as defined in section
28 147B.2, as enacted in this Act.

29 Sec. 6. MEDICAID PROGRAM — REIMBURSEMENT FOR
30 TELEHEALTH. The department of human services shall adopt
31 rules to provide for coverage of telehealth under the
32 Medicaid program. The rules shall provide that in-person
33 contact between a health care professional and a patient
34 is not required as a prerequisite for payment for services
35 appropriately provided through telehealth in accordance

1 interpreted as practicing the supervising professional's health
2 care profession without a license. A health care professional
3 employing telehealth technology must hold a current valid
4 license and must be trained, educated, and knowledgeable
5 regarding the health care service provided and technology
6 used and is prohibited from performing duties for which the
7 professional does not have sufficient training, education, and
8 knowledge. Failure to have sufficient training, education, and
9 knowledge is grounds for disciplinary action by the respective
10 board.

11 The bill directs the appropriate board that exercises
12 regulatory or rulemaking authority over a profession within
13 whose scope of practice telehealth may be employed or the
14 department, to adopt rules, to administer the requirements
15 relating to the provision of telehealth by such professionals.

16 The bill provides that the standard of care for a
17 professional, whether using telehealth or providing the care
18 in person, is the same. The type of setting where telehealth
19 is provided for the patient or by the health care professional
20 is not to be limited if the delivery of health care services
21 is appropriately provided through telehealth. The bill is not
22 to be construed to conflict with or supersede the provisions
23 of the health care professionals licensure or to alter the
24 scope of practice of any health care professional, authorize
25 the delivery of health care services in a setting or manner
26 not otherwise authorized by law, or limit a patient's right
27 to choose in-person contact with a health care professional
28 for the delivery of health care services for which telehealth
29 is available. The bill also provides that if a health care
30 professional provides services pursuant to and in compliance
31 with Code section 135.24 relating to the volunteer health
32 care provider program, via telehealth, the provisions of Code
33 section 135.24 including those relating to immunity from civil
34 liability shall apply to such health care professional.

35 The bill provides that a contract, policy, or plan providing

1 for third-party payment or prepayment for health, medical, or
2 surgical coverage benefits may cover telehealth. If telehealth
3 coverage is provided on or after January 1, 2016, the contract,
4 policy, or plan shall not deny coverage on the basis that the
5 services are provided via telehealth if the services would be
6 covered if provided in person and shall not require in-person
7 contact between a health care professional and a patient as a
8 prerequisite for payment for services appropriately provided
9 through telehealth in accordance with generally accepted health
10 care practices and standards prevailing in the applicable
11 professional community at the time the services are provided.
12 Health care services provided through in-person consultations
13 or through telehealth shall be treated as equivalent services
14 for the purposes of coverage.

15 The provision is not to be interpreted as preventing a
16 third-party payment provider from imposing deductibles or
17 copayment or coinsurance requirements for a health care service
18 provided through telehealth if the deductible, copayment, or
19 coinsurance does not exceed the deductible, copayment, or
20 coinsurance applicable to an in-person consultation for the
21 same health care service. The bill provides that a third-party
22 payment provider shall not impose annual or lifetime maximums
23 on coverage of telehealth unless the annual or lifetime maximum
24 applies in the aggregate to all items and services under the
25 contract, policy, or plan.

26 The bill provides that the Code section is not to be
27 interpreted to require a third-party payment provider to
28 provide reimbursement for a health care service that is not
29 a covered benefit or to reimburse a health care professional
30 who is not a covered provider under the contract, policy,
31 or plan; to preclude a third-party payment provider from
32 performing utilization review to determine the appropriateness
33 of telehealth in the delivery of health care services if the
34 determination is made in the same manner as those regarding
35 the same health care service when delivered in person; or to

1 authorize a third-party payment provider to require the use of
2 telehealth when the health care professional determines use of
3 telehealth is not appropriate.

4 The bill specifies the types of third-party payment provider
5 contracts, policies, or plans to which the bill applies and
6 those exempt from its application.

7 The commissioner of insurance is directed to adopt rules
8 pursuant to Code chapter 17A as necessary to administer the
9 provision.

10 The bill directs the department of human services to
11 adopt rules to provide for coverage of telehealth under the
12 Medicaid program. The rules are to provide that in-person
13 contact between a health care professional and a patient
14 is not required as a prerequisite for payment for services
15 appropriately provided through telehealth in accordance
16 with generally accepted health care practices and standards
17 prevailing in the applicable professional community at the
18 time the services are provided. Health care services provided
19 through in-person consultations or through telehealth are
20 to be treated as equivalent services for the purposes of
21 reimbursement.

22 The bill directs the department of public health, in
23 collaboration with the department of human services, to
24 convene and conduct a study regarding options for implementing
25 telehealth and telehealth coverage and reimbursement. The
26 division of insurance is required to be available for
27 consultation as needed. The department of public health
28 is directed to submit a final report of its findings and
29 recommendations to the governor and the general assembly by
30 December 15, 2015.