# **SENATE . . . . . . . . . . . . . . . . No. 501**

### The Commonwealth of Massachusetts

PRESENTED BY:

#### Harriette L. Chandler

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act expanding access to telemedicine services.

#### PETITION OF:

NAME:	DISTRICT/ADDRESS:	
Harriette L. Chandler	First Worcester	
Kay Khan	11th Middlesex	2/2/2017
John W. Scibak	2nd Hampshire	2/3/2017

## **SENATE . . . . . . . . . . . . . . . No. 501**

By Ms. Chandler, a petition (accompanied by bill, Senate, No. 501) of Harriette L. Chandler, Kay Khan and John W. Scibak for legislation to expand access to telemedicine services. Financial Services.

### The Commonwealth of Alassachusetts

In the One Hundred and Ninetieth General Court (2017-2018)

An Act expanding access to telemedicine services.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

- 1 SECTION 1. Chapter 32A of the General Laws, as appearing in the 2014 official edition,
- 2 is hereby amended by adding at the end the following new section:-
- 3 Section 28. Notwithstanding any general or special law or rule or regulation to the
- 4 contrary, the Group Insurance Commission and any carrier, as defined in Section 1 of Chapter
- 5 1760 of the general laws or other entity which contracts with the Commission to provide health
- 6 benefits to eligible Employees and Retirees and their eligible dependents, shall provide coverage
- 7 for health care services through the use of telemedicine by a contracted health care provider.
- 8 Such health care services shall be covered to the same extent as if they were provided via in-
- 9 person consultation or in-person delivery. Furthermore, such health care services shall be
- reimbursed on the same basis as the same service through in-person consultation or contact.
- 11 A contract that provides coverage for telemedicine services may contain a provision for a
- deductible, copayment or coinsurance requirement for a health care service provided through

telemedicine as long as the deductible, copayment or coinsurance does not exceed the deductible, copayment or coinsurance applicable to an in-person consultation or in-person delivery of services. For health care services provided through telemedicine, a health care provider shall not be required to document a barrier to an in-person visit, nor shall the type of setting where telemedicine is provided be limited. For the purposes of this section, "telemedicine" shall mean the use of two-way audio-visual interaction or store-and-forward technology, defined as the transmission of a patient's medical information, such as digital images, documents, and pre-recorded video, from an originating site to the physician at the distant site for clinical evaluation.

SECTION 2. Chapter 32B of the General Laws, as so appearing, is hereby amended by adding at the end the following new section:

Section 30. Notwithstanding any general or special law or rule or regulation to the contrary, the Group Insurance Commission and any carrier, as defined in Section 1 of Chapter 1760 of the general laws or other entity which contracts to provide health benefits to eligible employees of the governmental unit and their eligible dependents, shall provide coverage for health care services through the use of telemedicine by a contracted health care provider. Such health care services shall be covered to the same extent as if they were provided via in-person consultation or in-person delivery. Furthermore, such health care services shall be reimbursed on the same basis as the same service through in-person consultation or contact.

A contract that provides coverage for telemedicine services may contain a provision for a deductible, copayment or coinsurance requirement for a health care service provided through telemedicine as long as the deductible, copayment or coinsurance does not exceed the deductible, copayment or coinsurance applicable to an in-person consultation or in-person delivery of

services. For health care services provided through telemedicine, a health care provider shall not be required to document a barrier to an in-person visit, nor shall the type of setting where telemedicine is provided be limited. For the purposes of this section, "telemedicine" shall mean the use of two-way audio-visual interaction or store-and-forward technology, defined as the transmission of a patient's medical information, such as digital images, documents, and pre-recorded video, from an originating site to the physician at the distant site for clinical evaluation.

SECTION 3. Section 118E of the General Laws, as so appearing, is hereby amended by inserting at the end thereof the following new section:

Section 13C½. Notwithstanding any general or special law or rule or regulation to the contrary, the Executive Office of Health and Human Services shall provide coverage under its Medicaid contracted health insurers, health plans, health maintenance organizations, behavioral health management firms and third party administrators under contract to a Medicaid managed care organization or the Medicaid primary care clinician plan for health care services provided through telemedicine by a contracted provider. Such health care services shall be covered to the same extent as if they were provided via in-person consultation or in-person delivery. Such health care services shall be reimbursed on the same basis that Medicaid and other entities covered in this paragraph reimburse for in-person consultation or contact.

A contract that provides coverage for telemedicine services may contain a provision for a deductible, copayment or coinsurance requirement for a health care service provided through telemedicine as long as the deductible, copayment or coinsurance does not exceed the deductible, copayment or coinsurance applicable to an in-person consultation or in-person delivery of services. For health care services provided through telemedicine, a health care provider shall not

be required to document a barrier to an in-person visit, nor shall the type of setting where telemedicine is provided be limited. For the purposes of this section, "telemedicine" shall mean the use of two-way audio-visual interaction or store-and-forward technology, defined as the transmission of a patient's medical information, such as digital images, documents, and pre-recorded video, from an originating site to the physician at the distant site for clinical evaluation.

SECTION 4. Section 47BB of chapter 175 of the General Laws, as most recently added by Section 158 of Chapter 224 of the Acts of 2012, is hereby amended by striking subsections (a)-(d) and adding at the end of the existing paragraph the following new paragraph:

Notwithstanding any general or special law or rule or regulation to the contrary, an insurer shall provide for coverage for health care services under an individual, group, or general policy of accident and sickness insurance to an insured through the use of telemedicine by a contracted health care provider. Such health care services shall be covered to the same extent as if they were provided via in-person consultation or in-person delivery. Furthermore, such health care services shall be reimbursed at a rate no less than the rate for in-person consultation or in-person delivery of the same contracted health care services.

A contract that provides coverage for telemedicine services may contain a provision for a deductible, copayment or coinsurance requirement for a health care service provided through telemedicine as long as the deductible, copayment or coinsurance does not exceed the deductible, copayment or coinsurance applicable to an in-person consultation or in-person delivery of services. For health care services provided through telemedicine, a health care provider shall not be required to document a barrier to an in-person visit, nor shall the type of setting where telemedicine is provided be limited. For the purposes of this section, "telemedicine" shall mean

the use of two-way audio-visual interaction or store-and-forward technology, defined as the transmission of a patient's medical information, such as digital images, documents, and pre-recorded video, from an originating site to the physician at the distant site for clinical evaluation.

SECTION 5. Chapter 176A of the General Laws, as appearing in the 2014 Official Edition, is hereby amended by inserting at the end thereof the following new section:

Section 38. Notwithstanding any general or special law or rule or regulation to the contrary, any contract between a subscriber and the corporation under an individual or group hospital service plan shall provide for coverage for health care services to a subscriber through the use of telemedicine by a contracted health care provider. Such health care services shall be covered to the same extent as if they were provided via in-person consultation or in-person delivery. Furthermore, such health care services shall be reimbursed at a rate no less than the rate for in-person consultation or in-person delivery of the same contracted health care services.

A contract that provides coverage for telemedicine services may contain a provision for a deductible, copayment or coinsurance requirement for a health care service provided through telemedicine as long as the deductible, copayment or coinsurance does not exceed the deductible, copayment or coinsurance applicable to an in-person consultation or in-person delivery of services. For health care services provided through telemedicine, a health care provider shall not be required to document a barrier to an in-person visit, nor shall the type of setting where telemedicine is provided be limited. For the purposes of this section, "telemedicine" shall mean the use of two-way audio-visual interaction or store-and-forward technology, defined as the transmission of a patient's medical information, such as digital images, documents, and pre-recorded video, from an originating site to the physician at the distant site for clinical evaluation.

SECTION 6. Chapter 176B of the General Laws, as so appearing, is hereby amended by inserting at the end thereof the following new section:

Section 25. Notwithstanding any general or special law or rule or regulation to the contrary, any contract between a subscriber and the medical service corporation shall provide for coverage for health care services to a subscriber through the use of telemedicine by a contracted health care provider. Such health care services shall be covered to the same extent as if they were provided via in-person consultation or in-person delivery. Furthermore, such health care services shall be reimbursed at a rate no less than the rate for in-person consultation or in-person delivery of the same contracted health care services.

A contract that provides coverage for telemedicine services may contain a provision for a deductible, copayment or coinsurance requirement for a health care service provided through telemedicine as long as the deductible, copayment or coinsurance does not exceed the deductible, copayment or coinsurance applicable to an in-person consultation or in-person delivery of services. For health care services provided through telemedicine, a health care provider shall not be required to document a barrier to an in-person visit, nor shall the type of setting where telemedicine is provided be limited. For the purposes of this section, "telemedicine" shall mean the use of two-way audio-visual interaction or store-and-forward technology, defined as the

transmission of a patient's medical information, such as digital images, documents, and pre-recorded video, from an originating site to the physician at the distant site for clinical evaluation.

SECTION 7. Chapter 176G of the General Laws, as so appearing, is hereby amended by inserting at the end thereof the following new section:

Section 33. Notwithstanding any general or special law or rule or regulation to the contrary, any contract between a member and a carrier shall provide for coverage for health services to a subscriber through the use of telemedicine by a contracted health care provider. Such health services shall be covered to the same extent as if they were provided via in-person consultation or in-person delivery. Furthermore, such health care services shall be reimbursed at a rate no less than the rate for in-person consultation or in-person delivery of the same contracted health care services.

A contract that provides coverage for telemedicine services may contain a provision for a deductible, copayment or coinsurance requirement for a health care service provided through telemedicine as long as the deductible, copayment or coinsurance does not exceed the deductible, copayment or coinsurance applicable to an in-person consultation or in-person delivery of services. For health care services provided through telemedicine, a health care provider shall not be required to document a barrier to an in-person visit, nor shall the type of setting where telemedicine is provided be limited. For the purposes of this section, "telemedicine" shall mean the use of two-way audio-visual interaction or store-and-forward technology, defined as the transmission of a patient's medical information, such as digital images, documents, and pre-recorded video, from an originating site to the physician at the distant site for clinical evaluation.

SECTION 8. Chapter 176I of the General Laws, as so appearing, is hereby amended by inserting at the end thereof the following new section:

Section 13. Notwithstanding any general or special law or rule or regulation to the contrary, any contract between a covered person and an organization shall provide for coverage for health care services to a subscriber through the use of telemedicine by a contracted health

care provider. . Such health care services shall be covered to the same extent as if they were provided via in-person consultation or in-person delivery. Furthermore, such health care services shall be reimbursed at a rate no less than the rate for in-person consultation or in-person delivery of the same contracted health care services.

evaluation.

A contract that provides coverage for telemedicine services may contain a provision for a deductible, copayment or coinsurance requirement for a health care service provided through telemedicine as long as the deductible, copayment or coinsurance does not exceed the deductible, copayment or coinsurance applicable to an in-person consultation or in-person delivery of services. For health care services provided through telemedicine, a health care provider shall not be required to document a barrier to an in-person visit, nor shall the type of setting where telemedicine is provided be limited. For the purposes of this section, "telemedicine" shall mean the use of two-way audio-visual interaction or store-and-forward technology, defined as the transmission of a patient's medical information, such as digital images, documents, and pre-recorded video, from an originating site to the physician at the distant site for clinical

SECTION 9. The provisions this Act shall be effective for all contracts which are entered into, renewed, or amended one year after its effective date.