**Telehealth Insurance Coverage Model Legislation**

APA’s Committee on Telepsychiatry and Department of State Government Relations

August 2020

NEW SECTION. Insert in the relevant title, subtitle, chapter, or subchapter of the insurance code or amend the relevant section (or sections when multiple different sections exist for separate classifications of health insurers such as health service corporations, medical service corporations, HMOs, etc.).

*Italics indicate terms that will vary by state*

(a) As used in this section:

(1) "Distant site" means a site at which a healthcare provider legally allowed to practice in this state is located while providing healthcare services by means of telemedicine or telehealth.

(2) "*Health benefit policy*" means any individual or group plan, policy, or contract for healthcare services issued, delivered, issued for delivery, executed, or renewed in this state.

(3) "*Insurer*" means an *accident and sickness insurer, fraternal benefit society, hospital service corporation, medical service corporation, health care corporation, health maintenance organization, provider sponsored health care corporation, managed care entity, or any similar entity authorized to issue contracts under this title or to provide health benefit policies*.

(4) “mHealth” means patient medical and health information includes the use of the internet and wireless devices for patients to obtain or create specialized health information and online discussion groups to provide peer-to-peer support.

(5) "Originating site" means a site at which a patient is located at the time healthcare services are provided to him or her by means of telemedicine, which can include, but not be restricted to, a patient's home, workplace, or school..

(6) "Remote patient monitoring services" means the delivery of home health services using telecommunications technology to enhance the delivery of home healthcare, including monitoring of clinical patient data such as weight, blood pressure, pulse, pulse oximetry, blood glucose, and other condition-specific data; medication adherence monitoring; and interactive video conferencing with or without digital image upload.

(7) "Store and forward transfer" means the transmission of a patient's medical information either to or from an originating site or to or from the provider at the distant site, but does not require the patient being present nor must it be in real time.

(8) “Telehealth” means technology-enabled health and care management and delivery systems that extend capacity and access. Telehealth includes:

(A) Synchronous mechanisms, which can include live audiovisual interaction between a patient and a healthcare provider or real-time provider to provider consultation through live interactive audiovisual or audio-only telephone, as specified in subparagraph (E);

(B) Asynchronous mechanisms, which include store and forward transfers, online exchange of health information between a patient and a healthcare provider, and online exchange of health information between healthcare providers;

(C) Remote patient monitoring;

(D) mHealth;

(E) Audio-only telephone when no other means of electronic communications technology are available to the patient, due to lack of availability of such technology or lack of adequate broadband access, or the use of other means of electronic communications technology are infeasible, impractical, or otherwise not medically advisable, as determined by the healthcare provider providing telehealth services to the patient or as determined by another healthcare provider with an existing relationship with the patient; and

(F) Other electronic means which support clinical healthcare, provider consultation, patient and professional health related education, public health, and health administration.

(b) Each *insurer* *that issues individual or group health benefit policies* for healthcare services shall provide coverage of healthcare services provided through telehealth, as provided in this section.

(c) An *insurer* shall not exclude a service for coverage solely because the service is provided through telehealth and is not provided through in-person consultation or contact between a healthcare provider and a patient for services appropriately provided through telehealth.

(d) An *insurer* shall reimburse the treating provider or the consulting provider for the diagnosis, consultation, or treatment of the patient delivered through telehealth services on the same basis and at least at the rate of reimbursement that the insurer is responsible for coverage for the provision of the same, or substantially similar, service through in-person consultation or contact.

(e) An *insurer* shall not apply any deductible to telehealth services that accumulates separately from the deductible that applies in the aggregate to all items and services covered under the *health benefit policy*.

(f) Any copayment or coinsurance applied to telehealth benefits by an *insurer* shall be equivalent to the copayment or coinsurance applied to such benefits when provided through in-person consultation or contact.

(g) An *insurer* shall not impose any annual or lifetime durational limits or annual or lifetime dollar maximums for benefits or services provided through telehealth that are not equally imposed upon all terms and services covered under the *health benefit policy*.

(h) An *insurer* shall not impose any type of utilization management on benefits provided through telehealth unless such type of utilization management is imposed when such benefits are provided through in-person consultation or contact. Any type of utilization management that is imposed on benefits provided through telehealth may not occur with greater frequency or more stringent application than such form of utilization management is imposed on such benefits provided through in-person consultation or contact.

(i) An *insurer* shall not require an in-person consultation or contact before a patient may receive telehealth services from a healthcare provider, notwithstanding any other section or sections of *the Occupations and Professions Code of this state*.

(j) An *insurer* shall not restrict coverage of telehealth benefits or services to benefits or services provided by a particular vendor, or other third party, or benefits or services provided through a particular electronic communications technology platform, provided that nothing shall require an *insurer* to cover any electronic communications technology platform that does not comply with applicable state and federal privacy laws.

(k) An *insurer* shall not place any restrictions on prescribing medications through telehealth that are more restrictive than what is required under applicable state and federal law.