

SENATE BILL 242

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By: **Senators Kelley, Astle, Conway, Feldman, Jennings, Klausmeier, Lee, Madaleno, Mathias, Pugh, Raskin, Reilly, Rosapepe, and Young**

Introduced and read first time: January 22, 2016

Assigned to: Finance

A BILL ENTITLED

1 AN ACT concerning

2 **Maryland Medical Assistance Program – Telemedicine – Modifications**

3 FOR the purpose of requiring the Department of Health and Mental Hygiene, under certain
4 circumstances, to include primary care providers in the types of health care providers
5 eligible to receive reimbursement for health care services that are delivered through
6 telemedicine and provided to Maryland Medical Assistance Program recipients;
7 prohibiting the Department from requiring a health care provider to comply with
8 administrative requirements for reimbursement for health care services that are
9 delivered through telemedicine that are not required for reimbursement for health
10 care services that are delivered in person; requiring the Department to provide an
11 opportunity for stakeholders to participate in the development of certain regulations;
12 requiring the Department to submit a draft of the regulations to certain legislative
13 committees and provide a certain period of time for review and comment; and
14 generally relating to Maryland Medical Assistance Program reimbursement for
15 health care services that are delivered through telemedicine.

16 BY repealing and reenacting, with amendments,

17 Article – Health – General

18 Section 15–105.2

19 Annotated Code of Maryland

20 (2015 Replacement Volume)

21 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,

22 That the Laws of Maryland read as follows:

23 **Article – Health – General**

24 15–105.2.

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 (a) The Program shall reimburse health care providers in accordance with the
2 requirements of Title 19, Subtitle 1, Part IV of this article.

3 (b) (1) (i) In this subsection the following words have the meanings
4 indicated.

5 (ii) “Health care provider” means a person who is licensed, certified,
6 or otherwise authorized under the Health Occupations Article to provide health care in the
7 ordinary course of business or practice of a profession or in an approved education or
8 training program.

9 (iii) 1. “Telemedicine” means, as it relates to the delivery of
10 health care services, the use of interactive audio, video, or other telecommunications or
11 electronic technology:

12 A. By a health care provider to deliver a health care service
13 that is within the scope of practice of the health care provider at a site other than the site
14 at which the patient is located; and

15 B. That enables the patient to see and interact with the
16 health care provider at the time the health care service is provided to the patient.

17 2. “Telemedicine” does not include:

18 A. An audio-only telephone conversation between a health
19 care provider and a patient;

20 B. An electronic mail message between a health care provider
21 and a patient; or

22 C. A facsimile transmission between a health care provider
23 and a patient.

24 (2) To the extent authorized by federal law or regulation, the provisions of
25 § 15–139(c) through (f) of the Insurance Article relating to coverage of and reimbursement
26 for health care services delivered through telemedicine shall apply to the Program and
27 managed care organizations in the same manner they apply to carriers.

28 (3) Subject to the limitations of the State budget and to the extent
29 authorized by federal law or regulation, the Department may authorize coverage of and
30 reimbursement for health care services that are delivered through store and forward
31 technology or remote patient monitoring.

32 (4) (I) The Department may specify by regulation the types of health
33 care providers eligible to receive reimbursement for health care services provided to
34 Program recipients under this subsection.

1 **(II) IF THE DEPARTMENT SPECIFIES BY REGULATION THE**
2 **TYPES OF HEALTH CARE PROVIDERS ELIGIBLE TO RECEIVE REIMBURSEMENT FOR**
3 **HEALTH CARE SERVICES PROVIDED TO PROGRAM RECIPIENTS UNDER THIS**
4 **SUBSECTION, THE TYPES OF HEALTH CARE PROVIDERS SPECIFIED SHALL INCLUDE**
5 **PRIMARY CARE PROVIDERS.**

6 **(5) THE DEPARTMENT MAY NOT REQUIRE A HEALTH CARE PROVIDER**
7 **TO COMPLY WITH ADMINISTRATIVE REQUIREMENTS, INCLUDING APPROVAL OF A**
8 **PROVIDER ADDENDUM, FOR REIMBURSEMENT FOR HEALTH CARE SERVICES THAT**
9 **ARE DELIVERED THROUGH TELEMEDICINE THAT ARE NOT REQUIRED FOR**
10 **REIMBURSEMENT FOR HEALTH CARE SERVICES THAT ARE DELIVERED IN PERSON.**

11 **[(5)] (6) (I)** The Department shall adopt regulations to carry out this
12 subsection.

13 **(II) THE DEPARTMENT SHALL:**

14 **1. PROVIDE AN OPPORTUNITY FOR STAKEHOLDERS TO**
15 **PARTICIPATE IN THE DEVELOPMENT OF THE REGULATIONS; AND**

16 **2. A. SUBMIT A DRAFT OF THE REGULATIONS TO THE**
17 **SENATE FINANCE COMMITTEE AND THE HOUSE HEALTH AND GOVERNMENT**
18 **OPERATIONS COMMITTEE; AND**

19 **B. PROVIDE THE COMMITTEES WITH A 30-DAY PERIOD**
20 **FOR REVIEW AND COMMENT.**

21 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
22 October 1, 2016.