

**SENATE
STATE OF MINNESOTA
NINETY-FIRST SESSION**

S.F. No. 4565

(SENATE AUTHORS: ROSEN, Abeler, Marty and Eken)

DATE
05/06/2020

D-PG

OFFICIAL STATUS
Introduction and first reading
Referred to Health and Human Services Finance and Policy

1.1 A bill for an act
1.2 relating to health care; expanding and modifying the use of telemedicine; amending
1.3 Minnesota Statutes 2018, sections 62A.671, subdivisions 6, 7, 9; 62A.672,
1.4 subdivisions 2, 3.

1.5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.6 Section 1. Minnesota Statutes 2018, section 62A.671, subdivision 6, is amended to read:

1.7 Subd. 6. **Licensed health care provider.** "Licensed health care provider" means a health
1.8 care provider who is:

1.9 (1) licensed under chapter 147, 147A, 147C, 148, 148B, 148E, 148F, 150A, or 153; a
1.10 mental health professional as defined under section 245.462, subdivision 18, or 245.4871,
1.11 subdivision 27; or vendor of medical care defined in section 256B.02, subdivision 7; and

1.12 ~~(2) authorized within their respective scope of practice to provide the particular service~~
1.13 ~~with no supervision or under general supervision; or~~

1.14 (2) a mental health practitioner, as defined under section 245.462, subdivision 17, or
1.15 245.4871, subdivision 26, who is working under the supervision of a mental health
1.16 professional.

1.17 Sec. 2. Minnesota Statutes 2018, section 62A.671, subdivision 7, is amended to read:

1.18 Subd. 7. **Originating site.** "Originating site" means a site ~~including, but not limited to,~~
1.19 ~~a health care facility~~ at which a patient is located at the time health care services are provided
1.20 to the patient by means of telemedicine. Originating site includes the patient's home residence.

2.1 Sec. 3. Minnesota Statutes 2018, section 62A.671, subdivision 9, is amended to read:

2.2 Subd. 9. **Telemedicine.** "Telemedicine" means the delivery of health care services or
2.3 consultations while the patient is at an originating site and the licensed health care provider
2.4 is at a distant site. A communication between licensed health care providers that consists
2.5 solely of a telephone conversation, e-mail, or facsimile transmission does not constitute
2.6 telemedicine consultations or services. A communication between a licensed health care
2.7 provider and a patient that consists solely of an e-mail or facsimile transmission does not
2.8 constitute telemedicine consultations or services. A communication between a licensed
2.9 health care provider and a patient that consists solely or primarily of a telephone conversation
2.10 constitutes a telemedicine consultation or service. Telemedicine may be provided by means
2.11 of real-time two-way, interactive audio and visual communications, including the application
2.12 of secure video conferencing or store-and-forward technology to provide or support health
2.13 care delivery, which facilitate the assessment, diagnosis, consultation, treatment, education,
2.14 and care management of a patient's health care.

2.15 Sec. 4. Minnesota Statutes 2018, section 62A.672, subdivision 2, is amended to read:

2.16 Subd. 2. **Parity between telemedicine and in-person services.** (a) A health carrier shall
2.17 not exclude a service for coverage solely because the service is provided via telemedicine
2.18 and is not provided through in-person consultation or contact between a licensed health care
2.19 provider and a patient.

2.20 (b) A health carrier shall not create a separate telemedicine provider network or provide
2.21 incentives to patients to use a separate provider network for telemedicine services that does
2.22 not include network providers who provide in-person care to patients.

2.23 Sec. 5. Minnesota Statutes 2018, section 62A.672, subdivision 3, is amended to read:

2.24 Subd. 3. **Reimbursement for telemedicine services.** (a) A health carrier shall reimburse
2.25 the distant site licensed health care provider for covered services delivered via telemedicine
2.26 on the same basis and at the same rate as the health carrier would apply to those services if
2.27 the services had been delivered in person by the distant site licensed health care provider.

2.28 (b) A health carrier shall not deny or limit reimbursement based solely on a provider
2.29 delivering consultations or health care services by telemedicine instead of in person.

2.30 (c) A health carrier shall not deny or limit reimbursement based solely on the mechanism
2.31 or platform of telemedicine used by the provider to deliver consultations or health care

3.1 services, provided the mechanism or platform used by the provider allows for the delivery
3.2 of telemedicine services, as defined in section 62A.671, subdivision 9.

3.3 (d) It is not a violation of this subdivision for a health carrier to include a deductible,
3.4 co-payment, or coinsurance requirement for a health care service provided via telemedicine,
3.5 provided that the deductible, co-payment, or coinsurance is not in addition to, and does not
3.6 exceed, the deductible, co-payment, or coinsurance applicable if the same services were
3.7 provided through in-person contact.