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SENATE BILL NO. 56—COMMITTEE ON COMMERCE AND LABOR

(ON BEHALF OF THE CLARK REGIONAL  
BEHAVIORAL HEALTH POLICY BOARD)

PREFILED NOVEMBER 18, 2020

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Referred to Committee on Commerce and Labor

SUMMARY—Revises provisions governing insurance coverage of behavioral health services. (BDR 57-124)

FISCAL NOTE: Effect on Local Government: No.  
Effect on the State: No.

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EXPLANATION – Matter in *bolded italics* is new; matter between brackets ~~omitted material~~ is material to be omitted.

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AN ACT relating to insurance; imposing certain requirements governing coverage of behavioral health services; and providing other matters properly relating thereto.

**Legislative Counsel’s Digest:**

1 Existing law defines the term “telehealth” to mean the delivery of services from  
2 a provider of health care to a patient at a different location through the use of  
3 information and audio-visual communication technology, not including standard  
4 telephone, facsimile or electronic mail. (NRS 629.515) Existing law imposes  
5 certain requirements concerning coverage of telehealth services by insurers and  
6 certain other third-party payers. Those requirements: (1) include a requirement that  
7 an insurer or other third-party payer must cover services provided through  
8 telehealth to the same extent as if provided in person or by other means; and (2)  
9 apply to health coverage, including Medicaid and health plans for state and local  
10 government employees, and workers’ compensation coverage. (NRS 287.010,  
11 287.04335, 422.2721, 616C.730, 689A.0463, 689B.0369, 689C.195, 695A.265,  
12 695B.1904, 695C.1708, 695F.090, 695G.162) This bill: (1) extends those  
13 requirements to also apply to behavioral health services provided by standard  
14 telephone; and (2) requires coverage of behavioral health services provided by  
15 telehealth in the same amount as if those services were provided in person or by  
16 other means. Additionally, this bill prohibits a third party from issuing coverage of  
17 behavioral health services provided in a person’s home that depends on the location  
18 of the home.

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THE PEOPLE OF THE STATE OF NEVADA, REPRESENTED IN  
SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

1 **Section 1.** NRS 689A.0463 is hereby amended to read as  
2 follows:

3 689A.0463 1. A policy of health insurance must include  
4 coverage for :

5 (a) *Behavioral health services provided to an insured through*  
6 *telehealth or by standard telephone to the same extent and in the*  
7 *same amount as though provided in person or by other means;*  
8 *and*

9 (b) *Other* services provided to an insured through telehealth to  
10 the same extent as though provided in person or by other means.

11 2. An insurer shall not:

12 (a) Require an insured to establish a relationship in person with  
13 a provider of health care or provide any additional consent to or  
14 reason for obtaining *behavioral health services through telehealth*  
15 *or by standard telephone or other* services through telehealth as a  
16 condition to providing the coverage described in subsection 1;

17 (b) Require a provider of health care to ~~[demonstrate]~~ :

18 (1) *Demonstrate* that it is necessary to provide *behavioral*  
19 *health services to an insured through telehealth or by standard*  
20 *telephone or other* services to an insured through telehealth *as a*  
21 *condition to providing the coverage described in subsection 1;* or  
22 ~~[receive]~~

23 (2) *Receive* any additional type of certification or license to  
24 provide *behavioral health services through telehealth or by*  
25 *standard telephone or other* services through telehealth as a  
26 condition to providing the coverage described in subsection 1;

27 (c) Refuse to provide the coverage described in subsection 1  
28 because of ~~[the]~~ :

29 (1) *The* distant site from which a provider of health care  
30 provides *behavioral health services through telehealth or by*  
31 *standard telephone or other* services through telehealth ; or ~~[the]~~

32 (2) *The* originating site at which an insured receives  
33 *behavioral health services through telehealth or by standard*  
34 *telephone or other* services through telehealth; or

35 (d) Require *covered behavioral health services to be provided*  
36 *through telehealth or by standard telephone or require other*  
37 covered services to be provided through telehealth as a condition to  
38 providing coverage for such services.

39 3. A policy of health insurance must not require an insured to  
40 obtain prior authorization for any *behavioral health service*  
41 *provided through telehealth or by standard telephone or any other*  
42 service provided through telehealth that is not required for the



1 service when provided in person. A policy of health insurance may  
2 require prior authorization for a *behavioral health service provided*  
3 *through telehealth or by standard telephone or another* service  
4 provided through telehealth if such prior authorization would be  
5 required if the service were provided in person or by other means.

6 4. *If a policy of health insurance includes coverage for*  
7 *behavioral health services provided in the home of an insured,*  
8 *such coverage must not depend on the geographic location at*  
9 *which the home is located.*

10 5. The provisions of this section do not require an insurer to:

11 (a) Ensure that covered services are available to an insured  
12 through telehealth *or by standard telephone* at a particular  
13 originating site;

14 (b) Provide coverage for a service that is not a covered service  
15 or that is not provided by a covered provider of health care; or

16 (c) Enter into a contract with any provider of health care or  
17 cover any service if the insurer is not otherwise required by law to  
18 do so.

19 ~~5.~~ 6. A policy of health insurance subject to the provisions of  
20 this chapter that is delivered, issued for delivery or renewed on or  
21 after July 1, ~~2015,~~ 2021, has the legal effect of including the  
22 coverage required by this section, and any provision of the policy or  
23 the renewal which is in conflict with this section is void.

24 ~~6.~~ 7. As used in this section:

25 (a) *“Behavioral health services” has the meaning ascribed to it*  
26 *in NRS 422.2721.*

27 (b) “Distant site” has the meaning ascribed to it in  
28 NRS 629.515.

29 ~~(b)~~ (c) “Originating site” has the meaning ascribed to it in  
30 NRS 629.515.

31 ~~(e)~~ (d) “Provider of health care” has the meaning ascribed to it  
32 in NRS 439.820.

33 ~~(d)~~ (e) “Telehealth” has the meaning ascribed to it in  
34 NRS 629.515.

35 **Sec. 2.** NRS 689B.0369 is hereby amended to read as follows:

36 689B.0369 1. A policy of group or blanket health insurance  
37 must include coverage for :

38 (a) *Behavioral health services provided to an insured through*  
39 *telehealth or by standard telephone to the same extent and in the*  
40 *same amount as though provided in person or by other means;*  
41 *and*

42 (b) *Other* services provided to an insured through telehealth to  
43 the same extent as though provided in person or by other means.

44 2. An insurer shall not:



1 (a) Require an insured to establish a relationship in person with  
2 a provider of health care or provide any additional consent to or  
3 reason for obtaining *behavioral health services through telehealth*  
4 *or by standard telephone or other* services through telehealth as a  
5 condition to providing the coverage described in subsection 1;

6 (b) Require a provider of health care to **[demonstrate]** :

7 (1) *Demonstrate* that it is necessary to provide *behavioral*  
8 *health services to an insured through telehealth or by standard*  
9 *telephone or other* services to an insured through telehealth *as a*  
10 *condition to providing the coverage described in subsection 1*; or  
11 **[receive]**

12 (2) *Receive* any additional type of certification or license to  
13 provide *behavioral health services through telehealth or by*  
14 *standard telephone or other* services through telehealth as a  
15 condition to providing the coverage described in subsection 1;

16 (c) Refuse to provide the coverage described in subsection 1  
17 because of **[the]** :

18 (1) *The* distant site from which a provider of health care  
19 provides *behavioral health services through telehealth or by*  
20 *standard telephone or other* services through telehealth ; or **[the]**

21 (2) *The* originating site at which an insured receives  
22 *behavioral health services through telehealth or by standard*  
23 *telephone or other* services through telehealth; or

24 (d) Require *covered behavioral health services to be provided*  
25 *through telehealth or by standard telephone or require other*  
26 covered services to be provided through telehealth as a condition to  
27 providing coverage for such services.

28 3. A policy of group or blanket health insurance must not  
29 require an insured to obtain prior authorization for any *behavioral*  
30 *health service provided through telehealth or by standard*  
31 *telephone or any other* service provided through telehealth that is  
32 not required for that service when provided in person. A policy of  
33 group or blanket health insurance may require prior authorization  
34 for a *behavioral health service provided through telehealth or by*  
35 *standard telephone or another* service provided through telehealth  
36 if such prior authorization would be required if the service were  
37 provided in person or by other means.

38 4. *If a policy of group or blanket health insurance includes*  
39 *coverage for behavioral health services provided in the home of an*  
40 *insured, such coverage must not depend on the geographic*  
41 *location at which the home is located.*

42 5. The provisions of this section do not require an insurer to:

43 (a) Ensure that covered services are available to an insured  
44 through telehealth *or by standard telephone* at a particular  
45 originating site;



1 (b) Provide coverage for a service that is not a covered service  
2 or that is not provided by a covered provider of health care; or

3 (c) Enter into a contract with any provider of health care or  
4 cover any service if the insurer is not otherwise required by law to  
5 do so.

6 ~~[5.]~~ 6. A policy of group or blanket health insurance subject to  
7 the provisions of this chapter that is delivered, issued for delivery or  
8 renewed on or after July 1, ~~[2015.]~~ 2021, has the legal effect of  
9 including the coverage required by this section, and any provision of  
10 the policy or the renewal which is in conflict with this section is  
11 void.

12 ~~[6.]~~ 7. As used in this section:

13 (a) *“Behavioral health services” has the meaning ascribed to it*  
14 *in NRS 422.2721.*

15 (b) “Distant site” has the meaning ascribed to it in  
16 NRS 629.515.

17 ~~[(b)]~~ (c) “Originating site” has the meaning ascribed to it in  
18 NRS 629.515.

19 ~~[(c)]~~ (d) “Provider of health care” has the meaning ascribed to it  
20 in NRS 439.820.

21 ~~[(d)]~~ (e) “Telehealth” has the meaning ascribed to it in  
22 NRS 629.515.

23 **Sec. 3.** NRS 689C.195 is hereby amended to read as follows:

24 689C.195 1. A health benefit plan must include coverage  
25 for :

26 (a) *Behavioral health services provided to an insured through*  
27 *telehealth or by standard telephone to the same extent and in the*  
28 *same amount as though provided in person or by other means;*  
29 *and*

30 (b) *Other* services provided to an insured through telehealth to  
31 the same extent as though provided in person or by other means.

32 2. A carrier shall not:

33 (a) Require an insured to establish a relationship in person with  
34 a provider of health care or provide any additional consent to or  
35 reason for obtaining *behavioral health services through telehealth*  
36 *or by standard telephone or other* services through telehealth as a  
37 condition to providing the coverage described in subsection 1;

38 (b) Require a provider of health care to ~~[demonstrate]~~ :

39 (1) *Demonstrate* that it is necessary to provide *behavioral*  
40 *health services to an insured through telehealth or by standard*  
41 *telephone or other* services to an insured through telehealth *as a*  
42 *condition to providing the coverage described in subsection 1;* or  
43 ~~[receive]~~

44 (2) *Receive* any additional type of certification or license to  
45 provide *behavioral health services through telehealth or by*



1 *standard telephone or other* services through telehealth as a  
2 condition to providing the coverage described in subsection 1;

3 (c) Refuse to provide the coverage described in subsection 1  
4 because of ~~the~~ :

5 (1) *The* distant site from which a provider of health care  
6 provides *behavioral health services through telehealth or by*  
7 *standard telephone or other* services through telehealth ; or ~~the~~

8 (2) *The* originating site at which an insured receives  
9 *behavioral health services through telehealth or by standard*  
10 *telephone or other* services through telehealth; or

11 (d) Require *covered behavioral health services to be provided*  
12 *through telehealth or by standard telephone or require other*  
13 covered services to be provided through telehealth as a condition to  
14 providing coverage for such services.

15 3. A health benefit plan must not require an insured to obtain  
16 prior authorization for any *behavioral health service provided*  
17 *through telehealth or by standard telephone or any other* service  
18 provided through telehealth that is not required for the service when  
19 provided in person. A health benefit plan may require prior  
20 authorization for a *behavioral health service provided through*  
21 *telehealth or by standard telephone or another* service provided  
22 through telehealth if such prior authorization would be required if  
23 the service were provided in person or by other means.

24 4. *If a health benefit plan includes coverage for behavioral*  
25 *health services provided in the home of an insured, such coverage*  
26 *must not depend on the geographic location at which the home is*  
27 *located.*

28 5. The provisions of this section do not require a carrier to:

29 (a) Ensure that covered services are available to an insured  
30 through telehealth *or by standard telephone* at a particular  
31 originating site;

32 (b) Provide coverage for a service that is not a covered service  
33 or that is not provided by a covered provider of health care; or

34 (c) Enter into a contract with any provider of health care or  
35 cover any service if the carrier is not otherwise required by law to  
36 do so.

37 ~~5.~~ 6. A plan subject to the provisions of this chapter that is  
38 delivered, issued for delivery or renewed on or after July 1, ~~2015,~~  
39 **2021**, has the legal effect of including the coverage required by this  
40 section, and any provision of the plan or the renewal which is in  
41 conflict with this section is void.

42 ~~6.~~ 7. As used in this section:

43 (a) *“Behavioral health services” has the meaning ascribed to it*  
44 *in NRS 422.2721.*



1 (b) "Distant site" has the meaning ascribed to it in  
2 NRS 629.515.

3 ~~[(b)]~~ (c) "Originating site" has the meaning ascribed to it in  
4 NRS 629.515.

5 ~~[(e)]~~ (d) "Provider of health care" has the meaning ascribed to it  
6 in NRS 439.820.

7 ~~[(d)]~~ (e) "Telehealth" has the meaning ascribed to it in  
8 NRS 629.515.

9 **Sec. 4.** NRS 695A.265 is hereby amended to read as follows:  
10 695A.265 1. A benefit contract must include coverage for :

11 (a) *Behavioral health services provided to an insured through*  
12 *telehealth or by standard telephone to the same extent and in the*  
13 *same amount as though provided in person or by other means;*  
14 *and*

15 (b) *Other* services provided to an insured through telehealth to  
16 the same extent as though provided in person or by other means.

17 2. A society shall not:

18 (a) Require an insured to establish a relationship in person with  
19 a provider of health care or provide any additional consent to or  
20 reason for obtaining *behavioral health services through telehealth*  
21 *or by standard telephone or other* services through telehealth as a  
22 condition to providing the coverage described in subsection 1;

23 (b) Require a provider of health care to ~~[demonstrate]~~ :

24 (1) *Demonstrate* that it is necessary to provide *behavioral*  
25 *health services to an insured through telehealth or by standard*  
26 *telephone or other* services to an insured through telehealth *as a*  
27 *condition to providing the coverage described in subsection 1;* or  
28 ~~[receive]~~

29 (2) *Receive* any additional type of certification or license to  
30 provide *behavioral health services through telehealth or by*  
31 *standard telephone or other* services through telehealth as a  
32 condition to providing the coverage described in subsection 1;

33 (c) Refuse to provide the coverage described in subsection 1  
34 because of ~~[the]~~ :

35 (1) *The* distant site from which a provider of health care  
36 provides *behavioral health services through telehealth or by*  
37 *standard telephone or other* services through telehealth ; or ~~[the]~~

38 (2) *The* originating site at which an insured receives  
39 *behavioral health services through telehealth or by standard*  
40 *telephone or other* services through telehealth; or

41 (d) Require *covered behavioral health services to be provided*  
42 *through telehealth or by standard telephone or require other*  
43 covered services to be provided through telehealth as a condition to  
44 providing coverage for such services.



1 3. A benefit contract must not require an insured to obtain prior  
2 authorization for any *behavioral health service provided through*  
3 *telehealth or by standard telephone or any other* service provided  
4 through telehealth that is not required for the service when provided  
5 in person. A benefit contract may require prior authorization for a  
6 *behavioral health service provided through telehealth or by*  
7 *standard telephone or another* service provided through telehealth  
8 if such prior authorization would be required if the service were  
9 provided in person or by other means.

10 4. *If a benefit contract includes coverage for behavioral*  
11 *health services provided in the home of an insured, such coverage*  
12 *must not depend on the geographic location at which the home is*  
13 *located.*

14 5. The provisions of this section do not require a society to:

15 (a) Ensure that covered services are available to an insured  
16 through telehealth *or by standard telephone* at a particular  
17 originating site;

18 (b) Provide coverage for a service that is not a covered service  
19 or that is not provided by a covered provider of health care; or

20 (c) Enter into a contract with any provider of health care or  
21 cover any service if the society is not otherwise required by law to  
22 do so.

23 ~~{5.}~~ 6. A benefit contract subject to the provisions of this  
24 chapter that is delivered, issued for delivery or renewed on or after  
25 July 1, ~~{2015.}~~ 2021, has the legal effect of including the coverage  
26 required by this section, and any provision of the contract or the  
27 renewal which is in conflict with this section is void.

28 ~~{6.}~~ 7. As used in this section:

29 (a) *“Behavioral health services” has the meaning ascribed to it*  
30 *in NRS 422.2721.*

31 (b) “Distant site” has the meaning ascribed to it in  
32 NRS 629.515.

33 ~~{(b)}~~ (c) “Originating site” has the meaning ascribed to it in  
34 NRS 629.515.

35 ~~{(e)}~~ (d) “Provider of health care” has the meaning ascribed to it  
36 in NRS 439.820.

37 ~~{(d)}~~ (e) “Telehealth” has the meaning ascribed to it in  
38 NRS 629.515.

39 **Sec. 5.** NRS 695B.1904 is hereby amended to read as follows:

40 695B.1904 1. A contract for hospital, medical or dental  
41 services subject to the provisions of this chapter must include  
42 *coverage for:*

43 (a) *Behavioral health services provided to an insured through*  
44 *telehealth or by standard telephone to the same extent and in the*





1 *same amount as though provided in person or by other means;*  
2 *and*

3 (b) *Other* services provided to an insured through telehealth to  
4 the same extent as though provided in person or by other means.

5 2. A medical services corporation that issues contracts for  
6 hospital, medical or dental services shall not:

7 (a) Require an insured to establish a relationship in person with  
8 a provider of health care or provide any additional consent to or  
9 reason for obtaining *behavioral health services through telehealth*  
10 *or by standard telephone or other* services through telehealth as a  
11 condition to providing the coverage described in subsection 1;

12 (b) Require a provider of health care to ~~[(demonstrate)]~~ :

13 (1) *Demonstrate* that it is necessary to provide *behavioral*  
14 *health services to an insured through telehealth or by standard*  
15 *telephone or other* services to an insured through telehealth *as a*  
16 *condition to providing the coverage described in subsection 1*; or  
17 ~~[(receive)]~~

18 (2) *Receive* any additional type of certification or license to  
19 provide *behavioral health services through telehealth or by*  
20 *standard telephone or other* services through telehealth as a  
21 condition to providing the coverage described in subsection 1;

22 (c) Refuse to provide the coverage described in subsection 1  
23 because of ~~[(the)]~~ :

24 (1) *The* distant site from which a provider of health care  
25 provides *behavioral health services through telehealth or by*  
26 *standard telephone or other* services through telehealth ; or ~~[(the)]~~

27 (2) *The* originating site at which an insured receives  
28 *behavioral health services through telehealth or by standard*  
29 *telephone or other* services through telehealth; or

30 (d) Require *covered behavioral health services to be provided*  
31 *through telehealth or by standard telephone or require other*  
32 *covered services to be provided through telehealth as a condition to*  
33 *providing coverage for such services.*

34 3. A contract for hospital, medical or dental services must not  
35 require an insured to obtain prior authorization for any *behavioral*  
36 *health service provided through telehealth or by standard*  
37 *telephone or any other* service provided through telehealth that is  
38 not required for the service when provided in person. A contract for  
39 hospital, medical or dental services may require prior authorization  
40 for a *behavioral health service provided through telehealth or by*  
41 *standard telephone or another* service provided through telehealth  
42 if such prior authorization would be required if the service were  
43 provided in person or by other means.

44 4. *If a contract for hospital, medical or dental services*  
45 *includes coverage for behavioral health services provided in the*



1 *home of an insured, such coverage must not depend on the*  
2 *geographic location at which the home is located.*

3 5. The provisions of this section do not require a medical  
4 services corporation that issues contracts for hospital, medical or  
5 dental services to:

6 (a) Ensure that covered services are available to an insured  
7 through telehealth *or by standard telephone* at a particular  
8 originating site;

9 (b) Provide coverage for a service that is not a covered service  
10 or that is not provided by a covered provider of health care; or

11 (c) Enter into a contract with any provider of health care or  
12 cover any service if the medical services corporation is not  
13 otherwise required by law to do so.

14 ~~5.1~~ 6. A contract for hospital, medical or dental services  
15 subject to the provisions of this chapter that is delivered, issued for  
16 delivery or renewed on or after July 1, ~~2015,~~ 2021, has the legal  
17 effect of including the coverage required by this section, and any  
18 provision of the contract or the renewal which is in conflict with this  
19 section is void.

20 ~~6.1~~ 7. As used in this section:

21 (a) *“Behavioral health services” has the meaning ascribed to it*  
22 *in NRS 422.2721.*

23 (b) “Distant site” has the meaning ascribed to it in  
24 NRS 629.515.

25 ~~(b)~~ (c) “Originating site” has the meaning ascribed to it in  
26 NRS 629.515.

27 ~~(e)~~ (d) “Provider of health care” has the meaning ascribed to it  
28 in NRS 439.820.

29 ~~(d)~~ (e) “Telehealth” has the meaning ascribed to it in  
30 NRS 629.515.

31 **Sec. 6.** NRS 695C.1708 is hereby amended to read as follows:

32 695C.1708 1. A health care plan of a health maintenance  
33 organization must include coverage for :

34 (a) *Behavioral health services provided to an enrollee through*  
35 *telehealth or by standard telephone to the same extent and in the*  
36 *same amount as though provided in person or by other means;*  
37 *and*

38 (b) *Other* services provided to an enrollee through telehealth to  
39 the same extent as though provided in person or by other means.

40 2. A health maintenance organization shall not:

41 (a) Require an enrollee to establish a relationship in person with  
42 a provider of health care or provide any additional consent to or  
43 reason for obtaining *behavioral health services through telehealth*  
44 *or by standard telephone or other* services through telehealth as a  
45 condition to providing the coverage described in subsection 1;



(b) Require a provider of health care to ~~[demonstrate]~~ :

(1) *Demonstrate* that it is necessary to provide *behavioral health services to an enrollee through telehealth or by standard telephone or other* services to an enrollee through telehealth *as a condition to providing the coverage described in subsection 1*; or ~~[receive]~~

(2) *Receive* any additional type of certification or license to provide *behavioral health services through telehealth or by standard telephone or other* services through telehealth as a condition to providing the coverage described in subsection 1;

(c) Refuse to provide the coverage described in subsection 1 because of ~~[the]~~ :

(1) *The* distant site from which a provider of health care provides *behavioral health services through telehealth or by standard telephone or other* services through telehealth; or ~~[the]~~

(2) *The* originating site at which an enrollee receives *behavioral health services through telehealth or by standard telephone or other* services through telehealth; or

(d) Require *covered behavioral health services to be provided through telehealth or by standard telephone or require other* covered services to be provided through telehealth as a condition to providing coverage for such services.

3. A health care plan of a health maintenance organization must not require an enrollee to obtain prior authorization for any *behavioral health service provided through telehealth or by standard telephone or any other* service provided through telehealth that is not required for the service when provided in person. Such a health care plan may require prior authorization for a *behavioral health service provided through telehealth or by standard telephone or another* service provided through telehealth if such prior authorization would be required if the service were provided in person or by other means.

4. *If a health care plan of a health maintenance organization includes coverage for behavioral health services provided in the home of an enrollee, such coverage must not depend on the geographic location at which the home is located.*

5. The provisions of this section do not require a health maintenance organization to:

(a) Ensure that covered services are available to an enrollee through telehealth *or by standard telephone* at a particular originating site;

(b) Provide coverage for a service that is not a covered service or that is not provided by a covered provider of health care; or



1 (c) Enter into a contract with any provider of health care or  
2 cover any service if the health maintenance organization is not  
3 otherwise required by law to do so.

4 ~~[5.]~~ 6. Evidence of coverage subject to the provisions of this  
5 chapter that is delivered, issued for delivery or renewed on or after  
6 July 1, ~~[2015.]~~ 2021, has the legal effect of including the coverage  
7 required by this section, and any provision of the plan or the renewal  
8 which is in conflict with this section is void.

9 ~~[6.]~~ 7. As used in this section:

10 (a) *“Behavioral health services” has the meaning ascribed to it*  
11 *in NRS 422.2721.*

12 (b) “Distant site” has the meaning ascribed to it in  
13 NRS 629.515.

14 ~~[(b)]~~ (c) “Originating site” has the meaning ascribed to it in  
15 NRS 629.515.

16 ~~[(e)]~~ (d) “Provider of health care” has the meaning ascribed to it  
17 in NRS 439.820.

18 ~~[(d)]~~ (e) “Telehealth” has the meaning ascribed to it in  
19 NRS 629.515.

20 **Sec. 7.** NRS 695G.162 is hereby amended to read as follows:

21 695G.162 1. A health care plan issued by a managed care  
22 organization for group coverage must include coverage for :

23 (a) *Behavioral health services provided to an insured through*  
24 *telehealth or by standard telephone to the same extent and in the*  
25 *same amount as though provided in person or by other means;*  
26 *and*

27 (b) *Other* services provided to an insured through telehealth to  
28 the same extent as though provided in person or by other means.

29 2. A managed care organization shall not:

30 (a) Require an insured to establish a relationship in person with  
31 a provider of health care or provide any additional consent to or  
32 reason for obtaining *behavioral health services through telehealth*  
33 *or by standard telephone or other* services through telehealth as a  
34 condition to providing the coverage described in subsection 1;

35 (b) Require a provider of health care to ~~[demonstrate]~~ :

36 (1) *Demonstrate* that it is necessary to provide *behavioral*  
37 *health services to an insured through telehealth or by standard*  
38 *telephone or other* services to an insured through telehealth *as a*  
39 *condition to providing the coverage described in subsection 1;* or  
40 ~~[receive]~~

41 (2) *Receive* any additional type of certification or license to  
42 provide *behavioral health services through telehealth or by*  
43 *standard telephone or other* services through telehealth as a  
44 condition to providing the coverage described in subsection 1;



1 (c) Refuse to provide the coverage described in subsection 1  
2 because of ~~the~~ :

3 (1) *The* distant site from which a provider of health care  
4 provides services through telehealth ; or ~~the~~

5 (2) *The* originating site at which an insured receives  
6 *behavioral health services through telehealth or by standard*  
7 *telephone or other* services through telehealth; or

8 (d) Require *covered behavioral health services to be provided*  
9 *through telehealth or by standard telephone or require other*  
10 covered services to be provided through telehealth as a condition to  
11 providing coverage for such services.

12 3. A health care plan of a managed care organization must not  
13 require an insured to obtain prior authorization for any *behavioral*  
14 *health service provided through telehealth or by standard*  
15 *telephone or any other* service provided through telehealth that is  
16 not required for the service when provided in person. Such a health  
17 care plan may require prior authorization for a *behavioral health*  
18 *service provided through telehealth or by standard telephone or*  
19 *another* service provided through telehealth if such prior  
20 authorization would be required if the service were provided in  
21 person or by other means.

22 4. *If a health care plan of a managed care organization*  
23 *includes coverage for behavioral health services provided in the*  
24 *home of an insured, such coverage must not depend on the*  
25 *geographic location at which the home is located.*

26 5. The provisions of this section do not require a managed care  
27 organization to:

28 (a) Ensure that covered services are available to an insured  
29 through telehealth *or by standard telephone* at a particular  
30 originating site;

31 (b) Provide coverage for a service that is not a covered service  
32 or that is not provided by a covered provider of health care; or

33 (c) Enter into a contract with any provider of health care or  
34 cover any service if the managed care organization is not otherwise  
35 required by law to do so.

36 ~~5.~~ 6. Evidence of coverage that is delivered, issued for  
37 delivery or renewed on or after July 1, ~~2015,~~ 2021, has the legal  
38 effect of including the coverage required by this section, and any  
39 provision of the plan or the renewal which is in conflict with this  
40 section is void.

41 ~~6.~~ 7. As used in this section:

42 (a) *“Behavioral health services” has the meaning ascribed to it*  
43 *in NRS 422.2721.*

44 (b) “Distant site” has the meaning ascribed to it in  
45 NRS 629.515.



1 ~~[(b)]~~ (c) “Originating site” has the meaning ascribed to it in  
2 NRS 629.515.

3 ~~[(e)]~~ (d) “Provider of health care” has the meaning ascribed to it  
4 in NRS 439.820.

5 ~~[(d)]~~ (e) “Telehealth” has the meaning ascribed to it in  
6 NRS 629.515.

7 **Sec. 8.** NRS 422.2721 is hereby amended to read as follows:

8 422.2721 1. The Director shall include in the State Plan for  
9 Medicaid:

10 (a) A requirement that the State, and, to the extent applicable,  
11 any of its political subdivisions, shall pay for the nonfederal share of  
12 expenses for ~~[services]~~:

13 (1) *Behavioral health services provided to a person through*  
14 *telehealth or by standard telephone to the same extent and in the*  
15 *same amount as though provided in person or by other means;*  
16 *and*

17 (2) *Other services* provided to a person through telehealth to  
18 the same extent as though provided in person or by other means; and

19 (b) A provision prohibiting the State from:

20 (1) Requiring a person to obtain prior authorization that  
21 would not be required if a service were provided in person or  
22 through other means, establish a relationship with a provider of  
23 health care or provide any additional consent to or reason for  
24 obtaining *behavioral health services through telehealth or by*  
25 *standard telephone or other* services through telehealth as a  
26 condition to paying for services as described in paragraph (a). The  
27 State Plan for Medicaid may require prior authorization for a  
28 *behavioral health service provided through telehealth or by*  
29 *standard telephone or another* service provided through telehealth  
30 if such prior authorization would be required if the service were  
31 provided in person or through other means.

32 (2) Requiring a provider of health care to ~~[demonstrate]~~:

33 (I) *Demonstrate* that it is necessary to provide *behavioral*  
34 *health services to a person through telehealth or by standard*  
35 *telephone or other* services to a person through telehealth *as a*  
36 *condition to paying for services as described in paragraph (a);* or  
37 ~~[receive]~~

38 (II) *Receive* any additional type of certification or license  
39 to provide *behavioral health services through telehealth or by*  
40 *standard telephone or other* services through telehealth as a  
41 condition to paying for services as described in paragraph (a).

42 (3) Refusing to pay for services as described in paragraph (a)  
43 because of ~~[the]~~:



1 (I) *The* distant site from which a provider of health care  
2 provides *behavioral health services through telehealth or by*  
3 *standard telephone or other* services through telehealth ; or ~~the~~

4 (II) *The* originating site at which a person who is covered  
5 by the State Plan for Medicaid receives *behavioral health services*  
6 *through telehealth or by standard telephone or other* services  
7 through telehealth.

8 (4) Requiring *behavioral health services to be provided*  
9 *through telehealth or by standard telephone or requiring other*  
10 services to be provided through telehealth as a condition to paying  
11 for such services.

12 2. *If the State Plan for Medicaid includes a requirement that*  
13 *the State, and, to the extent applicable, any of its political*  
14 *subdivisions, must pay for the nonfederal share of expenses for*  
15 *behavioral health services provided in the home of a person, such*  
16 *payment must not depend on the geographic location at which the*  
17 *home is located.*

18 3. The provisions of this section do not:

19 (a) Require the Director to include in the State Plan for  
20 Medicaid coverage of any service that the Director is not otherwise  
21 required by law to include; or

22 (b) Require the State or any political subdivision thereof to:

23 (1) Ensure that covered services are available to a recipient  
24 of Medicaid through telehealth *or by standard telephone* at a  
25 particular originating site; or

26 (2) Provide coverage for a service that is not included in the  
27 State Plan for Medicaid or provided by a provider of health care that  
28 does not participate in Medicaid.

29 ~~3.~~ 4. As used in this section:

30 (a) *“Behavioral health services” means services for the*  
31 *evaluation, management or treatment of a mental health condition*  
32 *or an alcohol or other substance use disorder.*

33 (b) “Distant site” has the meaning ascribed to it in  
34 NRS 629.515.

35 ~~(b)~~ (c) “Originating site” has the meaning ascribed to it in  
36 NRS 629.515.

37 ~~(e)~~ (d) “Provider of health care” has the meaning ascribed to it  
38 in NRS 439.820.

39 ~~(d)~~ (e) “Telehealth” has the meaning ascribed to it in  
40 NRS 629.515.

41 **Sec. 9.** NRS 616C.730 is hereby amended to read as follows:

42 616C.730 1. Every policy of insurance issued pursuant to  
43 chapters 616A to 617, inclusive, of NRS must include coverage for :

44 (a) *Behavioral health services provided to an employee*  
45 *through telehealth or by standard telephone to the same extent*



1 *and in the same amount as though provided in person or by other*  
2 *means; and*

3 (b) *Other* services provided to an employee through telehealth  
4 to the same extent as though provided in person or by other means.

5 2. An insurer shall not:

6 (a) Require an employee to establish a relationship in person  
7 with a provider of health care or provide any additional consent to  
8 or reason for obtaining *behavioral health services through*  
9 *telehealth or by standard telephone or other* services through  
10 telehealth as a condition to providing the coverage described in  
11 subsection 1;

12 (b) Require a provider of health care to ~~[demonstrate]~~ :

13 (1) *Demonstrate* that it is necessary to provide *behavioral*  
14 *health services to an employee through telehealth or by standard*  
15 *telephone or other* services to an employee through telehealth *as a*  
16 *condition to providing the coverage described in subsection 1*; or  
17 ~~[receive]~~

18 (2) *Receive* any additional type of certification or license to  
19 provide *behavioral health services through telehealth or by*  
20 *standard telephone or other* services through telehealth as a  
21 condition to providing the coverage described in subsection 1;

22 (c) Refuse to provide the coverage described in subsection 1  
23 because of ~~[the]~~ :

24 (1) *The* distant site from which a provider of health care  
25 provides *behavioral health services through telehealth or by*  
26 *standard telephone or other* services through telehealth ; or ~~[the]~~

27 (2) *The* originating site at which an employee receives  
28 *behavioral health services through telehealth or by standard*  
29 *telephone or other* services through telehealth; or

30 (d) Require *covered behavioral health services to be provided*  
31 *through telehealth or by standard telephone or require other*  
32 *covered services to be provided through telehealth as a condition to*  
33 *providing coverage for such services.*

34 3. A policy of insurance issued pursuant to chapters 616A to  
35 617, inclusive, of NRS must not require an employee to obtain prior  
36 authorization for any *behavioral health service provided through*  
37 *telehealth or by standard telephone or any other* service provided  
38 through telehealth that is not required for the service when provided  
39 in person. Such a policy of insurance may require prior  
40 authorization for a *behavioral health service provided through*  
41 *telehealth or by standard telephone or another* service provided  
42 through telehealth if such prior authorization would be required if  
43 the service were provided in person or by other means.

44 4. *If a policy of insurance issued pursuant to chapters 616A*  
45 *to 617, inclusive, of NRS includes coverage for behavioral health*





1 *services provided in the home of an employee, such coverage must*  
2 *not depend on the geographic location at which the home is*  
3 *located.*

4 5. The provisions of this section do not require an insurer to:

5 (a) Ensure that covered services are available to an employee  
6 through telehealth *or by standard telephone* at a particular  
7 originating site;

8 (b) Provide coverage for a service that is not a covered service  
9 or that is not provided by a covered provider of health care; or

10 (c) Enter into a contract with any provider of health care or  
11 cover any service if the insurer is not otherwise required by law to  
12 do so.

13 ~~5.~~ 6. A policy of insurance subject to the provisions of  
14 chapters 616A to 617, inclusive, of NRS that is delivered, issued for  
15 delivery or renewed on or after July 1, ~~2015,~~ 2021, has the legal  
16 effect of including the coverage required by this section, and any  
17 provision of the policy or the renewal which is in conflict with this  
18 section is void.

19 ~~6.~~ 7. As used in this section:

20 (a) *“Behavioral health services” has the meaning ascribed to it*  
21 *in NRS 422.2721.*

22 (b) “Distant site” has the meaning ascribed to it in  
23 NRS 629.515.

24 ~~(b)~~ (c) “Originating site” has the meaning ascribed to it in  
25 NRS 629.515.

26 ~~(c)~~ (d) “Provider of health care” has the meaning ascribed to it  
27 in NRS 439.820.

28 ~~(d)~~ (e) “Telehealth” has the meaning ascribed to it in  
29 NRS 629.515.

30 **Sec. 10.** This act becomes effective on July 1, 2021.

