

**2021 -- S 0004 SUBSTITUTE A**

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LC000597/SUB A  
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**STATE OF RHODE ISLAND**

**IN GENERAL ASSEMBLY**

**JANUARY SESSION, A.D. 2021**

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**A N A C T**

**RELATING TO INSURANCE -- THE TELEMEDICINE COVERAGE ACT**

Introduced By: Senators Miller, Goldin, Valverde, Goodwin, and Felag

Date Introduced: January 11, 2021

Referred To: Senate Health & Human Services

It is enacted by the General Assembly as follows:

1           SECTION 1. Sections 27-81-3 and 27-81-4 of the General Laws in Chapter 27-81 entitled  
2 "The Telemedicine Coverage Act" are hereby amended to read as follows:

3           **27-81-3. Definitions.**

4           As used in this chapter:

5           (1) "Distant site" means a site at which a healthcare provider is located while providing  
6 healthcare services by means of telemedicine.

7           (2) "Healthcare facility" means an institution providing healthcare services or a healthcare  
8 setting, including, but not limited to: hospitals and other licensed, inpatient centers; ambulatory  
9 surgical or treatment centers; skilled nursing centers; residential treatment centers; diagnostic,  
10 laboratory and imaging centers; and rehabilitation and other therapeutic-health settings.

11           (3) "Healthcare professional" means a physician or other healthcare practitioner licensed,  
12 accredited, or certified to perform specified healthcare services consistent with state law.

13           (4) "Healthcare provider" means a healthcare professional or a healthcare facility.

14           (5) "Healthcare services" means any services included in the furnishing to any individual  
15 of medical, podiatric, or dental care, or hospitalization, or incident to the furnishing of that care or  
16 hospitalization, and the furnishing to any person of any and all other services for the purpose of  
17 preventing, alleviating, curing, or healing human illness, injury, or physical disability.

18           (6) "Health insurer" means any person, firm, or corporation offering and/or insuring  
19 healthcare services on a prepaid basis, including, but not limited to, a nonprofit service corporation,

1 a health maintenance organization, or an entity offering a policy of accident and sickness insurance.

2 (7) "Health maintenance organization" means a health maintenance organization as defined  
3 in chapter 41 of this title.

4 (8) "Nonprofit service corporation" means a nonprofit hospital-service corporation as  
5 defined in chapter 19 of this title, or a nonprofit medical-service corporation as defined in chapter  
6 20 of this title.

7 (9) "Originating site" means a site at which a patient is located at the time healthcare  
8 services are provided to them by means of telemedicine, which can ~~be~~ include a patient's home  
9 where medically clinically appropriate; ~~provided, however, notwithstanding any other provision of~~  
10 ~~law, health insurers and healthcare providers may agree to alternative siting arrangements deemed~~  
11 ~~appropriate by the parties.~~

12 (10) "Policy of accident and sickness insurance" means a policy of accident and sickness  
13 insurance as defined in chapter 18 of this title.

14 (11) "Store-and-forward technology" means the technology used to enable the transmission  
15 of a patient's medical information from an originating site to the healthcare provider at the distant  
16 site without the patient being present.

17 (12) "Telemedicine" means the delivery of clinical healthcare services by means of real  
18 time, two-way telephone-audio-only communications or electronic audiovisual communications,  
19 including the application of secure video conferencing or store-and-forward technology to provide  
20 or support healthcare delivery, which facilitate the assessment, diagnosis, treatment, and care  
21 management of a patient's health care while such patient is at an originating site and the healthcare  
22 provider is at a distant site, consistent with applicable federal laws regulations. "Telemedicine"  
23 does not include an ~~audio-only telephone conversation,~~ email message, or facsimile transmission  
24 between the provider and patient, or an automated computer program used to diagnose and/or treat  
25 ocular or refractive conditions.

26 **27-81-4. Coverage of telemedicine services.**

27 (a) Each health insurer that issues individual or group accident and sickness insurance  
28 policies for healthcare services and/or provides a healthcare plan for healthcare services shall  
29 provide coverage for the cost of such covered healthcare services provided through telemedicine  
30 services, as provided in this section.

31 (b) A health insurer shall not exclude a healthcare service for coverage solely because the  
32 healthcare service is provided through telemedicine and is not provided through in-person  
33 consultation or contact, so long as such healthcare services are medically clinically appropriate to  
34 be provided through telemedicine services ~~and, as such, may be subject to the terms and conditions~~

1 ~~of a telemedicine agreement between the insurer and the participating healthcare provider or~~  
2 ~~provider group.~~ The determination of the clinical appropriateness of a healthcare service to be  
3 provided through telemedicine:

4 (i) Shall include taking into consideration any existing public health emergency;

5 (ii) May vary for healthcare services provided through audio-visual telemedicine versus  
6 healthcare services provided through audio-only telemedicine; and

7 (iii) Shall not include restrictions on the types of healthcare providers that can render  
8 services through telemedicine so long as the service is clinically appropriate to be provided through  
9 telemedicine and can be performed under the practitioner's license and scope of practice, as defined  
10 by the Rhode Island department of health, is medically necessary, and is a covered service when  
11 rendered in person by that healthcare provider type.

12 (c) Benefit plans offered by a health insurer ~~may impose a deductible, copayment, or~~  
13 ~~coinsurance requirement for a healthcare service provided through telemedicine~~ shall not impose a  
14 deductible, copayment, or coinsurance requirement for a healthcare service delivered through  
15 telemedicine in excess of what would normally be charged for the same healthcare service when  
16 performed in-person.

17 (d) Prior authorization requirements for clinically appropriate telemedicine services shall  
18 not be more stringent than prior authorization requirements for in-person care. No more stringent  
19 medical or benefit determination and utilization review requirements shall be imposed on any  
20 telemedicine service than is imposed upon the same service when performed in-person.

21 (e) Clinically appropriate telemedicine services delivered by in-network primary care and  
22 behavioral healthcare providers shall be reimbursed at rates not lower than the reimbursement rates  
23 for the same services delivered in-person.

24 (f) Except for requiring compliance with applicable state and federal laws, regulations  
25 and/or guidance, no health insurer shall impose any specific requirements as to the technologies  
26 used to deliver clinically appropriate telemedicine services.

27 ~~(g)~~ (g) The requirements of this section shall apply to all policies and health plans issued,  
28 reissued, or delivered in the state of Rhode Island on and after January 1, 2018.

29 ~~(h)~~ (h) This chapter shall not apply to: short-term travel, accident-only, limited or specified  
30 disease; or individual conversion policies or health plans; nor to policies or health plans designed  
31 for issuance to persons eligible for coverage under Title XVIII of the Social Security Act, known  
32 as Medicare; or any other similar coverage under state or federal governmental plans.

33 SECTION 2. Chapter 27-81 of the General Laws entitled "The Telemedicine Coverage  
34 Act" is hereby amended by adding thereto the following section:

1           **27-81-6. Rules and regulations.**

2           The health insurance commissioner may promulgate such rules and regulations as are  
3 necessary and proper to effectuate the purpose and for the efficient administration and enforcement  
4 of this chapter.

5           SECTION 3. Chapter 42-7.2 of the General Laws entitled "Office of Health and Human  
6 Services" is hereby amended by adding thereto the following section:

7           **42-7.2-21. Telemedicine.**

8           (a) Statement of intent. Rhode Island Medicaid shall cover medically necessary, clinically  
9 appropriate, non-experimental, and cost-effective telemedicine services provided by Medicaid  
10 providers. There are no geographic restrictions for telemedicine; services delivered via  
11 telemedicine are covered statewide. Rhode Island Medicaid and its contracted managed care  
12 entities shall promote the use of telemedicine to support an adequate provider network.

13           (b) Definition: "Telemedicine" means the delivery of clinical healthcare services by means  
14 of real time, two-way telephone-audio-only communications or electronic audiovisual  
15 communications, including the application of secure video conferencing or store-and-forward  
16 technology to provide or support healthcare delivery, which facilitate the assessment, diagnosis,  
17 treatment, and care management of a patient's health care while such patient is at an originating site  
18 and the healthcare provider is at a distant site, consistent with applicable federal laws and  
19 regulations. "Telemedicine" does not include an email message, or facsimile transmission between  
20 the provider and patient, or an automated computer program used to diagnose and/or treat ocular  
21 or refractive conditions.

22           (c) Coverage of telemedicine services. Rhode Island Medicaid and its contracted managed  
23 care entities shall provide coverage for the cost of such covered healthcare services provided  
24 through telemedicine services, as provided in this section.

25           (1) Rhode Island Medicaid and its contracted managed care entities shall not exclude a  
26 healthcare service for coverage solely because the healthcare service is provided through  
27 telemedicine and is not provided through in-person consultation or contact, so long as such  
28 healthcare services are medically necessary, and clinically appropriate to be provided through  
29 telemedicine services. The determination of the clinical appropriateness of a healthcare service to  
30 be provided through telemedicine:

31           (i) Shall include taking into consideration any existing public health emergency;

32           (ii) May vary for healthcare services provided through audio-visual telemedicine versus  
33 healthcare services provided through audio-only telemedicine; and

34           (iii) Shall not include restrictions on the types of healthcare providers that can render

1 services through telemedicine so long as the service is clinically appropriate to be provided through  
2 telemedicine and can be performed under the practitioner’s license and scope of practice, as defined  
3 by the Rhode Island department of health, is medically necessary, and is a covered service when  
4 rendered in person by that healthcare provider type.

5 (2) Benefit plans offered by a Medicaid managed care entity shall not impose a copayment,  
6 or coinsurance requirement for a healthcare service delivered through telemedicine in excess of  
7 what would normally be charged for the same healthcare service when performed in-person.

8 (3) Prior authorization requirements for medically necessary and clinically appropriate  
9 telemedicine services shall not be more stringent than prior authorization requirements for in-  
10 person care. No more stringent medical or benefit determination and utilization review  
11 requirements shall be imposed on any telemedicine service than is imposed upon the same service  
12 when performed in person.

13 (4) Medically necessary and clinically appropriate telemedicine services delivered by in-  
14 network primary care and behavioral healthcare providers, for both fee-for-service and managed  
15 care delivery systems, shall be reimbursed at rates not lower than the reimbursement rates for the  
16 same services delivered through in-person methods.

17 (5) Except for requiring compliance with applicable state and federal laws, regulations  
18 and/or guidance, Rhode Island Medicaid and its contracted managed care entities shall not impose  
19 any specific requirements as to the technologies used to deliver medically necessary and clinically  
20 appropriate telemedicine services.

21 (d) Telemedicine data reporting. Each of Rhode Island Medicaid’s contracted managed  
22 care entities shall collect and provide to the executive office of health and human services  
23 (EOHHS), in a form and frequency acceptable to the executive office, information and data reflecting  
24 its telemedicine policies, practices, and experience.

25 (e) Rules and Regulations. The secretary of EOHHS may promulgate such rules and  
26 regulations as are necessary and proper to effectuate the purpose and for the efficient administration  
27 and enforcement of this chapter.

28 SECTION 4. This act shall take effect upon passage.

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EXPLANATION  
BY THE LEGISLATIVE COUNCIL  
OF

A N A C T

RELATING TO INSURANCE -- THE TELEMEDICINE COVERAGE ACT

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1           This act would amend the provisions of the telemedicine coverage act and provide coverage  
2 for telemedicine under Rhode Island Medicaid.

3           This act would take effect upon passage.

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