

SB 1022 -- Redline

INS Joint Favorable to File No. 366 -- AN ACT CONCERNING TELEHEALTH.

Deletions ~~struck~~ · Insertions underlined

Senate General Assembly ~~Raised~~File ~~Bill~~ No.

~~1022~~366 January Session, 2021 ~~LCQ~~Senate Bill No.

~~3868~~1022 ~~Referred to Committee on~~INSURANCE ~~Senate, ANDREAL April ESTATE 8, Introduced 2021 by The Committee on Insurance and Real Estate reported through SEN.~~

~~(INS) LESSER AN of ACT the CONCERNING 9th TELEHEALTH. Dist., Chairperson of the Committee on the part of the Senate, that the bill ought to pass.~~

AN ACT CONCERNING TELEHEALTH.

[(3)] (4) "Health record" means the record of individual, health- related information that may include, but need not be limited to, ~~continuity SB1022 of/ care File documents, discharge summaries and other LCQ 3868~~ information ~~or SB1022 data File relating No. to a patient's demographics, medical history, medication, allergies, immunizations, laboratory test results, radiology or other diagnostic images, vital signs and statistics.~~

~~1022~~366 ~~information or SB1022 data File relating No. to a patient's demographics, medical history, medication, allergies, immunizations, laboratory test results, radiology or other diagnostic images, vital signs and statistics.~~

366 continuity of care documents, discharge summaries and other information or data relating to a patient's demographics, medical history, medication, allergies, immunizations, laboratory test results, radiology or other diagnostic images, vital signs and statistics.

~~LCQ SB1022 3868/ {\\PRDFS1\SCOUSERS\FORZANO\WS\2021SB-0102 File of 10 R01-SB.docx } Raised Bill No.~~

~~1022~~366 [(11)]2 [(12)] ~~SB1022 (A) File "Telehealth" No. means the mode of delivering health care or other health services via information and communication technologies to facilitate the diagnosis, consultation and treatment, education, care management and self-management of a patient's physical, oral and mental health, and includes [(A)] (i) interaction between the patient at the originating site and the telehealth provider at a distant site, and [(B)] (ii) synchronous interactions, asynchronous store and forward transfers or remote patient monitoring.~~

366 [(11)] (12) (A) "Telehealth" means the mode of delivering health care or other health services via information and communication technologies to facilitate the diagnosis, consultation and treatment, education, care management and self-management of a patient's physical, oral and mental health, and includes [(A)] (i) interaction between the patient at the originating site and the telehealth provider at a distant site, and [(B)] (ii) synchronous interactions, asynchronous store and forward transfers or remote patient monitoring.

[(12)] (13) "Telehealth provider" means any person who is (A) an in- network provider or a provider enrolled in the Connecticut medical assistance program providing health care or other health services to a Connecticut medical assistance program recipient through the use of telehealth within such person's scope of practice and in accordance with the standard of care applicable to such person's profession, and (B) (i) a physician or physician assistant licensed under chapter 370, physical therapist or physical therapist assistant licensed under chapter 376, chiropractor licensed under chapter 372, naturopath licensed under chapter 373, podiatrist licensed under chapter 375, occupational therapist or occupational therapy assistant licensed under chapter 376a, optometrist licensed under chapter 380, registered nurse or advanced practice registered nurse licensed under chapter 378, [physician assistant licensed under chapter 370,] psychologist licensed under chapter 383, marital and family therapist licensed under chapter 383a, clinical social worker or master social worker licensed under chapter 383b, alcohol and drug counselor licensed under chapter 376b, professional counselor licensed under chapter 383c, dietitian- nutritionist certified under chapter 384b, speech and language ~~LCQ pathologist 3868~~ licensed ~~{\\PRDFS1\SCOUSERS\FORZANO\WS\2021SB-0103 under of chapter 10399. R01-SB.docx respiratory care Raised practitioner Bill SB1022 / File No.~~

~~1022~~366 ~~pathologist 3 licensed SB1022 under File chapter No. 399, respiratory care practitioner licensed under chapter 381a, audiologist licensed under chapter 397a, pharmacist licensed under chapter 400j, [or] paramedic licensed pursuant to chapter 384d, [who is providing health care or other health services through the use of telehealth within such person's scope of practice and in accordance with the standard of care applicable to the profession] nurse-midwife licensed under chapter 377, dentist licensed under chapter 379, behavior analyst licensed under chapter 382a, genetic counselor licensed under chapter 383d, music therapist certified in the manner described in chapter 383f, art therapist certified in the manner described in chapter 383g or athletic trainer licensed under chapter 375a, or (ii) an appropriately licensed, certified or registered physician, physician assistant, physical therapist, physical therapist assistant, chiropractor, naturopath, podiatrist, occupational therapist, occupational therapy assistant, optometrist, registered nurse, advanced practice registered nurse, psychologist, marital and family therapist, clinical social worker, master social worker, alcohol and drug counselor, professional counselor, dietitian-nutritionist, speech and language pathologist, respiratory care~~

~~practitioner, audiologist, pharmacist, paramedic, nurse-midwife, dentist, behavior analyst, genetic counselor, music therapist, art therapist or athletic trainer, in another state or territory of the United States or the District of Columbia, that provides telehealth services pursuant to his or her authority under any relevant order issued by the commissioner and maintains professional liability insurance or other indemnity against liability for professional malpractice in an amount that is not less than the amount that is required for a similarly licensed, certified or registered Connecticut health care provider.~~

366 licensed under chapter 381a, audiologist licensed under chapter 397a, pharmacist licensed under chapter 400j, [or] paramedic licensed pursuant to chapter 384d, [who is providing health care or other health services through the use of telehealth within such person's scope of practice and in accordance with the standard of care applicable to the profession] nurse-midwife licensed under chapter 377, dentist licensed under chapter 379, behavior analyst licensed under chapter 382a, genetic counselor licensed under chapter 383d, music therapist certified in the manner described in chapter 383f, art therapist certified in the manner described in chapter 383g or athletic trainer licensed under chapter 375a, or (ii) an appropriately licensed, certified or registered physician, physician assistant, physical therapist, physical therapist assistant, chiropractor, naturopath, podiatrist, occupational therapist, occupational therapy assistant, optometrist, registered nurse, advanced practice registered nurse, psychologist, marital and family therapist, clinical social worker, master social worker, alcohol and drug counselor, professional counselor, dietitian-nutritionist, speech and language pathologist, respiratory care practitioner, audiologist, pharmacist, paramedic, nurse-midwife, dentist, behavior analyst, genetic counselor, music therapist, art therapist or athletic trainer, in another state or territory of the United States or the District of Columbia, that provides telehealth services pursuant to his or her authority under any relevant order issued by the commissioner and maintains professional liability insurance or other indemnity against liability for professional malpractice in an amount that is not less than the amount that is required for a similarly licensed, certified or registered Connecticut health care provider.

(B) has determined whether the patient has health coverage that is fully insured, not fully insured or provided through Medicaid or the ~~LCO Children's 3868 Health~~ ~~{\\PRDFS1\SCOUSERS\FORZANO\WS\2021SB-0104 Insurance of Program, 19 and R01-SB.docx}~~ whether ~~the Raised patient's Bill~~ health No. coverage, if any, provides coverage for the telehealth service;

~~1022(C) Children's has Health SB1022 Insurance/ Program, File and No. whether the patient's health coverage, if any, provides coverage for the telehealth service;~~

~~(C) 366 has 4 access SB1022 to, File or No. knowledge of, the patient's medical history, as provided by the patient, and the patient's health record, including the name and address of the patient's primary care provider, if any;~~

366 access to, or knowledge of, the patient's medical history, as provided by the patient, and the patient's health record, including the name and address of the patient's primary care provider, if any;

A telehealth provider using telehealth to prescribe a schedule II or III controlled substance pursuant to this subsection shall electronically submit the prescription pursuant to ~~LCO section 3868 21a-249.~~

~~{\\PRDFS1\SCOUSERS\FORZANO\WS\2021SB-01025 of 19 R01-SB.docx } Raised Bill No.~~

1022(d) section Each 21a-249, telehealth provider shall, at the time of the initial telehealth SB1022 / File No.

~~(d) 366 Each 5 telehealth SB1022 provider File shall, No. at the time of the initial telehealth interaction, ask the patient whether the patient consents to the telehealth provider's disclosure of records concerning the telehealth interaction to the patient's primary care provider.~~

366 interaction, ask the patient whether the patient consents to the telehealth provider's disclosure of records concerning the telehealth interaction to the patient's primary care provider.

(1) [A health care provider from providing] Providing on-call coverage pursuant to an agreement with another health care provider or such ~~LCO health 3868 care~~ ~~{\\PRDFS1\SCOUSERS\FORZANO\WS\2021SB-010226 provider's of professional 19 entity R01-SB.docx}~~ ~~or } employer; Raised Bill No.~~

~~1022 health care provider's professional entity or employer;~~

or (4) [the use of] using telehealth for ~~a SB1022 hospital/ inpatient, File including No. for the purpose of ordering [any] medication or treatment for such patient in accordance with the Ryan Haight Online Pharmacy Consumer Protection Act, 21 USC 829(e), as amended from time to time.~~

366 6 SB1022 File No.

366 a hospital inpatient, including for the purpose of ordering [any] medication or treatment for such patient in accordance with the Ryan Haight Online Pharmacy Consumer Protection Act, 21 USC 829(e), as amended from time to time.

(2) If a telehealth provider determines that a patient is unable to pay for any health care or health services described in subdivision (1) of this subsection that the provider provided to the patient through telehealth, the provider shall offer to the patient financial assistance, if such ~~LCO provider 3868 is~~ ~~{\\PRDFS1\SCOUSERS\FORZANO\WS\2021SB-010227 otherwise of required 19 to R01-SB.docx}~~ ~~offer } to~~ Raised the Bill patient No. such financial assistance, under any applicable state or federal law.

~~1022(j) provider. Notwithstanding is any otherwise provision required of to the offer general to statutes the or patient any such regulation financial adopted assistance, thereunder, under a any telehealth applicable provider state may or provide federal SB1022 law. / File No.~~

~~(j) 366 Notwithstanding any SB1022 provision File of No. the general statutes or any regulation adopted thereunder, a telehealth provider may provide telehealth services pursuant to the provisions of this section from any location.~~

366 telehealth services pursuant to the provisions of this section from any location.

~~(1) "Asynchronous" has the same meaning as provided in as provided in section 19a- LC0906, 3868 as (\\PRDFS1\SCOUSERS\FORZANO\WS\2021SB-01022 amended of by 19 this R01-SB.docx act.) Raised Bill No. 1022-906, as amended by this act.~~

~~(3) "Remote patient monitoring" has the same meaning as provided in SB1022 section/ 19a-906, File as No. amended by this act.~~

366 8 SB1022 File No.

366 in section 19a-906, as amended by this act.

~~(7) "Telehealth provider" means any person who (A) provides health care or other health services through the use of telehealth within such person's scope of practice and in accordance with the standard of care applicable to such person's profession, and (B) is (i) a physician or physician assistant licensed under chapter 370, physical therapist or physical therapist assistant licensed under chapter 376, chiropractor licensed under chapter 372, naturopath licensed under chapter 373, podiatrist licensed under chapter 375, occupational therapist or occupational therapy assistant licensed under chapter 376a, optometrist licensed under chapter 380, registered nurse or advanced practice LC0 registered 3868 nurse (\\PRDFS1\SCOUSERS\FORZANO\WS\2021SB-01022 licensed of under 19 chapter R01-SB.docx 378,) psychologist Raised licensed Bill under chapter 383, marital and family therapist licensed under chapter 383a, clinical social worker or master social worker licensed under chapter 383b, alcohol and drug counselor licensed under chapter 376b, professional counselor licensed under chapter 383c, dietitian- nutritionist certified under chapter 384b, speech and language SB1022 / File No.~~

~~1022 366 registered 9 nurse SB1022 licensed File under No. chapter 378, psychologist licensed under chapter 383, marital and family therapist licensed under chapter 383a, clinical social worker or master social worker licensed under chapter 383b, alcohol and drug counselor licensed under chapter 376b, professional counselor licensed under chapter 383c, dietitian nutritionist certified under chapter 384b, speech and language pathologist licensed under chapter 390, respiratory care practitioner licensed under chapter 381a, audiologist licensed under chapter 397a, pharmacist licensed under chapter 400j, paramedic licensed pursuant to chapter 384d, nurse-midwife licensed under chapter 377, dentist licensed under chapter 379, behavior analyst licensed under chapter 382a, genetic counselor licensed under chapter 383d, music therapist certified in the manner described in chapter 383f, art therapist certified in the manner described in chapter 383g or athletic trainer licensed under chapter 375a, or (ii) an in-network and appropriately licensed, certified or registered physician, physician assistant, physical therapist, physical therapist assistant, chiropractor, naturopath, podiatrist, occupational therapist, occupational therapy assistant, optometrist, registered nurse, advanced practice registered nurse, psychologist, marital and family therapist, clinical social worker, master social worker, alcohol and drug counselor, professional counselor, dietitian nutritionist, speech and language pathologist, respiratory care practitioner, audiologist, pharmacist, paramedic, nurse-midwife, dentist, behavior analyst, genetic counselor, music therapist, art therapist or athletic trainer, in another state or territory of the United States or the District of Columbia, that provides telehealth services pursuant to his or her authority under any relevant order issued by the Commissioner of Public Health and maintains professional liability insurance or other indemnity against liability for professional malpractice in an amount that is not less than the amount required for similarly licensed, certified or registered Connecticut health care providers.~~

~~(b) 366 Each pathologist individual licensed health under insurance chapter policy 399, providing respiratory coverage care of practitioner licensed under chapter 381a, audiologist licensed under chapter 397a, pharmacist licensed under chapter 400j, paramedic licensed pursuant to chapter 384d, nurse-midwife licensed under chapter 377, dentist licensed under chapter 379, behavior analyst licensed under chapter 382a, genetic counselor licensed under chapter 383d, music therapist certified in the type manner specified described in subdivisions chapter (1), 383f, (2), art (4), therapist (11) certified in the manner described in chapter 383g or athletic trainer licensed under chapter 375a, or (ii) an in-network and (42) appropriately licensed, certified or registered physician, physician assistant, physical therapist, physical therapist assistant, chiropractor, naturopath, podiatrist, occupational therapist, occupational therapy assistant, optometrist, registered nurse, advanced practice registered nurse, psychologist, marital and family therapist, clinical social worker, master social worker, alcohol and drug counselor, professional counselor, dietitian nutritionist, speech and language pathologist, respiratory care practitioner, audiologist, pharmacist, paramedic, nurse-midwife, dentist, behavior analyst, genetic counselor, music therapist, art therapist or athletic trainer, in another state or territory of section the 38a-469 United LC0 States 3868 or (\\PRDFS1\SCOUSERS\FORZANO\WS\2021SB-0110 the District of~~

~~10~~Columbia, ~~R01-SB.docx~~that }provides ~~Raised~~telehealth ~~Bill~~services ~~No~~, pursuant to his or her authority under any relevant order issued by the Commissioner of Public Health and maintains professional liability insurance or other indemnity against liability for professional malpractice in an amount that is not less than the amount required for similarly licensed, certified or registered Connecticut health care providers.

~~1022~~(b) Each individual health insurance policy providing coverage of the type specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-469 of the general statutes delivered, issued for delivery, renewed, amended or continued in this state shall provide coverage for medical advice, diagnosis, care or treatment provided to an insured through telehealth [,] to the same extent coverage is provided for such advice, diagnosis, care or treatment when provided [through] to an insured in-person.

Such coverage shall be subject to the same terms and conditions applicable to ~~all~~~~SB1022~~ other/
~~benefits~~~~File~~ under~~No~~, such policy.] ~~No such policy shall exclude coverage for any medical advice, diagnosis, care or treatment that is appropriately provided through telehealth because such advice, diagnosis, care or treatment is provided to an insured through telehealth or a telehealth platform selected by an in-network telehealth provider.~~

~~366~~ 10 SB1022 File No.

~~366~~ all other benefits under such policy.] ~~No such policy shall exclude coverage for any medical advice, diagnosis, care or treatment that is appropriately provided through telehealth because such advice, diagnosis, care or treatment is provided to an insured through telehealth or a telehealth platform selected by an in-network telehealth provider.~~

(d) Nothing in this section shall prohibit or limit a health insurer, health care center, hospital service corporation, medical service corporation or other entity from conducting utilization review for telehealth services, provided such utilization review is conducted in the same manner and uses the same clinical review criteria as a utilization ~~LC0~~~~review~~ ~~3868~~for {\\PRDFS1\SCOUSERS\FORZANO\WS\2021SB-0111}an of in-person ~~19~~consultation ~~R01-SB.docx~~for }the ~~Raised~~same ~~Bill~~service. ~~No~~.

~~1022~~ review for an in-person consultation for the same service.

(a)~~SB1022~~ [As/ used~~File~~ in~~No~~, this section, "telehealth" has the same meaning as provided in section ~~19a-906~~.] For the purposes of this section:

~~366~~ 11 SB1022 File No.

~~366~~ (a) [As used in this section, "telehealth" has the same meaning as provided in section 19a-906.] For the purposes of this section:

(B) "Telehealth" does not mean interaction through (i) facsimile, ~~LC0~~~~texting~~ ~~3868~~or {\\PRDFS1\SCOUSERS\FORZANO\WS\2021SB-010212}electronic of mail, ~~19~~or ~~R01-SB.docx~~(ii) }audio-only ~~Raised~~telephone ~~Bill~~if ~~No~~, the telehealth provider is out-of-network.

~~1022~~(7) ~~texting~~"Telehealth ~~or~~provider" ~~electronic~~means ~~mail~~, any person who (A) provides health care or (ii)other audio-onlyhealth ~~telephone~~services ifthrough the use of telehealth ~~provider~~within such person's scope of practice and in accordance with the standard of care applicable to such person's profession, and (B) is ~~out-of-network~~, (i) a physician or physician assistant licensed under chapter 370, physical therapist or physical therapist assistant licensed under chapter 376, chiropractor licensed under chapter 372, naturopath licensed under chapter 373, SB1022 / File No.

(7)~~366~~ "Telehealth~~12~~ provider"~~SB1022~~ means~~File~~ any person who (A) provides health care or other health services through the use of telehealth within such person's scope of practice and in accordance with the standard of care applicable to such person's profession, and (B) is (i) a physician or physician assistant licensed under chapter 370, physical therapist or physical therapist assistant licensed under chapter 376, chiropractor licensed under chapter 372, naturopath licensed under chapter 373, podiatrist licensed under chapter 375, occupational therapist or occupational therapy assistant licensed under chapter 376a, optometrist licensed under chapter 380, registered nurse or advanced practice registered nurse licensed under chapter 378, psychologist licensed under chapter 383, marital and family therapist licensed under chapter 383a, clinical social worker or master social worker licensed under chapter 383b, alcohol and drug counselor licensed under chapter 376b, professional counselor licensed under chapter 383c, dietitian- nutritionist certified under chapter 384b, speech and language pathologist licensed under chapter 389, respiratory care practitioner licensed under chapter 381a, audiologist licensed under chapter 397a, pharmacist licensed under chapter 400j, paramedic licensed pursuant to chapter 384d, nurse-midwife licensed under chapter 377, dentist licensed under chapter 379, behavior analyst licensed under chapter 382a, genetic counselor licensed under chapter 383d, music therapist certified in the manner described in chapter 383f, art therapist certified in the manner described in chapter 383g or athletic trainer licensed under chapter 375a, or (ii) an in-network and appropriately licensed, certified or registered physician, physician assistant, physical therapist, physical therapist assistant, chiropractor, naturopath, podiatrist, occupational therapist, occupational therapy assistant, optometrist, registered nurse, advanced practice registered nurse, psychologist, marital and family therapist, clinical social worker, master social worker, alcohol and drug counselor, professional counselor, dietitian- nutritionist, speech and language pathologist, respiratory care ~~LC0~~ 3868

~~{\\PRDFS1\SCOUSERS\FORZANO\WS\2021SB-0113 of 19 R01-SB.docx } Raised Bill No.~~

1022366 podiatrist licensed under chapter 375, occupational therapist or occupational therapy assistant licensed under chapter 376a, optometrist licensed under chapter 380, registered nurse or advanced practice registered nurse licensed under chapter 378, psychologist licensed under chapter 383, marital and family therapist licensed under chapter 383a, clinical social worker or master social worker licensed under chapter 383b, alcohol and drug counselor licensed under chapter 376b, professional counselor licensed under chapter 383c, dietitian- nutritionist certified under chapter 384b, speech and language pathologist licensed under chapter 399, respiratory care practitioner licensed under chapter 381a, audiologist licensed under chapter 397a, pharmacist licensed under chapter 400j, paramedic licensed pursuant to chapter 384d, nurse-midwife licensed under chapter 377, dentist licensed under chapter 379, behavior analyst licensed under chapter 382a, genetic counselor licensed under chapter 383d, music therapist certified in the manner described in chapter 383f, art therapist certified in the manner described in chapter 383g or athletic trainer licensed under chapter 375a, or (ii) an in-network and appropriately licensed, certified or registered physician, physician assistant, physical therapist, physical therapist assistant, chiropractor, naturopath, podiatrist, occupational therapist, occupational therapy assistant, optometrist, registered nurse, advanced practice registered nurse, psychologist, marital and family therapist, clinical social worker, master social worker, alcohol and drug counselor, professional counselor, dietitian- nutritionist, speech and language pathologist, respiratory care practitioner, audiologist, pharmacist, paramedic, nurse-midwife, dentist, behavior analyst, genetic counselor, music therapist, art therapist or athletic trainer, in another state or territory of the United States or the District of Columbia, that provides telehealth services pursuant to his or her authority under any relevant order issued by the Commissioner of Public Health and maintains professional liability insurance or other indemnity against liability for professional malpractice in an amount that is not less than the amount required for similarly licensed, certified or registered Connecticut health care providers.

~~(b)SB1022 Each/ groupFile healthNo. insurance policy providing coverage of the type specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-469 of the general statutes delivered, issued for delivery, renewed, amended or continued in this state shall provide coverage for medical advice, diagnosis, care or treatment provided to an insured through telehealth [,] to the same extent coverage is provided for such advice, diagnosis, care or treatment when provided [through] to an insured in-person.~~

366 13 SB1022 File No.

366 (b) Each group health insurance policy providing coverage of the type specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-469 of the general statutes delivered, issued for delivery, renewed, amended or continued in this state shall provide coverage for medical advice, diagnosis, care or treatment provided to an insured through telehealth [,] to the same extent coverage is provided for such advice, diagnosis, care or treatment when provided [through] to an insured in-person.

or (2) be required to reimburse a treating or consulting health care provider for the technical fees or technical costs for the provision of telehealth services.] (c) Notwithstanding any provision of the general statutes, no telehealth provider who receives reimbursement for any covered ~~LC0~~medical ~~3868~~advice, {\\PRDFS1\SCOUSERS\FORZANO\WS\2021SB-0114diagnosis, care or treatment that such telehealth provider provided to an insured through telehealth in accordance with subsection (b) of 10 this R01-SB.docxsection } shall Raised seek Bill any No. payment for such advice, diagnosis, care or treatment from the insured, except for any coinsurance, copayment, deductible or other out-of-pocket expense set forth in the insured's policy.

~~1022 medical advice, diagnosis, care or treatment that such telehealth provider provided to an insured through telehealth in accordance with subsection (b) of this section shall seek any payment for such advice, diagnosis, care or treatment from the insured, except for any coinsurance, copayment, deductible or other out-of-pocket expense set forth in the insured's policy.~~

(d) Nothing in this section shall prohibit or limit a health insurer, health care center, hospital service corporation, medical service corporation or other entity from conducting utilization review for ~~telehealth~~SB1022 services, / providedFile suchNo. utilization review is conducted in the same manner and uses the same clinical review criteria as a utilization review for an in-person consultation for the same service.

366 14 SB1022 File No.

366 telehealth services, provided such utilization review is conducted in the same manner and uses the same clinical review criteria as a utilization review for an in-person consultation for the same service.

(3) "Annuities" means all agreements to make periodical payments where the making or continuance of all or some of the series of the payments, or the amount of the payment, is dependent upon the ~~LC0~~continuance 3868 of {\\PRDFS1\SCOUSERS\FORZANO\WS\2021SB-01015human of life 19 or R01-SB.docx is }Raised a Bill specified No. term of years.

~~1022 continuance of human life or is for a specified term of years.~~

~~(6) SB1022 "Domestic/ insurer" File means No. any insurer that has been chartered by, incorporated, organized or constituted within or under the laws of this state.~~

366 15 SB1022 File No.

366 (6) "Domestic insurer" means any insurer that has been chartered by, incorporated, organized or constituted within or under the laws of this state.

For purposes of this subdivision "liabilities" shall include but not be limited to reserves required by statute or by regulations adopted by the commissioner in accordance with the provisions of chapter 54 or specific requirements imposed by the commissioner upon a subject LCO company 3868 at

~~{\\PRDFS1\SCOUSERS\FORZANO\WS\2021SB-010216 the time of 10 admission R01-SB.docx or } subsequent Raised thereto. Bill No.~~

~~1022 company at the time of admission or subsequent thereto.~~

~~(12) SB1022 "Insurer"/ or File "insurance No. company" includes any person or combination of persons doing any kind or form of insurance business other than a fraternal benefit society, and shall include a receiver of any insurer when the context reasonably permits.~~

366 16 SB1022 File No.

366 (12) "Insurer" or "insurance company" includes any person or combination of persons doing any kind or form of insurance business other than a fraternal benefit society, and shall include a receiver of any insurer when the context reasonably permits.

(16) "Person" means an individual, a corporation, a partnership, a LCO limited 3868 liability {\\PRDFS1\SCOUSERS\FORZANO\WS\2021SB-0117 company, of an 10 association, R01-SB.docx a } joint Raised stock Bill company, No. a business trust, an unincorporated organization or other legal entity.

~~1022 limited liability company, an association, a joint stock company, a business trust, an unincorporated organization or other legal entity.~~

~~(20) "Unauthorized insurer" or "nonadmitted insurer" means an insurer SB1022 that/ has File not No. been granted a certificate of authority by the commissioner to transact the business of insurance in this state or an insurer transacting business not authorized by a valid certificate.~~

366 17 SB1022 File No.

366 insurer that has not been granted a certificate of authority by the commissioner to transact the business of insurance in this state or an insurer transacting business not authorized by a valid certificate.

(b) Notwithstanding any provision of the general statutes, no health carrier shall reduce the amount of a reimbursement paid to a telehealth LCO provider 3868 for {\\PRDFS1\SCOUSERS\FORZANO\WS\2021SB-0118 covered of health 10 care R01-SB.docx or } health Raised services Bill that No. the telehealth provider appropriately provided to an insured through telehealth because the telehealth provider provided such health care or health services to the insured through telehealth and not in person.

~~1022 provider for covered health care or health services that the telehealth provider appropriately provided to an insured through telehealth because the telehealth provider provided such health care or health services to the insured through telehealth and not in person.~~

2 from passage 38a-499a from passage Sec.

3 ~~from passage~~ 38a-526a Sec.

5 from passage New section INS SB1022 Joint/ Favorable File LCO No. 3868
~~{\\PRDFS1\SCOUSERS\FORZANO\WS\2021SB-01022 10 of 10 R01-SB.docx }~~

366 18 SB1022 File No.

366 INS Joint Favorable SB1022 / File No.

366 19 SB1022 File No.

366 The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose.

In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge.

Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note State Impact:

Agency Affected Fund-Effect FY 22 \$ FY 23 \$ UConn Health Ctr.

Other Fund - See Below See Below Revenue Gain Municipal Impact:

Municipalities Effect FY 22 \$ FY 23 \$ Various Municipalities STATE See Below See Below MANDATE -

Potential Explanation The bill codifies temporarily established provisions related to the availability of telehealth services, including the requirement that health insurance policies maintain coverage for services provided via telehealth to the same extent services are covered when provided in- person.

The bill also prohibits reduced reimbursement levels for services provided via telehealth, and not in person.

The bill results in additional patient care revenues to UConn Health Center.

This revenue gain occurs to the extent that:

(1) patients who would otherwise forego in-person care instead choose to use telehealth services, (2) the bill provides more favorable telehealth reimbursement 1State mandate is defined in Sec. 2-32b(2) of the Connecticut General Statutes, "state mandate" means any state initiated constitutional, statutory or executive action that requires a local government to establish, expand or modify its activities in such a way as to necessitate additional expenditures from local revenues.

SB1022 / File No.

366 20 SB1022 File No.

366 terms for providers than exist in current contracts between UConn Health and health carriers, and (3) patients seek out more health care due to the relative ease of telehealth, for some.

UConn Health has experienced a substantial increase in telehealth usage and revenues beginning in March 2020, with revenues for FY 21 to date (\$1.8 million) equal to 1,212 times the total telehealth revenues for the calendar year (\$1,500).

The bill could also preclude future savings to fully-insured municipalities to the extent their plans' coverage would otherwise differ from the coverage required by the bill.

The impact would be reflected in premium costs when policies are renewed in FY 22.

Pursuant to federal law self-insured plans are exempt from state health mandates.

The Out Years The annualized ongoing fiscal impact identified above would continue into the future subject to inflation.

SB1022 / File No.

366 21 SB1022 File No.

366 OLR Bill Analysis SB 1022 AN ACT CONCERNING TELEHEALTH.

SUMMARY This bill modifies requirements for the delivery of telehealth services and insurance coverage of these services, codifying provisions temporarily enacted by PA 20-2, July Special Session.

Among other things, it:

1.

expands the types of health providers authorized to provide telehealth services;

2.

allows certain telehealth providers to provide services using audio-only telephone, which current law prohibits;

3.

allows certain telehealth providers to use additional information and communication technologies in accordance with federal requirements (e.g., certain third-party video communication applications);

4.

authorizestheDepartment ofPublicHealth(DPH)commissioner to temporarily modify, waive, or suspend certain regulatory requirements to reduce the spread of COVID-19 and protect the public health;

5.

establishes requirements for telehealth providers seeking payment from uninsured and underinsured patients;

6.

requires insurance coverage for telehealth services and prohibits providersreimbursedfor servicesfromseeking payment froman insured patient beyond cost sharing;

and 7.

prohibits (a) insurance policies from excluding coverage for a SB1022 / File No.

366 22 SB1022 File No.

366 telehealth platform selected by an in-network provider and (b) carriers from reducing reimbursement to a provider because services are provided through telehealth instead of in-person.

The bill also makes minor, technical, and conforming changes related to, among other things, patient consent for telehealth services.

EFFECTIVE DATE:

Upon passage Sec. 1 -- TELEHEALTH Telehealth Providers The bill modifies the definition of "telehealth provider" to include providers who are (1) in-network providers for fully insured health plans or (2) Connecticut Medical Assistance Program ("CMAP," i.e., Medicaid and HUSKY B) providers providing care or services to established CMAP patients, including:

1.

telehealth providers authorized under current law (see BACKGROUND);

2.

certified, licensed, or registered art therapists, athletic trainers, behavior analysts, dentists, genetic counselors, music therapists, nurse mid-wives, and occupational or physical therapist assistants;

and 3.

any of the above listed providers who (a) are appropriately licensed, certified, or registered in another U.S.

state or territory, or the District of Columbia;

(b) are authorized to practice telehealth under a relevant order issued by the DPH commissioner;

and (c) maintain professional liability insurance

or other indemnity against professional malpractice liability in an amount at least equal to that required for Connecticut health providers.

(The bill does not appear to address the provision of telehealth services by in-network providers in self-insured health plans.) The bill also requires any Connecticut entity, institution, or provider

SB1022 / File No.

366 23 SB1022 File No.

366 who engages or contracts with an out-of-state telehealth provider to:

1.

verify the provider's credentials to ensure he or she is certified, licensed, or registered in good standing in his or her home jurisdiction and 2.

confirm that the provider maintains professional liability insurance or other indemnity against professional malpractice liability in an amount at least equal to that required for Connecticut health providers.

Audio-Only Telephone Unlike current law, the bill allows in-network and CMAP telehealth providers to provide telehealth services via audio-only telephone.

Under the bill and existing law, "telehealth" excludes fax, texting, and email.

It includes:

1.

interaction between a patient at an originating site and the telehealth provider at a distant site and

2.

synchronous (real-time) interactions, asynchronous store and forward transfers (transmitting medical information from the patient to the telehealth provider for review later on), or remote patient monitoring.

Service Delivery Under existing law, a telehealth provider can provide services to a patient only when he or she meets certain requirements, such as (1) having access to, or knowledge of, the patient's medical history and health record and (2) conforming to his or her professional standard of care for in-person care appropriate for the patient's age and presenting condition.

The bill requires the provider to also determine if the (1) patient has health coverage that is fully insured, not fully insured, or provided through CMAP and (2) coverage includes telehealth services.

SB1022 / File No.

366 24 SB1022 File No.

366 Additionally, the bill allows telehealth providers to provide telehealth services from any location.

Additional Communication Technologies The bill modifies the requirement that telehealth services and health records comply with the federal Health Insurance Portability and Accountability Act (HIPAA) by allowing telehealth providers to use additional information and communication technologies in accordance with HIPAA requirements for remote communication as directed by the federal Department of Health and Human Services' Office of Civil Rights (e.g., certain third-party video communication applications, such as Apple FaceTime, Skype, or Facebook Messenger).

Payment for Uninsured and Underinsured Patients The bill requires a telehealth provider to accept the following as payment in full for services:

1.

for patients who do not have health insurance coverage for telehealth, an amount equal to the Medicare reimbursement rate for telehealth services or 2.

for patients with health insurance coverage, the amount the carrier reimburses for telehealth services and any cost sharing (e.g., copay, coinsurance, deductible) or other out-of-pocket expense the health plan imposes.

Under the bill, a telehealth provider who determines that a patient cannot pay for telehealth services must offer the patient financial assistance to the extent required by federal or state law.

DPH Regulatory Requirements Notwithstanding existing law on regulatory action, the bill authorizes the DPH commissioner to waive, modify, or suspend regulatory requirements adopted by DPH or state licensing boards and commissions regarding health care professions, health care facilities, emergency medical services, and other specified topics.

She may take these actions to provide residents with telehealth services from out-of- SB1022 / File No. 366 25 SB1022 File No.

366 state providers, as she deems necessary to reduce the spread of COVID- and protect the public health.

Sec.Sec. 2-5 -- INSURANCE COVERAGE FOR TELEHEALTH SERVICES Coverage Required Current law generally establishes requirements and restrictions for health insurance coverage of telehealth services.

The bill replaces these requirements with similar, but more expansive requirements.

As with current law, the bill requires certain commercial health insurance policies to cover medical advice, diagnosis, care, or treatment provided through telehealth to the extent that they cover those services when provided in person. It generally subjects telehealth coverage to the same terms and conditions that apply to other benefits under the policy.

Under the bill and existing law, insurers, HMOs, and related entities may conduct utilization review for telehealth services in the same manner they conduct it for in-person services, including using the same clinical review criteria.

Prohibitions Under the bill and existing law, health insurance policies cannot exclude coverage solely because a service is provided through telehealth, as long as telehealth is appropriate.

The bill further prohibits policies from excluding coverage through a telehealth platform that a telehealth provider selects.

The bill also prohibits a telehealth provider who is reimbursed for providing a telehealth service from seeking payment from the insured patient, except for cost sharing (e.g., copay, coinsurance, deductible).

The provider must accept the amount as payment in full.

Lastly, the bill prohibits health carriers (e.g., insurers and HMOs) from reducing the reimbursement amount they pay to telehealth providers for covered services appropriately provided through telehealth instead of in person.

SB1022 / File No.

366 26 SB1022 File No.

366 Applicability The bill applies to individual and group health insurance policies that cover (1) basic hospital expenses; (2) basic medical-surgical expenses; (3) major medical expenses; or (4) hospital or medical services, including those provided under an HMO plan.

(Because of the federal Employee Retirement Income Security Act (ERISA), state insurance benefit mandates do not apply to self-insured benefit plans.) BACKGROUND Authorized Telehealth Providers Current law allows the following licensed health care providers to provide health care services using telehealth:

advanced practice registered nurses, alcohol and drug counselors, audiologists, certified dietitian-nutritionists, chiropractors, clinical and master social workers, marital and family therapists, naturopaths, occupational or physical therapists, optometrists, paramedics, pharmacists, physicians, physician assistants, podiatrists, professional counselors, psychologists, registered nurses, respiratory care practitioners, and speech and language pathologists.

By law, authorized telehealth providers must provide telehealth services within their profession's scope of practice and standard of care.

Related Bill SHB 6470, favorably reported by the Human Services Committee, removes the prohibition on audio-only telehealth services and adds licensed nurse-midwives and behavior analysts to the list of authorized telehealth providers.

COMMITTEE ACTION Insurance and Real Estate Committee Joint Favorable Yea 18 Nay 0 (03/22/2021) SB1022 / File No.

366 27