

By: Raney

H.B. No. 2612

A BILL TO BE ENTITLED

AN ACT

relating to the provision of Medicaid and child health plan program services using telecommunications or information technology and to reimbursement for those services.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Section 531.0216(i), Government Code, is amended to read as follows:

(i) The executive commissioner by rule shall ensure that a rural health clinic as defined by 42 U.S.C. Section 1396d(1)(1) and a federally qualified health center as defined by 42 U.S.C. Section 1396d(1)(2)(B) may be reimbursed for the originating site facility fee or the distant site practitioner fee or both, as appropriate, for a covered telemedicine medical service or telehealth service delivered by a health care provider to a Medicaid recipient. ~~[The commission is required to implement this subsection only if the legislature appropriates money specifically for that purpose. If the legislature does not appropriate money specifically for that purpose, the commission may, but is not required to, implement this subsection using other money available to the commission for that purpose.]~~

SECTION 2. Subchapter B, Chapter 531, Government Code, is amended by adding Section 531.02161 to read as follows:

Sec. 531.02161. OPTION TO RECEIVE SERVICES THROUGH TELECOMMUNICATIONS AND INFORMATION TECHNOLOGY UNDER MEDICAID AND

1 CHILD HEALTH PLAN PROGRAM. (a) In this section, "case management
2 services" includes service coordination, service management, and
3 care coordination.

4 (b) To the extent permitted by federal law and to the extent
5 appropriate, the commission shall ensure that Medicaid recipients
6 and child health plan program enrollees, regardless of whether
7 receiving benefits through a managed care delivery model or another
8 delivery model, have the option to receive services as telemedicine
9 medical services, telehealth services, or otherwise using
10 telecommunications or information technology, including the
11 following services:

12 (1) evaluation services;

13 (2) case management services;

14 (3) behavioral health services;

15 (4) occupational, physical, and speech therapy
16 services;

17 (5) professional and specialized therapy services
18 provided under the community living assistance and support services
19 (CLASS) waiver program;

20 (6) assessment services, including nursing
21 assessments under the following Section 1915(c) waiver programs:

22 (A) the community living assistance and support
23 services (CLASS) waiver program;

24 (B) the deaf-blind with multiple disabilities
25 (DBMD) waiver program;

26 (C) the home and community-based services (HCS)
27 waiver program; and

1 (D) the Texas home living (TxHmL) waiver program;
2 and
3 (7) hospice services.

4 SECTION 3. Section 531.0217(d), Government Code, is
5 redesignated as Section 531.02176, Government Code, and amended to
6 read as follows:

7 Sec. 531.02176. REIMBURSEMENT PARITY FOR TELEMEDICINE
8 MEDICAL AND TELEHEALTH SERVICES. (a) [~~(d)~~] The commission shall
9 require reimbursement for a telemedicine medical service or
10 telehealth service at the same rate as Medicaid reimburses for the
11 same in-person [~~medical~~] service. A request for reimbursement may
12 not be denied solely because an in-person [~~medical~~] service between
13 a health care provider [~~physician~~] and a patient did not occur.

14 (b) The commission may not limit a provider's [~~physician's~~]
15 choice of platform for providing a telemedicine medical service or
16 telehealth service by requiring that the provider [~~physician~~] use a
17 particular platform to receive reimbursement for the service.

18 SECTION 4. Section 62.1571, Health and Safety Code, is
19 amended to read as follows:

20 Sec. 62.1571. TELEMEDICINE MEDICAL SERVICES AND TELEHEALTH
21 SERVICES. (a) In providing covered benefits to a child, a health
22 plan provider must permit benefits to be provided through
23 telemedicine medical services and telehealth services in
24 accordance with policies developed by the commission.

25 (b) The policies must provide for:

26 (1) the availability of covered benefits
27 appropriately provided through telemedicine medical services or

1 telehealth services that are comparable to the same types of
2 covered benefits provided without the use of telemedicine medical
3 services or telehealth services; and

4 (2) the availability of covered benefits for different
5 services performed by multiple health care providers during a
6 single session of telemedicine medical services or telehealth
7 services, if the executive commissioner determines that delivery of
8 the covered benefits in that manner is cost-effective in comparison
9 to the costs that would be involved in obtaining the services from
10 providers without the use of telemedicine medical services or
11 telehealth services, including the costs of transportation and
12 lodging and other direct costs.

13 (c) The commission shall require reimbursement for a
14 telemedicine medical service or telehealth service at the same rate
15 as the child health plan program reimburses for the same in-person
16 service. A request for reimbursement may not be denied solely
17 because an in-person service between a health care provider and a
18 patient did not occur. The commission may not limit a provider's
19 choice of platform for providing a telemedicine medical service or
20 telehealth service by requiring that the provider use a particular
21 platform to receive reimbursement for the service.

22 (d) In this section, "telehealth service" and "telemedicine
23 medical service" have [~~has~~] the meanings [~~meaning~~] assigned by
24 Section 531.001, Government Code.

25 SECTION 5. If before implementing any provision of this Act
26 a state agency determines that a waiver or authorization from a
27 federal agency is necessary for implementation of that provision,

1 the agency affected by the provision shall request the waiver or
2 authorization and may delay implementing that provision until the
3 waiver or authorization is granted.

4 SECTION 6. This Act takes effect September 1, 2021.