Amend CSSB 293 (house committee printing) as follows:

- (1) In SECTION 1 of the bill, in added Section 531.001(4-a), Government Code (page 1, line 11), strike "as" and substitute "or a hospital, as those terms are".
- (2) In SECTION 2 of the bill, strike amended Section 531.0216(b), Government Code (page 2, line 23, through page 3, line 26), and substitute the following:
- (b) In developing the system, the executive commissioner by rule shall:
- (1) review programs and pilot projects in other states to determine the most effective method for reimbursement;
- (2) establish billing codes and a fee schedule for services;
- (3) provide for an approval process before a provider can receive reimbursement for services;
- (4) consult with the Department of State Health Services and the telemedicine and telehealth advisory committee to establish procedures to:
- (A) identify clinical evidence supporting delivery of health care services using a telecommunications system; and
- (B) [establish pilot studies for telemedicine medical service delivery; and
- [(C)] annually review health care services, considering new clinical findings, to determine whether reimbursement for particular services should be denied or authorized;
- (5) [establish pilot programs in designated areas of this state under which the commission, in administering government-funded health programs, may reimburse a health professional participating in the pilot program for telehealth services authorized under the licensing law applicable to the health professional;
- [<del>(6)</del>] establish a separate provider identifier for telemedicine medical services providers, telehealth services providers, and home telemonitoring services providers; and
  - (6)  $[\frac{(7)}{(7)}]$  establish a separate modifier for

telemedicine medical services, telehealth services, and home telemonitoring services eligible for reimbursement.

(3) In SECTION 5 of the bill, strike added Section 531.02164(a), Government Code (page 6, lines 6 through 9), and substitute the following:

## (a) In this section:

- (1) "Home health agency" means a facility licensed under Chapter 142, Health and Safety Code, to provide home health services as defined by Section 142.001, Health and Safety Code.
- (2) "Hospital" means a hospital licensed under Chapter 241, Health and Safety Code.
- (4) In SECTION 5 of the bill, strike added Section 531.02164(c), Government Code (page 6, line 15, through page 7, line 11), and substitute the following:
  - (c) The program required under this section must:
- (1) provide that home telemonitoring services are available only to persons who:
- (A) are diagnosed with one or more of the following conditions:
  - (i) pregnancy;
  - (ii) diabetes;
  - (iii) heart disease;
  - (iv) cancer;
  - (v) chronic obstructive pulmonary disease;
  - (vi) hypertension;
  - (vii) congestive heart failure;
  - (viii) mental illness or serious emotional

## disturbance;

- (ix) asthma;
- (x) myocardial infarction; or
- (xi) stroke; and
- (B) exhibit two or more of the following risk

## factors:

- (i) two or more hospitalizations in the prior 12-month period;
- (ii) frequent or recurrent emergency room
  admissions;

(iii) a documented history of poor
adherence to ordered medication regimens;

(iv) a documented history of falls in the
prior six-month period;

(v) limited or absent informal support systems;

(vii) a documented history of care access
challenges;

- (2) ensure that clinical information gathered by a home health agency or hospital while providing home telemonitoring services is shared with the patient's physician; and
- (3) ensure that the program does not duplicate disease management program services provided under Section 32.057, Human Resources Code.
- (5) In SECTION 5 of the bill, in added Section 531.02164(e), Government Code (page 7, lines 21 through 26), strike "If the commission determines that the provision of home telemonitoring services achieves cost savings for the Medicare program, the commission shall pursue the creation of accountable care organizations to participate in the Medicare shared savings program in accordance with 42 U.S.C. Section 1395jjj."
- (6) Strike SECTION 6 of the bill (page 7, line 27, through page 8, line 4).
- (7) Strike SECTION 7 of the bill (page 8, line 5, through page 9, line 14).
- (8) In the recital to SECTION 9 of the bill (page 9, line 19), strike "Section 531.02172(b), Government Code, is" and substitute "Sections 531.02172(a) and (b), Government Code, are".
- (9) In SECTION 9 of the bill, immediately following the recital (page 9, between lines 20 and 21), insert the following:
- (a) The  $\underline{\text{executive}}$  commissioner shall establish an advisory committee to assist the commission in:
- (1) evaluating policies for telemedical consultations under Sections 531.02163 and 531.0217;
  - (2) [evaluating policies for telemedicine medical

services or telehealth services pilot programs established under Section 531.02171;

- [(3)] ensuring the efficient and consistent development and use of telecommunication technology for telemedical consultations and telemedicine medical services or telehealth services reimbursed under government-funded health programs;
- (3) [(4)] monitoring the type of <u>consultations and</u>
  other services [programs] receiving reimbursement under <u>Sections</u>
  [Sections] 531.0217 [and 531.02171]; and
- (4) [(5)] coordinating the activities of state agencies concerned with the use of telemedical consultations and telemedicine medical services or telehealth services.
- (10) In SECTION 11(3) of the bill (page 10, line 27), strike "Sections 531.02171(a)(3) and (4)" and substitute "Section 531.02171".
  - (11) Renumber SECTIONS of the bill accordingly.