

By: Coleman

H.B. No. 3476

A BILL TO BE ENTITLED

1 AN ACT
2 relating to the provision and reimbursement of home telemonitoring
3 services, telemedicine medical services, and telehealth services
4 under the Medicaid program.

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

6 SECTION 1. Sections 531.02164(a) and (c), Government Code,
7 are amended to read as follows:

8 (a) In this section:

9 (1) "Elderly individual" means an individual 60 years
10 of age or older.

11 (2) "Home health agency" means a facility licensed
12 under Chapter 142, Health and Safety Code, to provide home health
13 services as defined by Section 142.001, Health and Safety Code.

14 (3) ~~(2)~~ "Hospital" means a hospital licensed under
15 Chapter 241, Health and Safety Code.

16 (4) "Individual with special health care needs" means
17 an individual who has:

18 (A) a chronic physical or developmental
19 condition; or

20 (B) a terminal illness.

21 (c) The program required under this section must:

22 (1) provide that home telemonitoring services are
23 available ~~[only]~~ to a person ~~[persons]~~ who is:

24 (A) an elderly individual;

1 (B) an individual with special health care needs;

2 or

3 (C) an individual who:

4 (i) is [~~are~~] diagnosed with one or more of
5 the following conditions:

6 (a) [~~(i)~~] pregnancy;

7 (b) [~~(ii)~~] diabetes;

8 (c) [~~(iii)~~] heart disease;

9 (d) [~~(iv)~~] cancer;

10 (e) [~~(v)~~] chronic obstructive
11 pulmonary disease;

12 (f) [~~(vi)~~] hypertension;

13 (g) [~~(vii)~~] congestive heart failure;

14 (h) [~~(viii)~~] mental illness or
15 serious emotional disturbance;

16 (i) [~~(ix)~~] asthma;

17 (j) [~~(x)~~] myocardial infarction; or

18 (k) [~~(xi)~~] stroke; and

19 (ii) exhibits [~~(B) exhibit~~] two or more of
20 the following risk factors:

21 (a) [~~(i)~~] two or more
22 hospitalizations in the prior 12-month period;

23 (b) [~~(ii)~~] frequent or recurrent
24 emergency room admissions;

25 (c) [~~(iii)~~] a documented history of
26 poor adherence to ordered medication regimens;

27 (d) [~~(iv)~~] a documented history of

1 falls in the prior six-month period;

2 (e) [~~(v)~~] limited or absent informal
3 support systems;

4 (f) [~~(vi)~~] living alone or being home
5 alone for extended periods of time; and

6 (g) [~~(vii)~~] a documented history of
7 care access challenges;

8 (2) ensure that clinical information gathered by a
9 home health agency or hospital while providing home telemonitoring
10 services is shared with the patient's physician; and

11 (3) ensure that the program does not duplicate disease
12 management program services provided under Section 32.057, Human
13 Resources Code.

14 SECTION 2. Subchapter B, Chapter 531, Government Code, is
15 amended by adding Section 531.02165 to read as follows:

16 Sec. 531.02165. PROVISION OF TELEMEDICINE MEDICAL SERVICES
17 AND TELEHEALTH SERVICES TO RECIPIENTS AT RESIDENCE. (a) In this
18 section, "residence" means a place where a person resides and
19 includes a home, a nursing home, a convalescent home, or a
20 residential unit.

21 (b) The executive commissioner shall develop and implement
22 a pilot project under the state Medicaid program that provides for
23 the reimbursement of telemedicine medical services and telehealth
24 services provided to a recipient while the recipient is at the
25 recipient's residence.

26 (c) Based on the results of the pilot project established
27 under Subsection (b), if the executive commissioner determines that

1 it would be cost-effective and feasible to develop and implement a
2 statewide program under the state Medicaid program that provides
3 for the reimbursement of telemedicine medical services and
4 telehealth services provided to a recipient while the recipient is
5 at the recipient's residence, the executive commissioner shall
6 establish the statewide program by rule.

7 (d) Not later than December 1, 2016, the executive
8 commissioner shall submit a report to the legislature on the
9 results of the pilot project established under Subsection (b) and,
10 if applicable, the progress on the implementation of the statewide
11 program established under Subsection (c). The report must include:

12 (1) an evaluation of the pilot project's success and,
13 if applicable, the statewide program's success in increasing health
14 care access for Medicaid recipients;

15 (2) an evaluation of the cost savings to the state and
16 Medicaid recipients attributable to the pilot project and, if
17 applicable, the statewide program; and

18 (3) a recommendation regarding the continuation,
19 expansion, or termination of the statewide program, if applicable.

20 (e) Subsection (d) and this subsection expire September 1,
21 2017.

22 SECTION 3. Section 531.0217, Government Code, is amended by
23 adding Subsections (d-1) and (d-2) to read as follows:

24 (d-1) The commission shall require that requests for
25 reimbursement for telemedicine medical services be approved at a
26 similar frequency as requests for reimbursement for comparable
27 in-person medical services. A request for reimbursement for a

1 telemedicine medical service may not be denied if the service is
2 medically necessary.

3 (d-2) Not later than December 1 of each even-numbered year,
4 the commission shall prepare and submit a report on telemedicine
5 medical services billing procedures to the legislative committees
6 having jurisdiction over the Medicaid program. The report required
7 by this subsection may be made in conjunction with any other report
8 the commission is required to submit to the legislature if the
9 commission determines it appropriate.

10 SECTION 4. Section 531.02176, Government Code, is repealed.

11 SECTION 5. Section 531.02164, Government Code, as amended
12 by this Act, applies only to an insurance claim filed, an insurance
13 policy entered into, or a legal cause arising on or after the
14 effective date of this Act. An insurance claim filed, an insurance
15 policy entered into, or a legal cause that arose before the
16 effective date of this Act is governed by the law as it existed
17 immediately before the effective date of this Act, and that law is
18 continued in effect for that purpose.

19 SECTION 6. (a) Not later than January 1, 2016, the
20 executive commissioner of the Health and Human Services Commission
21 shall adopt the rules necessary to implement Section 531.02165,
22 Government Code, as added by this Act, and Section 531.0217,
23 Government Code, as amended by this Act.

24 (b) Not later than March 1, 2016, the executive commissioner
25 of the Health and Human Services Commission shall adopt the rules
26 necessary to implement Section 531.02164, Government Code, as
27 amended by this Act.

1 SECTION 7. If before implementing any provision of this Act
2 a state agency determines that a waiver or authorization from a
3 federal agency is necessary for implementation of that provision,
4 the agency affected by the provision shall request the waiver or
5 authorization and may delay implementing that provision until the
6 waiver or authorization is granted.

7 SECTION 8. This Act takes effect September 1, 2015.