

By: Price

H.B. No. 870

A BILL TO BE ENTITLED

AN ACT

relating to Medicaid telemedicine and telehealth services.

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

SECTION 1. Section 531.0216, Government Code, is amended by amending Subsection (b) and adding Subsection (g) to read as follows:

(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) [consult with the Department of State Health Services to establish procedures to:~~

~~[(A) identify clinical evidence supporting delivery of health care services using a telecommunications system; and~~

~~[(B) annually review health care services, considering new clinical findings, to determine whether reimbursement for particular services should be denied or authorized;~~

~~[(4)]~~ establish a separate provider identifier for telemedicine medical services providers, telehealth services providers, and home telemonitoring services providers; and

1 (4) [~~5~~] establish a separate modifier for
2 telemedicine medical services, telehealth services, and home
3 telemonitoring services eligible for reimbursement.

4 (g) The commission shall ensure a managed care organization
5 that contracts with the commission under Chapter 533 to provide
6 health care services to Medicaid recipients does not deny
7 reimbursement for a covered health care service or procedure
8 delivered by a health care provider with whom the managed care
9 organization contracts to a recipient as a telemedicine medical
10 service or a telehealth service solely because the covered service
11 or procedure is not provided through an in-person consultation.

12 SECTION 2. Section 531.0217(c-4), Government Code, is
13 amended to read as follows:

14 (c-4) The commission shall ensure that Medicaid
15 reimbursement is provided to a physician for a telemedicine medical
16 service provided by the physician, even if the physician is not the
17 patient's primary care physician or provider, if:

18 (1) the physician is an authorized health care
19 provider under Medicaid;

20 (2) the patient is a child who receives the service in
21 a primary or secondary school-based setting; and

22 (3) the parent or legal guardian of the patient
23 provides consent before the service is provided[~~, and~~

24 ~~[(4) a health professional is present with the patient~~
25 ~~during the treatment].~~

26 SECTION 3. The following provisions of the Government Code
27 are repealed:

- 1 (1) Section 531.0216(e);
- 2 (2) Section 531.02161;
- 3 (3) Sections 531.0217(c-2) and (c-3); and
- 4 (4) Section 531.02173.

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

11 SECTION 5. This Act takes effect September 1, 2019.