

By: Buckingham

S.B. No. 670

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. In
12 complying with state and federal requirements to provide access to
13 medically necessary services under the Medicaid managed care
14 program, a managed care organization determining whether
15 reimbursement for a telemedicine medical service or telehealth
16 service is appropriate shall continue to consider other factors,
17 including whether reimbursement is cost-effective and whether the
18 provision of the service is clinically effective.

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

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

25 (1) the physician is an authorized health care
26 provider under Medicaid;

27 (2) the patient is a child who receives the service in

1 a primary or secondary school-based setting; and

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

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

6 SECTION 3. The following provisions of the Government Code
7 are repealed:

8 (1) Section 531.0216(e);

9 (2) Section 531.02161;

10 (3) Sections 531.0217(c-2) and (c-3); and

11 (4) Section 531.02173.

12 SECTION 4. If before implementing any provision of this Act
13 a state agency determines that a waiver or authorization from a
14 federal agency is necessary for implementation of that provision,
15 the agency affected by the provision shall request the waiver or
16 authorization and may delay implementing that provision until the
17 waiver or authorization is granted.

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