

BILL ANALYSIS

H.B. 1726
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Insurance
Committee Report (Unamended)

BACKGROUND AND PURPOSE

While teleservices have been available for over 15 years, the pandemic propelled a greater utilization of telemedicine medical services, teledentistry dental services, and telehealth services. Telehealth allows patients to receive health care services in a location separate from their provider through virtual and other technological communications platforms. According to a study by Accenture in 2020, an estimated 4.5 million Texans used virtual health care services due to the pandemic. These remote visits range from physician care to psychotherapy. For people who live too far away from a provider, cannot take time off from work, lack child care, lack transportation, or have a disability, these virtual services provide access to much needed health services. Even though this technology can reduce health care costs, Texas does not currently require private insurers to reimburse telehealth services at the same rate as in-person visits. H.B. 1726 addresses this issue by ensuring health benefit plan issuers reimburse and pay claims for telemedicine medical services, teledentistry dental services, and telehealth services at the same rate as in-person visits.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

H.B. 1726 amends the Insurance Code to set out provisions relating to reimbursement and payment by a health benefit plan for telemedicine medical services, teledentistry dental services, or telehealth services delivered to a covered patient by a preferred or contracted health professional that do the following:

- require an applicable health benefit plan issuer to reimburse a preferred or contracted health professional for providing a covered health care service or procedure as a telemedicine medical service, teledentistry dental service, or telehealth service on the same basis and at least at the same rate that the plan issuer provides reimbursement to that professional for the service or procedure in an in-person setting;
- establish that a plan issuer is not required to pay more than the billed charge on a claim for payment by a preferred or contracted health professional or reimburse a preferred or contracted health professional for a telemedicine medical service, teledentistry dental service, or telehealth service provided to a covered patient as part of a mutually agreed upon risk-based payment arrangement; and
- prohibit a plan issuer, for purposes of processing payment of a claim, from requiring a preferred or contracted health professional to provide documentation of a covered health

care service or procedure delivered as a telemedicine medical service, teledentistry dental service, or telehealth service beyond that which is required for the service or procedure in an in-person setting.

H.B. 1726 includes among the individuals classified as a health professional for purposes of provisions governing health benefit plan coverage for telemedicine, teledentistry, and telehealth an individual who:

- is credentialed to provide qualified mental health professional community services;
- has demonstrated and documented competency in the work to be performed;
- is acting within the scope of the individual's license or other authorization issued by the state and does not perform a telemedicine medical service; and
- meets one of the following criteria:
 - holds a bachelor's or more advanced degree from an accredited institution of higher education with qualifying coursework as specified by the bill;
 - is a registered nurse; or
 - completes an alternative credentialing process identified by the Health and Human Services Commission.

The bill clarifies that a mental health professional who is acting within the scope of the professional's license or certification and who does not perform a telemedicine medical service is also classified as a health professional for such purposes.

H.B. 1726 establishes that provisions governing health benefit plan coverage for telemedicine, teledentistry, and telehealth may not be waived, voided, or nullified by contract. The bill's changes to those provisions apply only to a health benefit plan delivered, issued for delivery, or renewed on or after January 1, 2024.

EFFECTIVE DATE

September 1, 2023.