1	Introduced by Committee on Health and Welfare
2	Date:
3	Subject: Health; health insurance; telehealth; telephone; store and forward
4	Statement of purpose of bill as introduced: This bill proposes to move up the
5	effective date for health insurance reimbursement for health care services
6	delivered by store-and-forward means. It would also direct the Department of
7	Financial Regulation to convene a working group to develop recommendations
8	regarding health insurance and Medicaid coverage of health care services
9	delivered by telephone after the COVID-19 state of emergency ends.

10 11	An act relating to access to health care services delivered by telehealth and telephone
12	It is hereby enacted by the General Assembly of the State of Vermont:
13	Sec. 1. 2020 Acts and Resolves No. 91, Sec. 38 is amended to read:
14	Sec. 38. EFFECTIVE DATES
15	This act shall take effect on passage, except that:
16	(1) In Sec. 24, 8 V.S.A. § 4100k(e) (coverage of health care services
17	delivered by store-and-forward means) shall take effect on January 1, 2021
18	<u>May 1, 2020</u> .
19	(2) Sec. 29 shall take effect on July 1, 2020.
20	(3) Secs. 32 and 33 shall take effect on March 31, 2021.

1	Sec. 2. COVERAGE FOR HEALTH CARE SERVICES DELIVERED BY
2	TELEPHONE; WORKING GROUP
3	(a) The Department of Financial Regulation shall convene a working group
4	to develop recommendations for health insurance and Medicaid coverage of
5	health care services delivered by telephone after the COVID-19 state of
6	emergency ends. The working group shall include representatives of the
7	Department of Vermont Health Access, health insurers, the Vermont Medical
8	Society, Bi-State Primary Care Association, the VNAs of Vermont, the
9	Vermont Association of Hospitals and Health Systems, the Office of the
10	Health Care Advocate, and other interested stakeholders.
11	(b) On or before December 1, 2020, the Department of Financial
12	Regulation shall provide to the House Committee on Health Care and the
13	Senate Committees on Health and Welfare and on Finance the working group's
14	recommendations for ongoing coverage of health care services delivered by
15	telephone.
16	Sec. 3. 2020 Acts and Resolves No. 91, Sec. 8 is amended to read:
17	Sec. 8. ACCESS TO HEALTH CARE SERVICES; DEPARTMENT OF
18	FINANCIAL REGULATION; EMERGENCY RULEMAKING
19	It is the intent of the General Assembly to increase Vermonters' access to
20	medically necessary health care services during and after a declared state of
21	emergency in Vermont as a result of COVID-19. During such a declared

(dr req 20-0981 – draft 2.1) 5/28/2020 - JGC – 10:59 AM

1	state of emergency, the The Department of Financial Regulation shall
2	consider adopting, and shall have the authority to adopt, emergency rules to
3	address the following for the duration of the state of emergency through
4	June 30, 2021
5	(1) expanding health insurance coverage for, and waiving or limiting
6	cost-sharing requirements directly related to, COVID-19 diagnosis, treatment,
7	and prevention;
8	(2) modifying or suspending health insurance plan deductible
9	requirements for all prescription drugs, except to the extent that such an action
10	would disqualify a high-deductible health plan from eligibility for a health
11	savings account pursuant to 26 U.S.C. § 223; and
12	(3) expanding patients' access to and providers' reimbursement for
13	health care services, including preventive services, consultation services, and
14	services to new patients, delivered remotely through telehealth, audio-only
15	telephone, and brief telecommunication services.
16	Sec. 4. TELEHEALTH; CONNECTIVITY; FUNDING OPPORTUNITIES
17	(a) The Vermont Program for Quality in Health Care, Inc., shall consult
18	with its Statewide Telehealth Workgroup, the Department of Public Service,
19	and organizations representing health care providers and health care consumers
20	to identify:

(dr req 20-0981 – draft 2.1) 5/28/2020 - JGC – 10:59 AM

1	(1) areas of the State that do not have access to broadband service and
2	that are also medically underserved or have high concentrations of high-risk or
3	vulnerable patients, or both, and where equitable access to telehealth services
4	would result in improved patient outcomes or reduced health care costs, or
5	both; and
6	(2) opportunities to use federal funds and funds from other sources to
7	increase Vermonters' access to clinically appropriate telehealth services,
8	including opportunities to maximize access to federal grants through strategic
9	planning, coordination, and resource and information sharing.
10	(b) Based on the information obtained pursuant to subsection (a) of this
11	section, the Vermont Program for Quality in Health Care, Inc., and the
12	Department of Public Service, with input from organizations representing
13	health care providers and health care consumers, shall provide technical
14	assistance to support health care providers eligible efforts to pursue available
15	funding opportunities in order to increase Vermonters' access to clinically
16	appropriate telehealth services via information dissemination and technical
17	assistance to the extent feasible under the current billback funding mechanism
18	under 18 V.S.A. § 9416(c).
19	(c) In coordinating and administering the efforts described in this section,
20	the Vermont Program for Quality in Health Care, Inc. shall use federal funds to
21	the greatest extent possible.

(dr req 20-0981 – draft 2.1) 5/28/2020 - JGC – 10:59 AM

1 Sec. **5**. EFFECTIVE DATES

- 2 (a) Notwithstanding 1 V.S.A. § 214, Sec. 1 (effective date for store and
- 3 <u>forward</u>) shall take effect on passage and shall apply retroactively to March 30,
- 4 <u>2020.</u>
- 5 (b) The remaining sections shall take effect on passage.