

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 An act relating to access to health care services delivered by telehealth and
11 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 May 1, 2020.

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 state~~

1 of emergency, the ~~The~~ **Until July 1, 2021, and notwithstanding any**
2 **provision of 3 V.S.A. § 844 to the contrary, the** Department of Financial
3 Regulation shall consider adopting, and shall have the authority to adopt,
4 emergency rules to address the following ~~for the duration of the state of~~
5 ~~emergency~~ through June 30, 2021:

6 (1) expanding health insurance coverage for, and waiving or limiting
7 cost-sharing requirements directly related to, COVID-19 diagnosis, treatment,
8 and prevention;

9 (2) modifying or suspending health insurance plan deductible
10 requirements for all prescription drugs, except to the extent that such an action
11 would disqualify a high-deductible health plan from eligibility for a health
12 savings account pursuant to 26 U.S.C. § 223; and

13 (3) expanding patients' access to and providers' reimbursement for
14 health care services, including preventive services, consultation services, and
15 services to new patients, delivered remotely through telehealth, audio-only
16 telephone, and brief telecommunication services.

17 Sec. 4. TELEHEALTH; CONNECTIVITY; FUNDING OPPORTUNITIES

18 (a) The Vermont Program for Quality in Health Care, Inc., shall consult
19 with its Statewide Telehealth Workgroup, the Department of Public Service,
20 and organizations representing health care providers and health care consumers
21 to identify:

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.

1 Sec. **5**. EFFECTIVE DATES

2 (a) Notwithstanding 1 V.S.A. § 214, Sec. 1 (effective date for store and
3 forward) shall take effect on passage and shall apply retroactively to March 30,
4 2020.

5 (b) The remaining sections shall take effect on passage.