

SENATE SUBSTITUTE
FOR
SENATE BILL NO. 262

AN ACT

To amend chapter 376, RSMo, by adding thereto one new section relating to the reimbursement of covered health care services provided through telemedicine, with an effective date.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF MISSOURI,
AS FOLLOWS:

1 Section A. Chapter 376, RSMo, is amended by adding thereto
2 one new section, to be known as section 376.1900, to read as
3 follows:

4 376.1900. 1. As used in this section, the following terms
5 shall mean:

6 (1) "Electronic visit", or "e-Visit", an online electronic
7 medical evaluation and management service completed using a
8 secured website or secured email for a single patient encounter.
9 An electronic visit shall be initiated by an established patient
10 or by the guardian of an established patient with the health care
11 provider, be completed using a HIPAA compliant online connection,
12 and include a permanent record of the electronic visit;

13 (2) "Health benefit plan", shall have the same meaning
14 ascribed to it in section 376.1350;

15 (3) "Health care provider", shall have the same meaning
16 ascribed to it in section 376.1350;

17 (4) "Health care service", shall have the same meaning
18 ascribed to it in section 376.1350;

1 (5) "Health carrier", shall have the same meaning ascribed
2 to it in section 376.1350;

3 (6) "Telemedicine", the delivery of health care services
4 through the use of interactive audio, video, or
5 other electronic media used for the purpose of diagnosis,
6 consultation, or treatment, including home health video
7 conferencing, electronic visits, and remote patient monitoring.
8 Services delivered through audio-only telephones, electronic mail
9 messages, or facsimile transmissions shall not be included.

10 2. Each health carrier or health benefit plan that offers
11 or issues health benefit plans which are delivered, issued for
12 delivery, continued, or renewed in this state on or after January
13 1, 2014, shall not deny coverage for a health care service on the
14 basis that the health care service is provided through
15 telemedicine if the same service would be covered when provided
16 through face-to-face diagnosis, consultation, or treatment.

17 3. A health carrier may not exclude an otherwise covered
18 health care service from coverage solely because the service is
19 provided through telemedicine rather than face-to-face
20 consultation or contact between a health care provider and a
21 patient. Subject to approval by the health carrier, health care
22 services may be provided by telemedicine providers without any
23 prior face-to-face consultation or contact between a health care
24 provider and a patient.

25 4. A health carrier shall not be required to reimburse a
26 telemedicine provider or a consulting provider for technological
27 fees or costs for the provision of telemedicine services;
28 however, a health carrier shall reimburse a health care provider

1 for the diagnosis, consultation, or treatment of an insured or
2 enrollee when the health care service is delivered through
3 telemedicine on the same basis that the health carrier covers the
4 service when it is delivered in person.

5 5. A health care service provided through telemedicine
6 shall not be subject to any greater deductible, copayment, or
7 coinsurance amount than would be applicable if the same health
8 care service was provided through face-to-face diagnosis,
9 consultation, or treatment.

10 6. A health carrier shall not impose upon any person
11 receiving benefits under this section any copayment, coinsurance,
12 or deductible amount, or any policy year, calendar year,
13 lifetime, or other durational benefit limitation or maximum for
14 benefits or services, that is not equally imposed upon all terms
15 and services covered under the policy, contract, or health
16 benefit plan.

17 7. Nothing in this section shall preclude a health carrier
18 from undertaking utilization review to determine the
19 appropriateness of telemedicine as a means of delivering a health
20 care service; provided that the determinations shall be made in
21 the same manner as those regarding the same service when it is
22 delivered in person.

23 8. A health carrier or health benefit plan may limit
24 coverage for health care services that are provided through
25 telemedicine to health care providers that are in a network
26 approved by the plan or the health carrier.

27 9. Nothing in this section shall be construed to require a
28 health care provider to be physically present with a patient

1 where the patient is located unless the health care provider who
2 is providing health care services by means of telemedicine
3 determines that the presence of a health care provider is
4 necessary.

5 10. The provisions of this section shall not apply to a
6 supplemental insurance policy, including a life care contract,
7 accident-only policy, specified disease policy, hospital policy
8 providing a fixed daily benefit only, Medicare supplement policy,
9 long-term care policy, short-term major medical policies of six
10 months or less duration, or any other supplemental policy as
11 determined by the director of the department of insurance,
12 financial institutions and professional registration.

13 Section B. The enactment of section 376.1900 shall become
14 effective January 1, 2014.