

# SENATE AMENDMENT NO. \_\_\_\_\_

Offered by \_\_\_\_\_ of \_\_\_\_\_

Amend SCS/Senate Bill No. 230, Page 2, Section 208.677, Line 7,

2 by inserting immediately after the word "assistance." the  
 3 following:

4 "No originating site for services or activities provided  
 5 under section 208.686 shall be required to maintain immediate  
 6 availability of on-site clinical staff during the telemonitoring  
 7 services or activities."; and further amend line 32, by inserting  
 8 after all of said line the following:

9 "208.686. 1. Subject to appropriations, the department  
 10 shall establish a statewide program that permits reimbursement  
 11 under the MO HealthNet program for home telemonitoring services.  
 12 For the purposes of this section, "home telemonitoring service"  
 13 shall mean a health care service that requires scheduled remote  
 14 monitoring of data related to a patient's health and transmission  
 15 of the data to a Utilization Review Accreditation Commission  
 16 (URAC) accredited health call center.

17 2. The program shall:

18 (1) Provide that home telemonitoring services are available  
 19 only to persons who:

20 (a) Are diagnosed with one or more of the following  
 21 conditions:

- 1           a. Pregnancy;
- 2           b. Diabetes;
- 3           c. Heart disease;
- 4           d. Cancer;
- 5           e. Chronic obstructive pulmonary disease;
- 6           f. Hypertension;
- 7           g. Congestive heart failure;
- 8           h. Mental illness or serious emotional disturbance;
- 9           i. Asthma;
- 10          j. Myocardial infarction; or
- 11          k. Stroke; and

12          (b) Exhibit two or more of the following risk factors:

13           a. Two or more hospitalizations in the prior twelve-month  
14 period;

15           b. Frequent or recurrent emergency department admissions;

16           c. A documented history of poor adherence to ordered  
17 medication regimens;

18           d. A documented history of falls in the prior six-month  
19 period;

20           e. Limited or absent informal support systems;

21           f. Living alone or being home alone for extended periods of  
22 time; or

23           g. A documented history of care access challenges;

24          (2) Ensure that clinical information gathered by a home  
25 health agency or hospital while providing home telemonitoring  
26 services is shared with the patient's physician; and

27          (3) Ensure that the program does not duplicate any disease  
28 management program services provided by MO HealthNet.

29          3. If, after implementation, the department determines that

1 the program established under this section is not cost effective,  
2 the department may discontinue the program and stop providing  
3 reimbursement under the MO HealthNet program for home  
4 telemonitoring services.

5 4. The department shall determine whether the provision of  
6 home telemonitoring services to persons who are eligible to  
7 receive benefits under both the MO HealthNet and Medicare  
8 programs achieves cost savings for the Medicare program.

9 5. If, before implementing any provision of this section,  
10 the department determines that a waiver or authorization from a  
11 federal agency is necessary for implementation of that provision,  
12 the department shall request the waiver or authorization and may  
13 delay implementing that provision until the waiver or  
14 authorization is granted.

15 6. The department shall promulgate rules and regulations to  
16 implement the provisions of this section. Any rule or portion of  
17 a rule, as that term is defined in section 536.010, that is  
18 created under the authority delegated in this section shall  
19 become effective only if it complies with and is subject to all  
20 of the provisions of chapter 536 and, if applicable, section  
21 536.028. This section and chapter 536 are nonseverable, and if  
22 any of the powers vested with the general assembly pursuant to  
23 chapter 536 to review, to delay the effective date, or to  
24 disapprove and annul a rule are subsequently held  
25 unconstitutional, then the grant of rulemaking authority and any  
26 rule proposed or adopted after August 28, 2015, shall be invalid  
27 and void."; and

28 Further amend the title and enacting clause  
29 accordingly.