## PROPOSED AMENDMENTS TO SENATE BILL NO. 2160

Page 1, line 1, after "A BILL" replace the remainder of the bill with "for an Act to create and enact a new section to chapter 54-52.1 of the North Dakota Century Code, relating to public employee telehealth benefits; to provide for a report; to provide for application; to provide an expiration date; and to declare an emergency.

## BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:

**SECTION 1.** A new section to chapter 54-52.1 of the North Dakota Century Code is created and enacted as follows:

## Coverage of telehealth services.

- <u>1.</u> <u>As used in this section:</u>
  - <u>a.</u> <u>"Behavioral health" has the same meaning as provided under section</u> 50-06-01.
  - b. "Distant site" means a site at which a health care provider or health care facility is located while providing medical services by means of telehealth.
  - c. "Health care facility" means any office or institution at which health services are provided. The term includes hospitals; clinics; ambulatory surgery centers; outpatient care facilities; nursing homes; nursing, basic, long-term, or assisted living facilities; laboratories; and offices of any health care provider.
  - <u>d.</u> <u>"Health care provider" includes an individual licensed under chapter</u> <u>43-05, 43-06, 43-12.1 as a registered nurse or as an advanced</u> <u>practice registered nurse, 43-13, 43-15, 43-17, 43-26.1, 43-28, 43-32,</u> <u>43-37, 43-40, 43-41, 43-42, 43-44, 43-45, 43-47, 43-58, or 43-60.</u>
  - e. <u>"Originating site" means a site at which a patient is located at the time</u> <u>health services are provided to the patient by means of telehealth.</u>
  - <u>f.</u> <u>"Store-and-forward technology" means asynchronous electronic</u> <u>transfer or transmission of a patient's medical information or data from</u> <u>an originating site to a distant site for the purpose of diagnostic and</u> <u>therapeutic assistance in the care of a patient.</u>
  - g. "Telehealth":
    - (1) Means the delivery of health services or consultations through the use of real-time two-way interactive audio and visual communications to provide or support health care delivery and facilitate the assessment, diagnosis, consultation, treatment, education, and care management of a patient's health care.

- (2) Includes the application of secure video conferencing, storeand-forward technology, and synchronous interactions between a patient located at an originating site and a health care provider located at a distant site.
- (3) Includes audio-only communication between a health care provider and a patient as authorized under this section.
- (4) Does not include communication between health care providers which consists solely of a telephone conversation, electronic mail, or facsimile transmission.
- (5) Does not include communication between a health care provider and a patient which consists solely of an electronic mail or facsimile transmission.
- (6) Includes telemonitoring services if the:
  - (a) <u>Telemonitoring services are medically appropriate based</u> on the patient's medical condition or status;
  - (b) Patient is cognitively and physically capable of operating the monitoring device or equipment, or the patient has a caregiver who is willing and able to assist with the monitoring device or equipment; and
  - (c) Patient resides in a setting suitable for telemonitoring services and not in a setting that has health care staff on site.
- h. <u>"Telemonitoring services" means the remote monitoring of clinical data</u> related to the patient's vital signs or biometric data by a monitoring device or equipment that transmits the data electronically to a health care provider for analysis. Telemonitoring is intended to collect a patient's health-related data for the purpose of assisting a health care provider in assessing and monitoring the patient's medical condition or status.
- 2. The board shall provide health insurance benefits coverage that provides coverage for health services delivered by means of telehealth which is the same as the coverage for covered medically necessary health services delivered by in-person means.
  - a. This subsection does not require a health care provider to provide telehealth services if the provider determines the delivery of a health service through telehealth is not appropriate or if a patient chooses not to receive a health care service through telehealth.
  - b. The coverage may provide criteria a health care provider is required to meet to demonstrate safety or efficacy of delivering a health care service through telehealth if the coverage does not already reimburse other health care providers for delivery of that health service through telehealth.
  - <u>c.</u> <u>The coverage may provide reasonable medical management</u> <u>techniques if a particular technique is not unduly burdensome or</u> <u>unreasonable for a particular health service.</u>

- <u>d.</u> The coverage may require documentation or billing practices designed to protect the insurer or patient from fraudulent claims if the practices are not unduly burdensome or unreasonable for a particular health service.
- e. This section does not require coverage of an audio-only communication unless the communication was a scheduled appointment and the standard of care for that service can be met through the use of audio-only communication.
- <u>f.</u> <u>The coverage may not require a patient to pay a fee to download a</u> <u>specific communication technology or application.</u>
- 3. Payment or reimbursement of expenses for covered health services delivered by means of telehealth under subsection 2 may be established through negotiations with the health services providers in the same manner as the coverage establishes payment or reimbursement of expenses for covered health services that are delivered by in-person means.
- <u>4.</u> The coverage must provide the same rate of reimbursement for behavioral health services delivered by means of telehealth as the rate of reimbursement for the same behavioral health services delivered by in-person means.
  - a. Under this subsection, the coverage may not deny or limit the rate of reimbursement based solely on the technology and equipment used by the health care provider to deliver the behavioral health services or consultation through telehealth, if the technology and equipment used by the behavioral health provider meets the requirements of this section and is appropriate for the health service.
  - b. This subsection does not prohibit a value-based reimbursement arrangement for the delivery of covered health services that may include services delivered through telehealth, and the arrangement does not constitute a violation of this section.
  - c. Under this subsection, notwithstanding subsection 2, behavioral health services delivered through telehealth are covered regardless of whether provided by means of audio-only communication and regardless of whether provided as part of a scheduled appointment if the communication was initiated by the patient while in an emergency or crisis situation and a scheduled appointment was not possible due to the need for an immediate response.
- 5. Coverage under this section may be subject to deductible, coinsurance, and copayment provisions that are no different from the provisions for in-person means. Coverage under this section may be subject to prior authorization if prior authorization is required before the delivery of the same health care service by in-person means. Coverage may include utilization review for health services delivered through telehealth if the utilization review is conducted in the same manner and uses the same clinical review criteria as a utilization review for the same services delivered through in-person means.
- 6. This section does not require:

- a. Coverage for health services that are not medically necessary, subject to the terms and conditions of the health benefits coverage;
- b. Coverage for health services delivered by means of telehealth if the coverage would not provide coverage for the health services if delivered by in-person means;
- <u>c.</u> Reimbursement of a health care provider or health care facility for expenses for health services delivered by means of telehealth if the coverage would not reimburse that health care provider or health care facility if the health services had been delivered by in-person means; or
- d. <u>A health care provider to be physically present with a patient at the originating site unless the health care provider who is delivering health services by means of telehealth determines the presence of a health care provider is necessary.</u>

**SECTION 2. APPLICATION.** This Act applies to public employees retirement system health benefits coverage that begins after June 30, 2023, and which does not extend past June 30, 2025.

SECTION 3. PUBLIC EMPLOYEES RETIREMENT SYSTEM - EXPANDED TELEHEALTH COVERAGE - REPORT. Pursuant to section 54-03-28, the public employees retirement system shall prepare and submit for introduction a bill to the sixty-ninth legislative assembly to repeal the expiration date for this Act and to extend the coverage of expanded telehealth coverage to all group and individual health insurance policies. The public employees retirement system shall append a report to the bill regarding the effect of the expanded telehealth benefits requirement on the system's health insurance programs, information on the utilization and costs relating to the coverage, and a recommendation regarding whether the coverage should be continued.

**SECTION 4. EXPIRATION DATE.** This Act is effective through July 31, 2025, and after that date is ineffective.

SECTION 5. EMERGENCY. This Act is declared to be an emergency measure."

Renumber accordingly