

HB1149/236080/1

BY: Health and Government Operations Committee

AMENDMENTS TO HOUSE BILL 1149
(First Reading File Bill)

AMENDMENT NO. 1

On page 1, in the sponsor line, strike “and V. Turner” and substitute “V. Turner, Bromwell, Costa, Donoghue, Elliott, Frank, Hubbard, Kipke, Krebs, McDonough, Morhaim, Murphy, Oaks, Pena-Melnyk, Ready, and Reznik”; in line 2, after “for” insert “Services Delivered Through”; in the same line, strike “Services”; in line 4, strike “the same”; in line 5, strike “in person or”; in the same line, strike “a”; in the same line, strike “service” and substitute “in a certain manner”; in line 8, strike “a”; in the same line, strike “service”; strike beginning with “on” in line 10 down through “basis” in line 11; in line 12, after “amount,” insert “or”; strike beginning with the fourth comma in line 12 down through “circumstances” in line 13 and substitute “for certain services”; in line 13, after the semicolon insert “prohibiting the imposition of a lifetime dollar maximum for certain services;”; strike beginning with “requiring” in line 19 down through “circumstances;” in line 20; strike beginning with “providing” in line 21 down through “coverage;” in line 24; in line 26, after “date;” insert “requiring the Department of Health and Mental Hygiene to conduct a certain review, make a certain determination, conduct a certain analysis, and report to certain committees of the General Assembly on or before a certain date concerning telemedicine and the Maryland Medical Assistance population;”; and in line 28, strike “services”.

On page 2, strike in their entirety lines 6 through 10, inclusive; and strike in their entirety lines 16 through 20, inclusive.

AMENDMENT NO. 2

On page 2, in lines 25 and 32, in each instance, strike “**SERVICE**”.

On page 3, in line 14, strike “**THE SAME**”; in line 15, after “**SERVICES**” insert “APPROPRIATELY”; in line 16, strike “**IN PERSON OR**”; in the same line, strike “**A**”; in

(Over)

the same line, strike “SERVICE”; in line 18, strike “A”; in the same line, strike the second “SERVICE”; strike beginning with “ON” in line 25 down through “SERVICE” in line 27 and substitute “THAT CAN BE APPROPRIATELY PROVIDED THROUGH TELEMEDICINE”; in line 30, strike “A”; and in the same line, strike the second “SERVICE”.

On page 4, in line 4, after “(3)” insert “(I)”; in the same line, after “COPAYMENT,” insert “OR”; in line 5, strike beginning with the first comma through the second “MAXIMUM”; in line 7, strike “A” and substitute “THROUGH”; strike beginning with “SERVICE” in line 7 down through “SERVICES” in line 9 and substitute “;

(II) MAY IMPOSE AN ANNUAL DOLLAR MAXIMUM AS PERMITTED BY FEDERAL LAW; AND

(III) MAY NOT IMPOSE A LIFETIME DOLLAR MAXIMUM”;

in line 10, strike “(1) SUBJECT TO PARAGRAPH (2) OF THIS SUBSECTION, AN” and substitute “AN”; in line 11, after “REVIEW” insert “, INCLUDING PREAUTHORIZATION,”; in line 13, strike “A” and substitute “THROUGH”; in line 14, strike “SERVICE”; strike in their entirety lines 16 through 18, inclusive; in lines 22, 24, and 27, in each instance, strike “SERVICE”; in line 22, strike “BY A” and substitute “THROUGH”; in line 24, strike “A”; and in line 26, strike the second “THE”.

On pages 4 and 5, strike in their entirety the lines beginning with line 30 on page 4 through line 4 on page 5, inclusive.

On page 5, strike in their entirety lines 8 through 17, inclusive; and after line 25, insert:

“SECTION 3. AND BE IT FURTHER ENACTED, That the Department of Health and Mental Hygiene shall:

(1) conduct a review of the current literature and evidence regarding the different types of telemedicine, and conduct a review of other payers’ and other State Medicaid agencies’ telemedicine policies and procedures;

(2) include in its review the evidence regarding the appropriate use of telemedicine in delivering mental health services;

(3) based on its review, determine which types of patients would be suitable for which types of telemedicine and conduct a fiscal impact analysis that estimates the potential effect of Medicaid coverage of telemedicine on utilization, price, substitution, and effects on other services; and

(4) on or before December 1, 2012, report to the Senate Finance Committee and the House Health and Government Operations Committee, in accordance with § 2-1246 of the State Government Article, on the findings of its review and any recommendations on the provision of telemedicine for the Maryland Medical Assistance Program population, including:

(i) any cost-neutral coverage of telemedicine that can be implemented in fiscal year 2013; and

(ii) any recommended coverage of telemedicine that would require additional funding to implement in fiscal year 2014.”;

and in lines 26 and 29, strike “3.” and “4.”, respectively, and substitute “4.” and “5.”, respectively.