

HB1208/186884/1

BY: Health and Government Operations Committee

AMENDMENTS TO HOUSE BILL 1208
(First Reading File Bill)

AMENDMENT NO. 1

On page 1, at the top of the page, insert “EMERGENCY BILL”; in line 2, strike “Maryland Medical Assistance Program –”; in the same line, strike “Pilot” and substitute “Mental Health and Chronic Condition Management Services – Coverage and Pilot”; in line 3, after the first “of” insert “requiring the Maryland Medical Assistance Program, subject to a certain limitation, to provide mental health services appropriately delivered through telehealth to a patient in a certain setting; altering the definition of telehealth as it applies to certain provisions of law governing coverage of telehealth by certain insurers, nonprofit health service plans, and health maintenance organizations to include the delivery of mental health care services to a patient in a certain setting;”; in line 12, after “circumstances;” insert “requiring the Department to conduct a certain study and submit a certain report, on or before a certain date, to the General Assembly;”; in the same line, after “of” insert “certain provisions of”; in the same line, after “Act;” insert “making this Act an emergency measure;”; in line 13, strike “the” and substitute “coverage for”; in the same line, strike “pilot program”; after line 13, insert:

“BY repealing and reenacting, without amendments,

Article – Health – General
Section 15–103(a)(1)
Annotated Code of Maryland
(2019 Replacement Volume)

BY repealing and reenacting, with amendments,

Article – Health – General
Section 15–103(a)(2)(xiii) and (xiv)
Annotated Code of Maryland
(2019 Replacement Volume);

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in line 16, after “Section” insert “15–103(a)(2)(xv) and”; and after line 18, insert:

“BY repealing and reenacting, with amendments,
Article – Insurance
Section 15–139
Annotated Code of Maryland
(2017 Replacement Volume and 2019 Supplement)”.

AMENDMENT NO. 2

On page 1, after line 21, insert:

“15–103.

(a) (1) The Secretary shall administer the Maryland Medical Assistance Program.

(2) The Program:

(xiii) Beginning on January 1, 2019, may provide, subject to the limitations of the State budget, and as permitted by federal law, dental services for adults whose annual household income is at or below 133 percent of the poverty level; [and]

(xiv) Shall provide, subject to the limitations of the State budget, medically appropriate drugs that are approved by the United States Food and Drug Administration for the treatment of hepatitis C, regardless of the fibrosis score, and that are determined to be medically necessary; AND

(xv) SHALL PROVIDE, SUBJECT TO THE LIMITATIONS OF THE STATE BUDGET, MENTAL HEALTH SERVICES APPROPRIATELY DELIVERED

THROUGH TELEHEALTH TO A PATIENT IN THE PATIENT'S HOME SETTING.

Article – Insurance

15–139.

(a) (1) In this section, “telehealth” means, as it relates to the delivery of health care services, the use of interactive audio, video, or other telecommunications or electronic technology by a licensed health care provider to deliver a health care service within the scope of practice of the health care provider at a location other than the location of the patient.

(2) “TELEHEALTH” INCLUDES THE DELIVERY OF MENTAL HEALTH CARE SERVICES TO A PATIENT IN THE PATIENT’S HOME SETTING.

[~~(2)~~ (3)] “Telehealth” does not include:

(i) an audio-only telephone conversation between a health care provider and a patient;

(ii) an electronic mail message between a health care provider and a patient; or

(iii) a facsimile transmission between a health care provider and a patient.

(b) This section applies to:

(1) insurers and nonprofit health service plans that provide hospital, medical, or surgical benefits to individuals or groups on an expense-incurred basis under health insurance policies or contracts that are issued or delivered in the State; and

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(2) health maintenance organizations that provide hospital, medical, or surgical benefits to individuals or groups under contracts that are issued or delivered in the State.

(c) (1) An entity subject to this section:

(i) shall provide coverage under a health insurance policy or contract for health care services appropriately delivered through telehealth; and

(ii) may not exclude from coverage a health care service solely because it is provided through telehealth and is not provided through an in-person consultation or contact between a health care provider and a patient.

(2) The health care services appropriately delivered through telehealth shall include counseling for substance use disorders.

(d) An entity subject to this section:

(1) shall reimburse a health care provider for the diagnosis, consultation, and treatment of an insured patient for a health care service covered under a health insurance policy or contract that can be appropriately provided through telehealth;

(2) is not required to:

(i) reimburse a health care provider for a health care service delivered in person or through telehealth that is not a covered benefit under the health insurance policy or contract; or

(ii) reimburse a health care provider who is not a covered provider under the health insurance policy or contract; and

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(3) (i) may impose a deductible, copayment, or coinsurance amount on benefits for health care services that are delivered either through an in-person consultation or through telehealth;

(ii) may impose an annual dollar maximum as permitted by federal law; and

(iii) may not impose a lifetime dollar maximum.

(e) An entity subject to this section may undertake utilization review, including preauthorization, to determine the appropriateness of any health care service whether the service is delivered through an in-person consultation or through telehealth if the appropriateness of the health care service is determined in the same manner.

(f) A health insurance policy or contract may not distinguish between patients in rural or urban locations in providing coverage under the policy or contract for health care services delivered through telehealth.

(g) A decision by an entity subject to this section not to provide coverage for telehealth in accordance with this section constitutes an adverse decision, as defined in § 15-10A-01 of this title, if the decision is based on a finding that telehealth is not medically necessary, appropriate, or efficient.

SECTION 2. AND BE IT FURTHER ENACTED, That the Laws of Maryland read as follows:

Article – Health – General”.

On page 2, strike beginning with the colon in line 15 down through “**CHRONIC**” in line 16 and substitute “**CHRONIC**”; strike beginning with the semicolon in line 16

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down through “SERVICES” in line 17; and after line 33, insert:

“SECTION 3. AND BE IT FURTHER ENACTED, That:

(a) The Maryland Department of Health shall study whether, under the Maryland Medical Assistance Program, substance use disorder services may be appropriately provided through telehealth to a patient in the patient’s home setting.

(b) On or before December 1, 2021, the Maryland Department of Health shall submit a report to the General Assembly, in accordance with § 2–1257 of the State Government Article, that includes any findings and recommendations from the study required under subsection (a) of this section, including:

(1) the types of substance use disorder services, if any, that may be appropriately provided through telehealth to a patient in the patient’s home setting; and

(2) any technological or other standards needed for the provision of appropriate and quality substance use disorder services to a patient in the patient’s home setting.”.

On page 3, in line 1, strike “2.” and substitute “4.”; strike beginning with “shall” in line 1 down through “effect” in line 4 and substitute “is an emergency measure, is necessary for the immediate preservation of the public health or safety, has been passed by a ye and nay vote supported by three–fifths of all the members elected to each of the two Houses of the General Assembly. Sections 2 and 3 shall remain effective through June 30, 2025, and, at the end of June 30, 2025, Sections 2 and 3, with no further action required by the General Assembly, shall be abrogated and of no further force and effect”.