

SB0003/946780/1

BY: Health and Government Operations Committee

AMENDMENTS TO SENATE BILL 3
(Third Reading File Bill)

AMENDMENT NO. 1

On page 1, strike beginning with “requiring” in line 8 down through “circumstances;” in line 10 and substitute “prohibiting the Program from excluding from coverage a certain health care service provided to a Program recipient in person for a certain reason;”.

On page 2, strike beginning with “requiring” in line 24 down through “delivery” in line 25 and substitute “excluding from coverage or denying coverage for certain services provided in a certain manner for a certain reason”; and in line 27, after “date;” insert “requiring the Maryland Insurance Administration to study a certain matter and provide certain findings and recommendations from the study to the Maryland Health Care Commission for inclusion in a certain report; requiring the Maryland Insurance Administration to consider the requirements of this Act when proposing certain revisions to certain regulations;”.

AMENDMENT NO. 2

On page 8, in line 25, after “**PROVIDED;**” insert “**AND**”; and strike beginning with “**AND**” in line 29 down through “**ARTICLE**” in line 33.

On page 9, in lines 9 and 10, strike “**REQUIRE A PROGRAM RECIPIENT TO USE TELEHEALTH IN LIEU OF IN-PERSON SERVICE DELIVERY**” and substitute “**EXCLUDE FROM COVERAGE A BEHAVIORAL HEALTH CARE SERVICE PROVIDED TO A PROGRAM RECIPIENT IN PERSON SOLELY BECAUSE THE SERVICE MAY ALSO BE PROVIDED THROUGH TELEHEALTH**”.

On page 12, strike in their entirety lines 6 through 9, inclusive; in lines 10 and 13, strike “**(III)**” and “**(IV)**”, respectively, and substitute “**(II)**” and “**(III)**”, respectively;

(Over)

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and strike beginning with “WHEN” in line 13 down through “DELIVERY” in line 15 and substitute “MAY NOT EXCLUDE FROM COVERAGE OR DENY COVERAGE FOR A BEHAVIORAL HEALTH CARE SERVICE THAT IS A COVERED BENEFIT UNDER A HEALTH INSURANCE POLICY OR CONTRACT WHEN PROVIDED IN PERSON SOLELY BECAUSE THE BEHAVIORAL HEALTH CARE SERVICE MAY ALSO BE PROVIDED THROUGH A COVERED TELEHEALTH BENEFIT”.

On page 13, in line 8, after “WHEN” insert “A HEALTH CARE SERVICE IS”; in line 14, after “INCLUDE” insert “:

1.”;

and in line 17, after “SERVICE” insert “; OR

2. ANY ROOM AND BOARD FEES”.

On page 15, after line 15, insert:

“SECTION 3. AND BE IT FURTHER ENACTED, That the Maryland Insurance Administration shall:

(1) (i) study how telehealth can support efforts to ensure health care provider network sufficiency;

(ii) study the impact of changes in access to and coverage of telehealth services under health benefit plans offered by health insurance carriers on the ability of consumers to choose in-person care versus telehealth care as the modality of receiving a covered service; and

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(iii) provide any findings and recommendations from its study to the Maryland Health Care Commission for inclusion in the report required under Section 4 of this Act; and

(2) consider the requirements of this Act when proposing any revisions to regulations relating to network adequacy.”;

and in line 16, strike “3.” and substitute “4.”.

On page 17, in line 2, after “Article” insert “, as specified in Section 3 of this Act”; in line 19, strike “4.” and substitute “5.”; and in line 22, strike “3” and substitute “4”.

On page 18, in lines 8 and 9, in each instance, strike “3” and substitute “4”; and in lines 13 and 16, strike “5.” and “6.”, respectively, and substitute “6.” and “7.”, respectively.