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An Act To Promote Telehealth

Emergency preamble. Whereas, acts and resolves of the Legislature do not become effective until 90 days after adjournment unless enacted as emergencies; and

Whereas, case management services are an essential component of serving Medicaid members; and

Whereas, the emerging spread of COVID-19 may make it unsafe to provide in-person case management services to Medicaid members; and

Whereas, in the judgment of the Legislature, these facts create an emergency within the meaning of the Constitution of Maine and require the following legislation as immediately necessary for the preservation of the public peace, health and safety; now, therefore,

Be it enacted by the People of the State of Maine as follows:

Sec. 1. 22 MRSA §3173-H, as enacted by PL 2017, c. 307, §2, is amended to read:

§3173-H. Services delivered through telehealth

1. Definitions. As used in this section, unless the context otherwise indicates, the following terms have the following meanings.

A. "Asynchronous encounters" means the interaction or consultation between a patient and ~~a health professional~~ the patient's provider or between health professionals regarding the patient through a system with the ability to store digital information, including, but not limited to, still images, video, audio and text files, and other relevant data in one location and subsequently transmit such information for interpretation at a remote site by health professionals without requiring the simultaneous presence of the patient or the ~~patient's provider~~ health professionals.

A-1. "Health professional" means a provider or an individual, facility or organization with whom a provider consults in order to provide care to a patient.

A-2. "Patient" means a MaineCare member.

A-3. "Provider" means an individual, a facility or an organization that provides services under the MaineCare program.

B. "Store and forward transfers" means transmission of a patient's recorded health history through a secure electronic system to a ~~provider~~ health professional.

C. "Synchronous encounters" means a real-time interaction conducted with interactive audio or video connection between a patient and the patient's provider or between ~~providers~~ health professionals regarding the patient.

D. "Telehealth," as it pertains to the delivery of ~~health care~~ MaineCare services, means the use of interactive ~~real-time~~ visual and audio or other electronic media for the purpose of consultation and education concerning and diagnosis, treatment, care management and self-management of a patient's physical and mental health and includes real-time interaction between the patient and the ~~telehealth~~ patient's provider, electronic consultation between health professionals regarding the patient, synchronous encounters, asynchronous encounters, store and forward transfers and remote patient monitoring. "Telehealth" includes telephonic services when interactive telehealth services are unavailable or when a telephonic service is medically appropriate for the underlying covered service.

E. "Telemonitoring," as it pertains to the delivery of ~~health care~~ MaineCare services, means the use of information technology to remotely monitor a patient's health status via electronic means through the use of clinical data while the patient remains in a residential setting, allowing the provider to track the patient's health data over time. Telemonitoring may or may not take place in real time.

2. Grants. The department may solicit, apply for and receive grants that support the development of the technology infrastructure necessary to support the delivery of ~~health care~~ MaineCare services through telehealth and that support access to equipment, technical support and education related to telehealth for ~~health care~~ providers.

3. Annual report. Beginning January 1, 2018 and annually thereafter, the department shall report to the joint standing committee of the Legislature having jurisdiction over health and human services matters on the use of telehealth in the MaineCare program, including the number of ~~telehealth and telemonitoring~~ providers <u>providing telehealth and telemonitoring services</u>, the number of patients served by telehealth and telemonitoring services and a summary of grants applied for and received related to telehealth and telemonitoring.

4. Education. The department shall conduct educational outreach to providers and MaineCare members on telehealth and telemonitoring services.

5. Rules. The department shall adopt routine technical rules as defined by Title 5, chapter 375, subchapter 2-A to carry out the provisions of this section. Rules adopted by the department:

A. May not include any requirement that a patient have a certain number of emergency room visits or hospitalizations related to the patient's diagnosis in the criteria for a patient's eligibility for telemonitoring services;

B. ~~Must~~ <u>Except as provided in paragraph E, must</u> include qualifying criteria for a patient's eligibility for telemonitoring services that include documentation in a patient's medical record that the patient is at risk of hospitalization or admission to an emergency room;

C. Must provide that group therapy for behavioral health or addiction services covered by the MaineCare program may be delivered through telehealth; ~~and~~

D. Must include requirements for ~~individual~~ providers ~~and the facility or organization in which the provider works for~~ providing telehealth and telemonitoring services~~.~~ <u>; and</u>

<u>E. Must allow at least some portion of case management services covered by the MaineCare program to be delivered through telehealth, without requiring qualifying criteria regarding a patient's risk of hospitalization or admission to an emergency room.</u>

Sec. 2. 22 MRSA §3173-I, sub-§2, as enacted by PL 2017, c. 307, §3, is amended to read:

2. Meetings. The advisory group shall hold at least one regular meeting ~~and no more than 4 meetings~~ each year.

Sec. 3. 24-A MRSA §4316, sub-§1, ¶A-1 is enacted to read:

<u>A-1. "Medicare" means the "Health Insurance for the Aged Act," Title XVIII of the Social Security Amendments of 1965, as amended.</u>

Sec. 4. 24-A MRSA §4316, sub-§9 is enacted to read:

<u>**9. Medicare coverage policy.** A carrier may provide coverage for health care services delivered through telehealth that is consistent with the Medicare coverage policy for interprofessional Internet consultations. If a carrier provides coverage consistent with the Medicare coverage policy for interprofessional Internet consultations, the carrier may also provide coverage for interprofessional Internet consultations that are provided by a federally qualified health center or rural health clinic as defined in 42 United States Code, Section 1395x, subsection (aa)(1993).</u>

Sec. 5. Department of Health and Human Services to reimburse targeted case management services delivered through telehealth. The Department of Health and Human Services shall, no later than September 30, 2020, amend its rule Chapter 101: MaineCare Benefits Manual, Chapter I, Section 4, Telehealth and Chapter 101: MaineCare Benefits Manual, Chapter II, Section 13, Targeted Case Management Services to provide for reimbursement of case management services delivered through telehealth to targeted populations.

Emergency clause. In view of the emergency cited in the preamble, this legislation takes effect when approved.