By: Coleman, Guillen H.B. No. 3476

A BILL TO BE ENTITLED

1	AN ACT
2	relating to the provision and reimbursement of, or benefits for,
3	home telemonitoring services, telemedicine medical services, and
4	telehealth services under Medicaid and certain health benefit plans
5	provided to certain retired public employees.
6	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
7	SECTION 1. Section 531.02164, Government Code, is amended
8	by amending Subsections (a) and (c), as amended by S.B. No. 219,
9	Acts of the 84th Legislature, Regular Session, 2015, and adding
10	Subsection (c-2) to read as follows:
11	(a) In this section:
12	(1) "Elderly individual" means an individual 60 years
13	of age or older.
14	(2) "Home and community support services agency" means
15	a person licensed under Chapter 142, Health and Safety Code, to
16	provide home health, hospice, or personal assistance services as
17	defined by Section 142.001, Health and Safety Code.

- 18 $\underline{\text{(3)}}$ [$\frac{\text{(2)}}{\text{(2)}}$] "Hospital" means a hospital licensed under
- 19 Chapter 241, Health and Safety Code.
- 20 (4) "Individual with special health care needs" means
- 21 <u>an individual who has:</u>
- (A) a chronic physical or developmental
- 23 condition; or
- 24 (B) a terminal illness.

```
(1) provide that home telemonitoring services are
 2
    available [only] to a person [persons] who is:
 3
 4
                       (A) an elderly individual;
                       (B) an individual with special health care needs;
 5
 6
    or
 7
                       (C) an individual who:
                             (i) is [are] diagnosed with one or more of
 8
    the following conditions:
10
                                   (a) [<del>(i)</del>] pregnancy;
                                   (b) [<del>(ii)</del>] diabetes;
11
                                   (c) [<del>(iii)</del>] heart disease;
12
                                   (d) [<del>(iv)</del>] cancer;
13
14
                                   (e) [<del>(v)</del>] chronic
                                                                obstructive
15
    pulmonary disease;
16
                                   (f) [<del>(vi)</del>] hypertension;
17
                                   (g) [<del>(vii)</del>] congestive heart failure;
                                   (h) [<del>(viii)</del>] mental illness
18
    serious emotional disturbance;
19
20
                                   (i) (ix) asthma;
                                   (j) [(x)] myocardial infarction; or
21
22
                                   (k) [\frac{(xi)}{}] stroke; and
23
                             (ii) exhibits [(B) exhibit] two or more of
```

(c) The program required under this section must:

1

24

25

26

27

the following risk factors:

hospitalizations in the prior 12-month period;

H.B. No. 3476

(a) (i) two

or

(b) [(ii)] frequent or recurrent

more

```
1
    emergency room admissions;
2
                                (c) [(iii)] a documented history of
 3
   poor adherence to ordered medication regimens;
4
                                (d) [<del>(iv)</del>] a documented history
5
   falls in the prior six-month period;
6
                                           limited or absent informal
                                (e) [<del>(v)</del>]
7
   support systems;
8
                                (f) [<del>(vi)</del>] living alone or being home
   alone for extended periods of time; and
9
10
                                (g) [<del>(vii)</del>] a documented history of
11
   care access challenges;
12
                (2)
                     ensure that clinical information gathered by a
13
   home and community support services agency or hospital while
   providing home telemonitoring services is shared with the patient's
14
15
   physician; [and]
16
                (3) ensure that the program does not duplicate disease
17
   management program services provided under Section 32.057, Human
   Resources Code; and
18
19
               (4) provide reimbursement for home telemonitoring
   services in the event of an unsuccessful data transmission if the
20
   provider of the services attempts to communicate with the patient
21
22
   by telephone or in person to establish a successful data
23
   transmission.
24
          (c-2) A provider that is reimbursed under Subsection (c)(4)
   for home telemonitoring services provided to a patient may not also
25
26
   be reimbursed for communicating with the patient by telephone or in
```

person to establish a successful data transmission as described by

27

- 1 Subsection (c)(4).
- 2 SECTION 2. Subchapter B, Chapter 531, Government Code, is
- 3 amended by adding Section 531.02165 to read as follows:
- 4 Sec. 531.02165. PROVISION OF TELEMEDICINE MEDICAL SERVICES
- 5 AND TELEHEALTH SERVICES TO RECIPIENTS AT RESIDENCE. (a) In this
- 6 section, "residence" means a place where a person resides and
- 7 <u>includes a home, a nursing home, a convalescent home, or a</u>
- 8 residential unit.
- 9 (b) Not later than June 1, 2016, the executive commissioner
- 10 shall develop and implement a pilot project under Medicaid that
- 11 provides for the reimbursement of telemedicine medical services and
- 12 telehealth services provided to a recipient while the recipient is
- 13 <u>at the recipient's residence.</u>
- 14 (c) Not later than December 1, 2018, the executive
- 15 commissioner shall submit a report to the legislature on the
- 16 results of the pilot project established under Subsection (b). The
- 17 report must include:
- 18 (1) an evaluation of the pilot project's success in
- 19 increasing health care access for Medicaid recipients;
- 20 (2) an evaluation of the cost savings to the state and
- 21 Medicaid recipients attributable to the pilot project; and
- 22 (3) a recommendation regarding the continuation,
- 23 <u>expansion</u>, or termination of the pilot project.
- 24 (d) The report required by Subsection (c) may be made in
- 25 conjunction with any other report the commission is required to
- 26 submit to the legislature if the executive commissioner determines
- 27 it appropriate.

- 1 (e) Subsections (c) and (d) and this subsection expire
- 2 September 1, 2019.
- 3 SECTION 3. Section 531.0217, Government Code, is amended by
- 4 adding Subsection (d-1) to read as follows:
- 5 (d-1) A request to the commission for reimbursement for a
- 6 <u>telemedicine medical service that is medically necessary may not be</u>
- 7 denied solely because of the delivery method of the service.
- 8 SECTION 4. Subchapter E, Chapter 1551, Insurance Code, is
- 9 amended by adding Section 1551.227 to read as follows:
- 10 Sec. 1551.227. PILOT PROJECT: TELEMEDICINE MEDICAL
- 11 SERVICES AND TELEHEALTH SERVICES TO ANNUITANTS AT RESIDENCE. (a)
- 12 In this section:
- 13 (1) "Telehealth service" and "telemedicine medical
- 14 service" have the meanings assigned by Section 531.001, Government
- 15 <u>Code</u>.
- 16 (2) "Residence" means a place where a person resides
- 17 and includes a home, a nursing home, a convalescent home, or a
- 18 residential unit.
- 19 (b) The board of trustees shall establish a pilot project
- 20 under which a group health benefit plan offered under the group
- 21 benefits program provides benefits for telemedicine medical
- 22 services and telehealth services provided to an annuitant at the
- 23 annuitant's residence.
- (c) Not later than June 1, 2016, the board of trustees shall
- 25 enter into any agreements necessary to provide benefits for
- 26 telemedicine medical services and telehealth services to
- 27 annuitants who participate in the pilot project. The pilot project

1 must: 2 (1) provide services in a manner that allows at least one percent of annuitants to participate in the pilot project; 3 4 (2) aim to provide quality and cost-effective care to 5 annuitants; and 6 (3) ensure that the pilot project is able to provide services to annuitants. 7 8 (d) Not later than December 1, 2018, the board of trustees shall submit a report to the legislature on the results of the pilot 9 project established under Subsection (b). The report must include: 10 (1) an evaluation of the pilot project's success; 11 12 (2) an evaluation of the cost savings to the state; and (3) a recommendation regarding the continuation, 13 expansion, or termination of the pilot project. 14 (e) The board of trustees may adopt rules necessary to 15 implement this section. 16 17 (f) This section expires on September 1, 2019. SECTION 5. Subchapter D, Chapter 1575, Insurance Code, is 18 19 amended by adding Section 1575.166 to read as follows: Sec. 1575.166. PILOT PROJECT: TELEMEDICINE MEDICAL 20 SERVICES AND TELEHEALTH SERVICES TO RETIREES AT RESIDENCE. (a) In 21 22 this section: (1) "Telehealth service" and "telemedicine medical 23

6

and includes a home, a nursing home, a convalescent home, or a

service" have the meanings assigned by Section 531.001, Government

(2) "Residence" means a place where a person resides

24

25

26

27

Code.

- 1 residential unit.
- 2 (b) The trustee shall establish a pilot project under which
- 3 a health benefit plan provided under this chapter provides benefits
- 4 for telemedicine medical services and telehealth services provided
- 5 to a retiree at the retiree's residence.
- 6 (c) Not later than June 1, 2016, the trustee shall enter
- 7 into any agreements necessary to provide benefits for telemedicine
- 8 medical services and telehealth services to retirees who
- 9 participate in the pilot project. The pilot project must:
- 10 (1) provide services in a manner that allows at least
- 11 one percent of retirees to participate in the pilot project;
- 12 (2) aim to provide quality and cost-effective care to
- 13 retirees; and
- 14 (3) ensure that the pilot project is able to provide
- 15 services to retirees.
- 16 (d) Not later than December 1, 2018, the trustee shall
- 17 submit a report to the legislature on the results of the pilot
- 18 project established under Subsection (b). The report must include:
- 19 (1) an evaluation of the pilot project's success;
- 20 (2) an evaluation of the cost savings to the state; and
- 21 (3) a recommendation regarding the continuation,
- 22 <u>expansion</u>, or termination of the pilot project.
- 23 <u>(e) The trustee may adopt rules necessary to implement this</u>
- 24 section.
- 25 (f) This section expires on September 1, 2019.
- SECTION 6. Section 531.02176, Government Code, as amended
- 27 by S.B. No. 219, Acts of the 84th Legislature, Regular Session,

- 1 2015, is repealed.
- 2 SECTION 7. Section 531.02164, Government Code, as amended
- 3 by this Act, applies only to an insurance claim filed, an insurance
- 4 policy entered into, or a legal cause arising on or after the
- 5 effective date of this Act. An insurance claim filed, an insurance
- 6 policy entered into, or a legal cause that arose before the
- 7 effective date of this Act is governed by the law as it existed
- 8 immediately before the effective date of this Act, and that law is
- 9 continued in effect for that purpose.
- SECTION 8. (a) Not later than March 1, 2016, the executive
- 11 commissioner of the Health and Human Services Commission shall
- 12 adopt the rules necessary to implement Section 531.02164,
- 13 Government Code, as amended by this Act.
- 14 (b) Not later than May 1, 2016, the executive commissioner of
- 15 the Health and Human Services Commission shall adopt the rules
- 16 necessary to implement Section 531.02165, Government Code, as added
- 17 by this Act, and Section 531.0217, Government Code, as amended by
- 18 this Act.
- 19 SECTION 9. Not later than May 1, 2016, the Employees
- 20 Retirement System of Texas shall adopt rules necessary to implement
- 21 Section 1551.227, Insurance Code, as added by this Act.
- SECTION 10. Not later than May 1, 2016, the Teacher
- 23 Retirement System of Texas shall adopt rules necessary to implement
- 24 Section 1575.166, Insurance Code, as added by this Act.
- 25 SECTION 11. If before implementing any provision of this
- 26 Act a state agency determines that a waiver or authorization from a
- 27 federal agency is necessary for implementation of that provision,

H.B. No. 3476

- 1 the agency affected by the provision shall request the waiver or
- 2 authorization and may delay implementing that provision until the
- 3 waiver or authorization is granted.
- 4 SECTION 12. This Act takes effect September 1, 2015.