



New Massachusetts Bills Propose Telehealth Insurance Coverage, Practice Standards

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20 March 2019 [Health Care Law Today](#) Blog
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Momentum and support continues to build for [telehealth commercial coverage laws](#) across the United States, designed to ensure that covered members of health insurance plans can enjoy the full scope of their medical benefits – whether in-person or virtually. Last summer, the Massachusetts Legislature considered a sweeping telehealth bill that would have instituted certain requirements for insurance coverage. ([Read our critique of that bill here.](#)) Although the 2018 legislative session ended before the proposed legislation was approved, Massachusetts legislators recently filed five new telehealth bills for consideration.

Listed below are four of the proposed bills that directly compete with each other, so it will be important to monitor their progress through committees and reconciliation:

- HB 1002: An Act Expanding Access to Telemedicine Services;
- HB 1001: An Act Relative to Behavioral Health Telemedicine;

- HB 991: An Act Advancing and Expanding Access to Telemedicine Services; and
- HB 1095: An Act Enhancing Access to Telemedicine Services.

Each of the four bills require certain groups or divisions to provide coverage for telemedicine services under varying conditions. Just like the language contained in the 2018 legislation, these new bills state that insurers may *“not decline to provide coverage for health care services solely on the basis that those services were delivered by way of telemedicine by a contracted health care provider if: (i) the health care services are covered by way of in-person consultation or delivery; and (ii) the health care services may be appropriately provided through the use of telemedicine.”*

In general, the bills require the following insurers to provide coverage for telehealth services:

- The Massachusetts Group Insurance Commission;
- Medicaid-managed care organizations in Massachusetts;
- Individual, group blanket or general insurance policies;
- Hospital service plan;
- Medical service corporation;
- Health maintenance organizations; and

- Preferred provider arrangements.

HB 1095 is notable because it allows, but does not require, Medicaid managed care organizations in Massachusetts to cover services delivered via telemedicine. In contrast, HB 1001 (*An Act Relative to Behavioral Health Telemedicine*) requires insurers to cover only behavioral health services delivered via telemedicine.

Of the five new bills, HB 917 (*An Act to Facilitate the Provision of Telehealth Services*) is the distinct outlier. It would not require health insurance plans to cover telehealth services. Instead, it proposes definitions, practice standards, prescribing, and informed consent rules for telehealth services.

At this time, it is unclear which of the five bills will prevail (or perhaps a combination of them). What is clear is that Massachusetts legislators continue to explore ways for policy to drive innovation in health technology, balancing patient safety and health insurance considerations. We will continue to monitor Massachusetts for changes that affect or improve telemedicine opportunities in the state.

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