

Representative Steve Eliason proposes the following substitute bill:

1 **TELEPSYCHIATRIC CONSULTATION ACCESS AMENDMENTS**

2 2018 GENERAL SESSION

3 STATE OF UTAH

4 **Chief Sponsor: Steve Eliason**

5 Senate Sponsor: Curtis S. Bramble

7 **LONG TITLE**

8 **General Description:**

9 This bill amends the Insurance Code to provide health benefit plan coverage for the use
10 of telepsychiatric consultations.

11 **Highlighted Provisions:**

12 This bill:

- 13 ▶ defines terms;
14 ▶ requires the state Medicaid program to reimburse for telepsychiatric consultations;

15 and

16 ▶ requires certain health benefit plans to provide coverage for the use of
17 physician-to-physician psychiatric consultations using telehealth services.

18 **Money Appropriated in this Bill:**

19 None

20 **Other Special Clauses:**

21 None

22 **Utah Code Sections Affected:**

23 AMENDS:

24 **26-18-13.5**, as enacted by Laws of Utah 2017, Chapter 241

25 ENACTS:



26 [31A-22-647](#), Utah Code Annotated 1953



28 *Be it enacted by the Legislature of the state of Utah:*

29 Section 1. Section **26-18-13.5** is amended to read:

30 **26-18-13.5. Mental health telehealth services -- Reimbursement -- Reporting.**

31 (1) As used in this section:

32 (a) "Mental health therapy" means the same as the term "practice of mental health
33 therapy" is defined in Section [58-60-102](#).

34 (b) "Mental illness" means a mental or emotional condition defined in an approved
35 diagnostic and statistical manual for mental disorders generally recognized in the professions of
36 mental health therapy listed in Section [58-60-102](#).

37 (c) "Telehealth services" means the same as that term is defined in Section [26-60-102](#).

38 (d) "Telemedicine services" means the same as that term is defined in Section
39 [26-60-102](#).

40 (e) "Telepsychiatric consultation" means a consultation between a physician and a
41 board certified psychiatrist, both of whom are licensed to engage in the practice of medicine in
42 the state, that utilizes:

43 (i) a written, evidence-based patient questionnaire; and

44 (ii) telehealth services that meet industry security and privacy standards, including
45 compliance with the:

46 (A) Health Insurance Portability and Accountability Act; and

47 (B) federal Health Information Technology for Economic and Clinical Health Act, Pub.
48 L. No. 111-5, 123 Stat. 226, 467, as amended.

49 (2) This section applies to:

50 (a) a managed care organization that contracts with the Medicaid program; and

51 (b) a provider who is reimbursed for health care services under the Medicaid program.

52 (3) The Medicaid program shall reimburse for personal mental health therapy office
53 visits provided through telemedicine services at a rate set by the Medicaid program.

54 (4) Before December 1, 2017, the department shall report to the Legislature's Public
55 Utilities, Energy, and Technology Interim Committee and Health Reform Task Force on:

56 (a) the result of the reimbursement requirement described in Subsection (3);

- 57 (b) existing and potential uses of telehealth and telemedicine services;
- 58 (c) issues of reimbursement to a provider offering telehealth and telemedicine services;
- 59 (d) potential rules or legislation related to:
- 60 (i) providers offering and insurers reimbursing for telehealth and telemedicine services;
- 61 and
- 62 (ii) increasing access to health care, increasing the efficiency of health care, and
- 63 decreasing the costs of health care; and
- 64 (e) the department's efforts to obtain a waiver from the federal requirement that
- 65 telemedicine communication be face-to-face communication.

66 (5) The Medicaid program shall reimburse for telepsychiatric consultations at a rate set
 67 by the Medicaid program.

68 Section 2. Section 31A-22-647 is enacted to read:

69 **31A-22-647. Coverage of telepsychiatric consultations.**

70 (1) As used in this section:

71 (a) "Telehealth services" means the same as that term is defined in Section 26-60-102.

72 (b) "Telepsychiatric consultation" means a consultation between a physician and a
 73 board certified psychiatrist, both of whom are licensed to engage in the practice of medicine in
 74 the state, that utilizes:

75 (i) a written, evidence-based patient questionnaire; and

76 (ii) telehealth services that meet industry security and privacy standards, including
 77 compliance with the:

78 (A) Health Insurance Portability and Accountability Act; and

79 (B) federal Health Information Technology for Economic and Clinical Health Act, Pub.
 80 L. No. 111-5, 123 Stat. 226, 467, as amended.

81 (2) Beginning January 1, 2019, a health benefit plan that offers coverage for mental
 82 health services shall:

83 (a) provide coverage for telepsychiatric consultations;

84 (b) provide coverage for a telepsychiatric consultation from an out-of-network provider
 85 if a telepsychiatric consultation is not made available to a physician within seven business days
 86 after the initial request is made by the physician to an in-network provider; and

87 (c) separately identify and reimburse the services described in Subsections (2)(a) and

88 (b) at usual and customary rates.

89 (3) An insurer may satisfy the requirement in Subsection (2)(a) if:

90 (a) the insurer provides coverage for in-person behavioral health treatment, as defined
91 in Section [31A-22-642](#); and

92 (b) the patient receives an appointment for the in-person behavioral health treatment on
93 a date that is within seven business days after the initial request is made by the physician.

94 (4) A physician who uses a telepsychiatric consultation for a patient shall, at the time
95 that the questionnaire described in Subsection (1)(b)(i) is completed, notify the patient that:

96 (a) the physician plans to request a telepsychiatric consultation; and

97 (b) additional charges may apply.