

WEST VIRGINIA LEGISLATURE

2020 REGULAR SESSION

ENROLLED

Committee Substitute

for

House Bill 4003

BY DELEGATES MAYNARD, TONEY, LINVILLE,
PORTERFIELD, HOUSEHOLDER, SYPOLT, WESTFALL AND
BATES

[Passed March 7, 2020; in effect ninety days from
passage.]

OFFICE WEST VIRGINIA
SECRETARY OF STATE

2020 MAR 25 P 4:41

FILED

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2020 MAR 25 2 49 41

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1 AN ACT to amend the Code of West Virginia, 1931, as amended, by adding thereto a new section,
2 designated §5-16-7b, to amend said code by adding thereto a new section, designated
3 §30-1-25, and to amend said code by adding thereto a new section, designated §33-53-
4 3, all relating to telehealth requirements; providing rulemaking authority; requiring boards
5 to regulate telehealth practice; defining terms; requiring insurance coverage of certain
6 telehealth services; providing an effective date; and providing limitation of applicability.

Be it enacted by the Legislature of West Virginia:

ARTICLE 16. WEST VIRGINIA PUBLIC EMPLOYEES INSURANCE ACT.

§5-16-7b. Coverage for telehealth services.

1 (a) The following terms are defined:

2 (1) "Distant site" means the telehealth site where the health care practitioner is seeing the
3 patient at a distance or consulting with a patient's health care practitioner.

4 (2) "Health care practitioner" means a person licensed under §30-1-1 *et seq.* of this code
5 who provides health care services.

6 (3) "Originating site" means the location where the patient is located, whether or not
7 accompanied by a health care practitioner, at the time services are provided by a health care
8 practitioner through telehealth, including, but not limited to, a health care practitioner's office,
9 hospital, critical access hospital, rural health clinic, federally qualified health center, a patient's
10 home, and other nonmedical environments such as school-based health centers, university-
11 based health centers, or the work location of a patient.

12 (4) "Remote patient monitoring services" means the delivery of home health services
13 using telecommunications technology to enhance the delivery of home health care, including
14 monitoring of clinical patient data such as weight, blood pressure, pulse, pulse oximetry, blood
15 glucose, and other condition-specific data; medication adherence monitoring; and interactive
16 video conferencing with or without digital image upload.

17 (5) "Telehealth services" means the use of synchronous or asynchronous
18 telecommunications technology by a health care practitioner to provide health care services,
19 including, but not limited to, assessment, diagnosis, consultation, treatment, and monitoring of a
20 patient; transfer of medical data; patient and professional health-related education; public health
21 services; and health administration. The term does not include audio-only telephone calls, e-mail
22 messages, or facsimile transmissions.

23 (b) After July 1, 2020, the plan shall provide coverage of health care services provided
24 through telehealth services if those same services are covered through face-to-face consultation
25 by the policy.

26 (c) After July 1, 2020, the plan may not exclude a service for coverage solely because the
27 service is provided through telehealth services.

28 (d) The plan shall provide reimbursement for a telehealth service at a rate negotiated
29 between the provider and the insurance company.

30 (e) The plan may not impose any annual or lifetime dollar maximum on coverage for
31 telehealth services other than an annual or lifetime dollar maximum that applies in the aggregate
32 to all items and services covered under the policy, or impose upon any person receiving benefits
33 pursuant to this section any copayment, coinsurance, or deductible amounts, or any policy year,
34 calendar year, lifetime, or other durational benefit limitation or maximum for benefits or services,
35 that is not equally imposed upon all terms and services covered under the policy, contract, or
36 plan.

37 (f) An originating site may charge the plan a site fee.

38 (g) The coverage required by this section shall include the use of telehealth technologies
39 as it pertains to medically necessary remote patient monitoring services to the full extent that
40 those services are available.

CHAPTER 30. PROFESSIONS AND OCCUPATIONS.

ARTICLE 1. GENERAL PROVISIONS APPLICABLE TO ALL STATE BOARDS OF EXAMINATION OR REGISTRATION REFERRED TO IN CHAPTER.

§30-1-25. Telehealth practice.

1 (a) For the purposes of this section:

2 "Health care practitioner" means a person licensed under §30-1-1 *et seq.* who provides
3 health care services.

4 "Telehealth services" means the use of synchronous or asynchronous
5 telecommunications technology by a health care practitioner to provide health care services,
6 including, but not limited to, assessment, diagnosis, consultation, treatment, and monitoring of a
7 patient; transfer of medical data; patient and professional health-related education; public health
8 services; and health administration. The term does not include audio-only telephone calls, e-mail
9 messages, or facsimile transmissions.

10 (b) Unless already provided for by statute or legislative rule, a health care board, referred
11 to in this chapter, shall propose a rule for legislative approval in accordance with the provisions
12 of §29A-3-1 *et seq.* to regulate telehealth practice by a telehealth practitioner. The proposed rule
13 shall consist of the following:

14 (1) The practice of the health care service occurs where the patient is located at the time
15 the telehealth technologies are used;

16 (2) The health care practitioner who practices telehealth must be licensed as provided in
17 this chapter;

18 (3) When the health care practitioner patient relationship is established;

19 (4) The standard of care;

20 (5) A prohibition of prescribing schedule II drugs, unless authorized by another section;

21 and

22 (6) Implement the provisions of this section while ensuring competency, protecting the
23 citizens of this state from harm, and addressing issues specific to each profession.

CHAPTER 33. INSURANCE.

ARTICLE 53. REQUIRED COVERAGE FOR HEALTH INSURANCE.

§33-53-1. Coverage of telehealth services.

1 (a) The following terms are defined:

2 (1) "Distant site" means the telehealth site where the health care practitioner is seeing the
3 patient at a distance or consulting with a patient's health care practitioner.

4 (2) "Health care practitioner" means a person licensed under §30-1-1 *et seq.* of this code
5 who provides health care services.

6 (3) "Originating site" means the location where the patient is located, whether or not
7 accompanied by a health care practitioner, at the time services are provided by a health care
8 practitioner through telehealth, including, but not limited to, a health care practitioner's office,
9 hospital, critical access hospital, rural health clinic, federally qualified health center, a patient's
10 home, and other nonmedical environments such as school-based health centers, university-
11 based health centers, or the work location of a patient.

12 (4) "Remote patient monitoring services" means the delivery of home health services
13 using telecommunications technology to enhance the delivery of home health care, including
14 monitoring of clinical patient data such as weight, blood pressure, pulse, pulse oximetry, blood
15 glucose, and other condition-specific data; medication adherence monitoring; and interactive
16 video conferencing with or without digital image upload.

17 (5) "Telehealth services" means the use of synchronous or asynchronous
18 telecommunications technology by a health care practitioner to provide health care services,
19 including, but not limited to, assessment, diagnosis, consultation, treatment, and monitoring of a
20 patient; transfer of medical data; patient and professional health-related education; public health

21 services; and health administration. The term does not include audio-only telephone calls, e-mail
22 messages, or facsimile transmissions.

23 (b) Notwithstanding the provisions of §33-1-1 *et seq.* of this code, an insurer subject to
24 §33-15-1 *et seq.*, §33-16-1 *et seq.*, §33-24-1 *et seq.*, §33-25-1 *et seq.*, and §33-25A-1 *et seq.* of
25 this code which issues or renews a health insurance policy on or after July 1, 2020, shall provide
26 coverage of health care services provided through telehealth services if those same services are
27 covered through face-to-face consultation by the policy.

28 (c) An insurer subject to §33-15-1 *et seq.*, §33-16-1 *et seq.*, §33-24-1 *et seq.*, §33-25-1 *et*
29 *seq.*, and §33-25A-1 *et seq.* of this code which issues or renews a health insurance policy on or
30 after July 1, 2020, may not exclude a service for coverage solely because the service is provided
31 through telehealth services.

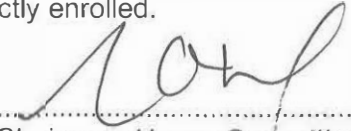
32 (d) An insurer subject to §33-15-1 *et seq.*, §33-16-1 *et seq.*, §33-24-1 *et seq.*, §33-25-1 *et*
33 *seq.*, and §33-25A-1 *et seq.*, of this code shall provide reimbursement for a telehealth service at
34 a rate negotiated between the provider and the insurance company.

35 (e) An insurer subject to §33-15-1 *et seq.*, §33-16-1 *et seq.*, §33-24-1 *et seq.*, §33-25-1 *et*
36 *seq.*, and §33-25A-1 *et seq.* of this code may not impose any annual or lifetime dollar maximum
37 on coverage for telehealth services other than an annual or lifetime dollar maximum that applies
38 in the aggregate to all items and services covered under the policy, or impose upon any person
39 receiving benefits pursuant to this section any copayment, coinsurance, or deductible amounts,
40 or any policy year, calendar year, lifetime, or other durational benefit limitation or maximum for
41 benefits or services, that is not equally imposed upon all terms and services covered under the
42 policy, contract, or plan.

43 (f) An originating site may charge an insurer subject to §33-15-1 *et seq.*, §33-16-1 *et seq.*,
44 §33-24-1 *et seq.*, §33-25-1 *et seq.*, and §33-25A-1 *et seq.* of this code a site fee.

45 (g) The coverage required by this section shall include the use of telehealth technologies
46 as it pertains to medically necessary remote patient monitoring services to the full extent that
47 those services are available.

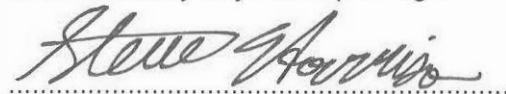
The Joint Committee on Enrolled Bills hereby certifies that the foregoing bill is correctly enrolled.


.....
Chairman, House Committee
MEMBER


.....
Chairman, Senate Committee


Originating in the House.

In effect ninety days from passage.



.....
Clerk of the House of Delegates


.....
Clerk of the Senate


.....
Speaker of the House of Delegates


.....
President of the Senate

The within is approved this the 25th
day of March, 2020.


.....
Governor

PRESENTED TO THE GOVERNOR

MAR 19 2020

Time 1:15 pm



OFFICE OF THE CLERK
 BUILDING 1, SUITE 212
 1900 KANAWHA BLVD., EAST
 CHARLESTON 25305

STEPHEN J. HARRISON
 CLERK OF THE HOUSE

(304) 340-3200
 STEVE.HARRISON@WVHOUSE.GOV

May 20, 2020

The Honorable Jim Justice
 Governor
 State of West Virginia
 1900 Kanawha Boulevard, East
 Charleston, WV 25305

OFFICE OF THE CLERK
 SECRETARY OF STATE
 2020 MAY 21 P 1:11
 FILED

Dear Governor Justice:

There was an error in the enrolling process for Committee Substitute for House Bill 4003 and the §33-53-3 in the title should have been §33-53-1. Copies of both the title amendment from the hard copy of the bill and title in the enrolled bill are attached.

We plan to note the correct number with an * when we publish the Acts of the Legislature. In addition, since this is a new section (actually a new article), based on the practice of renumbering new articles of the code which conflict with the numbers of other new articles according to the order the bills passed, the designation will become §33-57-1 in the Acts. There is also a new section, §30-1-25, which will become §30-1-26.

If you have any questions, please do not hesitate to contact me.

Sincerely,

Steve Harrison
 Clerk of the House

cc: Secretary of State Mac Warner
 Clerk of the Senate Lee Cassis

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-A Bill to amend the Code of West Virginia, 1931,

as amended, by adding thereto a new section, designated §5-16-7b, to amend said code by adding thereto a new section, designated §30-1-25, and to amend said code by adding thereto a new section, designated §33-53-1, all relating to telehealth requirements; providing rulemaking authority; requiring boards to regulate telehealth practice; defining terms; requiring insurance coverage of certain telehealth services; providing an effective date; and providing limitation of applicability.

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