
A BILL FOR AN ACT

RELATING TO TELEHEALTH.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. Section 431:10A-116.3, Hawaii Revised Statutes,
2 is amended to read as follows:

3 "**§431:10A-116.3 Coverage for telehealth.** (a) It is the
4 intent of the legislature to recognize the application of
5 telehealth as a reimbursable service by which an individual
6 shall receive medical services from a health care provider
7 without face-to-face contact with the health care provider.

8 (b) No accident and health or sickness insurance plan that
9 is issued, amended, or renewed shall require face-to-face
10 contact between a health care provider and a patient as a
11 prerequisite for payment for services appropriately provided
12 through telehealth in accordance with generally accepted health
13 care practices and standards prevailing in the applicable
14 professional community at the time the services were provided.
15 The coverage required in this section may be subject to all
16 terms and conditions of the plan agreed upon among the enrollee
17 or subscriber, the insurer, and the health care provider. No



1 accident and health or sickness insurance plan shall exclude a
2 service for coverage solely because the service is provided
3 through telehealth and is not provided through face-to-face
4 contact between a health care provider and a patient for
5 services appropriately provided through telehealth.

6 (c) Reimbursement for services provided through telehealth
7 shall be equivalent to reimbursement for the same services
8 provided via face-to-face contact between a health care provider
9 and a patient. Nothing in this section shall require a health
10 care provider to be physically present with the patient at an
11 originating site unless a health care provider at the distant
12 site deems it necessary.

13 (d) Notwithstanding chapter 453 or rules adopted pursuant
14 thereto, in the event that a health care provider-patient
15 relationship does not exist between the patient and the health
16 care provider to be involved in a telehealth interaction between
17 the patient and the health care provider, a telehealth mechanism
18 may be used to establish a health care provider-patient
19 relationship.

20 (e) All insurers shall provide current and prospective
21 insureds with written disclosure of coverages and benefits



1 associated with telehealth services, including information on
2 copayments, deductibles, or coinsurance requirements under a
3 policy, contract, plan, or agreement. The information provided
4 shall be current, understandable, and available prior to the
5 issuance of a policy, contract, plan, or agreement, and upon
6 request after the policy, contract, plan, or agreement has been
7 issued.

8 (f) Services provided by telehealth pursuant to this
9 section shall be consistent with all federal and state privacy,
10 security, and confidentiality laws.

11 (g) No insurer shall apply any deductible to services
12 provided through telehealth that accumulates separately from the
13 deductible that applies in the aggregate to all items and
14 services covered under the accident and health or sickness
15 insurance plan.

16 (h) Any copayment or coinsurance applied to services
17 provided through telehealth by an insurer shall be equivalent to
18 the copayment or coinsurance applied to the same services
19 provided via face-to-face contact between a health care provider
20 and a patient.



1 (i) An insurer shall not impose any annual or lifetime
2 durational limits or annual or lifetime maximum benefits for
3 services provided through telehealth that are not equally
4 imposed upon all coverages and benefits under the accident and
5 health or sickness insurance plan.

6 (j) An insurer shall not impose any type of utilization
7 review on services provided through telehealth unless this type
8 of utilization review is imposed when the same services are
9 provided through face-to-face contact. Any type of utilization
10 review that is imposed on services provided through telehealth
11 shall not occur with greater frequency or more stringent
12 application than this form of utilization review is imposed on
13 the same services provided through face-to-face contact.

14 (k) An insurer shall not restrict coverage for services
15 provided through telehealth to services provided by a particular
16 vendor, or other third-party, or services provided through a
17 particular electronic communications technology platform;
18 provided that nothing in this subsection shall require an
19 insurer to cover any electronic communications technology
20 platform that does not comply with all federal and state
21 privacy, security, and confidentiality laws.



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1 (1) An insurer shall not place any restrictions on
2 prescribing medications through telehealth that are more
3 restrictive than what is required under applicable state and
4 federal laws.

5 [~~(g)~~] (m) For the purposes of this section:

6 "Distant site" means the location of the health care
7 provider delivering services through telehealth at the time the
8 services are provided.

9 "Health care provider" means a provider of services, as
10 defined in title 42 United States Code section 1395x(u), a
11 provider of medical and other health services, as defined in
12 title 42 United States Code section 1395x(s), other
13 practitioners licensed by the State and working within their
14 scope of practice, and any other person or organization who
15 furnishes, bills, or is paid for health care in the normal
16 course of business, including but not limited to primary care
17 providers, mental health providers, oral health providers,
18 physicians and osteopathic physicians licensed under chapter
19 453, advanced practice registered nurses licensed under chapter
20 457, psychologists licensed under chapter 465, and dentists
21 licensed under chapter 448.



1 "Originating site" means the location where the patient is
2 located, whether accompanied or not by a health care provider,
3 at the time services are provided by a health care provider
4 through telehealth, including but not limited to a health care
5 provider's office, hospital, health care facility, a patient's
6 home, and other nonmedical environments such as school-based
7 health centers, university-based health centers, or the work
8 location of a patient.

9 "Telehealth" means the use of telecommunications services,
10 as defined in section 269-1, to encompass four modalities:
11 store and forward technologies, remote monitoring, live
12 consultation, and mobile health; and which shall include but not
13 be limited to real-time video conferencing-based communication,
14 secure interactive and non-interactive web-based communication,
15 and secure asynchronous information exchange, to transmit
16 patient medical information, including diagnostic-quality
17 digital images and laboratory results for medical interpretation
18 and diagnosis, for the purpose of delivering enhanced health
19 care services and information while a patient is at an
20 originating site and the health care provider is at a distant
21 site. [~~Standard telephone contacts, facsimile~~] Facsimile



1 transmissions, or [~~e-mail~~] electronic mail text, in combination
2 or by itself, does not constitute a telehealth service for the
3 purposes of this chapter. "Telehealth" includes audio-only
4 telephone when no other means of telecommunications services are
5 available to the patient, due to lack of availability of the
6 services or lack of adequate broadband access, or the use of
7 other means of telecommunications services are infeasible,
8 impractical, or otherwise not medically advisable, as determined
9 by the health care provider providing telehealth services to the
10 patient or as determined by another health care provider with an
11 existing relationship with the patient."

12 SECTION 2. Section 432:1-601.5, Hawaii Revised Statutes,
13 is amended to read as follows:

14 **"§432:1-601.5 Coverage for telehealth.** (a) It is the
15 intent of the legislature to recognize the application of
16 telehealth as a reimbursable service by which an individual
17 shall receive medical services from a health care provider
18 without face-to-face contact with the health care provider.

19 (b) No mutual benefit society plan contract that is
20 issued, amended, or renewed shall require face-to-face contact
21 between a health care provider and a patient as a prerequisite



1 for payment for services appropriately provided through
2 telehealth in accordance with generally accepted health care
3 practices and standards prevailing in the applicable
4 professional community at the time the services were provided.
5 The coverage required in this section may be subject to all
6 terms and conditions of the plan agreed upon among the enrollee
7 or subscriber, the mutual benefit society, and the health care
8 provider. No mutual benefit society plan contract shall exclude
9 a service for coverage solely because the service is provided
10 through telehealth and is not provided through face-to-face
11 contact between a health care provider and a patient for
12 services appropriately provided through telehealth.

13 (c) Reimbursement for services provided through telehealth
14 shall be equivalent to reimbursement for the same services
15 provided via face-to-face contact between a health care provider
16 and a patient. Nothing in this section shall require a health
17 care provider to be physically present with the patient at an
18 originating site unless a health care provider at the distant
19 site deems it necessary.

20 (d) Notwithstanding chapter 453 or rules adopted pursuant
21 thereto, in the event that a health care provider-patient



1 relationship does not exist between the patient and the health
2 care provider to be involved in a telehealth interaction between
3 the patient and health care provider, a telehealth mechanism may
4 be used to establish a health care provider-patient
5 relationship.

6 (e) All [~~insurers~~] mutual benefit societies shall provide
7 current and prospective enrollees or subscribers with written
8 disclosure of coverages and benefits associated with telehealth
9 services, including information on copayments, deductibles, or
10 coinsurance requirements under a policy, contract, plan, or
11 agreement. The information provided shall be current,
12 understandable, and available prior to the issuance of a policy,
13 contract, plan, or agreement, and upon request after the policy,
14 contract, plan, or agreement has been issued.

15 (f) Services provided by telehealth pursuant to this
16 section shall be consistent with all federal and state privacy,
17 security, and confidentiality laws.

18 (g) No mutual benefit society shall apply any deductible
19 to services provided through telehealth that accumulates
20 separately from the deductible that applies in the aggregate to



1 all items and services covered under the mutual benefit society
2 plan contract.

3 (h) Any copayment or coinsurance applied to services
4 provided through telehealth by a mutual benefit society shall be
5 equivalent to the copayment or coinsurance applied to the same
6 services provided via face-to-face contact between a health care
7 provider and a patient.

8 (i) A mutual benefit society shall not impose any annual
9 or lifetime durational limits or annual or lifetime maximum
10 benefits for services provided through telehealth that are not
11 equally imposed upon all coverages and benefits under the mutual
12 benefit society plan contract.

13 (j) A mutual benefit society shall not impose any type of
14 utilization review on services provided through telehealth
15 unless this type of utilization review is imposed when the same
16 services are provided through face-to-face contact. Any type of
17 utilization review that is imposed on services provided through
18 telehealth shall not occur with greater frequency or more
19 stringent application than this form of utilization review is
20 imposed on the same services provided through face-to-face
21 contact.



1 (k) A mutual benefit society shall not restrict coverage
2 for services provided through telehealth to services provided by
3 a particular vendor, or other third-party, or services provided
4 through a particular electronic communications technology
5 platform; provided that nothing in this subsection shall require
6 a mutual benefit society to cover any electronic communications
7 technology platform that does not comply with all federal and
8 state privacy, security, and confidentiality laws.

9 (l) A mutual benefit society shall not place any
10 restrictions on prescribing medications through telehealth that
11 are more restrictive than what is required under applicable
12 state and federal laws.

13 [~~(g)~~] (m) For the purposes of this section:

14 "Distant site" means the location of the health care
15 provider delivering services through telehealth at the time the
16 services are provided.

17 "Health care provider" means a provider of services, as
18 defined in title 42 United States Code section 1395x(u), a
19 provider of medical and other health services, as defined in
20 title 42 United States Code section 1395x(s), other
21 practitioners licensed by the State and working within their



1 scope of practice, and any other person or organization who
2 furnishes, bills, or is paid for health care in the normal
3 course of business, including but not limited to primary care
4 providers, mental health providers, oral health providers,
5 physicians and osteopathic physicians licensed under chapter
6 453, advanced practice registered nurses licensed under chapter
7 457, psychologists licensed under chapter 465, and dentists
8 licensed under chapter 448.

9 "Originating site" means the location where the patient is
10 located, whether accompanied or not by a health care provider,
11 at the time services are provided by a health care provider
12 through telehealth, including but not limited to a health care
13 provider's office, hospital, health care facility, a patient's
14 home, and other nonmedical environments such as school-based
15 health centers, university-based health centers, or the work
16 location of a patient.

17 "Telehealth" means the use of telecommunications services,
18 as defined in section 269-1, to encompass four modalities:
19 store and forward technologies, remote monitoring, live
20 consultation, and mobile health; and which shall include but not
21 be limited to real-time video conferencing-based communication,



1 secure interactive and non-interactive web-based communication,
2 and secure asynchronous information exchange, to transmit
3 patient medical information, including diagnostic-quality
4 digital images and laboratory results for medical interpretation
5 and diagnosis, for the purpose of delivering enhanced health
6 care services and information while a patient is at an
7 originating site and the health care provider is at a distant
8 site. [~~Standard telephone contacts, facsimile~~] Facsimile
9 transmissions, or [~~e-mail~~] electronic mail text, in combination
10 or by itself, does not constitute a telehealth service for the
11 purposes of this chapter. "Telehealth" includes audio-only
12 telephone when no other means of telecommunications services are
13 available to the patient, due to lack of availability of the
14 services or lack of adequate broadband access, or the use of
15 other means of telecommunications services are infeasible,
16 impractical, or otherwise not medically advisable, as determined
17 by the health care provider providing telehealth services to the
18 patient or as determined by another health care provider with an
19 existing relationship with the patient."

20 SECTION 3. Section 432D-23.5, Hawaii Revised Statutes, is
21 amended to read as follows:



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1 "**§432D-23.5 Coverage for telehealth.** (a) It is the
2 intent of the legislature to recognize the application of
3 telehealth as a reimbursable service by which an individual
4 shall receive medical services from a health care provider
5 without face-to-face contact with the health care provider.

6 (b) No health maintenance organization policy, contract,
7 plan, or agreement that is issued, amended, or renewed shall
8 require face-to-face contact between a health care provider and
9 a patient as a prerequisite for payment for services
10 appropriately provided through telehealth in accordance with
11 generally accepted health care practices and standards
12 prevailing in the applicable professional community at the time
13 the services were provided. The coverage required in this
14 section may be subject to all terms and conditions of the plan
15 agreed upon among the enrollee or subscriber, the health
16 maintenance organization, and the health care provider. No
17 health maintenance organization policy, contract, plan, or
18 agreement shall exclude a service for coverage solely because
19 the service is provided through telehealth and is not provided
20 through face-to-face contact between a health care provider and



1 a patient for services appropriately provided through
2 telehealth.

3 (c) Reimbursement for services provided through telehealth
4 shall be equivalent to reimbursement for the same services
5 provided via face-to-face contact between a health care provider
6 and a patient. Nothing in this section shall require a health
7 care provider to be physically present with the patient at an
8 originating site unless a health care provider at the distant
9 site deems it necessary.

10 (d) Notwithstanding chapter 453 or rules adopted pursuant
11 thereto, in the event that a health care provider-patient
12 relationship does not exist between the patient and the health
13 care provider involved in a telehealth interaction between the
14 patient and the health care provider, a telehealth mechanism may
15 be used to establish a health care provider-patient
16 relationship.

17 (e) All health maintenance organizations shall provide
18 current and prospective [~~insureds~~] enrollees or subscribers with
19 written disclosure of coverages and benefits associated with
20 telehealth services, including information on copayments,
21 deductibles, or coinsurance requirements under a policy,



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1 contract, plan, or agreement. The information provided shall be
2 current, understandable, and available prior to enrollment in a
3 policy, contract, plan, or agreement and upon request after
4 enrollment in the policy, contract, plan, or agreement.

5 (f) Services provided by telehealth pursuant to this
6 section shall be consistent with all federal and state privacy,
7 security, and confidentiality laws.

8 (g) No health maintenance organization shall apply any
9 deductible to services provided through telehealth that
10 accumulates separately from the deductible that applies in the
11 aggregate to all items and services covered under the health
12 maintenance organization policy, contract, plan, or agreement.

13 (h) Any copayment or coinsurance applied to services
14 provided through telehealth by a health maintenance organization
15 shall be equivalent to the copayment or coinsurance applied to
16 the same services provided through face-to-face contact.

17 (i) A health maintenance organization shall not impose any
18 annual or lifetime durational limits or annual or lifetime
19 maximum benefits for services provided through telehealth that
20 are not equally imposed upon all coverages and benefits under



1 the health maintenance organization policy, contract, plan, or
2 agreement.

3 (j) A health maintenance organization shall not impose any
4 type of utilization review on services provided through
5 telehealth unless this type of utilization review is imposed
6 when the same services are provided through face-to-face
7 contact. Any type of utilization review that is imposed on
8 services provided through telehealth shall not occur with
9 greater frequency or more stringent application than this form
10 of utilization review is imposed on the same services provided
11 through face-to-face contact.

12 (k) A health maintenance organization shall not restrict
13 coverage for services provided through telehealth to services
14 provided by a particular vendor, or other third-party, or
15 services provided through a particular electronic communications
16 technology platform; provided that nothing in this subsection
17 shall require a health maintenance organization to cover any
18 electronic communications technology platform that does not
19 comply with all federal and state privacy, security, and
20 confidentiality laws.



1 (1) A health maintenance organization shall not place any
2 restrictions on prescribing medications through telehealth that
3 are more restrictive than what is required under applicable
4 state and federal laws.

5 [~~(g)~~] (m) For the purposes of this section:

6 "Distant site" means the location of the health care
7 provider delivering services through telehealth at the time the
8 services are provided.

9 "Health care provider" means a provider of services, as
10 defined in title 42 United States Code section 1395x(u), a
11 provider of medical and other health services, as defined in
12 title 42 United States Code section 1395x(s), other
13 practitioners licensed by the State and working within their
14 scope of practice, and any other person or organization who
15 furnishes, bills, or is paid for health care in the normal
16 course of business, including but not limited to primary care
17 providers, mental health providers, oral health providers,
18 physicians and osteopathic physicians licensed under chapter
19 453, advanced practice registered nurses licensed under chapter
20 457, psychologists licensed under chapter 465, and dentists
21 licensed under chapter 448.



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1 "Originating site" means the location where the patient is
2 located, whether accompanied or not by a health care provider,
3 at the time services are provided by a health care provider
4 through telehealth, including but not limited to a health care
5 provider's office, hospital, health care facility, a patient's
6 home, and other nonmedical environments such as school-based
7 health centers, university-based health centers, or the work
8 location of a patient.

9 "Telehealth" means the use of telecommunications services,
10 as defined in section 269-1, to encompass four modalities:
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12 consultation, and mobile health; and which shall include but not
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16 patient medical information, including diagnostic-quality
17 digital images and laboratory results for medical interpretation
18 and diagnosis, for the purpose of delivering enhanced health
19 care services and information while a patient is at an
20 originating site and the health care provider is at a distant
21 site. [~~Standard telephone contacts, facsimile~~] Facsimile



1 transmissions, or [~~e-mail~~] electronic mail text, in combination
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3 purposes of this chapter. "Telehealth" includes audio-only
4 telephone when no other means of telecommunications services are
5 available to the patient, due to lack of availability of the
6 services or lack of adequate broadband access, or the use of
7 other means of telecommunications services are infeasible,
8 impractical, or otherwise not medically advisable, as determined
9 by the health care provider providing telehealth services to the
10 patient or as determined by another health care provider with an
11 existing relationship with the patient."

12 SECTION 4. Statutory material to be repealed is bracketed
13 and stricken. New statutory material is underscored.

14 SECTION 5. This Act shall take effect upon its approval.

15

INTRODUCED BY:



JAN 22 2021



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Report Title:

Telehealth; Health Insurance; Coverage; Services

Description:

Prohibits health insurers, mutual benefit societies, and health maintenance organizations from excluding coverage of a service solely because the service is provided through telehealth and not through face-to-face contact. Requires parity between telehealth services and face-to-face services for purposes of deductibles, copayments, coinsurance, benefit limits, and utilization reviews. Clarifies the definition of "telehealth".

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.

