

JAN 26 2022

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 policy of accident and health or sickness insurance
9 [~~plan~~] that is issued, amended, or renewed shall require face-
10 to-face contact between a health care provider and a patient as
11 a 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~~] policy agreed upon among the
17 enrollee or subscriber, the insurer, and the health care



1 provider. No policy of accident and health or sickness
2 insurance shall exclude a service for coverage solely because
3 the service is provided through telehealth and is not provided
4 through face-to-face contact between a health care provider and
5 a patient for services appropriately provided through
6 telehealth.

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

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



1 (e) All insurers shall provide current and prospective
2 insureds with written disclosure of coverages and benefits
3 associated with telehealth services, including information on
4 copayments, deductibles, or coinsurance requirements under a
5 policy, contract, plan, or agreement. The information provided
6 shall be current, understandable, and available prior to the
7 issuance of a policy, contract, plan, or agreement, and upon
8 request after the policy, contract, plan, or agreement has been
9 issued.

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

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

18 (h) Any copayment or coinsurance applied to services
19 provided through telehealth by an insurer shall be equivalent to
20 the copayment or coinsurance applied to the same services



1 provided via face-to-face contact between a health care provider
2 and a patient.

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

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

16 (k) An insurer shall not restrict coverage for services
17 provided through telehealth to services provided by a particular
18 vendor, or other third-party, or services provided through a
19 particular electronic communications technology platform;
20 provided that nothing in this subsection shall require an
21 insurer to cover any electronic communications technology



1 platform that does not comply with all federal and state
2 privacy, security, and confidentiality laws.

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

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

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

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



1 457, psychologists licensed under chapter 465, and dentists
2 licensed under chapter 448.

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

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



1 originating site and the health care provider is at a distant
2 site. [~~Standard telephone contacts, facsimile~~] Facsimilie
3 transmissions[~~r~~] or [~~e-mail~~] electronic mail text, in
4 combination or by itself, does not constitute a telehealth
5 service for the purposes of this chapter."

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

8 "**§432:1-601.5 Coverage for telehealth.** (a) It is the
9 intent of the legislature to recognize the application of
10 telehealth as a reimbursable service by which an individual
11 shall receive medical services from a health care provider
12 without face-to-face contact with the health care provider.

13 (b) No [~~mutual benefit society~~] hospital or medical
14 service plan contract that is issued, amended, or renewed shall
15 require face-to-face contact between a health care provider and
16 a patient as a prerequisite for payment for services
17 appropriately provided through telehealth in accordance with
18 generally accepted health care practices and standards
19 prevailing in the applicable professional community at the time
20 the services were provided. The coverage required in this
21 section may be subject to all terms and conditions of the plan



1 contract agreed upon among the [enrollee] member or subscriber,
2 the mutual benefit society, and the health care provider. No
3 hospital or medical service plan contract shall exclude a
4 service for coverage solely because the service is provided
5 through telehealth and is not provided through face-to-face
6 contact between a health care provider and a patient for
7 services appropriately provided through telehealth.

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

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



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

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

13 (g) No mutual benefit society shall apply any deductible
14 to services provided through telehealth that accumulates
15 separately from the deductible that applies in the aggregate to
16 all items and services covered under the hospital or medical
17 service plan contract.

18 (h) Any copayment or coinsurance applied to services
19 provided through telehealth by a mutual benefit society shall be
20 equivalent to the copayment or coinsurance applied to the same



1 services provided via face-to-face contact between a health care
2 provider and a patient.

3 (i) A mutual benefit society shall not impose any annual
4 or lifetime durational limits or annual or lifetime maximum
5 benefits for services provided through telehealth that are not
6 equally imposed upon all coverages and benefits under the
7 hospital or medical service plan contract.

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

17 (k) A mutual benefit society shall not restrict coverage
18 for services provided through telehealth to services provided by
19 a particular vendor, or other third-party, or services provided
20 through a particular electronic communications technology
21 platform; provided that nothing in this subsection shall require



1 a mutual benefit society to cover any electronic communications
2 technology platform that does not comply with all federal and
3 state privacy, security, and confidentiality laws.

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

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

9 "Distant site" means the location of the health care
10 provider delivering services through telehealth at the time the
11 services are provided.

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



1 453, advanced practice registered nurses licensed under chapter
2 457, psychologists licensed under chapter 465, and dentists
3 licensed under chapter 448.

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

12 "Telehealth" means the use of telecommunications services,
13 as defined in section 269-1, to encompass four modalities:
14 store and forward technologies, remote monitoring, live
15 consultation, and mobile health; and which shall include but not
16 be limited to real-time video conferencing-based communication,
17 secure interactive and non-interactive web-based communication,
18 and secure asynchronous information exchange, to transmit
19 patient medical information, including diagnostic-quality
20 digital images and laboratory results for medical interpretation
21 and diagnosis, for the purpose of delivering enhanced health



1 care services and information while a patient is at an
2 originating site and the health care provider is at a distant
3 site. [~~Standard telephone contacts, facsimile~~] Facsimile
4 transmissions[7] or [~~e-mail~~] electronic mail text, in
5 combination or by itself, does not constitute a telehealth
6 service for the purposes of this chapter."

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

9 "**§432D-23.5 Coverage for telehealth.** (a) It is the
10 intent of the legislature to recognize the application of
11 telehealth as a reimbursable service by which an individual
12 shall receive medical services from a health care provider
13 without face-to-face contact with the health care provider.
14 (b) No health maintenance organization policy, contract,
15 plan, or agreement that is issued, amended, or renewed shall
16 require face-to-face contact between a health care provider and
17 a patient as a prerequisite for payment for services
18 appropriately provided through telehealth in accordance with
19 generally accepted health care practices and standards
20 prevailing in the applicable professional community at the time
21 the services were provided. The coverage required in this



1 section may be subject to all terms and conditions of the
2 policy, contract, plan, or agreement agreed upon among the
3 enrollee or subscriber, the health maintenance organization, and
4 the health care provider. No health maintenance organization
5 policy, contract, plan, or agreement shall exclude a service for
6 coverage solely because the service is provided through
7 telehealth and is not provided through face-to-face contact
8 between a health care provider and a patient for services
9 appropriately provided through telehealth.

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

17 (d) Notwithstanding chapter 453 or rules adopted pursuant
18 thereto, in the event that a health care provider-patient
19 relationship does not exist between the patient and the health
20 care provider involved in a telehealth interaction between the
21 patient and the health care provider, a telehealth mechanism may



1 be used to establish a health care provider-patient
2 relationship.

3 (e) All health maintenance organizations shall provide
4 current and prospective [~~insureds~~] enrollees or subscribers with
5 written disclosure of coverages and benefits associated with
6 telehealth services, including information on copayments,
7 deductibles, or coinsurance requirements under a policy,
8 contract, plan, or agreement. The information provided shall be
9 current, understandable, and available prior to enrollment in a
10 policy, contract, plan, or agreement and upon request after
11 enrollment in the policy, contract, plan, or agreement.

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

15 (g) No health maintenance organization shall apply any
16 deductible to services provided through telehealth that
17 accumulates separately from the deductible that applies in the
18 aggregate to all items and services covered under the health
19 maintenance organization policy, contract, plan, or agreement.

20 (h) Any copayment or coinsurance applied to services
21 provided through telehealth by a health maintenance organization



1 shall be equivalent to the copayment or coinsurance applied to
2 the same services provided through face-to-face contact.

3 (i) A health maintenance organization shall not impose any
4 annual or lifetime durational limits or annual or lifetime
5 maximum benefits for services provided through telehealth that
6 are not equally imposed upon all coverages and benefits under
7 the health maintenance organization policy, contract, plan, or
8 agreement.

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

18 (k) A health maintenance organization shall not restrict
19 coverage for services provided through telehealth to services
20 provided by a particular vendor, or other third-party, or
21 services provided through a particular electronic communications



1 technology platform; provided that nothing in this subsection
2 shall require a health maintenance organization to cover any
3 electronic communications technology platform that does not
4 comply with all federal and state privacy, security, and
5 confidentiality laws.

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

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

11 "Distant site" means the location of the health care
12 provider delivering services through telehealth at the time the
13 services are provided.

14 "Health care provider" means a provider of services, as
15 defined in title 42 United States Code section 1395x(u), a
16 provider of medical and other health services, as defined in
17 title 42 United States Code section 1395x(s), other
18 practitioners licensed by the State and working within their
19 scope of practice, and any other person or organization who
20 furnishes, bills, or is paid for health care in the normal
21 course of business, including but not limited to primary care



1 providers, mental health providers, oral health providers,
2 physicians and osteopathic physicians licensed under chapter
3 453, advanced practice registered nurses licensed under chapter
4 457, psychologists licensed under chapter 465, and dentists
5 licensed under chapter 448.

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

14 "Telehealth" means the use of telecommunications services,
15 as defined in section 269-1, to encompass four modalities:
16 store and forward technologies, remote monitoring, live
17 consultation, and mobile health; and which shall include but not
18 be limited to real-time video conferencing-based communication,
19 secure interactive and non-interactive web-based communication,
20 and secure asynchronous information exchange, to transmit
21 patient medical information, including diagnostic-quality



1 digital images and laboratory results for medical interpretation
2 and diagnosis, for the purpose of delivering enhanced health
3 care services and information while a patient is at an
4 originating site and the health care provider is at a distant
5 site. [~~Standard telephone contacts, facsimile~~] Facsimile
6 transmissions^[7] or [~~e-mail~~] electronic mail text, in
7 combination or by itself, does not constitute a telehealth
8 service for the purposes of this chapter."

9 SECTION 4. Statutory material to be repealed is bracketed
10 and stricken. New statutory material is underscored.

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

12

INTRODUCED BY: Rosely H. B...



S.B. NO. 3288

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.

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

