

BILL ANALYSIS

Senate Research Center

C.S.H.B. 2033
By: Gray (Sibley)
Economic Development
5-14-97
Committee Report (Substituted)

DIGEST

Currently, health benefit plans are not required to provide reimbursement for telemedicine services. This may limit the availability of health care in underserved urban and rural areas. Telemedicine has the capability to simultaneously lower the cost and raise the quality of health care in these areas. This bill would prohibit health benefit plans from excluding a service from coverage under the plan solely because the service is provided through telemedicine and not provided through a face-to-face consultation. Additionally, this bill sets forth informed consent and confidentiality of patient information provisions.

PURPOSE

As proposed, C.S.H.B. 2033 provides regulations regarding coverage for services provided through telemedicine under certain health benefit plans.

RULEMAKING AUTHORITY

Rulemaking authority is granted to the commissioner of insurance in SECTION 1 (Section 6(a), Article 21.53F, Insurance Code) and to the Texas State Board of Medical Examiners in SECTION 1 (Section 6(b), Article 21.53F, Insurance Code) of this bill.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Chapter 21E, Insurance Code, by adding Article 21.53F, as follows:

Art. 21.53F. TELEMEDICINE

Sec. 1. DEFINITIONS. Defines "health benefit plan" and "telemedicine."

Sec. 2. SCOPE OF ARTICLE. Sets forth the health benefit plans to which this article applies.

Sec. 3. COVERAGE FOR TELEMEDICINE SERVICES. Prohibits a health benefit plan from excluding a service from coverage under the plan solely because the service is provided through telemedicine and not provided through a face-to-face consultation. Authorizes benefits for a service provided through telemedicine required under this article to be made subject to a deductible, copayment, or coinsurance requirement. Prohibits a deductible, copayment, or coinsurance applicable to a particular service provided through telemedicine from exceeding the deductible, copayment, or coinsurance required by the health benefit plan for the same service provided through a face-to-face consultation.

Sec. 4. INFORMED CONSENT. Requires a treating physician or other health care provider who provides or facilitates the use of telemedicine to ensure that the informed consent of the patient, or another appropriate person with authority to make health care treatment decisions for the patient, is obtained before services are provided through telemedicine.

Sec. 5. CONFIDENTIALITY. Requires a treating physician or other health care provider who provides or facilitates the use of telemedicine to ensure that the confidentiality of the

patient's medical information is maintained as required by Section 5.08, Article 4495b, V.T.C.S. (Medical Practice Act), or other applicable law.

Sec. 6. RULES. Authorizes the commissioner of insurance to adopt rules as necessary to implement this article, subject to Subsection (b). Authorizes the Texas State Board of Medical Examiners, in consultation with the commissioner of insurance, as appropriate, to adopt certain rules as necessary.

SECTION 2. Effective date: September 1, 1997.

Makes application of this Act prospective to January 1, 1998.

SECTION 3. Emergency clause.

SUMMARY OF COMMITTEE CHANGES

SECTION 1.

Amends Section 6, Article 21.53F, Insurance Code, to authorize the Texas State Board of Medical Examiners to adopt certain rules.