

1-1 By: Price, et al. (Senate Sponsor - Hughes) H.B. No. 3345  
1-2 (In the Senate - Received from the House May 8, 2019;  
1-3 May 10, 2019, read first time and referred to Committee on Business  
1-4 & Commerce; May 20, 2019, reported favorably by the following vote:  
1-5 Yeas 9, Nays 0; May 20, 2019, sent to printer.)

1-6 COMMITTEE VOTE

	Yea	Nay	Absent	PNV
1-7				
1-8	X			
1-9	X			
1-10	X			
1-11	X			
1-12	X			
1-13	X			
1-14	X			
1-15	X			
1-16	X			

1-17 A BILL TO BE ENTITLED  
1-18 AN ACT

1-19 relating to health benefit coverage provided by certain health  
1-20 benefit plans for telemedicine medical services and telehealth  
1-21 services.

1-22 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

1-23 SECTION 1. Section 1455.001, Insurance Code, is amended by  
1-24 adding Subdivision (2-a) to read as follows:

1-25 (2-a) "Platform" means the technology, system,  
1-26 software, application, modality, or other method through which a  
1-27 health professional remotely interfaces with a patient when  
1-28 providing a health care service or procedure as a telemedicine  
1-29 medical service or telehealth service.

1-30 SECTION 2. Section 1455.004, Insurance Code, is amended by  
1-31 amending Subsection (a) and adding Subsections (b-1) and (d) to  
1-32 read as follows:

1-33 (a) A health benefit plan:

1-34 (1) must provide coverage for a covered health care  
1-35 service or procedure delivered by a preferred or contracted health  
1-36 professional to a covered patient as a telemedicine medical service  
1-37 or telehealth service on the same basis and to the same extent that  
1-38 the plan provides coverage for the service or procedure in an  
1-39 in-person setting; and

1-40 (2) may not:

1-41 (A) exclude from coverage a covered health care  
1-42 service or procedure delivered by a preferred or contracted health  
1-43 professional to a covered patient as a telemedicine medical service  
1-44 or a telehealth service solely because the covered health care  
1-45 service or procedure is not provided through an in-person  
1-46 consultation; and

1-47 (B) subject to Subsection (c), limit, deny, or  
1-48 reduce coverage for a covered health care service or procedure  
1-49 delivered as a telemedicine medical service or telehealth service  
1-50 based on the health professional's choice of platform for  
1-51 delivering the service or procedure.

1-52 (b-1) Subsection (b) does not authorize a health benefit  
1-53 plan to charge a separate deductible that applies only to a covered  
1-54 health care service or procedure delivered as a telemedicine  
1-55 medical service or telehealth service.

1-56 (d) A health benefit plan may not impose an annual or  
1-57 lifetime maximum on coverage for covered health care services or  
1-58 procedures delivered as telemedicine medical services or  
1-59 telehealth services other than the annual or lifetime maximum, if  
1-60 any, that applies in the aggregate to all items and services and  
1-61 procedures covered under the plan.

2-1 SECTION 3. The changes to Section 1455.004, Insurance Code,  
2-2 as amended by this Act, apply only to a health benefit plan  
2-3 delivered, issued for delivery, or renewed on or after January 1,  
2-4 2020. A health benefit plan delivered, issued for delivery, or  
2-5 renewed before January 1, 2020, is governed by the law as it existed  
2-6 immediately before the effective date of this Act, and that law is  
2-7 continued in effect for that purpose.

2-8 SECTION 4. This Act takes effect September 1, 2019.

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