

Seventy-Eighth Oregon Legislative Assembly - 2015 Regular Session
STAFF MEASURE SUMMARY
Senate Committee On Health Care

MEASURE: SB 144 A
CARRIER: Sen. Monnes Anderson

Fiscal: No Fiscal Impact

Revenue: No Revenue Impact

Action Date: 03/04/15

Action: Do Pass With Amendments. (Printed A-Eng.)

Meeting Dates: 02/04, 03/04

Vote:
Yeas: 5 - Knopp, Kruse, Monnes Anderson, Shields, Steiner Hayward

Prepared By: Zena Rockowitz, Committee Administrator

WHAT THE MEASURE DOES:

Requires definition of health benefit plan include self-insured health plan offered by the Public Employees' Benefit Board or the Oregon Educators Benefit Board. Defines health professional as person licensed, certified or registered to provide health care services or supplies. Requires health benefit plan to provide coverage of health service using synchronous two-way interactive video conferencing if it is safely and effectively provided according to generally accepted health care practices and technology that meets state and federal laws on privacy and security. Eliminates requirement that plan must provide coverage if health service does not duplicate or supplant a health service available to patient in person. Eliminates list of originating sites for telemedicine. Eliminates requirement that plan may subject coverage of a telemedicine health service comparable to health service provided in person. Establishes that coverage is subject to reimbursement specified in the contract between plan and health professional. Specifies plan does not need to reimburse a health professional who has not contracted with plan. Applies to plans issued or renewed on or after January 1, 2016. Declares emergency, effective on passage.

ISSUES DISCUSSED:

- Consensus building by workgroup of providers, payers, associations and state agencies
- Conditions for health plan coverage for telemedicine
- Confidentiality and laws regarding privacy and security
- Date for implementation

EFFECT OF COMMITTEE AMENDMENT:

Applies effective date for health benefit plans issued or renewed on or after January 1, 2016.

BACKGROUND:

In 2009, the Oregon Legislative Assembly enacted Senate Bill 24, which defines telemedical health services as those delivered through a two-way video communication device that allows a health professional to interact with a patient in a separate physical location. Telemedicine is reportedly an effective alternative to face-to-face provider and patient interactions, particularly in rural areas that have less access to medical services. ORS 743A.058 requires a health benefit plan to provide coverage of telemedical services when services are medically necessary, evidence-based and do not duplicate or supplant what is available in person. Reimbursement policies for telemedicine services vary between plans. Nineteen states and the District of Columbia have adopted laws requiring private payers to provide coverage and payment, or partner with telemedicine companies that offer health consultations. In 2014, the Federation of State Medical Boards adopted telemedicine guidelines for state boards to help ensure safety and quality of telemedicine technology. Guidelines include adherence to principles of privacy and security of health information. During the 2014 Legislative Session, Senate Bill 1560 was discussed in the Senate Health Care and Human Services Committee, and

from those discussions the Telemedicine Reimbursement Expansion Workgroup was created. The workgroup was staffed and facilitated by the Telehealth Alliance of Oregon. Senate Bill 144 A is the result of the workgroup deliberations.