

The House Committee on Health and Human Services offers the following substitute to HB 307:

A BILL TO BE ENTITLED  
AN ACT

1 To amend Article 1 of Chapter 24 of Title 33 of the Official Code of Georgia Annotated,  
2 relating to insurance generally, so as to revise the "Georgia Telehealth Act"; to revise  
3 definitions; to authorize health care providers to provide telemedicine services from home;  
4 to authorize patients to receive telemedicine services from their home, workplace, or school;  
5 to allow for audio-only care under certain circumstances; to prohibit requirement that patient  
6 have in-person consultation before receiving telemedicine services; to prohibit more stringent  
7 utilization review requirements; to prohibit separate deductibles for telemedicine services;  
8 to prohibit requirement that health care providers use a specific telehealth platform or  
9 vendor; to prohibit additional restrictions on prescribing medications through telemedicine;  
10 to require documentation by health care providers for telemedicine services that equals or  
11 exceeds in-person consultation; to provide for related matters; to provide for an effective  
12 date; to repeal conflicting laws; and for other purposes.

13 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

H. B. 307 (SUB)

**SECTION 1.**

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Article 1 of Chapter 24 of Title 33 of the Official Code of Georgia Annotated, relating to insurance generally, is amended by revising Code Section 33-24-56.4, relating to the "Georgia Telehealth Act," as follows:

"33-24-56.4.

(a) This Code section shall be known and may be cited as the 'Georgia Telehealth Act.'

(b) As used in this Code section, the term:

(1) 'Distant site' means a site at which a health care provider legally allowed to practice in this state is located while providing health care services by means of telemedicine or telehealth, which may include the home of the health care provider.

(2) 'Health benefit policy' means any individual or group plan, policy, or contract for health care services issued, delivered, issued for delivery, executed, or renewed in this state, including, but not limited to, any health insurance plan established under Article 1 of Chapter 18 of Title 45 or under Article 7 of Chapter 4 of Title 49.

(3) 'Insurer' means an accident and sickness insurer, fraternal benefit society, hospital service corporation, medical service corporation, health care corporation, health maintenance organization, provider sponsored health care corporation, managed care entity, or any similar entity authorized to issue contracts under this title or to provide health benefit policies.

(4) 'Originating site' means a site ~~in this state~~ at which a patient is located at the time health care services are provided to him or her by means of telemedicine or telehealth, ~~unless the term is otherwise defined with respect to the provision in which it is used~~ which may include a patient's home, workplace, or school; provided, however, that notwithstanding any other provision of law, insurers and providers may agree to alternative siting arrangements deemed appropriate by the parties.

39 (5) 'Store and forward transfer' means the transmission of a patient's medical information  
40 either to or from an originating site or to or from the provider at the distant site, but does  
41 not require the patient being present nor must it be in real time.

42 (6) 'Telehealth' means the use of information and communications technologies,  
43 including, but not limited to, telephones, remote patient monitoring devices or other  
44 electronic means which support clinical health care, provider consultation, patient and  
45 professional health related education, public health, and health administration.

46 (7) 'Telemedicine' means a form of telehealth which is the delivery of clinical health care  
47 services by means of ~~real-time~~ real-time two-way audio, visual, or other  
48 telecommunications or electronic communications, including the application of secure  
49 video conferencing or store and forward transfer technology to provide or support health  
50 care delivery, which facilitate the assessment, diagnosis, consultation, treatment,  
51 education, care management, and self-management of a patient's health care by a health  
52 care provider practicing within his or her scope of practice as would be practiced  
53 in-person with a patient as proscribed by applicable federal and state laws, rules, and  
54 regulations, and legally allowed to practice in this state, while such patient is at an  
55 originating site and the health care provider is at a distant site. Such term includes  
56 audio-only telephone only when no other means of real-time two-way audio, visual, or  
57 other telecommunications or electronic communications are available to the patient due  
58 to lack of availability of such real-time two-way audio, visual, or other  
59 telecommunications or electronic communications, due to lack of adequate broadband  
60 access, or because the use of other means of real-time two-way audio, visual, or other  
61 telecommunications or electronic communications is infeasible, impractical, or otherwise  
62 not medically advisable, as determined by the health care provider providing telemedicine  
63 services to the patient or as determined by another health care provider with an existing  
64 relationship with the patient.

65 (c) It is the intent of the General Assembly to mitigate geographic discrimination in the  
66 delivery of health care by recognizing the application of and payment for covered medical  
67 care provided by means of telehealth, provided that such services are provided by a  
68 physician or by another health care practitioner or professional acting within the scope of  
69 practice of such health care practitioner or professional and in accordance with the  
70 provisions of Code Section 43-34-31.

71 (d) Each insurer proposing to issue a health benefit policy shall provide coverage for the  
72 cost of health care services provided through telehealth or telemedicine as directed through  
73 regulations promulgated by the department.

74 (e) An insurer shall not exclude a service for coverage solely because the service is  
75 provided through telemedicine services and is not provided through in-person consultation  
76 or contact between a health care provider and a patient for services appropriately provided  
77 through telemedicine services.

78 (f) No insurer shall require an in-person consultation or contact before a patient may  
79 receive telemedicine services from a health care provider, except for the purposes of initial  
80 installation, setup, or delivery of in-home telehealth devices or services, or as otherwise  
81 required by state or federal law, rule, or regulation.

82 ~~(f)~~(g) An insurer shall reimburse the treating provider or the consulting provider for the  
83 diagnosis, consultation, or treatment of the insured delivered through telemedicine services  
84 on the same basis and at least at the rate that the insurer is responsible for coverage for the  
85 provision of the same service through in-person consultation or contact; provided, however,  
86 that nothing in this subsection shall require (1) a health care provider or telemedicine  
87 company to accept more reimbursement than they are willing to charge or (2) an insurer  
88 to pay for a telemedicine service provided through an audio-only call for any service other  
89 than mental or behavioral health services. Payment for telemedicine interactions shall  
90 include reasonable compensation to the originating or distant site for the transmission cost  
91 incurred during the delivery of health care services; provided, however, that this shall not

92 require the insurer to include payment for transmission costs if the originating or distant  
93 site is a home.

94 ~~(g)~~(h) No insurer shall impose any deductible or annual or lifetime dollar maximum on  
95 coverage for telemedicine services other than an a deductible or annual or lifetime dollar  
96 maximum that applies in the aggregate to all items and services covered under the policy,  
97 or impose upon any person receiving benefits pursuant to this Code section any copayment,  
98 coinsurance, or deductible amounts, or any policy year, calendar year, lifetime, or other  
99 durational benefit limitation or maximum for benefits or services, that is not equally  
100 imposed upon all terms and services covered under the health benefit policy.

101 ~~(h)~~(i) No insurer shall require its insureds to use telemedicine services in lieu of in-person  
102 consultation or contact.

103 ~~(i)~~(j) On and after January 1, 2020, every health benefit policy that is issued, amended, or  
104 renewed shall include payment for services that are covered under such health benefit  
105 policy and are appropriately provided through telehealth in accordance with Code Section  
106 43-34-31, this Code section, and generally accepted health care practices and standards  
107 prevailing in the applicable professional community at the time the services were provided.

108 (k) No insurer shall impose any type of utilization review on telemedicine services unless  
109 such type of utilization review is imposed when the same services are provided through  
110 in-person consultation or contact.

111 (l) No insurer shall restrict coverage of telehealth or telemedicine services to services  
112 provided by a particular vendor, or other third party, or services provided through a  
113 particular electronic communications technology platform; provided, however, that nothing  
114 in this Code section shall require an insurer to cover any telehealth or telemedicine services  
115 provided through an electronic communications technology platform that does not comply  
116 with applicable state and federal privacy laws.

117 (m) No insurer shall place any restrictions on prescribing medications through  
118 telemedicine that are more restrictive than what is required under applicable state and  
119 federal laws for prescribing medications through in-person consultation or contact.

120 (n) A health care provider shall maintain documentation of each health care service  
121 provided through telemedicine in a manner that is at least as extensive and thorough as  
122 when the health care service is provided through in-person consultation or contact and,  
123 upon request, make such documentation available in accordance with applicable state and  
124 federal law.

125 (o) Nothing in this Code section shall be construed to limit, alter, or expand the scope of  
126 practice, standard of care, prescriptive authority, or supervision requirements for health  
127 care providers or privacy rights, other than as provided in applicable federal law and state  
128 laws, rules, and regulations."

129 **SECTION 2.**

130 This Act shall become effective upon its approval by the Governor or upon its becoming law  
131 without such approval.

132 **SECTION 3.**

133 All laws and parts of laws in conflict with this Act are repealed.