



Sen. Andy Manar

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10000SB0458sam002

LRB100 05002 SMS 43212 a

1 AMENDMENT TO SENATE BILL 458

2 AMENDMENT NO. _____. Amend Senate Bill 458 by replacing
3 everything after the enacting clause with the following:

4 "Section 5. The Illinois Insurance Code is amended by
5 changing Section 356z.22 as follows:

6 (215 ILCS 5/356z.22)

7 (Text of Section before amendment by P.A. 100-1009)

8 Sec. 356z.22. Coverage for telehealth services.

9 (a) For purposes of this Section:

10 "Distant site" means the location at which the health care
11 provider rendering the telehealth service is located.

12 "Health care provider" means a health care professional
13 licensed in Illinois.

14 "Interactive telecommunication system" means multimedia
15 communications equipment that includes, at a minimum, audio and
16 video equipment permitting 2-way, real-time interactive

1 communication between the patient and the distant site
2 provider. "Interactive telecommunication system" does not
3 include a facsimile machine.

4 "Originating site" means the location at which the patient
5 receiving the service is located.

6 "Telehealth" means the use of telecommunications services
7 to encompass 4 modalities: store and forward technologies,
8 remote monitoring, live consultation, and mobile health; and
9 which shall include, but not be limited to, real-time video
10 conferencing-based communication, secure interactive and
11 non-interactive web-based communication, and secure
12 asynchronous information exchange, to transmit patient medical
13 information, including diagnostic-quality digital images and
14 laboratory results for medical interpretation and diagnosis,
15 for the purpose of delivering enhanced health care services and
16 information while a patient is at an originating site and the
17 health care provider is at a distant site. "Telehealth"
18 includes telepsychiatry and telemedicine. "Telehealth"
19 includes psychiatric services, as well as services provided by
20 all other professional disciplines delivered through
21 telecommunication systems. "Telehealth" does not include a
22 facsimile transmission.

23 ~~"Interactive telecommunications system" means an audio and~~
24 ~~video system permitting 2-way, live interactive communication~~
25 ~~between the patient and the distant site health care provider.~~

26 ~~"Telehealth services" means the delivery of covered health~~

1 ~~care services by way of an interactive telecommunications~~
2 ~~system.~~

3 (b) This Section applies to an individual or group policy
4 of insurance issued, amended, renewed, delivered, continued,
5 or executed on or after the effective date of this amendatory
6 Act of the 100th General Assembly that pays health benefits,
7 including, but not limited to, such health benefit policies or
8 plans as:

9 (1) the fee-for-service and managed care medical
10 assistance programs under Article V of the Illinois Public
11 Aid Code;

12 (2) accident, health, or sickness coverage plans and
13 policies;

14 (3) mutual benefit society plans and policies;

15 (4) automobile medical benefits plans and policies;

16 (5) plans and policies subject to the federal Employee
17 Retirement Income Security Act of 1974;

18 (6) third-party administrator plans and policies;

19 (7) travel insurance medical benefits plans and
20 policies;

21 (8) supplemental insurance plans and policies;

22 (9) life care contracts, plans, and policies;

23 (10) accident-only plans and policies;

24 (11) specified disease plans and policies;

25 (12) hospital plans and policies providing fixed daily
26 benefits only;

1 (13) Medicare supplemental plans and policies;

2 (14) long-term care plans and policies;

3 (15) short-term major medical plans and policies of 6
4 months' duration or less;

5 (16) hospital indemnity plans or policies; and

6 (17) any other supplemental health plan or policy.

7 (c) A health benefit policy or plan shall provide coverage
8 for the cost of health care services provided through
9 telehealth, as provided under this Section, on the same basis
10 and at the same rate that the health insurer is responsible for
11 coverage for providing the same service through in-person
12 treatment or consultation. Health benefit policies or plans
13 shall not exclude a service for coverage solely because the
14 service is provided through telehealth services.

15 (d) All telehealth services provided under this Section
16 shall meet the following requirements:

17 (1) Medical data may be exchanged through an
18 interactive telecommunication system.

19 (2) The interactive telecommunication system must, at
20 a minimum, have the capability of allowing the consulting
21 distant site provider to examine the patient sufficiently
22 to allow proper diagnosis of the involved body system when
23 necessary and appropriate. The interactive
24 telecommunication system must also be capable of
25 transmitting clearly audible heart tones and lung sounds,
26 as well as clear video images of the patient and any

1 diagnostic tools, such as radiographs, when necessary and
2 appropriate.

3 (3) An in-person visit between a patient and a health
4 care provider prior to the delivery of telehealth services
5 shall not be required.

6 (4) Other than consents required for treatment for
7 in-person care, no informed or other consents shall be
8 required for the patient to receive care through
9 telehealth.

10 (5) A telepresenter shall not be required to be present
11 with the patient unless medically necessary.

12 (e) Email systems and text messaging may be used as
13 interactive telecommunication systems for existing patients.

14 (f) Benefits for a service provided through telehealth
15 required by this Section may be made subject to a deductible,
16 copayment, or coinsurance as long as the deductible, copayment,
17 or coinsurance required does not exceed the deductible,
18 copayment, or coinsurance requirement of the policy or health
19 benefit plan for the same service provided through in-person
20 care.

21 (g) Records for telehealth services shall meet the
22 following requirements:

23 (1) The originating and distant sites shall not be
24 required to maintain or present as a condition of payment
25 any additional medical records to document the telehealth
26 services provided other than what is required under

1 applicable State or federal law.

2 (2) Appropriate steps must be taken by the originating
3 and distant site staff to ensure patient confidentiality,
4 based on technical advances in compliance with all federal
5 and State privacy and confidentiality laws.

6 (3) The billing records related to the following
7 through the use of the telecommunication system shall be
8 maintained:

9 (A) Current Procedural Terminology codes or any
10 successor codes;

11 (B) Healthcare Common Procedure Coding System
12 services or any successor services; and

13 (C) Level 1 technical component facility fees or
14 any successor fees.

15 (h) Originating sites shall have no restrictions with
16 respect to geographic location or other restrictions that limit
17 the type and location or originating sites.

18 (i) Nothing in this Section precludes a health benefit
19 policy or plan from undertaking utilization review to determine
20 the appropriateness of telehealth as a means of delivering a
21 health care service, provided that the determination is made in
22 the same manner as those regarding the same service when it is
23 delivered in person.

24 (j) Notwithstanding any other provision of law, this
25 Section does not authorize a health benefit policy or plan to
26 require the use of telehealth. A health care provider is not

1 required to use telehealth. A patient is not required to use
2 telehealth if the patient chooses in-person care.

3 ~~(b) If an individual or group policy of accident or health~~
4 ~~insurance provides coverage for telehealth services, then it~~
5 ~~must comply with the following:~~

6 ~~(1) An individual or group policy of accident or health~~
7 ~~insurance providing telehealth services may not:~~

8 ~~(A) require that in person contact occur between a~~
9 ~~health care provider and a patient;~~

10 ~~(B) require the health care provider to document a~~
11 ~~barrier to an in-person consultation for coverage of~~
12 ~~services to be provided through telehealth;~~

13 ~~(C) require the use of telehealth when the health~~
14 ~~care provider has determined that it is not~~
15 ~~appropriate; or~~

16 ~~(D) require the use of telehealth when a patient~~
17 ~~chooses an in person consultation.~~

18 ~~(2) Deductibles, copayments, or coinsurance applicable~~
19 ~~to services provided through telehealth shall not exceed~~
20 ~~the deductibles, copayments, or coinsurance required by~~
21 ~~the individual or group policy of accident or health~~
22 ~~insurance for the same services provided through in person~~
23 ~~consultation.~~

24 (1) (e) Nothing in this Section precludes ~~shall be deemed~~
25 ~~as precluding~~ a health insurer from providing benefits for
26 other services, including, but not limited to, email, text

1 messaging, the use of mobile applications, remote monitoring
2 services, other monitoring services, or oral communications
3 otherwise covered under the policy.

4 (Source: P.A. 98-1091, eff. 1-1-15.)

5 (Text of Section after amendment by P.A. 100-1009)

6 Sec. 356z.22. Coverage for telehealth services.

7 (a) For purposes of this Section:

8 "Distant site" means the location at which the health care
9 provider rendering the telehealth service is located.

10 "Health care provider" means a health care professional
11 licensed in Illinois.

12 "Interactive telecommunication system" means multimedia
13 communications equipment that includes, at a minimum, audio and
14 video equipment permitting 2-way, real-time interactive
15 communication between the patient and the distant site
16 provider. "Interactive telecommunication system" does not
17 include a facsimile machine.

18 "Originating site" means the location at which the patient
19 receiving the service is located.

20 "Telehealth" means the use of telecommunications services
21 to encompass 4 modalities: store and forward technologies,
22 remote monitoring, live consultation, and mobile health; and
23 which shall include, but not be limited to, real-time video
24 conferencing-based communication, secure interactive and
25 non-interactive web-based communication, and secure

1 asynchronous information exchange, to transmit patient medical
2 information, including diagnostic-quality digital images and
3 laboratory results for medical interpretation and diagnosis,
4 for the purpose of delivering enhanced health care services and
5 information while a patient is at an originating site and the
6 health care provider is at a distant site. "Telehealth"
7 includes telepsychiatry and telemedicine. "Telehealth"
8 includes psychiatric services, as well as services provided by
9 all other professional disciplines delivered through
10 telecommunication systems. "Telehealth" does not include a
11 facsimile transmission.

12 ~~"Interactive telecommunications system" means an audio and~~
13 ~~video system permitting 2-way, live interactive communication~~
14 ~~between the patient and the distant site health care provider.~~

15 ~~"Telehealth services" means the delivery of covered health~~
16 ~~care services by way of an interactive telecommunications~~
17 ~~system.~~

18 (b) This Section applies to an individual or group policy
19 of insurance issued, amended, renewed, delivered, continued,
20 or executed on or after the effective date of this amendatory
21 Act of the 100th General Assembly that pays health benefits,
22 including, but not limited to, such health benefit policies or
23 plans as:

24 (1) the fee-for-service and managed care medical
25 assistance programs under Article V of the Illinois Public
26 Aid Code;

1 (2) accident, health, or sickness coverage plans and
2 policies;

3 (3) mutual benefit society plans and policies;

4 (4) automobile medical benefits plans and policies;

5 (5) plans and policies subject to the federal Employee
6 Retirement Income Security Act of 1974;

7 (6) third-party administrator plans and policies;

8 (7) travel insurance medical benefits plans and
9 policies;

10 (8) supplemental insurance plans and policies;

11 (9) life care contracts, plans, and policies;

12 (10) accident-only plans and policies;

13 (11) specified disease plans and policies;

14 (12) hospital plans and policies providing fixed daily
15 benefits only;

16 (13) Medicare supplemental plans and policies;

17 (14) long-term care plans and policies;

18 (15) short-term major medical plans and policies of 6
19 months' duration or less;

20 (16) hospital indemnity plans or policies; and

21 (17) any other supplemental health plan or policy.

22 (c) A health benefit policy or plan shall provide coverage
23 for the cost of health care services provided through
24 telehealth, as provided under this Section, on the same basis
25 and at the same rate that the health insurer is responsible for
26 coverage for providing the same service through in-person

1 treatment or consultation. Health benefit policies or plans
2 shall not exclude a service for coverage solely because the
3 service is provided through telehealth services.

4 (d) All telehealth services provided under this Section
5 shall meet the following requirements:

6 (1) Medical data may be exchanged through an
7 interactive telecommunication system.

8 (2) The interactive telecommunication system must, at
9 a minimum, have the capability of allowing the consulting
10 distant site provider to examine the patient sufficiently
11 to allow proper diagnosis of the involved body system when
12 necessary and appropriate. The interactive
13 telecommunication system must also be capable of
14 transmitting clearly audible heart tones and lung sounds,
15 as well as clear video images of the patient and any
16 diagnostic tools, such as radiographs, when necessary and
17 appropriate.

18 (3) An in-person visit between a patient and a health
19 care provider prior to the delivery of telehealth services
20 shall not be required.

21 (4) Other than consents required for treatment for
22 in-person care, no informed or other consents shall be
23 required for the patient to receive care through
24 telehealth.

25 (5) A telepresenter shall not be required to be present
26 with the patient unless medically necessary.

1 (e) Email systems and text messaging may be used as
2 interactive telecommunication systems for existing patients.

3 (f) Benefits for a service provided through telehealth
4 required by this Section may be made subject to a deductible,
5 copayment, or coinsurance as long as the deductible, copayment,
6 or coinsurance required does not exceed the deductible,
7 copayment, or coinsurance requirement of the policy or health
8 benefit plan for the same service provided through in-person
9 care.

10 (g) Records for telehealth services shall meet the
11 following requirements:

12 (1) The originating and distant sites shall not be
13 required to maintain or present as a condition of payment
14 any additional medical records to document the telehealth
15 services provided other than what is required under
16 applicable State or federal law.

17 (2) Appropriate steps must be taken by the originating
18 and distant site staff to ensure patient confidentiality,
19 based on technical advances in compliance with all federal
20 and State privacy and confidentiality laws.

21 (3) The billing records related to the following
22 through the use of the telecommunication system shall be
23 maintained:

24 (A) Current Procedural Terminology codes or any
25 successor codes;

26 (B) Healthcare Common Procedure Coding System

1 services or any successor services; and

2 (C) Level 1 technical component facility fees or
3 any successor fees.

4 (h) Originating sites shall have no restrictions with
5 respect to geographic location or other restrictions that limit
6 the type and location of originating sites.

7 (i) Nothing in this Section precludes a health benefit
8 policy or plan from undertaking utilization review to determine
9 the appropriateness of telehealth as a means of delivering a
10 health care service, provided that the determination is made in
11 the same manner as those regarding the same service when it is
12 delivered in person.

13 (j) Notwithstanding any other provision of law, this
14 Section does not authorize a health benefit policy or plan to
15 require the use of telehealth. A health care provider is not
16 required to use telehealth. A patient is not required to use
17 telehealth if the patient chooses in-person care.

18 ~~(b) If an individual or group policy of accident or health~~
19 ~~insurance provides coverage for telehealth services, then it~~
20 ~~must comply with the following:~~

21 ~~(1) An individual or group policy of accident or health~~
22 ~~insurance providing telehealth services may not:~~

23 ~~(A) require that in-person contact occur between a~~
24 ~~health care provider and a patient;~~

25 ~~(B) require the health care provider to document a~~
26 ~~barrier to an in-person consultation for coverage of~~

1 ~~services to be provided through telehealth;~~

2 ~~(C) require the use of telehealth when the health~~
3 ~~care provider has determined that it is not~~
4 ~~appropriate; or~~

5 ~~(D) require the use of telehealth when a patient~~
6 ~~chooses an in person consultation.~~

7 ~~(2) Deductibles, copayments, or coinsurance applicable~~
8 ~~to services provided through telehealth shall not exceed~~
9 ~~the deductibles, copayments, or coinsurance required by~~
10 ~~the individual or group policy of accident or health~~
11 ~~insurance for the same services provided through in person~~
12 ~~consultation.~~

13 (k) ~~(b-5)~~ If an individual or group policy of accident or
14 health insurance provides coverage for telehealth services, it
15 must provide coverage for licensed dietitian nutritionists and
16 certified diabetes educators who counsel senior diabetes
17 patients in the senior diabetes patients' homes to remove the
18 hurdle of transportation for senior diabetes patients to
19 receive treatment.

20 (l) ~~(e)~~ Nothing in this Section precludes ~~shall be deemed~~
21 ~~as precluding~~ a health insurer from providing benefits for
22 other services, including, but not limited to, email, text
23 messaging, the use of mobile applications, remote monitoring
24 services, other monitoring services, or oral communications
25 otherwise covered under the policy.

26 (Source: P.A. 100-1009, eff. 1-1-19.)

1 Section 10. The Illinois Public Aid Code is amended by
2 adding Section 5-5.25a as follows:

3 (305 ILCS 5/5-5.25a new)

4 Sec. 5-5.25a. Telehealth services.

5 (a) Definitions. As used in this Section:

6 "Asynchronous store and forward technology" means the
7 transmission of a patient's medical information from an
8 originating site to the provider at the distant site. The
9 provider at the distant site can review the medical case
10 without the patient being present. An asynchronous
11 telecommunication system in single media format does not
12 include telephone calls, images transmitted through facsimile
13 machines, and text messages without visualization of the
14 patient (email). Photographs visualized by a telecommunication
15 system must be specific to the patient's medical condition and
16 adequate for furnishing or confirming a diagnosis or treatment
17 plan. Dermatological photographs (for example, a photograph of
18 a skin lesion) may be considered to meet the requirement of a
19 single media format under this Section.

20 "Distant site" means the location at which the provider
21 rendering the telehealth service is located.

22 "Facility fee" means the reimbursement made to any Illinois
23 Medicaid participating health care organization or Illinois
24 Medicaid participating provider as originating sites.

1 "Illinois Medicaid participating provider" means any
2 health care provider, including a practitioner described in
3 Section 5-8, a licensed clinical social worker, a licensed
4 clinical psychologist, a licensed advanced practice registered
5 nurse with psychiatric specialty, a licensed nutritionist, or
6 any other certified nutrition professional, who is eligible to
7 participate in the State's fee-for-service or managed care
8 medical assistance program and who is employed by an Illinois
9 Medicaid participating health care organization.

10 "Illinois Medicaid participating health care organization"
11 means any health care organization that is eligible to
12 participate in the State's fee-for-service or managed care
13 medical assistance program and that has an office or is
14 affiliated with an organization that has an office located in
15 the State of Illinois.

16 "Interactive telecommunication system" means multimedia
17 communications equipment that includes, at a minimum, audio and
18 video equipment permitting 2-way, real-time interactive
19 communication between the patient and the distant site
20 provider. "Interactive telecommunication system" does not
21 include a facsimile machine.

22 "Originating site" means the location at which the patient
23 receiving the service is located.

24 "Telecommunication system" means an asynchronous store and
25 forward technology or an interactive telecommunication system
26 that is used to transmit data between the originating and

1 distant sites.

2 "Telehealth" means the use of telecommunications services
3 to encompass 4 modalities: store and forward technologies,
4 remote monitoring, live consultation, and mobile health; and
5 which shall include, but not be limited to, real-time video
6 conferencing-based communication, secure interactive and
7 non-interactive web-based communication, and secure
8 asynchronous information exchange, to transmit patient medical
9 information, including diagnostic-quality digital images and
10 laboratory results for medical interpretation and diagnosis,
11 for the purpose of delivering enhanced health care services and
12 information while a patient is at an originating site and the
13 health care provider is at a distant site. "Telehealth"
14 includes telepsychiatry and telemedicine. "Telehealth"
15 includes psychiatric services, as well as services provided by
16 all other professional disciplines delivered through
17 telecommunication systems. "Telehealth" does not include a
18 facsimile transmission.

19 (b) Payment. Any fee-for-service or managed care medical
20 assistance program shall provide coverage for the cost of
21 health care services provided through telehealth, as provided
22 under this Section, on the same basis and at the same rate as
23 established for coverage for providing the same service through
24 in-person treatment or consultation. Fee-for-service or
25 managed care medical assistance programs shall not exclude a
26 service for coverage solely because the service is provided

1 through telehealth services. This Section applies to any plan
2 that is issued, amended, renewed, delivered, continued, or
3 executed in the State of Illinois.

4 (c) Telehealth services requirements. All telehealth
5 services provided under this Section shall meet the following
6 requirements:

7 (1) The distant site provider must be an eligible
8 Illinois Medicaid participating provider or Illinois
9 Medicaid participating health care organization

10 (2) The originating and distant site provider must not
11 be terminated, suspended, or barred from the State's
12 fee-for-service or managed care medical assistance
13 program.

14 (3) Medical data may be exchanged through an
15 interactive telecommunication system.

16 (4) The interactive telecommunication system must, at
17 a minimum, have the capability of allowing the consulting
18 distant site provider to examine the patient sufficiently
19 to allow proper diagnosis of the involved body system when
20 necessary and appropriate. The interactive
21 telecommunication system must also be capable of
22 transmitting clearly audible heart tones and lung sounds,
23 as well as clear video images of the patient and any
24 diagnostic tools, such as radiographs, when necessary and
25 appropriate.

26 (d) Telehealth service prohibitions.

1 (1) An in-person visit between a patient and a health
2 care provider prior to the delivery of telehealth services
3 shall not be required for medical assistance coverage under
4 the State's fee-for-service or managed care medical
5 assistance program.

6 (2) Other than consents required for treatment for
7 in-person care, no informed or other consents shall be
8 required for the patient to receive care through
9 telehealth.

10 (3) A telepresenter shall not be required to be present
11 with the patient unless medically necessary.

12 (e) Email systems and text messaging may be used as
13 interactive telecommunication systems for existing patients.

14 (f) Reimbursement for telehealth services.

15 (1) Originating site reimbursement.

16 (A) A facility fee shall be paid to providers as
17 defined in subsection (a) of this Section.

18 (B) Local education agencies may submit telehealth
19 services as a certified expenditure.

20 (C) All Illinois Medicaid participating health
21 care organizations and providers that receive
22 reimbursement for a patient's room and board shall also
23 receive the facility fee.

24 (2) Reimbursement for rendering provider at the
25 distant site.

26 (A) Participating providers shall be reimbursed

1 for the appropriate Current Procedural Terminology
2 code for the telehealth service rendered.

3 (B) Nonparticipating providers may be reimbursed
4 by the originating site provider but shall not be
5 eligible for reimbursement from the Department.

6 (g) Copayments. Benefits for a service provided through
7 telehealth as required under this Section may be made subject
8 to a deductible, copayment, or coinsurance as long as the
9 deductible, copayment, or coinsurance required does not exceed
10 any deductible, copayment, or coinsurance established under
11 the fee-for-service or managed care medical assistance program
12 for the same service provided during an in-person visit.

13 (h) Record requirements for telehealth services.

14 (1) Medical records documenting the telehealth
15 services provided must be maintained by the originating
16 site in accordance with the requirements under 89 Ill. Adm.
17 Code. 140.28. The originating and distant sites shall not
18 be required to maintain or present as a condition of
19 payment any additional medical records to document the
20 telehealth services provided other than what is required
21 for in-person care under applicable State or federal law.

22 (2) Appropriate steps must be taken by the originating
23 and distant site staff to ensure patient confidentiality,
24 based on technical advances in compliance with all federal
25 and State privacy and confidentiality laws.

26 (3) The billing records related to the following

1 through the use of the telecommunication system shall be
2 maintained as provided in 89 Ill. Adm. Code 140.28:

3 (A) Current Procedural Terminology codes or any
4 successor codes;

5 (B) Healthcare Common Procedure Coding System
6 services or any successor services; and

7 (C) Level 1 technical component facility fees or
8 any successor fees.

9 (i) Originating sites shall have no restrictions with
10 respect to geographic location or other restrictions that limit
11 the type and location of originating sites.

12 (j) Implementation. The Department shall implement the
13 provisions of this Section 60 days after the effective date of
14 this amendatory Act of the 100th General Assembly.

15 (305 ILCS 5/5-5.25 rep.)

16 Section 15. The Illinois Public Aid Code is amended by
17 repealing Section 5-5.25.

18 Section 95. No acceleration or delay. Where this Act makes
19 changes in a statute that is represented in this Act by text
20 that is not yet or no longer in effect (for example, a Section
21 represented by multiple versions), the use of that text does
22 not accelerate or delay the taking effect of (i) the changes
23 made by this Act or (ii) provisions derived from any other
24 Public Act."