



102ND GENERAL ASSEMBLY

State of Illinois

2021 and 2022

HB3308

Introduced 2/19/2021, by Rep. Thaddeus Jones

SYNOPSIS AS INTRODUCED:

215 ILCS 5/356z.22

Amends the Illinois Insurance Code. Includes the delivery of covered health care services by way of telephone usage in the definition of "telehealth services". Provides that health care services that are covered under an individual or group policy of accident or health insurance must be covered when delivered via telehealth services when clinically appropriate, subject to specified conditions (rather than requiring an individual or group policy of accident or health insurance to comply with specified conditions if it provides coverage for telehealth services). Provides that patient cost-sharing may be no more than if the health care service were delivered in person. Provides that no excepted benefit policy may deny or reduce any benefit to a patient based on the use of clinically appropriate telehealth services in the course of satisfying the policy's benefit criteria.

LRB102 11877 BMS 17213 b

FISCAL NOTE ACT
MAY APPLY

STATE MANDATES
ACT MAY REQUIRE
REIMBURSEMENT

1 AN ACT concerning regulation.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

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

6 (215 ILCS 5/356z.22)

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

8 (a) For purposes of this Section:

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

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

14 "Telehealth services" means the delivery of covered health
15 care services by way of an interactive telecommunications
16 system or telephone usage.

17 (b) Health care services that are covered under ~~if~~ an
18 individual or group policy of accident or health insurance
19 must be covered when delivered via ~~provides coverage for~~
20 telehealth services when clinically appropriate, subject to
21 ~~then it must comply with~~ the following:

22 (1) Telehealth benefits provided in an ~~An~~ individual
23 or group policy of accident or health insurance ~~providing~~

1 ~~telehealth services~~ may not:

2 (A) require that in-person contact occur between a
3 health care provider and a patient;

4 (B) require the health care provider to document a
5 barrier to an in-person consultation for coverage of
6 services to be provided through telehealth;

7 (C) require the use of telehealth when the health
8 care provider has determined that it is not
9 appropriate; or

10 (D) require the use of telehealth when a patient
11 chooses an in-person consultation.

12 (2) Patient cost-sharing may be no more than if the
13 health care service were delivered in person. Deductibles,
14 copayments, or coinsurance applicable to services provided
15 through telehealth shall not exceed the deductibles,
16 copayments, or coinsurance required by the individual or
17 group policy of accident or health insurance for the same
18 services provided through in-person consultation.

19 (b-5) If an individual or group policy of accident or
20 health insurance provides coverage for telehealth services, it
21 must provide coverage for licensed dietitian nutritionists and
22 certified diabetes educators who counsel senior diabetes
23 patients in the senior diabetes patients' homes to remove the
24 hurdle of transportation for senior diabetes patients to
25 receive treatment.

26 (c) Nothing in this Section shall be deemed as precluding

1 a health insurer from providing benefits for other services,
2 including, but not limited to, remote monitoring services,
3 other monitoring services, or oral communications otherwise
4 covered under the policy.

5 (d) Notwithstanding Section 352b of this Code, an excepted
6 benefit policy is subject to this Section if the policy covers
7 the patient's use of health care services, whether on an
8 expense-incurred or a per capita prepaid basis or otherwise.
9 This Section does not apply to an excepted benefit policy with
10 respect to lump-sum or periodic payments that the policy
11 covers based on the occurrence of a diagnosis with a specified
12 disease, an accident, or other qualifying health condition,
13 nor does this Section apply to lump sum or periodic payments
14 for expenses other than health care services. However, no
15 policy may deny or reduce any benefit to a patient based on the
16 use of clinically appropriate telehealth services in the
17 course of satisfying the policy's benefit criteria.
18 (Source: P.A. 100-1009, eff. 1-1-19.)