

As Introduced

132nd General Assembly

Regular Session

2017-2018

H. B. No. 546

Representative Patton

Cosponsors: Representatives Gavarone, Smith, K.

A BILL

To enact section 3902.30 of the Revised Code to 1
prohibit health benefit plans from treating 2
telemedicine services differently from in-person 3
health care services solely because they are 4
provided as telemedicine services. 5

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:

Section 1. That section 3902.30 of the Revised Code be 6
enacted to read as follows: 7

Sec. 3902.30. (A) As used in this section: 8

(1) "Health benefit plan," "health care services," and 9
"health plan issuer" have the same meanings as in section 10
3922.01 of the Revised Code. 11

(2) "Health care professional" means any of the following: 12

(a) A physician licensed under Chapter 4731. of the 13
Revised Code to practice medicine and surgery, osteopathic 14
medicine and surgery, or podiatric medicine and surgery; 15

(b) The holder of a telemedicine certificate issued under 16
section 4731.296 of the Revised Code; 17

(c) A physician assistant licensed under Chapter 4731. of 18
the Revised Code; 19

(d) An advanced practice registered nurse as defined in 20
section 4723.01 of the Revised Code. 21

(3) "In-person health care services" means health care 22
services delivered by a health care professional through the use 23
of any communication method where the professional and patient 24
are simultaneously present in the same geographic location. 25

(4) "Recipient" means a patient receiving health care 26
services or a health care professional with whom the provider of 27
health care services is consulting regarding the patient. 28

(5) "Telemedicine services" means a mode of providing 29
health care services through synchronous or asynchronous 30
information and communication technology by a health care 31
professional, within the professional's scope of practice, who 32
is located at a site other than the site where the recipient is 33
located. 34

(B) (1) A health benefit plan shall provide coverage for 35
telemedicine services on the same basis and to the same extent 36
that the plan provides coverage for the provision of in-person 37
health care services. 38

(2) A health benefit plan shall not exclude coverage for a 39
service solely because it is provided as a telemedicine service. 40

(C) A health benefit plan shall not impose any annual or 41
lifetime benefit maximum in relation to telemedicine services 42
other than such a benefit maximum imposed on all benefits 43
offered under the plan. 44

(D) This section shall not be construed as prohibiting a 45

health benefit plan from assessing cost-sharing requirements to 46
a covered individual for telemedicine services, provided that 47
such cost-sharing requirements for telemedicine services are not 48
greater than those for comparable in-person health care 49
services. 50

(E) This section shall not be construed as requiring a 51
health plan issuer to reimburse a physician for any costs or 52
fees associated with the provision of telemedicine services that 53
would be in addition to or greater than the standard 54
reimbursement for comparable in-person health care services. 55

(F) This section applies to all health benefit plans 56
issued, offered, or renewed on or after January 1, 2019. 57