To amend the Public Health Service Act to require group health plans and health insurance issuers offering group or individual health insurance coverage to provide coverage for services furnished via telehealth if such services would be covered if furnished in-person, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

SEPTEMBER 17, 2020

Mr. PHILLIPS (for himself, Mr. CHABOT, and Mr. MORELLE) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend the Public Health Service Act to require group health plans and health insurance issuers offering group or individual health insurance coverage to provide coverage for services furnished via telehealth if such services would be covered if furnished in-person, and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the “Telehealth Coverage and Payment Parity Act”.
SEC. 2. REQUIRING GROUP HEALTH PLANS AND HEALTH
INSURANCE ISSUERS OFFERING GROUP OR
INDIVIDUAL HEALTH INSURANCE COVERAGE
TO PROVIDE COVERAGE FOR SERVICES FUR-
NISHED VIA TELEHEALTH IF SUCH SERVICES
WOULD BE COVERED IF FURNISHED IN-PER-
SON.

(a) Public Health Service Act.—Subpart II of
part A of title XXVII of the Public Health Service Act
(42 U.S.C. 300gg–11 et seq.) is amended by adding at
the end the following new section:

“SEC. 2730. REQUIRED COVERAGE OF TELEHEALTH SERV-
ICES.

“(a) In General.—A group health plan and a health
insurance issuer offering group or individual health insur-
ance coverage, including a grandfathered health plan (as
defined in section 1251(e) of the Patient Protection and
Affordable Care Act (42 U.S.C. 18011(e)))—
“(1) shall—
“(A) provide benefits under such plan or
such coverage for any eligible service (as de-
defined in subsection (b)), including a mental
health and substance use disorder service, fur-
nished via a qualifying telecommunications sys-
tem (as defined in subsection (b)) by a health
care provider to an individual who is a partici-
pant, beneficiary, or enrollee under such plan or
such coverage, notwithstanding that such pro-
vider furnishing such service is not at the same
location as the individual;

“(B) so provide such benefits for such
service under the same terms and with applica-
tion of the same cost-sharing requirements (in-
cluding a deductible, copayment, or coinsur-
ance) as would apply if such service were fur-
nished by such provider to such individual in-
person;

“(C) reimburse such provider for such
service in an amount equal to the amount of re-
imbursement for such service had such service
been furnished by such provider to such indi-
vidual in-person;

“(D) not impose any requirement under
such plan or coverage that such provider have
a prior relationship with such individual; and

“(E) not restrict the ability of any health
care provider with a contractual relationship for
furnishing an eligible service under such plan or
coverage from furnishing such service via a
qualifying telecommunications system, and shall
not establish incentives or penalties under such
plan or coverage for receiving such an eligible
service from such a provider via such a system;
and
“(2) may waive any cost-sharing requirement
(including application of a deductible, copayment, or
coinsurance) for an item or service furnished for
purposes of diagnosing or treating COVID-19, in-
cluding any such service that is an eligible service
furnished via a qualifying telecommunications sys-
tem.
“(b) DEFINITIONS.—In this section:
“(1) ELIGIBLE SERVICE.—The term ‘eligible
service’ means, with respect to a group health plan
and a health insurance issuer offering group or indi-
vidual health insurance coverage, a service—
“(A) for which benefits are provided under
such plan or such coverage when such service is
furnished in-person;
“(B) that is medically necessary (as deter-
mined by the health care provider furnishing
such service); and
“(C) that is able to be safely and effec-
tively furnished via a telecommunications sys-
tem.
“(2) QUALIFYING TELECOMMUNICATIONS SYSTEM.—The term ‘qualifying telecommunications system’ means a telecommunications system that includes, at a minimum, audio capabilities permitting two-way, real-time interactive communication between the individual receiving an eligible service via such system and the health care provider furnishing such system, including a telephone, videoconferencing system, internet communications system, streaming media communications system, and such other system as specified by the Secretary of Health and Human Services.”.

(b) APPLICATION.—The amendment made by subsection (a) shall apply with respect to plan years beginning on or after January 1, 2021.