# SENATE BILL REPORT SB 5325

As of February 19, 2021

**Title:** An act relating to audio-only telemedicine.

**Brief Description:** Concerning audio-only telemedicine. [Revised for 1st Substitute:

Concerning telemedicine.]

**Sponsors:** Senators Muzzall, Cleveland, Dozier, Frockt, Keiser, Randall, Rivers and Robinson.

### **Brief History:**

Committee Activity: Health & Long Term Care: 2/05/21, 2/12/21 [DPS-WM].

Ways & Means: 2/19/21.

## **Brief Summary of First Substitute Bill**

 Requires behavioral health administrative service organizations and manged care organizations to reimburse providers for behavioral health service provided to any covered person if the services meet certain requirements.

#### SENATE COMMITTEE ON HEALTH & LONG TERM CARE

**Majority Report:** That Substitute Senate Bill No. 5325 be substituted therefor, and the substitute bill do pass and be referred to Committee on Ways & Means.

Signed by Senators Cleveland, Chair; Frockt, Vice Chair; Muzzall, Ranking Member; Conway, Holy, Keiser, Padden, Randall, Rivers, Robinson, Van De Wege and Wilson, J.

**Staff:** Greg Attanasio (786-7410)

#### SENATE COMMITTEE ON WAYS & MEANS

**Staff:** Sandy Stith (786-7710)

Senate Bill Report - 1 - SB 5325

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not part of the legislation nor does it constitute a statement of legislative intent.

**Background:** A health plan offered by a health carrier, a health plan offered to school or state employees and their dependents, a Medicaid managed care plan, and a behavioral health administrative services organization—for covered persons under 18 years of age—must reimburse providers for health care services provided through telemedicine or store and forward technology if:

- the services are covered services;
- the services are medically necessary;
- the services are essential health benefits under the federal Patient Protection and Affordable Care Act;
- the services are determined to be safely and effectively provided through telemedicine or store and forward technology according to generally accepted health care practices and standards; and
- the technology meets state and federal standards governing the privacy and security of protected health information.

**Summary of Bill (First Substitute):** Behavioral health administrative services organizations and managed care organizations shall reimburse a provider for a behavioral health service provided to a covered person through telemedicine or store and forward technology if:

- the services are covered services;
- the services are medically necessary;
- the services are essential health benefits under the federal Patient Protection and Affordable Care Act;
- the services are determined to be safely and effectively provided through telemedicine or store and forward technology according to generally accepted health care practices and standards; and
- the technology meets state and federal standards governing the privacy and security of protected health information.

# EFFECT OF CHANGES MADE BY HEALTH & LONG TERM CARE COMMITTEE (First Substitute):

- Removes all audio-only telemedicine amendatory language.
- Removes the provider reimbursement limitation from behavioral health administrative services organizations for telemedicine services provided to persons 18 years old and under, and allows providers to be reimbursed for telemedicine services provided to any covered person.
- Changes to the title to "concerning telemedicine."

**Appropriation:** None.

**Fiscal Note:** Requested on February 3, 2021.

Creates Committee/Commission/Task Force that includes Legislative members: No.

**Effective Date:** Ninety days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony on Proposed Substitute (Health & Long Term Care): The committee recommended a different version of the bill than what was heard. PRO: This bill recognizes that the phone can be a viable modality of telemedicine. Audio only is very important for chronic disease care and behavioral health. Audio-only telemedicine increases access in rural areas where other forms of telemedicine are a barrier to care. The bill addresses inequities in access to care.

OTHER: A prior in person meeting requirement for audio-only telemedicine is a barrier to care. Audio is equal to other modalities and the only lifeline for many people. The bill should take an equity approach to reimbursement instead of parity.

**Persons Testifying (Health & Long Term Care):** PRO: Senator Ron Muzzall, Prime Sponsor; Jane Beyer, Office of the Insurance Commissioner; Bob Cooper, National Association of Social Workers Washington Chapter and Washington Association of Drug Courts; Alan Fisher, Mid Valley Hospital; Stephanie Simpson, Bleeding Disorder Foundation of Washington; Jeb Shepard, Washington State Medical Association.

OTHER: Claudia Tucker, Teladoc Health, Inc.; Tom Holt, Zoom+ Care; Chris Bandoli, Association of Washington Healthcare Plans; Marissa Ingalls, Coordinated Care; Courtney Smith, Kaiser Permanente; Dr. Judy Zerzan-Thul, Washington Health Care Authority.

Persons Signed In To Testify But Not Testifying (Health & Long Term Care): PRO: Stephanie Simpson, Bleeding Disorder Foundation of Washington; Lisa Thatcher, Washington State Hospital Association; Angela Ross, ND, Washington Association of Naturopathic Physicians.

Staff Summary of Public Testimony (Ways & Means): None.

Persons Testifying (Ways & Means): No one.

Persons Signed In To Testify But Not Testifying (Ways & Means): No one.

Senate Bill Report - 3 - SB 5325