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Rep. Smola Supports Bill Expanding Telehealth Option

BOSTON – Representative Todd M. Smola (R-Warren, Ranking Member, Committee on Ways & Means) today supported health care legislation that will provide Massachusetts residents with increased access to telehealth services during the COVID-19 global pandemic.

House Bill 4888, An Act to promote resilience in our health care system, was engrossed by the House of Representatives on July 29 by a vote of 158-0, following two days of debate. The Senate previously passed its own version of the bill (Senate Bill 2796) on June 25.

Representative Smola said the House bill requires both public and private insurers to treat telehealth services in the same manner as in-person doctor visits, with deductibles, co-payments and co-insurance requirements not allowed to exceed the in-person rate. He said these rate parity protections are needed as more residents turn to telehealth as a safer option to help minimize their exposure to the 2019 novel coronavirus.

According to a July 24 CommonWealth Magazine article, 13 percent of medical claims filed nationally in April of 2020 were for telehealth, compared to less than 1 percent in April of 2019. The article also noted that Blue Cross Blue Shield of Massachusetts has processed 2.6 million telehealth claims since March 15.

Representative Smola said House Bill 4888 will keep rate parity between in-network telehealth services and in-person services in place until July 31, 2021. The bill also establishes a temporary out-of-network rate for emergency services, and prohibits cost-sharing requirements for all emergency and inpatient services related to COVID-19 delivered by in-network and out-of-network providers during the same time period.
House Bill 4888 also provides permanent rate parity protections for individuals receiving behavioral health services. These services include the diagnosis, treatment and management of patients with mental health or substance use disorders.

In addition, House Bill 4888 includes language:

- directing the Health Policy Commission, in consultation with the Center for Health Information and Analysis, to file a report by December 31, 2022 on telehealth service use in Massachusetts and its effects on health care access and system costs;
- prohibiting MassHealth and its contracted carriers from requiring prior authorization for patients to receive services at an urgent care facility; and
- requiring MassHealth to pay nursing facilities for a 20-day bed hold for any enrollee who is admitted to a hospital for treatment of the 2019 novel coronavirus;

Several amendments to the bill were adopted during floor debate, including proposals to:

- add inpatient services and cognitive rehabilitation services to the list of services related to the 2019 novel coronavirus that insurers must provide coverage for, through both in-network and out-of-network providers;
- allow for greater physician discretion in issuing prescriptions and refills to patients via telehealth without requiring an in-person visit;
- expand the requirement for providers to offer coverage for all emergency and inpatient services related to COVID-19 to include all medically necessary outpatient testing, including testing of asymptomatic individuals;
- prohibit acute care hospitals from discontinuing any essential health service while the COVID-19 State of Emergency remains in effect;
- direct the House of Representatives’ Commonwealth Resilience and Recovery Special Committee to hold a hearing to determine the available supplies of personal protective equipment (PPE) for acute care hospitals and other entities, and to determine anticipated demand for PPE; and
- require EOHHS to establish an online PPE exchange for health care and elder care providers;

The House and the Senate will now try to reconcile the differences between the two bills by appointing a conference committee. For additional information please contact Representative Smola at Todd.Smola@mahouse.gov or (617)722-2100.

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