

106TH CONGRESS
2D SESSION

H. R. 4841

To amend the Balanced Budget Act of 1997 to provide increased access to health care for Medicare beneficiaries through telehealth services.

IN THE HOUSE OF REPRESENTATIVES

JULY 12, 2000

Mr. THUNE (for himself, Mrs. EMERSON, Mr. MORAN of Kansas, Mr. NUSSLE, Mr. POMEROY, and Mrs. CLAYTON) introduced the following bill; which was referred to the Committee on Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To amend the Balanced Budget Act of 1997 to provide increased access to health care for Medicare beneficiaries through telehealth services.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Medicare Access to
5 Telehealth Services Act of 2000”.

1 **SEC. 2. REVISION OF MEDICARE REIMBURSEMENT FOR**
2 **TELEHEALTH SERVICES.**

3 Section 4206 of the Balanced Budget Act of 1997
4 (42 U.S.C. 1395l note) is amended to read as follows:

5 “(a) TELEHEALTH SERVICES REIMBURSED.—

6 “(1) IN GENERAL.—Not later than October 1,
7 2000, the Secretary of Health and Human Services
8 shall make payments from the Federal Supple-
9 mentary Medical Insurance Trust Fund in accord-
10 ance with the methodology described in subsection
11 (b) for services for which payment may be made
12 under part B of title XVIII of the Social Security
13 Act (42 U.S.C. 1395j et seq.) that are furnished via
14 a telecommunications system by a physician or prac-
15 titioner to an eligible telehealth beneficiary.

16 “(2) USE OF STORE-AND-FORWARD TECH-
17 NOLOGIES.—For purposes of paragraph (1), in the
18 case of any Federal telemedicine demonstration pro-
19 gram in Alaska or Hawaii, the term ‘telecommuni-
20 cations system’ includes store-and-forward tech-
21 nologies that provide for the asynchronous trans-
22 mission of health care information in single or multi-
23 media formats.

24 “(b) METHODOLOGY FOR DETERMINING AMOUNT OF
25 PAYMENTS.—

1 “(1) IN GENERAL.—The Secretary shall make
2 payment under this section as follows:

3 “(A) Subject to subparagraph (B), with re-
4 spect to a physician or practitioner located at a
5 distant site that furnishes a service to an eligi-
6 ble medicare beneficiary under subsection (a),
7 an amount equal to the amount that such phy-
8 sician or practitioner would have been paid had
9 the service been furnished without the use of a
10 telecommunications system.

11 “(B) In the case of a referring physician
12 or practitioner located at the originating site
13 with respect to the service furnished the eligible
14 medicare beneficiary for which payment is made
15 under subparagraph (A), the amount of the
16 payment under subparagraph (A) shall be
17 shared between the physician or practitioner lo-
18 cated at the distant site and such referring phy-
19 sician or practitioner.

20 “(C) With respect to an originating site, a
21 facility fee equal to—

22 “(i) for 2000 and 2001, \$20; and

23 “(ii) for a subsequent year, the facil-
24 ity fee under this subsection for the pre-
25 vious year increased by the percentage in-

1 crease in the MEI (as defined in section
2 1842(i)(3)) for such subsequent year.

3 “(2) APPLICATION OF PART B COINSURANCE
4 AND DEDUCTIBLE.—Any payment made under this
5 section shall be subject to the coinsurance and de-
6 ductible requirements under subsections (a)(1) and
7 (b) of section 1833 of the Social Security Act (42
8 U.S.C. 1395l).

9 “(c) TELEPRESENTER NOT REQUIRED.—Nothing in
10 this section shall be construed as requiring an eligible tele-
11 health beneficiary to be presented by a physician or practi-
12 tioner at the originating site for the furnishing of a service
13 via a telecommunications system.

14 “(d) COVERAGE OF ADDITIONAL SERVICES.—

15 “(1) STUDY AND REPORT ON ADDITIONAL
16 SERVICES.—

17 “(A) STUDY.—The Secretary of Health
18 and Human Services shall conduct a study to
19 identify services in addition to those described
20 in subsection (a)(1) that are appropriate for
21 payment under this section.

22 “(B) REPORT.—Not later than 2 years
23 after the date of enactment of this Act, the Sec-
24 retary shall submit to Congress a report on the
25 study conducted under subparagraph (A) to-

1 gether with such recommendations for legisla-
2 tion that the Secretary determines are appro-
3 prium.

4 “(2) IN GENERAL.—The Secretary shall provide
5 for payment under this section for services identified
6 in paragraph (1).

7 “(e) CONSTRUCTION RELATING TO HOME HEALTH
8 SERVICES.—

9 “(1) IN GENERAL.—Nothing in this section or
10 in section 1895 of the Social Security Act (42
11 U.S.C. 1395fff) shall be construed as preventing a
12 home health agency furnishing a home health unit of
13 service for which payment is made under the pro-
14 spective payment system established in such section
15 for such units of service from furnishing the service
16 via a telecommunications system.

17 “(2) LIMITATION.—The Secretary shall not
18 consider a home health service provided in the man-
19 ner described in paragraph (1) to be a home health
20 visit for purposes of—

21 “(A) determining the amount of payment
22 to be made under such prospective payment
23 system; or

24 “(B) any requirement relating to the cer-
25 tification of a physician required under section

1 1814(a)(2)(C) of such Act (42 U.S.C.
2 1395f(a)(2)(C)).

3 “(f) DEFINITIONS.—In this section:

4 “(1) ELIGIBLE TELEHEALTH BENEFICIARY.—

5 The term ‘eligible telehealth beneficiary’ means an
6 individual enrolled under part B of title XVIII of the
7 Social Security Act (42 U.S.C. 1395j et seq.) that
8 resides in—

9 “(A) an area that is designated as a health
10 professional shortage area under section
11 332(a)(1)(A) of the Public Health Service Act
12 (42 U.S.C. 254e(a)(1)(A));

13 “(B) a county that is not included in a
14 Metropolitan Statistical Area;

15 “(C) an inner-city area that is medically
16 underserved (as defined in section 330(b)(3) of
17 the Public Health Service Act (42 U.S.C.
18 254b(b)(3))); or

19 “(D) an area in which a Federal telemedi-
20 cine demonstration program is carried out.

21 “(2) PHYSICIAN.—The term ‘physician’ has the
22 meaning given that term in section 1861(r) of the
23 Social Security Act (42 U.S.C. 1395x(r))

24 “(3) PRACTITIONER.—The term ‘practitioner’
25 means—

1 “(A) a practitioner described in section
2 1842(b)(18)(C) of the Social Security Act (42
3 U.S.C. 1395u(b)(18)(C)); and

4 “(B) a physical, occupational, or speech
5 therapist.

6 “(4) DISTANT SITE.—The term ‘distant site’
7 means the site at which the physician or practitioner
8 is located at the time the service is provided via a
9 telecommunications system.

10 “(5) ORIGINATING SITE.—

11 “(A) IN GENERAL.—The term ‘originating
12 site’ means any site described in subparagraph
13 (B) at which the eligible telehealth beneficiary
14 is located at the time the service is furnished
15 via a telecommunications system.

16 “(B) SITES DESCRIBED.—The sites de-
17 scribed in this subparagraph are as follows:

18 “(i) On or after October 1, 2000—

19 “(I) the office of a physician or a
20 practitioner,

21 “(II) a critical access hospital (as
22 defined in section 1861(mm)(1) of the
23 Social Security Act (42 U.S.C.
24 1395x(mm)(1))),

1 “(III) a rural health clinic (as
2 defined in section 1861(aa)(2) of such
3 Act (42 U.S.C. 1395x(aa)(2))), and

4 “(IV) a Federally qualified health
5 center (as defined in section
6 1861(aa)(4) of such Act (42 U.S.C.
7 1395x(aa)(4))).

8 “(ii) On or after October 1, 2001—

9 “(I) a hospital (as defined in sec-
10 tion 1861(e) of such Act (42 U.S.C.
11 1395x(e))),

12 “(II) a skilled nursing facility (as
13 defined in section 1861(j) of such Act
14 (42 U.S.C. 1395x(j))),

15 “(III) a comprehensive outpatient
16 rehabilitation facility (as defined in
17 section 1861(cc)(2) of such Act (42
18 U.S.C. 1395x(cc)(2))),

19 “(IV) a renal dialysis facility (de-
20 scribed in section 1881(b)(1) of such
21 Act (42 U.S.C. 1395rr(b)(1))),

22 “(V) an ambulatory surgical cen-
23 ter (described in section 1833(i)(1)(A)
24 of such Act (42 U.S.C.
25 1395l(i)(1)(A))),

1 “(VI) a hospital or skilled nurs-
2 ing facility of the Indian Health Serv-
3 ice (under section 1880 of such Act
4 (42 U.S.C. 1395qq)), and

5 “(VII) a community mental
6 health center (as defined in section
7 1861(ff)(3)(B) of such Act (42 U.S.C.
8 1395x(ff)(3)(B))).

9 “(6) FEDERAL SUPPLEMENTARY MEDICAL IN-
10 SURANCE TRUST FUND.—The term ‘Federal Supple-
11 mentary Medical Insurance Trust Fund’ means the
12 trust fund established under section 1841 of the
13 Social Security Act (42 U.S.C. 1395t).”.

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