

117TH CONGRESS
1ST SESSION

S. 660

To require parity in the coverage of mental health and substance use disorder services provided to enrollees in private insurance plans, whether such services are provided in-person or through telehealth.

IN THE SENATE OF THE UNITED STATES

MARCH 10, 2021

Ms. SMITH (for herself and Ms. MURKOWSKI) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To require parity in the coverage of mental health and substance use disorder services provided to enrollees in private insurance plans, whether such services are provided in-person or through telehealth.

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 “Tele-Mental Health
5 Improvement Act”.

6 **SEC. 2. COVERAGE OF TELEHEALTH MENTAL HEALTH AND**
7 **SUBSTANCE USE DISORDER SERVICES.**

8 (a) IN GENERAL.—

1 (1) INSURER REQUIREMENTS.—During the ap-
2 plicable period described in subsection (g), if a group
3 health plan or group or individual health insurance
4 coverage provides coverage of a mental health or
5 substance use disorder service provided in-person the
6 group health plan or health insurance issuer offering
7 such group or individual health insurance cov-
8 erage—

9 (A) shall provide coverage of the service
10 provided through telehealth at the same rate as
11 the coverage for the same service provided in-
12 person (with the same cost-sharing for enrollees
13 and the same reimbursement rates for pro-
14 viders);

15 (B) shall ensure that providers not charge
16 enrollees facility fees for such services provided
17 through telehealth;

18 (C) may not impose additional barriers to
19 obtaining or providing such coverage for such
20 services through telehealth, compared to cov-
21 erage for such services provided in-person, such
22 as a prior authorization requirement that is
23 more rigorous than for in-person visits; and

24 (D) shall provide notice to enrollees, in-
25 forming such enrollees of how to access in-net-

1 work telehealth mental health and substance
2 use disorder services and the scope of their cov-
3 erage.

4 (2) PROVIDER REQUIREMENTS.—During the
5 applicable period described in subsection (g), if a
6 provider of a mental health or substance use dis-
7 order service provides such services via telehealth to
8 an enrollee in a group health plan or group or indi-
9 vidual health insurance coverage, the provider shall
10 not charge such enrollee, such group health plan, or
11 a health insurance issuer of such coverage facility
12 fees for such services.

13 (b) ENFORCEMENT.—

14 (1) INSURER REQUIREMENTS.—The provisions
15 of subsection (a)(1) shall be applied by the Secretary
16 of Health and Human Services, the Secretary of
17 Labor, and the Secretary of the Treasury to group
18 health plans and health insurance issuers offering
19 group or individual health insurance coverage as if
20 included in the provisions of part A of title XXVII
21 of the Public Health Service Act (42 U.S.C. 300gg
22 et seq.), part 7 of subtitle B of title I of the Em-
23 ployee Retirement Income Security Act of 1974 (29
24 U.S.C. 1181 et seq.), and subchapter B of chapter

1 100 of the Internal Revenue Code of 1986, as appli-
2 cable.

3 (2) PROVIDER REQUIREMENTS.—Subsection
4 (a)(2) shall be applied by the Secretary of Health
5 and Human Services and the Secretary of Labor to
6 providers as if included in the provisions of part E
7 of title XXVII of the Public Health Service Act.

8 (c) IMPLEMENTATION.—The Secretary of Health and
9 Human Services, Secretary of Labor, and Secretary of the
10 Treasury may implement the provisions of this section
11 through sub-regulatory guidance, program instruction, or
12 otherwise.

13 (d) DEFINITIONS.—In this section—

14 (1) the terms “group health plan”, “health in-
15 surance issuer”, and “health insurance coverage”
16 have the meanings given such terms in section 2791
17 of the Public Health Service Act (42 U.S.C. 300gg-
18 91), section 733 of the Employee Retirement Income
19 Security Act of 1974 (29 U.S.C. 1191b), and section
20 9832 of the Internal Revenue Code of 1986, as ap-
21 plicable; and

22 (2) the term “telehealth services” has the
23 meaning given such term in section 330I(a) of the
24 Public Health Service Act (42 U.S.C. 254c-14(a)),

1 and includes 2-way video communication, and audio-
2 only communication.

3 (e) RULE OF CONSTRUCTION.—Nothing in this sec-
4 tion shall prevent the application of any State law that
5 is not inconsistent with this section.

6 (f) REPORT TO CONGRESS.—Not later than 180 days
7 after the conclusion of the public health emergency de-
8 scribed in subsection (a), the Secretary of Health and
9 Human Services shall submit to the Committee on Health,
10 Education, Labor, and Pensions of the Senate, the Com-
11 mittee on Education and Labor of the House of Rep-
12 resentatives, and the Committee on Energy and Commerce
13 of the House of Representatives on the impacts the re-
14 quirement under subsection (a) has on the use of both
15 telehealth services and health services provided in-person.

16 (g) APPLICABLE PERIOD.—The applicable period de-
17 scribed in subsection (a) is the period beginning on the
18 date of enactment of this Act and ending on the date that
19 is 90 days after the public health emergency declared by
20 the Secretary of Health and Human Services under sec-
21 tion 319 of the Public Health Service Act (42 U.S.C.
22 247d) on January 31, 2020, with respect to COVID–19,
23 expires.

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