

Lawmakers reach agreement for telehealth coverage

Bill extends mandate for insurance carriers to cover costs of virtual appointments

By [Matt Stout](#) Globe Staff, Updated December 22, 2020, 7:31 p.m.

Massachusetts House and Senate leaders said Tuesday they've reached a deal on legislation that would mandate insurance carriers cover telehealth services in any case where in-person services would be covered, extending emergency requirements the state had put in place amid the pandemic.

The [70-page compromise bill](#) released by legislative leaders would also require insurers to cover a range of COVID-19-related care, including emergency and inpatient services, as well as lab work, lawmakers said.

The legislation is expected to move quickly in what's becoming an 11th-hour rush on Beacon Hill. An aide to Representative Ronald Mariano, the House majority leader and one of the lead negotiators on the bill, said the Senate will take up the bill on Wednesday, followed by the House. Lawmakers need to pass any remaining legislation before their session ends on Jan. 5.

A panel of six senators and representatives had started closed-door talks on differing versions of the health care legislation at the end of July, while a shift toward virtual medical services was already underway within the health care industry.

Governor Charlie Baker, shortly after declaring a state of emergency, [ordered health insurers](#) to cover telehealth services in an effort to limit the spread of the novel coronavirus. Lawmakers, meanwhile, were [wrangling with the details](#) of not just how to extend coverage, but which kind of telehealth visits should be reimbursed at the same rate as in-person services and for how long.

The compromise released Tuesday would require that behavioral health services delivered via telehealth be permanently reimbursed by insurers at the same level as in-person services, according to legislative leaders. It also would mandate that telehealth services for primary care and chronic disease management be reimbursed by insurers at the same rate as in-person services over the next two years.

Rate parity for telehealth and in-person care for all other types of health care services, currently mandated by Baker's

executive order during Massachusetts' state of emergency, would also remain in place for 90 days after the state of emergency ends, according to lawmakers.

The compromise bill also broadens the definition for telehealth by dropping a requirement that was in the House version that required people to have a previous relationship with a doctor to get a prescription via telehealth.

Senator Cindy Friedman and Mariano, who together helped lead the negotiations, said the bill “embraces the promises of telehealth,” while touching a variety of other corners of the health care world.

It also would enable nurse practitioners and nurse anesthetists to practice independently under certain conditions. Currently, nurse practitioners in Massachusetts can see patients, but they must work under the supervision of physicians while their counterparts [in every other New England state](#) can treat patients and prescribe medications without doing so.

“This bill provides for greater access to care at an inflection point for our health care system,” said Elaine Sullivan, president of Massachusetts Association of Nurse Anesthetists, which cheered the provision.

The legislative package would also eliminate a requirement that MassHealth patients first obtain a referral from their primary care provider before seeking treatment at an urgent care facility.

Steve Walsh, president of the Massachusetts Health and Hospital Association, largely applauded the bill, saying it would solidify the role of telemedicine, which he's called a “game changer.”

Insurers such as Blue Cross Blue Shield of Massachusetts had already decided to cover mental health care at the same rate for virtual and in-person visits. Amy McHugh, a Blue Cross spokeswoman, said the company is prepared to work with policy makers and others “on transitioning to a post-COVID-19 landscape that continues this progress.”

Ellen Murphy Meehan, a consultant who works with community hospitals, applauded the bill's \$35 million for these hospitals, saying “This funding will go a long way to serving [their] patients more effectively and to shoring up the financial stability of hospitals who've been shortchanged for too many years.”

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