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**TESTIMONY OF ERIC A. CIOPPA
SUPERINTENDENT OF INSURANCE
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Neither for nor Against L.D. 333

“An Act Regarding Telehealth”

Presented by Senator/Representative Hymanson

**Before the Joint Standing Committee on Health Coverage, Insurance &
Financial Services**

May 6, 2021 at 10:00 a.m.

Senator Sanborn, Representative Tepler, and members of the Committee, I am Superintendent of Insurance Eric Cioppa. I am here today to testify neither for nor against L.D. 333.

This bill would enact various provisions related to insurance coverage of telehealth services. It would expand the Insurance Code’s definition of “telehealth” to include audio-only services, when no means of interactive real-time visual or other electronic media are available or advisable, as determined by a health care provider. This would provide greater flexibility for patients to work with providers in determining the best way of delivering care and allow patients to have input in the selection of technology that is appropriate to their circumstances.



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The bill would require parity of payment with similar in-person visits. It would prohibit carriers from placing restrictions on the prescription of medication through telehealth providers, beyond the restrictions already imposed by applicable law for in-person prescribing. Finally, it would prohibit the use of separate deductibles for telehealth.

This LD is similar to LD 323, sponsored by Representative Perry. However, LD 333 provides a more comprehensive detailed framework for coverage of telehealth services. We understand that there may be additional bills scheduled that also address telehealth services.

The issue of telehealth came up in the last legislative session in two bills: LD 1263 and 1974. In LD 1263, the Legislature enacted parity for coverage of telehealth and telemonitoring services. In LD 1974, which was heard by the HHS Committee rather than this Committee, the Legislature enacted definitions for the previously undefined terms “synchronous” and “asynchronous” encounters in Title 22’s definition of “telehealth” for MaineCare purposes. Carriers objected to the inclusion of these terms in Title 24-A and that portion of the bill did not pass.

We note that in light of the COVID-19 pandemic, at the federal level, CMS has loosened restrictions around HIPAA privacy requirements to encourage telehealth services.

We also note that in discussing payment parity, all telehealth visits may not be created equal. Different payment issues might apply to remote appointments with resident providers -- arranged as telehealth because of transportation, social distancing, or other issues – than to appointments with entities that solely provide telehealth “visits,” such as Live Health Online provides for the State of Maine health plan.

Thank you, I would be glad to answer any questions now or at the work session.