

1 SENATE BILL NO. 196
2 INTRODUCED BY W. SALES

3
4 A BILL FOR AN ACT ENTITLED: "AN ACT REQUIRING PAYMENT PARITY FOR HEALTH CARE SERVICES
5 DELIVERED BY MEANS OF TELEHEALTH; AMENDING SECTIONS 33-31-111 AND 33-35-306, MCA; AND
6 PROVIDING A DELAYED EFFECTIVE DATE."

7
8 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

9
10 NEW SECTION. **Section 1. Payment for telehealth services.** (1) A health insurance issuer shall
11 reimburse a health care facility or health care provider for services delivered by means of telehealth at the
12 same rate as the issuer would reimburse the facility or provider for services delivered in person.

13 (2) A health insurance issuer may not deny or limit reimbursement based solely on the technology
14 or equipment used to deliver the health care service if the technology or equipment:

15 (a) meets the requirements of 33-22-138; and

16 (b) is appropriate for the service provided.

17 (3) Nothing in this section prohibits a health insurance issuer and a health care facility, health care
18 provider, or health care provider group from voluntarily negotiating alternate reimbursement rates for services
19 covered by this section.

20 ~~(3)~~(4) For the purposes of this section, the terms "health care facility", "health care provider", and
21 "telehealth" have the meanings provided in 33-22-138.

22
23 **Section 2.** Section 33-31-111, MCA, is amended to read:

24 **"33-31-111. Statutory construction and relationship to other laws.** (1) Except as otherwise
25 provided in this chapter, the insurance or health service corporation laws do not apply to a health maintenance
26 organization authorized to transact business under this chapter. This provision does not apply to an insurer or
27 health service corporation licensed and regulated pursuant to the insurance or health service corporation laws

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Drafter: Madelyn Krezowski, (406) 444-6857

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1 of this state except with respect to its health maintenance organization activities authorized and regulated
2 pursuant to this chapter.

3 (2) Solicitation of enrollees by a health maintenance organization granted a certificate of authority
4 or its representatives is not a violation of any law relating to solicitation or advertising by health professionals.

5 (3) A health maintenance organization authorized under this chapter is not practicing medicine and
6 is exempt from Title 37, chapter 3, relating to the practice of medicine.

7 (4) This chapter does not exempt a health maintenance organization from the applicable certificate
8 of need requirements under Title 50, chapter 5, parts 1 and 3.

9 (5) This section does not exempt a health maintenance organization from the prohibition of
10 pecuniary interest under 33-3-308 or the material transaction disclosure requirements under 33-3-701 through
11 33-3-704. A health maintenance organization must be considered an insurer for the purposes of 33-3-308 and
12 33-3-701 through 33-3-704.

13 (6) This section does not exempt a health maintenance organization from:

14 (a) prohibitions against interference with certain communications as provided under Title 33,
15 chapter 1, part 8;

16 (b) the provisions of Title 33, chapter 22, parts 7 and 19;

17 (c) the requirements of 33-22-134 and 33-22-135;

18 (d) network adequacy and quality assurance requirements provided under chapter 36; or

19 (e) the requirements of Title 33, chapter 18, part 9.

20 (7) Other chapters and provisions of this title apply to health maintenance organizations as follows:

21 Title 33, chapter 1, parts 6, 12, and 13; 33-2-1114; 33-2-1211 and 33-2-1212; Title 33, chapter 2, parts 13, 19,
22 23, and 24; 33-3-401; 33-3-422; 33-3-431; Title 33, chapter 3, part 6; Title 33, chapter 10; Title 33, chapter 12;
23 33-15-308; Title 33, chapter 17; Title 33, chapter 19; 33-22-107; 33-22-128; 33-22-129; 33-22-131; 33-22-136
24 through 33-22-139; 33-22-141 and 33-22-142; [section 1]; 33-22-152 and 33-22-153; 33-22-156 through 33-22-
25 159; 33-22-180; 33-22-244; 33-22-246 and 33-22-247; 33-22-514 and 33-22-515; 33-22-521; 33-22-523 and
26 33-22-524; 33-22-526; and Title 33, chapter 32."

27

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1 **Section 3.** Section 33-35-306, MCA, is amended to read:

2 **"33-35-306. Application of insurance code to arrangements.** (1) In addition to this chapter, self-
3 funded multiple employer welfare arrangements are subject to the following provisions:

4 (a) 33-1-111;

5 (b) Title 33, chapter 1, part 4, but the examination of a self-funded multiple employer welfare
6 arrangement is limited to those matters to which the arrangement is subject to regulation under this chapter;

7 (c) Title 33, chapter 1, part 7;

8 (d) Title 33, chapter 2, parts 23 and 24;

9 (e) 33-3-308;

10 (f) Title 33, chapter 7;

11 (g) Title 33, chapter 18, except 33-18-242;

12 (h) Title 33, chapter 19;

13 (i) 33-22-107, 33-22-128, 33-22-131, 33-22-134, 33-22-135, 33-22-138, 33-22-139, 33-22-141,
14 33-22-142, [section 1], 33-22-152, and 33-22-153;

15 (j) 33-22-512, 33-22-515, 33-22-525, and 33-22-526;

16 (k) Title 33, chapter 22, part 7; and

17 (l) 33-22-707.

18 (2) Except as provided in this chapter, other provisions of Title 33 do not apply to a self-funded
19 multiple employer welfare arrangement that has been issued a certificate of authority that has not been
20 revoked."

21

22 NEW SECTION. **Section 4. Codification instruction.** [Section 1] is intended to be codified as an
23 integral part of Title 33, chapter 22, part 1, and the provisions of Title 33, chapter 22, part 1, apply to [section 1].

24

25 NEW SECTION. **Section 5. Effective date.** [This act] is effective January 1, 2024.

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