



STATE OF WEST VIRGINIA

Offices of the Insurance Commissioner

James A. Dodrill
Insurance Commissioner

WEST VIRGINIA INSURANCE BULLETIN

No. 20 – 03

Insurance Bulletins are issued when the Commissioner renders formal opinions, guidance or expectations on matters or issues, explains how new statutes or rules will be implemented or applied, or advises of interpretation or application of existing statutes or rules.

To: All Insurers Writing Health Insurance or Health Benefit Plan Coverage in West Virginia, Insurance Trade Associations, Insurance producers and Other Interested Persons

From: James A. Dodrill, Insurance Commissioner

Re: Coverage for Telehealth Services and Coronavirus (COVID-19)

Date: March 13, 2020

House Bill 4003 (2020) was passed by the West Virginia Legislature on March 7, 2020 and mandates coverage for telehealth services. Although House Bill 4003 has not yet been signed into law by the Governor and, therefore, has not yet gone into effect, the Commissioner requests that health insurers immediately review their telehealth or telemedicine services in light of the law's anticipated, impending implementation and the COVID-19 crisis. Telehealth services or telemedicine may be a useful tool to evaluate or reassure patients in alternative settings or to help patients and providers decide who needs to be seen in the hospital or provider office, considering social distancing and other precautionary measures in place during this crisis.

House Bill 4003 (2020) defines telehealth services, in relevant part, as the use of synchronous or asynchronous telecommunications technology by a health care practitioner to provide health care services, including, but not limited to, assessment, diagnosis, consultation, treatment, and monitoring of a patient; transfer of medical data; patient and professional health-related education; public health services; and health administration. This legislation generally requires that an insurer in West Virginia issuing or renewing health insurance policy on or after July 1, 2020, provide coverage of health care services provided through telehealth services if those same services are covered through face-to-face consultation by the policy. Moreover, the insurer may not exclude a service for coverage solely because the service is provided through telehealth services. Finally, an insurer may not impose any annual or lifetime dollar maximum on coverage for telehealth services other than an annual or lifetime dollar maximum that applies to all items and services covered under the policy, or impose any copayment, coinsurance, or deductible amounts, or any policy year, calendar year, lifetime, or other durational benefit limitation or maximum for benefits or services, that is not equally imposed upon all services covered under the policy.



Now a global pandemic, the response to COVID-19 is of urgent importance to public health and, in order to protect the public health, the Commissioner requests that insurers immediately take all practical steps to identify and remove barriers to testing and treatment for COVID-19. The use of telehealth or telemedicine can potentially reduce barriers for treatment as virtual office visits have been identified as a way of safely treating certain patients and containing the spread of infection at hospitals, clinics and medical offices. The use of telehealth or telemedicine services may not be appropriate in all circumstances or for all patients. However, the Commissioner requests that insurers immediately review their telehealth or telemedicine programs to ensure they are being utilized to the fullest extent possible.

Insurers may contact Ellen Potter, Director of Health Policy, at (304) 414-8480 with questions regarding this Bulletin.



James A. Dodrill
Insurance Commissioner