**At the State House**

This week promises to be a busy one at the State House as both the House and Senate will be in full session and committees will be meeting. The state house remains closed to the public. Both the House and Senate Committees are accepting written testimony from the public. In addition, the House has created a process should a person feel it is necessary to testify verbally/remotely. This edition of Under the Dome was written prior to the release of the House’s floor calendar. Please watch your emails. We will alert you if an issue arises.

**Monday, July 13th**

The **full senate** will be voting on **S.2302 SubA**, An Act Relating to Towns and Cites – Cancer Benefits for Firefighters. This bill provides a conclusive presumption that firefighters who are diagnosed with cancer, got cancer as a result of the job, and therefore are entitled to a disability pension. Going forward, this presumption is negated if the firefighter was hired after the date of enactment of this legislation and was on the job for less than 2 years, or smoked habitually for 5 years prior to the diagnosis. The House is expected to vote on the House version, H.7449 SubA, this week as well.

The **Senate Health and Human Services Committee** is meeting to vote on S.2317, which eliminates copays or cost sharing for colonoscopies for anyone 45 years of age or older. Written testimony can be sent to [SLegislation@rilegislature.gov](mailto:SLegislation@rilegislature.gov)

**Wednesday July 15th**

The **House Finance Committee** will be taking testimony at 4:00 pm on **Article 20 Sections 8-12 and 14 of the Governor’s proposed budget**. Sections 8-12 change the type of plans health insurers can offer individuals and eliminates copays for preventative services. Section 14 places a $1 per enrollee assessment on health insurance companies and on self-insured companies (unless the assessment is paid by a third party administrator for the self-insured company). The first payment would be due and payable to the State January 1, 2021. The money collected is to be spent on a study to determine ways to use health care claims data to decrease health care spending. An advisory committee would be created to conduct the study and file an annual report with the State.

The House Finance Committee will also take testimony on a new proposed Article from the Governor’s office addressing telemedicine. This Article is different from the Senate bill that passed the Senate June 17th but has some similar goals. The proposed Article creates one process from now until June 30, 2021 and a different process starting July 1, 2021.

From now until June 30, 2021, the term “telemedicine” would include real time two-way audio visual communication and audio telephone communication. It specifically excludes email, tests or fax communication. Insurers could not exclude coverage for telemedicine as long as it is “medically appropriate” (although the determination of appropriateness has to take into consideration any existing public health emergency). No copay or deductible can be charged by the insurer in “excess of what would be charged” for an in person visit. In-network primary care visits and behavioral health visits could not require a prior authorization from the insurer; and insurers cannot dictate certain technology requirements for telemedicine visits. Lastly, rates paid for in network providers must be the same for telemedicine as for in-person visits.

Starting July 1, 2021, “telemedicine” would no longer include audio only visits (nor would email, fax or text be covered as an appointment). Insurers could begin to adopt different provider payments for telemedicine visits, but they must still cover telemedicine if it is “medically appropriate.” Lastly, insurers can impose a deductible or copay for telemedicine.

The proposed Article also includes the creation of a stakeholder advisory group, which the Chamber requested in its testimony to the Senate. The stakeholder group is charged with reviewing utilization data and recommending rates and policies surrounding telemedicine.

Written testimony may be emailed to [cobrien@rilegislature.gov](mailto:cobrien@rilegislature.gov) . If you wish to testify verbally you can request to be heard by sending an email to [cobrien@rilegislature.gov](mailto:cobrien@rilegislature.gov) by July 15th at 11:00 a.m. The request must include the Bill number, “for/against”, your name and phone number to be reach for your testimony and affiliation if any.

**Last Week**

The Unemployment Trust Fund was the topic of discussion last week in the Senate Finance Committee. Department of Labor Director, Scott Jensen provided a bleak update on the current numbers. From March 3 to July 5, DLT received 283,571 applications for unemployment compensation. While some of these applications were multiple claims submitted by individuals who didn’t understand the online process, and some are still awaiting determinations by the department, 189,977 claims have been approved for benefits. With the help of a new online program created in conjunction with Amazon web service, the DLT website can now handle 1000 entries a second.

In this same timeframe, a total of $1,338,717,400 has been paid to claimants, of which $870 million represents the federal government payout of $600 per week to eligible individuals. “We are eating the Trust Fund away quickly,” said Director Jensen. “We will deplete the Trust Fund in a couple months.” According to the Director, the typical “largest collection” quarter for unemployment tax is May, with the second largest tax collection coming in August. Of course, May has already come and gone, so everyone is wondering how much revenue will be added to the Trust Fund in August, given the economic climate.

The last disturbing statistic involves the “creeping up” of claim applications again. Claims were high in April with April 6th – 12th setting a record high for claims of 43,963. Claim applications reduced in mid-May to about 7,000 claims a week, but now are on an upswing of 13,158 applications for the week ending July 5th. To keep the numbers in perspective, Rhode Island has approximately 600,000 able bodied individuals who are counted as potential workers.

Finally, the Director discussed the increase in unemployment imposter fraud. A person buys an individual’s information (name, address, social security number, and work location) and then submits a claim for unemployment. With the high volume of claimants due to the virus, DLT has not been able to check with employers to verify an employee’s departure from work. Many companies are no longer operating, so no one would be able to verify the employment anyway. This climate created a situation ripe for fraud. The Director talked about a gang in Nigeria that made this fraud effort a full time job, filing false claims all over the United States.

The Director was never asked if the Governor would support using some of the federal Cares Act money to replenish the Trust Fund, nor did the Director offer any insight on the possibility. It is clear that Rhode Island will have to borrow from the federal government to meet ongoing unemployment claims. Without assistance from the government, virus surviving employers will have to pay higher unemployment insurance taxes to gradually replenish the Fund over the coming years.