THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL No. 1648 Session of 2017

INTRODUCED BY M. QUINN, BAKER, BARRAR, BRIGGS, R. BROWN, V. BROWN, CAUSER, CORBIN, DALEY, DAVIDSON, DAVIS, DAWKINS, EVERETT, FRITZ, HARKINS, PHILLIPS-HILL, MACKENZIE, MENTZER, D. MILLER, MURT, MUSTIO, ORTITAY, C. QUINN, READSHAW, ROZZI, SCHLOSSBERG, TOBASH, TOOHIL, TOPPER AND WARD, JULY 7, 2017

REFERRED TO COMMITTEE ON INSURANCE, JULY 7, 2017

AN ACT

1 2	Providing for telemedicine, for insurance coverage of telemedicine services and for Medicaid program reimbursement.
3	The General Assembly of the Commonwealth of Pennsylvania
4	hereby enacts as follows:
5	Section 1. Short title.
6	This act shall be known and may be cited as the Telemedicine
7	Act.
8	Section 2. Definitions.
9	The following words and phrases when used in this act shall
10	have the meanings given to them in this section unless the
11	context clearly indicates otherwise:
12	"Ancillary service plans." An individual or group health
13	insurance plan, subscriber contract or certificate that provides
14	exclusive coverage for dental services or vision services.
15	"Health care practitioner." Any of the following:
16	(1) A health care practitioner as defined in section 103

1 of the act of July 19, 1979 (P.L.130, No.48), known as the 2 Health Care Facilities Act. 3 (2) A federally qualified health center as defined in section 1861(aa)(4) of the Social Security Act (49 Stat. 620, 4 5 42 U.S.C. § 1395x(aa)(4)). (3) A rural health clinic as defined in section 1861(aa) 6 7 (2) of the Social Security Act (49 Stat. 620, 42 U.S.C. § 8 1395x(aa)(2)). 9 "Health care services." Services for the diagnosis, 10 prevention, treatment, cure or relief of a health condition, 11 injury, disease or illness. 12 "Health insurance policy." As follows: 13 (1) An individual or group health insurance policy, 14 contract or plan that provides medical or health care 15 coverage by a health care facility or health care 16 practitioner that is offered by an entity subject to any of 17 the following: 18 (i) The act of May 17, 1921 (P.L.682, No.284), known 19 as The Insurance Company Law of 1921. 20 (ii) Article XXIV of The Insurance Company Law of 21 1921. 22 The act of December 29, 1972 (P.L.1701, (iii) 23 No.364), known as the Health Maintenance Organization 24 Act. 25 (iv) 40 Pa.C.S. Ch. 61 (relating to hospital plan 26 corporations). 27 (v) 40 Pa.C.S. Ch. 63 (relating to professional 28 health services plan corporations). 29 The term does not include accident only, fixed (2) indemnity, limited benefit, credit, specified disease, 30

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Medicare supplement, Civilian Health and Medical Program of
 the Uniformed Services (CHAMPUS) supplement, long-term care
 or disability income, workers' compensation or automobile
 medical payment insurance.

5 "Interactive audio." The use of asynchronous store and 6 forward technology in conjunction with synchronous audio 7 interaction between a health care practitioner and a patient. 8 "Store and forward technology." Technology that stores and 9 transmits or grants access to a patient's clinical information 10 for review by a health care practitioner who is at a different 11 location.

12 "Telemedicine" or "telehealth." The delivery of health care 13 services provided through technology to a patient by a health care practitioner who is at a different location. The term 14 15 includes a real-time encounter between the patient and health 16 care practitioner through interactive audio, video or other telecommunications or electronic technology and the acquisition, 17 evaluation and transmission of patient information outside of a 18 19 real-time encounter, including store and forward technology and 20 remote patient monitoring of medical data. The term does not 21 include the use of audio-only telephone conversation, voicemail, facsimile, e-mail, instant messaging, text messaging, an online 22 23 questionnaire or any combination thereof, nor an automated 24 computer program used to diagnose or treat ocular or refractive conditions. 25

26 Section 3. Licensure of health care practitioner.

27 (a) Requirements.--

(1) The Commonwealth's health professional licensure
 boards shall maintain consistent licensure or certification
 and standards of care requirements between in-person and

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1 telemedicine-provided practices for health care

2 practitioners.

3 (2) Nothing in this section is intended to create a new4 standard of care.

5 (b) Rules and regulations.--

6 (1) The board or licensing entity governing a health 7 care practitioner covered by this section may promulgate 8 regulations consistent with this act to provide for and 9 regulate the use of telemedicine in the delivery of health 10 care services within the scope of practice regulated by the 11 board or licensing entity.

12 (2) The board or licensing entity may not establish a 13 more restrictive standard of professional practice for the 14 practice of telemedicine than that specifically authorized by 15 the health care practitioner's practice act or other 16 specifically applicable statute, including prescribing and 17 dispensing controlled substances.

18 Section 4. Compliance.

A health care practitioner shall comply with all applicable Federal and State laws and regulations that would apply if the practitioner were located in this Commonwealth.

22 Section 5. Evaluation and treatment.

(a) Requirements.--Except as provided in subsection (b), a health care practitioner who provides a health care service to an individual located in this Commonwealth through telemedicine shall be subject to and comply with the following:

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(1) The health care practitioner shall:

(i) establish a practitioner-patient relationship
with the individual in accordance with subsection (c);
(ii) prior to treatment of the individual, provide

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1 an appropriate virtual examination initiated through a 2 consultation using telemedicine technologies and any 3 peripherals and diagnostic tests necessary to provide an accurate diagnosis, if an in-person examination would 4 5 otherwise be medically appropriate in the provision of the same service not delivered via telemedicine, as 6 7 reasonably determined by the professional independent 8 judgment of the health care practitioner; or

9 (iii) establish a telemedicine practitioner-patient 10 relationship that meets standards included in evidence-11 based telemedicine clinical practice guidelines.

12 (2) The same standards of care applicable to 13 traditional, in-person health care services shall apply to 14 treatment and consultation recommendations made via 15 telemedicine.

16 The health care practitioner while practicing (3) 17 telemedicine may utilize interactive audio without the requirement of video if, after access and review of the 18 19 patient's medical records, the practitioner determines that 20 the practitioner is able to meet the same standard of care as 21 if the health care services were provided in person. The 22 practitioner shall inform the patient that the patient has the option to request telemedicine services that include 23 24 video.

(4) The health care practitioner shall have an emergency
action plan in place for medical emergencies and referrals
when needed.

28 (b) Exceptions.--This section shall not apply to the 29 following:

30 (1) Consultation by a health care practitioner with 20170HB1648PN2207 - 5 - another health care practitioner who has an ongoing practitioner-patient relationship with the individual that was established through an in-person or appropriate virtual examination and agrees to supervise the individual's care.

5 The provision of on-call or cross-coverage health (2)care services to the active patients of another health care 6 7 practitioner in the same specialty, provided that the health 8 care practitioner whose active patients are being provided 9 the health care services has designated the exempted health 10 care practitioner as an on-call or cross-coverage health care 11 practitioner for the health care practitioner's active 12 patients.

13 (c) Practitioner-patient relationship.--For purposes of 14 subsection (a)(1), a practitioner-patient relationship is 15 established when the health care practitioner satisfies each of 16 the following:

17 (1) Verifies the location and identity of the individual
18 receiving care each time health care services are provided
19 through telemedicine.

(2) Discloses the health care practitioner's identity,
 geographic location and medical specialty or applicable
 credentials.

(3) Obtains informed consent regarding the use of
telemedicine technologies from the individual or other person
acting in a health care decision-making capacity for the
individual.

(4) Establishes a diagnosis and treatment plan, as
reasonably determined by the professional independent
judgment of the health care practitioner.

30 (5) Creates and maintains an electronic medical record 20170HB1648PN2207 - 6 - or updates an existing electronic medical record for the patient within 24 hours. The electronic medical record shall be maintained in accordance with electronic medical records privacy rules under the Federal Health Insurance Portability and Accountability Act of 1996 (Public Law 104-191, 110 Stat. 1936).

7 (6) Provides a visit summary to the individual.8 Section 6. Coverage of telemedicine services.

9 (a) Insurance coverage and reimbursement.--

A health insurance policy or ancillary service plan 10 (1)issued, delivered, executed or renewed in this Commonwealth 11 12 after the effective date of this section shall provide 13 coverage for health care services consistent with the 14 insurer's medical policy. A health insurance policy or 15 ancillary service plan may not exclude a health care service 16 for coverage solely because the service is provided through 17 telemedicine.

18 (2) An insurer, corporation or health maintenance 19 organization shall reimburse the health care practitioner for 20 health care services delivered through telemedicine if the 21 insurer, corporation or health maintenance organization 22 reimburses for the same service through in-person consultation. Payment for telemedicine encounters shall be 23 24 established between the health care practitioner and insurer. 25 (b) Construction of law.--Nothing in this act shall be 26 construed to prohibit a health insurance policy or ancillary 27 service plan from providing reimbursement for a health care 28 service delivered through telemedicine where the same or similar 29 service is not otherwise eligible for reimbursement when 30 provided through in-person consultation or other contact between

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1 a health care practitioner and an individual.

2 Section 7. Expansion.

3 Nothing in this act shall be construed to expand a health 4 care practitioner's scope of practice subject to State licensure 5 laws.

6 Section 8. Medicaid program reimbursement.

7 (a) General rule.--The Department of Human Services shall
8 provide medical assistance coverage and reimbursement, including
9 medical assistance fee-for-service and managed care programs,
10 for health care services delivered through telemedicine in
11 accordance with this act.

(b) Construction of law.--Nothing in this act shall be construed to require the department to provide reimbursement for health care services ineligible for reimbursement under medical assistance fee-for-service and managed care program guidelines established under 42 CFR Ch. IV Subch. C (relating to medical assistance programs).

18 Section 9. Effective date.

19 This act shall take effect in 90 days.

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