AN ACT

1 Providing for telemedicine and for insurance coverage.
2 The General Assembly of the Commonwealth of Pennsylvania
3 hereby enacts as follows:
4 Section 1. Short title.
5 This act shall be known and may be cited as the Telemedicine
6 Act.
7 Section 2. Definitions.
8 The following words and phrases when used in this act shall
9 have the meanings given to them in this section unless the
10 context clearly indicates otherwise:
11 "Health care practitioner." The term has the same meaning as
12 is given in section 103 of the act of July 19, 1979 (P.L.130,
13 No.48), known as the Health Care Facilities Act.
14 "Health care services." Services for the diagnosis,
15 prevention, treatment, cure or relief of a health condition,
16 injury, disease or illness.
17 "Health insurance policy." As follows:
(1) An individual or group health insurance policy,
contract or plan that provides medical or health care
coverage by a health care facility or health care
practitioner that is offered by an entity subject to any of
the following:

   (i) The act of May 17, 1921 (P.L.682, No.284), known
       as The Insurance Company Law of 1921.

   (ii) The act of December 29, 1972 (P.L.1701, No.364), known as the Health Maintenance Organization
       Act.

   (iii) Article XXIV of The Insurance Company Law of
       1921.

   (iv) 40 Pa.C.S. Ch. 61 (relating to hospital plan
corporations).

   (v) 40 Pa.C.S. Ch. 63 (relating to professional
health services plan corporations).

(2) The term does not include accident only, fixed
indemnity, limited benefit, credit, dental, vision, specified
disease, 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.

"Telemedicine." The delivery of health care services
provided through telecommunications technology to a patient by a
health care practitioner who is at a different location. The
term includes an encounter between the patient and provider and
the acquisition, evaluation and transmission of patient
information outside of a real-time interaction, including remote
patient monitoring of medical data. The term does not include
the use of audio-only telephone conversation, facsimile, e-mail,
instant messaging, phone text, answers to an online questionnaires or any combination thereof.

Section 3. Licensure of health care practitioner.

(a) Requirements.--

(1) Except as provided in section 5, the Commonwealth's health professional boards shall maintain consistent licensure or certification and standards of care requirements between in-person and telemedicine-provided practices.

(2) A health care practitioner who delivers services through the use of telemedicine shall be subject to the laws of this Commonwealth that require licensure, certification or other authorization to practice a health care profession, held to the same standard of professional practice as a similar licensee of the same practice area or specialty that is providing the same healthcare services through in-person encounters.

(3) Nothing in this section shall be construed as establishing any new standard of care.

(b) Restriction.--The board or licensing entity governing any health care practitioner covered by this section shall not establish a more restrictive standard of professional practice for the practice of telemedicine than that specifically authorized by the practitioner's practice act or other specifically applicable statute, including prescribing and dispensing controlled substances.

Section 4. Professional liability coverage.

(a) General requirements.--A health care practitioner who provides a health care service to an individual located in this Commonwealth through telemedicine shall be subject to the laws of this Commonwealth that require health care practitioners to
maintain professional liability insurance, pay assessments to
the Medical Care Availability and Reduction of Error (Mcare)
Fund or otherwise obtain coverage for medical professional
liability. The requirements shall be the same as the
requirements that are applicable to a health care practitioner
who provides the service through an in-person encounter with the
individual receiving the service or otherwise while located in
this Commonwealth.

(b) Telecommunications.--A health care practitioner who
makes a medical treatment recommendation or issues a
prescription to an individual located in this Commonwealth
through a telephone consultation, online platform, Internet
service or mobile application shall be subject to the laws of
this Commonwealth that require health care practitioners to
maintain professional liability insurance, pay assessments to
the Medical Care Availability and Reduction of Error (Mcare)
Fund or obtain coverage for medical professional liability. The
requirements shall be the same as the requirements that are
applicable to a health care practitioner who provides the
service through an in-person encounter with the individual
receiving the service or otherwise while located in this
Commonwealth.

(c) Applicable statutes.--Statutes applicable to health care
practitioners under subsections (a) and (b) shall include:
(1) Chapter 7 of the act of March 20, 2002 (P.L.154,
No.13), known as the Medical Care Availability and Reduction
of Error (Mcare) Act.
(2) Sections 8.5(e) and 8.7 of the act of May 22, 1951
(P.L.317, No.69), known as The Professional Nursing Law.
(3) Any law enacted after the effective date of this
section that mandates a health care practitioner to maintain professional liability insurance, pay assessments to the Medical Care Availability and Reduction of Error (Mcare) Fund or otherwise obtain coverage for medical professional liability.


(a) Requirements.—Except as provided in subsection (c), 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:

(1) A health care practitioner shall:

   (i) establish and maintain a practitioner-patient relationship with the individual in accordance with subsection (d);

   (ii) prior to treatment of the individual, provide an appropriate virtual examination initiated through or face-to-face consultation using telemedicine technologies and any peripherals and diagnostic tests necessary to provide an accurate diagnosis, if an in-person examination would otherwise be medically appropriate in the provision of the same service not delivered via telemedicine, as reasonably determined by the professional independent judgment, decision making and discretion of the health care practitioner; or

   (iii) establish a telemedicine practitioner-patient relationship that meets standards included in evidence-based telemedicine clinical practice guidelines developed by a nationally recognized major medical association for a specialty whose board is a member of the American Board of Medical Specialties or the American Osteopathic
(2) The same standards of practices applicable to traditional, in-person health care services shall apply to treatment and consultation recommendations made via telemedicine.

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

(b) Compliance.--Except as provided in subsection (c), a health care practitioner who issues a medical care recommendation or prescription to an individual located in this Commonwealth through a telephone consultation, online platform, Internet service or mobile application shall be subject to subsection (a)(1).

(c) Exceptions.--This section shall not apply to the following:

(1) Consultation by a health care practitioner with 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.

(2) The provision of on-call or cross-coverage health care services to the active patients of another health care practitioner in the same specialty, provided that the health care practitioner whose active patients are being provided the health care services has designated the exempted health care practitioner as an on-call or cross-coverage health care practitioner for his or her active patients.

(d) Practitioner-patient relationship.--For purposes of subsection (a)(1), a practitioner-patient relationship is not
established and maintained unless the health care practitioner satisfies each of the following:

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

(2) Discloses the health care practitioner's identity and applicable credentials.

(3) Obtains informed consent regarding the use of telemedicine technologies under section 6 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, decision making and discretion of the health care practitioner through the use of patient history, mental status examination, physical examination or appropriate virtual face-to-face examination using telecommunications technology consistent with the definition of "telemedicine" in section 2, unless prevented by the individual's condition, appropriate diagnostic and laboratory testing and identification of underlying condition or contraindications.

(5) Recommends one or more options for the individual to obtain appropriate follow-up care.

(6) Provides a visit summary to the individual and primary care practitioner at the direction of the health care practitioner or the individual.

(e) Prescriptions.--

(1) A provider with an established provider-patient relationship may issue prescription drug orders using telemedicine with the scope of the provider's license and
according to any applicable laws and regulations, including
the applicable legal standard of care.

(2) A prescription drug order issued through
telemedicine-provided services shall be considered a legally
valid prescription drug order.

(3) A provider may not prescribe a controlled substance
unless it is prescribed in compliance with section 102(54)(a)
of the Comprehensive Drug Abuse Prevention and Control Act of

(f) Construction.--Nothing in this act shall be construed to
expand the prescriptive authority of any provider beyond what is
authorized by the provider's licensing agency or board.

Section 6. Informed consent.
The health care practitioner utilizing telemedicine to
provide a health care service to an individual located in this
Commonwealth shall comply with applicable Federal and State laws
relating to informed consent. A separate consent for
telemedicine may not be required.

Section 7. Privacy practices.
A health care practitioner utilizing telemedicine to provide
a health care service to an individual located in this
Commonwealth shall comply with applicable Federal and State laws
relating to medical record documentation and maintenance, as
well as privacy and security of record retention of individually
identifiable health information, including compliance with the
Health Insurance Portability and Accountability Act of 1996
(Public Law 104-191, 110 Stat. 1936) and the Health Information
Technology for Economic and Clinical Health Act (Public Law 115-

Section 8. Fraud and abuse.
A health care practitioner utilizing telemedicine to provide a health care service to an individual located in this Commonwealth shall comply with applicable Federal and State laws relating to fraud and abuse.

Section 9. Coverage of telemedicine services.

(a) Insurance coverage and reimbursement.--

(1) A health insurance policy issued, delivered, executed or renewed in this Commonwealth after the effective date of this section shall provide coverage for covered health care services consistent with the insurer's medical criteria for clinical services under the provider's contract. An insurer, corporation or health maintenance organization shall reimburse the treating provider or the consulting provider for the diagnosis, consultation or treatment of the insured delivered through telemedicine services on the same basis that the insurer, corporation or health maintenance organization is responsible for coverage for the provision of the same service through in-person consultation. Payment for telemedicine interactions shall include compensation to the originating site for the transmission cost incurred during the delivery of health care services.

(2) A health insurance policy in effect on the effective date of this section shall, upon renewal, be amended to provide coverage for health care services delivered through telemedicine and on the same basis as the insurer, corporation or health maintenance organization is responsible for coverage for the provision of the same service through in-person consultation or contact under this act.

(b) Inclusion.--A health insurance policy may not exclude a service for coverage solely because the service is provided
through telemedicine and is not provided through in-person consultation or other contact between a health care practitioner and an individual.

(c) Deductibles, copayments and coinsurance.—A health insurance policy may contain a deductible, copayment or coinsurance requirement for a health care service provided through telemedicine.

(d) Selection of practitioner.—A health insurance policy must do the following:

(1) Allow the policyholder to choose the participating health care practitioner that provides covered service through telemedicine.

(2) Disclose to covered individuals their cost-sharing responsibilities to use telemedicine.

(e) Imposition prohibited.—A health insurance policy may not impose:

(1) An annual or lifetime dollar maximum on coverage for telemedicine-provided service other than an annual or lifetime dollar maximum that applies in the aggregate to all items and services covered under the policy.

(2) On a person receiving benefits under this section any deductible, copayment or coinsurance 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 terms and services covered under the policy.

(f) Utilization review.—Nothing in this act shall be construed to preclude an entity offering a health insurance policy from undertaking a utilization review to determine the appropriateness of telemedicine-provided services, provided that
the following requirements are satisfied:

(1) The determination is made in the same manner as utilization review determinations are made for the treatment of an illness, condition or disorder covered by a policy.

(2) A utilization review does not require prior authorization of the telemedicine services.

Section 10. Expansion.

Nothing in this act shall be construed as expanding a health care practitioner's scope of practice subject to State licensure laws.

Section 11. Medicaid program reimbursement.

The Department of Human Services shall provide Medical Assistance coverage and reimbursement, including, but not limited to, Medical Assistance fee-for-service and HealthChoices Managed Care, to cover the costs of covered health care services delivered through telemedicine in accordance with this act.

Section 12. Effective date.

This act shall take effect in 90 days.