

THE GENERAL ASSEMBLY OF PENNSYLVANIA

SENATE BILL

No. 857 Session of 2019

INTRODUCED BY VOGEL, ARGALL, AUMENT, BAKER, BARTOLOTTA, BLAKE, BREWSTER, COSTA, GORDNER, HAYWOOD, KILLION, LANGERHOLC, MARTIN, MENSCH, PHILLIPS-HILL, SANTARSIERO, SCHWANK, STEFANO, STREET, J. WARD, K. WARD, YAW AND YUDICHAK, SEPTEMBER 19, 2019

AS REPORTED FROM COMMITTEE ON INSURANCE, HOUSE OF REPRESENTATIVES, AS AMENDED, NOVEMBER 18, 2019

AN ACT

1 ~~Relating to telemedicine; authorizing the regulation of~~ <--
2 ~~telemedicine by professional licensing boards; and providing~~
3 ~~for insurance coverage of telemedicine.~~ AMENDING TITLE 40 <--
4 (INSURANCE) OF THE PENNSYLVANIA CONSOLIDATED STATUTES,
5 PROVIDING FOR TELEMEDICINE, AUTHORIZING THE REGULATION OF
6 TELEMEDICINE BY PROFESSIONAL LICENSING BOARDS AND PROVIDING
7 FOR INSURANCE COVERAGE OF TELEMEDICINE.

8 The General Assembly of the Commonwealth of Pennsylvania
9 hereby enacts as follows:

10 ~~Section 1. Short title.~~ <--

11 ~~This act shall be known and may be cited as the Telemedicine~~
12 ~~Act.~~

13 ~~Section 2. Definitions.~~

14 ~~The following words and phrases when used in this act shall~~
15 ~~have the meanings given to them in this section unless the~~
16 ~~context clearly indicates otherwise:~~

17 ~~"Audio only medium." A prerecorded audio presentation or~~
18 ~~recording.~~

1 ~~"Emergency medical condition." A medical condition~~
2 ~~manifesting itself by acute symptoms of sufficient severity,~~
3 ~~including severe pain, such that the absence of immediate~~
4 ~~medical attention could reasonably be expected to result in~~
5 ~~placing the health of the individual in serious jeopardy,~~
6 ~~serious impairment to bodily functions or serious dysfunction of~~
7 ~~a bodily organ or part.~~

8 ~~"Health care provider" or "provider." Any of the following:~~

9 ~~(1) A health care practitioner as defined in section 103~~
10 ~~of the act of July 19, 1979 (P.L.130, No.48), known as the~~
11 ~~Health Care Facilities Act.~~

12 ~~(2) A federally qualified health center as defined in~~
13 ~~section 1861(aa) (4) of the Social Security Act (49 Stat. 620,~~
14 ~~42 U.S.C. § 1395x(aa) (4)).~~

15 ~~(3) A rural health clinic as defined in section 1861(aa)~~
16 ~~(2) of the Social Security Act (49 Stat. 620, 42 U.S.C. §~~
17 ~~1395x(aa) (2)).~~

18 ~~(4) A general, mental, chronic disease or other type of~~
19 ~~hospital licensed in this Commonwealth.~~

20 ~~(5) A pharmacist who holds a valid license under the act~~
21 ~~of September 27, 1961 (P.L.1700, No.699), known as the~~
22 ~~Pharmacy Act.~~

23 ~~(6) An occupational therapist who holds a valid license~~
24 ~~under the act of June 15, 1982 (P.L.502, No.140), known as~~
25 ~~the Occupational Therapy Practice Act.~~

26 ~~(7) A speech language pathologist who holds a valid~~
27 ~~license under the act of December 21, 1984 (P.L.1253,~~
28 ~~No.238), known as the Speech Language Pathologists and~~
29 ~~Audiologists Licensure Act.~~

30 ~~(8) An audiologist who holds a valid license under the~~

1 ~~Speech Language Pathologists and Audiologists Licensure Act.~~

2 ~~(9) A dental hygienist who holds a valid license under~~
3 ~~the act of May 1, 1933 (P.L.216, No.76), known as The Dental~~
4 ~~Law.~~

5 ~~(10) A social worker, clinical social worker, marriage~~
6 ~~and family therapist or professional counselor who holds a~~
7 ~~valid license under the act of July 9, 1987 (P.L.220, No.39),~~
8 ~~known as the Social Workers, Marriage and Family Therapists~~
9 ~~and Professional Counselors Act.~~

10 ~~(11) A registered nurse who holds a valid license under~~
11 ~~the act of May 22, 1951 (P.L.317, No.69), known as The~~
12 ~~Professional Nursing Law.~~

13 ~~(12) A genetic counselor who holds a valid license under~~
14 ~~the act of December 20, 1985 (P.L.457, No.112), known as the~~
15 ~~Medical Practice Act of 1985, or the act of October 5, 1978~~
16 ~~(P.L.1109, No.261), known as the Osteopathic Medical Practice~~
17 ~~Act.~~

18 ~~(13) An out of State health care provider.~~

19 ~~"Health care services." Services for the diagnosis,~~
20 ~~prevention, treatment, cure or relief of a health condition,~~
21 ~~injury, disease or illness.~~

22 ~~"Health Information Technology for Economic and Clinical~~
23 ~~Health Act." The Health Information Technology for Economic and~~
24 ~~Clinical Health Act (Public Law 111-5, 123 Stat. 226-279 and~~
25 ~~467-496).~~

26 ~~"Health insurance policy." As follows:~~

27 ~~(1) An individual or group health insurance policy,~~
28 ~~contract or plan that provides coverage for services provided~~
29 ~~by a health care facility or health care provider that is~~
30 ~~offered by a health insurer.~~

1 ~~(2) The term includes an individual or group health~~
2 ~~insurance policy, contract or plan that provides dental or~~
3 ~~vision coverage through a provider network.~~

4 ~~(3) Except as provided under paragraph (2), the term~~
5 ~~does not include accident only, fixed indemnity, limited~~
6 ~~benefit, credit, dental, vision, specified disease, Medicare~~
7 ~~supplement, Civilian Health and Medical Program of the~~
8 ~~Uniformed Services (CHAMPUS) supplement, long term care or~~
9 ~~disability income, workers' compensation or automobile~~
10 ~~medical payment insurance.~~

11 ~~"Health Insurance Portability and Accountability Act of~~
12 ~~1996." The Health Insurance Portability and Accountability Act~~
13 ~~of 1996 (Public Law 104 191, 110 Stat. 1936).~~

14 ~~"Health insurer." An entity that holds a valid license by~~
15 ~~the Insurance Department with accident and health authority to~~
16 ~~issue a health insurance policy and governed under any of the~~
17 ~~following:~~

18 ~~(1) The act of May 17, 1921 (P.L.682, No.284), known as~~
19 ~~The Insurance Company Law of 1921, including section 630 and~~
20 ~~Article XXIV.~~

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

23 ~~(3) 40 Pa.C.S. Ch. 61 (relating to hospital plan~~
24 ~~corporations).~~

25 ~~(4) 40 Pa.C.S. Ch. 63 (relating to professional health~~
26 ~~services plan corporations).~~

27 ~~"Interactive audio and video." Real time two way or~~
28 ~~multiple way communication between a health care provider and a~~
29 ~~patient.~~

30 ~~"Licensure board." Each licensing board within the Bureau of~~

1 ~~Professional and Occupational Affairs of the Department of State~~
2 ~~with jurisdiction over a professional licensee identified as a~~
3 ~~health care provider under this act.~~

4 ~~"On call or cross coverage services." The provision of~~
5 ~~telemedicine by a health care provider designated by another~~
6 ~~provider with a provider patient relationship to deliver~~
7 ~~services on a temporary basis so long as the designated provider~~
8 ~~is in the same group or health system, has access to the~~
9 ~~patient's prior medical records, holds a valid license in this~~
10 ~~Commonwealth and is in a position to coordinate care.~~

11 ~~"Out of State health care provider." A health care provider~~
12 ~~providing a telemedicine service that holds a valid license,~~
13 ~~certificate or registration in another jurisdiction and is:~~

14 ~~(1) discharging official duties in the armed forces of~~
15 ~~the United States, the United States Public Health Services~~
16 ~~or the United States Department of Veterans Affairs;~~

17 ~~(2) providing telemedicine services to a patient through~~
18 ~~a federally operated facility;~~

19 ~~(3) providing telemedicine services in response to an~~
20 ~~emergency medical condition, if the care for the patient is~~
21 ~~referred to an appropriate health care provider in this~~
22 ~~Commonwealth as promptly as possible under the circumstances;~~

23 ~~(4) providing provider to provider consultation~~
24 ~~services; or~~

25 ~~(5) providing services which would otherwise be exempt~~
26 ~~from the requirement of licensure, certification or~~
27 ~~registration in this Commonwealth under the respective~~
28 ~~licensure act.~~

29 ~~"Participating network provider." A health care provider~~
30 ~~that has a network participation agreement with an insurer.~~

1 ~~"Provider to provider consultation." The act of seeking~~
2 ~~advice and recommendations from another health care provider for~~
3 ~~diagnostic studies, therapeutic interventions or other services~~
4 ~~that may benefit the patient of the initiating health care~~
5 ~~provider.~~

6 ~~"Store and forward." Technology that stores and transmits or~~
7 ~~grants access to a patient's clinical information for review by~~
8 ~~a health care provider who is at a different location. The term~~
9 ~~does not include the storage, transmission or use of electronic~~
10 ~~medical records without the concurrent transmission of~~
11 ~~additional clinical information not already present in the~~
12 ~~electronic medical records.~~

13 ~~"Telemedicine." The delivery of health care services~~
14 ~~provided through telemedicine technologies to a patient by a~~
15 ~~health care provider who is at a different location. The term~~
16 ~~does not include a provider to provider consultation.~~

17 ~~"Telemedicine technologies." As follows:~~

18 ~~(1) Electronic information and telecommunications~~
19 ~~technology, including, but not limited to, interactive audio~~
20 ~~and video, remote patient monitoring or store and forward,~~
21 ~~that meets the requirements of the Health Insurance~~
22 ~~Portability and Accountability Act of 1996, the Health~~
23 ~~Information Technology for Economic and Clinical Health Act~~
24 ~~or other applicable Federal or State law.~~

25 ~~(2) The term does not include the use of:~~

26 ~~(i) Audio only medium, voicemail, facsimile, e mail,~~
27 ~~instant messaging, text messaging or online~~
28 ~~questionnaire, or any combination thereof.~~

29 ~~(ii) A telephone call, except as provided under~~
30 ~~section 5(a)(3).~~

1 ~~Section 3. Regulation of telemedicine by professional licensure~~
2 ~~boards.~~

3 ~~(a) Requirements.~~

4 ~~(1) A health care provider who holds a valid license,~~
5 ~~certificate or registration from a Commonwealth professional~~
6 ~~licensure board shall be authorized to practice telemedicine~~
7 ~~in accordance with this act and the corresponding licensure~~
8 ~~board regulations.~~

9 ~~(2) A health care provider who engages in telemedicine~~
10 ~~in a manner that does not comply with the standards of care~~
11 ~~or rules of practice shall be subject to discipline by the~~
12 ~~appropriate licensure board, as provided by law.~~

13 ~~(b) Regulations. Each licensure board shall within 24~~
14 ~~months of the effective date of this section promulgate final~~
15 ~~regulations that are consistent with this act to provide for and~~
16 ~~regulate telemedicine within the scope of practice and standard~~
17 ~~of care regulated by the board. The regulations shall:~~

18 ~~(1) Consider model policies and clinical guidelines for~~
19 ~~the appropriate use of telemedicine technologies.~~

20 ~~(2) Include patient privacy and data security standards~~
21 ~~that are in compliance with the Health Insurance Portability~~
22 ~~and Accountability Act of 1996 and the Health Information~~
23 ~~Technology for Economic and Clinical Health Act.~~

24 ~~(c) Temporary regulations. In order to facilitate the~~
25 ~~prompt implementation of this act, the licensure boards shall~~
26 ~~transmit notice of temporary regulations regarding~~
27 ~~implementation of this act to the Legislative Reference Bureau~~
28 ~~for publication in the Pennsylvania Bulletin within 120 days of~~
29 ~~the effective date of this section. Temporary regulations are~~
30 ~~not subject to:~~

1 ~~(1) Sections 201, 202, 203, 204 and 205 of the act of~~
2 ~~July 31, 1968 (P.L.769, No.240), referred to as the~~
3 ~~Commonwealth Documents Law.~~

4 ~~(2) Sections 204(b) and 301(10) of the act of October~~
5 ~~15, 1980 (P.L.950, No.164), known as the Commonwealth~~
6 ~~Attorneys Act.~~

7 ~~(3) The act of June 25, 1982 (P.L.633, No.181), known as~~
8 ~~the Regulatory Review Act.~~

9 ~~(4) Section 612 of the act of April 9, 1929 (P.L.177,~~
10 ~~No.175), known as The Administrative Code of 1929.~~

11 ~~(d) Expiration. Temporary regulations shall expire no later~~
12 ~~than 24 months following publication of temporary regulations.~~
13 ~~Regulations adopted after this period shall be promulgated as~~
14 ~~provided by law.~~

15 ~~(e) Construction. The provisions of this act shall be in~~
16 ~~full force and effect even if the licensure boards have not yet~~
17 ~~published temporary regulations or implemented the regulations~~
18 ~~required under this section.~~

19 ~~Section 4. Compliance.~~

20 ~~A health care provider providing telemedicine services to an~~
21 ~~individual located within this Commonwealth shall comply with~~
22 ~~all applicable Federal and State laws and regulations, and shall~~
23 ~~hold a valid license, certificate or registration by an~~
24 ~~appropriate Commonwealth licensure board. Failure to hold a~~
25 ~~valid license, certificate or registration shall subject the~~
26 ~~health care provider to discipline by the respective licensure~~
27 ~~board for unlicensed practice.~~

28 ~~Section 5. Evaluation and treatment.~~

29 ~~(a) Requirements. Except as provided under subsection (c),~~
30 ~~a health care provider who provides telemedicine to an~~

1 ~~individual located in this Commonwealth shall comply with the~~
2 ~~following:~~

3 ~~(1) For a telemedicine encounter in which the provider~~
4 ~~does not have an established provider patient relationship,~~
5 ~~the provider shall:~~

6 ~~(i) verify the location and identity of the~~
7 ~~individual receiving care; and~~

8 ~~(ii) disclose the health care provider's identity,~~
9 ~~geographic location and medical specialty or applicable~~
10 ~~credentials.~~

11 ~~(2) Obtain informed consent regarding the use of~~
12 ~~telemedicine technologies from the individual or other person~~
13 ~~acting in a health care decision making capacity for the~~
14 ~~individual. The individual or other person acting in a health~~
15 ~~care decision making capacity, including the parent or legal~~
16 ~~guardian of a child in accordance with the act of February~~
17 ~~13, 1970 (P.L.19, No.10), entitled "An act enabling certain~~
18 ~~minors to consent to medical, dental and health services,~~
19 ~~declaring consent unnecessary under certain circumstances,"~~
20 ~~has the right to choose the form of service delivery, which~~
21 ~~includes the right to refuse telemedicine services without~~
22 ~~jeopardizing the individual's access to other available~~
23 ~~services.~~

24 ~~(3) Provide an appropriate examination or assessment~~
25 ~~using telemedicine technologies. The health care provider may~~
26 ~~utilize interactive audio without the requirement of~~
27 ~~interactive video if it is used in conjunction with store~~
28 ~~and forward technology and, after access and review of the~~
29 ~~patient's medical records, the provider determines that the~~
30 ~~provider is able to meet the same standards of care as if the~~

1 ~~health care services were provided in person. If the health-~~
2 ~~care provider utilizes interactive audio without interactive-~~
3 ~~video, the provider shall inform the patient that the patient-~~
4 ~~has the option to request interactive audio and video.~~

5 ~~(4) Establish a diagnosis and treatment plan or execute-~~
6 ~~a treatment plan.~~

7 ~~(5) Create and maintain an electronic medical record or~~
8 ~~update an existing electronic medical record for the patient~~
9 ~~within 24 hours. An electronic medical record shall be-~~
10 ~~maintained in accordance with electronic medical records-~~
11 ~~privacy rules under the Health Insurance Portability and~~
12 ~~Accountability Act of 1996.~~

13 ~~(6) Provide a visit summary to the individual if-~~
14 ~~requested.~~

15 ~~(7) Have an emergency action plan in place for medical-~~
16 ~~and behavioral health emergencies and referrals.~~

17 ~~(b) Disclosures. Providers offering online refractive-~~
18 ~~services shall inform patients that the service is not an ocular-~~
19 ~~health exam. This subsection shall not be construed to prohibit-~~
20 ~~online refractive services if the information notice is clearly-~~
21 ~~and conspicuously communicated to the patient prior to the-~~
22 ~~online refractive service.~~

23 ~~(c) Applicability.~~

24 ~~(1) Subsection (a) (1) shall not apply to on call or~~
25 ~~cross coverage services.~~

26 ~~(2) Subsection (a) (1) and (2) shall not apply to an~~
27 ~~emergency medical condition.~~

28 ~~Section 6. Insurance coverage of telemedicine.~~

29 ~~(a) Insurance coverage and reimbursement.~~

30 ~~(1) A health insurance policy issued, delivered,~~

1 ~~executed or renewed in this Commonwealth after the effective~~
2 ~~date of this section shall provide coverage for medically~~
3 ~~necessary telemedicine delivered by a participating network~~
4 ~~provider who provides a covered service via telemedicine~~
5 ~~consistent with the insurer's medical policies. A health~~
6 ~~insurance policy may not exclude a health care service for~~
7 ~~coverage solely because the service is provided through~~
8 ~~telemedicine.~~

9 ~~(2) Subject to paragraph (1), a health insurer shall~~
10 ~~reimburse a health care provider that is a participating~~
11 ~~network provider for both in person and telemedicine services~~
12 ~~in accordance with the terms and conditions of the network~~
13 ~~participation agreement as negotiated between the insurer and~~
14 ~~the participating provider, the form of which shall be filed~~
15 ~~with and subject to review by the Department of Health. The~~
16 ~~network participation agreement may not prohibit~~
17 ~~reimbursement solely because a health care service is~~
18 ~~provided by telemedicine. Reimbursement shall not be~~
19 ~~conditioned upon the use of an exclusive or proprietary~~
20 ~~telemedicine technology or vendor.~~

21 ~~(3) Payment for a covered service provided via~~
22 ~~telemedicine by any participating network provider shall be~~
23 ~~negotiated between the health care provider and health~~
24 ~~insurer.~~

25 ~~(b) Applicability. This section shall apply as follows:~~

26 ~~(1) Subsection (a) (1) and (2) shall not apply if the~~
27 ~~telemedicine service is facilitated via a medical device or~~
28 ~~other technology that provides clinical data or information,~~
29 ~~excluding existing information in an electronic medical~~
30 ~~records system, other than that independently provided~~

1 ~~through interactive audio and video with, or store and~~
2 ~~forward imaging provided by, the patient.~~

3 ~~(2) For a health insurance policy for which either rates~~
4 ~~or forms are required to be filed with the Federal Government~~
5 ~~or the Insurance Department, this section shall apply to a~~
6 ~~policy for which a form or rate is first filed on or after~~
7 ~~180 days after the effective date of this section.~~

8 ~~(3) For a health insurance policy for which neither~~
9 ~~rates nor forms are required to be filed with the Federal~~
10 ~~Government or the Insurance Department, this section shall~~
11 ~~apply to a policy issued or renewed on or after 180 days~~
12 ~~after the effective date of this section.~~

13 ~~(c) Construction. Nothing under this section shall be~~
14 ~~construed to:~~

15 ~~(1) Prohibit a health insurer from reimbursing other~~
16 ~~providers for covered services provided via telemedicine.~~

17 ~~(2) Require a health insurer to reimburse an out of~~
18 ~~network provider for telemedicine.~~

19 ~~Section 7. Medicaid program reimbursement.~~

20 ~~(a) Medical assistance payment. Medical assistance payments~~
21 ~~shall be made on behalf of eligible individuals for~~
22 ~~telemedicine, consistent with Federal law, as specified under~~
23 ~~this act if the service would be covered through an in person~~
24 ~~encounter.~~

25 ~~(b) Applicability. Subsection (a) does not apply if:~~

26 ~~(1) the telemedicine enabling device, technology or~~
27 ~~service fails to comply with applicable law and regulatory~~
28 ~~guidance regarding the secure transmission and maintenance of~~
29 ~~patient information; or~~

30 ~~(2) the provision of the service using telemedicine~~

1 ~~would be inconsistent with the standard of care.~~

2 ~~Section 8. Effective date.~~

3 ~~This act shall take effect as follows:~~

4 ~~(1) Section 6 shall take effect upon publication in the~~
5 ~~Pennsylvania Bulletin of the temporary regulations required~~
6 ~~in section 3(c).~~

7 ~~(2) Section 7 shall take effect in 90 days.~~

8 ~~(3) The remainder of this act shall take effect~~
9 ~~immediately.~~

10 SECTION 1. TITLE 40 OF THE PENNSYLVANIA CONSOLIDATED
11 STATUTES IS AMENDED BY ADDING A CHAPTER TO READ:

<--

12 CHAPTER 41

13 TELEMEDICINE

14 SEC.

15 4101. SCOPE OF CHAPTER.

16 4102. DEFINITIONS.

17 4103. REGULATION OF TELEMEDICINE BY PROFESSIONAL LICENSURE
18 BOARDS.

19 4104. COMPLIANCE.

20 4105. EVALUATION AND TREATMENT.

21 4106. INSURANCE COVERAGE OF TELEMEDICINE.

22 4107. MEDICAID PROGRAM REIMBURSEMENT.

23 § 4101. SCOPE OF CHAPTER.

24 THIS CHAPTER RELATES TO TELEMEDICINE, THE REGULATION OF
25 TELEMEDICINE BY PROFESSIONAL LICENSING BOARDS AND INSURANCE
26 COVERAGE OF TELEMEDICINE.

27 § 4102. DEFINITIONS.

28 THE FOLLOWING WORDS AND PHRASES WHEN USED IN THIS CHAPTER
29 SHALL HAVE THE MEANINGS GIVEN TO THEM IN THIS SECTION UNLESS THE
30 CONTEXT CLEARLY INDICATES OTHERWISE:

1 "AUDIO-ONLY MEDIUM." A PRERECORDED AUDIO PRESENTATION OR
2 RECORDING.

3 "EMERGENCY MEDICAL CONDITION." A MEDICAL CONDITION
4 MANIFESTING ITSELF BY ACUTE SYMPTOMS OF SUFFICIENT SEVERITY,
5 INCLUDING SEVERE PAIN, SUCH THAT THE ABSENCE OF IMMEDIATE
6 MEDICAL ATTENTION COULD REASONABLY BE EXPECTED TO RESULT IN
7 PLACING THE HEALTH OF THE INDIVIDUAL IN SERIOUS JEOPARDY,
8 SERIOUS IMPAIRMENT TO BODILY FUNCTIONS OR SERIOUS DYSFUNCTION OF
9 A BODILY ORGAN OR PART.

10 "HEALTH CARE PROVIDER" OR "PROVIDER." ANY OF THE FOLLOWING:

11 (1) A HEALTH CARE PRACTITIONER AS DEFINED IN SECTION 103
12 OF THE ACT OF JULY 19, 1979 (P.L.130, NO.48), KNOWN AS THE
13 HEALTH CARE FACILITIES ACT.

14 (2) A FEDERALLY QUALIFIED HEALTH CENTER AS DEFINED IN
15 SECTION 1861(AA)(4) OF THE SOCIAL SECURITY ACT (49 STAT. 620,
16 42 U.S.C. § 1395X(AA)(4)).

17 (3) A RURAL HEALTH CLINIC AS DEFINED IN SECTION 1861(AA)
18 (2) OF THE SOCIAL SECURITY ACT (49 STAT. 620, 42 U.S.C. §
19 1395X(AA)(2)).

20 (4) A GENERAL, MENTAL, CHRONIC DISEASE OR OTHER TYPE OF
21 HOSPITAL LICENSED IN THIS COMMONWEALTH.

22 (5) A PHARMACIST WHO HOLDS A VALID LICENSE UNDER THE ACT
23 OF SEPTEMBER 27, 1961 (P.L.1700, NO.699), KNOWN AS THE
24 PHARMACY ACT.

25 (6) AN OCCUPATIONAL THERAPIST WHO HOLDS A VALID LICENSE
26 UNDER THE ACT OF JUNE 15, 1982 (P.L.502, NO.140), KNOWN AS
27 THE OCCUPATIONAL THERAPY PRACTICE ACT.

28 (7) A SPEECH-LANGUAGE PATHOLOGIST WHO HOLDS A VALID
29 LICENSE UNDER THE ACT OF DECEMBER 21, 1984 (P.L.1253,
30 NO.238), KNOWN AS THE SPEECH-LANGUAGE PATHOLOGISTS AND

1 AUDIOLOGISTS LICENSURE ACT.

2 (8) AN AUDIOLOGIST WHO HOLDS A VALID LICENSE UNDER THE
3 SPEECH-LANGUAGE PATHOLOGISTS AND AUDIOLOGISTS LICENSURE ACT.

4 (9) A DENTAL HYGIENIST WHO HOLDS A VALID LICENSE UNDER
5 THE ACT OF MAY 1, 1933 (P.L.216, NO.76), KNOWN AS THE DENTAL
6 LAW.

7 (10) A SOCIAL WORKER, CLINICAL SOCIAL WORKER, MARRIAGE
8 AND FAMILY THERAPIST OR PROFESSIONAL COUNSELOR WHO HOLDS A
9 VALID LICENSE UNDER THE ACT OF JULY 9, 1987 (P.L.220, NO.39),
10 KNOWN AS THE SOCIAL WORKERS, MARRIAGE AND FAMILY THERAPISTS
11 AND PROFESSIONAL COUNSELORS ACT.

12 (11) A REGISTERED NURSE WHO HOLDS A VALID LICENSE UNDER
13 THE ACT OF MAY 22, 1951 (P.L.317, NO.69), KNOWN AS THE
14 PROFESSIONAL NURSING LAW.

15 (12) A GENETIC COUNSELOR WHO HOLDS A VALID LICENSE UNDER
16 THE ACT OF DECEMBER 20, 1985 (P.L.457, NO.112), KNOWN AS THE
17 MEDICAL PRACTICE ACT OF 1985, OR THE ACT OF OCTOBER 5, 1978
18 (P.L.1109, NO.261), KNOWN AS THE OSTEOPATHIC MEDICAL PRACTICE
19 ACT.

20 (13) AN OUT-OF-STATE HEALTH CARE PROVIDER.
21 "HEALTH CARE SERVICES." SERVICES FOR THE DIAGNOSIS,
22 PREVENTION, TREATMENT, CURE OR RELIEF OF A HEALTH CONDITION,
23 INJURY, DISEASE OR ILLNESS.

24 "HEALTH INFORMATION TECHNOLOGY FOR ECONOMIC AND CLINICAL
25 HEALTH ACT." THE HEALTH INFORMATION TECHNOLOGY FOR ECONOMIC AND
26 CLINICAL HEALTH ACT (PUBLIC LAW 111-5, 123 STAT. 226-279 AND
27 467-496).

28 "HEALTH INSURANCE POLICY." AS FOLLOWS:

29 (1) AN INDIVIDUAL OR GROUP HEALTH INSURANCE POLICY,
30 CONTRACT OR PLAN THAT PROVIDES COVERAGE FOR SERVICES PROVIDED

1 BY A HEALTH CARE FACILITY OR HEALTH CARE PROVIDER THAT IS
2 OFFERED BY A HEALTH INSURER.

3 (2) THE TERM INCLUDES AN INDIVIDUAL OR GROUP HEALTH
4 INSURANCE POLICY, CONTRACT OR PLAN THAT PROVIDES DENTAL OR
5 VISION COVERAGE THROUGH A PROVIDER NETWORK.

6 (3) EXCEPT AS PROVIDED UNDER PARAGRAPH (2), THE TERM
7 DOES NOT INCLUDE ACCIDENT ONLY, FIXED INDEMNITY, LIMITED
8 BENEFIT, CREDIT, DENTAL, VISION, SPECIFIED DISEASE, MEDICARE
9 SUPPLEMENT, CIVILIAN HEALTH AND MEDICAL PROGRAM OF THE
10 UNIFORMED SERVICES (CHAMPUS) SUPPLEMENT, LONG-TERM CARE OR
11 DISABILITY INCOME, WORKERS' COMPENSATION OR AUTOMOBILE
12 MEDICAL PAYMENT INSURANCE.

13 "HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF
14 1996." THE HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT
15 OF 1996 (PUBLIC LAW 104-191, 110 STAT. 1936).

16 "HEALTH INSURER." AN ENTITY THAT HOLDS A VALID LICENSE BY
17 THE DEPARTMENT WITH ACCIDENT AND HEALTH AUTHORITY TO ISSUE A
18 HEALTH INSURANCE POLICY AND GOVERNED UNDER ANY OF THE FOLLOWING:

19 (1) THE ACT OF MAY 17, 1921 (P.L.682, NO.284), KNOWN AS
20 THE INSURANCE COMPANY LAW OF 1921, INCLUDING SECTION 630 AND
21 ARTICLE XXIV.

22 (2) THE ACT OF DECEMBER 29, 1972 (P.L.1701, NO.364),
23 KNOWN AS THE HEALTH MAINTENANCE ORGANIZATION ACT.

24 (3) CHAPTER 61 (RELATING TO HOSPITAL PLAN CORPORATIONS).

25 (4) CHAPTER 63 (RELATING TO PROFESSIONAL HEALTH SERVICES
26 PLAN CORPORATIONS).

27 "INTERACTIVE AUDIO AND VIDEO." REAL-TIME TWO-WAY OR
28 MULTIPLE-WAY COMMUNICATION BETWEEN A HEALTH CARE PROVIDER AND A
29 PATIENT.

30 "LICENSURE BOARD." EACH LICENSING BOARD WITHIN THE BUREAU OF

1 PROFESSIONAL AND OCCUPATIONAL AFFAIRS OF THE DEPARTMENT OF STATE
2 WITH JURISDICTION OVER A PROFESSIONAL LICENSEE IDENTIFIED AS A
3 HEALTH CARE PROVIDER UNDER THIS CHAPTER.

4 "ON-CALL OR CROSS-COVERAGE SERVICES." THE PROVISION OF
5 TELEMEDICINE BY A HEALTH CARE PROVIDER DESIGNATED BY ANOTHER
6 PROVIDER WITH A PROVIDER-PATIENT RELATIONSHIP TO DELIVER
7 SERVICES ON A TEMPORARY BASIS SO LONG AS THE DESIGNATED PROVIDER
8 IS IN THE SAME GROUP OR HEALTH SYSTEM, HAS ACCESS TO THE
9 PATIENT'S PRIOR MEDICAL RECORDS, HOLDS A VALID LICENSE IN THIS
10 COMMONWEALTH AND IS IN A POSITION TO COORDINATE CARE.

11 "OUT-OF-STATE HEALTH CARE PROVIDER." A HEALTH CARE PROVIDER
12 PROVIDING A TELEMEDICINE SERVICE THAT HOLDS A VALID LICENSE,
13 CERTIFICATE OR REGISTRATION IN ANOTHER JURISDICTION AND IS:

14 (1) DISCHARGING OFFICIAL DUTIES IN THE ARMED FORCES OF
15 THE UNITED STATES, THE UNITED STATES PUBLIC HEALTH SERVICES
16 OR THE UNITED STATES DEPARTMENT OF VETERANS AFFAIRS;

17 (2) PROVIDING TELEMEDICINE SERVICES TO A PATIENT THROUGH
18 A FEDERALLY OPERATED FACILITY;

19 (3) PROVIDING TELEMEDICINE SERVICES IN RESPONSE TO AN
20 EMERGENCY MEDICAL CONDITION, IF THE CARE FOR THE PATIENT IS
21 REFERRED TO AN APPROPRIATE HEALTH CARE PROVIDER IN THIS
22 COMMONWEALTH AS PROMPTLY AS POSSIBLE UNDER THE CIRCUMSTANCES;

23 (4) PROVIDING PROVIDER-TO-PROVIDER CONSULTATION
24 SERVICES; OR

25 (5) PROVIDING SERVICES WHICH WOULD OTHERWISE BE EXEMPT
26 FROM THE REQUIREMENT OF LICENSURE, CERTIFICATION OR
27 REGISTRATION IN THIS COMMONWEALTH UNDER THE RESPECTIVE
28 LICENSURE ACT.

29 "PARTICIPATING NETWORK PROVIDER." A HEALTH CARE PROVIDER
30 THAT HAS A NETWORK PARTICIPATION AGREEMENT WITH AN INSURER.

1 "PROVIDER-TO-PROVIDER CONSULTATION." THE ACT OF SEEKING
2 ADVICE AND RECOMMENDATIONS FROM ANOTHER HEALTH CARE PROVIDER FOR
3 DIAGNOSTIC STUDIES, THERAPEUTIC INTERVENTIONS OR OTHER SERVICES
4 THAT MAY BENEFIT THE PATIENT OF THE INITIATING HEALTH CARE
5 PROVIDER.

6 "STORE-AND-FORWARD." AS FOLLOWS:

7 (1) TECHNOLOGY THAT STORES AND TRANSMITS OR GRANTS
8 ACCESS TO A PATIENT'S CLINICAL INFORMATION FOR REVIEW BY A
9 HEALTH CARE PROVIDER WHO IS AT A DIFFERENT LOCATION.

10 (2) THE TERM DOES NOT INCLUDE THE STORAGE, TRANSMISSION
11 OR USE OF ELECTRONIC MEDICAL RECORDS WITHOUT THE CONCURRENT
12 TRANSMISSION OF ADDITIONAL CLINICAL INFORMATION NOT ALREADY
13 PRESENT IN THE ELECTRONIC MEDICAL RECORDS.

14 "TELEMEDICINE." AS FOLLOWS:

15 (1) THE DELIVERY OF HEALTH CARE SERVICES PROVIDED
16 THROUGH TELEMEDICINE TECHNOLOGIES TO A PATIENT BY A HEALTH
17 CARE PROVIDER WHO IS AT A DIFFERENT LOCATION.

18 (2) THE TERM DOES NOT INCLUDE A PROVIDER-TO-PROVIDER
19 CONSULTATION.

20 "TELEMEDICINE TECHNOLOGIES." AS FOLLOWS:

21 (1) ELECTRONIC INFORMATION AND TELECOMMUNICATIONS
22 TECHNOLOGY, INCLUDING, BUT NOT LIMITED TO, INTERACTIVE AUDIO
23 AND VIDEO, REMOTE PATIENT MONITORING OR STORE-AND-FORWARD,
24 THAT MEETS THE REQUIREMENTS OF THE HEALTH INSURANCE
25 PORTABILITY AND ACCOUNTABILITY ACT OF 1996, THE HEALTH
26 INFORMATION TECHNOLOGY FOR ECONOMIC AND CLINICAL HEALTH ACT
27 OR OTHER APPLICABLE FEDERAL OR STATE LAW.

28 (2) THE TERM DOES NOT INCLUDE THE USE OF:

29 (I) AUDIO-ONLY MEDIUM, VOICEMAIL, FACSIMILE, E-MAIL,
30 INSTANT MESSAGING, TEXT MESSAGING OR ONLINE

1 QUESTIONNAIRE, OR ANY COMBINATION THEREOF.

2 (II) A TELEPHONE CALL, EXCEPT AS PROVIDED UNDER
3 SECTION 4105(A)(3) (RELATING TO EVALUATION AND
4 TREATMENT).

5 § 4103. REGULATION OF TELEMEDICINE BY PROFESSIONAL LICENSURE
6 BOARDS.

7 (A) REQUIREMENTS.--

8 (1) A HEALTH CARE PROVIDER WHO HOLDS A VALID LICENSE,
9 CERTIFICATE OR REGISTRATION FROM A COMMONWEALTH PROFESSIONAL
10 LICENSURE BOARD SHALL BE AUTHORIZED TO PRACTICE TELEMEDICINE
11 IN ACCORDANCE WITH THIS CHAPTER AND THE CORRESPONDING
12 LICENSURE BOARD REGULATIONS.

13 (2) A HEALTH CARE PROVIDER WHO ENGAGES IN TELEMEDICINE
14 IN A MANNER THAT DOES NOT COMPLY WITH THE STANDARDS OF CARE
15 OR RULES OF PRACTICE SHALL BE SUBJECT TO DISCIPLINE BY THE
16 APPROPRIATE LICENSURE BOARD, AS PROVIDED BY LAW.

17 (B) REGULATIONS.--EACH LICENSURE BOARD SHALL WITHIN 24
18 MONTHS OF THE EFFECTIVE DATE OF THIS SECTION PROMULGATE FINAL
19 REGULATIONS THAT ARE CONSISTENT WITH THIS CHAPTER TO PROVIDE FOR
20 AND REGULATE TELEMEDICINE WITHIN THE SCOPE OF PRACTICE AND
21 STANDARD OF CARE REGULATED BY THE BOARD. THE REGULATIONS SHALL:

22 (1) CONSIDER MODEL POLICIES AND CLINICAL GUIDELINES FOR
23 THE APPROPRIATE USE OF TELEMEDICINE TECHNOLOGIES.

24 (2) INCLUDE PATIENT PRIVACY AND DATA SECURITY STANDARDS
25 THAT ARE IN COMPLIANCE WITH THE HEALTH INSURANCE PORTABILITY
26 AND ACCOUNTABILITY ACT OF 1996 AND THE HEALTH INFORMATION
27 TECHNOLOGY FOR ECONOMIC AND CLINICAL HEALTH ACT.

28 (C) TEMPORARY REGULATIONS.--IN ORDER TO FACILITATE THE
29 PROMPT IMPLEMENTATION OF THIS CHAPTER, THE LICENSURE BOARDS
30 SHALL TRANSMIT NOTICE OF TEMPORARY REGULATIONS REGARDING

1 IMPLEMENTATION OF THIS CHAPTER TO THE LEGISLATIVE REFERENCE
2 BUREAU FOR PUBLICATION IN THE PENNSYLVANIA BULLETIN WITHIN 120
3 DAYS OF THE EFFECTIVE DATE OF THIS SECTION. TEMPORARY
4 REGULATIONS ARE NOT SUBJECT TO:

5 (1) SECTIONS 201, 202, 203, 204 AND 205 OF THE ACT OF
6 JULY 31, 1968 (P.L.769, NO.240), REFERRED TO AS THE
7 COMMONWEALTH DOCUMENTS LAW.

8 (2) SECTIONS 204(B) AND 301(10) OF THE ACT OF OCTOBER
9 15, 1980 (P.L.950, NO.164), KNOWN AS THE COMMONWEALTH
10 ATTORNEYS ACT.

11 (3) THE ACT OF JUNE 25, 1982 (P.L.633, NO.181), KNOWN AS
12 THE REGULATORY REVIEW ACT.

13 (4) SECTION 612 OF THE ACT OF APRIL 9, 1929 (P.L.177,
14 NO.175), KNOWN AS THE ADMINISTRATIVE CODE OF 1929.

15 (D) EXPIRATION.--TEMPORARY REGULATIONS SHALL EXPIRE NO LATER
16 THAN 24 MONTHS FOLLOWING PUBLICATION OF TEMPORARY REGULATIONS.
17 REGULATIONS ADOPTED AFTER THIS PERIOD SHALL BE PROMULGATED AS
18 PROVIDED BY LAW.

19 (E) CONSTRUCTION.--THE PROVISIONS OF THIS CHAPTER SHALL BE
20 IN FULL FORCE AND EFFECT EVEN IF THE LICENSURE BOARDS HAVE NOT
21 YET PUBLISHED TEMPORARY REGULATIONS OR IMPLEMENTED THE
22 REGULATIONS REQUIRED UNDER THIS SECTION.

23 § 4104. COMPLIANCE.

24 A HEALTH CARE PROVIDER PROVIDING TELEMEDICINE SERVICES TO AN
25 INDIVIDUAL LOCATED WITHIN THIS COMMONWEALTH SHALL COMPLY WITH
26 ALL APPLICABLE FEDERAL AND STATE LAWS AND REGULATIONS, AND SHALL
27 HOLD A VALID LICENSE, CERTIFICATE OR REGISTRATION BY AN
28 APPROPRIATE COMMONWEALTH LICENSURE BOARD. FAILURE TO HOLD A
29 VALID LICENSE, CERTIFICATE OR REGISTRATION SHALL SUBJECT THE
30 HEALTH CARE PROVIDER TO DISCIPLINE BY THE RESPECTIVE LICENSURE

1 BOARD FOR UNLICENSED PRACTICE.

2 § 4105. EVALUATION AND TREATMENT.

3 (A) REQUIREMENTS.--EXCEPT AS PROVIDED UNDER SUBSECTION (D),
4 A HEALTH CARE PROVIDER WHO PROVIDES TELEMEDICINE TO AN
5 INDIVIDUAL LOCATED IN THIS COMMONWEALTH SHALL COMPLY WITH THE
6 FOLLOWING:

7 (1) FOR A TELEMEDICINE ENCOUNTER IN WHICH THE PROVIDER
8 DOES NOT HAVE AN ESTABLISHED PROVIDER-PATIENT RELATIONSHIP,
9 THE PROVIDER SHALL:

10 (I) VERIFY THE LOCATION AND IDENTITY OF THE
11 INDIVIDUAL RECEIVING CARE; AND

12 (II) DISCLOSE THE HEALTH CARE PROVIDER'S IDENTITY,
13 GEOGRAPHIC LOCATION AND MEDICAL SPECIALTY OR APPLICABLE
14 CREDENTIALS.

15 (2) OBTAIN INFORMED CONSENT REGARDING THE USE OF
16 TELEMEDICINE TECHNOLOGIES FROM THE INDIVIDUAL OR OTHER PERSON
17 ACTING IN A HEALTH CARE DECISION-MAKING CAPACITY FOR THE
18 INDIVIDUAL. THE INDIVIDUAL OR OTHER PERSON ACTING IN A HEALTH
19 CARE DECISION-MAKING CAPACITY, INCLUDING THE PARENT OR LEGAL
20 GUARDIAN OF A CHILD IN ACCORDANCE WITH THE ACT OF FEBRUARY
21 13, 1970 (P.L.19, NO.10), ENTITLED "AN ACT ENABLING CERTAIN
22 MINORS TO CONSENT TO MEDICAL, DENTAL AND HEALTH SERVICES,
23 DECLARING CONSENT UNNECESSARY UNDER CERTAIN CIRCUMSTANCES,"
24 HAS THE RIGHT TO CHOOSE THE FORM OF SERVICE DELIVERY, WHICH
25 INCLUDES THE RIGHT TO REFUSE TELEMEDICINE SERVICES WITHOUT
26 JEOPARDIZING THE INDIVIDUAL'S ACCESS TO OTHER AVAILABLE
27 SERVICES.

28 (3) PROVIDE AN APPROPRIATE EXAMINATION OR ASSESSMENT
29 USING TELEMEDICINE TECHNOLOGIES. THE HEALTH CARE PROVIDER MAY
30 UTILIZE INTERACTIVE AUDIO WITHOUT THE REQUIREMENT OF

1 INTERACTIVE VIDEO IF IT IS USED IN CONJUNCTION WITH STORE-
2 AND-FORWARD TECHNOLOGY AND, AFTER ACCESS AND REVIEW OF THE
3 PATIENT'S MEDICAL RECORDS, THE PROVIDER DETERMINES THAT THE
4 PROVIDER IS ABLE TO MEET THE SAME STANDARDS OF CARE AS IF THE
5 HEALTH CARE SERVICES WERE PROVIDED IN PERSON. IF THE HEALTH
6 CARE PROVIDER UTILIZES INTERACTIVE AUDIO WITHOUT INTERACTIVE
7 VIDEO, THE PROVIDER SHALL INFORM THE PATIENT THAT THE PATIENT
8 HAS THE OPTION TO REQUEST INTERACTIVE AUDIO AND VIDEO.

9 (4) ESTABLISH A DIAGNOSIS AND TREATMENT PLAN OR EXECUTE
10 A TREATMENT PLAN.

11 (5) CREATE AND MAINTAIN AN ELECTRONIC MEDICAL RECORD OR
12 UPDATE AN EXISTING ELECTRONIC MEDICAL RECORD FOR THE PATIENT
13 WITHIN 24 HOURS. AN ELECTRONIC MEDICAL RECORD SHALL BE
14 MAINTAINED IN ACCORDANCE WITH ELECTRONIC MEDICAL RECORDS
15 PRIVACY RULES UNDER THE HEALTH INSURANCE PORTABILITY AND
16 ACCOUNTABILITY ACT OF 1996.

17 (6) PROVIDE A VISIT SUMMARY TO THE INDIVIDUAL IF
18 REQUESTED.

19 (7) HAVE AN EMERGENCY ACTION PLAN IN PLACE FOR MEDICAL
20 AND BEHAVIORAL HEALTH EMERGENCIES AND REFERRALS.

21 (B) DISCLOSURES.--PROVIDERS OFFERING ONLINE REFRACTIVE
22 SERVICES SHALL INFORM PATIENTS THAT THE SERVICE IS NOT AN OCULAR
23 HEALTH EXAM. THIS SUBSECTION SHALL NOT BE CONSTRUED TO PROHIBIT
24 ONLINE REFRACTIVE SERVICES IF THE INFORMATION NOTICE IS CLEARLY
25 AND CONSPICUOUSLY COMMUNICATED TO THE PATIENT PRIOR TO THE
26 ONLINE REFRACTIVE SERVICE.

27 (C) LIMITATIONS ON TREATMENT.--TELEMEDICINE SERVICES OR
28 TELEMEDICINE TECHNOLOGIES MAY NOT BE PERMITTED TO BE UTILIZED OR
29 EMPLOYED FOR THE DELIVERY OR ADMINISTRATION OF ANY MEDICATIONS
30 OR HEALTH CARE SERVICES, WHICH ARE, AS OF JULY 1, 2019, REQUIRED

1 TO BE DELIVERED OR ADMINISTERED IN A HEALTH CARE CLINIC, MEDICAL
2 FACILITY, PHYSICIAN'S OFFICE, HOSPITAL OR AMBULATORY SURGICAL
3 FACILITY, ACCORDING TO FEDERAL OR STATE STATUTE, REGULATION OR
4 PROMULGATED REGULATORY RULE OR BY THE UNITED STATES FOOD AND
5 DRUG ADMINISTRATION RISK EVALUATION AND MITIGATION STRATEGIES
6 (REMS).

7 (D) APPLICABILITY.--

8 (1) SUBSECTION (A) (1) SHALL NOT APPLY TO ON-CALL OR
9 CROSS-COVERAGE SERVICES.

10 (2) SUBSECTION (A) (1) AND (2) SHALL NOT APPLY TO AN
11 EMERGENCY MEDICAL CONDITION.

12 § 4106. INSURANCE COVERAGE OF TELEMEDICINE.

13 (A) INSURANCE COVERAGE AND REIMBURSEMENT.--

14 (1) A HEALTH INSURANCE POLICY ISSUED, DELIVERED,
15 EXECUTED OR RENEWED IN THIS COMMONWEALTH AFTER THE EFFECTIVE
16 DATE OF THIS SECTION SHALL PROVIDE COVERAGE FOR MEDICALLY
17 NECESSARY TELEMEDICINE DELIVERED BY A PARTICIPATING NETWORK
18 PROVIDER WHO PROVIDES A COVERED SERVICE VIA TELEMEDICINE
19 CONSISTENT WITH THE INSURER'S MEDICAL POLICIES. A HEALTH
20 INSURANCE POLICY MAY NOT EXCLUDE A HEALTH CARE SERVICE FOR
21 COVERAGE SOLELY BECAUSE THE SERVICE IS PROVIDED THROUGH
22 TELEMEDICINE.

23 (2) SUBJECT TO PARAGRAPH (1), A HEALTH INSURER SHALL
24 REIMBURSE A HEALTH CARE PROVIDER THAT IS A PARTICIPATING
25 NETWORK PROVIDER FOR BOTH IN-PERSON AND TELEMEDICINE SERVICES
26 IN ACCORDANCE WITH THE TERMS AND CONDITIONS OF THE NETWORK
27 PARTICIPATION AGREEMENT AS NEGOTIATED BETWEEN THE INSURER AND
28 THE PARTICIPATING PROVIDER, THE FORM OF WHICH SHALL BE FILED
29 WITH AND SUBJECT TO REVIEW BY THE DEPARTMENT OF HEALTH. THE
30 NETWORK PARTICIPATION AGREEMENT MAY NOT PROHIBIT

1 REIMBURSEMENT SOLELY BECAUSE A HEALTH CARE SERVICE IS
2 PROVIDED BY TELEMEDICINE. REIMBURSEMENT SHALL NOT BE
3 CONDITIONED UPON THE USE OF AN EXCLUSIVE OR PROPRIETARY
4 TELEMEDICINE TECHNOLOGY OR VENDOR.

5 (3) PAYMENT FOR A COVERED SERVICE PROVIDED VIA
6 TELEMEDICINE BY ANY PARTICIPATING NETWORK PROVIDER SHALL BE
7 NEGOTIATED BETWEEN THE HEALTH CARE PROVIDER AND HEALTH
8 INSURER.

9 (B) APPLICABILITY.--THIS SECTION SHALL APPLY AS FOLLOWS:

10 (1) SUBSECTION (A) (1) AND (2) SHALL NOT APPLY IF THE
11 TELEMEDICINE SERVICE IS FACILITATED VIA A MEDICAL DEVICE OR
12 OTHER TECHNOLOGY THAT PROVIDES CLINICAL DATA OR INFORMATION,
13 EXCLUDING EXISTING INFORMATION IN AN ELECTRONIC MEDICAL
14 RECORDS SYSTEM, OTHER THAN THAT INDEPENDENTLY PROVIDED
15 THROUGH INTERACTIVE AUDIO AND VIDEO WITH, OR STORE-AND-
16 FORWARD IMAGING PROVIDED BY, THE PATIENT.

17 (2) FOR A HEALTH INSURANCE POLICY FOR WHICH EITHER RATES
18 OR FORMS ARE REQUIRED TO BE FILED WITH THE FEDERAL GOVERNMENT
19 OR THE DEPARTMENT, THIS SECTION SHALL APPLY TO A POLICY FOR
20 WHICH A FORM OR RATE IS FIRST FILED ON OR AFTER 180 DAYS
21 AFTER THE EFFECTIVE DATE OF THIS SECTION.

22 (3) FOR A HEALTH INSURANCE POLICY FOR WHICH NEITHER
23 RATES NOR FORMS ARE REQUIRED TO BE FILED WITH THE FEDERAL
24 GOVERNMENT OR THE DEPARTMENT, THIS SECTION SHALL APPLY TO A
25 POLICY ISSUED OR RENEWED ON OR AFTER 180 DAYS AFTER THE
26 EFFECTIVE DATE OF THIS SECTION.

27 (C) CONSTRUCTION.--NOTHING UNDER THIS SECTION SHALL BE
28 CONSTRUED TO:

29 (1) PROHIBIT A HEALTH INSURER FROM REIMBURSING OTHER
30 PROVIDERS FOR COVERED SERVICES PROVIDED VIA TELEMEDICINE.

1 (2) REQUIRE A HEALTH INSURER TO REIMBURSE AN OUT-OF-
2 NETWORK PROVIDER FOR TELEMEDICINE.

3 § 4107. MEDICAID PROGRAM REIMBURSEMENT.

4 (A) MEDICAL ASSISTANCE PAYMENT.--MEDICAL ASSISTANCE PAYMENTS
5 SHALL BE MADE ON BEHALF OF ELIGIBLE INDIVIDUALS FOR
6 TELEMEDICINE, CONSISTENT WITH FEDERAL LAW, AS SPECIFIED UNDER
7 THIS CHAPTER IF THE SERVICE WOULD BE COVERED THROUGH AN IN-
8 PERSON ENCOUNTER.

9 (B) APPLICABILITY.--SUBSECTION (A) DOES NOT APPLY IF:

10 (1) THE TELEMEDICINE-ENABLING DEVICE, TECHNOLOGY OR
11 SERVICE FAILS TO COMPLY WITH APPLICABLE LAW AND REGULATORY
12 GUIDANCE REGARDING THE SECURE TRANSMISSION AND MAINTENANCE OF
13 PATIENT INFORMATION; OR

14 (2) THE PROVISION OF THE SERVICE USING TELEMEDICINE
15 WOULD BE INCONSISTENT WITH THE STANDARD OF CARE.

16 SECTION 2. THIS ACT SHALL TAKE EFFECT AS FOLLOWS:

17 (1) THE ADDITION OF 40 PA.C.S. § 4106 SHALL TAKE EFFECT
18 UPON PUBLICATION IN THE PENNSYLVANIA BULLETIN OF THE
19 TEMPORARY REGULATIONS REQUIRED IN 40 PA.C.S. § 4103(C).

20 (2) THE ADDITION OF 40 PA.C.S. § 4107 SHALL TAKE EFFECT
21 IN 90 DAYS.

22 (3) THE REMAINDER OF THIS ACT SHALL TAKE EFFECT
23 IMMEDIATELY.