

Roundup of 2015 Approved State Telehealth Legislation

State	Bill #	Summary
Alabama	<u>SB 125</u>	This bill would adopt the Federation of State Medical Boards' Model language for an interstate medical licensure compact.
Arizona	<u>SB 1194</u>	This bill would require the Department of Health Services to adopt rules pertaining to the provision of services by telemedicine.
Arizona	<u>SB 1212</u>	This bill would add a new definition of "Telepractice" to law relating to the Board of Behavioral Health Examiners.
Arizona	<u>SB 1282</u>	This bill would provide for coverage of teledentistry by insurers.
Arkansas	<u>HB 1076</u>	This bill would prohibit the use of telemedicine to administer the abortion pill. Similar to SB 53.
Arkansas	<u>SB 53</u>	This bill would prohibit the use of telemedicine to administer the abortion pill. Similar to HB 1076.
Arkansas	<u>SB 96</u>	This bill would provide for the Department of Human Services to submit and apply for a federal waiver or authority necessary to transform the Arkansas Medicaid program into a program with maximum state flexibility in the use of the funds for innovative and cost-effective solutions for the provision of health care. Among other things, the solutions through this effort shall aim to sustain and improve optimized use of telemedicine.
Arkansas	<u>SB 133</u>	Sponsor: Bledsoe This bill would authorize reimbursement and regulation of services provided through telemedicine, among other things.
Arkansas	<u>SB 678</u>	This bill appropriates funds towards electronic health records and telehealth services grants.
California	<u>AB 250</u>	This bill would expand the definition of "health care provider" for the purposes of the telehealth provision currently in law, to include a marriage and family therapist intern and trainee.
California	<u>SB 147</u>	This bill would require the department to authorize a three year alternative payment methodology pilot project for FQHCs that would be implemented in any county and FQHC willing to participate.



California	<u>SB 464</u>	This bill would authorize certain health care providers to use a self-screening tool that will identify patient risk factors for the use of self-administered hormonal contraceptives by a patient, and, after an appropriate prior examination, to prescribe, furnish, or dispense, as applicable, self-administered hormonal contraceptives to the patient. The bill would authorize blood pressure, weight, height, and patient health history to be self-reported using the self-screening tool.
California	<u>SB 800</u>	This bill would authorize a marriage and family therapist intern and trainee to provide services via telehealth if he or she is supervised as required by the Act, and is acting within the scope authorized by the Act and in accordance with any regulations governing the use of telehealth promulgated by the Board of Behavioral Sciences.
Colorado	<u>HB 1029</u>	This bill concerns coverage under a health benefit plan for health care services delivered through telemedicine in any area of the state. Effective in 2 years.
Colorado	<u>HB 1309</u>	This bill concerns the placement of interim therapeutic restorations by dental hygienists, and, in connection therewith, ensuring Medicaid and children's basic health plan reimbursement for services provided through the use of telehealth related to interim therapeutic restoration procedures.
Connecticut	<u>SB 467</u>	Sponsor: Looney Concerns the facilitation of telemedicine; establishes minimum standards of practice and health insurance coverage for telemedicine.
Delaware	<u>HB 69</u>	This bill requires insurers to cover telemedicine for the delivery of health care services. This bill also sets up certain practice requirements for physicians practicing telemedicine, including the establishment of a physician-patient relationship, needed to issue a prescription. It also requires informed consent. This bill does not apply to the Medicaid program.
Florida	<u>HB 505</u>	This bill would create a work group to improve the operational effectiveness of the Baker Act. At a minimum, the work group will evaluate and make recommendations on the use of telemedicine for patient evaluation, case management, and ongoing care and the recommendation by the courts on the use of telemedicine to improve management of patient care and to reduce costs of transportation and public safety.
Georgia	<u>HB 505</u>	This bill would clarify under the meaning of "physical therapy" that it includes telehealth, among other services.
Idaho	<u>HB 150</u>	This bill would adopt the Federation of State Medical Boards' Interstate Medical Licensure Compact.
Idaho	HB 189	This bill would define telehealth services, and clarifies requirements for patient evaluation and treatment, and prescription drug orders. It also provides for informed consent, and other professional requirements.



Illinois	<u>HB 3680</u>	This bill would adopt the Federation of State Medical Board's Interstate Medical Licensure Compact language.
Indiana	<u>HB 1269</u>	This bill would provide for coverage of telemedicine services under a policy of accident and sickness insurance and a health maintenance contract.
lowa	<u>SF 505</u>	This bill would provide for telehealth coverage under Medicaid and require the services to be treated equivalent, for the purposes of reimbursement to in-person consultation. The Department of Human Services would be required to adopt rules to provide that coverage. (carryover to 2016)
lowa	<u>SF 510</u>	Among other things, this bill would adopt the Federation of State Medical Boards' Interstate Medical Licensure Compact. (carryover to 2016)
Kentucky	<u>SB 51</u>	This bill would require that a qualified mental health professional that performs an exam for the purposes of involuntary hospitalization be qualified and licensed to perform the examination through the use of telehealth services (among other things).
Louisiana	HCR 4	This bill is a concurrent resolution to express the intent of the legislature regarding the standard of care that physicians are required to use in the practice of telemedicine pursuant to the provisions of Act No. 442 of the 2014 Regular Session of the Legislature of Louisiana.
Maine	<u>HP 443</u>	This bill would allow a physician not licensed in Maine to practice medicine through interstate telemedicine, as long as they followed specific registration procedures outlined in the bill.
Maine	<u>HP 783</u>	This bill allows medical examinations or consultation related to involuntary commitment to take place over telemedicine.
Maine	<u>HP 818</u>	This bill would establish the Municipal Gigabit Broadband Network Access Fund. The goals of the network, among other things, will be to provide expanded health care services by facilitating access to telemedicine.
Massachusetts	<u>HB 3650</u>	This bill is an appropriations bill. It directs the health policy commission to implement a 1-year regional pilot program to further the development and utilization of telemedicine.
Michigan	<u>SB 133</u>	This is an appropriations bill. Among other things, it would authorize funds for the continued development and expansion of telemedicine capacity to allow families with children in children's special health care services program to access specialty providers more readily in a more timely manner. It would also direct the department to explore utilization of telemedicine and telepsychiatry as strategies to increase access to services for Medicaid recipients in medically underserved areas.



<u>HF 1535</u>	This bill would define "direct service time", for purposes of children's therapeutic services and supports, to include time that a mental health professional, clinical trainee,
	mental health practitioner, or mental health behavioral aide spends with a client or client's family as a covered telemedicine service, among other things.
<u>SF 253</u>	This bill would adopt the Interstate Medical Licensure Compact developed by the Federation of State Medical Boards.
<u>SF 1458</u>	This bill would require reimbursement of telemedicine delivered services, including live video and store and forward. It also provides definitions and an originating site facility fee.
<u>HB 103</u>	This bill would make an exception in Montana's law requiring coverage of telemedicine for "specified diseases". Under the proposed language, the private payer language in the law would not apply to specified diseases.
<u>HB 429</u>	This bill would adopt the Interstate Medical Licensure Compact developed by the Federation of State Medical Boards.
<u>SB 77</u>	This bill would repeal specialized telemedicine and temporary physician licenses and provide the board with rulemaking authority for telemedicine guidelines and short-term licenses.
<u>LB 37</u>	This bill adds requirements for electronic prescribing.
<u>LB 240</u>	This bill would create the Behavioral Health Screening and Referral Pilot Program. Among other things, it would make consultation via telephone or telehealth with faculty and staff of the Department of Child and Adolescent Psychiatry at the University of Nebraska Medical Center available to the primary care practice and children participating in the pilot.
<u>LB 257</u>	This bill would require insurers to provide descriptions relating to telehealth and telemonitoring as prescribed.
<u>LB 657</u>	This appropriations bill would allocate funds to the Oral Health Training and Services Fund to contract for reduced fee and charitable oral health services, oral health workforce development and oral health services using telehealth, among other things.
<u>LB 661</u>	This bill would provide for the establishment of an oral health training and services fund, which among other things, would provide for oral health services using telehealth.
	SF 1458 HB 103 HB 429 SB 77 LB 37 LB 240 LB 257 LB 657



	<u>A 7488</u>	This bill would amend public health law, in relation to including physical and occupational therapists as telehealth providers.
New York	<u>AB 7369</u>	This bill would provide that dentists' offices shall be originating sites for the purposes of telehealth delivery of services.
New York	<u>AB 3007</u>	This bill would establish the Hospital-Home Care-physician Collaborative Initiative, which would include the application of telehealth/telemedicine services in monitoring and managing patient conditions, and promoting self-care/management, improved outcomes and effective services use.
New York	<u>AB 2552</u>	Sponsor: Russell Relates to telehealth delivery of services. Provides the required chapter amendment to New York's telehealth coverage bill, SB 7852, passed in the 2014 legislative session. It provides clarifications, per the Governor's request.
New Hampshire	<u>SB 112</u>	This bill would clarify that a "health benefit policy", in relation to telemedicine coverage, includes policies issued for coverage under managed care.
New Hampshire	<u>SB 84</u>	Sponsor: Stiles Clarifies when it is appropriate to use telemedicine in practitioner-patient medical circumstances; under this bill a practitioner shall not prescribe certain controlled drugs by means of telemedicine. Also establishes APRN practice standards.
New Hampshire	<u>HB 232</u>	This bill would establish a Committee on Suicide Prevention Training. Among other things, the committee must study the areas of law that could be changed to allow for better suicide risk assessment, treatment, and management. The study shall consider Medicaid reimbursement or private insurance of patient services, including telemedicine and outreach services which include suicide risk assessment, treatment and management.
Nevada	<u>AB 115</u>	This bill establishes standards for telepractice for speech language pathology and audiology.
Nevada	<u>SB 251</u>	This bill would adopt the Federation of State Medical Boards' model language for an interstate medical licensure compact.
Nevada	<u>AB 292</u>	This bill would require a provider of health care who provides services to certain patients through telehealth to have a valid license or certificate in this State; makes persons who provide services through telehealth to certain patients subject to the laws and jurisdiction of Nevada; requires certain insurers to provide coverage to insured individuals for services provided through telehealth to the same extent as though provided in person; authorizes a hospital to provide staff privileges to certain providers of health care to provide services through telehealth; requires the Commissioner of Insurance to consider health care services that may be provided by providers through telehealth when evaluating certain network plans; and providing other matters properly relating thereto.



New York	<u>S 1528</u>	This bill enacts comprehensive provisions to curtail the incidence of emphysema, chronic bronchitis and other respiratory diseases. Among other things, the bill amends sections of law related to a demonstration program for individuals with chronic health problems. The services that can be provided under the program include telehealth services. The bill would expand the list of eligible conditions to emphysema, chronic bronchitis, other respiratory diseases, adult and childhood obesity and systematic chronic health conditions identified for monitoring. Similar to SB 1105.
New York	<u>\$ 2007</u>	This bill would establish the Hospital-Home Care-physician Collaborative Initiative, which would include the application of telehealth/telemedicine services in monitoring and managing patient conditions, and promoting self-care/management, improved outcomes and effective services use.
New York	<u>S 2405</u>	Relates to telehealth delivery of services. Provides the required chapter amendment to New York's telehealth coverage bill, SB 7852, passed in the 2014 legislative session. It provides clarifications, per the Governor's request.
New York	<u>S 4182</u>	This bill would amend the public health law, in relation to including dentist's offices as originating sites for purposes of telehealth delivery of services.
New York	<u>S 5733</u>	This bill would include occupational and physical therapists within the definition of telehealth providers.
North Carolina	<u>HB 372</u>	This bill would modernize and stabilize NC's Medicaid program through provider led capitated health plans. To ensure success of the program, the Department is required to (among other things) encourage providers to utilize appropriate technologies, such as telemedicine, to provide expeditious care and ensure access to services.
North Dakota	<u>HB 1038</u>	Provides that the Public Employees Retirement System uniform group insurance must provide medical benefits coverage under a policy that provides coverage for health care services provided by a health care provider or health care facility by means of telemedicine which are the same as the policy coverage of in-person health care services provided by a health care provider or health care facility.
North Dakota	HB 1323	This bill relates to the creation and implementation of a stroke system. It provides a definition for telemedicine.
North Dakota	<u>HB 1396</u>	This bill would appoint a Health Council to administer a student repayment program for healthcare professionals willing to provide services in areas of the state that have a defined need for such services. The Health Council will establish criteria to select the public and private entities for participation in the program. They are required to prioritize entities that (among other things) are located in or able to provide telemedicine services to areas that are statistically underserved and located outside of metropolitan statistical areas.



Oklahoma	<u>SB 753</u>	This bill permits supervising physicians to be available to physician assistants by telemedicine, among other things.
Oregon	<u>HB 2294</u>	This bill would require the Oregon Health Authority to establish the Oregon Health Information Technology program. Allows authority to participate in or fund health information technology partnerships or collaboratives. Revises membership and duties of Health Information Technology Oversight Council.
Oregon	<u>SB 144</u>	Modifies requirements for health benefit plan coverage of telemedical health services.
South Dakota	<u>SB 63</u>	This bill would adopt the Federation of State Medical Board's Interstate Medical Licensure Compact.
Tennessee	<u>HB 699</u>	This bill clarifies certain standards related to a telehealth encounter, including consent, a provider-patient relations, licensing, and the definition of telehealth.
Tennessee	<u>SB 1223</u>	This bill relates to Physicians and Surgeons; establishes requirements and protections for healthcare providers that practice telehealth.
Texas	<u>SB 219</u>	This bill would clarify certain statutory provisions related to telehealth and telemedicine reimbursement under the TX Medicaid program. (Similar to HB 550.)
Texas	<u>HB 479</u>	This bill would create a pilot project to provide emergency telemedicine medical services in rural areas.
Texas	<u>HB 1878</u>	This bill would provide for the reimbursement of providers under the Medicaid program for the provision of telemedicine medical services in a school-based setting.
Utah	<u>HB 121</u>	This bill would implement the Interstate Medical Licensure Compact developed by the Federation of State Medical Boards.
Utah	<u>SB 222</u>	This bill requires the Utah Education and Telehealth Network Board to develop a Digital Teaching and Learning Program for public schools.
Utah	<u>SB 243</u>	This bill makes a one-time appropriation to the Utah Education and Telehealth Network.
Vermont	<u>SB 139</u>	This bill would provide for Medicaid coverage for primary care telemedicine.
Virginia	<u>HB 2063</u>	Sponsor: Kilgore Amends the definition of telemedicine services to encompass the use of electronic technology or media, including interactive audio or video, for the purpose of diagnosing or treating a patient, consulting with other health care providers regarding a patient's diagnosis or treatment, or transmitting a patient's health care data. It also provides that an examination performed using telemedicine services shall be sufficient to meet the requirement for an "appropriate examination". Identical to SB 1227.



Virginia	<u>SB 1227</u>	Amends the definition of telemedicine services to encompass the use of electronic technology or media, including interactive audio or video, for the purpose of diagnosing or treating a patient, consulting with other health care providers regarding a patient's diagnosis or treatment, or transmitting a patient's health care data. It also stipulates when a bona fide practitioner patient relationship is established, which can be done through live video or store and forward technologies when certain criteria are met. Identical to HB 2063.
Washington	<u>SB 5175</u>	This bill would add a new section to law requiring reimbursement of telemedicine services under certain conditions. It includes Medicaid managed care plans.
West Virginia	<u>HB 2496</u>	This bill would adopt the Interstate Medical Licensure Compact.
Wisconsin	<u>AB 253</u>	This bill would adopt the Federation of State Medical Boards' Interstate Medical Licensure Compact.
Wyoming	<u>HB 107</u>	This bill would implement the Interstate Medical Licensure Compact developed by the Federation of State Medical Boards