- Overview of telehealth
- Policy issues
  - Reimbursement
  - Licensure
  - Patient Safety
- Recent state action
Telehealth Modalities

- Live Video
- Store and Forward
- Remote Patient Monitoring
- Mobile Health (mHealth)
State Policy Landscape

2015 Legislative Sessions

- 200+ bills introduced in 42 states

2016 Legislative Sessions

- 150+ bills introduced in 40+ states
  - Plus compact bills

Sources: CCHP, NCSL
Definitions of Telehealth

Nevada: “‘Telehealth’ means the delivery of services from a provider of health care to a patient at a different location through the use of information and audio-visual communication technology, not including standard telephone, facsimile or electronic mail.”

Georgia: “‘Telemedicine’ means the practice, by a duly licensed physician or other health care provider acting within the scope of such provider’s practice, of health care delivery, diagnosis, consultation, treatment, or transfer of medical data by means of audio, video, or data communications which are used during a medical visit with a patient or which are used to transfer medical data obtained during a medical visit with a patient. Standard telephone, facsimile transmissions, unsecured email, or a combination thereof do not constitute telemedicine services.”
Coverage and Reimbursement

- Medicare

- Medicaid (49 states with some coverage)
  - Differences in telehealth modalities, providers, etc.

- Private payer laws (32 states + D.C.)
  - Coverage, reimbursement, or other requirements

Sources: ATA, CCHP, NCSL
Licensure

- Telehealth-specific licenses (9 states)
- Reciprocity, Endorsement
- Compacts
  - Interstate Medical Licensure Compact (physicians)
  - Nurse Licensure Compact
  - Others
- Other issues: credentialing, scope of practice, liability
Interstate Medical Licensure Compact (FSMB)

Source: FSMB, 8/6/16
Patient Safety & Security

- Standard of care
- Patient-provider relationships
  - Established via telehealth
  - Face-to-face vs. in-person exams
  - Online questionnaires for prescribing
- Informed consent (29 states)
Idaho Code Ann. § 54-5605
If there is not an existing provider-patient relationship, requires that a provider “take appropriate steps to establish a provider-patient relationship by use of two-way audio and visual interaction; provided however, that the applicable Idaho community standard of care must be satisfied.”

West Virginia HB 4463 (2016)
“Standard of Care. The practice of medicine or podiatry provided via telemedicine technologies, including the establishment of a physician-patient or podiatrist-patient relationship and issuing a prescription via electronic means as part of a telemedicine encounter, are subject to the same standard of care, professional practice requirements and scope of practice limitations as traditional in-person physician-patient or podiatrist-patient encounters. Treatment, including issuing a prescription, based solely on an online questionnaire, does not constitute an acceptable standard of care.”
Recent State Action

- Arizona SB 1363
  - Rural region

- Hawaii SB 2395
  - Modalities; Reimbursement; Providers; Originating site

- Missouri SB 579
  - Patient-provider relationship; store & forward

- South Carolina SB 1035
  - Patient-provider relationship
Telehealth is a tool for delivering care. Help guide policy discussions that center on telehealth’s ability to extend existing health and long-term care services with technology, versus describing telehealth as a new service.

Conduct a needs assessment to find out where telehealth services are already being used and where investing in telehealth may be most effective.

Convene a variety of stakeholders from all sectors and perspectives to help ensure the best information is available when considering policy decisions.

Consider the level of oversight needed to ensure that services are effective in terms of cost and outcomes, and balance those needs with potential unintended consequences or future hurdles as telehealth develops.
Resources

- NCSL  [www.ncsl.org](http://www.ncsl.org)
  - Telehealth: Policy Trends and Considerations
- Center for Connected Health Policy  [www.cchpca.org](http://www.cchpca.org)
  - State Telehealth Laws and Medicaid Program Policies
- American Telemedicine Association  [www.americantelemed.org](http://www.americantelemed.org)
  - 50-state gap analyses
Kate Blackman, MSW, MPH
Policy Specialist, Health Program
National Conference of State Legislatures
kate.blackman@ncsl.org
303-856-1506
**Informed Consent**

**Ariz. Rev. Stat. Sec. 36-3602**

“Except as provided in subsection E of this section, before a health care provider delivers health care through telemedicine, the treating health care provider shall obtain verbal or written informed consent from the patient or the patient's health care decision maker. If the informed consent is obtained verbally, the health care provider shall document the consent on the patient's medical record.”

**Ind. Code, 16-36-1-15**

“A health care provider (as defined in Indiana Code 16-18-2-163(a)) may not be required to obtain a separate additional written health care consent for the provision of telemedicine services.”