## FIRST REGULAR SESSION HOUSE BILL NO. 1014

## 98TH GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE FREDERICK.

D. ADAM CRUMBLISS, Chief Clerk

## AN ACT

To repeal section 208.670, RSMo, and to enact in lieu thereof three new sections relating to the use of store-and-forward technology in the practice of telehealth.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Section 208.670, RSMo, is repealed and three new sections enacted in lieu 2 thereof, to be known as sections 208.670, 208.671, and 208.673, to read as follows:

208.670. 1. As used in this section, these terms shall have the following meaning:

2 (1) "Provider", any provider of medical services and mental health services, including
3 all other medical disciplines;

4 (2) "Telehealth", the use of medical information exchanged from one site to another via 5 electronic communications to improve the health status of a patient.

6 2. The department of social services, in consultation with the departments of mental 7 health and health and senior services, shall promulgate rules governing the practice of telehealth 8 in the MO HealthNet program. Such rules shall address, but not be limited to, appropriate 9 standards for the use of telehealth, certification of agencies offering telehealth, and payment for 10 services by providers. Telehealth providers shall be required to obtain patient consent before 11 telehealth services are initiated and to ensure confidentiality of medical information.

3. Telehealth may be utilized to service individuals who are qualified as MO HealthNet
participants under Missouri law. Reimbursement for such services shall be made in the same
way as reimbursement for in-person contacts.

4. The provisions of section 208.671 shall apply to the use of asynchronous store and-forward technology in the practice of telehealth.

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

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**208.671.** 1. As used in this section and section 208.673, the following terms shall 2 mean:

3 (1) "Asynchronous store-and-forward", the transfer of a patient's clinically 4 important digital samples, such as still images, videos, audio, and text files, and relevant 5 data from an originating site through the use of a camera or similar recording device that 6 stores digital samples that are forwarded via telecommunication to a distant site for 7 consultation by a consulting provider without requiring the simultaneous presence of the 8 patient and the patient's treating provider;

9 (2) "Asynchronous store-and-forward technology", cameras or other recording 10 devices that store images which may be forwarded via telecommunication devices at a later 11 time;

(3) "Consultation", a type of evaluation and management service as defined by the
 most recent edition of the Current Procedural Terminology published annually by the
 American Medical Association;

(4) "Consulting provider", a provider who, upon referral by the treating provider,
 evaluates a patient and appropriate medical data or images delivered through
 asynchronous store-and-forward technology. If a consulting provider is unable to render
 an opinion due to insufficient information, the consulting provider may request additional
 information to facilitate the rendering of an opinion or decline to render an opinion;

20 (5) "Distant site", a site where the consulting provider is located at the time the 21 consultation service is provided;

(6) "Originating site", the site where a MO HealthNet participant receiving services
 and such participant's treating provider are both physically located;

(7) "Provider", any provider of medical services or mental health services,
including all other medical disciplines, licensed in this state who has the authority to refer
patients for medical services or mental health services within the scope of practice and
licensure of the provider;

(8) "Telehealth", the same meaning as such term is defined in section 208.670.
Telehealth shall include the use of asynchronous store-and-forward technology for
orthopedics, dermatology, ophthalmology in cases of diabetic retinopathy, burn and wound
care, and maternal-fetal medicine ultrasounds;

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(9) "Treating provider", a provider who:(a) Evaluates a patient;

34 **(b)** Determines the need for a consultation:

35 (c) Arranges the services of a consulting provider for the purpose of diagnosis and
 36 treatment;

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(d) Provides or supplements the patient's history and provides pertinent physical
 examination findings and medical information to the consulting provider; and

(e) Is physically present in the same location as the patient during the time of the
 asynchronous store-and-forward services.

2. The department of social services, in consultation with the departments of mental
health and health and senior services, shall promulgate rules governing the use of
asynchronous store-and-forward technology in the practice of telehealth in the MO
HealthNet program. Such rules shall address, but not be limited to:

45 (1) Appropriate standards for the use of asynchronous store-and-forward 46 technology in the practice of telehealth;

47 (2) Certification of agencies offering asynchronous store-and-forward technology
 48 in the practice of telehealth;

49 (3) Time lines for completion and communication of a consulting provider's 50 consultation or opinion, or if the consulting provider is unable to render an opinion, time 51 lines for communicating a request for additional information or that the consulting 52 provider declines to render an opinion;

(4) Length of time digital files of such asynchronous store-and-forward services are
 to be maintained;

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(5) Security and privacy of such digital files;

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(6) Patient consent for asynchronous store-and-forward services; and

57 (7) Payment for services by providers; except that, consulting providers who 58 decline to render an opinion shall not receive payment under this section unless and until 59 an opinion is rendered.

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Telehealth providers using asynchronous store-and-forward technology shall be required
 to obtain patient consent before asynchronous store-and-forward services are initiated and
 to ensure confidentiality of medical information.

3. Asynchronous store-and-forward technology in the practice of telehealth may be utilized to service individuals who are qualified as MO HealthNet participants under Missouri law. Reimbursement for such asynchronous store-and-forward services shall be made so that the total payment for the consultation shall be divided between the treating provider and the consulting provider. The total payment for both the treating provider and the consulting provider shall not exceed the payment for a face-to-face consultation of the same level.

4. The standard of care for the use of asynchronous store-and-forward technology
in the practice of telehealth shall be the same as the standard of care for face-to-face care.

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208.673. 1. There is hereby established the "Telehealth Services Advisory
Committee" to advise the department of social services and propose rules regarding the
coverage of telehealth services utilizing asynchronous store-and-forward technology.
2. The committee shall be comprised of the following members:
(1) The director of the MO HealthNet division, or the director's designee;
(2) The medical director of the MO HealthNet division;

7 (3) A representative from a Missouri institution of higher education with expertise
8 in telemedicine;

(4) A representative from the Missouri office of primary care and rural health;

(5) Two board-certified specialists licensed to practice in this state;

11 (6) A representative from a hospital located in this state that utilizes telehealth12 medicine;

13 (7) A primary care provider from a federally qualified health center (FQHC) or
 14 rural health clinic; and

(8) A primary care provider from a rural setting other than from an FQHC or
 rural health clinic.

3. Members of the committee listed in subdivisions (3) to (8) of subsection 2 of this section shall be appointed by the governor, with the advice and consent of the senate. The first appointments to the committee shall consist of three members to serve three-year terms, two members to serve two-year terms, and two members to serve one-year terms as designated by the governor. Each member of the committee shall serve for a term of three years thereafter.

4. Members of the committee shall not receive any compensation for their services
but shall be reimbursed for any actual and necessary expenses incurred in the performance
of their duties.

5. Any member appointed by the governor may be removed from office by the governor without cause. If there is a vacancy for any cause, the governor shall make an appointment to become effective immediately for the unexpired term.

29 6. Any rule or portion of a rule, as that term is defined in section 536.010, that is 30 created under the authority delegated in this section shall become effective only if it 31 complies with and is subject to all of the provisions of chapter 536 and, if applicable, 32 section 536.028. This section and chapter 536 are nonseverable and if any of the powers 33 vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the 34 35 grant of rulemaking authority and any rule proposed or adopted after August 28, 2015, shall be invalid and void. 36

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