House	Amendment NO
	Offered By
AMEND House Bill No lines and inserting in lie	23, Page 1, Section 191.1145, Lines 1 through 9, by deleting all of saiere of the following:
mies und moerting in m	reof the following.
· · · · · · · · · · · · · · · · · · ·	ed in sections 191.1145 and 191.1146, the following terms shall mean tore-and-forward transfer", the collection of a patient's relevant health
information and the sub	ent transmission of that information from an originating site to a healt
care provider at a distar	without the patient being present;
(2) "Clinical sta	any health care provider licensed in this state;
	site at which a health care provider is located while providing health
care services by means	
(4) "Health care	vider", as that term is defined in section 376.1350;
	", a site at which a patient is located at the time health care services ar
	eans of telemedicine. For the purposes of asynchronous store-and-
	site shall also mean the location at which the health care provider
transfers information to	<u> </u>
	telemedicine", the delivery of health care services by means of
	tion technologies which facilitate the assessment, diagnosis,
	eation, care management, and self-management of a patient's health ca
	riginating site and the health care provider is at the distant site.
•	nall also include the use of asynchronous store-and-forward
technology."; and	•
Further amend said bill.	e, and section, Line 12, by deleting the word "under" and inserting in
lieu thereof the word "v	
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Further amend said bill.	e, and section, Line 13, by inserting after all of said line the following
•	, , , ,
"3. Health care	iders treating patients in this state through the use of telemedicine or
	sed to practice in this state and shall be subject to regulation by their
respective professional	· · · · · · · · · · · · · · · · · · ·
	tion 3 of this section shall apply to:
	ation performed by a health care provider licensed in another state,
	ontractual relationship, and on an irregular or infrequent basis without
	of direct or indirect compensation;
-	alth care services by a health care provider licensed and located in
· /	nergency or disaster, provided that no charge is made for the medical
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assistance; or

- (3) Episodic consultation by a health care provider licensed and located in another state who provides such consultation services on request to a physician in this state.
- 5. Nothing in this section shall be construed to alter the scope of practice of any health care provider or to authorize the delivery of health care services in a setting or in a manner not otherwise authorized by the laws of this state.
- 6. No originating site for services or activities provided under this section shall be required to maintain immediate availability of on-site clinical staff during the telehealth services, except as necessary to meet the standard of care for the treatment of the patient's medical condition if such condition is being treated by an eligible health care provider who is not at the originating site, has not previously seen the patient in person in a clinical setting, and is not providing coverage for a health care provider who has an established relationship with the patient.
- 7. Nothing in this section shall be construed to alter any collaborative practice requirement as provided in chapters 334 and 335.
- 191.1146. 1. Physicians licensed under chapter 334 who use telemedicine shall ensure that a properly established physician-patient relationship exists with the person who receives the telemedicine services. The physician-patient relationship may be established by:
 - (1) An in-person encounter through a medical interview and physical examination;
- (2) Consultation with another physician, or that physician's delegate, who has an established relationship with the patient and an agreement with the physician to participate in the patient's care; or
- (3) A telemedicine encounter, if the standard of care does not require an in-person encounter, and in accordance with evidence-based standards of practice and telemedicine practice guidelines that address the clinical and technological aspects of telemedicine.
 - 2. In order to establish a physician-patient relationship through telemedicine:
- (1) The technology utilized shall be sufficient to establish an informed diagnosis as though the medical interview and physical examination has been performed in person; and
- (2) Prior to providing treatment, including issuing prescriptions, a physician who uses telemedicine shall interview the patient, collect or review relevant medical history, and perform an examination sufficient for the diagnosis and treatment of the patient. A questionnaire completed by the patient, whether through the internet or telephone, does not constitute an acceptable medical interview and examination for the provision of treatment by telehealth."; and

Further amend said bill, Page 2, Section 208.670, Line 4 by deleting the words "or "telemedicine"; and

Further amend said bill, page, and section, Lines 5 through 6, by deleting the words "shall have the same meaning ascribed to it as in section 191.1145" and inserting in lieu thereof the following:

"the delivery of health care services by means of information and communication technologies which facilitate the assessment, diagnosis, consultation, treatment, education, care management, and self-management of a patient's health care while such patient is at the originating site and the health care provider is at the distant site. Telehealth or telemedicine shall also include the use of asynchronous store-and-forward technology for orthopedics, dermatology, ophthalmology and optometry, in cases of diabetic retinopathy, burn and wound care, dental services which require a diagnosis, and maternal-fetal medicine ultrasounds"; and

Further amend said bill, page, and section, Line 9, by deleting the words "generally and"; and

Further amend said bill, page, and section, Line 11, by deleting the word "telemedicine" and

in lieu thereof the words "telehealth medicine"; and

Further amend said bill, page, and section, Line 8, by deleting the word "telemedicine" and inserting

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1 2	inserting in lieu thereof the words "telehealth medicine"; and		
2 3 4	Further amend said bill, page, and section, Line 13, by deleting the word "and"; and		
5 6 7	Further amend said bill, page, and section, Line 15, by deleting all of said line and inserting in lieu thereof the following:		
8	"rural health clinic; and		
9 0 1	(9) A psychologist or a physician who specializes in psychiatry licensed to practice in this state."; and		
2 3 4	Further amend said bill, page, and section, Line 16, by deleting the number "(8)" and inserting in lieu thereof the number "(9)"; and		
5 6 7	Further amend said bill, page, and section, Line 19, by deleting all of said line and inserting in lieu thereof the following:		
8 9	"terms, three members to serve two-year terms, and two members to serve a one-year term \underline{as} "; and		
0 1 2	Further amend said bill, Page 5, Section 208.675, Line 1, by inserting immediately after the word "services" the words "in the MO HealthNet program"; and		
3 4 5	Further amend said bill, page, and section, Line 11, by inserting after all of said line the following:		
6 7	"(9) Optometrists;"; and		
7 3 9 0	Further amend said bill, page, and section, by renumbering subsequent subdivisions accordingly; and		
) [<u>2</u> 3	Further amend said bill, page, and section, Line 13, by deleting the number "(9)" and inserting in lieu thereof the number "(10)"; and		
ļ 5	Further amend said bill and page, Section 208.677, Line 1, by inserting immediately after the word "services" the words "in the MO HealthNet program"; and		
6 7 8	Further amend said bill, page, and section, Line 2, by deleting the word "patient" and inserting in lieu thereof the words "MO HealthNet participant"; and		
)	Further amend said bill, page, and section, Lines 3 through 8, by deleting all of said lines and inserting in lieu thereof the following:		
2 3 4 5	"service is located for the encounter. The standard of care in the practice of telehealth shall be the same as the standard of care for services provided in person. An originating site shall be one of the following locations:"; and		
6 7 8	Further amend said bill and section, Page 6, Lines 22 and 23, by deleting the words "Missouri-licensed" and inserting in lieu thereof the words "Missouri licensed"; and		

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Further amend said bill, Page 7, Section 208.686, Line 27, by deleting the word "or"; and

Further amend said bill, page, and section, Line 28, by deleting all of said line and inserting in lieu thereof the following:

- "g. A documented history of care access challenges; or
- h. A documented history of consistently missed appointments with health care providers;";

and

Further amend said bill and section, Page 8, Line 52, by inserting after all of said section and line the following:

- "334.108. 1. Prior to prescribing any drug, controlled substance, or other treatment through telemedicine, as defined in section 191.1145, or the internet, a physician shall establish a valid physician-patient relationship as described in section 191.1146. This relationship shall include:
- (1) Obtaining a reliable medical history and performing a physical examination of the patient, adequate to establish the diagnosis for which the drug is being prescribed and to identify underlying conditions or contraindications to the treatment recommended or provided;
- (2) Having sufficient dialogue with the patient regarding treatment options and the risks and benefits of treatment or treatments;
 - (3) If appropriate, following up with the patient to assess the therapeutic outcome;
- (4) Maintaining a contemporaneous medical record that is readily available to the patient and, subject to the patient's consent, to the patient's other health care professionals; and
- (5) [Including] <u>Maintaining</u> the electronic prescription information as part of the patient's medical record.
- 2. The requirements of subsection 1 of this section may be satisfied by the prescribing physician's designee when treatment is provided in:
 - (1) A hospital as defined in section 197.020;
 - (2) A hospice program as defined in section 197.250;
 - (3) Home health services provided by a home health agency as defined in section 197.400;
 - (4) Accordance with a collaborative practice agreement as defined in section 334.104;
 - (5) Conjunction with a physician assistant licensed pursuant to section 334.738;
 - (6) Conjunction with an assistant physician licensed under section 334.036;
- (7) Consultation with another physician who has an ongoing physician-patient relationship with the patient, and who has agreed to supervise the patient's treatment, including use of any prescribed medications; or
 - [(7)] (8) On-call or cross-coverage situations.
- 3. No physician or his or her delegate, on-call physician, or advanced practice registered nurse shall prescribe any drug, controlled substance, or other treatment to a patient based solely on an evaluation over the telephone, unless a previously established and ongoing valid physician-patient relationship exists.
- 4. No physician shall prescribe any drug, controlled substance, or other treatment to a patient based solely on an internet request or an internet questionnaire."; and

Further amend said bill, Page 9, Section 376.1900, Lines 2 through 15, by deleting all of said lines and inserting in lieu thereof the following:

- "(1) "Asynchronous store-and-forward transfer", the collection of a patient's relevant health information and the subsequent transmission of that information from an originating site to a health care provider at a distant site without the patient being present;
- (2) "Distant site", a site at which a health care provider is located while providing health care services by means of telemedicine. For the purposes of asynchronous store-and-forward transfer, originating site shall also mean the location at which the health care provider transfers information to the distant site;
- (3) "Electronic visit", or "e-visit", an online electronic medical evaluation and management service completed using a secured web-based or similar electronic-based communications network for a single patient encounter. An electronic visit shall be initiated by a patient or by the guardian of a patient with the health care provider, be completed using a federal Health Insurance Portability and Accountability Act (HIPAA)-compliant online connection, and include a permanent record of the electronic visit;
- [(2)] (4) "Health benefit plan" shall have the same meaning ascribed to it in section 376.1350;
- [(3)] (5) "Health care provider" shall have the same meaning ascribed to it in section 376.1350;
- [(4)] (6) "Health care service", a service for the diagnosis, prevention, treatment, cure or relief of a physical or mental health condition, illness, injury or disease;
 - [(5)] (7) "Health carrier" shall have the same meaning ascribed to it in section 376.1350;
- [(6)] (8) "Originating site", a site at which a patient is located at the time health care services are provided to him or her by means of telemedicine;
- (9) "Telehealth" [shall have the same meaning ascribed to it in section 208.670] or "telemedicine", the delivery of health care services by means of information and communication technologies which facilitate the assessment, diagnosis, consultation, treatment, education, care management, and self-management of a patient's health care while such patient is at the originating site and the health care provider is at the distant site. Telehealth or telemedicine shall also include the use of asynchronous store-and-forward technology."; and

Further amend said bill and section, Page 10, Line 53, by inserting after all of said section and line the following:

"Section B. Because immediate action is necessary to ensure the continued provision of health care services to residents of Missouri, the enactment of section 191.1145 of this act is deemed necessary for the immediate preservation of the public health, welfare, peace and safety, and is hereby declared to be an emergency act within the meaning of the constitution, and the enactment of section 191.1145 of this act shall be in full force and effect upon its passage and approval."; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.