FIRST REGULAR SESSION

HOUSE BILL NO. 495

101ST GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE RUTH.

1148H.01I

DANA RADEMAN MILLER, Chief Clerk

AN ACT

To repeal sections 191.1145, 191.1146, and 334.108, RSMo, and to enact in lieu thereof three new sections relating to telemedicine services.

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

Section A. Sections 191.1145, 191.1146, and 334.108, RSMo, are repealed and three

- 2 new sections enacted in lieu thereof, to be known as sections 191.1145, 191.1146, and 334.108,
- 3 to read as follows:
 - 191.1145. 1. As used in sections 191.1145 and 191.1146, the following terms shall
- 2 mean:

9

- 3 (1) "Asynchronous store-and-forward transfer", the collection of a patient's relevant
- 4 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;
- 5 to a nearm care provider at a distant site without the patient being present
- 6 (2) "Clinical staff", any health care provider licensed in this state;
- 7 (3) "Distant site", a site at which a health care provider is located while providing health 8 care services by means of telemedicine;
 - (4) "Health care provider", as that term is defined in section 376.1350;
- 10 (5) "Originating site", a site at which a patient is located at the time health care services 11 are provided to him or her by means of telemedicine. For the purposes of asynchronous 12 store-and-forward transfer, originating site shall also mean the location at which the health care 13 provider transfers information to the distant site;
- 14 (6) "Telehealth" or "telemedicine", the delivery of health care services by means of 15 information and communication technologies which facilitate the assessment, diagnosis, 16 consultation, treatment, education, care management, and self-management of a patient's health

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.

HB 495 2

17 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, including the use of such technology through an adaptive questionnaire.
 - 2. Any licensed health care provider shall be authorized to provide telehealth services if such services are within the scope of practice for which the health care provider is licensed and are provided with the same standard of care as services provided in person. This section shall not be construed to prohibit a health carrier, as defined in section 376.1350, from reimbursing nonclinical staff for services otherwise allowed by law.
 - 3. In order to treat patients in this state through the use of telemedicine or telehealth, health care providers shall be fully licensed to practice in this state and shall be subject to regulation by their respective professional boards.
 - 4. Nothing in subsection 3 of this section shall apply to:
 - (1) Informal consultation performed by a health care provider licensed in another state, outside of the context of a contractual relationship, and on an irregular or infrequent basis without the expectation or exchange of direct or indirect compensation;
 - (2) Furnishing of health care services by a health care provider licensed and located in another state in case of an emergency or disaster; provided that, no charge is made for the medical 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;

HB 495 3

8

9

10 11

12

13

14

15

16

17

18

19 20

5

8

9 10

11

17

5 Consultation with another physician, or that physician's delegate, who has an 6 established relationship with the patient and an agreement with the physician to participate in the 7 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, including any use of an adaptive questionnaire, shall be sufficient to establish an informed diagnosis as though the medical interview [and] or physical examination has been performed in person; and
- (2) Prior to providing treatment, including issuing prescriptions or physician certifications under Article XIV of the Missouri Constitution, 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 static questionnaire completed by the patient, whether via the internet or telephone, does not constitute an acceptable medical interview and examination for the provision of treatment by telehealth.
- 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 4 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 12
- 13 (5) Maintaining the electronic prescription information as part of the patient's medical 14 record.
- 15 2. The requirements of subsection 1 of this section may be satisfied by the prescribing 16 physician's designee when treatment is provided in:
 - (1) A hospital as defined in section 197.020;
- 18 (2) A hospice program as defined in section 197.250;
- 19 Home health services provided by a home health agency as defined in section 20 197.400:

HB 495 4

21 (4) Accordance with a collaborative practice agreement as [defined] described in section 22 334.104:

- (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]
 - (8) On-call or cross-coverage situations; or

(9) A digital format through an adaptive questionnaire based on professional practice standards.

- 3. No health care provider, as defined in section 376.1350, shall prescribe any drug, controlled substance, or other treatment to a patient based solely on an evaluation over the telephone; except that, a physician or such physician's on-call designee, or an advanced practice registered nurse, a physician assistant, or an assistant physician in a collaborative practice arrangement with such physician, may prescribe any drug, controlled substance, or other treatment that is within his or her scope of practice to a patient based solely on a telephone evaluation if a previously established and ongoing physician-patient relationship exists between such physician and the patient being treated.
- 4. No health care provider shall prescribe any drug, controlled substance, or other treatment to a patient based solely on an internet request or [an] a static internet questionnaire.

✓