

# SENATE BILL 496

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(3lr2268)

## ENROLLED BILL

— Finance/Health and Government Operations —

Introduced by **Senators Pugh, Forehand, Garagiola, Jones–Rodwell, Kelley, King, Madaleno, Montgomery, ~~and Muse~~ Muse, Astle, Glassman, Kittleman, Klausmeier, Mathias, Middleton, Pipkin, and Ramirez**

Read and Examined by Proofreaders:

\_\_\_\_\_  
Proofreader.

\_\_\_\_\_  
Proofreader.

Sealed with the Great Seal and presented to the Governor, for his approval this \_\_\_\_\_ day of \_\_\_\_\_ at \_\_\_\_\_ o'clock, \_\_\_\_\_ M.

\_\_\_\_\_  
President.

### CHAPTER \_\_\_\_\_

1 AN ACT concerning

#### 2 **Maryland Medical Assistance Program – Telemedicine**

3 FOR the purpose of requiring the Maryland Medical Assistance Program to provide  
4 certain reimbursement for certain services delivered by telemedicine *under*  
5 *certain circumstances; requiring the Department of Health and Mental Hygiene*  
6 *to adopt regulations for a certain purpose;* and generally relating to the  
7 Maryland Medical Assistance Program and telemedicine.

8 BY repealing and reenacting, with amendments,  
9 Article – Health – General  
10 Section 15–105.2  
11 Annotated Code of Maryland  
12 (2009 Replacement Volume and 2012 Supplement)

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#### EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

~~Strike out~~ indicates matter stricken from the bill by amendment or deleted from the law by amendment.

*Italics* indicate opposite chamber/conference committee amendments.



1 BY repealing and reenacting, without amendments,  
 2 Article – Insurance  
 3 Section 15–139(a)  
 4 Annotated Code of Maryland  
 5 (2011 Replacement Volume and 2012 Supplement)

6 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF  
 7 MARYLAND, That the Laws of Maryland read as follows:

8 **Article – Health – General**

9 15–105.2.

10 (A) The Program shall reimburse health care providers in accordance with  
 11 the requirements of Title 19, Subtitle 1, Part IV of this article.

12 (B) (1) ~~UNLESS~~ SUBJECT TO PARAGRAPH (2) OF THIS SUBSECTION  
 13 AND UNLESS OTHERWISE SPECIFICALLY PROHIBITED OR LIMITED BY FEDERAL  
 14 OR STATE LAW, THE PROGRAM SHALL REIMBURSE A HEALTH CARE PROVIDER  
 15 FOR A HEALTH CARE SERVICE DELIVERED BY TELEMEDICINE, AS DEFINED IN §  
 16 15–139 OF THE INSURANCE ARTICLE, IN THE SAME MANNER AS THE SAME  
 17 HEALTH CARE SERVICE IS REIMBURSED WHEN DELIVERED IN PERSON.

18 (2) REIMBURSEMENT UNDER PARAGRAPH (1) OF THIS  
 19 SUBSECTION IS REQUIRED ONLY FOR A HEALTH CARE SERVICE THAT:

20 (I) IS MEDICALLY NECESSARY; AND

21 (II) IS PROVIDED:

22 1. FOR THE TREATMENT OF CARDIOVASCULAR  
 23 DISEASE OR STROKE;

24 2. IN AN EMERGENCY DEPARTMENT SETTING; AND

25 3. WHEN AN APPROPRIATE SPECIALIST IS NOT  
 26 AVAILABLE.

27 (3) THE DEPARTMENT SHALL ADOPT REGULATIONS TO CARRY  
 28 OUT THIS SUBSECTION.

29 **Article – Insurance**

30 15–139.

1           (a)   (1)   In this section, “telemedicine” means, as it relates to the delivery of  
2 health care services, the use of interactive audio, video, or other telecommunications  
3 or electronic technology by a licensed health care provider to deliver a health care  
4 service within the scope of practice of the health care provider at a site other than the  
5 site at which the patient is located.

6                   (2)   “Telemedicine” does not include:

7                           (i)   an audio-only telephone conversation between a health care  
8 provider and a patient;

9                           (ii)   an electronic mail message between a health care provider  
10 and a patient; or

11                           (iii)   a facsimile transmission between a health care provider and  
12 a patient.

13           SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect  
14 October 1, 2013.

Approved:

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Governor.

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President of the Senate.

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Speaker of the House of Delegates.