$\begin{array}{c} \mathrm{J1} \\ \mathrm{9lr} 1930 \\ \mathrm{CF} \, \mathrm{SB} \, 524 \end{array}$

By: Delegate Kelly Delegates Kelly, Pendergrass, Pena-Melnyk, Bagnall, Barron, Carr, Charles, Chisholm, Cullison, Hill, Johnson, Kerr, Kipke, Krebs, R. Lewis, Metzgar, Morgan, Rosenberg, Saab, Sample-Hughes, Szeliga, and K. Young

Introduced and read first time: February 6, 2019 Assigned to: Health and Government Operations

Committee Report: Favorable with amendments

House action: Adopted

Read second time: March 12, 2019

CHAPTER	
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1 AN ACT concerning

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Maryland Medical Assistance Program – Telemedicine – Psychiatric Nurse Practitioners and Psychiatrists

4 FOR the purpose of requiring the Maryland Department of Health, under certain 5 circumstances, to include psychiatric nurse practitioners who are providing 6 Assertive Community Treatment or mobile treatment services to certain Maryland 7 Medical Assistance Program recipients in the types of providers eligible to receive 8 reimbursement for health care services that are delivered through telemedicine and 9 provided to Program recipients; providing that a certain health care service provided 10 through telemedicine by a certain psychiatric nurse practitioner is equivalent to the 11 same health care service when provided through an in-person consultation for a 12 certain purpose; altering the date on which a certain provision of law regarding 13 psychiatrists and telemedicine terminates; requiring the Department to report to 14 certain committees of the General Assembly on certain matters on or before a certain 15 date; providing for the termination of this Act; and generally relating to the 16 Maryland Medical Assistance Program and telemedicine.

17 BY repealing and reenacting, with amendments,

Article – Health – General

19 Section 15–105.2

20 Annotated Code of Maryland

21 (2015 Replacement Volume and 2018 Supplement)

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

<u>Underlining</u> indicates amendments to bill.

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



1 2 3	BY repealing and reenacting, with amendments, Chapter 691 of the Acts of the General Assembly of 2018 Section 3	
4 5	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:	
6	Article – Health – General	
7	15-105.2.	
8 9	(a) The Program shall reimburse health care providers in accordance with the requirements of Title 19, Subtitle 1, Part IV of this article.	
10 11	(b) (1) (i) In this subsection the following words have the meanings indicated.	
12 13 14 15	ordinary course of business or practice of a profession or in an approved education or	
16 17 18	(iii) 1. "Telemedicine" means, as it relates to the delivery of health care services, the use of interactive audio, video, or other telecommunications or electronic technology:	
19 20 21	A. By a health care provider to deliver a health care service that is within the scope of practice of the health care provider at a site other than the site at which the patient is located; and	
22 23	B. That enables the patient to see and interact with the health care provider at the time the health care service is provided to the patient.	
24	2. "Telemedicine" does not include:	
25 26	A. An audio-only telephone conversation between a health care provider and a patient;	
27 28	B. An electronic mail message between a health care provider and a patient; or	
29 30	C. A facsimile transmission between a health care provider and a patient.	
31 32	(2) To the extent authorized by federal law or regulation, the provisions of § 15–139(c) through (f) of the Insurance Article relating to coverage of and reimbursement	

- for health care services delivered through telemedicine shall apply to the Program and managed care organizations in the same manner they apply to carriers.
 - (3) Subject to the limitations of the State budget and to the extent authorized by federal law or regulation, the Department may authorize coverage of and reimbursement for health care services that are delivered through store and forward technology or remote patient monitoring.
- 7 (4) (i) The Department may specify by regulation the types of health 8 care providers eligible to receive reimbursement for health care services provided to 9 Program recipients under this subsection.
- 10 (ii) If the Department specifies by regulation the types of health care 11 providers eligible to receive reimbursement for health care services provided to Program 12 recipients under this subsection, the types of health care providers specified shall include:
- 13 1. Primary care providers; and

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- 14 2. Psychiatrists AND PSYCHIATRIC NURSE
 15 PRACTITIONERS, AS DEFINED IN § 10–601 OF THIS ARTICLE, who are providing
 16 Assertive Community Treatment or mobile treatment services to Program recipients
 17 located in a home or community—based setting.
- (iii) For the purpose of reimbursement and any fidelity standards established by the Department, a health care service provided through telemedicine by a psychiatrist **OR A PSYCHIATRIC NURSE PRACTITIONER** described under subparagraph (ii)2 of this paragraph is equivalent to the same health care service when provided through an in–person consultation.
- 23 (5) The Department may require a health care provider to submit a 24 registration form to the Department that includes information required for the processing 25 of claims for reimbursement for health care services provided to Program recipients under 26 this subsection.
- 27 (6) The Department shall adopt regulations to carry out this subsection.

Chapter 691 of the Acts of 2018

- SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect
 October 1, 2018. It shall remain effective for a period of [2] 3 years and, at the end of
 September 30, [2020] 2021, this Act, with no further action required by the General
 Assembly, shall be abrogated and of no further force and effect.
- SECTION 2. AND BE IT FURTHER ENACTED, That, on or before September 30, 2021, the Maryland Department of Health shall report, in accordance with § 2–1246 of the State Government Article, to the Senate Finance Committee and the House Health and Government Operations Committee on the effect on Medical Assistance Program general

fund expenditures of reimbursing telemedicine services from psychiatric nurse practitioners who are providing Assertive Community Treatment or mobile treatment services, as required by Section 1 of this Act.

SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2019. It shall remain effective until the taking effect of the termination provision specified in Section 3 of Chapter 691 of the Acts of the General Assembly of 2018. If that termination provision takes effect, this Act, with no further action required by the General Assembly, shall be abrogated and of no further force and effect. This Act may not be interpreted to have any effect on that termination provision.

Approved:	
	Governor.
	Speaker of the House of Delegates.
	President of the Senate.