

HOUSE BILL 448

J2, J1

EMERGENCY BILL
ENROLLED BILL

(0lr1012)

— *Health and Government Operations/Education, Health, and Environmental Affairs*

Introduced by ~~Delegate Rosenberg~~ Delegates Rosenberg, Bagnall, Bhandari, Charles, Cullison, Kelly, Kerr, R. Lewis, Pena-Melnyk, Pendergrass, Sample-Hughes, and K. Young

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.

Speaker.

CHAPTER _____

1 AN ACT concerning

2 **Health Care Practitioners – Telehealth *and Shortage***

3 FOR the purpose of authorizing certain health care practitioners to establish a
4 practitioner–patient relationship through certain telehealth interactions under
5 certain circumstances; requiring a health care practitioner providing telehealth
6 services to be held to certain standards of practice and provide or refer a patient for
7 certain services under certain circumstances; requiring a health care practitioner to
8 perform a certain clinical evaluation before providing certain treatment or issuing a
9 prescription through telehealth; *prohibiting a health care practitioner from*
10 *prescribing a certain opiate for a certain purpose through telehealth except under*
11 *certain circumstances*; providing that a health care practitioner who prescribes a
12 controlled dangerous substance through telehealth is subject to certain laws;

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 requiring a health care practitioner to document certain information in a patient's
 2 medical record using certain documentation standards; providing that certain laws
 3 regarding confidentiality and a patient's right to health information apply to
 4 telehealth interactions in a certain manner; requiring a health care practitioner
 5 performing services through telehealth to be licensed, certified, or otherwise
 6 authorized by law to provide health care services in the State under certain
 7 circumstances; authorizing health occupations boards to adopt certain regulations;
 8 defining certain terms; *making this Act an emergency measure; stating the intent of*
 9 *the General Assembly*; and generally relating to ~~telehealth and~~ health care
 10 practitioners.

11 BY adding to
 12 Article – Health Occupations
 13 Section 1–1001 through 1–1006 to be under the new subtitle “Subtitle 10.
 14 Telehealth”
 15 Annotated Code of Maryland
 16 (2014 Replacement Volume and 2019 Supplement)

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

19 **Article – Health Occupations**

20 **SUBTITLE 10. TELEHEALTH.**

21 **1–1001.**

22 (A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS
 23 INDICATED.

24 (B) “ASYNCHRONOUS TELEHEALTH INTERACTION” MEANS AN EXCHANGE
 25 OF INFORMATION BETWEEN A PATIENT AND A HEALTH CARE PRACTITIONER THAT
 26 DOES NOT OCCUR IN REAL TIME, INCLUDING THE SECURE COLLECTION AND
 27 TRANSMISSION OF A PATIENT’S MEDICAL INFORMATION, CLINICAL DATA, CLINICAL
 28 IMAGES, LABORATORY RESULTS, AND SELF–REPORTED MEDICAL HISTORY.

29 (C) “HEALTH CARE PRACTITIONER” MEANS AN INDIVIDUAL WHO IS
 30 LICENSED, CERTIFIED, OR OTHERWISE AUTHORIZED BY LAW TO PROVIDE HEALTH
 31 CARE SERVICES UNDER THIS ARTICLE.

32 (D) “SYNCHRONOUS TELEHEALTH INTERACTION” MEANS AN EXCHANGE OF
 33 INFORMATION BETWEEN A PATIENT AND A HEALTH CARE PRACTITIONER THAT
 34 OCCURS IN REAL TIME.

1 (E) (1) "TELEHEALTH" MEANS A MODE OF DELIVERING HEALTH CARE
2 SERVICES THROUGH THE USE OF TELECOMMUNICATIONS TECHNOLOGIES BY A
3 HEALTH CARE PRACTITIONER TO A PATIENT AT A DIFFERENT PHYSICAL LOCATION
4 THAN THE HEALTH CARE PRACTITIONER.

5 (2) "TELEHEALTH" INCLUDES SYNCHRONOUS AND ASYNCHRONOUS
6 INTERACTIONS.

7 (3) "TELEHEALTH" DOES NOT INCLUDE THE PROVISION OF HEALTH
8 CARE SERVICES SOLELY THROUGH AUDIO-ONLY CALLS, E-MAIL MESSAGES, OR
9 FACSIMILE TRANSMISSIONS.

10 1-1002.

11 A HEALTH CARE PRACTITIONER MAY ESTABLISH A PRACTITIONER-PATIENT
12 RELATIONSHIP THROUGH EITHER A SYNCHRONOUS TELEHEALTH INTERACTION OR
13 AN ASYNCHRONOUS TELEHEALTH INTERACTION, IF THE HEALTH CARE
14 PRACTITIONER:

15 (1) VERIFIES THE IDENTITY OF THE PATIENT RECEIVING HEALTH
16 CARE SERVICES THROUGH TELEHEALTH;

17 (2) DISCLOSES TO THE PATIENT THE HEALTH CARE PRACTITIONER'S
18 NAME, CONTACT INFORMATION, AND THE TYPE OF HEALTH OCCUPATION LICENSE
19 HELD BY THE HEALTH CARE PRACTITIONER; AND

20 (3) OBTAINS ORAL OR WRITTEN CONSENT FROM THE PATIENT OR
21 FROM THE PATIENT'S PARENT OR GUARDIAN IF STATE LAW REQUIRES THE CONSENT
22 OF A PARENT OR GUARDIAN.

23 1-1003.

24 (A) A HEALTH CARE PRACTITIONER PROVIDING TELEHEALTH SERVICES
25 SHALL ~~BE~~:

26 (1) BE HELD TO THE SAME STANDARDS OF PRACTICE THAT ARE
27 APPLICABLE TO IN-PERSON HEALTH CARE SETTINGS; AND

28 (2) IF CLINICALLY APPROPRIATE FOR THE PATIENT, PROVIDE OR
29 REFER A PATIENT TO IN-PERSON HEALTH CARE SERVICES OR ANOTHER TYPE OF
30 TELEHEALTH SERVICE.

31 (B) (1) A HEALTH CARE PRACTITIONER SHALL PERFORM A CLINICAL
32 EVALUATION THAT IS APPROPRIATE FOR THE PATIENT AND THE CONDITION WITH

1 WHICH THE PATIENT PRESENTS BEFORE PROVIDING TREATMENT OR ISSUING A
2 PRESCRIPTION THROUGH TELEHEALTH.

3 (2) A HEALTH CARE PRACTITIONER MAY USE A SYNCHRONOUS
4 TELEHEALTH INTERACTION OR AN ASYNCHRONOUS TELEHEALTH INTERACTION TO
5 PERFORM THE CLINICAL EVALUATION REQUIRED UNDER PARAGRAPH (1) OF THIS
6 SUBSECTION.

7 (C) (1) ~~A HEALTH CARE PRACTITIONER MAY NOT PRESCRIBE AN OPIATE~~
8 DESCRIBED IN THE LIST OF SCHEDULE II SUBSTANCES UNDER § 5-403 OF THE
9 CRIMINAL LAW ARTICLE FOR THE TREATMENT OF PAIN THROUGH TELEHEALTH,
10 UNLESS:

11 (I) THE INDIVIDUAL RECEIVING THE PRESCRIPTION IS A
12 PATIENT IN A HEALTH CARE FACILITY, AS DEFINED IN § 19-114 OF THE HEALTH -
13 GENERAL ARTICLE; OR

14 (II) THE GOVERNOR HAS DECLARED A STATE OF EMERGENCY
15 DUE TO A CATASTROPHIC HEALTH EMERGENCY.

16 (2) SUBJECT TO PARAGRAPH (1) OF THIS SUBSECTION, A HEALTH
17 CARE PRACTITIONER WHO THROUGH TELEHEALTH PRESCRIBES A CONTROLLED
18 DANGEROUS SUBSTANCE, AS DEFINED IN § 5-101 OF THE CRIMINAL LAW ARTICLE,
19 IS SUBJECT TO ANY APPLICABLE REGULATION, LIMITATION, AND PROHIBITION IN
20 FEDERAL AND STATE LAW RELATING TO THE PRESCRIPTION OF CONTROLLED
21 DANGEROUS SUBSTANCES.

22 1-1004.

23 (A) A HEALTH CARE PRACTITIONER SHALL DOCUMENT IN A PATIENT'S
24 MEDICAL RECORD THE HEALTH CARE SERVICES PROVIDED THROUGH TELEHEALTH
25 TO THE PATIENT ACCORDING TO THE SAME DOCUMENTATION STANDARDS USED FOR
26 IN-PERSON HEALTH CARE SERVICES.

27 (B) ALL LAWS REGARDING THE CONFIDENTIALITY OF HEALTH
28 INFORMATION AND A PATIENT'S RIGHT TO THE PATIENT'S HEALTH INFORMATION
29 APPLY TO TELEHEALTH INTERACTIONS IN THE SAME MANNER AS THE LAWS APPLY
30 TO IN-PERSON HEALTH CARE INTERACTIONS.

31 1-1005.

32 A HEALTH CARE PRACTITIONER PROVIDING HEALTH CARE SERVICES
33 THROUGH TELEHEALTH MUST BE LICENSED, CERTIFIED, OR OTHERWISE
34 AUTHORIZED BY LAW TO PROVIDE HEALTH CARE SERVICES IN THE STATE IF THE

1 HEALTH CARE SERVICES ARE BEING PROVIDED TO A PATIENT LOCATED IN THE
2 STATE.

3 1-1006.

4 (A) A HEALTH OCCUPATIONS BOARD MAY ADOPT REGULATIONS TO
5 IMPLEMENT THIS SUBTITLE.

6 (B) REGULATIONS ADOPTED BY A HEALTH OCCUPATIONS BOARD UNDER
7 SUBSECTION (A) OF THIS SECTION:

8 (1) MAY NOT ESTABLISH A SEPARATE STANDARD OF CARE FOR
9 TELEHEALTH; AND

10 (2) SHALL ALLOW FOR THE ESTABLISHMENT OF A
11 PRACTITIONER-PATIENT RELATIONSHIP THROUGH A SYNCHRONOUS TELEHEALTH
12 INTERACTION OR AN ASYNCHRONOUS TELEHEALTH INTERACTION PROVIDED BY A
13 HEALTH CARE PRACTITIONER WHO IS COMPLYING WITH THE HEALTH CARE
14 PRACTITIONER'S STANDARD OF CARE.

15 SECTION 2. AND BE IT FURTHER ENACTED, That it is the intent of the General
16 Assembly that the Governor shall develop and implement a plan to facilitate the joining of
17 the State with adjacent states and jurisdictions in interstate compacts regulating health care
18 practitioners for the purpose of improving patient access to health care practitioners in State
19 communities experiencing a health care practitioner shortage.

20 SECTION ~~2~~ 3. AND BE IT FURTHER ENACTED, That this Act ~~shall take effect~~
21 July 1, 2020 is an emergency measure, is necessary for the immediate preservation of the
22 public health or safety, has been passed by a yea and nay vote supported by three-fifths of
23 all the members elected to each of the two Houses of the General Assembly, and shall take
24 effect from the date it is enacted.

Approved:

Governor.

Speaker of the House of Delegates.

President of the Senate.