

---

## DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

---

Simon

HB No. 903

**Abstract:** Provides for greater access to telehealth services by providing for standards of care, confidentiality, and insurance coverage; expands the definition of telemedicine; creates the La. Commission on Telehealth Access.

Present law defines "telemedicine" as the practice of healthcare delivery, diagnosis, consultation, treatment, and transfer of medical data using interactive telecommunication technology that enables a healthcare practitioner a patient at two locations separated by distance to interact via two-way video and audio transmissions simultaneously. Neither a telephone conversation nor an electronic mail message between a healthcare practitioner physician and patient, or a true consultation as may be defined by rules promulgated by the Louisiana State Board Medical Examiners (LSBME).

Proposed law defines "telemedicine" as the practice of medicine and transfer of medical data using interactive telecommunication technology that enables a physician and a patient at two locations separated by distance to interact via two-way video and audio transmissions simultaneously or through the use of asynchronous store-and-forward technology. Neither a telephone conversation nor an electronic mail message between a physician and patient, or an informal consultation or second opinion as may be defined by rules promulgated by the LSBME.

Present law requires any person authorized by LSBME to practice telemedicine to ensure that a licensed healthcare professional who can adequately and accurately assist is in the examination room with the patient at the time such patient is receiving telemedicine services.

Proposed law repeals present law and requires any person authorized by LSMBE to use the same standard of care as if the healthcare services were provided in person. Proposed law further provides that the telemedicine provider is not required to conduct a patient history or physical examination of the patient before engaging in a telemedicine encounter if the telemedicine provider conducts a patient evaluation sufficient to meet the community standard of care for the service provided. The patient evaluation may be performed using telemedicine.

Proposed law provides that a patient receiving telemedicine services may be in any location at the time that the telemedicine services are rendered and a telemedicine provider may be in any location when providing telemedicine services to a patient.

Proposed law requires a telemedicine provider to document the telemedicine services rendered in the patient's medical records according to the same standard as that required for nontelemedicine services. Medical records, including video, audio, electronic, or other records generated as a

result of providing telemedicine services are considered as confidential.

Present law requires LSBME to establish by rule the requirements for licensure and requires the rules to require the physician, when examining a patient by telemedicine, to establish a bona fide physician-patient relationship by conducting an appropriate examination of the patient as determined by the board.

Proposed law retains present law and further provides that the examination shall not require that the physician or other healthcare professional be present with the patient but may include but not be limited to review of any relevant history, examination by electronic means using a secure video line, laboratory or diagnostic studies, review of diagnoses, or other information deemed pertinent by the physician.

Proposed law defines "telehealth" as a mode of delivering healthcare services, including but not limited to telemedicine, and public health that utilizes information and communication technologies to enable the diagnosis, consultation, treatment, education, care management and self-management of patients at a distance from healthcare providers. Telehealth allows services to be accessed when providers are in a distant site and patients are in the originating site. Telehealth facilitates patient self-management and caregiver support for patients and includes synchronous interactions and asynchronous store and forward transfers.

Nothing in proposed law shall be construed to expand, diminish, or alter the scope of practice of any healthcare provider.

Proposed law requires all laws regarding the confidentiality of healthcare information and the patient's right to the patient's medical information to apply to telehealth interactions.

Proposed law prohibits a healthcare service plan from requiring that in-person contact occur between a healthcare provider and a patient before payment is made for the covered services provided, and requires every healthcare service plan to adopt payment policies to compensate healthcare providers who provide covered healthcare services through telehealth.

Proposed law requires payment for telehealth interactions to include reasonable compensation to the originating site for the transmission cost incurred during the delivery of healthcare services.

Proposed law requires healthcare service plans to pay for covered healthcare services when provided by information and communication technologies including but not limited to telephone or Internet technologies and for asynchronous store and forward services.

Proposed law requires payment for covered services provided by telehealth to be the lower of the usual and customary rate charged for that service or the contract amount the healthcare service plan pays for the same service when provided in an in-person encounter with the patient.

Proposed law prohibits a healthcare service plan from limiting the type of setting where services are provided for the patient or the provider and requires the healthcare service plan to pay

providers at both the distant site and the originating site.

Proposed law shall also be operative for healthcare service plan contracts with the medical assistance program administered by the Dept. of Health and Hospitals (DHH).

Proposed law establishes the La. Commission on Telehealth Access, composed of 13 members as follows:

- (1) The secretary of the Dept. of Health and Hospitals or his designee.
- (2) The executive director of the La. State Board of Medical Examiners or his designee.
- (3) A representative of the LSU Health Sciences Center at New Orleans.
- (4) A representative of the LSU Health Sciences Center at Shreveport.
- (5) A representative of the Tulane University School of Medicine.
- (6) A representative of the La. State Medical Society.
- (7) A representative of the La. Primary Care Association.
- (8) A representative of the La. Health Care Quality Forum.
- (9) A representative of the HomeCare Association of La.
- (10) A representative of the La. Hospital Association.
- (11) A representative of the La. Association of Health Plans.
- (12) A representative of the La. Cable and Telecommunications Association.
- (13) A representative of the TexLa Telehealth Resource Center.

Proposed law provides for the officers, compensation, and meetings of the commission.

Proposed law provides that the functions of the commission are the following:

- (1) Serve as an advisory body to the legislature and DHH on policies and practices that expand access to telehealth services in a manner that ensures quality of care and patient safety.
- (2) Serve as a coordinating forum on telehealth related matters between and among state agencies, local government, and other nongovernmental groups.
- (3) On a regular basis, research and review state regulations, guidelines, policies, and

procedures that pertain in any way to telehealth and make recommendations to the governor, the legislature, and the secretary of DHH as deemed necessary and appropriate by the chairman.

Proposed law requires the commission to prepare and submit to the governor and the legislature, on a semiannual basis, a report on the status of telehealth access in La.

Proposed law provides that the commission shall terminate on Sept. 1, 2018.

(Amends R.S. 37:1262(4), 1271(B)(2), and 1276.1(2)(a); Adds R.S. 36:259(Y), R.S. 37:1271(B)(3)-(5), and R.S. 40:1300.381-1300.389)