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S.P. 255

In Senate, March 3, 2021

An Act To Expand and Promote Telehealth Services

Received by the Secretary of the Senate on March 1, 2021. Referred to the Committee on Health Coverage, Insurance and Financial Services pursuant to Joint Rule 308.2 and ordered printed.

DAREK M. GRANT Secretary of the Senate

Presented by Senator STEWART of Aroostook.
Cosponsored by Representative MORRIS of Turner and
Senators: CLAXTON of Androscoggin, MOORE of Washington, Representative: WHITE of
Waterville.

Be it enacted by the People of the State of Maine as follows:

- **Sec. 1. 24-A MRSA §4316, sub-§8,** as enacted by PL 2019, c. 289, §2, is amended to read:
- **8.** Telehealth equipment. A carrier may not require a provider to use specific telecommunications technology and equipment as a condition of coverage under this section as long as the provider uses telecommunications technology and equipment that comply with current industry interoperability standards and that comply with standards required under the federal Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 and regulations promulgated under that Act. A provider may perform a medically necessary health care service delivered through telehealth using the patient's choice of telecommunications technology and equipment or, with the patient's consent, the telecommunications technology and equipment that is available to the provider and the patient.
 - Sec. 2. 24-A MRSA §4316, sub-§10 is enacted to read:
- <u>10. Providers outside of State.</u> A provider not licensed to practice medicine in the State may provide telehealth to a patient in the State from another jurisdiction pursuant to the provisions of Title 32, section 3300-D.
- **Sec. 3. 32 MRSA §3300-D, sub-§1,** as enacted by PL 2015, c. 137, §1, is amended to read:
- **1. Definition.** For the purposes of this section, "telemedicine" has the same meaning as "telehealth" in Title 24-A, section 4316, subsection 1, paragraph C.
- **Sec. 4. 32 MRSA §3300-D, sub-§2,** as enacted by PL 2015, c. 137, §1, is amended to read:
- **2. Requirements.** A physician not licensed to practice medicine in this State may provide eonsultative services through interstate telemedicine to a patient located in this State if the physician is registered in accordance with subsection 3. A physician intending to provide eonsultative services in this State through interstate telemedicine shall provide any information requested by the board and complete information on:
 - A. All states and jurisdictions in which the physician is currently licensed;
 - B. All states and jurisdictions in which the physician was previously licensed; and
 - C. All negative licensing actions taken previously against the physician in any state or jurisdiction.
- **Sec. 5. 32 MRSA §3300-D, sub-§3,** as enacted by PL 2015, c. 137, §1, is amended to read:
- **3. Registration.** The board may shall register a physician to practice medicine in this State through interstate telemedicine if the following conditions are met:
 - A. The physician is fully licensed without restriction to practice medicine in the state from which the physician provides telemedicine services;
 - B. The physician has not had a license to practice medicine revoked or restricted in any state or jurisdiction;

- C. The physician does not open an office in this State, does not meet with patients in this State, does not receive calls in this State from patients and agrees to provide only consultative services as requested by a physician, advanced practice registered nurse or physician assistant licensed in this State and the physician, advanced practice registered nurse or physician assistant licensed in this State retains ultimate authority over the diagnosis, care and treatment of the patient;
- D. The physician registers with the board every 2 years, on a form provided by the board; and
- E. The physician pays a registration fee not to exceed \$500 \$300.
- **Sec. 6. 32 MRSA §3300-D, sub-§6,** as enacted by PL 2015, c. 137, §1, is amended to read:
- **6. Notification to other states.** The board shall <u>may</u> obtain confirmation of licensure from all states and jurisdictions in which a physician applying for registration has ever been licensed prior to registering the physician pursuant to subsection 3. The board shall <u>may</u> request notification from a state or jurisdiction if future adverse action is taken against the physician's license in that state or jurisdiction.
 - Sec. 7. 32 MRSA §3300-D, sub-§7 is enacted to read:
- 7. Telemedicine equipment. A physician may perform medically necessary telemedicine using the patient's choice of telecommunications technology and equipment or, with the patient's consent, the telecommunications technology and equipment that is available to the physician and the patient.

SUMMARY

This bill provides under the insurance laws that a health care provider may provide telehealth services using telecommunications technology and equipment of the patient's choice or, with the patient's consent, telecommunications technology and equipment available to the provider and the patient. It also provides that a provider not licensed in the State must follow the criteria in the medical licensing laws relating to the provision of telehealth services to a patient in the State. The bill also amends the medical licensing laws for a physician not licensed in the State by expanding the physician's ability to provide consulting services to a patient to allow the physician to provide any telehealth service to a patient. It also changes from discretionary to mandatory the Board of Licensure in Medicine's approval of a physician not licensed in the State to provide telehealth services in the State if the physician meets certain criteria and reduces from \$500 to \$300 the fee the physician must pay to become registered to practice telehealth services in the State.