



General Assembly

February Session, 2018

Raised Bill No. 5299

LCO No. 1453



Referred to Committee on PUBLIC HEALTH

Introduced by:
(PH)

***AN ACT CONCERNING TELEHEALTH PRESCRIBING FOR
TREATMENT OF PSYCHIATRIC DISORDERS.***

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 19a-906 of the general statutes is repealed and the
2 following is substituted in lieu thereof (*Effective October 1, 2018*):

3 (a) As used in this section:

4 (1) "Asynchronous" means any transmission to another site for
5 review at a later time that uses a camera or other technology to capture
6 images or data to be recorded.

7 (2) "Health record" means the record of individual, health-related
8 information that may include, but need not be limited to, continuity of
9 care documents, discharge summaries and other information or data
10 relating to a patient's demographics, medical history, medication,
11 allergies, immunizations, laboratory test results, radiology or other
12 diagnostic images, vital signs and statistics.

13 (3) "Facility fee" has the same meaning as in section 19a-508c.

14 (4) "Medical history" means information, including, but not limited
15 to, a patient's past illnesses, medications, hospitalizations, family
16 history of illness if known, the name and address of the patient's
17 primary care provider if known and other matters relating to the
18 health condition of the patient at the time of a telehealth interaction.

19 (5) "Originating site" means a site at which a patient is located at the
20 time health care services are provided to the patient by means of
21 telehealth.

22 (6) "Peripheral devices" means the instruments a telehealth provider
23 uses to perform a patient exam, including, but not limited to,
24 stethoscope, otoscope, ophthalmoscope, sphygmomanometer,
25 thermometer, tongue depressor and reflex hammer.

26 (7) "Remote patient monitoring" means the personal health and
27 medical data collection from a patient in one location via electronic
28 communication technologies that is then transmitted to a telehealth
29 provider located at a distant site for the purpose of health care
30 monitoring to assist the effective management of the patient's
31 treatment, care and related support.

32 (8) "Store and forward transfer" means the asynchronous
33 transmission of a patient's medical information from an originating site
34 to the telehealth provider at a distant site.

35 (9) "Synchronous" means real-time interactive technology.

36 (10) "Telehealth" means the mode of delivering health care or other
37 health services via information and communication technologies to
38 facilitate the diagnosis, consultation and treatment, education, care
39 management and self-management of a patient's physical and mental
40 health, and includes (A) interaction between the patient at the
41 originating site and the telehealth provider at a distant site, and (B)
42 synchronous interactions, asynchronous store and forward transfers or
43 remote patient monitoring. Telehealth does not include the use of
44 facsimile, audio-only telephone, texting or electronic mail.

45 (11) "Telehealth provider" means any physician licensed under
46 chapter 370, physical therapist licensed under chapter 376,
47 chiropractor licensed under chapter 372, naturopath licensed under
48 chapter 373, podiatrist licensed under chapter 375, occupational
49 therapist licensed under chapter 376a, optometrist licensed under
50 chapter 380, advanced practice registered nurse licensed under chapter
51 378, physician assistant licensed under chapter 370, psychologist
52 licensed under chapter 383, marital and family therapist licensed
53 under chapter 383a, clinical social worker or master social worker
54 licensed under chapter 383b, alcohol and drug counselor licensed
55 under chapter 376b, professional counselor licensed under chapter
56 383c, dietitian-nutritionist certified under chapter 384b, speech and
57 language pathologist licensed under chapter 399, respiratory care
58 practitioner licensed under chapter 381a or audiologist licensed under
59 chapter 397a, who is providing health care or other health services
60 through the use of telehealth within such person's scope of practice
61 and in accordance with the standard of care applicable to the
62 profession.

63 (b) (1) A telehealth provider shall only provide telehealth services to
64 a patient when the telehealth provider: (A) Is communicating through
65 real-time, interactive, two-way communication technology or store and
66 forward technologies; (B) has access to, or knowledge of, the patient's
67 medical history, as provided by the patient, and the patient's health
68 record, including the name and address of the patient's primary care
69 provider, if any; (C) conforms to the standard of care applicable to the
70 telehealth provider's profession and expected for in-person care as
71 appropriate to the patient's age and presenting condition, except when
72 the standard of care requires the use of diagnostic testing and
73 performance of a physical examination, such testing or examination
74 may be carried out through the use of peripheral devices appropriate
75 to the patient's condition; and (D) provides the patient with the
76 telehealth's provider license number and contact information.

77 (2) At the time of the telehealth provider's first telehealth interaction
78 with a patient, the telehealth provider shall inform the patient

79 concerning the treatment methods and limitations of treatment using a
80 telehealth platform. [and, after providing the patient with such
81 information, obtain the patient's consent to provide telehealth services.
82 The telehealth provider shall document such notice and consent in the
83 patient's health record.]

84 (c) Notwithstanding the provisions of this section or title 20, no
85 telehealth provider shall prescribe schedule I, II or III controlled
86 substances through the use of telehealth, except for the treatment of
87 psychiatric disorders. A telehealth provider may not prescribe through
88 the use of telehealth any schedule I, II or III controlled substances for
89 the treatment of chronic nonmalignant pain.

90 (d) [Each telehealth provider shall, at the time of each telehealth
91 interaction, ask the patient whether the patient consents to the
92 telehealth's provider disclosure of records concerning the telehealth
93 interaction to the patient's primary care provider.] If [the] a patient
94 [consents to such disclosure] requests that the telehealth provider
95 disclose a copy of the patient's telehealth interaction with the patient's
96 primary care provider, the telehealth provider shall provide such
97 records to the patient's primary care provider, in a timely manner, in
98 accordance with the provisions of sections 20-7b to 20-7e, inclusive.

99 (e) The provision of telehealth services and health records
100 maintained and disclosed as part of a telehealth interaction shall
101 comply with the provisions of the Health Insurance Portability and
102 Accountability Act of 1996 P.L. 104-191, as amended from time to time.

103 (f) Nothing in this section shall prohibit: (1) A health care provider
104 from providing on-call coverage pursuant to an agreement with
105 another health care provider or such health care provider's
106 professional entity or employer; (2) a health care provider from
107 consulting with another health care provider concerning a patient's
108 care; or (3) orders of health care providers for hospital outpatients or
109 inpatients. For purposes of this subsection, "health care provider"
110 means a person or entity licensed or certified pursuant to chapter 370,

111 372, 373, 375, 376 to 376b, inclusive, 378, 379, 380, 381a, 383 to 383c,
112 inclusive, 384b, 397a or 399 or licensed or certified pursuant to chapter
113 368d or 384d.

114 (g) No telehealth provider shall charge a facility fee for telehealth
115 services.

116 Sec. 2. Section 20-613a of the general statutes is repealed and the
117 following is substituted in lieu thereof (*Effective October 1, 2018*):

118 In the absence of a documented patient evaluation that includes a
119 physical examination or an examination conducted using telehealth in
120 accordance with section 19a-906, as amended by this act, any request
121 for a controlled substance issued solely on the results of answers to an
122 electronic questionnaire shall be considered to be issued outside the
123 context of a valid practitioner-patient relationship and not be a valid
124 prescription. The Commissioner of Consumer Protection may adopt
125 regulations, in accordance with chapter 54, concerning such requests
126 for controlled substances. For the purposes of this section, "electronic
127 questionnaire" means any form in an electronic format that may
128 require personal, financial or medical information from a consumer or
129 patient.

130 Sec. 3. Section 38a-499a of the 2018 supplement to the general
131 statutes is repealed and the following is substituted in lieu thereof
132 (*Effective October 1, 2018*):

133 (a) As used in this section, "telehealth" has the same meaning as
134 provided in section 19a-906, as amended by this act.

135 (b) Each individual health insurance policy providing coverage of
136 the type specified in subdivisions (1), (2), (4), (11) and (12) of section
137 38a-469 of the general statutes delivered, issued for delivery, renewed,
138 amended or continued in this state shall provide coverage for medical
139 advice, diagnosis, care or treatment provided through telehealth, to the
140 extent coverage is provided for such advice, diagnosis, care or
141 treatment when provided through in-person consultation between the

142 insured and a health care provider. Such coverage shall be subject to
143 the same terms and conditions applicable to all other benefits under
144 such policy.

145 (c) No such policy shall: (1) Exclude a service for coverage solely
146 because such service is provided only through telehealth and not
147 through in-person consultation between the insured and a health care
148 provider, provided telehealth is appropriate for the provision of such
149 service; or (2) be required to reimburse a treating or consulting health
150 care provider for the technical fees or technical costs for the provision
151 of telehealth services.

152 (d) Under each such policy, an insurer shall compensate the
153 provider for covered services delivered via telehealth on the same
154 basis and at least the same rate as the insurer would apply to the
155 services if the services had been delivered in person by the provider.

156 ~~[(d)]~~ (e) Nothing in this section shall prohibit or limit a health
157 insurer, health care center, hospital service corporation, medical
158 service corporation or other entity from conducting utilization review
159 for telehealth services, provided such utilization review is conducted
160 in the same manner and uses the same clinical review criteria as a
161 utilization review for an in-person consultation for the same service.

162 Sec. 4. Section 38a-526a of the 2018 supplement to the general
163 statutes is repealed and the following is substituted in lieu thereof
164 (*Effective October 1, 2018*):

165 (a) As used in this section, "telehealth" has the same meaning as
166 provided in section 19a-906, as amended by this act.

167 (b) Each group health insurance policy providing coverage of the
168 type specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-
169 469 of the general statutes delivered, issued for delivery, renewed,
170 amended or continued in this state shall provide coverage for medical
171 advice, diagnosis, care or treatment provided through telehealth, to the
172 extent coverage is provided for such advice, diagnosis, care or

173 treatment when provided through in-person consultation between the
 174 insured and a health care provider. Such coverage shall be subject to
 175 the same terms and conditions applicable to all other benefits under
 176 such policy.

177 (c) No such policy shall: (1) Exclude a service for coverage solely
 178 because such service is provided only through telehealth and not
 179 through in-person consultation between the insured and a health care
 180 provider, provided telehealth is appropriate for the provision of such
 181 service; or (2) be required to reimburse a treating or consulting health
 182 care provider for the technical fees or technical costs for the provision
 183 of telehealth services.

184 (d) Under each such policy, an insurer shall compensate the
 185 provider for covered services delivered via telehealth on the same
 186 basis and at least the same rate as the insurer would apply to the
 187 services if the services had been delivered in person by the provider.

188 [(d)] (e) Nothing in this section shall prohibit or limit a health
 189 insurer, health care center, hospital service corporation, medical
 190 service corporation or other entity from conducting utilization review
 191 for telehealth services, provided such utilization review is conducted
 192 in the same manner and uses the same clinical review criteria as a
 193 utilization review for an in-person consultation for the same service.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>October 1, 2018</i>	19a-906
Sec. 2	<i>October 1, 2018</i>	20-613a
Sec. 3	<i>October 1, 2018</i>	38a-499a
Sec. 4	<i>October 1, 2018</i>	38a-526a

Statement of Purpose:

To (1) allow Connecticut licensed physicians to prescribe certain medications via telehealth for treatment of psychiatric disorders and change certain patient consent requirements; (2) add telehealth

examinations; and (3) implement payment for parity for telehealth services.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]