

Puerto Rico



At A Glance

MEDICAID REIMBURSEMENT

- Live Video: No
- Store and Forward: No
- Remote Patient Monitoring: No
- Audio-Only: No

PRIVATE PAYER LAW

- Law Exists: No
- Payment Parity: No

PROFESSIONAL REQUIREMENTS

- Licensure Compacts: None
- Consent Requirements: Yes

STATE RESOURCES

1. Medicaid Program: Puerto Rico Medicaid
2. Program Administrator: Puerto Rico Department of Health
3. Regional Telehealth Resource Center: Southeast Telehealth Resource Center

Private Payer

DEFINITIONS

Last updated 03/22/2024

No reference found.

REQUIREMENTS

Last updated 03/22/2024

No reference found.

PARITY

Last updated 03/22/2024

Service Parity

No reference found.

Payment Parity

No reference found.

Medicaid

OVERVIEW

Last updated 03/28/2024

Although the Puerto Rico Department of Health has information regarding telehealth, including definitions for terms and modalities, its Medicaid program webpage lacks any information on telehealth. It is likely because Puerto Rico Medicaid is 100% Managed Care, which is operated by Plan Vital. At this time, there does not appear to be any specific permanent telehealth policy under Plan Vital.

DEFINITIONS

Last updated 03/22/2024

Telehealth – It means the remote care of health professionals, beyond doctors, offered to their patients through the use of technologies, electronic services and telecommunications.

Telemedicine – It is the practice of remote medical care incorporating both diagnosis, treatment and medical education through the use of technological resources to optimize health care services. They must include, but are not limited to, complementary and instant services to the attention of a specialist; immediate diagnoses by a specialist doctor in a certain area or region; remote education of students from schools of nursing, health professionals and medicine; digital file services for radiological examinations, ultrasounds, medical emergencies and others. In the case of Rehabilitation Centers, physical therapists, occupational therapists and speech therapists will be included for Telemedicine purposes.

SOURCE: Telesalud. Departamento de Salud. (Accessed Mar. 2024).

Telehealth is the use of communication technologies to provide health services at a distance. Telehealth is a broad term that includes telemedicine, but also involves aspects such as: training for health professionals, coordination of medical care and related services such as mental health and pharmacy.

Telemedicine is the remote provision of clinical services by health professionals; through the use of technology and communication for the exchange of valid information for diagnosis, treatment, disease prevention, research and evaluation. All this with the aim of improving the health of communities.

Source: Telemedicina Y Telesalud. Departamento de Salud. (Accessed Mar. 2024).

LIVE VIDEO

Last updated 03/22/2024

Policy

The practice of Telemedicine must take into consideration those aspects as defined by the “Center for Medicare Services” (CMS), for the purposes of the “Act for the Use of Telemedicine and Telehealth in Puerto Rico ” [Law 168-2018, as amended] Rev. November 19, 2020, the consultations made may be considered for reimbursement by “Medicare”, “Medicaid” other medical plans.

Synchronous teleconsultations are carried out in real time (term most used in the international arena), involving the participation of both patients and health

professionals in sending information, sometimes using sophisticated telecommunication technologies.

Telecare – Refers to equipment in the home that allows independent living and issues data and alerts to caregivers. Telecare is a monitoring system for the elderly or dependents. The innovative service consists of a wearable device hidden under the guise of a simple watch, connected 24x7 to a central control unit, which receives the user's vital signs, location and signals. If an emergency situation is detected, we contact the user, family members and emergency care agencies if necessary.

Teleconsultation- Remote communication between patient and provider. It is a system that uses computers and telecommunications for the purpose of providing health care at the hands of specialized personnel.

SOURCE: Telesalud. Departamento de Salud. (Accessed Mar. 2024).

Synchronous: Synchronous Teleconsultation (face to face) is carried out in real time between the health professional and the patient requesting the service.

Source: Telemedicina Y Telesalud. Departamento de Salud. (Accessed Mar. 2024).

Eligible Services/Specialties

No reference found.

Eligible Providers

No reference found.

Eligible Sites

No reference found.

Geographic Limits

No reference found.

Facility/Transmission Fee

No reference found.

STORE-AND-FORWARD

Last updated 03/22/2024

Policy

Asynchronous – The asynchronous Teleconsultation (by email or text messages) is developed by sending clinical information, and whose advice occurs later.

Source: Telemedicina Y Telesalud. Departamento de Salud. (Accessed Mar. 2024).

Requests for referral to different specialties are received from general practitioners. An expert doctor assesses that the data is complete and sends the results for the review and opinion of the specialist doctor. Asynchronous teleconsultations are carried out by sending clinical information, and subsequent counseling occurs some time later; A clear example of this type is teledermatology, where sometimes dermatological images are sent attached to E-mail to refer consultations or share clinical cases, likewise in pages such as the NHS in England, the patient is advised about the symptoms he presents. One of the biggest advantages of asynchronous teleconsultation, generally called “store-and-forward” is that the parties involved do not have to be present in the transfer of information. Additionally, they have the ability to capture and store static or moving images of the patient, as well as audio and text, which provides greater clinical information that is reflected in the quality of diagnoses. These applications are widely used in teledermatology, teleophthalmology, teleneurology, and otorhinolaryngology, and have the advantage of being inexpensive and ideal for high volume work and tests, as well as audio and text, which provides greater clinical information that is reflected in the quality of diagnoses.

Source: Telemedicina Y Telesalud. Departamento de Salud. (Accessed Mar. 2024).

Eligible Services/Specialties

No reference found.

Geographic Limits

No reference found.

Facility/Transmission Fee

No reference found.

REMOTE PATIENT MONITORING

Last updated 03/22/2024

Remote monitoring: Facilitates remote self-care through the use of electronic equipment and systems (eg vital signs monitoring platforms).

Source: Telemedicina Y Telesalud. Departamento de Salud (Accessed Mar. 2024).

Tele-monitoring – Facilitates self-care with electronic equipment. The data goes to a repository. It consists of the measurement, observation and even the modification of the course of one or more vital parameters of a patient through electronic means and remote communication. These parameters include, for example, pulse, respiration, blood pressure, blood glucose and oxygen, and many others.

Teleconsultation- Remote communication between patient and provider. It is a system that uses information technology and telecommunication for the purpose of providing health care at the hands of specialized personnel.

Source: Telemedicina Y Telesalud. Departamento de Salud (Accessed Mar. 2024).

Conditions

No reference found.

Provider Limitations

No reference found.

Other Restrictions

No reference found.

EMAIL, PHONE & FAX

Last updated 03/22/2024

No reference found.

CONSENT REQUIREMENTS

Last updated 03/22/2024

Informed Consent for Telemedicine

It will be necessary that, prior to receiving telemedicine or telehealth services, all patients sign an informed consent form expressing their agreement to receive the services. If the patient does not agree to the use of telemedicine or telehealth services, the doctor or

health professional must not provide the services, nor bill any type of charge for the patient refusing the consultation.

The patient maintains the option to accept or deny the service at any time, without affecting the right to receive any other type of medical or health care or attention through telemedicine or telehealth. In the event that the patient is a minor, or a person declared legally incapable, this Article shall apply to their custodian, guardian or legal representative.

This consent may be electronic and must be documented in the patient's file. In addition, the consent must include the risk of loss of confidentiality inherent in the use of technology.

Before starting the consultation, you must ensure that your patient consents to receive the service through the telemedicine modality. Develop a specific format for telemedicine:

- Check that your patient understands the risks, benefits and alternatives of Telemedicine
- Discuss with your patient the benefits, such as safer access or convenience, versus the risks and limitations of using telemedicine, despite all measures taken.
- Analyze the patient's ability to use technology and to consent to the use of Telemedicine.
- Prior to the consultation, I sent the consent to be signed by the patient by a means that allows secure electronic communication and request that it be returned signed by the same means.
- If you cannot send the consent via email or your patient cannot return it signed, consider asking the patient to confirm via text message that the consent was discussed, understood, and if they authorize it.
- Include in the medical record a copy of the consent form that you used as evidence of the points discussed.
- In the event that the patient does not consent to the use of Telemedicine, they must document in the file that the service was offered and that the patient did not agree.
- Document that the patient gave their consent prior to providing the service and that they accepted the use of Telemedicine, as well as the disclosure of their information, even understanding the risks and limitations when communicating through electronic means.
- In the case of minors or disabled, request the written authorization of the parents or guardian.
- As with all visits with a patient, you should document the visit and the means by which it was conducted. The requirements are the same as for a face-to-face meeting where you need to document relevant history.
- Make sure you are seeing the right patient.

SOURCE: Guidelines & Protocols for Telehealth in Puerto Rico & Department de Salud: Telehealth: Informed Consent for Telemedicine. (Accessed Mar. 2024).

OUT OF STATE PROVIDERS

Last updated 03/22/2024

Certification to practice in Puerto Rico required.

SOURCE: Law No. 68 of 2020 For the Use of Telemedicine in Puerto Rico. Regulation 9107 of August 20, 2019 Telemedicine Use in Puerto Rico (original law). (Accessed Mar. 2024).

MISCELLANEOUS

Last updated 03/22/2024

No reference found.

Professional Requirements

DEFINITIONS

Last updated 03/22/2024

Telemedicine.— Means any examination, diagnosis, treatment, operation or prescription for any disease, pain, injury, deformity or physical and/or mental condition performed on a patient where the surgeon or osteologist performs such activity through the use of advanced telecommunications technologies to exchange information and provide the aforementioned health services in geographically distant areas.

SOURCE: 20 LPRA Section 6001(b) (Accessed Mar. 2024).

Telemedicine.— It is the practice of medicine at a distance incorporating both diagnosis, treatment and medical education through the use of technological resources to optimize health care services . They must include, but are not limited to, complementary and instant services to the attention of a specialist; immediate diagnoses by a specialist doctor in a given area or region; remote education of students from nursing schools, health professionals and medicine; digital archiving services for radiological examinations, ultrasounds, medical emergencies and others. In the case of

rehabilitation centers, physical therapists, occupational therapists and speech therapists will be included for **telemedicine purposes**.

Telehealth.— Means remote care that health professionals, beyond doctors, offer their patients through the use of technologies, electronic and telecommunications services.

SOURCE: 20 LPRA Section 6011(a)(e) & (f) (Accessed Mar. 2024).

CONSENT REQUIREMENTS

Last updated 03/28/2024

Será necesario que, previo a recibir los servicios de la telemedicina o telesalud, todo paciente suscriba una hoja de consentimiento informado expresando su conformidad a recibir los servicios. Si el paciente no está de acuerdo en la utilización de los servicios de la telemedicina o telesalud, el médico o profesional de la salud no deberá proveer los servicios, ni facturar ningún tipo de cargo por el paciente negarse a la consulta. El paciente mantiene la opción de aceptar o denegar el servicio en cualquier momento, sin que se afecte el derecho de recibir cualquier otro tipo de atención o cuidado.

SOURCE: 20 LPRA 6011i., 20 LPRA Section 6006. (Accessed Mar. 2024).

ONLINE PRESCRIBING

Last updated 03/22/2024

No reference found.

CROSS-STATE LICENSING

Last updated 03/28/2024

As of the entry into force of this law, any doctor or health professional authorized to practice in Puerto Rico may make their consultations or provide their services through technology. **telemedicine** or telehealth in Puerto Rico. For this, you will only have to request certification to practice **telemedicine** or telehealth and have it granted by the Licensing Board or the Examining Board or Governing Body, according to the profession exercised by the applicant and in accordance with the requirements contained in their respective regulations.

It will be a sufficient requirement to obtain certification that the applicant doctor or health professional is authorized to practice his or her profession in Puerto Rico, according to its Board or Governing Body, and has a current license.

Any doctor or health professional who is not duly licensed and authorized to practice in Puerto Rico, or in federal jurisdiction, will not be able to receive certification to practice **telemedicine**. or telehealth on the Island.

SOURCE: 20 LPRA 6011(d). (Accessed Mar. 2024).

As of the approval of this law, every surgeon or osteologist who wishes to practice telemedicine in the Commonwealth of Puerto Rico must request and obtain a license from the Examining Court to practice medicine, surgery or osteology, complying with the established requirements. in secs. 31 et seq. of Title 20.

SOURCE: 20 LPRA Section 6002. (Accessed Mar. 2024).

As of the approval of this law, no doctor, surgeon, or osteologist outside the jurisdiction of the Commonwealth of Puerto Rico without being duly licensed to do so, may write or publish an advertisement claiming to be legally qualified to do so. the practice of **telemedicine** unless it has a license duly issued by the Examining Court that shows that it complies with the requirements of Law No. 22 of April 22, 1931.

This requirement will not apply to those doctors or osteologists who, being outside the jurisdiction of the Commonwealth, are consulted by doctors or osteologists duly licensed in Puerto Rico.

However, any doctor or osteologist who is consulted must be duly authorized to practice medicine in the jurisdiction from which they provide their services. Likewise, the institutions that the consulted doctors represent or those that provide their facilities for consultation, must have the official certifications of the jurisdiction where they reside.

SOURCE: 20 LPRA Section 6003 (Accessed Mar 2024).

LICENSURE COMPACTS

Last updated 03/22/2024

No reference found.

PROFESSIONAL BOARDS STANDARDS

Last updated 03/28/2024

Se faculta a la Junta de Licenciamiento y a la Junta Examinadora u Organismo Rector de cada profesión cubierto por este capítulo a implantar las reglas y reglamentos necesarios para dar cumplimiento a las disposiciones de este capítulo o que sean necesarios por la práctica de la **telemedicina** o telesalud en Puerto Rico. Al reglamentar

todos los asuntos relacionados a la **telemedicina** o telesalud deberán considerar, sin que represente una limitación a su facultad de reglamentar la materia, los comentarios, sugerencias y recomendaciones de la academia y los gremios y asociaciones que representen a los médicos, proveedores de salud y demás profesionales de la salud cobijados bajo este capítulo.

SOURCE: 20 LPRA Section 6011(k). (Accessed Mar. 2024).

Practice Requirements (Accessed Mar 2024).

Reglamento de la Junta de Licenciamiento Y Disciplina medica De Puerto Rico

SOURCE: Departamento de Salud (20 de agosto de 2019) (Accessed Mar. 2024).

MISCELLANEOUS

Last updated 03/28/2024

La expedición de una licencia, a cualquier médico cirujano u osteólogo, bajo las disposiciones de este capítulo se entenderá que somete a tal médico cirujano u osteólogo a la jurisdicción del Tribunal Examinador de Médicos en todos los asuntos relacionados con su práctica médica y le será aplicable cualquier legislación o reglamentación relacionada con la misma e, inclusive, estará sujeto a cualquier sanción disciplinaria que pudiera imponérsele, así mismo se entenderá que la tenencia de una licencia en conformidad con este capítulo somete a tal médico cirujano u osteólogo a la jurisdicción del Sistema de Justicia del Estado Libre Asociado de Puerto Rico. Cualquier médico cirujano u osteólogo al que se expida una licencia bajo las disposiciones de este capítulo, se entiende presta su conformidad a producir cualquier récord médico o cualquier material o informe, según le sea solicitado por el Tribunal Examinador y/o a presentarse ante el Tribunal Examinador o cualquier Comité de éste, dentro del término que le indique el Tribunal Examinador luego de ser debidamente notificado por escrito para ello. Tal solicitud será expedida por el Tribunal Examinador a tenor con cualquier querella radicada o investigación iniciada y cuando los récords, materiales o informes sean pertinentes para resolver la referida querella o investigación.

SOURCE: 20 LPRA Section 6004 (Accessed Mar. 2024).

Cualquier médico cirujano u osteólogo que practique la **telemedicina**, deberá cumplir con la legislación o reglamentación existente en el Estado Libre Asociado de Puerto Rico sobre el manejo y mantenimiento de récords médicos de sus pacientes incluyendo la confidencialidad de los mismos. El médico cirujano u osteólogo será responsable de mantener aquellos controles o mecanismos que aseguren la integridad de la

información del récord médico electrónico de forma tal que no pueda ser accesada o alterada por terceras personas que no mantengan una relación médico-paciente, y cuya intervención podría afectar el proceso de diagnóstico y tratamiento del paciente. En el caso de los médicos cirujanos u osteólogos fuera de la jurisdicción también deberán cumplir con cualquier otra disposición existente en el estado o territorio donde se encuentre dicho médico cirujano u osteólogo.

SOURCE: 20 LPRA Section 6005 (Accessed Mar 2024).

Las disposiciones de este capítulo no serán aplicables a la práctica de la **telemedicina** que realice un médico cirujano u osteólogo fuera de la jurisdicción por razón de una emergencia médica. [Disponiéndose,] que el término emergencia médica será aquella determinada por el médico cirujano u osteólogo, y se entenderá como la práctica que ocurre una sola vez por paciente y que envuelva a un máximo de diez (10) pacientes en una base anual.

Tampoco serán aplicables las disposiciones de este capítulo a un médico cirujano u osteólogo que realice una práctica irregular de **telemedicina** sin recibir compensación o remuneración de cualquier tipo, ni a las consultas ocasionales que pueda hacer cualquier médico cirujano u osteólogo con un colega fuera de la jurisdicción del Estado Libre Asociado de Puerto Rico, donde no existe una relación directa del médico cirujano u osteólogo que practica en esa otra jurisdicción con el paciente. No se entenderá como práctica irregular aquella desarrollada o ejercida conforme a cualquier relación contractual.

SOURCE: 20 LPRA Section 6007 (Accessed Mar. 2024).

Toda persona que violare cualesquiera de las disposiciones de este capítulo, o de cualquier reglamento adoptado en virtud de la misma, se entenderá ejerce ilegalmente la medicina, o cirugía o la osteología y estará sujeta a las penalidades dispuestas en la sec. 39 de este título. El Tribunal Examinador podrá imponer una multa administrativa no mayor de quince mil dólares (\$15,000) a cualquier persona que violare cualquier disposición de este capítulo o reglamento adoptado en virtud de la misma o que rehusare obedecer o cumplir cualquier orden o resolución emitida por el mismo. Los derechos que se cobren por concepto de la imposición de multas administrativas ingresarán al Fondo de Salud en una cuenta especial del Tribunal Examinador para el uso exclusivo del mismo. El Tribunal Examinador podrá solicitar del Tribunal de Primera Instancia la expedición de un auto [de] *injunction* para impedir cualquier violación a este capítulo o al Reglamento adoptado en virtud de la misma.

SOURCE: 20 LPRA Section 6008 (Accessed Mar. 2024).

Se crea, adscrito al Departamento de Salud, el Comité de **Telemedicina** compuesto por once (11) personas, nombradas por el Secretario de Salud. El Comité deberá tener representación de las instituciones hospitalarias, de las compañías aseguradoras, de los médicos participantes, y del Tribunal Examinador, entre otros. El Comité tendrá como función principal definir los servicios a ser reembolsados a través de **telemedicina**, los métodos para el reembolso de servicios prestados, los mecanismos de financiamiento para la **telemedicina**, incentivos, aspectos médicos-legales y definiciones de cualesquiera estándares operacionales, entre otros. El Comité deberá rendir al Secretario de Salud informes mensuales y un informe final a los seis (6) meses de su constitución con sus recomendaciones, incluyendo posible legislación a ser presentada. Nada de lo establecido en esta sección afectará el desarrollo e implantación del Programa Piloto de **Telemedicina** de los Departamentos de Desarrollo Económico y Comercio y de Salud.

SOURCE: 20 LPRA Section 6010. (Accessed Mar. 2024).

La expedición de una certificación a cualquier médico o profesional de salud cubierto por este capítulo significa, que se somete a la jurisdicción de Puerto Rico y de la Junta de Licenciamiento o de la Junta Examinadora u Organismo Rector, según sea el caso, siéndole aplicable cualquier legislación o reglamentación relacionada con estas e inclusive, estará sujeto a cualquier sanción disciplinaria que pudiera imponérsele. Se entenderá que la tenencia de una certificación de conformidad con este capítulo somete a tal médico o profesional de la salud a la jurisdicción de los Tribunales de Puerto Rico. Cualquier médico o profesional de la salud al que se le expida una certificación bajo las disposiciones de este capítulo, se entiende presta su conformidad a producir cualquier récord médico o cualquier material o informe, según le sea solicitado por la Junta de Licenciamiento o las Juntas Examinadores u Organismo Rector, según sea el caso.

SOURCE: 20 LPRA Section 6011(g). (Accessed Mar. 2024).

Federally Qualified Health Center (FQHC)

DEFINITION OF VISIT

Last updated 03/22/2024

An encounter is defined as a face-to-face event between a patient and an FQHC provider of health care services who exercises independent judgment when providing health services to the patient. A rendering practitioner may be a physician, clinical psychologist, psychiatrist, dentist, or a clinical social worker employed by or holding a contract directly with the FQHC and providing a service as defined in 42 USC Section 1396d(a)(2)(C).

A visit is defined as one or more related encounters. Related encounters may or may not occur on the same day. For a health service to be defined as a Medicaid/CHIP visit, it must be included in the FQHC's defined scope of services as approved by Puerto Rico and billed under the FQHC's provider number. All service must be documented in the beneficiary's medical record in order to qualify for a visit. An FQHC cannot obtain reimbursement for more than one (1) visit per day for each beneficiary unless there are two (2) separate visits with two (2) separate diagnoses. Ancillary services provided without a face-to-face visit as defined above, do not constitute a visit.

SOURCE: Puerto Rico Dept of Health, Reimbursement Ruling Federally Qualified Health Centers (FQHC), Medicaid Program (2019), p. 3. (Accessed Mar. 2024).

MODALITIES ALLOWED

Last updated 03/22/2024

Live Video

No reference found.

Store and Forward

No reference found.

Remote Patient Monitoring

No reference found.

Audio-Only

No reference found.

SAME DAY ENCOUNTERS

Last updated 03/22/2024

Each individual provider is limited to one type of visit per day for each patient, regardless of the services provided.

SOURCE: Puerto Rico Dept of Health, Reimbursement Ruling Federally Qualified Health Centers (FQHC), Medicaid Program (2019), p. 10. (Accessed Mar. 2024).

ELIGIBLE ORIGINATING SITE

Last updated 03/22/2024

No reference found.

ELIGIBLE DISTANT SITE

Last updated 03/22/2024

No reference found.

FACILITY FEE

Last updated 03/22/2024

No reference found.

PPS RATE

Last updated 03/22/2024

No specific reference to telehealth, however, generally Puerto Rico Medicaid's policy on PPS rate for FQHCs is:

FQHCs are entitle to PPS reimbursement for services provided to any individual eligible for Medicaid regardless of the existence of third party liability including Medicare. See manual for more inforamtion.

SOURCE: Puerto Rico Dept of Health, Reimbursement Ruling Federally Qualified Health Centers (FQHC), Medicaid Program (2019), p. 6. (Accessed Mar. 2024).

HOME ELIGIBLE

Last updated 03/22/2024

No reference found.

PATIENT-PROVIDER RELATIONSHIP

Last updated 03/22/2024

No reference found.