The Mid-Atlantic Telehealth Resource Center provides telehealth technical assistance to the states of Delaware, District of Columbia, Kentucky, Maryland, New Jersey, North Carolina, Pennsylvania, Virginia, and West Virginia.

A few notes about this report:
1. Bills are organized into specific telehealth "topic area".
2. The Fiscal Note (FN) Outlook: The left hand column indicates the bill's Pre-Floor Score, and the right hand column indicates the bill's actual Floor Score of the last chamber it was in (either Senate or House).
3. Regulations are listed at the end in order of their publication date.
4. If you would like to learn more about any piece of legislation or regulation, the bill numbers and regulation titles are clickable and link out to additional information.

### Bills by Issue

<table>
<thead>
<tr>
<th>Subcategory</th>
<th>Bill Count</th>
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<tbody>
<tr>
<td>Substance Use Disorder</td>
<td>8</td>
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<tr>
<td>Regulatory, Licensing &amp; Advisory Boards</td>
<td>17</td>
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<tr>
<td>Provider-Patient Relationship</td>
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<tr>
<td>Private Payer Reimbursement</td>
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<td>Other</td>
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<td>Online Prescribing</td>
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<td>Network Adequacy</td>
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<td>Medicaid Reimbursement</td>
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<tr>
<td>Demonstrations, Grants &amp; Pilot Projects</td>
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<tr>
<td>Cross State Licensing</td>
<td>17</td>
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<tr>
<td>Broadband</td>
<td>1</td>
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</table>

### Bills by Status

- **28** - Introduced
- **8** - Passed First Chamber
- **9** - Passed Second Chamber
- **4** - Failed

All Bills

**Cross-State Licensing (17)**
Title
AN ACT relating to the psychology interjurisdictional compact.

Description
Create a new section of KRS Chapter 319 to enact and enter into the Psychology Interjurisdictional Compact with all other jurisdictions that legally join the compact; declare the purpose of the compact; define terms; allow a psychologist to hold one or more compact state licenses at a time; recognize the right of a psychologist licensed in the compact to practice telepsychology in other compact states the psychologist is not licensed; establish conditions under which a psychologist licensed to practice in compact state can practice telepsychology; establish the conditions under which a psychologist licensed to practice in a compact state may be granted a Temporary Authorization to Practice; authorize a home state to take adverse action against a psychologist's licensed issued by the Home State; allow a receiving state to take adverse action on a psychologist's Authority to Practice Interjurisdictional Telepsychology within that receiving state; authorize a compact state's ability to issue subpoenas for hearings and investigation as well as cease and desist and injunctive relief orders to revoke a psychologist's authority to practice interjurisdictional telepsychology and temporary authorization to practice; establish the Psychology Interjurisdictional Compact Commission; require the commission to provide for and maintain a Coordinated Licensure Information System (Coordinated Database) and reporting system containing licensure and disciplinary action information on psychologists participating in the compact; provide immunity for members, officers, executive director, employees, and representatives of the commission who act in accordance with the provisions of the compact; authorize the commission to establish rulemaking procedures; authorize the executive, judicial, and legislative branches of state government to enforce the provisions of the compact; affirm that rules promulgated will have standing as statutory law; require provisions of the compact to become effective on the date the compact is enacted into law.

Primary Sponsors
Walker Thomas, Lisa Willner, Tina Bojanowski, Nima Kulkarni, Susan Westrom

Bill Summary: Adopts the Association of State and Provincial Psychology Boards' Psychology Interjurisdictional Compact (PSYPACT).
Title
AN ACT relating to audiology and speech-language pathology.

Description
Create a new section of KRS 334A.010 to 334A.990 to enact and enter into the Audiology and Speech-Language Pathology Interstate Compact with all other jurisdictions that legally join in the compact; declare the purpose of the compact; establish definitions; recognize a multistate licensure privilege to practice for audiologists and speech-language pathologists; recognize a multistate licensure privilege for audiologists and speech-language pathologists to practice audiology and speech-language pathology via telehealth; establish provisions for active duty military personnel and their spouses; authorize a remote state to take adverse action against an audiologist or speech-language pathologist's privilege to practice within that member state; authorize a home state to take adverse action against an audiologist's or speech-language pathologist's license issued by the home state; create the Audiology and Speech-Language Pathology Compact Commission; provide immunity for party states, officers, employees, or representatives of the Commission who act in accordance with the provisions of the compact; require the Commission to create a database and reporting system containing licensure, adverse actions, and investigative information on all licensed individuals in member states; establish procedures for rulemaking; authorize the Commission to attempt to resolve disputes related to the compact that arise among member states and between member and non-member states; require provisions of the compact to become effective the day it is enacted into law once a state enters the Compact; provide for severability for any provision in the compact that is contrary to the constitution of any member state or of the United States or the applicability thereof to any government, agency, person, or circumstance.

Primary Sponsors
Walker Thomas, Tina Bojanowski

Bill Summary: Adopts the Audiology and Speech-Language Pathology Interstate Compact and allow for the use of telehealth to facilitate access to audiology and speech-language pathology services.
Title
Audiology and Speech-Language Pathology Interstate Compact

Description
Entering into the Audiology and Speech-Language Pathology Interstate Compact; stating the purpose of the Compact; requiring a state to meet certain requirements to participate in the Compact; requiring certain audiologists and speech-language pathologists to meet certain eligibility requirements to exercise the privilege to practice; requiring member states to recognize the right of an audiologist or a speech-language pathologist to practice via telehealth under certain circumstances; etc.

Primary Sponsors
Nick Charles, Heather Bagnall, Ben Barnes, Al Carr, Bonnie Cullison, Shaneka Henson, Terri Hill, Julian Ivey, Steve Johnson, Ariana Kelly, Josie Pena-Melnyk, Nicole Williams, Washington

Bill Summary: Enacts the Audiology and Speech-Language Pathology Interstate Compact.

Title
Healthy NC.

Primary Sponsors
Joyce Krawiec, Dan Bishop, Ralph Hise

Bill Summary: Adopts the Psychology Interjurisdictional Licensure Compact and establishes compact privileges related to the interstate practice of telepsychology.
<table>
<thead>
<tr>
<th>State</th>
<th>Bill Number</th>
<th>Last Action</th>
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<td>NJ</td>
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</table>

Title
Enters New Jersey into Emergency Medical Services Personnel Licensure Interstate Compact.

Bill Summary: Enacts the Emergency Medical Services Personnel Licensure Interstate Compact.

Primary Sponsors
Carol Murphy, Raj Mukherji, Ron Dancer

Title
Enters New Jersey into Interstate Medical Licensure Compact.

Bill Summary: Enacts the Interstate Medical Licensure Compact.

Primary Sponsors
Carol Murphy

Title
Enters New Jersey into Interstate Medical Licensure Compact.

Bill Summary: Enacts the Interstate Medical Licensure Compact.

Primary Sponsors
Joe Vitale, Joe Cryan
<table>
<thead>
<tr>
<th>Title</th>
<th>Medical Excellence Zone Program; VDH to determine feasibility of establishment.</th>
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</thead>
<tbody>
<tr>
<td>Description</td>
<td>Department of Health; Department of Health Professions Medical Excellence Zone Program; telemedicine; reciprocal agreements. Directs the Department of Health to determine the feasibility of establishing a Medical Excellence Zone Program to allow citizens of the Commonwealth living in rural underserved areas to receive medical treatment via telemedicine services from providers licensed or registered in a state that is contiguous with the Commonwealth and directs the Department of Health Professions to pursue reciprocal agreements with such states for licensure for certain primary care practitioners licensed by the Board of Medicine. The bill requires the Department of Health to set out the criteria that would be required for a locality or group of localities in the Commonwealth to be eligible for the designation as a medical excellence zone and report its findings to the Senate Committee on Education and Health and the House Committee on Health, Welfare and Institutions by November 1, 2020.</td>
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<tr>
<td>Primary Sponsors</td>
<td>Barbara Favola</td>
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<tr>
<td>Bill Summary</td>
<td>Establishes the Medical Excellence Zone Program to allow citizens in rural underserved areas to receive medical treatment via telemedicine services and requires the Department of Health Professionals to pursue agreements with contiguous states for licensure for certain primary care practitioners under the Board of Medicine.</td>
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<table>
<thead>
<tr>
<th>Title</th>
<th>Psychologists; licensure, permitted to practice in Psychology Interjurisdictional Compact.</th>
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<tbody>
<tr>
<td>Description</td>
<td>Licensure of psychologists; Psychology Interjurisdictional Compact. Authorizes Virginia to become a signatory to the Psychology Interjurisdictional Compact. The Compact permits eligible licensed psychologists to practice in Compact member states, provided that they are licensed in at least one member state. The bill has a delayed effective date of January 1, 2021, and directs the Board of Psychology to adopt emergency regulations to implement the provisions of the bill.</td>
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<td>Primary Sponsors</td>
<td>Creigh Deeds</td>
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<tr>
<td>Bill Summary</td>
<td>Enacts the Psychology Interjurisdictional Compact.</td>
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<td>State</td>
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Title
Enacting Recognition of Emergency Services Personnel Licensure Interstate Compact

**Primary Sponsors**
Dave Sypolt

**Bill Summary:** Enacts the Recognition of Emergency Services Personnel Licensure Interstate Compact.

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Title
Facilitating interstate practice of audiology and speech-language pathology

**Primary Sponsors**
Eric Tarr

**Bill Summary:** Enacts the Audiology and Speech-Language Pathology Compact.

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**Title**
Maryland Medical Assistance Program - Telehealth - Pilot Program

**Description**
Requiring the Maryland Department of Health to apply, on or before December 1, 2020, to the Centers for Medicare and Medicaid Services for an amendment to certain waivers to implement a pilot program to provide certain telehealth services to recipients under the Maryland Medical Assistance Program; limiting the telehealth services available under the pilot program; requiring the Department to administer the pilot program under certain circumstances; terminating the Act after June 30, 2025; etc.

**Primary Sponsors**
Emily Shetty, Gabriel Acevero, Vanessa Atterbeary, Sandy Bartlett, Al Carr, Debra Davis, Terri Hill, Steve Johnson, Ariana Kelly, Marc Korman, Sid Saab, Jared Solomon, Jheanelle Wilkins, Pat Young, Ruth

**Bill Summary:** Requires the Maryland Department of Health to apply to CMS for an amendment to the state's § 1500 waivers necessary for the implementation of a telehealth pilot program to deliver chronic condition case management services and behavioral health services. Requires implementation of the pilot program upon approval.

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**Title**
NC Health Care for Working Families.

**Primary Sponsors**
Donny Lambeth, Josh Dobson, Donna White

**Bill Summary:** Establishes the Rural Access to Healthcare Grant Program to fund eligible activities, including the expansion of telehealth into rural areas of the state.
<table>
<thead>
<tr>
<th>State</th>
<th>Bill Number</th>
<th>Last Action</th>
<th>Status</th>
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<tr>
<td>NJ</td>
<td>S 416</td>
<td>Introduced In The Senate Referred To Senate Judiciary Committee 2020 01 14</td>
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<td>NJ</td>
<td>S 1731</td>
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<td>VA</td>
<td>HB 1027</td>
<td>House Left In Appropriations 2020 02 11</td>
<td>Failed</td>
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</table>

**Title**
Concerns diversion from criminal prosecution for persons with mental illness under certain circumstances.

**Primary Sponsors**
Shirley Turner

**Bill Summary:** Requires the Department of Health to develop and implement any pilot program necessary to expand the availability of mental health screening services in emergent situations by using mobile response units and telemedicine.

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<td>VA</td>
<td>HB 1027</td>
<td>House Left In Appropriations 2020 02 11</td>
<td>Failed</td>
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</table>

**Title**
Establishes various initiatives to expand availability of medication-assisted treatment.

**Primary Sponsors**
Joe Lagana

**Bill Summary:** Requires the State Board of Medical Examiners to develop a program to promote the use of medication-assisted treatment. At a minimum, the program shall (among other things) provide technical assistance and additional training to physicians seeking to use medication-assisted treatment to treat individuals with substance use disorders but who require or request additional support in the use of medication-assisted treatment, which support and assistance may include the use of telehealth and telemedicine to provide remote consultations with addiction medicine specialists.

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<td>VA</td>
<td>HB 1027</td>
<td>House Left In Appropriations 2020 02 11</td>
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**Title**
Opioid addiction treatment pilot program; DBHDS, et al., to establish in Planning District 12.

**Description**
Opioid addiction treatment pilot program. Requires the Department of Behavioral Health and Developmental Services (the Department), in partnership with community services boards, a hospital licensed in the Commonwealth, and telemedicine networks, to establish a two-year pilot program in Planning District 12 designed to provide comprehensive treatment and recovery services to uninsured or underinsured individuals suffering from opioid addiction or opioid-related disorders. The bill requires the Department and its partners to collaborate with a work group established by the Department of interested stakeholders to develop the pilot program.

**Primary Sponsors**
Les Adams

**Bill Summary:** Establishes an opioid addiction treatment and recovery services pilot program and requires the Department of Behavioral Health and Developmental Services to work in partnership with the community services boards, a hospital licensed in the Commonwealth, and telemedicine networks including the Center for Telehealth at the University of Virginia and the Virginia Telemedicine Network to establish the two-year pilot program.
Title
Opioid addiction treatment pilot program; DBHDS, et al., to establish in Planning District 12.

Description
Opioid addiction treatment pilot program. Requires the Department of Behavioral Health and Developmental Services (the Department), in partnership with community service boards, a hospital licensed in the Commonwealth, and telemedicine networks, to establish a two-year pilot program in Planning District 12 designed to provide comprehensive treatment and recovery services to uninsured or underinsured individuals suffering from opioid addiction or opioid-related disorders. The bill requires the Department and its partners to collaborate with a work group established by the Department of interested stakeholders to develop the pilot program. The provisions of the bill are contingent on funding in a general appropriation act.

Primary Sponsors
Bill Stanley

Bill Summary: Requires the Department of Behavioral Health and Developmental Services to partner with community service boards, a hospital licensed in Virginia, the Center for Telehealth at the University of Virginia, and the Virginia Telemedicine Network to establish a two-year pilot program to provide treatment and recovery services to uninsured or underinsured individuals suffering from opioid addiction or opioid-related disorders.

Title
Medical Excellence Zone Program; VDH to determine feasibility of establishment.

Description
Department of Health; Department of Health Professions Medical Excellence Zone Program; telemedicine; reciprocal agreements. Directs the Department of Health to determine the feasibility of establishing a Medical Excellence Zone Program to allow citizens of the Commonwealth living in rural underserved areas to receive medical treatment via telemedicine services from providers licensed or registered in a state that is contiguous with the Commonwealth and directs the Department of Health Professions to pursue reciprocal agreements with such states for licensure for certain primary care practitioners licensed by the Board of Medicine. The bill requires the Department of Health to set out the criteria that would be required for a locality or group of localities in the Commonwealth to be eligible for the designation as a medical excellence zone and report its findings to the Senate Committee on Education and Health and the House Committee on Health, Welfare and Institutions by November 1, 2020.

Primary Sponsors
Barbara Favola

Bill Summary: Establishes the Medical Excellence Zone Program to allow citizens in rural underserved areas to receive medical treatment via telemedicine services and requires the Department of Health Professionals to pursue agreements with contiguous states for licensure for certain primary care practitioners under the Board of Medicine.
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<td>SB 710</td>
<td>Introduced In House 2020 02 27</td>
<td>In House</td>
<td>36.2% 89.7%</td>
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**Title**
Establishing pilot program to evaluate telemedicine health services

**Primary Sponsors**
Mike Azinger

**Bill Summary:** Establishes a two-year pilot program administered by the Public Employees Insurance Agency for the use of audio-only telemedicine.

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**Medicaid Reimbursement (3)**

<table>
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<tr>
<th>State</th>
<th>Bill Number</th>
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<tr>
<td>MD</td>
<td>SB 502</td>
<td>Hearing 2 19 At 1 00 P M 2020 01 31</td>
<td>In Senate</td>
<td>28.5% 0.0%</td>
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**Title**
Health Insurance - Telehealth - Delivery of Mental Health Services - Coverage for Home Settings

**Description**
Requiring the Maryland Medical Assistance Program to provide, subject to a certain limitation, mental health services appropriately delivered through telehealth to a patient in the patient's home setting; altering the definition of telehealth as it applies to certain provisions of law governing coverage of telehealth by certain insurers, nonprofit health service plans, and health maintenance organizations to include the delivery of mental health care services to a patient in a certain setting; etc.

**Primary Sponsors**
Steve Hershey, Bill Ferguson

**Bill Summary:** Requires the Maryland Medical Assistance Program to provide mental health services appropriately delivered through telehealth to patients in the patient's home. Also changes the definition of telehealth for insurers to include the delivery of mental health care services to the patient in the patient's home setting.

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<th>Status</th>
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<td>NJ</td>
<td>A 2871</td>
<td>Introduced Referred To Assembly Health Committee 2020 02 20</td>
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<td>4.2% 89.7%</td>
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**Title**
Provides for Medicaid coverage and reimbursement for mental health services provided through telepsychiatry.

**Primary Sponsors**
Ron Dancer, Valerie Vainieri Huttle, Anthony Verrelli

**Bill Summary:** Provides for Medicaid coverage and reimbursement for mental health services provided through telepsychiatry.
**Title**
DMAS; remote patient monitoring, rural populations.

**Description**
Department of Medical Assistance Services; remote patient monitoring; rural and underserved populations. Amends the State Plan for Medical Assistance Services to require the payment of medical assistance for medically necessary and clinically effective remote patient monitoring services for rural and underserved populations, with the home as an eligible telemedicine originating site. The bill requires the Department of Medical Assistance Services to prepare and submit to the Centers for Medicare and Medicaid Services an application for such waiver or waivers as may be necessary to implement the provisions of the bill. The bill also requires the Department to report to the Governor and the General Assembly on the status of such application or applications by October 1, 2020. The provisions of the bill are contingent on funding in a general appropriation act.

**Primary Sponsors**
Bill Stanley

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**Bill Summary:** Adds a provision for the payment of medical assistance for remote patient monitoring services for rural and underserved populations, with the home as an eligible telemedicine originating site.

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**Network Adequacy (4)**

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<th>State</th>
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<td>SB 300</td>
<td>House Referred To Committee On Appropriations 2020 02 25</td>
<td>In House</td>
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**Title**
Mental Health Early Action on Campus Act*; requires institutions of higher education to implement mental health programs and services.

**Primary Sponsors**
John Armato, Valerie Vainieri Huttle

**Bill Summary:** Requires institutions of higher education to form strategic partnerships with local mental health service providers and through a combination of on-campus capacity, off-campus linkage agreements with mental health service providers, and contracted telehealth therapy services, each institution shall attempt to reach a benchmark ratio of one clinical, non-student staff member to 1,250 students.

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**Purpose**
Protecting consumers from surprise bills by health care providers

**Primary Sponsors**
Barbara Fleischauer

**Bill Summary:** Requires health policies issued for delivery to any person in the state to contain a provision that includes the insurer’s network, including how the use of telemedicine or telehealth or other technology may be used to meet network access standards, among other components.
### Title
**Health Care Transparency Act**

**Primary Sponsors**
Dean Jeffries

**Bill Summary:** Requires insurance plans to include a provision describing their network, including how telemedicine or telehealth or other technology may be used to meet network access standards, among other things.

### Title
**Health Benefit Plan Network Access and Adequacy Act**

**Primary Sponsors**
Jordan Hill

**Bill Summary:** Establishes network adequacy standards and permits the use of telemedicine or telehealth meet these requirements.

### Online Prescribing (6)

**State**
KY

**Bill Number**
HB 136

**Last Action**
Received In Senate 2020 02 21

**Status**
In Senate

**Title**
AN ACT relating to medicinal cannabis and making an appropriation therefor.

**Description**
Create various new sections of KRS Chapter 218A to define terms; to exempt the medicinal marijuana program from existing provisions in Kentucky law to the contrary; to require the Department for Alcoholic Beverage and Cannabis Control to implement and regulate the medicinal marijuana program in Kentucky; to establish the Division of Medicinal Marijuana within the Department of Alcoholic Beverage and Cannabis Control; to establish restrictions on the possession of medicinal marijuana by qualifying patients, visiting patients, and designated caregivers; to establish certain protections for cardholders; to establish professional protections for practitioners; to provide for the authorizing of practitioners by state licensing boards to issue written certifications for the use medicinal marijuana; to establish professional protections for attorneys; to prohibit the possession and use of medicinal marijuana on a school bus, on the grounds of any preschool or primary or secondary school, in a correctional facility, any property of the federal government, or while operating a motor vehicle; to prohibit smoking of medicinal marijuana; to permit an employer to restrict the possession and use of medicinal marijuana by an employee; to require the department to implement and operate a registry identification card program; to establish requirements for registry identification cards; to establish registry identification card fees; to require the department to operate a provisional licensure receipt system; to establish the application requirements for a registry identification card; to establish when the department may deny an application for a registry identification card; to establish certain responsibilities for cardholders; to establish when a registry identification card may be...
revoked; to establish various cannabis business licensure
categories; to establish tiering of cannabis business licenses; to
require certain information be included in an application for a
cannabis business license; to establish when the department may
deny an application for a cannabis business license; to prohibit a
practitioner from being a board member or principal officer of a
cannabis business; to prohibit cross-ownership of certain classes of
cannabis businesses; to establish rules for local sales, including
establishing the process by which a local legislative body may
prohibit the operation of cannabis businesses within its territory
and the process for local ordinances and ballot initiatives; to
establish technical requirements for cannabis businesses; to
establish limits on the THC content of medicinal marijuana that can
be produced or sold in the state; to establish requirements for
cannabis cultivators, including cultivation square footage limits; to
establish requirements ... (click bill link to see more).

Primary Sponsors
Jim Nemes, John Sims, Tina Bojanowski, Charles Booker, Terri
Branham Clark, Kevin Braticher, George Brown, Tom Burch,
McKenzie Cantrell, Jeff Donohue, Larry Elkins, Daniel Elliott, Kelly
Flood, Chris Freeland, Al Gentry, Jim Glenn, Jim Gooch, Derrick
Graham, Chris Harris, Mark Hart, Angie Hatton, Kathy Hinkle,
Cluster Howard, Thomas Huff, Joni Jenkins, Matt Koch, Nima
Kulkarni, Derek Lewis, Savannah Maddox, Mary Marzian, Chad
McCoy, Reginald Meeks, Russ Meyer, Charlie Miller, Jerry Miller,
Patti Minter, David Osborne, Ruth Palumbo, Phillip Pratt, Rick Rand,
Josie Raymond, Dean Schamore, Attica Scott, Maria Sorolis,
Cherlynn Stevenson, Wilson Stone, Susan Westrom, Buddy
Wheatley, Rob Wiederstein, Lisa Willner, Les Yates

Bill Summary: Authorizes the dispensing of medical marijuana
through telemedicine and telehealth under certain circumstances.

Primary Sponsors
Pam Lampitt, Joann Downey

Bill Summary: Regulates Internet pharmacies and electronic
prescriptions.

Primary Sponsors
John McKeon, Nancy Pinkin
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<td>S 619</td>
<td>Received In The Assembly Referred To Assembly Health Committee 2020 02 13</td>
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**Title**
Permits use of telemedicine and telehealth for medical cannabis and to issue written instructions for dispensing medical cannabis.

**Primary Sponsors**
Declan O'Scanlon

**Bill Summary:** Permits the dispensing of medical marijuana through telemedicine and telehealth under certain circumstances.

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<td>House Left In Health Welfare And Institutions 2020 02 11</td>
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**Title**
Prescribing of Schedule VI controlled substances; telemedicine, store-and-forward technologies.

**Description**
Prescribing of Schedule VI controlled substances; telemedicine; store-and-forward technologies. Provides that electronic technology or media used for telemedicine services includes store-and-forward technologies and that, used in the context of prescribing Schedule VI controlled substances through telemedicine services, “store-and-forward technologies” means technologies that allow for the electronic transmission of medical information, including images, documents, or health histories, through a secure communications system.

**Primary Sponsors**
Mark Sickles

**Bill Summary:** For the purpose of prescribing a Schedule VI controlled substance to a patient via telemedicine services, defines “store-and-forward technologies” as “technologies that allow for the electronic transmission of medical information, including images, documents, or health histories, through a secure communications system.”
Title
Pharmaceutical processors; operation of cannabis dispensing facilities.

Description
Board of Pharmacy; pharmaceutical processors; cannabis dispensing facilities. Defines "cannabis dispensing facilities" and allows the Board of Pharmacy to issue up to five permits for cannabis dispensing facilities per health service area. The bill requires the Board to establish a ratio of one pharmacist for every six pharmacy interns, technicians, and technician trainees for pharmaceutical processors and cannabis dispensing facilities. The bill directs the Board of Pharmacy to require that, after processing and before dispensing cannabidiol oil and THC-A oil, a pharmaceutical processor make a sample available from each homogenized batch of product for testing at an independent laboratory located in Virginia that meets board requirements. The bill requires that the Board promulgate regulations that include an allowance for the sale of devices for administration of dispensed products and an allowance for the use and distribution of inert product samples containing no cannabinoids for patient demonstration exclusively at the pharmaceutical processor or cannabis dispensing facility, and not for further distribution or sale, without the need for a written certification. The bill also requires the Board to adopt regulations for pharmaceutical processors that include requirements for (i) processes for safely and securely cultivating cannabis plants intended for producing cannabidiol oil or THC-A oil; (ii) a maximum number of marijuana plants a pharmaceutical processor may possess at any one time; (iii) the secure disposal of plant remains; (iv) dosage limitations, which shall provide that each dispensed dose of cannabidiol oil or THC-A oil not exceed 10 milligrams of tetrahydrocannabinol; and (v) a process for registering cannabidiol oil and THC-A oil products. The bill requires the Board of Pharmacy to promulgate required regulations with 280 days.

Primary Sponsors
Dave Marsden

Bill Summary: Requires a professional to use professional judgement to determine the manner and frequency of patient care and evaluation and permits the use of telemedicine in the prescription of cannabis oil for the treatment or alleviation of symptoms of any diagnosed condition or disease determined by the practitioner to benefit from such use.
### Behavioral Health - Opioid Treatment Services Programs - Medical Director

**Description**
Requiring each opioid treatment services program to be under the direction of at least one on-site medical director; requiring the medical director to be on-site at the opioid treatment services program at least 20 hours per week; and prohibiting opioid treatment services programs from satisfying certain requirements through telehealth.

**Primary Sponsors**
Cory McCray, Arthur Ellis, Antonio Hayes, Delores Kelley

**Bill Summary:** Provides that opioid treatment services programs may not satisfy the requirement of an on-site medical director nor the requirements for the medical director to be on-site at least 20 hours each week through telehealth.

### Survivors of sexual assault.; every hospital to provide treatment or transfer services.

**Description**
Services for survivors of sexual assault. Requires every hospital in the Commonwealth to provide treatment or transfer services, as defined in the bill, to survivors of sexual assault pursuant to a plan approved by the Department of Health; establishes specific requirements for providers of services to pediatric survivors of sexual assault; requires the Criminal Injuries Compensation Fund to pay the costs of services provided to survivors of sexual assault; establishes the Task Force on Services for Survivors of Sexual Assault to facilitate the development of services for survivors of sexual assault; and establishes the Sexual Assault Forensic Examiner Program to increase the number of qualified sexual assault forensic services providers available in the Commonwealth.

**Primary Sponsors**
Karrie Delaney

**Bill Summary:** Establishes the Task Force on Services for Survivors of Sexual Assault to, among other things, study and provide recommendations to the Department of Forensic Science for the use of telemedicine in meeting the requirements of the article, including services for survivors of sexual assault, services for pediatric survivors of sexual assault, inspections, and training.
Title
Telehealth services; definition, report.

Description
Telehealth services. Directs the Board of Health to develop and implement, by July 1, 2022, and thereafter maintain as a component of the State Health Plan a Statewide Telehealth Plan to promote an integrated approach to the introduction and use of telehealth services and telemedicine services, as those terms are defined in the bill. The bill requires the Statewide Telehealth Plan to promote (i) the use of remote patient monitoring services and store-and-forward technologies, including in cases involving patients with chronic illness; (ii) the leveraging of telehealth and telemedicine technologies to streamline general practice and nonemergency triage services; (iii) rapid patient access to emergency medicine providers through telehealth services and telemedicine services; and (iv) such other telehealth services and telemedicine services and technologies as the Board of Health deems appropriate. The bill also requires the Board of Medical Assistance Services to amend the state plan for medical assistance to include a provision for payment of medical assistance for (a) emergency medical services delivered through telehealth services or telemedicine services provided pursuant to the Statewide Telehealth Plan, in the home of the person to whom services are provided, in any public or private primary or secondary school or postsecondary institution of higher education at which the person to whom services are provided is located, and at the location where the patient received prehospital, interhospital, or emergency medical services in conjunction with appropriate emergency medical, medical, or long-term care providers included as originating sites for such telehealth services or telemedicine services and (b) medically necessary health care services provided through remote patient monitoring services for priority populations as determined by the Director of Medical Assistance Services, with the home as an eligible originating site, as permitted by state law.

Primary Sponsors
Terry Kilgore

Bill Summary: Requires the Board of Health to develop and maintain an Emergency Telehealth Plan to promote rapid patient access to emergency medical physicians through telehealth and telemedicine services. The plan must include the establishment of a statewide emergency telehealth program and telemedicine services in the delivery of emergency medical services; the promotion and inclusion of telehealth and telemedicine services and technologies in operating procedures of emergency medical services agencies; a uniform set of proposed criteria for the use of telehealth and telemedicine services for prehospital and interhospital triage and transportation of patients in need of emergency medical services; a strategy for integration of the Emergency Telehealth Plan with the Statewide Emergency Medical Services Plan, the Statewide Trauma Triage Plan, and the Stroke Triage Plan; and provisions for collection of data regarding the use of telehealth and telemedicine services and technologies in the delivery of emergency medical services to determine the effect of use of telehealth and telemedicine services on the emergency medical services system.
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**Title**

MD: Health Insurance - Telehealth - Delivery of Mental Health Services - Coverage for Home Settings

PA: An Act amending Title 40 (Insurance) of the Pennsylvania Consolidated Statutes, providing for telemedicine, authorizing the regulation of telemedicine by professional licensing boards and providing for insurance coverage of telemedicine.

**Bill Summary**

MD: Requires the Maryland Medical Assistance Program to provide mental health services appropriately delivered through telehealth to patients in the patient's home. Also changes the definition of telehealth for insurers to include the delivery of mental health care services to the patient in the patient's home setting.

PA: Requires health insurance policies to provide coverage for telemedicine services consistent with the insurer's medical policies. Provides standards for the delivery of telemedicine services.

**Description**

MD: Requiring the Maryland Medical Assistance Program to provide, subject to a certain limitation, mental health services appropriately delivered through telehealth to a patient in the patient's home setting; altering the definition of telehealth as it applies to certain provisions of law governing coverage of telehealth by certain insurers, nonprofit health service plans, and health maintenance organizations to include the delivery of mental health care services to a patient in a certain setting; etc.

PA: Requires health insurance policies to provide coverage for telemedicine services consistent with the insurer's medical policies. Provides standards for the delivery of telemedicine services.

**Primary Sponsors**

MD: Steve Hershey, Bill Ferguson

PA: Elder Vogel
Title
Health insurance; coverage for diabetes.

Description
Health insurance; coverage for diabetes. Requires health insurers, health care subscription plans, and health maintenance organizations to include coverage for insulin, certain equipment, certain supplies, regular foot care and eye care exams, and up to three in-person outpatient self-management training and education visits upon an individual's initial diagnosis of diabetes and up to two such visits upon a significant change in an individual's condition. The bill provides greater specificity than the current law requiring coverage for equipment, supplies, and self-management training and education visits. The bill also provides that benefits or services required for the treatment of diabetes is exempt from any deductible. The provisions apply to any insurance policy, contract, or plan delivered, issued for delivery, reissued, or extended on and after January 1, 2021, or at any time thereafter when any term of the policy, contract, or plan is changed or any premium adjustment is made.

Primary Sponsors
Cia Price

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State  Bill Number  Last Action  Status
VA    HB 645      House Left In Labor And Commerce 2020 02 11  Failed

Bill Summary: Requires insurers to include benefits for specific services, equipment, and supplies for diabetes care, including self-management training and education either in-person outpatient or through telemedicine.

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State  Bill Number  Last Action  Status
WV    HB 4003      Introduced In Senate 2020 02 11  In Senate

Bill Summary: Requires insurance policies issued or renewed on or after July 1, 2020 to provide coverage of health care services provided through telemedicine services if those same services are covered through face-to-face consultation by the policy.

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Provider-Patient Relationship (4)

State  Bill Number  Last Action  Status
KY    HB 136      Received In Senate 2020 02 21  In Senate

Bill Summary: Permits the prescription of medical marijuana via both in-person or telehealth examination and requires a practitioner-patient relationship which may be established via telehealth.

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State  Bill Number  Last Action  Status

Description
Create various new sections of KRS Chapter 218A to define terms; to exempt the medicinal marijuana program from existing provisions in Kentucky law to the contrary; to require the Department for Alcoholic Beverage and Cannabis Control to implement and regulate the medicinal marijuana program in Kentucky; to establish the Division of Medicinal Marijuana within the Department of Alcoholic Beverage and Cannabis Control; to establish restrictions on the possession of medicinal marijuana by qualifying patients, visiting patients, and designated caregivers; to establish certain protections for cardholders; to establish professional protections for practitioners; to provide for the
authorizing of practitioners by state licensing boards to issue written certifications for the use medicinal marijuana; to establish professional protections for attorneys; to prohibit the possession and use of medicinal marijuana on a school bus, on the grounds of any preschool or primary or secondary school, in a correctional facility, any property of the federal government, or while operating a motor vehicle; to prohibit smoking of medicinal marijuana; to permit an employer to restrict the possession and use of medicinal marijuana by an employee; to require the department to implement and operate a registry identification card program; to establish requirements for registry identification cards; to establish registry identification card fees; to require the department to operate a provisional licensure receipt system; to establish the application requirements for a registry identification card; to establish when the department may deny an application for a registry identification card; to establish certain responsibilities for cardholders; to establish when a registry identification card may be revoked; to establish various cannabis business licensure categories; to establish tiering of cannabis business licenses; to require certain information be included in an application for a cannabis business license; to establish when the department may deny an application for a cannabis business license; to prohibit a practitioner from being a board member or principal officer of a cannabis business; to prohibit cross-ownership of certain classes of cannabis businesses; to establish rules for local sales, including establishing the process by which a local legislative body may prohibit the operation of cannabis businesses within its territory and the process for local ordinances and ballot initiatives; to establish technical requirements for cannabis businesses; to establish limits on the THC content of medicinal marijuana that can be produced or sold in the state; to establish requirements for cannabis cultivators, including cultivation square footage limits; to establish requirements ... (click bill link to see more).

Primary Sponsors
Jim Nemes, John Sims, Tina Bojanowski, Charles Booker, Terri Branham Clark, Kevin Bratcher, George Brown, Tom Burch, McKenzie Cantrell, Jeff Donohue, Larry Elkins, Daniel Elliott, Kelly Flood, Chris Freeland, Al Gentry, Jim Glenn, Jim Gooch, Derrick Graham, Chris Harris, Mark Hart, Angie Hatton, Kathy Hinkle, Cluster Howard, Thomas Huff, Joni Jenkins, Matt Koch, Nima Kulkarni, Derek Lewis, Savannah Maddox, Mary Marzian, Chad McCoy, Reginald Meeks, Russ Meyer, Charlie Miller, Jerry Miller, Patti Minter, David Osborne, Ruth Palumbo, Phillip Pratt, Rick Rand, Josie Raymond, Dean Schamore, Attica Scott, Maria Sorolis, Cherlynn Stevenson, Wilson Stone, Susan Westrom, Buddy Wheatley, Rob Wiederstein, Lisa Willner, Les Yates
### Title
Teledentistry; definition, establishes requirements for the practice of teledentistry, etc.

### Description
Teledentistry. Defines "teledentistry," establishes requirements for the practice of teledentistry and the taking of dental scans for use in teledentistry by dental scan technicians, and clarifies requirements related to the use of digital work orders for dental appliances in the practice of teledentistry.

### Primary Sponsors
Patrick Hope

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### Title
Modifying licensing requirements for the practice of telemedicine and surgery or podiatry

### Description
Teledentistry. Defines "teledentistry," establishes requirements for the practice of teledentistry and the taking of dental scans for use in teledentistry by dental scan technicians, and clarifies requirements related to the use of digital work orders for dental appliances in the practice of teledentistry. This bill incorporates SB 210 and SB 884 and is identical to HB 165.

### Primary Sponsors
George Barker

---

### Title
Bill Summary: Requires the Board of Dentistry to review all applications for renewal of a license to identify those applicants who can deliver dental services through teledentistry and report such information annually, by October 1, to the Chairmen of the House Committee on Health, Wellness and Institutions, the Senate Committee on Education and Health, and the Joint Commission on Health Care. Requires that a dentist-patient relationship must be established prior to the delivery of dental services through teledentistry. Places licensing and practice requirements on the delivery of dental services through teledentistry.

### Primary Sponsors
Patrick Hope

---

### Title
Bill Summary: Requires the Board of Dentistry to review all applications for renewal of a license to identify those applicants who can deliver dental services through teledentistry and report such information annually, by October 1, to the Chairmen of the House Committee on Health, Wellness and Institutions, the Senate Committee on Education and Health, and the Joint Commission on Health Care. Requires that a dentist-patient relationship must be established prior to the delivery of dental services through teledentistry. Places licensing and practice requirements on the delivery of dental services through teledentistry.

### Primary Sponsors
George Barker

---

### Title
Bill Summary: Permits the establishment of a podiatrist-patient relationship through the use of secure telephonic communication or similar secure real time audio-only communication when such a relationship does not exist prior to the utilization of telemedicine technologies.

### Primary Sponsors
Tim Miley

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### Regulatory, Licensing & Advisory Boards (6)
Title
Health Care Practitioners - Telehealth

Description
Authorizing certain health care practitioners to establish a practitioner-patient relationship through certain telehealth interactions under certain circumstances; requiring a health care practitioner providing telehealth services to be held to the same standards of practice that are applicable to in-person settings; requiring a health care practitioner to perform a clinical evaluation appropriate for the condition the patient presents before providing treatment or issuing a prescription through telehealth; etc.

Primary Sponsors
Sandy Rosenberg

Bill Summary: Establishes requirements for the delivery of services through telehealth. Authorizes practitioners to establish a practitioner-patient relationship through telehealth under certain circumstances. Requires health care practitioners to be held to certain standards of practice, to perform a clinical evaluation before providing treatment or issuing prescriptions through telehealth, to be subject to certain laws when prescribing a controlled substance through telehealth, and to document information in a patient's medical record.

Title
Health Care Practitioners - Telehealth

Description
Authorizing certain health care practitioners to establish a practitioner-patient relationship through certain telehealth interactions under certain circumstances; requiring a health care practitioner providing telehealth services to be held to the same standards of practice that are applicable to in-person settings; requiring a health care practitioner to perform a clinical evaluation appropriate for the condition the patient presents before providing certain treatment or issuing a prescription through telehealth; etc.

Primary Sponsors
Cheryl Kagan, Clarence Lam

Bill Summary: Establishes requirements for the use of telehealth by health care practitioners. Requires a practitioner-patient relationship, standards of practice, clinical evaluation prior to certain treatment through telehealth, in-state licensure, and authorizes the health occupations board to adopt certain regulations.

Title
Permits use of telemedicine and telehealth to authorize patients for medical cannabis and to issue written instructions for dispensing medical cannabis.

Primary Sponsors
Declan O'Scanlon

Bill Summary: Permits the dispensing of medical marijuana through telemedicine and telehealth under certain circumstances.
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**Bill Summary:** Requires the Board of Dentistry to review all applications for renewal of a license to identify those applicants who can deliver dental services through teledentistry and report such information annually, by October 1, to the Chairmen of the House Committee on Health, Wellness and Institutions, the Senate Committee on Education and Health, and the Joint Commission on Health Care. Requires that a dentist-patient relationship must be established prior to the delivery of dental services through teledentistry. Places licensing and practice requirements on the delivery of dental services through teledentistry.

**Title**
Teledentistry; definition, establishes requirements for the practice of teledentistry, etc.

**Description**
Teledentistry. Defines “teledentistry,” establishes requirements for the practice of teledentistry and the taking of dental scans for use in teledentistry by dental scan technicians, and clarifies requirements related to the use of digital work orders for dental appliances in the practice of teledentistry.

**Primary Sponsors**
Patrick Hope

**Bill Summary:** Requires the Board of Dentistry to review all applications for renewal of a license to identify those applicants who can deliver dental services through teledentistry and report such information annually, by October 1, to the Chairmen of the House Committee on Health, Wellness and Institutions, the Senate Committee on Education and Health, and the Joint Commission on Health Care. Requires that a dentist-patient relationship must be established prior to the delivery of dental services through teledentistry. Places licensing and practice requirements on the delivery of dental services through teledentistry.

**Title**
Teledentistry; definition, establishes requirements for the practice of teledentistry, etc.

**Description**
Teledentistry. Defines “teledentistry,” establishes requirements for the practice of teledentistry and the taking of dental scans for use in teledentistry by dental scan technicians, and clarifies requirements related to the use of digital work orders for dental appliances in the practice of teledentistry. This bill incorporates SB 210 and SB 884 and is identical to HB 165.

**Primary Sponsors**
George Barker
Title
Pharmaceutical processors; operation of cannabis dispensing facilities.

Description
Board of Pharmacy; pharmaceutical processors; cannabis dispensing facilities. Defines “cannabis dispensing facilities” and allows the Board of Pharmacy to issue up to five permits for cannabis dispensing facilities per health service area. The bill requires the Board to establish a ratio of one pharmacist for every six pharmacy interns, technicians, and technician trainees for pharmaceutical processors and cannabis dispensing facilities. The bill directs the Board of Pharmacy to require that, after processing and before dispensing cannabidiol oil and THC-A oil, a pharmaceutical processor make a sample available from each homogenized batch of product for testing at an independent laboratory located in Virginia that meets board requirements. The bill requires that the Board promulgate regulations that include an allowance for the sale of devices for administration of dispensed products and an allowance for the use and distribution of inert product samples containing no cannabinoids for patient demonstration exclusively at the pharmaceutical processor or cannabis dispensing facility, and not for further distribution or sale, without the need for a written certification. The bill also requires the Board to adopt regulations for pharmaceutical processors that include requirements for (i) processes for safely and securely cultivating cannabis plants intended for producing cannabidiol oil or THC-A oil; (ii) a maximum number of marijuana plants a pharmaceutical processor may possess at any one time; (iii) the secure disposal of plant remains; (iv) dosage limitations, which shall provide that each dispensed dose of cannabidiol oil or THC-A oil not exceed 10 milligrams of tetrahydrocannabinol; and (v) a process for registering cannabidiol oil and THC-A oil products. The bill requires the Board of Pharmacy to promulgate required regulations with 280 days.

Primary Sponsors
Dave Marsden

Bill Summary: Requires a professional to use professional judgement to determine the manner and frequency of patient care and evaluation and permits the use of telemedicine in the prescription of cannabis oil for the treatment or alleviation of symptoms of any diagnosed condition or disease determined by the practitioner to benefit from such use.
Title
Establishes various initiatives to expand availability of medication-assisted treatment.

Primary Sponsors
Eliana Pintor Marin, Valerie Vainieri Huttle

Bill Summary: Requires the State Board of Medical Examiners, in consultation with the Commissioners of Health and Human Services, to develop a program to promote the use of medication-assisted treatment. Among other duties, the program shall provide technical assistance and additional training to physicians seeking to use medication-assisted treatment to treat individuals with substance use disorders but who require or request additional support in the use of medication-assisted treatment, which support and assistance may include the use of telehealth and telemedicine to provide remote consultations with addiction medicine specialists.
# MATRC Regulatory Tracking
## Feb 28, 2020
### Total State Regs Exported: 17

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**Regulatory, Licensing & Advisory Boards**

**Title**
The Secretary of Health proposes to amend Regulation .04 under COMAR 10.09.59 Specialty Mental Health Services.

**Agency**
Maryland Department Of Health (MD)

**Description**
The purpose of this action is to bring regulations into compliance with recent legislation. In order to comply with H.B .570 of 2019, the Department is removing the on-site requirement for outpatient mental health center (OMHC) medical directors. In accordance with S.B. 524 of 2019, the Department is providing that any health care service provided via telehealth by psychiatric nurse practitioners serving in an assertive community treatment (ACT) or mobile treatment program is equivalent to the same service when provided through an in-person consultation and extending the sunset date through which ACT or mobile treatment services may be delivered via telehealth to September 30, 2021.

**Regulation Summary**
Specifies that any health care services provided via telehealth by psychiatric nurse practitioners serving in an assertive community treatment (ACT) or mobile treatment program is equivalent to the same service when provided through an in-person consultation.

Extends the sunset date through which ACT or mobile treatment services may be delivered via telehealth to September 30, 2021.

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**Regulatory, Licensing & Advisory Boards**

**Title**
Division of Consumer Affairs, Audiology and Speech-Language Pathology Advisory Committee: telemedicine rules

**Agency**
DIVISION OF CONSUMER AFFAIRS (NJ)

**Description**
Create telemedicine practice standards for Audiology and Speech-Language Pathology, including how a licensee can create a licensee-patient relationship.

**Regulation Summary**
Creates telemedicine practice standards for Audiology and Speech-Language Pathology, including how a licensee can create a licensee-patient relationship.

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**Regulatory, Licensing & Advisory Boards**

**Title**
Behavioral Health, Department of - Notice of Proposed Rulemaking - The delivery of mental health rehabilitation services in the District to improve quality of care, accountability and efficiency in the public behavioral health system; also to eliminate unnecessary or redundant administrative requirements.

**Agency**
Mental Health, Department of (DC)

**Description**
Add telemedicine as an appropriate method of delivering services including medication/somatic and crisis/emergency services.
## Issues

**Title**

The Secretary of Health proposes to amend Regulations .01, .05, and .10 under COMAR 10.27.01 Examination and Licensure. This action was considered at a public meeting of the Board of Nursing on September 26, 2018, notice of which was given by publication on the Board's website beginning January 1, 2018, through September 26, 2018, pursuant to General Provisions Article, §3-302(c), Annotated Code of Maryland.

**Agency**

Maryland Department Of Health (MD)

**Description**

The purpose of this action is to: (1) Amend the requirements for testing English competency of foreign nursing school graduates whose nursing education was not taught in English; (2) Repeal the waiver for a clinical nursing education requirement for a nurse applying for a license by endorsement in this State; (3) Define competency in reading, speaking, writing, and listening in accordance with the Nurse Licensure Compact. (4) Define the minimal passing scores for the two English language competency tests that the Board recognizes; and (5) Repeal, in accordance with the Sunset Provision, effective September 30, 2018, for Health Occupations Article, §8-307(c), Annotated Code of Maryland, the requirement that the Board waive the supervised clinical learning experience requirement for nurse endorsement applicants who attended a nursing program without a supervised clinical learning experience requirement.

## Regulation Summary

Defines competency for reading, speaking, writing, and listening in accordance with the Nurse Licensure Compact.

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## # State Ref # Status Type Intro Date Document Count

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**Issues**

Cross-State Licensing

**Labels**

Title: Regulatory, Licensing & Advisory Boards

Agency: State Board of Medical Examiners and State Acupuncture Examining Board: telemedicine

Description: Establishes telemedicine practice standards for acupuncturists.

**Regulation Summary**

Establishes telemedicine practice standards for nurses.

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## # State Ref # Status Type Intro Date Document Count

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**Issues**

Regulatory, Licensing & Advisory Boards

**Labels**

Title: State Board of Social Work Examiners: telemedicine

Agency: DIVISION OF CONSUMER AFFAIRS (NJ)

Description: Establishes telemedicine practice standards for Social Work Examiners.

**Regulation Summary**

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Issues Regulatory, Licensing & Advisory Boards

Labels

Title State Board of Physical Therapy Examiners: telemedicine

Agency DIVISION OF CONSUMER AFFAIRS (NJ)

Description

Regulation Summary Establishes telemedicine practice standards for physical therapists.

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Issues Regulatory, Licensing & Advisory Boards

Labels

Title State Board of Medical Examiners and Genetic Counseling Advisory Committee: genetic counselors—telemedicine

Agency DIVISION OF CONSUMER AFFAIRS (NJ)

Description

Regulation Summary Creates telemedicine practice standards for genetic counselors.

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Issues Regulatory, Licensing & Advisory Boards

Labels

Title State Board of Veterinary Medical Examiners: telemedicine

Agency DIVISION OF CONSUMER AFFAIRS (NJ)

Description

Regulation Summary Creates telemedicine practice standards for veterinarians.

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Issues Regulatory, Licensing & Advisory Boards

Labels

Title State Board of Medical Examiners: athletic trainers—telemedicine

Agency DIVISION OF CONSUMER AFFAIRS (NJ)

Description

Regulation Summary Creates telemedicine practice standards for athletic trainers.

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Issues Regulatory, Licensing & Advisory Boards

Labels

Title State Board of Psychological Examiners: telemedicine

Agency DIVISION OF CONSUMER AFFAIRS (NJ)

Description

Regulation Summary Creates telemedicine practice standards for psychologists.
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<td>Division of Consumer Affairs: Certified Psychoanalysts Advisory Committee—telemedicine</td>
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<td>Creates telemedicine practice standards for certified psychoanalysts.</td>
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<td>Health, Department of (DC Health) - Notice of Proposed Rulemaking - Comprehensive amendments to update nutrition regulation, including clarification of qualifications for licensure, scope of practice, professional standards, telepractice, and the requirement that ten percent (10%) of nutritionists' continuing education be in public health priorities as determined by the Department of Health</td>
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<td>Regulation Summary</td>
<td>Permits registered dietitians to engage in the tele-practice of dietetics to clients located within the District of Columbia when licensed in the District of Columbia or to clients located outside of the District of Columbia when meeting practice requirements of the jurisdiction in which the client is located.</td>
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<td>State Board of Medical Examiners: provision of health care services through telemedicine or telehealth</td>
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<td>Regulation Summary</td>
<td>Would require physicians and podiatrists to hold a board-issued license when physically located in New Jersey and providing services via telehealth or telemedicine, or if they are physically located outside of New Jersey and providing services via telehealth or telemedicine. Would deem that a healthcare provider located outside of New Jersey, who is consulting with a New Jersey licensee, is not providing health care services in New Jersey and will not be required to obtain a state license.</td>
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**Issues**

Cross-State Licensing

**Labels**

**Title**

1900 Board of Nursing

**Agency**

DEPARTMENT OF STATE (DE)

**Description**

Revises regulations to conform to the Nurse Licensure Compact.