ASSEMBLY, No. 5237

STATE OF NEW JERSEY

219th LEGISLATURE

INTRODUCED JANUARY 11, 2021

Sponsored by:

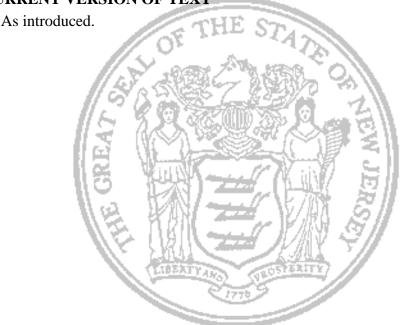
Assemblywoman SHANIQUE SPEIGHT
District 29 (Essex)
Assemblywoman VALERIE VAINIERI HUTTLE
District 37 (Bergen)
Assemblywoman ANGELA V. MCKNIGHT
District 31 (Hudson)

Co-Sponsored by: Assemblyman Benson

SYNOPSIS

Extends period for expanded use of telemedicine and telehealth services for duration of declared COVID-19 public health emergency and provides for additional health benefits coverage.

CURRENT VERSION OF TEXT



(Sponsorship Updated As Of: 1/25/2021)

AN ACT concerning COVID-19 and telemedicine and amending P.L.2020, c.3.

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BE IT ENACTED by the Senate and General Assembly of the State of New Jersey:

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- 1. Section 1 of P.L.2020, c.3 is amended to read as follows:
- 8 1. a. For the duration of the public health emergency declared pursuant to P.L.2005, c.222 (C.26:13-1 et seq.) and the state of 9 10 emergency declared pursuant to Executive Order No. 103 of 2020 in response to coronavirus disease 2019 (COVID-19), and for a period 11 12 of [90] 360 days following the end of both the public health 13 emergency and the state of emergency, any health care practitioner 14 shall be authorized to provide and bill for services using telemedicine and telehealth, which may include all services 15 16 included in the definitions of telemedicine and telehealth set forth 17 in section 1 of P.L.2017, c.117 (C.45:1-61) to the extent appropriate 18 under the standard of care, which services may be provided 19 regardless of whether rules and regulations concerning the practice 20 of telemedicine and telehealth have been adopted pursuant to the 21 "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-22 1 et seq.). A health care practitioner who is not licensed or certified 23 to provide health care services pursuant to Title 45 of the Revised 24 Statutes may provide telemedicine and telehealth services pursuant 25 to this section, provided that:
 - (1) the health care practitioner is validly licensed or certified to provide health care services in another state or territory of the United States or in the District of Columbia, and is in good standing in the jurisdiction that issued the license or certification;
 - (2) the health care services provided by the health care practitioner using telemedicine and telehealth are within the practitioner's authorized scope of practice in the jurisdiction that issued the license or certification;
 - (3) unless the health care practitioner has a preexisting providerpatient relationship with the patient that is unrelated to COVID-19, the health care services provided are limited to services related to screening for, diagnosing, or treating COVID-19; and
 - (4) in the event that the health care practitioner determines during a telemedicine or telehealth encounter with a patient located in New Jersey that the encounter will not involve services related to screening for, diagnosing, or treating COVID-19, and the practitioner does not have a preexisting provider-patient relationship with the patient that is unrelated to COVID-19, the practitioner shall advise the patient that the practitioner is not authorized to provide services to the patient, recommend that the patient initiate a new telemedicine or telehealth encounter with a

EXPLANATION – Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

- health care practitioner licensed or certified to practice in New Jersey, and terminate the telemedicine or telehealth encounter.
 - b. The amount charged by a health care practitioner for services provided using telemedicine or telehealth pursuant to this section shall be reasonable and consistent with the ordinary fees typically charged for that service, provided that a health care practitioner who is required to terminate a telemedicine or telehealth encounter pursuant to paragraph (4) of subsection a. of this section shall not issue a bill for any services provided during the encounter.
 - c. The Commissioner of Health and the Director of the Division of Consumer Affairs in the Department of Law and Public Safety shall waive any requirement of State law or regulation as may be necessary to facilitate the provision of health care services using telemedicine and telehealth during the state of public health emergency declared in response to COVID-19, including any privacy requirements established by State law or regulation that would limit the use of electronic or technological means that are not typically used in the provision of telemedicine and telehealth, provided that nothing in this subsection shall be construed to authorize the waiver of any State laws or regulations restricting the collection, exchange, transmission, or use of confidential patient health information.
 - d. Nothing in this section shall be construed to abrogate any authority granted to the Commissioner of Health during a state of public health emergency pursuant to P.L.2005, c.222 (C.26:13-1 et seq.).

- 2. Section 1 of P.L.2020, c.7 is amended to read as follows:
- 1. a. During the Public Health Emergency and State of Emergency declared by the Governor in Executive Order 103 of 2020, and for a period of [90] 360 days following the end of both the Public Health Emergency and the State of Emergency, the State Medicaid and NJ FamilyCare programs shall provide coverage and payment for expenses incurred in:
- (1) the testing for coronavirus disease 2019 <u>and due to any</u> <u>illness resulting the coronavirus disease 2019</u>, provided that a licensed medical practitioner has issued a medical order for that testing; and
- (2) the delivery of health care services through telemedicine or telehealth in accordance with the provisions of P.L.2017, c.117 (C.45:1-61 et al.).
- b. The coverage shall be provided to the same extent as for any other health care services, except that no cost-sharing shall be imposed on the coverage provided pursuant to this section.

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c. The Commissioner of Human Services shall apply for such State plan amendments or waivers as may be necessary to implement the provisions of this act and to secure federal financial participation for State Medicaid expenditures under the federal Medicaid program and shall receive approval for such State plan amendments or waivers prior to the implementation of this act.

- 3. Section 2 of P.L.2020, c.7 is amended to read as follows:
- 2. a. During the Public Health Emergency and State of Emergency declared by the Governor in Executive Order 103 of 2020, and for a period of [90] 360 days following the end of both the Public Health Emergency and the State of Emergency, a carrier that offers a health benefits plan in this State shall provide coverage and payment for expenses incurred in:
- (1) the testing of coronavirus disease 2019 and due to any illness resulting the coronavirus disease 2019, provided that a health care professional in accordance with the provisions of P.L.2017, c.117 (C.45:1-61 et al.) has issued a medical order for the testing; and
- (2) any health care services delivered to a covered person through telemedicine or telehealth in accordance with the provisions of P.L.2017, c.117 (C.45:1-61 et al.).
- b. The coverage shall be provided to the same extent as for any other health care services under the health benefits plan, except that no cost-sharing shall be imposed on the coverage provided pursuant to this section.
- c. As used in this section, "carrier," means an insurance company, health service corporation, hospital service corporation, medical service corporation, or health maintenance organization authorized to issue health benefits plans in this State, and shall include the State Health Benefits Program and the School Employees' Health Benefits Program.

4. This act shall take effect immediately and shall expire one year following the end of the public health emergency declared in response to COVID-19.

STATEMENT

This bill extends the period for the expanded use of telemedicine and telehealth services for the duration of the declared COVID-19 public health emergency.

The bill extends the applicability of P.L.2020, c.3, which expanded the use of telemedicine and telehealth services for the duration of COVID-19 public health emergency, and the

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- applicability of P.L.2020, c.7, which requires health benefits coverage for COVID-19 testing and health care services provided using telemedicine and telehealth for the duration of the COVID-19 state of emergency and public health emergency, to provide that the provisions of both laws will continue until 360 days after the end of both the state of emergency and the public health emergency declared in response to COVID-19. In addition, the bill requires
- 8 health benefits coverage for costs incurred due to any illness
- 9 resulting the coronavirus disease 2019.