## Harvard Medical Faculty Physicians







## <u>Telemedicine Practice in Other States by Physicians Licensed in Massachusetts</u> as of January 18, 2022

CMS granted conditional waiver to physicians and providers to perform telemedicine in other states for Medicare patients. Any provider wishing to perform telemedicine out of their licensed jurisdiction must be enrolled in Medicare. Additionally, *CMS acknowledged that each state must also permit such out of state practice to occur.* Each individual state through their licensing board or other regulatory mechanism must permit such practice. Thus, state law continues to govern whether a provider is authorized to provide professional services in that state without holding an active license from that state's medical board.

For states who do have a registration requirement, the provider should not be treating the patient until the registration process has been completed and approved by the relevant licensure authority.

This chart reflects only those states that permit the practice of telemedicine by out-of-state practitioners. If a state is not featured (Alabama, Alaska, Arkansas, Colorado, Delaware, Florida, Georgia, Idaho, Iowa, Kansas, Maryland, Minnesota, Mississippi, Missouri, Montana, Nebraska, New Jersey, New Mexico, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, South Carolina, South Dakota, Tennessee, Texas, Utah, Virginia, Washington D.C., Wisconsin), it is not authorizing telemedicine practice by out-of-state practitioners.

Please be aware that to the extent that a state authorizes the practice of telemedicine in their jurisdiction either through license or reciprocity, when that state withdraws their declaration of emergency, that license or authorization to practice in that state ends. You must cease practicing in that jurisdiction. Before undertaking any treatment, confirm that the state of emergency still exists within that jurisdiction.

## Legal Disclaimer:

While we try to review weekly for current state authorizations to practice, the drafters of this document make no representations or warranties of any kind, express or implied, about the completeness, accuracy, or reliability with respect to the information contained in this chart. Providers are advised that changes can occur quickly and that this chart may not always be up-to-date and correct. State Boards of Medicine further retain the right to make subsequent interpretations about the ability to practice within their jurisdiction that could later conflict with what is perceived to be a current grant of authority to practice without a license. Providers are advised to proceed with caution and to independently confirm state permissions before entering into a telemedicine treatment relationship with any patient out of state. The use or reliance of any information contained herein is strictly at provider's own risk.

Below are the list of states that have granted some degree of waiver in their jurisdiction for unlicensed providers to perform telemedicine or practice:

State	Telehealth Permitted by	If Yes, any Special Requirements
	Out-of-State	
	Practitioner	
Arizona	Yes, after filing and receiving a temporary license.  Limited to diagnosis and treatment of COVID-19.	The Arizona Medical Board announced temporary emergency licenses for Physicians to practice in Arizona. All emergency license will expire within 90 days of issuance or when the Governor withdraws the state of emergency, whichever is sooner. In accordance with the Arizona Revised Code, individuals can apply for a temporary license with the Board to diagnose and treat COVID-19. For temporary license application, please see, https://azmd.gov/Forms/Files/MD_202004161655_96d6d79e3c934111 8ae2a8e276305412.pdf  Status: On June 5, 2021, AZ HB 2454 was signed, which
		permanently allows healthcare providers licensed in another jurisdiction, in good standing and not subject to current or past disciplinary actions; to practice telemedicine with Arizona patients. Licensees must register with the act in compliance with Arizona laws including scope of practice and liability insurance, among others.
California	Yes, with registration but only for the purposes of preparing for, treating and responding to COVID-19.	Any out-of-state personnel, including, but not limited to, medical personnel, entering California to assist in preparing for, responding, to, mitigating the effects of, and recovering from COVID-19 shall be permitted to provide services in the same manner as prescribed in Government Code section 179.5, with respect to licensing and certification.  Permission for any such individual rendering service is subject to the approval of the Director of the Emergency Medical Services Authority for medical personnel and the Director of the Office of Emergency Services for nonmedical personnel and shall be in effect for a period of time not to exceed the duration of this emergency.

		A medical facility, telehealth agency or staffing agency which desires to utilize medical professionals with out-of-state certifications or licenses during the COVID-19 State of Emergency shall submit the following to the EMS Authority prior to receiving approval:  (A) A complete and signed "Request for Tempout-Of-State Medical Personnel During a State (B) Email the temporary recognition form and the EMS Authority. (C) The California EMS and make a written determination (D)The dishall continue until the termination of the State end date on the temporary recognition form, v  Status – Active, EMS Authority's ability to a personnel, as well as increased telehealth acce will be active for the duration of the emergence
Hawaii	Yes if you are hired by a state or county agency, a facility or hospital, nursing home, pharmacy or lab.	Suspended HRS law on practice of telehealth  (1) to the extent necessary to allow individuals currently and actively licensed to engage in telehealth without an in —person consultation or a prior existing physician-patient relationship; and  (2) the provider is hired by a state or county agency or facility or by a hospital including related clinics and rehab hospitals, nursing home, hospice, pharmacy or clinical lab.  Status: Active until the end of the COVID-19 emergency, according to the Governor's Proclamation, currently scheduled to expire January 28, 2022.
Illinois	Yes, for continuing relationships.	Executive Order 2020-9 appears to permit an out-of-state health care providers not licensed in Illinois to continue to provide health care services to an Illinois patient via telehealth where there is a previously established provider/patient relationship. The Department deems such a provider to be "authorized to practice in the State of Illinois" pursuant to Section 5 of the Executive Order without further need to obtain licensure in Illinois.  Status: Active, until end of Disaster Proclamation, currently scheduled to expire February 5, 2022 per EO 2022-01.

Indiana	Yes but you must file and complete certification and registration with Indiana Licensing Board before treating patients.	(Broad provision in Executive Order 20-05) - Suspension of the requirement that a healthcare provider hold an Indiana license if he or she: (1) has an equivalent license from another State, and (2) is not suspended or barred from practice in that State or any State.  The Initial Telemedicine Provider Certification Request must be completed and filed with the Indiana Professional Licensing Agency before the provider may establish a provider-patient relationship or issue a prescription under IC 25-1-9.5-8 for an individual located in Indiana.  The directive also waives the prohibition against audio-only telemedicine services and allows for physical, speech and occupational therapists to provide telemedicine services, but only when using secure videoconferencing, interactive store and forward technology or remote patient monitoring technology. In addition, those DEA-registered providers who have not conducted an in-person medical evaluation of a patient may issue a prescription to that patient for any schedule II-V controlled substance as long as the prescription is issued for a legitimate medical purpose, the telemedicine communication is conducted using an audio-visual, real-time, two-way interactive communication system and all other applicable state and federal laws are followed.  Professionals who are granted a temporary license to provide health care services in the state in response to this public health emergency must register with the PLA via their website at <a href="https://www.in.gov/pla">www.in.gov/pla</a> .  Status: Active for the duration of the public health emergency, currently scheduled to <a href="https://expression.neg.to/pla">expression.neg.telegitimer for the duration of the public health emergency, currently scheduled to <a href="https://expression.neg.to/pla">expression.neg.telegitimer for the duration of the public health emergency, currently scheduled to <a href="https://expression.neg.to/pla">expression.neg.telegitimer for the duration of the public health emergency, currently scheduled t</a></a></a>
Kentucky	Yes with registration	Kentucky Board of Medical Licenses has been directed to accept registration for volunteer health practitioners. The Board will permit physicians licensed in good standing in other states to register with the state. There is no application fee. Department of Health is allowing services to be provided by both telephone and telehealth.
		Status: Active, until end of Kentucky State of Emergency.
Louisiana	Yes, with registration	The Louisiana State Board of Medical Examiners has an emergency temporary permit application on their website for licensed out of state medical professionals seeking a temporary, voluntary license, for an emergency event in Louisiana. While there is no explicit mention of telemedicine, the Board has a list of approved out of state telemedicine permits which implies it is allowed.  *Providers offering services via telemedicine must use a secure,
		HIPAA compliant platform, if available. If not available, providers may use every day communication technologies, including audio-only delivery of telemedicine/telehealth services (e.g. telephone) or use of

		videoconference (e.g. Skype, FaceTime) programs that have reasonably secure measures, with each recipient's permission. Audio only delivery is allowed only in situations where an audio-visual system is not available or not feasible. Providers must maintain adequate documentation to support reimbursement of the visit.  Status: currently scheduled to expire on January 19, 2022, per proclamation 234 JBE 2021.  Additional guidance (LBSME): "For an orderly transition and continuity of care for Louisiana citizens, the LSBME will extend the duration of all temporary permits issued during the Covid public health emergency until 90 days after the termination of the declared health care emergency, whenever that is determined by the governor or the judicial branch of the state of Louisiana."
New York	Yes	EO #4 - Sections 6512 through 6516, and 6524 of the Education Law and Part 60 of Title 8 of the NYCRR are temporarily suspended, to the extent necessary to allow physicians licensed and in current good standing in any state in the United States to practice medicine in New York State without civil or criminal penalty related to lack of licensure, and to allow physicians licensed and in current good standing in any province or territory of Canada, or any other country as approved by the Department of Health to practice medicine in New York State without civil or criminal penalty related to lack of licensure.  Status: Active, currently scheduled to expire January 25, 2022 per EO #4.3.
Nevada	Yes with registration form available on board website.	Emergency Directive Order 011 directs that professional licensing boards shall temporarily waive certain licensing requirements to allow the practice of currently unlicensed medical professionals during the pendency of the COVID-19 crisis. The waiver and exemption of professional licensing requirements shall apply to qualified providers of medical services during the declared state of emergency who currently hold a valid license in good standing another state.  The State Board of Medical Examiners requires individuals wishing to practice to file the ""Notification of Emergency License During Declaration of Emergency Directive" form as found on the Board website. The form is one page and may be emailed back to the Board.  Status: Active until the end of the COVID-19 emergency.
North Carolina	Yes with licensure.	The governor issued an order waiving the requirement that healthcare and behavioral health care personnel be licensed in North Carolina to provide health care services to individuals living in that state.

		Per the State Board of Medicine, an application for an Emergency Disaster License Application is available at no cost to providers. The application may be found at: <a href="https://www.ncmedboard.org/licensure/licensing/emergency-disaster-license-application">https://www.ncmedboard.org/licensure/licensing/emergency-disaster-license-application</a> Status: Active; expires 30 days after the end of the COVID-19
		emergency (currently scheduled for April 5, 2022).
West Virginia	Yes but video only. No phone calls.	West Virginia has suspended the requirement that physicians from out of state performing telemedicine visits in the state are required to have a West Virginia license. They can only provide care via video.
		The West Virginia Board of Medicine has promulgated an emergency rule to create a registration process for eligible physicians to practice in West Virginia during the COVID-19 pandemic. Emergency Rule 11 CSR 14, Registration to Practice During Declared State of Emergency, became effective March 26, 2020. To be eligible to practice pursuant to this rule, the physician must register with the Board. Registrants may practice medicine in West Virginia consistent with their scope of practice and the standard of care, and may practice in person or via telemedicine technologies to West Virginia patients.  To register, providers must submit a one-page registration form and photo ID. There is no fee for registration under the emergency rule. The Board is currently accepting registrations. To register, out of state physicians and physician assistants: (1) must hold a valid, permanent, current, and unrestricted license to practice in another state; (2) must not be the subject of a pending or active complaint, investigation, Consent Order, Board Order or pending disciplinary proceeding in any jurisdiction; and, (3) must not have not surrendered a license while
Wyoming	Limited. Telehealth authorized for previously seen patients - pleases see comments. Otherwise, you must register	under investigation or had a license revoked in any jurisdiction.  Out of state physicians providing care to established patients in Wyoming can provide telemedicine services to these patients without a Wyoming license. This is limited to cases of ongoing care and not new diagnoses. You must have had a previous in-person relationship. You may continue care via telehealth including telephone. This includes follow up on procedures performed in your home state, adjusting medication dosing, prescription refills, ordering diagnostic testing. The telehealth technology must allow you to meet the standards of care at all times.
	with the state for a temporary permit.	You may not, however, provide care that treats a new diagnosis or condition without a Wyoming license. If you have not seen the patient before in your home state. You may not provide care beyond the standard of care that dictates a face-to-face encounter should occur.

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	For new patients, Wyoming Medical Board has an emergency
	temporary permit application for licensed out-of-state medical
	professionals seeking a temporary, voluntary license.