HARVARD MEDICAL FACULTY PHYSICIANS

AT BETH ISRAEL DEACONESS MEDICAL CENTER





<u>Telemedicine Practice in Other New England States by Physicians Licensed in</u> Massachusetts 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 (Maine, New Hampshire¹, Rhode Island), 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.

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¹ New Hampshire issued further guidance stating All COVID-19 Emergency Licenses issued prior to June 12, 2021 will expire with the expiration of the COVID-State of Emergency. All healthcare COVID-19 Emergency Licenses will be converted to a temporary license that will be valid until January 31, 2022. Each provider that was issued an emergency license should check the status of their license here: https://forms.nh.gov/licenseverification/.

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	If Yes, any Special Requirements
	Permitted by	
	Out-of-State	
	Practitioner	
Connecticut	Yes, for 60 days. This 60 day period will expire when the order of emergency is withdrawn.	On March 19, Connecticut Governor Ned Lamont issued Executive Order No. 7G, which is intended to expand access to telehealth services for Connecticut residents amidst the COVID-19 pandemic. Notably for health care providers, the Order waives or modifies provisions of Conn. Gen. Stat. § 19a-906 and any associated regulations, rules and policies regarding the delivery of telehealth.
	Please see	"The DPH has issued their authorizing order which now permits the practice of medicine by out of state providers who are fully licensed and without discipline. The order notes the following:
	billing guidance below.	Due to a potential healthcare workforce strain from the COVID-19 situation, the Commissioner of Public Health has signed an order that allows individuals licensed, and in good standing, in specified professions in another state to work in Connecticut without obtaining a Connecticut license for up to 60 days."
		The DPH issued a second order extending the ability to practice without a license through July 22, 2020. On July 14, 2020, this order was extended for 6 months. The order has now been extended through the end of the public health and civil preparedness emergencies (currently scheduled for May 20, 2021) per EO 11.
		If the state of emergency is withdrawn, the ability to practice in that jurisdiction is also withdrawn regardless of any extension orders.
		On May 10, 2021, Governor Lamont signed legislation extending telehealth services for two years (HB 5596) through June 30, 2023 which permits licensed providers in other states to provide telehealth services to CT residents under any relevant order issued by the Commissioner of Public Health as long as the provider is in good standing in the state in which they are licensed and they maintain professional liability insurance or other indemnity against liability for professional malpractice in an amount that is equal to or greater than that required for similarly licensed, certified or registered Connecticut health care providers.

		 Additional Commentary: Prior to engaging in telehealth services to a patient not covered by Medicaid or a fully-insured commercial plan, providers must determine if the patient has coverage for the telehealth services by a health plan. Providers who receive payment under such health plans cannot balance bill the patient for additional charges Providers who furnish telehealth services to patients who they determine do not have any insurance coverage for the telehealth services (either under a health plan or because the patient is uninsured) must accept the amount Medicare reimburses for the service as payment in full. If a provider determines that a patient is uninsured or
		otherwise unable to pay for the services, the provider is obligated to offer financial assistance to the extent required under state or federal law. Update: The Commissioner of Public Health issued an order suspending the requirement of licensure until February 15, 2022.
Vermont	Yes - for deemed status if you meet the requirements.	Special provisions for the COVID-19 public health emergency have been passed to facilitate practice in Vermont by healthcare professionals who are not licensed in Vermont. There are two different paths available to be able to practice during the emergency. Both are expedited and free. PLEASE NOTE: The guidance here is for ONLY Board of Medical Practice professions (MD, PA, DPM). Deemed Licensure: If you are an MD, PA, or DPM and meet the following requirements and are not physically coming to work in Vermont, and only providing telemedicine, you do not need to fill out the form or do an emergency license. This is for the length of the declared emergency only. • Be licensed in at least one US jurisdiction and be in good standing in all jurisdictions where you are licensed. • Not be subject to professional disciplinary proceedings in any other US jurisdiction (license is not suspended, revoked, or subject to limitations or conditions as a result of a disciplinary action, or formal charges issued. Notice only of an investigation is not disqualifying. • Not be barred from practice in Vermont for reasons of fraud or abuse, patient care, or public safety. Emergency Licenses

Those who do not qualify to be deemed licensed may apply for an emergency license. **There is no fee for an emergency license** and the process to apply involves much less than the normal licensing process. Emergency licenses will be valid for 90 days or the duration of the declared emergency, whichever is shorter, but may be reissued. The who need to get an emergency license (because they cannot be deemed licensed) are:

 Holders of full licenses in other states who plan to practice in Vermont and who will not limit their practice exclusively to telemedicine or practice on the staff of a licensed facility.

To be eligible for an emergency license, all licenses held must be in good standing and you must not be subject to professional disciplinary proceedings in any other US jurisdiction (license is not suspended, revoked, or subject to limitations or conditions as result of a disciplinary action, or formal charges issued. Notice only of an investigation is not disqualifying.)

To apply for an emergency license <u>please click here</u> after you have reviewed all the steps below.

Create an account by choosing **REGISTER**. If you have already applied for licensure or have a lapsed Vermont license, please log into your existing account. <u>DO NOT</u> create another account. If you do not know your log in information, please use the password reset option.

Once you have created an account or have logged in, from the **ON-LINE SERVICES** menu in the upper right-hand corner of the screen, choose "**CREATE/CONTINUE APPLICATION**" to start your application. You will choose the application for your profession: MD, PA or DPM. There is not a different application listed as "emergency" and do not fill out the Limited Temporary License Application as that is a training medical license for medical residents who are affiliated with a program.

Follow these <u>instructions</u> that are specifically <u>for emergency licenses</u> <u>ONLY</u> and supersede any instructions within the online application.

Update: VT H. 960, which was signed into law on July 6, 2020, ensures that physicians licensed out-of-state will be able to practice in-person or provide telemedicine or to Vermont residents until March 31, 2021.

Update: VT H. 795, signed into law October 5, 2020, extends telehealth waivers including the expansion of telehealth access, provider reimbursement, and audio-only coverage through July 1, 2021.

	Update: S. 117, signed on March 29, 2021, extends pandemic-related waivers until March 31, 2022; including reimbursement parity for audio-only telephone, early prescription refill, authorization to prescribe buprenorphine, and allowing healthcare professionals licensed in other jurisdictions, as well as professionals with inactive licenses, to practice in VT as a volunteer member of the Medical Reserve Corps or as part of the staff of a licensed facility or federally qualified health center.
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