

**SENATE . . . . . No. 612**

**The Commonwealth of Massachusetts**

PRESENTED BY:

***Jason M. Lewis***

*To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:*

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

**An Act advancing and expanding access to telemedicine services.**

PETITION OF:

NAME:	DISTRICT/ADDRESS:	
<i>Jason M. Lewis</i>	<i>Fifth Middlesex</i>	
<i>Mike Connolly</i>	<i>26th Middlesex</i>	<i>1/24/2019</i>
<i>Michael F. Rush</i>	<i>Norfolk and Suffolk</i>	<i>1/25/2019</i>
<i>William N. Brownsberger</i>	<i>Second Suffolk and Middlesex</i>	<i>1/28/2019</i>
<i>Angelo J. Puppolo, Jr.</i>	<i>12th Hampden</i>	<i>1/28/2019</i>
<i>Mathew J. Muratore</i>	<i>1st Plymouth</i>	<i>1/28/2019</i>
<i>Steven Ultrino</i>	<i>33rd Middlesex</i>	<i>1/28/2019</i>
<i>Thomas M. Stanley</i>	<i>9th Middlesex</i>	<i>1/29/2019</i>
<i>Michael J. Barrett</i>	<i>Third Middlesex</i>	<i>1/29/2019</i>
<i>Bradley H. Jones, Jr.</i>	<i>20th Middlesex</i>	<i>1/29/2019</i>
<i>Jennifer E. Benson</i>	<i>37th Middlesex</i>	<i>1/30/2019</i>
<i>Kay Khan</i>	<i>11th Middlesex</i>	<i>1/30/2019</i>
<i>Dean A. Tran</i>	<i>Worcester and Middlesex</i>	<i>1/30/2019</i>
<i>Anne M. Gobi</i>	<i>Worcester, Hampden, Hampshire and Middlesex</i>	<i>1/31/2019</i>
<i>Brendan P. Crighton</i>	<i>Third Essex</i>	<i>1/31/2019</i>
<i>Patricia D. Jehlen</i>	<i>Second Middlesex</i>	<i>1/31/2019</i>
<i>Jack Patrick Lewis</i>	<i>7th Middlesex</i>	<i>1/31/2019</i>

<i>Michael O. Moore</i>	<i>Second Worcester</i>	<i>1/31/2019</i>
<i>Jonathan D. Zlotnik</i>	<i>2nd Worcester</i>	<i>1/31/2019</i>
<i>Elizabeth A. Poirier</i>	<i>14th Bristol</i>	<i>1/31/2019</i>
<i>Michael S. Day</i>	<i>31st Middlesex</i>	<i>2/1/2019</i>
<i>Susannah M. Whipps</i>	<i>2nd Franklin</i>	<i>2/1/2019</i>
<i>John F. Keenan</i>	<i>Norfolk and Plymouth</i>	<i>2/1/2019</i>
<i>Joan B. Lovely</i>	<i>Second Essex</i>	<i>2/1/2019</i>
<i>Mary S. Keefe</i>	<i>15th Worcester</i>	<i>2/1/2019</i>
<i>Mark C. Montigny</i>	<i>Second Bristol and Plymouth</i>	<i>2/1/2019</i>
<i>Rebecca L. Rausch</i>	<i>Norfolk, Bristol and Middlesex</i>	<i>2/1/2019</i>
<i>Nick Collins</i>	<i>First Suffolk</i>	<i>2/4/2019</i>
<i>Sal N. DiDomenico</i>	<i>Middlesex and Suffolk</i>	<i>2/7/2019</i>
<i>Patrick M. O'Connor</i>	<i>Plymouth and Norfolk</i>	<i>2/7/2019</i>
<i>Julian Cyr</i>	<i>Cape and Islands</i>	<i>2/7/2019</i>
<i>Michelle L. Ciccolo</i>	<i>15th Middlesex</i>	<i>8/7/2019</i>
<i>Ryan C. Fattman</i>	<i>Worcester and Norfolk</i>	<i>10/4/2019</i>

**SENATE . . . . . No. 612**

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By Mr. Lewis, a petition (accompanied by bill, Senate, No. 612) of Jason M. Lewis, Mike Connolly, Michael F. Rush, William N. Brownsberger and other members of the General Court for legislation to advance and expand access to telemedicine services. Financial Services.

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[SIMILAR MATTER FILED IN PREVIOUS SESSION  
SEE SENATE, NO. 549 OF 2017-2018.]

**The Commonwealth of Massachusetts**

\_\_\_\_\_  
**In the One Hundred and Ninety-First General Court  
(2019-2020)**  
\_\_\_\_\_

An Act advancing and expanding access to telemedicine services.

*Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:*

1           SECTION 1. Chapter 32A of the General Laws, as appearing in the 2016 Official  
2 Edition, is hereby amended by adding at the end the following new section:

3           Section 28. Notwithstanding any general or special law or rule or regulation to the  
4 contrary, the Group Insurance Commission and any carrier, as defined in Section 1 of Chapter  
5 176O of the general laws or other entity which contracts with the Commission to provide health  
6 benefits to eligible Employees and Retirees and their eligible dependents, shall not decline to  
7 provide coverage for health care services solely on the basis that those services were delivered  
8 through the use of telemedicine by a contracted health care provider; provided, that a carrier shall  
9 not meet network adequacy through significant reliance on telemedicine providers and shall not  
10 be considered to have an adequate network if patients are not able to access appropriate in-

11 person services in a timely manner, upon request. Health care services delivered by way of  
12 telemedicine shall be covered to the same extent as if they were provided via in-person  
13 consultation or in-person delivery, nor shall the rates of payments for otherwise covered services  
14 be reduced on the grounds that those services were delivered through telemedicine. A contract  
15 that provides coverage for telemedicine may contain a provision for a deductible, copayment or  
16 coinsurance requirement for a health care service provided through telemedicine as long as the  
17 deductible, copayment or coinsurance does not exceed the deductible, copayment or coinsurance  
18 applicable to an in-person consultation or in-person delivery of the same health care services. For  
19 health care services provided through telemedicine, a health care provider shall not be required  
20 to document a barrier to an in-person visit prior to utilizing telemedicine, nor shall the type of  
21 setting where such telemedicine is provided be limited; provided further, a patient may decline  
22 receiving services via telemedicine in order to receive in person services and shall not incur costs  
23 that exceed the deductible, copayment or co-insurance applicable for the same services provided  
24 via telemedicine. For the purposes of this section, “telemedicine” shall mean the use of  
25 synchronous or asynchronous audio, video or other electronic media for the purpose of  
26 evaluation, diagnosis, consultation, prescribing, and treatment of a patient's medical, oral, mental  
27 health and substance use disorder condition that meets applicable health information privacy and  
28 security standards similar to those provided during an in- person visit. Telemedicine shall not  
29 include audio-only telephone or facsimile machine communications, but may include an online  
30 adaptive interview. Telemedicine may also include text only email when it occurs for the  
31 purpose of patient management in the context of a pre-existing physician patient relationship.  
32 Nothing in this paragraph shall be interpreted as changing the prevailing standard of care for  
33 healthcare services whether delivered in person or through telemedicine.

34 SECTION 2. Section 2 of Chapter 112 of the General Laws, as so appearing, is hereby  
35 amended by inserting at the end thereof the following:

36 Notwithstanding any other provision of this chapter, the board shall promulgate  
37 regulations to allow licensees to obtain proxy credentialing and privileging for telemedicine with  
38 other healthcare providers as defined in section 1 of chapter 111 of the general laws or facilities  
39 consistent with federal Medicare Conditions of Participation telemedicine standards. Said  
40 regulations shall ensure that licensees using telemedicine to provide services are done within a  
41 provider to patient relationship which includes the provider agreeing to affirmatively diagnose,  
42 treat and prescribe to the patient, or affirmatively agreeing to participate in the patient's  
43 diagnosis and treatment. Said regulations shall allow for the establishment of the physician-  
44 patient relationship via telemedicine. Said regulations shall direct healthcare providers to provide  
45 information to patients about follow-up health care services that are available to the patient; this  
46 requirement may be fulfilled through the use of a website identifying available services in the  
47 community. Such regulations shall be promulgated six months after the effective date of this act.  
48 For the purposes of this section, "telemedicine" shall mean the use of synchronous or  
49 asynchronous audio, video or other electronic media for the purpose of evaluation, diagnosis,  
50 consultation, prescribing, and treatment of a patient's medical, oral, mental health, and substance  
51 use disorder condition that meets applicable health information privacy and security standards  
52 similar to those provided during an in-person visit. Telemedicine shall not include audio-only  
53 telephone or facsimile machine communications, but may include an online adaptive interview.  
54 Telemedicine may also include text only email when it occurs for the purpose of patient  
55 management in the context of a pre-existing physician patient relationship. For the purposes of  
56 this paragraph, nothing herein shall modify any law or regulation related to the requirements for

57 Massachusetts licensure for individual providers delivering services through telemedicine to  
58 consumers in the Commonwealth; provided further, that this paragraph shall not change the  
59 prevailing standard of care for healthcare services whether delivered in-person or through  
60 telemedicine.

61 SECTION 3. Chapter 118E of the General Laws, as so appearing, is hereby amended by  
62 inserting at the end thereof the following new section:

63 Section 13C1/2. Notwithstanding any general or special law or rule or regulation to the  
64 contrary, the Executive Office of Health and Human Services shall provide coverage under its  
65 Medicaid contracted health insurers, health plans, health maintenance organizations, behavioral  
66 health management firms and third party administrators under contract to a Medicaid managed  
67 care organization, the Medicaid primary care clinician plan, or an accountable care organization  
68 for health care services provided through telemedicine by a contracted provider; provided,  
69 however, that Medicaid contracted health insurers, health plans, health maintenance  
70 organizations, behavioral health management firms and third party administrators under contract  
71 to a Medicaid managed care organization, the Medicaid primary care clinician plan, or a  
72 Medicaid accountable care organization shall not meet network adequacy through significant  
73 reliance on telemedicine providers and shall not be considered to have an adequate network if  
74 patients are not able to access appropriate in-person services in a timely manner, upon request.  
75 Health care services delivered by way of telemedicine shall be covered to the same extent as if  
76 they were provided via in-person consultation or in-person delivery, nor shall the rates of  
77 payments for otherwise covered services be reduced on the grounds that those services were  
78 delivered through telemedicine. A contract that provides coverage for telemedicine may contain  
79 a provision for a deductible, copayment or coinsurance requirement for a health care service

80 provided through telemedicine as long as the deductible, copayment or coinsurance does not  
81 exceed the deductible, copayment or coinsurance applicable to an in-person consultation or in-  
82 person delivery of the same health care services. For health care services provided through  
83 telemedicine, a health care provider shall not be required to document a barrier to an in-person  
84 visit prior to utilizing telemedicine, nor shall the type of setting where such telemedicine is  
85 provided be limited; provided further, a patient may decline receiving services via telemedicine  
86 in order to receive in person services and shall not incur costs that exceed the deductible,  
87 copayment or co-insurance applicable for the same services provided via telemedicine. For the  
88 purposes of this section, “telemedicine” shall mean the use of synchronous or asynchronous  
89 audio, video or other electronic media for the purpose of evaluation, diagnosis, consultation,  
90 prescribing, and treatment of a patient's medical, oral, mental health, and substance use disorder  
91 condition that meets applicable health information privacy and security standards similar to those  
92 provided during an in- person visit. Telemedicine shall not include audio-only telephone or  
93 facsimile machine communications, but may include an online adaptive interview. Telemedicine  
94 may also include text only email when it occurs for the purpose of patient management in the  
95 context of a pre-existing physician patient relationship. Nothing in this section shall be  
96 interpreted as changing the prevailing standard of care for healthcare services whether delivered  
97 in person or through telemedicine.

98 SECTION 4. Section 47BB of chapter 175 of the General Laws, is hereby amended by  
99 striking subsections (a)-(d) and adding at the end of the existing paragraph the following new  
100 paragraph:

101 Notwithstanding any general or special law or rule or regulation to the contrary, an  
102 insurer shall provide for coverage for health care services under an individual, group, or general

103 policy of accident and sickness insurance to an insured through the use of telemedicine by a  
104 contracted health care provider; provided however, that an insurer shall not meet network  
105 adequacy through significant reliance on telemedicine providers and shall not be considered to  
106 have an adequate network if patients are not able to access appropriate in-person services in a  
107 timely manner, upon request. Health care services delivered by way of telemedicine shall be  
108 covered to the same extent as if they were provided via in-person consultation or in-person  
109 delivery, nor shall the rates of payments for otherwise covered services be reduced on the  
110 grounds that those services were delivered through telemedicine. A contract that provides  
111 coverage for telemedicine may contain a provision for a deductible, copayment or coinsurance  
112 requirement for a health care service provided through telemedicine as long as the deductible,  
113 copayment or coinsurance does not exceed the deductible, copayment or coinsurance applicable  
114 to an in-person consultation or in-person delivery of the same health care services. For health  
115 care services provided through telemedicine, a health care provider shall not be required to  
116 document a barrier to an in-person visit prior to utilizing telemedicine, nor shall the type of  
117 setting where such telemedicine is provided be limited; provided further, a patient may decline  
118 receiving services via telemedicine in order to receive in person services and shall not incur costs  
119 that exceed the deductible, copayment or co-insurance applicable for the same services provided  
120 via telemedicine. For the purposes of this section, “telemedicine” shall mean the use of  
121 synchronous or asynchronous audio, video or other electronic media for the purpose of  
122 evaluation, diagnosis, consultation, prescribing, and treatment of a patient's medical, oral, mental  
123 health, and substance use disorder condition that meets applicable health information privacy and  
124 security standards similar to those provided during an in-person visit. Telemedicine shall not  
125 include audio-only telephone or facsimile machine communications, but may include an online

126 adaptive interview. Telemedicine may also include text only email when it occurs for the  
127 purpose of patient management in the context of a pre-existing physician patient relationship.  
128 Nothing in this paragraph shall be interpreted as changing the prevailing standard of care for  
129 healthcare services whether delivered in person or through telemedicine.

130 SECTION 5. Chapter 176A of the General Laws, as so appearing, is hereby amended by  
131 inserting at the end thereof the following new section:

132 Section 38: Notwithstanding any general or special law or rule or regulation to the  
133 contrary, any contract between a subscriber and the corporation under an individual or group  
134 hospital service plan shall provide for coverage for health care services to a subscriber through  
135 the use of telemedicine by a contracted health care provider; provided, however, that the  
136 corporation shall not meet network adequacy through significant reliance on telemedicine  
137 providers and shall not be considered to have an adequate network if patients are not able to  
138 access appropriate in-person services in a timely manner, upon request. Health care services  
139 delivered by way of telemedicine shall be covered to the same extent as if they were provided via  
140 in-person consultation or in-person delivery, nor shall the rates of payments for otherwise  
141 covered services be reduced on the grounds that those services were delivered through  
142 telemedicine. A contract that provides coverage for telemedicine may contain a provision for a  
143 deductible, copayment or coinsurance requirement for a health care service provided through  
144 telemedicine as long as the deductible, copayment or coinsurance does not exceed the deductible,  
145 copayment or coinsurance applicable to an in-person consultation or in-person delivery of the  
146 same health care services. For health care services provided through telemedicine, a health care  
147 provider shall not be required to document a barrier to an in-person visit prior to utilizing  
148 telemedicine, nor shall the type of setting where such telemedicine is provided be limited;

149 provided further, a patient may decline receiving services via telemedicine in order to receive in  
150 person services and shall not incur costs that exceed the deductible, copayment or co-insurance  
151 applicable for the same services provided via telemedicine. For the purposes of this section,  
152 “telemedicine” shall mean the use of synchronous or asynchronous audio, video or other  
153 electronic media for the purpose of evaluation, diagnosis, consultation, prescribing, and  
154 treatment of a patient's medical, oral, mental health and substance use disorder condition that  
155 meets applicable health information privacy and security standards similar to those provided  
156 during an in- person visit. Telemedicine shall not include audio-only telephone or facsimile  
157 machine communications, but may include an online adaptive interview. Telemedicine may also  
158 include text only email when it occurs for the purpose of patient management in the context of a  
159 pre-existing physician patient relationship. Nothing in this paragraph shall be interpreted as  
160 changing the prevailing standard of care for healthcare services whether delivered in person or  
161 through telemedicine.

162 SECTION 6. Chapter 176B of the General Laws, as so appearing, is hereby amended by  
163 inserting at the end thereof the following new section:

164 Section 25: Notwithstanding any general or special law or rule or regulation to the  
165 contrary, any contract between a subscriber and the medical service corporation shall provide for  
166 coverage for health care services to a subscriber through the use of telemedicine by a contracted  
167 health care provider; provided, however, that the medical service corporation shall not meet  
168 network adequacy through significant reliance on telemedicine providers and shall not be  
169 considered to have an adequate network if patients are not able to access appropriate in-person  
170 services in a timely manner, upon request. Health care services delivered by way of telemedicine  
171 shall be covered to the same extent as if they were provided via in-person consultation or in-

172 person delivery, nor shall the rates of payments for otherwise covered services be reduced on the  
173 grounds that those services were delivered through telemedicine. A contract that provides  
174 coverage for telemedicine may contain a provision for a deductible, copayment or coinsurance  
175 requirement for a health care service provided through telemedicine as long as the deductible,  
176 copayment or coinsurance does not exceed the deductible, copayment or coinsurance applicable  
177 to an in-person consultation or in-person delivery of the same health care services. For health  
178 care services provided through telemedicine, a health care provider shall not be required to  
179 document a barrier to an in-person visit prior to utilizing telemedicine, nor shall the type of  
180 setting where such telemedicine is provided be limited; provided further, a patient may decline  
181 receiving services via telemedicine in order to receive in person services and shall not incur costs  
182 that exceed the deductible, copayment or co-insurance applicable for the same services provided  
183 via telemedicine. For the purposes of this section, “telemedicine” shall mean the use of  
184 synchronous or asynchronous audio, video or other electronic media for the purpose of  
185 evaluation, diagnosis, consultation, prescribing, and treatment of a patient's medical, oral, mental  
186 health and substance use disorder condition that meets applicable health information privacy and  
187 security standards similar to those provided during an in-person visit. Telemedicine shall not  
188 include audio-only telephone or facsimile machine communications, but may include an online  
189 adaptive interview. Telemedicine may also include text only email when it occurs for the  
190 purpose of patient management in the context of a pre-existing physician patient relationship.  
191 Nothing in this section shall be interpreted as changing the prevailing standard of care for  
192 healthcare services whether delivered in person or through telemedicine.

193 SECTION 7. Chapter 176G of the General Laws, as so appearing, is hereby amended by  
194 inserting at the end thereof the following new section:

195           Section 33: Notwithstanding any general or special law or rule or regulation to the  
196 contrary, any contract between a member and a carrier shall provide for coverage for health  
197 services to a subscriber through the use of telemedicine by a contracted health care provider;  
198 provided however, a carrier shall not meet network adequacy through significant reliance on  
199 telemedicine providers and shall not be considered to have an adequate network if patients are  
200 not able to access appropriate in-person services in a timely manner, upon request. Health care  
201 services delivered by way of telemedicine shall be covered to the same extent as if they were  
202 provided via in-person consultation or in-person delivery, nor shall the rates of payments for  
203 otherwise covered services be reduced on the grounds that those services were delivered through  
204 telemedicine. A contract that provides coverage for telemedicine may contain a provision for a  
205 deductible, copayment or coinsurance requirement for a health care service provided through  
206 telemedicine as long as the deductible, copayment or coinsurance does not exceed the deductible,  
207 copayment or coinsurance applicable to an in-person consultation or in-person delivery of the  
208 same health care services. For health care services provided through telemedicine, a health care  
209 provider shall not be required to document a barrier to an in-person visit prior to utilizing  
210 telemedicine, nor shall the type of setting where such telemedicine is provided be limited;  
211 provided further, a patient may decline receiving services via telemedicine in order to receive in  
212 person services and shall not incur costs that exceed the deductible, copayment or co-insurance  
213 applicable for the same services provided via telemedicine. For the purposes of this section,  
214 “telemedicine” shall mean the use of synchronous or asynchronous audio, video or other  
215 electronic media for the purpose of diagnosis, evaluation, consultation, prescribing, and  
216 treatment of a patient's medical, oral, mental health and substance use disorder condition that  
217 meets applicable health information privacy and security standards similar to those provided

218 during an in- person visit. Telemedicine shall not include audio-only telephone or facsimile  
219 machine communications, but may include an online adaptive interview. Telemedicine may also  
220 include text only email when it occurs for the purpose of patient management in the context of a  
221 pre-existing physician patient relationship. Nothing in this section shall be interpreted as  
222 changing the prevailing standard of care for healthcare services whether delivered in person or  
223 through telemedicine.

224 SECTION 8. Chapter 176I of the General Laws, as so appearing, is hereby amended by  
225 inserting at the end thereof the following new section:

226 Section 13: Notwithstanding any general or special law or rule or regulation to the  
227 contrary, any contract between a covered person and an organization shall provide for coverage  
228 for health care services to a subscriber through the use of telemedicine by a contracted health  
229 care provider; provided, however, an organization shall not meet network adequacy through  
230 significant reliance on telemedicine providers and shall not be considered to have an adequate  
231 network if patients are not able to access appropriate in-person services in a timely manner, upon  
232 request.

233 Health care services delivered by way of telemedicine shall be covered to the same extent  
234 as if they were provided via in-person consultation or in-person delivery, nor shall the rates of  
235 payments for otherwise covered services be reduced on the grounds that those services were  
236 delivered through telemedicine. A contract that provides coverage for telemedicine may contain  
237 a provision for a deductible, copayment or coinsurance requirement for a health care service  
238 provided through telemedicine as long as the deductible, copayment or coinsurance does not  
239 exceed the deductible, copayment or coinsurance applicable to an in-person consultation or in-

240 person delivery of the same health care services. For health care services provided through  
241 telemedicine, a health care provider shall not be required to document a barrier to an in-person  
242 visit, nor shall the type of setting where such telemedicine is provided be limited; provided  
243 further, a patient may decline receiving services via telemedicine in order to receive in person  
244 services and shall not incur costs that exceed the deductible, copayment or co-insurance  
245 applicable for the same services provided via telemedicine. For the purposes of this section,  
246 “telemedicine” shall mean the use of synchronous or asynchronous audio, video or other  
247 electronic media for the purpose of evaluation, diagnosis, consultation, prescribing, and  
248 treatment of a patient's medical, oral, mental health and substance use disorder condition that  
249 meets applicable health information privacy and security standards similar to those provided  
250 during an in- person visit. Telemedicine shall not include audio-only telephone or facsimile  
251 machine communications, but may include an online adaptive interview. Telemedicine may also  
252 include text only email when it occurs for the purpose of patient management in the context of a  
253 pre-existing physician patient relationship. Nothing in this section shall be interpreted as  
254 changing the prevailing standard of care for healthcare services whether delivered in person or  
255 through telemedicine.

256 SECTION 9. Notwithstanding any general or special law or rule or regulation to the  
257 contrary, the Bureau of Health Professions Licensure within the Department of Public Health and  
258 the Division of Professional Licensure within the Office of Consumer Affairs and Business  
259 Regulation shall, respectively, promulgate regulations to allow licensees to obtain proxy  
260 credentialing and privileging for telemedicine with other healthcare providers as defined in  
261 section 1 of chapter 111 of the general laws, allied health professionals as defined in section 23A  
262 of chapter 112 of the general laws, and allied mental health or human service professionals as

263 defined in section 163 of chapter 112 of the general laws or facilities consistent with federal  
264 Medicare Conditions of Participation telemedicine standards. Said regulations shall ensure that  
265 providers using telemedicine to provide services are done within a provider to patient  
266 relationship, which includes the provider agreeing to affirmatively diagnose and treat the patient,  
267 including prescriptions when appropriate, or affirmatively agreeing to participate in the patient's  
268 diagnosis and treatment. Said regulations shall also allow for the establishment of the provider-  
269 patient relationship via telemedicine. Said regulations shall direct healthcare providers to provide  
270 information to patients about follow-up health care services that are available to the patient; this  
271 requirement may be fulfilled through the use of a website identifying available services in the  
272 community. Such regulations shall be promulgated six months after the effective date of this act.  
273 For the purposes of this section, "telemedicine" shall mean the use of synchronous or  
274 asynchronous audio, video or other electronic media for the purpose of evaluation, diagnosis,  
275 consultation, prescribing, and treatment of a patient's medical, oral, mental health and substance  
276 use disorder condition that meets applicable health information privacy and security standards  
277 similar to those provided during an in- person visit. Telemedicine shall not include audio-only  
278 telephone or facsimile machine communications, but may include an online adaptive interview.  
279 Telemedicine may also include text only email when it occurs for the purpose of patient  
280 management in the context of a pre-existing physician patient relationship. For the purposes of  
281 this paragraph, nothing herein shall modify any law or regulation related to the requirements for  
282 Massachusetts licensure for individual providers delivering services through telemedicine  
283 services to consumers in the Commonwealth; provided further, that this paragraph shall not  
284 change the prevailing standard of care for healthcare services whether delivered in-person or  
285 through telemedicine.

286 SECTION 10. Notwithstanding any general or special law to the contrary, the Division of  
287 Insurance and the Executive Office of Health and Human Services shall annually issue a joint  
288 report with data collected from carriers as well as contracted health insurers, health plans, health  
289 maintenance organizations, behavioral health management firms and third party administrators  
290 under contract to a Medicaid managed care organization, the Medicaid primary care clinician  
291 plan, or Medicaid accountable care organizations which indicates the percentage of services  
292 provided through telemedicine to patients by: (1) modality, including in-person visits and  
293 telemedicine visits; (2) provider specialty; and (3) patient age. Said report shall be publicly  
294 available and delivered to the joint committee on health care financing, the joint committee on  
295 mental health, substance use and recovery, the joint committee on public health, the clerk of the  
296 house of representatives, and the clerk of the Senate not later than January 1, 2021, and annually  
297 thereafter for the next 5 years.

298 SECTION 11. The provisions of this Act shall be effective for all contracts which are  
299 entered into, renewed, or amended one year after its effective date.