



# Representative Ivy Spohnholz

Chair, House Ways and Means Committee

Co-Chair, House Labor and Commerce Committee

*Serving House District 16: College Gate, Russian Jack, Nunaka Valley, & Reflection Lake*

## Explanation of Changes

House Bill 265 v. W to v. D

*"An Act relating to telehealth; relating to the practice of medicine; relating to medical assistance coverage for services provided by telehealth; and providing for an effective date."*

### **Version 32 32-LS0754D (House Health and Social Services Committee Substitute)**

#### **Section 1**

Clarifies that only health care providers licensed with the state may deliver telehealth without an in-person examination.

Replaces any reference to "examination" with "visit," and updates corresponding language throughout the bill.

Removes all language in subsection (a) of version W related to the telehealth authority of providers licensed in another state.

Cleans up the provisions regarding medication assisted treatment by removing subsection (d) in version W, which pertained to services addressing opioid use disorder. This language was deemed unnecessary to ensure the telehealth delivery of medication assisted treatment to treat opioid use disorder (i.e., medication, counseling, and behavioral health therapies).

Revises the prescribing authority provision by separating physicians, osteopaths, and physician assistants in subsection (e) from advanced practice registered nurses (APRNs) in subsection (f). These sections also remove the ability to prescribe and administer botulinum toxin via telehealth without an additional in-person provider. These sections do not change the prescribing scope for these providers.

Amends the APRN language in subsection (f) by removing the in-person requirement for prescribing controlled substances (e.g., buprenorphine, Adderall, etc.) via telehealth. This section also requires APRNs to follow AS 08.68.710, the new statute located in Section 3 of version D defining the prescribing authority of APRNs.

Creates subsection (g) to remove requirements to document all attempts for an in-person visit and prevents the department or board from limiting the physical setting of a health care provider delivering telehealth.

Clarifying language is inserted under subsection (i)(2) defining all providers in this section as licensed in good standing.

### **Section 3**

Creates a new section under Title 8, Chapter 68 (Nursing) defining the telehealth prescriptive authority of APRNs in statute. Regulation 12AAC 44.925(c), adopted by the Board of Nursing, requires a health care provider on-site to assist a patient if an APRN prescribes controlled substances via telehealth. This section removes the regulatory in-person requirement for APRNs and aligns the regulatory authority of the Board of Nursing with the State Medical Board regarding the prescription of controlled substances via telehealth.

### **Section 4**

Creates subsection (h) under Title 18 to remove requirements to document any attempts for an in-person visit. This section replicates the same provisions on documentation and physical setting for emergency medical services as Section 1.

### **Section 5**

Amends telehealth services covered by Alaska Medicaid to include home and community based (HCBS) waiver services in subsection (a)(2), and services provided under a state plan option (e.g., 1915(k) services) in subsection (a)(3). Other non-HCBS services covered under a federal waiver or demonstration are separated in subsection (a)(12).

Revises language regarding chemical dependency counselors by broadening their certification to “a certifying entity for behavioral health professionals in the state specified by the department in regulation” in subsection (a)(7).

Removes telehealth services delivered via fax from coverage by Alaska Medicaid in subsection (a)(10).

Adds language in subsection (b), line 13 to ensure the department must revise regulatory language to include telehealth in the definition of a “visit.”

Creates subsection (c) specifying that the coverage of services in Alaska Medicaid must be HIPAA-compliant.

### **Section 6-7**

These are new sections adding telehealth provisions to entities in Title 47 for grantees that deliver community mental health services, or facilities approved by the department to deliver substance use disorder treatment. Their authority to deliver telehealth was previously unaddressed in version W because they are not governed by Title 8, or outlined in HB 265’s Alaska Medicaid provisions in Title 47. Both sections replicate the same telehealth provisions on cost, scope of services, patient protections, documentation, and physical setting as Section 1.

Section 6 creates AS 47.30.585 to include entities designated under AS 47.30.520 – AS 47.30.620, which are approved to receive grant funding by the Department of Health and Social Services to deliver community mental health services.

Section 7 creates AS 47.37.145 to include public or private treatment facilities approved by the Department of Health and Social Services in AS 47.37.140 to deliver services designated under AS

47.37.40 – AS 47.37.270 addressing substance use disorders.

**Section 9**

Creates a new bill section regarding the adoption of regulations. Specifies that regulations related to this bill must be adopted by applicable licensing boards and the Department of Health and Social Services by June 30, 2023.

**Section 12-13**

States that the language regarding the adoption of regulations in Section 9 must take effect immediately in Section 12. Moves the bill effective date to June 30, 2023 in Section 13.