

Fiscal Note

State of Alaska
2022 Legislative Session

Bill Version:	CSHB 265(HSS)
Fiscal Note Number:	1
(H) Publish Date:	3/14/2022

Identifier: HB265-DOH-MS-2-11-2022
Title: HEALTH CARE SERVICES BY TELEHEALTH
Sponsor: SPOHNHOLZ
Requester: (H) HSS

Department: Department of Health
Appropriation: Medicaid Services
Allocation: Medicaid Services
OMB Component Number: 3234

Expenditures/Revenues

Note: Amounts do not include inflation unless otherwise noted below.

(Thousands of Dollars)

	FY2023 Appropriation Requested	Included in Governor's FY2023 Request	Out-Year Cost Estimates				
OPERATING EXPENDITURES	FY 2023	FY 2023	FY 2024	FY 2025	FY 2026	FY 2027	FY 2028
Personal Services							
Travel							
Services							
Commodities							
Capital Outlay							
Grants & Benefits							
Miscellaneous							
Total Operating	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Fund Source (Operating Only)

None							
Total	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Positions

Full-time							
Part-time							
Temporary							

Change in Revenues

None							
Total	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Estimated SUPPLEMENTAL (FY2022) cost: 0.0 (separate supplemental appropriation required)

Estimated CAPITAL (FY2023) cost: 0.0 (separate capital appropriation required)

Does the bill create or modify a new fund or account? No
(Supplemental/Capital/New Fund - discuss reasons and fund source(s) in analysis section)

ASSOCIATED REGULATIONS

Does the bill direct, or will the bill result in, regulation changes adopted by your agency? Yes
If yes, by what date are the regulations to be adopted, amended or repealed? 12/31/23

Why this fiscal note differs from previous version/comments:

Not applicable, initial version.

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Agency: Department of Health & Social Services

Phone: (907)465-6333
Date: 01/28/2022
Date: 02/11/22

FISCAL NOTE ANALYSIS

STATE OF ALASKA
2022 LEGISLATIVE SESSION

Analysis

This bill establishes that health care providers may provide health care services through telehealth without an initial in-person consultation as long as they are providing services that are within their authorized scope of practice and as long as the provider holds a certificate or license in good standing. It further allows health care providers who are licensed in another state to provide services if the patient has been referred by a provider currently licensed in Alaska or a federal or tribal health care program.

This legislation also directs that a health care provider shall advise the patient that some or all of the services fall outside their authorized scope of practice, and recommend the patient contact an appropriate provider for those services. This bill also stipulates that the health care provider may not charge a fee for those services for which they are not authorized to provide health care. Further, this bill requires that a fee for service provided through telehealth must be "reasonable and consistent" with fees typically charged for the same service and may not exceed those fees.

This bill establishes that a physician, osteopath, physician assistant, or advanced practice registered nurse - and only these practitioners - may examine, diagnose, and provide treatment for opioid use disorder. This bill explicitly excludes other providers from providing these services.

This bill addresses permissibility to prescribe controlled substances as listed under AS 11.71.140-11.71.190 or botulinum toxin through telehealth by physicians, podiatrists, osteopaths, and physician assistants as long as they comply with AS 08.64.364. The bill would allow an advanced practice registered nurse to prescribe, dispense, or administer a controlled substance as listed under AS 11.71.140-11.71.190 other than buprenorphine if they first conduct an in-person examination on the patient.

This bill provides a definition for "health care provider" as given under AS 08.11, AS 08.15, AS 08.20, AS 08.29, AS 08.32, AS 08.36, AS 08.38, AS 08.45, AS 08.63, AS 08.64, AS 08.65, AS 08.68, AS 08.71, AS 08.72, AS 08.80, AS 08.84, AS 08.86, and AS 08.95, respectively, and provides the definition of "telehealth" as that given in AS 47.05.270(e).

This bill requires the department to pay for all services provided through telehealth in the same manner as if the services had been provided in person, except as provided in section b, which outlines rate setting and the adoption of regulations.

Promulgation of associated regulations will take approximately twelve months following State Plan Amendment approval by the Centers for Medicare and Medicaid Services, with implementation effective after July 1, 2023.

Since many of the proposed changes in this bill make permanent practices already in place through the COVID-19 pandemic, it is anticipated these costs could be absorbed within the current program funding resulting in a zero fiscal note.