## Proposed amendment to S. 50, As passed the House

# **Section 2(c):**

- (c)(1) Except in emergencies, a A health care provider delivering health care services through telemedicine shall obtain and document a patient's oral or written informed consent for the use of telemedicine technology prior to delivering services to the patient. The provider shall include the written consent in the patient's medical record or document the patient's oral consent in the patient's medical record.
- (2)(A) Informed consent for telemedicine services shall be written include, in language that patients can easily understand and include
- (i) an explanation of the differences between telemedicine and in person delivery of health care services, including:
- (I) that the patient may experience a qualitative difference in care based on potential differences in a patient's ability to establish a therapeutic rapport with the provider in person and through telemedicine; and
- (II) that telemedicine provides different opportunities and challenges for provider-patient interaction than in-person consultation, including the potential for differences in the degree and manner of the provider's visual observations of the patient;
- (ii) informing the patient of the patient's right to exclude any individual from participating in or observing the patient's consultation with the provider at both the originating site and the distant site;
- (iii) informing the patient that the patient may stop telemedicine services at any time and may request a referral for in-person services; and
- (iv) assurance that all services the health care provider delivers to the patient through telemedicine will be delivered over a secure connection that complies with the requirements of the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191.
- (B)(3) For services delivered through telemedicine on an ongoing basis, the health care provider shall be required to obtain consent only at the first episode of care.

#### Section 2(e), Store and Forward

[Can keep language as proposed by House, if Section 2(c) is simplified as described above, otherwise may need to remove final clause that references complying with subsection (c).] As proposed by House: "... Originating site health care providers involved in the store and forward process shall ensure obtain informed consent from the patient as described in subsection (c) of this section."

## **Section 4, Effective Dates**

(b) Sec. 2 (health care providers providing telemedicine) and this section shall take effect on passage October 1, 2017.

## Proposed by:

Louis Josephson, President and CEO, Brattleboro Retreat

Lucy Leriche, VP of Public Policy Vermont, **Planned Parenthood Northern New England**Terry Rabinowitz, MD, Medical Director, Telemedicine, **University of Vermont Medical Center**Devon Green, VP of Government Relations, **Vermont Assn of Hospitals and Health Systems**Jessa Barnard, General Counsel & Vice President for Policy, **Vermont Medical Society**