Senate Enrolled Act 3 –Telehealth Services
June 30, 2021

The legislation creates definitions on:

- **Telehealth Activities** – the use of telecommunications and information technology to provide access to health assessment, diagnosis, intervention, consultation, supervision and information across a distance.
- **Health Care Services** to include the following: (1) Assessment, diagnosis, evaluation, consultation, treatment, and monitoring of a patient; (2) Transfer of medical data; (3) Patient health-related education; (4) Health administration.

Section 4 IC 16-18-2-348.5 “Telehealth” means a specific method of delivery of services, including medical exams and consultations and behavioral health evaluations and treatment, including those for substance abuse, using technology allowed under IC 25-1-6.5-6 to allow a provider to render an examination or other service to a patient at a distant location.

“Any behavioral health and human services professional licensed under IC 25-23.6 is included in telehealth legislation.” (This includes all licensed social workers)

Requires that documentation and services provided must follow HIPAA requirements and are required to cover services within the license holder’s scope of practice.

Includes a section that an employer may NOT require a practitioner to provide services through telehealth if the practitioner believes that using telehealth would:

- Negatively impact the patient’s health; or
- Result in a lower standard of care than if the health care service was provided in an in-person setting.

IC 25-1-9.5-7 Clarifies that anyone using telehealth is held to the same standards for health care services provided at an in-person setting and that the practitioner must “ensure that a proper provider-patient relationship is established.” It also outlines that the provider-patient relationship must at a minimum include the following:

- Obtaining the client’s name/contact information
- Disclose the practitioner’s name, license/certification/registration
- Obtain informed consent from the client
- Obtain medical history and other relevant information to establish a diagnosis
- Discuss the diagnosis, evidence for diagnosis, risks and benefits of treatment options and when it is advisable to seek in-person care
- Create and maintain a medical record
- Provide instructions for follow-up care
- Provide a telehealth visit summary
Requires that an individual contract or a group contract must provide coverage for telehealth services in accordance with the same clinical criteria as the individual contract or group contract provides for the same health care services delivered to an enrollee in person.

You can find a copy of the bill [http://iga.in.gov/legislative/2021/bills/senate/3#](http://iga.in.gov/legislative/2021/bills/senate/3#)

**Related Bulletins from Indiana Medicaid**

BT 20142 Policy Update for telehealth services 6/8/2021

BT 202145 clarifies effective dates for telehealth policy updates 6/17/2021