

ASSEMBLY, No. 4403

STATE OF NEW JERSEY

219th LEGISLATURE

INTRODUCED JULY 16, 2020

Sponsored by:

Assemblywoman VALERIE VAINIERI HUTTLE

District 37 (Bergen)

Assemblyman DANIEL R. BENSON

District 14 (Mercer and Middlesex)

Assemblywoman YVONNE LOPEZ

District 19 (Middlesex)

SYNOPSIS

Establishes "Telehealth and Telemedicine Improvement Task Force."

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 7/16/2020)

1 AN ACT establishing the “Telehealth and Telemedicine
2 Improvement Task Force.”

3

4 **BE IT ENACTED** *by the Senate and General Assembly of the State*
5 *of New Jersey:*

6

7 1. a. There is established in the Department of Health the
8 “Telehealth and Telemedicine Improvement Task Force.” The
9 purpose of this task force is to study current telehealth and
10 telemedicine practices in New Jersey and develop recommendations
11 to better serve the medical needs of New Jersey residents through
12 telehealth and telemedicine.

13 b. The task force shall consist of 21 members as follows:

14 (1) two public members with expertise in telemedicine and
15 telehealth, appointed by the Speaker of the General Assembly;

16 (2) one public member representing an organization that
17 advocates for healthcare access, appointed by the Speaker of the
18 General Assembly;

19 (3) two public members with expertise in telemedicine and
20 telehealth, appointed by the President of the Senate;

21 (4) one public member representing an organization that
22 advocates for healthcare access, appointed by the President of the
23 Senate;

24 (5) the Commissioner of Health, or the commissioner’s
25 designee;

26 (6) a representative from the Health Information Technology
27 Program of the Department of Health;

28 (7) a representative from the Division of Medical Assistance and
29 Human Services in the Department of Human Services;

30 (8) a representative from the Division of Mental Health and
31 Addiction Services in the Department of Human Services;

32 (9) a representative from the Health Bureau staff from the
33 Division of Insurance in the Department of Banking and Insurance;

34 (10) a representative from the Telemedicine and Telehealth
35 Review Commission, established pursuant to section 5 of P.L.2017,
36 c.117 (C.45:1-65); and

37 (11) nine members appointed by the Governor, who shall
38 include one member from each of the following entities: the State
39 Board of Medical Examiners, the State Board of Psychological
40 Examiners, the Board of Pharmacy, the New Jersey Primary Care
41 Association, the New Jersey Hospital Association, the New Jersey
42 Association of Health Plans, the New Jersey State Office of Rural
43 Health in the Department of Health, the Division of
44 Telecommunications under the Board of Public Utilities, and the
45 State Health Planning Board.

46 c. The members of this task force shall be appointed within 30
47 days after the effective date of this act. The task force shall
48 organize as soon as practicable following the appointment of its

- 1 members and shall select a chairperson and vice-chairperson from
2 among the members. The presence of 11 members shall constitute a
3 quorum.
- 4 d. The task force will meet regularly as the task force
5 determines, or at the call of the chairperson or a majority of the task
6 force's membership.
- 7 e. All meetings of the task force shall be open to the public.
8 Agendas, minutes, documents, and testimony from all meetings
9 shall be posted on the Department of Health's Internet website.
- 10 f. All members of this task force shall serve without
11 compensation.
- 12 g. Any vacancies in the membership of this task force shall be
13 filled in the same manner as the original appointment.
- 14 h. The Department of Health shall provide stenographic,
15 clerical, and other administrative assistants, and professional staff
16 as the task force requires to carry out the task force's work. The
17 task force shall be entitled to call to the task force's assistance and
18 avail of the services of the employees of any State, county, or
19 municipal department, board, bureau, commission, or agency as the
20 task force may require and as may be available for the task force's
21 purposes.
- 22
- 23 2. The duties of the Telehealth and Telemedicine Improvement
24 Task Force, established by section 1 of this act, shall include, but
25 not be limited to:
- 26 a. conducting a survey of the current telehealth and telemedicine
27 infrastructure and capacity in the State across different healthcare
28 providers and scopes of practice;
- 29 b. identifying gaps in the current telehealth and telemedicine
30 infrastructure for the delivery of care to residents of this State,
31 including, but not limited to, challenges regarding payment,
32 healthcare quality, licensure, broadband connectivity, system
33 interoperability, and data integration;
- 34 c. identifying opportunities to leverage telehealth and
35 telemedicine services to manage high healthcare costs and address
36 healthcare disparities;
- 37 d. making recommendations to:
- 38 (1) ensure access to high-quality telehealth and telemedicine
39 services across all geographical areas within the State, including,
40 but not limited to, rural and underserved population areas;
- 41 (2) coordinate telehealth and telemedicine services among
42 healthcare providers;
- 43 (3) develop systems of data standardization and health
44 information exchange; and
- 45 (4) any other matters the task force deems necessary and
46 appropriate.

1 3. The task force shall present a report of its findings and
2 recommendations to the Governor and, pursuant to section 2 of
3 P.L.1991, c.164 (C.52:14-19.1), to the Legislature no later than one
4 year after the organization of the task force.

5
6 4. This act shall take effect immediately, and the task force shall
7 expire 30 days after the issuance of its report.

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10 STATEMENT

11
12 This bill establishes in the Department of Health the “Telehealth
13 and Telemedicine Improvement Task Force.” The purpose of this
14 task force is to study current telehealth and telemedicine practices
15 in New Jersey and develop recommendations to better service the
16 medical needs of New Jersey residents through telehealth and
17 telemedicine.

18 The task force will consist of 21 members, including: three
19 public members by the Speaker of the General Assembly, three
20 public members appointed by the Senate President, the
21 Commissioner of Health, or the commissioner’s designee, a
22 representative from the Health Information Technology Program of
23 the Department of Health, a representative from the Division of
24 Medical Assistance and Human Services in the Department of
25 Human Services, a representative from the Division of Mental
26 Health and Addiction Services in the Department of Human
27 Services, a representative from the Health Bureau staff from the
28 Division of Insurance in the Department of Banking and Insurance,
29 a representative from the Telemedicine and Telehealth Review
30 Commission, established pursuant to section 5 of P.L.2017, c.117
31 (C.45:1-65); and nine members appointed by the Governor, that will
32 include one member from each of the following entities: the State
33 Board of Medical Examiners, the State Board of Psychological
34 Examiners, the Board of Pharmacy, the New Jersey Primary Care
35 Association, the New Jersey Hospital Association, the New Jersey
36 Association of Health Plans, the New Jersey State Office of Rural
37 Health in the Department of Health, the Division of
38 Telecommunications under the Board of Public Utilities, and the
39 State Health Planning Board.

40 The duties of the Telehealth and Telemedicine Improvement
41 Task Force include, but are not limited to conducting a survey of
42 the current telehealth and telemedicine infrastructure and capacity
43 in the State; identifying gaps in the current telehealth and
44 telemedicine infrastructure; identifying opportunities to leverage
45 telehealth and telemedicine services to manage high healthcare
46 costs and address healthcare disparities. The task force will also
47 make recommendations to ensure access to high-quality telehealth
48 and telemedicine services across all geographical areas within the

1 State, including, but not limited to, rural and underserved
2 population areas; coordinate telehealth and telemedicine services
3 among providers; develop systems of data standardization and
4 health information exchange; and any other matters the task force
5 deems necessary and appropriate.

6 The task force will present a report of its findings and
7 recommendations to the Governor to the Legislature no later than one
8 year after the organization of the task force. The task force will
9 expire 30 days after the issuance of its report.