

# SENATE, No. 2289

## STATE OF NEW JERSEY 219th LEGISLATURE

INTRODUCED MARCH 16, 2020

**Sponsored by:**

**Senator JOSEPH F. VITALE**

**District 19 (Middlesex)**

**Senator JAMES W. HOLZAPFEL**

**District 10 (Ocean)**

**Senator VIN GOPAL**

**District 11 (Monmouth)**

**Senator DAWN MARIE ADDIEGO**

**District 8 (Atlantic, Burlington and Camden)**

**Senator NILSA I. CRUZ-PEREZ**

**District 5 (Camden and Gloucester)**

**Senator M. TERESA RUIZ**

**District 29 (Essex)**

**Senator LINDA R. GREENSTEIN**

**District 14 (Mercer and Middlesex)**

**Senator THOMAS H. KEAN, JR.**

**District 21 (Morris, Somerset and Union)**

**Senator CHRIS A. BROWN**

**District 2 (Atlantic)**

**Senator SAMUEL D. THOMPSON**

**District 12 (Burlington, Middlesex, Monmouth and Ocean)**

**Senator ROBERT W. SINGER**

**District 30 (Monmouth and Ocean)**

**Senator DECLAN J. O'SCANLON, JR.**

**District 13 (Monmouth)**

**Senator SHIRLEY K. TURNER**

**District 15 (Hunterdon and Mercer)**

**Co-Sponsored by:**

**Senator Stack**

**SYNOPSIS**

Establishes certain requirements to use telemedicine and telehealth to respond to coronavirus disease 2019 (COVID-19).

**CURRENT VERSION OF TEXT**

As introduced.

(Sponsorship Updated As Of: 3/19/2020)

1 AN ACT concerning the use of telemedicine and telehealth to  
2 respond to coronavirus disease 2019.

3

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

6

7 1. a. For the duration of the public health emergency declared  
8 pursuant to P.L.2005, c.222 (C.26:13-1 et seq.) in response to  
9 coronavirus disease 2019 (COVID-19), any health care practitioner  
10 shall be authorized to provide and bill for services using  
11 telemedicine and telehealth, which may include all services  
12 included in the definitions of telemedicine and telehealth set forth  
13 in section 1 of P.L.2017, c.117 (C.45:1-61) to the extent appropriate  
14 under the standard of care, which services may be provided  
15 regardless of whether rules and regulations concerning the practice  
16 of telemedicine and telehealth have been adopted pursuant to the  
17 “Administrative Procedure Act,” P.L.1968, c.410 (C.52:14B-1 et  
18 seq.). A health care practitioner who is not licensed or certified to  
19 provide health care services pursuant to Title 45 of the Revised  
20 Statutes may provide telemedicine and telehealth services pursuant  
21 to this section, provided that:

22 (1) the health care practitioner is validly licensed or certified to  
23 provide health care services in another state or territory of the  
24 United States or in the District of Columbia, and is in good standing  
25 in the jurisdiction that issued the license or certification;

26 (2) the health care services provided by the health care  
27 practitioner using telemedicine and telehealth are within the  
28 practitioner’s authorized scope of practice in the jurisdiction that  
29 issued the license or certification;

30 (3) unless the health care practitioner has a preexisting provider-  
31 patient relationship with the patient that is unrelated to COVID-19,  
32 the health care services provided are limited to services related to  
33 screening for, diagnosing, or treating COVID-19; and

34 (4) in the event that the health care practitioner determines  
35 during a telemedicine or telehealth encounter with a patient located  
36 in New Jersey that the encounter will not involve services related to  
37 screening for, diagnosing, or treating COVID-19, and the  
38 practitioner does not have a preexisting provider-patient  
39 relationship with the patient that is unrelated to COVID-19, the  
40 practitioner shall advise the patient that the practitioner is not  
41 authorized to provide services to the patient, recommend that the  
42 patient initiate a new telemedicine or telehealth encounter with a  
43 health care practitioner licensed or certified to practice in New  
44 Jersey, and terminate the telemedicine or telehealth encounter.

45 b. The amount charged by a health care practitioner for  
46 services provided using telemedicine or telehealth pursuant to this  
47 section shall be reasonable and consistent with the ordinary fees  
48 typically charged for that service, provided that a health care

1 practitioner who is required to terminate a telemedicine or  
2 telehealth encounter pursuant to paragraph (4) of subsection a. of  
3 this section shall not issue a bill for any services provided during  
4 the encounter.

5 c. The Commissioner of Health and the Director of the  
6 Division of Consumer Affairs in the Department of Law and Public  
7 Safety shall waive any requirement of State law or regulation as  
8 may be necessary to facilitate the provision of health care services  
9 using telemedicine and telehealth during the state of public health  
10 emergency declared in response to COVID-19, including any  
11 privacy requirements established by State law or regulation that  
12 would limit the use of electronic or technological means that are not  
13 typically used in the provision of telemedicine and telehealth,  
14 provided that nothing in this subsection shall be construed to  
15 authorize the waiver of any State laws or regulations restricting the  
16 collection, exchange, transmission, or use of confidential patient  
17 health information.

18 d. Nothing in this section shall be construed to abrogate any  
19 authority granted to the Commissioner of Health during a state of  
20 public health emergency pursuant to P.L.2005, c.222 (C.26:13-1 et  
21 seq.).

22

23 2. This act shall take effect immediately.

24

25

26

#### STATEMENT

27

28 This bill provides that, for the duration of the public health  
29 emergency declared in response to the coronavirus disease 2019  
30 (COVID-19), any health care practitioner will be authorized to  
31 provide and bill for services using telemedicine and telehealth,  
32 regardless of whether rules and regulations concerning the practice  
33 of telemedicine and telehealth have been adopted pursuant to the  
34 “Administrative Procedure Act,” P.L.1968, c.410 (C.52:14B-1 et  
35 seq.). The services authorized under the bill will include the full  
36 range of services set forth in the definitions of telemedicine and  
37 telehealth in section 1 of P.L.2017, c.117 (C.45:1-61) that are  
38 appropriate under the standard of care.

39 A practitioner who is not licensed or certified to practice in New  
40 Jersey may provide health care services under the bill using  
41 telemedicine and telehealth, provided that: (1) the practitioner is  
42 licensed or certified to practice in another state or territory of the  
43 United States or in the District of Columbia, and is in good standing  
44 in that jurisdiction; (2) the services provided by that practitioner  
45 are consistent with the practitioner’s authorized scope of practice in  
46 the jurisdiction that issued the practitioner’s license or certification;  
47 (3) unless the practitioner has a preexisting provider-patient  
48 relationship with the patient that is unrelated to COVID-19, the

1 services provided are limited to services related to screening for,  
2 diagnosing, or treating COVID-19; and (4) in the event that the  
3 practitioner determines that a telemedicine or telehealth encounter  
4 with a patient located in New Jersey will not involve screening for,  
5 diagnosing, or treating COVID-19, and the practitioner does not  
6 have a preexisting provider-patient relationship with the patient that  
7 is unrelated to COVID-19, the practitioner advises the patient that  
8 the practitioner is not authorized to provide services to the patient,  
9 recommends that the patient initiate a new telemedicine or  
10 telehealth encounter with a health care practitioner licensed or  
11 certified to practice in New Jersey, and terminates the telemedicine  
12 or telehealth encounter.

13 The bill requires that any amount charged for services provided  
14 under the bill be reasonable and consistent with the ordinary fees  
15 typically charged for that service. In the event that a health care  
16 practitioner who is not licensed to practice in New Jersey is  
17 required to terminate a telemedicine or telehealth encounter because  
18 the encounter does not involve the provision of services related to  
19 screening, diagnosing, or treating COVID-19, the practitioner will  
20 be prohibited from billing for any services provided during the  
21 encounter.

22 The bill requires the Commissioner of Health and the Director of  
23 the Division of Consumer Affairs in the Department of Law and  
24 Public Safety to waive any requirement of State law or regulation as  
25 may be necessary to facilitate the provision of health care services  
26 using telemedicine and telehealth during the COVID-19 public  
27 health emergency, including any privacy requirements that would  
28 limit the use of electronic or technological means that are not  
29 typically used in the provision of telemedicine and telehealth,  
30 provided that nothing in the bill will authorize the waiver of any  
31 State laws or regulations restricting the collection, exchange,  
32 transmission, or use of confidential patient health information..

33 Nothing in the bill is to be construed to abrogate any authority  
34 granted to the Commissioner of Health under the "Emergency  
35 Health Powers Act," P.L.2005, c.222 (C.26:13-1 et seq.).