



April 15, 2014

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Ms. Robin,

Health IT Now recognizes the efforts of the Federation of State Medical Boards (FSMB) and its State Medical Boards' Appropriate Regulation of Telemedicine (SMART) Workgroup in developing a common definition of Telemedicine for adoption across the States.

Health IT Now is a broad based coalition of patient groups, provider organizations, employers and payers that supports incentives to deploy health information technology to improve quality, outcomes, and patient safety and to lower costs. Our members believe health IT will benefit patients while supporting health care providers to make smart decisions about their patient's care, all while lowering administrative and clinical costs through care coordination, administrative simplification, duplicate test reduction and enhanced clinical decision support.

In the past decade, the practice of medicine has changed dramatically. The convergence of medical advances, health information technology, and a nation-wide broadband network is transforming the delivery of care by bringing the health care provider and patient together virtually -- from any location to any location. Telehealth is becoming a widely accepted practice across the United States and momentum for the use of telehealth is accelerating.

By removing barriers such as distance, mobility, geographic, and time constraints, establishing common standards for technology enable care delivery, and reforming licensure and payment models, telehealth has the ability to transform health care delivery by improving patient access to quality care while at the same time reducing costs and enhancing physician job satisfaction. Currently, providers are required to be licensed in each state in which they may provide care to a patient. In a mobile society and with technology advances, a provider is prohibited from treating their patient unless licensed where the patient may be at that time -- limiting the provider's ability to coordinate their patient's care. We believe the licensure language maintains the status quo when licensure laws must be reformed to reflect technology enabled care anywhere the patient and provider may be located at the time of care. The SMART proposal addresses one of the barriers to maximizing the use of technology enabled care -- the need for a common definition of telemedicine across the jurisdictions.

As innovation in telehealth progresses and states take positive steps to encourage this kind of care, it is increasingly obvious that greater uniformity is required to resolve the uncertainty that has resulted from a confusing patchwork of state and local regulations. Payment models are being updated, twenty states and the District of Columbia have passed mandates for private insurance coverage of telehealth services, and 46 states offer Medicaid reimbursement for some services provided via telehealth. However there is no consistency in how these states define or regulate the practice of technology enabled care and a common standard that will protect both patients and providers.

Health IT Now agrees with the importance of several key concepts that are included within the SMART Workgroup's model guidance:

1. **Establishing a Treatment Relationship Online:**

A physician-patient relationship can be established using telemedicine technologies provided the standard of care is met.

2. **Evaluation and Treatment of Patient:**

Treatment and consultation recommendations are held to the same standards of appropriate practice whether virtual or in-person.

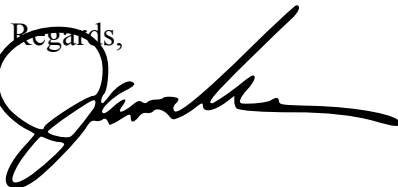
3. **Online Prescribing Safeguards**

Telemedicine technologies, where prescribing may be contemplated, must implement measures to uphold patient safety in the absence of traditional physical examination, and shall be at the professional discretion of the physician.

4. **Ensuring Privacy, Security, Documentation, and Continuity**

Telehealth encounters should meet or exceed applicable federal and state legal requirements of medical and health information privacy, be HIPAA compliant, include informed consent, update a medical record, and support continuity of care.

Health IT Now recognizes the FSMB for acknowledging the need for harmonizing the definitions and principles that states may look to when developing policies governing telehealth. We urge the Reference Committee to remove the provision specific to existing licensure laws and to recommend the SMART language specific to the use of technology in care delivery to the FSMB Board of Delegates and suggest full ratification of the Policy by the Board.

Regards,


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