**Summary of new New York State legislation on Telemedicine (A.2552-A; S.2405):**

* 3/11/15 – Legislation is currently on the Governor’s desk – we expect him to sign in the next week
* Regulations will be developed to expand upon what is outlined in legislation
* Legislation requires private insurers and Medicaid provide coverage for services delivered through telehealth when the services are otherwise covered under a policy, beginning January 1, 2016 – (note Medicare is not included, governed by federal law; self-insured employers exempt)
* Telehealth = provider using electronic communication technologies to deliver care, including the assessment, diagnosis, consultation, treatment, education, care management and/or self-management of a patient. Does NOT include audio-only telephone communication, fax, or electronic messaging ALONE but these technologies can be used in conjunction with synchronous, 2-way electronic audio visual communication, store and forward technology or remote patient monitoring
* Eligible telehealth providers: physician, physician assistant, dentist, nurse practitioner, registered professional nurse, podiatrist, optometrist, psychologist, social worker, speech language pathologist or audiologist, midwife, certified diabetes educator, certified asthma educator, certified genetic counselor, hospital, home care agency, hospice, and other providers determined by regulation
* Eligible originating site where patient is located at time of service: hospitals, nursing homes, hospice, mental hygiene facility (includes but not limited to psychiatric center, developmental center , institute, clinic, ward, but not a place where services are solely non-residential), private physician offices, and place of residence only for remote patient monitoring
* Remote patient monitoring – use of technologies to collect personal health information and medical data for use in treatment and management of medical conditions including (but not limited to) congestive heart failure, diabetes, chronic obstructive pulmonary disease, wound care, polypharmacy, mental or behavioral problems, and technology-dependent care such as continuous oxygen, ventilator care, total parenteral nutrition or enteral feeding. Monitoring shall be ordered by a physician, nurse practitioner, or midwife with which patient has ongoing relationship.
* Store and forward technology must come from an eligible originating site to the provider