

Department of Planning and Budget

2023 Fiscal Impact Statement

1. Bill Number: HB1754

House of Origin	<input type="checkbox"/> Introduced	<input checked="" type="checkbox"/> Substitute	<input type="checkbox"/> Engrossed
Second House	<input type="checkbox"/> In Committee	<input type="checkbox"/> Substitute	<input type="checkbox"/> Enrolled

2. Patron: Head

3. Committee: Health, Welfare and Institutions

4. Title: Telemedicine; extension of time period for provision of services.

5. Summary: The provisions of this legislation shall not prevent or prohibit any doctor of medicine or osteopathy, physician assistant, respiratory therapist, occupational therapist, or nurse practitioner who would otherwise be subject to licensure by the Board who holds an active, unrestricted license in another state or the District of Columbia and who is in good standing with the applicable regulatory agency in that state or the District of Columbia from engaging in the practice of that profession in the Commonwealth with a patient located in the Commonwealth when (i) such practice is for the purpose of providing continuity of care through the use of telemedicine services as defined in § 38.2-3418.16 and (ii) the patient is a current patient of the practitioner with whom the practitioner has previously established a practitioner-patient relationship and the practitioner has performed an in-person examination of the patient within the previous 12 months. For purposes of this subdivision, if such practitioner with whom the patient has previously established a practitioner-patient relationship is unavailable at the time in which the patient seeks continuity of care, another practitioner of the same subspecialty at the same group practice with access to the patient's treatment history may provide continuity of care using telemedicine services until the practitioner with whom the patient has a previously established relationship becomes available. For the purposes of this subdivision, "practitioner of the same subspecialty" means a practitioner who utilizes the same subspecialty taxonomy code designation for claims processing.

6. Budget Amendment Necessary: No.

7. Fiscal Impact Estimates: Final.

8. Fiscal Implications: This legislation would not have a fiscal impact on the Department of Health Professions.

9. Specific Agency or Political Subdivisions Affected: None.

10. Technical Amendment Necessary: No.

11. Other Comments: None.