

HB0869/253329/1

BY: Health and Government Operations Committee

AMENDMENTS TO HOUSE BILL 869
(First Reading File Bill)

AMENDMENT NO. 1

On page 1, in the sponsor line, strike “**and Rosenberg**” and substitute “**Rosenberg, Alston, Bhandari, Chisholm, Guzzone, Hill, Hutchinson, S. Johnson, Kaiser, Kipke, Lopez, Martinez, M. Morgan, Reilly, Szeliga, Taveras, White Holland, Woods, and Woorman**”; in line 11, after “rate;” insert “repealing the prohibition on health care practitioners prescribing certain controlled dangerous substances for the treatment of pain through telehealth; requiring the Maryland Health Care Commission to submit a certain report regarding telehealth every certain number of years;”; in the same line, after “the” insert “provision,”; in the same line, after “coverage” insert a comma; and after line 17, insert:

“BY adding to

Article – Health – General

Section 19–108.6

Annotated Code of Maryland

(2023 Replacement Volume and 2024 Supplement)

BY repealing and reenacting, with amendments,

Article - Health Occupations

Section 1-1003

Annotated Code of Maryland

(2021 Replacement Volume and 2024 Supplement)”.

AMENDMENT NO. 2

On page 3, after line 8, insert:

“**19–108.6.**

ON OR BEFORE DECEMBER 1 EVERY 4 YEARS, BEGINNING IN 2026, THE COMMISSION SHALL SUBMIT A REPORT TO THE GOVERNOR AND, IN ACCORDANCE WITH § 2-1257 OF THE STATE GOVERNMENT ARTICLE, THE GENERAL ASSEMBLY THAT INCLUDES:

(1) ADVANCES OR DEVELOPMENTS IN THE AREA OF TELEHEALTH, INCLUDING:

(i) EVOLVING MODALITIES OF TELEHEALTH DELIVERY; AND

(ii) CHANGES IN THE COSTS OF DELIVERING TELEHEALTH SERVICES; AND

(2) ANY FINDINGS OR RECOMMENDATIONS OF THE COMMISSION.

Article – Health Occupations

1-1003.

(a) A health care practitioner providing telehealth services shall:

(1) Be held to the same standards of practice that are applicable to in-person health care settings; and

(2) If clinically appropriate for the patient, provide or refer a patient to in-person health care services or another type of telehealth service.

(b) (1) A health care practitioner shall perform a clinical evaluation that is appropriate for the patient and the condition with which the patient presents before providing treatment or issuing a prescription through telehealth.

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(2) A health care practitioner may use a synchronous telehealth interaction or an asynchronous telehealth interaction to perform the clinical evaluation required under paragraph (1) of this subsection.

(c) [(1) A health care practitioner may not prescribe an opiate described in the list of Schedule II substances under § 5–403 of the Criminal Law Article for the treatment of pain through telehealth, unless:

(i) The individual receiving the prescription is a patient in a health care facility, as defined in § 19–114 of the Health – General Article; or

(ii) The Governor has declared a state of emergency due to a catastrophic health emergency.

(2) Subject to paragraph (1) of this subsection, a] A health care practitioner who through telehealth prescribes a controlled dangerous substance, as defined in § 5–101 of the Criminal Law Article, is subject to any applicable regulation, limitation, and prohibition in federal and State law relating to the prescription of controlled dangerous substances.”.