STATEMENT OF EMERGENCY 900 KAR 12:005E.

This emergency administrative regulation is necessary to update the glossary of telehealth terminology to include a definition of "temporarily located" as required by Section 2 of HB 188 codified as KRS 211.335(1) in order to provide guidance to licensing boards regarding the delivery of telehealth services to individuals temporarily located outside of their home state. This emergency administrative regulation is deemed to be an emergency pursuant to KRS 13A.190(1)(a)3. in order to meet an imminent deadline for the promulgation of an administrative regulation that is established by state statute. Section 2 of HB 188 enacted during the 2022 legislative session, codified as KRS 211.335, requires the Cabinet for Health and Family Services to promulgate an administrative regulation to add a definition of "temporarily located" within 30 days of the bill's effective date, which is July 14, 2022. Section 2(2) of the bill states that the cabinet may promulgate emergency administrative regulations in order to comply with the deadline. This emergency administrative regulation will be replaced by an ordinary administrative regulation to provide guidance to licensing boards regarding the delivery of telehealth services to individuals temporarily located outside of their home state. The companion ordinary administrative regulation is not identical to this emergency administrative regulation.

ANDY BESHEAR, Governor ERIC C. FRIEDLANDER, Secretary

CABINET FOR HEALTH AND FAMILY SERVICES

Office of Inspector General Division of Telehealth Services (Emergency Amendment)

900 KAR 12:005E. Telehealth terminology and requirements.

RELATES TO: KRS 205.510, 205.559, 205.5591, 211.332(2) - (5), 304.17A-005(23), 304.17A-138, 304.40-320, 311.5975, 31 U.S.C. 3729-3733, 42 U.S.C. 1320a-7b(b), 42 U.S.C. 1320d to 1320d-9, 42 U.S.C. 1395nn

STATUTORY AUTHORITY: KRS 194A.105, 211.334(1)(d), 211.335, 211.336(3)

NECESSITY, FUNCTION, AND CONFORMITY: KRS 211.334 and 211.336 require the secretary of the Cabinet for Health and Family Services to promulgate administrative regulations necessary under applicable state laws to establish a telehealth terminology glossary to provide standard definitions for all health care providers who deliver health care services via telehealth, all state agencies authorized or required to promulgate administrative regulations relating to telehealth, and all payors; establish minimum requirements for the proper use and security of telehealth including requirements for confidentiality and data integrity, privacy, and security, informed consent, privileging and credentialing, reimbursement, and technology; and establish minimum requirements to prevent waste, fraud, and abuse related to telehealth. This administrative regulation establishes a telehealth terminology glossary and minimum requirements for the proper use and security of telehealth.

Section 1. Definitions.

- (1) "Division" means Division of Telehealth Services.
- (2) "Health care provider" is defined by KRS 304.17A-005(23), unless the provider or service is otherwise regulated by KRS 205.8451(7).
- (3) "Health care service" is defined by KRS 211.332(2).
- (4) "Professional licensure board" is defined by KRS 211.332(3).
- (5) "State agency authorized or required to promulgate administrative regulations relating to telehealth" is defined by KRS 211.332(4).
- (6) "Telehealth" or "digital health" is defined by KRS 211.332(5).

Section 2. Compliance. Health care providers performing a telehealth or digital health service shall:

- (1) Maintain confidentiality of patient medical information in accordance with KRS 311.5975;
- (2) Maintain patient privacy and security in accordance with the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA), 42 U.S.C. 1320d through 1320d-9, unless waived by the applicable federal authority;
- (3) Obtain patient informed consent in accordance with KRS 311.5975 and 304.40-320;
- (4) Secure credentialing if required by a third party or insurer or other payor;

(5)

- (a) Utilize the appropriate current procedural terminology (CPT) or health care common procedure coding (HCPCS) code and place of service (POS) code to secure reimbursement for a professional telehealth service; or
- (b) Utilize appropriate telehealth service code, if a CPT or HCPCS code is not available or not used for that service, according to customary practices for that health care profession, including the use of any telehealth modifiers or alternate codes;
- (6) Utilize non-public facing technology products that are HIPAA compliant;
- (7) As appropriate for the service, provider, and recipient, utilize the following modalities of communication delivered over a secure communications connection that complies with

the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA), 42 U.S.C. secs. 1320d to 1320d-9:

- (a) Live or real-time audio and video synchronous telehealth technology;
- (b) Asynchronous store-and-forward telehealth technology;
- (c) Remote patient monitoring using wireless devices, wearable sensors, or implanted health monitors;
- (d) Audio-only telecommunications systems; or
- (e) Clinical text chat technology if:
 - 1. Utilized within a secure, HIPAA compliant application or electronic health record system; and
 - 2. Meeting:
 - a. The scope of the provider's professional licensure; and
 - b. The scope of practice of the provider; and
- (8) Comply with the following federal laws to prevent waste, fraud, and abuse relating to telehealth:
 - (a) False Claims Act, 31 U.S.C. § 3729-3733;
 - (b) Anti-Kickback Statute, 42 U.S.C. 1320a-7b(b); and
 - (c) Physician Self-Referral, Section 1877 of the Social Security Act (42 U.S.C. 1395nn).

Section 3. Incorporation by Reference.

- (1) "Telehealth Terminology Glossary", August 2022, is incorporated by reference.
- (2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the Division of Telehealth Services, 275 East Main Street, Frankfort, Kentucky 40621, Monday through Friday, 8 a.m. to 4:30 p.m., or from its Web site at https://telehealth.ky.gov.

ADAM MATHER, Inspector General ERIC C. FRIEDLANDER, Secretary

APPROVED BY AGENCY: July 26, 2022

FILED WITH LRC: August 8, 2022 at 8:20 a.m.

PUBLIC HEARING AND COMMENT PERIOD: A public hearing on this administrative regulation shall, if requested, be held on September 26, 2022, at 9:00 a.m. using the CHFS Office of Legislative and Regulatory Affairs Zoom meeting room. The Zoom invitation will be emailed to each requestor the week prior to the scheduled hearing. Individuals interested in attending this hearing shall notify this agency in writing by September 19, 2022, five (5) workdays prior to the hearing, of their intent to attend. If no notification of intent to attend the hearing is received by that date, the hearing may be canceled. This hearing is open to the public. Any person who attends will be given an opportunity to comment on the proposed administrative regulation. A transcript of the public hearing will not be made unless a written request for a transcript is made. If you do not wish to be heard at the public hearing, you may submit written comments on this proposed administrative regulation until September 30, 2022. Send written notification of intent to attend the public hearing or written comments on the proposed administrative regulation to the contact person. In the event of an emergency, the public hearing will be held using the CHFS Office of Legislative and Regulatory Affairs Zoom meeting room. The Zoom invitation will be emailed to each requestor in advance of the scheduled hearing. Pursuant to KRS 13A.280(8), copies of the statement of consideration and, if applicable, the amended after comments version of the administrative regulation shall be made available upon request.

CONTACT PERSON: Krista Quarles, Policy Specialist, Office of Legislative and Regulatory Affairs, 275 East Main Street 5 W-A, Frankfort, Kentucky 40621; Phone: 502-564-6746; Fax: 502-564-7091; email CHFSregs@ky.gov.