A Bill

By: Representative L. Johnson

For An Act To Be Entitled

AN ACT TO IMPROVE THE EFFICIENCY OF TELEMEDICINE CREDENTIALING IN THE STATE OF ARKANSAS; AND FOR OTHER PURPOSES.

Subtitle

TO IMPROVE THE EFFICIENCY OF TELEMEDICINE CREDENTIALING IN THE STATE OF ARKANSAS.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

SECTION 1. Arkansas Code § 17-95-107(b), concerning credentialing organization related to physicians, is amended to add an additional subdivision to read as follows:

(6) "Telemedicine physician" means a physician who is physically located at a distant site as defined by the Telemedicine Act, § 17-80-401 et seq., but who uses an electronic medium to perform an act that is part of a patient care service initiated in this state.

SECTION 2. Arkansas Code § 17-95-107(e)(2), concerning credentialing organization related to physicians, is amended to read as follows:

(2) Subject only to the exceptions recognized in subdivisions (f)(1) and (2) of this section Except as provided in subsections (f) and (h) of this section, a credentialing organization shall be precluded hereby from seeking credentialing information from the physician or from sources other than the board if:

(A) The same credentialing information is available from the board; and
(B) At the time the credentialing information is requested, the board:

(i) Holds certification by the National Committee for Quality Assurance as a certified credentials verification organization;
(ii) Demonstrates compliance with the principles for credentials verification organizations set forth by The Joint Commission;
(iii) Documents compliance with Department of Health rules and regulations applicable to credentialing; and
(iv) Maintains evidence of compliance with the standards referenced in subdivisions (e)(2)(B)(i)-(iii) of this section; and

(C)(i) The board charges fees that comply with subdivision (d)(7) of this section.

(ii) Until such time as the board satisfies each of the foregoing prerequisites, credentialing organizations, in their discretion, may utilize credentialing information obtained from the board, or they may seek other sources for the same credentialing information.

(iii) If at any time the board fails to satisfy any of the certification or compliance standards referenced in this subsection, no credentialing organization shall be required to utilize the board to obtain credentialing information during any period in which the board lacks such accreditation or compliance.

SECTION 3. Arkansas Code § 17-95-107, concerning credentialing organization related to physicians, is amended to add an additional subsection to read as follows:

(h)(1) If the medical staff bylaws of a credentialing organization require the use of a primary source verification procedure for a telemedicine physician, the credentialing organization may obtain a primary source verification by:

(A) Seeking credentialing information from the board using the process established under this section; or
(B) Using a streamlined process for credentialing and privileging telemedicine practitioners established by the Centers for Medicare and Medicaid Services under 42 C.F.R. § 482.22, as existing on January 1, 2019, if the telemedicine physician has been credentialed by another Arkansas hospital within the past three (3) years.
(2) This section does not require a credentialing organization to use a primary source verification procedure for credentialing a telemedicine physician unless the use of a primary source verification procedure is mandated by the organization's medical staff bylaws.

(3) Solely for purposes of determining the fee to be paid under subdivision (d)(7) of this section, the board shall not classify a physician as a telemedicine physician, regardless of whether the physician is providing telemedicine services for organizations in this state or outside of this state, if:

(A) The physician's practice location is in Arkansas; or
(B) The physician is providing services on-site at the credentialing organization that is seeking credentialing information about the physician.

APPROVED: 4/11/19