**South Carolina General Assembly**

124th Session, 2021-2022

**H. 3867**

**STATUS INFORMATION**

General Bill

Sponsors: Reps. Sandifer and Hardee

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Introduced in the House on February 10, 2021

Currently residing in the House Committee on **Labor, Commerce and Industry**

Summary: Telemedicine

**HISTORY OF LEGISLATIVE ACTIONS**

Date Body Action Description with journal page number

2/10/2021 House Introduced and read first time ([House Journal‑page 5](file:///h:\hj\20210210.docx))

2/10/2021 House Referred to Committee on **Labor, Commerce and Industry** ([House Journal‑page 5](file:///h:\hj\20210210.docx))

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**VERSIONS OF THIS BILL**

[2/10/2021](file:///p:\pprever\2021-22\3867_20210210.docx)

**A** **BILL**

TO AMEND THE CODE OF LAWS OF SOUTH CAROLINA, 1976, BY ADDING SECTION 38‑71‑295 SO AS TO PROVIDE DEFINITIONS AND ESTABLISH GUIDELINES FOR CONTRACTING FOR TELEMEDICINE SERVICES; AND TO AMEND SECTION 40‑47‑37, RELATING TO THE REQUIREMENTS TO PRACTICE TELEMEDICINE, SO AS TO PROVIDE REQUIREMENTS TO ALLOW FOR THE PROVISION OF OUT-OF-STATE TELEMEDICINE SERVICES.

Be it enacted by the General Assembly of the State of South Carolina:

SECTION 1. Article 1, Chapter 71, Title 38 of the 1976 Code is amended by adding:

“Section 38‑71‑295. (A) As used in this section:

(1) ‘Health maintenance organization’ means an organization as defined in Section 38‑33‑20(8).

(2) ‘Insurer’ means an insurance company, a health maintenance organization, and other entities that provide health insurance coverage as defined in Section 38‑71‑670(6), that is licensed to engage in the business of insurance in this State, and is subject to state insurance regulation.

(3) ‘Telemedicine’ has the same meaning as provided in Section 40‑47‑20(52).

(4) ‘Telemedicine provider’ means any individual who provides health care and related services using telemedicine and who is authorized to provide such services pursuant to Section 40‑47‑37.

(B) A contract between a health insurer issuing comprehensive coverage through an individual or group health insurance policy and a telemedicine provider must be voluntary between the insurer and the provider and must establish mutually acceptable payment rates or pay methodologies for services provided through telemedicine.

(C) A contract between a health maintenance organization issuing comprehensive coverage through an individual or group health insurance policy and a telemedicine provider must be voluntary between the insurer and the provider and must establish mutually acceptable payment rates or pay methodologies for services provided through telemedicine.

(D) Nothing in this section shall require a health plan or health maintenance organization to enter into a contract or reimbursement agreement for telemedicine services.”

SECTION 2. Section 40‑47‑37 of the 1976 Code is amended by adding an appropriately lettered subsection at the end to read:

“( ) Notwithstanding subsection (C)(9), a health professional not licensed in this State may provide health care services to a patient located in this State using telemedicine if the health care professional is registered with the Department of Labor, Licensing and Regulation, and provides health care services within the applicable scope of practice established by this State.

(1) The Department of Labor, Licensing and Regulation shall register a health care professional not licensed in this State as a telemedicine provider if the health care professional:

(a) completes an application in the format prescribed by the department;

(b) is licensed with an active, unencumbered license that is issued by another state, the District of Columbia, or a possession or territory of the United States of America and that is substantially similar to a license issued to a South Carolina‑licensed provider under South Carolina law;

(c) has not been the subject of disciplinary action relating to a professional license during the five-year period immediately prior to the submission of the application to the department;

(d) designates a duly appointed registered agent for service of process in this State on a form prescribed by the department; and

(e) demonstrates to the department that the applicant is in compliance with the laws of the state governing the practice of medicine or health care-related services.

(2) The department shall use the National Practitioner Data Bank to verify the information submitted in item (1), as applicable.

(3) Nothing in this chapter shall require a health insurer or health maintenance organization to enter into a contract or reimbursement agreement for telemedicine services.”

SECTION 3. This act takes effect upon approval by the Governor and applies to health insurance plans issued, renewed, delivered, or entered into one year after the effective date of this act.

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