

REVENUE: No revenue impact

FISCAL: Minimal fiscal impact, no statement issued

Action:	Do Pass as Amended and Be Printed Engrossed
Vote:	9 - 0 - 0
Yeas:	Clem, Conger, Harker, Kennemer, Keny-Guyer, Lively, Thompson, Weidner, Greenlick
Nays:	0
Exc.:	0
Prepared By:	Tyler Larson, Administrator
Meeting Dates:	5/15

WHAT THE MEASURE DOES: Requires Oregon Health Authority (OHA) adopt uniform credentialing and privileging standards for providers of telemedicine services. Specifies required information and documents for credentialing a telemedicine provider. Requires OHA consult with originating-site and distant-site hospitals in rule making process. Modifies telemedicine definition. Authorizes a hospital to accept credentials of telemedicine providers either by agreement with distant-site hospital or by providers meeting credentialing and privileging standards established by OHA. Clarifies that service contractors are not subject to telemedicine requirement. Clarifies hospital credentialing telemedicine provider is subject to OHA requirements. Operative date October 1, 2013. Declares emergency, effective on passage.

ISSUES DISCUSSED:

- Provisions of the bill
- Provisions of the amendment

EFFECT OF COMMITTEE AMENDMENT: Clarifies that service contractors are not subject to telemedicine requirement. Clarifies hospital credentialing telemedicine provider is subject to OHA requirements.

BACKGROUND: Telemedicine makes it possible for Oregon Health & Science University medical experts to treat patients almost anywhere in the state without leaving the Portland area. Telemedicine has allowed 135 patients to receive medical care from their communities and saved more than \$2 million in transport costs.

Currently, telemedicine providers must be credentialed members of the medical staff of the hospitals to which they provide medical services. Each hospital has its credentialing procedures and requirements, which can create additional barriers to providing care for patients. The administrative costs of multiple credentialing processes have a negative impact on this cost-saving care model.

Senate Bill 569-B creates standardized credentialing requirements for telemedicine providers.

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This summary has not been adopted or officially endorsed by action of the committee.