

**ASSEMBLY BILL**

**No. 2484**

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**Introduced by Assembly Member Gordon**

February 21, 2014

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An act to amend Section 2290.5 of the Business and Professions Code, relating to telehealth.

LEGISLATIVE COUNSEL'S DIGEST

AB 2484, as introduced, Gordon. Healing arts: telehealth.

Existing law provides for the licensure and regulation of various healing arts professions by various boards within the Department of Consumer Affairs. A violation of specified provisions is a crime. Existing law defines telehealth for the purpose of its regulation and requires a health care provider, as defined, prior to the delivery of health care via telehealth, to verbally inform the patient that telehealth may be used and obtain verbal consent from the patient and to document that verbal consent in the patient's medical record.

This bill would alternatively allow a health care provider to obtain written consent from the patient before telehealth may be used and would require that written consent to be documented in the patient's medical record.

Vote: majority. Appropriation: no. Fiscal committee: no.  
State-mandated local program: no.

*The people of the State of California do enact as follows:*

- 1 SECTION 1. Section 2290.5 of the Business and Professions
- 2 Code is amended to read:

1 2290.5. (a) For purposes of this division, the following  
2 definitions shall apply:

3 (1) “Asynchronous store and forward” means the transmission  
4 of a patient’s medical information from an originating site to the  
5 health care provider at a distant site without the presence of the  
6 patient.

7 (2) “Distant site” means a site where a health care provider who  
8 provides health care services is located while providing these  
9 services via a telecommunications system.

10 (3) “Health care provider” means a person who is licensed under  
11 this division.

12 (4) “Originating site” means a site where a patient is located at  
13 the time health care services are provided via a telecommunications  
14 system or where the asynchronous store and forward service  
15 originates.

16 (5) “Synchronous interaction” means a real-time interaction  
17 between a patient and a health care provider located at a distant  
18 site.

19 (6) “Telehealth” means the mode of delivering health care  
20 services and public health via information and communication  
21 technologies to facilitate the diagnosis, consultation, treatment,  
22 education, care management, and self-management of a patient’s  
23 health care while the patient is at the originating site and the health  
24 care provider is at a distant site. Telehealth facilitates patient  
25 self-management and caregiver support for patients and includes  
26 synchronous interactions and asynchronous store and forward  
27 transfers.

28 (b) Prior to the delivery of health care via telehealth, the health  
29 care provider at the originating site shall verbally inform the patient  
30 that telehealth may be used and obtain verbal *or written* consent  
31 from the patient for this use. The verbal *or written* consent shall  
32 be documented in the patient’s medical record.

33 (c) The failure of a health care provider to comply with this  
34 section shall constitute unprofessional conduct. Section 2314 shall  
35 not apply to this section.

36 (d) This section shall not be construed to alter the scope of  
37 practice of any health care provider or authorize the delivery of  
38 health care services in a setting, or in a manner, not otherwise  
39 authorized by law.

1 (e) All laws regarding the confidentiality of health care  
2 information and a patient’s rights to his or her medical information  
3 shall apply to telehealth interactions.

4 (f) This section shall not apply to a patient under the jurisdiction  
5 of the Department of Corrections and Rehabilitation or any other  
6 correctional facility.

7 (g) (1) Notwithstanding any other provision of law and for  
8 purposes of this section, the governing body of the hospital whose  
9 patients are receiving the telehealth services may grant privileges  
10 to, and verify and approve credentials for, providers of telehealth  
11 services based on its medical staff recommendations that rely on  
12 information provided by the distant-site hospital or telehealth  
13 entity, as described in Sections 482.12, 482.22, and 485.616 of  
14 Title 42 of the Code of Federal Regulations.

15 (2) By enacting this subdivision, it is the intent of the Legislature  
16 to authorize a hospital to grant privileges to, and verify and approve  
17 credentials for, providers of telehealth services as described in  
18 paragraph (1).

19 (3) For the purposes of this subdivision, “telehealth” shall  
20 include “telemedicine” as the term is referenced in Sections 482.12,  
21 482.22, and 485.616 of Title 42 of the Code of Federal Regulations.