



ALLIANCE for  
CONNECTED CARE

**State Telehealth Expansion**  
*(or related expansion which may be relevant for telehealth)*

State	Executive Order	Established Relationship Language	Expanded Insurance Coverage	Licensure Language	Other Important Language	Specific Area of Health Care?
Alabama	<a href="#">Governor Executive Order</a> pursuant to <a href="#">State Code</a>  <a href="#">Bulletin No. 2020-02</a>  <a href="#">ALBME Press Release</a>  <a href="#">Board of Medicine Guidance</a>		Health carriers are asked to review and ensure their telehealth programs with participating providers are robust and will be able to meet any increased demands.	<p>The Alabama Board of Medical Examiners and the Medical Licensure Commission have adopted emergency licensing of qualified medical personnel. These measures will allow physicians and physician assistants who possess full and unrestricted medical licenses from appropriate medical licensing agencies to apply for and receive temporary emergency licenses to practice in Alabama for the duration of the declared COVID-19 health emergency.</p> <p>All health care professionals and assisting personnel executing the alternative-standards-of-care-plans in good faith are hereby declared to be “Emergency Management Workers.” (EO) Any requirement for a license to practice any professional, mechanical, or other skill shall not apply to any authorized emergency management worker who shall, in the course of</p>		COVID-19



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				performing their duties, and shall possess the same privileges they would ordinarily possess if performing their duties in their own state.		
<b>Alaska</b>	<a href="#">DOI Bulletin 20-07</a>  <a href="#">Courtesy License Application</a>		Puts in place HB 29 which expands telehealth to all covered services provided by a provider. Carriers should waive cost-sharing for utilization of telehealth.	Courtesy licenses for emergency situations are offered in the following health care programs: State Medical board; license type: physician/osteopathic physician. Restricted to physicians who come to the state to provide emergency medical or mental health care if the patients do not pay or give a fee or other remuneration and the services are provided as part of an organized response to a disaster emergency.		COVID-19
<b>Arizona</b>	<a href="#">Governor Executive Order</a>  <a href="#">Executive Order</a>  <a href="#">Executive Order 2020-15</a>	Prohibits a regulatory board from requiring a medical professional who is authorized to write prescriptions to conduct an in-person examination of a patient prior to	Requires coverage for telemedicine for all services provided through telehealth if the health services were provided in-person; requires payment parity for in-person and telemedicine; expands scope of telemedicine providers; and requires phone and/or video calls. Patient's home is considered an approved location to receive telemedicine services	Allows Arizona Department of Health Services to waive licensing requirements to provide healthcare officials with assistance in delivering services during times of heightened demand		COVID-19



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		the issuance of a prescription				
Arkansas	<a href="#">Emergency Temporary Application</a>  <a href="#">Executive Order 20-05</a>	Governor is waiving the requirement for in-person/face to face meetings to establish relationships		Emergency temporary licenses to <i>Arkansas medical residents</i> who have completed at least one year of postgraduate training and have the written recommendation of their program director		COVID-19
California	<a href="#">Governor Executive Order DMHC APL20-009</a>  <a href="#">Emergency Telehealth Guidance</a>  <a href="#">EMSA Guidance</a>  <a href="#">Temporary License Application</a>  <a href="#">Executive Order N-43-20</a>		Health plans shall reimburse providers at the same rate, whether a service is provided in-person or through telehealth, if the service is the same regardless of the modality of delivery, as determined by the provider's description of the service on the claim. Reimbursement should be the same for a service rendered via telephone as they would if the service is rendered via video.  Requires Medi-Cal managed care plans to allow members to obtain health care via telehealth when medically appropriate.  <a href="#">Executive order expands protections to medical</a>	<a href="#">A medical facility, telehealth agency, or staffing agency which desires to utilize medical professionals with out-of-state certifications or licenses during the state of emergency shall submit a temporary license application to EMS authority</a>  Any out-of-state personnel, including, but not limited to, medical personnel, entering California to assist in preparation for, responding to, mitigating the effects of, and recovering from COVID-19 shall be permitted to provide services in the same manner as prescribed in Government Code section 179.5.		COVID-19



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			providers as they amplify the use of video chats and similar applications to provide routine and non-emergency medical appointments in an effort to minimize patient exposure. The order relaxes certain state privacy and security laws for medical providers so they can provide telehealth services without the risk of being penalized.			
Colorado	<a href="#">Department of Regulatory Agencies, Division of Insurance Policy Directive</a>  <a href="#">DPO Emergency Licensure</a>  <a href="#">Dept. Reg Press Release</a>  <a href="#">CO Dept. of Reg. Affairs Guidance</a>  <a href="#">DOI Emergency Regulation</a>		<p>DOI Regulation mandates carriers reimburse providers for telehealth services using audio or video. Requires reimbursement for telehealth at rates not lower than in-person and in compliance with CO's MHP laws. Prohibits limits on technologies to telehealth, additional certification/location/training requirements</p> <p>Directing carriers to provide telehealth services to cover COVID-19 related in-network telehealth services at no cost share, including co-pays, deductibles, coinsurance.</p>	<p>Under Department of Reg. Affairs Guidance. A physician or physician in training may temporarily practice without a Colorado license or a physician training license if the physician is licensed and lawfully practicing medicine in another state or territory of the US without restrictions or conditions. Out of state doctors provide free services during medical emergency: existing law allows a physician who is not currently licensed in Colorado to provide medical care in connection with an emergency so long as such services are gratuitous. The Medical Practice Act also allows for a physician licensed</p>		COVID-19



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			Emergency regulation formalizing this directive coming soon.	and lawfully practicing medicine in another state or territory without restrictions to provide occasional services in Colorado. DORA will waive licensing requirements and rules in order to allow for late renewals, reinstatements for the emergency period, and reactivations for the emergency period of the volunteer nurses and other qualified licensed providers from out of state, so as to support measures to reduce or prevent the spread of COVID-19.		
Connecticut	<a href="#">DOI Bulletin</a> <a href="#">Department of Health Order</a> <a href="#">Executive Order</a>		Carriers to waive cost-sharing on telehealth visits and list each carrier's telehealth service link Executive Order expands access to telemedicine services to include pone, waives telehealth services for a provider-licensed facility	Temporary suspension for a period of 60 days, of the requirements of licensure, certification or registration, to allow persons who are appropriately licensed, certified or registered in another state or territory of the U.S. or D.C. to render temporary assistance in Connecticut within the scope of the profession for which a provider is licensed. Executive Order suspends licensure/certification requirements for applicable telehealth providers		COVID-19



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Delaware	<a href="#">Insurance Commissioner Bulletin to Insurers</a>  <a href="#">Governor Executive Order</a>  <a href="#">Medical Board Regulation 19</a>	<p>Any in-person requirement prior to telemedicine services under Title 24 is waived.</p> <p>Requirements that the patient must be present in Delaware at the time telemedicine services are provided are suspended, so long as the patient is a Delaware resident.</p>	Prohibits carriers from excluding a service for coverage solely because the service is provided through telemedicine services. If an in-network provider is not available, the carrier must provide access to an out-of-network provider at the in-network cost-sharing reimbursement level	Any out of state healthcare provider who would be permitted to provide telemedicine services to a Delaware resident if they hold an active license in another jurisdiction.	The Delaware Board of Medical Licensure and Discipline's Regulation 19 regarding restrictions on the use of telemedicine is suspended.	COVID-19
Florida	<a href="#">Department of Health Declaration of Public Health Emergency</a>  <a href="#">Executive Order</a>		Expands state employee health benefits to include telehealth at no additional cost, add telehealth employees to the employee pharmacy benefits plan, and ensure state employee access to telehealth through state's contracted HMO plans and PPO organization plan without cost-sharing	Waive licensure requirements for out-of-state health care professionals who render services in Florida related to COVID-19 Health care professionals, advanced life support professionals, and basic life support professionals holding a valid, unrestricted, and unencumbered license in any state, territory and/or district may render such services in Florida during a period not to		COVID-19



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				exceed 30 days, suspending licensing and registration renewal requirements for existing professional licenses.		
<b>Georgia</b>	<a href="#">Georgia Composite Medicine Board</a>			The Georgia Composite Medical Board is authorized to grant temporary licenses to physicians who apply for a temporary medical license and are currently licensed as a physician in good standing by equivalent boards in other states to assist with the needs of this public health emergency		COVID-19
<b>Hawaii</b>	<a href="#">Updated Executive Order</a>			Allow out-of-state physicians, osteopathic physicians, and physician assistants... to practice in Hawaii without a license; provided that they have never had their license revoked or suspended and are hired by a state or county agency or facility, or by a hospital, including related clinics and rehabilitation hospitals, nursing home, hospice, pharmacy, or clinical laboratory.		COVID-19
<b>Idaho</b>	<a href="#">Idaho Board of Nursing Comments</a>	Proclamation suspends telehealth regulations relating to the establishment of		During the public health state of emergency, MDs, Dos, and Pas holding a license in good standing from another state or country are permitted to treat patients in Idaho without an		COVID-19



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	<a href="#">Board of Medicine Proclamation</a>  <a href="#">Governor Proclamation</a>	provider-patient relationships and issuance of Rx orders via telehealth		<p>Idaho license until the public health emergency is over. Out-of-state practitioners treating Idaho patients are encouraged to notify the Board of their intent to practice in Idaho.</p> <p>Provide temporary licenses to nurses from non-compact states and waive fees, temporary licenses to previously licensed retired/non-practicing Idaho nurses for both in-person or telehealth services</p>		
Illinois	<a href="#">IDFPR Guidance</a>  <a href="#">Out-of-State Practice Permit</a>  <a href="#">HFS Emergency Amended Telehealth Rules</a>  <a href="#">Executive Order 2020-09</a>		<p>Executive order expands “telehealth services” to include all health care, psychiatry, mental health treatment, substance use disorder treatment, and related services provided to a patient regardless of the patient’s location via electronic or telephonic methods including FaceTime, Facebook Messenger, Google Hangouts, or Skype</p> <p>Amended rules require the same rate paid for telehealth and face-to-face services, reimbursement for</p>	<p>Out-of-state physicians, nurses, physician assistants, pharmacists, and respiratory care therapists may practice in Illinois if they are licensed in another state and are in good standing. These licensees must be operating under the authority of IEMA/IDPH or at a long-term care facility, hospital or FQHC, and must meet the standard of care mandated by the respective health care acts. They must provide contact information and dates of arrival and departure on forms provided by IDFPR. This temporary practice approval expires on September 30, 2020.</p>		COVID-19





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			telehealth that do not meet the current definition of telehealth, reimbursement for distant site providers, reimbursement for telehealth services delivered to a patient that is located at an originating site, originating site eligibility, telehealth services delivery eligibility, telehealth services payment parity with in-person delivery, distant site and originating site provider documentation requirements, and physician or other licensed health care professional presence requirements.			
Indiana	<a href="#">Emergency Declaration</a>  <a href="#">Executive Order 20-05</a>  <a href="#">Executive Order 20-13</a>	Waives in-person medical evaluation of patients for any schedule II-V controlled substance as long as the prescription is issued for a legitimate medical purpose,	Mental health professionals are permitted to practice telemedicine	Suspension of the requirement that a healthcare provider hold an Indiana license if he or she: (1) has an equivalent license from another state, and (2) is not suspended or barred from practice in that State or any State.	Executive order waives the prohibition against audio-only telehealth services and allows for physical, speech and occupational therapists to provide telemedicine services and	COVID-19



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		the telemedicine communication is conducted using an audio-visual, real-time, two-way interactive communication system.			allows for physical, speech and occupational therapists to be telehealth provided when using secure videoconferencing, interactive store-and-forward technology or remote patient monitoring.	
Iowa	<a href="#">Proclamation of Disaster Emergency</a>  <a href="#">Board of Medicine Emergency Proclamation</a>			<p>A physician may practice medicine/telemedicine in Iowa without an Iowa medical license on a temporary basis to aid in the emergency, if a physician holds at least one active medical license in another US jurisdiction, without restrictions or conditions.</p> <p>Suspension of administrative rules which prohibit the practice of medicine and surgery, osteopathic medicine and surgery, nursing, respiratory care, and practice as a physician assistant, by a licensee whose license is inactive or lapsed.</p>	Temporarily suspended preconditions, limitations, or restrictions on telemedicine to enhance telehealth delivery including lifting restrictions on residential and outpatient substance use disorder treatment and for face-to-face visitations	COVID-19



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				Suspension of regulatory provisions that require a minimum number of hours of field experience if the higher education institution providing practitioner preparation program determines that the student has completed sufficient field experience to determine that the student should be recommended for licensure.		
<b>Kansas</b>	<a href="#">Executive Order</a>  <a href="#">Updated KSBHA Guidance</a>  <a href="#">Emergency Temporary License Application</a>			Allows out-of-state physicians to use telemedicine with patients without having a Kansas license (meeting certain requirements). The Board is also accepting applications for temporary licensure, available to all health care professions regulated by the board. Temporary licenses will cancel in 90 days if not renewed. All license fees will be waived.	Temporarily expands telemedicine	COVID-19
<b>Kentucky</b>	<a href="#">Kentucky Board of Medical Licensure Instructions for Registration of Health Practitioners in Response to Emergency</a>			Medical and Osteopathic physicians not already licensed to practice in the Commonwealth of Kentucky may register to practice within Kentucky during the state of emergency.		COVID-19



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<b>Louisiana</b>	Alluded in <a href="#">Governor Declaration of Emergency</a>  <a href="#">DOH LAC</a>  <a href="#">DOI Emergency Rule</a>		Medicaid can temporarily cover services through audio without video.  Requires insurers to provide mental health with parity via telemedicine. Waives telemedicine coverage limitations on providers via telemedicine. Requires an evaluation in differences in cost-sharing responsibilities for insureds seeking in and out of network care.	The <a href="#">Louisiana Health Emergency Powers Act</a> is referenced, to provide for the temporary appointment, licensing or credentialing of health care providers who are willing to assist in responding to the public health emergency	Waives limitations on use of audio-only for telemedicine services.	COVID-19
<b>Maine</b>	<a href="#">Supplemental Order for Telemedicine</a>  <a href="#">Executive Order</a>		Prohibits carriers from refusing to pay claims submitted for telemedicine. Requires carriers to provide parity in coverage for clinically appropriate telehealth of medically necessary services either by audio or video. Requires payment of in-network rates for telehealth	Allow expedited licensure at no cost of qualified physicians and physician assistants licensed in other jurisdictions to provide assistance for the duration of the emergency.		COVID-19
<b>Maryland</b>	<a href="#">Governor Executive Order</a>		Passed SB 1080 which allows the Governor to establish or waive telehealth protocols for COVID-19, including authorizing health care professionals licensed out-of-state to provide telehealth to	Health care practitioners that hold licenses, certifications, or other permits issued by other states and that demonstrate the meeting of qualifications for professional, mechanical, or other skills, be deemed licensed,	A health care practitioner may engage in activities that are not authorized by their license at a health care facility in	COVID-19



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			patients in the State, and order the Department of Health to reimburse synchronous and asynchronous telehealth services provided to a patient, without regard to whether the patient is at a clinical site, if the service is covered by Medicaid, provided by a participating Medicaid provider, and authorized under the health care provider's scope of practice.	certified, or permitted in Maryland to render aid during the state of emergency	Maryland if doing so is necessary to allow the health care facility to meet required staffing ratios or otherwise ensure the continued and safe delivery of health care services	
Massachusetts	<a href="#">Order to Expand Access to Telehealth Services</a>  <a href="#">Board of Registration in Nursing</a>  <a href="#">Governor Executive Order to Support Expedited Licensing of Health Care</a>	Carriers shall not impose prior authorization requirements on medically necessary treatment deliver via telehealth related to COVID-19 at in-network providers	<p>All Commercial Health Insurers, BCBSMA, and carriers are required to allow in-network providers to deliver clinically appropriate, medically-necessary covered services via telehealth, without cost-sharing</p> <p>Clarifies elements of prior bulletin prohibiting prior approvals for in-network COVID-19 testing via telehealth</p>	Board of Medicine has established an Emergency Temporary License Application for out-of-state physicians to assist in meeting the increased demand for physician services in Massachusetts. To qualify, a physician must hold an active full, unlimited and unrestricted medical license in good standing in another U.S. state/territory/district. Expedite processing of reciprocal license applications for nurses licensed in another jurisdiction to be processed in one business day.	Carriers cannot impose specific requirements on the technologies used to deliver telehealth services, including any limitations of audio-only or live video technologies Expands telehealth by facilitating telehealth services across state lines	COVID-19



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	<a href="#">DOI Bulletin 2020-10</a>			Licenses of physicians who have retired within the last year, allows providers in good standing licensed in other states to obtain emergency licenses to practice in person or through telemedicine		
<b>Michigan</b>	<a href="#">Executive Order</a>			The order also empowers LARA to ensure an adequate supply of care providers during the emergency by granting the department additional flexibility in its decisions about licensing, registration, and workflow.		COVID-19
<b>Minnesota</b>	<a href="#">Emergency Executive Order</a>  <a href="#">Governor's Press Release</a>			<b>Authorizes out-of-state mental health providers to provide telehealth services to Minnesota patients</b>  The Minnesota health-related licensing boards and Emergency Medical Services Regulatory Board must have authority to appropriately modify licensing and continuing education requirements given the present constraints on the licensing and continuing educations process.		COVID-19
<b>Mississippi</b>	<a href="#">Mississippi State Board of Medical Licensure Proclamation</a>	Until action is taken by the Governor to lift the declared emergency., the		Out-of-state physicians may utilize telemedicine when treating patients in Mississippi without the necessity of securing a license to practice medicine in		COVID-19



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		Board of Medical Licensure encourages all physicians to utilize telemedicine and will not enforce any statute, rule or regulation that would require physicians to personally examine patients prior to the issuance of a prescription or order the administration of medication, including controlled substances		the state, provided the out of state physician holds an unrestricted license to practice medicine in the state which they practice.		
Missouri	<a href="#">Executive Order</a> <a href="#">DCI Bulletin 20-07</a>	No longer require patients have an established relationship (with thorough exam and questionnaire) with a provider prior to using telehealth	Insurers are required to cover telehealth services with parity of in-person services	Waive the need for health care providers to be fully licensed in MO to practice telemedicine or telehealth		COVID-19



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Montana	<a href="#">Board of Medicine Guidance</a>  <a href="#">Executive Order on Telehealth</a>			The Montana Department of Labor and Industry may provide interstate licensure recognition whenever a state of emergency or disaster is in effect by registering professionals who possess an active, unrestricted license in another state.	Health care practitioners shall be allowed to perform health care services using all modes of telehealth, including video and audio, audio-only, or other electronic media to treat the residents of the state of Montana for all medically appropriate services.	COVID-19
Nebraska	<a href="#">DOI Telehealth Notice</a>  <a href="#">Executive Order 20-10</a>		Providers are not required to obtain a patient’s signature on a written agreement prior to providing telehealth services. Insurance claims for telehealth will not be denied solely on the basis of a lack of a signed written statement.	Out-of-state providers who work in Nebraska pursuant to executive order 20-10, Coronavirus, additional healthcare workforce capacity are authorize to use telehealth under the same statutory provisions that permit Nebraska health care providers to use telehealth.		COVID-19
Nevada	<a href="#">DOI Guidance</a>  <a href="#">Emergency Directive 011</a>		Mandates reimbursement for out-of-network telehealth as the same as in-network and supports expanded telehealth services	Professional licensing boards regulating providers of medical services shall temporarily waive certain licensing requirements to allow the practice of currently		





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				<p>unlicensed skilled medical professionals during the crisis. The waiver and exemption shall apply to qualified providers who currently hold a valid license in good standing, providers whose licenses currently stand suspended for licensing fee delinquencies, and providers whose licenses currently stand suspended for failure to meet continuing medical education requirements or providers who have retired.</p>		
<b>New Hampshire</b>	<p><a href="#">Governor Declaration of State Emergency</a></p> <p><a href="#">Executive Order 15</a></p> <p><a href="#">Executive Order 18</a></p>		<p>All carriers should cover, without any cost-sharing, medically necessary treatment delivered via telehealth related to COVID-19 by in-network providers. There shall be no restriction on eligible originating sites for telehealth services.</p>	<p>Any out-of-state personnel, including medical personnel, entering New Hampshire to assist in preparing for, responding to, mitigating the effects of, and recovering from COVID-19 shall be permitted to provide services in the same manner as prescribed in RSA 21-P:41 and any other applicable statutory authority with respect to licensing for the duration of this emergency</p>		COVID-19
<b>New Jersey</b>	<p><a href="#">AG Guidance</a></p> <p><a href="#">Temp License Application</a></p>		<p>Requires carriers to review their telemedicine networks to ensure adequacy, allow out-of-network telehealth providers if there is no in-</p>	<p>New Jersey will waive a host of regulatory requirements for healthcare professionals licensed in other jurisdictions to become licensed in New Jersey and offer</p>		COVID-19



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	<a href="#">DOI Bulletin</a>		network available, cover without cost-sharing, update telemedicine policies to include phone-only services; ensure payment parity for telehealth providers, prohibits prior authorization for telehealth services, and provide for COVID-19 and the delivery of services through telemedicine	services to New Jersey residents, including telemedicine and telehealth services. The waivers will apply during the public health emergency related to COVID-19. Under accelerated temporary-licensure-by-reciprocity process, criminal history background checks, licensing fees, and submission of proof of a sufficient amount of medical malpractice insurance (where applicable) are waived. Prohibits same-state licensure for telehealth		
<b>New Mexico</b>	<a href="#">Governor Executive Order</a>  <a href="#">Office of Superintendent of Insurance Bulletin</a>  <a href="#">Governor Press Release</a>  <a href="#">NMMB Guidance</a>		<p>Telemedicine must be reimbursed at the same level with the same visit limitations and include behavioral health services. Requires no cost sharing or prior authorization on related services.</p> <p>Governor Press release requires Medicaid MCOs to reimburse for telehealth (audio and video) for doctors, behavioral health providers, and other health professionals; prohibits prior</p>	The Department of Health and Department of Homeland Security and Emergency Management shall credential out-of-state professionals who can render aid and necessary services during the pendency of this order		COVID-19



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			<p>authorization for COVID testing</p> <p>Use of electronic means (internet, texting, phone, email) to assess and provide reasonable care during emergency will not be considered unethical or a violation of Medical Board rules.</p>			
<b>New York</b>	<p><a href="#">Governor Directive</a></p> <p><a href="#">Executive Order Continuing Temporary Suspension and Modification of Laws Department of Health Medicaid Program Special Addition Newsletter</a></p> <p><a href="#">Executive Order No 202-10</a></p>		<p>Require insurance companies to waive co-pays for telehealth visits for Medicaid beneficiaries</p>	<p>Governor temporarily suspends regulations through April 17 to allow physicians , registered nurse practitioner, and physician assistants licensed and in current good standing in any state in the United States to practice medicine in New York</p> <p>Governor expands scope of practice for APRNs, Pas, NPs, emergency medical services personnel, certified labs, and certified pharmacy techs</p>	<p>No co-pay for Medicaid covered beneficiaries for COVID-19 testing</p> <p>Department of Health Medicaid program issued an exemption for all telehealth services from Medicaid copayments regardless of whether services are related to COVID-19</p>	COVID-19



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North Carolina	<a href="#">Governor Declaration of Emergency</a>		Asks Department of Insurance to work with insurers to identify burdens for testing and access to drugs and telehealth services	Temporarily waives North Carolina licensure requirements for health care and behavioral health care personnel who are licensed in another state, territory or the District of Columbia to provide health care services within the Emergency Area		COVID-19
North Dakota	<a href="#">Governor Executive Order</a>  <a href="#">Executive Order</a>  <a href="#">Executive Order</a>		Requires virtual check-ins and e-visit for established patients per CMS guidance. Prohibits telehealth to be subject to cost sharing and prohibits restrictions on technologies for telehealth delivery  Executive Order mandates health insurers offering telehealth services to expand services including for office visits; physical, occupational, and speech therapy, behavioral health and SUD treatment, diabetes, education, and nutrition counseling.	References North Dakota Century Code that if a person holds a license, certificate, or other permit issued by any state or political subdivision evidencing the meeting of qualifications for professional, mechanical, or other skills, the person may render aid involving that skill in this state to meet and emergency or disaster, and this state shall give due recognition to the license.		COVID-19
Ohio	<a href="#">Governor Emergency Orders</a>	A physician may prescribe a non-controlled substance to a	Expands telehealth options for Medicaid, including redefining patient site, practitioner site, the	Physicians not licensed in Ohio may <u>not</u> practice medicine in Ohio without first obtaining a telemedicine certificate, which	Ensure that every person in Ohio has access to behavioral health	Mental Health coverage in COVID-19 emergency



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	<a href="#">Ohio Medical Board Telemedicine Guidance</a>  <a href="#">Ohio Department of Medicaid Emergency Actions</a>	new patient on whom the physician has never conducted a physical examination and who is at a location remote from the physician if the physician can verify the patient's identity and location, interacts with the patient to complete a medical evaluation.	definition of telehealth to include asynchronous telehealth	permits the holder to engage in the practice of medicine in Ohio	care via telehealth services by landline or cell phone (EO)	
<b>Oklahoma</b>	<a href="#">Governor's Amended Executive Order</a>	Waives part of Oklahoma state law requiring an existing doctor-patient relationship before telemedicine consultations can be conducted				COVID-19
<b>Oregon</b>	<a href="#">Oregon Medical Board</a>		Guidance directs health plans to cover telehealth services by in-network providers to	During a state of emergency, the Oregon Medical Board (OMB) allows physicians and physician		COVID-19



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	<a href="#">DCBS/OHA Joint Guidance on Telehealth</a>		replace in-person visits where possible (includes all modes of telemedicine); examine reimbursement rates for and network adequacy requirements for telehealth services to ensure adequate networks; advise consumers about telemedicine services available, ensure telehealth for behavioral health services, eliminate barriers like removing provider location services	assistants licensed in another state to provide medical care in Oregon under special provisions. Out-of-state health care professionals who wish to provide care in Oregon during this time must complete an authorization application		
<b>Pennsylvania</b>	<a href="#">Issuance of Temporary Licenses Request for Suspension</a>  <a href="#">Expansion of Telemedicine Services Providers Press Release</a>			Governor Wolf suspended temporary license requirements for practitioners in other states to provide services to Pennsylvanians for the duration of the coronavirus emergency. Applies to physicians, osteopaths, nurses, and nurse-midwives. Also suspended several administrative requirements like continuing education requirements which would create delays in issuing temporary licenses.	Health care professionals licensed under any of the Department of State's Bureau of Professional and Occupational Affairs (BPOA) licensing boards can provide services to patients via telemedicine	COVID-19
<b>Rhode Island</b>	<a href="#">Emergency Declaration</a>	Patient location requirement for	OHIC FAQ expands telemedicine to phone only,	As of March 18, out-of-state licensed professionals may	Prohibition against audio-only	COVID-19



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	<a href="#">Tweet: re RIDOH statement</a>  <a href="#">Article from RIDOH</a>  <a href="#">OHIC FAQ</a>	telemedicine is suspended, patients may receive telemedicine services at any location.	and expands reimbursement rates for telemedicine. Suspends general laws to the extent that it allows agreements between health care providers and insurance carriers that limit either the scope of covered telemedicine services or the reimbursement of those services. All such clinically appropriate, medically necessary telemedicine services delivered by in-network providers shall be reimbursed at rates not lower than services delivered through traditional (in-person) methods. No insurance carrier shall impose any specific requirements on the technologies used to deliver telemedicine services.	<p>obtain a temporary 90-day license from RIDOH so that they may temporarily practice in Rhode Island.</p> <p>Board of Medical Licensure will not take action against physicians not licensed to practice in RI who, during the state of emergency, use telemedicine to deliver care to their established RI patients.</p>	telephone conversation and limitations on video conferencing are suspended to expand the availability of telemedicine.	
South Carolina	<a href="#">South Carolina Medical Board</a>			South Carolina will issue emergency nursing and medical license to combat the COVID-19 pandemic. The state medical board can expedite temporary licensure for out-of-state physicians, physician assistants		COVID-19



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				and respiratory care practitioners within 24 hours		
<b>South Dakota</b>	<a href="#">Executive Order 2020-07</a>	Suspends regulatory provisions which limit or restrict the provision of telehealth services which require face-to-face treatment, interviews and sessions with providers		Grants full recognition to the licenses held by a professional by an compact member state, in accordance with EMAC should those facilities require additional professionals to meet patient demand during the COVID-19 emergency, whether in-person or by remote means		COVID-19
<b>Tennessee</b>	<a href="#">Governor Executive Order</a>  <a href="#">Governor Executive Order</a>		Urges health carriers to provide coverage for medical necessary covered services via telemedicine. Urges carriers not to impose prior authorization requirements on medically necessary COVID-19 treatment by in-network providers via telemedicine	The provisions of Tennessee Code Annotated, Section 68-11-201(20) are suspended to the extent necessary to allow health care professionals who would otherwise be subject to licensing requirements to provide localized treatment of patients in temporary residences.		COVID-19
<b>Texas</b>	<a href="#">Governor Directive</a>  <a href="#">Texas Medical Board</a>  <a href="#">Texas Department of</a>	TMB temporarily suspended Texas Occupation Code 111.005 (a)-(b) and Title 22, Chapter 174.6 (a)(2)-(3) of the Texas	Pay provider working in telemedicine the same as if they were in-person for 120 days	Fast-tracks temporary licensing of out-of-state medical professionals (physicians, physician assistants, nurses and retired medical personnel) to provide in-person and telemedicine services		COVID-19





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	<a href="#">Insurance Emergency Rules</a>	Administrative Code. Telemedicine, including the use of telephone only, may be used to establish a physician-patient relationship. This expanded use of telemedicine may be used for diagnosis, treatment, ordering of tests, and prescribing for all conditions. The standard of care must be met in all instances				
Utah	<a href="#">DOPL Guidance</a> <a href="#">Emergency License Application</a> <a href="#">Executive Order 2020-07</a>			A physician who is licensed and lawfully practicing medicine in another U.S. state or territory without restrictions or conditions may practice in Utah for the duration of the declared emergency by obtaining a DOPL Time-Limiting Emergency License which expire upon the earlier of 180 days, 30 days from the end of the declared emergency, or	A medical provider that offers telehealth services does not have to comply with HIPAA or HITECH as long as the provider informs the patient the telehealth service does not comply with those federal	COVID-19



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				upon 10 days' notice from DOPL. All fees are waived.	acts, gives the patient an opportunity to decline the use of the telehealth service, and take reasonable care to ensure security and privacy of telehealth service	
<b>Vermont</b>	<a href="#">Dept. of Health Guidance</a>  <a href="#">Med Board Guidance</a>  <a href="#">DFR Emergency Rule</a>	Prohibits insurers from requiring provider to have an existing relationship with a patient to provide and be reimbursed for telemedicine	Requires coverage parity for telehealth and audio-only telephone services, coverage for telemedicine consultations, allows insurers to require providers to use telemedicine when appropriate, provides that insurers are not required to reimburse a distant health provider if it has insufficient information to render an opinion. Requires insurers to cover telephone triage services and store and forward services without cost-sharing; allows insurers to process and reimburse telephone triage services retroactively to 3.13.20; requires insurers to permit providers to use any non-	Special provisions have been passed to facilitate practice in Vermont by healthcare professionals who are not licensed in Vermont. There are two different paths available, "deemed" and "emergency," both which are expedited and free. MDs, physician assistants, and podiatrists who meet all the criteria below can be deemed to be licensed to practice in Vermont to provide remote services by telemedicine and/or as part of the staff of a licensed facility in Vermont. To be deemed licensed, you must be licensed in at least one US jurisdiction and in good standing.		COVID-19



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			public facing remote communication product to communicate with patients; requires insurers to follow federal and state mental health parity laws; and prohibits insurers from denying/limiting coverage or reimbursement based solely on the location of the patient or provider.			
Virginia	<a href="#">Board of Medicine Guidance</a>  <a href="#">Temporary Waiver for Inactive Licensees</a>	During the COVID-19 emergency, professionals licensed in other states can provide telemedicine services to Virginia residents with whom they have an established practitioner-patient relationship. Establishing a new relationship with a Virginia resident requires a license from the		A license issued to a health care practitioner by another state, and in good standing with such state, shall be deemed to be an active license issued by the Commonwealth to provide health care or professional services as a health care practitioner of the same type for which such license is issued in another state, provided such health care practitioner is engaged by a hospital, licensed nursing facility, or dialysis facility in the Commonwealth for the purpose of assisting that facility. Hospitals, licensed nursing facilities, and dialysis facilities must submit to the applicable licensing authority each out-of-state health care practitioner's		COVID-19



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		Virginia Board of Medicine.		name, license type, state of license, and license identification number within a reasonable time of the practitioner arriving in the Commonwealth. The Board of Medicine will waive regulations related to fees, and continuing education for the reinstatement or reactivation of licensure for those who have had an active license within the past four years.		
Washington	<a href="#">Washington Medical Commission Announcement</a>  <a href="#">Telemedicine Proclamation by the Governor</a>  <a href="#">Office of the Insurance Commissioner Order</a>		<p>Proclamation requires providers to be paid at the same rate when providing services via telemedicine as for in-person services.</p> <p>Prohibits reimbursing in-network providers for telemedicine claims for medically necessary covered services at a rate lower than the contracted rate, denying a telemedicine claim for a medically necessary covered service due to an existing provider contract term that denies reimbursement, and establishing requirements for the payment of telemedicine</p>	All volunteers are registered in the volunteer health practitioner system and verified to be in good standing in all states where they are licensed may practice in Washington without obtaining a Washington license once activated and assigned by the Department of Health		COVID-19



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			<p>services that are inconsistent with emergency orders.</p> <p>Insurance Order expands coverage for providing telehealth including telephone and video chat tools such as Facetime, Facebook Messenger video chat, Google Hangout, GoToMeeting</p>			
<b>Washington D.C.</b>	<a href="#">Administrative Order to Waive Licensure Requirements for Healthcare Providers</a>  <a href="#">Medicaid Director Transmittal</a>			This Administrative Order is to set forth requirements under which licensure, registration, or certifications requirements, permits and/or fees shall be waived for healthcare practitioners appointed as temporary agents of the District of Columbia, in order to respond to the COVID-19 public health emergency	Telehealth services provided within the home as the originating site is reimbursable under Medicaid	COVID-19
<b>West Virginia</b>	<a href="#">Executive Order</a>			The following statutory regulations are to be suspended for the duration of the State of Emergency: Requirement that medical licenses are only valid two years; requirement that an educational permit is only valid one year; requirement from physician assistant licensure, reinstatement of licenses,		COVID-19



ALLIANCE for  
CONNECTED CARE

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				written authorizations from the board, collaboration limits, and collaborative agreements, requirement that physicians biennially furnish proof of 32 hours of CME prior to renewal; procedures for applications for licensure by any out-of-state medical practitioners under the Interstate Medical Licensure Compact		
<b>Wisconsin</b>	<a href="#">Department of Health Services Announcement</a>  <a href="#">Executive Order</a>		Allows Medicaid coverage for telehealth services for all originating sites	A physician providing telemedicine in the diagnosis and treatment of a patient who is located in this state must have a valid and current license issued by this state, another state or Canada.		COVID-19
<b>Wyoming</b>	<a href="#">Board of Medicine Guidance</a>  <a href="#">Emergency Licensure Application</a>			Physicians and physician assistants not licensed in Wyoming may qualify to work here during the declared public health emergency through the “consultation exemption.” If approved to do so, the physician or physician assistant is considered to be “consulting” with the State Health Officer. The exemption from licensure, if approved, will be valid until the earlier of the end of the Public Health Emergency or the		COVID-19



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				<p>termination by the State Health Officer of the "consultation." Current, full and unrestricted licensure in at least one U.S. jurisdiction or county is required. The exemption is not automatic, requires approval of the Board of Medicine and the State Health Officer, and does not apply to all physicians and physician assistants.</p>		