

117TH CONGRESS
2D SESSION

H. R. 7097

To facilitate the provision of telehealth services through interstate recognition of health care professionals' licenses, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

MARCH 16, 2022

Mr. CAWTHORN (for himself and Mr. GOSAR) introduced the following bill;
which was referred to the Committee on Energy and Commerce

A BILL

To facilitate the provision of telehealth services through interstate recognition of health care professionals' licenses, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Telehealth Treatment
5 and Technology Act of 2022” or the “3T Act of 2022”.

6 **SEC. 2. AUTHORIZATION OF TELEHEALTH AND INTER-**
7 **STATE TREATMENT.**

8 (a) IN GENERAL.—Notwithstanding any other provi-
9 sion of Federal or State law or regulation regarding the
10 licensure or certification of health care providers or the

1 provision of telehealth services, a health care professional
2 may practice within the scope of the individual's license,
3 certification, or authorization described in subsection
4 (i)(1)(A) through telehealth in any State, the District of
5 Columbia, or any territory or possession of the United
6 States, or any other location designated by the Secretary,
7 based on the licensure, certification, or authorization of
8 such individual in any one State, the District of Columbia,
9 or territory or possession of the United States.

10 (b) SCOPE OF TELEHEALTH SERVICES.—Telehealth
11 services authorized by this section include services pro-
12 vided to any patient regardless of whether the health care
13 professional has a prior treatment relationship with the
14 patient, provided that, if the health care professional does
15 not have a prior treatment relationship with the patient,
16 a new relationship may be established only via a written
17 acknowledgment or synchronous technology.

18 (c) INITIATION OF TELEHEALTH SERVICES.—Before
19 providing telehealth services authorized by this section, the
20 health care professional shall—

- 21 (1) verify the identification of the patient re-
22 ceiving health services;
- 23 (2) obtain oral or written acknowledgment from
24 the patient (or legal representative of the patient) to
25 perform telehealth services, and if such acknowledg-

1 ment is oral, make a record of such acknowledg-
2 ment; and

3 (3) obtain or confirm an alternative method of
4 contacting the patient in case of a technological fail-
5 ure.

6 (d) WRITTEN NOTICE OF PROVISION OF SERV-
7 ICES.—As soon as practicable, but not later than 30 days
8 after first providing services pursuant to this section in
9 a jurisdiction other than the jurisdiction in which a health
10 care professional is licensed, certified, or otherwise author-
11 ized, such health care professional shall provide written
12 notice to the applicable licensing, certifying, or authorizing
13 authority in the jurisdiction in which the health care pro-
14 fessional provided such services. Such notice shall include
15 the health care professional's—

16 (1) name;

17 (2) email address;

18 (3) phone number;

19 (4) State of primary license, certification, or
20 authorization; and

21 (5) license, certification, or authorization type,
22 and applicable number or identifying information
23 with respect to such license, certification, or author-
24 ization.

1 (e) CLARIFICATION.—Nothing in this section author-
2 izes a health care professional to—

3 (1) practice beyond the scope of practice au-
4 thorized by—

5 (A) any State, District of Columbia, terri-
6 torial, or local authority in the jurisdiction in
7 which the health care professional holds a li-
8 cense, certification, or authorization described
9 in section 3(1)(A); or

10 (B) any State, District of Columbia, terri-
11 torial, or local authority in the jurisdiction in
12 which the patient receiving services is located;

13 (2) provide any service or subset of services
14 prohibited by any such authority in the jurisdiction
15 in which the patient receiving services is located;

16 (3) provide any service or subset of services in
17 a manner prohibited by any such authority the juris-
18 diction in which the patient receiving services is lo-
19 cated; or

20 (4) provide any service or subset of services in
21 a manner other than the manner prescribed by any
22 such authority in the jurisdiction in which the pa-
23 tient receiving services is located.

24 (f) INVESTIGATIVE AND DISCIPLINARY AUTHOR-
25 ITY.—A health care professional providing services pursu-

1 ant to the authority under this section shall be subject
2 to investigation and disciplinary action by the licensing,
3 certifying, or authorizing authorities in the jurisdiction in
4 which the patient receiving services is located. The juris-
5 diction in which the patient receiving services is located
6 shall have the authority to preclude the health care pro-
7 vider from practicing further in its jurisdiction, whether
8 such practice is authorized by the laws of such jurisdiction
9 or the authority granted under this section, and shall re-
10 port any such preclusion to the licensing authority in the
11 jurisdiction in which the health care provider is licensed,
12 certified, or authorized.

13 (g) MULTIPLE JURISDICTION LICENSURE.—Notwith-
14 standing any other provision of this section, a health care
15 professional shall be subject to the requirements of the
16 jurisdiction of licensure if the professional is licensed in
17 the State, the District of Columbia, or territory or posses-
18 sion where the patient is located.

19 (h) INTERSTATE LICENSURE COMPACTS.—If a
20 health care professional is licensed in multiple jurisdic-
21 tions through an interstate licensure compact, with respect
22 to services provided to a patient located in a jurisdiction
23 covered by such compact, the health care professional shall
24 be subject to the requirements of the compact and not this
25 section.

1 (i) DEFINITIONS.—In this section—

2 (1) the term “health care professional” means
3 an individual who—

4 (A) has a valid and unrestricted license or
5 certification from, or is otherwise authorized by,
6 a State, the District of Columbia, or a territory
7 or possession of the United States, for any
8 health profession, including mental health; and

9 (B) is not affirmatively excluded from
10 practice in the licensing or certifying jurisdic-
11 tion or in any other jurisdiction;

12 (2) the term “Secretary” means the Secretary
13 of Health and Human Services; and

14 (3) the term “telehealth services” means use of
15 telecommunications and information technology (in-
16 cluding synchronous or asynchronous audio-visual,
17 audio-only, or store and forward technology) to pro-
18 vide access to physical and mental health assess-
19 ment, diagnosis, treatment, intervention, consulta-
20 tion, supervision, and information across distance.

21 **SEC. 3. REVISION OF HIPAA REGULATIONS TO ENSURE PA-**
22 **TIENT ACCESS TO TELEHEALTH SERVICES.**

23 The Secretary of Health and Human Services (in this
24 section referred to as the “Secretary”) shall revise the
25 HIPAA privacy regulation (as defined in section

1 1180(b)(3) of the Social Security Act (42 U.S.C. 1320d–
2 9(b)(3))) to ensure that, with respect to services furnished
3 by a health care provider via telehealth on or after the
4 first day following the end of the emergency period de-
5 scribed in section 1135(g)(1)(B) of such Act (42 U.S.C.
6 1320b–5(g)(1)(B)), such provider may so furnish such
7 services using any non-public facing audio or video com-
8 munication product (as such term is used for purposes of
9 the notice entitled “Notification of Enforcement Discre-
10 tion for Telehealth Remote Communications During the
11 COVID–19 Nationwide Public Health Emergency” as
12 published by the Office of Civil Rights of the Department
13 of Health and Human Services).

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