

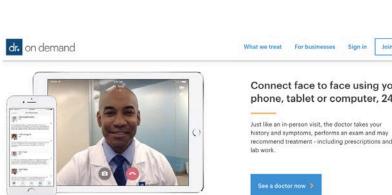
How the European Union Is Embracing Cross-border Telemedicine and What the U.S. State Medical Boards Can Learn From It

S. Laura Chung, JD MSII; Jesse Pines, MD; Jane Hyatt Thorpe, JD Center for Healthcare Innovation & Policy Research, The George Washington University, Washington, DC 20037

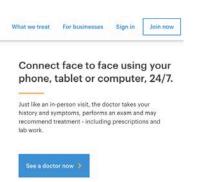
BACKGROUND

Despite the fact that there have been many advances in the field of telemedicine, the United States (U.S.) state and federal laws have not kept pace with these technological advancements and may operate as a barrier to growth in the field of telemedicine. On the other hand, the European Union (EU) has developed a robust legal framework for the practice of telemedicine. Based on the 2015 EU Guidelines, by 2020, a French physician may be able to see a German patient online and have instant access to the patient's medical record, automatically translated into the French language. The EU has prioritized the creation of a legal framework that fully supports cross-border telemedicine.

What Does Telemedicine Mean for Patients?



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- Patients may be able to avoid driving to a hospital
- Patients in rural areas can receive services
- Patients may have greater selection of providers
- Patients can check the price before receiving care

METHODS & OBJECTIVES

The aim of this research project is to evaluate what elements of the EU legal experience could be used to support efforts to better align telemedicine law with the practice of telemedicine in the U.S.

Why Compare Europe and the US?





The comparison of European to American telemedicine law is appropriate for several reasons. The U.S. has a federal legal system with 50 independent states that traditionally controlled healthcare within the borders of each state. Similarly, while the EU has only recently created a single economic market, healthcare used to be controlled by each of the 28 member nations.

US AND EUROPE TELEMEDICINE LAW & REGULATIONS

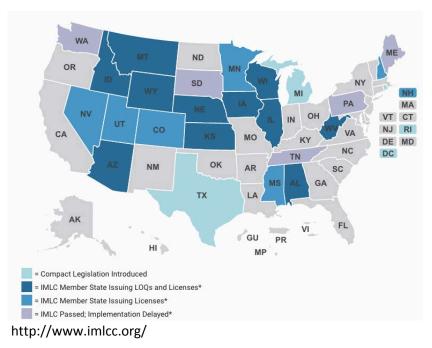
EUROPEAN COMMISSION physician licensure to increase efficiency in the licensing o FSMB released a draft of the "Interstate Medical Licensure ompact" for adoption by state legislatures (7/25/2014) onflicts created by different liability standards among member states (Meeting Maine joins FSMB Compact as 22nd state (June 24, 2017) The 21st Century Cure Act passed on 2016 requires nteroperability of EHR and penalizes data blocking S. 870 CHRONIC Care Act of 2017 was introduced to Senate (currently pending) in order to expand Medicare overage for telemonitoring and reduce Medicare cost.

FINDINGS

Physicians in the United States face many legal and technical barriers to providing efficient telemedicine care to patients in other states. Physicians may have to seek licensure in other states, and may not have the ability to access medical records. Physicians may also encounter difficulties in obtaining insurance payments.

regulatory framework intends to facilitate the development of cross-border medical services, i.e. services which are provided by a physician in one country to a patient in another country, and aspires to efficient provide highly care even unscheduled clinical encounters, medical records were not made available in advance.

Interstate Medical Licensure Compact



- Expedited state medical licensure application process.
- Requires an unrestricted license in at least
- Requires payment of appropriate fees and waiting time for approval by each state medical boards.

Not a Great Solution for True Interstate Telemedicine!

Reimbursement in US

- Insurance companies pay for health costs. Some states adopted telemedicine parity law to force insurance companies to cover
- telemedicine care. • Different coverage of specialties exist.
- Initial face-to-face visit required in some

Medical License

Requirements for

outside of EU or US

Telemedicine Consultation

Records, and Use of EMRs

Can the Patient access their

ecords online?

Crossborder Telemedicine

Most states require a medical license for

the state where physician is practicing

Interstate Medical Licensure Compact

Many U.S. state medical boards do not

remote medical services to patients

outside of the United States.

have a clear opinion regarding physicians

Some form of telemedicine parity law has

been adopted by at least 31 states. As

uniform reimbursement standard across

Federal Medicare Telehealth Parity Act

each state has adopted different

EMR use is increasing after ACA

Some EMRs allow patient access

requires interoperability of EHR and

Specifics of possible interoperability

standards are being investigated by

panelizes data blocking.

various organizations.

(HR 2948, pending)

egislation or Standards for The 21st Century Cure Act passed in 201

telemedicine parity laws, there is no

Expedited multistate license process,

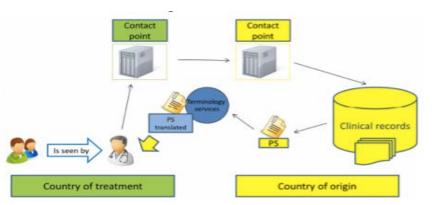
available in 12 states

Medical Licensure in Europe

- A physician needs to be licensed only in the nation from which he is rendering medical care, not in the nation where the service is received by patient.
- European Commission E-Commerce Directive of 2000 created a Digital Single Market within European Union member nations.



EMR Interoperability in Europe



Guidelines on Minimum/Non-Exhaustive Patient Summary Dataset, adopted by eHealth Network on November 19, 2013.

• Goal by 2020:

License required in nation where

physician is located without regard to

EU eCommerce Directive of 2000

established that a EU physician is

required to be licensed only in the

the location where the services are

member nation from which he provides

telemedicine services, without regard to

"Country-of-Origin" Doctrine based on

EU eCommerce Directive of 2000:

License is required in nation where

physician is located without regard to

Directive 2011/24/EU: EU patients have

a right to receive medical treatment in

member nations, and be reimbursed

Directive 2011/24/EU Article 7: Member

nations can require prior authorization

for reimbursement of telemedicine

National EMRs adopted in many

Many national EMRs allow patient

2013 Guideline for Cross-Border

Directive 2011/24/EU: European

Commission eHealth Network

2014 Guideline for Directive

date exchange

access (e.g. Denmark and Spain) and

established a minimum/non-exhaustive

patient summary dataset for electronic

2011/24/EU: European Commission

ePrescription dataset for electronic

eHealth Network established an

EC eHealth Network is working

together to progressively achieve

nations (EC eHealth OECD study

interoperability across EHRs of member

others are working towards providing

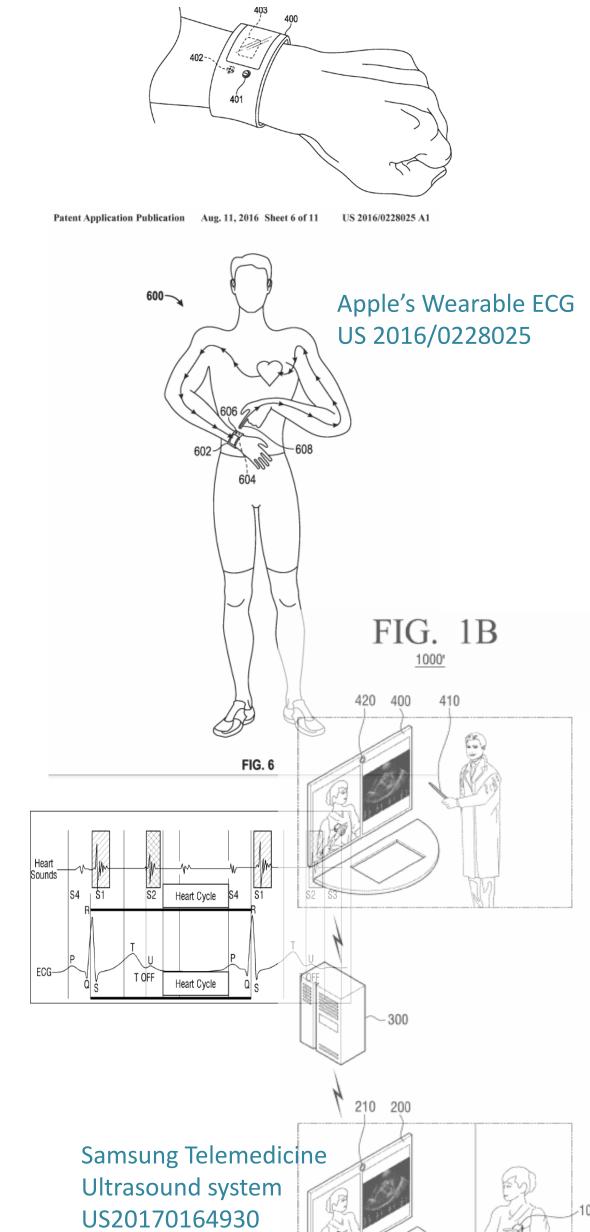
under given circumstances.

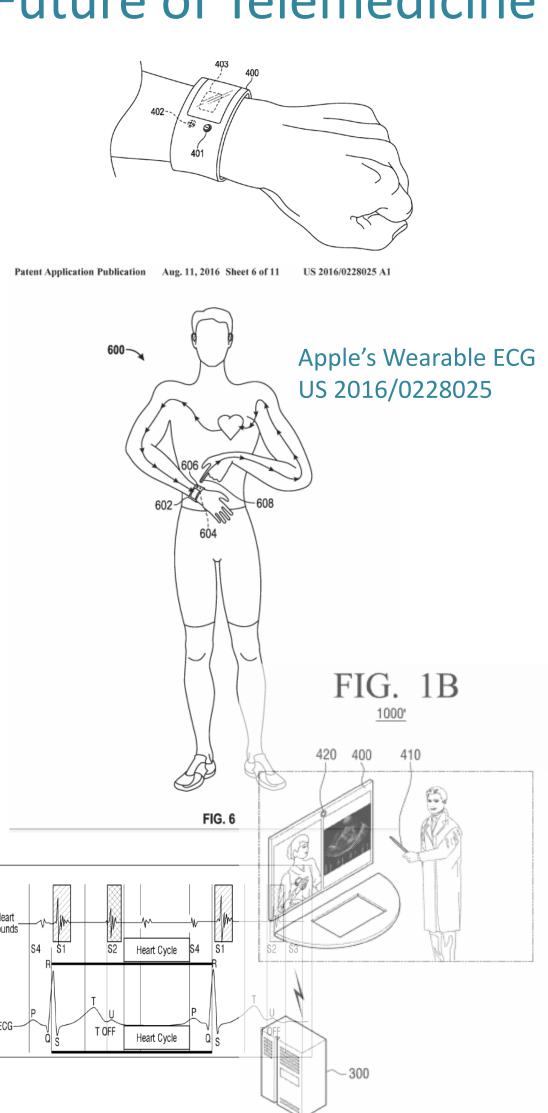
the location where the services are

Europe

- Patients can see physicians abroad in person or via telemedicine
- Real-time translation of patient summaries
- Cross-border access to medical records
- Leaders and experts of member nations regularly meet to achieve data interoperability.

Future of Telemedicine





CONCLUSION

U.S. medical licensure requirements for telemedicine practice are comparable to EU regulations before 2000. Furthermore, U.S. telemedicine reimbursement regulations arbitrarily differ across state borders, and electronic medical record systems from various companies do not communicate properly with each other.

We recommend that the state medical boards allow physicians licensed in one state to provide telemedicine services to patients in other states. Furthermore, we recommend collaboration among the state medical industry leaders, legislatures to come up with telemedicine reimbursement regulations and to design a uniform electronic medical record inter-operability standard to allow the U.S. telemedicine industry to keep abreast of the global developments in telemedicine.

Key Recommendations

- Licensure requirements should be liberalized to allow a licensed physician to practice telemedicine without regard to patient
- State legislatures should work together to create a uniform telemedicine parity law.
- Government and industry leaders need to work together to create one interoperability standard for all existing EMRs.

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