Trending in Telehealth: October 24 – 31, 2023

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Trending in Telehealth highlights state legislative and regulatory developments that impact the healthcare providers, telehealth and digital health companies, pharmacists and technology companies that deliver and facilitate the delivery of virtual care.

Trending in the past week:

- Interstate Licensure Compacts
- Telehealth Practice Standards
- Fiscal Policies and Incentives
- Behavioral Health
- Regulatory Licensing

A CLOSER LOOK

Finalized Legislation and Rulemaking

 In Wisconsin, the governor signed AB 364 into law. The bill amends the Wisconsin tax code by adopting certain Internal Revenue Code provisions relating to telehealth services and other remote care services and high-deductible health plans (HDHPs) under the Consolidated Appropriations Acts of 2022 and 2023. Specifically, AB 364 authorizes individuals covered by an HDHP to claim a state income tax deduction for contributions to a health savings account, even if the plan has a \$0 deductible for telehealth or remote services. The tax deduction will be available for taxable years beginning after 2021.

Legislation and Rulemaking Activity in Proposal Phase

Highlights:

- In Wisconsin, SB 1 passed through the first chamber. The proposed bill aims to ratify and enter Wisconsin into the following interstate compacts: the Audiology and Speech-Language Pathology Interstate Compact, the PA Licensure Compact, the Social Work Licensure Compact and the Counseling Compact.
- In Illinois, SB 767 passed through the first chamber. The proposed bill would amend the HMO Act and permit audiologists and physicians to prescribe hearing aids via in-person or telehealth evaluations.
- Nevada proposed a rule that defines the remote practice standards for social workers. Among other things, the rule would 1) permit the remote supervision of trainees, removing the inperson supervision requirements; 2) clarify that telehealth must be provided through Nevada-licensed providers; 3) authorize social workers to elect "inactive status" for periods during which the licensee is not actively providing services in the state; and 4) create a new licensure-by-endorsement process for social workers licensed in different countries.

• Vermont proposed a rule to implement two new professional credentials created by statute: the telehealth license and telehealth registration. Under the proposed rule, out-of-state healthcare professionals may obtain 1) a telehealth license to provide telehealth services to a total of no more than 20 patients in Vermont during a two-year license term or 2) a telehealth registration to provide telehealth services for a period of no more than 120 consecutive days from the date the registration was issued and to a total of no more than 10 patients over the 120-day period. The license and registration offer a discount for out-of-state providers, as the fee for a telehealth license is 75% of a full license fee.

Why it matters:

- Professional mobility and flexibility. Vermont's initiative to introduce telehealth licenses and registrations for out-of-state healthcare professionals represents a significant step in facilitating telehealth practice within the state. This proposal aims to streamline the licensure process by offering an expedited and cost-effective alternative for healthcare providers who might not see many patients in the state and find the full license financially burdensome. By reducing barriers to licensure, Vermont's proposed rule encourages greater participation from out-of-state professionals and enhanced accessibility to healthcare services for Vermont patients.
- Virtual professional development. The legislative activity in Nevada would authorize the remote supervision of social worker

trainees and remove the in-person supervision requirements. Amid ongoing healthcare workforce shortages, remote supervision offers an innovative solution to address patient safety and quality concerns while considering and supporting medical professionals' capacity.

• **Technology-driven healthcare policies.** Illinois' pending legislation, allowing audiologists and physicians to prescribe hearing aids either in person or through telehealth, demonstrates the state's acknowledgment of technological progress by enabling healthcare professionals to broaden their services remotely. This initiative reflects a broader trend, indicating that as healthcare technology advances, specialists are increasingly exploring opportunities to expand their practice through telehealth modalities. With ongoing improvements in healthcare technology, we can expect a continued shift towards regulatory acknowledgement of advanced healthcare technology.

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