An Act amending Title 27, Chapter 1, Subchapter IIa. Telemedicine §§ 45a — 45d, relating to telemedicine generally, that modernizes the Virgin Islands Telemedicine provisions and establishes a Telehealth Act, which includes Telemedicine and the standards that govern the practice of medicine and the provision of healthcare services using telehealth modalities. The Telehealth Act establishes licensing rules, standards of practice for telehealth providers, and authorizes telehealth providers to use telehealth to treat patients, in order to provide the Virgin Islands community with increased access to healthcare, consultation, recommendations, opinions, and follow up care options.

PROPOSED BY: The Governor

Be it enacted by the Legislature of the Virgin Islands:

SECTION 1. Title 27 Virgin Islands Code, Chapter 1, Subchapter IIa. Telemedicine, is renamed Telehealth Act, new sections are added, and sections 45a-45d are amended and renumbered as follows:

(1) Renaming Subchapter and adding a new Sections “45a-45s” to Subchapter IIa. and inserting the following new language:

“Subchapter IIa. Sections 45a-45s shall be known and may be cited as the Virgin Islands Telehealth Act

§ 45a. Telehealth Act Legislative Intent
The Legislature finds and declares all of the following:
(a) Lack of primary care, specialty providers, and transportation continue to be significant barriers to access to health services in the Territory.
(b) The U.S. Virgin Islands has difficulty attracting and retaining health professionals, as well as supporting local health facilities to provide a continuum of health care.
(c) Many health care providers are isolated from mentors, colleagues, and the information resources necessary to support them personally and professionally.
(d) It is the intent of the Legislature to create a parity of telehealth with other health care delivery modes; to actively promote telehealth as a tool to advance stakeholders’ goals regarding health status and health system improvement and to create opportunities and flexibility for telehealth to be used in new models of care and system improvements.
(e) Telehealth is part of a multifaceted approach to address the problem of inadequate provider distribution and the development of health systems by improving communication capabilities and providing convenient access to up-to-date information, consultations, and other forms of support.
(f) The use of information and telecommunication technologies to deliver health services has the potential to reduce costs, improve quality, change the conditions of practice, and improve access to health care.

(g) Telehealth will allow health care providers to monitor, assess, supervise, train, consult, and offer a wide range of services that would not be otherwise available to all patients in the Territory.

(g) Telehealth will assist in maintaining or improving the physical and economic health of our communities by keeping the source of medical care in the local area, strengthening the health infrastructure, and preserving health care-related jobs.

(h) Consumers of health care will benefit from telehealth in many ways, including expanded access to providers, faster and more convenient treatment, better continuity of care, reduction of lost work time and travel costs, and the ability to remain with support networks.

(i) The implementation of Telehealth laws and use permits the continuity of medical services in the event of disasters and catastrophes, especially in island communities where geography plays a role in medical care.

(i) It is the intent of the Legislature that the fundamental health care provider-patient relationship can not only be preserved, but also augmented and enhanced, through the use of telehealth as a tool to be integrated into practices.

(j) Without the assurance of payment and the resolution of legal and policy barriers, the full potential of telehealth will not be realized.

(l) This act shall be known as the “Virgin Islands Telehealth Act of 2020.”

§ 45b. Definitions
For purposes of this Act, the following terms shall have the meaning and scope stated below, unless clearly stated otherwise:

(a) “Asynchronous telemedicine” mean the “store-and-forward” technique where a patient, physician or health care provider collects medical history, images, and pathology reports and then sends it to a specialist physician for diagnostic and treatment expertise. It captures clinically important digital samples (e.g., still images, video, audio, text files) and relevant data in one location and subsequently transmits these files for interpretation at a remote site by a physician or health care providers without requiring the simultaneous presence of the patient involved.

(b) “Board” means all medical boards established by Virgin Islands Law and boards specified under Title 27 Chapters 1-2, including the Virgin Islands Board of Medical Examiners, Medicine and Related Professions, Dental, Nursing, Pharmacy, Optometry, Physical Therapy, Chiropractic, Podiatry, and Psychology.

(c) “Department” means the Virgin Islands Department of Health.

(d) “Distant site” means the site where the physician or health care provider is providing medical services to a patient at a distance or consulting with a patient's provider by means of telemedicine or telehealth.
(e) “E-Consults” mean asynchronous health record consultation services that provide an assessment and management service in which the patient's treating health care practitioner (i.e., attending or primary) requests the opinion and/or treatment advice of another health care practitioner (i.e., consultant) with specific specialty expertise to assist in the diagnosis and/or management of the patient's health care needs without patient face-to-face contact with the consultant. E-consults between health care providers are designed to offer a coordinated multidisciplinary case reviews, advisory opinions, and recommendations of care.

(f) “Health benefit policy” means any individual or group plan, policy, or contract for health care services issued, delivered, issued for delivery, executed, or renewed in this Territory, including, but not limited to, those contracts executed by the Territory on behalf of state employees and any health insurance plan.

(g) “Interactive health communications” means communication using multimedia communications equipment that includes, at a minimum, audio and video equipment permitting two-way, real time interactive communication between the patient and distant site physician or practitioner. Telephones, facsimile machines, and electronic mail systems do not meet the definition of an interactive telecommunications system.

(h) “Insurer” means an accident and sickness insurer, fraternal benefit society, hospital service corporation, medical service corporation, health care corporation, health maintenance organization, preferred provider organization, provider sponsored health care corporation, managed care entity, or any similar entity authorized to issue contracts under this title or to provide health benefit policies.

(i) “Licensure for Telemedicine” means a telemedicine license or any current Virgin Islands physician licensure, including unrestricted, institutional, special restricted and special unrestricted.

(j) “Mobile Health (mHealth)” means Smartphone apps designed to foster health and well-being, that offer a wide range of health-related help, including apps that send targeted text messages to encourage healthy behaviors, alerts about disease outbreaks, and reminders that help patients adhere to specific care regimens. MHealth uses cameras, microphones, or other sensors and transducers to capture vital signs and document RPM.

(k) “Originating site” means the site of the patient in this Territory at the time health care services are provided by means of telemedicine or telehealth, unless the term is otherwise defined by the parties and provided, however, that notwithstanding any other
provision of law, insurers and providers may agree to alternative siting arrangements deemed appropriate by the parties.

(l) “Provider–patient relationship” means any provider–patient relationship that is a consensual relationship in which the patient or surrogate knowingly seeks the provider’s assistance and in which the provider knowingly accepts the person or patient as a patient. This relationship may be established through telehealth.

(m) “Registration” or “Certification to Practice Telehealth” means the certification obtained after registration pursuant section 45g of this subchapter, or any authorization issued to Telehealth Providers for the practice of medicine through telehealth in the Virgin Islands.

(n) “Remote Patient Monitoring (RPM)” means personal health and medical data collection from a patient in one location, which is then transmitted to a clinician in a different location, which helps clinicians and patients manage chronic illness, and uses devices, such as Holter monitors, to transmit information, including vital statistics such as heart rate, blood pressure, and blood oxygen levels.

(o) “Store and forward transfer” means the transmission of a patient’s medical information either to or from an originating site or to or from the provider at the distant site, but does not require the patient being present nor must it be in real time.

(p) “Synchronous interaction” means a real-time interaction between a patient located at the originating site and a health care provider located at a distant site.

(q) "Telehealth" means the use of electronic information and telecommunication technologies to support and promote long-distance clinical health care, patient and professional health-related education, public health and health administration, as defined by the Centers for Disease Control, Health Resources and Services Administration and the Office of the National Coordinator, and includes the use of synchronous (Live video) or asynchronous (store and forward) telecommunications technology by a telehealth provider to provide health care services such as, but not limited to - assessment, diagnosis, health care provider consultation, treatment, and monitoring of a patient; transfer of medical data; patient and professional health-related education; public health services and mobile health.

(r) “Telehealth provider” means a provider using Telehealth to provide telemedicine, medical or health services, and includes but is not limited to all the following providers: Physicians, Nurse Practitioners, Certified Nurse Midwives, Psychiatrists, certified nurse anesthetists, Psychiatric clinical nurse practitioner, Marriage and family therapist/counselor, school psychologist, substance abuse practitioner, clinical nurse specialists, clinical psychologists, physician assistants, speech therapists, clinical nurse specialist, audiologists, physical therapists, social workers, clinical social workers,
dentist, dental hygienist, dental therapist, mental health professionals, pharmacist, registered dietitians, nutritionist, podiatrist, occupational therapist, naturopathic practitioners, pharmacists, audiologist, and allied health professionals as specified by the Allied Health Board or Virgin Islands Department of Health in the absence of a board.

(s) “Telehealth Site” means the facility which hosts patient access to a remote provider and includes but is not limited to: Physician offices, health care provider offices/homes, Federally Qualified Health Centers, Hospitals, Department of Health, skilled nursing homes, behavioral health facilities, youth rehabilitation facilities, Urgent Care Centers, Wellness Centers, Supportive Housing Facility, Senior living, and Community-based substance abuse center.

(t) “Telemedicine” means the practice of medicine or delivery of clinical services using electronic communication, information technology, or other means between a physician or health care provider in one location and a patient in another location, with or without an intervening health care provider. Telemedicine refers to the interactive health communications with a health care provider on both ends of the exchange and is a form of Telehealth used by a Telehealth Provider to provide treatment and prescribe medicine or medication through electronic communication, information technology. The practice of Telemedicine by Telehealth Providers and is required to take into account aspects defined by the Centers for Medicare Services (CMS) so consultations given to patients by Telehealth Providers’ qualify for reimbursement by Medicare, Medicaid, and other health insurance plans.

(u) “Telemedicine Services Agreement” means a cooperative agreement within the Territory or between a hospital or licensed physician in the Territory and one outside the Territory for improved health care delivery, including but not limited to tele-stroke/neurology and tele-radiology, in order to decrease patient and physician travel and enhance inter-facility cooperation.

§ 45c. Telehealth Act Scope

1) The Telehealth Act allows Telehealth Providers to use services, which include but are not limited to the following:
   (a) Consultations between physicians and other health care providers or the transmission and review of digital images, pathology specimens, test results, or other medical data by physicians or health care providers related to the care of patients in this Territory.

(b) Treating a patient with an emergency medical condition or treating a patient during a state of emergency as defined by any one of the following:
   i. “emergency medical condition” means a medical condition manifesting itself by acute symptoms of sufficient severity that the absence of immediate medical attention will result in serious jeopardy to patient health, serious
impairment to bodily functions, or serious dysfunction of a body organ or part.

ii. “state of emergency” means any declaration by the Governor, President, or department or agency authorized (including health) requiring emergency management and that is deemed a major disaster or imminent threat to health or welfare.

iii. “pursuant to 27 V.I.C. § 50s, 27 V.I.C. § 165l, 27 V.I.C. § 15” means participation or exemptions made for treating a patient during a disaster, emergency, or declaration/state of emergency.

(c) Treating and providing medical and health care services to a patient by telecommunications or electronic communications and facilitating the assessment, diagnosis, education, care management, and self-management of a patient's health care by a Telehealth Provider practicing within his or her scope of practice; such services that can be provided through a Telehealth Provider shall include, but are not limited to:

i. prescribing medicine

ii. immediate attention from a specialist

iii. immediate diagnoses by a specialist in a particular area or region

iv. specialty care

v. distance education for students of nursing and medical schools

vi. digital records of radiologic examinations and ultrasounds

vii. medical emergencies care

(a) Telehealth and Telemedicine should not be used for any condition where an in-person exam is required because of severe symptoms, certain protocol-driven procedures, or aggressive interventions. The Centers for Medicare and Medicaid Services (CMS) approved Telehealth services and Telehealth Medical Specialties do not require physical patient-provider relationships.

§ 45d Telemedicine Licensure
The Virgin Islands Board of Medical Examiners shall regulate the practice of telemedicine in the Territory in accordance with the provisions of this subchapter and the following:

(a) No person shall practice or attempt to practice medicine at a distant site between the Virgin Islands and a foreign jurisdiction.

(b) No person shall practice or attempt to practice medicine at a distant site between the Virgin Islands and another United States jurisdiction without first complying with the provisions of this subchapter and without being a holder, of a Virgin Islands medical license.

(c) Telemedicine services in the Territory shall operate in accordance with current accepted core standards for telemedicine operations.
§ 45e Regulation of Telemedicine Licensure

The Board of Medical Examiners may establish regulations for telemedicine licensure as follows:

(a) The Board of Medical Examiners shall issue a telemedicine license to authorize certain physicians, who hold a full and unrestricted license to practice medicine in another state or territory of the United States, to provide telemedicine services in the Virgin Islands. Telemedicine licenses shall be without private practice rights and without subversion of reciprocity. Any healthcare professional licensed in the Virgin Islands may practice telemedicine without restriction.

(b) [Deleted].

(c) The Board of Medical Examiners shall establish by rules and regulations the requirements for telemedicine licensure in accordance with this subchapter, provided that the rules and regulations include the following:

(1) A physician holding only a telemedicine license under this subchapter shall not open an office in the Virgin Islands, shall not meet with patients in the Virgin Islands, and shall not receive calls from patients in the Virgin Islands.

(2) The physician, when examining a patient by telemedicine, shall establish a bona fide physician-patient relationship by:

(A) Establishing a relationship and coordinating with the patient’s Virgin Islands-licensed healthcare professional.

(B) Establishing a diagnosis through the use of accepted medical practices including, but not limited to, patient history, mental status and appropriate diagnostic and laboratory testing.

(C) Discussing with the patient any diagnosis as well as the risks and benefits of various treatment options.

(D) Ensuring the availability for appropriate follow-up care.

(E) Fulfilling any other requirements as deemed appropriate and necessary by the Board of Medical Examiners.

(d) Any physician licensed to practice telemedicine in accordance with this subchapter, shall be subject to the provisions of this subchapter, the jurisdiction of the Board of Medical Examiners, applicable Virgin Islands law, and the jurisdiction of the courts of the Virgin Islands with respect to providing medical services to Virgin Islands residents.

(e) The Department of Health and the Territory’s hospitals and medical centers and Virgin Islands-licensed health care professionals are authorized to bill third-party payers for consultations and follow-up care provided by licensed providers of telemedicine services.

§ 45f Out-of-Territory Telehealth Providers

Except as provided in 45e, a health care professional not licensed in this Territory may provide health care services to patients located in this Territory using telehealth if the health care professional registers with the applicable board, or the department of health if there is no board, and provides health care services within the applicable scope of practice established by Virgin Islands law.
§ 45g. Registration of Telehealth Providers

1) The DOH will assess the number of Telehealth providers in the Territory on an annual basis and list all Telehealth providers on their website. All health care providers in the Territory practicing Telehealth shall register as Telehealth provider by completing a one-page form with the DOH, established by the DOH.
   a. Registration of health care providers in the Territory as Telehealth providers shall take place by January 2021 and continue thereafter.

2) If not currently licensed as a health care provider in the Territory, registration as a Telehealth provider shall be completed at the time of licensing. Applicants seeking licensure to any Board under Title 27 can be, upon Board approval of their application, registered as Telehealth provider by the Board on a form established by the Board.
   a. The Board shall provide the DOH all Telehealth providers registered by the Board.
      i. Applicants that do not have a Board under Title 27 shall register as a Telehealth provider through DOH at the time of licensing, on a form established by DOH.

3) A Patient-Telehealth Provider Relationship can be established via Telehealth.

§ 45h. Exemptions

A health care professional who is not registered to provide health care services in this Territory but who holds an active license to provide health care services in another state or jurisdiction, and who provides health care services using Telehealth to a patient located in this Territory, is not subject to the registration requirement under section (45g) if the services are provided:

1) In response to an emergency medical condition or state of emergency as defined in section (45c); or

2) In consultation with a health care professional licensed in this Territory who has ultimate authority over the diagnosis and care of the patient.

§ 45i. Telehealth Medical Malpractice and Liability Insurance

A physician or health care provider registered as a Telehealth provider and providing or practicing Telehealth under this subchapter shall maintain medical malpractice or professional liability coverage that includes coverage of financial responsibility for Telehealth services provided to patients in this Territory and in the health care provider’s state, District of Columbia or any other territory of the United States.

§ 45j. Informed Consent

Prior to the delivery of health care via telehealth, the healthcare provider initiating the use of telehealth shall inform the patient about the use of telehealth and obtain verbal or written consent from the patient for the use of telehealth as an acceptable mode of delivering health care services and public health. The consent shall be documented in the
patient’s medical record. In regards to informed consent, Telehealth providers must meet the following requirements:

(a) No medical treatment may be administered to a client without informed consent except in an emergency situation or circumstances otherwise authorized by law.

(b) Treatment may be initiated without informed consent if there is documentation within the client's health record that authorizes treatment or an emergency exists where there is an unanticipated condition in which immediate action is necessary and it is impracticable to obtain the required consent for preservation of life or the prevention of serious bodily harm to the client or others or to alleviate severe physical pain; provided that any action taken by the Telehealth Provider without informed consent is within the customary practice of Telehealth providers of good standing in similar circumstances.

(c) It is the responsibility of a Telehealth provider to determine what information a reasonable person in the patient's condition and circumstances would consider material to a decision to accept or refuse a proposed treatment or procedure. The disclosure of any material information and obtaining informed consent shall be the responsibility of the Telehealth Provider.

(d) Informed consent must include an explanation by a physician of the patient’s right to refuse or accept medical treatment.

(e) Once an initial informed consent is obtained which establishes a provider-patient relationship, a Telehealth provider is not required to obtain informed consent each time a Telehealth visit is conducted or a treatment or procedure is administered unless such treatment or procedure was not covered by the initial informed consent or material circumstance or risks change.

(f) If the patient refuses consent and the use of Telehealth services, no Telehealth provider may render said service or bill the patient for said consultation, once that service is refused.

(g) If the patient is a minor or a person who is adjudicated incompetent, these requirements shall apply to his conservator, guardian, or legal representative.

(h) The failure of a healthcare provider to comply with this section shall constitute unprofessional conduct.

§ 45k. Internet Diagnosis and Treatment

1) When a physician or health care provider uses Telehealth or Telemedicine to diagnose and/or treat a patient located in this Territory, the physician or health care provider may not provide treatment recommendations, including issuing a prescription, unless the following requirements are met:

a. The physician or health care provider is licensed to practice medicine and registered as a Telehealth Provider as required under section (45d and 45g)

b. The physician’s or health care provider’s name and contact information have been made available to the patient.

c. Informed consent as required under section (45j) is obtained from the patient

d. A documented patient evaluation has been performed
i. A patient evaluation is required to meet or exceed the standard of minimally competent medical practitioner
e. A patient health care record is prepared and maintained

2) A Telehealth provider may use Telehealth to perform a patient evaluation. During an initial patient visit a Telehealth provider may conduct a patient evaluation sufficient to diagnose and treat the patient, and the Telehealth provider is required to survey the patient's medical history or conduct a questionnaire examination of the patient before using Telehealth to provide health care services to the patient.

3) Telehealth or telemedicine can be provided through electronic means, but it is the intent of the Telehealth Act to mitigate geographic discrimination in the delivery of health care by recognizing the application of and payment for covered medical care provided by means of telehealth only if such services are provided by a physician or by another health care practitioner or professional acting within the scope of practice of such physician or health care provider.
   a. A physician or health care provider licensed to practice within his or her scope of practice, shall be held to the same standards of practice and conduct, including patient confidentiality and record keeping, regardless of whether health care services are provided in person or by Telehealth.

4) A telehealth provider has the duty to practice in a manner consistent with his or her scope of practice and the prevailing professional standard of practice for a health care professional who provides in-person health care services to patients in this Territory.

5) A physician or health care provider licensed to practice medicine or who provides health care services by telehealth is responsible for the quality and safe use of equipment and technology that is integral to patient diagnosis and treatment. The equipment and technology used by the physician or health care provider to provide health care services by telehealth must comply with the Health Information Technology for Economic Health Act (HITECH) and HIPAA Privacy, Security and Breach Notification Rules.
   a. Providing treatment recommendations, including issuing a prescription, based only on a static electronic questionnaire does not meet the standard of minimally competent medical practice.

§ 45l. Patient Health Records
1) A telehealth provider shall document in the patient’s medical record the health care services rendered using Telehealth according to the same standard as used for in-person services. Medical records, including video, audio, electronic, or other records generated as a result of providing such services, are confidential and shall meet federal
requirements for Electronic Health Record (EHR) under the HITECH Act and HIPAA Privacy, Security and Breach Notification Rules.

2) Any Telehealth Provider who holds a registration or is permitted to practice Telehealth in accordance with the provisions of this Act shall be deemed to have consented to produce any health record or any material or report as requested by the applicable Virgin Islands Board or DOH if there is no Board, provided that such production does not violate EHR, HITECH Act and HIPAA, and protects the confidentiality and rights of the patient.

§ 45m. Insurer

1) Each insurer proposing to issue a health benefit policy shall provide coverage for the cost of health care services provided through Telehealth or Telemedicine.

2) An insurer shall not exclude a service for coverage solely because the service is provided through telehealth unless the service is not appropriate for Telehealth.

3) Each insurer proposing to issue a health benefit policy shall provide coverage for the cost of health care services provided through telehealth or telemedicine. No insurer shall have the right to mandate which telemedicine platform is to be used in order to be reimbursed. Furthermore, all insurers must reimburse for Telehealth and Telemedicine services as long as the platform used is HIPAA Compliant.

4) An insurer shall reimburse the telehealth provider for the diagnosis, consultation, or treatment of the insured delivered through Telehealth or Telemedicine services on the same basis and at least at the rate that the insurer is responsible for coverage for the provision of the same service through in-person consultation or contact.

5) Payment for Telehealth or Telemedicine interactions shall include reasonable compensation to the originating or distant site for the transmission fees incurred during the delivery of health care services, if applicable. The originating site is eligible for a facility fee. Telehealth providers eligible for the originating and distant site facility fee include but are not limited to:

   i. Physicians
   ii. Clinics
   iii. Department of Health
   iv. Federal Qualified Health Centers
   v. Physician group practices
   vi. Wellness Centers
   vii. Hospitals
   viii. Dental practice
6) No insurer shall impose any annual or lifetime dollar maximum on coverage for telehealth or telemedicine services other than an annual or lifetime dollar maximum that applies in the aggregate to all items and services covered under the policy, or impose upon any person receiving benefits pursuant to this section any copayment, coinsurance, or deductible amounts, or any policy year, calendar year, lifetime, or other durational benefit limitation or maximum for benefits or services, that is not equally imposed upon all terms and services covered under the health benefit policy.

7) No insurer shall require the policy holder to use Telehealth services in lieu of in-person consultation or contact.

8) Within 120 days after the enactment of this Act, every health benefit policy that is issued, amended, or renewed shall include payment for services that are covered under such health benefit policy and are appropriately provided through Telemedicine or Telehealth in accordance with this section and generally accepted health care practices and standards prevailing in the applicable professional community at the time the services were provided. The coverage required in this Code section may be subject to all terms and conditions of the applicable health benefit plan. Telehealth and Telemedicine coverage will follow services recognized by CMS and the American Medical Association (AMA)

§ 45n. Rule Making Authority on the Practice of Telehealth and Telemedicine

The Board or DOH if there is no Board, is hereby empowered to implement rules and regulations as are necessary to enforce the provisions of this Act or as required by the practice of Telemedicine in the Virgin Islands. In regulating all that pertains to telehealth and telemedicine, the Board or Department if there is no Board shall take into consideration the comments, suggestions, and recommendations of academia, groups, and associations that represent physicians and health care providers, without constituting a limitation to its rule making authority over said matters.

§45o Telemedicine and Prescriptions

1) Under federal law and the Haight Online Pharmacy Consumer Protection Act of 2008 (Ryan Haight Act; P.L. 110-425) the practice of Telemedicine allows a health care practitioner to prescribe a controlled substance via Telemedicine without performing an in-person medical examination of the patient. Notwithstanding federal law, telehealth providers can prescribe medications but are restricted under the Telehealth Act from prescribing controlled substances according to the requirements of this section.

2) A Telehealth provider may not use Telemedicine to prescribe a controlled substance unless Drug Enforcement Administration (DEA) regulations are met and the controlled substance is prescribed for the following:
   a. The treatment of a psychiatric disorder;
b. Inpatient treatment at a hospital;
c. The treatment of a patient receiving hospice services;
d. The treatment of a resident of a nursing home;
e. Treatment approved by the Department of Health and the Board; and
f. Treatment authorized under state of emergency or during an emergency medical condition.

3) The Department in conjunction with the Board of Medical Examiners may modify rules and procedures described under section 45e, as necessary to ensure that reimbursement for Telemedicine medical services is provided in a cost-effective manner and only in circumstances in which the provision of those services is clinically effective.

§45p Penalties
Any person who violates any of the provisions of this Act or any Regulations adopted thereunder shall be subject to fines or penalties, and any Telehealth Providers’ registered to practice Telehealth may be revoked or suspended as determined by the Board or DOH. The DOH or Board shall promulgate the standards and enforcement for these fines or penalties through its rules and regulations no later than one (1) year from the enactment of this Act.

1) The Board, or DOH may take disciplinary action against Telehealth providers if they:
   a. Are unregistered or are not licensed in violation of this Telehealth Act;
   b. Fail to notify the applicable Board, or DOH, of any adverse actions taken against their license;
   c. Have restrictions placed on or disciplinary action taken against their license in any state or jurisdiction and failed to report such action;
   d. Violates any of the requirements of this Telehealth Act or rules and regulations promulgated in conjunction or compliance with this Telehealth Act;
   e. Commits any act that constitutes grounds for disciplinary action.

2) Disciplinary action taken by a Board, or DOH may include suspension or revocation of the provider’s registration or the issuance of a reprimand or letter of concern. A suspension may be accompanied by a corrective action plan as determined by the Board, or DOH, the completion of which may lead to the suspended registration being reinstated according to rules adopted by the Board, or DOH.

§45q Severability
If any Section or provision of this Act were held to be null or unconstitutional by a competent court with jurisdiction, said holding shall not affect or invalidate the remaining provisions of this Act. The effect of said holding shall be limited to the paragraph, section, part, or provision thus held to be null or unconstitutional.

§45r Conflict of Law
If there is a conflict between this subchapter and other laws, this subchapter controls.
§ 45s Effectiveness
If not otherwise indicated, the provisions of this Act are effective upon enactment.

BILL SUMMARY:
Enacts the first Telehealth Act of the Virgin Islands which includes telemedicine and broadens the practice of medicine in the Virgin Islands through telehealth. This Act expands the types of services a patient can receive using telehealth and ensures that insurers cover these services and providers can receive reimbursement for these services. The Act also establishes licensing and registration requirements to practice telehealth and telemedicine, and oversees individuals practicing so they meet all applicable medical standards. The purpose of the Act is to continue to guarantee that new technologies and services are implemented and made available to the Virgin Islands community, which will ensure that the health care services rendered and offered to the residents of these islands are of the highest quality and eliminate barriers to accessing health care.