## Mississippi Secretary of State

125 South Congress St., P. O. Box 136, Jackson, MS 39205-0136

<b>ADMINISTR</b>	<b>ATIVE</b>	<b>PROCEDURES</b>	NOTICE	FILING
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ADMINISTRATIVE PROCEDURES	NOTICE FILING							
AGENCY NAME Mississippi State Board of Medical Licensure		CONTACT PERSON Rhonda Freeman	TELEPHONE NUMBER (601) 987-3079					
ADDRESS 1867 Crane Ridge Drive, Suite 200-B		CITY Jackson		STATE MS	ZIP 39216			
MAIL SUBMIT DATE 12/11/17		Name or number of rule(s): Part 2635 Chapter 5: Telemedicine, Rule 5.7						
Short explanation of rule/amendment,	repeal and reason	s) for proposing rule/amendm	ent/repeal:	Rule 5.7 is b	eing amended to			
include Level Two Hospital Trauma Centers.								
Specific legal authority authorizing the promulgation of rule: 73-43-11								
List all rules repealed, amended, or suspended by the proposed rule: Part 2635 Chapter 5: Telemedicine								
ORAL PROCEEDING:								
An oral proceeding is scheduled for	this rule on Date	:: Time: Place: _						
Presently, an oral proceeding is not scheduled on this rule.								
If an oral proceeding is not scheduled, an oral pr ten (10) or more persons. The written request s notice of proposed rule adoption and should inc agent or attorney, the name, address, email add comment period, written submissions including	hould be submitted to to ude the name, address, ress, and telephone nun	ne agency contact person at the above email address, and telephone numbe nber of the party or parties you repres	e address withir r of the person( sent. At any tim	n twenty (20) da (s) making the r ne within the tw	ays after the filing of this equest; and, if you are an venty-five (25) day public			
ECONOMIC IMPACT STATEMENT:								
Economic impact statement not required for this rule.   Concise summary of economic impact statement attached.								
TEMPORARY RULES	SED ACTION ON RULES	FINAL ACTION ON RULES						
Effective date:         Repea           Immediately upon filing         Adopt           Other (specify):         Y 30 days		ule(s) Iment to existing rule(s) I of existing rule(s) ion by reference al effective date:	Date Proposed Rule Filed: Action taken: Adopted with no changes in text Adopted with changes Adopted by reference Withdrawn Repeal adopted as proposed Effective date: 30 days after filing Other (specify):					
Printed name and Title of person au	thorized to file ru	ıles: Rhonda Freeman						
Signature of person authorized to file rules:								
S	DO NOT	WRITE BELOW THIS LINE			*			
OFFICIAL FILING STAMP	OFF	ICIAL FILING STAMP	0	FFICIAL FILIN	NG STAMP			
		EC 1 1 2017 ISSISSIPPI TARY OF STATE						
Accepted for filing by  Accepted for #2306			Accepted for filing by					

The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.

## Part 2635 Chapter 5: Practice of Telemedicine

*Rule 5.1 Definitions*. For the purpose of Part 2635, Chapter 5 only, the following terms have the meanings indicated:

- A. "<u>Physician</u>" means any person licensed to practice medicine or osteopathic medicine in the state of Mississippi.
- B. <u>Telemedicine</u>" is the practice of medicine using electronic communication, information technology or other means between a physician in one location and a patient in another location with or without an intervening health care provider. This definition does not include the practice of medicine through postal or courier services.
- C. <u>Telemergency medicine</u>" is a unique combination of telemedicine and the collaborative/consultative role of a physician board certified in emergency medicine, and an appropriate skilled health professional (nurse practitioner or physician assistant).

Source: Miss. Code Ann. §73-25-34 (1972, as amended).

Rule 5.2 Licensure. The practice of medicine is deemed to occur in the location of the patient. Therefore only physicians holding a valid Mississippi license are allowed to practice telemedicine in Mississippi. The interpretation of clinical laboratory studies as well as pathology and histopathology studies performed by physicians without Mississippi licensure is not the practice of telemedicine provided a Mississippi licensed physician is responsible for accepting, rejecting, or modifying the interpretation. The Mississippi licensed physician must maintain exclusive control over any subsequent therapy or additional diagnostics.

Source: Miss. Code Ann. §73-25-34 (1972, as amended).

Rule 5.3 Informed Consent. The physician using telemedicine should obtain the patient's informed consent before providing care via telemedicine technology. In addition to information relative to treatment, the patient should be informed of the risk and benefits of being treated via a telemedicine network including how to receive follow-up care or assistance in the event of an adverse reaction to treatment or if there is a telemedicine equipment failure.

Source: Miss. Code Ann. §73-25-34 (1972, as amended).

Rule 5.4 Physician Patient Relationship. In order to practice telemedicine a valid "physician patient relationship" must be established. The elements of this valid relationship are:

- A. verify that the person requesting the medical treatment is in fact who they claim to be;
- B. conducting an appropriate history and physical examination of the patient that meets the applicable standard of care;
- C. establishing a diagnosis through the use of accepted medical practices, i.e., a patient history, mental status exam, physical exam and appropriate diagnostic and laboratory testing;
- D. discussing with the patient the diagnosis, risks and benefits of various treatment options to obtain informed consent;
- E. insuring the availability of appropriate follow-up care; and
- F. maintaining a complete medical record available to patient and other treating health care providers.

*Source: Miss. Code Ann. §73-25-34 (1972, as amended).* 

Rule 5.5 Examination. Physicians using telemedicine technologies to provide medical care to patients located in Mississippi must provide an appropriate examination prior to diagnosis and treatment of the patient. However, this exam need not be in person if the technology is sufficient to provide the same information to the physician as if the exam had been performed face to face.

Other exams may be appropriate if a licensed health care provider is on site with the patient and is able to provide various physical findings that the physician needs to complete an adequate assessment. However a simple questionnaire without an appropriate exam is in violation of this policy and may subject the physician to discipline by the Board.

*Source: Miss. Code Ann. §73-25-34 (1972, as amended).* 

Rule 5.6 Medical Records. The physician treating a patient through a telemedicine network must maintain a complete record of the patient's care. The physician must maintain the record's confidentiality and disclose the record to the patient consistent with state and federal laws. If the patient has a primary treating physician and a telemedicine physician for the same medical condition, then the primary physician's medical record and the telemedicine physician's record constitute one complete patient record.

*Source: Miss. Code Ann. §73-25-34 (1972, as amended).* 

Rule 5.7 Collaborative/Consultative Physician Limited. No physician practicing telemergency medicine shall be authorized to function in a collaborative/consultative role as outlined in Part 2630, Chapter 1 unless his or her practice location is a Level One or Level Two\_Hospital Trauma Center that is able to provide continuous twenty-four hour coverage and has an existing air ambulance system in place. Coverage will be authorized only for those emergency departments of licensed hospitals who have an average daily census of thirty (30) or fewer acute care/medical surgical occupied beds as defined by their Medicare Cost Report.

Source: Miss. Code Ann. §73-25-34 (1972, as amended).

Rule 5.8 Reporting Requirements. Annual reports detailing quality assurance activities, adverse or sentinel events shall be submitted for review to the Mississippi State Board of Medical Licensure by all institutions and/or hospitals operating telemergency programs.

Amended October 15, 2003. Amended November 4, 2004. Amended January 30, 2006. Amended May 20, 2010. Amended March 16, 2017.

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