§ 2805-u. Credentialing and privileging of health care practitioners providing telemedicine services. 1. For purposes of this section:

(a) "Distant site hospital" means a hospital licensed pursuant to this article or a hospital licensed by another state, that has entered into an agreement with an originating hospital to make available one or more health care practitioners that are members of its clinical staff to the originating hospital for the purposes of providing telemedicine services. To qualify as a distant site hospital for purposes of this article, a hospital licensed by another state must comply with the federal regulations governing participation by hospitals in Medicare.

(b) "Health care practitioner" shall mean a person licensed pursuant to article one hundred thirty-one, one hundred thirty-one-B, one hundred thirty-three, one hundred thirty-nine, one hundred forty, one hundred forty-one, one hundred forty-three, one hundred forty-four, one hundred fifty-three, one hundred fifty-four or one hundred fifty-nine of the education law, or as otherwise authorized by the commissioner.

(c) "Originating hospital" means the hospital at which a patient is located at the time telemedicine services are provided to him or her.

(d) "Telemedicine" means the delivery of clinical health care services by means of real time two-way electronic audio-visual communications which facilitate the assessment, diagnosis, consultation, treatment, education, care management and self management of a patient's health care while such patient is at the originating site and the health care provider is at a distant site.

2. When telemedicine services are provided to an originating hospital's patients pursuant to an agreement with a distant site hospital, the originating hospital may, in lieu of satisfying the requirements set forth in section twenty-eight hundred five-k of this article, rely on the credentialing and privileging decisions made by the distant site hospital in granting or renewing privileges to a health care practitioner who is a member of the clinical staff of the distant site hospital, provided that:

(a) the distant site hospital participates in Medicare and Medicaid;

(b) each health care practitioner providing telemedicine is licensed to practice in this state;

(c) the distant site hospital, in accordance with requirements

otherwise applicable to that hospital, collects and evaluates all credentialing information concerning each health care practitioner providing telemedicine services, performs all required verification activities, and acts on behalf of the originating site hospital for such credentialing purposes;

(d) the distant site hospital reviews periodically, at least every two years, and as otherwise warranted based on outcomes, complaints or other circumstances, the credentials, privileges, physical and mental capacity, and competence in delivering health care services of each health care practitioner providing telemedicine services, consistent with requirements otherwise applicable to that hospital; reports the results of such review to the originating hospital; and notifies the originating hospital immediately upon any suspension, revocation, or limitation of such privileges;

(e) with respect to each distant site health care practitioner who holds privileges at the originating hospital, the originating hospital conducts a periodic internal review, at least every two years, of the distant site practitioner's performance of these privileges and provides the distant site hospital with such performance information for use in the distant hospital's periodic appraisal of the distant site physician or health care practitioner. Such information shall include, at a minimum, all adverse events that result from the telemedicine services provided by the distant site health care practitioner to the originating hospital's patients, all complaints the originating hospital has received about the distant site practitioner, and any revocation, suspension or limitation of the distant site practitioner's privileges by the originating hospital; and

(f) the agreement entered into between the originating site hospital and distant site hospital shall be in writing and shall, at a minimum:

(i) provide the categories of health care practitioners that are eligible candidates for appointment to the originating hospital's clinical staff,

(ii) require the governing body of the distant site hospital to comply with the Medicare conditions of participation governing the appointment of medical staff with regard to the health care practitioners providing telemedicine services,

(iii) itemize the credentialing information to be collected and the

required verification activities to be performed by the distant site hospital and relied upon by the originating hospital in considering the recommendations of the distant site hospital,

(iv) require each distant site health care practitioner providing telemedicine services to be licensed to practice in this state and privileged at the distant site hospital,

(v) require the distant site hospital to provide to the originating hospital a current list of each distant site health care practitioner's privileges at the distant site hospital, and

(vi) require the distant site hospital to conduct a periodic review consistent with requirements otherwise applicable to that hospital, at least every two years, and as otherwise warranted based on outcomes, complaints or other circumstances, the credentials, privileges, physical and mental capacity, and competence in delivering health care services of each health care practitioner providing telemedicine services; to provide the originating hospital with the results of such review; and to notify the originating hospital immediately upon any suspension, revocation, or limitation of such privileges.

3. Nothing in this section shall be construed as allowing an originating hospital to delegate its authority over and responsibility for decisions concerning the credentialing and granting staff membership or professional privileges to health care practitioners providing telemedicine services.

4. Notwithstanding any contrary provision of law, an originating hospital shall not be required to provide a physical examination or to maintain recorded medical history including immunizations for a health care provider providing consultations solely through telemedicine from a distant site hospital.