

27 administer and support the activities of the task force under
28 this section.

29 (2) Members of the task force shall serve without
30 compensation and are not entitled to reimbursement for per diem
31 or travel expenses. The task force shall consist of the
32 following 19 members:

33 (a) The Secretary of Health Care Administration or his or
34 her designee, who shall serve as the chair of the task force.

35 (b) The State Surgeon General or his or her designee.

36 (c) Three representatives of hospitals or facilities
37 licensed under chapter 395, three representatives of health
38 insurers that offer coverage for telehealth services, two
39 representatives of organizations that represent health care
40 facilities, and two representatives of entities that create or
41 sell telehealth products, all appointed by the Secretary of
42 Health Care Administration.

43 (d) Five health care practitioners, each of whom practices
44 in a different area of medicine, and two representatives of
45 organizations that represent health care practitioners, all
46 appointed by the State Surgeon General.

47 (3) The task force shall compile and analyze data and
48 information on the following:

49 (a) The frequency and extent of the use of telehealth
50 technology and equipment by health care practitioners and health
51 care facilities nationally and in this state.

52 (b) The costs and cost savings associated with using

53 telehealth technology and equipment.

54 (c) The types of telehealth services available.

55 (d) The extent of available health insurance coverage for
56 telehealth services. The task force shall conduct a comparative
57 analysis of such coverage compared to available coverage for in-
58 person services. The analysis must include:

59 1. Covered medical or other health care services.

60 2. A description of payment rates for such telehealth
61 services and whether they are below, equal to, or above payment
62 rates for in-person services.

63 3. Annual and lifetime dollar maximums on coverage for
64 telehealth and in-person services.

65 4. Copayment, coinsurance, and deductible amounts; policy
66 year, calendar year, lifetime, or other durational benefit
67 limitations; and maximum benefits for telehealth and in-person
68 services.

69 5. Any unique conditions imposed as a prerequisite to
70 obtaining coverage for telehealth services.

71 (e) Barriers to implementing the use of, using, or
72 accessing telehealth services.

73 (4) The task force shall convene its first meeting by
74 September 1, 2016, and shall meet as often as necessary to
75 fulfill its responsibilities under this section. Meetings may be
76 conducted in person, by teleconference, or by other electronic
77 means.

78 (5) The task force shall submit a report by June 30, 2017,

79 to the Governor, the President of the Senate, and the Speaker of
 80 the House of Representatives which includes its findings,
 81 conclusions, and recommendations.

82 (6) This section is repealed December 1, 2017.

83 Section 2. Section 456.51, Florida Statutes, is created to
 84 read:

85 456.51 Telehealth.—

86 (1) A health care practitioner, a person certified under
 87 part III of chapter 401, or a person certified under part IV of
 88 chapter 468 who is practicing within the scope of his or her
 89 license or certification may provide telehealth services. A
 90 practitioner or person who is not a physician, but who provides
 91 telehealth services within the scope of his or her license or
 92 certification, may not be considered to be practicing medicine
 93 without a license.

94 (2) As used in this section, the term "telehealth" means
 95 the use of synchronous or asynchronous telecommunications
 96 technology by a health care practitioner, a person certified
 97 under part III of chapter 401, or a person certified under part
 98 IV of chapter 468 to provide medical or other health care
 99 services, including, but not limited to, patient assessment,
 100 diagnosis, consultation, treatment, or remote monitoring; the
 101 transfer of medical or health data; patient and professional
 102 health-related education; the delivery of public health
 103 services; and health care administration functions.

104 Section 3. This act shall take effect July 1, 2016.