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2021 SD S 96

Author: Health and Human Services
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96th Legislative Session

2021 South Dakota Legislature

Senate Bill 96

ENROLLED

An Act

ENTITLED An Act to revise certain provisions regarding the use of telehealth technologies.

Be it enacted by the Legislature of the State of South Dakota:

Section 1. That § 34-52-1 be AMENDED.

34-52-1. Definitions.

Terms used in this chapter mean:

(1) "Health care professional," as defined in § 58-17F-1;

(2) "Health care facility," any office or institution where health services are provided, including any hospital, clinic, ambulatory surgery center, outpatient care facility, nursing home, assisted living facility, laboratory, or office of a health care professional;

(3) "Originating site," a site where a patient is located at the time health care services are delivered to the patient via telehealth;

(4) "Store-and-forward technology," secure electronic information, imaging, or data, including audio, video, and data communication that is transferred or recorded or otherwise stored for asynchronous delivery of health care services to a patient; and

(5) "Telehealth," the use of secure electronic information, imaging, and communication technologies by a health care professional to deliver health care services to a patient, including interactive audio-video, interactive audio with store and forward, store-and-forward technology, and remote patient monitoring. Telehealth does not include the delivery of health care services through electronic means under the provisions of chapter 27A-10.

Section 2. That § 34-52-3 be AMENDED.

34-52-3. Provider-patient relationship required--Exceptions.

Any health care professional who utilizes telehealth shall ensure that a proper health provider-patient relationship is established and includes:

(1) Verifying and authenticating the location and, to the extent reasonable, identifying the requesting patient;

(2) Disclosing and validating the health care professional's identity and applicable credentials, as appropriate;

(3) Obtaining appropriate consent for treatment from a requesting patient after disclosure regarding the delivery models and treatment methods or limitations;

(4) Establishing a diagnosis through the use of acceptable medical practices, including patient history, mental status examination, physical examination, and appropriate diagnostic and laboratory testing;

(5) Discussing with the patient the diagnosis and its evidentiary basis and the risks and benefits of various treatment options;

(6) Ensuring appropriate follow-up care for the patient;

(7) Providing a visit summary to the patient or consult note; and

(8) Utilizing technology sufficient to evaluate or diagnose and appropriately treat a patient for the condition as presented in accordance with the applicable standard of care.

Exceptions to the requirements of this section include on-call, cross coverage situations, and consultation with another health care professional who has an ongoing health care provider relationship with the patient and agrees to supervise the patient's care and emergency treatment.