
SENATE COMMITTEE ON APPROPRIATIONS

Senator Anthony Portantino, Chair
2021 - 2022 Regular Session

AB 32 (Aguiar-Curry) - Telehealth

Version: August 1, 2022

Urgency: No

Hearing Date: August 8, 2022

Policy Vote: HEALTH 10 - 0

Mandate: No

Consultant: Agnes Lee

Bill Summary: AB 32 would make various changes to Medi-Cal telehealth policy.

Fiscal Impact: Unknown ongoing costs, potentially millions of dollars (General Fund and federal funds). Establishing new patients that would not have taken place in the absence of telehealth modalities proposed under the bill would increase health utilization costs.

Background: Current law defines “telehealth” as the mode of delivering health care services and public health via information and communication technologies to facilitate the diagnosis, consultation, treatment, education, care management, and self-management of a patient’s health care. Telehealth facilitates patient self-management and caregiver support for patients and includes synchronous interactions and asynchronous store and forward transfers.

SB 184 (Committee on Budget and Fiscal Review, Chapter 47, Statutes of 2022) contained provisions related to Medi-Cal telehealth policy. The law outlines requirements on Medi-Cal providers, including federally qualified health centers (FQHCs), relating to the use of specified telehealth modalities, reimbursements, consent standards, privacy and security compliance, the establishment of new patient relationships, and in-person services or referrals. SB 184 provides that face-to-face contact is not required when covered Medi-Cal services are provided by video synchronous interaction, asynchronous store and forward, audio-only synchronous interaction, remote patient monitoring, or other permissible virtual communication modalities, meeting specified criteria. SB 184 also includes, among other things, the following provisions:

- Requires a Medi-Cal provider furnishing applicable health care services via audio-only synchronous interaction to also offer those same health care services via video synchronous interaction to preserve beneficiary choice.
- Authorizes a provider to establish a new patient relationship with a Medi-Cal beneficiary through video synchronous interaction, and prohibits a provider from doing so through other telehealth modalities.

Proposed Law: Specific provision of the bill would:

- Provide for exceptions from the requirement that providers furnishing services via audio-only synchronous interaction to also offer those same services via video synchronous interaction. Exceptions would include lack of broadband connectivity, as specified.

- Allow providers to establish a new patient through additional telehealth modalities, including asynchronous store and forward, or audio-only synchronous interaction.

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