

117TH CONGRESS
1ST SESSION

S. 155

To permit a licensed health care provider to provide health care services to individuals in one or more States in which the provider is not licensed.

IN THE SENATE OF THE UNITED STATES

FEBRUARY 2, 2021

Mr. CRUZ (for himself and Mrs. BLACKBURN) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To permit a licensed health care provider to provide health care services to individuals in one or more States in which the provider is not licensed.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Equal Access to Care
5 Act”.

6 **SEC. 2. FINDINGS.**

7 Congress finds the following:

8 (1) In public health emergencies, such as the
9 Coronavirus Disease 2019 pandemic, it is of para-

1 mount importance to deliver medical resources to
2 impacted areas where the need is greatest.

3 (2) Technologies that allow health care pro-
4 viders to deliver care across great distances can de-
5 liver medical care into impacted areas, including
6 mental health services and maintenance care for
7 chronic illnesses.

8 (3) Technologies that allow health care pro-
9 viders to deliver care across great distances can
10 thereby free local providers to address community
11 needs that providers can only address in person.

12 (4) Under the Constitution, the Commerce
13 Clause grants Congress the authority to regulate
14 commerce among the States.

15 **SEC. 3. INTERSTATE TELEMEDICINE.**

16 (a) IN GENERAL.—Notwithstanding any other provi-
17 sion of law, during the period described in subsection (b),
18 in the case of a physician, practitioner, or other health
19 care provider who is licensed or otherwise legally author-
20 ized to provide health care services in a primary State,
21 and who provides such health care services in interstate
22 commerce through electronic information or telecommuni-
23 cation technologies to an individual in a secondary State,
24 the location of the provision of such services shall be
25 deemed to be the primary State and any requirement that

1 such physician, practitioner, or other provider obtain a
2 comparable license or other comparable legal authorization
3 from the secondary State with respect to the provision of
4 such services (including requirements relating to the pre-
5 scribing of drugs in such secondary State) shall not apply.

6 (b) PERIOD DESCRIBED.—The period described in
7 this subsection is the period beginning on the date of en-
8 actment of this Act and ending on the date that is 180
9 days after the date on which the national emergency de-
10 clared by the President under the National Emergencies
11 Act (50 U.S.C. 1601 et seq.) with respect to the
12 Coronavirus Disease 2019 (COVID–19) ends.

13 (c) REVIEW OF REGULATIONS.—The head of each
14 Federal agency shall review existing guidance and regula-
15 tions to identify any such guidance or regulations that
16 may conflict with the provisions of this section. If the head
17 of an agency finds any such conflict, notwithstanding any
18 other provision of law, such agency head shall, not later
19 than 30 days after the date of enactment of this Act, issue
20 revised guidance or regulations to ensure compliance with
21 the provisions of this section.

22 (d) DEFINITIONS.—In this section:

23 (1) HEALTH CARE SERVICES.—The term
24 “health care services” shall not include services of
25 the type for which funding is prohibited under the

1 requirements contained in Public Law 116–94 as re-
2 relating to funds for programs authorized under sec-
3 tions 330 through 340 of the Public Health Service
4 Act (42 U.S.C. 254 through 256).

5 (2) PRIMARY STATE.—The term “primary
6 State” means, with respect to the provision of health
7 care services by a physician, practitioner, or other
8 health care provider in interstate commerce through
9 electronic information or telecommunication tech-
10 nologies, the State in which such physician, practi-
11 tioner, or provider is physically located and licensed.

12 (3) SECONDARY STATE.—The term “secondary
13 State” means, with respect to the provision of health
14 care services by a physician, practitioner, or other
15 health care provider in interstate commerce through
16 electronic information or telecommunication tech-
17 nologies, a State in which such physician, practi-
18 tioner, or other provider is not physically located or
19 licensed.

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