

TELEMEDICINE COMMITTEE February 4, 2010

The meeting was called to order at 9:46 a.m., by Timothy Turner, Chair. Committee members present were Jose Benavides, M.D.; Pat J. Crocker, D.O.; Manuel Guajardo, M.D.; Margaret McNeese, M.D.; and Timothy Webb. Other members present were Michael Arambula, M.D.; Julie Attebury; David Baucom; Patricia S. Blackwell; John Ellis, Jr.; J. Scott Holliday, D.O.; Melinda McMichael, M.D.; Charles E. Oswalt, III, M.D.; Allan Shulkin, M.D.; Wynne M. Snoots, M.D.; Paulette Southard; George Willeford III, M.D.; and Irvin E. Zeitler, Jr., D.O. Staff members present were Mari Robinson, J.D., Executive Director; Alan Moore, M.D., Medical Director; Jennifer Kaufman, Assistant General Counsel; and various staff.

Agenda item #2, Telemedicine presentation by Alexander H. Vo, PhD. Dr. Vo and G. Byron Brooks, E.E., M.D., with the University of Texas Medical Board, gave a telemedicine presentation illustrating the use of telemedicine technology.

Ben G. Raimer, M.D., FAAP, gave oral comments regarding the benefits and cost savings of the use of the telemedicine technology in underserved rural and criminal justice areas.

Agenda item #3, Discussion, recommendation and possible action regarding proposed amendments to the following 22 T.A.C.:

164.6. Required Disclosures on Websites 172.12. Out-of State Telemedicine License Chapter 174. Telemedicine

Written comments were received and reviewed. Steve Bresnen, with the Federation of Texas Psychiatry, presented oral comments. Several others signed-in to present oral comments, but deferred their comments until a future meeting. After discussion, Mr. Webb moved, Dr. McNeese seconded, and the motion passed to defer action on the proposed amendments to 164.6. Required Disclosures on Websites, 172.12. Out-of State Telemedicine License, and Chapter 174, Telemedicine, and directed staff to schedule another stakeholder group in March with designated representatives selected by the Chair. The stakeholder group will address amendments to Chapter 174, Telemedicine, based on public input received with the recommendation that current site set ups and treatment models described in the rule be maintained.

There being no other agenda items the meeting was adjourned at 10:59 a.m.