

CHAPTER 51

PODIATRISTS

SUBCHAPTER 1

GENERAL PROVISIONS

§3551. Definitions

As used in this chapter, unless the context indicates otherwise, the following terms have the following meanings. [PL 1993, c. 600, Pt. A, §229 (RPR).]

1. Board. "Board" means the Board of Licensure of Podiatric Medicine.
[PL 1993, c. 600, Pt. A, §229 (NEW).]

2. License. "License" means authorization to practice podiatric medicine.
[PL 1993, c. 600, Pt. A, §229 (NEW).]

3. Podiatrist. "Podiatrist" means an individual currently licensed to practice podiatric medicine.
[PL 1993, c. 600, Pt. A, §229 (NEW).]

4. Practice of podiatric medicine. "Practice of podiatric medicine" means the diagnosis and treatment of maladies of the human foot and ankle by medical, surgical or mechanical means. "Practice of podiatric medicine" includes the performance of a history and physical on a podiatrist's preoperative patient and upon the patient's admission into a hospital or ambulatory surgical center. "Practice of podiatric medicine" includes the administration of local anesthesia in conjunction with the practice of podiatry. The use of general anesthesia is permitted in conjunction with the practice of podiatry when administered or supervised by a medical or osteopathic physician who assumes responsibility for the administration of that anesthesia to a patient being treated by a podiatrist.
[PL 2017, c. 14, §1 (AMD).]

SECTION HISTORY

PL 1977, c. 297 (RPR). PL 1993, c. 600, §A229 (RPR). PL 2017, c. 14, §1 (AMD).

§3552. Licensure; exceptions; penalty

1. Licensure required. Except as otherwise provided, it is unlawful for an individual to practice or attempt to practice podiatry or to claim to be licensed as a podiatrist without first obtaining a license to practice podiatry as provided in this chapter.
[PL 1993, c. 600, Pt. A, §230 (NEW).]

2. Exceptions. This chapter does not apply to an individual licensed to practice a healing art or science who is practicing podiatric medicine in the course of practice and within the scope of that license, to a commissioned medical or surgical officer of a United States Army, United States Navy or United States Marine hospital or public health service or to the sale of nonprescription foot appliances in commercial establishments.
[PL 1993, c. 600, Pt. A, §230 (NEW).]

3. Penalty. A person who violates subsection 1 is subject to Title 10, section 8003-C.
[PL 2007, c. 402, Pt. P, §1 (AMD).]

SECTION HISTORY

PL 1993, c. 600, §A230 (RPR). PL 1999, c. 547, §B78 (AMD). PL 1999, c. 547, §B80 (AFF). PL 2007, c. 402, Pt. P, §1 (AMD).

§3552-A. Podiatric assistants

1. Podiatric assistants permitted. This chapter may not be construed to prohibit a podiatrist from delegating to a podiatric assistant certain activities relating to medical care and treatment that are delegated by custom and usage, as long as those activities are under the supervision or control of the podiatrist, who must be present on the premises at the time the activities are performed. This section may not be construed to require the presence of the supervising and controlling podiatrist during the rendering of nondiagnostic or nontherapeutic services.

[PL 2009, c. 112, Pt. A, §9 (AMD).]

2. Liability. A podiatrist who delegates activities as described in subsection 1 to a podiatric assistant is legally liable for the medical activities of that podiatric assistant, and a podiatric assistant in this relationship is considered the podiatrist's agent. This subsection may not be construed to apply to an individual acting under a separate license accepted by the State to render services independently.

[PL 2005, c. 77, §1 (NEW).]

SECTION HISTORY

PL 2005, c. 77, §1 (NEW). PL 2009, c. 112, Pt. A, §9 (AMD).

§3553. Narcotics

A licensed podiatrist may prescribe narcotic drugs for the treatment of ailments within the scope of the podiatrist's license with the approval of the Drug Enforcement Administration. [PL 1993, c. 600, Pt. A, §231 (RPR).]

SECTION HISTORY

PL 1979, c. 61, §1 (AMD). PL 1993, c. 600, §A231 (RPR).

§3554. Penalties

(REPEALED)

SECTION HISTORY

PL 1993, c. 600, §A232 (RP).

§3555. Review committee immunity

Any member of a peer review committee of a state association composed of podiatrists licensed under this chapter, any staff member of such an association assisting a peer review committee and any witness or consultant appearing before or presenting information to the peer review committee is immune from civil liability for, without malice, undertaking or failing to undertake any act within the scope of the function of the committee. [PL 1987, c. 646, §12 (NEW).]

SECTION HISTORY

PL 1987, c. 646, §12 (NEW).

SUBCHAPTER 2**BOARD OF LICENSURE OF PODIATRIC MEDICINE****§3601. Appointment; term; removal**

The Board of Licensure of Podiatric Medicine established in Title 5, section 12004-A, subsection 33 consists of 4 podiatrists and a public member as defined in Title 5, section 12004-A. The podiatrists are appointed by the Governor for a term of 4 years from nominations submitted by the Podiatry Association of Maine and by other organizations and individuals. The podiatrists selected must at the

time of their appointment have been actively engaged in the practice of podiatry for a period of at least 2 years. Appointment of members must comply with Title 10, section 8009. [PL 2007, c. 402, Pt. P, §2 (AMD).]

SECTION HISTORY

PL 1975, c. 575, §§40,41 (AMD). PL 1975, c. 771, §364 (AMD). PL 1979, c. 61, §1A (AMD). PL 1983, c. 176, §A18 (AMD). PL 1983, c. 812, §230 (AMD). PL 1989, c. 503, §B141 (AMD). PL 1993, c. 600, §A234 (AMD). PL 2007, c. 402, Pt. P, §2 (AMD).

§3602. Meetings; chair

The board shall meet at least once a year to conduct its business and to elect a chair. Additional meetings must be held as necessary to conduct the business of the board and may be convened at the call of the chair or a majority of the board members. A license to practice podiatry may not be granted except upon the affirmative vote of a majority of the members of the board. [PL 2013, c. 246, Pt. B, §11 (AMD).]

SECTION HISTORY

PL 1979, c. 61, §2 (AMD). PL 1983, c. 812, §231 (AMD). PL 1993, c. 600, §A235 (AMD). PL 2007, c. 402, Pt. P, §3 (AMD). PL 2013, c. 246, Pt. B, §11 (AMD).

§3603. Compensation; disposition of fees

(REPEALED)

SECTION HISTORY

PL 1969, c. 27 (AMD). PL 1975, c. 575, §42 (AMD). PL 1983, c. 812, §232 (AMD). PL 1993, c. 600, §A236 (AMD). PL 1995, c. 397, §57 (RP).

§3604. Reports; liaison; limitations

(REPEALED)

SECTION HISTORY

PL 1977, c. 604, §30 (RPR). PL 1979, c. 127, §181 (AMD). PL 1985, c. 748, §42 (AMD). PL 1993, c. 600, §A237 (AMD). PL 1993, c. 659, §B17 (AMD). PL 1995, c. 462, §A62 (RPR). PL 2007, c. 402, Pt. P, §4 (RP).

§3605. Rules and regulations

(REPEALED)

SECTION HISTORY

PL 1977, c. 458, §6A (NEW). PL 1977, c. 694, §617 (AMD). PL 1989, c. 632, §1 (RP).

§3605-A. Rules

(REPEALED)

SECTION HISTORY

PL 1989, c. 632, §2 (NEW). PL 1993, c. 600, §A238 (RP).

§3605-B. Powers and duties of the board

In addition to powers and duties otherwise provided by law, the board has the following powers and duties: [PL 1993, c. 600, Pt. A, §239 (NEW).]

1. Licenses. Examine and issue and renew the licenses of qualified applicants; [PL 1993, c. 600, Pt. A, §239 (NEW).]

2. Continuing education. Adopt standards for continuing education necessary to maintain licensure;

[PL 1993, c. 600, Pt. A, §239 (NEW).]

3. Rules. Adopt rules in accordance with the Maine Administrative Procedure Act, as it determines necessary to carry out the purposes of this chapter; and

[PL 2011, c. 190, §7 (AMD).]

4. Conduct investigations and hold hearings.

[PL 2007, c. 402, Pt. P, §5 (RP).]

5. Contracts.

[PL 1995, c. 397, §58 (RP).]

6. Records.

[PL 2007, c. 402, Pt. P, §6 (RP).]

7. Podiatrist health program. The board may establish protocols for the operation of a professional review committee as defined in Title 24, section 2502, subsection 4-A. The protocols must include the committee's reporting information the board considers appropriate regarding reports received, contracts or investigations made and the disposition of each report, as long as the committee is not required to disclose any personally identifiable information. The protocol may not prohibit an impaired podiatrist from seeking alternative forms of treatment.

The board has the power to contract with other agencies, individuals, firms or associations for the conduct and operation of a podiatrist health program operated by a professional review committee.

[PL 2011, c. 190, §8 (NEW).]

SECTION HISTORY

PL 1993, c. 600, §A239 (NEW). PL 1995, c. 397, §58 (AMD). PL 2007, c. 402, Pt. P, §§5, 6 (AMD). PL 2011, c. 190, §§7, 8 (AMD).

§3606. Budget

(REPEALED)

SECTION HISTORY

PL 1977, c. 604, §31 (NEW). PL 1985, c. 748, §42 (AMD). PL 1993, c. 659, §B17 (AMD). PL 1995, c. 397, §59 (RP).

SUBCHAPTER 3

LICENSURE REQUIREMENTS

§3651. Examination; requirements

(REPEALED)

SECTION HISTORY

PL 1969, c. 433, §88 (AMD). PL 1971, c. 598, §76 (AMD). PL 1979, c. 61, §3 (AMD). PL 1983, c. 378, §56 (AMD). PL 1993, c. 600, §A241 (RP).

§3651-A. Requirements and licensure

1. Residency requirement. An applicant who has graduated after January 1, 1991 from podiatric medical school as set forth in section 3651-C seeking licensure to practice podiatry shall provide the board with evidence of satisfactory completion of at least one year of postgraduate clinical training in

a podiatric residency training program approved by the accrediting body of the American Podiatric Medical Association, or its successor or other organization approved by the board.

[PL 2007, c. 621, §8 (AMD); PL 2007, c. 695, Pt. B, §12 (AMD).]

2. Residency licensure. A doctor of podiatric medicine who has graduated after January 1, 1991 from podiatric medical school as set forth in section 3651-C may not practice podiatric medicine in a podiatric residency program without first having applied for and obtained a residency license from the board.

A. An applicant for a residency license must be a doctor of podiatric medicine who is a graduate of a school of podiatry, as set forth in this chapter. An examination is not required for applicants for residency licensure. The fee for residency licensure is the same as the fee for licensure for that year. A residency license may be denied for a reason for which a podiatric medical license may be disciplined under section 3656 or Title 10, section 8003, subsection 5-A, paragraph A. [PL 2007, c. 695, Pt. B, §13 (AMD).]

B. A residency license is valid only for the practice of podiatric medicine as part of the postgraduate residency program. A residency license is subject to discipline for a reason for which a podiatric medical license may be disciplined under section 3656 or Title 10, section 8003, subsection 5-A, paragraph A. If the holder of a residency license is terminated from or otherwise ceases to be a resident in the postgraduate residency program, the residency license becomes void as of the date the resident is terminated or ceases to be a resident. [PL 2007, c. 695, Pt. B, §13 (AMD).]

C. A residency license is valid for up to one year, and may be renewed annually before the first day of July of every year, not to exceed an aggregate of 4 years. Renewal of a residency license is subject to the same requirements and conditions as the initial residency license. [PL 1993, c. 600, Pt. A, §242 (AMD); PL 1993, c. 600, Pt. A, §243 (AFF).]

[PL 2007, c. 621, §8 (AMD); PL 2007, c. 695, Pt. B, §13 (AMD).]

SECTION HISTORY

PL 1993, c. 278, §1 (NEW). PL 1993, c. 278, §4 (AFF). PL 1993, c. 600, §A242 (AMD). PL 1993, c. 600, §A243 (AFF). PL 2007, c. 402, Pt. P, §§7, 8 (AMD). PL 2007, c. 621, §8 (AMD). PL 2007, c. 695, Pt. B, §§12, 13 (AMD).

§3651-B. Examination; requirements

(REPEALED)

SECTION HISTORY

PL 1993, c. 600, §A244 (NEW). PL 2007, c. 402, Pt. P, §9 (RP).

§3651-C. Examination; requirements

Except as otherwise provided in this chapter, an individual must pass an examination approved by the board before engaging in the practice of podiatry. An applicant shall submit an application for a license to practice podiatry containing satisfactory proof that the applicant: [PL 2007, c. 402, Pt. P, §10 (NEW).]

1. Minimum age. Is at least 18 years of age;
[PL 2007, c. 402, Pt. P, §10 (NEW).]

2. Graduation. Has received a certificate of graduation from an accredited college of podiatric medicine, recognized by the Council of Education of the American Podiatry Association or its successor or other organization approved by the board; and
[PL 2007, c. 402, Pt. P, §10 (NEW).]

3. Examination. Has passed an examination approved by the board.
[PL 2007, c. 402, Pt. P, §10 (NEW).]

SECTION HISTORY

PL 2007, c. 402, Pt. P, §10 (NEW).

§3652. Fees; reexamination; license renewal

The Director of the Office of Professional and Occupational Regulation within the Department of Professional and Financial Regulation may establish by rule fees for purposes authorized under this chapter in amounts that are reasonable and necessary for their respective purposes, except that the fee for any one purpose may not exceed \$600 annually. Rules adopted pursuant to this section are routine technical rules pursuant to Title 5, chapter 375, subchapter 2-A. [PL 2007, c. 402, Pt. P, §11 (AMD); PL 2011, c. 286, Pt. B, §5 (REV).]

An applicant for an examination for a license to practice podiatry shall pay, at the time of filing an application, a license application fee and a license fee as set under this section plus actual costs of examination administration. An applicant who fails to pass an examination is entitled to a reexamination within 6 months upon the payment of a fee, but only 2 such reexaminations are permitted. Podiatrists licensed in another state and applying for a license to practice in this State without examination shall pay an application fee and a license fee. [PL 2007, c. 402, Pt. P, §11 (AMD).]

A doctor of podiatric medicine licensed to practice podiatric medicine and surgery within this State shall apply on or before July 1st of every year or at such other time as the Commissioner of Professional and Financial Regulation may designate, to the board for a license renewal and pay the renewal fee as set under this section. [PL 2007, c. 402, Pt. P, §11 (AMD).]

On or before July 1st of every year, an applicant who is practicing podiatric medicine and surgery in this State shall include satisfactory evidence to the board that in the preceding license period the applicant has completed a program of continuing education as prescribed in the rules of the board. [RR 2007, c. 1, §18 (COR).]

An application for license renewal made not more than 90 days after the date of expiration must include a late fee in addition to the renewal fee as set under this section. An application received more than 90 days but less than 2 years after the expiration date is subject to the requirements for new applicants as well as continuing education requirements, if applicable, and a late fee, renewal fee and additional late fee as set under this section, except that the board, giving due consideration to the health, welfare and safety of the citizens of the State, may waive the examination requirement at its discretion. A license that has been expired for over 2 years may not be renewed and must be processed as a new application. [PL 2007, c. 402, Pt. P, §11 (AMD).]

SECTION HISTORY

PL 1977, c. 267, §1 (RPR). PL 1981, c. 206 (RPR). PL 1993, c. 347, §1 (AMD). PL 1993, c. 600, §A245 (AMD). PL 1999, c. 257, §1 (AMD). PL 1999, c. 685, §12 (AMD). PL 2007, c. 402, Pt. P, §11 (AMD). RR 2007, c. 1, §18 (COR). PL 2011, c. 286, Pt. B, §5 (REV).

§3653. Use of title

An applicant who satisfactorily meets the requirements for license to practice podiatry, as provided in this chapter, may be granted a license by the board that entitles the individual to whom it is granted to practice podiatry in this State. A podiatrist licensed in accordance with this chapter may use the word "Doctor" or the letters "Dr." when followed by the word "Podiatrist" or "Chiroprapist," or the designation of the degree "D.P.M." [PL 2009, c. 112, Pt. A, §10 (AMD).]

SECTION HISTORY

PL 1993, c. 600, §A246 (AMD). PL 2009, c. 112, Pt. A, §10 (AMD).

§3654. Reciprocity; residency requirement

The board may issue a license to practice podiatry by endorsement to an applicant who has successfully passed the written examination of another state or of a national certifying agency in podiatry recognized by the board if the written examination of the other state or national certifying agency was equivalent to its own examination and if the applicant satisfies in all other respects the requirements for licensure in section 3651-A. An applicant for licensure under this section who graduated after January 1, 1991 from podiatric medical school under section 3651-A shall provide the board evidence of satisfactory completion of at least one year of postgraduate clinical training in a podiatric residency training program under section 3651-A. The application to the board must be accompanied by the application fee and license fee as set under section 3652. [PL 2021, c. 642, §17 (AMD).]

SECTION HISTORY

PL 1977, c. 267, §2 (AMD). PL 1983, c. 378, §57 (AMD). PL 1993, c. 278, §2 (AMD). PL 1993, c. 278, §4 (AFF). PL 1993, c. 600, §A247 (RPR). PL 1999, c. 257, §§2,3 (AMD). PL 1999, c. 685, §13 (AMD). PL 2007, c. 402, Pt. P, §12 (AMD). PL 2021, c. 642, §17 (AMD).

§3654-A. Licensure by endorsement

Notwithstanding any provision of this chapter to the contrary, the board, in accordance with Title 10, section 8003-H and any applicable rules adopted pursuant to that section, shall establish a process to issue a license by endorsement for each license authorized under this chapter that the board determines is appropriate for licensure by endorsement. An applicant may submit an application under the process established under this section or any other licensure process authorized in this chapter. [PL 2021, c. 642, §18 (NEW).]

SECTION HISTORY

PL 2021, c. 642, §18 (NEW).

§3655. Suspension or revocation of license

(REPEALED)

SECTION HISTORY

PL 1973, c. 303, §3 (AMD). PL 1977, c. 458, §§7-10 (AMD). PL 1977, c. 694, §618 (AMD). PL 1979, c. 61, §§4,5 (AMD). PL 1981, c. 25 (AMD). PL 1983, c. 378, §58 (RP).

§3655-A. Disciplinary actions

(REPEALED)

SECTION HISTORY

PL 1983, c. 378, §59 (NEW). PL 1993, c. 600, §A248 (AMD). PL 1999, c. 547, §B68 (AMD). PL 1999, c. 547, §B80 (AFF). PL 2007, c. 402, Pt. P, §13 (RP).

§3656. Denial or refusal to renew license; disciplinary action; informal conference

In addition to the grounds enumerated in Title 10, section 8003, subsection 5-A, paragraph A, the board may deny a license, refuse to renew a license or impose the disciplinary sanctions authorized by Title 10, section 8003, subsection 5-A for: [PL 2007, c. 402, Pt. P, §14 (NEW).]

1. Misuse of alcohol, drugs or other substances. Misuse of alcohol, drugs or other substances that has resulted or may result in the applicant or licensee performing services in a manner that endangers the health or safety of the licensee's patients;
[PL 2013, c. 105, §8 (AMD).]

2. Mental or physical condition. A professional diagnosis of a mental or physical condition that has resulted or may result in the applicant or licensee performing services in a manner that endangers the health or safety of the podiatrist's patients;

[PL 2007, c. 402, Pt. P, §14 (NEW).]

3. False advertising. Engaging in false, misleading or deceptive advertising;
[PL 2015, c. 488, §21 (AMD).]

4. Unlawful prescription of controlled substance. Prescribing narcotic or hypnotic or other drugs listed as controlled substances by the federal Drug Enforcement Administration for other than accepted therapeutic purposes; or
[PL 2015, c. 488, §21 (AMD).]

5. Controlled Substances Prescription Monitoring Program. Failure to comply with the requirements of Title 22, section 7253.
[PL 2015, c. 488, §22 (NEW).]

SECTION HISTORY

PL 2007, c. 402, Pt. P, §14 (NEW). PL 2013, c. 105, §8 (AMD). PL 2013, c. 217, Pt. L, §1 (AMD). PL 2015, c. 488, §§21, 22 (AMD).

§3657. Requirements regarding prescription of opioid medication

1. Limits on opioid medication prescribing. Except as provided in subsection 2, an individual licensed under this chapter and whose scope of practice includes prescribing opioid medication may not prescribe:

A. To a patient any combination of opioid medication in an aggregate amount in excess of 100 morphine milligram equivalents of opioid medication per day; [PL 2015, c. 488, §23 (NEW).]

B. To a patient who, on the effective date of this section, has an active prescription for opioid medication in excess of 100 morphine milligram equivalents of an opioid medication per day, an opioid medication in an amount that would cause that patient's total amount of opioid medication to exceed 300 morphine milligram equivalents of opioid medication per day; except that, on or after July 1, 2017, the aggregate amount of opioid medication prescribed may not be in excess of 100 morphine milligram equivalents of opioid medication per day; [PL 2015, c. 488, §23 (NEW).]

C. On or after January 1, 2017, within a 30-day period, more than a 30-day supply of an opioid medication to a patient under treatment for chronic pain. "Chronic pain" has the same meaning as in Title 22, section 7246, subsection 1-C; or [PL 2015, c. 488, §23 (NEW).]

D. On or after January 1, 2017, within a 7-day period, more than a 7-day supply of an opioid medication to a patient under treatment for acute pain unless the opioid product is labeled by the federal Food and Drug Administration to be dispensed only in a stock bottle that exceeds a 7-day supply as prescribed, in which case the amount dispensed may not exceed a 14-day supply. "Acute pain" has the same meaning as in Title 22, section 7246, subsection 1-A. [PL 2017, c. 213, §18 (AMD).]

[PL 2017, c. 213, §18 (AMD).]

2. Exceptions. An individual licensed under this chapter whose scope of practice includes prescribing opioid medication is exempt from the limits on opioid medication prescribing established in subsection 1 only:

A. When prescribing opioid medication to a patient for:

(1) Pain associated with active and aftercare cancer treatment;

(2) Palliative care, as defined in Title 22, section 1726, subsection 1, paragraph A, in conjunction with a serious illness, as defined in Title 22, section 1726, subsection 1, paragraph B;

(3) End-of-life and hospice care;

- (4) Medication-assisted treatment for substance use disorder; or
- (5) Other circumstances determined in rule by the Department of Health and Human Services pursuant to Title 22, section 7254, subsection 2; and [PL 2015, c. 488, §23 (NEW).]

B. When directly ordering or administering a benzodiazepine or opioid medication to a person in an emergency room setting, an inpatient hospital setting, a long-term care facility or a residential care facility or in connection with a surgical procedure.

As used in this paragraph, "administer" has the same meaning as in Title 22, section 7246, subsection 1-B. [PL 2017, c. 213, §19 (AMD).]
[PL 2017, c. 213, §19 (AMD).]

3. Electronic prescribing. An individual licensed under this chapter and whose scope of practice includes prescribing opioid medication with the capability to electronically prescribe shall prescribe all opioid medication electronically by July 1, 2017. An individual who does not have the capability to electronically prescribe must request a waiver from this requirement from the Commissioner of Health and Human Services stating the reasons for the lack of capability, the availability of broadband infrastructure, and a plan for developing the ability to electronically prescribe opioid medication. The commissioner may grant a waiver including circumstances in which exceptions are appropriate, including prescribing outside of the individual's usual place of business and technological failures. [PL 2015, c. 488, §23 (NEW).]

4. Continuing education. By December 31, 2017, an individual licensed under this chapter must successfully complete 3 hours of continuing education every 2 years on the prescription of opioid medication as a condition of prescribing opioid medication. The board shall adopt rules to implement this subsection. Rules adopted pursuant to this subsection are routine technical rules as defined in Title 5, chapter 375, subchapter 2-A. [PL 2015, c. 488, §23 (NEW).]

5. Penalties. An individual who violates this section commits a civil violation for which a fine of \$250 per violation, not to exceed \$5,000 per calendar year, may be adjudged. The Department of Health and Human Services is responsible for the enforcement of this section. [PL 2015, c. 488, §23 (NEW).]

6. Opioid medication policy. No later than January 1, 2018, a health care entity that includes an individual licensed under this chapter whose scope of practice includes prescribing opioid medication must have in place an opioid medication prescribing policy that applies to all prescribers of opioid medications employed by the entity. The policy must include, but is not limited to, procedures and practices related to risk assessment, informed consent and counseling on the risk of opioid use. For the purposes of this subsection, "health care entity" has the same meaning as in Title 22, section 1718-B, subsection 1, paragraph B. [PL 2017, c. 186, §4 (NEW).]

SECTION HISTORY

PL 2015, c. 488, §23 (NEW). PL 2017, c. 186, §4 (AMD). PL 2017, c. 213, §§18, 19 (AMD).

SUBCHAPTER 4

TELEHEALTH SERVICES

§3661. Definitions

As used in this subchapter, unless the context otherwise indicates, the following terms have the following meanings. [PL 2021, c. 291, Pt. B, §10 (NEW).]

1. Asynchronous encounter. "Asynchronous encounter" means an interaction between a patient and a person licensed under this chapter through a system that has the ability to store digital information, including, but not limited to, still images, video files, audio files, text files and other relevant data, and to transmit such information without requiring the simultaneous presence of the patient and the person licensed under this chapter.

[PL 2021, c. 291, Pt. B, §10 (NEW).]

2. Store and forward transfer. "Store and forward transfer" means the transmission of a patient's records through a secure electronic system to a person licensed under this chapter.

[PL 2021, c. 291, Pt. B, §10 (NEW).]

3. Synchronous encounter. "Synchronous encounter" means a real-time interaction conducted with an interactive audio or video connection between a patient and a person licensed under this chapter or between a person licensed under this chapter and another health care provider.

[PL 2021, c. 291, Pt. B, §10 (NEW).]

4. Telehealth services. "Telehealth services" means health care services delivered through the use of information technology and includes synchronous encounters, asynchronous encounters, store and forward transfers and telemonitoring.

[PL 2021, c. 291, Pt. B, §10 (NEW).]

5. Telemonitoring. "Telemonitoring" means the use of information technology to remotely monitor a patient's health status via electronic means, allowing the person licensed under this chapter to track the patient's health data over time. Telemonitoring may be synchronous or asynchronous.

[PL 2021, c. 291, Pt. B, §10 (NEW).]

SECTION HISTORY

PL 2021, c. 291, Pt. B, §10 (NEW).

§3662. Telehealth services permitted

A person licensed under this chapter may provide telehealth services as long as the licensee acts within the scope of practice of the licensee's license, in accordance with any requirements and restrictions imposed by this subchapter and in accordance with standards of practice. [PL 2021, c. 291, Pt. B, §10 (NEW).]

SECTION HISTORY

PL 2021, c. 291, Pt. B, §10 (NEW).

§3663. Confidentiality

When providing telehealth services, a person licensed under this chapter shall comply with all state and federal confidentiality and privacy laws. [PL 2021, c. 291, Pt. B, §10 (NEW).]

SECTION HISTORY

PL 2021, c. 291, Pt. B, §10 (NEW).

§3664. Professional responsibility

All laws and rules governing professional responsibility, unprofessional conduct and generally accepted standards of practice that apply to a person licensed under this chapter also apply to that licensee while providing telehealth services. [PL 2021, c. 291, Pt. B, §10 (NEW).]

SECTION HISTORY

PL 2021, c. 291, Pt. B, §10 (NEW).

§3665. Rulemaking

The board shall adopt rules governing telehealth services by persons licensed under this chapter. These rules must establish standards of practice and appropriate restrictions for the various types and forms of telehealth services. Rules adopted pursuant to this section are routine technical rules as defined by Title 5, chapter 375, subchapter 2-A. [PL 2021, c. 291, Pt. B, §10 (NEW).]

SECTION HISTORY

PL 2021, c. 291, Pt. B, §10 (NEW).

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