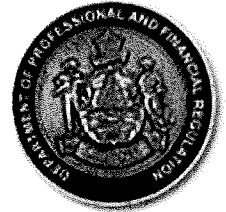




STATE OF MAINE
DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION
BOARD OF LICENSURE IN MEDICINE



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**TESTIMONY OF TIMOTHY TERRANOVA
EXECUTIVE DIRECTOR
BOARD OF LICENSURE IN MEDICINE
DEPARTMENT OF PROFESSIONAL AND FINANCIAL REGULATION
L.D. 742**

**An Act to Permit Telehealth Services Across State Lines Following Referral from a Primary Care
Provider Based in the State
Presented by Representative Fredette
Before the Joint Standing Committee on Health Coverage, Insurance & Financial Services**

March 11, 2025 at 1:00 p.m.

Senator Bailey, Representative Mathieson, and members of the Health Coverage, Insurance and Financial Services Committee, I am Tim Terranova, Executive Director of the Maine Board of Licensure in Medicine ("BOLIM"). I am here today to testify in opposition to LD 742.

BOLIM licenses and regulates allopathic physicians and physician assistants in Maine. BOLIM is composed of 11 members: 6 physicians who actively practice medicine; 2 physician assistants who actively render medical services; and 3 public members. BOLIM's mission is to protect the public by ensuring its licensees are ethical, professional and competent. It fulfills this mission by licensing, regulating, and educating physicians and physician assistants.

BOLIM's primary mission is to protect the public health and welfare of Maine citizens by ensuring that those licensed to practice medicine or render medical services in Maine are honest and competent. Although this bill seems straight forward and possibly common sense, it leaves Maine citizens vulnerable to the unregulated practice of medicine or rendering of medical services.

It is a recognized standard for physicians and physician assistants that patient care occurs where the patient is located. That is why those providers who provide patient care via telehealth need to be licensed to practice medicine or render medical services by either BOLIM or the Board of Osteopathic Licensure. BOLIM, like any licensing board, only has jurisdiction over its licensees.

Likewise, other states may not have, or may choose not to exercise, jurisdiction over care provided to patients in other states.

This means that, if this bill were law and something were to go wrong, Maine patients would have no regulatory avenue to address those concerns within Maine and an out-of-state board might not be able to assist them either. This bill creates a loophole that allows for the unregulated practice of medicine or rendering of medical services within the state.

Office Location: 161 Capitol Street Augusta, ME 04330
Mailing Address: 137 State House Station, Augusta, Maine 04333
www.maine.gov/md

Phone: (207) 287-3601

TTY: Please Call Maine Relay 711

Consumer Assistance: (888) 365-9964

Fax: (207) 287-6590

This very issue is the reason that compacts have been accepted by so many states. BOLIM is part of the Interstate Medical Licensure Compact (IMLC) which is for MDs and DOs. Since the IMLC started, Maine has seen its licensed physician population grow by more than 2,500. The vast majority of those licensees do not have a Maine address and are believed to be practicing via telemedicine. There is also a physician assistant compact that, when it becomes operational, is expected to have the same proportional effect.

Although rare, this increase in the use of telehealth has seen some physicians or physician assistants attempt to practice medicine or render medical services at a standard of care below the minimum required standards of medical care necessary to safely and appropriately treat the patient. These issues have a direct impact on patient care and BOLIM has been able to take action to protect Maine citizens because those practitioners have had to hold a Maine license.

The bill also requires the out-of-state provider of specialty health care services to be licensed and in good standing but contains no mechanism to perform these regulatory tasks and no enforcement options for those requirements. It is unclear whether the referring PCP is the one who is expected to perform these regulatory tasks of confirming the out-of-state person's licensure status and good standing, and who will be held responsible if those requirements are not met.

Thank you for the opportunity to provide these comments regarding LD 742. I would be happy to answer questions now or at the work session.