

August 22, 2025

Timothy E. Terranova,  
Executive Director, Board of Licensure in Medicine,  
137 State House Station,  
Augusta, ME 04333-0137

**RE: ATA Action Comments on Proposed Amendments to Telehealth Definition**

Dear Mr. Terranova,

On behalf of ATA Action, I am writing to comment on the proposed amendments to the rules of the Maine Board of Licensure in Medicine.

ATA Action, the American Telemedicine Association's affiliated trade association focused on advocacy, advances policy to ensure all individuals have permanent access to telehealth services across the care continuum. ATA Action supports the enactment of state and federal telehealth policies to secure telehealth access for all Americans, including those in rural and underserved communities. ATA Action recognizes that telehealth and virtual care have the potential to truly transform the health care delivery system – by improving patient outcomes, enhancing safety and effectiveness of care, addressing health disparities, and reducing costs – if only allowed to flourish.

ATA Action appreciates the Board's effort to modernize the definition of telehealth and explicitly include audio-only services when consistent with the standard of care. This represents an important step toward ensuring Maine patients, particularly those in rural and digitally underserved communities, are able to access care using the modality that best fits their circumstances.

However, ATA Action is concerned that the draft definition diverges from and is more restrictive than the statutory definitions of telehealth found in Maine law. Across Title 32, §3300-AA (Medical Practices); Title 24-A, §4316 (Insurance); and Title 22, §3173-H (Medicaid), telehealth is consistently defined as “the use of information technology and includes synchronous encounters, asynchronous encounters, store and forward transfers and telemonitoring.” Further, a “synchronous encounter” is defined as “...a real-time interaction conducted with an interactive audio or video connection...” By contrast, the Board's proposed language adds conditions, such as requiring audio-only services to be “necessary and appropriate under the circumstances,” that are not present in statute.

While we understand the intent behind this qualifier, it risks creating ambiguity and unnecessary barriers to patient access to care. If an audio-only telehealth encounter meets the standard of care and is agreed upon by patient and provider, additional restrictions are unnecessary. ATA Action strongly recommends that the Board adopt in rule the statutory definition of telehealth without modification.

Further, when addressing the establishment of a valid physician-patient relationship and the appropriate use of remote technologies for evaluation and treatment, we encourage the Board to look to the Federation of State Medical Boards' (FSMB) framework. FSMB guidance is widely recognized, consistent with existing Maine statutes and provides clear standards for safe, high-quality telehealth care. Specifically, the *Model Policy for the Appropriate Use of Telemedicine Technologies in the Practices of Medicine* clearly articulates that “a physician patient

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Telehealth Policy to Transform Healthcare

relationship may be established via either synchronous or asynchronous telemedicine technologies without any requirement of a prior in-person meeting, so long as the standard of care is met” without any further qualifications on audio-only care.

We support the Board taking steps to update its telehealth rules and urge alignment with statutory definitions to ensure clarity, consistency and access for patients across Maine. Thank you for your consideration, and please do not hesitate to contact me at [kzebley@ataaction.org](mailto:kzebley@ataaction.org) with any questions or for further discussion.

Kind regards,

A handwritten signature in black ink, appearing to read "Kyle Zebley".

Kyle Zebley  
Executive Director  
ATA Action