

## Will COVID Finally Bring Telehealth Professional Licensing into the 21st Century?

Articles, COVID 19: Answers to Business Challenges June 8, 2020

Michael Cassidy; mcassidy@tuckerlaw.com; (412) 594-5515

The COVID pandemic has illuminated the need to modernize professional licensing. Although professional licensing has always been a necessary vigilance with licensing has always been appropriate, and never more so than as highlighted by the opioid epidemic and telemedicine fraud schemes when physicians could issue prescriptions and orders for services over the internet for patients with whom they had no meaningful professional contact, there is obviously new interest in this area. State licensing boards were appropriately vigilant, although perhaps they overreacted, because the shortage of available healthcare providers has dramatized the deficiencies of state-by-state licensing and unnecessary bureaucracy.

Professional licensing in the age of instant information access has confirmed the necessity for some degree of reciprocity or national licensing. For those that oppose national licensing, the most effective solution is probably the multi-state licensing compact promulgated by the Federation of State Medical Boards (FSMB). Almost 30 states participate in the Interstate Medical Licensure Compact (IMLC) now, and allow physicians to qualify for multi-state licensing with the participating physicians without the need of individual state-by-state licensing.

This should not be confused with expanding the scope of practice. The COVID pandemic has also prompted state licensing boards to relax scope of practice restrictions or perhaps just suspend enforcement and, when the pandemic is over, those who would have benefited from the expanded scope of license will resist retrenchment, presumably citing the efficacy of the process as highlighted by the COVID experience. However, the data from the COVID experience will be so jumbled for several years that it is unlikely to actually prove the effectiveness of expanded scope of practice, but it does highlight the need and appropriateness of reviewing those issues.

For additional information contact Mike Cassidy.