

Maryland Board of Occupational Therapy Practice

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**POSITION STATEMENT -- TELEHEALTH
OT AND OTA AUTHORITY TO USE**

As defined by the American Occupational Therapy Association (AOTA), Telehealth Position Paper (Revised 2013):

AOTA defines telehealth as the application of evaluative, consultative, preventative, and therapeutic services delivered through telecommunication and information technologies. Telehealth services can be synchronous, delivered through interactive technologies in real time, asynchronous, using store-and-forward technologies. Occupational therapy practitioners can use telehealth as a mechanism to provide services at a location that is physically distant from the client, thus allowing for services to occur where the client lives, works, and plays, if that is needed or desired (AOTA 2010a).

Occupational therapy practitioners are using telehealth as a service delivery model to assist clients to develop skills, incorporate assistive technology and adaptive techniques, modify work, home, or school environments, and create health-promoting habits and routines. Potential benefits of telehealth as a service delivery model within occupational therapy include increased accessibility of services to clients who live in remote or underserved areas, improved access to providers and specialists otherwise unavailable to clients, prevention of unnecessary delays in receiving care and decreased isolation for practitioners through distance learning, consultation and research among others.

In general, the use of telehealth technologies to conduct evaluations depends on real-time two-way or multipoint observation, communication, and interaction between the practitioner and the client.

Clinical reasoning guides the selection and application of appropriate telehealth technologies necessary to evaluate client needs and environmental factors. Reliability of telehealth technologies for providing safe and effective occupational therapy services is one important factor when deciding to use a telehealth service delivery model for assessing the client's ability to engage in specific occupations and activities and for administering specific assessments. In addition, occupational therapy practitioners should consider reliability of the particular assessment when considering using it to conduct an evaluation remotely using telehealth technologies.

The Maryland Board of Occupational Therapy has experienced an increase in the number of questions from practitioners on whether the Maryland Board of Occupational Therapy Practice permits the use of telehealth.

The intent of this position statement is to acknowledge the "intra-State" use of telehealth by Maryland licensees practicing occupational therapy within the State of Maryland and to clarify that:

- (1) Occupational therapy personnel must hold a valid Maryland license prior to providing occupational therapy services via telehealth to clients physically located in Maryland; and,
- (2) The practice of occupational therapy, via telehealth or otherwise, in the State of Maryland must be in accordance with the Annotated Code of Maryland, Health Occupations Article, Title 10, and The Code of Maryland Regulations (COMAR), 10.46.01 – 10.46.07.