

4715-23-01

Requirements for teledentistry permit.

(A) Each applicant for a teledentistry permit shall submit the statutory fee and an application to the Board.

(1) On this application, the dentist applicant for a teledentistry permit shall state under oath whether,

(a) The applicant has read all laws and rules governing teledentistry in the state of Ohio, including but not limited to sections 4715.43-.437 of the Revised Code and this section of the Administrative Code.

(b) The applicant has the necessary equipment required to safely and securely deliver dental services through teledentistry, specifically regarding synchronous, real-time communication.

(c) The applicant has established all necessary policies, protocols, and orders to safely deliver dental services through teledentistry at all locations where dental services will be provided through teledentistry.

(d) The applicant's Ohio license to practice dentistry is in good standing.

(e) The license or registration of dental hygienists and expanded function dental auxiliaries who will provide dental services through teledentistry for the applicant are in good standing.

(f) Any dental hygienist or expanded function dental auxiliary who provides placement of interim therapeutic restorations and application of silver diamine fluoride, has completed the appropriate course prescribed by the Board.

(g) The applicant understands that:

(i) The applicant retains responsibility for ensuring the safety and quality of services provided to patients through teledentistry.

(ii) Dental services delivered through teledentistry must conform to accepted standards for the profession, and

(iii) Persons involved with providing services through teledentistry must abide by laws addressing the privacy and security of the patient's dental and medical information as well as other information required to be kept confidential as required by law.

(2) The applicant shall provide on the application form the following information:

- (a) Address where dental services will be provided through teledentistry.
- (b) Name and license or registration number of each dental hygienist or expanded function dental auxiliary who will perform dental services through teledentistry when the dentist is not physically present and the location where they will provide these services.
- (c) A description of all equipment used to establish and maintain synchronous, real-time communication during the provision of dental services through teledentistry. Any description must include manufacturer name and model number.

(B) Each holder of a teledentistry permit shall:

- (1) Before providing dental services through teledentistry, notify the Board via e-mail or regular U.S. mail within seven calendar days of:
 - (a) The address where dental services will be provided through teledentistry, if not included on permit application.
 - (b) Name and license or registration number of each dental hygienist and expanded function dental auxiliary who will perform dental services through teledentistry when the dentist is not physically present and the location where they will provide these services, if not included on permit application.

Effective: 5/30/2020

Five Year Review (FYR) Dates: 05/30/2020

CERTIFIED ELECTRONICALLY

Certification

05/20/2020

Date

Promulgated Under: 119.03
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