



**Testimony on SB 402**  
**Health Care Practitioners – Telehealth**  
Senate Education, Health, and Environmental Affairs Committee  
February 13, 2020  
**POSITION: SUPPORT**

The Community Behavioral Health Association of Maryland is the professional organization for providers of community-based mental health and substance use disorder treatment services. Our members serve the majority of the almost-300,000 children and adults who access care through the public behavioral health system. We provide outpatient treatment, residential and day programs, case management and assertive community treatment (ACT), employment supports, and crisis intervention.

We support this bill because telehealth has proven invaluable in providing access to needed behavioral health treatment. As psychiatrists, addictionologists, and other clinicians become increasingly scarce, the use of telehealth has allowed organizations to make the most efficient use of their clinicians' time. The Medicaid program has long allowed clinical interactions through telehealth, particularly in outpatient mental health centers (OMHCs) and substance use disorder clinics.

While our organizations have not yet utilized asynchronous telehealth, we know that times are rapidly changing. Given the opioid overdose crisis and the rising suicide rates in Maryland we must use all the technology at our disposal to ensure that those in need can receive intervention quickly. It is important that we keep all options open as the use of technology, including synchronous and asynchronous telehealth, is rapidly becoming the mode of choice for those seeking treatment.

We also support this bill because it requires the various health occupations boards to agree on standards of care for the use of telehealth. This is of particular interest to OMHCs since they employ various types of clinicians (psychiatrists, nurse practitioners, licensed clinical social workers, psychologists, and licensed professional counselors) and would greatly benefit from having one set of standards applied to all practitioners operating under the clinic's roof.

We urge a favorable report for SB 402.