

HEALTH CARE FOR THE HOMELESS TESTIMONY
IN SUPPORT OF
SB 502 – Health Insurance - Telehealth - Delivery of Mental Health Services -
Coverage for Home Settings Health

Senate Finance Committee
February 19, 2020



Health Care for the Homeless supports SB 502, which requires Medicaid to provide mental health services appropriately delivered through telehealth to a patient in the patient’s home setting.

Increasing access to mental health treatment services in various ways has been a hallmark of Health Care for the Homeless’ advocacy efforts. An essential aspect of those efforts has been to ensure health coverage for the lowest-income Marylanders – those who rely on Medicaid for their health care. Utilizing telehealth as another means to provide mental health care is no exception. Private health insurance plans cover telehealth services and this should undoubtedly be extended to Medicaid. It is the only way that the most vulnerable Marylanders will have access to the same health services as are afforded to those with private coverage. As insurers, nonprofit health service plans, and health maintenance organizations include coverage for substance use disorders via telehealth, this bill should do the same.

Maryland’s Medicaid program must look more broadly at the mental health services they cover to ensure equitable and comprehensive behavioral health treatment for all Marylanders. As this bill rightly highlights one aspect where Medicaid falls short on mental health coverage, the Maryland Medicaid program also does not recognize occupational therapy practitioners as mental health providers. Therefore, Medicaid does not provide reimbursement for occupational therapy practitioners in the behavioral health context.

Occupational therapy practitioners are specifically equipped to evaluate the cognitive and functional abilities of patients, filling an existing gap in traditional health care services.¹ Individuals experiencing homelessness are particularly susceptible to higher rates of chronic health conditions, mental health diagnoses, and head injury than the general population. As such, this population experiences a high prevalence of cognitive impairment and variability in functional skills.² Occupational therapy practitioners perform specialized assessments where traditional cognitive screening tools are not sensitive enough to predict an individuals’ functional performance. Given the significant need to address cognition among individuals experiencing homelessness, the integration of occupational therapy practitioners in health care has shown significant improvements in patients’ functional skills and development that help them thrive in the community, successfully transition into housing, stay stably housed, and inform their broader health care needs.³ Despite the proven health outcomes of occupational therapy services, Medicaid funding and reimbursement for

¹ American Occupational Therapy Association. (2013). Cognition, cognitive rehabilitation, and occupational performance. *American Journal of Occupational Therapy*, 67(Suppl.), S9–S31. [doi:10.5014/ajot.2013.67S9](https://doi.org/10.5014/ajot.2013.67S9) (AOTA, 2013; Giles, Edwards, Morrison, Baum, & Wolf, 2017).

² A quantitative analysis of clients’ performance on cognitive assessments indicated a significant prevalence (93%) of cognitive impairment among those referred to occupational therapy.

³ In one study, evaluation of outcomes indicated that 69% of individuals had statistically significant improvements in performance of goal areas and 73% of individuals had statistically significant improvements in satisfaction with their ability to engage in goal areas (Synovec et al., 2018).

occupational therapy services in behavioral health is essentially non-existent, which is a significant barrier for integration of services into existing health care models.⁴

Per the 2019 Joint Chairman's Report (JCR) requirement, the Maryland Department of Health submitted a report on the status of reimbursement for occupational therapy in behavioral health services.⁵ We are pleased that the report stated that the Department reported that they are identifying barriers to reimbursing occupational therapy practitioners and we look forward to working with them as they do so.

We hope this bill will serve as another opportunity to work with the Maryland Department of Health in adopting policies that assist Marylanders with mental health conditions access occupational therapy services in their homes and communities. Therefore, Health Care for the Homeless respectfully requests a favorable report on this bill.

Health Care for the Homeless is Maryland's leading provider of integrated health services and supportive housing for individuals and families experiencing homelessness. We work to prevent and end homelessness for vulnerable individuals and families by providing quality, integrated health care and promoting access to affordable housing and sustainable incomes through direct service, advocacy, and community engagement. We deliver integrated medical care, mental health services, state-certified addiction treatment, dental care, social services, and housing support services for over 10,000 Marylanders annually at sites in Baltimore City and Baltimore County. For more information, visit www.hchmd.org.

⁴ Murphy, Griffith, Mroz, & Jirikowic, 2017.

⁵ <http://mgaleg.maryland.gov/Pubs/BudgetFiscal/2019rs-budget-docs-jcr.pdf>