

Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

March 6, 2024

The Honorable Joseline A. Peña-Melnyk Chair, House Health and Government Operations Committee 241 House Office Building Annapolis, MD 21401-1991

RE: HB 1078 - Maryland Medical Assistance Program - Remote Ultrasound Procedures and Remote Fetal Non-Stress Tests - Letter of Support

Dear Chair Peña-Melnyk and Committee Members:

The Maryland Department of Health (Department) respectfully submits this letter of support for House Bill (HB) 1078 – Maryland Medical Assistance Program – Remote Ultrasound Procedures and Remote Fetal Non-Stress Tests. HB 1078 would require Maryland Medical Assistance ("Medicaid") to provide remote ultrasound procedures and remote fetal nonstress tests (NST) to pregnant and postpartum participants starting October 1, 2024.

In 2022, Medicaid covered a total of 32,189 live births, 47% of babies born statewide. Effective prenatal care is critical to improving health outcomes for all pregnant individuals, particularly those at high risk, and their babies. In turn, access to ultrasounds and NSTs are important tools for monitoring the health of this population. HB 1078 has the potential to close gaps in care by improving access to important pregnancy services for Medicaid participants, particularly those in remote and rural areas. While ultrasounds and NSTs are only performed a handful of times during a lower-risk pregnancy, those with high-risk pregnancies often require these tests and procedures multiple times a week in the third trimester. For individuals lacking transportation or living in a rural area, frequent visits to a specialist provider can be burdensome. By expanding the number of locations a patient can undergo ultrasounds and NSTs, participants based in these regions could be better able to access necessary care.

The Department believes these services are covered under its existing synchronous telehealth policy. MDH further assumes that in following the same standard of care the provider would follow if the service were provided on site, that the remote ultrasound and remote fetal NSTs would be conducted by a trained medical professional, not directly by the patient. Finally, the Department assumes that results of such testing will be interpreted by the health care professional receiving the results at the time of the appointment to ensure that, if medically necessary, urgent follow up care can be received promptly.

If you would like to discuss this further, please do not hesitate to contact Sarah Case-Herron, Director of Governmental Affairs at sarah.case-herron@maryland.gov or (410) 260-3190.

Sincerely,

Laura Herrera Scott, M.D., M.P.H.

Secretary