Senate Bill 372 – Preserve Telehealth Access Act of 2025

Position: Favorable
February 5, 2025
Senate Finance Committee

The University of Maryland Medical System strongly supports Senate Bill 372 – Preserve Telehealth Access Act of 2025. Senate Bill 372 ("SB 372") would protect the use of audio-only telehealth and maintain coverage and parity reimbursement of health care services provided through telehealth for Medicaid and private insurers by eliminating the current termination date for these provisions of June 30, 2025.

Telehealth is a critical component of our ability to provide primary and specialty care to all corners of the State – rural, suburban, and urban. The University of Maryland Medical System (UMMS) conducts over 100,000 outpatient telehealth visits each year, as well as hundreds of inpatient telehealth consultations that leverage specialized interprofessional expertise across our 12 hospitals and more than 150 medical facilities.

Beyond the sheer volume of care, UMMS data demonstrates that telehealth services are an important tool for access to care and health equity. Sixty-five percent (65%) of recipients of University of Maryland Telehealth are female compared to only 56% in person, typically in the younger 18-44 year old range, and telehealth utilization is higher among individuals of African American or Hispanic descent. More individuals on Medicaid or MCO plans utilize telehealth to access their care, with approximately 44% of telehealth visits represented by these groups compared to only 21% in person. Telehealth utilization in rural areas is also increased with almost 30% of all outpatient telehealth visits originating in Maryland Rural Counties. Terminating access to audio-only health care services or parity reimbursement for telehealth services would adversely impact access to care for Marylanders and likely exacerbate health disparities for underserved populations.

The reimbursement parity for telehealth providers authorized by the Maryland General Assembly since 2021, and the high level of patient satisfaction with our telehealth services, has enabled UMMS to greatly expand the telehealth services we are able to offer. The University of Maryland Tele-EMS program has enabled virtualized care in rural areas without the need for

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University of Maryland Shore Emergency Center at Queenstown •
University of Maryland Charles Regional Medical Center • University of Maryland St. Joseph Medical Center •
University of Maryland Upper Chesapeake Health System – University of Maryland Upper Chesapeake Medical Center -
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Mt. Washington Pediatric Hospital

patient transportation to the ER via ambulance. The Emergency Department TeleTriage program at University of Maryland Medical Center and Midtown Campuses have improved wait times for patients and reduced revisits while acting as a safety net for identifying and following up on sick patients presenting to these bustling ERs. The UMMS Virtual First program aims to bring specialty and subspecialty care outside of the four walls of the UMMC Downtown Campus and reduce the need for patient transfers into the tertiary care center where it is often difficult to find bed placement. And programs such as the University of Maryland Tele-Sitter, Virtual Nursing, and Virtual Fetal Heart Monitoring NEST programs have saved lives and improved quality of care by maximizing flexibility of virtual staffing resources despite national and regional healthcare workforce shortages. These expanded telehealth services will continue to improve access to care and health outcomes for Marylanders.

Telehealth services have expanded access to care in Maryland, particularly for underserved populations. Likewise, reimbursement parity has assisted UMMS and other providers in the State to expand the scope of critical care services they offer via telehealth. By making expanded telehealth coverage and reimbursement parity permanent, SB 372 would enable healthcare providers to continue to expand access to care for Marylanders and promote additional investment and innovation in telehealth services to continue to improve patient health outcomes.

For these reasons, the University of Maryland Medical System supports SB 372 and respectfully request a *favorable* report.

Respectfully submitted:

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About the University of Maryland Medical System
University of Maryland Medical System (UMMS) delivers comprehensive health care services throughout Maryland. UMMS physicians and patient care teams work hand-in-hand with University of Maryland School of Medicine specialists to provide primary, urgent, emergency and specialty care at 12 hospitals and more than 150 medical facilities across the state. The UMMS network includes academic, community and specialty hospitals that together provide 25% of all hospital-based care in Maryland