

Department of Legislative Services
Maryland General Assembly
2025 Session

FISCAL AND POLICY NOTE
First Reader

House Bill 869 (Delegate Pena-Melnyk, *et al.*)
Health and Government Operations

Preserve Telehealth Access Act of 2025

This bill makes permanent the provisions of law that specify that (1) “telehealth” includes specified audio-only telephone conversations between a health care provider and a patient and (2) reimbursement for a telehealth service must be made on the same basis and at the same rate as if the service were delivered in person. These provisions apply to both Medicaid and commercial health insurance. **The bill takes effect June 1, 2025.**

Fiscal Summary

State Effect: Special fund revenues for the Maryland Insurance Administration decrease minimally in FY 2026 only (as form filings and payment of fees for telehealth provision changes are no longer required). Medicaid expenditures (and federal fund revenues) for specified telehealth services continue beyond FY 2025. Any impact on overall Medicaid expenditures from continuing coverage as specified under the bill is indeterminate. No material impact on the State Employee and Retiree Health and Welfare Benefits Program.

Local Effect: Potential increase in expenditures for some local governments to continue to reimburse for certain telehealth services. Revenues are not affected.

Small Business Effect: Meaningful.

Analysis

Bill Summary/Current Law:

Medicaid

Under current law, the definition of “telehealth” includes (1) synchronous and asynchronous interactions; (2) from July 1, 2021, through June 30, 2025, an audio-only

telephone conversation between a health care provider and a patient that results in the delivery of a billable, covered health care service; and (3) remote patient monitoring services. “Telehealth” does not include the provision of health care services solely through an audio-only telephone conversation (with the exception of the temporary provision for fiscal 2022 through 2025), an email message, or a facsimile transmission.

From July 1, 2021, through June 30, 2025, Medicaid must provide reimbursement for services appropriately provided through telehealth on the same basis and at the same rate as if the health care service were delivered in person. Reimbursement does not include (1) clinic facility fees, except as specified or (2) any room and board fees.

The bill makes permanent the inclusion of an audio-only telephone conversation between a health care provider and a patient that results in the delivery of a billable, covered health care service in the definition of “telehealth” and requires Medicaid to permanently reimburse for services appropriately provided through telehealth, as specified.

Health Insurance

The definition of “telehealth” includes, from July 1, 2021, through June 30, 2025, an audio-only telephone conversation between a health care provider and a patient that results in the delivery of a billable, covered health care service.

From July 1, 2021, through June 30, 2025, a carrier must provide reimbursement for a health care service appropriately provided through telehealth on the same basis and at the same rate as if the health care service were delivered in person. Reimbursement does not include (1) clinic facility fees, except as specified or (2) any room and board fees.

The bill makes permanent the inclusion of an audio-only telephone conversation between a health care provider and a patient that results in the delivery of a billable, covered health care service in the definition of “telehealth” and requires a carrier to permanently reimburse for services appropriately provided through telehealth, as specified.

Small Business Effect: Health care providers can continue to receive reimbursement for telehealth services provided through audio-only conversations beyond fiscal 2025. Medicaid and carriers must permanently reimburse health care providers for telehealth services on the same basis and at the same rate as if the service were delivered in person.

Additional Information

Recent Prior Introductions: Similar legislation has not been introduced within the last three years.

Designated Cross File: SB 372 (Senator Beidle, *et al.*) - Finance.

Information Source(s): Department of Budget and Management; Maryland Department of Health; Maryland Insurance Administration; Department of Legislative Services

Fiscal Note History: First Reader - February 4, 2025
js/ljm

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