



Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Robert R. Neall, Secretary

**Boards of Examiners of Psychologists**

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February 13, 2020

The Honorable Paul G. Pinsky, Chair  
Education, Health, and Environmental Affairs  
2 West Miller Senate Office Building  
Annapolis, Maryland 21401

**RE: SB 402 - Health Care Practitioners – Telehealth - Letter of Concern**

Dear Chairman Pinsky and Committee Members,

The Maryland Board of Examiners of Psychologists (the “Board”) is submitting this **Letter of Concern** regarding *SB 402 - Health Care Practitioners – Telehealth*.

This bill allows health care practitioners to establish a practitioner-patient relationship through a synchronous or asynchronous telehealth interaction (occurs in real-time/occurs not in real-time); allows practitioners to perform clinical evaluations using synchronous or asynchronous interactions; allows texting as a service delivery modality; and prohibits boards from establishing separate standards of care for telehealth.

The role of behavioral health professionals as teletherapists includes performing assessments of psychological and social problems, developing comprehensive treatment plans, and treating patients with both normal and abnormal functioning. In order to successfully perform these tasks, the Board believes that synchronous (real-time) audio-visual interactions are necessary.

Establishing a trusting and productive practitioner-patient relationship while assessing the appropriateness of teletherapy requires that the exchange of information occurs in real-time. Real-time audiovisual interactions allow the therapist and patient to see and respond to each other’s cues, like facial expressions, body language, and tone of voice. Similarly, synchronous interaction is required in order to perform an accurate clinical evaluation. Conducting a clinical evaluation requires assessing an individual's behavior, personality, and cognitive abilities, by using a variety of devices, starting with a face-to-face interview with the patient. The more accurate the evaluation, the greater the likelihood of success for any subsequent intervention.

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Asynchronous teletherapy interactions can be useful, depending on the circumstance. For example, when following up with a patient or gathering additional information, asynchronous interactions may be more than sufficient. Additionally, texting can be useful when used in the same way emails are used (e.g., scheduling, checking on progress, etc.), but texting as a service delivery modality is not a viable alternative when working with people experiencing mental and emotional problems. A major concern of the board is that a text message from the patient may not reach the provider at the time when the patient needs help most (e.g. a person confronting domestic violence; a suicidal patient; a substance abuser).

Thank you for your consideration. If you have questions about this matter you may contact Lorraine Smith, Executive Director, at 410-764-4786 or at [lorraine.smith@maryland.gov](mailto:lorraine.smith@maryland.gov).

Respectfully Submitted,  
*Christopher Bishop, Psy.D.*  
Chair, MD Board of Examiners of Psychologists

*The opinion of the Board expressed in this document does not necessarily reflect that of the Department of Health or the Administration.*