



Committee: Senate Education, Health, and Environmental Affairs Committee
Bill Title: Senate Bill 402 - Health Occupations - Telehealth
Hearing Date: February 13, 2020
Position: Support

The Maryland Affiliate of the American College of Nurse Midwives (ACNM) supports *Senate Bill 402 – Health Occupations – Telehealth*. The bill establishes a broad regulatory framework, including consumer protections, for telehealth across health care professions.

Certified Nurse-Midwives (CNMS) and other advanced practice nurses are already allowed to provide services through telehealth. However, there is not explicit authorization under the Nurse Practice Act. The bill provides clarity that health care practitioners are authorized to use telehealth and that they must follow the same standard of care for in-person services.

In providing services to women, CNMs and other health care practitioners can use telehealth technology to increase access to care:

- **Hypertension – Prenatal and Post-Partum:** Telehealth, including remote patient monitoring, is a strategy for addressing hypertension for women in both prenatal and postpartum care. It allows for more frequent monitoring and clinical intervention than regular in-person visits.ⁱ A recent peer-reviewed research study showed that remote patient monitoring reduced prenatal admissions and induced labor for women with gestational hypertension.ⁱⁱ
- **Lowering Pregnancy Stress:** The Mayo Clinic’s “OB Nest” program, which includes several uses of asynchronous communication (meaning not in real time), resulted in lower pregnancy stress and higher patient satisfaction.ⁱⁱⁱ
- **PrEP:** Telehealth, including asynchronous modalities, is being used to increase access to PrEP.^{iv}

We need clear and consistent rules in order to continue to implement telehealth innovation. CNMs work side-by-side with other health care practitioners in hospitals, community health centers, and other health care program. Those facilities will have difficulty moving forward in telehealth without clear and consistent rules across all health care disciplines. We ask for a favorable report. If we can provide any further assistance, please contact Robyn Elliott at relliott@policypartners.net or (443) 926-3443

ⁱ Hoppe, Kara et al. Telehealth with remote blood pressure monitoring for postpartum hypertension: A prospective single-cohort feasibility study. *Pregnancy Hypertension*. [Volume 15](#), January 2019, Pages 171-176.

ⁱⁱ Lanssens, Dorien et al. The impact of a remote monitoring program on the prenatal follow-up of women with gestational hypertensive disorders. [Obstetrics & Gynecology and Reproductive Biology Volume 223](#), April 2018.

ⁱⁱⁱ Butler Tobah, Yvonne et al. Randomized comparison of a reduced-visit prenatal care model enhanced with remote monitoring. *American Journal of Obstetrics and Gynecology*. December 2019.

^{iv} Touger, R. & Wood, B.R. *Curr HIV/AIDS Rep* (2019) 16: 113. <https://doi.org/10.1007/s11904-019-00430-z>.