

STATE OF MARYLAND



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## MARYLAND HEALTH CARE COMMISSION

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February 18, 2020

The Honorable Delores G. Kelley  
Chair, Finance Committee  
3 East, Miller Senate Office Building  
Annapolis, MD 21401

### **RE: SB 502 – Health Insurance – Telehealth – Delivery of Mental Health Services – Coverage for Home Settings - INFORMATION**

Dear Chair Kelley:

The Maryland Health Care Commission (the “Commission”) would like to provide the Senate Finance Committee with information related to Senate Bill 502 (SB 502). SB 502 requires Medicaid to provide mental health services through telehealth in a patient’s home, to the extent that the State budget allows. As experts in telehealth, the Commission believes that the delivery of mental health services through telehealth in a patient’s home can help overcome obstacles to treatment. Given Medicaid’s concerns about the potential budget impacts of this bill, the Commission recommends that the Committee consider conforming this bill with House Bill 1208, which establishes a pilot program.

Since 2014, the Commission has awarded nearly 16 telehealth grants to qualified health care organizations to implement innovative telehealth pilots in the State. These grants assess the value of telehealth interventions across various care settings. Lessons learned inform future applications of telehealth, better practices and implementation efforts, and policies to support the advancement of telehealth. Findings also support planning and design of larger telehealth initiatives.

Telehealth, when used to provide mental health services in a patient’s home, can address obstacles to care delivery. Arguably, one of the greatest impediments of seeking mental health

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services is stigma and misconceptions.<sup>1</sup> Virtual care in the privacy of a patient's home can help address fears associated with seeking care in a health care setting. Telehealth supports patient recovery at home and can reduce the need for long distance travel, particularly in rural areas.<sup>2</sup> Mental health care providers use telehealth as a means to broaden their reach and availability to patients in need of care, including patients in areas which, without telehealth, have insufficient mental health care providers.

Use of telehealth among the Medicaid population is expected to increase as consumers and providers become more accepting of virtual health care visits. The Federal government has encouraged States to implement telehealth in Medicaid programs.<sup>3</sup> Approximately fourteen States have adopted policies that explicitly allow for a Medicaid recipient's home to serve as an originating site under certain circumstances.<sup>4</sup> A key challenge to the use of telehealth in the home include lack of high-speed internet in some parts of the State, particularly in areas with low population density. Provider willingness to participate in Medicaid, scheduling, and after hours availability should also be considered.

As noted above, the Commission recommends the Committee consider amending this bill to conform with House Bill 1208, implementing a pilot program rather than a permanent program. This would allow Medicaid to assess the use of telehealth for the delivery of mental health services in the patient's home. Findings from the pilot program will likely identify potential barriers to the program's success and changes in Medicaid policy that are necessary to support mental health services provided by telehealth in the home setting on a permanent basis.

I hope you find this information useful. Please feel free to contact me at (410) 764-3566 or [Ben.Steffen@maryland.gov](mailto:Ben.Steffen@maryland.gov), or Megan Renfrew, Government Affairs and Special Projects, at (410) 764-3483 or [Megan.Renfrew@maryland.gov](mailto:Megan.Renfrew@maryland.gov) if you have any questions.

Sincerely,



Ben Steffen  
Executive Director  
Maryland Health Care Commission

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<sup>1</sup> Understanding Stigma as a Mental Healthcare Barrier, National Alliance on Mental Illness, June 8, 2017, [www.nami.org/Press-Media/In-The-News/2017/Understanding-Stigma-as-a-Mental-Healthcare-Barrie?feed=In-the-news](http://www.nami.org/Press-Media/In-The-News/2017/Understanding-Stigma-as-a-Mental-Healthcare-Barrie?feed=In-the-news).

<sup>2</sup> Substance Abuse and Mental Health Services Administration. (2016). Rural Behavioral Health: Telehealth Challenges and Opportunities. In Brief, Volume 9, Issue 2, [www.store.samhsa.gov/system/files/sma16-4989.pdf](http://www.store.samhsa.gov/system/files/sma16-4989.pdf).

<sup>3</sup> Letter from Tim Hill, Acting Director, Department of Health and Human Services, to State Medicaid Director's, (June 11, 2018), [www.medicaid.gov/federal-policy-guidance/downloads/smd18006.pdf](http://www.medicaid.gov/federal-policy-guidance/downloads/smd18006.pdf).

<sup>4</sup> Center for Connected Health Policy, Telehealth Medicaid & State Policy (Spring 2019), [www.cchpca.org/sites/default/files/2019-05/cchp\\_report\\_MASTER\\_spring\\_2019\\_FINAL.pdf](http://www.cchpca.org/sites/default/files/2019-05/cchp_report_MASTER_spring_2019_FINAL.pdf).

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