

Testimony In Support of SB 278 Higher Ed Health Ct

Uploaded by: Ceruolo, Rich

Position: FAV

January 18, 2021

RE: SB 278 / HB 34
Maryland Senate / Miller Senate Office Building
Attn: Education, Health and Environment Affairs
11 Bladen Street
Annapolis, MD. 21401

Testimony in Support:

SB 278 HB / 34 – MSDE & MDH - MD School Based Health Center Standards - TeleHealth during the Covid-19 pandemic.

Hello and good day members.

Covid-19 Pandemic: During these unprecedented times, students and faculty within our schools and institutions of higher learning deserve access to high quality health care, now more than ever.

Telehealth is a wonderful new innovation. And a great option for students, and their on-campus health care centers. Accessing health care through a virtual health portal helps to protect the students, faculty and health center employees, while assisting students with their many healthcare needs. It's another great way we can help to keep citizens safe during the Covid – 19 pandemic.

Please return a favorable report and move forward with SB 278 / HB 34. Thank you for your time and consideration of my testimony today.

Mr. Richard Ceruolo.
Parent, disability rights advocate | Parent Advocacy Consortium

2021 Sign-On SB 278 Senate Side.docx.pdf

Uploaded by: Elliott, Robyn

Position: FAV

January 20, 2020

RE: Support of SB 278 - State Department of Education and Maryland Department of Health – Maryland School-based Health Center Standards - Telehealth

Dear Chair Pinsky:

Our organizations are in full support of *Senate Bill 278/House Bill 34– State Department of Education and Maryland Department of Health – Maryland School-Based Health Center Standards – Telehealth*. The bill eliminates an outdated and unnecessary approval process for school-based health centers to provide telehealth. In doing so, the bill supports the provision of telehealth as a strategy to improve health and educational outcomes for students served by school-based health centers.

This legislation is critical for the following reasons:

- **More Support is Needed for Telehealth in School-Based Health Centers:** Out of the 86 school-based health centers in Maryland, only about 18 centers are approved by MSDE to provide services through telehealth - even during the crisis of COVID-19. SBHCs are under-resourced and face significant administrative barriers in establishing telehealth programs.
- **MSDE Approval Process is No Longer Necessary:** With SB 402/HB 448 of the 2020 session, the Maryland General Assembly established uniform standards for health care providers to offer telehealth across all types of settings. MSDE's process for reviewing and approving school-based health center to provide telehealth is no longer necessary.
- **Telehealth is Necessary During COVID Crisis:** During this public health emergency, telehealth is the single most important strategy in ensuring people have access to care. It is also has been the only means for some health care providers to monitor children for crises in the home. However, most school-based health centers have been unable to pivot to telehealth because of MSDE's restrictions. School-based health centers are located in communities with a high concentration of poverty, and these communities have been most impacted by the pandemic. For this reason, SB 278/HB 34 is emergency legislation.

- **Telehealth is Critical Beyond the Pandemic for School-Based Health Centers:** School-based health centers mission is to improve health outcomes and ensure students can stay in school. If students are out with a somatic or behavioral health illness, telehealth provides a critical tool for a health care practitioner to engage the student and support their return to school.

Thank you for the opportunity to submit this testimony. We ask for a favorable report of this emergency legislation. If any of our organizations can be helpful with more information about this issue, please contact us directly or send a message through Robyn who represents the Maryland Assembly on School-Based Health Care. Her contact information is relliott@policypartners.net.

Advocates for Children and Youth

Maryland Dental Action Coalition

American Telehealth Association

Maryland Hospital Association

Center for Hope

Maryland Nurses Association

**Licensed Professional Counselors of
Maryland**

Mental Health Association of Maryland

Johns Hopkins University and Medicine

**National Association of Social Workers –
Maryland Chapter**

**Maryland Academy of Advanced Practice
Clinicians**

**National Council on Alcoholism and Drug
Dependence – Maryland Chapter**

**Maryland Assembly on School-Based
Health Care**

**Preventing Abuse and Neglect through
Dental Awareness**

Maryland Community Health System

**Public School Superintendents Association
of Maryland**

SB278 Telehealth in School Based Health Centers Te

Uploaded by: Kagan, Cheryl

Position: FAV

CHERYL C. KAGAN
Legislative District 17
Montgomery County

Vice Chair
Education, Health, and
Environmental Affairs Committee

Joint Audit Committee
Joint Committee on Federal Relations



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THE SENATE OF MARYLAND
ANNAPOLIS, MARYLAND 21401

SB278: State Department of Education and Maryland Department of Health - Maryland School-Based Health Center Standards - Telehealth (EMERGENCY BILL)

Senate Education, Health, and Environmental Affairs Committee

Wednesday, January 20, 2021, 3pm

COVID-19 has created numerous obstacles for Marylanders, especially with regard to health care accessibility. In the last legislative session, the General Assembly enacted (and Governor Hogan signed) emergency bill [SB402/HB448](#), which permitted telehealth services. This option has been vital during the pandemic to provide patient care while still maintaining social distancing.

Prior to the Coronavirus, Maryland's 86 school-based health centers (SBHCs) provided students and their families from low-income and rural areas with essential health care, and behavioral health and dental services at some locations. Roughly 18 of the 86 SBHCs are currently offering telehealth services.

Maryland State Department of Education's (MSDE) telehealth application and approval requirements create an unnecessary barrier to care. On June 3, 2020, I sent a letter to the MSDE Superintendent, detailing the need for access to telehealth services in our SBHCs. The letter urged her to remove the misguided requirement for an in-person visit prior to authorizing telehealth appointments. Instead of taking action, Superintendent Salmon inaccurately claimed that local superintendents could address the issue independently. In November 2020, four SBHCs requested access to telehealth from MSDE; as of today, MSDE has not yet granted permission.

[SB278](#) would eliminate the restrictions so that SBHCs can practice telehealth. This would allow students and their families to get continuity of care regardless of access to transportation; time-off from work; child care; or other barriers related to COVID-19. **Telehealth results in [better health outcomes](#), fewer disparities, and lower costs.**

Telehealth through our 86 SBHCs is a critical component of our COVID-19 health care response; that's why these centers are included in [MSDE's recovery plan](#). If SBHCs were able to [utilize telehealth](#), it would improve students' health and educational engagement and reduce the burden on parents to find health care during the pandemic.

I urge a favorable report of emergency bill SB278.

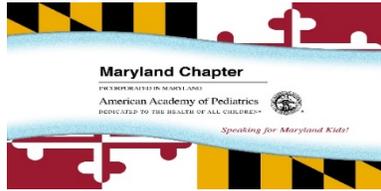
SB0278_FAV_MedChi, MDAAP, MACHC_School-Based Healt

Uploaded by: Kasemeyer, Pam

Position: FAV



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MID-ATLANTIC ASSOCIATION
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TO: The Honorable Paul G. Pinsky, Chair
 Members, Senate Education, Health, and Environmental Affairs Committee
 The Honorable Cheryl C. Kagan

FROM: Pamela Metz Kasemeyer
 J. Steven Wise
 Danna L. Kauffman

DATE: January 20, 2021

RE: **SUPPORT** – Senate Bill 278 – *State Department of Education and Maryland Department of Health – Maryland School-Based Health Center Standards – Telehealth*

On behalf of the Maryland State Medical Society (MedChi), the Maryland Chapter of the American Academy of Pediatrics (MDAAP), and the Mid-Atlantic Association of Community Health Centers (MACHC), we submit this letter of **support** for Senate Bill 278.

Senate Bill 278 addresses the current outdated framework for the provision of telehealth services by school-based health centers (SBHCs). The legislation is consistent with the findings and recommendations of the Council for the Advancement of School Based Health Centers (CASBHC), which identified as a priority the need to address challenges that SBHCs face in establishing telehealth programs. CASBHC’s Quality and Best Practices Workgroup held several meetings to specifically address barriers to the use of telehealth as well as to identify frameworks for its appropriate adoption and utilization. The Workgroup consulted numerous reference documents and met with the Maryland Department of Health and the Maryland State Department of Education (MSDE) staff in doing its analysis and compiling its findings and recommendations. Senate Bill 278 is consistent with a number of their findings and recommendations.

Passage of Senate Bill 278 is critical if the State is to enable SBHCs, which are often under-resourced, to establish telehealth programs by removing the significant administration barriers that now exist. Further, due to the passage of telehealth legislation in the 2020 Session that established uniform standards for health care providers to provide telehealth across all types of settings there is no longer a need for MSDE’s extensive review and approval process.

Passage of Senate Bill 278, as emergency legislation, is essential to ensuring that telehealth can be appropriately utilized to improve the health and educational outcomes for students served by SCBHs, not only during this public health emergency, but as a permanent component of the services they have available to meet the needs of the students and families they serve. A favorable report is requested.

For more information call:

Pamela Metz Kasemeyer
 J. Steven Wise
 Danna L. Kauffman
 410-244-7000

SB278 Center for Hope Lombardi telehealth FAV.pdf

Uploaded by: Lombardi, Joyce

Position: FAV

A LIFE BRIDGE HEALTH GROUP

CENTER FOR HOPE

Advancing hope, healing and resilience



SB 278/HB 34 – State Department of Education and Maryland Department of Health – Maryland School-based Health Center Standards – Telehealth

Education, Health, and Environmental Affairs Committee– January 20, 2021

Testimony of Joyce Lombardi, Director of Government Relations and Legal Services, Center for Hope

Position: **SUPPORT**

I write in support of SBB278. The Center for Hope, a subsidiary of Life Bridge, is a comprehensive violence program that addresses violence through the lifespan, and includes child advocacy, domestic violence programs, street violence interruption programs and an elder abuse program

This emergency bill would make it easier for public schools to provide tele-health and tele-mental health to our students by eliminating an unnecessary and burdensome review process from MDSE.

In the Pandemic, We Need More Eyes on Kids. The sudden reduction in child abuse claims received by the Maryland Department of Human Services is unprecedented. Between April and July 2020, child maltreatment reports declined by 46.8% compared to the same period in 2019. Why? Because mandated reporters such as school personnel and health workers account for the lion's share of all child abuse reports in Maryland, and the USA.

What's worse, the cases are more severe. For example, between March and April, 2020, over 86 percent of cases referred to Children's National Hospital due to child abuse concerns required hospitalization, compared to 50 percent during the same period last year. Ten percent of those hospitalized died as a result of their abuse, more than triple the death rates this time last year. *Source: 2021 Legislative Session Issue Brief, Dept of Legislative Services p. 220*

Telehealth Includes Mental Health. The stress and anxiety levels of children and adolescents are soaring during the pandemic, as kids are cut off from routine, structure, exercise and friends. Demand for the mental tele-health services we provide at the Baltimore Child Abuse Center (as subsidiary of LifeBridge Health) is very high and is often one of the only emotional outlets children have anywhere. This bill would reportedly also facilitate mental health telehealth services.

For all of the heretofore stated reasons, we request a **FAVORABLE** report for SB278.

Joyce Lombardi, Esq., Director of Government Relations and Legal Services (443) 923-7005, jlombard@lifebridgehealth.org

SB0278 MD NARAL SUPPORT.pdf

Uploaded by: Philip, Diana

Position: FAV



**SB0278 - State Department of Education and Maryland Department of Health
Maryland School-Based Health Center Standards – Telehealth**

Presented to the Hon. Paul Pinsky and Members of the Education, Health & Environmental Affairs Committee
January 20, 2021 3:00 p.m.

POSITION: SUPPORT

NARAL Pro-Choice Maryland **urges the Education, Health, and Environmental Affairs Committee to issue a favorable report on SB0278 - State Department of Education and Maryland Department of Health – Maryland School-Based Health Center Standards – Telehealth**, sponsored by Senator Cheryl Kagan.

Our organization is an advocate for reproductive health, rights, and justice. We seek to protect the rights of youth seeking access to healthcare on school campuses fortunate to have school-based health centers in order to stay in school and on track to graduate. Across our state, school-based health centers have become many children’s sole source of healthcare and have proven effective in diagnosing and treating illness, managing chronic health conditions, and increasing school attendance for children at risk of missing school due to mental and physical health issuesⁱ. We must do better as a state to increase healthcare should be made more readily available, and this is possible through the addition of telehealth services. SB0278 aims to do just that.

The COVID-19 pandemic has increased the need for healthcare for young people in Maryland. In the fall of 2020, one in eight households with children lacked health insurance, and the percentage of children without health insurance has steadily increased since 2018ⁱⁱ. Since school-based health centers can administer care to uninsured students, providers in these centers should be able to accommodate this increased need for health services among young uninsured people. Health insurance is also inaccessible to undocumented children and can be very difficult to attain for Deferred Action for Childhood Arrivals (DACA) recipients. Maryland is home to thousands of DACA recipientsⁱⁱⁱ. We should be advocating for barrier-free access to basic healthcare for all youth that live in Maryland. Access to telehealth would allow healthcare professionals located in school-based health centers to continue administering care in an easier and more accessible way during the pandemic, and beyond. The COVID-19 pandemic has caused increased stress, and worsened existing mental health conditions like depression and anxiety in children, adolescents, and teens. As advocates for healthcare, we recognize that youth in Maryland deserve the right to pursue a quality education while effectively addressing needs related to mental health, as well as physical health issues. We recognize health equity and access to basic healthcare as a fundamental human right. We seek to remove unnecessary barriers to care and applaud advocacy to increase access to care through telehealth. For these reasons, NARAL Pro-Choice Maryland **urges a favorable committee report on SB0278**. Thank you for your time and consideration.

ⁱ Maryland State Department of Education. School-Based Health Centers. Retrieved from <http://marylandpublicschools.org/about/pages/dsfss/sssp/sbhc/index.aspx>

ⁱⁱ The Annie E. Casey Foundation (2020). Kids, Families and Covid-19 Report. Retrieved from <https://www.aecf.org/resources/kids-families-and-covid-19/>

ⁱⁱⁱ American Immigration Council (2020). Immigrants in Maryland Fact Sheet.

TESTIMONY FOR SB0278 School Based Health Centers T

Uploaded by: Plante, Cecilia

Position: FAV



TESTIMONY FOR SB0278

STATE DEPARTMENT OF EDUCATION AND MARYLAND DEPARTMENT OF HEALTH – SCHOOL-BASED HEALTH CENTER STANDARDS - TELEHEALTH

Bill Sponsor: Senator Kagan

Committee: Education, Health and Environmental Affairs

Organization Submitting: Maryland Legislative Coalition

Person Submitting: Cecilia Plante, co-chair

Position: FAVORABLE

I am submitting this testimony in favor of SB0278 on behalf of the Maryland Legislative Coalition. The Maryland Legislative Coalition is an association of individuals and grassroots groups with members in every district in the state. We have over 30,000 members across the state.

We are excited by the prospect of leveraging school-based health centers, a resource that is already available throughout our state, into a model that will help serve their communities better. Expanding telehealth services to the broader community, especially in light of the pandemic not only makes sense but is a cost-effective way to provide basic health care to those who cannot afford private health insurance.

This would accelerate the process of adopting telehealth in the school-based health centers and will inevitably make our communities safer.

The Maryland Legislative Coalition supports this bill and we recommend a **FAVORABLE** report in Committee.

SB 278.Telehealth Assurance.pdf

Uploaded by: Woolums, John

Position: FAV

BILL: Senate Bill 278
TITLE: State Department of Education and Maryland Department of Health -
Maryland School-Based Health Center Standards - Telehealth
DATE: January 20, 2021
POSITION: SUPPORT
COMMITTEE: Education, Health, and Environmental Affairs Committee
CONTACT: John R. Woolums, Esq.

The Maryland Association of Boards of Education (MABE), representing all of the state's local boards of education, supports Senate Bill 278.

MABE supports this legislation in order to remove any bureaucratic barriers to the ability of school-based health centers to provide health care services through telehealth. Specifically, this bill is needed to ensure that a school-based health center already approved by the Maryland State Department of Education (MSDE) and the Maryland Department of Health (MDH) need not satisfy additional requirements before providing telehealth services.

There are approximately 84 school-based health centers located in 12 Maryland jurisdictions. These centers offer comprehensive preventive and primary health services which may include behavioral health, oral health, and other health support services. School closures resulting from the COVID-19 pandemic have challenged the operation of school-based health centers and heightened the need to provide student health services through telehealth.

According to the 2019 report on "School-Based Telehealth" by the Maryland Health Care Commission:

"Use of school-based telehealth can improve health quality and academic performance by expanding access to primary and acute care, chronic disease management, behavioral health, and therapy services. Telehealth has been found to help treat complex conditions and keep chronically ill children in school. Schools using telehealth have demonstrated its value in decreasing absenteeism and relieving stress for parents/guardians who no longer have to leave work to take their child to a medical appointment or an urgent care center. Growing evidence supports opportunities for telehealth to avert emergency room visits and reduce health care costs."

Again, MABE supports the passage of Senate Bill 278 to facilitate the operation of school-based health centers using telehealth to meet the needs of students and families throughout the State.

For these reasons, MABE requests a favorable report on Senate Bill 278.

SB278.Unfavorable.MDRTL.pdf

Uploaded by: Bogley, Laura

Position: UNF



Opposition Statement SB278
School-Based Health Centers - Telehealth
By Laura Bogley-Knickman, JD
Director of Legislation, Maryland Right to Life

We Strongly Oppose SB278

On behalf of our 200,000 followers, we respectfully yet strongly object to SB278. Application of this bill to expand the abortion industry's access to school children in Maryland particularly through remote prescription of chemical abortion pills in school-based health centers poses a dangerous risk to the well-being of school children and is not a part of the academic mission of our public school system.

FDA REM restrictions on the remote prescription and sale of abortion pills are a necessary regulation to protect the health and safety of women and girls from the improper use of chemical abortion pills.

Parents entrust our public school systems to provide academic instruction only. Parents send their daughters to school to receive an education, not to receive abortions. We know that abortion industry is working to expand abortion services into high schools across the nation. <https://www.washingtonexaminer.com/opinion/planned-parenthood-plans-to-infiltrate-high-schools>.

We strongly urge the bill sponsor to amend the language of this bill to exclude its application to abortion, chemical abortion pills and abortion related services. Otherwise we strongly urge you to issue an unfavorable report on this bill.

We support programs to create an environment that supports students who parent their children, but we cannot support any policy or programs that give the abortion industry access to minor school-aged children. Please keep in mind that there are other service providers who provide support to teen mothers but do not refer to or sell abortions.

Abortion is not health care

Abortion is not health care. It is a brutal procedure that ends the lives of unborn children through suction, dismemberment or chemical poisoning. Abortion creates a culture of violence and abuse. Abortion is the leading cause of death of Black Americans, more than all other causes combined. Women have better options for comprehensive health care. There are 14 federally qualifying health care centers for every Planned Parenthood in Maryland.

No public funding for abortions

Taxpayers should not be forced to fund elective abortions, which make up the vast majority of abortions performed in Maryland. State funding for abortion on demand with taxpayer funds is in direct conflict with the will of the people. A 2019 Marist poll showed that 54% of Americans, both "pro-life" and "pro-choice" oppose the use of tax dollars to pay for a woman's abortion. Never has more than 40% of the American public supported taxpayer funding of abortion regardless of the context or way in which the question is asked.

Love them both

This bill seeks to This stands in conflict with the fact that 83% of Americans polled favor laws that protect both the lives of women and unborn children. Public funds instead should be prioritized to fund health and family planning services which have the objective of saving the lives of both mother and children.

Funding restrictions are constitutional

The Supreme Court has held that the alleged constitutional “right” to an abortion “implies no limitation on the authority of a State to make a value judgment favoring childbirth over abortion, and to implement that judgment by the allocation of public funds.” When a challenge to the constitutionality of the Hyde Amendment reached the Supreme Court in 1980 in the case of *Harris v. McRae*, the Court ruled that the government may distinguish between abortion and other procedures in funding decisions -- noting that “no other procedure involves the purposeful termination of a potential life” -- and affirmed that *Roe v. Wade* had created a limitation on government, not a government entitlement.

5. EHEA - SB278 - State Department of Education an

Uploaded by: Bennardi, Kimberly

Position: INFO



Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Acting Secretary

January 20, 2021

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

RE: SB 278 – State Department of Education and Maryland Department of Health – Maryland School-Based Health Center Standards – Telehealth – Letter of Information

Dear Chairman Pinsky and Committee Members:

The Maryland Department of Health (MDH) respectfully submits this letter of information on Senate Bill 278 (SB 278) – State Department of Education and Maryland Department of Health – Maryland School-Based Health Center Standards – Telehealth for the Committee’s consideration.

SB 278 would require MDH and MSDE to authorize school-based health centers (SBHCs) to provide telehealth services consistent with the Health-General Article requirements without any other authorization requirements.

MSDE’s current process requires SBHCs to complete a telehealth checklist prior to rendering telehealth services. This checklist ensures that telehealth services are provided to students safely and appropriately. SB 278 would eliminate the checklist process. While this may increase the number of SBHCs immediately able to perform telehealth services, MSDE and MDH will no longer have oversight of services delivered via telehealth. As a result, the quality of care delivered to Maryland’s children may be compromised.

SBHCs and clinics must adhere to federal Medicaid regulations governing clinics (42 CFR § 440.90 - Clinic Services). Under normal circumstances, Medicaid may not reimburse SBHCs or other clinics if neither the practitioner nor patient is physically located within the clinic. This requirement applies to all freestanding clinics participating in the Maryland Medicaid program, regardless of whether they are community-based clinics or SBHCs. Due to the COVID-19 public health emergency (PHE), MDH received federal permission to waive the “four walls” rule. Under this authority, SBHCs may receive reimbursement for services rendered where both the practitioner and the patient are in their homes (with no one located at the SBHC) for the duration of the federal government’s declared PHE. The waiver will terminate when the PHE ends. On September 1, 2020, MDH issued further guidance regarding this temporary expansion, which included billing guidance to providers.

The waiver maintains the SBHC’s ability to bill telehealth services as a SBHC encounter. As such, the telehealth encounters remain within the program oversight and monitoring responsibilities of MSDE and MDH. The provisions of this bill would make MDH and MSDE unaware of the provision of these services and thus unable to perform these duties designed to ensure quality telehealth services. This would impede

MSDE and MDH's current program duties such as data collection related to these services and provision of appropriate technical assistance to SBHCs. In effect, MSDE and MDH would have no authority over program standards while still being subject to liability for unanticipated negative program impacts.

I hope this information is useful. If you have questions or need more information about this subject, please do not hesitate to contact me at (410) 260-3190 or webster.ye@maryland.gov or Deputy Director of Governmental Affairs, Heather Shek, at the same number or heather.shek@maryland.gov.

Sincerely,



Webster Ye
Assistant Secretary, Health Policy

[https://mmcp.health.maryland.gov/Medicaid%20COVID19/COVID-19%20Telehealth%20Guidance%20for%20School-Based%20Health%20Centers%20-%2008-31-2020_signed%20tr-1%20\(1\).pdf](https://mmcp.health.maryland.gov/Medicaid%20COVID19/COVID-19%20Telehealth%20Guidance%20for%20School-Based%20Health%20Centers%20-%2008-31-2020_signed%20tr-1%20(1).pdf)

SB 278 - LOI - State Department of Education and M

Uploaded by: Hands, Zachary

Position: INFO

Senate Bill 278 - *State Department of Education and Maryland Department of Health - Maryland School Based Health Center Standards – Telehealth*
Education, Health, and Environmental Affairs
January 20, 2021

This bill would allow school-based health centers to provide telehealth at a distant site while the child is in the home, without notifying the MSDE, MDH, or any local school-based leadership. The current process requires that the sponsor of the telehealth service complete a one-page form signifying a change to the delivery of services (telehealth) with a signature of the local superintendent of schools. If the MDH and the MSDE would no longer be allowed to establish any requirements for the provision of telehealth in currently approved school-based health centers, there would be no way of monitoring whether the equipment and provider are appropriate.

MSDE remains committed to supporting the expansion of school-based health centers and the use of telehealth. We respectfully request that you consider this information as you deliberate **SB 278**. For further information, please contact Zachary Hands, at 410-767-0504, or Zachary.hands1@maryland.gov.