

BRIAN E. FROSH
Attorney General



ELIZABETH F. HARRIS
Chief Deputy Attorney General

CAROLYN QUATTROCKI
Deputy Attorney General

STATE OF MARYLAND
OFFICE OF THE ATTORNEY GENERAL

FACSIMILE NO.
(410) 576-6571

WRITER'S DIRECT DIAL NO.
(410) 576-6515

January 27, 2021

To: The Honorable Delores G. Kelley
Chair, Finance Committee

From: The Office of the Attorney General

Re: Senate Bill 3 (Preserve Telehealth Access Act of 2021): Support

The Office of the Attorney General (the Office) supports Senate Bill 3. Preserving COVID-related expansions of telehealth access is one of the priority actions recommended by the Attorney General's COVID-19 Access to Justice Task Force. To build health equity and increase health care services for historically underserved populations that are being disproportionately affected by COVID-19, the Task Force recommended making permanent telehealth and audio services that have been shown to be effective during the pandemic and to have helped address an increased demand for services generally. The Report of the Senate President's Advisory Workgroup on Equity and Inclusion recognized the benefits of expanding telehealth access, as did the Maryland Health Care Commission's Telehealth Policy Workgroup that was convened in 2020. Their combined recommendations acknowledge the need for patient-centric telehealth laws that preserve patient choice, as this bill apparently would do—if not, express protections may prove necessary.

The bill would expressly require carriers to cover audio-only services, and would require reimbursement parity between in-person and telehealth services. A carrier may not impose as a condition of reimbursement for a telehealth service that the service be provided by a provider designated by the carrier. The bill's insurance provisions apply to all policies, contracts, and health benefit plans issued, delivered, or renewed in the State on or after January 1, 2022.

The bill would require Medicaid to provide medically necessary somatic, dental or behavioral health services to a patient at an originating site by a distant site provider

through the use of technology-assisted communication. “Telehealth” would include synchronous and asynchronous interactions; audio-only conversations between a health care practitioner and patient using telecommunications technology; and remote patient monitoring (RPM) services.

Continuing pandemic-expanded telehealth services will allow Marylanders to access care without risk of infection as the pandemic continues, help to eliminate long-standing racial disparities in the health care system and improve health outcomes for Marylanders.

We urge the Committee to give Senate Bill 3 a favorable report.

cc: Sponsor