

Written Testimony Senate Finance Committee House Health and Government Operations Committee SB393 / HB551 Maryland Medical Assistance Program and Health Insurance – Coverage and Reimbursement of Telehealth Services

January 27, 2021

Position: SUPPORT

Sheppard Pratt thanks the Maryland General Assembly for your longstanding leadership and support for mental and behavioral health providers in Maryland. This testimony outlines the Sheppard Pratt support for SB393/HB551 Maryland Medical Assistance Program and Health Insurance — Coverage and Reimbursement of Telehealth Services. It is our hope that the Maryland General Assembly will pass this legislation.

As the COVID-19 pandemic began in Maryland, Sheppard Pratt worked tirelessly to ensure that we could continue to help both individuals in crisis and our existing patients access life-changing care.

Thanks to emergency orders enabling reimbursement for telehealth, we successfully launched our Virtual Psychiatric Rehabilitation Program throughout the state of Maryland. The Psychiatric Rehabilitation Programs (PRP), Community Employment Programs, Occupational Therapy Programs, Residential Rehabilitation Programs, and Chesapeake Connections Program participated in the development, launch, and follow up supports as it relates to the new Virtual Psychiatric Rehabilitation Program. While operating the virtual PRP, each of these teams continue to provide needed in person services and telephonic services as well.

This equates to over eleven hundred virtual rehabilitation group services delivered since May 2020 for individuals needing to access a more structured support model while pursuing desired rehabilitation goals. Many of the individuals served with in these programs have been hindered by location, finances, lack of transportation and motivation. The ability to provide telehealth and audio only services to the individuals receiving services within the rehabilitation programs has eased burdens on emergency departments and emergency personal across the State at a time when an all hands on deck approach is so desperately needed.

Since the start of the COVID-19 pandemic, telehealth has rapidly expanded in all areas such as: crisis treatment, initial consultations, follow up treatment and prevention strategies, psychotherapy, group rehabilitation for substance use and mental health programming.



This has proven to be a heavy lift for the health care industry as IT systems needed to be further developed and expanded, as well as an increase in the need for supportive equipment like tablets, smart phones, Wi-Fi service, desktop computers, smart televisions, and adaptive speaker systems. This lift was met with eagerness and willingness to take charge and pivot into a digital world that our health care system was just starting to envision.

To date, Sheppard Pratt has found that our clients receiving rehabilitation services within our programming, include:

- 81% of clients have the ability to join the virtual rehabilitation groups on a telehealth platform;
- 19% of the clients have the ability to join the virtual rehabilitation groups through audio only options;
- 88% of the clients have access to a phone;
- 22% have access to a laptop;
- 10% have access to a tablet;
- 7% have access to a desktop; and
- 60% of the above referenced clients have access to internet/Wi-Fi service.

There is a delicate balance that the rehabilitation programs need to take as we forge ahead into the digital support world. A lot of learning and re-directing of varying engagement approaches were explored since the start of the virtual programming. Integration and collaboration are the key drivers of what makes the programming successful. Currently, we are monitoring a small-scale study group of 37 patients utilizing 99% audio only supports. To date, we found that 51% of these individuals received a positive change score in their stress indicators, meaning 51% of these individuals report to feel less stress now than they did before they had access to virtual rehabilitation support both via telehealth and audio only. Audio only services enable the patient to continue to receive the care that they need regardless of their connection to technology. If the patient has a phone, they can access the support that they need in real time versus waiting and or possibly never receiving the help that they need.

Sheppard Pratt asks that you support the SB393/HB551 because the legislation will ensure the extension of four policy changes that continue to remove barriers to telehealth during COVID-19 and beyond:

- Eases restrictions on originating and distant sites, meaning that both providers and patients have greater discretion on the most appropriate physical location to hold their telehealth appointment or schedule virtual visit
- Allows for reimbursement parity between in-person and telehealth services inclusive of audioonly services
- Acknowledges value of health care services delivered via audio-only modalities, especially to vulnerable and underserved populations with internet and technology challenges—the communities most likely to have limited health care access



Removes barriers to coverage for remote patient monitoring services, so providers can identify
health issues and intervene before they escalate and require emergency care

It is vitally important that Marylanders have easier access to the quality mental health services they deserve – and we can make that access possible by making permanent the telehealth flexibilities that were granted at the beginning of the pandemic inclusive of audio only service ability. This bill brings Maryland in line with neighboring jurisdictions that passed legislation to ensure access to necessary health care, regardless of the modality through which it is delivered. Backing away will leave thousands of Marylanders without access to the care they need and deserve.

Sheppard Pratt urges the committee's favorable report on SB393/HB551.

About Sheppard Pratt

Sheppard Pratt is the nation's largest private, nonprofit provider of mental health, substance use, developmental disability, special education, and social services in the country. A nationwide resource, Sheppard Pratt provides services across a comprehensive continuum of care, spanning both hospital- and community-based resources. Since its founding in 1853, Sheppard Pratt has been innovating the field through research, best practice implementation, and a focus on improving the quality of mental health care on a global level. Sheppard Pratt has been consistently ranked as a top national psychiatric hospital by *U.S. News & World Report* for nearly 30 years.