



Testimony on HB 191

Maryland Medical Assistance Program – Psychiatrists and Psychiatric Nurse Practitioner

Telemedicine Reimbursement – Sunset Termination

House Health and Government Operations

Hearing Date: January 27, 2021

POSITION: Support

Chairperson Shane Pendergrass, Vice Chairperson Joseline Pena-Melnyk and members of the House Health and Government Operations Committee thank you for hearing testimony on SB 56. I am Suanne Blumberg, CEO, at Upper Bay Counseling and Support Services. We serve over five thousand consumers yearly, from early childhood to geriatric. We serve both Cecil County and Harford County providing an array of services including Outpatient Therapy, Residential Rehabilitation Program, Assertive Community Treatment, Psychiatric Rehabilitation Programs, Health Homes, and Substance Use Disorder Treatment to name just some of the services.

Upper Bay Counseling and Support Services is asking for your support of SB 56 which would remove the sunset for our nurse practitioner to be able to provide services via telehealth in our Assertive Community Treatment Program, ACT. We have had an ACT program for four years. Our ACT team serves persons who have a serious and persistent mental illness along with multiple hospitalizations, criminal history and a transient life. Many of these clients are homeless and have minimal community connects or supports. The prescriber, who is a nurse practitioner at Upper Bay Counseling, is the first step on the pathway to success for this client population.

We compared a six month period just before SB 534 was passed in 2019 allowing our nurse practitioners to provide services via telehealth and six months after the bill was enacted. Our nurse practitioner was able to schedule 200 more appointments with telehealth in place. This is very significant because a number of those appointments were emergency appointments which in the past could have resulted in an emergency room visit. It also gave the client the option to be seen in the community, in the office or via telehealth which has improved our care of these clients. These 200 more appointments did not cost the state Medicare system more money since ACT services are a bundled service so we receive one payment for all of the services with a minimum expectation to be met for reimbursement. This gives us the flexibility to add services where needed for any client in this program.

During these most trying times of the pandemic we have experienced a 100% attendance for the first prescriber appointments. This is a first for us and remarkable for this client population since first appointment no-shows are a significant challenge. Once again the ability to provide prescriber services via our nurse practitioner using telehealth allowed us to reach 100% compliance on that metric. Also during this time we have had 1/3 of our ACT staff test positive for Covid 19. Our prescriber was able to continue prescribing via telehealth so that medication adherence continued for these clients.

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If the sunset is not removed we will not be able to continue providing telehealth prescribing services to our clients in ACT. The sunset that was added to the original bill has an end date of September 30, 2021. This would dramatically alter the progress we have made with our clients in ACT and would not permit us to provide services based on their needs as opposed to the needs of the state.

I urge you to give HB 191 a favorable report.