

**House Bill 551**  
**Maryland Medical Assistance Program and Health Insurance – Coverage and Reimbursement of Telehealth Services**

House Health and Government Operations Committee  
February 10, 2021

**Support**

Catholic Charities of Baltimore strongly supports HB 551, which would improve access to behavioral health services by allowing patients to receive telehealth services from their homes, authorize audio-only telehealth, require payment for telehealth services at the same rate as in-person, reimburse for peer and paraprofessional provided telehealth services, and protect a patient's right to consent to receive services via the mode they choose.

Inspired by the gospel to love, serve and teach, Catholic Charities provides care and services to improve the lives of Marylanders in need. As the largest human service provider in Maryland working with tens of thousands of youth, individuals, and families each year, we recognize the importance of access to mental health and substance use services in a manner that best meets the clients' needs.

Each day, Catholic Charities staff interact with Marylanders facing challenges and difficulties, those challenges and difficulties have only escalated during the Pandemic. COVID-19 has laid to bare longstanding inequities in our systems, including inequitable access to behavioral health services. However, one area that has been a bright spot in an otherwise dark time is that many children, youth and adults were able to continue their therapy relationships through telehealth.

Catholic Charities provides a continuum of behavioral health services throughout Western and Central Maryland with outpatient clinics in Anne Arundel, Baltimore, Frederick, Harford and Allegany Counties, as well as, Baltimore City. We also offer school based behavioral health services in over 120 schools in the vicinity of the clinics. Prior to March of 2020, we offered limited telehealth services. Faced with a massive disruption in services due to COVID, we ramped telehealth services up to our new normal of 3,500 telehealth visits a week. Those appointments include not only therapy but also medication management and psychiatric rehabilitation program (PRP) services. Over the past 10 months, we have learned many lessons. We know that telehealth is not for everyone, but for many of our clients, telehealth has been a critical tool to reaching clients where they are. This story shared by one of our clinicians exemplifies our experience.

Since the switch to telehealth, Jane<sup>1</sup> has been able to attend her appointment as scheduled. Not only does she seek therapy and medication management services, but all 3 of her children also seek several services (therapy, medication management and PRP services). By switching to telehealth, she saves money on gas, has less wear tear on her vehicle, and does not have to worry about having transportation to attend appointments in the office. Additionally, as a resident of Western Maryland Jane does not have to worry about traveling in inclement weather or having to have her children travel in various weather conditions to get to an appointment. She explained overall it is a lot less stress and "Zoom" has become part of her life. She also pointed out that it is a much smoother process to organize the family's schedule.

While no one would have recommended the abrupt switch we made from in-person services to telehealth, we now have a wealth of knowledge to gauge the appropriate usages of telehealth. HB 551 would ensure telehealth services can continue for all Marylanders after the Pandemic with the appropriate consumer protections. **On behalf of the individuals and families we work with, Catholic Charities of Baltimore appreciates your consideration, and urges the committee to issue a favorable report for House Bill 551.**

Submitted By: Regan K. Vaughan, Director of Advocacy

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<sup>1</sup> The client's name was changed to protect her privacy.