



Ashley Black, Staff Attorney  
Public Justice Center  
201 North Charles Street, Suite 1200  
Baltimore, Maryland 21201  
410-625-9409, ext. 224  
[blacka@publicjustice.org](mailto:blacka@publicjustice.org)

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**HB 123**  
**Preserve Telehealth Access Act of 2021**  
**Hearing of the House Health and Government Operations Committee**  
**January 27, 2021**  
**1:30 PM**

**SUPPORT**

The Public Justice Center (PJC) is a not-for-profit civil rights and anti-poverty legal services organization which seeks to advance social justice, economic and racial equity, and fundamental human rights in Maryland. Our Health Rights Project supports policies and practices that promote the overall health of Marylanders struggling to make ends meet, with the explicit goal of promoting strategies that work to eliminate racial and ethnic disparities in health outcomes. PJC strongly supports HB 123, which would preserve telehealth access for Maryland Medical Assistance (Medicaid) patients and expand the definition of telehealth to include audio-only conversations for private insurance.

**Telehealth reduces barriers to accessing quality healthcare for Medicaid patients.** Due to the COVID-19 pandemic, Governor Hogan issued emergency legislation and Maryland received federal waivers to expand Medicaid telehealth services coverage. These changes transformed the way Medicaid and CHIP beneficiaries access care. Between February to April 2020, services delivered via telehealth among Medicaid and CHIP beneficiaries rose by 2,632% across the country compared to March to June 2019.<sup>1</sup> This rise in services was the highest among working age adults, children and seniors.<sup>2</sup> Maryland must continue providing care options that enable patients to receive medically necessary acute, primary and specialty care and minimizes the risk of COVID-19 infection for patients and providers.

**Expanding the “telehealth” definition enables patients to access care wherever they are.** The COVID-19 pandemic has transformed the way that patients access care. Patients who lack access to transportation or are at high risk for COVID-19 health complications if they contract the virus, including seniors and individuals with disabilities, may not be able to safely visit a provider in person. Likewise, Medicaid and CHIP patients without internet access would be disproportionately impacted if telehealth services were restricted. The availability of

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<sup>1</sup> Centers for Medicare & Medicaid Services, *Services Delivered via Telehealth Among Medicaid & CHIP Beneficiaries during COVID-19* (2020), <https://www.medicare.gov/resources-for-states/downloads/medicaid-chip-beneficiaries-COVID-19-snapshot-data-through-20200630.pdf>.

<sup>2</sup> *Id.*

asynchronous telehealth and audio-only conversations could mean the difference between life and death for a patient who cannot attend an in-person appointment. HB 123 would not only support continuity in patient care and health equity, but it would also ensure that providers are reimbursed for the care that they provide.

HB 123 would also expand the definition of “telehealth” to include audio-only conversations for private insurance programs. While private insurance programs reimburse telehealth services, audio-only conversations are excluded from coverage under state law. This practice does not consider that many patients covered by private insurance may reside in a healthcare desert where locating a primary or specialty care physician is challenging and may not have access to a stable internet connection. Access to a full range of telehealth options should not depend on the patient’s insurance source. To promote health equity and equal access for patients regardless of insurance source, private insurance should cover audio only conversations.

For the foregoing reasons, the PJC **SUPPORTS HB 123** and urges a **FAVORABLE** report. Should you have any questions, please contact Ashley Black at (410) 625-9409, ext. 224 or [blacka@publicjustice.org](mailto:blacka@publicjustice.org).