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TO: The Honorable Shane E. Pendergrass, Chair

Members, House Health and Government Operations Committee

The Honorable Heather Bagnall

FROM: Pamela Metz Kasemeyer

J. Steven Wise Danna L. Kauffman

DATE: February 10, 2021

RE: SUPPORT – House Bill 551 – Maryland Medical Assistance Program and Health Insurance – Coverage and

Reimbursement of Telehealth Services

On behalf of the Maryland State Medical Society, the Maryland Chapter of the American Academy of Pediatrics, the Maryland Chapter of the American College of Emergency Physicians, the Mid-Atlantic Association of Community Health Centers, and the Maryland Clinical Social Work Coalition, we submit this letter of **support** for House Bill 551.

Telehealth has been a critical tool for the provision of health care services during the pandemic. Of particular note, is the critical importance it has played in expanding access to mental health (MH) and substance use disorder (SUD) services, especially given the dramatic increase in the incidence of MH and SUD disorders that has occurred over the course of the pandemic. While ensuring that telehealth remains a viable service delivery avenue generally, it is essential that issues specific to MH and SUD services are addressed. House Bill 551 captures those issues that require affirmative adoption if telehealth coverage is to be authorized permanently following the public health emergency.

House Bill 551 will improve access to life-saving MH and SUD treatment by: 1) authorizing patients to receive telehealth services in their homes or wherever they are located to maximize access to care, while reducing financial barriers; 2) authorizing audio-only/telephonic telehealth to reduce health disparities associated with race, income, and place of residence, while progress is made to bridge the digital divide; 3) requiring payment for telehealth services at the same rate as in-person services to ensure that providers are fully reimbursed for the care they provide; 4) authorizing certified MH and SUD programs to be reimbursed for peers and paraprofessionals providing telehealth services, under supervision; 5) requiring reimbursement for remote patient monitoring for patients with MH and SUD; 6) requiring plans to comply with the Mental Health Parity and Addiction Equity Act and eliminating barriers to MH and SUD telehealth services that are more restrictive than those for medical/surgical telehealth services; and 7) protecting the patient's right to consent to receive services via the service mode they choose.

Ensuring that Marylanders who need access to MH and SUD services retain the ability to access those services via telehealth will dramatically improve both access and health outcomes. Passage of House Bill 551 is critical to achieving those objectives. A favorable report is requested.

## For more information call:

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