



Sheppard Pratt

Written Testimony
Senate Education, Health and Environmental Affairs Committee
House Health and Government Operations Committee
SB568 / HB732 Health Care Practitioners –
Telehealth - Out-of-State Health Care Practitioners

February 4, 2021

Position: OPPOSE

Sheppard Pratt thanks the Maryland General Assembly for your longstanding leadership and support of mental and behavioral health providers in Maryland. This testimony outlines the Sheppard Pratt **opposition of SB568/HB732 Health Care Practitioners – Telehealth – Out-of-State Health Care Practitioners**. It is our hope that the Maryland General Assembly will NOT pass (or drastically amend) 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. We thank the General Assembly and Governor for expanding telehealth during the pandemic but expanding beyond Maryland providers is not the right step at this time.

Sheppard Pratt asks that you **oppose this proposed telehealth expansion to out-of-state providers** for the following reasons:

- 1. This is a safety issue.** Out-of-state providers need to have the same restrictions that are placed upon Maryland practitioners by other states. For example, the ability to emergency petition if deemed necessary. The providers entering Maryland must be licensed to practice Maryland in order to ensure proper vetting and oversight. This legislation doesn't even begin to address the long-term coordinated care required for behavioral health outpatient services or the local knowledge to address wraparound services which are often required.
- 2. This is an equity issue for current in-state providers.** Maryland should be doing all we can to support our in-state providers by ensuring parity for mental health and addiction services. The State should begin by requiring commercial payors and Medicaid to fully support the expanded telehealth services into permanency and assist with telehealth access for all Marylanders.
- 3. This legislation addresses an unproven issue.** Following the resolution of the equity issue, the General Assembly should compel the Maryland Department of Health to conduct a study to document access difficulties including whether provider supply needs to be supplemented with out-of-state providers.



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- 4. This is a duration issue.** The expansion to out-of-state providers should mirror current federal legislation which limits the interstate telehealth expansion to the current emergency order duration. A justifiable step tied to a specific timeline and event restricting certain access and availability.

With the onset of the pandemic and increasing challenges with in-person crisis screenings, Sheppard Pratt successfully launched our Virtual Crisis Walk-In Clinic. Swiftly pivoting from an in-person walk-in clinic (which we still continue to provide), we expanded our crisis services to telehealth—offering psychiatric triage and referrals to our other virtual and in-person care options through a secure, online platform. The Virtual Crisis Walk-In Clinic is available to any individual living in Maryland who needs urgent psychiatric care. Licensed therapists and clinicians schedule follow up virtual or in-person appointments for therapy and/or medication management or recommend inpatient admission once the assessment has been conducted. Our ten outpatient locations throughout the State also shifted to provide both tele-therapy and tele-psychiatry services during the pandemic. Sheppard Pratt has seen an increased demand for services AND has been able to meet that demand by hiring additional Maryland licensed staff. We have also continued to provide virtual addiction services, partial day programs and intensive outpatient programs.

This virtual expansion equated to thousands of individuals who have been able to access the care they desperately needed—many of whom had previously been hindered by location, lack of transportation, or other common barriers. In fact, this service has eased burdens on emergency departments across the State at a time when all available beds are needed for our acute care patients. To date, our team has provided more than 250,000 telehealth visits since the beginning of the pandemic including 80,000 telephonic visits.

It is vitally important that Marylanders have easier access to the quality mental health and addiction 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. This bill, however, does not ensure quality services will be brought to Maryland nor are we certain that it addresses a meaningful service gap.

Sheppard Pratt urges the committee's unfavorable report on this legislation.

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.