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February 10, 2022

The Honorable Shane E. Pendergrass Chair, House Health and Government Operations Committee Room 241, House Office Building Annapolis, MD 21401-1991

RE: HB 421 – Out–of–State Health Care Practitioners – Provision of Behavioral Health Services via Telehealth – Authorization- Letter of Support

Dear Chair Pendergrass and Committee Members:

The Opioid Operational Command Center (OOCC) is submitting this letter of support for House Bill (HB) 421 - Out-of-State Health Care Practitioners- Provision of Behavioral Health via Telehealth Authorization.

At a time of increasing strain on the behavioral health workforce, increasing the number of practitioners who provide behavioral health services via telehealth can help meet the demand in areas with little-to-no provider capacity.

HB 421 would expand access to behavioral health care by authorizing out-of-state practitioners to provide services via telehealth while requiring practitioners to be held to the same standards of practice that apply to in-person care in the State of Maryland. This flexibility in service provision is necessary at a time when overdose deaths are at historic highs. Expanded access to health care through telemedicine would especially benefit traditionally underserved areas, such as Maryland's rural areas, which often lack access to behavioral health services due to the relatively few number of providers within large geographical areas.

The need for additional behavioral health capacity is a message that OOCC hears frequently from individuals across Maryland. For example, the OOCC has recently completed our Maryland Stop Overdose Strategy (SOS) Regional Town Hall series, through which we traveled across the state to learn directly from community members about what is working and what is not concerning the state's response to the opioid and overdose crisis. A consistent theme that we heard from individuals in nearly every region of the state was a lack of adequate behavioral health services for individuals struggling with a substance use disorder.

Although challenges with the provision of behavioral health services exist statewide, they are especially prevalent in Western Maryland and on the Eastern Shore, where large geographic areas, coupled with few providers, present significant challenges for those seeking immediate care for behavioral health conditions. Having adequate, low-barrier treatment capacity that is

available for when someone is ready and willing to seek care for a behavioral health condition is, therefore, critical.

With the increased need for behavioral health services at a critical moment for addressing the overdose crisis, we urge a favorable report for HB 421. Thank you for your time and consideration. If you would like to discuss this further, please contact OOCC Deputy Director Marianne Gibson at 443-381-4377 or marianne.gibson@maryland.gov.

Sincerely,

Romin E. Kickard

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