

MedChi

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TO: The Honorable Shane E. Pendergrass, Chair
Members, House Health and Government Operations Committee
The Hogan-Rutherford Administration

FROM: J. Steven Wise
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DATE: February 10, 2022

RE: **OPPOSE** – House Bill 421 – *Out-of-State Health Care Practitioners – Provision of Behavioral Health Services via Telehealth – Authorization*

The Maryland State Medical Society (MedChi), the largest physician organization in Maryland, **opposes** House Bill 421.

House Bill 421 would allow a practitioner who is not licensed in Maryland to provide telehealth services to a patient located here. The legislation requires that a person who practices telehealth here hold a valid license in another state and consent to the jurisdiction of the relevant Maryland health occupations board, but not be fully licensed here. While we appreciate the Hogan Administration trying to resolve an important issue that has arisen with the explosion in telehealth usage, we believe that any remedy should require full licensure here in Maryland. The answer to this issue lies in expeditious licensure, not excusal from licensure.

This Committee recently took action to extend until 2030 the Interstate Medical Licensure Compact (“Compact”) that allows physicians to more easily become licensed in multiple states. See House Bill 180. Under the Compact, a physician has a home state where they reside that is their principal state of licensure. The physician may then obtain expedited licensure in other member states. Over 700 physicians from out of state have become licensed in MD using this approach. Once qualified, half of all Compact applicants receive their license in 7 days or less.

A license is the key to ensuring that the Board of Physicians can take action against a physician who violates the law, and most importantly one who is not following the appropriate standard of care. Without a license, the Board has no jurisdiction over that individual, and we believe this is true regardless of the language in House Bill 421 regarding consent to jurisdiction. And again, the Compact squarely addresses this – a physician who is subjected to discipline in one Compact state can quickly be disciplined

in another.

Finally, under the legislation, there is no requirement that Maryland practitioners receive reciprocal treatment from other states. So, while it helps other practitioners who want to practice in Maryland, it does not help Maryland practitioners who want to practice in other states. The Compact by its very nature ensures such reciprocity.

For these reasons, we would urge the Committee to oppose House Bill 421.

For more information call:

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