



February 12, 2023

The Honorable Melony Griffith Finance Committee 3 East - Miller Senate Office Building Annapolis, MD 21401

RE: Support – SB 534: Preserve Telehealth Access Act of 2023

Dear Chair Griffith and Honorable Members of the Committee:

The Maryland Psychiatric Society (MPS) and the Washington Psychiatric Society (WPS) are state medical organizations whose physician members specialize in diagnosing, treating, and preventing mental illnesses, including substance use disorders. Formed more than sixty-five years ago to support the needs of psychiatrists and their patients, both organizations work to ensure available, accessible, and comprehensive quality mental health resources for all Maryland citizens; and strive through public education to dispel the stigma and discrimination of those suffering from a mental illness. As the district branches of the American Psychiatric Association covering the state of Maryland, MPS and WPS represent over 1000 psychiatrists and physicians currently in psychiatric training.

MPS/WPS support Senate Bill 534: Preserve Telehealth Access Act of 2023 (SB 534), which keep in place many of the temporary changes to telehealth services covered under state commercial plans and Medicaid. The changes have been put in place to ensure continued access to care during the pandemic, which designation is expiring, and have allowed clinics and private practices to stay open when they may have otherwise been forced to close. Furthermore, expanding coverage to telehealth has dramatically changed the way many of our doctors deliver psychiatric care. Our members have quickly adapted to telehealth and note that noshow rates have significantly decreased, with patients no longer having to leave their homes or consider travel to access care.

MPS/WPS are especially grateful for SB 534's inclusion of reimbursement for audio-only services, as we see it as a tool for equitable access to care. For patients who lack broadband access or video-only technology, the ability to reach patients over the telephone during the pandemic has been critical to ensuring continuity of care. A 2021 study by Johns Hopkins found that despite the growth in telehealth, lower video use was also observed among women (8% less likely), Black people (35%), Hispanics (10%), and low-income families (43% less likely for household income less than \$50,000). Americans over 75 suffered a similar gap, with 51% less ability to use video. Additionally, patients who are hesitant to see a physician face-to-face may feel more comfortable seeking care via audio-only telehealth.

The following chart shows the study's results:





| Characteristic   | Adjusted odds<br>ratio (95% CI) | Video use Video use<br>less likely more likely |
|--|---------------------------------|--|
| Aged 55-64 y vs <55 y                                    | 0.79 (0.76-0.82)                | -  |
| Aged 65-74 y vs <55 y                                    | 0.78 (0.74-0.83)                | -  |
| Aged >75 y vs <55 y                                      | 0.49 (0.46-0.53)                | -  |
| Female   | 0.92 (0.90-0.95)                | <b>-</b>                                       |
| Black vs White   | 0.65 (0.62-0.68)                | -  |
| Latinx vs White  | 0.90 (0.83-0.97)                | -  |
| Asian vs White   | 0.99 (0.91-1.08)                | -  |
| Other race/ethnicity vs White                            | 0.95 (0.87-1.04)                |  |
| Unknown race/ethnicity vs White                          | 1.00 (0.93-1.08)                | -  |
| Non-English language                                     | 0.85 (0.76-0.95)                |  |
| Medicaid vs commercial insurance                         | 0.68 (0.64-0.72)                | -  |
| Medicare vs commercial insurance                         | 0.75 (0.71-0.79)                | -  |
| Median household income <\$50 000 vs >\$100 000          | 0.57 (0.54-0.60)                | -  |
| Median household income \$50 000-\$100 000 vs >\$100 000 | 0.89 (0.85-0.92)                | -  |
| Charlson Comorbidity Index score 1-2 vs 0                | 0.89 (0.86-0.92)                | •  |
| Charlson Comorbidity Index score ≥3 vs 0                 | 0.80 (0.77-0.84)                | •  |
|  | 0.4                             | 4 1 2  |
|  |                                 | Adjusted odds ratio (95% CI)                   |

Ensuring patients continue to receive clinically safe and efficient care should be a priority for legislators as Maryland continues to grapple with the pandemic. In addition to the increased anxiety among individuals afraid of becoming sick, the pandemic's social distancing policies have also led to people becoming isolated or unemployed. Poor mental health outcomes are linked to both situations. The pandemic has also placed an unmeasurable burden on our frontline workers, and we must address their mental health. Lastly, Maryland's data shows that COVID-19 has disproportionately impacted our Black and Latinx residents. Before the pandemic, these patients were less likely to receive care due to lack of insurance, stigma, and distrust in the health care system. MPS & WPS have seen the promise in telehealth's potential to expand access to care and help our state save lives.

MPS & WPS would ask the committee for a favorable report of SB 534. If you have any questions with regards to this testimony, please feel free to contact Thomas Tompsett Jr. at tommy.tompsett@mdlobbyist.com.

Respectfully submitted,
The Joint Legislative Action Committee
of the Maryland Psychiatric Society and the Washington Psychiatric Society