

**DANA JONES**  
*Legislative District 30A*  
Anne Arundel County

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Appropriations Committee

*Subcommittees*

Vice Chair, Health and Social Services

Oversight Committee on Pensions

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Joint Committee on Administrative,  
Executive, and Legislative Review

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Vice Chair, Anne Arundel  
County Delegation



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**THE MARYLAND HOUSE OF DELEGATES**  
**ANNAPOLIS, MARYLAND 21401**

**Testimony of Delegate Dana Jones**  
**Before the Ways and Means Committee**

**In Support of HB 522**  
**Public Schools - Student Telehealth Appointments - Policy and Access**  
**February 7th, 2024, 1 PM**

For the record - I am Delegate Dana Jones.

Chair Atterbeary, Vice Chair Wilkins, and members of the Ways and Means Committee, I come before you today to re-introduce a bill that passed out of your Committee and the House Floor last session. HB 522 would simply require county boards of education to establish a policy to accommodate public middle and high school students who need to access telehealth services during the school day, and require a space, with no construction requirement be provided inside the schools for these appointments.

Telehealth services play an important role in expanding care to address the increasing need, and for many middle and high school students it is the most efficient and effective way to receive care. Access to telehealth services can help increase school attendance, school safety, and learning outcomes. However, students seeking telehealth appointments often need to take those appointments during the school day, and at present, some school districts are preventing this from taking place. As outlined in testimony provided by Children's National Hospital: "According to a recent technical report by the American Academy of Pediatrics, school-based telehealth programs have shown to increase opportunities for both acute and chronic care for children and adolescents, reduce pediatrician and pediatric provider travel, and provide an early means of evaluation and intervention for acutely ill patients, as well as address developmental, behavioral, and educational issues."

Nationwide we have been experiencing an increase in mental health issues. Although this has been felt population wide, our youth have been particularly hard hit. According to the Center for Disease Control, in the 10 years leading up to the pandemic, feelings of persistent sadness and hopelessness—as well as suicidal thoughts and behaviors—increased by about 40% among young people. As emphasized by the American Psychological Association, the pandemic has exacerbated these issues for many children. These impacts are particularly devastating to our LGBTQ+ youth and communities of color. A 2023 national survey on LGBTQ+ youth by the Trevor Project revealed 41% of respondents seriously considered attempting suicide in the prior year. According to a 2023 analysis from the CDC, the suicide rate of black individuals between 10 and 24 years old saw the largest proportional increase in suicide rate, rising nearly 37% between 2018 and 2021.

Currently, in most jurisdictions, if a student needs to take a telehealth appointment during school, they must have a parent drive to school and sign them out. This dynamic presents a multitude of issues, but most importantly, equity. A significant portion of students do not have parents who can afford to take off work to sign them out of school. This creates a barrier for students, and ultimately prevents children from accessing care completely. Especially our marginalized population. Additionally, when a child is signed out of school for telehealth care, it is often advised that the appointments take place in the car with their parents. This creates a privacy issue for all students. Without equitable access to health services, our youth are disproportionately negatively impacted.

I was particularly excited to listen to testimony on mental telehealth provided to this Committee on January 24th from BCPS Superintendent Rogers and Calvert County Superintendent Navarro. In Calvert County, Dr. Navarro has seen the importance of mental health services to combat bullying and school safety. In Baltimore County, the school system recently rolled out a telehealth pilot in five Middle schools, and County wide telehealth services for highschoolers where they can access services directly on their smartphones. As Dr. Rogers explained, “we know sometimes students need to talk to someone, it's not always convenient hours and there are provider shortages. So far, with hundreds of highschoolers signed up to access services, BCPS has found it helpful and they are excited to see what this will mean for students in the long run.”

The Blueprint made clear that mental health, and access to care, would be a cornerstone of its implementation. Telehealth services support our children emotionally, physically, educationally, and socially. We must remove as many barriers as possible to students who are attempting to receive care, and HB 522 works to remove those barriers.

I respectfully urge a favorable report on HB 522.



Delegate Dana Jones

