



PSSAM
Public School Superintendents' Association
OF MARYLAND

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BILL: HB 522
TITLE: Public Schools - Student Telehealth Appointments - Policy and Access
DATE: February 7, 2024
POSITION: Support with Amendments
COMMITTEE: House Ways and Means Committee
CONTACT: Mary Pat Fannon, Executive Director, PSSAM

The Public School Superintendents' Association of Maryland (PSSAM), on behalf of all twenty-four public school superintendents, **supports HB 522 with** amendments.

House Bill 522 requires each local board of education to establish a policy to accommodate students who need to participate in telehealth appointments scheduled during the school day. Each local board must ensure that the local school system publishes the student telehealth policy in the student handbook and makes school personnel aware of student telehealth policy objectives and requirements. On request, the Maryland State Department of Education (MSDE) must provide technical assistance to local boards to establish telehealth policies.

During the pandemic, telehealth was a lifeline providing access to doctors and health practitioners during a very traumatic and fragile time. Just as the COVID-19 pandemic created many challenges in the delivery of public education, it highlighted the value and potential of virtual health services. There is no doubt that telehealth has a place in public health well past the end of this pandemic. PSSAM is very interested in this new model of health care for our students, and some systems have already begun implementing various forms of telehealth, but there are some operational concerns with this legislation.

If health care delivery is going to become a public education, we need to ensure the highest quality controls and approach telehealth with a deliberate, methodical, and research-based approach. Safe and private spaces need to be created to allow for students to speak in confidence to medical professionals. But schools must also provide support if telehealth appointments create

a challenge for students in returning to the classroom, especially with regard to mental health counseling.

While the bill does not mandate the construction of new spaces, we feel strongly that private space must be available in order to protect the privacy of students. Additionally, there are operational concerns regarding the coordination of services, approval and verification of appointments, the use of the room, etc. Privacy concerns are key, as well concerns regarding parental consent and when there is a need to communicate with parents.

The need for behavioral health services have skyrocketed during and following the pandemic. In the realm of mental health services, consistent appointments are a best practice; however, if these appointments are by telehealth during the school day, the student's academic success could be challenged if they are consistently missing instruction. On the flip side, we see the equitable benefit of telehealth in helping families who are challenged in getting to appointments due to transportation or work commitments.

So while PSSAM acknowledges the very positive aspects of this legislation, we highly recommend that the committee consider creating a workgroup to make recommendations on the most appropriate service model, with consideration to the operational concerns we have described above. A workgroup with all of the affected stakeholders would address the legal, operational, and financial implications that need to be considered for telehealth best practices. Stakeholders should include LEAs, MDH, MSDE, school nurses, other health or support providers in the schools, and parents.

For these reasons, PSSAM requests a **favorable with amendments** report for HB 522.