









House Health and Government Operations Committee February 13, 2025 House Bill 869 – Preserve Telehealth Access Act of 2025 **POSTION: SUPPORT**

On behalf of MedChi, The Maryland State Medical Society, the Maryland Academy of Family Physicians, the Maryland Chapter of the American Academy of Pediatrics, the Maryland Section of The American College of Obstetricians and Gynecologists, and the Mid-Atlantic Association of Community Health Centers, we submit this letter of support for House Bill 869.

This legislation permanently removes the sunset date on provisions that allow audio-only telehealth services to be reimbursed by Medicaid and private insurers in Maryland. It also ensures continued payment parity by requiring that telehealth services be reimbursed at the same rate as in-person care. House Bill 869 directly aligns with the second recommendation from the Maryland Health Care Commission's 2023 "Telehealth Study Recommendations," which advocates for the continuation of audio-only telehealth encounters, underscoring their value for both providers and patients.

The report highlights several key points in support of audio-only telehealth services: "[audio-only telehealth]; promotes equitable access to care, especially when circumstances prevent use of audio-visual technology (e.g., unavailable or unreliable broadband); and maintains access to care, particularly for behavioral health services, which account for the highest share of audio-only encounters." The full report can be accessed at <u>MHCC Telehealth Study Recommendations</u>.

By making these critical telehealth provisions permanent, House Bill 869 will help ensure equitable access to care, improve patient outcomes, and support the continued use of effective, patientcentered telehealth services across Maryland. It will allow providers to continue offering flexible, efficient care options that meet patient needs, reduce administrative burdens, and enhance overall practice sustainability. For these reasons, we strongly encourage the passage of House Bill 869.

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