

Committee:House Health and Government Operations CommitteeBill:SB 372 – Preserve Telehealth Access Act of 2025Hearing Date:March 20, 2025

Position: Support

The Licensed Clinical Professional Counselors of Maryland (LCPCM) support SB 372 – Preserve Telehealth Access Act of 2025. This bill will continue to require insurers, including the Maryland Medicaid Program, to reimburse telehealth services provided through audio-only and provide payment parity for telehealth services.

Maryland has been experiencing a shortage of behavioral health providers for years which was exacerbated by the COVID pandemic. To ensure access to services, licensed professional counselors adapted by providing telehealth services.

Legislation that passed in 2023 recognized the importance of telehealth services and required the reimbursement of these services at the same rate as if the service were provided in-person. This legislation also required the Maryland Health Care Commission (MHCC) to study and make recommendations regarding the delivery of health care services through telehealth, including payment parity for the delivery of health care services through audiovisual and audio-only telehealth technologies. This study strongly recommends the continuation of telehealth services and pay parity for behavioral health providers. A few specific findings include:

- Telehealth services enhance the overall flexibility and responsiveness of the health care system and create new opportunities for underserved communities to receive services;
- Pay parity removes financial disincentives and promotes equity by allowing providers to use telehealth modalities that are most accessible for their patients;
- Pay parity acknowledges that telehealth services involve the same level of clinical intensity and time as in-person care from the provider's perspective; and
- CMS 2025 MDFS Proposed Rule continues to support telehealth flexibilities and supports the MHCC's recommendations.

For these reasons, LCPCM urges the Committee to give SB 372 a FAVORABLE Report.

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