



Hospice & Palliative Care Network
OF MARYLAND

MID-ATLANTIC
ASSOCIATION OF
COMMUNITY HEALTH
CENTERS
*Serving Maryland and
Delaware*



TO: The Honorable Shane E. Pendergrass, Chair
Members, House Health and Government Operations Committee
The Honorable Joseline Pena-Melnyk

FROM: J. Steven Wise
Pamela Metz Kasemeyer
Danna L. Kauffman

DATE: January 27, 2021

RE: **SUPPORT** – House Bill 123 – *Preserve Telehealth Access Act of 2021*

On behalf of the Maryland State Medical Society, the Maryland Academy of Family Physicians, the Maryland Chapter of the American College of Emergency Physicians, the Maryland Chapter of the American Academy of Pediatrics, the Maryland Section of the American College of Obstetricians and Gynecologists, the Mid-Atlantic Association of Community Health Centers, the Hospice & Palliative Care Network of Maryland, LifeSpan Network, HealthCare Access Maryland, the Maryland Society of Eye Physicians & Surgeons, the Maryland-National Capital Homecare Association, and the Maryland Clinical Social Work Coalition we submit this letter of **support** for House Bill 123.

House Bill 123 makes a number of changes to the telehealth laws, addressing practices that have increased patient access and health outcomes during the current public health crisis and which will continue to do so even when it subsides. Accordingly, they should be permanently authorized. Two provisions in particular are very important to health care providers who have relied heavily upon telehealth to continue to provide care to their patients during the pandemic – authorization of audio-only and reimbursement parity with in-person services.

In 2020, the General Assembly adopted Chapter 15 expanding the use of telehealth, an action which proved indispensable in the months that followed as the COVID-19 pandemic grew and in-person patient interactions were limited, except when unavoidable. However, the legislation did not define telehealth to include audio-only calls (*i.e.* telephone calls) with patients. Medicare and Medicaid acted at the federal level to allow reimbursement for audio-only patient interactions under those programs, and by Executive Order 20-04-01-01,

Governor Hogan also allowed for telehealth to be provided through audio-only interactions. Providers across the State depended upon this tool to communicate with patients who either do not have access to the internet, do not have access to appropriate technology or are not familiar enough with the technology to utilize it. House Bill 123 takes the critical step of codifying this practice and ensuring that audio-only communications are classified as an acceptable means of practicing telehealth.

Second, the legislation requires health insurers to reimburse providers who use telehealth at the same rate as if the service were provided in person. The insurers seek to have this provision of the bill removed. However, providers strongly disagree with any argument that providing telehealth does not require the same amount of professional knowledge and time that an in-person visit does: the provider is still spending equal time with the patient, maintaining health records, asking staff to conduct the necessary follow up and so forth. To the extent that the insurers believe certain providers are misusing telehealth or billing inappropriately for it, they have ample tools at their disposal to address those issues.

As providers of health care during this extremely challenging time, we urge the Committee to adopt these very reasonable changes to the telehealth statute.

For more information call:

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