

MEDCHI, THE MARYLAND STATE MEDICAL SOCIETY
HOUSE OF DELEGATES

Resolution 10-20

INTRODUCED BY: Montgomery County Medical Society

SUBJECT: Ensuring Continued Enhanced Access to Healthcare via Telemedicine
& Telephonic Communication

1 Whereas, the Maryland General Assembly passed telemedicine legislation (HB 448/ SB 402) in
2 2020 (pre-pandemic) that allows providers to use telehealth, including asynchronous technology,
3 to establish the physician-patient relationship; and
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5 Whereas, the ability to access health care via telemedicine prior to the pandemic was available,
6 but not widely used; and
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8 Whereas, payments to physicians for telemedicine vary by carrier and were significantly less
9 than in-person visits prior to COVID-19; and
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11 Whereas, the onset and severity of COVID-19 caused a rapid implementation of telemedicine by
12 physicians of many specialties, and patients rapidly embraced the technology as often the only
13 means to access non-emergent medical care; and
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15 Whereas, through directives of the federal government and the State of Maryland payors waived
16 co-pays and deductibles and increased payment for telemedicine and telephonic services equal to
17 in-person visits during COVID-19 which reduced barriers for patients to access medical care;
18 and
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20 Whereas, the federal government and states took action to allow physicians and other health care
21 clinicians to use non-HIPAA compliant platforms if necessary to enhance patients' use of
22 technology to access health care; therefore be it
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24 Resolved, that MedChi support legislation and/or regulation which requires third-party
25 commercial insurance companies in Maryland to pay for telemedicine visits equal to in-person
26 visits to enhance access to medical care; and be it further
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28 Resolved, that MedChi support legislation and/or regulation which will continue to allow
29 telephonic access to medical care when other technologies are not available; and be it further
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31 Resolved, that MedChi's AMA delegation present a resolution to the AMA no later than Annual
32 2021 which addresses the importance of at least a 365-day waiting period after the public health
33 crisis is over before commencement of audits aimed at discovering the use of non-HIPAA
34 compliant modes and platforms of telemedicine by physicians.
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36 Fiscal Note: Included in existing legislative advocacy and AMA delegation budgets.
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