



SB0567 – Telehealth Services - Expansion

Presented to the Hon. Delores Kelley and Members of Senate Finance Committee
February 17, 2021 1:00 p.m.

POSITION: SUPPORT

NARAL Pro-Choice Maryland **urges the Senate Finance Committee to issue a favorable report on SB0567 – Telehealth Services - Expansion**, sponsored by Senate President Bill Ferguson.

Our organization is an advocate for reproductive health, rights, and justice. We seek to protect the right to basic healthcare and ensure that all forms of healthcare are accessible. Now more than ever, affordable and quality health care must be accessible as we continue to fight the COVID-19 pandemic Maryland. Improving Maryland’s telehealth policy and infrastructure now will boost overall health outcomes in Maryland long after COVID-19 has passed.

Healthcare access and reproductive justice are intrinsically linked. Adverse health conditions will always more negatively affect lower-income women and people of color. For example, Black and Indigenous women often receive less medical intervention for pain management, leading to failed healing of surgical procedures or injuries.ⁱ Low socioeconomic status is also linked to such negative health outcomes as low birth weight, diabetes, coronary disease, depression, and low life expectancy.ⁱⁱ Furthermore, the Black maternal mortality rate in 2019 was 3.7 times higher than that of white mothers in Maryland.ⁱⁱⁱ Maryland residents are continuing to seek medical care for chronic illness, pregnancy care, primary care, and emergency visits during a global pandemic, and should be able to receive health-related services and coverage in the safest means possible.

The provisions in SB0567 will accommodate healthcare needs for the general Maryland population, including Maryland’s most vulnerable populations and healthcare workers; that is why we support the bill’s inclusion of “Health Occupations.” It is our job as a reproductive justice-centered organization to advocate for barrier-free healthcare access for all, which includes the health and safety of essential healthcare professionals. Requiring patients to seek telehealth providers for their medical needs based on what is covered by their insurance is an undue burden. This would also likely overwhelm those select providers and overload them with patients during a time where resources and medical staff are already scarce. That is why we support the passage of this bill, and agree that health insurance should cover telehealth appointments for any type of medical appointment and provider.

The Maryland Medical Assistance Program will also be a vital tool in providing Maryland residents with COVID-safe, chronic condition management services and tracking healthcare outcomes for recipients of the program. It is important to collect these data in order to better understand how to serve the healthcare needs of Marylanders in the future, and to track the nature of COVID-19 while expanding access to telehealth. The use

of telehealth services has already proven helpful in lessening the spread of COVID-19 and should continue to be used to mitigate the worsening conditions of the pandemic.

We are continuing to face a health crisis as a state, and provisions like those in SB0567 will ensure that the most underserved Maryland communities have accessible and affordable healthcare. For these reasons, NARAL Pro-Choice Maryland **urges a favorable committee report on SB0567**. Thank you for your time and consideration.

ⁱ Ray, Keisha (2016). Inefficient pain management for black patients shows that there is a fine line between 'inhumane' and 'superhuman'. Retrieved <https://www.bioethics.net/2016/05/inefficient-pain-management-for-black-patients-shows-that-there-is-a-fine-line-between-inhumane-and-superhuman/>

ⁱⁱ Keita, Gwendolyn Puryear (2014). Improving the health of low income populations. American Psychological Association. Retrieved from <https://www.apa.org/monitor/2014/03/itpi#:~:text=Evidence%20has%20shown%20the%20critical,and%20lower%20self-rated%20health>

ⁱⁱⁱ Maryland Maternal Mortality Review 2018 Annual Report (2018).