



Maryland  
Hospital Association

## **SB944- Behavioral Health Programs - Medical Directors - Psychiatric Nurse Practitioners**

### **Position: Support with Amendment**

#### **Bill Summary**

SB944 would require that regulations adopted under certain provisions of law regulating behavioral health programs include provisions authorizing a medical director of a behavioral health program located in a federally designated health professional shortage area to provide services through telehealth; and prohibiting a behavioral health program located in a federally designated health professional shortage area from requiring a medical director to provide services on-site.

#### **MHA Position**

A robust telehealth network is a necessary component of any comprehensive plan to address Maryland's gaps in access to behavioral health care. These gaps, prevalent throughout the state, contribute to a long-running crisis that an estimated one in five Marylanders face daily: substance use disorders and mental illness. Telehealth, which encompasses a broad variety of technologies that connect providers and patients remotely, facilitates patient self-management and non-professional caregiver support for patients.

To address gaps in behavioral health care service delivery, the state needs to think innovatively about how care can be delivered. A recent report to the General Assembly on hospital emergency room discharge protocols refers to several telehealth programs, funded by specific contracts and small grants. The report recommends that increasing the use of and reimbursement for telehealth services would help expand access to community-based treatment more systematically. The report also suggests that additional state infrastructure would enable expansion of telehealth services via a Center of Excellence in Telemental Health.

Under Maryland's unique Total Cost of Care agreement with the federal government, Maryland's hospitals are working to lower costs and improve population health. In addition to treating illness and injury, hospitals are reaching out beyond their four walls to keep people well and improve the health of the communities they serve. By allowing flexibility for medical directors to coordinate care with other care team members via telehealth, Maryland can optimize the care that can be delivered to more patients. This bill helps bring behavioral health care into the 21<sup>st</sup> century by enabling behavioral health care professionals to deliver care efficiently and effectively to the greatest number of patients possible.

While SB 944 provides an immediate bridge to cover the gap in the cycle of care for clinics facing behavioral health workforce shortages, the impact of these shortages reaches far beyond the designated Health Professional Shortage Areas. Providers in urban and suburban Maryland also struggle to fill these positions because of state-wide workforce shortages. MHA strongly

agrees that if a physician is not available to fulfill the medical director role, a Maryland Licensed Psychiatric Nurse Practitioner has the training and expertise to provide that guidance.

MHA recommends a favorable report for SB 944 with an amendment to remove the requirement for Health Professional Shortage Areas.