March 3, 2022

To: The Honorable Paul G. Pinsky, Chair, Senate Education, Health & Environmental Affairs Committee


Dear Chair Pinsky:

On behalf of the Maryland Hospital Association’s (MHA) 60 member hospitals and health systems, we appreciate the opportunity to comment on Senate Bill 398. The COVID-19 pandemic required a complete rethinking of how health care is delivered and accessed. One major change has been greater access to virtual care. Telehealth visits at one Maryland health system skyrocketed from eight patients a day to more than 1,200 during the public health crisis.

Telehealth services during the pandemic were universally supported by patients and by hospital caregivers. MHA strongly supports the continued use of intra and interstate telehealth, especially in specialties with provider shortages such as behavioral health. However, SB 398 does not contain critical safeguards needed to ensure Marylanders receive the best care possible from out-of-state practitioners.

Our primary concern is patient safety. SB 398 completely bypasses Maryland’s health occupations boards. While there is room for the boards to modernize and reduce administrative burden on qualified health care professionals, the boards still play an important role in investigating and sanctioning bad actors. Completely removing the boards’ oversight would unnecessarily put patients at risk.

MHA supports the intent behind SB 398 to build on lessons learned from COVID-19 waivers that allow interstate telehealth usage, but the bill provisions do not adequately address the scope of the undertaking. To effectuate meaningful and sustainable change, we encourage legislators to consider multiple routes to mutual recognition, including licensure reciprocity, additional compacts, and regional partnerships for telehealth beyond existing health professional compacts.

For these reasons, we urge an unfavorable report on SB 398.

For more information, please contact:
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