

**Maryland Medical Assistance Program and Health Insurance – Coverage and
Reimbursement of Telehealth Services – SB 393
Senate Finance Hearing
January 27, 2021
FAVORABLE**

My name is Christina Spangler. I am a mother of four, full-time working resident of Charles County, Maryland. My oldest son (age 12) struggles with Bi-Polar disorder, severe non-verbal autism, epilepsy, and self-injurious behaviors. Because of these challenges, myself and two of my other children (ages 10 and 4) have been diagnosed with Post-Traumatic Stress Disorder.

Telehealth has been a leading contributor for my family's wellness. For myself, I have never been able to access the therapy needed to address my mental health needs. Taking leave from work, paying \$30/hr for special needs child care, and additional time for travel are too many stressors to find a 40 minute therapy session beneficial. Now I am able to use my lunch break to attend mental health therapy in my own home. I wish to continue to use telehealth for my mental health services after the public health emergency is over because it removes the barriers that have previously prevented me from getting the care I need."

Living in Southern Maryland makes locating providers a challenge. Telehealth has allowed me to widen my options for providers. We have been able to secure a therapist for my 10-year-old son that he is able to connect with rather than just settling for the closest provider. His therapist has reported meeting virtually has provided him with a level of comfort and security meeting in a sterile office cannot provide. He has been opening up more during sessions, which is allowing them to work at a much deeper level. I would like for my son to continue to have the option to use telehealth after the COVID-19 so that he can keep making progress to his mental health."

Due to my oldest son's intense needs, there are no providers able to support our family outside of Kennedy Krieger Institute (KKI). A normal appointment begins with my mother waking up at 4:30am to drive to my home to sit with my other children. While Baltimore is roughly 70 miles from my home, it is typically a three-hour drive when factoring time for beltway traffic, construction, accidents, and time to find parking. The specialists are often running behind so we are forced to wait in an exam room until the provider is available. After our appointment, it is another 2-3 hour commute home filled with anxiety that I will not make it before school dismissal. Telehealth appointments save me an entire day off work, six hours in the car and my mother's time/travel all for what is typically a 20-minute medical appointment. Our more intensive services through KKI (which include the same mentioned stressors) have become immensely more valuable for our family when completed virtually. Video appointments have allowed my medical team to be inside my home. Rather than just my self-reporting of the layout of my home, or ways my son injures himself, interacting with his siblings, our team can now see it in real-time. We now have a revised and more effective treatment plan now that they are able to see first-hand what the plan looks like being implemented outside of a sterile, distraction-free treatment room.

It is my hope that Care-First and Priority Partners will continue to reimburse telehealth appointments at the full-rate. Bringing our mental health care providers into our home through telehealth relieves endless stressors for my special needs family, and allows us to maximize the benefits of these medically necessary services.

I urge you to support SB 393. Thank you.

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