

Position Statement of the Rural Maryland Council



To: House Health and Government Operations Committee
Re: House Bill 165 -- Maryland Health Quality and Cost Council
February 15, 2011

To: Senate Finance Committee
Re: Senate Bill 175 -- Maryland Health Quality and Cost Council
February 16, 2011

Position: Support

The Rural Maryland Council (RMC) is an independent state agency and the state's federally designated State Rural Development Council under the USDA's National Rural Development Partnership. Our charge is to identify challenges common to rural communities and to help craft solutions in a collaborative manner. Improving access to affordable quality health care for rural and underserved citizens of Maryland is the RMC's top strategic focus.

The Rural Maryland Council (RMC) supports passage of Senate Bill 175, formally establishing the Health Quality and Cost Council. Among the many worthwhile tasks that the HQCC would be charged with is to "reduce and eliminate health disparities and make recommendations regarding the development and implementation of those strategies." In addition, the bill allows the HQCC to establish "workgroups, committees or task forces." These provisions would give added weight to the important work the HQCC has already begun.

The existing HQCC, established by Governor O'Malley in 2007, formed a Telemedicine Taskforce in June 2010 which is now studying ways to implement a statewide Maryland Telehealth Network. The task force intends to spend the next year studying the wide range of issues associated with such an undertaking – from clinic issues to financial concerns to regulatory barriers, and return with thoughtful, studied recommendations for state policy makers and regulators to consider. The Rural Maryland Council has been studying the feasibility of using technology to increase access to care in rural and underserved areas for more than two years. We are convinced that a robust telehealth network that connects our world class urban and suburban medical institutions with the rural and underserved areas in our state would improve access to quality care and address health disparities with a cost effective delivery mechanism for our most vulnerable citizens. We expect that the final recommendations from the HQCC Telemedicine Task Force will have much more depth and breadth, as well as much more likelihood of implementation, if its work is described in and required by statute.

In addition, the RMC hosted a Statewide Telehealth/Telemedicine Roundtable in December 2010 along with our nonprofit partner, the Maryland Rural Health Association (MRHA). Members of the HQCC Task Force attended and presented at this meeting in which the RMC and MRHA released the results of a statewide survey we conducted. The purpose of the survey was to identify telehealth projects currently underway in the state in hopes we could find ways to use that technology more effectively in rural areas. One of the major barriers identified in the survey (second only to the need for reimbursement) was a lack of statewide leadership and coordination in establishing a statewide telehealth/telemedicine network. The HQCC Task Force as well as the HQCC itself has shown enthusiasm and support for creating such a network, and it is poised to provide the critically needed state leadership such an initiative effort requires.

Because we strongly believe that the establishment of a statewide telehealth/telemedicine network can be an integral part of the state's effort to address the health care work force shortage and eliminate health disparities, and because we believe the HQCC Task Force will have more authority and stature to develop and implement such a network if its charges were articulated in and required by statute, we encourage the House Government and Operations committee and Senate Finance Committee to give this bill a favorable report.

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