

Medication Abortion Care & Telehealth At A Glance

Updated: August 2023

ABORTION CARE IN MARYLAND

- ▶ *Pregnant people in Maryland have limited access to abortion care.* 71% of Maryland counties in 2017 did not have an abortion provider.¹
- ▶ *Abortion is an essential, time sensitive health care service.* Medically unnecessary restrictions push medication abortion care, which is a non-invasive abortion option that is approved by the FDA for use up to 10 weeks in pregnancy, out of reach for many.
- ▶ *Being denied care negatively impacts the health and wellbeing of pregnant people and their families.* Women who were denied a wanted abortion had four times greater odds of living below the Federal Poverty Level and were more likely to experience poorer health outcomes for years after the pregnancy.²
- ▶ *People seeking abortion already face significant barriers to receiving quality care.* Restrictions on abortion care and insurance coverage disproportionately impact people working to make ends meet, immigrants, young people, and people of color.³
- ▶ *Marylanders support access to abortion care.* Nearly 8 in 10 [76%] of Maryland voters say that abortion should be legal in all or most cases.⁴

TELEHEALTH: A TOOL FOR EXPANDING ACCESS TO MEDICATION ABORTION CARE IN MARYLAND

- ▶ *Telehealth is a tool that can expand abortion access.* Research shows that medication abortion care can safely and effectively be delivered through telehealth via a phone and/or video visit with a provider, reduces barriers to care, and can help patients access care earlier in pregnancy.⁵
- ▶ Overall, telehealth for medication abortion care policy in Maryland is expansive.⁶ The state:
 - permits a broad range of telehealth modalities,
 - does not restrict originating sites for telehealth encounters (i.e., patients can receive care via telehealth from their homes)⁷, and
 - allows a broad range health care professionals to provide telehealth for medication abortion care.⁸
- ▶ Given Maryland's geographic proximity to states that severely restrict - or may ban - abortion access, there will likely be a significant uptick in demand for services.⁹ This makes flexibility in telehealth care imperative for Maryland and the abortion care ecosystem.

FOR MORE INFORMATION ON TELEHEALTH FOR MEDICATION ABORTION CARE, VISIT:

- ▶ [Telehealth for Medication Abortion Care](#)
- ▶ [Telehealth for Medication Abortion Care Process Chart](#)
- ▶ [Equity in Telehealth for Medication Abortion Care Checklist](#)

POLICY IMPACTING PROVISION OF TELEHEALTH FOR MEDICATION ABORTION CARE IN MARYLAND

- ▶ **Parental notification requirements for patients under 18:** Notification of one of the patient's parents or guardians must be obtained or the provider must determine that notification would not be in the best interests of the minor before providing abortion care, including via telehealth.¹⁰
 - **Impact:** The majority of young people faced with an unintended pregnancy involve a parent or guardian in their decision to seek abortion care. For youth who can't, they must seek a judicial bypass or waiver, which is permission from a judge to consent to their own abortion care.
 - This additional burden often delays care by days or weeks and undermines a young person's bodily autonomy. Young people needing abortion services are also often those with fewer financial and logistical resources and may be more in need of telehealth as the most accessible option.

POLICY IMPACTING COVERAGE OF TELEHEALTH FOR MEDICATION ABORTION CARE IN MARYLAND

- ▶ **In Maryland, there is uncertainty regarding payment parity and other reimbursement requirements beyond June 2025:**As background, coverage parity requires the same services be covered via telehealth as would be covered if delivered in person. Payment parity requires the same payment rate or amount to be reimbursed via telehealth as would be if it had been delivered in-person.^{11 12}
 - Coverage and payment parity are required of public and private insurers for synchronous and asynchronous care; this includes audio-only visits, but that expansion expires on June 30, 2025.¹³

¹ Guttmacher Institute. [State Facts About Abortion: Maryland](#). 2022

² Greene Foster, D. [The Turnaway Study: Ten Years, a Thousand Women, and the Consequences of Having—or Being Denied—an Abortion](#). June 2 2020.

³ Boonstra, H. [Abortion in the Lives of Women Struggling Financially: Why Insurance Coverage Matters](#). Guttmacher Policy Review. 2016.

⁴ PRRI. [Abortion Attitudes in a Post-Roe World: Findings From the 50-State 2022 American Values Atlas](#). February 23 2023.

⁵ Aiken, A., et al. [Effectiveness, safety and acceptability of no-test medical abortion provided via telemedicine: 16 a national cohort study](#). British Journal of Obstetrics & Gynecology. February 2021.

⁶ https://www.mbp.state.md.us/resource_information/faqs/resource_faqs_telehealth.aspx

⁷ <https://casetext.com/statute/code-of-maryland/article-health-general/title-15-assistance-programs/subtitle-1-medical-and-pharmacy-assistance-programs/section-15-1412-telehealth-services>

⁸ https://www.mbp.state.md.us/resource_information/faqs/resource_faqs_telehealth.aspx

⁹ Zhu, A. [A 'chaotic' week: Maryland abortion providers see 'huge influx' of calls from patients across the country](#), Baltimore Banner, July 2, 2022.

¹⁰ [Md. Code Ann., Health-Gen. II § 20-103](#).

¹¹ Center for Connected Health Policy. [Parity Requirements for Private Payer Telehealth Services](#). 2022.

¹² [Parity Requirements for Private Payer Telehealth Services - CCHP](#)

¹³ [Parity Requirements for Private Payer Telehealth Services - CCHP](#)

- Providers have reported challenges with reimbursement for asynchronous care and under existing Medicaid guidance, asynchronous care is only covered for dermatology, ophthalmology and radiology, not all telehealth services.¹⁴
 - **Impact:** A video visit requirement unnecessarily limits access to care for patients who are in areas with limited bandwidth, or who lack devices or sufficient minutes on cellular plans for telehealth video visits. This has a disproportionate impact on people of color and those struggling to make ends meet.
 - **Impact:** Providers may be less likely to offer patients access to telehealth services that cannot be reimbursed, forcing unnecessary in-person visits and inequitable access to care.
 - These restrictions disproportionately impact people of color and those struggling to make ends meet as it limits access to care for patients who are in areas with limited bandwidth or who lack devices or sufficient minutes on cellular plans to ensure a telehealth video visit can take place.
- ▶ **No coverage for translation services:** Providers participating in Maryland’s Medicaid are required to provide translation services for Medicaid beneficiaries, including via telehealth. However, there is no requirement for public or private insurance to cover the costs associated with translation.¹⁵
 - **Impact:** Providers may be less likely to offer patients with translation needs access to telehealth services, forcing unnecessary in-person visits and inequitable access to care.
- ▶ **No coverage for mailing medications:** In Maryland, there is no requirement for public or private payers to cover the cost of mailing medications.
 - **Impact:** Without this coverage, providers and/or pharmacies may be less likely to offer patients the option of mailing medications, forcing unnecessary in-person visits and inequitable access to care.

MORE INFORMATION ON TELEHEALTH IN MARYLAND

- ▶ [Mid-Atlantic Telehealth Resource Center](#)
- ▶ Center for Connected Health Policy - [Maryland State Telehealth Laws](#)

¹⁴ <https://health.maryland.gov/mmcp/SiteAssets/SitePages/Telehealth/April2020%20Telehealth%20Program%20Manual.pdf>

¹⁵ [Translation and Interpretation Services | Medicaid](#)