

UULMMD_FAV_SB872

Uploaded by: Crowley, Betty

Position: FAV



Unitarian Universalist Legislative Ministry of Maryland

Shared Voices for Liberal Religious Values in Maryland

Testimony in Support of SB 872 - Health Insurance - Consumer Protections

To: Senator Delores Kelley, Chair, and Members of the Senate Finance Committee

From: Betty McGarvie Crowley, Chair, Health Care Task Force, Unitarian Universalist Legislative Ministry of Maryland

Date: February 26, 2020

I am Betty McGarvie Crowley, Chair of the Unitarian Universalist Legislative Ministry of Maryland (UULM-MD) Health Task Force. UULM-MD is an advocacy organization with members in congregations throughout the state. When we were organized in 2005, a top priority was obtaining universal, accessible, affordable, and adequate health care. This priority continues.

UU voices joined with many advocates in Maryland and nationally to support system changes, incremental advancements, and to protect the progress made in health care. One of our unifying principles as UUs is a belief in the inherent worth and dignity of each person. A resolution in 1991 by the Unitarian Universalist Association (UUA) affirmed its moral indignation about health care and stated: “that comprehensive health care is a basic human right and demand the development of a system which guarantees quality health care to every individual in the United States.” In 2017, the UUA pledged to intensify and expand actions to reflect our values. A Declaration of Conscience was created and included that UUs were: “In opposition to any steps to undermine the right of every citizen to vote or to turn back advances in access to health care and reproductive rights and affirmed our commitment to justice and compassion in human relations.”

We believe that SB 872 is proactive and important emergency legislative in case the Federal Government, Congressional and/or litigation attempts roll back crucial protections or repeal the Affordable Care Act (ACA). Last year the Maryland General Assembly had the foresight to appoint a workgroup to create this legislation to protect the provisions of the ACA that are so essential. The ACA is not only compassionate but also fiscally responsible as seen in the fiscal note. SB 872 primarily codifies existing federal law with additional requirements especially the enforcement of nondiscrimination provisions. This bill provides a safety net for

Marylanders if national setbacks occur on the ACA provisions implemented in 2013.

Some of the major ACA market reforms and consumer protections being protected are well known but others are also vital including: dependent coverage up to the age of 26; preexisting condition exclusions; prohibition on policy rescissions; provisions regarding wellness and prevention programs; prohibition on annual or lifetime limits on the dollar value of benefits; prohibition on excessive waiting periods in the large group market; requirements relating to choice of health care professional and patient access to obstetrical and gynecological care; emergency services coverage requirements; standards for summaries of benefits and coverage explanations; minimum loss ratio requirements and premium rebate guidelines; annual limitations on cost sharing; availability of child only plans; minimum benefit requirements for catastrophic plans; prohibition on discriminatory premium rates; coverage for individuals participating in clinical trials; contract requirements for stand-alone dental plans; guaranteed availability and renewability of coverage; and prescription drug benefit requirements.

Fortunately, Maryland has compassionate legislators who listen and can make a difference for our residents. The UU Legislative Ministry appreciates the leadership from your committee by Senators Feldman and Klausmeier and your support.

We urge a favorable report on SB 872. Thank you!

MDCHI_FAV_SB872

Uploaded by: DeMarco, Vincent

Position: FAV

**MARYLAND CITIZENS' HEALTH INITIATIVE****TESTIMONY IN FAVOR OF SENATE BILL 872**

BEFORE THE FINANCE COMMITTEE

By Vincent DeMarco, President of the Maryland Citizens' Health Initiative, Inc.

FEBRUARY 26, 2020

Madam Chair and Members of the Senate Finance Committee, thank you for this opportunity to testify in support of Senate Bill 872, a measure that would protect Marylanders if the Affordable Care Act is invalidated at the federal level. We urge the committee to give Senate Bill 872 a favorable report.

Thanks to the leadership of this Committee, Maryland has made great strides in expanding health care coverage and improving public health past two decades. Even before the Affordable Care Act, we substantially expanded Medicaid for lower income parents and small business owners. By fully implementing the ACA, we have expanded health care coverage to about 400,000 previously uninsured Marylanders, cutting our uninsured rate in half. And, thanks to the 2018 reinsurance program and the 2019 Maryland Easy Enrollment Health Insurance Program, we are making health care more affordable for many thousands of Marylanders with health coverage and doing all we can to make sure people who are eligible for free or low cost health care coverage get enrolled. We must do all we can to protect this health care progress in our state.

It is a terrible shame that even after it has brought critically needed health care coverage to over 30 million Americans, there are still those who are trying to destroy or weaken the Affordable Care Act. We share your deep concerns about the legal challenge to the constitutionality of the ACA which is now being litigated in the 5th Circuit Court of Appeals and in the US Supreme Court. Although I am hopeful that the US Supreme Court will uphold the ACA again as it has twice already done so, we must be as prepared as we can be for the worst case scenario which SB 872 does well. In addition, we must enact SB 872 to protect Marylanders as best we can from the constant administrative attacks on the ACA from the Trump Administration.

Unfortunately, nothing we do in Maryland could adequately protect us from the loss of several billion dollars of federal health care support which would result from the ACA being declared unconstitutional. Though I do not believe this will happen, we must do everything we can to enshrine the key ACA consumer protections in our Maryland law and for that reason we strongly urge you to approve SB 872.

ACNM_FAV_SB 872

Uploaded by: Elliott, Robyn

Position: FAV

AFFILIATE OF



AMERICAN COLLEGE
of NURSE-MIDWIVES

With women, for a lifetime®

Committee: House Health and Government Operations Committee
Bill number: Senate Bill 872
Title: Health Insurance - Consumer Protections
Hearing Date: February 26, 2020
Position: Support

The Maryland Affiliate of the American College of Nurse Midwives (ACNM) supports *Senate Bill 872 – Health Insurance – Consumer Protections*. The bill codifies important consumer protections of the Affordable Care Act, such as adult children being able to stay on their parents’ health plan until age 26, into Maryland law. In this way, Maryland will be making those protections permanent in Maryland, so that we are protected regardless of the outcome of any court cases or future federal action.

Thank you for your consideration of our testimony. If we can provide any further information, please contact Robyn Elliott at relliott@policypartners.net or (443) 926-3443.

LCPCM_FAV_SB 872

Uploaded by: Elliott, Robyn

Position: FAV



Committee: Senate Finance Committee
Bill Number: Senate Bill 872
Title: Health Insurance – Consumer Protections
Hearing Date: February 26, 2020
Position: Support

The Licensed Clinical Professional Counselors of Maryland (LCPCM) supports *Senate Bill 872 – Health Insurance – Consumer Protections*. This bill would establish consumer protections of the federal Patient Protection and Affordable Care Act (ACA) in a new sub-title.

LCPCM strongly supports ensuring that protections included in the ACA are codified in Maryland law in the event parts of the federal law are repealed or struck down through legal actions. This includes provisions around preexisting conditions and requiring insurers to cover dependents up to the age of 26 years old.

These two provisions will ensure that young adults continue to have access to coverage and that consumers with a serious mental illness do not face additional barriers to coverage due to restrictions on pre-existing conditions. This is especially important as the rate of suicide continues to increase in Maryland in recent years¹.

Thank you for your consideration of our testimony, and we urge a favorable vote. If we can provide any further information, please contact Rachael faulkner at rfaulkner@policypartners.net or 410-693-4000.

¹ Suicide Mortality by State. Centers for Disease Control and Prevention. National Center for Health Statistics. <https://www.cdc.gov/nchs/pressroom/sosmap/suicide-mortality/suicide.htm>

MDAC_FAV_SB 872

Uploaded by: Elliott, Robyn

Position: FAV



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www.mdac.us

To: Senate Finance Committee
Bill: SB 872 – Health Insurance – Consumer Protections
Date: February 26, 2020
Position: Support

The Maryland Dental Action Committee (MDAC) supports *Senate Bill 872 – Health Insurance – Consumer Protections*. The bill codifies important consumer protections in the Affordable Care Act (ACA). If any future court actions impact the ACA, Marylanders will continue to be afforded protections such as ensuring adult children can remain on their parents' insurance policies. These protections extended to the entire health insurance market, including dental.

We ask for a favorable report. If we can provide any additional information, please contact Robyn Elliott at relliott@policypartners.net or (443) 926-3443.

Optimal Oral Health for All Marylanders

MDAC_FAV_SB 872

Uploaded by: Elliott, Robyn

Position: FAV



10015 Old Columbia Road, Suite B-215
Columbia, Maryland 21046
www.mdac.us

To: Senate Finance Committee
Bill: SB 872 – Health Insurance – Consumer Protections
Date: February 26, 2020
Position: Support

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We ask for a favorable report. If we can provide any additional information, please contact Robyn Elliott at relliott@policypartners.net or (443) 926-3443.

Optimal Oral Health for All Marylanders

MNA_FAV_SB 872

Uploaded by: Elliott, Robyn

Position: FAV



Committee: Senate Finance Committee

Bill Number: Senate Bill 872

Title: Health Insurance - Consumer Protections

Hearing Date: February 26, 2020

Position: Support

The Maryland Nurses Association (MNA) support *Senate Bill 872 – Health Insurance – Consumer Protections*. The bill codifies key consumer protections of the Affordable Care Act into State law. In the unlikely event that a Court order overturns the ACA, Maryland consumers would still have key protections, such as being able to get health insurance even if they had preexisting conditions.

MNA has been a supporter of the Affordable Care Act since its inception. We ask that the Maryland General Assembly take steps to ensure the continuation of key provisions. We ask for a favorable vote. If we can provide any additional information as the Committee considers this issue, please contact Robyn Elliott at (443) 926-3443 or relliott@policypartners.net.

MNA_FAV_SB 872

Uploaded by: Elliott, Robyn

Position: FAV



Committee: Senate Finance Committee

Bill Number: Senate Bill 872

Title: Health Insurance - Consumer Protections

Hearing Date: February 26, 2020

Position: Support

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MNA has been a supporter of the Affordable Care Act since its inception. We ask that the Maryland General Assembly take steps to ensure the continuation of key provisions. We ask for a favorable vote. If we can provide any additional information as the Committee considers this issue, please contact Robyn Elliott at (443) 926-3443 or relliott@policypartners.net.

MedChi, MDCSCO_Danna Kauffman_FAV_SB0872

Uploaded by: Kauffman, Danna

Position: FAV



The Maryland State Medical Society

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TO: The Honorable Delores G. Kelley, Chair
Members, Senate Finance Committee
The Honorable Brian J. Feldman

FROM: Danna L. Kauffman
Pamela Metz Kasemeyer
J. Steven Wise
Richard A. Tabuteau

DATE: February 26, 2020

RE: **SUPPORT** – Senate Bill 872 – *Health Insurance – Consumer Protections*

On behalf of the Maryland State Medical Society (MedChi) and the Maryland/District of Columbia Society of Clinical Oncology (MDCSCO), we **support** Senate Bill 872. Senate Bill 872 codifies into Maryland law certain protections currently included in the Affordable Care Act (ACA). These protections include prohibiting exclusion based on pre-existing conditions; prohibiting the establishment of differing rules for eligibility or continued eligibility based on health condition, claims experience, receipt of health care, medical history, genetic information, evidence of insurability or disability; prohibiting the establishment of a rate based on physical location within the State; requiring rates be based on reasonable age variation formularies; allowing a dependent to remain on a parent’s plan until the age of 26; prohibiting cost sharing for services, such as immunizations, womens’ preventive care and screenings; prohibiting annual limits; and prohibiting a waiting period of more than 90 days. The bill also contains provisions regarding the procurement of emergency services; and requirements on providing information, such as a summary of benefits and coverage, to consumers.

MedChi and MDCSCO support the provisions in the ACA and believe that the provisions included in Senate Bill 872 are essential for patient protections if the ACA is ultimately struck down. The American Society of Clinical Oncologists recently released two studies that demonstrate the value of the ACA in improving access to earlier diagnosis, earlier care, and reduced racial disparities for patients with cancer in those states that adopted Medicaid expansion, such as Maryland. In addition, a separate study found that after implementation of the ACA in 2010, women with ovarian cancer were more likely to be diagnosed at earlier stages and to be treated within 30 days than in previous years. Maryland must ensure that these earlier successes continue and that individuals in Maryland continue to be protected from provisions that ultimately would limit access to care. We urge a favorable vote.

For more information call:

Danna L. Kauffman
Pamela Metz Kasemeyer
J. Steven Wise
Richard A. Tabuteau

410-244-7000

MOCO_Women_Dem_Club_FAV_SB 872

Uploaded by: Milano, Leslie

Position: FAV



MONTGOMERY COUNTY, MARYLAND
WOMEN'S DEMOCRATIC CLUB

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Senate Bill 0872 – Health Insurance – Consumer Protections
Senate Finance Committee– February 26, 2020
SUPPORT

Thank you for this opportunity to submit written testimony concerning an important priority of the **Montgomery County Women's Democratic Club (WDC)** for the 2020 legislative session. WDC is one of the largest and most active Democratic Clubs in our County with more than 600 politically active women and men, including many elected officials.

WDC urges the passage of SB0872. This bill authorizes the Maryland Insurance Commissioner to enforce the consumer protections found in the federal Affordable Care Act. It is in the public interest and especially in the interest of women, children and other vulnerable populations to ensure that the health care protections established by the federal Affordable Care Act continue to protect Maryland residents in light of continued threats to the federal law.

Among other consumer protections the law would assure that people with pre-existing conditions (particularly those with mental illnesses, developmental disabilities or other lifelong conditions) cannot be charged more or given less access to treatment than others. This protection includes pregnancy. It also protects the coverage under a parents' plan for children under the age of 26 and prohibits insurers from requiring copays or deductibles for prevention-related services such as immunizations and screenings/check-ups for children. It ends lifetime and yearly dollar limits on coverage of essential health benefits and makes it illegal for health insurance companies to cancel a person's health insurance just because they become ill. Most importantly for women, it assures access to obstetrical and gynecological services.

Since February of 2018, thirteen (13) states have enacted bills to ensure that federal ACA protections become part of state law to help blunt potential fallout and prevent adverse effects to millions of individuals if the federal law is overturned.

WDC urges Maryland to join these other states in the growing movement to ensure consumer protections under the ACA are preserved for Marylanders.

We ask for your support for SB0872 and strongly urge a favorable Committee report.

Respectfully,

Diana Conway
President

Barbara_Noveau_DotheMostGood_FAV_SB872

Uploaded by: Noveau, Barbara

Position: FAV



Barbara Noveau, Executive Director, DoTheMostGood—Montgomery County

Committee: Health and Government Operations Committee

Testimony on: SB872—Health Insurance – Consumer Protections

Position: Favorable

Hearing Date: February 26, 2020

Bill Contact: Senator Brian J. Feldman

To: The Honorable Delores G. Kelley, Chair, Finance Committee, and Committee Members

I am the executive director of DoTheMostGood—Montgomery County, a progressive organization with more than 1600 members who live in all areas of Montgomery County. One of the primary areas of focus for our organization is safeguarding and expanding access to affordable healthcare for all Marylanders. I am pleased to submit this testimony on behalf of our members in strong support of SB872.

DoTheMostGood strongly supports the enactment of this legislation. This bill will provide Marylanders with the consumer protections of the Affordable Care Act (ACA) should the ACA be declared unconstitutional. This legislation would codify the rights of patients and thereby ensure that Marylanders will be treated fairly in the health insurance marketplace.

SB872 would:

- Protect a patient's choice of doctors
- Keep young adults covered until age 26
- End lifetime limits on coverage
- End pre-existing condition exclusions for everyone
- End arbitrary withdrawals of insurance coverage
- Review premium increases
- Help everyone get the most from the premiums paid
- Remove annual dollar limits on coverage
- Remove insurance company barriers to emergency services
- Cover preventive care at no cost to the policy holder
- Guarantee a right to appeal insurance charges

Ensuring that Marylanders continue to have access to an affordable, functioning health insurance system regardless of the status of the ACA at the Federal level is critical to the health of over 400,000 Marylanders who are currently covered under the ACA. With uncertain federal support for the ACA, it is imperative that Maryland ensure that its individual insurance market continues to provide the consumer protections of the ACA.

Enactment of this legislation would not break new ground. Since February of 2018, 13 states have enacted legislation to ensure that the ACA protections become part of state law to help mitigate the adverse affects if the courts determine the ACA is unconstitutional.

In closing, DoTheMostGood recommends a **Favorable** report on SB872.

Respectfully Submitted,

Barbara Noveau
Executive Director, DoTheMostGood
barbara@dtmg.org
240-338-3048

Attorney General_Support_SB0872

Uploaded by: O'Connor, Patricia

Position: FAV

BRIAN E. FROSH
Attorney General



ELIZABETH F. HARRIS
Chief Deputy Attorney General

CAROLYN QUATTROCKI
Deputy Attorney General

STATE OF MARYLAND
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February 26, 2020

To: The Honorable Delores G. Kelley
Chair, Finance Committee

From: The Office of the Attorney General

Re: Senate Bill 872 (Health Insurance – Consumer Protections): SUPPORT with Amendments

The Office of the Attorney General submits the following written testimony in support of Senate Bill 872. In 2011, the General Assembly incorporated by reference essential ACA consumer protections in Maryland law. These health care protections are at risk by the *Texas v USA* litigation, the position of the US Department of Justice that the individual mandate, guaranteed issue, community rating, preexisting condition exclusion protections, and all other ACA provisions are unconstitutional, and by the Administration's recent executive orders and regulations scaling back or eliminating other ACA protections. As the primary regulator of insurance, Maryland can enact and enforce its own stand-alone laws to protect Maryland and its residents from the loss of these and other essential healthcare protections.

Failing to enact these protections as stand-alone provisions creates significant litigation risk and puts Marylanders at risk of losing now well-established consumer protections should the ACA be deemed unconstitutional in whole or in part, or the Administration continues its attempts to eliminate the protections through executive fiat or regulatory action. Substantial numbers of Maryland residents have been able to obtain health insurance by virtue of the guaranteed issue, community rating, and prohibition on pre-existing condition exclusion provisions. Should those provisions be eliminated, substantial numbers of Maryland residents would lose their coverage, leading to a significant increase in the amount of uncompensated care provided by Maryland hospitals and other healthcare providers, particularly through emergency room visits. Any increase in uncompensated care provided by Maryland hospitals would significantly undermine

Maryland's Total Cost of Care Model with CMS and would increase hospital costs for all payers, including the State.

Moreover, other ACA provisions are strongly supported and have become integral components of our healthcare system (e.g. dependent coverage up to age 26, elimination of lifetime and annual limits on essential benefits, coverage of preventive services without cost share, and access to maternity coverage and emergency services). And, Marylanders have benefitted from the ACA's anti-discrimination provisions that, for example, prohibit plan designs that would deny medically necessary services to transgender individuals or place all medications used to treat HIV on the highest formulary tier. Marylanders have also benefitted from the ACA's MLR affordability requirements, requiring an 80% MLR in the individual/small group markets and 85% for the large group market.

Maryland must protect the significant gains in health insurance coverage and improvements in health care access and affordability. This bill, crafted through a painstaking process by carriers, hospitals, providers, consumer representatives, the MIA, MHBE, HEAU and legislative staff, offers those protections to Marylanders.

The Office looks forward to working with the subcommittee on a few needed amendments to the contraceptive coverage mandate and the anti-discrimination provisions and through any needed amendments identified by other stakeholders.

For these reasons, we ask for a favorable report from the Committee.

cc: Senator Feldman, Sponsor

MHA_FAV_SB 872

Uploaded by: Raswant, Maansi

Position: FAV



Maryland
Hospital Association

Senate Bill 872 – Health Insurance – Consumer Protections

Position: *Support*

February 26, 2020

Senate Finance Committee

MHA Position

Maryland's 61 nonprofit hospitals and health systems care for millions of people each year, treating 2.3 million in emergency departments and delivering more than 67,000 babies. The 108,000 people they employ are [caring for Maryland](#) around-the-clock every day—delivering leading edge, high-quality medical service and investing a combined \$1.75 billion in their communities, expanding access to housing, education, transportation, and food.

Broad based, affordable and comprehensive health insurance is integral to hospitals' ability to provide high-quality care. It also is key to the state's success under the Total Cost of Care Model, which pushes accountability for whole-person care, including population health. The coverage reforms and expansion ushered in by the Affordable Care Act (ACA) are integral to the state's continued success under the Model. That is why Maryland hospitals support SB 872, which ensures these market reforms are preserved in the state.

ACA dramatically improved the ability for people with preexisting conditions to buy coverage. In 2010, before the law passed, a Commonwealth Fund survey found 70% of people with health problems said it was very difficult or impossible to buy affordable coverage; just 36% said they purchased a plan. By 2016, the percentage of people who had trouble buying an affordable plan dropped to 42%; 60% bought a plan.

By codifying these protections in state law, SB 872 allows hospitals, other providers, communities, and the state to meet the requirements of our Total Cost of Care Model while also protecting Marylanders from federal actions that have weakened the ACA, particularly its bans on denying coverage and charging more for those with preexisting conditions.

For these reasons, we urge a *favorable* report for SB 872.

For more information, please contact:

Maansi Raswant

Mraswant@mhaonline.org

MRHA_FAV_SB872

Uploaded by: Wilson, Lara

Position: FAV



Statement of Maryland Rural Health Association

To the Finance Committee

February 26, 2020

Senate Bill 872: Health Insurance – Consumer Protections

POSITION: SUPPORT

Chair Kelley, Vice Chair Feldman, and members of the Finance Committee, the Maryland Rural Health Association (MRHA) is in SUPPORT of Senate Bill 872: Health Insurance – Consumer Protections.

This legislation would authorize the Maryland Insurance Commissioner to enforce certain provisions of law under certain applicable powers; requiring the Commissioner to adopt certain regulations under certain circumstances that are consistent with certain federal regulations, rules, and guidance; prohibiting certain carriers from excluding or limiting certain benefits or denying certain coverage because a certain health condition was present on a certain date; etc.

MRHA's mission is to educate and advocate for the optimal health and wellness of rural communities and their residents. Membership is comprised of health departments, hospitals, community health centers, health professionals, and community members in rural Maryland.

Rural Maryland represents almost 80 percent of Maryland's land area and 25% of its population. Of Maryland's 24 counties, 18 are considered rural by the state, and with a population of over 1.6 million they differ greatly from the urban areas in the state.

Maryland law states that "many rural communities in the State face a host of difficult challenges relating to persistent unemployment, poverty, changing technological and economic conditions, an aging population and an out-migration of youth, inadequate access to quality housing, health care and other services, and deteriorating or inadequate transportation, communications, sanitations, and economic development infrastructure." (West's Annotated Code of Maryland, State Finance and Procurement § 2-207.8b)

The 2018 Maryland Rural Health Plan (www.MDRuralHealthPlan.org), an extensive assessment of Maryland's rural health needs, identified access to health care as one of the major concerns for Marylanders living in rural communities.

MRHA believes this legislation will help strengthen health care provision to one of Maryland's most vulnerable populations.

Lara Wilson, Executive Director, larawilson@mdruralhealth.org, 410-693-6988

CBH_FWA_SB872

Uploaded by: Doyle, Lori

Position: FWA



Testimony on SB 872
Health Insurance – Consumer Protections
Senate Finance Committee
February 26, 2020
POSITION: SUPPORT WITH AMENDMENTS

The Community Behavioral Health Association of Maryland is the professional organization for providers of community-based mental health and substance use disorder treatment services. Our members serve the majority of the almost-300,000 children and adults who access care through the public behavioral health system. We provide outpatient treatment, residential and day programs, case management and assertive community treatment (ACT), employment supports, and crisis intervention.

CBH supports this bill that would continue to provide critical consumer protections in the individual, small group and large group markets should the courts dismantle all or part of the Affordable Care Act (ACA).

In addition to direct consumer protections, such as coverage of pre-existing conditions, SB 872 also requires insurers to provide information on benefit plans so that consumers can compare coverage across carriers. This is of particular importance to individuals with behavioral health conditions since those benefits are often sub-contracted to another entity to manage, or are more restricted than other somatic benefits. Based on two Milliman reports we know that consumers face significant challenges in accessing behavioral healthcare purportedly covered in their benefits plans, forcing them to go out of network and assume additional out-of-pocket expenses.

Given the concerns specific to behavioral health, we suggest an amendment to the list of uniform definitions on pages 20-21 to include behavioral health services, as follows:

p. 21, line 10, strike “and” and add new line 11 to read,

(XIII) MENTAL HEALTH AND SUBSTANCE USE DISORDER SERVICES; AND

This is a low-cost way to begin to address the problems consumers with behavioral health needs all too often face when trying to access services they thought their insurance plan covered.

We urge a favorable report for SB 872 with these amendments.

MIA_FWA_SB872

Uploaded by: Paddy, Michael

Position: FWA

LARRY HOGAN
Governor

BOYD K. RUTHERFORD
Lt. Governor



Maryland

INSURANCE ADMINISTRATION

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Commissioner

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**TESTIMONY OF
THE
MARYLAND INSURANCE ADMINISTRATION
BEFORE THE
SENATE FINANCE COMMITTEE**

FEBRUARY 26, 2020

SENATE BILL 872 – HEALTH INSURANCE - CONSUMER PROTECTIONS

POSITION: SUPPORT WITH AMENDMENTS

Thank you for the opportunity to provide written comments regarding Senate Bill 872. Senate Bill 872 is intended to expressly codify all the consumer protections from the Affordable Care Act (ACA) directly into Maryland law. Senate Bill 872 is in direct response to the continued threats to the ACA, and to ensure that Maryland consumers would continue to enjoy the ACA consumer protections even if the ACA was partially or fully repealed, invalidated by the courts, or weakened through federal regulations. The Maryland Insurance Administration already has authority under § 15-137.1 of the Insurance Article and other statutes to enforce the ACA consumer protections addressed by the bill, but many of the ACA requirements are currently incorporated into state law solely by cross-reference to the federal statutes and regulations.

The Consumer Protections Workgroup of the Maryland Health Insurance Coverage Protection Commission (MHICPC) (of which the MIA was an active member) met throughout the summer and fall of 2019 to draft a bill that accurately and completely codified the ACA consumer protections currently listed in § 15-137.1 into a new Title 15, Subtitle 1A of the Insurance Article. The new subtitle retains a list of cross-references to current ACA requirements that will allow the MIA to continue to enforce all existing ACA requirements as long as the federal law remains in effect (§ 15-1A-02). The bill then expressly codifies several specific ACA consumer protections and requires the MIA to adopt regulations “to the extent necessary” to implement some of the more technical aspects of the requirements that are currently addressed in detailed federal rules.

As drafted, there is new nondiscrimination language included in the proposed § 15-1A-22, which was not previously vetted by the Consumer Protections Workgroup of the MHICPC. The MIA is concerned that the new language may lead to unintended consequences. The Consumer Protections Workgroup was tasked to expressly codify all the consumer protections from the ACA directly into Maryland law. Section 15-1A-22 appears intended to codify the non-discrimination requirements under Section 1557 of the ACA. It is important to note, however, that the federal regulations adopted by the Obama Administration under Section 1557 provide that the general prohibition on discrimination does not apply to situations where state law establishes distinctions between certain protected classes (for example, a state benefit mandate that only applies to minors is not considered age discrimination). “Age” and “marital status” are proposed as two of the protected classes in § 15-1A-22. The Maryland General Assembly has previously enacted several insurance laws that include distinctions between individuals based on age and marital status. The MIA believes that to be consistent with existing ACA requirements, § 15-1A-22 needs to be revised to expressly indicate that restrictions based on age or marital status that are specifically codified in other sections of state law are not considered discriminatory.