

Statement of Maryland Rural Health Association

To the Health and Government Operations Committee February 20, 2020

House Bill 196 – Maryland Health Benefit Exchange – Establishment of a State-Based health Insurance Subsidies Program

POSITION: SUPPORT

Chair Pendergrass, Vice Chair Pena-Melnyk, and members of the Health and Government Operations Committee, the Maryland Rural Health Association (MRHA) is in SUPPORT (With caution that the reinsurance funding should be used cautiously given federal action and court judgements might impact ACA provisions.) of House Bill 196 – Maryland Health Benefit Exchange – Establishment of a State-Based health Insurance Subsidies Program.

This legislation would require the Maryland Health Benefit Exchange to establish and implement a State-Based Health Insurance Subsidies Program to provide a means for individuals to reduce the amount they pay for health benefit plans in the individual health insurance market; requiring that a certain assessment of health care providers be used to fund the State Reinsurance Program and the State-Based Health Insurance Subsidies Program; requiring the Maryland Health Benefit Exchange Board to make a certain determination; 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 jurisdictions, 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)

In the 2018 Maryland Rural Health Plan (www.MDRuralHealthPlan.org), an extensive assessment of Maryland's rural health needs, health care providers cited the limited availability of affordable health insurance plans and high out of pocket costs as barriers to health care access for many rural Marylanders, particularly the working poor. MHRA believes this legislation is a step toward improved health care access for our rural communities and we thank you for your consideration.

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