

Testimony in Support of HB 1337

Health Insurance - Appeals and Grievances Process - Reporting Requirements and
Establishment of Workgroup

House Health and Government Operations Committee
March 7, 2023

FAVORABLE

TO: Chair Peña-Melnyk, and members of the Health and Government Operations
Committee

No matter our skin color, where we live or where we're from, when it comes to our health we all want to get the care we need without going bankrupt or having these needs denied by corporations more interested in their earnings.

Although Maryland has one of the largest insured rates of any state in the country, in the past few years there's been a steep rise in the number of claim and care denials and delays that health insurance carriers are issuing, so-called "adverse decisions." This sharp increase in claim and care denials puts Marylanders at risk of waiting too long to receive care, or not receiving it at all. Increases in insurance coverage have limited benefit when insured individuals face increasing risks of having their care or claims denied.

HB 1337 creates new health insurance carrier reporting requirements to allow for more oversight regarding denials and what's behind these decisions and practices. It will give our regulators more tools to hold insurers accountable and will benefit thousands of everyday Marylanders as they will have more information about their practices and decisions.

I respectfully urge this committee to return a favorable report on HB 1337

Thank you,
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