



Bill Title: HB 995 - Workgroup to Study the Rise in Adverse Decisions in the State Health Care System - Establishment

Position: SUPPORT (FAV with Amendments)

To: Senate Finance Committee

From: Erica Puentes, Progressive Maryland Legislative Coordinator on behalf of Progressive Maryland

Dear Chair Beidle and Members of the Committee,

As this Committee and the public knows, Marylanders and Americans everywhere are enduring an unacceptable rise in health insurance delays and denials of care. Insurance companies in general are enjoying record profits and revenues but have adopted practices that put up barriers to care and withhold the medical treatment and services people need. The crisis spurred Progressive Maryland along with its affiliate, People's Action to create the Care Over Cost campaign two years ago to educate the public and to fight insurance company denials. Progressive Maryland is a statewide grassroots organization, working for a more just, patient-centered, care driven healthcare system.

We meet people all the time who have had to deal with or are currently dealing with an insurance claim delay or denial. They wonder what the point of having a health policy is if they can't use it to get the procedure or test or medication that their doctor prescribed. It's time for regulators to step in and hold carriers accountable. We strongly support the creation of this work group and any efforts by the General Assembly and our state agencies to start identifying solutions to this problem.

We'd also like to offer an amendment in order to make the Group more inclusive of advocates and its deliberations open to the public.

The bill currently calls for 3 representatives from the health insurance industry. The bill currently instructs the Work Group to share its findings with the HGO and Senate Finance Committees.



We respectfully propose an amendment to make this a more patient centered and transparent process.

Amendment

(viii) *change* “one representative of a patient advocacy organization”; to **three** *representatives of patient advocacy organizations, including a group that is actively working on insurance denials on behalf of patients, and two who represent underserved communities like advocates for trans folks and people with medically complex needs and/or disabilities.*

Add to “On or before December 1, 2025, the Workgroup shall report its findings and 12 recommendations to the Senate Finance Committee and the House Health and 13 Government Operations Committee, in accordance with § 2-1257 of the State Government 14 Article. 15 SECTION 2. AND B” *and share its findings and recommendations with the public.*