

HB0995_Workgroup_to_Study_the_Rise_in_Adverse_Deci

Uploaded by: Cecilia Plante

Position: FAV



TESTIMONY FOR HB0995
Workgroup to Study the Rise in Adverse Decisions in the State Health Care System - Establishment

Bill Sponsor: Delegate Pena-Melnyk

Committee: Finance

Organization Submitting: Maryland Legislative Coalition

Person Submitting: Cecilia Plante, co-chair

Position: FAVORABLE

I am submitting this testimony in strong support of HB0995 on behalf of the Maryland Legislative Coalition. The Maryland Legislative Coalition is an association of activists - individuals and grassroots groups in every district in the state. We are unpaid citizen lobbyists and our Coalition supports well over 30,000 members.

This bill, if enacted, would create a workgroup to review the adverse decisions made by insurance carriers in the state and make recommendations on –

- Medical service categories
- Health settings
- Adverse decisions
- Medical necessity

They will also determine a standardized method for categorizing the decisions and reporting grievances. Finally, they will make recommendations on how to reduce the number of adverse decisions, including suggesting legislation that would address the rise in such decisions.

As residents of Maryland, anything that can be done to make health insurance companies more focused on the health of Marylanders and more of a partnership instead of a money-making enterprise is more than welcome.

We strongly support this bill and recommend a **FAVORABLE** report in committee.

HB995 Workgroup Adverse Decisions LOS (1).pdf

Uploaded by: Irnise Williams

Position: FAV

CAROLYN A. QUATTROCKI
Chief Deputy Attorney General

LEONARD J. HOWIE III
Deputy Attorney General

CARRIE J. WILLIAMS
Deputy Attorney General

SHARON S. MERRIWEATHER
Deputy Attorney General

ZENITA WICKHAM HURLEY
Chief, Equity, Policy, and Engagement



**STATE OF MARYLAND
OFFICE OF THE ATTORNEY GENERAL
CONSUMER PROTECTION DIVISION
HEALTH EDUCATION AND ADVOCACY UNIT**

ANTHONY G. BROWN
Attorney General

WILLIAM D. GRUHN
Division Chief

KIMBERLY S. CAMMARATA
Unit Director

PETER V. BERNS
General Counsel

CHRISTIAN E. BARRERA
Chief Operating Officer

IRNISE WILLIAMS
Deputy Unit Director

March 17, 2025

TO: The Honorable Pamela Beidle, Chair
Senate Finance Committee

FROM: Irnise F. Williams, Deputy Director, Health Education and Advocacy Unit

RE: House Bill 995- Workgroup to Study the Rise in Adverse Decisions in the State Health Care System – Establishment- **SUPPORT**

The Health Education and Advocacy Unit (HEAU) supports House Bill 995, which should help regulators assess compliance with appeals and grievance laws, identify trends and areas that warrant critical review and compliance action, and ensure that enrollees are not denied access to medically necessary care.

As the Committee is likely aware, there has been a great deal of reporting recently highlighting the impact of carrier denials on consumers' access to care, health, and financial stability. A [2023 KFF Survey of Consumer Experiences with Health Insurance](#) found that "58% of insured adults said they have experienced a problem using their health insurance, including denied claims. Four in ten (39%) of those who reported having trouble paying medical bills said that denied claims contributed to their problem." Another recent [KFF Report](#) found that "Insurers of qualified health plans (QHPs) sold on HealthCare.gov denied 19% of in-network claims in 2023 and 37% of out-of-network claims for a combined average of 20% of all claims." The in-network denial ranged from 1% to 54%. The same report found that consumers rarely file an internal grievance with the carrier (fewer than 1% of denied claims were challenged) and when they do, insurers usually uphold their original decision (56% of challenges were upheld).

That data the HEAU has reported year-over-year in Annual Reports is better but still shows a small percentage of challenges to carrier denials. Based on carrier reported data over the last ten fiscal years, only 10% of adverse decisions were challenged, and on average, 54% of those grievances were reversed when challenged. The HEAU has assisted many Marylanders whose claims have

been denied. In the HEAU's most recent [Annual Report](#) to the General Assembly, HEAU highlighted several consumer stories that demonstrate the gravity of adverse decisions on a consumer's health and access to care:

1. An insurance carrier retroactively denied a cycle of physical therapy treatment (dry needling for a musculoskeletal condition), claiming it was experimental or investigational, even though the treatment is considered safe and effective by the medical community and was deemed medically necessary for the consumer by his own treating provider. It was the only treatment that had provided the consumer with any relief, decreasing pain and increasing range of motion. The insurance carrier upheld the denial on internal appeal. With HEAU's assistance, the claim was submitted to an external reviewer. The denial was overturned, allowing reimbursement for the thirteen visits that had provided the consumer with significant relief.

2. An insurance carrier prospectively denied spinal surgery, deeming the proposed surgical approach as not medically necessary. The carrier wanted the spinal surgeon to use an older methodology, which the spinal surgeon stated he had not used in over a decade. The older methodology used cadaver bone as a spacer between spinal vertebrae. According to the provider, cadaver bone has been documented to be a source of infection, and he cited a 2021 outbreak of tuberculosis linked to contaminated bone graft product. The newer methodology uses cervical cages, rather than cadaver bone. The denial was upheld on two levels of appeal internal to the insurance carrier. Once submitted externally to an Independent Review Organization, the denial was overturned, authorizing the methodology preferred by the spinal surgeon and by the consumer.

3. A consumer had surgery to repair a broken right clavicle, with an expected out-of-pocket expense of \$5,000. During the surgery the consumer sustained a torn vein complication requiring an unexpected vascular surgeon to join the surgical team and an extension of the surgical time. The insurance carrier denied the vascular surgery portion of the claim and specifically instructed the hospital to send the bill of \$43,000 directly to their insured. The HEAU appealed this decision with the reviewing entity which agreed the surgery was medically necessary and the insurer should pay. Despite the decision, it took the insurer more than a year to pay the claim. During this time, HEAU monitored the situation to ensure no further bills would be sent to the consumer. After 15 months, the insurer finally paid.

These examples demonstrate the value of HEAU's assistance when consumers obtain it, but such assistance is a back-end solution to the problem. Health claim denials, particularly when unwarranted, harm consumers by delaying necessary care, risking consumer health and the financial stability of their households. These concerns deserve front-end solutions and warrant critical review by the regulators.

In the last few years, the General Assembly has worked to increase transparency in denial trends, but this workgroup will provide a global review of reporting elements and make fully informed holistic recommendations to ensure regulators have the necessary data needed to warrant critical review and compliance action and ensure that enrollees are not denied access to medically necessary care.

We urge a favorable report.

Crossover Testimony-HB 995-Workgroup to Study the

Uploaded by: Jake Whitaker

Position: FAV



Maryland
Hospital Association

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

Position: *Support*

March 19, 2025

Senate Finance Committee

MHA Position:

On behalf of the Maryland Hospital Association's (MHA) member hospitals and health systems, we appreciate the opportunity to comment in support of House Bill 995. HB 995 would establish the Workgroup to Study the Rise in Adverse Decisions. An adverse decision occurs when a health insurer denies a claim for health care services. Hospitals and providers have experienced a significant increase in denials over the past several years. This Workgroup, comprised of members of the Maryland General Assembly, state agencies, health care providers, and health insurers, will review and make recommendations to standardize adverse decision reporting requirements across all health payers, including private carriers and managed care organizations. Additionally, this bill requires the Workgroup to develop and report recommendations to the legislature to address the rise in denials of health care claims.

Growth in health payer denials severely raises patient costs and restricts access to necessary care. This trend has been especially pronounced in recent years, with a notable surge in denials within the emergency department and outpatient settings. These denials delay essential care and raise out-of-pocket costs for patients—often forcing them to postpone necessary treatment. Furthermore, hospitals face significant financial strain and operational uncertainty as valuable clinical and administrative resources are diverted to contest inappropriate denials. The growth in adverse decisions has only accelerated in recent years, further exacerbating these challenges for Maryland patients and hospitals.

From fiscal years 2013 to 2024, the total value of denied claims has more than tripled, reaching a staggering \$1.39 billion. In the past three years alone, commercial payer denials have surged, with emergency department denials rising 116%. Notably, denials for medically necessary services have surged, with commercial plan denials rising by 79.1%. Over the past six years, Medicaid managed care organizations have also reported consistently high denial rates.

The Workgroup established by HB 995 is crucial to address the rise in adverse decisions within Maryland's health care system. This collaborative effort aims to enhance transparency, consistency, and accountability when insurers deny claims, ultimately leading to better patient outcomes and a more efficient health care system.

For these reasons, we request a favorable report on HB 995.

For more information, please contact:

Jake Whitaker, Assistant Vice President, Government Affairs & Policy

Jwhitaker@mhaonline.org

2025 MCHS HB 995 Senate Side.pdf

Uploaded by: Jennifer Navabi

Position: FAV



Maryland Community Health System

Bill Number: House Bill 995 – Workgroup to Study the Rise in Adverse Decisions in the State Health Care Systems - Establishment

Committee: Senate Finance Committee

Hearing Date: March 19, 2025

Position: Support

The Maryland Community Health System (MCHS) strongly supports *House Bill 995 – Workgroup to Study the Rise in Adverse Decisions in the State Health Care Systems - Establishment*. Under existing law, carriers must report on volume of adverse decisions. The Workgroup would study potential modifications to reporting requirements to provide more information on the recent spike in adverse decisions.

Maryland Community Health System is a network of federally qualified health centers providing primary, behavioral, and dental care to underserved communities throughout Maryland. Our health centers have been severely impacted by the growth in adverse decisions from private insurers and managed care organizations. The number of adverse decisions is beginning to compromise our health centers' ability to meet the health needs of their patients and communities.

We strongly support this bill, as it will provide needed information about the reasons behind the growth in adverse decisions. This information will support ongoing work by regulators, insurers and MCOs, and providers to understand how to address the issue.

We ask for a favorable with amendment. If we can answer any questions, please contact Robyn Elliott at relliott@policypartners.net.

2025 MdAPA HB 995 Senate Side.pdf

Uploaded by: Jennifer Navabi

Position: FAV



To: Senate Finance Committee

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

Date: February 19, 2025

Position: Favorable

The Maryland Academy of Physician Assistants supports *House Bill 995 – Workgroup to Study the Rise in Adverse Decisions in the State Health Care System - Establishment*. This bill creates the Workgroup to Study the Rise in Adverse Decisions in the State Health Care System which is charged with reviewing existing State adverse decision reporting requirements for all health payers in the State, making recommendations to improve State reporting on adverse decisions, developing strategies to reduce the number of adverse decisions, and developing recommendations for legislation to address the rise in adverse decisions and standardize State reporting requirements regarding adverse decisions across all payers.

As required by Chapters 848/847 (SB 791/HB 932), *Health Insurance – Utilization Review – Revisions* (2024), the Maryland Health Care Commission (MHCC) and the Maryland Insurance Administration (MIA) released a report that, in part, reviewed adverse decisions in Maryland. The report found that adverse decisions increased around seven percent from 2019 to 2022. Maryland does not currently collect the information necessary to fully understand the process and reasons for these adverse decisions. This bill presents an opportunity to identify the reporting information needed on adverse decisions, which could impact the number of Marylanders who receive timely, appropriate care.

We ask for a favorable report. If we can provide any further information, please contact Robyn Elliott at relliott@policypartners.net.

HB 995 - MIA - FAV - FIN.pdf

Uploaded by: Marie Grant

Position: FAV

WES MOORE
Governor

ARUNA MILLER
Lt. Governor



Maryland
INSURANCE ADMINISTRATION

MARIE GRANT
Acting Commissioner

JOY Y. HATCHETTE
Deputy Commissioner

MARY KWEI
Associate Commissioner
Market Regulation and Professional Licensing

200 St. Paul Place, Suite 2700, Baltimore, Maryland 21202
Direct Dial: 410-468-2113
1-800-492-6116 TTY: 1-800-735-2258
www.insurance.maryland.gov

Date: March 19, 2025

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

Committee: Senate Finance Committee

Position: Support

The Maryland Insurance Administration (MIA) appreciates the opportunity to share its support for House Bill 995.

House Bill 995 establishes a workgroup to study the rise in adverse decisions in the State Health Care System. The bill requires the workgroup to review existing State adverse decision reporting requirements for all health payers in the State and make recommendations to improve State reporting on adverse decisions. The workgroup is to be staffed by the Health Services Cost Review Commission (HSCRC) and the MIA. The Maryland Insurance Commissioner or her designee will serve as a member, along with key representatives of the legislature, stakeholder groups representing the industry, and various agencies in state government. The workgroup is required to report its findings and recommendations on or before December 1, 2025.

The introduction of House Bill 995 comes at a critical time for the insurance market in Maryland. Adverse decisions in the fully insured market have more than doubled since 2015, while our fully insured market has shrunk. While adverse decisions as a percentage of covered lives were about 4.6% in 2015, they have since grown to encompass 12.7% of the fully insured market in 2023, with some service categories seeing growth rates in the triple digits.

The workgroup established under HB 995 will examine reporting requirements and trends in adverse decisions across payers (not just the fully insured market) and by service, and make recommendations to the General Assembly on ways to improve reporting on adverse decisions as well as standardizing State reporting requirements. The MIA believes this work will help stakeholders and policymakers gain insight into the factors driving the increases in adverse decisions, and formulate effective responses.

For these reasons, the MIA recommends a favorable committee report on House Bill 995.

NCADD-MD - 2025 HB 995 FAV - Adverse Decisions Wor

Uploaded by: Nancy Rosen-Cohen

Position: FAV



**Senate Finance Committee
March 19, 2025**

**House Bill 995
Workgroup to Study the Rise in Adverse Decisions in the
State Health Care System – Establishment**

Support as Amended

The National Council on Alcoholism and Drug Dependence - Maryland (NCADD-MD) strongly supports House Bill 995, which seeks to establish a Workgroup to Study the Rise in Adverse Decisions in the State Health Care System. This bill is an essential step toward ensuring that Marylanders receive fair and timely access to critical health care services, including for mental health and substance use disorder treatment. The rise in adverse decisions—denials, delays, and barriers to medically necessary care—has created a significant burden on individuals and families seeking treatment. A formal workgroup dedicated to studying and addressing this issue is long overdue.

The establishment of this workgroup will provide a structured, data-driven approach to understanding why adverse decisions in health care are increasing and how we can implement standardized reporting, improved transparency, and patient protections to address these disparities. The workgroup's recommendations, particularly around improving reporting requirements and addressing prior authorization denials, will be essential in making meaningful reforms. Moreover, Maryland already has a foundation for such oversight through its Health Services Cost Review Commission and Maryland Insurance Administration, making it well-positioned to lead the way in tackling this growing crisis.

The increasing frequency of adverse health care decisions is a direct threat to equitable access to care, and this bill is a critical step in ensuring that all Marylanders—particularly those in need of mental health and substance use treatment—receive the care they deserve.

We urge a favorable report on House Bill 995.

2025 MdAPA HB 995 Senate Side.pdf

Uploaded by: Robyn Elliott

Position: FAV



To: Senate Finance Committee

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

Date: February 19, 2025

Position: Favorable

The Maryland Academy of Physician Assistants supports *House Bill 995 – Workgroup to Study the Rise in Adverse Decisions in the State Health Care System - Establishment*. This bill creates the Workgroup to Study the Rise in Adverse Decisions in the State Health Care System which is charged with reviewing existing State adverse decision reporting requirements for all health payers in the State, making recommendations to improve State reporting on adverse decisions, developing strategies to reduce the number of adverse decisions, and developing recommendations for legislation to address the rise in adverse decisions and standardize State reporting requirements regarding adverse decisions across all payers.

As required by Chapters 848/847 (SB 791/HB 932), *Health Insurance – Utilization Review – Revisions* (2024), the Maryland Health Care Commission (MHCC) and the Maryland Insurance Administration (MIA) released a report that, in part, reviewed adverse decisions in Maryland. The report found that adverse decisions increased around seven percent from 2019 to 2022. Maryland does not currently collect the information necessary to fully understand the process and reasons for these adverse decisions. This bill presents an opportunity to identify the reporting information needed on adverse decisions, which could impact the number of Marylanders who receive timely, appropriate care.

We ask for a favorable report. If we can provide any further information, please contact Robyn Elliott at relliott@policypartners.net.

NCADD-MD - 2025 HB 995 FAV - Adverse Decisions Wor

Uploaded by: Talisha Searcy

Position: FAV



**Senate Finance Committee
March 19, 2025**

**House Bill 995
Workgroup to Study the Rise in Adverse Decisions in the
State Health Care System – Establishment**

Support as Amended

The National Council on Alcoholism and Drug Dependence - Maryland (NCADD-MD) strongly supports House Bill 995, which seeks to establish a Workgroup to Study the Rise in Adverse Decisions in the State Health Care System. This bill is an essential step toward ensuring that Marylanders receive fair and timely access to critical health care services, including for mental health and substance use disorder treatment. The rise in adverse decisions—denials, delays, and barriers to medically necessary care—has created a significant burden on individuals and families seeking treatment. A formal workgroup dedicated to studying and addressing this issue is long overdue.

The establishment of this workgroup will provide a structured, data-driven approach to understanding why adverse decisions in health care are increasing and how we can implement standardized reporting, improved transparency, and patient protections to address these disparities. The workgroup's recommendations, particularly around improving reporting requirements and addressing prior authorization denials, will be essential in making meaningful reforms. Moreover, Maryland already has a foundation for such oversight through its Health Services Cost Review Commission and Maryland Insurance Administration, making it well-positioned to lead the way in tackling this growing crisis.

The increasing frequency of adverse health care decisions is a direct threat to equitable access to care, and this bill is a critical step in ensuring that all Marylanders—particularly those in need of mental health and substance use treatment—receive the care they deserve.

We urge a favorable report on House Bill 995.

Progressive Maryland's Testimony on HB995 for Sena

Uploaded by: Erica Puentes

Position: FWA



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.*

Testimony on HB995 - Google Docs.pdf

Uploaded by: Jacqueline (Jackie) MacMillan

Position: FWA

Testimony on HB995
Work Group to Study the Rise in Adverse Health Insurance Decisions

FAVORABLE WITH AMENDMENT

Wednesday, March 19, 2025

Dear Chair Beidle and Members of the Finance Committee:

Health insurance denials have increased by nearly 70% in the past decade in Maryland. Yet when patients contest these denials, about half are overturned. This is clearly not working for patients, who must go through hoops to get the coverage they have already paid for.

Delays and denials exacerbate the trauma of a personal or family medical emergency, and the stress of managing chronic medical problems. The appeals process is burdensome to people struggling with illness. When patients do not contest insurance denials, they can incur hefty out-of-pocket costs they cannot afford.

I strongly support SB776, which would create a workgroup to study the problem of claim and care denials, the appeals process, geographic accessibility, and the adequacy of restrictive provider networks, and come up with meaningful solutions.

This workgroup could be more productive with more input from patients. The bill currently calls for 3 representatives from the insurance industry, but only one representative from a patient advocacy organization.

The bill should be amended to include at least three representatives from patient advocacy organizations, one of which is actively working on insurance denials on behalf of patients, and two of which represent underserved communities.

I respectfully urge this committee to return a favorable report.

Sincerely,
Jacqueline MacMillan
3811 Canterbury Road
Baltimore, MD 20218

HB0995 crossfile FWA - Workgroup to Study the Rise

Uploaded by: Richard KAP Kaplowitz

Position: FWA

HB0995_RichardKaplowitz_FWA

03/19/2025

Richard Keith Kaplowitz
Frederick, MD 21703

**TESTIMONY ON CROSSOVER BILL HB#/0995 - POSITION: FAVORABLE WITH
NEW AMENDMENTS**

**Workgroup to Study the Rise in Adverse Decisions in the State Health Care System –
Establishment**

TO: Chair Beidle, Vice Chair Hayes and members of the Finance Committee
FROM: Richard Keith Kaplowitz

My name is Richard Keith Kaplowitz. I am a resident of District 3, Frederick County. I am submitting this testimony in support with 2 added amendments of crossover bill HB#0995, Workgroup to Study the Rise in Adverse Decisions in the State Health Care System – Establishment

This bill is the cross-filed bill HB0995 passed unanimously 2/27/25 and referred to your committee. The SB0776 bill passed the Senate on 3/12/25 unanimously. I would like you to add two amendments and then reconcile them in committee for passage again in the Senate and the House.

I would add as an amendment a requirement that the Work Group holds at least one or two public meetings to solicit input about people's lived experiences. This mandated public meeting must be actively promoted with the public, held on a weekend or weekday evening, and facilitated by MIA or HEAU.

The second amendment I would offer would ensure the workgroup include groups in the coalition working on this issue, such as Progressive Maryland, to be added to the workgroup to offer their inputs on issues before the group.

I respectfully urge this committee to return a favorable report with two new amendments on crossover bill HB0995.

HB 995 - FIN - HSCRC - LOSA.pdf

Uploaded by: State of Maryland (MD)

Position: FWA



March 14, 2025

The Honorable Pamela Beidle
Chair, Senate Finance Committee
3 East Miller Senate Office Building
Annapolis, Maryland 21401

RE: House Bill 995- Workgroup to Study the Rise in Adverse Decisions in the State Health Care System – Establishment – Letter of Support As Amended

Dear Chair Beidle and Committee Members:

The Health Services Cost Review Commission (HSCRC) respectfully submits this Letter of Support on House Bill 995, "Workgroup to Study the Rise in Adverse Decisions in the State Health Care System - Establishment," as amended.

HB 995 will establish a workgroup consisting of legislators, key government agencies and stakeholders to study adverse decision reporting requirements for all health payers in Maryland, and to make recommendations to improve State reporting on adverse decisions. The workgroup analysis will provide needed transparency into adverse decision making data, allowing a better understanding of recent patterns and trends including the frequency of claim denials, and populations or conditions that may be more vulnerable to adverse decisions. This information will in turn empower policymakers with critical information to develop data-driven policy improvements focused on reducing unnecessary denials and appeals, lowering administrative burdens for both insurers and healthcare providers, and strengthening Maryland's health care system. HSCRC supports HB 995 as a valuable step toward improving healthcare access, fairness, and efficiency in Maryland.

If you have any questions or if I may provide you with any further information, please do not hesitate to contact me at 410-991-7422 or deborah.rivkin@maryland.gov, or Jon Kromm, Executive Director, at jon.kromm@maryland.gov.

Sincerely,

A handwritten signature in black ink that reads "Deborah Rivkin". The signature is written in a cursive style.

Deborah Rivkin
Director, Government Affairs

Joshua Sharfstein, MD
Chairman

Joseph Antos, PhD
Vice-Chairman

James N. Elliott, MD

Ricardo R. Johnson

Maulik Joshi, DrPH

Adam Kane, Esq

Nicki McCann, JD

Jonathan Kromm, PhD *****
Executive Director

William Henderson
Director
Medical Economics & Data Analytics

Allan Pack
Director
Population-Based Methodologies

Gerard J. Schmith
Director
Revenue & Regulation Compliance

Claudine Williams
Director
Healthcare Data Management & Integrity

HB-995–Testimony-YDelph.pdf

Uploaded by: Yvette Delph

Position: FWA

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

Position: FAVORABLE WITH AMENDMENTS

To: Senate Finance Committee

Hearing Date: Wednesday, March 19, 2025

Dear Chair Beidle and Members of the Committee,

I applaud your efforts to enact SB 776 to establish a Workgroup to Study the Rise in Adverse Decisions in the State Health Care System and report its findings and recommendations to the legislature by December 1, 2025. I hereby respectfully request that you support HB 995.

As this Committee is aware and Marylanders are experiencing, health insurance companies are delaying and denying coverage for necessary care prescribed by licensed healthcare providers. It is completely unacceptable that these insurance carriers are reaping rapacious profits while deciding who gets care and who does not. It is way past time that these egregious practices are stopped, and the health of Marylanders is prioritized!

HB 995 currently proposes that the Workgroup includes three (3) representatives from the health insurance industry. As the parties who suffer the harms inflicted by delays and denials of coverage meted out by these health insurance carriers, patients should also have **at least** three (3) representatives. To compose the Workgroup with fewer patient representatives would all but ignore our experiences and voices.

It is essential that people in communities with high rates of denials, including those with complex medical needs, disabilities and who require expensive medications and treatments, are fully represented. Therefore, I propose that SECTION 1.(b) (9) (viii) be amended to read as follows:

(viii) no fewer than three representatives of patient advocacy organizations, including two who represent communities with high rates of denials, such as those with complex medical needs, disabilities, or who require expensive medications and treatments.

I also urge the Committee to exercise complete transparency by requiring that the entire report of the Workgroup's findings and recommendations be fully publicized using a variety of media (e.g., in-person, virtual, radio, television, social, and other electronic media).

I respectfully urge this Committee to fully support House Bill 995—with my proposed amendment to ensure that the voices of Marylanders are adequately represented, as well as my suggestion for complete public disclosure of the Workgroup's report.

Sincerely,
Yvette Delph, MBBS, DA
14907 Running Ridge Lane
Silver Spring, MD 20906