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March 18, 2025

TO: The Honorable, Joseline A. Peña-Melnyk, Chair
Health and Government Operations Committee

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

RE: Senate Bill 474 - Health Insurance - Adverse Decisions –
Reporting and Examinations – **SUPPORT**

For all the reasons articulated in our Letter of Support for House Bill 848, the cross-file of this bill, the Health Education and Advocacy Unit (HEAU) supports Senate Bill 474. We offer one area of concern introduced by Amendments to House Bill 848, beginning on page 7, line 27, requiring private review agents to respond to emails or voicemails within 2 business days, because it appears to conflict with the already required 24x7 accessibility requirement contained in Insurance § 15-10B-05(a)(4). The HEAU does not view responses within two business days as 24x7 accessibility. More importantly, a two-business day turn around cannot apply to 15-10B-05(a)(5), which requires that private review agents must be available to make emergency inpatient or residential crisis admission authorizations within 2 hours of receipt, and other requirements for more time sensitive decisions. Should the Committee consider these same amendments to Senate Bill 474, we offer Amendment No. 1 to address this concern.

Apart from the apparent internal conflict with the current 24x7 requirement, 24x7 accessibility should not be defined as having an email repository or voicemail box with a two-to-four-calendar-day response time, especially if telephone responses are made during traditional business hours. As part of their [Care Over Cost Campaign](#), Progressive Maryland engaged in a door knocking campaign in four legislative districts, spoke with members and partners, hosted and/or attended community events, and heard many stories about people who were denied coverage by their insurance carriers and struggled to understand their rights to appeal the denials and/or found the process daunting, time consuming, and a barrier to care.

These consumers reported that they need to be able to reach their insurers during evening hours and on the weekends. The general business hours of the carriers' call centers, with long wait times and multiple repeat calls, are not helpful to consumers who work in jobs that do not allow for personal calls or who have limited flexibility in their schedule. It is not helpful to consumers who need access outside of traditional working hours to require them to email or leave a message and then wait two business days to have concerns about carrier denials addressed, or to receive return calls at times they cannot accept them. Accordingly, should the Committee consider these same amendments to Senate Bill 474, we offer Amendments Nos. 2 and 3 to require longer call center hours and return calls at times convenient for consumers.

We fully support the Amendment that requires the contact information to be prominently displayed on the notices required under § 15-10A-02(F) and (I).

cc: The Honorable Pamela Beidle, Chair

HEAU Amendments to House Bill 848 Amendments if Considered for Senate Bill 474

Amendment No. 1

On page 8, in line 4 before “RESPOND” insert “EXCEPT AS OTHERWISE REQUIRED IN THIS SUBTITLE”

Amendment No. 2

On page 8, in line 2 after “NUMBER” insert “THAT IS ADEQUATELY STAFFED AT LEAST FROM 6 AM TO MIDNIGHT, 7 DAYS A WEEK”,

Amendment No. 3

On page 8, in line 4, after “VOICEMAILS” insert “AT A TIME CONVENIENT TO THE PATIENT OR PROVIDER”