



**Bill Title:** SB 776 - Workgroup to Study the Rise in Adverse Decisions in the State Health Care System - Establishment

**Position:** SUPPORT (FAV with Amendments)

**To:** House Health and Government Operations Committee

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

**Date:** March 20, 2025

Dear Chair Pena-Melnyk and Members of the Committee,

As this Committee and the public knows very well, 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 organize the public 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, just as you do, 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 to the composition of the Group and the plan for issuing its final report.

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



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We respectfully propose an amendment that could make this an even 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.*

Thank you very much for your consideration. We appreciate how much thought and attention you, Madam Chair, and the Committee are giving to the urgent need for health insurance reform, as evidenced by this bill and the other legislation that will benefit all the folks who are struggling with care and claim delays and denials.