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TESTIMONY IN FAVOR WITH AMENDMENT OF HOUSE BILL 297

Maryland Health Benefit Exchange - State-Based Young Adult Health Insurance Subsidies Pilot Program - Sunset Repeal

Before the House Health and Government Operations Committee

January 30, 2025

Chair Peña-Melnyk, Vice Chair Cullison, and Members of the House Health and Government Operations Committee, thank you for this opportunity to testify in favor of House Bill 297 which, with Delegate Kerr's proposed amendment to match the language of SB 5, would remove the sunset on the State-Based Young Adult Health Insurance Subsidies Program contingent on sufficient funds available from Maryland's insurer assessment. Special thank you to Delegate Kerr for sponsoring this legislation.

Years ago Medicaid covered my health insurance, and I had no worries about paying for medications, visits to my primary care provider, and my therapy sessions every two weeks. When I got a job as contact tracer II, the Baltimore County Department of Health did not provide me with health insurance. I was worried about how I would pay for my medications and therapy sessions because my coverage through Medicaid was set to expire. I went to the Maryland Health Connection website to see my options. This was prior to the start of the Young Adult Health Insurance Subsidies Program. At that time, the available subsidies were not enough to make health coverage affordable; either the premium was too high, or the deductible was too high. For many of the health plans, the premium was higher than my rent. I was in a position of having to choose either my health care or my rent. Thankfully, I was able to find a new position which offered health coverage before my Medicaid coverage ended, but not all Marylanders my age are fortunate enough to have employer-sponsored coverage. Young adults aged 18-34 make up the largest uninsured age group in Maryland.

That is why I was so glad that Maryland started a state subsidies program to make health coverage affordable for young adults. This program has been very successful. According to Maryland Health Benefit Exchange (MHBE) since the start of the program young adult enrollment increased much faster than enrollment as a whole (46% vs. 30%), and is benefitting over 64,000 people for health plan year 2025. Young adults now make up 36% of total enrollment, helping stabilize market premiums for all age groups by bringing more healthy people into the risk pool. If young adults lose these subsidies and cannot afford health insurance, then their health problems will increase in the future. If Maryland wants to continue to set an example for other states on how to help residents access affordable health coverage, then I urge the Committee to give a favorable report HB 297 with Delegate Kerr's amendment.