

Department of Legislative Services  
Maryland General Assembly  
2024 Session

FISCAL AND POLICY NOTE  
First Reader

House Bill 1137 (Delegate Woods, *et al.*)  
Health and Government Operations

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Maryland Medical Assistance Program and Health Insurance - Required  
Coverage for Calcium Score Testing

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This bill requires an insurer, a nonprofit health service plan, and a health maintenance organization (collectively known as carriers), as well as the Maryland Medicaid program, to cover calcium score testing for individuals who have at least three of the following four risk factors: diabetes; high blood pressure; high cholesterol; or a family history of premature coronary artery disease. **The bill takes effect January 1, 2025, and applies to all policies, contracts, and health benefit plans issued, delivered, or renewed in the State on or after that date.**

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Fiscal Summary

**State Effect:** Minimal special fund revenue increase for the Maryland Insurance Administration in FY 2025 only from the \$125 rate and form filing fee; review of additional filings can be handled with existing budgeted resources. To the extent the bill increases the number of Medicaid participants that receive calcium score testing, Medicaid expenditures (50% general funds, 50% federal funds) may increase; however, any impact is likely minimal as this service is already covered. No effect on the State Employee and Retiree Health and Welfare Benefits Program as the program already provides coverage as required under the bill.

**Local Effect:** To the extent the bill increases the cost of health insurance, costs may increase for local governments that purchase fully insured plans. Revenues are not affected.

**Small Business Effect:** None.

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## Analysis

**Current Law:** Under Maryland law, there are more than 50 mandated health insurance benefits that certain carriers must provide to their enrollees. The federal Patient Protection and Affordable Care Act (ACA) requires nongrandfathered health plans to cover 10 essential health benefits (EHBs), which include items and services in the following categories: (1) ambulatory patient services; (2) emergency services; (3) hospitalization; (4) maternity and newborn care; (5) mental health and substance use disorder services, including behavioral health treatment; (6) prescription drugs; (7) rehabilitative and habilitative services and devices; (8) laboratory services; (9) preventive and wellness services and chronic disease management; and (10) pediatric services.

Under § 31-116 of the Insurance Article, EHBs must be included in the State benchmark plan and, notwithstanding any other benefits mandated by State law, must be the benefits required in (1) all individual health benefit plans and health benefit plans offered to small employers (except for grandfathered health plans) offered outside the Maryland Health Benefit Exchange (MHBE) and (2) all qualified health plans offered in MHBE.

Medicaid generally provides health coverage to children, pregnant women, elderly or disabled individuals, low-income parents, and childless adults. To qualify for Medicaid, applicants must pass certain income and asset tests. Effective January 1, 2014, Medicaid coverage was expanded to persons with household incomes up to 138% of federal poverty guidelines, as authorized under ACA.

**State Fiscal Effect:** Medicaid currently covers calcium score testing. In calendar 2023, 81,924 Medicaid participants had diabetes, high blood pressure, and high cholesterol, while 206,820 participants had two or more of these risk factors. Information on family history of premature coronary artery disease is not available for these participants. Of the Medicaid participants with two or more risk factors, 432 participants received a cardiac computed tomography (CT) test for calcium scoring.

To the extent the bill increases the number of individuals receiving calcium score testing, Medicaid costs (50% general funds, 50% federal funds) may increase. However, any impact is likely to be minimal as this service is already covered.

**Additional Comments:** A [coronary artery calcium test](#) is a CT scan of the heart that shows any calcium deposits in the coronary arteries (“calcium score”). Higher amounts of calcium are associated with more severe artery disease. The calcium score may help predict the risk of a future heart attack and help determine risk for cardiovascular disease.

The 2018 American College of Cardiology/American Heart Association cholesterol guidelines recommend the selective use of calcium score testing in primary prevention to

aid in the decision-making process regarding prescription statin therapy when there is uncertainty on the part of the clinician or patient.

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### **Additional Information**

**Recent Prior Introductions:** Similar legislation has not been introduced within the last three years.

**Designated Cross File:** None.

**Information Source(s):** American Heart Association; Department of Budget and Management; Maryland Department of Health; Maryland Health Benefit Exchange; Maryland Insurance Administration; Department of Legislative Services

**Fiscal Note History:** First Reader - March 7, 2024  
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