

# HOUSE BILL 718

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By: **Delegates Rosenberg and Pena–Melnik**  
Introduced and read first time: January 27, 2025  
Assigned to: Health and Government Operations

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## A BILL ENTITLED

1 AN ACT concerning

2 **Maryland Health Insurance Coverage Protection Commission – Established**

3 FOR the purpose of establishing the Maryland Health Insurance Coverage Protection  
4 Commission to monitor and assess the impact of potential and actual federal changes  
5 to specified health care programs and to provide recommendations for State and local  
6 action to protect the access of residents of the State to affordable health coverage;  
7 and generally relating to the Maryland Health Insurance Coverage Protection  
8 Commission.

9 Preamble

10 WHEREAS, The federal Patient Protection and Affordable Care Act (ACA) has  
11 enabled more than 600,000 Maryland residents to gain access to quality and affordable  
12 health insurance coverage since its implementation, with the State's uninsured rate  
13 dropping from approximately 11% in 2010 to approximately 6% in 2024; and

14 WHEREAS, Approximately 6% of Maryland residents remain uninsured, with  
15 disparities in coverage rates particularly affecting communities of color and low-income  
16 households; and

17 WHEREAS, Changes to the ACA, Medicaid, or Medicare could significantly impact  
18 health care access and affordability for Maryland residents; and

19 WHEREAS, It is estimated that a repeal of the ACA may result in over 30 million  
20 individuals becoming uninsured in the United States; and

21 WHEREAS, In Maryland, more than 600,000 people may become uninsured in the  
22 aftermath of a repeal of the ACA; and

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EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 WHEREAS, Millions of American seniors, including thousands of Maryland seniors,  
2 could incur substantially higher health care costs following a repeal or weakening of the  
3 ACA or Medicare; and

4 WHEREAS, Recent federal policy changes and market dynamics have created  
5 uncertainty in the health care landscape, potentially affecting the stability of Maryland's  
6 insurance markets and health care delivery systems; and

7 WHEREAS, The COVID-19 pandemic highlighted the critical importance of  
8 maintaining robust health care infrastructure and ensuring widespread access to  
9 affordable health coverage; and

10 WHEREAS, It is prudent for Maryland to monitor and mitigate these negative  
11 effects of a repeal or weakening of the ACA, Medicaid, or Medicare and to protect public  
12 health by recommending and implementing solutions in the event of a broad-scale loss of  
13 health coverage; now, therefore,

14 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,  
15 That:

16 (a) In this section, "ACA" means the federal Patient Protection and Affordable  
17 Care Act.

18 (b) There is a Maryland Health Insurance Coverage Protection Commission.

19 (c) The Commission consists of the following members:

20 (1) three members of the Senate of Maryland, appointed by the President  
21 of the Senate;

22 (2) three members of the House of Delegates, appointed by the Speaker of  
23 the House;

24 (3) the Secretary of Health and Mental Hygiene, or the Secretary's  
25 designee;

26 (4) the Maryland Insurance Commissioner, or the Commissioner's  
27 designee;

28 (5) the Attorney General, or the Attorney General's designee; and

29 (6) the following members:

30 (i) one representative of the Maryland Hospital Association,  
31 designated by the President of the Association;

1 (ii) one representative of a managed care organization, appointed  
2 jointly by the President of the Senate and the Speaker of the House;

3 (iii) one consumer of health care services, appointed jointly by the  
4 President of the Senate and the Speaker of the House;

5 (iv) one representative of a health insurance carrier, appointed  
6 jointly by the President of the Senate and the Speaker of the House;

7 (v) one representative who is an employer, appointed by the  
8 Governor;

9 (vi) one representative of the nursing home industry, appointed by  
10 the Governor;

11 (vii) one representative of MedChi, designated by the Chief Executive  
12 Officer of MedChi;

13 (viii) one representative of behavioral health providers, appointed  
14 jointly by the President of the Senate and the Speaker of the House;

15 (ix) two members of the public:

16 1. one of whom shall be appointed jointly by the President of  
17 the Senate and the Speaker of the House; and

18 2. one of whom shall be appointed by the Governor;

19 (x) one representative of a group model health maintenance  
20 organization that participates in the individual market, appointed by the Governor; and

21 (xi) one representative of the League of Life and Health Insurers of  
22 Maryland, designated by the President of the League.

23 (d) The President of the Senate and the Speaker of the House shall designate a  
24 member who is a Senator and a member who is a Delegate, respectively, to serve as cochairs  
25 of the Commission.

26 (e) The Department of Legislative Services, the Maryland Department of Health,  
27 and the Maryland Insurance Administration jointly shall provide staff for the Commission.

28 (f) A member of the Commission:

29 (1) may not receive compensation as a member of the Commission; but

30 (2) is entitled to reimbursement for expenses under the Standard State  
31 Travel Regulations, as provided in the State budget.

1 (g) (1) The Commission shall:

2 (i) monitor potential and actual federal changes to the ACA,  
3 Medicaid, the Maryland Children's Health Program, Medicare, and the Maryland  
4 All-Payer Model;

5 (ii) assess the impact of potential and actual federal changes to the  
6 ACA, Medicaid, the Maryland Children's Health Program, Medicare, and the Maryland  
7 All-Payer Model; and

8 (iii) provide recommendations for State and local action to protect  
9 access of residents of the State to affordable health coverage.

10 (2) The duties of the Commission include:

11 (i) assessing the current and potential adverse effects of the loss of  
12 health coverage on the residents, public health, and economy of the State resulting from  
13 changes to the ACA, Medicaid, the Maryland Children's Health Program, Medicare, or the  
14 Maryland All-Payer Model;

15 (ii) estimating the costs to the State and State residents of adverse  
16 effects from potential and actual changes to the ACA, Medicaid, the Maryland Children's  
17 Health Program, Medicare, or the Maryland All-Payer Model and the resulting loss of  
18 health coverage;

19 (iii) examining measures that may prevent or mitigate the adverse  
20 effects of potential and actual changes to the ACA, Medicaid, the Maryland Children's  
21 Health Program, Medicare, or the Maryland All-Payer Model and the resulting loss of  
22 health coverage on the residents, public health, and economy of the State;

23 (iv) making recommendations for laws that:

24 1. may be warranted to minimize the adverse effects  
25 associated with potential and actual changes to the ACA, Medicaid, the Maryland  
26 Children's Health Program, Medicare, or the Maryland All-Payer Model; and

27 2. will assist residents in obtaining and maintaining  
28 affordable health coverage; and

29 (v) identifying potential funding sources for recommended laws, as  
30 necessary.

31 (h) The Commission may:

32 (1) hold public meetings across the State to carry out the duties of the  
33 Commission; and

1           (2)     convene workgroups to solicit input from stakeholders.

2           (i)     On or before December 31 each year, the Commission shall submit a report on  
3 its findings and recommendations, including any legislative proposals, to the Governor and,  
4 in accordance with § 2–1257 of the State Government Article, the General Assembly.

5           SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect June  
6 1, 2025. It shall remain effective for a period of 4 years and 1 month and, at the end of June  
7 30, 2029, with no further action required by the General Assembly, shall be abrogated and  
8 of no further force and effect.