ACNM_FAV_ SB 183 Uploaded by: Elliott, Robyn



Committee: Senate Finance Committee

Bill Number: SB 183

Title: Health Insurance – Health Benefit Plans – Special Enrollment Period for

Pregnancy

Date: February 12, 2020

Position: Support

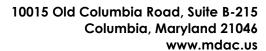
The Maryland Affiliate of the American College of Nurse Midwives (ACNM) supports Senate Bill 183 – Health Insurance – Health Benefit Plans – Special Enrollment Period for Pregnancy. The bill changes the way that individuals verify that they are pregnant when applying for insurance coverage in a special enrollment period. Instead of submitting a form from a health care practitioner, the individual will attest to being pregnant.

The requirement to verify pregnancy will delay enrollment in coverage for pregnant individuals. By replacing that requirement with an attestation requirement, it will reduce delays in coverage and gaps in prenatal care. Insurers still have the ability to determine if someone is pregnant through claims data.

ACNM supported the original legislation to create the special enrollment period for pregnant individuals. We think this legislation is an important follow-up measure to make this program more implementable.

Thank you for your consideration of our testimony, and we urge a favorable vote. If we can provide any further information, please contact Robyn Elliott at relliott@policypartners.net or (443) 926-3443.

MDAC_FAV_SB 183 Uploaded by: Elliott, Robyn





To: Senate Finance Committee

Bill: SB 183 - Health Insurance - Health Benefit Plans - Special Enrollment Period for

Pregnancy

Date: February 12, 2020

Position: Support

The Maryland Dental Action Committee supports Senate Bill 183 – Health Insurance – Health Benefit Plans – Special Enrollment Period for Pregnancy. The bill would remove a barrier for pregnant women enrolling in an Exchange Plan after open enrollment. The rules are cumbersome and difficult for the Maryland Health Benefit Exchange to administer. Pregnant women must submit paperwork from health care providers verifying that they are pregnant. The bill proposes streamlining the process by allowing women to attest to being pregnant.

MDAC supports this legislation because it will make it easier and faster for pregnant women to get coverage for prenatal care and other needed health care services, including dental. If pregnant women must wait for paperwork from their health care providers, it will delay coverage, possibly resulting in gaps in their health care services.

The special enrollment program is an important tool to connect pregnant women to health insurance. We need to make sure that the program works well. We ask for a favorable vote on this legislation. Please contact Robyn Elliott at relliott@policypartners.net or (443) 926-3443 if we can provide any further information.

MNA_FAV_SB 183 Uploaded by: Elliott, Robyn



Committee: Senate Finance Committee

Bill Number: SB 183

Title: Health Insurance – Health Benefit Plans – Special Enrollment Period for

Pregnancy

Hearing Date: February 12, 2020

Position: Support

The Maryland Nurses Association (MNA) supports Senate Bill 183 – Health Insurance – Health Benefit Plans – Special Enrollment Period for Pregnancy. The bill would remove a barrier to enrollment by allowing a pregnant woman to attest to her pregnancy rather than submit paperwork from her provider. MNA supported the legislation last year that established the special enrollment period for pregnancy.

While health insurance alone does not guarantee a health outcome for both mother and newborn, it is essential to ensuring that they have consistent and affordable access to the broad range of services that they need. Therefore, we should take every step possible to ensure that pregnant women have health insurance coverage in Maryland.

Maryland continues to have maternal mortality rates higher than the rest of the country. In the five year period spanning 2011 and 2015, Maryland had a rate of 11.4 maternal deaths per 100,000 births. The rates are far worse for women of color. In Maryland, black moms die due to pregnancy 2.7 times more than white moms.¹

This legislation will eliminate delays in pregnant women being able to enroll under a special enrollment period. This is beneficial because:

- Women are more likely to be able to access prenatal care in a timely manner. Uninsured
 women may have to wait to access services as there are only a limited number of safety net
 providers. Early prenatal care is essential to ensuring positive birth outcomes; and
- Women will have coverage for services that are essential to keeping them healthy. For example, women may develop gestational diabetes. Without insurance coverage, women may have trouble accessing health care services.

Thank you for your consideration of our testimony, and we urge a favorable vote. If we can provide any further information, please contact Robyn Elliott at relliott@policypartners.net or (443) 926-3443.

ⁱ Maryland Maternal Mortality Review, 2016 Annual Report. Maryland Department of Health and Mental Hygiene.

Danna Kauffman_FAV_SB0183Uploaded by: Kauffman, Danna



The Maryland State Medical Society 1211 Cathedral Street Baltimore, MD 21201-5516 410.539.0872 Fax: 410.547.0915 1.800.492.1056 www.medchi.org



MID-ATLANTIC ASSOCIATION OF COMMUNITY HEALTH CENTERS

Serving Maryland and Delaware



TO: The Honorable Delores G. Kelley, Chair

Members, Senate Finance Committee
The Honorable Clarence K. Lam

FROM: Danna L. Kauffman

Pamela Metz Kasemeyer

J. Steven Wise

Richard A. Tabuteau

DATE: February 12, 2020

RE: **SUPPORT** – Senate Bill 183 – *Health Insurance* – *Health Benefit Plans* – *Special Enrollment*

Period for Pregnancy

On behalf of the Maryland State Medical Society, the Maryland Chapter of the American Academy of Pediatrics, the Mid-Atlantic Association of Community Health Centers, and the Maryland Section of the American College of Obstetricians and Gynecologists, we submit this letter of support for Senate Bill 183.

During the 2019 Session, the General Assembly passed Senate Bill 36, requiring both small employer and individual health benefit plans to provide a special enrollment period for a woman who becomes pregnant. The above-named organizations supported this bill as a simple, straightforward, and effective means to ensure that health care coverage is available for pregnant women, thereby reducing the risk for poor maternal and fetal outcomes during pregnancy. It also increases the likelihood of a positive birth outcome and a healthy newborn.

Senate Bill 183 simply removes the requirement that a health care practitioner must confirm the pregnancy and instead allows the woman to self-attest to the pregnancy. We believe that this is a common-sense approach to expedite enrollment and remove the administrative burden on the health care practitioner. We urge a favorable vote.

For more information call:

Danna L. Kauffman Pamela Metz Kasemeyer J. Steven Wise Richard A. Tabuteau 410-244-7000

MFN_FAV_SB 183 Uploaded by: Morrow, Beth



Testimony Concerning SB 183 "Health Insurance - Health Benefit Plans - Special Enrollment Period for Pregnancy" Submitted to the Senate Finance Committee February 12, 2020

Position: Support

Maryland Family Network (MFN) supports SB 183, which would remove the requirement that a health care practitioner confirm a pregnancy before a pregnant woman could enroll in a health benefit plan. This legislation would promote prenatal care among women who are currently uninsured, leading to more positive birth outcomes and, in all likelihood, cost savings to the State's health system.

MFN has worked since 1945 to improve the availability and quality of child care and other supports for children and families in Maryland. As the largest and oldest statewide child advocacy organization in Maryland, MFN is strongly committed to ensuring the health and well-being of children across our state.

The onset of pregnancy brings an array of health needs and potential challenges, and access to prenatal care is a critical component of maternal and child health. Conversely, a lack of adequate prenatal care can lead to a host of negative and costly outcomes, both for individuals and for society as a whole.

To ensure healthy pregnancies and healthy babies, MFN urges your favorable consideration of SB 183.





HEAU_FAV_SB0183Uploaded by: O'Connor, Patricia

BRIAN E. FROSH Attorney General

ELIZABETH F. HARRIS
Chief Deputy Attorney General

CAROLYN QUATTROCKI
Deputy Attorney General

Writer's Direct Fax No. (410) 576-6571

Writer's Direct Email: poconnor@oag.state.md.us



WILLIAM D. GRUHN Chief Consumer Protection Division

STATE OF MARYLAND OFFICE OF THE ATTORNEY GENERAL CONSUMER PROTECTION DIVISION

Writer's Direct Dial No. (410) 576-6515

February 12, 2020

To: The Honorable Delores G. Kelley

Chair, Finance Committee

From: Patricia F. O'Connor, Health Education and Advocacy Unit

Re: Senate Bill 183 (Health Insurance - Health Benefit Plans - Special Enrollment Period for

Pregnancy): Support

The Office of the Attorney General's Health Education and Advocacy Unit (HEAU) supports Senate Bill 183 because it simplifies eligibility requirements and administrative processes related to the Special Enrollment Period (SEP) created last session for pregnant women. Currently, small employer and individual health benefit plans must provide a pregnancy SEP of 90 days, dating from the first day of the month in which a provider confirms the pregnancy. This bill would remove the provider confirmation requirement and replace it with patient attestation of pregnancy. Of note, the Maryland Health Benefit Exchange has determined that storing provider confirmations of pregnancy would require significant expenditures and approximately one year to make necessary changes to its systems. Allowing patient attestation instead of provider confirmation would save the Exchange money and time without unduly increasing the risk of fraud (attestation is currently the process for Medicaid enrollment based on pregnancy). The HEAU also supports the goal of easing consumer access to the pregnancy SEP.

For these reasons, we ask for a favorable report by the Committee.

cc: Members of the Finance Committee

200 Saint Paul Place ♦ Baltimore, Maryland, 21202-2021

LAM_FAV_SB0183Uploaded by: Senator Lam, Senator Lam

CLARENCE K. LAM, M.D., M.P.H.

Legislative District 12
Baltimore and Howard Counties

Education, Health, and Environmental Affairs Committee

Executive Nominations Committee

Joint Committee on Ending Homelessness

Chair

Joint Committee on Fair Practices and

State Personnel Oversight

Chair Howard County Senate Delegation



Miller Senate Office Building 11 Bladen Street, Room 420 Annapolis, Maryland 21401 410-841-3653 · 301-858-3653 800-492-7122 Ext. 3653 Clarence.Lam@senate.state.md.us

Support SB 183: Health Insurance - Health Benefit Plans - Special Enrollment Period for Pregnancy

Background:

• Last session, the General Assembly unanimously passed SB36/HB127 to create an insurance special enrollment period for when a person becomes pregnant

The Issue:

- SB 36 included provisions that have made it difficult for the Maryland Health Benefit Exchange (MHBE) to implement the requirements and put extra burdens on enrollees:
 - o SB 36 required a pregnant person to have their pregnancy confirmed by a healthcare provider requires MHBE and insurers to deal with needless confirmation documentation
 - o SB 36 required all insurance to be backdated to when the pregnancy was confirmed doesn't make sense for pregnant people who would like to start coverage prospectively

What SB 183 Does:

- Replaces pregnancy confirmation requirement with a requirement that enrollee must attest that they are pregnant
- Allows the enrollee to choose the start date of their insurance between: 1. the first day of the month in which the individual applies or 2. the first day of the month in which the individual was confirmed pregnant

Why is SB 183 Needed?

• Ensure that SB 183 is adequately implemented in order to provide all pregnant individuals with insurance for needed prenatal care

Additional information:

• In 2016, it was estimated that 8.1% of women of childbearing age in Maryland did not have health insurance and in 2014, 14% of births in Maryland were known to have no insurance.

MHA_FAV_SB183
Uploaded by: Witten, Jennifer



February 12, 2020

To: The Honorable Delores G. Kelley, Chairman Senate Finance Committee

From: Jennifer Witten, Vice President, Government Affairs Maryland Hospital Association

Re: Letter of Support- Senate Bill 183- Health Insurance Health Benefits Plans- Special Enrollment Period for Pregnancy

Dear Chairman Kelley:

On behalf of the Maryland Hospital Association's (MHA) 61 member hospitals and health systems, we appreciate the opportunity to comment on Senate Bill 183. Maryland's hospitals care for millions of people each year, treating 2.3 million in emergency departments and delivering more than 67,000 babies.

Health care coverage is vital to the success of efforts to transform care delivery and advance health care for Marylanders. MHA is a leading voice to ensure broad-based insurance coverage, and nothing could be more important than ensuring coverage for an expectant mother.

The U.S. National Library of Medicine, part of the National Institutes of Health, released <u>data</u> in 2012 showing a lack of prenatal care leads to higher infant mortality rates. Researchers studied 32,206,417 births over eight years. The 11.2% of expectant mothers who received late or no prenatal care were more likely to be African American and Hispanic, younger than 20 and lack a high-school education. Those who received inadequate prenatal care were more likely to have maternal health risks and, sadly, higher rates of mortality.

MHA is committed to improving maternal mortality rates in Maryland—particularly among women of color. While insurance coverage alone does not guarantee improved health for moms and newborns, it is essential to provide consistent and affordable access to the broad range of services they need. This bill advances that access to important care for pregnant women by allowing a pregnant woman to access insurance coverage outside of open enrollment. This step lifts a barrier for expectant moms to receive necessary prenatal care—improving their health and the health of their babies.

For these reasons, we urge a *favorable* report.

For more information, please contact: Jennifer Witten Jwitten@mhaonline.org

i https://www.ncbi.nlm.nih.gov/pubmed/22836820

LATE - KaierPermanente_UNF_SB183Uploaded by: Taylor, Allison

Position: UNF



Mid-Atlantic Permanente Medical Group, P.C. Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc 2101 East Jefferson Street Rockville, Maryland 20852

February 12, 2020

The Honorable Delores G. Kelley Senate Finance Committee 3 East, Miller Senate Office Building 11 Bladen Street Annapolis, Maryland 21401

RE: SB 183 – Oppose

Dear Chair Kelley and Members of the Committee:

Kaiser Permanente appreciates the opportunity to comment on SB 183, Health Insurance - Health Benefit Plans - Special Enrollment Period for Pregnancy. KP respectfully opposes SB 183 for the reasons described below.

Kaiser Permanente is the largest private integrated health care delivery system in the United States, delivering health care to over 12 million members in eight states and the District of Columbia. Kaiser Permanente of the Mid-Atlantic States, which operates in Maryland, provides and coordinates complete health care services for approximately 755,000 members. In Maryland, we deliver care to over 430,000 members.

SB 183 concerns Maryland's special enrollment period for pregnancy in the individual and small group markets. It permits an eligible employee or individual to purchase coverage, if the employee or individual attests to being pregnant. It removes a requirement that the pregnancy be confirmed by a health care practitioner and that the 90-day enrollment period begin on the date of that confirmation.

Kaiser Permanente remains concerned that Maryland's special enrollment period for pregnancy will have a destabilizing effect on the individual and small group markets and drive up costs. Rather than encouraging broad participation during the open enrollment period, special enrollment periods for pregnancy allow individuals to enroll in a plan anytime during pregnancy and receive comprehensive medical benefits. These policies destabilize the risk pool by allowing individuals to enroll in a health plan when they need significant medical care and hospitalization, undermining critical policies that support market stability and leading to increased premiums.

¹ Kaiser Permanente comprises Kaiser Foundation Health Plan, Inc., the nation's largest not-for-profit health plan, and its health plan subsidiaries outside California and Hawaii; the not-for-profit Kaiser Foundation Hospitals, which operates 39 hospitals and over 650 other clinical facilities; and the Permanente Medical Groups, self-governed physician group practices that exclusively contract with Kaiser Foundation Health Plan and its health plan subsidiaries to meet the health needs of Kaiser Permanente's members.

Kaiser Permanente Comments on Senate Bill 183 February 12, 2020

SB 183 eliminates an important operational safeguard in Maryland's special enrollment period for pregnancy – confirmation of the pregnancy by a health care practitioner. In most situations that trigger a special enrollment period, we require documentation of the triggering event (e.g., documents that confirm a marriage, adoption or move). An individual's attestation does not provide the same kind of protection against fraud as traditional documentation. Additionally, SB 183 essentially eliminates the limited duration that we think is required of a special enrollment period. An individual's 90-day open enrollment period begins not upon a triggering event, but upon the date the individual attests to an event. This policy change exacerbates the likelihood of premium increases to account for the risks being presented.

Affordable Care Act policies support a stable risk pool. These include a robust open enrollment period designed to provide a period of open access into any health plan of an individual's choice, while protecting against individuals waiting to enroll when they need expensive health care services. Special enrollment periods were designed to allow individuals to enroll outside of this annual open enrollment period, but only for narrow, qualifying events in a person's life, and with key safeguards in place. Kaiser Permanente is concerned that SB 183, by removing these safeguards, will further destabilize the market and provide disincentives for individuals to enroll during open enrollment.

Thank you for the opportunity to comment. Please feel free to contact Wayne Wilson at Wayne.D.Wilson@kp.org or (301) 816-5991 with questions.

Sincerely,

Wayne D. Wilson Vice President, Government Programs and External Relations Kaiser Foundation Health Plan of Mid-Atlantic States, Inc.