

STATE OF MARYLAND



Andrew N. Pollak
CHAIR

Ben Steffen
EXECUTIVE DIRECTOR

MARYLAND HEALTH CARE COMMISSION

4160 PATTERSON AVENUE – BALTIMORE, MARYLAND 21215
TELEPHONE: 410-764-3460 FAX: 410-358-1236

February 26, 2020

The Honorable Delores G. Kelley, Chair
Senate Finance Committee
3 East, Miller Senate Office Building
Annapolis, MD 21401

RE: SB 988 – Health Insurance – In Vitro Fertilization - Revisions – LETTER OF INFORMATION

Dear Chair Kelley and Committee Members:

The Maryland Health Care Commission (Commission) is pleased to provide the Senate Finance Committee with information related to Senate Bill 988 (SB 988). SB 988 would expand the current in vitro fertilization (IVF) health insurance mandate¹ to unmarried patients.

In December 2019, the Commission submitted to the General Assembly a final report on the “Study of Mandated Health Insurance Services”, as required under Insurance Article §15-1502, Annotated Code of Maryland. A link to the full [report](#) can be found on the Commission’s website.

In this study, NovaRest, Inc., the Commission’s consulting actuarial firm, analyzed both the full and marginal costs of all current Maryland health insurance mandates which apply to the fully-insured individual, small group, and large group markets, and/or the State employee plan. The report indicates that the full cost of the current IVF mandate as a percentage of premiums is 0.17% in the individual market and 0.19% in the large group market.

The report also included voluntary compliance for covering mandated benefits in Maryland’s self-insured market. According to the analysis in the report, approximately 90 percent of self-insured health plans in Maryland offer an IVF benefit.

¹ Insurance Article § 15-810, Annotated Code of Maryland. Note the current IVF mandate has not been adopted in the small group market, although NovaRest, Inc. estimated the cost of such a mandate in the small group market would be 0.21% of premiums.

Note: The Maryland Health Care Commission is an independent State agency. The position of the Commission may differ from the Maryland Department of Health.

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Since coverage for IVF services is already mandated in Maryland for fully insured plans in the individual market and large group market, the Commission favors parity and believes the benefit should apply to all members of covered health insurance plans, regardless of marital status. However, the Commission strongly believes that although each individual mandate (or expansion of an existing mandate) has a minimal cost impact on insurers (and consumers), it is important to consider that the cumulative impact of health insurance mandates on health care costs can be significant.

I hope you find this information useful. Please feel free to contact me at (410) 764-3566 or Ben.Steffen@maryland.gov, or Megan Renfrew, Government Affairs and Special Projects, at (410) 764-3483 or Megan.Renfrew@maryland.gov if you have any questions.

Sincerely,



Ben Steffen
Executive Director
Maryland Health Care Commission

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