

SB 728 - Access to Care Act.pdf

Uploaded by: Alicia Pereschuk

Position: FAV

Dear Senate Finance Committee,

This testimony is being submitted by Showing Up for Racial Justice Baltimore, a group of individuals working to move white folks as part of a multi-racial movement for equity and racial justice in Baltimore City, Baltimore County, and Howard County. We are also working in collaboration with CASA de Maryland. I am a resident of District 43. **I am testifying in support of Senate Bill 728: the Access to Care Act.**



The Access to Care Act will open the Maryland Health Benefit Exchange (ACA Coverage) to ALL Marylanders who meet the regular ACA eligibility requirements, regardless of their immigration status. The bill would establish a State Subsidy Program to ensure newly-covered individuals have the funding to receive care. Finally, it would require the state to submit a state innovation waiver (under §1332 of the Affordable Care Act) to allow Maryland to make this change to eligibility.

Right now, more than 275,000 undocumented immigrants in Maryland are ineligible for care through the Maryland Health Exchange. Without affordable health insurance, they experience exorbitant, unexpected medical costs. With such high costs, many may forgo treatment for broken ankles, chronic health issues like diabetes, and immediate, life threatening infections like COVID-19. Immigrants in Maryland, many of whom are Black and Latinx residents, become sicker, are hospitalized at higher rates, and die younger as they are forced to face life or death situations due to their exclusion from programs like the Affordable Care Act. As the pandemic continues to surge on, disproportionately impacting immigrant communities, ensuring that all Marylanders have access to care is more urgent than ever.

Our state and communities become stronger and more resilient when we expand health care coverage. Benefits of expanded coverage include:

- Increased access to primary care physicians that results in earlier detection of health problems and more stable long-term management of chronic diseases; this decreases the number of people who die at earlier ages from preventable causes.
- Greater access to primary care clinics and medical practices that results in reduced use of emergency departments (ED); this decreases the number seeking care at EDs and reduces the cost of ED care for all of us.
- Access to care that provides more opportunities for COVID-19 testing and vaccination - a goal shared by both Governor Hogan and the Maryland General Assembly.

Research has shown that the ACA works as intended; a 2017 study found the ACA increased insurance coverage, access to care, and preventative care for its target population.¹ By denying undocumented immigrants access, we are denying them a service shown to improve health.

The immigrant community has worked tirelessly on the frontlines of the pandemic and has paid over \$240 million in federal, state, and local taxes. Our Maryland government must take steps to protect the health and safety of the immigrant community. Many states across the country have established comprehensive programs to extend coverage to immigrants regardless of their immigration status, yet Maryland has yet to take action in protecting their most vulnerable population. It is for these reasons that I am encouraging you to vote **in support of the Access to Care Act (SB 728).**

Thank you for your time, service, and consideration.

Sincerely,
Alicia Pereschuk
321 W 28th St
Baltimore MD 21211
Showing Up for Racial Justice Baltimore

SB 728_Qualified Resident State Subsidy Program_Su

Uploaded by: Allison Taylor

Position: FAV



Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc
2101 East Jefferson Street
Rockville, Maryland 20852

March 2, 2022

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

RE: SB 728 – Support

Dear Chair Kelley and Members of the Committee:

Kaiser Permanente is pleased to support SB 728, Health Insurance – Qualified Resident State Subsidy Program (Access to Care Act).

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.¹ Kaiser Permanente of the Mid-Atlantic States, which operates in Maryland, provides and coordinates complete health care services for approximately 800,000 members. In Maryland, we deliver care to over 460,000 members.

Kaiser Permanente provides care and coverage to undocumented immigrants in California, Oregon, Washington, and the District of Columbia, and will soon provide care and coverage in Colorado, when their program is implemented soon.

Undocumented immigrants are at high risk of being uninsured because they have limited access to coverage options. Their high uninsured rates reflect limited access to employer-sponsored insurance and eligibility restrictions that bar them from participating in Medicare, Medicaid, the Children's Health Insurance Program, and the Affordable Care Act marketplaces. Additionally, certain lawfully present immigrants lack access to affordable health coverage, such as those who have been in the United States for less than five years.


We support extending coverage for noncitizens who would otherwise be eligible for coverage but for their immigration status. We especially endorse this effort to expand coverage in response to the significant burden immigrants have faced during the pandemic. COVID-19 has taken a heavy toll on immigrants, who are disproportionately frontline workers, making them particularly vulnerable to the virus.

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.

SB 728 proposes to create a Qualified Resident State Subsidy Program, which requires the Maryland Health Benefit Exchange to submit a 1332 waiver to the Centers for Medicare and Medicaid Services. We note that other states who provide coverage to undocumented immigrants do so through their Medicaid or public option programs using state-only funding, rather than under a 1332 waiver. Kaiser Permanente thinks it is unlikely that CMS would be able to waive provisions of law barring undocumented immigrants from enrollment in qualified health plans and allow Maryland to recoup and reinvest federal savings, especially since SB 728 does not identify a specific source of state funding to support the waiver application. Nevertheless, we support the waiver application and stand ready to work with the state to implement this initiative, if approved.

Thank you for the opportunity to comment. Please feel free to contact me at Allison.W.Taylor@kp.org or (202) 924-7496 with questions.

Sincerely,

A handwritten signature in dark ink that reads "Allison Taylor". The signature is written in a cursive, flowing style.

Allison Taylor
Director of Government Relations
Kaiser Foundation Health Plan of Mid-Atlantic States, Inc.

SB728- Hopkins - SUP.pdf

Uploaded by: Annie Coble

Position: FAV

SB728

Support

TO: The Honorable Delores Kelley, Chair
Senate Finance Committee

FROM: Annie Coble
Assistant Director, State Affairs, Johns Hopkins University and Medicine

DATE: March 2, 2022

Johns Hopkins would like to offer its full support for Senate Bill 728 Health Insurance – Qualified Resident State Subsidy Program (Access to Care Act). This bill establishes the Qualified Resident State Subsidy Program, which allows any qualified resident including a minor and regardless of immigration status to access affordable health insurance. Currently, undocumented individuals are not allowed to access the Maryland Health Benefit Exchange to shop for healthcare options, making them for all intents and purposes banned from purchasing healthcare plans even at full price through the marketplace website, SB0728 seeks to reverse this and create a more equitable healthcare marketplace responsive to the needs of all Marylanders.

The number of uninsured individuals in Maryland has decreased since the passage of the Affordable Care Act, largely because of Medicaid expansion. However, Medicaid expansion still leaves a large number of Marylanders unable to access affordable health insurance. Some of these individuals include immigrants that are also not eligible for the other subsidy programs created by the State. Johns Hopkins understands the importance of affordable health insurance in an individual's overall health and supports any efforts to expand access.

Johns Hopkins has always been dedicated to serving and supporting individuals regardless of immigration status. For example, Johns Hopkins runs programs such as The Access Partnership ("TAP"). This program provides access to effective, compassionate, evidence-based primary and specialty care for uninsurable residents of the East Baltimore community surround The Johns Hopkins Hospital (JHH) and Johns Hopkins Bayview Medical Center (JHBMC), with demonstrated financial need. TAP is the largest and most successful program in the state that provides access to primary and specialty care to the undocumented.

As the Committee is likely aware, under the old Maryland Health Insurance Plan, undocumented individuals who had a medical condition were able to purchase subsidized insurance. This program was phased out in 2014. There is precedent in Maryland of providing subsidized coverage to undocumented immigrants.

This bill creates an incredible resource too accessing affordable healthcare for so many Marylanders. For these reasons and more, Johns Hopkins would urge a favorable report on SB728.

SB0728_Arielle_Juberg_FAV.pdf

Uploaded by: Arielle Juberg

Position: FAV

SB0728, Health Insurance - Qualified Resident State Subsidy Program (Access to Care Act)
Testimony in **Support**

To: Chair Kelley and members of the Senate Finance Committee
From: Arielle Juberg, Baltimore, MD 21234

My name is Arielle Juberg. I am a resident of Baltimore County in District 8. I belong to Showing Up for Racial Justice (SURJ) in Baltimore. SURJ is working in collaboration with CASA de Maryland. I am testifying in **support** of SB0728, Health Insurance - Qualified Resident State Subsidy Program (Access to Care Act).

This bill matters to me because all Marylanders should be protected from exorbitant medical bills through affordable insurance. Medical bills can be overwhelming for any family. When my family member had to visit an emergency department, our insurance deemed it an “out of network” expense. All of a sudden, we had bills for thousands of dollars in facility charges, provider charges, and treatments. This was our experience with some insurance coverage – without any insurance, it would have been a catastrophe.

More than 275,000 undocumented immigrants in Maryland are ineligible for care through the Maryland Health Exchange. Without affordable insurance, they experience exorbitant, unexpected medical costs. With such high costs, many may forgo treatment for broken ankles, chronic health issues like diabetes, and immediate, life threatening infections like COVID-19. Immigrants in Maryland, many of whom are Black and Latino residents, become sicker, are hospitalized at higher rates, and die younger as they are forced to face life or death situations due to exclusion from programs like the Affordable Care Act. As the pandemic continues, disproportionately impacting immigrant communities, ensuring that all Marylanders have access to care is more urgent than ever.

Our state and communities become stronger and more resilient when we expand health care coverage:

- Increased access to primary care physicians results in earlier detection of health problems and more stable long-term management of chronic diseases; this decreases the number of people who die at earlier ages from preventable causes.
- Greater access to primary care clinics results in reduced use of emergency departments (ED); this decreases the number seeking care at EDs and reduces the cost of ED care for all of us.
- Access to care provides more opportunities for COVID-19 testing and vaccination

Research has shown that the ACA works as intended; a 2017 study found the ACA increased insurance coverage, access to care, and preventative care for its target population.¹ By denying undocumented immigrants access, we are denying them a service shown to improve health.

The immigrant community has worked tirelessly on the frontlines of the pandemic and has paid over \$240 million in federal, state, and local taxes. Maryland must take steps to protect the health of the immigrant community. Many states across the country have established comprehensive programs to extend coverage to people regardless of immigration status, yet Maryland has yet to take action in protecting their most vulnerable population. It is for these reasons that I am encouraging you to **support** SB0728. Thank you for your time, consideration, and service.

¹ Simon, K., Soni, A. and Cawley, J. (2017), The Impact of Health Insurance on Preventive Care and Health Behaviors: Evidence from the First Two Years of the ACA Medicaid Expansions. J. Pol. Anal. Manage., 36: 390-417. <https://doi.org/10.1002/pam.21972>

Testimony in Support of SB728 Access to Care Act.d

Uploaded by: Ashley Egan

Position: FAV



Unitarian Universalist Legislative Ministry of Maryland

Testimony in Support of SB 728, Health Insurance – Qualified Resident State Subsidy Program (Access to Care Act)

To: Senator Delores G. Kelley, Chair and Members of the Senate Finance Committee

From: Jim Caldiero, Lead Advocate, Immigration,
Unitarian Universalist Legislative Ministry of Maryland

Date: March 2, 2022

Thank you for the opportunity to offer testimony in support of SB728, Health Insurance – Qualified Resident State Subsidy Program (Access to Care Act). Access to affordable health care, particularly during the current pandemic, is a right not to be denied because of immigration status. It is an issue that affects all of us.

I encourage you to vote in favor of this bill.

Despite contributing hundreds of millions of dollars to the Maryland economy annually; our undocumented immigrant neighbors, many of whom would otherwise qualify for Medicaid, are currently ineligible due to their immigration status. Many of them have been deemed essential workers during the pandemic, increasing their — and their families' — risk of contracting Covid-19 and other illnesses that could threaten our public safety if left untreated. We can begin to correct this inequity by ensuring that our immigrant neighbors have access to health insurance provided via the Affordable Care Act and Medicaid.

According to the Kaiser Family Foundation, non-citizens are significantly more likely than citizens to be uninsured. In 2019, among the non-elderly population, 25% of lawfully present immigrants and more than four in ten (46%) undocumented immigrants were uninsured compared to less than one in ten (9%) citizens. Among citizen children, those with at least one non-citizen parent are more likely to be uninsured compared to those with citizen parents (9% vs. 5%)

I share my faith with more than 4000 Unitarian Universalists in Maryland who are called to promote and affirm justice, equity and compassion in human relations and as such, I urge you to provide equitable access to health care for all Marylanders, including our immigrant neighbors by voting in favor of SB 728.

UULM-MD c/o UU Church of Annapolis 333 Dubois Road Annapolis, MD 21401 410-266-8044,

www.uulmmd.org info@uulmmd.org www.facebook.com/uulmmd www.Twitter.com/uulmmd

Thank you.

Jim Caldiero

Ellicott City, MD 21043

Email: immigration@uulmmd.org

Sources:

American Immigration Council,

<https://www.americanimmigrationcouncil.org/research/immigrants-in-maryland>

Kaiser Family Foundation

<https://www.kff.org/racial-equity-and-health-policy/issue-brief/health-coverage-and-care-of-undocumented-immigrants/>

SB 728_PJC_Support.pdf

Uploaded by: Ashley Black

Position: FAV



Ashley Black, Staff Attorney
Public Justice Center
201 North Charles Street, Suite 1200
Baltimore, Maryland 21201
410-625-9409, ext. 224
blacka@publicjustice.org

SB 728
Health Insurance – Qualified Resident State Subsidy Program (Access to Care Act)
Hearing of the Senate Finance Committee
March 2, 2022
1:00 PM

SUPPORT

The Public Justice Center (PJC) is a not-for-profit civil rights and anti-poverty legal services organization which seeks to advance social justice, economic and racial equity, and fundamental human rights in Maryland. Our Health Rights Project supports policies and practices that promote the overall health of Marylanders struggling to make ends meet, with the explicit goal of promoting strategies that work to eliminate racial and ethnic disparities in health outcomes. **PJC strongly supports SB 728**, which would expand eligibility for the Maryland Health Benefit Exchange (MHBE) to include all Marylanders who meet standard Affordable Care Act eligibility, regardless of their immigration status. SB 728 would also create a subsidy program to cover new enrollees.

The COVID-19 pandemic exposed and worsened existing health disparities and inequities in healthcare access. One of the most glaring disparities is the lack of health insurance coverage available to immigrants depending on their immigration status. The current state and federal laws that prevent certain categories of immigrants from participating in the marketplace has the effect of gatekeeping healthcare from 275,000 undocumented immigrants residing in Maryland and places them at great risk of chronic illness and other health complications. SB 728 attempts to correct this inequity by expanding access to the MHBE to all Marylanders who would otherwise be eligible but for immigration status. This would not only allow immigrant communities to access health insurance to cover needed care, but it would also allow immigrants who are low-income to qualify for subsidies to offset the cost of health insurance coverage.

SB 728, if passed, would carve a pathway towards quality and affordable health care and good health outcomes for immigrant communities in Maryland. For these reasons, the Public Justice Center urges the committee to issue a **FAVORABLE** report for **SB 728**. If you have any questions about this testimony, please contact Ashley Black at 410-625-9409 x 224 or blacka@publicjustice.org.

SB0728 _Access_to_Care_MLC_FAV.pdf

Uploaded by: Cecilia Plante

Position: FAV



TESTIMONY FOR SB0728

Health Insurance - Qualified Resident State Subsidy Program (Access to Care Act)

Bill Sponsor: Senator Lam

Committee: Finance

Organization Submitting: Maryland Legislative Coalition

Person Submitting: Cecilia Plante, co-chair

Position: FAVORABLE

I am submitting this testimony in favor of SB0728 on behalf of the Maryland Legislative Coalition. The Maryland Legislative Coalition is an association of individuals and grassroots groups with members in every district in the state. We have over 30,000 members across the state.

Everyone should have health care. The price for health care services and medications is outrageously high. Without having basic health care, simple illnesses go unchecked and because individuals without health care do not see a doctor except in emergencies, those illnesses can force the individual into bankruptcy. In many cases, just getting lifesaving medicine is a choice between eating and paying rent, and getting the medicine.

This bill would open up the Maryland Health Benefit Exchange (ACA Coverage) to all Marylanders who meet the regular ACA eligibility, regardless of immigration status. This bill would also create a subsidy program with the funds necessary to cover new enrollees.

Our members think this bill is more than necessary. It is potentially life-saving for many residents of the state. We support the bill and we recommend a **FAVORABLE** report in Committee.

SB0728_FAV_MACHC, MDAAP_HI - Qual. Res. State Subs

Uploaded by: Christine Krone

Position: FAV



MID-ATLANTIC ASSOCIATION OF
COMMUNITY HEALTH CENTERS



TO: The Honorable Delores G. Kelley, Chair
Members, Senate Finance Committee
The Honorable Clarence K. Lam

FROM: Pamela Metz Kasemeyer
J. Steven Wise
Danna L. Kauffman
Christine K. Krone

DATE: March 2, 2022

RE: **SUPPORT** – Senate Bill 728 – *Health Insurance – Qualified Resident State Subsidy Program (Access to Care Act)*

On behalf of the Mid-Atlantic Association of Community Health Centers (MACHC) and the Maryland Chapter of the American Academy of Pediatrics (MDAAP), we submit this letter of **support** for Senate Bill 728.

Senate Bill 728 seeks to allow all Marylanders, regardless of immigration status, to participate in Maryland's Health Benefit Exchange if they otherwise meet the eligibility requirements under the Affordable Care Act (ACA). The bill also creates a qualified resident state subsidy program, which would make qualified health plans on the exchange affordable for low-income populations. To implement the proposed eligibility requirements, the State would be required to submit a state innovation waiver to receive federal approval in accordance with the ACA.

The ACA, since its inception has successfully enabled many Marylanders to gain access to affordable healthcare. However, Maryland's undocumented community, despite their contribution to Maryland's economy, are currently ineligible to purchase coverage through the marketplace. As providers who serve this community regardless of payment status, there is clear evidence that this population suffers from lack of access to needed health care services and which results in higher hospitalization rates and poor health outcomes that not only negatively impact these individuals but also increase health care costs for the State overall. Passage of Senate Bill 728 will not only dramatically increase access to affordable coverage for one of Maryland's most vulnerable populations but will also lower overall health care costs and individual market premiums for all Marylanders. A favorable report is requested.

For more information call:

Pamela Metz Kasemeyer
J. Steven Wise
Danna L. Kauffman
Christine K. Krone
410-244-7000

SB728_LAM_FAV.pdf

Uploaded by: Clarence Lam

Position: FAV

CLARENCE K. LAM, M.D., M.P.H.
Legislative District 12
Baltimore and Howard Counties



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

Education, Health, and Environmental Affairs
Committee
Chair, Environment Subcommittee

Executive Nominations Committee

Joint Committee on Ending Homelessness

Senate Chair

Joint Audit and Evaluation Committee

Joint Committee on Fair Practices and
State Personnel Oversight

Vice Chair

Baltimore County Senate Delegation

Chair

Howard County Senate Delegation

Chair

Asian-American & Pacific-Islander Caucus

THE SENATE OF MARYLAND

ANNAPOLIS, MARYLAND 21401

Support SB 728: Health Insurance – Qualified Resident State Subsidy Program (Access to Care Act)

Background:

- Since the establishment of the Patient Protection and Affordable Care Act (ACA) in 2010, over 521,000 individuals have gained access to affordable health care in Maryland.¹
- Maryland's uninsured rate has declined by 50% since the Maryland Health Benefit Exchange (MHBE) was established in 2011.²
- Despite these advances, around 6% of Maryland's population remains uninsured.³
- Approximately 275,000 Marylanders (4.5% of the population)⁴ are undocumented residents, and nearly half of these residents are uninsured and currently ineligible for affordable plans offered by the MHBE.

The Issue:

- Health insurance saves lives. Patients without insurance are reported to have a 29% higher mortality rate relative to those who are uninsured.⁵
- The high cost of healthcare has caused many Americans to delay, avoid, or stop medical treatment altogether, resulting in a sicker population compared to other developed countries.
- Many uninsured residents delay care until the last possible moment due to lack of coverage. A 2019 Gallup poll found that 25% of Americans say they or a family member have delayed

¹ [New HHS Data Show More Americans than Ever Have Health Coverage through the Affordable Care Act](#)

² [Maryland health insurance marketplace: history and news of the state's exchange](#)

³ [Analysis of the Uninsured Population in Maryland](#)

⁴ [U.S. unauthorized immigrant population estimates by state](#)

⁵ [The Relationship of Health Insurance and Mortality: Is Lack of Insurance Deadly?](#)

medical treatment for a serious illness due to the costs of care.⁶ Similarly, one study found that nearly 30% of uninsured respondents reported delaying or avoiding care altogether due to costs.⁷

- Many undocumented residents must go without coverage and remain reliant on safety net clinics or hospitals as their primary source of healthcare.⁸
- Due to such delays in care, uninsured patients face more severe health problems in the long term which are far more costly for hospitals to treat.⁹
- On average, an undocumented adult resident will attend 1.7 annual doctor visits compared to 3.2 annual doctor visits for a documented adult. These medical visits are important for promoting health maintenance and disease prevention, which reduces the risk of developing more complex and costly chronic illnesses.¹⁰

What SB 728 Does:

- SB 728 opens the healthcare plans on the MHBE to all Marylanders who meet the regular requirements for ACA eligibility, regardless of immigration status.
- SB 728 would open the MHBE to all “qualified residents,” which include individuals who are not incarcerated or eligible for Medicaid, CHIP, Medicare, or employer-based coverage.
- SB 728 would create a state subsidy program for these qualified residents to ensure that plans offered through the MHBE are affordable for these residents.
- SB 728 would also require the MHBE to apply for a “Federal State Innovation Waiver” to obtain federal pass-through funding to offset the costs of the new state subsidy program.

What SB 728 Accomplishes:

- SB 728 improves access to healthcare by opening MHBE plans to uninsured Marylanders.¹¹
- SB 728 maximizes long-term health benefits for all Maryland residents by making affordable health plans offered through the MHBE available to all residents that are qualified.
- SB 728 would result in the enrollment of an estimated 52,000 newly eligible individuals in the initial years of the program.⁴
- SB 728 is estimated to reduce the uninsured rate in Maryland from 6% to 5.4%.¹⁰
- By expanding the insurance pool, SB 728 will reduce individual market premiums for plans on the MHBE by an estimated 2.3% in calendar year 2024 (and 3.9% by 2028) for *all* enrolled individuals.¹⁰
- Multiple other states, including CA,^{12,13} MA,¹⁴ OR,¹⁵ IL,¹⁶ NY,¹⁷ NC,¹⁵ WA,¹⁶ and DC,¹⁶ have established similar programs to extend specific health coverage to certain populations of undocumented residents.

⁶ [More Americans Delaying Medical Treatment Due to Cost](#)

⁷ [How does cost affect access to care?](#)

⁸ [Health Coverage of Immigrants](#)

⁹ [Is Affording Undocumented Immigrants Health Care a Radical Proposal?](#)

¹⁰ [Assessing Health Care Services Used By California's Undocumented Immigrant Population In 2010](#)

¹¹ [Maryland Health Benefit Exchange, Joint Chairmen's Report: Reinsurance Program Costs and the Provider Assessment](#)

¹² [California expands state healthcare to undocumented residents 50 and up](#)

¹³ [How immigrants can obtain health coverage](#)

¹⁴ [Mass. Should Expand Medicaid To Undocumented Immigrants](#)

¹⁵ [Undocumented kids get health care in six states, D.C.](#)

¹⁶ [Illinois Is First in the Nation to Extend Health Coverage to Undocumented Seniors](#)

¹⁷ [Challenges for immigrant health in the USA-the road to crisis](#)

SB 728 - Access to Care Act.pdf

Uploaded by: Daryl Yoder

Position: FAV

Dear Senate Finance Committee,

This testimony is being submitted by Showing Up for Racial Justice Baltimore, a group of individuals working to move white folks as part of a multi-racial movement for equity and racial justice in Baltimore City, Baltimore County, and Howard County. We are also working in collaboration with CASA de Maryland. I am a resident of District 12. **I am testifying in support of Senate Bill 728: the Access to Care Act.**



The Access to Care Act will open the Maryland Health Benefit Exchange (ACA Coverage) to ALL Marylanders who meet the regular ACA eligibility requirements, regardless of their immigration status. The bill would establish a State Subsidy Program to ensure newly-covered individuals have the funding to receive care. Finally, it would require the state to submit a state innovation waiver (under §1332 of the Affordable Care Act) to allow Maryland to make this change to eligibility.

Right now, more than 275,000 undocumented immigrants in Maryland are ineligible for care through the Maryland Health Exchange. Without affordable health insurance, they experience exorbitant, unexpected medical costs. With such high costs, many may forgo treatment for broken ankles, chronic health issues like diabetes, and immediate, life threatening infections like COVID-19. Immigrants in Maryland, many of whom are Black and Latinx residents, become sicker, are hospitalized at higher rates, and die younger as they are forced to face life or death situations due to their exclusion from programs like the Affordable Care Act. As the pandemic continues to surge on, disproportionately impacting immigrant communities, ensuring that all Marylanders have access to care is more urgent than ever.

Our state and communities become stronger and more resilient when we expand health care coverage. Benefits of expanded coverage include:

- Increased access to primary care physicians that results in earlier detection of health problems and more stable long-term management of chronic diseases; this decreases the number of people who die at earlier ages from preventable causes.
- Greater access to primary care clinics and medical practices that results in reduced use of emergency departments (ED); this decreases the number seeking care at EDs and reduces the cost of ED care for all of us.
- Access to care that provides more opportunities for COVID-19 testing and vaccination - a goal shared by both Governor Hogan and the Maryland General Assembly.

Research has shown that the ACA works as intended; a 2017 study found the ACA increased insurance coverage, access to care, and preventative care for its target population.¹ By denying undocumented immigrants access, we are denying them a service shown to improve health.

The immigrant community has worked tirelessly on the frontlines of the pandemic and has paid over \$240 million in federal, state, and local taxes. Our Maryland government must take steps to protect the health and safety of the immigrant community. Many states across the country have established comprehensive programs to extend coverage to immigrants regardless of their immigration status, yet Maryland has yet to take action in protecting their most vulnerable population. It is for these reasons that I am encouraging you to vote **in support of the Access to Care Act (SB 728).**

Thank you for your time, service, and consideration.

Sincerely,
Daryl Yoder

309 Glenmore Ave.

Catonsville, MD 21228

Showing Up for Racial Justice Baltimore

SB 0728_Corty Testimony_03-02-22.pdf

Uploaded by: Edward Corty

Position: FAV

March 1, 2022

TO: Members of the Senate Finance Committee

FROM: Edward W. Corty, MD, MPH

RE: Senate Bill 728 – Qualified Resident State Subsidy Program

POSITION: SUPPORT

Chair Kelley, Vice Chair Feldman, and members of the committee, I am in full support of Senate Bill 728, The Access to Care Act, because this bill will both improve personal and population health simultaneously. For context, I am a resident in combined internal medicine and pediatrics at Johns Hopkins Hospital and care for mostly uninsured patients in my primary care clinic. I am representing myself with this testimony.

In Maryland today, someone without health insurance is forced to group every ailment into one of two categories—an afterthought or an emergency.¹

Consider my 50-year-old patient with diabetes who immigrated from Central America seven years ago. Since arriving, he has worked in local construction, repaving Baltimore's uneven roads. Because he lacks access to health insurance, he can't afford the medications that would optimize his care. While we tinker with available tools at every visit, his diabetes marches on. For now, pins and needles and blurry vision are afterthoughts to him, but his future health is easy to predict. Without a better regimen, his nerves will completely break down, leading to ulcer formation on his feet that become infected. This will be an undeniable emergency. If he remains without insurance, he will be hospitalized regularly and will likely require invasive surgical limb procedures that only a Fortune 500 CEO could afford out of pocket.

He will not be able to pay for these procedures, but someone will have to. And while those without insurance use less healthcare than similar insured persons, the cost of uncovered care is extraordinary. A recent analysis found that local and state government across the country pay for nearly \$12 billion of the \$33.6 billion in public funding for care for those without health insurance.²

¹ Emergency Medical Treatment & Labor Act (EMTALA). Center for Medicare and Medicaid Services. Available at: <https://www.cms.gov/Regulations-and-Guidance/Legislation/EMTALA>

² Coughlin TA, Samuel-Jakubos H, Garfield R. Sources of Payment for Uncompensated Care for the Uninsured. Kaiser Family Foundation. Available at: <https://www.kff.org/uninsured/issue-brief/sources-of-payment-for-uncompensated-care-for-the-uninsured/>

Along with individual health gains, this bill will improve the health of entire communities because the effects of lacking insurance are far reaching. Children of parents without health insurance are four times more likely to lack insurance themselves and eight times more likely to have no regular source of health care compared with children of parents with health insurance coverage.³ What's more, recent reports indicate that increased availability and affordability of Affordable Care Act plans in 2021 dramatically decreased premiums across the board, making health care more affordable for those who were already covered.⁴ Given the economic strain families have felt during the pandemic, cost savings for them should be at the top of our minds.

Maryland has led the way on health care innovation through a simultaneous focus on individual and population health. This bill would keep our state on that course, and I cannot overstate my support.

³ Aragonés A, Zamore C, Moya EM, Cordero JI, Gany F, Bruno DM. The Impact of Restrictive Policies on Mexican Immigrant Parents and Their Children's Access to Health Care. *Health Equity*. 2021 Sep 14;5(1):612-618. doi: 10.1089/heq.2020.0111. PMID: 34909528

⁴ Congress Can Expand Health Coverage and Lower Health Costs Now. Center for American Progress. Feb 2, 2022. Available at: <https://www.americanprogress.org/article/congress-can-expand-health-coverage-and-lower-health-costs-now/>

SB 728 - Access to Care Act.docx.pdf

Uploaded by: Erica Palmisano

Position: FAV

Dear Senate Finance Committee,

This testimony is being submitted by Showing Up for Racial Justice Baltimore, a group of individuals working to move white folks as part of a multi-racial movement for equity and racial justice in Baltimore City, Baltimore County, and Howard County. We are also working in collaboration with CASA de Maryland. I am a resident of District 12. **I am testifying in support of Senate Bill 728: the Access to Care Act.**



The Access to Care Act will open the Maryland Health Benefit Exchange (ACA Coverage) to ALL Marylanders who meet the regular ACA eligibility requirements, regardless of their immigration status. The bill would establish a State Subsidy Program to ensure newly-covered individuals have the funding to receive care. Finally, it would require the state to submit a state innovation waiver (under §1332 of the Affordable Care Act) to allow Maryland to make this change to eligibility.

Right now, more than 275,000 undocumented immigrants in Maryland are ineligible for care through the Maryland Health Exchange. Without affordable health insurance, they experience exorbitant, unexpected medical costs. With such high costs, many may forgo treatment for broken ankles, chronic health issues like diabetes, and immediate, life threatening infections like COVID-19. Immigrants in Maryland, many of whom are Black and Latinx residents, become sicker, are hospitalized at higher rates, and die younger as they are forced to face life or death situations due to their exclusion from programs like the Affordable Care Act. As the pandemic continues to surge on, disproportionately impacting immigrant communities, ensuring that all Marylanders have access to care is more urgent than ever.

Our state and communities become stronger and more resilient when we expand health care coverage. Benefits of expanded coverage include:

- Increased access to primary care physicians that results in earlier detection of health problems and more stable long-term management of chronic diseases; this decreases the number of people who die at earlier ages from preventable causes.
- Greater access to primary care clinics and medical practices that results in reduced use of emergency departments (ED); this decreases the number seeking care at EDs and reduces the cost of ED care for all of us.
- Access to care that provides more opportunities for COVID-19 testing and vaccination - a goal shared by both Governor Hogan and the Maryland General Assembly.

Research has shown that the ACA works as intended; a 2017 study found the ACA increased insurance coverage, access to care, and preventative care for its target population.¹ By denying undocumented immigrants access, we are denying them a service shown to improve health.

The immigrant community has worked tirelessly on the frontlines of the pandemic and has paid over \$240 million in federal, state, and local taxes. Our Maryland government must take steps to protect the health and safety of the immigrant community. Many states across the country have established comprehensive programs to extend coverage to immigrants regardless of their immigration status, yet Maryland has yet to take action in protecting their most vulnerable population.

It is for these reasons that I am encouraging you to vote **in support of the Access to Care Act (SB 728).**

Thank you for your time, service, and consideration.

Sincerely,
Erica Palmisano
5580 Vantage Point Rd, Apt 5, Columbia, MD
Showing Up for Racial Justice Baltimore

SB 728 - Access to Care Act - Support.pdf

Uploaded by: Erin Dorrien

Position: FAV



**Senate Bill 728 – Health Insurance – Qualified Resident State Subsidy Program
(Access to Care Act)**

Position: *Support*

March 2, 2022 Senate Finance Committee

MHA Position

On behalf of the Maryland Hospital Association's (MHA) 60 member hospitals and health systems, we appreciate the opportunity to support Senate Bill 728. Broad based, affordable, and comprehensive health insurance is integral to hospitals' ability to deliver high-quality care. It also is key to the state's success under the Total Cost of Care Model.

Maryland hospitals are strong proponents of the state's efforts to expand health care coverage, including through Medicaid and subsidized individual and small group health plans through the Maryland Health Benefit Exchange (MHBE). Yet, we know many Marylanders remain uninsured. These individuals are often forced to seek care in emergency departments when their medical conditions should have been addressed long before they reached an emergency situation.

MHBE estimates that as of 2019 approximately 357,000 individuals remain uninsured in Maryland, approximately 35 percent of whom are either ineligible for coverage through Medicaid or the individual market due to immigration status (about 115,900 individuals) or ineligible for federal financial assistance with health insurance premiums due to the federal family glitch (about 7,470 individuals).¹ SB 728 closes the loop on this population and ensures affordability for the available options.

Additionally, MHBE projects this coverage expansion can reduce overall individual market premiums. By their own estimates, the subsidy program envisioned in SB 728 could result in reductions of about 2 to 4% per year.

While we fully support efforts to bring individuals into the insurance market who are currently priced out, any barrier to appropriate coverage should be addressed. Policymakers should focus on the growing consumer cost-share in commercial health insurance plans and support efforts to enhance health insurance literacy.

For more information, please contact:

Erin Dorrien, Vice President, Policy Edorrien@mhaonline.org

¹ Maryland Health Benefit Exchange, Joint Chairmen's Report. Nov. 1, 2021.
dlslibrary.state.md.us/publications/JCR/2021/2021_44b_2021.pdf

CASA_FAV_SB728.pdf

Uploaded by: George Escobar

Position: FAV



Testimony in SUPPORT of SB0728

Health Insurance - Qualified Resident State Subsidy Program - Access to Care Act
Senate Finance Committee

March 2, 2022

Dear Honorable Chair Kelley, Vice Chair Feldman, and Members of the Committee,

CASA is pleased to offer favorable testimony in strong support of the Health Insurance - Qualified Resident State Subsidy Program (Access to Care Act). CASA is the largest immigrant services and advocacy organization in Maryland, and in the Mid-Atlantic region, with a membership of over 120,000 Black and brown immigrants and working families. This legislation represents an important milestone in our journey towards creating a resilient health care system that responds to the lessons learned by the recent pandemic, which impacted communities of color disproportionately.

CASA operates a robust Health and Human Services Department, where our offices work closely with undocumented Marylanders who are uninsured. The CASA health team helps thousands of families and pregnant women navigate the Health and Human Services System each year. From our case management assistance that connects members with social services to improve physical and mental health to our multilingual health hotline and medical interpreter program, to our comprehensive public benefits outreach and enrollment program - CASA is one of the leading and trusted organizations providing health support to the immigrant community. Recently, our health team answered the call to support vaccinating families in the Latino and broader immigrant community. CASA has administered over 13,000 vaccine doses to immigrant communities residing in Prince George's, Montgomery, Baltimore, Howard, Anne Arundel Counties, and those residing in the City of Baltimore. In addition, CASA has fielded tens of thousands of calls from community members, navigating them to COVID-19 tests, helping them apply for COVID relief benefits such as rental assistance, as well as speaking to them about COVID-19 mitigation strategies and other pandemic information. The majority of families we serve every day lack access to health insurance programs and urgently need better options for care.

Since its establishment in 2010, the Affordable Care Act has allowed 28 million people across the country to gain access to affordable care. In Maryland during this time, our state has decreased the uninsured rate by almost half to just under 7%. Unfortunately, 275K+ undocumented immigrants in Maryland are ineligible for care through the Maryland Health Exchange. Multiple states across the country have established comprehensive programs to extend coverage to immigrants regardless of their immigration status, and despite the profound cultural contributions immigrants make to the

state, along with their essential role in the Maryland workforce and millions in contributions to society through federal, state, and local taxes - they are still ineligible for the Affordable Care Act.

SB728 addresses critical health disparities faced by the immigrant community in Maryland by expanding the Affordable Care Act to all Marylanders who meet the regular eligibility, regardless of their immigration status. SB728 also begins to establish a State Subsidy Program to ensure newly covered individuals have the funding to receive care. The bill requires the Maryland Department of Health to submit a state innovation waiver (under § 1332 of the Social Security Act) to allow Maryland to change eligibility.

Over the last several decades, the need for healthcare coverage has been a consistent priority for Maryland's immigrant community. SB728 is a crucial step in addressing access to care for all Marylanders. CASA's membership, unfortunately, is overflowing with stories of families who have suffered due to their lack of access to care. A recent example that illustrates the urgency of this legislation is of Sandra Lopez, an undocumented single mother from Prince George's County. Maria and her two children have never had healthcare coverage. It has led to Sandra struggling to get her children vaccinated and getting full check-ups for school enrollment. Sandra began to suffer from stomach pain and severe bloating during the pandemic. A year ago, Sandra resorted to visiting the emergency room due to the pain. There, doctors told her she needed a list of exams and an ultrasound, which Sandra, to this day, has not received due to cost. With the pandemic, loss of work, and a household that she financially upholds on her own, Sandra does not know when she will be able to receive the proper care for her stomach.

Another CASA member, Cinthia Sanchez, lives in Baltimore City with her husband and children. This pandemic has been really hard for Cinthia and her family. She and her husband lost their jobs due to COVID-19, and in the thick of the pandemic, her husband was diagnosed with epilepsy. Cinthia's husband has to take 11 types of medications every day, with each medicine costing over \$100. Cinthia's family often have to pick between buying her husband's medicine or paying their rent. Cinthia often resorts to self-medicating or home remedies when it comes to her health.

Maryland can lead by being the first state to expand healthcare through the Affordable Care Act. Several states have expanded coverage to undocumented immigrants. California, Massachusetts, Illinois, and the District of Columbia have established comprehensive programs to extend coverage using state funds to cover income-eligible individuals regardless of immigration status. These programs take a wide range of forms, with significant differences in eligibility requirements, funding sources, administrative models, and service models. Despite this variety, a notable commonality is that these expansions have increased healthier communities throughout the entire state or jurisdiction when fully implemented. Maryland has the fifth-highest percentage of undocumented residents in their population - leaving one of the most significant percentages of residents left without care.

While limited care exists for undocumented immigrants - it is not enough. Although there are an estimated 47 Federally Qualified Health Centers¹ registered in the state providing limited care to the uninsured, the majority of care provided to the large undocumented population residing in Baltimore City, Montgomery and Prince George's Counties falls to only a small subset of approximately 12 clinics. These clinics have long been over capacity and haven't been able to keep up with the high demand for affordable primary care, often requiring patients to endure months long wait times to receive a basic primary care visit. In terms of private coverage, full time workers are often employed in low-wage jobs and industries that do not offer employer-sponsored coverage. Lastly, Medicaid's Emergency Medicaid is available to undocumented immigrants in emergency rooms, however, it is a case by case scenario where it must be determined that the reason for the emergency visit turned out to be a life threatening conditions, if it is determined that it was not, the cost of the visit is entirely the individual's responsibility.

The Access to Care Act is a step toward ending healthcare disparities and discrimination for the immigrant communities in Maryland. Despite the deep contributions to Maryland that undocumented families have made to our state, there are over 250K immigrants who worked on the frontlines during the pandemic and who pay over \$240 million in federal, state and local taxes. Yet, Black and Brown residents continue to become sicker, are hospitalized at higher rates, and die younger as they are forced to face life or death situations due to being excluded from programs such as the Affordable Care Act. The Institute of Medicine² estimates that 18K Americans died in one year because they were uninsured. Having access to healthcare affects an individual's health, well-being and life expectancy. It can prevent diseases and disabilities, detect and treat illnesses, increase quality of life, reduce the likelihood of premature death and increase life expectancy.³

While CASA often refers uninsured individuals to FQHCs, our office continues to see cases of sick individuals being turned away due to long waiting time for an available appointment, resulting in delayed delivery of care and add to the increased prevalence of preventable complications and comorbidities. These centers are a tremendous service to the immigration population at-large, yet for various reasons are not enough to provide the comprehensive care needed by the entire population of uninsured, undocumented communities.

This common-sense legislation is uncontentious and aligns Maryland with its values of protecting life and treating all people with dignity, respect, and care and addresses one of the most significant healthcare disparities experienced by Marylanders of color. For all of the reasons above, CASA urges a favorable report of Senate Bill 728, and thanks Senator Lam for his sponsorship of this critical legislation.

¹ https://npidb.org/organizations/ambulatory_health_care/federally-qualified-health-center-fqhc_261qf0400x/md/

² <https://www.commonwealthfund.org/blog/2019/insurance-coverage-saves-lives>

³ <https://www.healthypeople.gov/2020/leading-health-indicators/2020-lhi-topics/Access-to-Health-Services>

SB 728 to FIN -- Support -- ACCESS TO CARE.pdf

Uploaded by: Henry Bogdan

Position: FAV

March 2, 2022

Testimony on Senate Bill 728

**Health Insurance - Qualified Resident State Subsidy Program (Access to Care Act)
Senate Finance Committee**

Position: Favorable

Maryland Nonprofits is a statewide association of more than 1300 nonprofit organizations and institutions. We urge you to support Senate Bill 728 to assure that all Maryland residents have access to affordable quality health insurance coverage, and therefore, without regard to financial situation, “access to care.”

The COVID-10 pandemic has demonstrated the importance of health being readily available to our entire population. Under the Affordable Care Act and with Maryland’s Health Benefit Exchange we have taken great strides toward that goal. But the disproportionate impact of COVID among immigrant and undocumented individuals and families shows that we have not done enough.

Senate Bill 728, subject to certain approvals and a waiver, will close a gap in coverage and access, by extending coverage to persons currently not eligible for assistance from the Exchange. Most Marylanders would agree that access to care is a basic human right, and the action proposed in this legislation is in fact a moral imperative.

But we should also have learned by now that, in the common interest of us all, effective protection of public health needs to include all of the public.

We urge you to give Senate Bill 728 a favorable report.



SB 728 - Access to Care Act.pdf

Uploaded by: Holly Powell

Position: FAV

Dear Senate Finance Committee,

This testimony is being submitted by Showing Up for Racial Justice Baltimore, a group of individuals working to move white folks as part of a multi-racial movement for equity and racial justice in Baltimore City, Baltimore County, and Howard County. We are also working in collaboration with CASA de Maryland. I am a resident of 46. **I am testifying in support of Senate Bill 728: the Access to Care Act.**



The Access to Care Act will open the Maryland Health Benefit Exchange (ACA Coverage) to ALL Marylanders who meet the regular ACA eligibility requirements, regardless of their immigration status. The bill would establish a State Subsidy Program to ensure newly-covered individuals have the funding to receive care. Finally, it would require the state to submit a state innovation waiver (under §1332 of the Affordable Care Act) to allow Maryland to make this change to eligibility.

Right now, more than 275,000 undocumented immigrants in Maryland are ineligible for care through the Maryland Health Exchange. Without affordable health insurance, they experience exorbitant, unexpected medical costs. With such high costs, many may forgo treatment for broken ankles, chronic health issues like diabetes, and immediate, life threatening infections like COVID-19. Immigrants in Maryland, many of whom are Black and Latinx residents, become sicker, are hospitalized at higher rates, and die younger as they are forced to face life or death situations due to their exclusion from programs like the Affordable Care Act. As the pandemic continues to surge on, disproportionately impacting immigrant communities, ensuring that all Marylanders have access to care is more urgent than ever.

Our state and communities become stronger and more resilient when we expand health care coverage. Benefits of expanded coverage include:

- Increased access to primary care physicians that results in earlier detection of health problems and more stable long-term management of chronic diseases; this decreases the number of people who die at earlier ages from preventable causes.
- Greater access to primary care clinics and medical practices that results in reduced use of emergency departments (ED); this decreases the number seeking care at EDs and reduces the cost of ED care for all of us.
- Access to care that provides more opportunities for COVID-19 testing and vaccination - a goal shared by both Governor Hogan and the Maryland General Assembly.

Research has shown that the ACA works as intended; a 2017 study found the ACA increased insurance coverage, access to care, and preventative care for its target population.¹ By denying undocumented immigrants access, we are denying them a service shown to improve health.

The immigrant community has worked tirelessly on the frontlines of the pandemic and has paid over \$240 million in federal, state, and local taxes. Our Maryland government must take steps to protect the health and safety of the immigrant community. Many states across the country have established comprehensive programs to extend coverage to immigrants regardless of their immigration status, yet Maryland has yet to take action in protecting their most vulnerable population. It is for these reasons that I am encouraging you to vote **in support of the Access to Care Act (SB 728).**

Thank you for your time, service, and consideration.

Sincerely,

Lilly Chapa
210 S. Washington Street
Baltimore, Maryland 21231

Holly Powell
2308 Cambridge Street
Baltimore, Maryland 21224

Brian Seel
223 S. Wolfe Street
Baltimore, Maryland 21224

Liz Simon-Higgs
308 E. Randall Street
Baltimore, Maryland 21230

Showing Up for Racial Justice Baltimore

PPM_SB728_support.pdf

Uploaded by: Isabel Blalock

Position: FAV

Planned Parenthood of Maryland

Committee: Finance Committee

Bill Number: Senate Bill 728

Title: Health Insurance - Qualified Resident State Subsidy Program (Access to Care Act)

Hearing: March 2, 2022

Position: Support

Planned Parenthood of Maryland supports *SB 728 - Health Insurance - Qualified Resident State Subsidy Program (Access to Care Act)*.

As an established and trusted community reproductive health care provider, serving Marylanders for nearly 95 years, PPM believes that all Marylanders, regardless of immigration status, deserve access to basic health coverage. This bill would open the Maryland Health Benefit Exchange (ACA Coverage) to all Marylanders who meet the regular ACA eligibility, regardless of immigration status. This bill would also create a subsidy program with the funds necessary to cover new enrollees.

All or part of PPM's services—services that include contraception options and counseling, STI testing, and wellness exams—are covered by every plan on the exchange. Unfortunately, undocumented patients are not currently eligible for coverage by the Maryland Health Benefit exchange and are forced to pay entirely out-of-pocket for basic healthcare services. As a safety net health care provider, it is crucial to PPM that *everyone* has access to compassionate, respectful reproductive health care, no matter what. Cost and immigration status should not be barriers to accessing these essential services.

We urge the committee to support this legislation and support healthcare access for undocumented Marylanders. If we can provide any additional information, please contact Robyn Elliott at (443) 926-3443 or relliott@policypartners.net.

PPM_SB738_support.pdf

Uploaded by: Isabel Blalock

Position: FAV

Planned Parenthood of Maryland

Committee: Finance Committee

Bill Number: Senate Bill 728

Title: Health Insurance - Qualified Resident State Subsidy Program (Access to Care Act)

Hearing: March 2, 2022

Position: Support

Planned Parenthood of Maryland supports *SB 728 - Health Insurance - Qualified Resident State Subsidy Program (Access to Care Act)*.

As an established and trusted community reproductive health care provider, serving Marylanders for nearly 95 years, PPM believes that all Marylanders, regardless of immigration status, deserve access to basic health coverage. This bill would open the Maryland Health Benefit Exchange (ACA Coverage) to all Marylanders who meet the regular ACA eligibility, regardless of immigration status. This bill would also create a subsidy program with the funds necessary to cover new enrollees.

All or part of PPM's services—services that include contraception options and counseling, STI testing, and wellness exams—are covered by every plan on the exchange. Unfortunately, undocumented patients are not currently eligible for coverage by the Maryland Health Benefit exchange and are forced to pay entirely out-of-pocket for basic healthcare services. As a safety net health care provider, it is crucial to PPM that *everyone* has access to compassionate, respectful reproductive health care, no matter what. Cost and immigration status should not be barriers to accessing these essential services.

We urge the committee to support this legislation and support healthcare access for undocumented Marylanders. If we can provide any additional information, please contact Robyn Elliott at (443) 926-3443 or relliott@policypartners.net.

SURJ Access to Health Care 2022 3 1.pdf

Uploaded by: Jan Kleinman

Position: FAV

Dear Senate Finance Committee,

This testimony is being submitted by Showing Up for Racial Justice Baltimore, a group of individuals working to move white folks as part of a multi-racial movement for equity and racial justice in Baltimore City, Baltimore County, and Howard County. We are also working in collaboration with CASA de Maryland. I am a resident of District 40, and a person lucky enough to have health insurance. Not everyone does. When I worked as a health insurance navigator, I met many folks who did not qualify for state-sponsored health insurance and were not offered an affordable plan through their work. They did not have any insurance. **I am testifying in support of Senate Bill 728: the Access to Care Act.**



The Access to Care Act will open the Maryland Health Benefit Exchange (ACA Coverage) to ALL Marylanders who meet the regular ACA eligibility requirements, regardless of their immigration status. The bill would establish a State Subsidy Program to ensure newly-covered individuals have the funding to receive care. Finally, it would require the state to submit a state innovation waiver (under §1332 of the Affordable Care Act) to allow Maryland to make this change to eligibility.

Right now, more than 275,000 undocumented immigrants in Maryland are ineligible for care through the Maryland Health Exchange. Without affordable health insurance, they experience exorbitant, unexpected medical costs. With such high costs, many may forgo treatment for broken ankles, chronic health issues like diabetes, and immediate, life-threatening infections like COVID-19. Immigrants in Maryland, many of whom are Black and Latinx residents, become sicker, are hospitalized at higher rates, and die younger as they are forced to face life or death situations due to their exclusion from programs like the Affordable Care Act. Who bears the cost of this situation? Not just the individual who gets sick! We all suffer. Our insurance costs go up to help offset the costs of caring for the extremely ill, uninsured people. Our society is deprived of the talents and energy of those sick individuals. As the pandemic continues to surge on, disproportionately impacting immigrant communities, ensuring that all Marylanders have access to care is more urgent than ever.

Our state and communities become stronger and more resilient when we expand health care coverage. Benefits of expanded coverage include:

- Increased access to primary care physicians that results in earlier detection of health problems and more stable long-term management of chronic diseases; this decreases the number of people who die at earlier ages from preventable causes.
- Greater access to primary care clinics and medical practices that results in reduced use of emergency departments (ED); this decreases the number seeking care at EDs and reduces the cost of ED care for all of us.
- Access to care that provides more opportunities for COVID-19 testing and vaccination - a goal shared by both Governor Hogan and the Maryland General Assembly.

Research has shown that the ACA works as intended; a 2017 study found the ACA increased insurance coverage, access to care, and preventative care for its target population.¹ By denying undocumented immigrants access, we are denying them a service shown to improve health.

The immigrant community has worked tirelessly on the frontlines of the pandemic and has paid over \$240 million in federal, state, and local taxes. Our Maryland government must take steps to protect the health and safety of the immigrant community. Many states across the country have established comprehensive programs to extend coverage to immigrants regardless of their immigration status, yet Maryland has yet to take action in protecting our most vulnerable population. It is for these reasons that I am encouraging you to vote **in support of the Access to Care Act (SB 728).**

Thank you for your time, service, and consideration.

Sincerely,
Jan Kleinman
816 Union Ave.
Baltimore, MD 21211
Showing Up for Racial Justice Baltimore

Health Care for the Homeless - SB 728 FAV - Access

Uploaded by: Joanna Diamond

Position: FAV

HEALTH CARE FOR THE HOMELESS TESTIMONY
IN SUPPORT OF
SB 728 – Health Insurance - Qualified Resident State Subsidy Program
(Access to Care Act)

House Health and Government Operations Committee
March 2, 2022



Health Care for the Homeless supports SB 728, which would make qualified residents, regardless of immigration status, eligible for health plans under the Maryland Health Benefit Exchange Fund, as well as establish and provide funding for the Qualified Resident State Subsidy Program as part of the Exchange.

While the Affordable Care Act has shown transformative health outcomes for people across the country, this lifesaving policy has been categorically denied to Marylanders who are undocumented. Health care is a human right and should never depend on a person's immigration status.

As a federal qualified health center, treating all people regardless of immigration status, at Health Care for the Homeless we seen firsthand that denial of health insurance coverage due to immigration status has tremendously negative consequences. Over the past two years, we have seen an exponential increase in the number of clients present who are undocumented – oftentimes we see these clients through our pediatrics department. For our clients, access to this oftentimes life-saving care is both critical to public health and is also an issue of fundamental human rights. Health coverage must be made accessible for everyone regardless of immigration status.

Generally, denial of health coverage leads to [poorer health outcomes](#). Barriers to health coverage, and outright exclusions, have far-reaching implications — from missed early cancer diagnoses to reduced medication adherence for treatable conditions — that causes unnecessary suffering in families.

People without health insurance are more likely to skip preventive services and are less likely to obtain regular health care. Adults who are uninsured are over three times more likely than insured adults to say they have not had a visit about their own health to a doctor or other health professional's office or clinic in the past 12 months.¹ People who are uninsured are also less likely to seek medical care when they have a health problem. One in five (20%) uninsured adults say that they went without needed care in the past year because of cost compared to 3% of adults with private coverage and 8% of adults with public coverage.²

Because uninsured people are less likely than those with insurance to obtain regular medical care, they are more likely to have negative health consequences. This can include having an increased risk of being diagnosed at later stages of diseases, including cancer, and have higher mortality rates than those with insurance.³

¹ [The Uninsured and the ACA: A Primer – Key Facts about Health Insurance and the Uninsured amidst Changes to the Affordable Care Act – How does lack of insurance affect access to care? – 7451-14 | KFF](#)

² Id.

³ Id.

While safety net providers, like Health Care for the Homeless, are crucial in providing care to people who are uninsured, and particularly people who are undocumented, the safety net system does not nearly close the gap in care for the uninsured.⁴

The inability to access health insurance has particularly dire consequences for people who are pregnant and their infants when they are born. As with other health care services, the lack of health insurance results in individuals receiving fewer preventive health care services, resulting in poorer reproductive health outcomes.⁵ At Health Care for the Homeless, the problems from lack of health insurance for undocumented immigrants has not been more pronounced than for people who present pregnant or through pediatrics. While we are a federally qualified health center that provides care for all people regardless of immigration status, we are primary care provider and do not provide most prenatal services in-house. Therefore, we must refer out for such services.

For people who cannot receive prenatal care, their rate of [childbirth-related hospitalization](#) is significantly higher as are birth complications, including neonatal morbidity, including fetal alcohol syndrome, respiratory distress syndrome, and seizures. Additionally, studies have shown that people who are undocumented [begin prenatal care later](#) and have fewer prenatal visits than the general population – and this disparity is linked to a lack of health care coverages. Unsurprisingly, when publicly funded prenatal programs are available, the use of prenatal care increases.⁶ A baby born to a person who did not receive prenatal also face significantly higher poor health outcomes, including lower birthweight, infant mortality, prolonged hospital stays, and hospital transfers.⁷

Health Care for the Homeless Population Health Nurse, Shannon Riley, notes specific challenges when hospitals are presented with a person in labor who did not receive prenatal care: “When people come to the hospital and they have not received prenatal care, we don’t have documentation of when they became pregnant and can’t prepare for delivery specific to gestational age. Because of this uncertainty, decisions that mean to err on the side of caution can lead to unneeded intervention which both cost more money and carry their own risks to the mother-baby dyad. Those interventions can be anything along the continuum from unneeded antibiotics to major surgery.”

Shannon Riley describes a “2-pronged” problem with the lack of prenatal care, explaining that it can both lead to poor health outcomes or even death and also that there are missed opportunities to optimize health for even those deliveries that don’t end in catastrophe. As Ms. Riley says, it “doesn’t have to be a disaster” in order for it to take a toll on our health care system – any person presenting with a lack of prenatal care is a problem for all of us. When a person presents at the hospital in labor without having received medical care for the entirety of the pregnancy, the delivery is much more complicated and requires additional hospital resources for both the person in labor and the baby. Ms. Riley urges that we “need a mindset of prevention and optimization of health” and if we don’t have that, “everyone loses out.”

No one should get sick or die because they are poor or undocumented. Health care is a human right. A person’s immigration status should never, under any circumstances, determine the ability to receive affordable and high-quality health care. As a matter of public health and a matter of fundamental human

⁴Id.

⁵ [ACOG](#)

⁶ Fuentes-Afflick E, Hessol NA, Bauer T, O’Sullivan MJ, Gomez-Lobo V, Holman S, et al. Use of prenatal care by Hispanic women after welfare reform. *Obstet Gynecol* 2006;107:151–60. See also [Birth complications](#).

⁷ <https://www.ncbi.nlm.nih.gov/books/NBK221019/>

rights, health insurance through the Exchange must be extended to all qualified residents regardless of immigration status.

We urge a favorable report on SB 728.

Health Care for the Homeless is Maryland's leading provider of integrated health services and supportive housing for individuals and families experiencing homelessness. We work to prevent and end homelessness for vulnerable individuals and families by providing quality, integrated health care and promoting access to affordable housing and sustainable incomes through direct service, advocacy, and community engagement. We deliver integrated medical care, mental health services, state-certified addiction treatment, dental care, social services, and housing support services for over 10,000 Marylanders annually at sites in Baltimore City and Baltimore County. For more information, visit www.hchmd.org.

BaltimoreCounty_FAV_SB0728.pdf

Uploaded by: Joel Beller

Position: FAV



JOHN A. OLSZEWSKI, JR.
County Executive

JOEL N. BELLER
Acting Director of Government Affairs

JOSHUA M. GREENBERG
Associate Director of Government Affairs

MIA R. GOGEL
Associate Director of Government Affairs

BILL NO.: Senate Bill 728

TITLE: Health Insurance – Qualified Resident State Subsidy Program
(Access to Care Act)

SPONSOR: Senator Lam

COMMITTEE: Finance

POSITION: **SUPPORT**

DATE: March 2, 2022

Baltimore County **SUPPORTS** Senate Bill 728 – Health Insurance – Qualified Resident State Subsidy Program (Access to Care Act). This legislation would establish and implement the Qualified Resident State Subsidy Program through the Maryland Health Benefit Exchange Fund.

The COVID-19 pandemic identified great inequity and inaccessibility in the healthcare system particularly within immigrant communities who saw disproportionate impacts from this virus. In response, officials at every level of government stepped up to amend many of the legislative barriers to care, including the expansion of rules for telehealth and granting more healthcare providers the ability to administer vaccinations. These provisions allowed many to access healthcare in ways they were never able to before. It is vital that leaders continue to remove barriers to necessary and vital healthcare services.

This legislation would establish a Qualified Resident State Subsidy Program through the Maryland Health Benefit Exchange Fund to provide qualified residents, regardless of immigration status, with financial assistance for obtaining health care coverage. By engaging in programming that seeks to reduce the cost of healthcare for all communities, SB 728 will provide coverage to the residents a time when access to care has never been more critical.

Accordingly, Baltimore County requests a **FAVORABLE** report on SB 728. For more information, please contact Joel Beller, Acting Director of Government Affairs at jbeller@baltimorecountymd.gov.

SB728 SDMV fav.pdf

Uploaded by: John Payne

Position: FAV



SB 728 - SUPPORT

John Payne - Liaison
Sanctuary DMV

john.howard.payne@gmail.com 202-907-5794

SB 728- SUPPORT Health Insurance – Qualified Resident State Subsidy Program (Access to Care Act)

Senate Finance Committee

February 28, 2022

Dear Chair Kelley and members of the Finance Committee,

My name is John Payne and I am a core organizer with Sanctuary DMV, which works with immigrants and immigrant communities throughout Maryland, Virginia, and DC, and I am here today to express our support on behalf for SB 728. Sanctuary DMV is an entirely volunteer organization dedicated to helping immigrants and immigrant communities build power, standing with individuals and their families during immigration proceedings, and advocating for legislation that will ensure immigrants are treated justly and with the respect they deserve.

Sanctuary DMV believes that health care is a human right and that all people, regardless of their status, should have access to quality and affordable health care. Since coming into law, the affordable care act has helped millions of Americans get the medical treatment they need. And while this has been a great step forward, our undocumented neighbors have been unjustly cut off from these benefits. Sanctuary DMV has seen first-hand the results of a system that unfairly excludes and punishes members of our community. We have worked with many individuals and families in economic hardships brought on by their status that struggle to pay rent, utilities, and medical bills. Many of these individuals do not work jobs that provide health insurance and are not able to afford the high costs of private care. This places a large economic burden on them and their families. They are often forced to make heart breaking decisions between going to a doctor or paying rent, buying groceries or filling a prescription. These are decisions that no one should have to make, but is one that many of our undocumented neighbors face with every single day.

This health care inequity has only grown in recent years due to the global pandemic. Many of our undocumented neighbors are not able to work from home on a regular basis. Instead, they have worked on the front lines of one of the worst global health crises in a century. The pandemic has also made work inconsistent and pay checks unreliable which has made it harder and harder for those without salaried work to pay for everyday needs. The COVID crisis has shown all of us how dangerous it can be when people are excluded from getting care and yet it is a cruel irony that those who have been most affected by it are still denied health care. This inequity in our health care system is not only a danger to our undocumented neighbors who cannot receive treatment, but to everyone. In order to ensure the health and safety of everyone in our communities we must ensure the health and safety of everyone in our communities.

The Access to Care is an important step to solving this inequity. By making sure that our documented neighbors are included under the American Care Act, we not only fulfilling our



SB 728 - SUPPORT

John Payne - Liaison

Sanctuary DMV

john.howard.payne@gmail.com 202-907-5794

collective responsibility to one another but also strengthening the entire state.

By giving all residents access to get affordable and quality medical care, Maryland will become a more healthy, equal, and just.

Sanctuary DMV urges a favorable report on SB 728.

SB 728 - Access to Care Act.pdf

Uploaded by: Jonathan Smeton

Position: FAV

Dear Senate Finance Committee,

This testimony is being submitted by Showing Up for Racial Justice Baltimore, a group of individuals working to move white folks as part of a multi-racial movement for equity and racial justice in Baltimore City, Baltimore County, and Howard County. We are also working in collaboration with CASA de Maryland. I am a resident of **District 40. I am testifying in support of Senate Bill 728: the Access to Care Act.**



The Access to Care Act will open the Maryland Health Benefit Exchange (ACA Coverage) to ALL Marylanders who meet the regular ACA eligibility requirements, regardless of their immigration status. The bill would establish a State Subsidy Program to ensure newly-covered individuals have the funding to receive care. Finally, it would require the state to submit a state innovation waiver (under §1332 of the Affordable Care Act) to allow Maryland to make this change to eligibility.

Right now, more than 275,000 undocumented immigrants in Maryland are ineligible for care through the Maryland Health Exchange. Without affordable health insurance, they experience exorbitant, unexpected medical costs. With such high costs, many may forgo treatment for broken ankles, chronic health issues like diabetes, and immediate, life threatening infections like COVID-19. Immigrants in Maryland, many of whom are Black and Latinx residents, become sicker, are hospitalized at higher rates, and die younger as they are forced to face life or death situations due to their exclusion from programs like the Affordable Care Act. As the pandemic continues to surge on, disproportionately impacting immigrant communities, ensuring that all Marylanders have access to care is more urgent than ever.

Our state and communities become stronger and more resilient when we expand health care coverage. Benefits of expanded coverage include:

- Increased access to primary care physicians that results in earlier detection of health problems and more stable long-term management of chronic diseases; this decreases the number of people who die at earlier ages from preventable causes.
- Greater access to primary care clinics and medical practices that results in reduced use of emergency departments (ED); this decreases the number seeking care at EDs and reduces the cost of ED care for all of us.
- Access to care that provides more opportunities for COVID-19 testing and vaccination - a goal shared by both Governor Hogan and the Maryland General Assembly.

Research has shown that the ACA works as intended; a 2017 study found the ACA increased insurance coverage, access to care, and preventative care for its target population.¹ By denying undocumented immigrants access, we are denying them a service shown to improve health.

The immigrant community has worked tirelessly on the frontlines of the pandemic and has paid over \$240 million in federal, state, and local taxes. Our Maryland government must take steps to protect the health and safety of the immigrant community. Many states across the country have established comprehensive programs to extend coverage to immigrants regardless of their immigration status, yet Maryland has yet to take action in protecting their most vulnerable population.

It is for these reasons that I am encouraging you to vote **in support of the Access to Care Act (SB 728).**

Thank you for your time, service, and consideration.

Sincerely,
Jonathan Smeton
Baltimore, MD 21211
Showing Up for Racial Justice Baltimore

MDDCSAM Access to Care SB728 FAV.pdf

Uploaded by: Joseph Adams, MD

Position: FAV



MDDCSAM is the Maryland state chapter of the American Society of Addiction Medicine whose members are physicians and other health providers who treat people with substance use disorders.

SB 728 Health Insurance – Qualified Resident State Subsidy Program (Access to Care Act)
Senate Finance Committee. March 2, 2022

FAVORABLE

Maryland is home to 443,489 noncitizens (7.3% of the state's population) who currently receive little to no healthcare services. As a result, these Marylanders have high rates of preventable illness, and hospitalizations.

Undocumented families pay over \$240M in federal, state, and local taxes; most would otherwise meet the ACA eligibility requirements.

Every person deserves access to lifesaving medical care. **Multiple other states have established comprehensive programs to extend coverage to immigrants** regardless of their immigration status.

This legislation would prevent many unnecessary emergency room visits and hospitalizations. Vaccinations would help prevent the spread of infectious diseases.

Healthcare is a human right.

Respectfully,

Joseph A. Adams, MD, FASAM, Chair, Public Policy Committee

SB728_MD Center on Economic Policy_FAV.pdf

Uploaded by: Kali Schumitz

Position: FAV



MARCH 3, 2022

All Marylanders Should Have Access to Affordable Health Coverage

Position Statement Supporting Senate Bill 728

Given before the House Health and Government Operations Committee

Being able to access affordable health coverage is a critical step towards health and wellbeing. Senate Bill 728 would open the Maryland Health Benefit Exchange to all Marylanders who meet the regular eligibility requirements, regardless of their immigration status. This bill would also create a subsidy program that would have the funds necessary to cover new enrollees. **The Maryland Center on Economic Policy supports Senate Bill 728 because it improves health equity for our most vulnerable Marylanders.**

While we have made considerable progress since the Affordable Care Act was passed in 2010 in enabling more Marylanders to get medical care when they need it, we still have hundreds of thousands of residents without health insurance—and some face a much greater risk of being uninsured. For example, while only one in 30 white Marylanders is uninsured, more than one in five Latinx Marylanders lacks insurance¹. One reason for this is that we have not done enough to enable Marylanders born outside the United States to access insurance. Among Marylanders who are permanent residents, here on work or student visas, and other non-U.S. citizens, nearly one-third do not have health insurance. When thousands of our neighbors cannot see a doctor without worrying about going into debt, we are all more likely to get sick or to bear the cost of uncompensated emergency care.

SB 728 takes three steps to expand access to health coverage:

- Opens the Maryland Health Benefit Exchange to all Marylanders who meet the regular ACA eligibility requirements, regardless of their immigration status.
- Establishes a state subsidy program to ensure newly covered individuals have the funding to purchase affordable insurance.
- Require the state to submit a state innovation waiver to allow Maryland to make this change to eligibility.

Multiple states across the country have established comprehensive care programs to extend coverage to immigrants regardless of their immigration status. The Access to Care Act is a step toward ending healthcare disparities for immigrant communities in Maryland. With this bill, Maryland would become a safer and healthier place for all its residents. It would ensure that individuals have access to primary care, resulting in higher rates of early detection and better long-term management of chronic diseases and serious illnesses. It would decrease the amount of costly emergency room visits and mortality rates. For these reasons, **the Maryland Center on Economic Policy respectfully requests the Health and Government Operations Committee to make a favorable report on Senate Bill 728.**

Equity Impact Analysis: Senate Bill 728

Bill Summary

SB 728 would open the Maryland Health Benefit Exchange (ACA coverage) to all Marylanders who meet the regular ACA eligibility, regardless of their immigration status

Background

Since its establishment in 2010, the Affordable Care Act has allowed 28 million people across the country to gain access to affordable care. Unfortunately in Maryland, there are over 275,00 undocumented immigrants who are ineligible for care through the Maryland Health Exchange. Multiple states across the country have established comprehensive care programs to extend coverage to immigrants regardless of their immigration status.

Equity Implications

Black and Latinx residents become sicker, are hospitalized at higher rates, and die younger, in part due to their exclusion from programs such as the Affordable Care Act.

- Among Marylanders who are permanent residents, here on work or student visas, and other non-U.S. citizens, nearly one-third do not have health insurance.
- Both Black mothers and Black children are more than twice as likely as their white counterparts to die during or soon after childbirth. Both Black and Latinx parents are less likely to receive adequate prenatal health care, and Latinx children are the only group that has experienced an increasing infant mortality rate in recent years.ⁱⁱ
- The ultimate result is a higher risk of early death for Marylanders of color. On average, Black Marylanders die three years earlier than white Marylanders, with Black men dying nearly five years earlier than white men.ⁱⁱⁱ

Impact

Senate Bill 728 will likely **improve racial, health and economic equity** in Maryland.

ⁱ Christopher Meyer, “Budgeting for Opportunity: How Our Fiscal Policy Choices Can Remove Barriers Facing Marylanders of Color and Advance Shared Prosperity,” Maryland Center on Economic Policy, 2018. <http://www.mdeconomy.org/budgeting-for-opportunity-health-education-transportation/>

ⁱⁱ Ibid

ⁱⁱⁱ Ibid

SB 728 - Access to Care Act.docx.pdf

Uploaded by: Katherine Wilkins

Position: FAV

Dear Senate Finance Committee,

This testimony is being submitted by Showing Up for Racial Justice Baltimore, a group of individuals working to move white folks as part of a multi-racial movement for equity and racial justice in Baltimore City, Baltimore County, and Howard County. We are also working in collaboration with CASA de Maryland. I am a resident of **District 12. I am testifying in support of Senate Bill 728: the Access to Care Act.**



The Access to Care Act will open the Maryland Health Benefit Exchange (ACA Coverage) to ALL Marylanders who meet the regular ACA eligibility requirements, regardless of their immigration status. The bill would establish a State Subsidy Program to ensure newly-covered individuals have the funding to receive care. Finally, it would require the state to submit a state innovation waiver (under §1332 of the Affordable Care Act) to allow Maryland to make this change to eligibility.

Right now, more than 275,000 undocumented immigrants in Maryland are ineligible for care through the Maryland Health Exchange. Without affordable health insurance, they experience exorbitant, unexpected medical costs. With such high costs, many may forgo treatment for broken ankles, chronic health issues like diabetes, and immediate, life threatening infections like COVID-19. Immigrants in Maryland, many of whom are Black and Latinx residents, become sicker, are hospitalized at higher rates, and die younger as they are forced to face life or death situations due to their exclusion from programs like the Affordable Care Act. As the pandemic continues to surge on, disproportionately impacting immigrant communities, ensuring that all Marylanders have access to care is more urgent than ever.

Our state and communities become stronger and more resilient when we expand health care coverage. Benefits of expanded coverage include:

- Increased access to primary care physicians that results in earlier detection of health problems and more stable long-term management of chronic diseases; this decreases the number of people who die at earlier ages from preventable causes.
- Greater access to primary care clinics and medical practices that results in reduced use of emergency departments (ED); this decreases the number seeking care at EDs and reduces the cost of ED care for all of us.
- Access to care that provides more opportunities for COVID-19 testing and vaccination - a goal shared by both Governor Hogan and the Maryland General Assembly.

Research has shown that the ACA works as intended; a 2017 study found the ACA increased insurance coverage, access to care, and preventative care for its target population.¹ By denying undocumented immigrants access, we are denying them a service shown to improve health.

The immigrant community has worked tirelessly on the frontlines of the pandemic and has paid over \$240 million in federal, state, and local taxes. Our Maryland government must take steps to protect the health and safety of the immigrant community. Many states across the country have established comprehensive programs to extend coverage to immigrants regardless of their immigration status, yet Maryland has yet to take action in protecting their most vulnerable population. It is for these reasons that I am encouraging you to vote **in support of the Access to Care Act (SB 728).**

Thank you for your time, service, and consideration.

Sincerely,

Katherine Wilkins

10651 Gramercy PI Unit 257

Columbia MD 2104

Showing Up for Racial Justice Baltimore

SB728-Finance-TPM-support.pdf

Uploaded by: Laura Atwood

Position: FAV



SB728 – SUPPORT

Laura Atwood

Takoma Park Mobilization

laura_a79@hotmail.com; 301-587-3876

SB728 – SUPPORT

Access to Care Act: Health Insurance – Qualified Resident State Subsidy Program

Finance Committee

March 2, 2022

Dear Chair Kelley, Vice Chair Feldman, and members of the Senate Finance Committee:

My name is Laura Atwood. I have lived in Maryland since 1999, and I represent Takoma Park Mobilization, an grassroots advocacy organization with a following of over 2500 people, active in environmental, justice, economic, and electoral matters. We are in SUPPORT of SB728.

I'm also testifying as a healthcare employee who's so often struck by how many health problems, with accompanying anguish and multidimensional costs, could be prevented. Finally, through a direct-service offshoot of Takoma Park Mobilization, I do volunteer work with immigrants and see how health issues are intertwined with so many other aspects of people's lives.

I'd like to share the story of one man, whom I'll call Mario, who was my home health patient a few years ago. I work as a home physical therapist with patients who are "homebound," or unable to tolerate going to a physical therapy clinic; I typically make 4-6 visits per day (this has continued throughout the pandemic), and people invite me into their homes and lives, hoping that I can help them get stronger and healthier. Normally people without insurance are simply absent from my worklife. But Mario had come through my organization's hospitals and we were able to make a very few unreimbursed visits; even this is uncommon.

Mario had lost insurance when he changed jobs, didn't qualify for Medicaid or ACA subsidies because of immigration status, and couldn't afford his cardiac medications (\$30/month). Yes, these stories are real, in the form of so many human beings. So he had a simultaneous heart attack and stroke, couldn't return to his restaurant job which included heavy lifting, and couldn't pay rent for his room in a family's home; the family (including elementary school children) relied on that income as well but didn't want to make him homeless. The man was in his early 50s and eager to work, but unable when I last saw him.

How much better, in so many ways, would it have been to prevent the cascade of devastation from Mario's lack of health insurance? We need to do what we can, going forward, to prevent others from facing his situation. SB728 is an important step.

Takoma Park Mobilization therefore urges a favorable report on SB728.

SB 728 - Access to Care Act.docx.pdf

Uploaded by: Lindsay Keipper

Position: FAV

Dear Senate Finance Committee,

This testimony is being submitted by Showing Up for Racial Justice Baltimore, a group of individuals working to move white folks as part of a multi-racial movement for equity and racial justice in Baltimore. We are also working in collaboration with CASA de Maryland. I am a resident of District 46, and **I am testifying in support of Senate Bill 728: the Access to Care Act.**



The Access to Care Act will open the Maryland Health Benefit Exchange (ACA Coverage) to ALL Marylanders who meet the regular ACA eligibility requirements, regardless of their immigration status. The bill would establish a State Subsidy Program to ensure newly-covered individuals have the funding to receive care. Finally, it would require the state to submit a state innovation waiver (under §1332 of the Affordable Care Act) to allow Maryland to make this change to eligibility.

Right now, more than 275,000 undocumented immigrants in Maryland are ineligible for care through the Maryland Health Exchange. Without affordable health insurance, they experience exorbitant, unexpected medical costs. With such high costs, many may forgo treatment for broken ankles, chronic health issues like diabetes, and immediate, life threatening infections like COVID-19. Immigrants in Maryland, many of whom are Black and Latinx residents, become sicker, are hospitalized at higher rates, and die younger as they are forced to face life or death situations due to their exclusion from programs like the Affordable Care Act. As the pandemic continues to surge on, disproportionately impacting immigrant communities, ensuring that all Marylanders have access to care is more urgent than ever.

Our state and communities become stronger and more resilient when we expand health care coverage. Benefits of expanded coverage include:

- Increased access to primary care physicians that results in earlier detection of health problems and more stable long-term management of chronic diseases; this decreases the number of people who die at earlier ages from preventable causes.
- Greater access to primary care clinics and medical practices that results in reduced use of emergency departments (ED); this decreases the number seeking care at EDs and reduces the cost of ED care for all of us.
- Access to care that provides more opportunities for COVID-19 testing and vaccination - a goal shared by both Governor Hogan and the Maryland General Assembly.

Research has shown that the ACA works as intended; a 2017 study found the ACA increased insurance coverage, access to care, and preventative care for its target population.¹ By denying undocumented immigrants access, we are denying them a service shown to improve health.

The immigrant community has worked tirelessly on the frontlines of the pandemic and has paid over \$240 million in federal, state, and local taxes. Our Maryland government must take steps to protect the health and safety of the immigrant community. Many states across the country have established comprehensive programs to extend coverage to immigrants regardless of their immigration status, yet Maryland has yet to take action in protecting their most vulnerable population. It is for these reasons that I am encouraging you to vote **in support of the Access to Care Act (SB 728).**

Thank you for your time, service, and consideration.

Sincerely,
Lindsay Keipper
2425 Fleet St.
Showing Up for Racial Justice Baltimore

Progressive Maryland – SB 728.pdf

Uploaded by: Lindsey Muniak

Position: FAV



PROGRESSIVE MARYLAND

P.O. Box 6988 Largo, MD 20792

www.ProgressiveMaryland.org

Contact@ProgressiveMaryland.org

[Facebook.com/ProgressiveMaryland](https://www.facebook.com/ProgressiveMaryland)

[@Progressive_MD](https://twitter.com/Progressive_MD)

Testimony of Larry Stafford, Jr., Executive Director of Progressive Maryland SB 728 – Health Insurance – Qualified Resident State Subsidy Program

Access to Care Act

March 2, 2022

Position: Favorable

To Chair Kelley and Members of the Finance Committee:

Thank you for the opportunity to offer testimony in support of Senate Bill 728. Progressive Maryland is a statewide grassroots organization with over 100,000 members, supporters, and affiliates who live in nearly every legislative district across the state. Our mission is to improve the lives of working people and families in Maryland.

Please note Progressive Maryland's support for SB 728, the Access to Care Act. This legislation would open the Maryland Health Benefit Exchange, our state's Affordable Care Act (ACA) health insurance marketplace, to all who meet the regular eligibility criteria, regardless of immigration status. It would also establish a state subsidy program to ensure additional funding is available to supplement the cost of new enrollees.

Under current law, undocumented Marylanders do not qualify for Medicaid or Medicare coverage, and they are ineligible to enroll in ACA plans, leaving them with very limited options for healthcare. Unless they are able to afford the prohibitive out-of-pocket costs of care, they are left to rely on employer-sponsored coverage (rare, as undocumented immigrants are often employed in low-wage jobs where employers are less likely to offer healthcare benefits) or community health clinics (which tend to offer a limited range of services).

At Progressive Maryland, we believe single-payer healthcare is the best solution to the massive health disparities and injustice in this country's healthcare system, and we will continue to advocate for the single-payer model. But the pandemic has underscored the urgency of ensuring undocumented immigrants, who already face numerous barriers to healthcare, have greater options and access. This bill will allow them to enroll in plans under the Affordable Care Act sooner rather than later. For this reason, **we respectfully urge the Committee to issue a favorable report on SB 728.**

Larry Stafford, Jr.
Executive Director
Progressive Maryland

Support SB 728 - Access to Care Act.docx.pdf

Uploaded by: Linnie Girdner

Position: FAV

Dear Senate Finance Committee,

I am a resident of District 21 and a member of Showing Up for Racial Justice Annapolis and Anne Arundel County. **I am testifying in support of Senate Bill 728: the Access to Care Act.**

The Access to Care Act will open the Maryland Health Benefit Exchange (ACA Coverage) to ALL Marylanders who meet the regular ACA eligibility requirements, regardless of their immigration status. The bill would establish a State Subsidy Program to ensure newly-covered individuals have the funding to receive care. Finally, it would require the state to submit a state innovation waiver (under §1332 of the Affordable Care Act) to allow Maryland to make this change to eligibility.

Right now, more than 275,000 undocumented immigrants in Maryland are ineligible for care through the Maryland Health Exchange. Without affordable health insurance, they experience exorbitant, unexpected medical costs. With such high costs, many may forgo treatment for broken ankles, chronic health issues like diabetes, and immediate, life threatening infections like COVID-19. Immigrants in Maryland, many of whom are Black and Latinx residents, become sicker, are hospitalized at higher rates, and die younger as they are forced to face life or death situations due to their exclusion from programs like the Affordable Care Act. As the pandemic continues to surge on, disproportionately impacting immigrant communities, ensuring that all Marylanders have access to care is more urgent than ever.

Our state and communities become stronger and more resilient when we expand health care coverage. Benefits of expanded coverage include:

- Increased access to primary care physicians that results in earlier detection of health problems and more stable long-term management of chronic diseases; this decreases the number of people who die at earlier ages from preventable causes.
- Greater access to primary care clinics and medical practices that results in reduced use of emergency departments (ED); this decreases the number seeking care at EDs and reduces the cost of ED care for all of us.
- Access to care that provides more opportunities for COVID-19 testing and vaccination - a goal shared by both Governor Hogan and the Maryland General Assembly.

Research has shown that the ACA works as intended; a 2017 study found the ACA increased insurance coverage, access to care, and preventative care for its target population.¹ By denying undocumented immigrants access, we are denying them a service shown to improve health.

The immigrant community has worked tirelessly on the frontlines of the pandemic and has paid over \$240 million in federal, state, and local taxes. Our Maryland government must take steps to protect the health and safety of the immigrant community. Many states across the country have established comprehensive programs to extend coverage to immigrants regardless of their immigration status, yet Maryland has yet to take action in protecting their most vulnerable population. It is for these reasons that I am encouraging you to vote **in support of the Access to Care Act (SB 728).**

Thank you for your time, service, and consideration.

Sincerely,

Linda Girdner
941 Fall Ridge Way
Gambrills, MD 21054

MD Catholic Conference_FAV_SB0728.pdf

Uploaded by: MJ Kraska

Position: FAV



ARCHDIOCESE OF BALTIMORE † ARCHDIOCESE OF WASHINGTON † DIOCESE OF WILMINGTON

March 2, 2022

SB 728

Health Insurance - Qualified Resident State Subsidy Program (Access to Care Act)

Senate Finance Committee

Position: Support

The Maryland Catholic Conference (“Conference”) represents the public policy interests of the three Roman Catholic (arch) dioceses serving Maryland: the Archdiocese of Baltimore, the Archdiocese of Washington, and the Diocese of Wilmington.

Senate Bill 728 alters the purpose of the Maryland Health Benefit Exchange Fund to include the provision of funding for the establishment and operation of the Qualified Resident State Subsidy Program; requiring the Maryland Health Benefit Exchange to establish and implement the Program to provide State premium assistance and cost-sharing reductions to qualified residents; and providing that the implementation of the Program is contingent on approval of a certain waiver application.

In Maryland, over 275,000 undocumented immigrants are ineligible for care through the Maryland Health Exchange. Multiple states have established comprehensive care programs to extend coverage to immigrants regardless of their immigration status. This has had the highest impact on Black and Latino residents, who have become sicker, hospitalized at higher rates, and die younger as they are forced to face life or death situations due to their exclusion in programs such as the Affordable Care Act.

The Access to Care Act is a step toward ending healthcare disparities for immigrant communities in Maryland. It would ensure access to primary care, resulting in higher early detection rates and better long-term management of chronic diseases and serious illnesses. It would decrease the amount of costly emergency room visits and mortality rates.

The Conference appreciates your consideration and, for these reasons, respectfully requests a favorable report on Senate Bill 728.

HB1035 Access to Care Act Testimony.pdf

Uploaded by: Monica Guerrero Vazquez

Position: FAV



Center for Salud/Health and Opportunity for Latinos

Johns Hopkins Centro SOL

Mason F. Lord Bldg, Center Tower Suite 4200

5200 Eastern Avenue, Baltimore MD 21224

410.550.1129 | centrosol@jhmi.edu | www.jhcentrosol.org

TO: Delegate Shane E. Pendergrass, Chair
Delegate Joseline A. Pena-Melnyk, Vice Chair
Health and Government Operations Committee Members

SB0728 / HB1035

Favorable

FROM: Centro SOL

DATE: February 28, 2022

Centro SOL supports SB0728 / HB1035 Access to Care Act

Centro SOL (Center for *Salud*/Health and Opportunity for Latinos at Johns Hopkins) is committed to promote equity in health and opportunity for Latinos by developing several patient/community-centered programs that focus on physical and mental health as well as clinical care innovations. Thank you for allowing us the opportunity to express our support of HB1035/SB0728. Note: This testimony does not necessarily represent the views of Johns Hopkins University.

While uninsured rates decreased throughout the state, Hispanics continue to have the highest uninsured rates of any racial or ethnic group within the state of Maryland. In 2019, The Kaiser Family Foundation, using the American Community Survey, reported that in Maryland 21.4 percent of Hispanics were uninsured, as compared to 3.8 percent for non-Hispanic whites.¹ This can be attributed in part to the systematic exclusions certain immigrants face from federal health insurance programs. Some immigrants can participate in these programs, but undocumented immigrants and DACA recipients are not eligible.

The Pew Hispanic Research Center estimates that 275,000 undocumented immigrants reside in the state of Maryland as of 2017, accounting for about 5% of Maryland's population.² Undocumented immigrants, regardless of meeting other basic eligibility requirements, are not eligible to buy health coverage from the State's Marketplace. Changing the state law to extend access to health care to immigrants who are not eligible due to status is needed to meet the health needs of the most vulnerable and marginalized populations and improve readiness to face health emergencies.³ Furthermore, expanding access to health insurance will provide an opportunity for individuals to seek timely care and reduce hospital admissions for preventable conditions. Rates of hospital admission for preventable conditions are higher among undocumented immigrants.⁴

This bill will require the Maryland Health Benefit Exchange to establish and implement a qualified state subsidy program that mirrors subsidy eligibility and payment parameters already established for individuals that are currently eligible.

1. Kaiser Family Foundation, Uninsured Rates for the Nonelderly by Race/Ethnicity, <https://www.kff.org/uninsured/state-indicator/nonelderly-uninsured-rate-by-raceethnicity/?currentTimeframe=0&selectedRows=%7B%22states%22:%7B%22maryland%22:%7B%7D%7D%7D&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>
2. Jens Manuel Krogstad, Jeffrey S. Passel, and D'Vera Cohn, 5 Facts About Illegal Immigration in the U.S., (Washington, DC: Pew Research Center, June 2019), <https://www.pewresearch.org/fact-tank/2019/06/12/5-facts-about-illegal-immigration-in-the-u-s/>
3. Kaiser Family Foundation, Health Coverage and Care for Immigrants, (Washington, DC: Kaiser Family Foundation, December 2017), <https://www.kff.org/disparities-policy/fact-sheet/health-coverage-of-immigrants>.
4. Gusmano MK. *Undocumented immigrants in the United States: Use of health care*. Garrison, NY: The Hastings Center, 2012. Available at <http://undocumentedpatients.org/issuebrief/health-care-use/> [Google Scholar]



Center for Salud/Health and Opportunity for Latinos

Johns Hopkins Centro SOL

Mason F. Lord Bldg, Center Tower Suite 4200

5200 Eastern Avenue, Baltimore MD 21224

410.550.1129 | centrosol@jhmi.edu | www.jhcentrosol.org

- This program will expand State premium assistance and cost-sharing reductions to individuals, including minors, who meet other basic eligibility requirements already established, regardless of immigration status.
- This bill is a needed public health intervention to protect the health of one of the most vulnerable populations which will also ensure that our hospitals are able to handle emergencies by reducing hospital admissions of individuals with preventable medical conditions.

For these reasons, Centro SOL supports this bill and urges a favorable report on SB0728 / HB1035.

Signatures:

Joshua M. Sharfstein, MD

Vice Dean for Public Health Practice and Community Engagement

Director, Bloomberg American Health Initiative

Professor of the Practice in Health Policy and Management

Johns Hopkins Bloomberg School of Public Health

Monica Guerrero Vazquez, MS, MPH

Executive Director

Centro SOL

Sarah Polk, MD, ScM

Co-Director, Centro SOL

Assistant Professor of Pediatrics

Johns Hopkins University School of Medicine

Madelin Martinez

MPH Student

Johns Hopkins Bloomberg School of Public Health

Research Assistant, Centro SOL

LWVMD-SB728-Access to Care Act.pdf

Uploaded by: Nora Miller Smith

Position: FAV



TESTIMONY TO THE SENATE FINANCE COMMITTEE

SB 728: Health Insurance- Qualified Resident State Subsidy Program (Access to Care Act)

POSITION: Support

BY: Nancy Soreng, President

DATE: March 2, 2022

The League of Women Voters Maryland supports **Senate Bill 728: Health Insurance- Qualified Resident State Subsidy Program (Access to Care Act)**, which would allow all qualified individuals, regardless of immigration status, to enroll in a Qualified Health Plan offered through the Maryland Health Benefit Exchange. After submission of a Section 1332 State Innovation Waiver under the Affordable Care Act, a Qualified Resident State Subsidy Program would be established to provide premium assistance.

The League supports a system for unauthorized immigrants already in the county to earn legal status, including citizenship, by paying taxes, learning English, studying civics, and meeting other relevant criteria. The League also believes that **every U.S. resident** should have access to a basic level of quality health care at an affordable cost, and that increasing access to health insurance is an important step in preventing and reducing poverty.

Most undocumented immigrants in Maryland have no health insurance. Under current state policy, the estimated 275,000 undocumented immigrants in Maryland (about 5% of the total state population) are unable to purchase health insurance through the Health Benefit Exchange. They are also ineligible for Medicaid or CHIP coverage, and most work at low-paying jobs which do not offer employer-sponsored coverage. Without health insurance, patients can be unable to access

services they need, relying instead on overburdened hospital Emergency Departments for non-emergency care - potentially incurring unmanageable medical debt - or on clinics that may not have the capacity or funds to assist them

Undocumented immigrants have been among the frontline workers hardest hit during the pandemic, as their work, housing, and transportation situations put them at very high risk for exposure.

Undocumented immigrants pay taxes. In Maryland, almost 80% of undocumented immigrants are of working age (16-64). According to the American Immigration Council, they paid \$373.5 million in federal taxes and \$242.3 million in state and local taxes in 2018. Undocumented immigrants contribute to our economy both as consumers and as taxpayers, helping to fund programs such as Medicare and Social Security, despite being unable to benefit from them.

Immigration status is not a barrier to many state benefits.

Undocumented immigrants qualify for in-state tuition and financial assistance in state higher education institutions, and can obtain Maryland driver's licenses. Under the 2021 RELIEF Act, immigrants without social security numbers are eligible for the Maryland Earned Income Tax Credit.

As we enter the third year of the Covid pandemic, it is clearer than ever that we must work on expanding access to health insurance, so that more Marylanders will be able to get the health care they need.

The League urges the committee to give a favorable report to Senate Bill 728.

OAG_FAV_SB0728.pdf

Uploaded by: Patricia O'Connor

Position: FAV

BRIAN E. FROSH
Attorney General



ELIZABETH F. HARRIS
Chief Deputy Attorney General

CAROLYN QUATTROCKI
Deputy Attorney General

STATE OF MARYLAND
OFFICE OF THE ATTORNEY GENERAL

FACSIMILE NO.

(410) 576-6571

WRITER'S DIRECT DIAL NO.

(410) 576-6515

March 2, 2022

To: The Honorable Delores G. Kelley
Chair, Finance Committee

From: The Office of the Attorney General's Health Education and Advocacy Unit

Re: Senate Bill 728 (Health Insurance - Qualified Resident State Subsidy Program
(Access to Care Act): Support

The Office of the Attorney General supports the Access to Care Act which would establish the eligibility to purchase plans on the Maryland Health Benefit Exchange of "qualified residents" regardless of immigration status. The bill also establishes a subsidy program for qualified residents. Current law allows lawfully present noncitizens who are Maryland residents to enroll in a qualified health plan and qualify for subsidies on the Exchange. The Act would extend these benefits to other noncitizen immigrants who meet the definition of qualified residents and would require the Maryland Health Benefit Exchange (MHBE), in consultation with the Insurance Commissioner and as approved by the MHBE Board, to submit a federal State Innovation Waiver application by July 1, 2023. The waiver application must seek to establish a Qualified Resident State Subsidy Program and request federal pass-through funding to allow "qualified residents" to obtain coverage, including State premium assistance and cost-sharing reductions (CSRs), through MHBE. If the waiver is approved, MHBE, in consultation with the Commissioner and as approved by the MHBE Board, must establish and implement the program. Beginning January 1, 2024, funding for the program would be made using any federal pass-through funds received under the federal waiver and any funds designated by the federal or State government to provide health coverage for qualified residents.

"Qualified resident" means an individual, including a minor, regardless of immigration status, who at the time of enrollment (1) is seeking to enroll in a qualified health plan (QHP) through the exchange; (2) resides in the State; (3) is not incarcerated, other than incarceration pending disposition of charges; and (4) is not eligible for the federal advanced premium tax credit (APTC), Medicaid or the Maryland Children's Health Program, Medicare, or employer-sponsored minimum essential coverage.

The Act would effectively provide qualified residents essential access to healthcare services, reduce inequities, decrease emergency care costs and ultimately would improve the health of all Maryland residents.

We ask the committee for a favorable report.

cc: Senator Lam, Sponsor

SB 728 - Access to Care Act.pdf

Uploaded by: Patrick Sadil

Position: FAV

Dear Senate Finance Committee,

This testimony is being submitted by Showing Up for Racial Justice Baltimore, a group of individuals working to move white folks as part of a multi-racial movement for equity and racial justice in Baltimore City, Baltimore County, and Howard County. We are also working in collaboration with CASA de Maryland. I am a resident of District 46. **I am testifying in support of Senate Bill 728: the Access to Care Act.**



The Access to Care Act will open the Maryland Health Benefit Exchange (ACA Coverage) to ALL Marylanders who meet the regular ACA eligibility requirements, regardless of their immigration status. The bill would establish a State Subsidy Program to ensure newly-covered individuals have the funding to receive care. Finally, it would require the state to submit a state innovation waiver (under §1332 of the Affordable Care Act) to allow Maryland to make this change to eligibility.

Right now, more than 275,000 undocumented immigrants in Maryland are ineligible for care through the Maryland Health Exchange. Without affordable health insurance, they experience exorbitant, unexpected medical costs. With such high costs, many may forgo treatment for broken ankles, chronic health issues like diabetes, and immediate, life threatening infections like COVID-19. Immigrants in Maryland, many of whom are Black and Latinx residents, become sicker, are hospitalized at higher rates, and die younger as they are forced to face life or death situations due to their exclusion from programs like the Affordable Care Act. As the pandemic continues to surge on, disproportionately impacting immigrant communities, ensuring that all Marylanders have access to care is more urgent than ever.

Our state and communities become stronger and more resilient when we expand health care coverage. Benefits of expanded coverage include:

- Increased access to primary care physicians that results in earlier detection of health problems and more stable long-term management of chronic diseases; this decreases the number of people who die at earlier ages from preventable causes.
- Greater access to primary care clinics and medical practices that results in reduced use of emergency departments (ED); this decreases the number seeking care at EDs and reduces the cost of ED care for all of us.
- Access to care that provides more opportunities for COVID-19 testing and vaccination - a goal shared by both Governor Hogan and the Maryland General Assembly.

Research has shown that the ACA works as intended; a 2017 study found the ACA increased insurance coverage, access to care, and preventative care for its target population.¹ By denying undocumented immigrants access, we are denying them a service shown to improve health.

The immigrant community has worked tirelessly on the frontlines of the pandemic and has paid over \$240 million in federal, state, and local taxes. Our Maryland government must take steps to protect the health and safety of the immigrant community. Many states across the country have established comprehensive programs to extend coverage to immigrants regardless of their immigration status, yet Maryland has yet to take action in protecting their most vulnerable population. It is for these reasons that I am encouraging you to vote **in support of the Access to Care Act (SB 728).**

Thank you for your time, service, and consideration.

Sincerely,
Patrick Sadil, PhD
1637 Fleet Street, FL 1
Baltimore MD 21231
Showing Up for Racial Justice Baltimore

SB0728_CC_Vaughan_FAV.pdf

Uploaded by: Regan Vaughan

Position: FAV

SB 728
Health Insurance – Qualified Resident State Subsidy Program
(Access to Care Act)

Health and Government Operations Committee

March 2, 2022

Favorable

Catholic Charities of Baltimore supports SB 728 which would require the State to apply for a State Innovation Waiver to establish a program that would permit the state to establish a qualified resident state subsidy program and to allow Marylanders, regardless of immigration status, to access healthcare insurance through the exchange.

Inspired by the Gospel mandates to love, serve and teach, Catholic Charities provides care and services to improve the lives of Marylanders in need. For almost 100 years, Catholic Charities has operated programs that allow Marylanders to age with dignity, obtain empowering careers, heal from trauma and addiction, secure stable housing and welcome new neighbors. We recognize the immense individual and public health benefits that occur when all residents have access to healthcare services.

In Maryland, over 275K undocumented immigrants are ineligible for care through the Maryland Health Exchange. Multiple states have established comprehensive care programs to extend coverage to immigrants regardless of their immigration status. This has had the highest impact on Black and Latino residents, who have become sicker, hospitalized at higher rates, and die younger as they are forced to face life or death situations due to their exclusion in programs such as the Affordable Care Act.

The Access to Care Act is a step toward ending healthcare disparities for immigrant communities in Maryland. It would ensure access to primary care, resulting in higher early detection rates and better long-term management of chronic diseases and serious illnesses. It would decrease the amount of costly emergency room visits and mortality rates.

For the reasons listed above, Catholic Charities of Baltimore appreciates your consideration, and urges the committee to issue a favorable report for SB 728.

Submitted By: Regan Vaughan, Director of Advocacy

2022 ACNM SB 728 Senate Side.pdf

Uploaded by: Robyn Elliott

Position: FAV



Committee: Senate Finance Committee

Bill Number: SB 728 - Health Insurance - Qualified Resident State Subsidy Program

Hearing Date: March 2, 2022

Position: Support

The American College of Nurse Midwives (ACNM) supports *Senate Bill 728 – Health Insurance – Qualified Resident State Subsidy Program*. The bill is important to continue Maryland’s progress in lowering the rate of uninsured. There are communities who do not qualify for coverage assistance under federal rules. This legislation would create a state subsidy program to make insurance premiums more affordable under the Maryland Health Benefit Exchange for qualified applicants. Insurance coverage would improve access to care and help Maryland address health disparities. For example, Maryland’s maternal mortality rates reflects a widening gap between White non-Hispanic women and women of other backgrounds.ⁱ

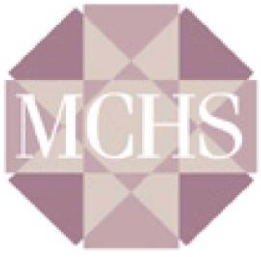
If we can provide any additional information to support this bill, please contact us through Robyn Elliott at relliott@policypartners.net. We ask for a favorable report on this bill.

ⁱ <https://health.maryland.gov/phpa/mch/Documents/MMR/HG%20%C2%A7%C2%A72013-1207%2013-1208%20and%20%C2%A713-1212%20-%20Maryland%20Maternal%20Mortality%20Review%202020.pdf>

2022 MCHS SB 728 Senate Side.pdf

Uploaded by: Robyn Elliott

Position: FAV



Maryland Community Health System

Committee: Senate Finance Committee

Bill Number: SB 725 - Health Insurance - Qualified Resident State Subsidy Program

Hearing Date: March 2, 2022

Position: Support

Maryland Community Health System (MCHS) supports *Senate Bill 725 – Health Insurance – Qualified Resident State Subsidy Program*. The bill advances coverage for individuals who are low-income but not qualified for coverage programs because of factors such as immigration status. The Maryland Health Benefit Exchange would establish a subsidy program to support enrollment of these individuals into qualified health plans.

MCHS is a network of federally qualified health centers focused on providing somatic, behavioral, and dental health services to underserved communities. We have seen the impact of expansion of insurance options under the Affordable Care Act. The number of uninsured Marylanders has been reduced by half from about 12% to 6%.ⁱ To further reduce this number, we need to expand opportunities for individuals who are low-income but do not qualify for other state and federal programs. Therefore, we strongly support this legislation that will utilize a state subsidy to make qualified health plans more affordable for qualified applicants.

We ask for a favorable report. If we can provide any further information, please contact Robyn Elliott at relliott@policypartners.net.

ⁱ <https://www.marylandhealthconnection.gov/10th-anniversary-of-the-affordable-care-act/>

2022 Moveable Feast SB 728 Senate Side.pdf

Uploaded by: Robyn Elliott

Position: FAV



Committee: Senate Finance Committee

Bill Number: Senate Bill 728 - Health Insurance - Qualified Resident State Subsidy Program (Access to Care Act)

Hearing Date: March 2, 2022

Position: Support

Moveable Feast strongly supports *Senate Bill 728 – Health Insurance – Qualified Resident State Subsidy Program*. The bill would establish a state subsidy program to make insurance more affordable for people who do not qualify for federal coverage assistance because of immigration status. The program would be managed by the Maryland Health Benefit Exchange.

Moveable Feast’s mission is to improve the health and quality of life of people with serious illnesses through nutritional counseling and medically-tailored meals. We are committed to health equity for all communities in Maryland. Individuals should have access to insurance coverage regardless of immigration status. This bill advances health equity by extending Medicaid coverage to individuals who are pregnant and from immigrant communities.

We ask for a favorable report. If any additional information would be helpful, please contact Robyn Elliott at relliott@policypartners.net.

BMNCBV_SB728 FAV Final.pdf

Uploaded by: Sandra Conner

Position: FAV

**Baptist Ministers' Night Conference of Baltimore
and Vicinity (BMNCBV)**

5405 York Road, Baltimore, Maryland 21212, (443) 386.4739



Testimony in SUPPORT of SB728

Access to Care Act
Senate Finance Committee

Rev. Dr. Sandra Conner

**President Baptist Ministers' Night Conference of Baltimore & Vicinity (BMNCBV)
March 2, 2022**

Dear Members of the Committee:

BMNCBV is submitting this testimony in support for SB728, Access to Care Act, which would open up the Maryland Health Benefit Exchange (ACA Coverage) to all Marylanders who meet the regular ACA eligibility, regardless of immigration status. This bill would also create a subsidy program with the funds necessary to cover new applicants.

BMNCBV is an organization that strives to equip faith leaders with resources to do effective health ministries to keep themselves and the people they serve healthy and out of the hospital. We continually seek opportunities to improve the quality of life for individuals and communities.

We acknowledge that Maryland has some of the best health systems in the country; however, we believe there is still a need to make greater investments to improve access to health coverage and inequities. If SB728 passes, it can reduce the number of undocumented immigrants who are ineligible for care through the Maryland Health Exchange, as well as improve the quality healthcare for all, in particular, Black and Latino residents, who are confronted with greater health challenges such as diabetes, and hypertension, that often lead to higher hospitalization rates, and more deathly situations due to their exclusion in programs such as the Affordable Care Act.

BMNCBV will make it one of our top priorities for the 2022 Maryland General Assembly session. We pray that our legislators will heed our call. We thank you in advance for your actions towards SB728

Rev. Dr. Sandra Conner
revdrconner@gmail.com

SB728_FAV_MCBV (1) Final.pdf

Uploaded by: Sandra Conner

Position: FAV

MINISTERS' CONFERENCE OF BALTIMORE AND VICINITY



Testimony in SUPPORT of SB728

Access to Care Act
Senate Finance Committee

**Bishop Reginald Kennedy,
President Ministers' Conference of Baltimore & Vicinity (MCBV)**

March 2, 2022

Dear Members of the Committee:

MCBV is submitting this testimony in support for SB728, Access to Care Act, which would open up the Maryland Health Benefit Exchange (ACA Coverage) to all Marylanders who meet the regular ACA eligibility, regardless of immigration status. This bill would also create a subsidy program with the funds necessary to cover new enrollees.

The Ministers' Conference of Baltimore & Vicinity is an organization comprised of more than 150 congregations whose focus is shifting more and more on caring for the "holistic" needs, in particular health care, for its members and the communities it serves. Our Civic Action Committee has an initiative, "And the Church Shall Lead", and one of its goals is to eradicate health disparities/inequalities.

We support this bill because too many Marylanders still do not have access to quality, affordable health care, contributing to dire health inequities. This bill would expand access to health care and produce better outcomes for the people we serve. We also believe that the Access to Care Act is a step toward ending healthcare disparities for immigrant communities in Maryland. It would ensure access to primary care, resulting in higher early detection rates and better long-term management of chronic diseases and serious illnesses. It would decrease the amount of costly emergency room visits and mortality rates. We urge you to support SB728.

Thank you in advance for all you do to get this important bill, SB728, passed.

Bishop Reginald Kennedy, bishop@GTBCBaltimore.org

Rev. Dr. Sandra Conner, revdrconner@gmail.com (MCBV Correspondence Secretary)

Minsters' Conference of Baltimore and Vicinity
3100 Walbrook Avenue | Baltimore, MD 21216
Phone: 410.383.9393 | Email: ministersconferencebaltimore1@gmail.com

SB 728 - Access to Care Act.pdf

Uploaded by: Sarah Johnson

Position: FAV

Dear Senate Finance Committee,

This testimony is being submitted by Showing Up for Racial Justice Baltimore, a group of individuals working to move white folks as part of a multi-racial movement for equity and racial justice in Baltimore City, Baltimore County, and Howard County. We are also working in collaboration with CASA de Maryland. I am a resident of District 41. **I am testifying in support of Senate Bill 728: the Access to Care Act.**



The Access to Care Act will open the Maryland Health Benefit Exchange (ACA Coverage) to ALL Marylanders who meet the regular ACA eligibility requirements, regardless of their immigration status. The bill would establish a State Subsidy Program to ensure newly-covered individuals have the funding to receive care. Finally, it would require the state to submit a state innovation waiver (under §1332 of the Affordable Care Act) to allow Maryland to make this change to eligibility.

Right now, more than 275,000 undocumented immigrants in Maryland are ineligible for care through the Maryland Health Exchange. Without affordable health insurance, they experience exorbitant, unexpected medical costs. With such high costs, many may forgo treatment for broken ankles, chronic health issues like diabetes, and immediate, life threatening infections like COVID-19. Immigrants in Maryland, many of whom are Black and Latinx residents, become sicker, are hospitalized at higher rates, and die younger as they are forced to face life or death situations due to their exclusion from programs like the Affordable Care Act. As the pandemic continues to surge on, disproportionately impacting immigrant communities, ensuring that all Marylanders have access to care is more urgent than ever.

Our state and communities become stronger and more resilient when we expand health care coverage. Benefits of expanded coverage include:

- Increased access to primary care physicians that results in earlier detection of health problems and more stable long-term management of chronic diseases; this decreases the number of people who die at earlier ages from preventable causes.
- Greater access to primary care clinics and medical practices that results in reduced use of emergency departments (ED); this decreases the number seeking care at EDs and reduces the cost of ED care for all of us.
- Access to care that provides more opportunities for COVID-19 testing and vaccination - a goal shared by both Governor Hogan and the Maryland General Assembly.

Research has shown that the ACA works as intended; a 2017 study found the ACA increased insurance coverage, access to care, and preventative care for its target population.¹ By denying undocumented immigrants access, we are denying them a service shown to improve health.

The immigrant community has worked tirelessly on the frontlines of the pandemic and has paid over \$240 million in federal, state, and local taxes. Our Maryland government must take steps to protect the health and safety of the immigrant community. Many states across the country have established comprehensive programs to extend coverage to immigrants regardless of their immigration status, yet Maryland has yet to take action in protecting their most vulnerable population. It is for these reasons that I am encouraging you to vote **in support of the Access to Care Act (SB 728).**

Thank you for your time, service, and consideration.

Sincerely,

Sarah Johnson
1 Merryman Court
Baltimore, MD 21210
Showing Up for Racial Justice Baltimore

SB 0728_Crinion_Testimony_03-02-2022.pdf

Uploaded by: Sophie Crinion

Position: FAV

March 2, 2022

TO: Members of the Senate Finance Committee

FROM: Sophie Crinion, MD

RE: Senate Bill 728 – Qualified Resident State Subsidy Program

POSITION: SUPPORT

Chair Dolores Kelly, Vice Chair Feldman, and members of the committee, I am writing to you in full support of Senate Bill (SB) 728, The Access to Care Act because this bill will allow hardworking members of our community to access health care and in doing so strengthen their families and communities.

One of my patients who would benefit from this law is Ms. R. I first met Ms. R shortly after the birth of her youngest child, after she suffered a complication of pregnancy that caused her kidneys to fail. Ms. R was hardworking - she cleaned houses and was raising her family in Baltimore. We planned to start her on peritoneal dialysis, a form of dialysis that is cheaper and can be done at home to minimize disruption to work and child care. Starting this form of dialysis typically does not require a hospital stay. However, Ms. R was uninsured and the cost of dialysis of any kind is unaffordable as an out of pocket expense. She ended up staying hospitalized for over a week, while her team of doctors and social workers navigated a bureaucratic nightmare. She desperately wanted to go home to be with her newborn child who had already been discharged from the nursery. But if we had sent her home without dialysis, she would have died.

Without insurance, Ms. R and her newborn missed the critical period of bonding right after birth. She had a wholly avoidable prolonged and expensive hospital stay, because without insurance, her doctors had no ability to provide the care she needed. Her whole family suffered during this time. Getting dialysis without insurance is an ongoing struggle.

Senate bill 728 will allow people like Ms. R the opportunity to access essential health care. When people like Ms. R are able to stay healthy, it has a ripple effect – her newborn, her other children, the community where she works and lives – all stand to benefit. I urge you to support Senate bill 728.

SB 728_R. Jones 1199SEIU_FAV Final.pdf

Uploaded by: Stephanie Anderson

Position: FAV



**Testimony of Ricarra Jones, Political Director of 1199SEIU on
SB 728 Health Insurance – Qualified Resident State Subsidy Program
(Access to Care Act)**

Position: FAVORABLE

March 2, 2022

Dear Chairwoman Delores G. Kelley and Members of the Finance Committee:

1199SEIU Healthcare Workers East is the largest healthcare union in the country with, with over 450,000 members throughout Massachusetts, New York, New Jersey, Maryland, Florida and Washington, D.C. **We fully support SB 728.**

SB 728 Health Insurance – Qualified Resident State Subsidy Program (Access to Care Act) would allow certain noncitizen residents of Maryland to enroll in qualified health plans offered through the Maryland Health Benefits Exchange regardless of their immigration status.

The Access to Care Act provides that “qualified residents”, defined as individuals and minors regardless of their immigration status, to enroll in a qualified health plan through the Exchange provided they meet certain requirements.

Notably, the Access to Care Act would require funding for the establishment and operation of the Qualified Resident State Subsidy Program. The Qualified Resident State Subsidy Program would provide State premium assistance and cost-sharing reductions in order to make individual market health insurance coverage offered through the Exchange affordable to “qualified residents”.

Healthcare costs have only gone up in recent years and often are a tremendous burden on our most vulnerable residents. Individuals and families living in Maryland as noncitizens face even greater obstacles to obtaining important healthcare services and medical assistance.

Without this Bill, noncitizen residents continue to be barred from obtaining crucial health care services due to their immigration status, to the detriment of many individuals and families who live and work in our communities. Protecting these vulnerable residents should be a priority for Maryland.

For these reasons, we **SUPPORT SB 728** and ask for a **FAVORABLE** report.

Sincerely,

Ricarra Jones
Maryland/DC Political Director
1199SEIU United Healthcare Workers- East
Cell: 443-844-6513

SB 728 - Access to Care Act.docx.pdf

Uploaded by: Tamara Todd

Position: FAV

Dear Senate Finance Committee,

This testimony is being submitted by Showing Up for Racial Justice Baltimore, a group of individuals working to move white folks as part of a multi-racial movement for equity and racial justice in Baltimore City, Baltimore County, and Howard County. We are also working in collaboration with CASA de Maryland. I am a resident of **District 10**. **I am testifying in support of Senate Bill 728: the Access to Care Act.**



The Access to Care Act will open the Maryland Health Benefit Exchange (ACA Coverage) to ALL Marylanders who meet the regular ACA eligibility requirements, regardless of their immigration status. The bill would establish a State Subsidy Program to ensure newly-covered individuals have the funding to receive care. Finally, it would require the state to submit a state innovation waiver (under §1332 of the Affordable Care Act) to allow Maryland to make this change to eligibility.

Right now, more than 275,000 undocumented immigrants in Maryland are ineligible for care through the Maryland Health Exchange. Without affordable health insurance, they experience exorbitant, unexpected medical costs. With such high costs, many may forgo treatment for broken ankles, chronic health issues like diabetes, and immediate, life threatening infections like COVID-19. Immigrants in Maryland, many of whom are Black and Latinx residents, become sicker, are hospitalized at higher rates, and die younger as they are forced to face life or death situations due to their exclusion from programs like the Affordable Care Act. As the pandemic continues to surge on, disproportionately impacting immigrant communities, ensuring that all Marylanders have access to care is more urgent than ever.

Our state and communities become stronger and more resilient when we expand health care coverage. Benefits of expanded coverage include:

- Increased access to primary care physicians that results in earlier detection of health problems and more stable long-term management of chronic diseases; this decreases the number of people who die at earlier ages from preventable causes.
- Greater access to primary care clinics and medical practices that results in reduced use of emergency departments (ED); this decreases the number seeking care at EDs and reduces the cost of ED care for all of us.
- Access to care that provides more opportunities for COVID-19 testing and vaccination - a goal shared by both Governor Hogan and the Maryland General Assembly.

Research has shown that the ACA works as intended; a 2017 study found the ACA increased insurance coverage, access to care, and preventative care for its target population.¹ By denying undocumented immigrants access, we are denying them a service shown to improve health.

The immigrant community has worked tirelessly on the frontlines of the pandemic and has paid over \$240 million in federal, state, and local taxes. Our Maryland government must take steps to protect the health and safety of the immigrant community. Many states across the country have established comprehensive programs to extend coverage to immigrants regardless of their immigration status, yet Maryland has yet to take action in protecting their most vulnerable population. It is for these reasons that I am encouraging you to vote **in support of the Access to Care Act (SB 728)**.

Thank you for your time, service, and consideration.

Sincerely,
Tamara Todd
221 Northway Rd, Reisterstown, MD, 21136
Showing Up for Racial Justice Baltimore

SB728_MCHI_FAV.pdf

Uploaded by: Vincent DeMarco

Position: FAV



2600 ST. PAUL STREET BALTIMORE, MD 21218

P: (410) 235-9000

F: (410) 235-8963

WWW.HEALTHCAREFORALL.COM

TESTIMONY IN SUPPORT OF SENATE BILL 728

Health Insurance- Qualified Resident State Subsidy Program (Access to Care Act)

Before the Senate Finance Committee

By Vinny DeMarco, President, Maryland Citizens' Health Initiative, Inc.

March 2, 2022

Chair Kelly, Vice Chair Feldman and Members of the Senate Finance Committee, thank you for this opportunity to testify in support of Senate Bill 728. We especially thank Senator Lam for sponsoring this critical legislation.

It is our mission to achieve access to quality, affordable health care for all Marylanders. While the state has recently made historic gains in health insurance coverage,¹ Black or Latino consumers remain disproportionately represented among the uninsured.²

Immigration status can be a significant barrier to coverage.³ In Maryland, CASA reports that over 275,000 undocumented immigrants are ineligible for care through Maryland Health Connection. This has had the highest impact on Black and Latino residents, who have become sicker, hospitalized at higher rates, and die younger due to their exclusion from safety net programs such as the Affordable Care Act and Medicaid.

The Access to Care Act calls on the state to apply for a waiver from CMS to allow all Marylanders who meet regular ACA eligibility to enroll into health insurance coverage, regardless of immigration status. This bill would also create a subsidy program with the funds necessary to cover new enrollees.

The Access to Care Act is a step toward ending healthcare disparities for immigrant communities in Maryland. It would ensure access to primary care, resulting in higher early detection rates and better long-term management of chronic diseases and serious illnesses. It would decrease the amount of costly emergency room visits and mortality rates. Further, removing immigration status as a barrier to health insurance coverage would establish a more fair and just health benefit exchange.

We urge a favorable report for Senate Bill 728.

¹ <https://www.marylandhbe.com/wp-content/uploads/2022/01/Feb.-28-OE-Extension-Press-Release.pdf>

² <https://aspe.hhs.gov/sites/default/files/private/pdf/265041/trends-in-the-us-uninsured.pdf>

³ <https://www.kff.org/racial-equity-and-health-policy/fact-sheet/health-coverage-of-immigrants/>

12 - SB 728 - FIN - MHBE - LOI.docx.pdf

Uploaded by: State of Maryland (MD)

Position: INFO

March 2, 2022

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

Re: SB 728 – Health Insurance – Qualified Resident State Subsidy Program (Access to Care Act) - Letter of Information

Dear Chair Kelley and Committee Member,

The Maryland Health Benefit Exchange (MHBE) respectfully submits this letter of information on Senate Bill (SB) 728 – Health Insurance – Qualified Resident State Subsidy Program (Access to Care Act). SB 728 would establish and fund a subsidy program for populations who are currently ineligible for coverage through existing programs. MHBE would apply for a federal 1332 innovation waiver to allow these populations to enroll in Qualified Health Plans (QHP) through Maryland Health Connection (MHC).

In the last ten years, Maryland’s uninsured rate has fallen in half and stands at about six (6) percent as of 2019. Maryland has been a national leader in working to reduce the uninsured rate, including by implementing a state-based health insurance marketplace, launching the State Reinsurance Program which has reduced individual market premiums by more than 30 percent since 2019, enacting the Easy Enrollment Program to allow uninsured individuals to get connected to health coverage by checking a box on their state tax return, and instituting state premium assistance for young adults starting this year. However, as of 2019 approximately 357,000 individuals remain uninsured in Maryland, approximately 35 percent of whom are either ineligible for coverage through Medicaid or the individual market due to immigration status (about 115,900 individuals) or ineligible for federal financial assistance with health insurance premiums due to the federal family glitch (about 7,470 individuals).¹

We estimate that a Qualified Resident State Subsidy Program, if funded to allow provision of state subsidies to these individuals equivalent to existing federal premium assistance, could bring down the state’s uninsured rate by approximately 0.6 percentage points, to about 5.4 percent. Between 2024 and 2028, we expect that such a program would enroll about 29,000 - 52,500

¹ Family glitch: Individuals with a family member whose employer offers affordable self-only coverage (as determined by federal regulation) but not affordable family coverage are ineligible for exchange subsidies and may have difficulty affording health coverage. These individuals are referred to as falling within the “family glitch” in the Affordable Care Act.

individuals per year. These uptake estimates start lower and increase each year as awareness of the program grows.

Assuming that the state subsidy amount would be commensurate with the federal Advanced Premium Tax Credit (APTC), actuarial analysis estimates that the net cost to the state of the program after federal pass-through funding would be between \$90 million and \$190 million per year between 2024 and 2028.² Before federal pass-through funding, the cost is estimated at \$105 to \$222 million per year. We note that federal pass-through fundings would depend on federal approval of a federal 1332 waiver. The table below details the expenditure projections by year.

The analysis also shows that this subsidy program could reduce premiums for all consumers in the individual market. The last row of the table below shows estimated premium reductions of about 2 to 4 percent per year. It is worth noting, however, that without a subsidy, enrollment numbers and premium impact of a waiver alone would be much lower than they would be with a subsidy.

Table 2: Cost and Impact by Eligibility Scenario of Potential State Subsidy Program for Ineligible Individuals

Eligibility Scenario		Year				
Full population		2024	2025	2026	2027	2028
	Enrollment	29,413	45,077	50,342	51,380	52,541
	Gross cost	\$105,061,731	\$167,460,606	\$192,601,978	\$206,682,398	\$222,253,490
	Fed. pass-through	\$14,812,663	\$22,473,808	\$27,188,740	\$30,508,782	\$32,731,635
	Net cost to state	\$90,249,068	\$144,986,797	\$165,413,238	\$176,173,616	\$189,521,964
	Premium impact	-2.3%	-3.3%	-3.8%	-3.8%	-3.9%

MHBE submitted a Joint Chairmen’s Report in November 2021 that contains detailed actuarial analysis for a waiver and subsidy model like the one put forth by SB 728. The report also includes information on existing resources for discounted healthcare services for these ineligible

² A key feature of the 1332 innovation waiver is that states receive federal “pass-through” funds equal to the amount that the waiver program saves the federal government. As shown in the table above, we estimate that MHBE would receive federal pass-through amounts between \$14 million and \$32 million per year if a state subsidy commensurate with APTC is put in place.

individuals in Maryland and describes actions other states are taking or exploring to provide coverage to similarly situated individuals in their states. The report is available here:

[https://mlsd.ent.sirsi.net/client/en_US/default/search/detailnonmodal/ent:\\$002f\\$002fSD_ILS\\$002f0\\$002fSD_ILS:54246/one](https://mlsd.ent.sirsi.net/client/en_US/default/search/detailnonmodal/ent:$002f$002fSD_ILS$002f0$002fSD_ILS:54246/one).

For further discussions or questions on SB 728, please contact Johanna Fabian-Marks, Director of Policy and Plan Management at johanna.fabian-marks@maryland.gov.

Sincerely,



Michele Eberle
Executive Director