

HB1035, Health Insurance - Qualified Resident State Subsidy Program (Access to Care Act)
Testimony in **Support**

To: Chair Pendergrass and members of the House Health and Government Operations Committee
From: Arielle Juberg

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 HB1035, 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 treatment. 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** HB1035. Thank you for your time, consideration, and service.

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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>