



February 20, 2024

The Honorable Pamela Beidle
Chair, Finance Committee
3 East, Miller Senate Office Building
Annapolis, Maryland 21401

The Honorable Katherine Klausmeier
Vice Chair, Finance Committee
3 East, Miller Senate Office Building
Annapolis, Maryland 21401

Dear Chair Beidle and Vice Chair Klausmeier,

I would like to express my full support for *Senate Bill 705 - Health Insurance - Qualified Resident Enrollment Program (Access to Care Act)*.

Since the passage of the Affordable Care Act, Maryland has stepped up as a national leader in working towards the goal that all residents have access to affordable healthcare. Maryland has successfully set up the Maryland Health Benefit Exchange (MHBE), and created a number of programs to make access easy for Marylanders to purchase the right healthcare plan for themselves and their families. While these programs have led to the percentage of Marylanders who are uninsured to decline from 13% to 6%, there is still more work to be done.

The State of Maryland spends between \$120 and \$170 million every year in uncompensated care for emergency department services for residents who do not have insurance. In many cases, these Marylanders are uninsured because the commercial market for insurance can be extremely confusing and burdensome to navigate, particularly for residents whose first language may not be English. Instead, they must resort to using emergency departments for basic healthcare needs as they do not have an established relationship with a primary care physician.

Ultimately, that \$120 to \$170 million in uncompensated care costs has an even larger price tag as it negatively impacts the insurance rates for all Marylanders. That cost, plus the fact that Maryland emergency department wait times are among the highest in the country, indicates that there is a large portion of the population that still has an issue with accessing affordable health insurance.

The Access to Care Act will help to rectify this issue by establishing an additional program to reach out to the 350,000 residents who still do not have access to healthcare, a third of which are undocumented and many of whom do not speak English as their primary language.

The Access to Care Act will help decrease costs over all and expand healthcare access to some of our most vulnerable populations. This bill would require that the MHBE request a 1332 waiver to allow Maryland residents who are undocumented to purchase insurance on the Exchange. Once the waiver is accepted, undocumented Marylanders would have, for the first time, access to the Exchange in order to more easily search for health insurance for them and their families. The Exchange has the support resources, often in a variety of languages, that will allow them to more easily search for and purchase health insurance, including Value Plans that are more cost effective.

There are additional benefits to Marylanders as a whole in making this change, as the more health insurance beneficiaries who use the Exchange, the more stabilized the rates on the Exchange become for all who use it. And the more Marylanders who are insured and establish preventative care with a primary care physician, the less our emergency departments will be overused and put under strain.

Now more than ever as we continue to move forward from the pandemic and learn how to live with COVID-19, it is imperative that we continue to invest in our healthcare infrastructure and increase access, especially for our most vulnerable populations.

I strongly urge this committee to give *Senate Bill 705 - Health Insurance - Qualified Resident Enrollment Program (Access to Care Act)* the highest consideration.

Sincerely,



David Trone
Member of Congress