



Testimony in SUPPORT of SB 705
Health Insurance - Qualified Resident Enrollment Program (Access to Care
Act)
Senate Finance Committee

February 21, 2024

Dear Honorable Chair Beidle and Members of the Committee,

CASA is pleased to offer favorable testimony in strong support of SB 705 - Health Insurance - Qualified Resident (Access to Care Act). CASA is a national powerhouse organization building power and improving the quality of life in working-class: Black, Latino/a/e, Afro-descendent, Indigenous, and Immigrant communities.

With a membership of over 155,000 members, CASA creates change with its power-building model blending human services, community organizing, and advocacy to serve the full spectrum of the needs, dreams, and aspirations of members. For nearly forty years, CASA has employed grassroots community organizing to bring our communities closer together and fight for justice, while simultaneously providing much-needed services, helping to ensure that low-income immigrants can live rich and full lives.

CASA operates a robust Health and Human Services Department, where our offices work closely with thousands of Marylanders who are uninsured, the majority of whom are undocumented and live in mixed-status households. The CASA health team helps thousands of families, including pregnant individuals, navigate city, state, and federal health programs. Most recently, our health team in coordination with our state's Medicaid program, has answered the call to support newly eligible pregnant immigrant individuals to enroll in Medicaid. The recent expansion is a result of the Healthy Babies Equity Act passed by this committee. SB 705 is another critical piece of legislation that seeks to expand immigrant healthcare.

SB 705 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. At no fiscal burden to the state, the bill allows the Maryland Department of Health to submit a state innovation waiver to change the immigration status eligibility requirement for coverage through the Maryland Health Connection. Despite the deep contributions to Maryland that undocumented families have made to our state,

there are over 250,000 immigrants who worked on the frontlines during the pandemic and who paid 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 Medicine¹ estimates that 18,000 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 the quality of life, reduce the likelihood of premature death, and increase life expectancy.² Under the Biden Administration, Washington state has been the latest state to submit and be approved for such a waiver. With upcoming elections and uncertainty about who will lead our federal government, Maryland needs to act now.

In Maryland, there are approximately 8,000 DACA recipients, many of whom lack employer-sponsored health insurance and remain uninsured due to immigration-related limitations in the Affordable Care Act. Despite many of them having grown up in Maryland, graduated from its public schools and universities, and being integral members of our communities, they still encounter discrimination in the insurance market because of their immigration status. The successful passage of SB 706 would mean that DACA-mented individuals would have access to a more simplified shopping experience and technology to help them identify and decide on the best plan for their needs. Many immigrant parents have children who are U.S. citizens and are insured, the successful passage of SB 705 would allow individuals in mixed-status households to enroll in the same plans leading to cost savings on premiums for families. Currently, many individuals, including children, in mixed-status households may forego care because of the barriers their undocumented caretakers may face. Removing the immigration requirement will ensure that more people, regardless of their immigration status, get healthcare.

Over the last several decades, the need for healthcare coverage has been a consistent priority for Maryland's immigrant community. SB 705 is a crucial step in addressing access to care for all Marylanders. CASA's membership, unfortunately, is overflowing with stories of families who due to their lack of access to care have foregone routine preventative care, and ended up receiving the most expensive type of care there is, emergency room care. This trend is unsustainable not only for families, who face mounting medical debt but also for our hospital system, which grapples with unprecedentedly long ER wait times and expends millions on uncompensated care annually.

Maryland can lead by being the first state to expand healthcare through the Affordable Care Act on the East Coast. In July 2023, as part of continued statewide efforts to improve

¹ <https://www.commonwealthfund.org/blog/2019/insurance-coverage-saves-lives>

² <https://www.healthypeople.gov/2020/leading-health-indicators/2020-lhi-topics/Access-to-Health-Services>

maternal and child health, Maryland Medicaid began providing comprehensive coverage to non-citizen pregnant Marylanders, who would otherwise be eligible for Medicaid or Maryland Children's Health Program (MCHP) if not for their immigration status. The Maryland Medicaid team was awarded the National Association of Medicaid Directors Spotlight Award for their work in trying to improve population health via increased access to necessary care.³ **SB 705, a waiver submission legislation that does not have any impact on the budget**, will ensure that Maryland continues to be a national leader in healthcare expansion.

Several states have expanded coverage to undocumented immigrants. California, Massachusetts, Illinois, and the District of Columbia have established comprehensive programs to extend coverage to 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 Centers⁴ 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 condition, if it is determined that it was not, the cost of the visit is entirely the individual's responsibility.

While CASA often refers uninsured individuals to FQHCs and works closely with many immigrant-serving clinics, our office continues to see cases of sick individuals being turned away due to long waiting times for an available appointment, resulting in delayed delivery of care and adding 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

³ <https://medicaiddirectors.org/resource/maryland-medicare-honored-with-2023-spotlight-award/>

⁴ https://npidb.org/organizations/ambulatory_health_care/federally-qualified-health-center-fqhc_261qf0400x/md/

are not enough to provide the comprehensive care needed by the entire population of uninsured, undocumented individuals.

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 705.**