

**Testimony in SUPPORT of HB 728**  
Health Insurance - Qualified Resident Enrollment Program (Access to Care  
Act)  
House Health and Government Operations Committee

February 8, 2024

Dear Honorable Chair Peña-Melnyk, and Members of the Committee,

My name is Ria Arora and I am a resident of District 46. I am a medical student at the Johns Hopkins University School of Medicine and have lived in Maryland for four years. I am submitting this testimony in support of HB 728- Health Insurance - Qualified Resident Enrollment Program (Access to Care Act). The views expressed here are my own and do not necessarily reflect the policies or positions of Johns Hopkins University/Johns Hopkins Health System.

Prior to starting medical school, I lived in Maryland for four years while attending Johns Hopkins University for my undergraduate studies. While at Hopkins, I spent two years as a patient advocate at a pediatric clinic, connecting uninsured Latino families to resources related to social determinants of health. Last year, I moved to Washington, DC and served as an AmeriCorps fellow at La Clínica del Pueblo in the Gender and Health Program. I connected Latina women who are survivors of gender-based violence to community-based resources, legal, and medical services. In returning to Johns Hopkins for medical school, I have continued to work with Latinx families as part of the Refugee Health Program, providing support to asylum seekers in conjunction with the Asylee Women's Enterprise. This year marks my fourth year supporting Latino communities in Maryland.

**HB 728 addresses critical health disparities faced by the immigrant community in Maryland by expanding the Affordable Care Act to all Marylanders, regardless of their immigration status, by a simple act of requiring MHBE to request a 1332 waiver to allow Maryland residents, regardless of immigration status, to purchase insurance on the Exchange.** HB 728 represents an important milestone in our journey toward creating a resilient healthcare system.

The Affordable Care Act has allowed more than 28 million people across the country to gain access to affordable health care. In Maryland, since the establishment of the Maryland Health Benefit Exchange (MHBE) in 2011, which allows individuals and small businesses to purchase affordable health coverage, **our uninsured rate has almost halved from 12% to 6%.<sup>1</sup>**

Although Maryland has taken bold steps to decrease the uninsured rate, a staggering 30% of the uninsured are denied healthcare coverage solely because of their immigration status. This

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<sup>1</sup> <https://www.americashealthrankings.org/explore/annual/measure/HealthInsurance/state/MD>

systematic and structural inability to access routine, comprehensive, affordable care has led uninsured Marylanders to seek out the most expensive type of care there is: emergency departments. When individuals have access to primary care, it results in higher rates of early detection and better long-term management of chronic diseases and serious illnesses, a decrease in mortality rates, and an increase in overall healthier and wealthier communities.

Having worked with Latinx communities for four years, I have witnessed these adverse consequences firsthand. As a patient advocate, I remember assisting a 45 year old uninsured female immigrant with making a dental appointment, having already had several teeth fall out. At La Clínica, I saw these disparities with my clients living in MD. I worked with a 26 year old uninsured female immigrant experiencing a high risk pregnancy. In a call with the hospital, I was told that because she has no health coverage, a surgery she might need would cost \$50,000 to \$60,000. Now, as a medical student in Maryland, I continue to see these gaps in access to care with the Refugee Health Partnership. I am currently working with a 33 year old uninsured female immigrant who is undergoing treatment for colon cancer. While she is fortunate to receive support from the Asylee Women's Enterprise, these organizations have limited funding, and many others are not in her shoes. My experiences have mobilized me to challenge the status quo and take action to promote access to care by testifying before you all.

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 and the economy through federal, state, and local taxes - they are still ineligible for the Affordable Care Act.

Over the last several decades, the need for healthcare coverage has been a consistent priority for Maryland's immigrant community. Maryland has the fifth-highest percentage of the immigrant population - leaving one of the most significant percentages of residents left without care. HB 728 is a crucial step in addressing access to care for all Marylanders.

This common-sense legislation is uncontentious and aligns Maryland with its values of protecting life and treating all people with dignity, respect, and care. For all of the reasons above, I urge a favorable report of House Bill 728. As a medical student and future physician, I want to practice in a world where patients do not have to sacrifice their right to healthcare to maintain their quality of life.

Thank you for your consideration and your leadership!

Sincerely,  
Ria Arora