



DATE: March 21, 2024 **COMMITTEE:** House Health and Government Operations
BILL NO: Senate Bill 705
BILL TITLE: Health Insurance - Qualified Resident Enrollment Program (Access to Care Act)
POSITION: Support

Kennedy Krieger Institute supports Senate Bill 705 - Health Insurance - Qualified Resident Enrollment Program (Access to Care Act)

Bill Summary:

Senate Bill 705 would require the Maryland Health Benefit Exchange to establish and implement the Qualified Resident Enrollment Program to facilitate the enrollment of qualified residents in qualified plans; providing that the operation and administration of the Program may include functions delegated by the Maryland Exchange to a third party; and providing that the implementation of the Program is contingent on approval of a certain waiver application amendment.

Background:

Kennedy Krieger Institute is dedicated to improving the lives of children and young adults with developmental, behavioral, cognitive, and physical challenges. Kennedy Krieger's services include inpatient, outpatient, school-based, and community-based programs. Over 27,000 individuals receive services annually at Kennedy Krieger.

The vision for the Office for Health Equity Inclusion and Diversity (O-HEID) at Kennedy Krieger Institute is to promote the health and well-being of those who work and receive training and services at Kennedy Krieger Institute. The O-HEID uses evidence, culturally relevant, and equity-based approaches that assures diversity and inclusion. The O-HEID is working to establish collaboration, data, and metrics to address remediable disparities within our patient populations, policies, and practices.

Rationale:

Maryland is now the most diverse state on the east coast.¹ In Maryland, undocumented immigrants represent 5% of the total state population including approximately 275,000 individuals² who are ineligible for care through the Maryland Health Benefit Exchange (MHBE) due to their immigration status. Distress due to immigration status is associated with the physical and mental health of undocumented immigrants, with difficulties in accessing healthcare underlying this relationship.³ One in four children in Maryland has at least one immigrant parent and though the vast majority of these children are U.S. citizens (86%),⁴ families with mixed documentation status often have multiple and chronic stressors to their health including history of trauma and limited opportunities.⁵ Lack of health insurance increases the risk of developing preventable conditions and undocumented immigrants are particularly vulnerable due language barriers and challenges with health care access. ***This is important from a fiscal perspective because undocumented immigrants comprise 6% of the Maryland workforce as of 2016 and they paid an estimated \$373.5 million in federal taxes and \$242.3 million in state and local taxes in 2018.***²

In addition to the fiscal implications of a large segment of the population being uninsured, health-care providers have ethical obligations to provide care to all individuals regardless of "race, gender, socioeconomic status, ethnicity, religion, or any other social category."^{6,7} There is also a public health imperative to improve undocumented immigrants' ability to access vaccinations that benefits the community as a whole.⁸ Overall, we are in support of HB728 which would be a critical step towards health equity for all citizens in Maryland by expanding the Affordable Care Act to eligible individuals regardless of their immigration status.

Kennedy Krieger Institute requests a favorable report on Senate Bill 705.

References

1. U. S. Census Bureau. Quick Facts: Maryland. U.S. Census Bureau. Accessed December 17, 2020. <https://www.census.gov/quickfacts/fact/table/MD,baltimorecitymarylandcounty/AGE295219>
2. American Immigration Council. Immigrants in Maryland. Accessed February 11, 2023, <https://www.americanimmigrationcouncil.org/research/immigrants-in-maryland>
3. Galvan T, Lill S, Garcini LM. Another Brick in the Wall: Healthcare Access Difficulties and Their Implications for Undocumented Latino/a Immigrants. *Journal of Immigrant and Minority Health*. 2021;23(5):885-894. doi:10.1007/s10903-021-01187-7
4. Vera Institute of Justice. *Profile of the foreign-born population in Baltimore, Maryland* 2016. Accessed February 11, 2023. <https://www.vera.org/downloads/publications/profile-foreign-born-population-baltimore.pdf>
5. Garcini LM, Nguyen K, Lucas-Marinelli A, Moreno O, Cruz PL. "No one left behind": A social determinant of health lens to the wellbeing of undocumented immigrants. *Curr Opin Psychol*. Oct 2022;47:101455. doi:10.1016/j.copsyc.2022.101455
6. Medical Professionalism P. Medical professionalism in the new millennium: a physicians' charter. *Med J Aust*. Sep 2 2002;177(5):263-5. doi:10.5694/j.1326-5377.2002.tb04762.x
7. Nuño LE, Herrera VM, Soto BS. First, do no harm: why anti-immigrant policies in the United States are a public health concern. *Journal of Public Health Policy*. 2022;43(3):403-412. doi:10.1057/s41271-022-00364-
8. Demeke J, McFadden SM, Dada D, et al. Strategies that Promote Equity in COVID-19 Vaccine Uptake for Undocumented Immigrants: A Review. *Journal of Community Health*. 2022;47(3):554-562. doi:10.1007/s10900-022-01063-x