

March 21, 2024

The Honorable Joseline A. Peña-Melnyk
Chair, House Health and Government Operations Committee
Room 241, House Office Building
6 Bladen St.
Annapolis, MD 21401

Re: Letter of Support – SB 705 - Health Insurance – Qualified Resident Enrollment Program (Access to Care Act)

Dear Chair Peña-Melnyk and Members of the House Health and Government Operations Committee,

The Maryland Health Benefit Exchange (MHBE) respectfully submits this letter of support on Senate Bill (SB) 705 – Health Insurance – Qualified Resident Enrollment Program (Access to Care Act). SB 705 would establish an enrollment program for populations who are currently ineligible for coverage through existing programs. MHBE would apply for a federal 1332 innovation waiver amendment to allow these populations to enroll in Qualified Health Plans (QHPs) through Maryland Health Connection (MHC). MHBE would be able to carry out the tasks associated with establishing this new program within MHBE’s current operating budget and personnel and therefore anticipates no additional cost to implement this program.

In the last ten years, Maryland’s uninsured rate has fallen in half and stands at about six (6) percent. Maryland has been a national leader in working to reduce the uninsured rate, including by implementing a state-based health insurance marketplace, launching the State Reinsurance Program which has reduced individual market premiums by more than 20 percent since 2019, enacting the Easy Enrollment Program to allow uninsured individuals to get connected to health coverage by checking a box on their state tax return or unemployment claim, and instituting state premium assistance for young adults.

However, as of 2021 approximately **112,400 individuals** who are ineligible for coverage through Medicaid or the individual market due to immigration status are uninsured, accounting for almost **one third** of the state’s remaining uninsured population.¹

Although this population can enroll in plans outside the exchange, MHC provides a host of extensive consumer benefits that are not currently available to this population, including:

- **Simplified shopping experience**, allowing consumers to compare plans from all individual market insurers in one place. Consumers can easily compare plan costs, check if plans include their providers and prescription drugs, and use tools available on MHC to estimate total health care costs in order to help find the right plan tailored to their needs;

¹ Source: Analysis of 2021 American Community Survey data. Pursuant to SB 806 Report: [Health Care and Dental Coverage for Marylanders Ineligible for Medicaid and Qualified Health Plans Due to Immigration Status](#) (December 2023)

- **Extensive consumer support** through MHCs Call Center, which provides consumer support 6 days a week in more than 200 languages, and in-person assistance through the Navigator Program and MHC authorized brokers;
- **Allowing mixed-status families to enroll in the same plan** through the Exchange, which provides continuity of coverage and care coordination, saves families money by allowing individuals in the family to share a single plan deductible and out-of-pocket maximum, and reduces the burden of managing multiple plans.

To the extent that these benefits of access to MHC draw new enrollees from this population into the individual market, it's possible that the program could reduce individual market premiums. Increased enrollment and lower uninsured rates can have a cascade of other net positive impacts, including improving the overall health of the State's population, and decreasing costs of uncompensated care. In fiscal year 2021 Maryland hospitals provided over **\$780 million** in uncompensated care, with some hospitals paying upward of **10 percent** of their total allocated budget towards uncompensated care.²

As of January 2024, Washington state has also expanded Marketplace coverage to undocumented populations through a mechanism similar to the one proposed in SB 705.³ MHBE supports continued initiatives that aim to further reduce the uninsured rate, and that promote health equity and access to care in Maryland.

For further discussions or questions on SB 705, please contact Johanna Fabian-Marks, Director of Policy and Plan Management at johanna.fabian-marks@maryland.gov.

Sincerely,



Michele Eberle
Executive Director

² Health Services Cost Review Commission (HSCRC): [Rate Year 2023 Uncompensated Care Report](#) (June 2022).

³ Kaiser Family Foundation: [Key Facts on Health Coverage of Immigrants](#) (Published September 2023).