



**Testimony for the Senate Finance Committee
SB 705 - Health Insurance - Qualified Resident Enrollment Program (Access to Care Act)
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FAVORABLE

The ACLU of Maryland, Asian American Center of Frederick (AACF), and Nigerians in Frederick support SB 705 - Health Insurance - Qualified Resident Enrollment Program (Access to Care Act), which seeks to address critical health disparities among undocumented individuals in Maryland. This bill would provide access to Maryland's Health Benefit Exchange program for individuals and families that meet the federal Affordable Care Act's (ACA) income eligibility criteria. The bill would require the state to apply for a waiver under the ACA to secure eligibility for undocumented individuals and families.

The Maryland legislature has made significant strides in expanding healthcare to residents throughout the state through a variety of programs over the past decade. Since the ACA passed, 28 million Marylanders have obtained affordable health insurance through the state's exchange. However, there are many people in Maryland — especially nearly 300,000 undocumented immigrants — who struggle to find resources for routine care due to the lack of access to healthcare insurance. Without this benefit, many undocumented immigrants have not had the option to receive regular monitoring and treatment for serious medical conditions.

Access to primary care and specialized services have been correlated with positive health outcomes.¹ Health insurance allows individuals to secure a regular source of care, which is critical for detecting and treating diseases, managing chronic illnesses, and overall preventive care. People without insurance oftentimes delay seeking care due to the high costs of paying out of pocket, which can eventually lead to costly emergency room visits and sometimes the outcomes are fatal.

For the past four years, AACF has been part of the Community Health Access Program (CHAP) with Kaiser Permanente (KP) to provide health insurance to thousands of Marylanders. For every person enrolled, there were approximately 2 people placed on the waiting list. Further, despite

¹ *Access to primary care.* Access to Primary Care - Healthy People 2030. (n.d.). Retrieved February 13, 2023, from <https://health.gov/healthypeople/priority-areas/social-determinants-health/literature-summaries/access-primary-care>

KP's generosity, there was still an access issue because many of AACF's clients in communities from western Maryland lacked adequate transportation to access health care services in counties where KP providers are located. SB 705 would largely remove this barrier by allowing hundreds of thousands of residents to access healthcare services in their local communities.

Nevertheless, the CHAP insurance provision continues to save lives. Of the thousands of people that AACF served, one older gentleman's story is particularly compelling. This man came to America from Bangladesh more than 20 years ago and was undocumented since his arrival. He worked as a cook and did not have money for health insurance. But he paid his taxes, volunteered to serve the community, and made great contributions to the community. AACF was able to help him access care through KP and he was able to have an operation on his hernia, which progressed to a debilitating condition for him. This operation allowed him to continue working and he was finally able to visit his grandchildren whom he had not yet met in his home country. The CHAP insurance saved his life. Unfortunately, there are many more people like him who need access to healthcare in our community and throughout our state.

Nigerians in Frederick has also collaborated with AACF in seeking healthcare resources for their constituents that do not have access to affordable healthcare. One woman who attended an AACF health fair revealed that her prescription medications had to be sent to her by her family in Nigeria. After being connected with services through the health fair, medical professionals learned quickly that she was at high risk of going into a hypertensive crisis due to her excessively high blood pressure. Every time she reflects on her experience, she is filled with gratitude and gives credit to AACF, Nigerians in Frederick, and the healthcare she received for saving her life.

Another case happened during the COVID pandemic, when there were lots of uncertainties about getting the vaccine and misinformation being spread among the Nigerian community about the need to have health insurance to pay for the vaccines or that the vaccine was a way for the government to track those in the country illegally. The health fair with AACF and the educational outreach efforts helped to alleviate their concerns.

The immigrant community is one of the most vulnerable and underserved populations when it comes to healthcare access. Passing SB 705 would represent a big step forward to ensure that the basic human right of healthcare, regardless of immigration status, is more accessible for Maryland's immigrant communities.

For the foregoing reasons, we urge this committee to give SB 705 a favorable report.

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