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February 12, 2025

The Honorable Pam Beidle
Chair, Senate Finance Committee
3 East
Miller Senate Office Building
Annapolis, MD 21401

Senate Bill 518 – Health Insurance Screening for Ovarian Cancer – Required Coverage and Prohibited Cost Sharing

Dear Chair Beidle,

The League of Life and Health Insurers of Maryland, Inc. respectfully opposes *Senate Bill 518 – Health Insurance Screening for Ovarian Cancer – Required Coverage and Prohibited Cost Sharing* and urges the committee to give the bill an unfavorable report.

The League and our members are committed to finding ways that all screenings and preventive care can be covered when appropriate, but we unfortunately cannot support this approach, especially without premium impact analysis. We also contend that ovarian tangential cancer preventive screenings are already covered. The inclusion of MRI's and computed tomography scans may not be appropriate and a wasteful use of health care resources. It also must be noted that there is currently no specific ovarian cancer screening test, to there is nothing to be mandated to cover, nor a protocol for requirement.

Under the ACA, each state must pay for every health plan purchased through the Maryland Health Benefit Exchange, the additional premium associated with any state-mandated benefit beyond the federally mandated essential health benefits. This means, should the Commissioner include the mandate in the State benchmark plan, the State would be required to defray the cost of the benefits to the extent it applies to the individual and small group market ACA plans.

The League opposes any additional mandated benefits to Maryland's law. Mandated benefits add cost to health insurance policies in our state and limit the ability of insurers to design benefits to best meet the needs of enrollees. Given the potential impact to health insurance costs in the State, Maryland law includes a statutory framework for review and evaluation of proposed mandated benefits by the Maryland Health Care Commission under § 15-1501 of the Insurance Article. The law requires the assessment of a proposed mandate for the social, medical and financial impact of the proposed mandate and equips the General Assembly with such information as the extent to which the service is generally utilized by a significant

portion of the population; the extent to which the insurance coverage is already generally available; if coverage is not generally available, the extent to which the lack of coverage results in individuals avoiding necessary health care treatments; if coverage is not generally available, the extent to which the lack of coverage results in unreasonable financial hardship; and the level of public demand for the service. Before adopting this or any other mandated health benefit, we urge the Committee first request an evaluation of the proposed benefit to facilitate an informed decision.

For these reasons, the League urges the committee to give Senate Bill 518 an unfavorable report.

Very truly yours,

A handwritten signature in black ink, appearing to read "Matt Celentano", with a long horizontal flourish extending to the right.

Matthew Celentano
Executive Director

cc: Members, Senate Finance Committee