SB0508_FAV_MedChi_Medicaid & HI - Req. Coverage Ae Uploaded by: Danna Kauffman



The Maryland State Medical Society 1211 Cathedral Street Baltimore, MD 21201-5516 410.539.0872 Fax: 410.547.0915 1.800.492.1056 www.medchi.org

Senate Finance Committee February 11, 2025

Senate Bill 508 – Maryland Medical Assistance Program and Health Insurance – Required Coverage for Aesthetic Services and Restorative Care for Victims of Domestic Violence (Healing Our Scars Act)

POSITION: SUPPORT

The Maryland State Medical Society (MedChi), the largest physician organization in Maryland, supports Senate Bill 508. This bill requires the Medicaid program and carriers in the fully insured private marketplace to provide coverage to victims of domestic violence for aesthetic services and restorative care by: (1) providing for the treatment of physical injuries caused by domestic violence, and (2) determined to be medically necessary by a physician who is licensed to practice medicine.

The Maryland Health Care Coalition Against Domestic Violence, an initiative of the Center for a Healthy Maryland, an affiliate of MedChi, leads the healthcare sector in addressing domestic violence through effective measures like screening, identification, education, intervention, and treatment. Over the past twenty-six years, the Coalition has pioneered training within healthcare settings, emphasizing the critical role that medical professionals play in supporting victims. Recently, the Coalition has been awarded a \$50,000 Counseling & Mental Health grant by the Prince George's County Council as part of its 2025 Domestic Violence Grant Program. This vital funding will support the Coalition's mission to enhance the healthcare sector's proactive response to domestic violence. However, victims of domestic violence need assurance that physical injuries received as a result of domestic violence will be covered for treatment by their insurer. Senate Bill 508 seeks to provide that reassurance.

We ask for a favorable vote on Senate Bill 508.

For more information, call:

Danna L. Kauffman J. Steven Wise Andrew G. Vetter Christine K. Krone 410-244-7000

Maryland Catholic Conference_FAV_SB508.pdf Uploaded by: Diane Arias



February 11, 2025

Senate Bill 508

Maryland Medical Assistance Program and Health Insurance - Required Coverage for Aesthetic Services and Restorative Care for Victims of Domestic Violence (Healing Our Scars Act)

Senate Finance Committee

Position: Favorable

The Maryland Catholic Conference (MCC) is the public policy representative of the three (arch)dioceses serving Maryland, which together encompass over one million Marylanders. Statewide, their parishes, schools, hospitals, and numerous charities combine to form our state's second largest social service provider network, behind only our state government.

Senate Bill 508 requires the Maryland Medical Assistance Program and certain insurers, nonprofit health service plans, health maintenance organizations, and managed care organizations to provide coverage to victims of domestic violence for aesthetic services and restorative care determined to be medically necessary for the treatment of physical injuries caused by domestic violence.

Domestic violence is a pattern of coercive behavior that includes repeated battering and injury, psychological abuse, sexual assault, social isolation, deprivation, and intimidation. To help survivors rebuild their lives and break the cycle of violence, access to aesthetic services and restorative care is essential for fostering healing and boosting self-esteem by addressing the physical reminders of past trauma. This bill focuses on facilitating the physical healing of injuries resulting from domestic violence. Survivors should have the opportunity to heal without being constantly reminded of their trauma through visible scars or injuries. Seeing these reminders in the mirror or facing questions from others can hinder emotional recovery. By addressing outward physical injuries, survivors can take critical steps toward emotional and psychological healing.

Survivors who show strength and resilience by seeking care deserve support, not additional barriers, to access the services they need. Aesthetic and restorative care that is medically

¹ https://facialplastics.com/our-practice/philanthropy/national-domestic-violence/#:~:text=The%20American%20Academy%20of%20Facial,esteem%20and%20rebuild%20their%20lives.

necessary to address trauma can play a significant role in the healing process. These services provide more than physical repair—they offer survivors a chance to reclaim their dignity and confidence. As human beings created in God's image and likeness, we have a responsibility to support our brothers and sisters as they seek healing from violence inflicted upon them. Pope Francis reminds us of the urgency of this work, stating, "Faced with the scourge of physical and psychological abuse of women, there is an urgent need to rediscover just, and equitable relationship patterns based on respect and mutual recognition." By alleviating the financial burden of medically necessary aesthetic and restorative care, we can ensure that survivors are not further burdened as they recover. This legislation reflects our collective responsibility to walk alongside survivors of domestic violence, providing the support and resources they need to heal fully—physically, emotionally, and spiritually.

For these reasons, the Maryland Catholic Conference asks for a favorable report on SB 508.

Thank you for your consideration.

² https://capp-usa.org/amoris-laetitia/

SB08 sponsor testimony final.pdf Uploaded by: Linda Hanifin Bonner

SHANEKA HENSON Legislative District 30 Anne Arundel County

Judicial Proceedings Committee

Joint Committee on Children, Youth, and Families



James Senate Office Building
11 Bladen Street, Room 203
Annapolis, Maryland 21401
410-841-3578
800-492-7122 Ext. 3578
Shaneka.Henson@senate.state.md.us

THE SENATE OF MARYLAND ANNAPOLIS, MARYLAND 21401

SPONSOR TESTIMONY

Senate Bill 508

Maryland Medical Assistance Program and Health Insurance - Required Coverage for Aesthetic Services and Restorative Care for Victims of Domestic Violence (Healing Our Scars Act)

Chair Biedle and Committee Members

Thank you for the opportunity to introduce and provide important details regarding Senate Bill 508 - Maryland Medical Assistance Program and Health Insurance - Required Coverage for Aesthetic Services and Restorative Care for Victims of Domestic Violence (Healing Our Scars Act)

For the record, I am Senator Shaneka Helson from the 30th Legislative District of Anne Arundel County, MD.

The intention of SB508 is to address a problem within our medical coverage system relating to victims of domestic violence who have experienced horrific disfiguring physical injuries to their bodies and require restorative and aesthetic care. While codes used by practitioners for various types of medical treatment for domestic violence victims cover burns, wounds, amputation dental etc., there are none that address the long-term impacts of these often-disfiguring physical injuries. And, because acts of domestic violence are often underreported, the ability to have these impacts treated and properly coded for payment do not occur.

The goal of SB 508 is to make sure that the Maryland Medical Assistant Program and other health insurance groups cover this care. It would require all insurers, nonprofit health service plans, and health maintenance organizations (collectively known as carriers), as well as Medicaid, to provide coverage to a victim of domestic violence for aesthetic services and restorative care, in the treatment of disfiguring physical injuries caused by domestic violence and determined to be medically essential by a licensed physician. The bill takes effect January 1, 2026, and applies to all policies, contracts, and health benefit plans issued, delivered, or renewed in the State on or after that date.

We are grateful for the support of the Maryland Department of Health and their suggested amendments; and also in discussion with the Maryland Insurance Administration to clarify language needed for the industry's coverage as well as those of the amended HB0381.

Speaking to the basis of the need for this legislation is:

- The Honorable Krystal Oriadha, Prince George's County Council
- The Honorable Ashanti Martinez, House of Delegates

As well as affected residents

After you hear the testimony from those here today, I urge that you give a favorable report to SB 508.

Position Paper in Support of SB 508.pdf Uploaded by: Daniel Doherty



The Maryland State Dental Association Supports, with Amendment, SB 508 – Maryland Medical Assistance Program and Health Insurance – Required Coverage for Aesthetic Services and Restorative Care for Victims of Domestic Violence

Respectfully Submitted by Daniel T. Doherty, Jr. on behalf of the MSDA

SB 508 would require the Maryland Medical Assistance Program, health maintenance organizations, insurers and nonprofit service planes to provide coverage for the victims of domestic violence for aesthetic services and restorative care. The bill conditions the coverage for the treatment of physical injuries that were caused by domestic violence on a determination by a Maryland licensed physician that the treatment of the injuries is medically necessary.

This coverage is vitally important to these victims, and up to 50% of the trauma suffered by domestic violence victims is to the face, neck and head. These injuries include fractured teeth, jaws and facial bones as well as damage to full and partial dentures and/or implants etc. Failure to have these conditions treated adversely affects the victims' ability to eat, talk and swallow. In addition, the resulting damage to their appearance and other after effects can increase the post traumatic impact of the violence. A large percentage of these injuries are treated by dentists - general dentists, oral and maxillofacial surgeons, and other dental specialties.

Given the type of facial and head injuries sustained by these victims, and the recognition that dentists often are the appropriate health care provider to diagnose and treat these conditions, dentists should be included among the Maryland licensed providers who may make determinations of the medical and dental necessity of the covered aesthetic services and restorative care. The Maryland State Dental Association therefore requests that SB 508 be amended as follows: On page 3 in line 26 following "MEDICALLY" insert "OR DENTIST".

The Maryland State Dental Association respectfully requests the HB 381 be reported favorably with amendment by the Committee.

Submitted by Daniel T. Doherty, Jr. February 7, 2025

SB 508 - FWA - House of Ruth.pdf Uploaded by: Deena Hausner



Domestic Violence Legal Clinic

2201 Argonne Drive, Baltimore, Maryland 21218 (410) 554-8463 • Fax: (410) 243-3014 • www.hruth.org • legal@hruthmd.org Toll Free: 1-888-880-7884 • Maryland Relay: 711

Bill No.: Senate Bill 508

Bill Title: Maryland Medical Assistance Program and Health Insurance –

Required Coverage for Aesthetic Services and Restorative Care for

Victims of Domestic Violence (Healing Our Scars Act)

Committee: Finance

Hearing Date: February 11, 2025

Position: **FWA**

House of Ruth is a non-profit organization providing shelter, counseling, and legal services to victims of domestic violence throughout the State of Maryland. House of Ruth has offices in Baltimore City, Baltimore County, Prince George's County, and Montgomery County. Senate Bill 508 requires health insurers to provide coverage to victims of domestic violence for certain aesthetic service and restorative care. We urge the Senate Finance Committee to amend and report favorably on Senate Bill 508.

Senate Bill would require health insurers and health maintenance organizations to provide coverage for aesthetic services and restorative care to victims of domestic violence who are injured as a result of an act of domestic violence. This important coverage will enable victims who are injured by an abusive intimate partner to receive the medical services necessary to help heal their injuries, which not only supports victims' physical recovery but also their ability to recover from the trauma of abuse.

The current version of SB 508 defines victims of domestic violence as those who are current or former spouses or cohabitants, which means that someone who has children in common or has been in a sexual relationship with an abusive partner would not qualify for the important services that this bill authorizes. House of Ruth urges that SB 508 be amended to define victim of domestic violence in conformity with the list of persons eligible for relief in Section 4-501(m) of the Family Law Article.

The House of Ruth urges the Senate Finance Committee to amend and report favorably on Senate Bill 508.

2025 MCHS SB 508 Senate Side.pdf Uploaded by: Jennifer Navabi



Maryland Community Health System

Committee: Senate Finance Committee

Bill Number: Senate Bill 508 - Maryland Medical Assistance Program and Health

Insurance - Required Coverage for Aesthetic Services and Restorative

Care for Victims of Domestic Violence (Healing Our Scars Act)

Hearing Date: February 11, 2025

Position: Support with Amendment

The Maryland Community Health System supports Senate Bill 508 - Maryland Medical Assistance Program and Health Insurance - Required Coverage for Aesthetic Services and Restorative Care for Victims of Domestic Violence (Healing Our Scars Act). The bill would require both private insurance and Medicaid to cover aesthetic and restorative services provided to assist certain survivors of domestic violence.

MCHS is a network of federally qualified health centers who focus on providing primary, behavioral health, and dental services to underserved communities. We are concerned about the impact of domestic violence on our patients. Scarring and other disfigurement can retraumatize survivors. This legislation supports their recovery by providing coverage of aesthetic and restorative services.

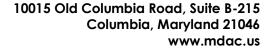
We would ask for an amendment that recognizes other services provided by nonphysicians are included. We particularly want to cite dentistry as important to treating injuries from domestic violence:

On page 3 in lines 26-27, strike "PHYSICIAN WHO IS LICENSED" and replace with "HEALTHCARE PRACTITIONER WHO IS LICENSED, CERTIFIED, OR OTHERWISE AUTHORIZED TO PRACTICE UNDER THE HEALTH OCCUPATIONS ARTICLE"

We ask for a favorable report with this amendment. If we can provide any further information, please contact Robyn Elliott at relliott@policypartners.net or (443) 926-3443.

¹ Hulley J, Wager K, Gomersall T, Bailey L, Kirkman G, Gibbs G, Jones AD. Continuous Traumatic Stress: Examining the Experiences and Support Needs of Women After Separation From an Abusive Partner. J Interpers Violence. 2023 May;38(9-10):6275-6297. doi: 10.1177/08862605221132776. Epub 2022 Nov 13. PMID: 36373601; PMCID: PMC10052415.

2025 MDAC SB 508 Senate Side.pdf Uploaded by: Jennifer Navabi





Committee: Senate Finance

Bill Number: Senate Bill 508 - Maryland Medical Assistance Program and Health

Insurance - Required Coverage for Aesthetic Services and Restorative

Care for Victims of Domestic Violence (Healing Our Scars Act)

Hearing Date: February 11, 2025

Position: Support with Amendment

The Maryland Dental Action Coalition strongly supports Senate Bill 508 - Maryland Medical Assistance Program and Health Insurance - Required Coverage for Aesthetic Services and Restorative Care for Victims of Domestic Violence (Healing Our Scars Act). The bill provides for Medicaid and private insurance coverage of aesthetic and restorative services for domestic violence survivors.

Domestic violence survivors must rely on pro bono services to address scarring and other physical signs of their trauma. This bill advances the dignity and wellbeing of domestic violence survivors by providing coverage for restorative and aesthetic services. We ask that the Committee consider amending the bill to include the services of dentists who are often the first providers to identify survivors by the lasting signs of trauma to the mouth and teeth. Dentists also play an important role in providing restorative services.

On page 3 in lines 26-27, strike "PHYSICIAN WHO IS LICENSED" and replace with "PHYSICIAN, DENTISTS, OR OTHER HEALTHCARE PRACTITIONER WHO IS LICENSED, CERTIFIED, OR OTHERWISE AUTHORIZED TO PRACTICE UNDER THE HEALTH OCCUPATIONS ARTICLE"

We ask for a favorable report with this amendment. If we can provide any further information, please contact Robyn Elliott at relliott@policypartners.net or (443) 926-3443.

https://onlinelibrary.wiley.com/doi/10.1111/edt.12897

Optimal Oral Health for All Marylanders

2025 MdAPA SB 508 Senate Side.pdf Uploaded by: Jennifer Navabi

The Maryland Academy of Physician Assistants Control Co

Committee: Senate Finance Committee

Bill Number: Senate Bill 508 - Maryland Medical Assistance Program and Health Insurance -

Required Coverage for Aesthetic Services and Restorative Care for Victims of

Domestic Violence (Healing Our Scars Act)

Hearing Date: February 11, 2025

Position: Support with Amendment

The Maryland Academy of Physician Assistants strongly supports Senate Bill 508 - Maryland Medical Assistance Program and Health Insurance - Required Coverage for Aesthetic Services and Restorative Care for Victims of Domestic Violence (Healing Our Scars Act). The bill would require both private insurance and Medicaid to cover aesthetic and restorative services provided to assist certain survivors of domestic violence.

Domestic violence survivors primarily must rely on pro bono services to obtain cosmetic procedures to address scarring and other disfigurement caused by domestic violence. As a result, many survivors must live with the physical signs of their abuse, which can be re-traumatizing.

We would request one clarifying amendment on who can determine which services are medically necessary. The bill limits the type of clinician who can determine which services are medically necessary. We recommend this provision be broadened as other types of providers, including physician assistants and dentists, also can also determine medical necessity and provide services, increasing access to care.

On page 3 in lines 26-27, strike "PHYSICIAN WHO IS LICENSED" and replace with "<u>HEALTHCARE</u>

PRACTITIONER WHO IS LICENSED, CERTIFIED, OR OTHERWISE AUTHORIZED TO PRACTICE UNDER THE HEALTH

OCCUPATIONS ARTICLE"

| We as | sk for a favor | able report wi | th this amendr | nent. If we | can provide a | ny further i | nformation, | please |
|---------------|------------------------|----------------|------------------|-------------|---------------|--------------|-------------|--------|
| contact Robyi | n Elliott at <u>re</u> | lliott@policyp | artners.net or (| 443) 926-34 | 443. | | | |

ⁱ https://www.jprasurg.com/article/S1748-6815(21)00649-5/fulltext

SB 508 - MNADV - FWA.pdfUploaded by: Laure Ruth Position: FWA



BILL NO: Senate Bill 508

TITLE: Maryland Medical Assistance Program and Health Insurance - Required Coverage

for Aesthetic Services and Restorative Care for Victims of Domestic Violence

(Healing Our Scars Act)

COMMITTEE: Finance

HEARING DATE: February 11, 2025

POSITION: SUPPORT WITH AMENDMENTS

The Maryland Network Against Domestic Violence (MNADV) is the state domestic violence coalition that brings together victim service providers, allied professionals, and concerned individuals for the common purpose of reducing intimate partner and family violence and its harmful effects on our citizens. **MNADV urges the Senate Judiciary Committee to issue a favorable report on SB 508 with amendments.**

Senate Bill 508 would require the Maryland Medical Assistance Program and certain insurers, nonprofit health service plans, health maintenance organizations, and managed care organizations to provide coverage to victims of domestic violence for certain aesthetic services and restorative care. MNADV supports this bill but offers a friendly amendment to include a wider swath of victims than currently delineated in the bill.

Physical abuse can have both immediate and long-term effects. Immediate physical effects will depend on the severity of the assault, ranging from bruising and abrasions to broken bones, internal bleeding, head injuries, permanent disability and death. But non-life-threatening physical abuse can still have devastating long term impacts that can be psychological – post-traumatic stress disorder, depression, anxiety, suicidal behavior, substance abuse – and physical – arthritis, migraines and chronic pain. Having the ability to obtain treatment for the physical injury can in turn assist the survivor in managing their emotional and mental state.

SB 508 will assist survivors to move forward without the visible reminders of the abuse they experienced.

As drafted SB 508 uses a restrictive definition of who would receive coverage. "Victim of domestic violence" means an individual who has received deliberate, severe, and demonstrable physical injury, or is in fear of imminent deliberate, severe, and demonstrable physical injury from a current or former spouse, or a current or former cohabitant, as defined in § 4–501 of this subtitle. This would not include victim survivors who have a child in common but are not married. Nor would it include someone who had been in a sexual relationship with their abuser within the past year. We can think of no reason why

¹ https://safesteps.org.au/understanding-family-violence/types-of-abuse/physical-abuse/. Last viewed 1/27/2025. For further information contact Laure Ruth ■ Public Policy Director ■ 301-852-3930 ■ Iruth@mnadv.org



the injuries sustained in those relationships should not also be covered by SB 508 and suggest an amendment to "any person eligible for relief" pursuant to MD FL Code Ann. §4-501 et seq.

For the above stated reasons, the Maryland Network Against Domestic Violence urges a favorable report on SB 508 with amendments.

Insurance coverage for DV survivors - testimony - Uploaded by: Lisae C Jordan



Working to end sexual violence in Maryland

P.O. Box 8782 Silver Spring, MD 20907 Phone: 301-565-2277 Fax: 301-565-3619 For more information contact: Lisae C. Jordan, Esquire 443-995-5544 mcasa.org

Testimony Supporting Senate Bill 508 with Amendments Lisae C. Jordan, Executive Director & Counsel

February 11, 2025

The Maryland Coalition Against Sexual Assault (MCASA) is a non-profit membership organization that includes the State's seventeen rape crisis centers, law enforcement, mental health and health care providers, attorneys, educators, survivors of sexual violence and other concerned individuals. MCASA includes the Sexual Assault Legal Institute (SALI), a statewide legal services provider for survivors of sexual assault. MCASA represents the unified voice and combined energy of all of its members working to eliminate sexual violence. We urge the Finance Committee to report favorably on Senate Bill 508 with Amendments.

Senate Bill 508 – Insurance Coverage for Cosmetic Surgery After Domestic Violence

Senate Bill 508 would require the Maryland Medical Assistance Program and certain insurers, nonprofit health service plans, health maintenance organizations, and managed care organizations to provide coverage to victims of domestic violence for certain aesthetic services and restorative care. MCASA joins our sister coalition, MNADV, and supports SB508, but offers a friendly amendment to include additional survivors, including survivors of sexual assault.

SB 508 will assist survivors of domestic violence who have aesthetic injuries caused by abuse by allowing them to move forward without the visible reminders of the violence they experienced.

As drafted SB 508 uses a restrictive definition of who would receive coverage. "Victim of domestic violence" means an individual who has received deliberate, severe, and demonstrable physical injury, or is in fear of imminent deliberate, severe, and demonstrable physical injury from a current or former spouse, or a current or former cohabitant, as defined in § 4–501 of this subtitle. This would *not* include victim survivors who have a child in common but are not married. Nor would it include someone who had been in a sexual relationship with their abuser within the past year. Nor would it include survivors of recent sex crimes. We concur in MNADV's suggestion for an amendment to "any person eligible for relief" pursuant Family Law §4-501. We note this still leaves open the broader question of providing this coverage for all victims of sexual assault, whenever the assault occurred, or even for all victims of violent crime. SB508 with the suggested amendments would, however, be a strong step forward for survivors.

The Maryland Coalition Against Sexual Assault urges the Finance Committee to report favorably on Senate Bill 508 with Amendments

sb508ltrSWA (1).pdf Uploaded by: Meghan Lynch Position: FWA



Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary February 11, 2025

The Honorable Pamela Beidle Chair, Senate Finance Committee 3 East Miller Senate Office Building Annapolis, MD 21401-1991

Re: Senate Bill (SB) 508 – Maryland Medical Assistance Program and Health Insurance – Required Coverage for Aesthetic Services and Restorative Care for Victims of Domestic Violence (Healing Our Scars Act) – Letter of Support with Amendments

Dear Chair Beidle and Committee Members:

The Maryland Department of Health (the Department) respectfully submits this letter of information for Senate Bill (SB) 508 – Maryland Medical Assistance Program and Health Insurance – Required Coverage for Aesthetic Services and Restorative Care for Victims of Domestic Violence (Healing Our Scars Act).

SB 508 requires the Maryland Medical Assistance Program (Medicaid) to provide medically necessary coverage of aesthetic services and restorative care for treatment of physical injuries to victims of domestic violence. The Department is supportive of the legislation's intent; however, the scope of services it would mandate is unclear and may result in a fiscal impact.

The Department recognizes the impact domestic violence has on the lives of Marylanders. The Centers for Disease Control and Prevention (CDC) found that 38.0 percent of women and 35.0 percent of men in Maryland have been a victim of physical violence by an intimate partner in their lifetime. Studies indicate that intimate partner violence is more prevalent in lower-income communities and thus may disproportionately impact Medicaid participants. ^{2,3}

Certain services are covered today and would be budget neutral. For example, services that address injuries that occur during a physical altercation such as broken bones, sprains, or wounds are covered by Medicaid. In the event that an injury is sufficiently severe that it requires

¹ Smith SG, Khatiwada S, Richardson L, Basile KC, Friar NW, Chen J, Zhang Kudon H, & Leemis RW. The National Intimate Partner and Sexual Violence Survey: 2016/2017 State Report. Atlanta (GA): Centers for Disease Control and Prevention, National Center for Injury Prevention and Control; 2023. https://www.cdc.gov/nisvs/documentation/NISVS-2016-2017-State-Report-508.pdf.

² Bonomi AE, Trabert B, Anderson ML, Kernic MA, Holt VL. Intimate partner violence and neighborhood income: a longitudinal analysis. Violence Against Women. 2014 Jan;20(1):42-58. doi: 10.1177/1077801213520580. Epub 2014 Jan 28. PMID: 24476760; PMCID: PMC5486977. https://pmc.ncbi.nlm.nih.gov/articles/PMC5486977/.

³ Fox GL, Benson ML. Household and neighborhood contexts of intimate partner violence. Public Health Rep. 2006 Jul-Aug;121(4):419-27. doi: 10.1177/003335490612100410. PMID: 16827443; PMCID: PMC1525351. https://pmc.ncbi.nlm.nih.gov/articles/PMC1525351/.

reconstructive surgery, such as an injury to the nose or a broken facial bones, those services would be considered medically necessary.

To the extent the intent of the legislation is to require coverage of additional services, the Department would realize a potentially significant fiscal impact. Cosmetic services that are intended to improve a patient's physical appearance, but do not restore or materially improve a body function are not eligible for reimbursement. As a result, certain services for new injuries, such as superficial bites, burns, scratches, and lacerations that only require immediate treatment in an emergency department setting, and treatment of healed injuries from domestic violence in the past, such as scarring to the face, neck, or body, would not be considered medically necessary under existing policy in most cases. Additionally, in the event of significant damage to the teeth, the adult dental benefits package does not cover partial or full dentures or dental implants.

The Department reiterates its support of the intent of the legislation to the extent that it is budget neutral and respectfully requests further clarification of the scope of the legislation. If you would like to discuss this further, please do not hesitate to contact Sarah Case-Herron, Director of Governmental Affairs at sarah.case-herron@maryland.gov.

Sincerely,

Laura Herrera Scott, M.D., M.P.H.

Secretary

In the Senate Finance Committee

AMENDMENTS TO SENATE BILL 508 (First Reading File Bill)

On page 1, in line 9, strike "aesthetic services" and substitute "medical".

On page 3, in line 6, after "provide" insert ", subject to the limitations of the state budget AND AS PERMITTED BY FEDERAL LAW, ".

On page 3, in line 7, strike "AESTHETIC". and substitute "MEDICAL"

In line 22, strike "AESTHETIC" and substitute "MEDICAL".

2025 ACNM SB 508 Senate Side.pdf Uploaded by: Robyn Elliott



Committee: Senate Finance Operations

Bill Number: Senate Bill 508 - Maryland Medical Assistance Program and Health

Insurance - Required Coverage for Aesthetic Services and Restorative

Care for Victims of Domestic Violence (Healing Our Scars Act)

Hearing Date: February 11, 2025

Position: Support with Amendment

The Maryland Affiliate of the American College of Nurse Midwives (ACNM) strongly supports Senate Bill 508 - Maryland Medical Assistance Program and Health Insurance - Required Coverage for Aesthetic Services and Restorative Care for Victims of Domestic Violence (Healing Our Scars Act). The bill would require both private insurance and Medicaid to cover aesthetic and restorative services provided to assist certain survivors of domestic violence.

Domestic violence survivors too often suffer from scarring, a daily reminder of their abusive situations. Health insurance rarely covers cosmetic procedures except in rare cases of traumatic injury. Most survivors of domestic violence must rely on pro-bono services. ACNM supports this legislation because it requires Medicaid and health insurers to cover services and procedures that will help erase the physical signs of domestic violence

We would request one clarifying amendment on who can determine which services are medically necessary. The bill limits the type of clinician who can determine which services are medically necessary. We recommend this provision be broadened as other types of providers, including nurse practitioners and dentists, also can also determine medical necessity and provide services:

On page 3 in lines 26-27, strike "PHYSICIAN WHO IS LICENSED" and replace with "<u>HEALTHCARE PRACTITIONER WHO IS LICENSED, CERTIFIED, OR OTHERWISE AUTHORIZED TO PRACTICE UNDER THE HEALTH OCCUPATIONS ARTICLE</u>"

We ask for a favorable report with this amendment. If we can provide any further information, please contact Robyn Elliott at relliott@policypartners.net or (443) 926-3443.

i https://www.jprasurg.com/article/S1748-6815(21)00649-5/fulltext

DOCS-#238711-v1-SB_508_League_OPPOSE.pdf Uploaded by: Matthew Celentano

Position: UNF



15 School Street, Suite 200 Annapolis, Maryland 21401 410-269-1554

February 11, 2025

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

Senate Bill 508 – Maryland Medical Assistance Program and Health Insurance - Required Coverage for Aesthetic Services and Restorative Care for Victims of Domestic Violence (Healing Our Scars Act)

Dear Chair Beidle,

The League of Life and Health Insurers of Maryland, Inc. respectfully **opposes** Senate Bill 508 – Maryland Medical Assistance Program and Health Insurance - Required Coverage for Aesthetic Services and Restorative Care for Victims of Domestic Violence (Healing Our Scars Act) and urges the committee to give the bill an unfavorable report.

Senate Bill 508 requires insurers to provide coverage to victims of domestic violence for aesthetic services and restorative care: (1) provided for the treatment of physical injuries caused by domestic violence; and (2) determined to be medically necessary by a physician who is licensed to practice medicine under the health occupations article

Carriers certainly sympathize with victims of domestic violence and absolutely provide coverage for medically necessary care now. This particular legislation raises many questions about how to determine who a victim is, why the perpetrator of the violence is not responsible for aesthetic coverage, and how the coverage mandate would impact premium and the state budget under the Medicaid program.

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 508 an unfavorable report.

Very truly yours,

Matthew Celentano Executive Director

cc: Members, Senate Finance Committee