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January 29, 2025

The Honorable Joseline Pena-Melnyk
Chair, House Health and Government Operations Committee
Room 241
House Office Building
Annapolis, MD 21401

House Bill 334 – Universal Newborn Nurse Home Visiting Services – Program Establishment and Insurance Coverage

Dear Chair Pena-Melnyk,

The League of Life and Health Insurers of Maryland, Inc. respectfully **opposes** *House Bill 334 – Universal Newborn Nurse Home Visiting Services – Program Establishment and Insurance Coverage* and urges the committee to give the bill an unfavorable report.

House Bill 334 requires insurers to provide coverage and reimbursement in full for the cost to a provider for delivering universal newborn nurse home visiting services with no cost-sharing, potentially upsetting the fully insured health insurance markets prior to analysis. The result of this bill could have dramatic impact on premium and we urge the committee to consider the affordability impact before moving forward with this legislation.

Carriers certainly agree with proponents that care coordination is a laudable goal with the target populations identified and could lead to better health outcomes with connections to wrap-around services, but the pilot demonstrated in Frederick might just be one of many models that could provide return on investment in this space. There are a number of home visiting programs that are utilized across the country that have shown effectiveness and a mandated study to examine social interventions seems prudent. We are also concerned about the cost associated with the bill as introduced, as the average cost-per-patient as presented by the proponents utilizing Chesapeake Regional Information System for our Patients (CRISP) data is \$3,361. The average cost-per-visit is \$2,361. These costs will certainly have overall premium impact that at this time is unknown. We suggest we need to have a handle on that impact before moving forward.

League members also wanted to note that carriers already have provider panels at the ready, and consumer approaches full of covered options to help with new mothers and the newborn's care, as well contracted relationships with community providers and organizations to assist with navigation of services.

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 House Bill 334 an unfavorable report.

Very truly yours,

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

Matthew Celentano
Executive Director

cc: Members, House Health and Government Operations Committee