



The League of Life
and Health Insurers
of Maryland

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

March 4, 2026

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

**Senate Bill 774 – Health Insurance – Plan Benefits and Coverage – Annual Reporting
(Transparency, Reporting, Understanding, Timeliness, and Honesty (TRUTH) in Mental Health
Coverage Act)**

Dear Chair Beidle,

The League of Life and Health Insurers of Maryland, Inc. respectfully opposes *Senate Bill 774 – Health Insurance – Plan Benefits and Coverage – Annual Reporting (Transparency, Reporting, Understanding, Timeliness, and Honesty (TRUTH) in Mental Health Coverage Act)* and urges the committee to give the bill an unfavorable report.

While we share the sponsors' commitment to ensuring robust access to behavioral health services and transparency in coverage, League members believe this legislation creates a redundant, costly, and administrative reporting framework that duplicates existing federal and state requirements under the Mental Health Parity and Addiction Equity Act (MHPAEA).

The TRUTH Act seeks to mandate the collection of granular data regarding claims, network adequacy, and reimbursement practices. However, health carriers are already subject to extensive federal and state oversight designed to ensure mental health parity:

- **Comparative Analyses:** Under the Consolidated Appropriations Act of 2021, carriers must already perform and document exhaustive "Comparative Analyses" of Non-Quantitative Treatment Limitations (NQTLs). These analyses require the same data-driven rigor regarding reimbursement and network access that SB 774 seeks to codify.
- **Existing Maryland Oversight:** The Maryland Insurance Administration (MIA) already possesses the regulatory authority to request parity data and conduct market conduct examinations to ensure compliance with both federal and state parity laws.
- **Duplicate Standardized Templates:** SB 774 requires the Commissioner to develop a new "standardized template." Introducing a unique Maryland reporting template—separate from the

established federal NQTL reporting standards—will create a patchwork regulatory environment that increases costs without providing a corresponding benefit to patient care.

The administrative burden of SB 774 is substantial. Disaggregating data by facility type, provider type, age group, and geography on an annual basis requires significant diversion of resources away from clinical care and member services. Furthermore, the bill authorizes the Commissioner to impose new regulatory fees on carriers to fund the interactive dashboard, which directly impacts the affordability of premiums for Marylanders.

For these reasons, the League urges the committee to give Senate Bill 774 an unfavorable report.

Very truly yours,

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

Matthew Celentano
Executive Director

cc: Members, Senate Finance Committee