

Maryland Department of Health Rare Disease Advisory Council

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The Honorable Heather Bagnall, Chair
The Honorable Bonnie Cullison, Vice Chair
Maryland House of Delegates Health Committee
120 Taylor House Office Building
Annapolis, Maryland 21401

Re: HB1015
Opposed

February 17, 2026

Dear Delegates Bagnall and Cullison and members of the Health Committee,

I am writing on behalf of the Maryland Rare Disease Advisory Council (RDAC) to oppose House Bill 1015. The RDAC is a legislated Governor's Advisory Council tasked with improving access to care and outcomes for people in Maryland living with Rare Disease.

Our opposition stems from several elements in the bill:

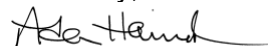
1. The unusual specification of 10-year and 2-year time intervals, that seem tailored to a specific individual circumstance (rather than broadly applicable).
2. The insertion of a legislatively mandated crisis resolution eligibility designation, bypassing usual medical review processes, once a person who meets the timing and moving criteria arrives in the State. This puts such new arrivals ahead of longtime Maryland residents already on the waiting list.
3. The rather paradoxical discussion of Developmental Disabilities Association (DDA) being able to use its usual medical review processes before such a person moves to the State, but not after the move.

We support prompt and fair review of individuals moving from other states to Maryland who qualify for the DDA Waiver program. However, this program has a long waiting list and very strict criteria for inclusion. There are several concerns with specific stipulations in the bill that must be addressed. The number of issues and the complexity of the bill necessitated our opposition rather than proposing a number of amendments. If the committee decides to amend this bill, the following are some of our recommendations:

- 1) Replace the very specific 10 year and 2 year requirement with a broad application to anyone getting these services in another state who moves to Maryland.
- 2) Replace the absolute legislated eligibility that this proposed bill provides with a presumptive eligibility pending an assessment by DDA.
- 3) Remove the "jump to the head" of the line by virtue of a legislated crisis resolution designation with a more rational alternative either presumptively adopting the status from the other state, or ordinary status pending a Maryland assessment, that perhaps be expedited depending upon the circumstances.

We recommend rewriting this bill for reconsideration and oppose it in its current state.

Sincerely,



Ada Hamosh, MD, MPH,
Chair