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March 13, 2026

The Honorable Heather Bagnall  
Chair, House Health Committee  
Room 241  
House Office Building  
Annapolis, MD 21401

**House Bill 1107 – 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 Bagnall,

The League of Life and Health Insurers of Maryland, Inc. respectfully **opposes** *House Bill 1107 -- 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.

House Bill 1107 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 unequivocally 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.

Due to limited literature and the complete absence of reimbursement codes to identify services associated with domestic violence in the Maryland claims database, the Maryland Health Commission found in their interim research on this legislation that, “estimated impacts of the mandate are uncertain and rely on a series of assumptions.” The preliminary nature of this analysis of cost impact makes it an extreme challenge for carriers to assess the risk associated with the potential 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

bench mark 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, and the particular affordability concerns that are heightened because of the impacts of lost premium tax credits to Marylanders, we cannot support additional mandates that will increase costs and make coverage less accessible.

For these reasons, the League urges the committee to give House Bill 1107 an unfavorable report.

Very truly yours,

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

Matthew Celentano  
Executive Director

cc: Members, House Health Committee