



January 30, 2026

The Honorable William C. Smith, Jr., Chair
The Honorable Jeff Waldstreicher, Vice Chair
Senate Judicial Proceedings Committee
2 East Miller Senate Office Building
Annapolis, Maryland 21401

Re: Opposition to Senate Bill 269 – Rebuttable Presumption of Medical Bills

Dear Chair Smith, Vice Chair Waldstreicher, and members of the Judicial Proceedings Committee:

Thank you for the opportunity to submit written testimony regarding SB 269, which would create a rebuttable presumption that medical bills submitted in personal injury lawsuits are authentic, fair, and reasonable. On behalf of the Allstate Insurance Company enterprise, I respectfully urge the members of this Committee to oppose this legislation.

While the bill may be intended to reduce the costs of personal injury litigation, it would increase insurance costs to policyholders statewide at a time when they are already struggling with insurance affordability.

I. Concerns

a. Increases costs to policyholders

Other states that have enacted laws similar to SB 269 have experienced anywhere from a five to a 15 percent increase in the average amount paid per paid bodily injury claim. Its passage would raise the average cost per claim, and it would prompt insurers to build those anticipated increased losses into the pricing of premiums and policy terms, raising the cost of coverage for consumers and making coverage less affordable.

The passage of SB 269 is also likely to prompt carriers to implement tighter underwriting guidelines, higher deductibles, and reduced policy limits, all of which will increase consumers' out-of-pocket exposure in the event of a loss.

By contrast, several states recently passed measures limiting recoveries to medical bills' amounts paid, or allowing the introduction of evidence showing both the amount billed and the amount paid. In the most recent examples¹, consumers are already experiencing a reduction in premiums.

¹ See, e.g., [Louisiana Act No. 18](#) (2025), prohibiting a presumption of causation of injuries in personal injury lawsuits.

b. Exacerbates billing concerns

Longer term, passage of SB 269 would also exacerbate billing concerns, because bad actors who are already inflating medical bills will be emboldened by the change. It will also exacerbate overtreatment; as the care will be presumed reasonable, the burden will be on defendants to demonstrate patterns of overtreatment, exacerbating the potential for exploitation of injured parties. The shifting of this burden will also necessitate changes to jury instructions. As a result, even in cases where defendants offer effective expert testimony and make compelling arguments, jurors may be less likely to listen to defense arguments disputing the reasonableness of medical bills.

c. Prevents defendants from vigorously evaluating evidence

By shifting the burden of proof in all personal injury cases in Maryland courts from plaintiffs to defendants,² the bill would permit medical bills to be admitted into evidence without the testimony of an authenticating witness and/or custodian of records and would prevent defendants from fully scrutinizing the evidence through such witnesses.

d. Violates basic principles of due process

Such a shift would violate basic principles of due process by placing the burden on defendants to demonstrate that they are not liable for medical costs, rather than placing that burden on plaintiffs, the party asserting claims of liability. Civil litigation has historically required the party seeking relief—i.e., plaintiffs—to bear the risk of their arguments falling short. Plus, plaintiffs control the choice to file suit and the individual claims being asserted; plaintiffs should be required to substantiate the elements of those claims, including the validity and fairness of medical bills.

e. Creates redundancy with existing evidentiary law

The language of the bill on page 3, lines 1-3 states that, “expert testimony is not required to prove the authenticity, fairness, or reasonableness of a medical bill ...” This implies that existing evidentiary standards require expert testimony to prove the authenticity of a medical bill. In fact, under current law, expert testimony is not needed to prove the reasonableness of a medical bill, because plaintiffs can enter such evidence via the testimony of treating providers, who are considered fact witnesses. Indeed, most personal injury plaintiffs do not engage expert witnesses to testify on billing issues, but they do often involve defense expert witnesses, because defendants lack plaintiffs’ access to treating providers and have no way to refute evidence of the reasonableness of medical bills without the testimony of costly expert witnesses.

SB 269 would make insurance in Maryland less affordable than it is today.

² Plaintiffs in Maryland district courts can already avail themselves of this burden shift. In cases where the amount in controversy does not exceed \$30,000, [Maryland Courts & Judicial Proceedings Article §10-104, “Admissibility of Writings or Records of Health Care Providers.”](#) permits parties in personal injury cases to admit medical bills without calling a health-care provider to testify.

II. Conclusion

Passage of SB 269 is likely to raise the average cost of bodily injury claims, and carriers will price those increases into premiums, reducing consumer affordability. It would also prompt carriers to impose more restrictive underwriting standards, higher deductibles, and lower policy limits, all of which will increase consumers' out of pocket costs following a loss.

In addition, SB 269 would exacerbate existing problems of overcharging for medical care and overtreating patients. It would hamper defendants' ability to meaningfully assess medical bills for authenticity, fairness, and reasonableness and undermine defendants' due process rights.

For these reasons, we respectfully urge Committee members to oppose SB 269.

Thank you for your time and consideration of this important issue.

Sincerely,

A handwritten signature in cursive script that reads "Lauren G. Pachman".

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