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## **TESTIMONY IN SUPPORT WITH AMENDMENT**

### **House Bill 484 – Corporate Income Tax – Addition Modification – Direct-to-Consumer Pharmaceutical Advertising**

**TO:** The Honorable Vanessa Atterbeary, Chair  
Members of the Ways and Means Committee

**FROM:** Maryland Academy of Advanced Practice Clinicians (MAAPC)

**DATE:** Hearing February 12, 2026

### **POSITION: FAVORABLE WITH AMENDMENT**

The Maryland Academy of Advanced Practice Clinicians (MAAPC) respectfully submits this testimony in SUPPORT WITH AMENDMENT of House Bill 484, which would eliminate the tax deductibility of direct-to-consumer pharmaceutical advertising expenses for corporate income tax purposes in Maryland.

MAAPC represents over two hundred advanced practice registered nurses (APRNs) and physician assistants (PAs) across Maryland who provide primary, acute, and specialty care to patients throughout the state. Our members are on the front lines of healthcare delivery and witness daily the impact of pharmaceutical marketing on patient expectations, prescribing patterns, and healthcare costs.

### **WHY MAAPC SUPPORTS HB 484:**

#### **1. REDUCING HEALTHCARE COSTS**

Direct-to-consumer pharmaceutical advertising drives up healthcare costs by creating demand for expensive brand-name medications when equally effective, lower-cost alternatives may be available. Our members frequently encounter patients requesting specific medications they have seen advertised, often without understanding the full clinical picture or considering more appropriate treatment options. By eliminating the tax deductibility of these advertising expenses, HB 484 creates a disincentive for excessive marketing spending that ultimately increases costs for patients and the healthcare system.

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**The Voice for Advanced Practice Clinicians in Maryland**



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## **2. IMPROVING PATIENT-PROVIDER RELATIONSHIPS**

The United States is one of only two countries in the world that allows direct-to-consumer pharmaceutical advertising. This marketing often undermines the patient-provider relationship by encouraging patients to self-diagnose and request specific medications rather than engaging in collaborative, evidence-based clinical decision-making. Our advanced practice clinicians report spending valuable appointment time discussing why advertised medications may not be appropriate, taking time away from comprehensive care.

## **3. SUPPORTING EVIDENCE-BASED PRESCRIBING**

Advanced practice clinicians base prescribing decisions on clinical evidence, patient-specific factors, and professional judgment—not marketing campaigns. Direct-to-consumer advertising can create pressure to prescribe medications that may not be the most clinically appropriate or cost-effective option. By reducing the financial incentive for pharmaceutical companies to engage in aggressive consumer marketing, HB 484 supports our members' ability to practice evidence-based medicine.

## **4. GENERATING REVENUE FOR HEALTHCARE ACCESS**

We strongly support the sponsor's amendment to earmark revenue generated by this legislation for Medicaid and the Maryland Health Benefit Exchange. As frontline providers, MAAPC members understand that expanding access to affordable health coverage is critical to improving health outcomes for Marylanders. The tens of millions of dollars this legislation could generate would directly support coverage expansion and affordability initiatives, benefiting the patients we serve.

## **THE SPONSOR AMENDMENT:**

MAAPC supports the sponsor's amendment that will earmark funds generated by HB 484 specifically for:

- Medicaid programs to support coverage for vulnerable populations
- The Maryland Health Benefit Exchange to enhance affordability and access to health insurance

This amendment ensures that revenue from this tax policy change directly supports healthcare access—a critical priority for Maryland's advanced practice clinicians and the patients we serve.

## **CONCLUSION:**

Direct-to-consumer pharmaceutical advertising serves the interests of pharmaceutical manufacturers, not patients or healthcare providers. HB 484, with the sponsor's amendment, takes a meaningful step

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toward

reducing the influence of pharmaceutical marketing on clinical care while generating substantial revenue to improve healthcare access for Marylanders.

**MAAPC urges a FAVORABLE WITH AMENDMENT report on House Bill 484.**

Respectfully,

A handwritten signature in black ink, appearing to read "Marie Tarleton", is written over a light-colored, textured background.

Marie Tarleton, MS, CRNP, FNP-BC  
President, The Maryland Academy of Advanced Practice Clinicians

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