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House Health and Government Operations Committee House Bill 909 – Maryland Health Insurance Coverage Protection Act SUPPORT WITH AMENDMENT March 10, 2017

On behalf of the organizations listed below, we support House Bill 909: *Maryland Health Insurance Coverage Protection Act*. House Bill 909 establishes an 11-member Commission to assess the impact of potential federal changes to the Affordable Care Act (ACA), Medicaid, and Medicare and to provide recommendations for State and local action to protect access to affordable health coverage.

According to the Department of Legislative Services, federal funding provided under the ACA supports over \$1.4 billion in services in the fiscal 2018 budget, and the State anticipates over \$7.7 billion in ACA funding through fiscal 2022. Outside of the direct budget connections between Maryland and the ACA, Maryland's health care policy is supported by other provisions allowed under the ACA. Most notably is the fact that Maryland's All-Payer Model Contract was approved through a federal agency established by the ACA. Failure to renew our current five-year contract would result in Medicare and Medicaid payments to Maryland being reduced by \$2.3 billion annually. A full overview can be found in the Fiscal Briefing presented by the Department of Legislative Services (January 2017).

Not only would the repeal of the ACA have a negative effect on the State's budget and the ability of Maryland residents to access health care coverage, but there is also great uncertainty regarding whether the Medicaid program will be transformed from a fee-for-service to a block grant program, which will have an equally negative impact on the State's budget and the ability to provide needed care to those in need.

Given the uncertainty of these three interrelated issues – possible repeal of the ACA, continuation of the All-Payer Model Contract, and block granting of the Medicaid program – we would recommend that the **Commission's charge be amended to assess the impact of all three issues.** In addition, we recommend that the language be amended to ensure adequate stakeholder input by specifying the following:

On page 4, strike lines 1 and 2 in their entirety, and substitute:

"(h) The Commission shall solicit input from stakeholders, including conducting public meetings across the State to conduct the study."

LifeSpan Network Mid-Atlantic Association of Community Health Centers Maryland Association of Adult Day Services Hospice & Palliative Care Network of Maryland Maryland-National Capital Homecare Association MedChi Maryland Chapter, American Academy of Pediatrics Maryland Chapter, American College of Emergency Physicians Maryland Section, American Congress of Obstetricians and Gynecologists The Maryland Clinical Social Work Coalition

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