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Senate Finance Committee
Senate Bill 571 – Maryland Health Insurance Coverage Protection Act
SUPPORT WITH AMENDMENT

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March 1, 2017

On behalf of the organizations listed below, we support Senate Bill 571: *Maryland Health Insurance Coverage Protection Act*. Senate Bill 571 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 of residents to the State 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

For more information call:

The Maryland Clinical Social Work Coalition

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