



# Maryland Multi-Agency Regulatory Working Group

**Listening Sessions to Inform Policy Proposal:  
Cost-Shifting and Medicare Advantage  
October 29, 2025 and November 5, 2025**



# Working Group Establishment and Charge

---

- Governor's Directive Issued September 23, 2025
- Identified Responsible Agencies
  - Maryland Department of Health
  - Maryland Insurance Administration
  - Health Services Cost Review Commission
  - Maryland Health Care Commission
  - Maryland Health Benefit Exchange
- Overarching goal: Address issues arising from implementation of HR 1 and AHEAD that impact constituencies across the health care landscape.
  - Prioritize health care quality, access, outcomes and affordability.
  - Ensure the savings requirement is distributed.
  - Be data-driven and heart-led.

# Today's Focus and Workplan

---

- Topics: Medicare Advantage and Cost-Shifting Provisions
- Timeline
  - Hold listening sessions – October 29 and November 5
  - Post proposal for public comment – Week of November 10
  - Close public comment – November 30
  - Submit policy proposal to Governor's Office – Week of December 8
  - Receive Governor's decision – Late December

# Guidelines for Listening Session Participation

---

- **Constructive Feedback**
  - Offer feedback that is focused, specific, and aimed at improvement.
- **Active listening**
  - Listen with the intent to understand.
- **Awareness of shared time**
  - Be mindful of the time and the space taken in discussions.
  - Allow others the opportunity to contribute.
  - Please stay on topic.
- **Respectful sharing**
  - Please share your thoughts respectfully and considering the views and opinions of others.
  - Avoid interrupting others.
  - Questions are welcome.
- **Actively engage in discussions and provide feedback.**
  - Timely contributions are essential to the success of this effort; please respect deadlines for comments.

# Framing the Conversation: Medicare Advantage Initial Policy Questions

---

- What approaches should be considered for the calculation of utilization reductions through Medicare Advantage programs?
- What level of upfront investment would be necessary for Medicare Advantage plans to implement programs?
- What eligibility criteria should be required for Medicare Advantage plans to participate?

# Framing the Conversation: Cost-Shifting Initial Policy Questions

---

- What should be the threshold deficit for cost-shifting?
- How much should be allowed to shift, balancing impact across the health care sector (*e.g.*, purchasers, consumers, providers, payers)?
- What is the mechanism for shifting the savings responsibility?
- What timeline should be set for shifting?
- How should the shifting mechanism be enacted (*e.g.*, statute, executive order, agency policy – which agency or agencies)?

# Public Comments

---

Each speaker will have 3-5 minutes to speak to their comments.  
This session will be recorded.