Maryland Strategies to
Improve Oversight, Accountability, & Transparency

Health Care Spending Oversight

Health care spending oversight entities monitor and track health care spending systematically, offering data and research support to ensure efficient resource use. While many states set population health priorities, some have established oversight entities with enforcement powers. Strategies tracked include:

Health Care Spending Benchmarks

Authority to Enforce Health Care Spending Benchmarks

Hospital or Primary Care Spending Oversight Entities

Prescription Drug Affordability Boards

Some states have established independent entities charged with reviewing high-cost prescription drugs and recommending strategies to improve affordability. In certain cases, these boards are authorized to set upper payment limits to curb excessive drug prices. Strategies examined in this section include:

Prescription Drug Affordability Board Established

Prescription Drug Upper Payment Limits Established

All-Payer Claims Databases

All-payer claims databases (APCDs) compile diverse health care data that may include health, dental, and pharmacy claims from private insurers, state employee health programs, Medicare, and Medicaid. In instances where a database includes only some of these payers, it is referred to as a multi-payer claims database. Typically created through legislation, APCDs are often subject to state oversight and regulation. However, some claims databases have been voluntarily developed by independent entities, limiting oversight. Strategies examined in this section include:

All-Payer Claims Database Established

All-Payer Claims Database Operated by the State

Price Transparency

This section evaluates state efforts to provide access to health care price data through a publicly available and easily accessible tool. Strategies examined in this section include:

Price Transparency Tool Established

Prescription Drug Price Transparency Tool Established

Improve Oversight, Accountability, and Transparency

Price Transparency

Policy	Status as of June 2025	Summary
Service Cost Price Transparency Tool	State has a public-facing price transparency tool that reports negotiated rates	
Prescription Drug Price Reporting Requirement	Organizations are not required to report prescription drug price information to a state entity	

Health Care Spending Oversight

Policy	Status as of June 2025	Summary
Health Care Spending Benchmark	State has not established a health care spending benchmark for providers, insurance carriers, or both	
Authority to Enforce Health Care Spending Benchmark	State has not established a health care spending benchmark, with or without enforcement mechanisms	
Hospital or Primary Care Spending Oversight Entity	State monitors and reports hospital spending, primary care spending, or both	Maryland's Health Services Cost Review Commission, established in 1971, reviews hospital spending. Senate Bill 734 passed in 2022 requires the Maryland Health Care Commission to report annually, beginning in 2025, on primary care spending among other topics.

State Has Active Policy or Program | Policy or Program Partially Implemented | State Does Not Have an Active Policy or Program | * No Source, or Limited Information Found

Reduce Cost-Sharing for Patients

Reduce Cost-Sharing: Prescription Drugs

Policy	Status as of June 2025	Summary
Waives or Reduces Cost-Sharing for Diabetes Medications	State has enacted legislation to limit cost-sharing for insulin, diabetes related equipment, or both	Maryland caps the out-of-pocket cost for a 30-day supply of prescription insulin at $30.00, regardless of the amount or type of insulin needed.
Waives or Reduces Cost-Sharing for Asthma Inhalers	State has not enacted legislation limiting cost-sharing for asthma inhalers	
Waives or Reduces Cost-Sharing for Epinephrine Auto-Injectors	State has not enacted legislation to limit cost-sharing for prescription epinephrine autoinjector(s)	
Waives or Reduces Cost-Sharing for Specialty Drugs	State has enacted legislation to limit cost-sharing for specialty drugs	Maryland limits the amount residents must pay for prescription drugs used to treat complex or chronic medical conditions, including multiple sclerosis and hepatitis C, by capping cost-sharing at $150.00 for a 30-day supply of the specialty drug, and has passed separate legislation that caps cost-sharing for prescription drugs used to treat HIV or AIDS at $150.00 per 30-day supply.

Reduced Cost-Sharing: Behavioral Health

Policy	Status as of June 2025	Summary
Waives or Reduces Cost-Sharing for an Annual Behavioral Health Office Visit	State does not require private insurers to cover at least one annual mental health wellness exam without cost-sharing	Maryland lawmakers introduced bills in 2024 and 2025 that would require insurers to cover an annual behavioral health wellness visit; however, none have been passed.

State Has Active Policy or Program | Policy or Program Partially Implemented | State Does Not Have an Active Policy or Program | * No Source, or Limited Information Found

November 2025

healthcarevaluehub.org

With support from Arnold Ventures, the Healthcare Value Hub provides free, timely information about the policies and practices that address high health care costs and poor quality, bringing better value to consumers. The Hub is part of Altarum, a nonprofit organization with the mission of creating a better, more sustainable future for all by applying research-based and field-tested solutions that transform our systems of health and health care.