Maryland Strategies to
Reduce Cost-Sharing for Patients

Reduced Cost-Sharing for Prescription Drugs

This section examines whether states have passed legislation to reduce the amount consumers pay out-of-pocket for select prescriptions drugs including insulin, epinephrine, and asthma inhalers, and specialty drugs. Strategies examined in this section include:

- Waived or Reduced Cost-Sharing for Diabetes Medications
- Waived or Reduced Cost-Sharing for Asthma Inhalers
- Waived or Reduced Cost-Sharing for Epinephrine Auto-Injectors
- Waived or Reduced Cost-Sharing for Specialty Drugs

Reduced Cost-Sharing for Behavioral Health Services

High out-of-pocket costs can limit access to behavioral health care. To address this, some states require insurers to waive or reduce cost-sharing for an annual behavioral health visit, ensuring more affordable access to essential mental health services. This section examines whether states have implemented reduced cost-sharing requirements through:

- Waived or Reduced Cost-Sharing for an Annual Behavioral Health Office Visit

Reduced Cost-Sharing for Preventive Care

Preventive services recommended by the U.S. Preventive Services Task Force (USPSTF) are critical to early detection and management of health conditions. States can improve access by requiring insurers to waive or reduce cost-sharing for these services. Strategies examined in this section include:

- Waived or Reduced Cost-Sharing for United States Preventive Services Task Force (USPSTF) Recommended Preventive Services

Reduced Cost-Sharing for Maternal and Reproductive Health Services

Some states expand access to reproductive health care by requiring coverage of services such as fertility treatments, doula support, and abortion care without high cost-sharing barriers. These policies aim to improve maternal health outcomes and ensure equitable access to reproductive services. Strategies examined in this section include mandates requiring:

- Individual and Small Group Health Plans to Cover Fertility Treatments
- Individual and Small Group Health Plans to Cover Doula Services
- Individual and Small Group Health Plans to Cover Abortion Services

Reduced Cost-Sharing for Cancer Screening and Testing Services

Early detection of cancer improves outcomes but cost-sharing can be a barrier to recommended screenings. States may require insurers to waive or reduce cost-sharing for services such as colorectal, breast, cervical, lung, prostate, and ovarian cancer screenings, as well as biomarker testing. This section examines whether such requirements are in place to promote timely and affordable cancer screening. Strategies examined in this section include mandates requiring:

- Waived or Reduced Cost-Sharing for Colorectal Cancer Screenings
- Waived or Reduced Cost-Sharing for Follow-Up Colorectal Cancer Screenings
- Waived or Reduced Cost-Sharing for Lung Cancer Screenings
- Waived or Reduced Cost-Sharing for Breast Cancer Screenings
- Waived or Reduced Cost-Sharing for Supplementary Breast Cancer Screenings
- Waived or Reduced Cost-Sharing for Cervical Cancer Screenings
- Waived or Reduced Cost-Sharing for Ovarian Cancer Screenings
- Waived or Reduced Cost-Sharing for Prostate Cancer Screenings
- Waived or Reduced Cost-Sharing for Biomarker Testing

Reduce Cost-Sharing for Patients

Reduced Cost-Sharing: Preventive Care

Policy	Status as of June 2025	Summary
Waives Cost-Sharing for Preventive Services Recommended by the U.S. Preventive Services Task Force (USPSTF)	State mandates private insurers cover USPSTF recommended preventive services without cost-sharing	Maryland law already requires insurance plans to cover preventive services recommended by the United States Preventive Services Task Force without cost-sharing. In 2025, the state passed HB 974 to reinforce these protections. The new provisions to the law ensure that coverage will continue based on recommendations in effect as of December 31, 2024, even if federal rules change. It also gives the Insurance Commissioner authority to require coverage of future preventive care recommendations without cost-sharing.

Reduced Cost-Sharing: Maternal and Reproductive Health Care

Policy	Status as of June 2025	Summary
Individual and Small Group Health Plans Required to Cover Fertility Treatment	The state requires individual and small group health plans to offer coverage for in-vitro fertilization alone or in addition to fertility preservation services	Maryland requires individual and group insurance policies with pregnancy benefits to cover 3 in -vitro fertilization cycles per life birth to patients meeting certain requirements. Most health plan providers are also required to cover fertility preservation procedures for individuals needing medical treatment that could cause iatrogenic infertility.
Individual and Small Group Health Plans Required to Cover Doula Services	State does not require private health insurers to cover doula services for enrollees	
Individual and Small Group Health Plans Required to Cover Abortion Services	The state requires individual and small group health plans to cover abortion services	

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

Reduced Cost-Sharing: Cancer Screening and Testing Services

Policy	Status as of June 2025	Summary
Waives or Reduces Cost-Sharing for Colorectal Cancer Screenings	State law requires insurers to cover colorectal cancer screening but allows cost-sharing	
Waives or Reduces Cost-Sharing for Follow-Up Colorectal Cancer Screening Exams	State law requires insurers to cover follow-up colorectal cancer screening but allows cost-sharing	
Waives or Reduces Cost-Sharing for Lung Cancer Screenings	State law requires insurers to cover lung cancer screening but allows cost-sharing	Maryland law requires insurers and HMOs to cover follow-up diagnostic imaging recommended for lung cancer screening, including ultrasound, MRI, CT scans, and image-guided biopsies. Cost-sharing for these services cannot exceed that for breast cancer screening, except under high-deductible health plans where the deductible may still apply.

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

Reduced Cost-Sharing: Cancer Screening and Testing Services

Policy	Status as of June 2025	Summary
Waives or Reduces Cost-Sharing for Cervical Cancer Screenings	State law requires insurers to cover cervical cancer screening but allows cost-sharing	Under current law, Maryland requires insurers to cover routine cervical cancer screenings without cost-sharing due to federal law; however, if substantial changes are made to the Affordable Care Act, the cost-sharing prohibition may cease.
Waives or Reduces Cost-Sharing for Breast Cancer Screenings	State law requires insurers to cover breast cancer screening but allows cost-sharing	Maryland requires insurers to cover breast cancer screenings without cost-sharing due to federal law; however, if substantial changes are made to the Affordable Care Act, the cost-sharing prohibition may cease. Current Maryland law requires insurers to cover breast cancer exams predeductible.
Waives or Reduces Cost-Sharing for Supplementary Breast Cancer Screenings	State law requires insurers to cover supplementary breast cancer screening with no cost-sharing	

● 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

Reduced Cost-Sharing: Cancer Screening and Testing Services

Policy	Status as of June 2025	Summary
Waives or Reduces Cost-Sharing for Prostate Cancer Screenings	State law requires insurers to cover prostate cancer screening with no cost-sharing	
Waives or Reduces Cost-Sharing for Ovarian Cancer Screening	State law does not require coverage or waive cost-sharing for ovarian cancer screening exams	Maryland legislators introduced a bill in 2025 that would have required insurers to cover preventive screenings for ovarian cancer without cost-sharing, but the bill died in committee.
Waives or Reduces Cost-Sharing for Biomarker Testing for Cancer	State requires coverage of biomarker testing for cancer screening but allows cost-sharing	Health insurance carriers, HMOs, and nonprofit health service plans in Maryland are required to cover biomarker testing for the purpose of diagnosis, treatment, appropriate management, or ongoing monitoring of a disease or condition. The state does not prohibit cost-sharing.

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

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