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Good morning Chair Carter and esteemed members of the House Committee on Insurance and Financial Services. Thank you for the opportunity to share the perspective of the Michigan State Medical Society (MSMS) and its members on these important bills.

I am Doctor Jennifer Morse, a board-certified family physician and the medical director of three public health departments, Central Michigan District, Mid-Michigan District, and District Health Department #10, which cover 19 counties in Michigan, and a member of the Michigan State Medical Society board of directors. On behalf of MSMS and myself, I am here to express support for this package of bills codifying the Affordable Care Act provisions, particularly Senate Bills 356 and 357. All of these bills are vitally important to the health and well-being of all Michiganders.

As physicians, we witness firsthand the immense challenges patients face when insurance coverage falls short. As you may know, on March 30th, 2023, a judge in the U.S. District Court struck down a critical provision of the Affordable Care Act (ACA) that requires most private health plans to cover a range of preventive services without any cost sharing for their enrollees. Should this ruling hold, millions of individuals could find themselves burdened with the exorbitant costs for preventative care and even worse, some may lose access to essential services altogether.

Our unwavering commitment to delivering the right care at the right time to the right patient, and thereby fostering the best patient outcomes, compels us to recognize the dire consequences of uncertain or lost health coverage. When the process of securing insurance becomes convoluted, burdensome, and financially disastrous, too many individuals are left without the coverage they urgently need.

That is precisely why MSMS stands firmly behind these bills. They present a pivotal opportunity to ensure patients receive the transparency they deserve. Insurers would be mandated to furnish written forms detailing the terms and conditions of their policies at the time of application, issuance, and renewal. By empowering patients with comprehensive knowledge of the benefits covered under their plan, we can dismantle barriers to accessing quality care. Moreover, these bills unequivocally prohibit insurers from rescinding coverage unless an enrollee has committed fraud or intentionally misrepresented material facts. Notably, insurers would be required to provide written notice to the enrollee at least 30 days prior to any rescission. By preserving these vital provisions in law, you can help safeguard the health care coverage of countless individuals, freeing them from the constant fear of losing coverage.

Additionally, by codifying these protections, my colleagues and I will be equipped to wholeheartedly advocate for regular checkups, screenings, and other preventative care measures. It is a well-established fact that these interventions significantly improve overall health outcomes and, as a family physician who now works in public health, I know these interventions save lives. By ensuring that patients can access these essential services, without fear of financial ruin, you will pave the way for a healthier and more resilient society.

On behalf of the Michigan State Medical Society, I respectfully request your favorable consideration of these bills.

Thank you, again, Chair Carter and members of the committee for your time and attention to this important legislation.