As Insurance Commissioner, “Maryland Matt” has taken thousands of dollars from the health insurance industry including top health insurance executives, while allowing a 23% increase in health care premiums for Montanans. And during the coronavirus pandemic, he continues to allow junk insurance plans to deny coverage for pre-existing conditions – like asthma and even coronavirus. He even pushed plans that don’t cover basic needs like prescription drugs, maternity care, or preexisting conditions.

January 2, 2017: Rosendale Was Sworn In As State Auditor. “Republican Corey Stapleton was sworn in as secretary of state, Elsie Arntzen as the superintendent of public instruction and Matt Rosendale as state auditor. All assume the offices from Democrats who were term-limited.” [Helena Independent Record, 1/2/17]

5/27/17: Amanda Cohen, Co-Owner Of Insurance Care Direct, Contributed $2,700 To Matt Rosendale For Montana. [FEC, 5/27/17]

5/27/17: Bradley Cohen, Co-Owner Of Insurance Care Direct, Contributed $2,700 To Matt Rosendale For Montana. [FEC, 5/27/17]

5/27/17: Seth Cohen, Co-Owner Of Insurance Care Direct, Contributed $2,700 To Matt Rosendale For Montana. [FEC, 5/27/17]

5/27/17: Colette Andre, Co-Owner Of Affordable Health Direct, Contributed $1,000 To Matt Rosendale For Montana. [FEC, 5/27/17]

5/27/17: Laurence Kraushar, Co-Owner Of Affordable Health Direct, Contributed $1,000 To Matt Rosendale For Montana. [FEC, 5/27/17]

2017: Rosendale “Didn’t Officially Object” To 23 Percent Proposed Rate Increase Filed By Montana Blue Cross Blue Shield. “The insurance commissioner has the power to review premium changes proposed by health insurers for these policies. He or she can say whether the increases are excessive or unjustified, but has no power to change them. The companies can file what rates they choose. Last year, Blue Cross and Blue Shield of Montana, the state’s largest private insurer, proposed an average rate increase for these policies of 23 percent. Rosendale held hearings on the increases, but didn’t officially object to them, and they took effect for 2018.” [KTVH, 8/16/18]

March 18, 2020: Rosendale’s Office Suggested Short Term Insurance Plans As An Option For Montanans Without Insurance. “Short-Term Health Insurance may also be an option for Montanans seeking health coverage. STLD plans are a type of insurance meant primarily for those looking for temporary coverage and are available for enrollment year-round. Several major companies offering short-term plans in Montana have already announced that they will waive deductibles, copays, coinsurance and prior authorization requirements for COVID-19 testing services (Company notices found HERE and HERE). Consumers are advised that not all short-term plans may cover testing for COVID-19. Always consult with your health plan or insurance agent about the specifics of your coverage prior to purchasing any insurance product.” [Office of the Montana State Auditor, 3/18/20]

Office Of The Montana State Auditor: “Pre-Existing Conditions Can Be Excluded From A Short-Term Policy.” “Pre-existing conditions can be excluded from a short-term policy. This is a condition for which medical advice or treatment was recommended by or received from a provider of health care services within a certain time frame (typically the last 5 years) before the effective date of the coverage.” [Office of the Montana State Auditor, accessed 6/23/20]
**Office Of The Montana State Auditor: Short Term Plans Could Not Cover Prescription Drugs.** “In addition to pre-existing conditions there may be exclusions or limitations regarding health benefits (such as hospitalization, emergency services, preventive care, prescription drugs, and mental health and substance use disorder services). Your policy might also have lifetime and/or annual dollar limits on health benefits and you may also be responsible for copay and deductible amounts.” [Office of the Montana State Auditor, accessed 6/23/20]

**Short Term Plans That Did Not Cover Preexisting Conditions Were Criticized As Junk.** “The Trump administration is encouraging consumers on the Obamacare individual market to seek help from private brokers, who are permitted to sell short-term health plans that critics deride as ‘junk’ because they don’t protect people with preexisting conditions, or cover costly services such as hospital care, in many cases.” [Washington Post, 11/20/19]

**CNBC: “Of The 24 Short-Term Health-Care Plans Offered By Big Online Providers, Kaiser Found None Offered Maternity Coverage.”** “For example, short-term, limited duration insurance policies may seem like a good option because you can buy one at any time of the year and these can be 20% less than the lowest-cost ACA plans, according to research last year from Kaiser. And, because of changes by the Trump administration, Americans can stay on this type of insurance for up to three years. But Hemlin says a majority of these plans don’t actually cover maternity care either. Of the 24 short-term health-care plans offered by big online providers, Kaiser found none offered maternity coverage.” [CNBC, 11/26/19]

**COVID-19 Was Considered A Preexisting Condition.** “COVID-19 could have stamped a person ‘uninsurable’ if not for the Affordable Care Act. The ban on insurers using preexisting conditions to deny coverage is a key part of the Obama-era law that the Trump administration still seeks to overturn.” [Associated Press, 5/3/19]

**Asthma Was Considered A Preexisting Condition.** “Before the Affordable Care Act, Americans could be denied health insurance if they had one of several of common health conditions like diabetes, asthma and even acne. Obamacare generally stopped that practice.” [CNN, 9/21/17]

**Rosendale Approved Allowing A Form Of Health Coverage – Medi-Share – That Didn’t Cover Preexisting Conditions To Operate In Montana.** “That’s the same reason he gave for endorsing Medi-Share in Montana. Medi-Share is a Christian ‘health-sharing ministry,’ which allows a group of members to allocate funding to pay the medical bills of other members who pay into the system. Medi-Share also does not guarantee coverage for pre-existing conditions. Rosendale explained his reasoning for approving Medi-share to MTPR in April of 2017.” [Montana Public Radio, 10/10/18]

**Dallas Morning News: “Medi-Share Does Not Have Prescription Coverage.”** “Just like his private plan, it will cost $13,000 for the new socket under Orlie’s new insurance. Unlike his private plan, Medi-Share does not have prescription coverage. But after calculating the costs of each option, Orlie is saving money under Medi-Share — with similar coverage.” [Dallas Morning News, 9/22/17]