

Department of Legislative Services
Maryland General Assembly
2016 Session

FISCAL AND POLICY NOTE
First Reader

House Bill 802 (Chair, Health and Government Operations
Committee)(By Request - Departmental - Maryland
Insurance Administration)

Health and Government Operations

Health Insurance - Provider Panel Lists

This departmental bill alters the information a carrier must provide to prospective enrollees and enrollees regarding the carrier's provider panel. A carrier must demonstrate the accuracy of the information provided on request of the Insurance Commissioner.

The bill takes effect June 1, 2016.

Fiscal Summary

State Effect: Any additional workload for the Maryland Insurance Administration (MIA) can be handled with existing budgeted resources. Revenues are not affected.

Local Effect: None.

Small Business Effect: MIA has determined that this bill has minimal or no impact on small business (attached). The Department of Legislative Services concurs with this assessment.

Analysis

Bill Summary: A carrier must make available a list of providers on the provider panel for the enrollee's health benefit plan that includes (1) the name of the provider; (2) the provider's specialty areas; (3) whether the provider is currently accepting new patients; and (4) for each office of the provider, its location, contact information, and whether the

provider is on the provider panel at the office location. Information must be accurate on the date of publication or initial posting on the Internet and update.

Current Law: A carrier must make available to prospective enrollees on the Internet and, on request, in printed form, a list of providers on the carrier's provider panel and information on providers that are no longer accepting new patients. A carrier must notify each enrollee at the time of initial enrollment and renewal about how to obtain a list of providers on the carrier's provider panel and information on providers that are no longer accepting new patients. Printed information must be updated at least once a year. Information provided on the Internet must be updated at least once every 15 days. A carrier must update its provider information within 15 working days after receipt of written notification from the participating provider of a change in the applicable information.

Background: In February 2015, Governor Hogan established, by executive order, the Heroin and Opioid Emergency Task Force. In the [Final Report of the Heroin and Opioid Emergency Task Force](#), issued in December 2015, the task force recommended legislation to require carriers to provide prospective enrollees with a list of providers for the enrollee's health benefit plan, including names, addresses, specialty areas, and whether each provider is accepting new patients. The provider panel list is required to be accurate upon publication and annually thereafter. The task force noted that, by providing accurate provider directories, consumers will be able to more easily find behavioral health care providers who are in-network with their insurance carrier. The bill implements this recommendation and addresses numerous complaints MIA receives regarding the accuracy of provider directories.

Additional Information

Prior Introductions: None.

Cross File: None.

Information Source(s): Maryland Insurance Administration, Heroin and Opioid Emergency Task Force, Department of Legislative Services

Fiscal Note History: First Reader - February 24, 2016
kb/ljm

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ANALYSIS OF ECONOMIC IMPACT ON SMALL BUSINESSES

TITLE OF BILL: Health Insurance—Provider Panel Lists

BILL NUMBER: HB 802

PREPARED BY:
(Dept./Agency) Maryland Insurance Administration

PART A. ECONOMIC IMPACT RATING

This agency estimates that the proposed bill:

WILL HAVE MINIMAL OR NO ECONOMIC IMPACT ON MARYLAND
SMALL BUSINESS

OR

WILL HAVE MEANINGFUL ECONOMIC IMPACT ON MARYLAND
SMALL BUSINESSES

PART B. ECONOMIC IMPACT ANALYSIS