

HB1292 - Delegate Kaiser - Senate Testimony.pdf

Uploaded by: Anne Kaiser

Position: FAV

ANNE R. KAISER
Legislative District 14
Montgomery County

Health and Government
Operations Committee

House Chair
Joint Committee on Cybersecurity,
Information Technology and
Biotechnology



The Maryland House of Delegates
6 Bladen Street, Room 425
Annapolis, Maryland 21401
301-858-3036 · 410-841-3036
800-492-7122 Ext. 3036
Fax 301-858-3060 · 410-841-3060
Anne.Kaiser@house.state.md.us

THE MARYLAND HOUSE OF DELEGATES
ANNAPOLIS, MARYLAND 21401

**Testimony in Support of HB1292: Health Insurance - Provider Directory - Required Updates
March 26, 2025**

Madam Chair Beidle and distinguished members of the Finance Committee, it is my pleasure to come before you and offer testimony in favor of **House Bill 1292**.

To better align the MD Code with federal law, as amended, this bill makes certain vocabulary changes, requires insurers to update online directories within 2 (rather than 15) working days of receiving updated information from providers, and requires printed directories to include a statement listing the date of publication and a notice to refer to online directories for more updated information.

Additionally, this bill requires carriers to include a statement reminding individuals to confirm with the provider before seeking treatment that they participate in their specific health benefit plan (and not just the carrier overall). Finally, this bill requires the Maryland Insurance Administration (MIA) to notify this committee of any regulation changes related to directories made during the interim.

In recent years, online “provider directories,” published by each insurance carrier, have become the quickest way to find an in-network healthcare provider. According to research conducted by The Ohio State University College of Medicine, 43% of Americans used these insurance carrier-produced databases in the past year. It should be a basic expectation that these directories -- which constituents, friends, and neighbors rely on -- to be accurate.

In fact, the opposite is true, and directory inaccuracies persist. One study published in the journal Health Affairs reported that more than half of respondents (53%) found inaccuracies in these provider directories. When inaccuracies exist, NIH research suggests that patients were twice as likely to be treated by an out-of-network provider and four times as likely to receive a surprise out-of-network bill. Beyond these cost concerns, these inaccuracies lead to delays in needed medical services. Inaccuracies in provider directories have been reported by every state and was one of the targets of the federal “No Surprises Act” in 2021. Maryland’s insurance code does have provisions to resolve these inaccuracies. Despite this, provider directories continue to have inaccuracies, many of which are not resolved within the 15 days required by Maryland code -- or even within the 90 days required by federal statute. The American Journal for Managed Care reported that these inaccuracies often persist for over 540 days.

This bill is an important step toward strengthening the accuracy of our directories and better understanding the issues related to how we review accuracy. We worked with MIA and the industry to finalize the provisions included in this bill and will continue to work with them throughout the interim to identify additional solutions for the future.

This bill passed the House with a vote of 137-0. I urge a favorable report on **House Bill 1292**.

HB1292 Provider Directory LOS Crossover.pdf

Uploaded by: Irnise Williams

Position: FAV

CAROLYN A. QUATTROCKI
Chief Deputy Attorney General

LEONARD J. HOWIE III
Deputy Attorney General

CARRIE J. WILLIAMS
Deputy Attorney General

SHARON S. MERRIWEATHER
Deputy Attorney General

ZENITA WICKHAM HURLEY
Chief, Equity, Policy, and Engagement



**STATE OF MARYLAND
OFFICE OF THE ATTORNEY GENERAL
CONSUMER PROTECTION DIVISION
HEALTH EDUCATION AND ADVOCACY UNIT**

ANTHONY G. BROWN
Attorney General

WILLIAM D. GRUHN
Division Chief

KIMBERLY S. CAMMARATA
Unit Director

PETER V. BERNIS
General Counsel

CHRISTIAN E. BARRERA
Chief Operating Officer

IRNISE WILLIAMS
Deputy Unit Director

March 24, 2025

TO: The Honorable Pamela Beidle, Chair
Senate Finance Committee

FROM: Irnise F. Williams, Deputy Director, Health Education and Advocacy Unit

RE: House Bill 1292- Health Insurance - Provider Directory - Required Updates-
SUPPORT

The Health Education and Advocacy Unit (HEAU) supports House Bill 1292 as amended. This bill would require carriers, excepting stand-alone dental plans, to update their online provider directories within two working days of any notification of any change in the applicable information from the provider/facility. This change would align state law with the No Surprises Act (NSA).

Reliable provider directories protect consumers and eliminate unnecessary billing issues. Accurate provider directories facilitate patient access to care and prevent surprise billing due to outdated information by providing reliable details about in-network providers, including their current contact information and practice locations; outdated information can lead to confusion, delays in care, and potential financial burdens for patients.

We urge a favorable report.

2025 MCHS HB 1292 Senate Side.pdf

Uploaded by: Jennifer Navabi

Position: FAV



Maryland Community Health System

Committee: Senate Finance Committee

Bill Number: House Bill 1292 – Health Insurance - Provider Directory - Required Updates

Hearing Date: March 26, 2025

Position: Support

The Maryland Community Health System supports *House Bill 1292 – Health Insurance – Provider Directory – Required Updates*. This bill shortens the amount of time carriers have to update information in their provider directory from 15 to 2 working days after being notified of a change.

Maryland Community Health System is a network of federally qualified health centers providing primary, behavioral health, and dental services to underserved communities across Maryland. We serve all individuals, regardless of their ability to pay or insurance status. Accurate network directories are key to ensuring our patients have access to information about network providers, and yet they are often badly outdated. This causes confusion and frustration for both patients and providers. Any effort to improve accurate provider directory information would be a great help to Marylanders seeking in-network care.

We ask for a favorable report. If we can provide any further information, please contact Robyn Elliott at relliott@policypartners.net or (443) 926-3443.

HB 1292 - MIA - SWA - FIN.pdf

Uploaded by: Jamie Sexton

Position: FWA

WES MOORE
Governor

ARUNA MILLER
Lt. Governor



MARIE GRANT
Acting Commissioner

JOY Y. HATCHETTE
Deputy Commissioner

DAVID COONEY
Associate Commissioner
Life and Health Unit

200 St. Paul Place, Suite 2700, Baltimore, Maryland 21202
Direct Dial: 410-468-2471 Fax: 410-468-2020
1-800-492-6116 TTY: 1-800-735-2258
www.insurance.maryland.gov

Date: March 26, 2025

Bill # / Title: House Bill 1292 - Health Insurance - Provider Directory - Required Updates

Committee: Senate Finance Committee

Position: Support with Amendments

The Maryland Insurance Administration (MIA) appreciates the opportunity to share its support with amendments for House Bill 1292.

House Bill 1292 amends § 15-112 of the Insurance Article to conform Maryland Law to the requirements of the federal No Surprises Act (“NSA”). In addition to the federal requirements, the bill shortens the amount of time carriers have to update their provider directory on the internet from just over two weeks, to two working days, following receipt of notification from the provider. Dental carriers will have 15 working days to update the same information in their provider directories. The bill also requires carriers to include in their provider directories in printed form, a statement notifying readers that the information contained in the provider directory is accurate as of the date of publication, and that individuals should consult the internet version of the directory or contact the carrier directly in order to get the most current information. The provider directory must also include a statement that advises enrollees to contact providers or facilities to verify their participation in both the carrier’s network *and* the enrollee’s health benefit plan.

The ability of consumers to obtain reliable information on a provider’s network can be key to receiving timely care before medical issues increase in severity and cost. Sudden injuries or illnesses with quickly emerging symptoms often require treatment before the window of time a carrier has to update their provider network. House Bill 1292 will ensure that patients who require care sooner rather than later, will have access to an accurate list of in-network providers who can deliver them timely care without incurring the burden of out-of-network costs. In so doing, the bill strengthens “network adequacy” protections in a manner consistent with the goals of the Affordable Care Act (ACA).

The MIA suggests a minor technical amendment to the bill for improved clarity, recommending that the reporting requirement in Section 2 be specified as "the Insurance Commissioner" conducting the report, rather than "the Commission."

For these reasons, the MIA urges a favorable committee report on House Bill 1292 with additional amendments, and thanks the committee for the opportunity to share its feedback.