



SB 113. Health Insurance - Provider Panels - Definitions of Provider and Health Care Services:

Hearing: January 15, 2020, Senate Finance Committee.

**SUPPORT**

MDDCSAM is a chapter of the American Society of Addiction Medicine whose members are physicians and other health providers who treat people with substance use disorders.

MDDCSAM supports SB 113 with a recommendation.

MDDCSAM supports this bill because it would require commercial carriers to credential health care organizations and providers within a unified time frame. Currently, the time required for credentialing some providers is unpredictable and may take an inordinate amount of time, multiple months in some cases. It is our impression that applications from behavioral health providers tend to be held up much longer than those of somatic providers.

Clearly this puts health care organizations in an untenable position when they need to hire providers, but cannot bill for the provider’s services for an undetermined number of months, or even know if they will eventually become credentialed. The reforms that result from the new definitions in this bill are sorely needed.

We strongly recommend that, in addition, commercial carriers should not be permitted to require separate credentialing by individual providers when they are employed by a credentialed health care organization that bills for their services. This duplication in credentialing is not required by Maryland Medicaid. This additional credentialing is unnecessary and burdensome. It requires health care organizations to hire providers without being able to bill for their services, causing serious cash flow and other disruptions, ultimately impacting the population served.

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