



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

HB 912 Health Insurance – Provider Panels – Coverage for Nonparticipation
House Health and Government Operations Committee. February 17, 2022

SUPPORT

Due to inadequate provider networks, members often have to request permission to get out-of-network behavioral health services.

Though carriers are required by law to provide these services, in practice they often do not.

One reason is that patients get **unexpected, unaffordable charges**, even though they **thought they were covered, pay their premiums, and asked permission** to go out of network.

But this is not the main problem.

The main problem is that members simply go without these covered services.

Many do not know what to do when there are no specialist in-plan providers.

They do not know they have to ask permission to go to another provider.

(And they don't know about the unexpected, possibly unaffordable new charges).

Even many healthy individuals would forego care due to these barriers.

The barriers becomes insurmountable for many experiencing mental health or substance disorder symptoms (in other words, people who need these services). These disorders often reduce energy, motivation, and affect the ability to function.

HB 912 requires that carriers inform members, in plain language, of the right to request treatment by a non-participating provider if needed, in print and electronic plan documents, and in any provider directory.

It also closes a gaping loophole whereby **covered members do not have access to services that they pay for and are entitled to.**

One of the greatest shortcomings in our system of care are well-known barriers to accessing behavioral health services. HB 912 would go a long way to restoring access, and restoring fairness.

Respectfully,

Joseph A. Adams, MD, FASAM, Chair, Public Policy Committee