



Maryland Community Health System

Committee: House Health and Government Operations Committee

Bill Number: House Bill 1108 – Health Insurance Carriers and Managed Care Organizations – Participation on Provider Panels

Hearing Date: March 9, 2023

Position: Support

Maryland Community Health System (MCHS) supports *House Bill 1108 – Health Insurance Carriers and Managed Care Organizations – Participation on Provider Panels*. This bill alters the process by which carriers and managed care organizations determine participation by providers on provider panels and makes changes to the internal review systems to include grievances involving the rejection of a provider’s application to participate on a provider panel.

Carriers and managed care organizations (MCOs) should be more transparent with providers on why they were denied from the carrier or MCO’s provider panel. To ensure that providers are given a fair chance to join a provider panel, it is essential for carriers and MCOs to provide clear and detailed information on why certain providers were denied. The current law does not provide this detail or transparency. Transparency on the part of carriers and MCO will enable providers to understand their rights and responsibilities as well as the criteria for joining the provider panel. The bill also clarifies that a provider may not be terminated because of the number of claims the provider has been reimbursed or the amount of reimbursement associated with those claims.

Additionally, the Insurance Commissioner is required to adopt regulations to establish the internal review system required under the bill. With the adoption of regulations, this approach allows for a uniform internal review system among carriers and MCOs, allowing for a smoother process for providers.

We ask for a favorable report. If we can provide further information, please contact Michael Paddy at mpaddy@policypartners.net.