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**Testimony in Support of HB1292: Health Insurance - Provider Directory - Required Updates
March 10, 2025**

Madam Chair Peña-Melnyk and distinguished members of the Health and Government Operations Committee, it is my pleasure to come before you and offer testimony in favor of **House Bill 1292**. This bill aims to improve the accuracy of healthcare provider directories. As drafted, this bill requires insurance companies to more frequently update and verify the accuracy of their directories. I have also prepared an amendment to require the Maryland Insurance Administration (MIA) to collect, report, and review the accuracy of data from carriers, as well as any regulatory changes made by the administration this year.

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. While nationwide data exists, Maryland-specific data is needed to better understand the scope of our provider directories. Maryland’s code already requires carriers to periodically review data and permits MIA to review the data, but further transparency and review is needed.

This bill is an important first step toward strengthening the accuracy of our directories and better understanding the issues related to how we review accuracy. We worked with MIA to identify these provisions and will continue to work with them throughout the interim to identify additional solutions in the future. I urge a favorable report on **House Bill 1292**.