



15 School Street, Suite 200
Annapolis, Maryland 21401
410-269-1554

March 11, 2025

The Honorable Joseline Pena-Melnyk
Chair, House Health and Government Operations Committee
Room 241
House Office Building
Annapolis, MD 21401

House Bill 1351 – Health Insurance – Provider Panels – Credentialing for Behavioral Health Professionals

Dear Chair Pena-Melnyk,

The League of Life and Health Insurers of Maryland, Inc. respectfully **opposes** *House Bill 1351 – Health Insurance – Provider Panels – Credentialing for Behavioral Health Professionals* and urges the committee to give the bill an unfavorable report.

The League and our members are extremely committed to adding behavioral health professionals to networks, despite the challenges we face as a result to the incredible shortage of behavioral health care providers in Maryland. While we appreciate the intent of the sponsor, unfortunately House Bill 1351 does not solve this issue, and in many ways harm carrier operational processes.

Credentialing is more than a “check the box” regulatory burden. It is an essential safety component to health care. Health care organizations must establish the qualifications of their licensed medical professionals by assessing their background and legitimacy to provide care. In addition to standards set by states, insurers must meet a variety of accreditation standards that require care and due diligence in the credentialing process. We also wanted to share with the committee that carriers all employ online systems to help accelerate the process where possible.

Under current Maryland law, a carrier is required to provide notice to the provider of its intent to continue to process the provider’s application to obtain necessary credentialing information within 120 days after the date the notice is provided, and shall: (1) accept or reject the provider for participation on the carrier’s provider panel; and (2) send written notice of the acceptance or rejection to the provider at

the address listed in the application. House Bill 1351 moves that 120-day timeframe to 30 days for two specific classes of providers.

Not only does the discrepancy create logistical challenges between provider types, but it also discounts the significant back and forth it takes between carrier and provider to certify licensure, accreditation, background checks, and negotiation to choose appropriate providers to be added to a panel. Much of the process is subject to responsiveness from other parties such as certification of licensure. To rush the process could lead to the unintended consequence of denying more potential providers for lack of a timely response for the required information.

The shortened timeframe fails to enhance the current process and may harm a provider's credentialing experience by forcing carriers to hasten decision making to meet shorter timelines without consideration of the commitment it takes to ensure competent providers are providing Maryland consumers the care they need.

For these reasons, the League urges the committee to give House Bill 1351 an unfavorable report.

Very truly yours,

A handwritten signature in black ink, appearing to read "Matthew Celentano", with a long horizontal flourish extending to the right.

Matthew Celentano
Executive Director

cc: Members, House Health and Government Operations Committee