

inseparable

March 4, 2026

Senate Finance Committee
3 East Miller Senate Office Building
Annapolis, Maryland 21401

Via electronic submission

RE: Support for SB 808 (Insurance – Credentialing and Provider Directories – Network Access)

Chair Beidle, Vice Chair Hayes, and Members of the Committee:

On behalf of Inseparable, a national nonprofit organization focused on closing the treatment gap for people with mental health and substance use conditions, I write in strong support of Senate Bill 808. We thank Senator King for sponsoring this legislation, which removes administrative barriers that prevent qualified clinicians from joining insurance networks and ensures that provider directories accurately reflect available care.

Why SB 808 Is Necessary

In Maryland today, mental health providers seeking to join insurance networks must navigate complex credentialing requirements. Although the state has established a uniform credentialing form, inconsistent submission methods and processing delays continue to slow provider approval. Without a consistent electronic submission requirement and a clear application review timeline, approval can take months. Carriers are also permitted to charge credentialing fees, adding unnecessary costs for providers trying to join a network. These barriers disproportionately burden small and solo practices, discourage in-network participation, and ultimately limit the number of providers available to insured patients.

The consequences are significant. Marylanders are [nine times more likely](#) to have to go out-of-network for outpatient mental health care than for outpatient medical care, forcing them to pay significantly higher out-of-pocket costs. Administrative bottlenecks that delay and prevent network participation lead to inadequate insurer networks, long wait times, and reduced access to in-network care.

Streamlining Credentialing to Improve Network Participation

SB 808 directly addresses these structural barriers. The bill builds on existing law by requiring insurers to accept the uniform credentialing form electronically, prohibiting credentialing fees, and shortening the timeline for credentialing decisions from 120 days to 30 days, the standard recently adopted by New Hampshire and New Mexico. Modernizing the credentialing process is one of the most immediate ways to expand network participation and lower costs to consumers by increasing access to in-network care.

Combating Ghost Networks and Improving Transparency

SB 808 also takes meaningful steps to address “ghost networks,” where insurance provider directories list clinicians who are not actually available to see patients. When directories are outdated or inaccurate, they create the illusion of a robust network that does not exist in practice.

For individuals seeking mental health or substance use disorder treatment—often during periods of crisis or urgent need—unanswered calls and repeated unsuccessful attempts to find an available provider can mean lost, critical time. Patients often become discouraged and abandon their search altogether, delaying care when it is needed most. By requiring insurers to update and verify provider directories at least every 15 days, SB 808 promotes transparency and ensures that patients have reliable, current information when seeking care. Accurate directories are essential to making network adequacy meaningful in practice.

Conclusion

SB 808 strengthens network adequacy by addressing the administrative barriers that keep providers out of network and by ensuring directories accurately reflect available clinicians. By improving transparency, timeliness, and accountability, the bill helps ensure that insurance coverage translates into meaningful access to mental health and substance use disorder treatment for Marylanders.

We respectfully urge the Committee to issue a favorable report on Senate Bill 808.

Sincerely,

A handwritten signature in blue ink that reads "David Lloyd". The signature is written in a cursive, flowing style.

David Lloyd
Chief Policy Officer, Inseparable