



OFFICERS OF THE BOARD

President

Stephanie Wolf, JD, Ph.D.

President-Elect

Peter Smith, Psy.D.

Past President

Brian Corrado, Psy.D.

Secretary

Kim Sanschagrin JD, Ph.D.

Treasurer

Andrea Chisolm, Ph.D.

Representatives-at-large

Deborah Williams, Psy.D.

Laurie Donze, Ph.D.

Representative to APA Council

Mary Fernandes, Ph.D.

COMMITTEE CHAIRS

Communications

Beatrice Gerry, Ph.D.

Diversity

Mindy Milstein, Ph.D.

Early Career Psychologist

Danielle Wexler, Ph.D.

Educational Affairs

Shalena Wade, Ph.D.

Ethics

LaShaun Williams, Psy.D.

Legislative

Stephanie Olarte, Ph.D.

Membership

Dana O'Brien, Ph.D.

Past Presidents' Council

Steve Sobelman, Ph.D.

PROFESSIONAL AFFAIRS

OFFICER

Paul C. Berman, Ph.D.

EXECUTIVE DIRECTOR

Taylor Dickerson

February 17, 2026

Delegate Heather Bagnall, Chair
Delegate Bonnie Cullison, Vice Chair
Health Committee
240 Taylor House Office Building
241 Taylor House Office Building
Annapolis, MD 21401

RE: HB 739 Health Insurance – Prompt Payment of Claims – Requirements

Position: SUPPORT with AMENDMENT

Dear Chair Bagnall, Vice Chair Cullison, and Members of the Committee:

The Maryland Psychological Association, (MPA), which represents over 1,000 doctoral level psychologists throughout the state, asks the House Health Committee to **report favorably on HB 739 with the requested Amendment.**

HB 739 strengthens Maryland’s prompt payment requirements for health insurance claims and promotes greater transparency and accountability in insurer communications with health care providers. The bill’s provisions clarifying notice requirements and claim processing timelines will improve administrative efficiency, reduce payment delays, and enhance fairness for providers and patients alike. These changes represent an important step toward a more predictable and responsive reimbursement system.

The Maryland Psychological Association, however, respectfully requests a clarifying amendment to page 2, lines 8 and 9 of the bill regarding the method by which insurers transmit notices of claim status.

To ensure administrative flexibility and respect provider workflow preferences, the language should allow providers to determine their preferred method of communication. For example, the provision could be amended to state: “**MAIL OR EMAIL, BASED UPON THE PROVIDER’S PREFERENCE,**” or alternatively, “**BY MAIL, WITH AN OPT-IN PROCESS FOR THE PROVIDER TO ELECT EMAIL COMMUNICATION.**” This amendment would support efficient communication while ensuring that providers retain control over how sensitive reimbursement information is transmitted.

Many individual or small group practitioners do not have administrative staff to regularly check email, and/or may receive so many emails that they do not see an email from the insurance company in a timely fashion. With this amendment, House Bill 739 would more fully achieve its goal of improving claim processing procedures while protecting provider choice and operational needs. We respectfully urge a favorable report on House Bill 739 with the proposed modification.

If we can be of any further assistance, please do not hesitate to contact MPA’s Legislative Chair, Dr. Stephanie Olarte, Ph.D. at mpalegislativcommittee@gmail.com.

Respectfully submitted,

Stephanie Wolf, JD, Ph.D.
Stephanie Wolf, JD, Ph.D.
President

Stephanie Olarte, Ph.D.
Stephanie Olarte, Ph.D.
Chair, MPA Legislative Committee

cc: Barbara Brocato & Dan Shattuck, MPA Government Affairs