



## **House Bill 1093 - Health Insurance - Provider Panels - Requirements**

### **Letter of Information House Health Committee February 26, 2026**

Thank you for the opportunity to submit this Letter of Information on House Bill 1093. The Maryland Managed Care Organization Association (MMCOA) represents all nine Managed Care Organizations (MCOs) that participate in Maryland's HealthChoice program and collectively finance and arrange medical care for nearly 1.3 million Maryland residents.

House Bill 1093 would establish new statutory requirements related to provider networks, credentialing processes, and related communications. As drafted, the bill applies to both commercial carriers and Medicaid MCOs in a manner that may create uncertainty for MCOs, providers, and practice managers seeking to understand and comply with overlapping requirements. Maryland's Medicaid MCOs administer provider panels within a comprehensive statutory, regulatory, and contractual framework overseen by the Maryland Department of Health (MDH), which already governs credentialing standards, network adequacy, and provider data through detailed contract provisions, delegated credentialing arrangements, accreditation requirements, and regulatory oversight.

HB 1093 would introduce additional statutory timelines and penalty structures that differ from, and in some cases conflict with, existing MDH requirements. These differences may create operational challenges for MCOs and providers without clearly advancing access to care or quality outcomes for Medicaid beneficiaries. MMCOA welcomes a dialogue on these issues and routinely seeks to improve payor and provider relations such that we can resolve issues outside of the legislative process.

*Please contact Joe Winn, Executive Director of MMCOA, with any questions regarding this testimony at [jwinn@marylandmco.org](mailto:jwinn@marylandmco.org).*