

## **Testimony in Support of HB 1093**

### **Anita Butani, Founder/Executive Director, Bright Day Pediatric Therapies**

My name is Anita Butani. I am a small business owner and the founder of Bright Day Pediatric Therapies. We recently opened a center in DC that provides ABA, Speech, and Occupational Therapy. Based on the "administrative gauntlet" we've run with 14 different regional insurers on credentialing, I am here in strong support of HB 1093.

As you know, care for children with autism is high intensity – daily behavioral therapy for years – and because of that, it is also high cost. Given that 1 in 36 children today are diagnosed with autism, demand for this care is also quite high – and supply continues to be limited. Many children sit on waitlists for years, missing out on care during key moments in early brain development that could change their long-term outcomes.

During credentialing, we have learned that under the current regulatory system, insurance companies are financially incentivized to keep these families on waitlists.

Here's how that works: Insurance companies receive fixed monthly premiums for every enrollee, regardless of whether that enrollee is seen. Therefore, every day a child spends waiting for care (instead of receiving that care) is a day that the insurer keeps the monthly premium as profit, rather than spending it on medically necessary health services for its enrollees.

**In other words, it benefits insurers to keep supply of high demand or high cost care as limited as possible. And they can do this – using the credentialing process.**

Here's what they do:

1. **First, they** make credentialing so slow and redundant that providers can't see patients for months. One prominent MCO insurer takes 180 days to countersign the standard contract that they wrote and affiliate an already credentialed clinician to a new practice. Not only does this delay care for vulnerable children and families, it also denies the state the benefit of tax revenues and jobs in one of the fastest growing and most important industries in the nation's economy.
2. **Second, "Ghost Networks":** They keep retired or relocated providers in their directories, making it look like their network is "full" on paper, while in actuality, those providers no longer serve the market. Because their directories look full, the insurance companies can tell new providers trying to extend care into that market that their panel for the service is closed. Right now, 50% of MCOs in the District have panels for care for children with autism – despite the fact that DC families are sitting on year-long waitlists. The situation is the same in Maryland. Just go to the directory

and cross reference the providers listed against the national certifying board. You'll find a host of clinicians located in places like Wisconsin – who are allegedly accepting patients in the DMV.

3. **Finally, they manufacture hurdles to keep new providers out:** For example, **one of the largest regional insurers** now requires DC-based BCBA providers to hold a local license to be credentialed—knowing full well that DC is one of 11 jurisdictions that does *not* offer a license for BCBA's (DC relies on the national certifying board). By demanding a document that doesn't exist, this insurer performs an "end-run" around the law that requires them to pay for this care – and the results flow to this insurer's bottom line in terms of premium payments that they get to keep – and harms the children and families who cannot access care.

**HB 1093 stops these tactics by shifting the burden of efficiency onto the insurer.** It mandates a 30-day credentialing deadline backed by a \$500-a-day fine, creates a single universal application, and cleans up "ghost" directories.

This bill is a national model. As a business owner currently based in DC, I can tell you: passing HB 1093 makes Maryland the most attractive place in the region to open a practice. It ensures that a child's access to care is determined by a doctor's prescription—not an insurer's red tape.

If you build it – they will come. I urge you to vote in favor of HB 1093 to expand access to critical healthcare for all Marylanders. Thank you.