

inseparable

February 24, 2026

House Health Committee
240 Taylor House Office Building
Annapolis, Maryland 21401

Via electronic submission

RE: Support for HB 917 (Insurance – Retroactive Denials and Payment Clawbacks)

Chair Bagnall, Vice Chair Cullison, 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 House Bill 917. This legislation would place reasonable limits on retroactive payment clawbacks, helping ensure that insurance practices do not undermine treatment providers' ability to deliver life-saving care.

Why HB 917 Is Necessary

Currently, insurance companies may retroactively take back payments from providers for services that were previously authorized, deemed medically necessary, and reimbursed. These clawbacks can occur months after care has been delivered and paid for, even when providers have complied with prior authorization and billing requirements.

These clawbacks can be devastating for both patients and providers. Recent reporting underscores the seriousness of this issue. ProPublica's [Why I Left the Network](#) investigation documented that retroactive payment clawbacks are a key reason mental health providers are forced to leave insurance networks. When providers cannot rely on payment for services delivered in good faith – after those services have been approved and delivered – participation in insurance networks too often becomes financially untenable.

Providing Predictability and Protecting Access to Care

While Inseparable strongly believes that clawbacks for services that have been approved and delivered should *never* occur (except in instances of fraud), we support HB 917 as a step in the right direction that shortens the time period when clawbacks are permitted from six to three months. By reducing prolonged exposure to retroactive clawbacks, HB 917 is a step towards

increasing access to critical mental health and substance use disorder treatment for Marylanders.

Precedent in Other States

Maryland would not be acting alone in addressing this issue. States across the country are increasingly recognizing that unchecked clawbacks undermine behavioral health networks. Most notably, Colorado recently enacted [HB25-1002](#), which prohibits insurers from retroactively denying or clawing back payment for mental health and substance use disorder services, except in cases of fraud. This reflects growing national recognition that financial predictability is essential to maintaining strong behavioral health networks.

Conclusion

HB 917 is a meaningful step forward to increase access to mental health and substance use disorder care in Maryland. Ensuring that providers can rely on timely and final payment decisions is essential to maintaining strong insurance networks and protecting patient access to care.

We respectfully urge the Committee to issue a favorable report on House Bill 917.

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