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Deputy Commissioner

MARY KWEI
Associate Commissioner
Market Regulation and Professional Licensing

March 12, 2026

Via E-mail

Vice Chair Bonnie Cullison
House Health Committee
House Office Building, Room 240
6 Bladen Street
Annapolis, MD 21401
bonnie.cullison@house.maryland.gov

Vice Chair Cullison:

The Maryland Insurance Administration (MIA) appreciates the opportunity to provide additional input regarding amendments to House Bill 1093 and the corresponding changes to its fiscal impact.

House Bill 1093 is intended to streamline and standardize the process by which health care providers are credentialed and added to insurance networks, improve the accuracy and accessibility of provider directories, and increase transparency and accountability for carriers..

The MIA has previously advised that some provisions of the bill may be problematic or difficult to implement. These provisions included:

- A time frame of 30 days provided to carriers to credential a provider;
- Requirements that the MIA designate a multi-carrier common online provider directory information system;
- The aforementioned system must be developed by a nonprofit alliance, which is not regulated by the MIA, who will also establish and maintain a workgroup for the project;
- The MIA must collect and remit penalties related to violations of this bill to the provider; and
- The MIA must provide oversight to carrier responses to providers, craft new regulations governing the use of online credentialing systems, and ensure the production of a workgroup report related to the multi-carrier common online provider directory information system.

Since the submission of the MIA's letter of information on 2/26/2026, House Bill 1093 has been amended on several of the above listed provisions. The following changes were made:

- The time frame provided to carriers to credential a provider was amended to 60 days;
- The requirement that the MIA collect and remit penalties to related to violations of this bill to the provider was removed;
- The mention of a nonprofit alliance was removed.

The adjustment of the time frame will provide carriers more flexibility to consider whether or not to credential a provider, reducing the risk that a carrier may need to reject a provider's application due to not having enough time to complete the credentialing process. Furthermore, removing the requirement that the MIA direct payments related to violations of the bill's provisions to providers has lessened the need for additional legal, actuarial, and IT consulting support related to this bill.

The reference to the development of a multi-carrier common online provider directory information system by a nonprofit alliance of health plans and trade organizations was updated to be, more broadly, a vendor. This allows the MIA greater oversight over the system.

These changes will significantly lessen the fiscal impact of this bill. Therefore, House Bill 1093, if amended as proposed in the Subcommittee, stands to have a non-material operational or fiscal impact on the MIA. It would be enforceable with existing resources.

Thank you for the opportunity to provide this letter. The MIA is available to provide additional information and assistance to the committee.

Sincerely,

A handwritten signature in cursive script that reads "Marie Grant".

Marie Grant
Insurance Commissioner

cc: House Health Committee's Insurance Subcommittee Members
Lisa Simpson, House Health Committee Counsel