

## **Maryland Community Health System**

То:	Maryland Insurance Administration
From:	Robyn Elliott on behalf of Maryland Community Health System
Date:	July 8, 2025
RE:	Provider Directory Requirements

The Maryland Community Health System appreciates the opportunity to submit comments on the existing requirements for health and dental carriers to maintain accurate, up-to-date provider directories. We are a network of federally qualified health centers that provide somatic, behavioral, and dental services to underserved communities across Maryland. Our health centers serve people who already face too many barriers to obtaining healthcare services. Inaccurate provider directories continue to make it difficult for individuals to navigate the healthcare system. As primary care providers, our health centers frequently encounter challenges in using provider directories to identify innetwork specialists who are accepting new patients.

The Maryland Insurance Administration has asked "what mechanisms are in place to address changes in practice locations, specialties, or acceptance of new patients". We would like to highlight that the CAQH online credentialing system already requires providers to attest every 120 days to practice location, specialty, and acceptance of new patients. We would strongly suggest that the MIA require carriers to use CAQH as the primary mechanism to update provider directories. Since providers must keep CAQH updated, carriers already have the information necessary for frequent provider directory updates.

When carriers attempt to audit or verify provider directory information using a separate process, it creates duplicative work for providers, as providers must fill out the carrier-specific paperwork as well as keep CAQH updated. Carriers and their third-party agencies all use different forms, both paper and electronic, to ask providers to capture the information. The information requested is duplicative of CAQH, but by asking for information in different formats, there is an increase in the opportunities for error.

Under current regulations, carriers must use the CAQH credentialing form, but it is optional for carriers to use CAQH's online credentialing system. As far as we are aware, all health insurers are using the CAQCH online credentialing system, but only one dental insurer (CareFirst) is using the online credentialing system. Most dental carriers still collect credentialing forms through fax, email, or other electronic portals. We would recommend that the MIA require all health and dental carriers to use the CAQH online credentialing system. The CAQH online system can significantly reduce the

administrative burden on carriers and providers in the credentialing and provider directory update processes.

Thank you again for the opportunity to submit these comments. If we can provide any additional information, please contact me at <u>relliott@policypartners.net</u> or (443) 926-3443.