

July 9, 2025

Sent via email: [Mary.kwei@maryland.gov](mailto:Mary.kwei@maryland.gov)  
The Honorable Marie Grant  
Commissioner  
Maryland Insurance Administration  
200 St. Paul Place, Suite 2700  
Baltimore, MD 21202

**RE: MIA Inquiry – Provider Directories**

Dear Commissioner Grant:

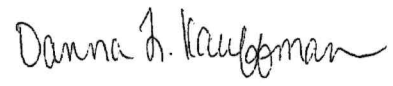
On behalf of MedChi, the Maryland State Medical Society, I thank you for the Maryland Insurance Administration's (Administration) commitment to reviewing Maryland's law on healthcare provider directories. We recognize and understand the frustration that often arises when patients need healthcare services but struggle to locate a physician. It is essential to note upfront that the issue of provider directories is a subset of the broader concern of ensuring that Maryland patients have access to sufficient networks and that the State is maintaining a robust physician workforce. We strongly recommend that the Administration conduct a review of these issues as well.

We recognize that the federal *No Surprises Act* contains provisions related to provider directories that may not be aligned with State law. Given the Administration's ability to enforce the federal act, we believe that consistency and uniformity between the two would be beneficial. On this note, we often hear from physicians about the difficulties and the time it takes to navigate each carrier's website and individual health plans to update the information. Physicians report that they send updated information only to have it not be corrected on the carrier's website, requiring them to resend the information multiple times.

To reduce administrative burden and strengthen accuracy, it would be beneficial to have a single access point for updating information, which would then be distributed to the carriers. Many healthcare providers utilize the Council for Affordable Quality Healthcare (CAQH) for credentialing, which requires physicians to update their provider information every 120 days. We recognize that carriers have stated that the federal act requires them to engage directly with healthcare providers. However, given the state's enforcement authority, this is an area that warrants closer examination to determine how the two processes can be better utilized.

We again appreciate the Administration's commitment to this issue and are very willing to continue discussions. Any solutions must consider the need to reduce time and administrative burdens on the physician community, particularly in light of staffing issues. Thank you, and we look forward to continued partnership with the Administration.

Sincerely,

A handwritten signature in black ink, reading "Danna J. Kauffman". The signature is fluid and cursive, with a long, sweeping underline.

Danna Kauffman  
Schwartz, Metz, Wise and Kauffman, P.A.  
On behalf of MedChi