April 7, 2023

The Honorable Chris Holden
Chairman, Assembly Appropriations Committee
1021 O Street, Ste. 5650
Sacramento, CA 95814

Re: AB 236 (Holden) Health care coverage: provider directories – Oppose Unless Amended

Dear Chairman Holden,

On behalf of the California State Association of Psychiatrists (CSAP), I write to you in respectful opposition to AB 236 (Holden) unless amended. AB 236 would require a health care service plan (health plan) or insurer to annually audit and delete inaccurate listings from its provider directories, and would require a provider directory to be 60% accurate on January 1, 2024, and 95% accurate on or before January 1, 2027. AB 236 would also subject a health plan or insurer to administrative penalties for failure to meet the prescribed benchmarks and for each inaccurate listing in its directories, would require the health plan or insurer to delete the provider from its directory beginning July 1, 2024, if a plan or insurer has not financially compensated a provider in the prior year, unless specified criteria applies. Lastly, AB 236 would require a health plan or insurer to provide information about in-network providers to enrollees and insureds upon request, and it would limit the cost-sharing amounts an enrollee or insured is required to pay for services from those providers under specified circumstances.

Currently, CSAP has concerns about the provision of removing a provider from a directory if they have not been compensated for at least 5 claims in a year. CSAP thus recommends that the provision be removed from the bill. CSAP also has concerns with the current bill language that assigns the burden to maintain accurate providers. CSAP would therefore like the bill language to clarify that the burden to maintain accurate provider directories is the responsibility of the health plan and that any burden on a physician should be minimized.

CSAP also wants to make sure that when a patient sees an out-of-network physician and only pays in-network cost-sharing amounts, the physician is made whole or compensated at a fair rate. Other suggestions are to include on every provider directory information about an enrollee’s right to timely access to care and who they can contact if the health plan is not meeting that requirement, and to clarify that a physician is not obligated to disclose whether they provide gender-affirming care due to safety, security and privacy concerns. Lastly, CSAP wants to ensure that there is due process for a provider if they are mistakenly removed from a plan's provider directory or if the health plan wrongly concludes the information provided to them is inaccurate.

For these reasons, CSAP must respectfully oppose AB 236 unless amended.

Sincerely,

Paul Yoder
Legislative Advocate

CC: Members, Assembly Appropriations Committee