Support SB416/HB437  HMO Payment to Non-Participating Providers – Repeal of Termination date

This bill has been introduced by Senator Astle and Delegate Pena-Melnyk to repeal the sunset provision of the current set the reimbursement rates from HMOs to non-participating providers.

The reimbursement is defined as “no less than the greater of” (1) 125% of the average paid or 140% of Medicare for E&M codes and (2) 125% of the average paid for all other services. Trauma Providers are defined differently at 140% of Medicare for all services. Without action, the law expires on 12/31/2014.

The bill hearings are scheduled for 2/12 in the Senate and 2/20 in the House.

Support SB642/HB709  Assignment of Benefits and Reimbursement for Non-Preferred Providers - Repeal of Reporting and Termination Date

This bill has been introduced by Senator Mathais and Delegate Kach. Maryland MGMA spent a considerable amount of effort on the bill three years ago. The final bill was passed with a termination date of 9/30/2015 and requires a report by MHCC on the statutes impact by 10/1/2014. This year’s bill repeals the sunset provision before the required MHCC report. The bill hearings are on 2/19 in the Senate and 2/20 in the House.

Oppose HB279  Physicians-Payments for Office Visits

This bill was introduced by Delegate Costa. There is no companion bill in the Senate. The bill prohibits physicians billing for office visits if the patient is seen 30 minutes or more after the appointment time. The bill was heard on 2/5 and received an unfavorable report from the committee.

Oppose HB441/SB980  Anesthesia Services-Assignment of Billing Rights and Fees for Management Services-Prohibition

This bill was introduced by Delegate Haddaway-Riccio and Senator Conway. This bill prohibits the assignment of billing rights to a facility or person of certain beneficial interest in an ASC with criminal penalties and fines. We oppose the bill based on the fact that federal regulations already set forth a very comprehensive set of Stark Phase III regulations in this area of healthcare law. A new state law is
overly restrictive with criminal penalties and is not necessary. The bill hearing in the House was cancelled. The bill hearing in the Senate is scheduled for 3/12 in EHE.

Support SB198/HB802 Maryland Medical Assistance Program – Telemedicine
This bill was introduced by Senator Pugh and Delegate Lee. The bill requires medical assistance to pay for telemedicine services. The bill has been introduced the past two years and has yet to pass. The bill has been heard in the Senate and has a bill hearing in the House on 2/18.

Support HB779 MHCC – Healthcare Provider-Carrier – Workgroup
This bill was introduced by Delegate Hammen who is the Chair of the HGO Committee. The intent of the bill is to form a workgroup of providers and carriers to discuss and when possible resolve issues without requiring legislative action. The workgroup would be hosted and staffed by MHCC. Our goal would be to ensure MD MGMA have a position appointed to the workgroup. The bill hearing is scheduled for 2/27.

Oppose SB884/HB1227 Health Insurance – Incentives for Healthcare Practitioners
This bill was introduced by Senator Pugh and Delegate Tarrant. The bill allows carriers to provide incentive payments to providers to promote preventative care initiatives. The bill eliminates the current statute which prevents HMO “withholds” to providers until certain contractual thresholds were met. The bill is scheduled to be heard in the Senate on 3/5. The House hearing has been scheduled for 3/5.

Oppose HB1235 Community Integrated Medical Home Program and Patient Centered Medical Home Program
This bill was introduced by Delegates Bromwell and Hammen. There is no companion bill in the Senate. The bill tasks MHCC in consultation with DHMH to develop standards and criteria for Patient Centered Medical Home Programs and to develop an accreditation program and fee structure for the state. As there are already national standards and national accreditation available, we see no reason to duplicate these standards and accreditation in the state. The bill is scheduled to be heard on 3/6.
Support HB930 Healthcare Malpractice-Limitation on Non-Economic Damages
This bill was introduced by Delegate Elliott. There is currently no companion bill in the Senate. The bill would reduce the cap on non-economic damages from $740,000 to $500,000 for malpractice claims. The bill will be heard on 3/5.

Support HB635 Healthcare Malpractice-Expression of Regret or Apology -Inadmissibility
This bill was introduced by Delegate George. There is currently no companion bill in the Senate. The bill prohibits the expression of regret or apology by being interpreted as “guilt” in a malpractice claim. This bill was introduced last year and was not passed. The bill will be heard on 3/5.

Support SB832/HB1363 Healthcare Provider Malpractice Insurance – Scope of Coverage
This bill was introduced by Senator Kelley and Delegate Mitchell. The bill allows malpractice insurance policies to cover the cost of defense in any disciplinary hearing resulting from a malpractice claim. The hearing is scheduled for 3/5 in Senate Finance. The hearing in the House was cancelled.

Support HB395/SB702 Healthcare Malpractice Claims- Definition of “Healthcare Provider”
This bill was introduced by Delegate Dumais and Senator Pugh. This bill expands the definition of provider in a malpractice claim to all providers so that the non-economic damage cap applies only one time for an episode of care with an adverse outcome. This bill was introduced last year and was not passed. The bill was heard in the House on 2/5 and will be heard in the Senate on 2/27.

Oppose SB789/HB1009 Civil Actions-Non-Economic Damages – Catastrophic Injury
This bill has been introduced by Senator Ramirez and Delegate Carter. The bill attempts to remove the current cap on non-economic damages in a malpractice claim with a very broad definition of catastrophic injury. MHA has testified that the cost of claims have increase by 52% from 2009-2013 for all claims and 108% by OBGYN claims in the same period. Removing the non-economic damage cap will only exacerbate another cycle of “malpractice crisis” in the state. The bill is scheduled to be heard in the Senate on 2/27 and the House on 3/5.
Oppose SB215/HB280 Worker’s Comp-Payment for Physicians-Dispensed Prescriptions-Limitations

This bill was introduced by Senator Klausmeier and Delegate Jameson. The bill prohibits payment for physicians who dispense drugs in the office to Worker’s Comp patients. This bill was introduced last year and was not passed. Physicians do not maintain a very large formulary of drugs in the office and dispense certain drugs in relatively small quantities primarily to ensure patient compliance. As a general rule, we are opposed to any limitation of what can be provided in the office particularly in this era of a patient-centered medical home model. The bill was heard on 2/6 in the House and will be heard on 2/11 in the Senate.

Oppose SB217/HB281 Worker’s Comp-Payment for CDS Prescribed by Physicians-Limitations

This bill was introduced by Senator Klausmeier and Delegate Jameson. The bill requires pre-authorization and other administrative hurdles to prescribe controlled dangerous substances defined as Level II or Level III drugs in worker’s comp cases only. This bill attempts to codify the standard of care and adds a high level of bureaucracy for a limited sub-set of patients. The bill was heard on 2/6 in the House and will be heard on 2/11 in the Senate.