

MedChi

The Maryland State Medical Society

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TO: The Honorable Peter A. Hammen, Chairman
Members, House Health & Government Operations Committee

FROM: Joseph A. Schwartz, III
Pamela Metz Kasemeyer
J. Steven Wise
Danna L. Kauffman

DATE: February 6, 2014

RE: **SUPPORT** – House Bill 298 – *Health Services Cost Review Commission – Powers and Duties, Regulation of Facilities, and Maryland All-Payer Model Contract*

The Maryland State Medical Society (MedChi), which represents more than 8,000 Maryland physicians and their patients, supports House Bill 298.

Passage of House Bill 298 is an important component of Maryland's ability to implement its "All-Payer Model" waiver program recently approved by the Center of Medicare and Medicaid Innovation (CMMI). The new all-payer model program, which is a five-year demonstration project, replaces Maryland's former Medicare waiver. As you are aware, there has been an inclusive and deliberative stakeholder process throughout the development of the new waiver program. MedChi has been an active participant in the development of the waiver from its inception and is committed to continue its participation as the program is implemented.

Early in the development process, MedChi, along with a number of physician specialty societies, defined specific parameters for the new waiver program that were critical to the physician community and its ability to support the new program. A joint communication from MedChi and these other organizations that outlines these principles is attached. MedChi is pleased to say that the new All-Payer Model program incorporates and reflects all of the principles reflected in our letter.

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MedChi believes the HSCRC remains committed to broad stakeholder participation in the implementation process that will ensue now that the program has been approved. To that end, MedChi is pleased to have had Gene Ransom, its Chief Executive Officer, appointed to the Advisory Board established to advise the Commission throughout the implementation process. In addition, there are a number of physician members of the four substantive workgroups that have been formed to address various critical aspects of implementation. We believe the collaborative process developed by the Commission to guide policy development and implementation will serve to maximize the programs objectives. Passage of House Bill 298 is an important component of that implementation process. MedChi urges a favorable report.

For more information call:

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cc: Governor's Legislative Office