



How to Be a More Effective Advocate

Grassroots Skills Workshop

MedChi's Legislative Agenda & Priorities

Presented by

J. Steven Wise, Esq.

Schwartz, Metz, Wise & Kauffman, P.A.

MedChi
The Maryland State Medical Society

Presentation Objectives

- Review and understand how the lawmaking process works in Annapolis.
- Strategies to help you become a more effective grassroots advocate for medicine.
- Become familiar with legislation MedChi anticipates will be introduced this session, and with MedChi's 2023 Legislative Agenda.



Part I:
How to Be a More Effective
Advocate for Medicine

Legislative Session Overview

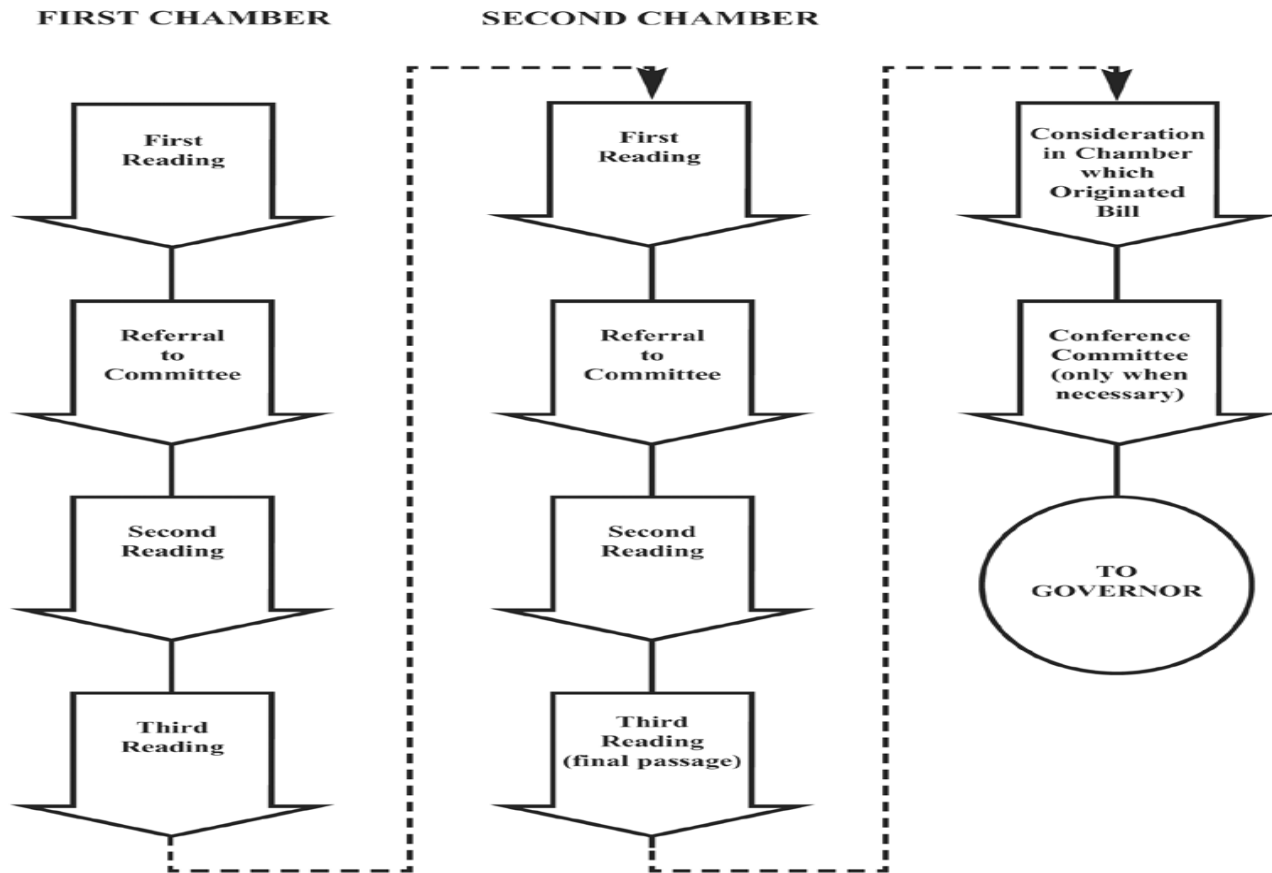
- The General Assembly convenes Jan. 11, 2023, and adjourns April 10, 2023 (90 days).
- There are 141 Delegates and 47 Senators that represent 47 districts. One Senator and 3 Delegates per district.
- Each legislator gets assigned to one Standing Committee.
- Every timely filed bill receives a hearing in the Standing Committee with subject matter jurisdiction (2,500 +/- per Session).
- Most bills of importance to MedChi get assigned to one of the following Committees:
 - *House--Health & Government Operations, Appropriations, and Judiciary*
 - *Senate--Finance, Budget & Taxation, and Judicial Proceedings*
- **Committees are where the work is done!!!**



Session Calendar - 2023

- **January 11 GENERAL ASSEMBLY CONVENES** (*noon, Wednesday*)
 - *Swearing in of Members*
- **January 18 INAUGURATION OF GOVERNOR & LT. GOVERNOR**
- **January 20 SENATE AND HOUSE BILL REQUEST GUARANTEE DATE**
- **February 6 HOUSE BILL INTRODUCTION DATE**
 - House bills introduced after this date referred to the House Rules and Executive Nominations Committee
- **February 10 – SENATE BILL INTRODUCTION DATE**
 - Senate bills introduced after this date referred to the Senate Rules Committee
- **March 20 – CROSSOVER DATE**
 - Each Chamber to send to other Chamber those bills it intends to pass favorably
 - Opposite Chamber bills received after this date subject to referral to Rules Committees
- **April 10 90th Day – ADJOURNMENT “SINE DIE”** (*Monday*)

How a Bill Becomes a Law



How to Read a Bill

sb0030 2018.pdf - Adobe Acrobat

File Edit View Window Help

Open Create

Tools Fill & Sign Comment

1 / 3 75%

SENATE BILL 30

D3 8lr0822
SB 1037/17 – JPR (PRE-FILED) CF HB 1581

By: **Senator Ramirez**
Requested: October 10, 2017
Introduced and read first time: January 10, 2018
Assigned to: Judicial Proceedings

Committee Report: Favorable
Senate action: Adopted
Read second time: March 7, 2018

CHAPTER ____

1 AN ACT concerning

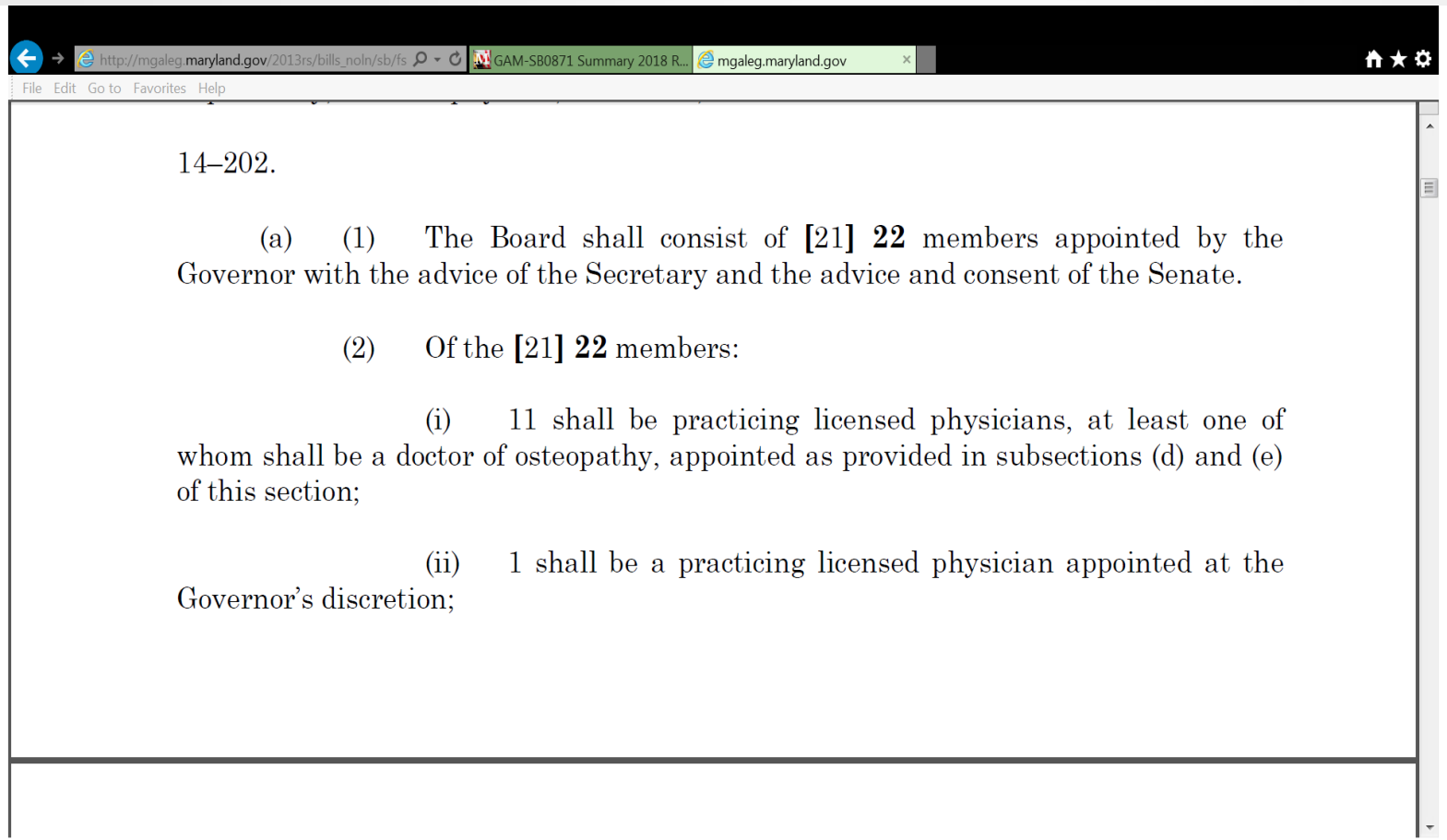
2 **Health Care Malpractice Qualified Expert – Limitation on Testimony in**

3 **Personal Injury Claims – Repeal**

4 FOR the purpose of repealing the requirement that a health care provider who attests in a

5 certificate of a qualified expert or who testifies in relation to a proceeding before an

How to Read a Bill



The screenshot shows a web browser window with the address bar displaying <http://mgaleg.maryland.gov/2013rs/bills/noln/sb/fs>. The browser has multiple tabs, with the active tab titled "GAM-SB0871 Summary 2018 R...". The page content displays the following text:

14-202.

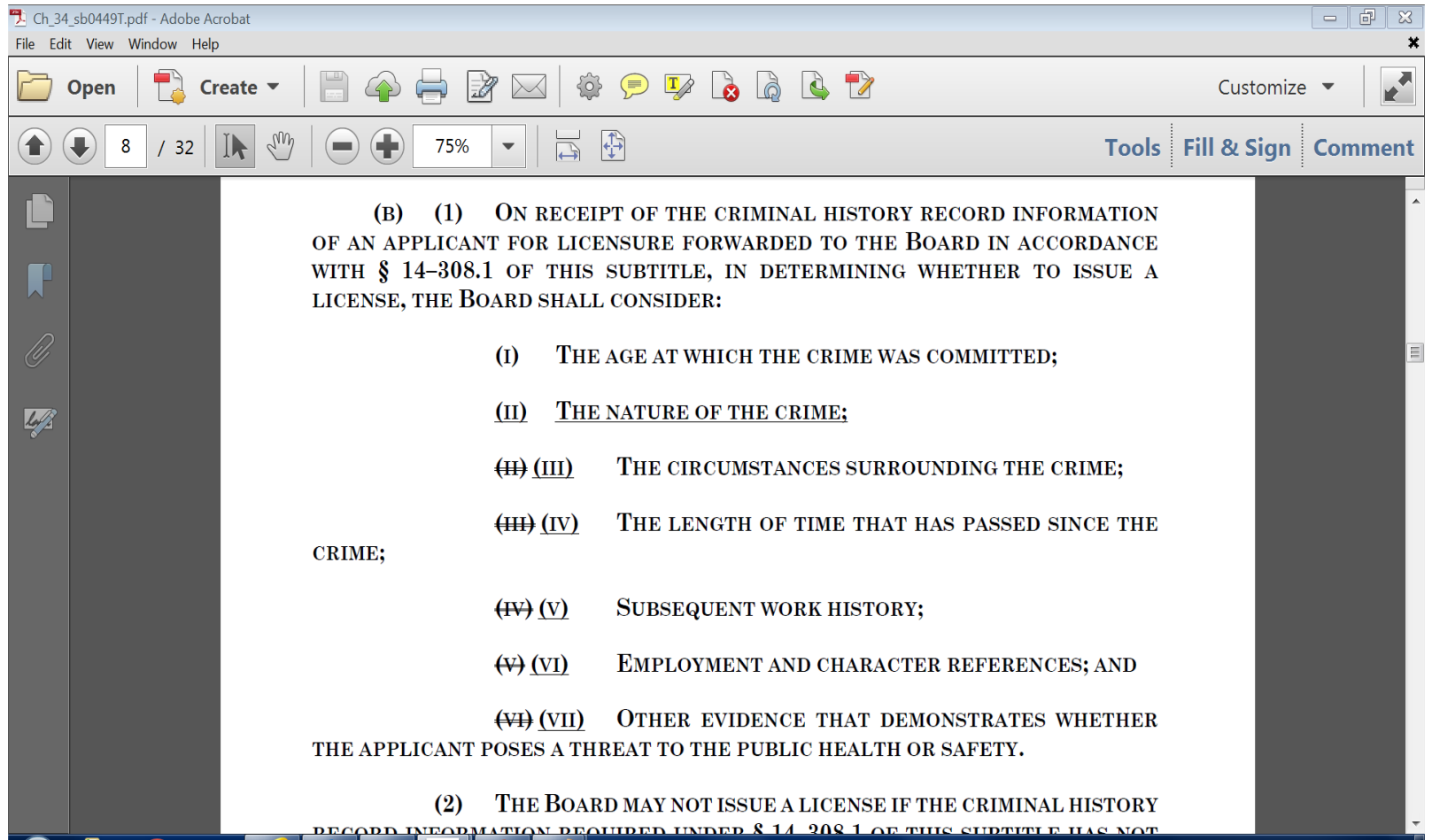
(a) (1) The Board shall consist of **[21] 22** members appointed by the Governor with the advice of the Secretary and the advice and consent of the Senate.

(2) Of the **[21] 22** members:

(i) 11 shall be practicing licensed physicians, at least one of whom shall be a doctor of osteopathy, appointed as provided in subsections (d) and (e) of this section;

(ii) 1 shall be a practicing licensed physician appointed at the Governor's discretion;

How to Read a Bill



Effective Strategies for Communicating with Your Legislators



HINT: This is not a good start!!!

The Do's of Effective Communications

- Try to **establish an ongoing relationship** with your Delegates and Senators, which will give you more influence as a constituent.
- **Get involved early** in the legislative process by communicating while legislation is being considered by committees, as well as when it is on the House and Senate floor.
- Find out the **committees and subcommittees** on which your Delegates and Senators serve.
 - Members of the Legislature have much more influence over legislation within their committees' and subcommittees' jurisdiction.

The Do's of Effective Communications

- **Identify clearly** the subject or subjects in which you are interested, not just House and Senate bill numbers.
- State why you are concerned about an issue or issues. **Sharing your own personal experience**, particularly as a member of the medical community, is excellent supporting evidence. Explain how you think an issue will affect patients, the medical profession, your community or family.
- **Restrict yourself to one, or at most, two topics.**
- **Put your thoughts in your own words.** If a member of the Legislature received numerous letters with nearly identical wording, he or she may discount them as part of an organized pressure campaign.

The Do Nots of Effective Communication

- **Don't ever threaten or portend that you or your organization wields vast influence. Do not:**
 - Say "I'll never vote for you unless you do what I want!"
 - Link campaign contributions to your issue.
 - Threats usually backfire.
 - Instead, present the best arguments in favor of your position and ask for their consideration in a respectful manner. Speak as a constituent, not a self-appointed spokesperson for the medical community.
- **Consider your audience and be careful with comparisons.**

MedChi's Policymaking Process

Who Decides What Issues Are Important to MedChi and Need to Be Addressed Through Legislation or Regulation?

MedChi's House of Delegates (Physicians)

- Component societies, members, etc. submit resolutions for consideration at the HOD Meeting in the Fall
- The HOD meets and votes on Resolutions Calling For Legislative Action
- MedChi Board of Trustees approves annual legislative agenda



MedChi's Legislative Council (Physicians)

- Council reviews every bill that affects physicians, health care, etc.

What Can You Do to Be a More Effective Advocate?

- Get to know your Delegates and Senators and communicate before, during and after the session. Learn their committee assignment.
- Serve on the MedChi Legislative Council
- Become a Key Contact for your component society
- Participate in your Component Lobby Day
- Consider participating as an Advocacy Intern with MCMS/MedChi
- Contribute to MMPAC
- Contact your Delegates and Senators on important legislation
 - Legislative Alerts
- Use MedChi's online Legislative Action Center to get in touch with your legislators and sign up for action alerts!
- Thank your legislators for their support of MedChi's legislative agenda
- Attend a campaign event

"All politics is local." Tip O'Neill

Where to go if you have questions:

- Contact Chip O'Neill/Med Chi Advocacy Coordinator at 410-878-9599 for questions about:
 - Status of a bill
 - Legislative Committee Actions
 - Legislator votes on a bill in Committee or on the floor
- If you have particular interest in or expertise on a bill, let Chip or one of our Legislative Co-Chairs know.
- If you want to know MedChi's position on a bill:
www.medchi.org/Law-and-Advocacy/Testimony-Positions-Archives
- MedChi Lobbyists contact information:
 - Schwartz, Metz, Wise & Kauffman: 410-244-7000
 - www.smwpa.com



Overview of the 2023 Session MedChi's Legislative Agenda & Priorities

Presented by
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The Maryland State Medical Society

2023 LEGISLATIVE AND REGULATORY PRIORITIES

As the statewide professional association for licensed physicians, we are dedicated to our mission to serve as Maryland's foremost advocate and resource for physicians, their patients, and the public health.



"The 2022 General Assembly Session was a highly successful time of physician and patient advocacy. As we look ahead to the 2023 session, we will continue our efforts to ensure that Maryland is the best place to practice medicine and be a patient."

Clement Banda, MD
Co-Chair, MedChi Council on Legislation



"MedChi's Council on Legislation provides the framework for accessible, robust, science-informed debate on the issues that impact Maryland's physicians and patients. Our process ensures that physicians of all specialties, modes of practice, and career stages have a seat at the table and a powerful voice in Annapolis."

Kathleen D. Keeffe Hough, MD
Co-Chair, MedChi Council on Legislation

MedChi
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Anuradha Reddy, MD
Chair, MedChi Health Insurance Subcommittee
Every physician is impacted by the insurance market, and our Health Insurance Subcommittee serves as your advocate for ensuring that legislation is physician-friendly and practice-sustaining.



Kathleen D. Keeffe Hough, MD
Chair, MedChi Public Health Subcommittee
The Public Health Subcommittee provides expertise on issues that directly impact our patients, our communities, and our state.



Lawrence Green, MD
Chair, MedChi Boards & Commissions Subcommittee
The regulatory environment greatly impacts the practice of medicine, and MedChi's Boards and Commissions Subcommittee is your voice of impact.

ENSURING TIMELY DELIVERY OF HEALTH CARE SERVICES AND PAYMENT

- Advocate for initiatives that streamline and reform utilization management policies (i.e., prior authorization and step therapy laws) in both the commercial market and in Medicaid to reduce administrative burdens and increase transparency.
- Ensure that physicians and health care practitioners are not inappropriately excluded from participating on insurance panels.
- Support policies to ensure that women have equal access to breast cancer diagnostic examinations and evaluations without cost sharing.
- Address network adequacy and the further standardization of credentialing requirements.
- Advocate that the Fiscal Year 2024 Medicaid budget maintain E&M reimbursement rates to 100% of Medicare to support physician participation in the program and ensure that Medicaid patients have adequate access to physician services.
- Work to create fair and appropriate policies and procedures for Medicaid payment seizures.

PROTECTING ACCESS TO PHYSICIAN SERVICES AND THE PRACTICE OF MEDICINE

- Oppose policies that would adversely affect patient care by inappropriately expanding the scope of practice of non-physician providers, including the ability to independently diagnose, treat, prescribe medications, and/or manage medical disorders.
- Seek state funding for the Loan Assistance Repayment Program (LARP), which provides loan repayment to primary care physicians working in underserved areas, so as to encourage more physicians to practice in those areas.
- Fight initiatives that seek to weaken Maryland's current medical liability environment and jeopardize the *Total Cost of Care Model*, including increasing the "cap" on damages in malpractice cases.
- Monitor the regulatory and disciplinary actions of the Board of Physicians.
- Ensure that the Board's disciplinary process is transparent and that the laws governing the Board provide for accountability, including the adoption of a requirement that the physician complaint form includes a penalty of perjury for false allegations.

ADDRESSING BEHAVIORAL HEALTH TREATMENT AND RECOVERY NEEDS

- Advocate for expansion of Maryland's crisis treatment centers and address access to care barriers for behavioral health services.
- Support innovative approaches to addressing the opioid crisis, such as a pilot program of supervised injection facilities.
- Support the continued establishment of partnerships between police and mental health professionals to ensure the appropriate response to individuals in a behavioral health crisis.
- Advocate for comprehensive behavioral health reform that addresses system deficiencies.

STRENGTHENING PUBLIC HEALTH INITIATIVES

- Continue to support health equity initiatives that address health disparities and the social determinants of health.
- Support policies which increase access for all Marylanders (regardless of immigration status) to free or low-cost health care plans through initiatives that automatically enroll individuals in coverage and/or provide individual or small employer subsidies to enhance affordability.
- Advocate for public health and safety initiatives including improving child immunization rates; developing enhanced health education programs; developing health workforce mentorship programs; prohibiting the sale of flavored tobacco products; ensuring equitable access to public transportation; and supporting the development of evidenced-based occupational safety regulations for heat-related illness.
- Support initiatives that preserve access to reproductive health services consistent with AMA policy.





MedChi Legislative Priority Areas

- Ensuring Timely Delivery of Health Care Services and Payment
- Protecting Access to Physician Services and the Practice of Medicine
- Addressing Behavioral Health Treatment and Recovery Needs
- Strengthening Public Health Initiatives

2023 Major Issues

- **Medicaid Parity**—Med Chi continues to advocate for reimbursement of Medicaid E&M codes at the same rate as Medicare. This is fundamental to ensuring access to care.
- **Utilization Review (Step Therapy and Prior Authorization)**– Med Chi will introduce legislation to eliminate the burden and delays caused by erroneous utilization review policies. Fixes include:
 - standardizing electronic systems across all carriers;
 - requiring a study to determine the feasibility of implementing a program (e.g., gold card) that selectively implements prior authorization requirements based on physician performance;
 - requiring carriers to use evidence-based medicine and/or guidelines from national medical specialty societies;
 - increasing transparency and communication between physicians and the utilization review entity; and
 - streamlining prior authorization requirements by exempting prior authorization for certain drugs or procedures.

2023 Major Issues

- **Any Willing Provider**--MedChi will introduce legislation to prohibit insurance carriers, including managed care organizations, from limiting membership within their networks if the physician agrees to provide health care services in a manner that meets the terms and conditions established by the carrier or managed care organization and agrees to the terms of reimbursement established by the carrier or the managed care organization.
- **Scope of Practice**--Non-physicians regularly turn to the General Assembly to expand their “scope of practice.” In the last few years, for example, podiatrists have sought to become “podiatric physicians,” naturopaths have sought to prescribe prescription drugs, and pharmacists continually seek to provide medical care and counseling and to prescribe more and more medications. In 2023, we also expect physician assistants to propose changes to their statute. Often, non-physician groups are using the argument that their enhanced scope of practice is necessary to provide increased “access” to patients.

Why Get Involved?

“Get into politics or you may find yourself out of business.”

“If you aren’t at the table, you are on the menu.”

“Alone We Can Do So Little. Together We Can Do So Much”

Physician+Component+MedChi – Together we are stronger!