# 2022 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.





Willarda Edwards, MD MedChi Past President and American Medical Association (AMA) Board of Trustees Member

MedChi strives to work on behalf of our members, non-members, and patients in Maryland. This includes closely collaborating with our component medical societies and nationwide organizations like the American Medical Association (AMA). A big focus of these collaborations is legislative advocacy to help share the value of MedChi's mission to serve as Maryland's foremost advocate and resource for physicians, their patients, and the public health.



#### Padmini Ranasinghe, MD MedChi Vice Speaker of the House and Treasurer

For over 15 years, I am proud to be part of MedChi, a pioneering physician organization that has become a model for the nation for physician involvement in healthcare initiatives. MedChi is continuing to show success in advocating for our patients and physicians by

working tirelessly with legislators and other

stakeholders in Maryland and in our nation's

capital. I am equally proud to be associated

with the amazing group of dedicated people

who work hard in promoting comprehensive



Kathleen D. Keeffe Hough, MD Chair. MedChi Public Health Subcommittee

Advocating for public health is one of the core values of MedChi. Public Health has proven to be one of the most critical factors impacting Marylanders. From protecting access to fresh food and water to dealing with infectious disease, environmental, and opioid crises, MedChi has excelled in being a trusted health resource for public health issues in Maryland.



#### Lawrence Green, MD

public health for everyone.

Chair, MedChi Boards & Commissions Subcommittee

Thanks to MedChi, Maryland physicians have a well-respected seat at the table both in Annapolis and with medically related state regulatory agencies. MedChi not only is there to advocate for our (and our patients) common interests and needs, but it also is there to defend us against those who try to lessen our ability to provide the best care.





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### PROTECTING ACCESS TO PHYSICIAN SERVICES AND THE PRACTICE OF MEDICINE

- Advocate that the Fiscal Year 2023 Medicaid budget returns E&M reimbursement rates to 100% of Medicare. Medicare parity is essential to support physician participation in the Medicaid program and ensure that Medicaid patients have adequate access to physician services.
- Seek state funding for the Maryland Loan Assistance Repayment Program (LARP), which provides loan repayment to primary care physicians working in underserved areas of the state. Medical school debt compared to potential income is a major reason why physicians do not choose primary care. Fully funding LARP is a powerful tool at the state's disposal to ensure patient access to physicians in every part of Maryland.
- Oppose policies that would adversely affect patient care by inappropriately expanding the scope of practice of nonphysician providers beyond their education and training, including the ability to independently diagnose, treat, prescribe medications and/or manage medical disorders or refer to themselves as physicians.
- Fight initiatives to weaken Maryland's current medical liability environment and jeopardize Maryland's Total Cost of Care Model, including increasing the "cap" on damages in medical malpractice cases or diminishing immunity protections.

### ENSURING TIMELY DELIVERY OF HEALTH CARE SERVICES AND PAYMENT

- Work with specialty societies and other organizations to educate state legislators on the administrative burdens placed on physicians due to prior authorization requirements and the negative effect that the process can have on patient care delivery.
- Develop a comprehensive strategy to address, streamline and reform utilization management policies in both the commercial market and in Medicaid.
- · Support initiatives that reform the prior authorization process.
- Address network adequacy and the further standardization of credentialing requirements.

## PROTECTING THE PRACTICE OF MEDICINE

- Monitor the regulatory and disciplinary actions of the Maryland Board of Physicians to ensure the proper treatment of physicians.
- Ensure that actions of the Maryland Board of Physicians and its staff during the disciplinary process are transparent and that the laws governing the Board provide for accountability including the adoption of a requirement that the physician complaint form include a penalty of perjury for false allegations.
- Work with relevant stakeholders to create fair and appropriate policies and procedures for Medicaid payment seizures.

#### ADDRESSING BEHAVIORAL HEALTH TREATMENT AND RECOVERY NEEDS

- Advocate for expansion of Maryland's crisis treatment centers throughout the state and addressing access to care barriers for behavioral health services.
- Support innovative approaches to addressing the opioid crisis, such as the establishment of a pilot supervised injection facility.
- Support the continued establishment of partnerships between police departments and mental health professionals to address decriminalization of mental illness and enhance appropriate response to behavioral health crises.
- Advocate for comprehensive behavioral health reform that addresses current system deficiencies.

## STRENGTHENING PUBLIC HEALTH INITIATIVES

- Support health equity initiatives that address health disparities and the social determinants of health.
- Advocate for public health and safety initiatives including increasing immunization rates for children; encouraging the creation of enhanced health education programs and curriculum and the development of health workforce mentorship programs; prohibiting the sale of flavored tobacco products; and equitable access to public transportation.
- Support the development of evidenced based heat regulations by Maryland OSHA that include protections for indoor as well as outdoor workers and that data on all workers, including food and farm workers, be compiled using industrial and occupational categories established by the Bureau of Labor.