Revelations of the Maryland Physician Compensation Study
What You Need to Know Now

1. The Maryland Board of Physicians adopted guidance for prescribers to consider when determining whether and how to prescribe opioids. MBP Guidance: bit.ly/2KG43xN.

2. Effective October 1, 2018: all new and renewing applicants for Maryland CDS Registrations must attest to completing two hours of accredited continuing education related to the prescribing or dispensing of controlled dangerous substances. This is a one-time requirement. Access MedChi’s Guidance: bit.ly/2E6pHMM.

3. When the Centers for Medicare & Medicaid Services (CMS) released physicians’ 2017 Merit-based Incentive Payment System (MIPS) performance feedback and opened the targeted-review process, the AMA flagged calculation-error concerns. CMS has revised the scoring logic and reissued the 2017 MIPS final scores for the physicians affected. bit.ly/2Pn7qvJ.

4. The in-practice use of Certified Electronic Medical Records is a listed requirement for national and statewide practice transformation efforts, including the Maryland Primary Care Program and a planned Maryland Specialist Transformation Program slated for 2019. Contact Colleen George at cgeorge@medchi.org or 410.539.0872 ext. 3360 for more information.

5. MedChi News has launched a new design with a streamlined look and great new features. Get to know your fellow members and your staff by checking out our weekly profile. If you are not currently subscribed, please contact Sophie Pumphrey at spumphrey@medchi.org or 800.492.1056 x3367.

From the AMA: Congress Passes Comprehensive Opioid Legislation

After months of hearings and debate, the House of Representatives and the Senate passed legislation to address the opioid epidemic and sent it to President Trump for his signature.

The legislation, the “SUPPORT for Patients and Communities Act” (H.R. 6), touches on almost every aspect of the unrelenting epidemic that is affecting communities across the nation, with numerous provisions supported by the AMA that will expand access to substance use disorder prevention and treatment programs, including for pregnant women and newborns with Neonatal Abstinence Syndrome (NAS); fund research and development of non-opioid pain therapies; crack down on international shipments of illicit drugs such as fentanyl; and lift restrictions on using telemedicine for treatment for substance use disorders. Additional provisions in H.R. 6 direct federal agencies to produce studies, reports, and guidelines related to opioid use, prescribing, and treatment.

News from Maryland Medicaid: Physicians Required to use ePREP – New Electronic Revalidation & Enrollment Portal

In December 2017, Medicaid started using a new electronic provider revalidation and enrollment portal (ePREP). All 70+ Medicaid provider types are required to use ePREP (phased implementation) for Enrollment, Re-enrollment, Re-validation, and Information Updates (e.g., license updates, changes of ownership, address change). Revalidation letters are currently being sent to providers, facilities, and organizations, notifying them of their requirement to revalidate with the Maryland Medicaid program. Webinars about the new portal are available for outpatient facilities. To learn more, visit: https://health.maryland.gov/eprep.

More than 2,000 Clinicians Apply to Be in Maryland Primary Care Program

The application period for practices closed Friday, August 31, 2018, and nearly 600 practice sites, representing more than 2,200 clinicians, submitted their applications to participate in the Maryland Primary Care Program (MDPCP) for the 2019 program year.

Over the next several weeks, the Center for Medicare and Medicaid Innovation (CMMI) will be reviewing applications. Practices can expect to receive notification of CMMI’s decision in October. Throughout the fall, participants will complete their agreements and documentation to start the program in January.

The Program Management Office (PMO) will be hosting a series of webinars to help participants prepare for the January launch of the MDPCP.

For updates, go to https://health.maryland.gov/mdpcp/Pages/home.aspx.
From the President...
Payment Will Be Key Issue This Year

Benjamin Z. Stallings, II, MD, President, MedChi

As I begin my year as President of MedChi, it's clear that payment is a key issue that needs to be addressed. The new MedChi salary survey indicates that an inexcusably wide wage gaps exist between male and female physicians in Maryland and that Maryland physicians earn less than national averages. Conducted on behalf of MedChi by Merritt Hawkins, a national physician search and consulting firm, the survey tracks the compensation, benefits, and practice metrics of Maryland physicians and compares them to national averages. The survey also benchmarks compensation among by gender, age, and practice status.

This issue of Maryland Medicine will address the specific data, but I want to stress the key takeaway for MedChi: the inequality that was exposed by this survey must be addressed. Maryland has one of the greatest health systems in America, but we risk losing our best talent if we cannot address the source of payment disparities. The Merritt Hawkins survey arms MedChi with the data we need to advocate on behalf of Maryland's physicians.

While payment will be a priority during my year as President, I also plan to continue supporting a lot of the excellent work that sets the gold standard for MedChi as the foremost advocate and resource for Maryland's physicians and patients. I am pleased to have an inspiring group of past presidents who continue to be passionate and dedicated leaders. Brook Buckley, MD, will continue her amazing work on physician burn out; Gary Pushkin, MD, has agreed to continue to head MedChi's Opioid Task Force, along with his work engaging medical students; and Stephen Rockower, MD, will help to improve our communications effort and continue to serve as the representative on the Maryland Affordable Care Act Task Force. I will work alongside my esteemed predecessors as I focus on the financial solvency of our great organization and the growth of our membership among our colleagues in Maryland.

MedChi does amazing work. But more physicians need to be engaged and involved so we can do even more. I hope that with hard work and good planning, we can put MedChi in a financial position to be fighting for physicians like you and me for another 200 years.

Gender Wage Gap Is Significant for Maryland Physicians

MedChi partnered with Merritt Hawkins, a national physician search and consulting firm noted for its research and thought leadership capabilities, to conduct a 2018 Survey of Maryland Physician Compensation.

The survey includes compensation data reported by Maryland physicians as well as data concerning their practice patterns and metrics. By capturing a broad range of information in the survey, MedChi intends to provide benchmark data Maryland physicians can use to evaluate their compensation levels relative to their peers and to compare their practice metrics, such as hours and days worked per week and weekends worked per year. Data included in the survey also may be of interest to policy makers and media members who track physician compensation trends in Maryland and nationwide.

Some of the key findings of the 2018 Survey of Maryland Physician Compensation include:

- Maryland physicians earn less on average than physicians nationally, in many cases less than what physicians typically are paid in starting salaries as tracked by Merritt Hawkins.
- Wide pay gaps exist between male and female physicians in Maryland, with female physicians earning approximately 50 percent less on average than male physicians. The average annual income for male physicians in Maryland is $335,000 compared to $224,000 for female physicians.
- Female physicians in Maryland earn less than male physicians in the same specialty. Average annual income for female family medicine physicians, for example, is $164,000 compared to $234,000 for males, a difference of 48 percent.
- Female physicians in Maryland earn less than male physicians when hours worked are accounted for. For example, female internal medicine physicians working forty-one hours a week or more earn 37 percent less than male physicians in the same specialty working similar hours.
- Maryland physicians who are employed earn 7.9 percent less than physicians who own their practices.

These disparities have been of concern to MedChi as well as the American Medical Association for some time. In the spring of 2018, the MedChi House of Delegates approved a resolution to be put before the Maryland Legislature stating:

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CONSULTATIVE INSURANCE REVIEW

Med Chi Insurance Agency was established in 1975 “by physicians for physicians” to satisfy the needs of doctors and medical practices.

Contact Keith Mathis at 800.543.1262, ext. 4422 or KMathis@medchiagency.com today to schedule your “no obligation” review at no cost!

1204 Maryland Avenue
Baltimore, Maryland 21201
410.539.6642 or 800.543.1262
410.649.4154 fax
www.medchiagency.com

YOUR “NO OBLIGATION” REVIEW INCLUDES THE FOLLOWING:

Employee Benefits:
• Group Medical, Dental, and Vision Coverage
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• Voluntary Benefits

Property & Liability:
• Medical Malpractice
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• Medical Office Insurance
• Employment Practices Liability
• Directors & Officers Liability
• Privacy/Data Breach Coverage
• Bonds (Fiduciary/Fidelity/ERISA)

Personal:
• Life Insurance
• Disability (Individual/Pension/ Business Overhead)
• Annuities
• Long Term Care
• Estate Planning/Retirement Planning
• Auto/Homeowners/ Umbrella Coverage
Next Steps for the Maryland Primary Care Program

Howard Haft, MD, MMM, FACPE
Executive Director, Maryland Primary Care Program

And now it begins... By the time you are reading this, much has already been done in the run up to the start of the Maryland Primary Care Program (MDPCP) on January 1, 2019. The Care Transformation Organizations (CTOs) and practices have been notified of their provisional acceptance into the program. For practices that have decided to work with CTOs, those pairings have begun. Over the ensuing three months, there will be additional documents headed your way for review and execution. Important to note, these are all time-sensitive documents with fairly short turnaround times. Please make every effort to review and execute the documents in the prescribed time frame. We do not want a missed deadline to cause anyone to be eliminated from the inaugural year of the MDPCP.

This is also a time to think carefully about your interest in participating in MDPCP. There are great rewards for providers and patients alike in the program, but with the rewards come great responsibilities. Together, we are taking bold steps to change the way we deliver health care in Maryland and the eyes of the nation are on us. It will take a significant effort to achieve the goals of Advanced Primary Care and make significant gains in quality, while reducing the overall total cost of care. Our Maryland primary care physicians, nurse practitioners, physician assistants, and teams are well positioned to lead the nation in these important initiatives, but not without a strong commitment to doing so.

The MDPCP Program Management Office (PMO), together with our partners at the Center for Medicare and Medicaid Innovation (CMMI), will continue to provide you with technical assistance on completion of documents and be available to answer all of your questions. We sincerely look forward to working with you now and throughout the program.

Governor Hogan Announces Exchange Waiver Approval

Health insurance premiums, are continuing to increase in the double digits. In light of this issue, during the 2018 Legislative Session, Governor Hogan and Democratic leaders in the Maryland General Assembly developed a bipartisan solution to create a reinsurance program under the Section 1332 waiver. Governor Hogan announced that the Centers for Medicare & Medicaid Services (CMS) approved Maryland’s request. This is great news and will be essential in lowering premiums, safeguarding existing insurance companies’ participation in the individual market, and attracting new carriers to enter the market.

MedChi strongly supported this bipartisan effort. While we applaud this stabilization effort, we also know that any state effort to stabilize the market must be carefully done and must align with the Federal Risk Adjustment Program, which is constructed to transfer funds from insurers with a low-risk population to insurers with a high-risk population, to reduce incentives for insurers to avoid high-risk enrollees. The Maryland Health Benefit Exchange has one step left: developing and implementing regulations for the new stabilization fund that align the current risk adjustment program and Maryland’s reinsurance program.

The Exchange acted in August to make an adjustment, and we are not yet sure of the extent of that adjustment. Gene Ransom, CEO of MedChi, wrote an op ed in the Baltimore Sun on August 24, 2018, about MedChi’s position.
Good medicine deserves the strongest protection you can get.

MEDICAL MUTUAL aggressively defends your practice and professional reputation.

In today’s complicated world, sometimes medical professionals feel like they are under siege. So, it’s understandable that Doctors want strong protection for their practices. For 40 years the “gold standard” of a rock-solid defense has been MEDICAL MUTUAL. We’re Maryland’s largest and most experienced medical professional liability insurer and we are known for our relentless claims defense. That’s why we help Maryland Doctors withstand the slings and arrows of sometimes dubious claims better than any other insurance company.

MEDICAL MUTUAL
Liability Insurance Society of Maryland
Lowentritt Receives MedChi Recognition

Ben Lowentritt, MD, was presented the Dr. Henry P. & M. Page Laughlin Award for outstanding service on the MedChi Board of Trustees. In presenting the award, MedChi's outgoing president, Gary Pushkin, MD, noted Dr. Lowentritt's completion of two three-year terms as Specialty Society Trustee. Dr. Lowentritt, a urologist, and the first surgeon in Maryland to perform robot assisted surgery for bladder cancer, continues his service as co-chair of MedChi's Legislative Council. The council meets Monday evenings during the ninety-day session of the Maryland General Assembly at MedChi's Baltimore offices. Annually, the committee reviews hundreds of bills and provides an opportunity for physicians to share their views on a range of health care bills and related legislative concerns. Dr. Lowentritt was president of Baltimore City Medical Society in 2013.

Preparing the Next Generation of Physicians

Baltimore City Medical Society (BCMS) and Baltimore City Medical Society Foundation offer several programs for pre-med and medical students.

Medical School Scholarship

June 1 each year is the deadline for applications for BCMS Foundation’s scholarship program. Amira O. Collison, a Prince Georges County resident and second-year medical student at Johns Hopkins University School of Medicine, received the 2018–19 North Charles/Wyman Park Award in the amount of $10,000. Contributions to support future medical students may be made payable/sent to: BCMSF, 1211 Cathedral Street, 3rd Floor, Baltimore, MD 21201.

Physician-Student Exchange

Patterned after the “speed dating” concept, each year, pre-med and medical students move from table to table, talking with physicians about their chosen specialty. This year’s program will be held Monday, October 22, from 6 p.m. to 8 p.m. at MedChi’s Baltimore location. If you would like to participate and discuss your career path with students, contact the BCMS office at 410.625.0022 or info@bcmsdocs.org.

Medical Career Pathways

High school and college students will, again, have the unique opportunity to gain information on medical school at the third annual Medical Career Pathways, Saturday, November 17, 2018. Representatives from medical schools and MCAT and essay writing preparatory programs, and medical students, residents and fellows, will participate in this year’s program. Share this information with future physicians you may know!

Focus on Physician Wellness Continues

Baltimore City Medical Society (BCMS) and Baltimore County Medical Association (BCMA) held a continuing medical education activity on Saturday, September 8, 2018, on physician burnout and well-being. Kathy Blake, MD, from the American Medical Association, and Russell Libby, MD, from the Physicians Foundation, shared their organization’s initiatives. A panel of physicians shared personal experiences, and was followed by a panel of hospital, medical school, and resident program representatives, presenting what they are doing to address burnout and well-being throughout the physician lifecycle. BCMS and BCMA are planning additional programs on wellness.

Montgomery County Medical Society Plans Busy Fall to Engage Physician Members

MCMS Women in Medicine & Early Career Physician Activities

Networking events are planned this fall for both Women in Medicine & Early Career Physicians. The 11th Annual Women in Medicine Brunch will be held on Sunday, October 28 from 11:00 a.m. to 1:00 p.m. at the lovely home of a female physician. As in the past, this event is expected to draw more than fifty women physician members of all specialties and practice modes. Women physicians enjoy connecting with each other and sharing the challenges and rewards of balancing professional and personal responsibilities.

The Early Career Physicians Speed Networking Event will be held on November 8, 2018, at LaHinch Irish Restaurant in Potomac. Speed networking is back by popular demand. In the ninety or so minutes, in this structure process, physicians are able to meet approximately eighteen new physicians. This has been a great way for physicians to establish new practice referral sources.

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MCMS Offers Education to Help Members Transition to Value-Based Care
MCMS continues to participate as a partner with the Garden Practice Transformation Network to offer education to all physicians and staff regarding the Quality Payment Program, value-based care, and new Maryland Primary Care Program.

MCMS Readies for the 2019 Legislative Session
MCMS is recruiting physicians to be key contacts with legislators. Montgomery County is expected to have as many as eight new delegates and senators in the Maryland Assembly so it’s important to serve as resources to legislators on important medical and medical practice issues. In addition, MCMS will hold its annual legislative breakfast in December, and its 2019 Lobby Day on March 6, 2019.

For information about any of these activities or to get involved, visit www.montgomerymedicine.org, or contact Karissa Miller at 301.921.4300.

Yuvraj Kamboj, MD, Elected as President of Harford County Medical Association
Yuvraj Kamboj, MD, was elected president of the Harford County Medical Association earlier this year. He is a Board Certified Family Physician practicing Family Medicine in Bel Air. He completed his Family Medicine residency in Saginaw, Michigan, at Synergy Medical Education Alliance, part of Central Michigan University. After his residency in Illinois, he and his family moved to Bel Air. He has been practicing medicine in Harford County for the past six years.

Dr. Kamboj has experience in both primary and urgent care. He was the medical director at Patient First in Harford County before opening his solo practice Bel Air Family Care this summer. He enjoys his new primary care and is passionate about preventative care and getting to know his patients. His wife, Jaya Swami-Kamboj, MD, practices Pain Management at Kaiser Permanente. He loves watching movies, playing tennis and basketball, and spending time with his family. When fall arrives you will find watching football and cheering for the Baltimore Ravens.

MedChi Member Mark Plaster, MD, Will Head Southern Chapter of American Red Cross
Mark Plaster, MD, a former Republican candidate for state and federal offices, will now lead the local chapter of the American Red Cross. Dr. Plaster, who most recently dropped out of his bid as a GOP candidate for the District 30A seat in the House of Delegates, will lead the American Red Cross Southern Maryland Chapter, the organization said in a release. The chapter covers Anne Arundel, Calvert, Charles and St. Mary’s counties, the organization said. Plaster, a former emergency room doctor, first entered politics during the 2016 election, when he unsuccessfully attempted to knock out Democratic incumbent Rep. John Sarbanes for the state’s District 3 seat on the House of Representatives.
MedChi Offers Resources for Employed & Private Practice Physicians

The Center for the Employed Physician

The Center for the Employed Physician was established by the Center for a Healthy Maryland through a grant from The Physicians Foundation. Through this project, resources and educational programming were developed to assist physicians who are currently employed or are considering entering into an employment arrangement. To inform the content of the tools and services to be created, 442 Maryland physicians responded to a survey, giving feedback about their concerns regarding practicing medicine in an employed setting.

Physicians considering employment most requested a resource that would aid in contract negotiations, while physicians who are currently practicing in employed settings most requested current compensation models. Both groups were also concerned about maintaining autonomy. Resources of the Center for the Employed Physician include an informative Employed Physicians Brochure, referrals for professional advice, a Model Employment Contract adapted to Maryland (to obtain the Model Contract, please contact Ginger Tinsley at the email below), a Primer of Self-Referral Laws, Compensation Resources and well-received CME presentations on “Issues for the Employed Physician and Physicians Contemplating Employment,” conducted in the Baltimore and Montgomery County areas.

For more information, please contact Ginger Tinsley, MedChi Director of Membership & Communications, at 800.492.1056, ext. 3330, or at gtinsley@medchi.org.

The Center for the Private Practice of Medicine

MedChi is committed to helping practices remain independent. As your Medical Society, MedChi developed the Center for the Private Practice of Medicine to provide business support tailored to the time constraints of your practice. Our goal is to strengthen your practice by providing credible support that meets your needs with key business services, including:

1. Practice Management Services: Business assistance so you and your staff can focus on the clinical side of your practice.
2. HIPAA: Assistance with understanding the policy, privacy and security risk management and practice specific compliance manual.
3. Technology: Credible guidance and services for health information technology, including EMR selection and implementation, as well as MACRA/MIPS assistance.
4. Finance: Certified Professional Coder support to perform coding reviews, training and risk mitigation.
5. Insurance: Includes insurance credentialing, payer contracting and Chronic Care Management Services.
6. New Practice: Comprehensive information for the opening of a new practice, including infrastructure development.

To learn more about the services of the Center for the Private Practice of Medicine, contact Colleen George at 800.492.1056, ext. 3360, or Yelena Shapiro at 800.492.1056, ext. 3370.

MedChi’s Annual Meeting & Fall House of Delegates Meeting Focus on Physician Compensation

MedChi’s 2018 Annual Meeting & Fall House of Delegates was held on Saturday, September 22, 2018. MedChi’s House of Delegates set an aggressive agenda of legislative, regulatory, and operational priorities for the organization. The meeting had two major areas of focus:

MedChi’s 2018 Physician Compensation Survey: Jeremy Robinson of Merritt Hawkins led a robust analysis and discussion of the results of MedChi’s salary survey, focusing on the unfavorable discrepancies in salary between Maryland physicians and physicians in other states and the startling gender pay gap for physicians in Maryland.

Opioid Crisis: MedChi’s House of Delegates considered several resolutions focusing on key public health concerns relating to the ongoing opioid crisis in Maryland. A keynote address from Clay Stamp featured an update on the activities of Maryland’s Opioid Operational Command Center. Outgoing MedChi President Gary Pushkin, MD, was honored for founding and leading MedChi’s Opioid Task Force.

Other highlights of the meeting included:

• The inauguration of MedChi’s 171st President, Benjamin Z. Stallings II, MD.
• A large group of medical students who inspired MedChi’s physician members with their passion and activism on behalf of the patients and public health of Maryland.
• A record-setting amount of MMPAC donations from our dedicated members and leaders.

MedChi is lucky and proud to have such a large group of passionate, dedicated leaders who continue to call on their medical society to raise the bar in serving as the foremost advocate and resource for Maryland’s physicians, patients, and the public. Thank you to all who attended!
CRISP FREE Services for Ambulatory Practices

Connect. Share. Improve Patient Care

CRISP is a regional health information exchange (HIE) serving Maryland and the District of Columbia. CRISP is a non-profit organization advised by a wide range of healthcare industry stakeholders. All of the following services are available for FREE to ambulatory practices. For more information, visit the CRISP website at www.crisphealth.org.

Clinical Query Portal
The CRISP Portal is a free tool available to clinical staff. As clinical information is created and shared with CRISP, it is made accessible in real time to participating health care providers through the CRISP Portal.

Encounter Notification Service (ENS)
ENS allows primary care physicians, care coordinators, and others responsible for patient care to receive real-time alerts when patients are admitted/discharged at hospitals. Proactively coordinate your patients’ care and schedule any necessary follow-up treatment or visits.

Prescription Drug Monitoring Program (PDMP)
The Maryland Prescription Drug Monitoring Program gives prescribers, dispensers and other licensed staff access to prescription information for all Schedule II-V drugs filled in Maryland, Virginia and some neighboring states.

For more information and to sign up for any of the CRISP User Services contact MedChi at 888.507.6024 or email info@medchiservices.org.

Have You Ever...
- Noticed while at work that a physician colleague smelled of alcohol?
- Been concerned by a physician who was so upset and angry with colleagues that it interfered with patient care?
- Been plagued with worry or concern because a colleague “just doesn’t seem right?”

Do You Know Where To Turn It...
- You think a physician friend might have a drinking problem?
- A colleague is self-prescribing pain-killers or other controlled medications?
- A colleague seems depressed, is experiencing mood instability, or is overly anxious to the point that their performance is being affected?

MPHP is a private, confidential, non-disciplinary program that advocates for the health and well-being of all physicians and other allied health professionals who are licensed by the Maryland Board of Physicians to safeguard the public. MPHP is HIPAA compliant, and protects the confidentiality of participant records as set forth under state and federal law. MPHP is administered by the Maryland State Medical Society’s 501 (c)(3) affiliate, the Center for a Healthy Maryland, and is separate from the Maryland Board of Physicians.

For more information and/or a confidential consultation for you or a colleague who may benefit from our help, please call 800-992-7010 or 410-962-5580.
MedChi’s Newest Physician Members

MedChi welcomes the following new members, who joined between July 14, 2018, and September 11, 2018.

Safiyyah H. Abdul-Rahman, MD — Upper Chesapeake Health System
Ealena S. Callender, MD — Simmonds Martin & Helmbrecht
Ophnell A. Cumberbatch, MD — Private Practice
Maria Alba Dauhajre, MD — Adventist HealthCare
Puneet S. Devgun, DO — Advanced Radiology
Peter F. Duggan, MD — SNVMC
Ira Fedder, MD — Towson Orthopaedic Associates
Neil E. Lattin, MD — Union Health Care Medical Offices
Rafael Lopez Steuart, MD — Private Practice
Suresh K. Menon, MD — Dermatology Associates & Surgery Center
Kalpana R. Prakasa, MD — University of Maryland Saint Joseph Medical Center
Susan Sarajari, MD — Dominion Fertility
Sabrina C. Sopha, MD — University of Maryland Baltimore Washington, Department of Pathology
Manuel Soto-Fournier, MD — Advanced Radiology
Shekeeb Sufian, MD, FACS — Center for Vein Restoration
James N. Tansinda, MD — Tansinda Medical Associates
Nelson E. Velazquez, DO — Dermatology Assoc & Surgery Center

Member Profile:
Benjamin Z. Stallings II, MD

In this issue of Maryland Medicine, we recognize Benjamin Z. Stallings II, MD, recently installed as the 171st president of Medchi.

On Saturday, September 22, 2018, Benjamin Z. Stallings, MD, was installed as the 171st President of MedChi. The Virginia native and Medical College of Virginia graduate has spent the last twenty-five years practicing radiology in the county he loves, Prince George's County. Dr. Stallings serves as the Director of the Department of Imaging and the Chief Radiation Safety Office at Doctors Community Hospital; he is also the President and CEO of Diagnostic Imaging and Diagnostic Imaging Associates.

Prior to becoming the President of MedChi, Dr. Stallings held several positions on the medical society’s Board of Trustees, including Vice Speaker of the House. Additionally, he served as President of The Prince Georges County Medical Society (PGCMS) and served on the Board of PGCMS for more than fifteen years. He has served on numerous boards at Virginia Tech, including the prestigious Virginia Tech Foundation Board.

Dr. Stallings is married to Kimberly Stallings, and together they have four sons. Benjamin Stallings III is finishing his Biochemistry degree at Virginia Tech. Brandon Stallings is majoring in business at Towson University. Bryant Stallings is also majoring in business at Towson University. Last but not least, Blake Stallings is a tenth grader at Paint Branch High School.

Virtually every second of Dr. Stallings’ free time is spent coaching travel basketball for Team Takeover. He has coached top-level basketball for more than ten years. He is currently coaching his youngest son’s team.

EMPLOYMENT

Potomac Physician Associates: Outpatient primary care practice is seeking Board Certified IM/FP physicians to join the team to serve our Bethesda/Chevy Chase/Germantown, MD patients. Office-based practice. Quality focus versus quantity. We are seeking practitioners who follow evidence-based practices. Understanding of ACO and PCMH models helpful. EHR experience required. This position has opportunity to become a shareholder within three years. Please contact vroberts@ppa.md to apply.
Gender Wage Gap, continued from pg. 3

The AMA policy “urges medical schools, hospitals, group practices and other physician employers to institute and monitor transparency in pay levels in order to identify and eliminate gender bias and promote gender equity throughout the profession” (D-200.981); therefore be it Resolved, That MedChi restates their long-standing policy supporting the eradication of gender-based income discrimination, especially in the healthcare sector, and that MedChi express that position when and where appropriate.

We urge you to get involved with the MedChi legislative process to assist all Maryland physicians in addressing this vital issue as well as other important legislative issues affecting all areas of medicine.
Medical Economics Council Evaluates Maryland Physicians’ Compensation Challenges

The Medical Economics Council provides advocacy services in both the private sector (payers) and the public sector (regulatory).

The Council is made up of the Payer Relations Committee and the Information Technology Committee.

The Payer Relations Committee evaluates the challenges physicians face on a day-to-day basis with insurance companies by engaging multiple payers and bringing them to the table for discussion and resolution.

In that forum, we identify issues regarding apparent payment discrepancies in all billing areas.

• The Payer Relations Committee works with individual carriers and the Maryland Insurance Administration to resolve these problems.
• The committee also educates physicians throughout the state on methods for working with the carriers.

The following are the Payer Relation Committee’s successes:
• We have achieved much success in finding resolutions to both specific and general issues brought forth, as well a better understanding of insurance carrier processes. This enables us to better inform our member physicians on best practices for both submitting claims and the appeals process for disputed claims.
• We monitor and inform committee members regarding the clinical application of legislative changes, as well identify issues for consideration as matters appropriate for our legislative agenda.

We encourage all members as well as staff to bring forward any issues they would like to put before the Payer Relations Committee for discussion/resolution.

The Information Technology Committee monitors new information technology and its relationship to the practice of medicine in Maryland and is a resource for physician practices as they implement new information technologies.

The following are the IT Committee’s successes:
• The Committee endorsed a resolution put forth by Bruce Taylor, MD, entitled Health Record and Payment Clearing House — Pilot Program (HB 1516 and SB 750), which was passed by the Maryland General Assembly in 2018.
• The Maryland Health Care Commission (MHCC) has assembled a Health Record and Payment Integration Program Advisory Committee to discuss a health information technology policy study that assesses the benefits and feasibility of creating a health record and payment integration program (or program) that, among other things, could incorporate administrative health care claim transactions into the State–Designated Health Information Exchange (HIE), the Chesapeake Regional Information System for our Patients (CRISP).

We encourage and would welcome additional participation in both the Payer Relations and Information Technology committees.

For more information, please contact Colleen George at cgeorge@medchi.org or 800.492.1056, ext. 3360.
Survey Highlights Maryland Physician Compensation Trends

Jeremy Robinson

A survey recently conducted by Merritt Hawkins in partnership with MedChi yields a variety of data regarding the compensation levels and practice metrics of Maryland physicians.

The survey asked Maryland physicians to indicate their current practice status. Forty-four percent indicated they are in independent, private practice, 23 percent indicated they are employed by a hospital, 22 percent indicated they are employed by a medical group, and the remainder indicated they are employed by a community health center, an academic facility, or other entity.

Physicians in private practice reported working an average of 50 hours per week, while employed physicians work an average of 48.5 hours per week.

The average 2016 pre-tax income reported by all Maryland physicians is $299,000. When broken out by specialty, Maryland physicians in general earn less than national averages. As the graph on this page indicates, average pre-tax income for Maryland physicians usually is lower than the starting salaries used to recruit physicians nationally as reported by Merritt Hawkins.

Gender Pay Disparities
Pay disparities between male and female physicians revealed by the survey are pronounced. Average annual compensation for male physicians in Maryland tracked by the survey was $335,000, compared to $224,000 for female physicians, a difference of almost 50 percent.

Even when compared on a specialty-by-specialty basis, male physicians earn considerably more than female physicians, the survey indicates. For example, male family medicine physicians in Maryland earn an annual average of $243,000, compared to $164,000 for female family medicine physicians, a difference of 48 percent.

MACRA Participation
Only 41 percent of Maryland physicians surveyed indicated they participate in Medicare's new reimbursement formula, known as MACRA (Medicare Access and CHIP Reauthorization Act). More than one-quarter said they do not participate, while almost one-third are unsure, reflecting continued uncertainty among physicians regarding Medicare's revised physician payment model.

A complete copy of the survey report is available from MedChi by contacting Catherine Johannesen, 410.539.0872, ext. 3308.

Jeremy Robinson is Regional Vice President of Merritt Hawkins, the nation’s leading physician search firm and a company of AMN Healthcare (NYSE: AMN). He can be reached at Jeremy.Robinson@merritthawkins.com.
Dr. Osler's Bookplates

After the death in 1919 of Sir William Osler, MD, MedChi commissioned a bookplate in his honor, designed by the famed medical illustrator, Max Brödel. The plate featured the seals of the four academic institutions with which Osler was affiliated: McGill University, the University of Pennsylvania, Johns Hopkins, and Oxford University.

These bookplates proved very popular, and MedChi’s librarian, Marcia Noyes, received requests for copies from across the country. In return, she requested that each person send one of his or her personal bookplates to MedChi. The bookplates, measuring about three by four inches, are incredibly detailed engravings, many reflecting the personality of the owner. The original bookplate for the Osler Testimonial Fund, and one from Osler’s friend and colleague, Thomas S. Cullen, MD, are both illustrated by their friend, Max Brödel.
October 24
Carroll County Medical Society Membership Meeting. 6 pm. Speaker: Gene Ransom, CEO, MedChi. Cathy Peters, 410.539.0872, ext. 3369.

November 1
Charles County Medical Society Meeting. Speaker: Carolyn Jacobs. Cathy Peters, 410.539.0872, ext. 3369.

November 7
Baltimore County Medical Assn Board of Governors’ Meeting. 6:15 pm. Patricia Keiser, 410.296.1232.

November 13
Baltimore City Medical Society Board Meeting. 6 pm. MedChi Office, Malouf Board Rm. Lisa Williams, 410.625.0022.

November 14
Baltimore County Medical Assn CME Event. Patricia Keiser, 410.296.1232.

November 14
Frederick County Medical Society Meeting. Speaker: Gene Ransom, CEO, MedChi. Cathy Peters, 410.539.0872, ext. 3369.

November 15
MedChi Board of Trustees Meeting (Teleconference). 6 pm. Catherine Johannesen, 410.539.0872, ext. 3308.

November 17
Baltimore City Medical Society Medical Career Pathways. 8 am. MedChi Office, Osler Hall. Lisa Williams, 410.625.0022.

November 29
Baltimore City Medical Society & Baltimore County Medical Assn Fndtn Annual Meeting. 6 pm. Lisa Williams, 410.625.0022.

November 30
Baltimore County Medical Association Legislative Breakfast. Patricia Keiser, 410.296.1232.

For a complete list of MedChi and component events, visit http://www.medchi.org/Events.