REQUEST: Support the physician community by maintaining the Governor’s FY2018 proposed budget for Evaluation and Management (E&M) codes at 94% of Medicare rates.

The 2012 Maryland General Assembly increased Medicaid reimbursement for E&M codes to be consistent with Medicare rates for all physicians who accept Medicaid. This was done to address health care expansion and a significant lack of physician participation in the Medicaid program due to inadequate reimbursement. The Maryland State Medical Society (MedChi) applauded the reimbursement rate increase. Beginning April 1, 2015, reimbursement for E&M codes were reduced from 100% of Medicare to 87% of Medicare, which was maintained in the FY2016 budget, as part of former Governor O’Malley’s mid-year budget cuts. Since that time, E&M codes have steadily been increasing, first to 92% and then to 94% of Medicare. Recognizing the budgetary constraints currently facing the State, MedChi is pleased that the proposed FY2018 budget maintains the rates at 94% and we respectfully urge the Committee to accept it.

REQUEST: Support budget language to create and provide funding for a voluntary Opioid Risk Reduction Pilot Program in Medicaid.

As Maryland continues to battle the current opioid crisis, MedChi is interested in partnering with Ameritox, a leader in medication monitoring. The pilot program would be voluntary with the goal of enrolling 1,500 patients whose physicians agree to participate in the pilot and who are currently enrolled in Maryland’s Medicaid program, have been prescribed long-term opioid therapy for at least six-months, and for whom six-months of historical claims data is available for analysis. MedChi strongly believes that this program will provide a valuable tool to physicians, especially when coupled with the recent changes made by Medicaid in prescribing criteria.

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