MEDCHI, THE MARYLAND STATE MEDICAL SOCIETY HOUSE OF DELEGATES

Resolution 3-13

SUBJECT: Patient Access to Independent Appeals and Grievance Processes Whereas, in 1998 MedChi passed the Appeals and Grievance bill (HB3/SB401), a very important piece of legislation that mandated on appeal and independent review of coverage decisions made by managed care companies and led to the reversal of many arbitrary coverage decisions made by managed care companies, and Whereas, under the Patient Protection and Affordable Care Act there are incentives to create Accountable Care Organizations (ACO) one of whose functions is to reduce costs, including limiting care, i.e. coverage decisions, and Whereas, although these organizations have a very different model, i.e. being nonprofit, having boards of consumers and providers and using practice guidelines and quality metrics to assure optimum care; nevertheless human nature and medical decisions are fallible and it remains important that coverage decisions should be able to be appealed to an independent body or institution, therefore be it Resolved, that MedChi reaffirm their long-standing policy that all patients have access to an independent appeals and grievance process, including patients in ACOs; and be it further Resolved, that MedChi ask our AMA to fight for independent appeals and grievance rights for patients covered in all federal programs, including Medicare ACOs and ERISA plans.

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As adopted by the House of Delegates at its April 27, 2013 meeting.

INTRODUCED BY: Baltimore County Medical Association