

MEDCHI, THE MARYLAND STATE MEDICAL SOCIETY
HOUSE OF DELEGATES

Resolution 1-14

INTRODUCED BY: Baltimore County Medical Association

SUBJECT: Face-to-Face Appeal Process for Physicians in Physician Health Programs
Removed from Insurance Provider Panels by Health Insurers

1 Whereas, many physicians rely on health insurance payments in order to be able to afford to take care of patients;
2 and

3
4 Whereas, the intense competition between health insurance companies have led companies to compete to offer the
5 “best” panels; and

6
7 Whereas, the “best” panel is often considered to be one that has physicians who are considered to have the best
8 physician/patient relations; and

9
10 Whereas, licensing board actions/sanctions are often considered to be a marker for poor patient relations and
11 possible increased liability risk; and

12
13 Whereas, the mere filing of such actions may constitute grounds for removal of a physician from the insurers
14 physician panel with the physician having no opportunity to explain the action, defend himself/herself, or to inform
15 the insurer of what action the physician is taking to correct the situation; and

16
17 Whereas, Physician Health Programs have enabled many physicians referred by licensing boards who have
18 struggled with addiction, physical or mental health problems affecting their practice to return to a healthy and
19 productive practice; and

20
21 Whereas, a paper by Brooks, E., Gendel, M., Gunderson, D., et al: “Physician health programmes and malpractice
22 claims: reducing risk through monitoring”. Occupational Medicine, April 2013, a Colorado study by the Colorado
23 Physicians Insurance Company concluded that: “This study suggests that future malpractice claims may be reduced
24 for doctors who are currently monitored or have been monitored by a PHP.’ It achieves this through such things as
25 addressing the physicians underlying medical problems, helping them acquire skills that improve their practice, and
26 encouraging them to make better use of other professional supports; therefore be it

27
28 Resolved, that MedChi advocate to protect physicians who are participating in a Physician Health Program from
29 unreasonable contract termination from health insurance plan participation and that MedChi’s Payer Relations
30 Committee work in collaboration with the Physicians Health Program to develop a strategy to achieve this
31 objective; and be it further

32
33 Resolved that MedChi ask our AMA to advocate to protect physicians who are participating in Physician Health
34 Programs from unreasonable contract termination from health insurance plan participation.

35
36
37 As amended and adopted by the House of Delegates at its meeting on April 26, 2014.