MEDCHI, THE MARYLAND STATE MEDICAL SOCIETY HOUSE OF DELEGATES

INTRODUCED BY:	Montgomery County Medical Society	Resolution 28-15
SUBJECT:	Payor Physician Quality Rating Programs	
		nine the overall
		n inadequate time to
Whereas, patients use t	hese quality rating systems to make choices for their medical	care; and
Whereas, the current la systems; and	w (§15-1701 and §15-1702) outlined in detail the requirement	nts of payor rating
		transparency about
aware that physicians c and the appeal process	lo not understand the criteria by which their quality and/or co es which are in place for physicians to use if they find their quality	st is being measured,
-		teria and appeals
As amended and adopt	ed by the House of Delegates at its meeting on September 19	, 2015.
	SUBJECT: Whereas, payors are no physician rating strateg Whereas, often physici appeal these decisions Whereas, patients use t Whereas, the current la systems; and Whereas, Maryland par Health Care Commissie Whereas, confusion sti their rating systems for Resolved, that MedChi aware that physicians of and the appeal processo inappropriately designa Resolved, that MedChi 1702), and request the and be it further Resolved, that MedChi processes with the men	SUBJECT: Payor Physician Quality Rating Programs Whereas, payors are not transparent about the procedures or practices used to deterr physician rating strategy, or individual physician ratings; and Whereas, often physicians are notified of their individual quality rating and are give appeal these decisions before the quality rating is posted online; and Whereas, patients use these quality rating systems to make choices for their medical Whereas, the current law (\$15-1701 and \$15-1702) outlined in detail the requirement systems; and Whereas, Maryland passed legislation requiring payor rating systems to be approved Health Care Commission's contracted ratings examiner prior to January 1, 2010; an Whereas, confusion still exists amongst physicians and patients due to lack of payor their rating systems for cost and quality; therefore be it Resolved, that MedChi communicate with the Maryland Health Care Commission (aware that physicians do not understand the criteria by which their quality and/or coand the appeal processes which are in place for physicians to use if they find their quinappropriately designated; and be it further Resolved, that MedChi request a report on the compliance with the current law ((\$1 1702), and request the MHCC to release the criteria upon which physicians' quality