INTRODUCED BY: Montgomery County Medical Society

SUBJECT: Payor Physician Quality Rating Programs

Whereas, payors are not transparent about the procedures or practices used to determine the overall physician rating strategy, or individual physician ratings; and

Whereas, often physicians are notified of their individual quality rating and are given inadequate time to appeal these decisions before the quality rating is posted online; and

Whereas, patients use these quality rating systems to make choices for their medical care; and

Whereas, the current law (§15-1701 and §15-1702) outlined in detail the requirements of payor rating systems; and

Whereas, Maryland passed legislation requiring payor rating systems to be approved by the Maryland Health Care Commission’s contracted ratings examiner prior to January 1, 2010; and

Whereas, confusion still exists amongst physicians and patients due to lack of payor transparency about their rating systems for cost and quality; therefore be it

Resolved, that MedChi communicate with the Maryland Health Care Commission (MHCC) to make them aware that physicians do not understand the criteria by which their quality and/or cost is being measured, and the appeal processes which are in place for physicians to use if they find their quality/cost is inappropriately designated; and be it further

Resolved, that MedChi request a report on the compliance with the current law (§15-1701 and §15-1702), and request the MHCC to release the criteria upon which physicians’ quality is being measured; and be it further

Resolved, that MedChi obtain and make available the payors’ quality/cost rating criteria and appeals processes with the membership as soon as possible.

As amended and adopted by the House of Delegates at its meeting on September 19, 2015.