

The Maryland State Medical Society

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TO:	The Honorable Shane E. Pendergrass, Chair Members, House Health and Government Operations Committee The Honorable Neil Parrott
FROM:	J. Steven Wise Pamela Metz Kasemeyer Danna L. Kauffman Richard A. Tabuteau
DATE:	March 11, 2019
RE:	OPPOSE – House Bill 969 – Medical Laboratories – Advertising or Solicitation of Business – Repeal of Prohibition

The Maryland State Medical Society (MedChi), the largest physician organization in Maryland, **opposes** House Bill 969.

House Bill 969 would remove the current ban on medical laboratories advertising or soliciting business directly from patients. In short, it would allow labs to market directly to the public.

MedChi has three principal concerns with this legislation. First, we question whether significant benefits will be achieved from the increased costs and utilization of labs that will result from this change. There is little doubt that direct advertising will increase the number of patients going directly to labs and asking for tests. But the question is, are those tests even needed? Is the patient seeking the proper test? Without a health care practitioner first determining that a lab test is needed, we think the number of tests will increase but the value to the patient may be minimal. It would seem this concern is what likely led to the current law being enacted in the first place.

Secondly, patients seeking tests on their own without the input of a primary care practitioner will further fragment patient care. If a practitioner is not aware that a lab test was done, it could be repeated unnecessarily. While electronic medical records (EMR) help to reduce this concern, EMR systems still contain gaps, particularly when patients seek care without the knowledge of their primary caregiver.

Finally, lab tests sought without the recommendation of a health care practitioner may not be covered by a patient's health insurance. Patients may be unaware of this when seeking lab tests on their own.

For these reasons, MedChi opposes House Bill 969.

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