TO: The Honorable Peter A. Hammen, Chairman
Members, House Health & Government Operations Committee
The Honorable Dan Morhaim

FROM: Joseph A. Schwartz, III
Pamela Metz Kasemeyer
J. Steven Wise

DATE: February 24, 2011

RE: SUPPORT – House Bill 286 – *Hospitals and Freestanding Ambulatory Care Facilities – Practitioner Performance Evaluation*
SUPPORT WITH AMENDMENT – House Bill 600 – *Health Care Providers – Investigations – Information Sharing Among State Agencies*

The Maryland State Medical Society (MedChi), which represents over 7,300 Maryland physicians and their patients, supports House Bills 286 and supports House Bill 600 with amendment.

This legislation aims to provide hospitals and the regulatory bodies overseeing them with adequate authority to review patient care by physicians, particularly with respect to utilization. For the reasons set forth below, MedChi supports these measures.

House Bill 286 requires hospitals and ambulatory care facilities, as a matter of licensure, to have certain procedures in place for reviewing the performance of the physicians who work in the facility. These facilities should have such procedures in place already, but passage of this legislation would ensure that they do or their license would not be renewed.

The Honorable Peter A. Hammen, Chairman
House Bill 600 also works to ensure that proper utilization review is possible by allowing the Office of Health Care Quality and the Health Services Cost Review Commission the ability to review records of the Board of Physicians. While the bill would also provide the Secretary of DHMH with this authority, MedChi does not believe this is appropriate. The entities within the Department that have such authority now, or that are given such authority by House Bill 600, are more than adequate to accomplish the goal of these bills. In MedChi’s view, allowing the Secretary to review the confidential and highly sensitive information at issue here could inject a level of political involvement that is unnecessary and which may cloud what should be impartial, objective and independent reviews of this information.

In addition, MedChi has been informed that the cardiologists will ask for more specificity in the bill as to the analysis that will be performed by the HSCRC on utilization. MedChi believes this to be a reasonable request that should be incorporated into House Bill 600.

For these reasons, MedChi supports House Bill 286 and supports with amendments House Bill 600, which should be amended as set forth above.

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