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

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

DATE: March 1, 2012

RE: SUPPORT WITH AMENDMENT – House Bill 1140 – Physicians – Sharing of Information with Maryland Health Care Commission

The Maryland State Medical Society (MedChi), which represents over 7,600 Maryland physicians and their patients, supports House Bill 1140 with amendment.

House Bill 1140 further expands the entities to which the Health Services Cost Review Commission (HSCRC) and the Board of Physicians must disclose records by adding the Maryland Health Care Commission (MHCC).

In 2011, the General Assembly enacted legislation that allowed the Secretary of DHMH, the HSCRC and the Office of Health Care Quality to access Board of Physician information for the purpose of “investigating quality of utilization of care.” This was in response to the stent issue at St. Joseph’s Medical Center. MedChi objected to the providing of such information to the Secretary, believing that confidential information being provided to that Office had the potential to politicize certain disciplinary actions related to utilization of care. The General Assembly adopted the measure nonetheless.

House Bill 1140 now proposes to add the MHCC to the list of agencies which can access such information. According to the Fiscal Note, the MHCC completed a report in December of 2011 regarding percutaneous coronary intervention (PCI) services, in which it recommended that the MHCC be given the ability to share information similar to what the other agencies were given in 2011.
MedChi is very concerned with the ever-growing breadth of agencies which can access what has historically been regarded as confidential information. At some point, the number of agencies which can access this information calls into question just how confidential the information really is. MedChi would urge the Committee to restrict the MHCC’s access to information that is relevant to PCI services, since that is the area which gave rise to the MHCC’s request. Without some restriction on access to Board of Physician information, that information loses what should be the highest level of confidentiality and with it, the willingness of individuals to provide what should be protected information.

For these reasons, MedChi supports the bill with the amendment set forth above.

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