



Phone (410) 871-7645

Fax (410) 871-6325

www.HealthyCarroll.org

535 Old Westminster Pike

Suite 102

Westminster, Maryland 21157

New Maryland Health Care Reform Council

By Tricia Supik, Executive Director and CEO
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Maryland's new *Health Care Reform Coordinating Council* (Council) held its first meeting on May 6, 2010 in Annapolis. It was created by Governor O'Malley days after President Obama signed national health reform legislation, and will lead the State's efforts to implement federal reform. The Honorable Anthony G. Brown, Lieutenant Governor, State of Maryland and John M. Colmers, Secretary, Maryland Department of Health & Mental Hygiene are serving as Co-Chairs of the Council.

They have stated that "Meaningful reform depends on successful implementation at the state level and the Council's job is to effectively implement federal reform in a way that makes a real difference in the lives of all Marylanders. The Council will thoughtfully consider and analyze the many policy choices and implementation decisions federal reform presents and make recommendations to the Governor on how best to improve quality and reduce costs."

In its interim report released on July 26th the Council identified six areas that require the focus of a workgroup "because of their central importance to reform and the need to meet implementation timeframes." The areas "go beyond any reform initiatives already underway, and they also affect other cross-cutting implementation issues that will require input and collaboration among different agencies and branches of government. The state's savings is expected to peak at \$875 million in fiscal 2019 before declining in fiscal 2020,"

The coordinating council has created work groups to examine six topics related to the reforms, including creating a health insurance exchange, enrolling consumers in coverage, providing a "safety net" for those who remain uninsured, building a health care work force and cost containment.

The Health Care Workforce Workgroup is addressing one of those key six areas. Co-chairs Senator Thomas McLain Middleton and Wendy Kronmiller, Chief of Staff and Assistant Secretary, Department of Health and Mental Hygiene have said "that while more individuals will have health insurance when federal reform is fully implemented, their coverage will be meaningful only if they have access to health care providers able to meet their needs."

In a recent article published on www.MarylandReporter.com Senator Middleton said that "medical malpractice and the scope of practice allowed health providers who are not physicians are thorny issues the next General Assembly needs to tackle as Maryland moves to implement

federal health care reform. Middleton expected that changing how much doctors are held legally at risk and how much health professionals who are not doctors can do will figure prominently in the next legislative session.”

Middleton further stated “We will look at the cost of medical malpractice insurance” and its influence on people’s decisions about entering the medical field, and if so, in what areas they choose to practice. A special session of the legislature in 2004 took up the ballooning costs of malpractice insurance and changed some aspects of Maryland law. Whether the legislature has the will to make [more] changes, I don’t know,”

Middleton referred to a 2008 study by the Maryland Hospital Association and MedChi, the state medical association, which found a severe shortage of primary care physicians, especially in the more rural areas of the state. Maryland is not alone in this situation and, he predicted, states will compete for such physicians.

Lt. Gov Brown said “Federal health care reform challenges us to blend competent, effective government with the skills, experience and needs of the community. Neither government nor the private sector can do it alone.” We are all invited to be a part of the process by exploring the website designed to share the work of the Council, to gain feedback from the public, and to provide transparency in the decision making process.

The full report can be found on the HCRCC website at www.healthreform.maryland.gov.

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