

~~Section 15-102.1(b)(8)
Annotated Code of Maryland
(2000 Replacement Volume)~~

BY adding to

~~Article Health General
Section 15-303.1
Annotated Code of Maryland
(2000 Replacement Volume)~~

Preamble

~~WHEREAS, Fee for service reimbursement rates under the Medical Assistance and Children's Health Programs are tied to the American Medical Association's Current Procedural Terminology (CPT) codes used by all health care providers; and~~

~~WHEREAS, The fee for service reimbursement rates are established by regulation, and thus, years, possibly decades, may go by before the Department of Health and Mental Hygiene reviews or increases a fee for service rate; and~~

~~WHEREAS, No other procedure exists for review and updating of these rates; and~~

~~WHEREAS, Prior to the enactment of HealthChoice, a very small percentage of the funds was spent on fee for service reimbursement for professional physician services, and since the enactment of HealthChoice, an even smaller percentage has been spent on fee for service physician reimbursement; and~~

~~WHEREAS, Maryland's 5-year budget neutrality ceiling is tied to a formula using "upper payment limits", and an increase in Maryland's fee for service rates could improve the State's future federal funding; and~~

~~WHEREAS, Maryland values its children and their future as much as it values its elder citizens, yet, as reported by the Center for Health Policy Development at University of Maryland at Baltimore County to the Medicaid Advisory Committee, we allow the Medical Assistance and Children's Health Programs to pay one-third of the rate that we pay providers to care for seniors; and~~

~~WHEREAS, Children in the Rare and Expensive Case Management (REM) Program, who are the most disabled and vulnerable in the Medical Assistance and Children's Health Programs, are unable to access services because specialty providers are leaving, and will continue to leave, the REM Program due to unacceptably low reimbursement rates; and~~

~~WHEREAS, A recent survey of the American Academy of Pediatrics published the 100 most often used CPT codes by the Medical Assistance Program nationwide, and the Maryland reimbursement rate was substantially less than the average in the south Atlantic states, the U.S. average, and the reimbursement rate used for the Medicare program—often one-half to one-third lower than the scientifically based Medicare rate; now, therefore,~~