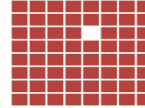




1211 Cathedral Street  
Baltimore, MD 21201-5585  
410-727-2237  
e-mail: mdacep@aol.com  
www.mdacep.org



**Maryland Chapter  
AMERICAN COLLEGE OF  
EMERGENCY PHYSICIANS**

*The Maryland State Medical Society*

1211 Cathedral Street  
Baltimore, MD 21201-5516  
410.539.0872  
Fax: 410.547.0915  
  
1.800.492.1056  
  
www.medchi.org

**TO:** The Honorable Paul G. Pinsky, Chair  
Members, Senate Education, Health, and Environmental Affairs Committee  
The Honorable Delores G. Kelley

**FROM:** J. Steven Wise  
Pamela Metz Kasemeyer  
Danna L. Kauffman  
Christine K. Krone

**DATE:** February 10, 2022

**RE:** **SUPPORT WITH AMENDMENT** – Senate Bill 159 – *Health Occupations – Authorized Prescribers – Reporting of Financial Gratuities or Incentives*

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The Maryland State Medical Society (MedChi) and the Maryland Chapter of the American College of Emergency Physicians (MDACEP) **support with amendment** Senate Bill 159.

Senate Bill 159 requires all authorized prescribers, which includes physicians, to file with their health occupations board a financial disclosure reporting anything of value received from a pharmaceutical distributor or manufacturer.

MedChi and MDACEP do not object to the disclosure of this information, but strongly object to the reporting of information for a second time that is already well within the public domain. Indeed, a federal database already exists containing this exact information. It can be found at <https://openpaymentsdata.cms.gov/>, and lists anything valued at \$11 or more that has been provided to a physician by a distributor or manufacturer. The State's already overworked physicians do not support reporting information or establishing a new database when the same information is already made available at the federal level and is accessible by the Board of Physicians for its use.

If the General Assembly wishes to make it easier for the public to access this information while researching a particular physician's profile on the Board of Physicians website, we do not object to an amendment requiring the Board to provide a link to the Open Payments database along with other information about a physician. But we see no reason why an entirely separate reporting requirement or database containing the same information is necessary.

Finally, if the Board of Physicians determines that a physician is prescribing excessive amounts of medication while also taking financial gratuities from a manufacturer, there are existing disciplinary

grounds to address this. See Health Occ's, §14-404(a)(10), (a)(19) and (a)(27). The combination of the existing federal database and existing Maryland law give the Board all the tools it needs and makes this legislation unnecessary.

For these reasons, MedChi and MDACEP support Senate Bill 159 with amendments that delete the requirement of establishing a new database, but which instead provide a link to the federal database on the profile page of any licensed Maryland physician.

**For more information call:**

J. Steven Wise  
Pamela Metz Kasemeyer  
Danna L. Kauffman  
Christine K. Krone  
410-244-7000