



MAINE MEDICAL ASSOCIATION

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Comments from Maine Medical Association

David B. McDermott, MD, MPH

Immediate Past President

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Let me join the others in thanking you for this unique opportunity. I am David McDermott from Dover-Foxcroft. I practiced primary care there for fifteen years and now serve as the Director of Emergency Medicine at Mayo Regional Hospital. Nearly every day I experience some of the frustration that physicians, as small business owners, face in dealing with the complexity of delivering quality care, getting paid for that, and dealing with the administrative hassles and burdens that create barriers between physicians and their patients. In the same way that you and many in this room strive for Maine to become a better place for business, the MMA wants to work with you and your administration to make Maine the best state in the nation to practice medicine. We already know it is a wonderful place to live, but physicians need to have an environment of collaboration with state regulators and payors if they are going to thrive here. These barriers impair our ability to recruit new physicians to live and work in Maine.

Let me give you just one example. Many of the procedures and medications that I might need for my patients now require a "prior authorization" from MaineCare. Most of these requirements are simply for the purpose of restraining costs, and we all understand the need to do that. But prior authorization needs to be done in a way that does not create a burden for the physicians and which does not deny the patients the care they need. I think that once a physician has been approved for 100% of his or her requests, he or she should be exempt from the further hassle of prior authorization for some reasonable time. Once it is established that the doctor is prescribing according to well established guidelines, it makes no sense to continue the process.

I am certain that we could make many other positive suggestions if we had meaningful opportunities to interact with the people making these decisions. We are frequently invited to meetings which are invariably scheduled at a time convenient to the state, but at times when our physicians are seeing patients. As MaineCare moves toward a managed care model, we fear that the insurance companies will take the money and move even more of the administrative burden onto the physician community.

Thank you very much for the opportunity to make these brief comments on behalf of the 3500 members of the Maine Medical Association.

David McDermott, M.D., MPH
Immediate Past President
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