1211 Cathedral Street · Baltimore, MD 21202 · 410.539.0872 · www.medchi.org/MMPAC Maryland Medical Political Action Committee Candidate Survey 2018 This survey will inform voters of your stance on several health care issues that are important to Maryland physicians. Please feel free to provide additional context for any of your answers.

1. Current Maryland law prohibits a standard of care expert witness from devoting more than 20% of his or her professional time testifying at trial, also known as the "20% Rule." This longstanding rule has prevented the use of "professional witnesses." Critics of this rule submitted a bill (SB30/HB1581) during the 2018 Session to repeal the 20% Rule. What is your position on the 20%

____XX____ Support I voted against SB30/HB1581. To be considered an expert on standard of care, one must be a practicing physician. Repeal

2. In order to avert a medical malpractice insurance crisis in the 1980s, the General Assembly enacted tort reform. These legislative efforts worked well as the price of medical malpractice insurance stabilized and doctors were no longer forced out of the business because of malpractice premiums. In 2004-2005, the General Assembly worked to stabilize the medical malpractice market when premiums were again spinning out of control. One of the efforts was to lower the "cap" on non-economic damages (pain and suffering) in medical malpractice lawsuits. Even though the Maryland "cap" remains one of the highest in the United States, most experts believe that it is the primary reason that malpractice insurance rates have stabilized. Plaintiffs' lawyers have tried to alter or remove this "cap."

What is your position on the present statutory cap on non-economic damages?

XX_____ Support I support a reasonable cap on non-economic damages to provide stability for the medical profession we all rely on to treat ourselves, family and loved ones. I would support an increase in the cap to account for inflation.

_ Oppose

3. In 2013, the Maryland Court of Appeals upheld the standard of contributory negligence, which prohibits plaintiffs in medical malpractice and other negligence cases from recovering when they have contributed to their own injuries. This standard has helped hold down the costs of liability insurance in the State.

If legislation were introduced to abandon contributory negligence and adopt the standard of comparative negligence, where fault is apportioned among defendants even if a plaintiff contributed to his or her injuries, would you support or oppose that legislation?

_____ Support

____XX____ Oppose I have consistently opposed replacing Maryland's contributory negligence law.

4. In recent years, legislation has been introduced in the General Assembly with the intention of providing

non-physicians a scope of practice that is nearly identical to that of the practice of medicine, despite the non-physicians having training and experience substantially less than that of a physician. Do you support or oppose the following measures:

An expansion of the optometrist's scope of practice

Support
Compose
Compos

I supported the actions taken on these three issues by the Health and Government Operations Committee over the last two years. Providing the best care for patients is my guiding principle on these matters.

5. Low reimbursement rates and administrative requirements of the health insurance carriers and HMOs in Maryland are having a damaging effect on medicine in the State. Low reimbursements make it difficult for the state to recruit new young physicians, as well as physicians who will answer emergency calls.

Administrative requirements increase the cost of providing care and often create unreasonable barriers to accessing necessary care. According to the Maryland Health Care Commission, Maryland ranks in the

bottom 25 percent of states regarding insurance reimbursement rates for physicians. Do you support

legislation that would level the playing field, improve physician payments and lessen administrative

burdens?

_____XX_____Support I would support such legislation, bearing in mind the effect that it might have on the cost of care.

_____ Oppose

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6. A recent Mason Dixon poll said over 70% of Marylanders and 85% of Maryland Democrats supported Medicaid/Medicare pay parity for physician's payments. In layman's terms, this means paying physicians the same rate for Medicaid services that are paid for Medicare services. Do you support Medicaid/Medicare pay parity for physicians?

_____XX____ Support Pay equity would have the effect of increasing the quality of care for Medicaid enrollees.

_____ Oppose

7. If additional funding is needed to support Maryland public health initiatives, would you consider either of the following taxes:

An increase in the tobacco tax?

______xx____ Support I have been a legislative leader in reducing teen smoking. This is one of the targeted uses of the Cigarette Restitution Fund. Delegate Pete Rawlings and I were the lead sponsors of the bill creating the Cigarette Restitution Fund. I have been the lead sponsor of enacted legislation strengthening enforcement of the laws against the sale of tobacco and vaping products to minors.

Oppose

A "sugar tax," a tax on foods with processed sugar?

_____xx_____Support
Oppose

Please print name: _____Sandy Rosenberg _____

Signature of candidate:

Samuel Rosenba