

November 18, 2015

**Johns Hopkins  
Heart and Vascular  
Institute**

**MedStar Union  
Memorial Hospital**

**Peninsula Regional  
Medical Center**

**Prince George's  
Hospital Center**

**Sinai Hospital  
of Baltimore**

**St. Joseph  
Medical Center**

**Suburban Hospital**

**University of  
Maryland Medical  
Center**

**Washington  
Adventist Hospital**

**Western Maryland  
Health System**

**Executive Director**

**Eddie Fonner  
913-909-3149**

**cefonner@mcsqi.org**

Eileen Fleck  
Maryland Health Care Commission  
4160 Patterson Ave.  
Baltimore, MD 21215

Dear Ms. Fleck,

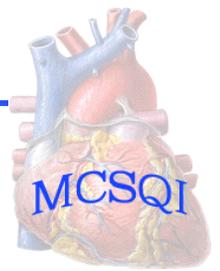
For the purpose of serving the MHCC and its Clinical Services Advisory Panel, members of the Maryland Cardiac Surgery Quality Initiative recently convened to discuss the MHCC's classification of procedures in COMAR 10.24.17. MCSQI represents all cardiac surgery programs in the state of Maryland, and our consensus opinion is that the current system classifying procedures as "Open Heart" and "Cardiac Surgery" is confusing and does not accurately reflect the clinical practice of cardiac surgery in the current era. Our goal is to work with the Maryland Health Care Commission to develop a system of classification that is accurate, representative of the current practice of cardiac surgery, and can be used by the State of Maryland to maximize safety and quality outcomes for patients in the State of Maryland. We have made the following recommendations using the International Classification of Diseases, Ninth Revision (ICD-9) codes based on the stated preference of the Maryland Health Care Commission at our previous meetings.

We advocate merging "Open Heart" and "Cardiac Surgery" procedures into one category, henceforth referred to as Cardiac Surgery. This new definition is based on an operation fulfilling at least two of the following criteria: 1) an incision into the chest, 2) direct contact with the heart, 3) use of cardiopulmonary bypass, and 4) operation on the thoracic aorta and/or great vessels. The attached table details the procedures that we recommend as Cardiac Surgery, along with a new category for cases that are not Cardiac Surgery but should only be performed at a center with cardiac surgical services available in the event an emergency operation is required.

We believe these revisions accurately represent cardiac surgery procedures in 2015 and will help ensure COMAR 10.24.17 optimizes patient safety, cost effectiveness, and appropriateness of care for heart procedures.

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**MARYLAND CARDIAC SURGERY QUALITY INITIATIVE**



Thank you in advance for your consideration of our recommendations, and please let us know if there is any additional information that would assist with the State Health Plan for Cardiovascular Services.

Sincerely,

Jamie Brown, MD  
Chairman, MCSQI

Eddie Fonner  
Executive Director, MCSQI

Attachment: MCSQI Recommended Procedure Codes - November 18, 2015  
(Excel Spreadsheet)