



MARYLAND CITIZENS' HEALTH INITIATIVE

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Paul Parker  
Maryland Health Care Commission  
Center for Health Care Facilities Planning and Development  
4160 Patterson Avenue  
Baltimore, MD 21215

Dear Mr. Parker:

Thank you for this opportunity to provide comments to inform MHCC's recommendations on reforming the health planning and certificate of need (CON) program. We commend MHCC on examining this important issue, and are delighted to see that MHCC has committed to including a consumer representative on the upcoming workgroup. Examining potential reforms is a prime opportunity to further Maryland's goals of achieving the Triple Aim of delivering the right care in the right place at the right time.

To your question about the need for CON regulation, we think that CON regulation should be reformed and not eliminated. Our vision of a patient centered health care system is one in which everyone has access to quality, affordable healthcare. We believe that a strong CON program could enable health care facilities to make capital improvements that help them compete in ways that serve population health goals, promote innovative health delivery methods, achieve equitable health care access, and contain costs. From a consumer perspective, the state's CON program should be reformed to:

1. ensure that quality, affordable, health care services are equitably provided to residents and be delivered in a way that improves health outcomes;
2. maximize use of high cost devices, technology, services, and facilities so as to contain health care costs and increase efficiency;
3. ensure that approved projects are financially feasible and deliver on promised service delivery;
4. protect consumers from abrupt service interruption or withdrawal; and
5. be more transparent to consumers and taxpayers, more generally.

Maryland is one of 35 states that currently have a CON program. In one national rating of CON programs across different states, Maryland scores a B-.<sup>1</sup> We recommend that MHCC examine the practices of the six states that received scores of A or A- to continue to make improvements<sup>2</sup>, including Massachusetts

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<sup>1</sup> <http://whenhospitalsmerge.org/maryland>

<sup>2</sup> [https://static1.squarespace.com/static/568ad532cbced6b473f20732/t/57962bcc414fb5c7c3766775/1469459434906/MergerWatch\\_CON\\_report\\_June2016.pdf](https://static1.squarespace.com/static/568ad532cbced6b473f20732/t/57962bcc414fb5c7c3766775/1469459434906/MergerWatch_CON_report_June2016.pdf)



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which recently adopted strong policies requiring community engagement and investment in community health initiatives.<sup>3,4</sup>

More specifically, we recommend that the workgroup consider strengthening the CON program with the suggestions provided by the MergerWatch Program including:

- [Q. 5] Require that the MHCC or any separate CON review board include at least one consumer representative.
- [Q. 11] CON review should consider whether the project has an impact on underserved populations (e.g., whether the facility or service will deliver equitable care to communities of color and lower-income populations).
- [Q. 5] The public that lives nearby the CON project should be notified about CON applications via newspaper, the internet, or another widely circulated local platform and have a chance to submit testimony that will be considered by the Commissioner-Reviewer.

Thank you again for this opportunity to submit comments, and for MHCC's commitment to promoting strong health delivery models that serve as models for the nation.

Sincerely,

Vincent DeMarco, President  
Maryland Citizens' Health Initiative

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<sup>3</sup> <https://www.mass.gov/determination-of-need-don>

<sup>4</sup> <https://www.mass.gov/files/documents/2017/01/vr/guidelines-community-engagement.pdf>