HEBREW HOME OF GREATER WASHINGTON

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• ELDERSAFE™ CENTER
• HIRSH HEALTH CENTER
LANDOW HOUSE
• REVITZ HOUSE
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Via Email

January 7, 2019

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Beneficiary Agency United Way/CFC Linda Cole Maryland Health Care Commission 4160 Patterson Avenue

Baltimore MD 21215-2299

RE:

Comments on Proposed CCF Chapter

Dear Ms. Cole;

The Hebrew Home of Greater Washington is a licensed 556-bed comprehensive care facility. We have served the skilled nursing and long term care needs of residents in Montgomery County for over 100 years. We welcome this opportunity to share our thoughts on the proposed CCF chapter of COMAR 10.24.20 as we believe it would impact our operation.

- In Section .04B(1), the Proposed CCF Chapter would permit the docketing
 of additional bed capacity, including adding new facility into a jurisdiction
 even when there is no bed need, based on the Five-Star rankings of more
 than 50% of the existing CCFs. We strongly object to this to this provision.
 As facilities that are currently less than Five-Star ranking are working to
 improve, you may make it more difficult for them to respond by approval
 additional competition.
- In Section .04B(3), the Proposed CCF Chapter would permit the docketing of additional bed capacity, including the addition of a new facility into a jurisdiction even when there is no bed need, based on the applicant's agreement with one or more hospitals that achieves goals of the Total Cost of Care (TCOC) model. This proposal does not account for existing facility efforts and investments to adhere to the TCOC model nor the willingness of existing facilities to enter into hospital agreements— thereby putting essential admissions and revenues from hospital discharges to CCFs at risk. This removes incentive for hospitals to work with facilities that have significant investments.

- In Section .05A(8), we are opposed to the requirement that an existing facility applying for a CON have a certain average Five-Star ranking. The Five-Star Ranking System was not designed for this purpose. One error by a facility can significantly impact a facility's star rating. This rule limits the ability of a facility to seek a CON to make improvements that may solve the deficiency.
- In Section .05H(8), we believe that the language which provides for a facility to demonstrate why occupancy below 90% should not be a barrier to approval should be maintained.
- In Section .04C(3), we are opposed to the requirement that waiver bed additions must be implemented and licensed within one year of the MHCC's authorization letter and that, if not done, a new two-year waiting period will be triggered. Given the local land use planning and approval processes and the time involved with bidding and construction, a project may take more than one year to complete.

Thank you for your consideration of our thoughts on the proposed language. We strive to continue to provide the highest quality of care and remain a viable business operation.

Sincerely,

Bruce J. Lederman

President, Chief Executive Officer