



MARYLAND HEALTH CARE COMMISSION

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Thursday, July 21, 2011

Minutes

Chair Moon called the meeting to order at 1:00 p.m.

Commissioners present: Conway, Falcone, Fleig, Kan, Krumm, Lyles, McLean, Olsen, Petty, and Worthington.

ITEM 1.

Approval of the Minutes

Commissioner McLean made a motion to approve the minutes of the June 16, 2011 public meeting, which was seconded by Commissioner Kan and unanimously approved.

ITEM 2.

Update of Activities

Ben Steffen, Acting Executive Director, welcomed and introduced Brian Banschbach to the Administrative Unit of the Commission. Mr. Steffen also mentioned a few staffing changes. He said, Paul Parker has been offered and agreed to serve as the Acting Center Director for Hospital Services. Susan Myers has been appointed Program Manager of the Patient Centered Medical Home project.

Paul Parker, Acting Director, Center for Hospital Services, said staff participated in an annual Conference of the Council of State and Territorial Epidemiologists in Pittsburgh, PA. Mr. Parker said staff submitted two abstracts for the conference under the Infectious Disease category and both were approved – one as an oral breakout session and one as a poster presentation. He invited the Commissioners to view the poster, located in the small conference room.

ITEM 3.

FINAL ACTION: COMAR 10.25.11 – Institutional Review Board – Final Action on Permanent Regulations

David Sharp, Director, Center for Information Technology, presented the final Institutional Review Board (IRB) regulations that will allow the Commission to use another recognized IRB to consider requests for data that requires review by an IRB. The proposed amendment was published in the Maryland Register for a 30-day public comment period and the Commission received no comment during this period of time. Commissioner Fleig made a motion to adopt the final regulations, which was seconded by Commissioner Olsen and unanimously approved.

ACTION: COMAR 10.25.11 – Institutional Review Board regulations are hereby ADOPTED AS FINAL REGULATIONS.

ITEM 4.

ACTION: Certificate of Need

- **Exceptions Hearing: Recommended Decision in the Matter of Expansion of the General Home Health Agency Services of Amedisys Maryland, L.L.C. (Docket No. 10-20-2312)**

Chair Moon said Amedisys Maryland, which does business as Home Health Care America, applied for a Certificate of Need to expand its home health agency services into Talbot County. She noted that Amedisys was able to apply for the expansion under a provision in the State Health Plan, adopted in 2007, that permits a home health agency to seek a Certificate of Need to expand into a jurisdiction, such as Talbot County, that has two or fewer home health agencies and a small need for additional home health agency capacity. Dr. Moon stated that Amedisys has authority to provide home health agency services in Dorchester, Somerset, Wicomico, and Worcester Counties, as a result of having bought an existing agency, Home Health Corporation of America – Eastern Shore, in October 2008. Amedisys bought the existing agency within a few months after that agency obtained a CON from the Commission in June, 2008 that permitted it to expand into Dorchester County.

Commissioner Falcone was appointed the reviewer in this matter, and recognized Shore Home Care as an interested party. On June 24, 2011, Commissioner Falcone issued a Recommended Decision to award a CON, with conditions regarding the provision of charity care and community linkages, to Amedisys Maryland, L.L.C. to expand its general home health agency services into Talbot County.

Jack Tranter, counsel to Shore Home Care, provided oral argument on its exceptions. Laura Katz, counsel to Amedisys, presented argument on behalf of Amedisys.

Following the arguments on the exceptions, Commissioner Falcone stated that, having considered the written exceptions and responses to the exceptions, and having listened to the oral arguments, his recommendation had not changed. He pointed out that he considered the applicable criteria of need, cost and effectiveness, viability, impact, and compliance with the State Health Plan and the terms and conditions of previously issued CON approvals. His review produced findings favoring approval. Commissioner Falcone made a motion that the Commission adopt his Recommended Decision that the proposed project be approved with a condition requiring the provision of charity care at a level that has been included by the applicant in its revenue projections and a condition requiring documentation of appropriate linkages and working relationships with other service providers prior to first use approval. Commissioner Falcone's motion was seconded by Commissioner Krum. Following discussion among the Commissioners, the motion was unanimously approved.

ACTION: Certificate of Need in the Matter of Expansion of the General Home Health Agency Services of Amedisys Maryland, L.L.C (Docket No. 10-20-2312) is hereby APPROVED, with conditions.

- **Community Care Nursing Services (Docket No. 10-24-2314)**

Community Care Nursing Services, Inc. (CCNS) applied for a Certificate of Need proposing the establishment of a specialty home health agency that will function as a new division of CCNS, to be known as Community Care Home Health. Paul Parker, Chief, Certificate of Need, presented the staff recommendation. Mr. Parker said, the proposed home health agency will exclusively serve pediatric clients in need of intermittent services and will also evaluate health or potential health problems and risk factors of Medicaid mothers and their newborn infants. He noted that the proposed project will expand the range of services that CCNS can provide to include services that can only be provided by a licensed home health agency, in order to qualify for Medicaid reimbursement. Mr. Parker said CCNS seeks approval to provide the specialty home health agency services to residents of Baltimore City, and Baltimore, Harford, Howard, Montgomery, and Prince George's Counties. He said the estimated cost of implementing the project is \$3,650 for legal, consulting, and printing expenses. Mr. Parker recommended that the Commission approve this project with the "specialty" limitations for the six

jurisdictions proposed by CCNS. Commissioner Kan made a motion to approve the staff recommendation, which was seconded by Commissioner Lyles, and unanimously approved.

ACTION: Certificate of Need – Community Care Nursing Services Establishing a Specialty Home Health Agency (Docket No. 10-24-2314) is hereby APPROVED.

ITEM 5.

PRESENTATION: Hospital Health Care Worker Vaccination Rates

Theresa Lee, Chief, Hospital Quality Initiative, presented the results of the 2010-2011 Maryland Hospital Healthcare Worker Influenza Vaccination Survey. Ms. Lee discussed the health care worker vaccination protocols, the survey results, policies and practices, as well as the preliminary results of the Ambulatory Surgery Centers Health Care Worker Vaccination Survey. She said, based on the survey results, the Maryland hospital vaccination rate has increased to 81%, up 3% from 2009-2010. Ms. Lee acknowledged the top ten hospitals with the best vaccination rates, which include: Franklin Square Hospital Center, Harbor Hospital Center, Montgomery General Hospital, Union Memorial Hospital, James Lawrence Kernan Hospital, Civista Medical Center, Fort Washington Medical Center, St. Mary's Hospital, and Holy Cross Hospital. She noted that eight of the top ten hospitals have a mandatory vaccination policy in place. Ms. Lee noted that, based on preliminary data from the annual freestanding ambulatory surgery center survey, the total number of workers in freestanding ambulatory surgery centers vaccinated has declined. Ms. Lee also noted that the 2010-2011 survey results will be posted to the Hospital Performance Evaluation Guide.

ITEM 6.

PRESENTATION: Professional Services Utilization Trends Among the Privately Insured through 2009

The Professional Services Utilization Trends Among the Privately Insured report is based on results from the Commission's all payer claims data base. The Commission collects information on pharmaceuticals, institutional services, and health professional care provided by doctors and non-physician professionals. Claudia Schur, Vice President, Social & Scientific Systems, Inc. presented the findings of the report. Ms. Schur said that between 2008 and 2009 the average expenditure per user for professional services among users insured for the entire year grew by 2%, lower than the 5% increase in the prior year. She noted that per-capita personal income in Maryland has continued to keep pace with the growth in spending for professional services, with the result that, since 2004, per-user spending continues to account for slightly more than 2% of per-capita income. The growth rate in per user spending varied by coverage type with an 8% increase for users in the individual market, a 2% decrease for users in MHIP, and a 3% decrease for users in the Comprehensive Standards Health Benefit Plan. Ms. Schur said that user expenditure risk is an important determinant of per-user spending. She said that average spending among medium-risk users is about two times the low-risk average, and the average spending among high-risk users is about five times the low-risk average. Average expenditure per user by coverage type is strongly affected by user risk mix. Ms. Schur discussed the payment rate for professional services, noting that the average payment rate in 2009 was 2% higher than in 2008, and differed by payer market share, type of service, provider region, and provider participation status.

ITEM 7.

PRESENTATION: Review of the Work Plan for the Technical Advisory Group on Oversight of PCI Services

Dolores Sands, Chief, Specialized Services Policy and Planning, briefed the Commission on the work plan for the Technical Advisory Group on PCI Services. Ms. Sands said the Technical Advisory Group will advise and assist the Commission in making recommendations on possible legislative changes related to oversight of PCI

procedures. She said that the first meeting of the Group will take place on Tuesday, July 26, 2011. Ms. Sands noted that the Group will meet at least three times, with the possibility of a fourth meeting. The overall goal is to submit a final report to the Commission by December 1, 2011, and present the report at the December 15, 2011 public meeting.

ITEM 8.

ADJOURNMENT

There being no further business, the meeting was adjourned at 3:00 p.m., upon motion of Commissioner Kan, which was seconded by Commissioner Worthington and unanimously approved.