



MARYLAND HEALTH CARE COMMISSION

4160 PATTERSON AVENUE – BALTIMORE, MARYLAND 21215
TELEPHONE: 410-764-3460 FAX: 410-358-1236

Thursday, October 17, 2013

Minutes

Chairman Tanio called the meeting to order at 1:03 p.m.

Commissioners present: Conway, Falcone, Fleig, Montgomery, Phillips, and Weinstein
Commissioners present via telephone: Barr, Kan, McLean, and Schneider

ITEM 1.

Approval of the Minutes

Commissioner Kan made a motion to approve the minutes of the September 19, 2013 meeting, which was seconded by Commissioner Montgomery and unanimously approved.

ITEM 2.

Update of Activities

Ben Steffen, Executive Director, provided an update on the Commission's application for a grant from the Center for Consumer Information & Insurance Oversight (CCIIO) at the Center for Medicare and Medicaid Service (CMS) to fund the Commission's work with the Maryland Insurance Administration in development and use of the All Payer Claims Data Base (APCD). Mr. Steffen also noted that the Maryland Health Benefit Exchange launched on October 1st. The website's initial uneven performance had been addressed and the site was working more smoothly. As of the third week of October, more than 20,000 users had been authenticated and more than 1,500 had enrolled for health insurance coverage beginning on January 1, 2014.

David Sharp, Ph.D., Director of the Center for Health Information Technology and Innovative Care Delivery, and Melanie Cavaliere, Program Manager of Innovative Care Delivery, introduced a new member of staff, Bonnie Szyf, who will be primarily assigned to projects managed by Ms. Cavaliere.

Paul Parker, Director of the Center for Health Care Facilities Planning and Development, introduced Kevin McDonald, the Commission's new Chief of Certificate of Need.

ITEM 3.

UPDATE: Legislatively Mandated Reports

Erin Dorrien, Chief of Government Relations, updated the Commission on the status of reports on legislative projects that will be presented to the General Assembly before the 2014 legislative session. Reports on the following subjects will be sent to the General Assembly in December of 2013:

- Standards for cardiac surgery and percutaneous coronary intervention (PCI) services;
- An interim report from the Telemedicine Task Force ;
- Results of the Palliative Care Pilot Program;
- Health Delivery and Planning in Rural Areas; and
- Step Therapy- recommendations on how to handle conflicts between payor and provider groups
-

ITEM 4.

ACTION: Emergency and Proposed Regulations – COMAR 10.25.06 - Maryland Medical Care Data Base

Linda Bartnyska, Director of the Center for Analysis & Information Services, and Srinivas Sridhara, Acting Chief of the Cost & Quality Analysis Division, recommended that the Commission adopt emergency and proposed permanent regulations regarding the Medical Care Data Base that would replace existing regulations. The replacement regulations set forth data collection rules, and the payors required to submit information on health care utilization to the Commission. As a result of the recommended changes, the Medical Care Data Base will contain an All Payer Claims Data Base (APCD). Ms. Bartnyska noted that the information that will be included in the APCD will support the work of other State entities such as the Health Benefit Exchange, which began enrollment on October 1, as well as the rate review function of the Maryland Insurance Administration. Mr. Sridhara described the informal comments received on the draft regulations and on the draft 2013 MCDB Submission Manual. He discussed how the draft regulations and the Manual were modified in response to those comments. Following discussion, Commissioner Fleig made a motion to adopt the regulations as Emergency and proposed permanent, which was seconded by Commissioner Montgomery and unanimously approved. Commissioner Kan abstained from voting on this matter.

ACTION: COMAR 10.25.06 - Maryland Medical Care Data Base is hereby ADOPTED as Emergency and Proposed Regulations.

ITEM 5.

ACTION: Proposed Regulations – COMAR 10.25.18 - Health Information Exchanges – Privacy and Security of Protected Health Information

Angela Evatt, Chief of the Health Information Exchange Division, and David Sharp, Director of the Center for Health Information Technology & Innovative Care Delivery, presented the health information exchange privacy and security regulations for consideration as proposed permanent regulations. Ms Evatt noted that the Commission had received informal public comments on two sets of draft regulations and made changes in response to those comments. These regulations establish protections for the privacy and security of electronic health information accessed through a health information exchange operating in Maryland. Following discussion, Commissioner Conway made a motion to adopt the revised draft regulations as proposed permanent regulations of the Commission, which was seconded by Commissioner Falcone and unanimously approved.

ACTION: COMAR 10.25.18 - Health Information Exchanges – Privacy and Security of Protected Health Information is hereby ADOPTED as Proposed Permanent Regulations.

ITEM 6.

ACTION: Certificate of Need Exemption – Merger of the Hospice Operations of Chester River Home Care & Hospice, LLC and Care Health Services, Inc. d/b/a Shore Home Care & Hospice

Mr. Parker presented the request for CON exemption regarding hospice services on the Eastern Shore. He stated that the University of Maryland Medical System has acquired three hospitals on the Eastern Shore since 2006 and has also acquired two general hospices that were subsidiaries of those hospitals. The merger of those two general hospices is now proposed and would result in a single hospice serving all of the jurisdictions that, in the aggregate, are currently served by the two existing hospices. The merger of regulated health care facilities, such as hospices, requires Commission approval as an exemption from Certificate of Need review. Mr. Parker noted that the Commission had received no comments regarding the merger and exemption request. Following discussion, Commissioner Falcone made a motion that the Commission approve staff's recommendation regarding the exemption request, which was seconded by Commissioner Barr and unanimously approved.

ACTION: Certificate of Need Exemption – Merger of the Hospice Operations of Chester River Home Care & Hospice, LLC and Care Health Services, Inc. d/b/a Shore Home Care & Hospice is hereby APPROVED.

ITEM 7.

PRESENTATION: State-Regulated Payor and Pharmacy Benefit Manager Preauthorization Benchmark Attainment

Sarah Orth, Chief of the Health Information Technology Division, and Dr. David Sharp presented findings from the 2013 Preauthorization Benchmark Attainment report. The law requires payors and pharmacy benefit managers to implement a phased approach to automate the process for providers to obtain preauthorization of medical and pharmaceutical services. The MHCC is required to report annually on the attainment of the benchmarks to the Governor and the Maryland General Assembly through 2016. Following discussion regarding benchmarking and the future development of a common portal, Commissioner Barr made a motion to approve release of the report, which was seconded by Commissioner Montgomery and unanimously approved.

ITEM 8.

ACTION: Recommendations for the State Regulated Payor Electronic Health Record Program and Electronic Health Record Usability Across Hospital Settings

Angela Evatt and Dr. David Sharp presented recommendations in the Electronic Health Records, State Incentives and Usability report. In the summer of 2012, the leadership of the Maryland General Assembly's House Health & Government Operations Committee asked the Commission to evaluate the State Electronic Health Records incentive program and explore provider challenges involving the usability of such systems across hospital settings. Dr. Tanio recommended and staff agreed to make certain changes in the presentation of information in the report. Following discussion, Commissioner Barr made a motion to approve release of the report, which was seconded by Commissioner Weinstein and unanimously approved.

ITEM 9.

PRESENTATION: Patient Centered Medical Home

Chairman Tanio announced that the next agenda item would be a presentation by Guy D'Andrea, Managing Partner at Discern, Dr. Sharp, and Ms. Cavaliere, on the Maryland Multipayer Patient Centered Medical Home (MMPP) 2012 shared savings results. The MMPP is a three-year pilot program that was designed to improve patient health and elevate the role of the primary care provider in our health system. Nearly half (19 of 52) MMPP practices achieved shared savings, with an approximately 10 percent improvement over the last two years in the quality measure composite score. Mr. D'Andrea noted that no single variable currently tracked by the program (such as location, size, quality measure composite score, etc.) correlated to cost savings.

ITEM 10.

PRESENTATION: Maryland Trauma Physician Services Fund, Report to the Maryland General Assembly

Karen Rezabek, Program Manager of the Maryland Trauma Physician Services Fund, presented information on the status of the Fund as of the end of fiscal year 2013. The Fund received \$11.6 million from the \$5 registration fees collected by MVA in FY 2013 and expended \$4.8 million in uncompensated care payments; \$6.3 million in on-call and stand-by stipends; \$198,400 to Medicaid; and \$300,000 in administrative expenses. The 8% reduction in payments instituted by the Commission on July 1, 2009 remains in effect. Commission staff recommended that a timeframe for eligibility of uncompensated care reimbursement be established, limiting the look-back period for claims eligibility.

ITEM 11.

ADJOURNMENT

There being no further business, the meeting was adjourned at 4:10 p.m. upon motion of Commissioner Conway, which was seconded by Commissioner Fleig and unanimously approved.