

Craig P. Tanio, M.D.
CHAIR



Ben Steffen
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MARYLAND HEALTH CARE COMMISSION

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Thursday, April 17, 2014

Minutes

Vice Chairman Falcone called the meeting to order at 1:00 p.m.

Commissioners present: Barr, Conway, Fleig, Fronstin, Kan, McHale, Montgomery, Phillips, Schneider, Stollenwerk, and Weinstein. Chairman Tanio and Commissioner Peralta participated via telephone.

Vice Chairman Falcone welcomed and introduced the Commission's newly-appointed Commissioner, Mr. Michael McHale, and asked him to introduce himself to the Commission members, staff, and attendees of the meeting.

ITEM 1.

Approval of the Minutes

Commissioner Barr made a motion to approve the minutes of the March 20th public meeting of the Commission, which was seconded by Commissioner Montgomery and unanimously approved.

ITEM 2.

Update of Activities

Ben Steffen, Executive Director, provided an update on the Maryland Health Connection, indicating that more than 60,000 Marylanders had obtained insurance from a qualified health plan to date. On April 1st the Health Benefit Exchange Board voted to adopt Connecticut's exchange infrastructure. As a result of that adoption, all enrollees will need to re-enroll in calendar year 2015.

Mr. Steffen also noted that the Commission's Health Insurance Partnership subsidy program will end on June 1st of this year. A new small group SHOP product to be offered through the Maryland Health Connection is currently in development. The Affordable Care Act requires that enrollees receive a subsidy up to 50% of the health insurance premium for those qualified based on their average annual wage.

David Sharp, Director of the Center for Health Information and Innovative Care Delivery, provided an update on the strategic plan for telehealth as a result of suggested areas for enhancement that had been identified by members of the Commission at the April Commission meeting. He noted that ongoing task force advisory group meetings will be held from April through August; followed by presentation of a draft report to the Commission in the fall. The final report to the Governor, Senate Finance Committee, and House Health and Government Operations Committee is due on December 1, 2014.

Theresa Lee, Co-director of the Center for Quality Measurement and Reporting, provided an update on Maryland's results on the National/State Healthcare-associated Infections Progress Report released by the Centers for Disease Control and Prevention (CDC) in March of 2014, based on 2012 data.

ITEM 3.

UPDATE: CMS's release of Practitioner and Supplier Payment Information and MHCC's Possible Responses

Linda Bartnyska, Director of the Center for Analysis and Information Systems, introduced Kenneth Yeates-Trotman, a newly hired actuary, to the members of the Commission.

Ms. Bartnyska and Leslie LaBrecque, Chief of Data Base & Applications Development, presented a developmental web application that showcases pricing and volume of professional services rendered by health care practitioners in Maryland. Ms. LaBrecque demonstrated report functionalities, which included both Medicare and private insurance data in parallel. Based on the feedback from the Commissioners, staff will add additional functionalities, such as permitting provider comparisons, and develop a testing site for Commissioner review.

ITEM 4.

ACTION: COMAR 10.24.17 – State Health Plan for Facilities and Services: Cardiac Surgery and Percutaneous Coronary Intervention Services – Proposed Permanent Regulation

Eileen Fleck, Chief of Acute Care Policy and Planning, presented proposed regulations for the Cardiac Surgery and PCI Services Chapter of the State Health Plan. Ms. Fleck said that a draft Chapter was posted for informal public comment in September, 2013, and twenty-four individuals or organizations commented on this Chapter. The comments are available on the Commission's website. Ms. Fleck said that staff revised the draft Chapter based on the informal comments received and submitted the revised draft Chapter to the Senate Finance Committee and the House Health and Government Operations Committee in November, 2013. Staff received comments from each committee (those comments are also available on the Commission's website) and further revised the draft Chapter. Ms. Fleck summarized the revisions to the draft Chapter made in response to the comments received and requested that the Commission adopt the replacement COMAR 10.24.17 as proposed permanent regulations. Commissioner Barr made a motion that the Commission adopt COMAR 10.24.17 as proposed permanent regulations, which was seconded by Commissioner Kan and unanimously approved.

ACTION: COMAR 10.24.17 – State Health Plan for Facilities and Services: Cardiac Surgery and Percutaneous Coronary Intervention Services is hereby APPROVED as a Proposed Permanent Regulation.

ITEM 5.

ACTION: Change in Approved Project – Seasons Hospice & Palliative Care of Maryland (Docket No. 11-03-2318)

Kevin McDonald, Chief of Certificate of Need, presented the staff recommendation for a modification to a Certificate of Need filed by Seasons Hospice and Palliative Care of Maryland, Inc. to increase the estimate project cost. Mr. McDonald said the originally approved project cost was \$621,197, and due to a combination of construction bids that exceeded estimates, design changes, increased equipment costs, increases in architectural and engineering fees, the estimated project cost increased by \$454,014, bring the total anticipated cost to \$1,075,211. Mr. McDonald said that under the Commission’s regulations a cost increase that exceeds the permissible inflation allowance requires a request or a modification to the Certificate of Need. Staff reviewed the request and determined that the modification does not change the Commission’s earlier findings regarding need, viability, or impact on other providers, therefore recommends that the Commission approved this modification. Commissioner Conway made a motion to approve the staff recommendation, which was seconded by Commissioner Barr and unanimously approved.

ACTION: Change in Approved Project – Seasons Hospice & Palliative Care of Maryland (Docket No. 11-03-2318) is hereby APPROVED.

ITEM 6.

ACTION: Certificate of Need – Prince George’s Post Acute, LLC (Docket No. 13-16-2347)

Bill Chan, Health Policy Analyst, addressed the application for Certificate of Need filed by Prince George’s Post Acute to construct a new, two-story, 150-bed comprehensive care facility. He said the total cost of constructing the nursing home is estimated at \$19,070,505. He said that \$1,970,505 of the project will be financed with cash contributions from the owners, and \$17.1 million will be financed through a mortgage loan from a commercial institution. Mr. Chan said that staff analyzed the proposed project and determined that the project is in compliance with the applicable State Health Plan and standards. Staff recommended approving the Certificate of Need for Prince George’s Post Acute, with conditions. Commissioner Barr made a motion to approve the staff recommendation, which was seconded by Commission Fleig and unanimously approved.

ACTION: Certificate of Need – Prince George’s Post Acute, LLC (Docket No. 13-16-2347) is hereby APPROVED.

ITEM 7.

ACTION: Study Components and Final Pilot Hospital Group – Hospital Palliative Care Pilot Project (House Bill 581, 2013 General Assembly Session)

Linda Cole, Chief, Long-Term Care Policy and Planning, and Rebecca Goldman, Health Policy Analyst, presented an update on the status of the Hospital Palliative Care Pilot Project and requested approval of the final selection of participating hospitals, as well as Commission review and approval of the study components and approach. Ms. Cole provided an overview and background information, noting the legislation that passed in 2013 requires the Commission, in consultation with the Office of Health Care Quality and the Maryland Hospital Association, to establish a hospital palliative care pilot program and report the findings from the pilot to the General Assembly by December, 2015. Ms. Goldman addressed key questions in the legislation and the approach taken to address these questions. Commissioner Schneider made a motion to approve the staff recommendation, which was seconded by Commissioner Stollenwerk and unanimously approved.

ACTION: Study Components and Final Pilot Hospital Group – Hospital Palliative Care Pilot Project (House Bill 581, 2013 General Assembly Session) – Program Design and Selection of Participating Hospital is hereby APPROVED.

ITEM 8.

ACTION: COMAR 10.25.15 – Management Services Organization State Designation - Proposed Permanent Regulations

Sarah Orth, Chief of Health Information Technology, presented proposed permanent regulation that applies to the State designation of management service organizations. Management service organizations (MSOs) were established in Maryland in part to support the adoption of electronic health records (EHRs) among community providers. MSOs received funding to support EHR adoption through an Office of the National Coordinator Regional Extension Center grant. This grant has been extended through the spring of 2015. After 2015, the Commission expects that MSOs will be self-sustaining. The proposed regulation provides the framework for recognizing MSOs that intend to operate after the federal funding ends. Commissioner Kan made a motion that the Commission adopted COMAR10.25.15 as proposed permanent regulation, which was seconded by Commissioner Weinstein and unanimously approved.

ACTION: COMAR 10.25.15 – Management Services Organization State Designation - Proposed Permanent Regulations are hereby APPROVED.

ITEM 9.

UPDATE: Legislative Wrap-Up

Erin Dorrien, Chief of Government Relations and Public Affairs, presented a wrap-up summary of the 2014 Legislative Session. Ms. Dorrien noted those bills that passed and those that were withdrawn or did not pass for the proposed legislation that the Commission tracked during the session.

ITEM 10

ADJOURNMENT

There being no further business, the meeting was adjourned at 3:25 p.m. upon motion of Commissioner Schneider, which was seconded by Commissioner Kan and unanimously approved.