

MARYLAND HEALTH CARE COMMISSION

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Thursday, October 16, 2014

Minutes

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

Commissioners present: Barr, Fleig, McHale, McLean, Montgomery, Phillips, Schneider, Stollenwerk, Thomas, and Weinstein. Commissioner Peralta participated via the teleconference.

ITEM 1.

Approval of the Minutes

Commissioner Barr made a motion to approve the minutes of the September 18th public meeting of the Commission, which was seconded by Commissioner Fleig and unanimously approved.

ITEM 2.

Update of Activities

Ben Steffen, Executive Director, noted that over the past several months staff convened workgroups on hospice education and outreach. Mr. Steffen said that, initially, the workgroups will focus on Baltimore City and Prince George's County. He said that the workgroup met in Prince George's County on October 10, with Commissioner Thomas serving as the facilitator. Mr. Steffen said the meeting went very well and thanked Dr. Thomas for his leadership.

David Sharp, Director of the Center for Health Information Technology and Innovative Care Delivery, said that last month the Commission staff received four grant applications for a telehealth pilot project to implement one of the recommended telehealth use cases - improving transitions of care between acute and rehabilitation/nursing homes. Dr. Sharp said that three grants were awarded: (1) Atlantic General Hospital Corporation, in partnership with Berlin Nursing and Rehabilitation Center; (2) Dimensions Healthcare System, in partnership with Sanctuary of Holy Cross; and (3) University of Maryland Upper Chesapeake Health, in partnership with the Bel Air facility of Lorien Health Systems.

Linda Bartnyska, Director of the Center for Analysis and Information Systems, said that the Board of Public Works approved a contract modification for Social and Scientific Systems, Inc.

Leslie LaBrecque, Chief of the Database and Application Development, welcomed Sandra Biddinger to the Center for Analysis and Information Systems.

ITEM 3.

PRESENTATION: 2014 Health Benefit Plans Quality Report Series

Scharmaine Robinson, Chief of Health Plan Quality and Performance, presented the 2014 Health Benefit Plans Quality Reports. Ms. Robinson said that the quality measures within the new Consumer Edition focus on plan members' experience and satisfaction with health care on topics such as: getting needed care; getting quality care; how well doctors communicate; plan information on costs; rating their personal doctor(s); and their specialist(s); and rating of their health benefit plan. She said that, in addition to the information provided regarding consumer education, the Comprehensive Report incorporates important information on the clinical performance of the health benefit plans plus information from a new quality measurement instrument called the Maryland RELICC Assessment, which measures health benefit plan activities to reduce health care disparities. The new reports show that Maryland HMOs and PMOs generally performed at or near the national average. HMOs performed at or above the top 10% of plans nationally on 72 measures and PPOs performed at or above the top 10% of plans nationally on 100 measures. On consumer satisfaction measures, results were mixed. Regarding the percentage of patients who rated their health benefit plan as good or better, five of the eight PPOs, but only one of seven HMOs, scored among the top 10% of plans nationally

ITEM 4.

DEMONSTRATION: Maryland Health Care Commission's New Website

David Mitchell, Senior Web Designer, and Valerie Agwale, WebMaster, provided a demonstration of the Commission's new website, which they noted will be more flexible to use and much easier to maintain. They stated that, once the design of the new website was complete, staff focused on reviewing existing content, and then migrated what needed to be moved to the new site. Mr. Mitchell said this new website is a work in progress and improvements will continue, as needed.

ITEM 5.

DEMONSTRATION: Maryland Hospital Performance Evaluation Guide

Theressa Lee, Co-Director of the Center for Quality Measurement and Reporting, provided a demonstration of the new website for the Hospital Performance Guide. Ms. Lee also discussed the future plans for the Guide, noting that the new Guide is still in test mode. She said that there are a number of technical issues that must be resolved and further review is needed before the site is formally launched. She also said that staff would be reviewing the site with the Commission's consumer focus group, as well as with hospital representatives. Ms. Lee noted that the Hospital Guide is a consumer-oriented website, which is now referred to as the Maryland Health Care Quality Reports. The website will include both hospital performance measures and hospital pricing information.

ITEM .6

ACTION: Additional Nomination to the Cardiac Services Advisory Committee

Last month, Eileen Fleck, Chief of Acute Care Policy and Planning, briefed the Commission on formation of the Cardiac Services Advisory Committee. Today, Ms. Fleck asked the Commission to approve a consumer nominee, Josemartin Ilao, to that Committee. Commissioner Weinstein made a motion to approve the additional nominee, which was seconded by Commissioner Montgomery and unanimously approved.

ACTION: Additional Nomination to the Cardiac Services Advisory Committee is hereby APPROVED.

ITEM 7.

PRESENTATION: Assignment of Benefits Report

In 2011,t he Maryland General Assembly enacted Assignment of Benefit legislation that required carriers in Maryland to directly reimburse physicians who obtained an assignment of benefit notification from a patient or responsible individual. The law also established minimum payment levels for hospital-based and on-call physicians who treated out-of-network patients in hospital settings and who agreed to assignment of benefits. In these situations, physicians were barred from balance billing patients. Recognizing the potential impacts on carriers, providers, and patients, the General Assembly instructed the Commission to develop a plan for evaluating the law. The Commission's contractor, Dr. Claudia Schur, Vice President and Director of the Center for Health Research and Policy at Social and Scientific Systems, Inc., explained revisions to the analysis plan used in the Assignment of Benefits Baseline Report and outlined the Commission's approach for the final report, which will be submitted to the General Assembly in early January.

ITEM 8.

ACTION: Telehealth Recommendations

David Sharp, Director of the Center for Health Information Technology and Innovative Care Delivery, Sarah Orth, Chief of Health Information Technology Division, and Dr. Neal Reynolds, Associate Professor of Medicine at the University of Maryland School of Medicine, presented the Telemedicine Task Force's recommendations for expanding telehealth options in Maryland.

The Task Force recommended the development of a telehealth provider directory that will be a publicly-available online listing of Maryland telehealth providers. Once implemented, the telehealth directory will enhance telehealth by serving as a resource to identify telehealth practitioners. The Task Force identified 10 telehealth use cases as potential pilot projects and promising uses of telehealth for remote mentoring, monitoring, and proctoring of health care practitioners. The Task Force recommended that the General Assembly appropriate \$2.5 million for the implementation of telehealth pilot projects to be competitively awarded by the Commission through its grant-making process. After discussion, Commissioner Montgomery

made a motion to approve the telehealth recommendations, which was seconded by Commissioner Stollenwerk and unanimously approved.

ACTION: Telehealth Recommendations are hereby APPROVED.

ITEM 9.

PRESENTATION: Hospital Health Information Technology

Sarah Orth, Chief, Health Information Technology Division presented the report on Health Information Technology: Annual Assessment of Maryland Hospitals. Ms. Orth said that this report illustrates the progress made by all 46 general acute care hospitals in Maryland regarding their adoption of health IT, and benchmarks hospital health IT adoption in Maryland against national trends. Ms. Orth noted that Maryland hospitals have invested heavily in the adoption and use of health IT. She said since the passage of HITECH and the PPACA, health IT adoption has notably increased and hospitals are continuing to seek new strategies for improving the quality and efficiency of care using technology. Ms. Orth said that hospitals use the EHR incentive payments to implement EHRs. Hospitals are eligible to quality for incentive payments if they: (1) adopt/implement/upgrade certified EHRs in the first year of participation; and/or (2) attest to meeting federally defined meaningful use criteria using a certified EHR. She said the objectives of the incentive payments require use of certified EHRs to: improve quality, safety, efficiency, and reduce health disparities; engage patients and their families; improve care coordination, population and public health; and maintain privacy and security of patients' electronic health information.

ADJOURNMENT

There being no further business, the meeting was adjourned at 4:05 p.m. upon motion of Commissioner Schneider, which was seconded by Commissioner Montgomery and unanimously approved.