Ben Steffen executive director



### MARYLAND HEALTH CARE COMMISSION

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# Thursday, April 16, 2015

#### **Minutes**

Chairman Tanio called the meeting to order at 1:15 p.m.

Commissioners present: Carr, Metz, Moffit, Montgomery, Phillips, Pollack, Stollenwerk and Weinstein. Commissioner Peralta participated via telephone.

Chairman Tanio introduced three new members of the Commission.

Robert Moffit, Ph.D., senior fellow in the Center for Health Policy Studies at the Heritage Foundation in Washington. Dr. Moffit's research interests include the Medicare program, entitlement reform more broadly, and the criminal justice system. He is also part of Heritage's Center for Policy Innovation, which is charged with designing the next generation of breakthrough policy ideas at the Foundation. Earlier in his career, Dr. Moffit held senior positions at the U.S. Department of Health and Human Services (HHS) and the Office of Personnel Management (OPM). Dr. Moffit served as an MHCC Commissioner from 2004 through 2007.

Andrew N. Pollak M.D., Chair of the Department of Orthopaedics, University of Maryland School of Medicine, the James Lawrence Kernan Professor at SOM, and a Section Chief and practicing surgeon at Shock Trauma. Dr. Pollak publishes extensively on trauma injury and treatment, one of his principal clinical interests. He has served in leadership positions of the American Academy of Orthopaedic Surgeons (AAOS) and the Orthopaedic Trauma Association. Dr. Pollak was an MHCC Commissioner from 2004 through 2007.

Jeffery Metz, President and Nursing Home Administrator of Egle Nursing and Rehabilitation Center in Lonaconing, Maryland. Mr. Metz has been active in numerous community organizations in Allegany County. He has also served as an elected member of the Allegany County Board of Education. Prior to joining the Commission, Mr. Metz served as Vice-Chair of the Maryland Board of Examiners of Nursing Home Administrators.

#### ITEM 1.

### **Approval of the Minutes**

Commissioner Montgomery made a motion to approve the minutes of the April 16, 2015 public meeting of the Commission, which was seconded by Commissioner Phillips and unanimously approved.

#### ITEM 2.

## **Update of Activities**

Ben Steffen, Executive Director, said that Erin Dorrien, will provide a final status report on the results of the 2015 legislative session at the May Commission meeting.

Mr. Steffen recognized and thanked Cathy Weiss for her hard work and dedication in developing the white paper, *A New Approach for Planning and Regulatory Oversight of HHA Services in Maryland*. He also recognized and thanked Ken Yeates-Trotman for his hard work on the alignment of the All Payer Claims Database.

#### ITEM 3.

ACTION: Certificate of Need/Change in Approved Project: 700 Toll House Avenue Operations LLC d/b/a College View Center (Docket No. 12-10-2336)

College View Center, 700 Toll House Avenue Operations applied for a second modification to their Certificate of Need. Kevin McDonald, Chief of Certificate of Need, presented the staff report and recommendation. Mr. McDonald said that the original CON was approved in December 2012 to relocate and replace College View and establish a new 130 bed comprehensive care facility at a location about 2.3 miles away the existing facility in Frederick County. He noted that the original project cost was \$19,115,222. Mr. McDonald said the Commission previously approved a \$1.35 million modification of the College View CON that increased that total project cost by 6.6%, The additional \$1.35 million was funded from revenues from Genesis, a subsidiary of Genesis HealthCare. He stated that College View is now seeking a second modification that would increase the total project costs by an approximately \$5.9 million. The new total project cost is \$26,367,755, a 38% increase over the original amount. Mr. McDonald explained that the new funding is required because of serious construction flaws that have lead to the replacement of the initial contractor. Staff recommended that the second modification be approved subject to the same condition placed on the original CON. Commissioner Pollak made a motion to approve the staff recommendation, which was seconded by Commissioner Montgomery and unanimously approved.

ACTION: Certificate of Need/Change in Approved Project: 700 Toll House Avenue Operations LLC d/b/a College View Center (Docket No. 12-10-2336) is hereby approved.

#### ITEM 4.

### ACTION: Institutional Review Board – Recognition of an alternative IRB

Linda Bartnyska, Director for the Center for Analysis and Information Systems, provided information on a staff request that the Commission approve the DHMH Institutional Review Board (IRB) as an alternative IRB. Under Commission regulations, all data use agreements for the MCDB must be reviewed and approved by an Institutional Review Board prior to Commission consideration. She noted that the DHMH IRB is registered with the U.S. Department of Health and Human Services and has an approved Federalwide Assurance, which is a commitment to comply with the FWA Terms of Assurance. Ms. Bartnyska noted staff is revising the MCDB regulations to permit review and approval of DUAs by an MHCC convened privacy board. Staff expects to submit those regulations later this year. Commissioner Moffit made a motion to approve this request, which was seconded by Commissioner Montgomery and unanimously approved.

ACTION: Institutional Review Board – Recognition of an alternative IRB is hereby approved.

#### ITEM 5.

## PRESENTATION: Privately Insured Health Care Spending in 2013

Srinivas Sridhara, Chief, Cost and Quality Analysis, presented on Spending and Use among Maryland's Privately Insured. Dr. Sridhara said that the Commission is required to report annually on healthcare spending and utilization. He noted that this year's report shifts the spending basis from per capita spending to per member per month spending to allow more complete use of the data to include both full-year and part-year enrollees. He also noted that this methodology is consistent with the approaches used by the Maryland Insurance Administration and other external policy analysts that study health insurance. Dr. Sridhara provided highlights on spending in Maryland, noting that there were large variations in permember-per-month (PMPM) spending across market segments. He also reported that PMPM spending was higher in small group and large employers markets compared to the individual market, but spending was highest of all for persons covered through the high-risk pool (MHIP). Enrollees in the large private employer market and the high risk pool had the lowest shares of out-of-pocket spending, while enrollees in the individual market had the highest share of out-of pocket spending. Dr. Sridhara said that the high risk enrollees utilized most services, while enrollees in the individual market tended to use the fewest services. He reminded Commissioners that individual coverage in 2013 was medically underwritten.

Dr. Sridhara concluded by observing that between 2012 and 2013 across all markets, PMPM spending increased the most for MHIP enrollees and small group enrollees, while enrollees covered by individual and large employer groups saw relatively smaller increases.

#### ITEM 6.

## PRESENTATION: Maryland Multi-Payer Program Evaluation

David Sharp, Director, Center for Health Information Technology and Innovative Care Delivery, provided background information on Maryland's Multi-Payor Patient Centered Medical Home Program (MMPP). The MMPP was a three-year pilot that ended on June 30, 2014. The program continues through the end of 2015 when the law abrogates. IMPAQ International and Discern Health presented key findings from the evaluation. Presenters included: Jill Marsteller, PhD, Associate Director, Center for Health Services and Outcomes Research at Johns Hopkins Bloomberg School of Public Health, Ilene Harris, PharmD, Principal Research Scientist and Managing Director at IMPAQ International, and Guy D'Andrea, Managing Partner at Discern Health. Notable findings include: Of the 30 health care disparities that were measured in the baseline year, almost two-thirds improved; the MMPP slowed growth of some inpatient and outpatient payments; chronic disease management of some ambulatory care sensitive conditions improved; a reduction occurred in emergency department visits and inpatient stays among select Medicaid patients; more adult patients rated patient-provider communication highly than earlier in the pilot and respondents for children were highly satisfied with care; and MMPP providers had high satisfaction with care and positive perceptions of several team-functioning measures. Dr. Marsteller reported that program effects were mixed relative to change in non-MMPP comparison practices. The findings of the evaluation showed that practices in the MMPP met important program goals. Staff mentioned that it expects to release the findings in five evaluation briefs in June.

### ITEM 7.

#### **UPDATE:** Maryland Health Care Quality Reports – Release of New Data

Theressa Lee, Director of the Center for Quality Measurement and Reporting, provided an update regarding the Maryland Health Care Quality Reports website that focused on three main areas: the top 25 medical conditions and charges; Healthcare-Associated Infections data; and the Health Benefit Plan Guide. Ms. Lee noted that the top 25 medical conditions and charges have been updated with calendar

year 2014 data. Eileen Witherspoon, Health Policy Analyst, provided a demonstration and highlighted the changes that have been incorporated into the Maryland Health Care Quality Reports website. Future modifications under consideration include expanding this section to the top 50 conditions and charges and the reporting of charges for common elective surgical procedures.

The HAI section has been updated with calendar year 2014 CLABSI (bloodstream infections) and new CDI (Clostridium difficile infections) data. Maryland continues to perform better than the national benchmark for CLABSI. The news is not so positive in the first year of reporting for CDI, on this measure Maryland is well below the national benchmark. The Health Plan Guide expansion includes a web-based display of CAHPS or member experience data from the Consumer Edition of the 2014 Health Benefits Plan Quality Report series. Additional data from the pdf report, including a web-based display of HEDIS measures, will be added later this year.

#### ITEM 8.

## **Overview of Upcoming Initiatives**

Mr. Steffen stated that at the May Commission meeting, the Care Coordination Report will be presented, as well as the 2015 legislative wrap up and budget overview, an announcement for the telehealth grant awards, and possibly a request for an IRB recognition.

### **ITEM 10.**

#### **ADJOURNMENT**

There being no further business, the meeting was adjourned at 3:50 p.m. upon motion of Commissioner Montgomery, which was seconded by Commissioner Weinstein and unanimously approved.