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CHAIR



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## MARYLAND HEALTH CARE COMMISSION

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Thursday, April 20, 2017

### Minutes

Commissioners present: Fleig, Metz, Moffit, O’Grady, Phillips, Pollak, Sergent, Stollenwerk, Tanio, and Carr-York.

### ITEM 1.

#### CLOSED Session

At approximately 12:55 p.m., Suellen Wideman, Assistant Attorney General, announced to those present in room 100 that, at 1:00 in room 101, the Commission was going to consider a motion to go into closed session to consult with counsel and that members of the public in room 100 could move to room 101 to observe the motion and vote. At 1:00 p.m., in room 101, Commissioner Fleig made a motion to go into closed session to consult with counsel to obtain legal advice, pursuant to General Provisions Article § 3-305(b)(7), which was seconded by Commissioner Pollak, and unanimously approved. The Commission went into closed session at 1:02 p.m. pursuant to General Provisions Article § 3-305(b)(7). Present at the closed session were: Commissioners Fleig, Metz, Moffit, O’Grady, Phillips, Pollak, Sergent, Stollenwerk, Tanio, and Carr-York; Ben Steffen, Executive Director; Paul Parker, Director of the Center for Health Care Facilities Planning & Development; Suellen Wideman, AAG; and Siobhan Madison, AAG. Pending litigation was discussed at the closed session. The closed session ended at 1:14 p.m.

Chairman Tanio called the open session back to order in room 100 at 1:18 p.m.

### ITEM 2.

#### Approval of the Minutes

Commissioner Moffit made a motion to approve the minutes of the March 23, 2017 public meeting of the Commission, which was seconded by Commissioner Fleig and unanimously approved.

### ITEM 3.

## **Update of Activities**

Vice Chair Phillips asked if staff had an explanation for the uptick in uncompensated care payments in January and February, compared to the same months for 2016. Ben Steffen, Executive Director, noted that the increase could be attributed to greater attention to uncompensated care claims.

Mr. Steffen announced that the April meeting would be Chairman Tanio's last meeting. Commissioners and staff thanked Chairman Tanio for his leadership and dedication to the residents of Maryland. Chairman Tanio thanked his fellow Commissioners and staff for their hard work.

Mr. Steffen said the Rural Health Care Delivery Workgroup met on March 27, 2017 in Annapolis. He stated that staff is in the process of scheduling public hearings in five mid-shore counties beginning in May. He also noted that the research team from the University of Maryland School of Public Health and NORC at the University of Chicago will brief the Commission in June or July.

Mr. Steffen noted that the final version of the 2015 MCDB data, which will include all self-insured non-ERISA data will be available in May. He pointed out that the Commission has the authority to impose fines on payors for failure to submit timely data.

## **ITEM 4.**

### **OVERVIEW: Legislative Wrap Up**

Ben Steffen presented a wrap-up of the Commission's activities during the 2017 session of the Maryland General Assembly and provided an overview of the Commission's budget. Mr. Steffen said that the Commission's budget of \$15.1 million was approved, and that this figure included an additional \$600,000 in indirect costs assessed by the Department of Health and Mental Hygiene. He said that the approved Budget Reconciliation and Financing Act (BRFA) of 2017 established an increase in the Commission's permanent statutory indirect cost ceiling from 18% to 30.5%, and increased the Commission's assessment cap from \$12 million to \$16 million.

Mr. Steffen stated that the following legislation was adopted by the General Assembly: SB 369/HB 403 – "Maryland Patient Referral Law-Compensation Arrangements Under Federally Approved Programs and Models"; HB 188 – "Public Health – Advance Directives – Witness Requirements, Advance Directives Services, and Fund"; and SB 571 – "Maryland Health Insurance Coverage Protection Act." Mr. Steffen noted the following legislation of interest that did not pass, including: HB 1053 – "Integrated Community Oncology Reporting Program; SB 1020 – "Maryland Health Care Regulatory Reform Act of 2017"; and HB 736 – "Workgroup to Recommend Possible Reforms to Maryland's Health Care System." Mr. Steffen said that the Commission will be required to approve advance directive services in accordance with HB 188, and will continue to monitor the work of the Maryland Insurance Coverage Protection Act (SB 571). He also noted that staff is expecting a letter from the Health Committee Chairs requesting a study of Certificate of Need.

**ITEM 5.**

**ACTION: Approval of Release of APCD Data – University of Massachusetts-Amherst**

Leslie LaBrecque, Chief of Database and Application Development, provided the staff recommendation regarding the request from University of Massachusetts – Amherst for access to 2015 APCD data under the Commission’s data release policy. Dr. Kimberley Geissner, Assistant Professor at the University of Massachusetts – Amherst’s School of Public Health and Health Sciences, joined the meeting via telephone. Dr. Geissner requested the release of 2015 APCD data to examine the relationship between coordination of care and utilization patterns and cost, access, quality, and utilization outcomes. She said that the enrollment and claims data will be used to examine different measure of coordination of care and utilization patterns, including standard coordination measure from the health services literature, social network analysis, referral concentration, time to treatment, distance to treatment, and other characteristics of treatment patterns. Ms. LaBrecque noted that the “Effects of Utilization Patterns and Coordination of Care on Outcomes” was determined to not constitute human subject research and thus does not require IRB oversight. Dr. Geissner agreed to share the findings of the study with the Commission. Commissioner Moffit made a motion that the Commission approve release of APCD data to the University of Massachusetts-Amherst, which was seconded by Commissioner Sergent, and unanimously approved.

**ACTION: Approval of Release of APCD Data – University of Massachusetts is hereby APPROVED.**

**ITEM 6.**

**ACTION: Certificate of Need – Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc., d/b/a Kaiser Permanente Gaithersburg Medical Center (Docket No. 17-15)**

Kevin McDonald, Chief of Certificate of Need, presented the staff recommendation on the application of Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. for a Certificate of Need to expand its ambulatory surgery facility at the Kaiser Permanente Gaithersburg Medical Center. He stated that the applicant proposes to add a third operating room at an estimated cost of \$1,998,352 to be paid for out of cash reserves. Staff recommended that the Commission approve the project. Commissioner Moffit made a motion that the Commission approve the application for Certificate of Need, which was seconded by Commissioner Pollak and unanimously approved.

**ACTION: Certificate of Need – Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc., d/b/a Kaiser Permanente Gaithersburg Medical Center (Docket No. 17-15) is hereby APPROVED.**

**ITEM 7.**

**ACTION: Proposed Regulations – Repeal and Replacement of COMAR 10.24.11 – State Health Plan for Facilities and Services – General Surgical Services**

Dr. Tanio stated that, in March, the Commission heard an overview of the draft General Surgical Services Chapter of State Health Plan that staff had released for informal public comment.

Informal comments were filed on April 4, 2017. Paul Parker, Director of the Center for Health Care Facilities Planning and Development, presented information on Maryland surgical service trends. Eileen Fleck, Chief of Acute Care Policy and Planning, discussed the informal comments received on the draft regulations, and presented staff's analysis and recommendations for proposed regulations to replace the current General Surgical Services Chapter. Following extensive discussion among the Commission members and staff, particularly regarding costs to patients, driving down costs, and on how best to allow offering surgical services in a safe and cost effective manner, Mr. Steffen suggested that staff should consider the Commissioners' comments and, at the May meeting, suggest a plan for moving forward. The Commissioners agreed with this approach.

#### **ITEM 8.**

##### **ACTION: Final Regulations COMAR 10.25.02 – User Fee Assessment of Health Care Practitioners, and COMAR 10.25.03 – User Fee Assessment of Payers, Hospitals, and Nursing Homes**

Bridget Zombro, Director of Administration, noted that every four years, the Commission performs a workload study to determine how the Commission's total assessment will be allocated among payers, hospitals, nursing homes, and licensed health professionals. Ms. Zombro noted that the Commission adopted proposed permanent regulations regarding the user fee assessment at the December 15, 2016 meeting of the Commission, and presented the regulations for final action. Commissioner Moffit made a motion that the Commission adopt COMAR 10.25.02 as final regulation, which was seconded by Vice Chair Phillips and unanimously approved. Commissioner Metz abstained from voting on this matter.

##### **ACTION: COMAR 10.25.02 – User Fee Assessment of Health Care Practitioners, and COMAR 10.25.03 – User Fee Assessment of Payers, Hospitals, and Nursing Homes is hereby adopted as Final Regulations.**

#### **ITEM 9.**

##### **UPDATE: Maryland Health Care Quality Reports Website**

Theresa Lee, Director of the Center for Quality Measurement and Reporting, and Mariam Rahman, Program Manager, provided an overview of the most recent update to the Hospital Performance Evaluation Guide, highlighting hospital performance on healthcare associated infections and on emergency department throughput. LeapFrog released its 2016 hospital patient safety scores last week. Again in 2016, Leapfrog was not able to report Patient Safety results for any Maryland hospital. Ms. Lee updated the Commission on MHCC's work with Leapfrog in extracting information from the HSCRC discharge and outpatient files for use in a future Leapfrog report.

#### **ITEM 10.**

**PRESENTATION: Health Information Technology Grants - Findings from Round 2; and Go Live Demo by Round 5 grantees, Shore Regional (telehealth) and, Johns Hopkins Pediatrics at Home (mHealth)**

Findings were presented regarding the Round 2 Telehealth grants that were completed earlier this year. Presenters were: Angela Evatt, Chief of Health Information Exchange; Jim Hummer, Vice President of Home and Community Based Services at Lorien Health Systems; and, Anne Lara, Sr. Vice President, Chief Innovation Officer, Union Hospital of Cecil County. Grantees reported favorable findings and highlighted their plan to continue funding projects at the conclusion of the grant period.

The recent Round 5 telehealth and mHealth grant recipients demonstrated technology used in their projects. Presenters were: William R. Roth, Regional Director of Care Transitions and Palliative Care at University of Maryland Shore Regional Health, and Angela Evatt. Their presentation was followed by Melissa Lantz-Garnish, Disease Management Nurse and Mike Batista, CEO and Founder of Quantified Care, Inc., and Justine Springer, MHCC Program Manager.

#### **ITEM 11.**

#### **Overview of Upcoming Initiatives**

This agenda item was tabled due to the lateness of the hour.

#### **ITEM 12.**

#### **ADJOURNMENT**

There being no further business, the meeting was adjourned at 5:40 p.m. following a motion by Commissioner Pollak, which was seconded by Commissioner Sergent and unanimously approved.