STATE OF MARYLAND



Ben Steffen EXECUTIVE DIRECTOR

#### MARYLAND HEALTH CARE COMMISSION

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## Thursday, January 18, 2018

### **Minutes**

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

**Commissioners present**: Fleig, Hafey, O'Connor, O'Grady, Peters, Pollak, Sergent, Thomas, Tomarchio, and Wang

#### ITEM 1.

# **Approval of the Minutes**

Commissioner Fleig made a motion to approve the minutes of the December 21, 2017 public meeting of the Commission, which was seconded by Commissioner Pollak and unanimously approved.

#### ITEM 2.

### **Update of Activities**

Chairman Moffit announced the departure of Vice-Chair Frances Phillips, and Commissioner Carr-York, and thanked them both for their service on behalf of the citizens of Maryland. He noted that Ms. Phillips has agreed to remain Co-Chair with Commissioner Sergent on the CON Modernization Task Force. Chairman Moffit appointed Dr. Andrew Pollak as Vice-Chair of the Commission. He noted that Dr. Pollak has served on the Commission from 2005 through 2008, and rejoined the Commission in 2015.

Ben Steffen, Executive Director, said that the Co-Chairs of the Rural Health Workgroup and Paul Parker presented a briefing to the Senate Finance Committee on January 16, 2018. He noted that Chairman Middleton and Senator Hershey are in the process of developing legislation to create statutory authority for a Rural Health Collaborative on the eastern shore. Mr. Steffen noted that the legislation has not yet been introduced.

Mr. Steffen announced that the Maryland Department of Health and the federal Centers for Medicare and Medicaid Services (CMS) reached an agreement on a one-year extension of the

existing Maryland All-Payer Model Agreement to allow the federal government to complete its review and to consider additional data through the end of 2017 before finalizing the contract for Maryland's anticipated Total Cost of Care All-Payer Medicare Model.

Paul Parker, Director of the Center for Health Care Facilities Planning and Development, updated the Commission on the status of nursing homes operated by NMS Healthcare (NMS). In 2017, this operator's nursing home in Hagerstown, NMS Healthcare of Hagerstown, was decertified for Medicare and Medicaid participation by CMS. NMS closed its Hagerstown operation in July after the residents were transferred to other facilities. The facility was temporarily delicensed by the owner of the facility's real assets, Sabra Health Care REIT, Inc. (Sabra). In December, Sabra notified MHCC that it would be entering new operating leases for the Hagerstown facility and its four other Maryland nursing homes. Sabra informed the Commission that it would be requesting relicensure of the Hagerstown CCF and stated that it anticipated reopening under the new operator, Wye Oak Healthcare of Hagerstown, L.L.C. d/b/a Cadia Healthcare-Hagerstown. Sabra stated that its other Maryland CCFs would also be operated by Wye Oak Healthcare entities. Mr. Parker stated that those four nursing homes have been operating as: Bay Ridge Health Care Center, in Annapolis; NMS Healthcare of Silver Spring, in Wheaton; NMS Healthcare of Springbrook, in Silver Spring; and St. Thomas More Medical Complex, in Hyattsville. All of the facilities will be operated under the Cadia Healthcare name.

Suellen Wideman, Assistant Attorney General, introduced and welcomed the Commission's new Assistant Attorney General, Sarah Pendley. Ms. Pendley previously served as counsel to the Board of Nursing and, before that, to the Board of Physicians.

Linda Bartnyska, Director of the Center for Analysis and Information Systems, introduced and welcomed Adebola Akinyemi, a Senior Health Policy Analyst for the Cost and Quality Analysis Division.

#### ITEM 3.

# ACTION: Change in Approved Certificate of Need – Prince George's Post-Acute, L.L.C. (Docket No. 13-16-2347)

Prince George's Post-Acute, L.L.C. applied for a modification to its previously approved Certificate of Need. Kevin McDonald, Chief of Certificate of Need, presented the staff report and recommendation. Mr. McDonald noted that this project requires a modification to increase the approved cost of the project. He said that the original total project cost was \$19,070,505, and that that the first modification, approved by the Commission in December 2015, increased the total project cost to \$27,929,096. Mr. McDonald stated that the second requested modification would increase the total project cost by an additional \$3,066,232, bringing the total project cost to \$30,995,328. He noted that the capital cost increase exceeds the inflation allowance, and that staff recommended approval of the requested second modification, with conditions. Commissioner Hafey made a motion to approve the modification of the Certificate of Need, which was seconded by Commissioner O'Grady, and unanimously approved.

ACTION: Change in Approved Certificate of Need – Prince George's Post-Acute, L.L.C. (Docket No. 13-16-2347) is hereby Approved.

#### ITEM 4.

## **PRESENTATION: 2018 Legislative Process**

Bridget Zombro, Director of Administration, provided an overview of the 2018 legislation review process. Ms. Zombro noted that Administration proposals are the highest priority and any amendments to Administration legislation should only be offered by the Governor's Legislative Office. She said that departmental legislation must be approved by the Governor's Legislative Office before introduction, and that no Executive Branch representative may oppose a departmental bill before the General Assembly. Ms. Zombro noted that budget hearings have been scheduled in both the Senate and House for late February.

#### ITEM 5.

## PRESENTATION: Proposed Legislation

Mr. Steffen said that David Sharp was in Annapolis testifying in support of SB 17 – Health Information Exchange – Definitions and Regulations. He said that this legislation would revise the definition of a health information exchange to clarify that the term includes entities that maintain, transmit, access, or disclosure electronic patient information with difference health care organizations' information technology systems, with certain exclusions.

Angela Evatt, Chief of Health Information Exchange, provided an overview of SB 13 — Electronic Prescription Records Cost Savings Act of 2018. Ms. Evatt said that SB 13 would allow authorized health care providers to access a patient's complete medication history for treatment and care coordination. She stated that SB 13 would also require prescription drug dispensers to submit prescription information electronically to the State-Designated HIE using existing processes, and would require the Maryland Health Care Commission, in consultation with stakeholders, to adopt supporting regulations. After discussion, Mr. Steffen noted that staff will send a draft position paper, via email, to seek comments from Commissioners.

#### ITEM 6.

## PRESENTATION: 2018 Outpatient Quality Initiative Work

Sebastiana Gianci, Chief of Outpatient Quality Initiative (OQI), summarized the MHCC's new outpatient quality initiative that is designed to provide meaningful information on the quality and performance of Maryland outpatient health care providers. Ms. Gianci highlighted key areas of the staff's work plan and noted that the initiative will focus on the performance of hospital based outpatient departments (HOPDs) and ambulatory surgery centers (ASCs) in the first year. The project includes the development and public release of an Outpatient Guide on the Commission's consumer website, (<a href="https://healthcarequality.mhcc.maryland.gov/">https://healthcarequality.mhcc.maryland.gov/</a>) by the end of 2018. Ms. Gianci also summarized the staff's efforts to engage the Maryland Ambulatory Surgery Association (MASA) and individual ambulatory surgery facilities in the initiative. Site visits are underway and a brief survey of ASCs and HOPDs has been administered in collaboration with MASA.

### **ITEM 7.**

# **Overview of Upcoming Initiatives**

Mr. Steffen announced that the February meeting of the Commission will include presentations from our Health IT team, final regulations related to advance directives, and a presentation regarding the 2016 privately insured spending in Maryland.

## ITEM 8.

# **ADJOURNMENT**

There being no further business, with meeting was adjourned at 3:10 p.m. upon motion of Commissioner Fleig, which was seconded by Commissioner O'Grady and unanimously approved.