



MARYLAND HEALTH CARE COMMISSION

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Thursday, July 19, 2018

Minutes

Chairman Moffit called the meeting to order at 1:20 p.m.

Commissioners present: Boyle, Hafey, Hammersla, McCarthy, O'Connor, Peters, Rymer, Sergeant, Tomarchio, and Wang.

ITEM 1.

Approval of the Minutes

Commissioner O'Connor made a motion to approve the minutes of the June 21, 2018 public meeting of the Commission, which was seconded by Commissioner Pollak and unanimously approved.

ITEM 2.

Update of Activities

Commissioner Sergeant asked when the CRISP financial audit was expected to be finalized. David Sharp, Director for the Center for Health Information and Innovative Care Delivery, said that both the financial and privacy and security audit reports should be available in September or October.

Mr. Steffen said that, prior to the start of the public meeting, staff presented an overview of the new Total Cost of Care Model to the Commissioners, and noted that the agreement was signed by Governor Hogan on July 9, 2018.

Theresa Lee, Director for the Center for Quality Measurement and Reporting, introduced new staff member, Stacy Howes. She noted that Ms. Howes will serve as the Chief of Long Term Care Quality Initiatives and that she previously worked as a research associate with the University of Maryland School of Medicine and as a Health Policy Analyst for the Centers for Medicare and Medicaid Services.

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Eileen Fleck, Chief of Acute Care Policy and Planning, introduced new staff member, Mario Ramsey, who will serve as Program Manager for the Acute Care Policy and Planning Division. Ms. Fleck stated that Mr. Ramsey, a licensed attorney in Maryland, worked as a health care analyst with the US Government Accountability Office, was a fellow with the Center for Medicare Advocacy, and a fellow with the Satcher Health Leadership Institute. He most recently served as a Policy Fellow in the Office of the Director for the Division of Public Health Information Disseminating.

Ms. Fleck said that staff is moving closer to completing its review of the first batch of application from cardiac surgery programs for Certificates of Ongoing Performance, noting that Maryland hospitals with cardiac surgery programs collectively raised concerns about the use of one of the performance standards. She also stated that the Commission would need to adopt revised proposed regulations in order to use the national benchmark from STS for evaluation of Maryland's cardiac surgery services in Certificate of Ongoing Performance review.

ITEM 3.

PRESENTATION: Hospital Performance on Healthcare Associated Infection Measures

Courtney Carta, Chief of Hospital Quality Initiatives, provided an outline of the Healthcare Associated Infection (HAI) public reporting requirements, and the HAI progress report. Ms. Carta noted that the Commission staff continues to update the HAI performance measures annually on the Hospital Guide, and that final results will be posted in late July. She said that Maryland continues to perform better than the national benchmark for CAUTI, which includes ICU units. She also said that the performance in select wards for CAUTI was about the same as the national benchmark. Ms. Carta stated that Maryland results regarding surgical site infections were better than the national benchmark for both knee replacement surgery and colon surgery, and that Maryland hospitals' performance for CABG procedures, abdominal hysterectomy, and hip replacement surgery was about the same as the national benchmark. Flu vaccine rates among healthcare personal in Maryland hospitals were at 97%, which is similar to previous years. Ms. Carta provided a demonstration of the consumer website. She noted that staff will continue to promote the website, and work with other stakeholders to enhance the quality reports website.

ITEM 4.

ACTION: Certificate of Need – Visiting Nurse Association of Maryland, L.L.C. (Docket No. 17-R4-2407)

Visiting Nursing Association of Maryland (VNA), applied for a Certificate of Need to expand its service area by providing home health agency services to the residents of Dorchester County. Bill Chan, Health Policy Analyst, presented the staff recommendation. He pointed out that VNA is a licensed home health agency currently operating in 18 jurisdictions in Maryland (Anne Arundel, Baltimore, Calvert, Caroline, Carroll, Cecil, Charles, Frederick, Harford, Howard, Kent, Montgomery, Prince George's, Queen Anne's, St. Mary's, Talbot, Washington Counties, and Baltimore City). He said that the total cost of launching the expansion is estimated to be \$47,000. Staff recommended that the Commission approve VNA's Certificate of Need

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application with conditions. Commissioners Wang made a motion to approve the staff recommendation, which was seconded by Commissioner Peter and unanimously approved.

ACTION: Certificate of Need – Visiting Nurse Association of Maryland, L.L.C. (Docket No. 17-R4-2407) is hereby APPROVED.

ITEM 5.

ACTION: Certificate of Need – Gilchrist Hospice Care, Inc. and Joseph Richey House, Inc. t/a Gilchrist Center Baltimore Joseph Richey House (Docket No. 17-24-2412)

Gilchrist Hospice Care and Joseph Richey House applied for a Certificate of Need to relocate and replace the 30-bed Joseph Richey House with a new 22-bed inpatient general hospice. Mariama Gondo, Program Manager, presented the staff recommendation. Ms. Gondo said that Gilchrist is a not-for-profit general hospice provider authorized to provide services in multiple locations throughout Central Maryland. She also said that Gilchrist owns and operated three inpatient hospice units, including Gilchrist Center Towson, Gilchrist Center Howard County, and Gilchrist Center Baltimore Joseph Richey House, previously known as Joseph Richey House prior to its 2014 acquisition by Gilchrist. Ms. Gondo stated that Gilchrist proposed to relocate its 22-bed Joseph Richey inpatient general hospital unit from 828 North Eutaw Street to Stadium Place, located on 33rd Street, in Baltimore. She noted that this project requires a Certificate of Need because the expenditure exceeds the threshold of \$6,000,000 currently in effect for all non-hospital health care facilities. She said that the total project cost is estimated to be \$10,328,950, and the sources of funds include cash, philanthropy, pledges, and authorized bonds. Staff recommended approval of Gilchrist Hospice Care's Certificate of Need application. Commissioner Boyle made a motion to approve the staff recommendation, which was seconded by Commissioner Tomarchio and unanimously approved. Commissioner Hafey recused herself from this action item.

ACTION: Certificate of Need – Gilchrist Hospice Care, Inc. and Joseph Richey House, Inc. t/a Gilchrist Center Baltimore Joseph Richey House (Docket No. 17-24-2412) is hereby APPROVED.

ITEM 6.

ACTION: COMAR 10.25.18 – Health Information Exchanges: Privacy and Security of Protected Health Information – Sensitive Health Information – Final Action

Alana Sutherland, Program Manager in the Center for Health Information Technology and Innovative Care Delivery, presented for final action the proposed amendments to COMAR 10.25.18 regarding sensitive health information. Ms. Sutherland noted that the initial regulations adopted by the Commission went into effect on March 17, 2014, and were amended on June 20, 2016 and June 19, 2017. On February 15, 2018, the Commission adopted proposed amendments to the sensitive health information regulations, which were published in the *Maryland Register* for a 30-day comment period. Ms. Sutherland noted that comments were received from three organizations: the Behavioral Health System Baltimore and the Maryland Hospital Association submitted letters of support; and RadNet, a radiology provider, requested clarification on

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whether the amendments applied to their organization. Staff recommended that the Commission adopt the proposed amendment as final with one non-substantive change.

ACTION: COMAR 10.25.18 – Health Information Exchanges: Privacy and Security of Protected Health Information – Sensitive Health Information – Amendments are hereby Approved as Final Regulations.

ITEM 7.

ACTION: State Recognition of an Electronic Advance Directives Service Vendor

Nikki Majewski, Chief of Health Information Technology, presented the ADVault, Inc. (dba MyDirectives.com) application for State recognition as an electronics advance directives service vendor. She noted that COMAR 10.25.19 requires electronic advance directives vendors to receive State recognition before they can connect to the State-Designated Health Information Exchange, CRISP. Ms. Majewski mentioned that in late 2016 staff collaborated with stakeholders to identify criteria for electronic advance directives vendors that seek State recognition. She discussed the key requirements that pertain to safeguarding electronic protected health information, disaster recover, business continuity, cybersecurity, and breach assessment and response. Staff recommended that the Commission grant State recognition to ADVault, Inc. Commissioner Sargent made a motion to approve the staff recommendation, which was seconded by Commissioner Hammersla and unanimously approved.

ACTION: ADVault, Inc. is hereby Awarded State Recognition as an Electronic Advance Directives Service Vendor.

ITEM 8.

PRESENTATION: Upgrade of the WearTheCost Website

In October 2017, the Commission launched a new consumer-centric website called WearTheCost to provide meaningful and useful information on the cost of health care in Maryland. Mahlet Nigatu, Chief of Policy, Cross-Payer and Workforce Analysis, said that, since that launch, Commission staff established a workgroup to obtain input from various stakeholder groups and consumer members with different expertise on the episodes of care. Ms. Nigatu said that the goal of the WearTheCost website is to enable Marylanders to match provider prices with performance for common medical procedures. Ms. Nigatu said that the upgrades for the website included: defining what action/steps consumers can take; a modified video on the website; a simplified cost and quality comparison table; and building capacity for multiple data bases within the site. Ms. Nigatu noted the staff would continue its WearTheCost Workgroup and provided a demonstration of the upgraded site.

ITEM 9.

PRESENTATION: School-Based Teletherapy for Special Education Services and Enhancing School-Based Health Care Services via Telehealth – Grant Announcement

Justine Springer, Program Manager in the Center for Health Information Technology and Innovative Care Delivery, said that staff released two grants: (1) School-Based Teletherapy for Special Education; and (2) Enhancing School-Based Health Care Services via Telehealth. Ms. Springer said that the Commission staff plans to make a single award for each grant opportunity, on a competitive basis. The School-Based Teletherapy for Special Education grant aims to increase access to qualified special education and related services. The Enhancing School-Based Health Care Services via Telehealth grant is aimed at enhancing health care services delivered within public schools. The grant applications are due August 15, 2018.

ITEM 10.

Overview of Upcoming Initiatives

Ben Steffen announced that the September meeting will include a summary on the 2017 Maryland Health Care Provider Breach; a presentation on the telehealth grant findings; Certificate of Need applications; and a presentation on the Maryland Health Workforce Study.

Mr. Steffen said that Katie Wunderlich was appointed to be the new Executive Director of the Health Services Cost Review Commission effective September 1, 2018.

Before adjourning, Chairman Moffit introduced new Commission member Jason McCarthy. Commissioner McCarthy, who attended the June Commission meeting via webinar.

ITEM 8.

ADJOURNMENT

There being no further business, the meeting was adjourned at 3:40 p.m. upon motion of Commissioner Pollak, which was seconded by Commissioner Boyle and unanimously approved.