



MARYLAND HEALTH CARE COMMISSION

4160 PATTERSON AVENUE – BALTIMORE, MARYLAND 21215
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Thursday, October 16, 2018

Minutes

Chairman Moffit called the meeting to order at 1:05 p.m.

Commissioners present: Boyle, Hafey, McCarthy, O'Connor, Peters, Pollak, Rymer, Sergent, and Tomarchio. Commissioners Metz, O'Grady, and Thomas participated via teleconference.

ITEM 1.

Approval of the Minutes

Commissioner Sergent made a motion to approve the minutes of the September 20 public meeting of the Commission, which was seconded by Commissioner Hafey and unanimously approved. Commissioner Boyle said that the September minutes should reflect discussion related to health insurance coverage for agenda item 8 "Telehealth Grant Findings."

ITEM 2.

Update of Activities

Commissioner Tomarchio asked about the validity of the uncompensated care payments to trauma physicians, and will it become more stable. Ben Steffen, Executive Director, noted that the implementation of the insurance coverage provisions of the ACA has led to reduced financial pressure on the Trauma Fund for reimbursement of uncompensated care.

Mr. Steffen provided an update on all work group activities, noting that staff will discuss at today's meeting a draft response to HGO Chair Pendergrass regarding the Physician Maintenance of Certification study.

Mr. Steffen said that staff continues to participate on the Stakeholder Innovation Group (SIG), which focuses on inventory transformation efforts, identify high-opportunity strategies in support of population health and total cost of care goals.

Mr. Steffen provided an update on Maryland's Primary Care Program, noting that applications were received from 595 practice applications and 25 care transformation organizations. He said that staff is working with the Department to organize an advisory panel, which will provide input from key stakeholders regarding the operation of the Maryland Primary Care Program.

ITEM 3.

ACTION: Certificate of Need – Brinton Woods Health and Rehabilitation of Winfield (Docket No. 18-06-2422)

Britton Woods Health and Rehabilitation of Winfield applied for a Certificate of Need to replace and relocate its existing comprehensive care facility in Carroll County. Kevin McDonald, Chief of Certificate of Need, presented the staff recommendation. Mr. McDonald said that the proposed replacement facility would increase the number of private rooms from six to forty, and that the total cost of constructing the new facility is estimated at \$14,837,500, which the applicant plans to fund with cash. He said that staff recommends approval of this project, with two conditions. Commissioner Pollak made a motion to approve the staff recommendation, which was seconded by Commissioner Boyle and unanimously approved. Commissioner Hafey recused herself from this item.

ACTION: Certificate of Need – Brinton Woods Health and Rehabilitation of Winfield (Docket No. 18-06-2422) is hereby APPROVED.

ITEM 4.

ACTION: Certificate of Need – University of Maryland St. Joseph Medical Center (Docket No. 18-03-2415)

The University of Maryland St. Joseph Medical Center applied for a Certificate of Need to replace and consolidate its current perioperative services facility. Mr. McDonald presented the staff recommendation. Mr. McDonald said that St. Joseph Medical Center's proposed project seeks to modernize outdated surgical facilities and its cardiac procedure facilities in order to consolidate services and gain efficiency. It will renovate and replace the hospital's 15 mixed use general operating rooms and support areas, and will also renovate and replace the hospital's four cardiac special purpose operating rooms and its cardiac procedure suite. He noted that most of St. Joseph Medical Center's existing operating rooms do not meet the current industry standard of 600 square feet of clear floor area, and the cardiac procedure labs are far smaller than the current industry standard of 400 square feet of clear floor area. Mr. McDonald said that the total project cost is estimated to be \$60,000,000, which will be funded by fundraising and cash. Staff recommended that the Commission approve of this project, with a condition. Commissioner Peters made a motion to approve the staff recommendation, which was seconded by Commissioner McCarthy, and unanimously approved. Commissioners Hafey and Pollak recused themselves from this action.

ACTION: Certificate of Need – University of Maryland St. Joseph Medical Center (Docket No. 18-03-2415) is hereby APPROVED.

ITEM 5.

ACTION: Exemption from Certificate of Need Review for the Merger and Consolidation of Adventist Behavioral Health

Washington Adventist Hospital and Shady Grove Medical Center requested an exemption from Certificate of Need review to consolidate and relocate 16 of the 26 adult acute psychiatric beds now in operation at Washington Adventist Hospital in Takoma Park with the psychiatric facilities at Shady Grove Medical Center in Rockville. Mr. McDonald presented the staff recommendation. He said that, with the approval of this request for exemption, the number of licensed acute psychiatric beds at Shady Grove Medical Center would increase from 117 to 133 beds. He also said that Washington Adventist Hospital estimates that the cost of adding these 16 beds at Shady Grove Medical Center is approximately \$3.4 million for renovation and furnishing of existing building space, and that the project will be funded by cash. Staff recommended that the Commission approve this request for exemption from Certificate of Need. Commissioner Boyle made a motion to approve the staff recommendation, which was seconded by Commissioner Pollak and unanimously approved.

ACTION: Exemption from Certificate of Need Review for the Merger and Consolidation of Adventist Behavioral Health is hereby APPROVED.

ITEM 6.

ACTION: Maintenance of Certification Workgroup Study

Megan Renfrew, Chief of Government Relations and Special Project, presented recommendations from the Maintenance of Certification Workgroup study. Ms. Renfrew said that the Workgroup studied issues related to physician maintenance of certification requirements and the interaction between those requirements and payer and hospital credentialing requirements. She discussed the workgroup and study process, as well as background information on board certification and recertification. Ms. Renfrew also noted that a number of physicians raised concerns about board recertification programs and requirements. After examining the findings and conclusions of the workgroup, the Commission agreed that the lack of consensus meant that the workgroup could not recommend compromise legislation at this time. Vice Chair Pollak made a motion to approve the release of the letter to Chair Pendergrass, with additional language noting that the Commission could not recommend legislation, which was seconded by Commissioner Peters and unanimously approved.

ACTION: Approval of Letter, with noted changes, to the Chair of House Health and Government Operations Committee

ITEM 7.

ACTION: COMAR 10.24.20 – State Health Plan for Facilities and Services: Comprehensive Care Facility Services – Proposed Permanent Regulations

Paul Parker, Director of the Center for Health Facilities Planning and Development, provided introductory remarks noting that Commission staff received letters from LifeSpan and HFAM requesting that the Commission delay action in moving forward with adoption of COMAR 10.24.20: State Health Plan for Facilities and Services: Comprehensive Care Facility Services. Mr. Parker said that staff recommended proceeding with the regulations, and recommends adoption of proposed regulation. A discussion ensued.

Linda Cole, Chief of Long Term Care Policy and Planning, noted that, at the June 21, 2018 meeting of the Commission, staff presented a status report on the development of a replacement chapter of the State Health Plan for Facilities and Services: Comprehensive Care Facility Services, which was to be moved from COMAR 10.24.08 to a new codification, at COMAR 10.24.20. She also said that the draft Chapter was released for an informal public comment period on June 6, 2018. Ms. Cole noted that informal comments were received from four organizations on the extended due date of July 13. She said that staff held an additional meeting of the Nursing Home Work Group on October 4, 2018 to discuss the major issues raised in the informal comments. Ms. Cole provided a summary of those issues, with staff's analysis and recommendations. Staff recommended that the Commission adopt COMAR 10.24.20, the Comprehensive Care Facilities Services Chapter, as proposed permanent regulations. After discussion, Commissioner Boyle made a motion to approve the staff recommendation, which was seconded by Vice Chair Pollak and unanimously approved.

ACTION: COMAR 10.24.20 – State Health Plan for Facilities and Services: Comprehensive Care Facility Services – Proposed Permanent Regulations are hereby ADOPTED.

ITEM 8.

ACTION: COMAR 10.24.08 – State Health Plan for Facilities and Services: Special Hospital – Chronic Services – Proposed Permanent Regulations

Ms. Cole said that existing regulations regarding comprehensive care facilities are currently contained in COMAR 10.24.08. Staff recommended that the Commission repeal existing COMAR 10.24.08, removing all the regulations regarding comprehensive care facilities contingent on COMAR 10.24.20 becoming effective as final regulations, and replace it with COMAR 10.24.08: State Health Plan for Facilities and Services: Special Hospital-Chronic Services. Commissioner Pollak made motion to approve the staff recommendation, which was seconded by Commissioner Peters and unanimously approved.

ACTION: COMAR 10.24.08 – State Health Plan for Facilities and Services: Special Hospital – Chronic Services – Proposed Permanent Regulations are hereby ADOPTED.

ITEM 9.

ACTION: Approval of New Member for the Cardiac Services Advisory Committee

Eileen Fleck, Chief, Acute Care Policy and Planning, requested approval to add James ReCabo, Clinical Manager for the Cardiac Cath Lab, Cardiac Rehab, and Radiology Nursing, to the Cardiac Services Advisory Committee (CSAC). Ms. Fleck provided a copy of Mr. ReCabo's Curriculum Vitae. Commissioner Tomarchio made a motion to add James ReCabo to the CSAC, which was seconded by Commissioner Hafey and unanimously approved.

ACTION: Add James ReCabo to the Membership of the Cardiac Services Advisory Committee is hereby APPROVED.

ITEM 10.

Overview of Upcoming Initiatives

Ben Steffen said that the November meeting is expected to include the release of the MCDB Data Manual, a presentation on the Diabetes Study, a presentation on Maryland's Trauma Physician Services Fund's annual report, and update on the Leapfrog results, and a review of the preliminary draft of the CON Modernization recommendations.

ITEM 11.

ADJOURNMENT

There being no further business, the meeting was adjourned at 3:30 p.m. upon motion of Commissioner Tomarchio, which was seconded by Commissioner Boyle and unanimously approved.