



**MARYLAND HEALTH CARE COMMISSION**

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**Friday March 15, 2019  
Via Teleconference**

**Minutes**

**Commissioners Present:** Pollak, Boyle, O’Grady, O’Connor, Stephen Thomas, and Peters.

**AGENDA ITEM 1.**

**Welcome and Roll Call**

Ben Steffen, Executive Director, opened the meeting and took a roll call of the Commissioners in attendance.

**AGENDA ITEM 2.**

**Update on Activities**

Mr. Steffen noted the completion of the Commission’s budget hearings in the House and Senate legislative committees and reported that these hearings went well. Megan Renfrew, Chief of Government Relations and Special Projects, mentioned that March 18 is the legislative cross-over date, meaning that bills cross to the opposite chamber in order for legislation to have a chance to pass.

Ms. Renfrew provided an update of the legislative session from the week of March 11. She said that the House Health and Government Operations Committee (HGO) heard three Certificate of Need (CON) bills. House Bill 646, which increases the hospital capital threshold and requires annual prioritizing of State Health Plan chapters, had no changes. House Bill 931, which permits establishment of an ambulatory surgery facility with two or fewer operating rooms without CON, had an amendment offered that represented consensus between a broad set of stakeholders, to which MHCC staff found acceptable.

A scheduled HGO subcommittee meeting on House Bill 409, which mandates use of electronic prescriptions, was delayed. Ms. Renfrew said that the bill language may be amended to focus on controlled substances only and to remove fines on prescribers.

The Senate Finance Committee held a brief hearing on March 14 that included the three CON bills.

Ms. Renfrew told the Commissioners that another bill that is moving is SB 733, which will require the Commission to conduct a study related to cardiac catheterization laboratories. The bill would permit physicians to delegate some duties to registered cardiovascular invasive

specialists. Mr. Steffen noted that the bill has momentum and that if it crosses over, the Commission will look at it more closely.

Mr. Steffen also noted a concern over language in the House version of the Budget Reconciliation and Financing Act that would cut \$2 million from the Trauma Fund. The Senate bill strikes this language. The budget also contains language that would require MHCC to conduct an assessment of services at the UM Shore Medical Center at Chestertown.

### **AGENDA ITEM 3.**

#### **ACTION: Discussion of Positions on Bills with Hearings during Week March 18**

Mr. Steffen provided a brief overview of the bills that are up for discussion during the week of March 18. Ms. Renfrew provided additional details on the staff recommended positions.

#### SB 901 (HB 607): Maryland Trauma Fund - State Primary Adult Resource Center - Reimbursement of On-Call and Standby Costs.

Ms. Renfrew noted that this bill provides access to funding for on-call and standby costs for Shock Trauma through the Trauma Fund. She noted that the Commission had previously decided to support the House cross-filed version of this bill.

#### **ACTION: The Commission will submit a position paper in support of SB 901.**

#### SB1018: Health Facilities- Chestertown Rural Health Care Delivery Innovations Pilot Program

Ms. Renfrew stated that this bill would establish the Chestertown Rural Health Care Delivery Innovations Pilot Program within the Maryland Department of Health (MDH). MDH, MHCC, and the Health Services Cost Review Commission (HSCRC) must jointly administer the pilot program in collaboration with University of Maryland Shore Regional Health. Staff recommends submitting a letter of information, which was discussed by the Commissioners. The letter would reference actions that the legislature took in 2018 when it passed legislation that established the Rural Health Collaborative for the five Mid-Shore counties, including Kent County, where Chestertown is located. If deemed necessary, the Rural Health Collaborative has the authority to recommend such a pilot. MHCC staff believes that setting up an additional organization focused on health services in the Mid-Shore would be premature and will distract, not add, to the important work being done by the Collaborative, which should be given more time to do its work.

#### **ACTION: The Commission will submit a Letter of Information for SB 1018.**

#### SB1010: Maryland Health Care Commission - Assessment of Services at the University of Maryland Shore Medical Center in Chestertown

Ms. Renfrew stated that this bill requires an assessment of health services at the Chestertown hospital and is similar in effect to the budget language mentioned above. MHCC and HSCRC received a request for a similar study from Secretary Neall in the fall of 2018. MHCC and HSCRC previously agreed to conduct a review of services provided.

#### **ACTION: The Commission will submit a Letter of Information for SB 1010.**

SB 1028: Rural Health Care Scholarship and Grant Program - Established

This bill establishes the Rural Health Care Scholarship and Grant Program with the purpose of increasing the availability of primary health care in rural areas of the State by providing financial assistance to: (1) undergraduate students who are studying to provide health-related services in rural areas of the State; and (2) health care professionals who provide health-related services in rural areas of the State. For each year that a recipient receives a scholarship or grant, the recipient must provide one year of health-related services in a rural area of the State or the scholarship or grant converts to a loan. The Office of Student Financial Assistance within the Maryland Higher Education Commission (MHEC) must administer the program. Funding for the program is as provided in the annual budget of MHEC by the Governor. Mr. Steffen stated that MHCC staff has concerns about particular items in the draft such as which State entity should run the program, lack of clarity about the treatment of graduate education costs, and a concern that best practices from similar programs are not incorporated. Staff is committed to working with the sponsor over the interim on this topic.

**ACTION: The Commission will submit a Letter of Information for SB 1028.**

**AGENDA ITEM 4.**

**Overview of Upcoming Activities**

Ms. Renfrew noted that no legislative policy call is scheduled for March 22 due to the Commission's monthly meeting on March 21, 2019.

**AGENDA ITEM 5.**

**ADJOURNMENT**

There being no further business, the meeting was adjourned by consensus.