



MARYLAND HEALTH CARE COMMISSION

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Friday, April 3, 2020

Minutes

Chairman Pollak called the meeting to order at 8:04 a.m.

Commissioners present via telephone: Bhandari (attending not voting), Boyle, Doordan, Hammersla, McCarthy, Metz, O'Connor, O'Grady, Rymer, Sergent, Thomas and Wang.

AGENDA ITEM 1.

Executive Director's Update

Ben Steffen, Executive Director, stated that the Maryland Health Care Commission (MHCC or Commission) work is focused on COVID-19 issues. Mr. Steffen informed the Commission that he is participating in the Surge Capacity Task Work, which will identify, coordinate, and support health care organizations in bringing additional hospital capacity on-line. The Surge Capacity Task Force functions will include: identifying up to 6,000 additional hospital beds, recruiting and deploying staffing, and procuring medical equipment and supplies. He stated that the State is using its purchasing capacity to assist facilities in obtaining scarce equipment and personal protective equipment. The State is also providing logistics and project management expertise to support the overall effort and to aid specific facilities.

Mr. Steffen informed the Commission that staff had published guidance to hospitals on the process of bringing existing physical bed space and new bed space on-line, and on MHCC's approach to overseeing cardiac surgery and PCI programs. The guidance clarifies that OHCQ can approve a temporary increase in the hospital's licensed bed capacity if the proposed added space already contains headwalls and piped gases. Other actions to bring on new capacity would require an Emergency CON. Mr. Steffen summarized the information needed in an Emergency CON application including a description of the proposed expansion; when the project is expected to be brought on-line (example: 14 days); and the approximate cost, if known. Mr. Steffen also stated that an Emergency CON is valid for 165 days or until 30 days after the termination of the State of Emergency declared by Governor Hogan on March 5, 2020. Mr. Steffen concluded stating that the staff intends to issue emergency CONs within 24 hours of receipt.

AGENDA ITEMS 2-7

Paul Parker, Director of the Center for Health Care Facilities Planning and Development, briefed the Commissioners on six emergency Certificates of Need (CONs) issued by Ben Steffen between March 20 and April 3, 2020. These emergency CONs authorize five general hospitals to change their bed capacity and all are proposed as responses to the current COVID-19 emergency, during which increased demand for hospital bed capacity is likely to occur. The hospitals and projects are:

ACTION 2: Confirmation of approved Emergency Certificate of Need- Meritus Medical Center Create 20-bed negative pressure beds in 15,000SF building adjacent to wound care center (Docket No. EM-H20-21-002)

An emergency CON (Docket No. EM-H20-21-002) for a new construction project designed to provide 20 additional beds in a negative air pressure unit at an estimated cost of \$12.5 million. The unit is projected to come on-line in July 2020.

ACTION 3: Confirmation of Approved Emergency Certificate of Need- Meritus Medical Center Conversion of five offices on 5W to MSGA beds (Docket No. EM- H20-21-003)

An emergency CON (EM-H20-21-003) to renovate office space to create five additional beds at an estimated cost of \$240,000. It is anticipated that the additional beds will come on-line in May 2020.

ACTION 4: Confirmation of Approved Emergency Certificate of Need- Dimensions Health Corporation d/b/a UM Capital Region Health Establishment of 135-bed remote location of UM Prince George's Hospital Center at facility previously known as Laurel Regional Hospital (Docket No. EM- H20-20-16-004)

An emergency CON (Docket No. EM-H20-20-16-004) to reactivate 135 beds at the former Laurel Regional Hospital, which was converted to a freestanding medical facility in January 2019, to be operated by Prince George's Hospital Center. The estimated cost of this project is \$7 million and the project is expected to be completed in May 2020.

ACTION 5: Confirmation of Approved Emergency Certificate of Need- LifeBridge Health, Inc. and Northwest Hospital Center, Inc. Establishment of 20-Bed Unit of Negative Pressure Rooms at Northwest Hospital (Docket No. EM- H20-03-005)

An emergency CON (Docket No. EM-H20-03-005) to renovate a former comprehensive care facility unit to create a 20-bed general hospital unit capable of negative air pressure. The estimated cost of this project is \$500,000 and is expected to be available within days of approval.

ACTION 6: Confirmation of Approved Emergency Certificate of Need- Frederick Health Hospital Establishment of 72 additional inpatient beds at 700 Toll House Road, Frederick, Maryland (Docket No. EM-H20-10-006)

An emergency CON (Docket No. EM-H20-10-006) to renovate an existing office building across the street from the hospital to create 57 additional patient rooms with up to 114 additional beds. The estimated cost of the project is \$4.5 million and is expected to be ready in April 2020.

ACTION 7: Confirmation of Approved Emergency Certificate of Need -Peninsula Regional Medical Center Establish Two Intensive Care Units with Up To 56 Inpatient Beds (Docket No. EM-H20-22-007)

An emergency CON (Docket No. EM-H20-22-007) to renovate existing space in the hospital to create two new intensive care units comprising an additional 56 beds. The project is estimated to cost \$3,825,000 and is projected to come on-line in May 2020.

Mr. Parker noted that additional bed capacity at hospitals is also being authorized by the Maryland Department of Health, without CON approval, under the Department's existing authority to allow a hospital to temporarily operate bed capacity that exceeds its licensed bed capacity. These projects are ones that involve reactivation of existing physical bed capacity in place at hospitals.

Mr. Parker recommended that the Commission confirm the issuance of the six emergency CONs

Commissioner O'Grady made a motion to approve the six emergency CON's which was seconded by Commissioner Thomas and unanimously approved.

ACTION: Confirmation of Approved Emergency Certificate of Need for the six emergency CONs is hereby APPROVED.

AGENDA ITEM 8.

ACTION: Approval of a Grant Program to Expand Telehealth Adoption in Ambulatory Practices

David Sharp, Director, Center for Health Information Technology and Innovative Care Delivery presented an *Announcement for Grant Applications, Expanding Telehealth Adoption in Ambulatory Practices* (grant announcement), a funding opportunity for State Designated Managed Service Organizations (MSOs). David mentioned that with the emergence of COVID-19, there is an urgency to increase the use of telehealth to help people who need routine care, keep individuals with mild symptoms at home, and limit exposure to others. The grant announcement includes funding of up to \$500K and is intended to rapidly diffuse telehealth statewide by engaging MSOs. The grant announcement aim, objectives, and timeline were discussed.

Commissioner Boyle made a motion to approve the Grant Program, Commissioner Rymer seconded and the Commission unanimously approved the motion.

ACTION: Approval of a Grant Program to Expand Telehealth Adoption in Ambulatory Practices is hereby APPROVED.

AGENDA ITEM 9.

Chairman Pollak then asked the Executive Director if he any further updates. Mr. Steffen provided a brief overview of the updated national and state-level modeling activities. He noted that model forecasts were converging on the Pandemic peaking in Maryland in late April and early

May. He then informed the Commission that the MHCC was complying to the fullest possible degree with Governor Hogan's Stay At Home Order. The MHCC offices are closed to staff except for three individuals. Any staff needing documents or supplies can enter the building on an appointment-only basis. Mr. Steffen concluded by thanking Levone Ward and his staff for maintaining the MHCC IT infrastructure as we implement virtual operations. He also thanked the MHCC staff for all their work during these challenging times.

ADJOURNMENT

There being no further business, the meeting was adjourned at 9:03 a.m. upon motion of Commissioner Rymer, which was seconded by Commissioner Sergent and unanimously approved.