



Thursday, October 16, 2025

MINUTES

Commissioner Boyle called the meeting to order at 1:05 p.m.

Commissioners present via telephone and in person: Blake, Cheatham, Douglas, Gelrud, Jensen, Spinner, Stroughton-Duncan, Wang.

Commissioners Absent: Agbabiaka, Bhandari, Dzirasa, Foreman and Gilmore.

AGENDA ITEM 1

ACTION: CONSENT AGENDA

A. Approval of Minutes: September 18, 2025

Item 1A was approved without objection.

AGENDA ITEM 2

MHCC's UPDATE ON DRAFT VISION

Dr. Jacobs, Executive Director of the Maryland Health Care Commission (MHCC or Commission) presented an updated overview of MHCC's draft strategic vision, underscoring the significance of operational excellence. He explored this concept from various angles, including access, reducing disparities, and values. In terms of access, Dr. Jacobs pointed out critical areas such as primary care and behavioral health, workforce considerations, prior authorization processes, and coverage options. He spoke about the action items and ideas for executing the vision.

AGENDA ITEM 3

UPDATE OF ACTIVITIES

Dr. Jacobs stated that much is going on with healthcare in the state particularly with the AHEAD Model. On September 23, 2025, Governor Moore directed the Secretary of Health to form a Regulatory Working Group (workgroup). The Commission was named as part of the workgroup alongside the Maryland Department of Health, Maryland Insurance Administration, and Health Services Cost Review Commission. Dr. Jacobs explained that part of the directive was to develop a workplan which specified areas where MHCC has roles related to the primary care

investment targets, post-acute care, and graduation medical education; all of these would be done in conjunction with MHCC's State partners.

Additionally, Dr. Jacobs stated that the State received from CMS the draft terms and conditions for the AHEAD model where the State must select two policy options from two different buckets and, after discussions with stakeholders, and the legislature, the State has to make its selections by January 1, 2027. There are four options in the first bucket: Implementing Medicaid Site Neutrality, (e.g. services done in hospital setting, outpatient practice setting); Improving Access to New or Additional Modes of Care Delivery via Telehealth for Postpartum Care and Telehealth for Fulfilling Interstate Compacts; Advancing Prescription Drugs Price Transparency; and Prohibiting the Use of Non-Compete Clauses to Increase Provider Mobility.

The three options in the second bucket are more challenging: Modifying the Scope of Practice Physicians-(including physician assistants and nurse practitioners); Repealing CON Requirements for all Non-Hospital Settings; Expanding Access to Care by Revising Network Advocacy Provisions. There could be some flexibility with how CMS allows the State to move forward with the second provision. And Expanding Contracting Flexibilities by Repealing any Willing Provider Laws.

Dr. Jacobs mentioned the release of the Primary Care Report and the Utilization Management Reports after the last Commission Meeting accompanied by a rollout plan and a press release. The MHCC also set a placeholder for working on legislation related mergers, acquisitions, and changes in ownership specifically in non-hospital settings.

AGENDA ITEM 4

ACTION: Residences at Vantage Point in Howard County – Need for Nursing Home Beds (Docket No. 25-13-2472)

Columbia Vantage House Corporation d/b/a Residences at Vantage Point, (Vantage Point, or RVP) proposes to change its bed capacity by converting 13-beds of its existing 44 bed nursing home in Columbia, Howard County, to public use.

Vantage Point is a non-profit organization managed by a board of directors, with the organization Life Care Services providing operational support services. Vantage Point is a continuing care retirement community (or CCRC), which is a senior living community that offers a range of housing, amenities, and a continuum of care services. There is no cost associated with the bed conversion, other than planning and legal fees. The existing nursing home at Vantage Point is a CMS five-star rated facility which has 44 beds, all currently restricted for use by residents of the CCRC by regulation.

Eric Baker, Program Manager and CON Analyst, presented the staff recommendations. Mr. Baker stated the proposed project complies with the standards in COMAR 10.24.20, the State Health Plan for Facilities and Services: Comprehensive Care Facility Services (Nursing Home Chapter), and that the criteria were satisfied. The project is needed and cost-effective; the project

facilitates geographic and financial access to services; and the project will have a positive impact on the health care system. Staff recommended approval of the project with three conditions:

1. For three years after receiving first use, Residences at Vantage Point shall document its progress in increasing its number of Medicaid patient days. Residences at Vantage Point shall file reports annually with the Commission auditing its total days and the provision of Medicaid patient days as a percentage of the total days.
2. By year three, Residences at Vantage Point shall agree to serve and maintain a proportion of Medicaid days at its facility that is at least equal to the proportion of Medicaid days in all other nursing homes in the jurisdiction or region (Howard County or the Central Region), whichever is lower, calculated in accordance with Maryland COMAR 10.24.20.05A(2)(b) of the Nursing Home Chapter of the State Health Plan.
3. To address its commitment to Health Equity, before first use, RVP shall establish community partnerships with entities in Howard County that have implemented initiatives to address chronic diseases in at-risk populations. For three years, RVP shall document its strategies that will result in an increase in access to older adults at-risk for chronic diseases. RVP shall, upon admission, screen and develop care plans for each resident seeking a public-use bed regarding their access to primary health care, unmet social needs, and resources that reduce their chronic disease burden. Upon discharge, RVP will utilize the community partnerships for the appropriate referral to assist the patient in meeting one of these three areas.

Commissioner Stroughton-Duncan moved to APPROVE the Residences at Vantage Point in Howard County – Need for Nursing Home Beds, which was seconded by Commissioner Douglas and, after discussion, unanimously approved.

ACTION: Residences at Vantage Point in Howard County – Need for Nursing Home Beds is hereby APPROVED.

AGENDA ITEM 5

ACTION: COMAR 10.25.07 - Finalize amendments to EHN Regulation

Anna Gribble, Assistant Chief of Health Information Technology, presented final draft amendments to COMAR 10.25.07, Certification of Electronic Health Networks and Medical Care Electronic Claims Clearinghouses. The regulations support the implementation of Chapter 791 (SB748) and Chapter 790 (HB 1022), Public Health - State Designated Exchange - Clinical Information (2021), which requires electronic health networks to provide electronic health care transactions to the State-Designated Health Information Exchange (CRISP) for certain public health and clinical purposes. Commissioner Jensen made a motion to approve the regulations as final, which was seconded by Commissioner Gelrud. The motion received unanimous approval.

Commissioner Jensen made a motion to ADOPT COMAR 10.25.07 - Finalize amendments to EHN Regulation, which was seconded by Commissioner Gelrud and, after discussion, unanimously approved.

ACTION: COMAR 10.25.07 - Finalize amendments to EHN Regulation is hereby ADOPTED.

AGENDA ITEM 6

ACTION: Mandated Benefits Study: HB 1147 - Scalp Cooling Systems - Required Coverage

Traci Hughes, a principal consulting actuary with Lewis and Ellis, presented the findings of this study to evaluate the cost of requiring carriers to cover scalp cooling systems for the preservation of hair in connection with chemotherapy treatment. The Insurance Article §15-1501, Annotated Code of Maryland, requires MHCC to annually assess the medical, social, and financial impact of proposed mandated health insurance services that failed to pass during the preceding legislative session or as requested by the General Assembly. The MHCC staff received a formal letter of request to study House Bill 1187 (2025) “Health Insurance - Scalp Cooling Systems - Required Coverage” from the House Health and Governmental Affairs Committee on April 23, 2025.

Commissioner Gelrud moved to APPROVE the Mandated Benefits Study: HB 1147 - Scalp Cooling Systems - Required Coverage, which was seconded by Commissioner Douglas, after discussion, unanimously approved.

ACTION: Mandated Benefits Study: HB 1147 - Scalp Cooling Systems - Required Coverage is hereby APPROVED.

AGENDA ITEM 7

PRESENTATION: COMAR 10.25.17 - Propose Amendments to Prior Auth Regs

Nikki Majewski, Division Chief of Health Information Technology, presented informal draft amendments to the existing preauthorization regulatory framework, COMAR 10.25.17. The amendments align with federal policy, enhance transparency, and support the implementation of Chapter 848 (Senate Bill 791) and Chapter 847 (House Bill 932), Health Insurance – Utilization Review – Revisions (2024). Ms. Majewski stated public comments on the informal draft amendments will be accepted for up to 30 days.

ACTION REQUESTED: NONE

AGENDA ITEM 8

PRESENTATION: Maryland Maternal Health Report Card and Issue Brief

Courtney Carta, Chief Hospital Quality Performance, and Teresa Brown, Methodologist, provided an overview of maternal and child health outcomes in the United States and Maryland, along with current maternal health-related public reporting efforts. The presentation concluded

with a demonstration of the new MDH Maternal Health Hospital Report Card and an update on ongoing maternal health initiatives across the state.

ACTION REQUESTED: NONE

AGENDA ITEM 9

OVERVIEW OF UPCOMING ACTIVITIES

Dr. Jacobs provided a preview of the November Commission meeting, noting several key items: action items for 10.24.06 Data Reporting by Freestanding Medical Health Facilities, CON for AAMC Surgery Center; 2026 MCDB Data Submission Manual; Mandated Benefits Study for SB096; and Mandated Benefits study for SB508. Two presentations: an Update on HIE Implementation of Data Sharing Protections, and Most Costly Prescription Drugs.

ACTION REQUESTED: NONE

AGENDA ITEM 10

ADJOURNMENT

Chair Boyle asked for a motion to adjourn the commission meeting. There being no further business, the meeting was adjourned at 2:54 p.m. upon the motion of Commissioners Gelrud and Douglas.