

MARYLAND HEALTH CARE COMMISSION

UPDATE OF ACTIVITIES

November 2024

EXECUTIVE DIRECTION

Government Relations and Special Project – Tracey DeShields

No Update for the month of November

Maryland Trauma Physician Services Fund

Uncompensated Care Processing

Luminare Health, our third-party administrator (TPA) for the Trauma Fund, processed **\$259,818.77** in uncompensated care claims for the month of October as shown in the chart below. All claims processing is on schedule.

Luminare Health has notified MHCC that they will terminate their contract with MHCC on November 30, 2024 because they are exhibiting the third party administration function. MHCC has released a Request for Proposals (RFP) to select a new contractor. That RFP closes November 29, 2024. MHCC expects about a one month delay in claim processing due to the Luminare contract termination and new contract award.

On-Call Cost

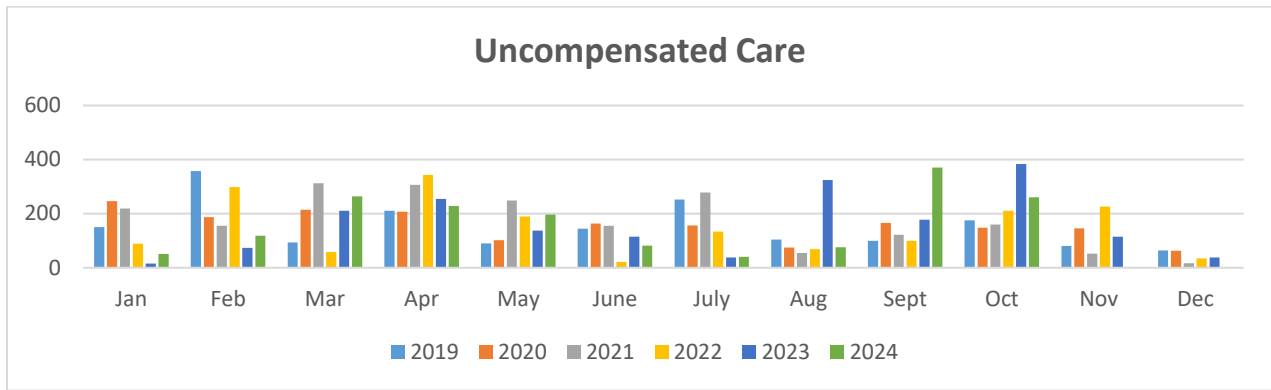
The Commission processed all eligible requests from trauma/specialty centers for reimbursement of On-Call Physician costs for the period January - June 2024. The disbursements final total was **\$7,057,834**.

“Special Equipment” Grant

The Trauma Fund will be issuing a one time “Special Equipment” grant to all Level II and Level III trauma centers. This grant is to close out \$5,000,000 in funds collected in FY 2024 that were unable to be distributed due to legislative caps. Applications are due by November 18, 2024. All Level II and Level III trauma centers have been notified. Each eligible trauma center will be eligible for up to \$714,286 in funds.

COMAR 10.25.10 Maryland Trauma Physician Services Fund

The proposed amendments to Regulations .01-.17 and .19 under COMAR 10.25.10 were printed in the November 01, 2024 Maryland Register. “Request for Public Comment” is posted to our website. Comments will be accepted through December 02, 2024.



MHCC Website: The Maryland Health Care Commission’s (MHCC) website (<https://mhcc.maryland.gov>) had 5,330 visits during the month of October 2024.

Maryland Quality Reporting

Maryland Quality Reporting had 1,561 total users in October, which was similar to the previous month. The website also had similar new users, sessions, and average session duration. The website notably had a 318.3 percent increase in views per session. This was likely due to our presence at the Power of Aging Conference at Timonium Fairgrounds on Wednesday, October 30, 2024.

This month, the site received referrals of at least 10 users or more from Maryland 211(83 or 33.9%), Howard County Government (29 or 11.8%), Maryland Attorney General (13 or 5.3%), People’s Law (12 or 4.9%), and AHRQ (10 or 4.1%).

Facebook returned as the primary social media referral source.

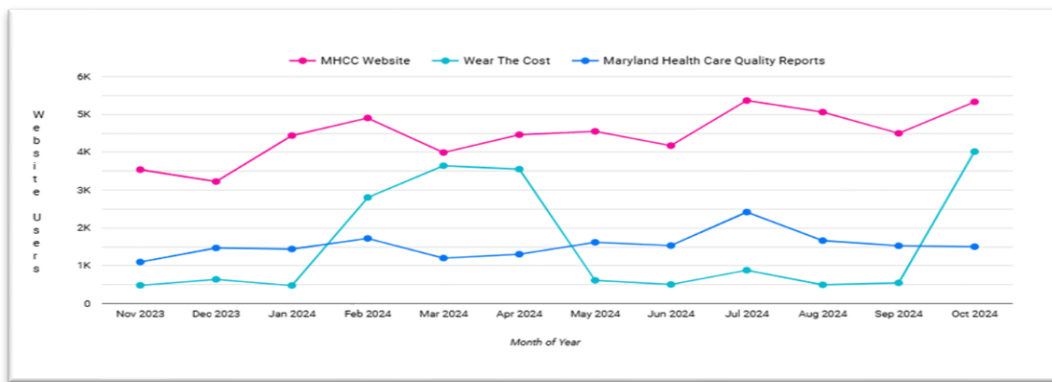


Figure 1 shows the number of website users over a 12-month period for each of the three websites maintained by Commission staff. Specific information about each website is listed above.

CENTER FOR ANALYSIS AND INFORMATION SYSTEMS

Cost and Quality Analysis – Shankar Mesta

MCDB Data Submission Status, Payer Compliance, and Technical Support

By the end of October 22 (63%) payors had submitted Q3 2024 data to the MCDB portal, and 17 (49%) had submitted complete, clean Q3 2024.

For Q3 2024 payor data, nine payors (26%) passed all levels of data quality validation checks. Eight payors (23%) have submissions currently under review, and 13 payors (37%) have yet to submit their Q3 2024 data. To assist in collecting this information, Onpoint staff will send weekly reminders to payors urging them to submit clean data before the November 30, 2024, deadline.

CAIS is pleased to announce that the 2023 MCDB data is now available for use by authorized users. This data had previously passed all validation checks for 2023. Onpoint delivered the HSCRC standard analytical file (SAF) during the last week of October. The HSCRC SAF is a subset of the MCDB data that is formatted and standardized according to the specifications of the HSCRC. The HSCRC SAF is used by HSCRC staff and contractors for various purposes, such as total cost of care and policy evaluation.

2025 MCDB Data Submission Manual

The 2025 MCDB Data Submission Manual has been successfully revised. While Maryland's reporting requirements remain unchanged, the manual now includes a new Infant Birth Weight field in the institutional file. In the 2025 APM data collection template, the Financial, Financial – Episodes, and Contract Information tabs have been consolidated into a single financial tab. Column headers have been updated for consistency across all tabs, unnecessary fields have been removed, existing fields have been updated for consistency, and a few new fields have been added. The "HCP-LAN Payment Category" field has been replaced with the Expanded Non-Claims Payment Framework fields: "Payment Category" and "Payment Subcategory," providing greater detail on payment purposes and provider risk levels. Additionally, a new "Primary Care" data collection tab has been added.

MHCC staff shared the draft version with payor representatives for their feedback on the new changes. Staff will present the latest manual for approval at the November Commissioners meeting. The manual will be posted immediately after the meeting, pending Commissioner's approval.

APCD Public Reporting and Data Release – Mahlet 'Mahi' Konjitt-Solomon

Wear The Cost Contract Development

The MHCC team, in collaboration with the Assistant Attorneys General (AAGs) and Change Healthcare (CHC), has been working on developing a five-year sole source contract for the episode development work of Wear The Cost. Once completed the contract will be submitted to the Board of Public Works. This strategic partnership aims to streamline the development process and drive continuous updates and improvements to the Wear The Cost website.

Data Release Activities

The Data Release Advisory Committee (DRAC) members met on October 11th to review three applications. Two applications were approved: Christine Yee's research on, "Comparing Utilization, Outcomes, and Choice between VHA and non-VHA Health Care Systems," and Robert McQueen's study on, "Diabetic Ketoacidosis Trends and Resource Utilization at Diagnosis of Type 1 Diabetes in the United States". The third application from Katie Corcoran on "Collaborative Research: HNDS-R Networks and Health Disparities in Delays in Diagnosis of Medical Conditions with Ambiguous Symptoms" requires additional information before a final decision can be made. The Executive Director approved both recommended applications. Data Use Agreements and invoices were sent to Christine Yee and Robert McQueen for their signature and payment.

HB 570/SB 487 Study Progress

In response to Chair Joseline Pena-Melnyk's request, MHCC is conducting a study comparing payment methodologies for non-participating providers between HMOs and PPOs. The study specifically examines the implications of requiring HMOs to pay either 125 percent of their average 2019 rate adjusted for inflation, or

140 percent of the 2008 Medicare rate adjusted for inflation for evaluation and management services. The MHCC team completed initial data collection from major insurance carriers on contract terminations and network participation from 2019 through Q2 2024. Analysis using the Medical Care Data Base (MCDB) to compare HMO and PPO payment rates is currently in progress. The team has also integrated data from the federal Independent Dispute Resolution (IDR) process and the Health Education and Advocacy Unit (HEAU) to provide context on dispute resolution patterns under the No Surprises Act. The draft report is currently being finalized and will be submitted to the Committee by the December 31, 2024 deadline.

CENTER FOR HEALTH CARE FACILITIES PLANNING AND DEVELOPMENT

Acute Care Policy and Planning – Eileen Fleck

Certificates of Ongoing Performance

The Commission approved Johns Hopkins Bayview Medical Center’s application for a Certificate of Ongoing Performance (COP) for percutaneous coronary intervention services at the October meeting (Docket No. 24-24-CP045). The COP approval is for four years, with one condition.

Cardiac Services Advisory Committee

Cardiac Services Advisory Committee (CSAC) members met on October 23, 2024 to discuss issues related to allowing elective percutaneous coronary intervention services in ambulatory surgery centers. The consensus of CSAC members was that more data and information is needed on how other states were regulating the procedure, as well as workforce issues. A date for any future meetings has yet to be determined.

Long-Term Care Policy and Planning – Jeanne Marie Gawel

Special Chronic Hospital Occupancy Reports

Consistent with the State Health Plan’s Chapter on Special Hospital-Chronic Services (COMAR 10.24.08), the Chronic Hospital Occupancy reports are published in the *Maryland Register*. The “Use of Special Hospital Chronic Beds: Maryland, FY 2024” and “Average Annual Chronic Hospital Occupancy Rates by Jurisdiction and Facility, Maryland, Fiscal Years 2022 – 2024” reports have been submitted and both occupancy reports are anticipated to be published in the December 2nd issue of the *Maryland Register*.

Home Health Annual Survey

The 2023 Home Health Survey is scheduled to go out on November 11, 2024. The collection period will be November 11, 2024, to January 9, 2025. Notices have been sent to each of the Maryland Home Health Agencies.

Facility Services Planning and Policy/Certificate of Need – Jeanne Marie Gawel, Acting

Certificate of Need (CON)

Determinations of Coverage

- **Ambulatory Surgery Centers**

Summit Ambulatory Surgical Center, LLC (Baltimore City and Counties of: Anne Arundel, Baltimore, Carroll, Harford, Howard, Montgomery, Prince George’s, and Wicomico)

A change in ownership for sixteen (16) ambulatory surgery centers (ASCs) owned by Summit Ambulatory Surgical Center, LLC (Summit). Summit states that the transaction involves an indirect change for one of Summit's current minority equity owners. Summit will remain the owner and operator of all 16 ambulatory surgery centers. Summit indicated the ASC's day-to-day operations will remain the same after the ownership change. The name and address of the Summit ambulatory surgery centers (ASCs) are:

Summit Ambulatory Surgical Center, LLC (ASC – 1)
810 Bestgate Road, Suite 200
Annapolis, MD 21401

Summit Ambulatory Surgical Center, LLC (ASC – 1)
6820 Hospital Drive, Suite #200
Baltimore, MD 21237

Summit Ambulatory Surgical Center, LLC (ASC – 2)
1838 Greene Tree Road, Suite #450
Baltimore, MD 21208

Summit Ambulatory Surgical Center, LLC (ASC – P)
3333 N. Calvert Street, Suite 600
Baltimore, MD 21218

Summit Ambulatory Surgical Center, LLC (ASC – 2)
6535 N. Charles Street, Suite 625
Baltimore, MD 21204

Summit Ambulatory Surgical Center, LLC (ASC – 1)
3407 Wilkens Avenue, Suite 200
Baltimore, MD 21229

Summit Ambulatory Surgical Center, LLC (ASC – 1)
201 Plumtree Road, Suite #200
Bel Air, MD 21015

Summit Ambulatory Surgical Center, LLC (ASC – 1)
7704 Matapeake Business Drive, Suite #300
Brandywine, MD 20613

Summit Ambulatory Surgical Center, LLC (ASC – 1)
10710 Charter Drive, Suite #140
Columbia, MD 21044

Summit Ambulatory Surgical Center, LLC (ASC – 1)
19851 Observation Drive, Suite #445
Germantown, MD 20876

Summit Ambulatory Surgical Center, LLC (ASC – 2)
7580 Buckingham Blvd., Suite 100
Hanover, MD 21076

Summit Ambulatory Surgical Center, LLC (ASC – 1)
21 Crossroads Drive, Suite #220
Owings Mills, MD 21117

Summit Ambulatory Surgical Center, LLC (ASC – 2)
 12435 Park Potomac Avenue, Suite #410
 Potomac, MD 20854

Summit Ambulatory Surgical Center, LLC (ASC – 1)
 1111 Mount Hermon Road
 Salisbury, MD 21804

Summit Ambulatory Surgical Center, LLC (ASC – 1)
 3801 International Drive, #300
 Silver Spring, MD 20906

Summit Ambulatory Surgical Center, LLC (ASC – 1)
 410 Malcolm Drive, Suite A
 Westminster, MD 21157

Clearway Surgery Center of National Harbor (Prince George’s County)

Clearway Surgery Center of National Harbor requested to establish an ambulatory surgery center (ASC) at 251 National Harbor Boulevard, Suite #502 in Oxon Hill, Maryland 20745. The proposed ASC will operate with one sterile operating room and one non-sterile procedure room.

Clearway Surgery Center of Easton, LLC (Talbot County)

Clearway Surgery Center of Easton requested to add one sterile operating room to an existing ambulatory surgery center (ASC-P) at 598 Cynwood Drive, Suite 103 in Easton, Maryland 21601. Upon completion of renovations, the ASC will operate with one sterile operating room and one non-sterile procedure room.

Clearway Surgery Centers (Counties of: Anne Arundel, Calvert, Cecil, Charles, Frederick, Howard, Montgomery, Talbot, and Wicomico)

A change in ownership for 10 ambulatory surgery centers (all ASC-P) owned by Clearway Surgery Center. The locations, current owners, post-transaction owners and the effective dates are listed in the table below.

Location	Current Owner	Post-Transaction Owner	Effective Date
110 Hospital Drive, #304, Prince Frederick, Maryland	Kure Pain New Co, LLC 100%	Kure Pain LLC 75% Ehsan Abdesahian, MD 15% Charles Simmons, MD 10%	10/1/24
7704 Quarterfield Road #F Glen Burnie, Maryland	Kure Pain New Co, LLC 100%	Kure Pain LLC 90% Rock Lee Surgery Centers, LLC 10%	6/26/24
Clearway Surgery Center of Easton 598 Cynwood Drive #103	Kure Pain New Co, LLC 100%	Kure Pain New Co, LLC 80% Greesh, John, MD 20%	3/1/24
Clearway Surgery Center of Salisbury 6503 Deere Pointe Drive Suite B	Kure Pain New Co, LLC 100%	Kure Pain LLC 67% Ehsan Abdesahian, MD 15% Aneesh Singla 18%	8/1/24

Clearway Surgery Center of Elkton 101 Chesapeake Blvd. #C2	Kure Pain New Co, LLC 100%	Kure Pain New Co, LLC 80% Aaron McPeak, DO 20%	12/1/24
Clearway Surgery Center of Columbia 5500 Knoll Dr. #501	Kure Pain New Co, LLC 100%	Kure Pain New Co, LLC 75% Maria Hameed, MD 25%	3/1/24
Clearway Surgery Center of Waldorf 3261 Old Washington Rd. #3010 A	Kure Pain New Co, LLC 100%	Kure Pain LLC 80% Ehsan Abdesahian, MD 10% Maria Hameed, MD 10%	3/1/24
Clearway Surgery Center of Annapolis 810 Bestgate Road #120	Kure Pain New Co, LLC 100%	Kure Pain New Co, LLC 78% Rock Lee Surgery Center 10% 3:16 LLC 6% Archer Health, LLC 6%	7/1/24
Clearway Surgery Center of Bethesda 6410 Rockledge Drive Suite 400	Kure Pain New Co, LLC 100%	Kure Pain LLC 80% Anna Irwin, DO 20%	9/1/23

Clinical Associates Ambulatory Surgery Center (Baltimore County)

Clinical Associates Ambulatory Surgery Center notified MHCC about a medical staff addition and a name correction of medical staff at Clinical Associates Ambulatory Surgery Center at 515 Fairmount Avenue, Suite 100 in Towson, MD 21286 (Baltimore County). The name correction is to Dr. Richard Pressel; his first name is Michael David Pressel, M.D., not Richard. The staff addition is Michelle Bruno, physician assistant, who will perform the insertion of the cardiac loop monitor.

Johns Hopkins Surgery Centers Series – White Marsh (Baltimore County)

An addition and update of surgical specialties at Johns Hopkins Surgery Centers -White Marsh location which has two sterile operating rooms, and two non-sterile procedure rooms located at 4924 Campbell Boulevard, Suite 250 in Nottingham, Maryland.

Johns Hopkins Surgery Center Series -Fertility Center (Green Spring Station IVF Surgery Center) (Baltimore County)

Adding Urology to the surgical specialties at Johns Hopkins Surgery Centers-Fertility Center located at 10755 Falls Road, Pavilion 1, Suite 480 in Lutherville-Timonium Maryland.

Potomac View Surgery Center, LLC (Prince George’s County)

A change of ownership of the existing ASC-1 located at 6710 Oxon Hill Road #150, Oxon Hill, Maryland. The change of ownership pre- and post transaction is as follows:

Owner	Pre-Transaction Ownership	Post-Transaction Ownership
Alidad Arabshahi, M.D.	3.08%	0.00%
Asheesh Gupta, M.D.	3.08%	0.00%
Ramin Ipakchi, M.D.	2.46%	0.00%
Richard Lee Layfield III, M.D.	2.46%	0.00%
Paymaun Lotfi, M.D.	3.69%	0.00%
Thomas Martinelli, M.D.	1.85%	0.00%
M. Tarek Orfaly, M.D.	2.46%	0.00%
Ron Paik, M.D.	2.77%	0.00%
Cyrus Press, M.D.	3.08%	0.00%
Iyad Saidi, M.D.	1.54%	0.00%
Owolabi Shonuga, M.D.	1.54%	0.00%
Ravi Swamy, M.D.	2.46%	0.00%
Daniel E. Thompson, M.D.	3.69%	0.00%
Daniel E. Weingold, M.D.	2.77%	0.00%
Colvin Wellborn, M.D.	3.08%	0.00%
USP Maryland, Inc.	60.00%	0.00%
M2O/USP Holdings I, LLC	0.00%	60.00%
The Anderson Clinic, LLC	0.00%	40.00%

• **Other**

Community Radiology Associates (Prince George’s County)

Requested a Determination of Non-Coverage for three imaging centers located at:
7140 Contee Road, Suites 2000/3000, Laurel MD 20707
950 Harry S. Truman Drive, Suite 150, Largo, MD 20774, and
9131 Piscataway Road, Suite 110 Clinton, MD 20735.

Imaging services are not considered a “medical service” under Health General §19-120 and Community Radiology Associates is not considered a “health care facility” within Health General §19-114. Therefore, the above imaging facilities do not require a CON or any other MHCC approval.

Luminis Health Doctors Community Medical Center Docket No. 23-16-2466 (Prince George’s County)

Luminis Health requested a six-month extension to its first performance requirement, which requires obligation of no less than 51 percent of the approved capital expenditures by December 14, 2024. The new deadline for the performance requirement is June 14, 2025.

Pending Notices of Acquisition/Change of Ownership for Comprehensive Care Facilities (Nursing Homes)

St. Elizabeth Rehabilitation and Nursing Center (Baltimore County)

St. Elizabeth Rehabilitation and Nursing Center (St. Elizabeth) is a 162-bed comprehensive care facility (CCF) located at 3320 Benson Avenue in Baltimore County Maryland. There are no beds at the facility with more than two residents per room. The facility currently has an above-average 5 out of 5-star rating on the Centers

for Medicare & Medicaid Services (CMS) Nursing Home Compare website. The facility has a Memorandum of Understanding (MOU) with Medicaid to maintain 66.0 percent of its patient days for Medicaid, however the threshold for Baltimore County is only 46.6 percent.¹ The facility is currently achieving 64percent, which is slightly short of its MOU but is well above the threshold for Baltimore County. If this were a Certificate of Need (CON) review, the applicant would have the opportunity to renegotiate its MOU to the Baltimore County threshold. The anticipated closing date of the transaction is December 1, 2024. The transaction is described below:

Transaction: Acquisition of assets

CURRENT

Owner of the real property: Jenkins Memorial Nursing Home, Inc.

Owner of bed rights: Jenkins Memorial Nursing Home, Inc.

Operator: Jenkins Memorial Nursing Home, Inc. dba St. Elizabeth Rehabilitation and Nursing Center

POST-TRANSACTION

Owner of the real property: St. Elizabeth Propco LLC

Owner of bed rights: St. Elizabeth Opco LLC

Operator: St. Elizabeth Opco LLC

Purchase price: \$36,000,000.

Acquiring Entity

St. Elizabeth Opco LLC is 100% owned by St. Elizabeth Opco Holdco, LLC which is owned by Vierra Communities LLC. Vierra Communities LLC is owned by the Derek R. Vucich Trust (99.5%) and the Derek R. Vucich Revocable Trust (0.5%) of which Derek R. Vucich is the sole beneficiary. A complete ownership chart is attached to the Notice of Acquisition.

According to the CMS Nursing Home Compare data the acquiring entity owns one other CCF in Maryland. The facility is Carriage Hill Bethesda, which has a 4-star rating, and 4-star facilities are considered above average by the Centers for Medicare & Medicaid Services (CMS).

St. Elizabeth's currently has an MOU with Medicaid of 66%. Using the most current MHCC data available (2022), the facility is achieving 64% patient days for Medicaid residents, however the threshold in Baltimore County is only 46.6% and if this were a CON review the acquiring entity would be eligible for a lower threshold.

The acquiring entity has provided evidence (meeting dates) that Carriage Hill Bethesda maintained quality assessment and assurance committees. The committees meet quarterly and look at three months of data, meeting on the fourth Wednesday of each quarter.

Commission staff also reviewed the most recent annual inspection reports and the subsequent plans of correction for the one affiliated Maryland facility, Carriage Hill Bethesda which had seven citations in its latest survey (2024²). Facility staff wrote plans of correction for each deficiency and the plans of correction were accepted. The breakdown of deficiencies is below:

Carriage Hill Bethesda

Freedom from Abuse, Neglect and Exploitation 0

¹https://mhcc.maryland.gov/mhcc/pages/hcfs/hcfs_ltc/documents/chcf_ltc_nh_med_assist_part_rates_fy21_20230519.pdf

² The previous surveys in 2023 had 7 citations and 2022 had 25 citations, the Maryland average is 16.2.

Quality of Life 2
Infection Control 0
Resident Assessment and Care Planning 2
Nursing and Physician Services 1
Resident Rights 0
Nutrition and Dietary 1
Pharmacy Services 1
Environmental 0
Administration 0

Carriage Hill Bethesda was purchased by the acquiring entity in 2022, whereafter deficiencies fell from 25 in 2022 to seven in 2023 and 2024. Carriage Hill Bethesda has also had one immediate jeopardy citation in 2022 for a level 4 Quality of Life citation and the plan of correction was accepted.

Commission staff reviewed the disclosure of any lawsuits/arbitrations by using both a Federal and State database as well as a search of the Office of Inspector General Exclusions and did not find anything substantive. In addition, the acquiring entity attested that none of the purchaser's principals — i.e., any owner³ or former owner, member of senior management or management organization, or current or former owner or senior manager of any related or affiliated entities during the past ten years – has:

- been convicted of felony or crime;
- pleaded guilty, nolo contendere, or entered a best interest plea of guilty;
- received a diversionary disposition regarding a felony or crime that relates to the ownership or management of a health care facility; or
- has paid a civil penalty in excess of \$10 million dollars.

Recommendation

In accordance with Health- General §19-1401.2, before taking any action on a license, the Secretary must consider any findings and recommendations of MHCC to the Office of Health Care Quality under Health-General §19-115.

In summary of the findings, Commission staff concludes that a 4-star (considered above average) rating with CMS would probably meet the Quality Rating standard at COMAR 10.24.20.05A(8), which would be required to obtain a Certificate of Need to establish or expand a CCF. In addition, the acquiring entity's adherence to its quality assurance meetings, and performance on annual inspections provide evidence of a commitment to quality of care. Based on its limited review, Commission staff has not identified any concerns with the prior performance of the acquiring entity in Maryland.

Creekside Center for Rehabilitation and Nursing (Washington County)

Review in progress

Creekside Center for Rehabilitation and Nursing (Creekside) is an 80-bed CCF located at 1183 Luther Drive in Hagerstown, Maryland (Washington County). There are no beds at the facility with more than two residents per room. The facility currently has an average of 1 out of 5-star rating on the CMS Nursing Home Compare website. The anticipated closing date of the transaction is November 1, 2024. There are no changes to the real property, bed rights or operator ownership however the individual who is the sole owner and member of the current operator (Abraham Smilow) will convey his full interest (100%) to a new individual (Matt Weisz). The transaction is described below:

³ The definition of owner or operator is an entity that owns at least 5% and is the owner of the real property and improvements; the owner of the bed rights; or the operator of the facility.

CURRENT

Owner of the real property: 1183 Luther Drive LLC
Owner of bed rights: 1183 Luther Drive LLC
Operator: Creekside SNF Operating Company LLC

POST-TRANSACTION

Owner of the real property: 1183 Luther Drive LLC
Owner of bed rights: 1183 Luther Drive LLC
Operator: Creekside SNF Operating Company LLC
Purchase price: \$0

Williamsport Health and Rehabilitation Center (Washington County)

CURRENT

Owner of the real property: 154 N Artizan Street LLC
Owner of bed rights: 154 N Artizan Street LLC
Operator: Brooke Grove Foundation, Inc.

POST-TRANSACTION

Owner of the real property: 154 N Artizan Street LLC
Owner of bed rights: 154 N Artizan Street LLC
Operator: Williamsport Operator LLC
Purchase price: \$20,000,000. (paid in the original acquisition)

Additional Information

This summary is related to a previous transaction for which the Commission sent findings and recommendations to OHCQ on September 12, 2024, with a closing date of October 1, 2024. The original acquisition was completed on October 1, 2024, for the real property and bed rights only. The planned acquisition for the operator never closed. The applicants are now submitting a new application for a new acquiring entity for all three entities: the real property, bed rights and operatorship.

For this new acquisition planned for November 1, 2024, the operations will change from Brooke Grove Foundation, Inc. to Williamsport Operator LLC.

The bed rights and real property will still be owned by 154 N Artizan Street LLC, but they are undergoing a transfer of ownership interest, which will result in 154 Artizan having the same owners as the operator: Williamsport Operator LLC.

Williamsport Health and Rehabilitation Center (Williamsport) is a 128-bed CCF located at 154 N. Artizan Street in Williamsport, Maryland (Washington County). There are no beds at the facility with more than two residents per room. The facility currently has an average of 1 out of 5-star rating on the CMS Nursing Home Compare website. The facility has a Medicaid MOU of 45.3 percent. The threshold in Washington County is also 45.3 percent. The facility is currently achieving 55 percent; thus, it would meet and exceed both the MOU and the county threshold. The anticipated closing date of the transaction is November 1, 2024.

The acquiring entity for the operator is Williamsport Operator LLC. It will be managed by Williamsport Opco Manager LLC (Avrohom Kohn). Williamsport Operator LLC is owned by Williamsport Operator Holdings LLC, which has three owners with more than five percent ownership interest: ISVA Holdings LLC, MLVA Holdings LLC and JKVA Holdings LLC each with 31.028 percent. Avrohom Kohn is the manager for all three LLCs. These three owners do not own any nursing homes in Maryland; they own six in Virginia. Avrohom Kohn has an ownership interest in four other CCFs in Maryland. Staff notes that three of the four (75%) facilities have a

below average rating (composite score of less than three stars out of five) in the CMS Nursing Home Compare Five-Star Quality Rating System.

The acquiring entities attest that Avrohom Kohn's Maryland facilities hold quality assurance meetings quarterly in January, April, July, and October. In addition, Commission staff reviewed the most recent annual inspection reports and the subsequent plans of correction for the four affiliated facilities. In 2024 the national average number of nursing home deficiencies is 9.5. Of the four facilities reported in the analysis, three (75%) were above the average number of national deficiencies (lower scores are better for this measure). There were multiple facilities with immediate jeopardy citations within the last three years. See Attachment 1.

The acquiring entities attest that the related Virginia facilities to ISVA Holdings LLC, MLVA Holdings LLC and JKVA Holdings also hold quality assurance meetings quarterly. See Attachment 1. In addition, Commission staff reviewed the most recent annual inspection reports and the subsequent plans of correction for the six affiliated facilities. In 2024 the national average number of nursing home deficiencies is 9.5. Of the six facilities all but one were higher than the average. See Attachment 1.

Lawsuits

The acquiring entities provided numerous lawsuits related to negligence for each related Maryland nursing home in Attachment 1. In addition, the acquiring entities attested that none of the purchaser's principals — i.e., any owner¹ or former owner, member of senior management or management organization, or current or former owner or senior manager of any related or affiliated entities during the past 10 years — has:

- been convicted of felony or crime;
- pleaded guilty, nolo contendere, or entered a best interest plea of guilty;
- received a diversionary disposition regarding a felony or crime that relates to the ownership or management of a health care facility; or
- has paid a civil penalty in excess of \$10 million dollars

Recommendation

In summary of the findings, Commission staff concludes that due to 83 percent of the related facilities being below average (below three stars) the acquiring entities (ISVA Holdings LLC, MLVA Holdings LLC and JKVA Holdings LLC) would probably not meet the requirements of docketing a CON application to establish or expand a CCF under the State Health Plan Quality Rating standard [COMAR10.24.20.05A (8)].

In addition, 75 percent of the related facilities to Avrohom Kohn, have a below average score and would probably not meet the requirements for docketing a CON application. Multiple facilities of the acquiring owners received several high-level deficiencies for resident health and safety as shown in Attachment 1. Lastly, one of the four facilities related to Avrohom Kohn (Elkton Nursing and Rehabilitation Center) is currently a candidate to become a Special Focus Facility with CMS.

Based on its limited review, Commission staff has identified concerns with the performance of the related facilities. Commission staff recommends that OHCQ consider this information in its licensing decision.

**CENTER FOR HEALTH INFORMATION TECHNOLOGY & INNOVATIVE CARE
DELIVERY**

Health Information Technology Division – Nikki Majewski, Division Chief

Telehealth Studies

A telehealth recommendations report and two technical findings reports were submitted to the General Assembly. The reports fulfill study provisions in Chapter 382 (SB 534), *Preserve Telehealth Access Act of 2023* and Chapter 291 (HB 1148), *Behavioral Health Care – Treatment and Access* (Behavioral Health Model for Maryland) (2023) that required MHCC to make recommendations on the delivery of somatic and behavioral health services through audiovisual and audio-only modalities by December 1, 2024. The recommendations aim to preserve telehealth coverage and reimbursement in alignment with federal policy. Milliman, Inc. was competitively selected to support the study by developing actuarial models to examine telehealth and in-person reimbursement rates using private payer, Medicaid, and Medicare data (2019-2023) from MHCC’s All Payer Claims Database.

Prior Authorization

Draft recommendations pertaining to prior authorization reporting, technology, and monitoring were vetted with select stakeholders. Chapters 847/848 (HB 932/SB 791), *Health Insurance – Utilization Review – Revisions* (2024) requires MHCC and the Maryland Insurance Administration to study the development of standards for modifying prior authorization requirements for prescription drugs, medical care, and other services, including adjustments to prior authorization requirements that have been implemented or considered by other states. An environmental scan included a review of federal and state reforms and highlighted efforts to increase access to interoperable patient data. Findings and recommendations are due to the General Assembly by December 1, 2024.

Hospital Health IT Survey

Data collection for the annual *Hospital Health IT Survey* (survey) were completed. Analysis is underway to identify trends and other data insights regarding hospitals’ use of health IT, including electronic health records (EHR), health information exchange (HIE), and telehealth. The survey included questions on cybersecurity, health-related social needs, efforts to promote advance care planning and document advance directives in the EHR, and adoption of artificial intelligence. Data analysis is targeted for completion in November.

Regulations

Proposed amendments to COMAR 10.25.07, *Certification of Electronic Health Networks and Medical Care Electronic Claims Clearinghouses* and COMAR 10.25.18, *Health Information Exchanges: Privacy and Security of Protected Health Information* (regulations) were submitted to the Governor’s office and the Joint Committee on Administrative, Executive, and Legislative Review. The regulations support the implementation of legislation passed by the General Assembly in 2021 and 2022 requiring CRISP to develop a consumer consent management application; electronic health networks (EHNs) to submit certain electronic administrative transactions to CRISP; dispensers to report noncontrolled prescription drugs (non-CDS) dispense information to CRISP; and CRISP to operate a health data utility. The proposed amendments are anticipated to be published in the Maryland Register in December.

Legally Protected Health Information

Vendor requests for exemptions specific to requirements for legally protected health information (LPHI) are under review. COMAR 10.25.07 and COMAR 10.25.18 prohibits EHNs and HIEs from disclosing LPHI, as required by Chapter 249 (House Bill 812), *Health Reproductive Health Services – Protected Information and Insurance Requirements* (2023). The Maryland Department of Health regulations, COMAR 10.11.08, *Abortion Care Disclosure*, include codes defining LPHI and were published as final in the Maryland Registry on September 16, 2024.

Non-CDS Prescription Drugs

Public comments on the draft Noncontrolled Prescription Drugs Dispenser Data Submission Manual (manual) were received from four organizations. Feedback was considered and non-technical edits were made to clarify certain information in the manual. The manual provides guidance to dispensers on the format, method, and frequency of submitting non-CDS dispense information to CRISP. Staff plans to seek additional stakeholder review of the manual during the winter. Proposed amendments to COMAR 10.25.18 require dispensers to start reporting non-CDS dispenses by September 1, 2025.

Electronic Data Interchange

Drafting of a summary highlighting findings from payers 2023 Electronic Data Interchange Progress Report is progressing. Payers with premiums of \$1 million or more are required by COMAR 10.25.09, *Requirements for Payers to Designate Electronic Health Networks*, to annually report census-level data on electronic health care transactions. The summary is targeted for release by the end of the year.

CRISP Privacy and Security Audit Review

The annual review of privacy and security audit reports for CRISP and its subcontractors is advancing. The review centers on assessments conducted by independent third-parties on the adequacy of business and technology-related controls. Meyers and Stauffer, LC (MSLC) was competitively selected to complete the review and make recommendations for enhancing privacy and security policies. MSLC is expected to release a findings report in Q1 2025.

Innovative Care Delivery Division – Melanie Cavaliere, Division Chief

Primary Care Investment Workgroup

The 2024 Primary Care Investment Analysis and Recommendations Report (report) required by Chapter 667 (SB 734), *Maryland Health Care Commission – Primary Care Report and Workgroup*, (2022) was submitted to the General Assembly. The law requires MHCC to complete an annual analysis of primary care and make recommendations on the level of primary care investment relative to overall health care spending. The report includes recommendations to strengthen Maryland’s primary care system and is due to the General Assembly by December 1, 2024.

Practice Transformation Grant

The 2024 Advancing Practice Transformation in Ambulatory Practices Program (program), which aligns with CMS’s Transforming Clinical Practice Initiative milestones, is currently recruiting ambulatory practices. About 20 practices are expected to submit an application in Q4 2024. The program prepares practices to participate in value-based care models. In 2021, MHCC awarded a grant to MedChi, The Maryland State Medical Society, Care Transformation Organization to support this initiative.

Learning Network

A learning event was held that centered on accessing and utilizing CRISP data to improve clinical care. Presenters included CRISP’s Public Health Modernization Executive Director and three practices who shared best practices for leveraging data to enhance care delivery and manage chronic conditions. Attendees qualify

to receive continuing medical education credits. Planning is progressing for a learning network event in December focused on advancing care delivery through continuous quality improvement.

Episode Quality Improvement Program Primary Care Initiative

Support for the Health Services Cost Review Commission in reviewing applications for its Episode Quality Improvement Program (EQIP) Primary Care (PC) Pilot Program is nearing completion. The EQIP-PC funding announcement, released in July, seeks to competitively provide startup infrastructure funding to enhance advanced primary care capacity in designated areas of the State. The program is expected to launch in January 2025.

CENTER FOR QUALITY MEASUREMENT AND REPORTING

The Maryland Quality Reporting (MQR) website

The Maryland Quality Reporting (MQR) website

MQR Website Updates

Staff continue to work with Advanta Government Services (AGS), the website contractor, to update the [Maryland Quality](#) consumer site. Additional enhancements and updated features are underway and routine updates and maintenance are ongoing. Staff continue to respond to consumer inquiries and requests for printed material received via the quality reports email. **MQR Website Traffic**

Staff monitors traffic to the consumer site using Google Analytics software. Website traffic was similar in October (1,561 users) compared to September (1,567 users). The most frequently viewed topics on the MQR site include assisted living, nursing homes, and the long-term care planning toolkit. Traffic to the site is presented graphically under the Executive Direction section of this update.

MQR Website Promotion

There were approximately 80 social media posts in October. Topics included Health Literacy Month, Breast Cancer Awareness Month, and general promotional posts for the MQR website. These topics generally coincide with the U.S. Department of Health and Human Services National Health Observances or other important health related events and are designed to link readers back to the MQR website. Staff also promoted the MQR website using additional social media platforms such as LinkedIn and NextDoor.

CQMR in the Community

Staff sponsored a table at the Baltimore County Department of Aging annual Power of Aging Expo. Staff interacted with hundreds of seniors to describe our website and resources. These community events provide a unique opportunity to not only promote and discuss the quality website with community members, but also share with and learn from other organizations committed to improving the lives of Maryland residents.



Hospital Quality Initiatives – Courtney Carta

HB1051 Maternal Health – Assessment, Referrals, and Reporting

Under HB 1051, the Health Secretary, in collaboration with the MHCC, must develop a Maryland report card for birthing facilities (hospitals and freestanding birthing centers) and collect the necessary information to complete an annual report card for each birthing facility in the state. Staff are working closely with MDH and other stakeholders to support this effort and continue to provide quality measurement expertise.

Long Term Care and Health Plan Quality Initiatives—Stacy Howes

Nursing Home Family Experience of Care Survey

Data collection for the 2024 survey year has begun. The first round of emails and letters inviting loved ones to complete the survey have been delivered. As of November 1, almost 2,000 completed surveys had already been received.

Long Term Care Health Care Worker Influenza Vaccination Surveys

Nursing homes, assisted living facilities, home health agencies, and hospices continue to collect data for the 2024-2025 flu season.

Health Plan Quality Initiatives

Data for the year 2023 is complete, and the data is being formatted for the website. Staff are completing information sheets for the website about the highest and lowest performing health plans and the highest and lowest performing health measures. Staff will work with the contractor, HealthData Company, to identify areas of additional investigation to support the Commission’s dedication to advancing health equity.

Outpatient Quality Initiative—Mariama Simmons

Freestanding Ambulatory Surgery Facility (FASF) Survey

Staff are working with Quality Reporting vendor to update website with the results of the 2023 survey results. Staff continues to collaborate with other Commission staff to report on various projects that require data on ambulatory surgery centers. These analyses range from helping the Health Planning and Facilities team calculate charity care averages to identifying volumes of surgeries performed in specific specialty types. FASF survey results are also used to validate and review data from other data sources, such as the All Payer claims

Data (APCD). While not specifically related to ASCs, staff worked with the Executive Director to develop a survey to collect information on the involvement of private equity firms in Maryland's health care system.