



Thursday, January 15, 2026

MINUTES

Commissioner Gelrud called the meeting to order at 1:04 p.m.

Commissioners present via telephone and in person: Bhandari, Blake, Cheatham, Douglas, Dzirasa, Foreman, Gelrud, Gilmore, Jensen,¹ O’Kane, Spinner, and Wang

Commissioners Absent: Agbabiaka, Boyle, and Stroughton-Duncan.

AGENDA ITEM 1

ACTION: CONSENT AGENDA

- A. Approval of Minutes: December 11, 2025, meeting minutes
- B. Approval of Minutes: December 12, 2025, retreat minutes.

Item 1A and 1B were approved without objection.

AGENDA ITEM 2

UPDATE OF ACTIVITIES

Dr. Jacobs, Executive Director, provided an overview of the upcoming Maryland Health Care Commission (MHCC or Commission) meeting.

Dr. Jacobs gave significant updates, which included the announcement of the rural health transformation program, with Maryland being awarded \$168 million. Discussions are ongoing between the Maryland Department of Health and the Centers for Medicare & Medicaid Services (CMS) regarding approved programs and budget details. MHCC is working with CRISP, the State-designated health data utility, to enhance provider connectivity in rural areas, particularly focusing on integrating EMS medical record systems with CRISP. Efforts are also being made to onboard additional community-based organizations to address unmet social needs and to promote interoperability among these tools. Additionally, there is a focus on telehealth activities, including assessments and advancements in telehealth services across the state. Dr. Jacobs indicated the funding is part of a annual grant process which requires the State to reapply each year. The amount awarded can vary based on prior performance evaluations by CMS. The

¹ Commissioner Jensen arrived after all action items had been called and did not participate in voting.

current funding is expected to be available for five years, with an emphasis on rural areas, although some initiatives may benefit the entire State.

AGENDA ITEM 3

ACTION: Proposed Regulations COMAR 10.25.10.07 Payments for Uncompensated Care Patients, Technical Corrections

Alexandra Bryden, Chief of Staff, presented a recommended technical correction to update COMAR 10.25.10.07 to remove outdated and inaccurate references in the regulations governing the claims submission process for the Trauma Physician Services Funds. Ms. Bryden explained that the current regulations reference now-obsolete ICD-9-coding for submission of claims for uncompensated care from the Fund. She noted this has led to some confusion with at least one trauma center submitting claims with incorrect codes. The proposed regulations include updated codes for trauma related care and injuries in ICD-10. Ms. Bryden shared staff's recommendation to update the regulations to remove the outdated and incorrect code references, citing ICD-10 instead, and adding language to ensure coding tracks to the most recent and relevant codes as they are updated (e.g., future iterations of ICD).

Commissioner Cheatham moved to APPROVE the Proposed Regulations COMAR 10.25.10.07 Payments for Uncompensated Care Patients, Technical Corrections, which was seconded by Commissioner Foreman and, after discussion, unanimously approved.

ACTION: Proposed Regulations COMAR 10.25.10.07 Payments for Uncompensated Care Patients, Technical Corrections is hereby APPROVED.

AGENDA ITEM 4

ACTION: 2026 Legislative Overview and Committee

Tracey DeShields, Director of Policy Development and External Affairs, gave an overview and update on the legislative session and the process regarding bill reviews and positions. She highlighted the establishment of a legislative committee, which includes five commission members who will meet weekly to review bills and make recommendations to the full commission. The legislative session officially commenced on January 14, 2026, and is set to last for 90 days, concluding on April 13, 2026. This session is marked by significant changes in leadership, including a new speaker of the house and several new members appointed by the governor due to recent resignations and a passing in the legislature. Tracey went on to talk about the focus of the session as being affordability, with the governor committing to no new taxes or increased fees despite budget challenges.

Ms. DeShields talked about several key issues, including protecting Medicaid coverage and addressing the loss of federal subsidies. She went on to talk about legislative priorities for the

year that were outlined, including bills related to women’s health, maternal mortality, and behavioral health reimbursement rates.

Lastly, Ms. DeShields concluded with a reminder of important upcoming dates, including budget introduction and bill hearing deadlines, emphasizing the need for timely submissions and collaboration among legislative bodies. The commission voted to have a committee to give positions on MHCC bills.

Commissioner Cheatham moved to ESTABLISH a legislative committee of the Commission comprised of (1) Commissioners appointed by the Chair of the Commission and (2) senior staff of the Commission. The legislative committee would be directed to convene regularly each legislative session and have authority to decide the positions the Commission will take on bills introduced during session. The motion was seconded by Commissioner O’Kane after discussion unanimously approved.

ACTION: Legislative Committee of the Commission is hereby ESTABLISHED.

AGENDA ITEM 5

PRESENTATION: Framing the 2027 Primary Care Investment Targets

Melanie Cavaliere, Chief of Innovative Care Delivery, and Mary Jo Condon of Freedman HealthCare, LLC, presented a framework for developing primary care investment targets. The presentation overviewed requirements under State law (2022), highlights from the 2025 Primary Care Investment Analysis and Recommendations Report, and an Executive Order issued in December 2025 that aims to advance the State’s commitment to strengthening primary care by establishing annual all-payer total cost of care and primary care investment targets beginning in 2027.

ACTION REQUESTED: NONE

AGENDA ITEM 6

PRESENTATION: The Maryland HCAHPS Collaborative and Dashboard

Teresa Brown, Methodologist in the Center for Quality Measurement and Reporting, provided an overview of recent state-specific efforts across agencies to facilitate a Patient Experience Collaborative and MHCC's role in creating an interactive dashboard to help improve patient experience statewide. Maryland has continued to struggle on HCAHPS patient satisfaction, highlighting the need for closer monitoring and targeted improvement efforts. Commissioners engaged in discussions related to the utility of the dashboard without the current capability to compare to provide a national comparison. Staff shared that this aligns with the future iterations of the dashboard and will share back with the Patient Experience Collaborative and in future MHCC meetings.

ACTION REQUESTED: NONE

AGENDA ITEM 7

OVERVIEW OF UPCOMING ACTIVITIES

Dr. Jacobs provided a preview of the February Commission meeting, noting several key action items: MHCC User Fee Assessment, a Request for Post-Approval Project Change, Proposed Regulations, and one presentation, the 2026 Legislative Overview.

ACTION REQUESTED: NONE

AGENDA ITEM 8

ADJOURNMENT

Commissioner Gelrud asked for a motion to adjourn the commission meeting. There being no further business, the meeting was adjourned at 3:06 p.m. upon the motion of Commissioners Douglas and Foreman.