

MARYLAND HEALTH CARE COMMISSION

UPDATE OF ACTIVITIES

February 2026

EXECUTIVE DIRECTION

State Policy Update

Legislative Session 2026

The 2026 legislative session is in full swing. We have established our legislative subcommittee which includes Commissioners, Jensen, Boyle, Gelrud, Blake, and Spinner.

We have had four meetings to date. This has been a very effective and efficient change.

Since the last update we have received the legislative bill numbers for our key pieces of legislation:

1. Material Change Transactions Bill: [SB0494](#) and [HB0944](#)- *Maryland Health Care Commission - Certificates of Need and Material Change Transactions*. The bill hearing for this bill is Tuesday February 24th in the Senate Finance Committee and February 25th in the House Health Committee.
2. Intermediate Care Facilities Bill: [HB0498](#) and [SB0444](#)- *Certificate of Need - Intermediate Health Care Facilities*. The bill hearing for this bill was Wednesday February 11th in the House Health Committee and February 17th in the Senate Finance Committee.

Maryland Trauma Physician Services Fund

Trauma Fund applications were received and reviewed. Met with the Health Services Cost Review Commission (HSCRC), Maryland Institute for Emergency Medical Services Systems (MIEMSS), and MHCC panel to review all trauma fund applications and provide awarding decisions.

Internet Utilization

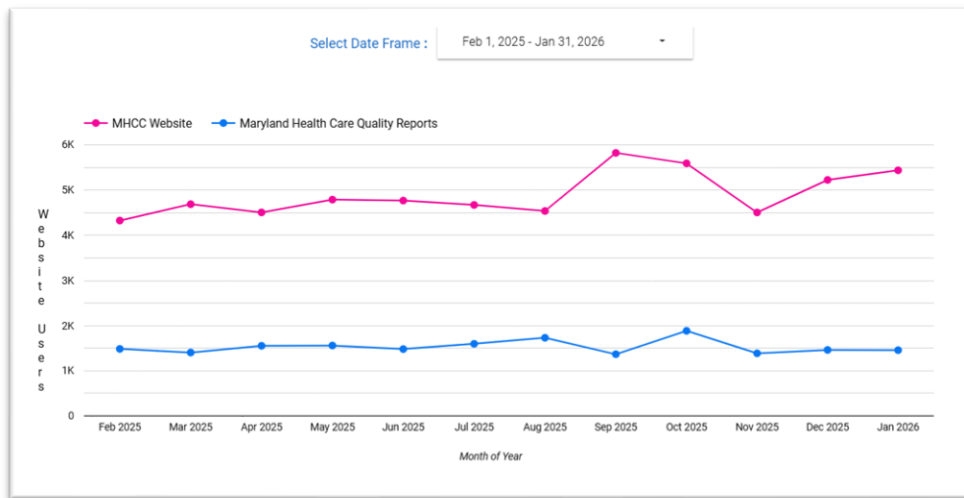


Figure 1 shows the number of website users over a 12-month period for each of the three websites maintained by Commission staff. Specific information about each website is listed above.

MHCC Website The MHCC website (<https://MHCC.maryland.gov>) had 5,436 during the month of January 2026.

Maryland Quality Reporting

Maryland Quality Reporting

Maryland Quality Reporting had 1,511 users in January, similar to the previous month. The website also saw comparable activity among new users and sessions. Notably, the site saw a 5.1% increase in views per session and a 7.8% increase in average session duration. The site received referrals from at least 10 users each from Maryland 211 (86, 43.8%), Howard County Government (20, 10.2%), Caring.com (11, 5.6%), and A Place for Mom (10, 5.1%). Facebook remained the primary source of social media referrals.

CENTER FOR ANALYSIS AND INFORMATION SYSTEMS

Potentially Misvalued Codes Initiative submission:

MHCC completed an analysis of the Maryland Patient Care Database (MPCD) to identify potentially misvalued codes. This is in response to CMS’ interest in receiving empiric data to more properly value their codes, leading to increases in value for undervalued codes and decreases in value for overvalued codes. CMS may respond in this year’s Physician Fee Schedule rulemaking, which is normally published in late June or early July. This completes an action item that was first highlighted in the MHCC Vision and a recommendation in the 2025 Primary Care Report.

Workforce and GME Project

- Staff reconvened and initiated work on the Workforce and GME project identified under the AHEAD Regulatory Working Group–Multi-Agency Workplan, including initial information gathering on GME-related workforce programs operating in Maryland.

- Began alignment discussions to support coordination across state workforce programs and laid the groundwork for upcoming stakeholder meetings to yield identification of preliminary focus areas as part of the recommendation.

Data Hub / APCD of the Future

- Formally established the Data Hub Workgroup with representation from all centers and held the first meeting on January 28 to align on project vision, roles, and center-specific data assets, including legal authority, identifiers, and MCDB linkage opportunities.
- Established a monthly, phased approach for advancing the work and reviewed project milestones, timelines, and expectations internally and with OnPoint.

CENTER FOR HEALTH CARE FACILITIES PLANNING AND DEVELOPMENT

Streamlining Certificate of Ongoing Performance Applications

The Cardiac Services State Health Plan Chapter is under review for update and development of a workplan to streamline the process and eliminate duplicative reporting.

Nursing Home Acquisitions

MHCC staff will present eighteen nursing home acquisitions that involve transfer of real property, bed rights and operations currently owned by CommuniCare an upcoming meeting. This will be the first time the Commission will review an acquisition since the updated acquisition regulations for nursing homes that took effect in February 2025. The Commission has the authority to approve, approve with conditions, or deny nursing home acquisitions.

Facility Services Planning and Policy/Certificate of Need

- **15 Determinations of Coverage:**
 - **Change of Ownerships**
 - SurgCenter of the Potomac
 - SurgCenter of Northern Baltimore, LLC
 - Maryland Diagnostic and Therapeutic Endo Center, LLC
 - The Laurel MD Endoscopy ASC, LLC
 - Premier Surgery Partners, LLC d/b/a Femi-Care Surgery Center, LLC
 - ASC Development Company, LLC d/b/a National Spine and Pain Centers—Frederick
 - **New Ambulatory Surgical Centers (ASCs)**
 - GHO Surgery LLC - 15215 Shady Grove Road Suite 306
Rockville, MD 20850
 - DC Metropolitan Vascular and IR Procedure Center- 5801 Allentown Road, Suite 502, Camp Springs, MD 20746
 - ASC Management, LLC - 6230 Old Dobbin Lane, Ste. 290,
Columbia, MD 21045
 - **Change of Address**
 - HomeCall, Inc. d/b/a HomeCall (HH 7066)
 - **Capital Projects**

- Outpatient Radiation Oncology at Garrett Regional Medical Center, to construct a three-story addition to the existing hospital.
- **Misc Requests**
 - Chesapeake and Washington Heart Care, P.C. - COMAR 10.01.15, Exemption from Self-Referral Laws
 - Howard County Surgery Center, LLC – update of new physicians and specialties
 - Carroll Lutheran Village – Temporary delicensure of 11 comprehensive care facility (CCF) beds
 - Adventist HealthCare Germantown Emergency Center – Adventist HealthCare’s (AHC) plan to potentially (1) close AHC’s Germantown Emergency Center (GEC) located at 19731 Germantown Road, Germantown, MD 20874 and (2) increase the operating room usage at AHC’s Shady Grove Medical Center (SGMC) located at 9901 Medical Center Drive, Rockville, MD 20850
 - Chesapeake Medical Imaging - operations of 13 the imaging centers and the major medical equipment contained will be transferred to three different providers on or about March 1, 2026
- **Two Certificate of Need Letters of Intent (LOI’s) were received:**
 - **Choices Integrated Healthcare Solutions— *Baltimore City***
Establish a Track One Alcoholism and Drug Abuse Intermediate Care Facility (ICF) at ASAM Level 3.7 Medically Monitored Intensive Inpatient and ASAM Level 3.7 Withdrawal Management Services. The facility will include 10 adult ICF beds located at 2010 Boone Street, Baltimore, Maryland, 21218
 - **First HealthCare Consultants --** establish a new HHA in Baltimore City, Baltimore, and Howard Counties
- **Two Certificate of Need Letters of Intent (LOI’s) were withdrawn:**
 - **Tuckerman Lane Rehabilitation and Healthcare Center — *Montgomery County***
 - **Medstar Southern Maryland Hospital Center —** application to construct an advanced critical care tower on its hospital campus

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

Health Information Technology Division – Nikki Majewski, Division Chief

- A virtual town hall was convened with electronic health networks (EHNs) to discuss reporting of electronic health care transactions (transactions) to CRISP for public health and clinical purposes. A review of EHN comments on the draft *Electronic Health Care Transactions Technical Submission Guidance* is underway. The guidance includes technical requirements for EHNs submitting transaction information to CRISP (COMAR 10.25.07.09). CRISP continues to refine draft technical specifications for the consent management application (CMA). Preparations to test the CMA in Q1 2026 with the Delaware Health Information Network and Epic continue. State law (2021) requires CRISP to develop and maintain the

CMA, which will serve as the centralized source for registered health information exchanges (HIE) to send and receive information on consumer opt out status. CRISP reported metrics follow:

- A Request for Information (RFI) was drafted to gather technical input for improving data exchange among community-based organizations (CBOs), providers, and payers through CRISP. The RFI seeks information about essential features of closed-loop screening and referral platforms to support multi-sector collaboration. Responses will inform planning and development of strategies that enable social needs screening across care settings and facilitate referrals between CBOs, providers, and payers. Combining clinical and non-clinical data supports a range of activities under the Rural Health Transformation Program, a five-year federal initiative. Maryland was awarded \$168 million in year one to improve access, outcomes, and sustainability through workforce development, technology, innovation, and strategic partnerships.

Innovative Care Delivery Division – Melanie Cavaliere, Division Chief

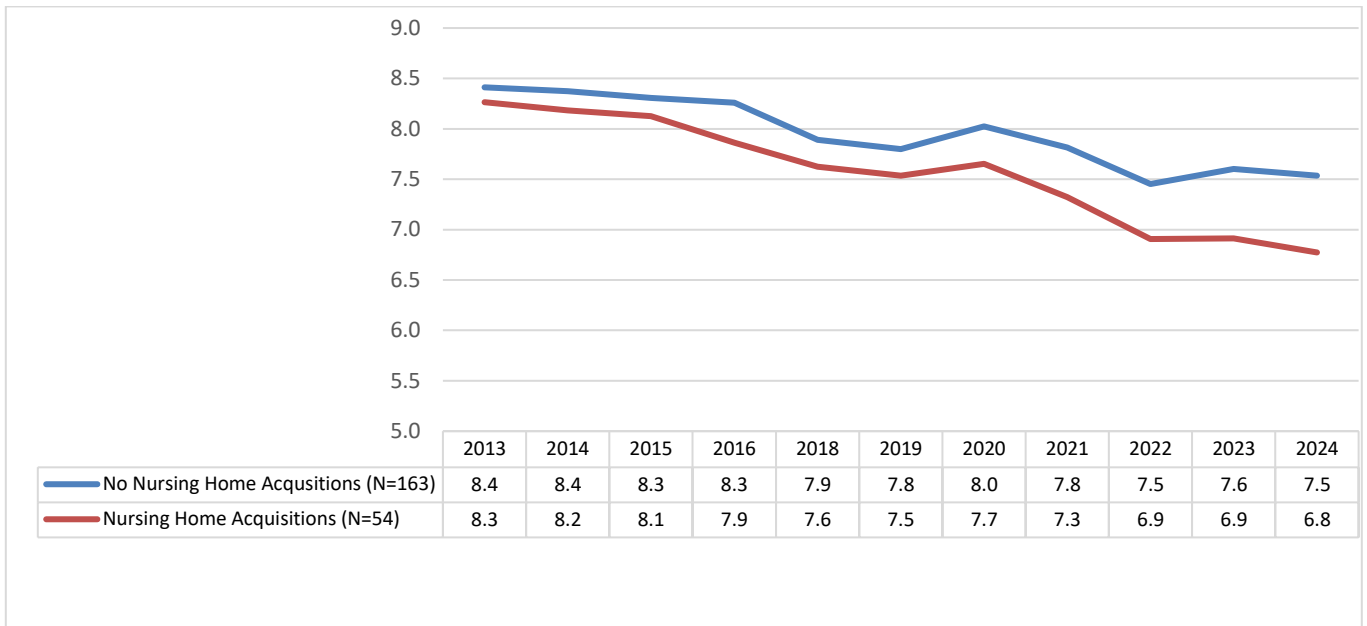
- A Learning Network event held in January featured speakers who highlighted Maryland initiatives to increase investment in underserved areas, the role of Federally Qualified Health Centers in reducing health disparities, and strategies to advance culturally responsive care through patient engagement.
- The Primary Care Investment Workgroup (PCIW) met in January to consider a primary care investment target methodology under the AHEAD Model as well as geographic strategies to improve outcomes and reduce disparities. In February, the PCIW is scheduled to review payer-specific targets and primary care investment opportunity maps for commercial payers.

CENTER FOR QUALITY MEASUREMENT AND REPORTING

Center for Quality Measurement and Reporting

Quality of nursing homes, home health, and hospice was plotted over time to determine if quality changed after a facility was acquired by a new entity. In the chart below, the Nursing Home Family Experience of Care Survey was plotted from 2013 to 2024. In 2024, families with loved ones in nursing homes that were not acquired were statistically significantly more satisfied than those in nursing homes that were acquired. There was no difference in 2013.

Nursing Home Satisfaction and Acquisitions



*Note: All acquisitions took place in 2022 and 2023, and there was no survey in 2017.