

**MARYLAND HEALTH CARE COMMISSION**

***UPDATE OF ACTIVITIES***

**September 2021**

***EXECUTIVE DIRECTION***

**Government Relations and Special Projects - Tracey DeShields**

**State Policy Update**

Staff have been working on a few legislative initiatives. One initiative is related to Senate Bill 837 – Health – Advance Care Planning and Advance Directives. The bill did not pass, however the Health and Government Operations (HGO) Committee asked MHCC to convene a workgroup to develop recommendations on possible compromise legislation for the 2022 legislative session. The workgroup has been established and the first meeting was held on August 4<sup>th</sup>. Following the first meeting, Horizon Foundation developed and circulated a compromise proposal focused on asking patients to identify their health care agent. A health care agent is an individual that can speak on behalf of the patient if the patient is unable to do so. Horizon Foundation presented the proposal at second meeting of the workgroup on September 15<sup>th</sup>. Most stakeholders at the meeting endorsed the proposal. The workgroup agreed to create two subgroups to identify technical and policy challenges prior to the final meeting of the workgroup.

Staff is working on three other projects that are the result of work from the 2021 legislative session. First, the MHCC staff is working with Department of Health to implement ***HB 309/SB 565 Public Health - Data - Race and Ethnicity Information***. That law requires the Office of Minority Health and Health Disparities (OMHHD) in coordination with the Maryland Health Care Commission (MHCC) to develop and submit to the General Assembly by December 31, 2021, a report that summarizes the State’s current goals and activities designed to address health disparities. The Center for Quality Measurement and Reporting is taking the lead on this effort. Over the summer, summer, MHCC and the OMHHD developed a questionnaire that gathered information what each unit at MDH was doing to address health disparities. Over 125 individuals representing over 60 units and agencies in MDH have responded to date. MHCC staff is reviewing the responses and following up with units that did not respond or provided incomplete responses. Staff expects to complete the draft report by November. Second, the staff is working on a report to the legislature on the feasibility of CRISP determining financial eligibility for patients with medical debt to determine if they qualify for financial assistance or a reduced cost of care. Third, staff is also working with the HSCRC on a report due to the legislature assessing the issues related to the establishment of Hospital at Home model. MHCC is responding to questions pertaining to how the Certificate of Need requirements might impact establishment of a Hospital at Home model. Staff have concluded that the CON statute would have very little impact on the Hospital at Home model.

Staff is working on two studies policy issues of interest to the legislature. One study is examining healthcare provider billing practices for COVID-19 testing and the second study is assessing Medicare reimbursement for advance care planning. A recent Journal of the American Medical Association identified limited uptake of advance care planning across the US. Staff will be examining Maryland’s experience given that many of Maryland’s value-based initiative place great emphasis on care planning with the patient and the patient’s family.

## **MHCC-related news coverage: selected articles and commentary**

### *Health Facilities*

Beuschlein, M. “Maryland Total Cost of Care Model reduced spending by \$365 million in first year.” State of Reform. July 28, 2021. Available from:

<https://stateofreform.com/featured/2021/07/maryland-total-cost-of-care-model/>

The Office of Governor Larry Hogan. “Governor Hogan announces new vaccination protocols for Maryland nursing home and hospital workers.” The Office of Governor Larry Hogan. August 2021.

Available from: <https://governor.maryland.gov/2021/08/18/governor-hogan-announces-new-vaccination-protocols-for-maryland-nursing-home-and-hospital-workers/>

### *Healthcare Data*

Corin, C. “Frederick County conducts health survey to identify county residents’ concerns.”

WDVM. July 21, 2021. Available from: <https://www.localdvm.com/news/maryland/frederick-county-conducts-health-survey-to-identify-county-residents-concerns/>

### *Health Disparities and Health Equity*

The Office of Governor Larry Hogan. “Governor Hogan announces launch of \$72 million maternal and child health care initiative.” The Office of Governor Larry Hogan. July 2021. Available from:

<https://governor.maryland.gov/2021/07/06/governor-hogan-announces-launch-of-72-million-maternal-and-child-health-care-initiative/>

Anne Arundel County Maryland. “Anne Arundel County Office of Health Equity and Racial Justice earns MACo County Innovation Award.” Anne Arundel County Maryland. July 13, 2021. Available from:

<https://www.aacounty.org/news-and-events/news/anne-arundel-county-office-of-health-equity-and-racial-justice-earns-maco-county-innovation-award>

Green, K. “Nearly \$60 million in grants to improve equity in healthcare.” WMAR Baltimore.

August 11, 2021. Available from: <https://www.wmar2news.com/infocus/nearly-60-million-in-grants-to-improve-equity-in-healthcare>

## **Maryland Trauma Physician Services Fund**

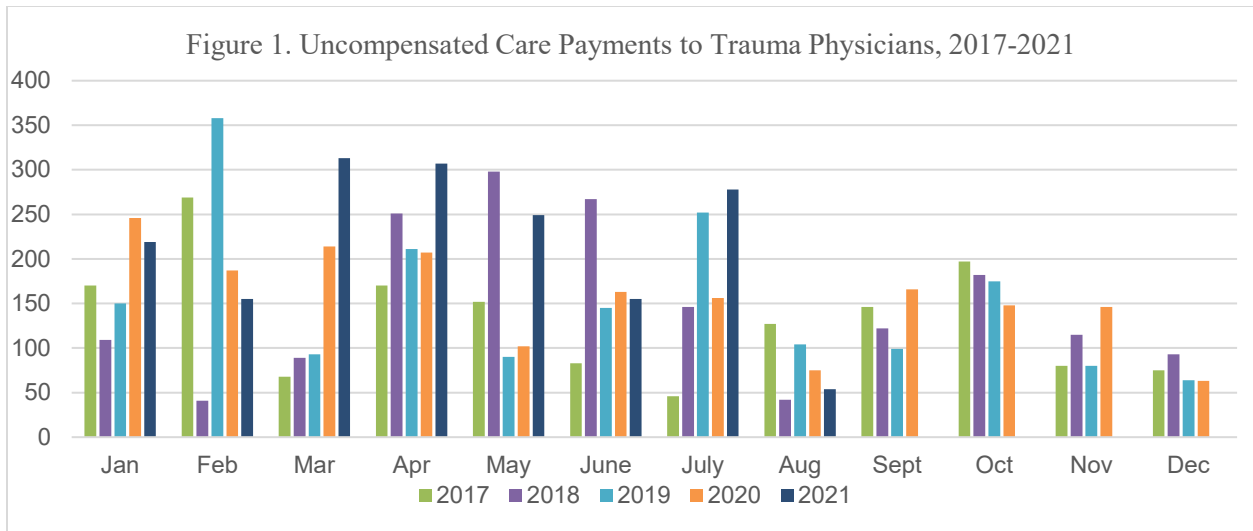
### **Uncompensated Care Processing**

Trustmark Health Benefits, the third-party administrator (TPA) for the Trauma Fund, processed \$278,163.46 for uncompensated care claims through July 2021 and \$54,459.38 through August 2021.

### **On-Call**

Staff has processed the January through June 2021 On-Call applications for the twelve (12) eligible trauma and specialty centers. Total reimbursements for this period will be \$4,344,631.03.

Additionally, the one-time annual stipend to Children’s National Hospital Center, in the amount of \$590,000, has also been processed for disbursement.



**MHCC Website**

The MHCC stakeholder community website (<https://MHCC.maryland.gov>) had 4,935 users in the months of July and August. Visits to the MHCC stakeholder community are represented by the gold bar.

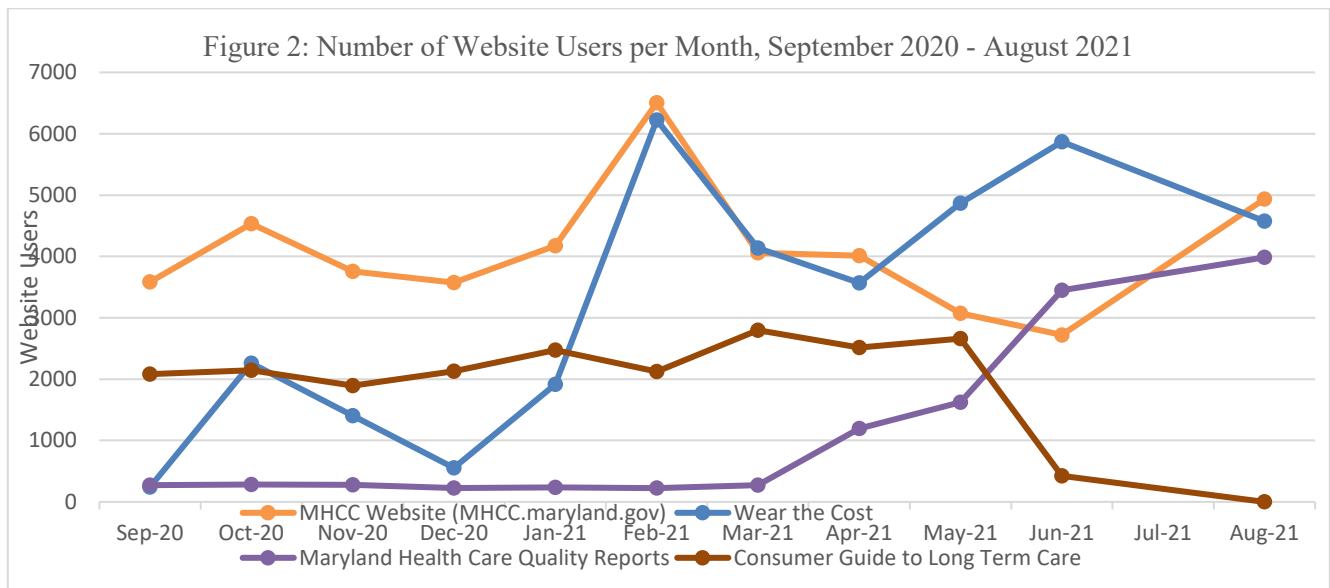


Figure 2 shows the number of website users over a 12-month period for each of the four websites maintained by Commission staff. Specific information about each website is below.

**Wear The Cost**

Web traffic for the month of July was 4,576. Wear The Cost is represented by the blue line.

**Maryland Quality Reporting**

The Maryland Quality Reporting website had 2,026 users in the month of July, a 41.2% decrease from the previous month. The website also had a decrease in sessions and pageviews. The average session duration and bounce rate improved 36.4% and 0.02%, respectively. The Quality Reporting website had 1,959 users in August, a slight decrease (3.3%) from website activity in July. The

website also had similar decreases in sessions (6.0%), pageviews (4.9%), session duration (7.7%) and bounce rate (0.5%). The decreased website activity was expected in July and August and is on trend with historical summer website activity.

Although overall traffic from social sites remains small, the website referrals from social media are promising. Facebook users continue to view more pages and spend more time on the website indicating their engagement with website content.

The Consumer Guide to Long Term Care was deactivated in June because long term care reporting is not part of the Maryland Quality Reporting website.

***CENTER FOR ANALYSIS AND INFORMATION SYSTEMS***

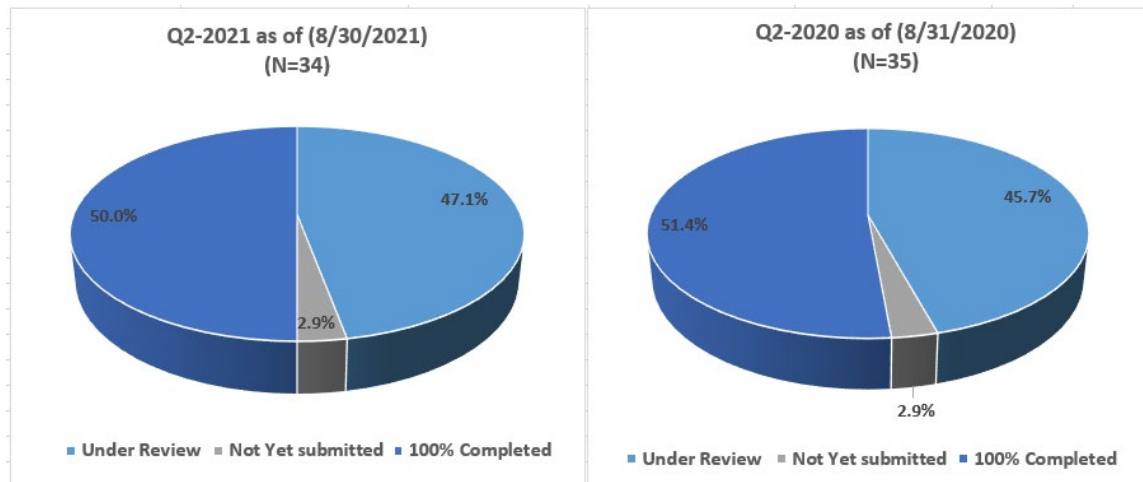
***Cost and Quality Analysis – Shankar Mesta***

**MCDB Data Submission Status, Payor Compliance, and Technical Support**

**All payors except the voluntary payors that provide only self-insured employer data have submitted 2021Q2 data as of August 2020.**

17 (50%) payors have submitted complete clean 2021Q2 data ahead of the 2021Q2 submission deadline of 8/31/2021. Half of the 2021Q2 payor data successfully passed the Tier 3 data quality validation checks which is like last year’s 2020Q2 submission at 51.4%. Of the 2021Q2 submissions, 16 (47.1%) of the data submissions are under review. One voluntary payor has not made a 2021Q2 submission to the MCDB. DLH staff are in communication with payors whose 2021Q2 submissions are under review to resolve data quality issues.

The 2020Q1 submissions are now closed out. All payors, except the voluntary payors have successfully completed submission of 2020Q1 data to the MCDB portal.



### **MIA's Special Data Request**

CAIS staff created an active Maryland providers directory for MIA which would be used as a tool to assist carriers in assessing their network adequacy planning and recruiting efforts. It represents the providers in the Medical Care Data Base (MCDB) who have had active claims for services provided in Maryland in the year before the current year. This provider directory not only provides the name, address, and county of providers, but it lists each provider's specialty. This provider directory will be updated annually that could be assessed at the following URL:

[https://mhcc.maryland.gov/mhcc/Pages/apcd/apcd\\_data\\_displays/apcd\\_data\\_displays.aspx](https://mhcc.maryland.gov/mhcc/Pages/apcd/apcd_data_displays/apcd_data_displays.aspx).

### **2020 Privately Insured Individual Market Early Update**

MHCC staff will be presenting 2020 privately insured individual market early update at the September 2021 monthly Commission meeting.

### **Special Projects – Janet Ennis**

### **RFP for Data Management Contractor for the Medical Care Data Base Released**

A Request for Proposal (RFP) was issued and posted on both eMaryland Marketplace Advantage and the MHCC website in early May 2021 to continue the services of a Data Management vendor through a new competitively-bid procurement. Staff issued this solicitation to select a Contractor that can provide proficient services to sustain and enhance the Maryland Medical Care Data Base (MCDB) infrastructure, capability, and functionality. Staff held a largely attended virtual pre-proposal conference on May 25th. An Evaluation Committee met several times over the past month to review/discuss/score the 6 proposals submitted by potential vendors. The review process is in its final stages, now that Best and Final Offers (BAFOs) have been requested and oral presentations by each bidder have been completed. The Evaluation Committee plans to select the successful Offeror before the end of September and request approval at an October Board of Public Works meeting so that the successful bidder's new contract can commence before the start of 2022.

<p><b><i>CENTER FOR HEALTH CARE FACILITIES PLANNING AND DEVELOPMENT</i></b></p>
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### **Acute Care Policy and Planning – Eileen Fleck**

### **Certificates of Ongoing Performance**

Adventist HealthCare Shady Grove Medical Center – Docket No. 19-15-CP030 – (Montgomery County)

The Commission approved a Certificate of Ongoing Performance for the provision of primary and non-primary percutaneous coronary intervention (PCI) services on July 15, 2021. The program was certified for a period of four years.

### **Certificate of Conformance Applications Filed**

MedStar Franklin Square Medical Center (Baltimore County)

Introduction of non-primary, or elective, PCI services.

### **State Health Plan for Acute Hospital Services, COMAR 10.24.10**

The first work group meeting was held remotely on August 25, 2021. The work group primarily discussed policies and general standards.

### **State Health Plan for Acute Psychiatric Services, COMAR 10.24.21**

The Commission adopted final permanent regulations for acute psychiatric services on July 15, 2021. These regulations became effective on August 9, 2021.

### **State Health Plan for Residential Treatment Centers, COMAR 10.24.07**

In conjunction with adoption of COMAR 10.24.21 as permanent regulations, the Commission left those portions of COMAR 10.24.07 that address residential treatment center (RTC) in place, and thus adopted, as final permanent regulations, a replacement COMAR 10.24.07 on July 15, 2021. These regulations became effective on August 9, 2021.

### **Long Term Care Policy and Planning – Linda Cole**

#### **FY 2020 Hospice Survey**

The FY 2020 Maryland Hospice Survey, Parts I and II, have been completed, except for one agency that required an extension. Several extensions were granted for Part II, since data is derived from the Medicare cost report, and CMS extended cost report due dates due to the pandemic. Technical assistance is ongoing and is provided by MHCC staff as needed. When the data collection is complete, data will be downloaded into a public use data set and posted on the Commission's website.

#### **Request for Proposals – Minimum Data Set (MDS) and Long-Term Care (LTC) Survey**

The previous consulting contract reached its term earlier in 2021. A new request for proposals has been drafted and is undergoing final internal review. It is being circulated among staff prior to posting.

#### **Nursing Home Data Set**

Using data collected from MDS and the LTC Survey, staff developed and posted updated tables describing the use of Maryland nursing homes. These tables are posted at:

[https://mhcc.maryland.gov/mhcc/pages/hcfs/hcfs\\_ltc/documents/Routine\\_Reports\\_All\\_Tables\\_6\\_3\\_0\\_2021.pdf](https://mhcc.maryland.gov/mhcc/pages/hcfs/hcfs_ltc/documents/Routine_Reports_All_Tables_6_3_0_2021.pdf)

#### **Home Health Public Notice**

Staff posted a Public Notice for comment describing recommended quality measures and performance requirements for use in upcoming home health agency (HHA) CON review cycles. The Notice was posted on the Commission's website at the following link:

[https://mhcc.maryland.gov/mhcc/pages/home/public\\_comment/documents/2021\\_FINAL\\_Public\\_Notice\\_HH.pdf](https://mhcc.maryland.gov/mhcc/pages/home/public_comment/documents/2021_FINAL_Public_Notice_HH.pdf)

The Notice was developed in collaboration with staff from the Center for Quality Measurement and Reporting and sent to a variety of HHA providers and organizations. Two comments were received by the August 20, 2021 deadline from the Maryland National Capital Homecare Association and Lorien Health Services, an organization operating nine nursing homes in Maryland. Staff will seek Commission approval of the quality measures and performance requirements in September.

#### **Long Term Care Survey**

The 2020 Maryland Long Term Care Survey data collection was finalized on July 22, 2021 for adult day care centers, chronic hospitals, and assisted living facilities. On July 29, 2021, the Commission

fined 28 providers who did not submit a completed survey or did not contest the fine by the end of this period. Staff took into consideration a three-year trend and reduced the amount of the original fine to 33% of the actual fine for most providers. Staff waived the fine for ten providers who submitted by the July 22 deadline. Staff exempted a total of 17 facilities due to temporary closure and permanent closure/no response related to the COVID-19 pandemic. The survey data has been downloaded.

Staff received the FY 2020 Medicaid Cost Report data from the state auditors, Myers and Stauffer. Staff began initial review of the data.

### **Certificate of Need (“CON”) – Wynee Hawk**

#### **CON Approved**

Hillhaven Nursing & Rehabilitation Center – Docket No. 21-16-2447 - (Prince George’s County)

Addition of 16 comprehensive care facility (CCF) beds

Approved Project Cost: \$9,446,890

#### **Change in Approved CON Denied**

Washington Adventist Hospital – Docket No. 13-15-2349 – (Montgomery County)

Modification of a CON condition. The condition requires operation of an urgent care center on the former site of Washington Adventist Hospital 24 hours per day and seven days per week. The denied modification would require that the urgent care center only operate at least 12 hours per day

#### **Emergency CONs**

The validity of all previously authorized Emergency Certificates of Need issued in response to the COVID-19 pandemic were extended through April 30, 2022, at the request of the Secretary of Health.

#### **CONs Relinquished**

Bayada Hospice – Docket No. 16-24-2387 – (Baltimore City)

Establish a general hospice.

Approved Cost: \$131,000

#### **CON Letters of Intent**

Board of Child Care – (Baltimore County)

Establish a four-bed residential treatment center (RTC), the “Adolescent Hospital Overstay Program,” to be located at 3300 Gaither Road, in Baltimore County.

#### **Pre-Application Conference**

Board of Child Care – (Baltimore County)

Establish an RTC.

August 31, 2021

#### **CON Applications Filed**

Physicians Surgery Centers of Frederick – Matter No. 21-10-2451 – (Frederick County)

Add two operating rooms to an existing ambulatory surgery center with two operating rooms.

Estimated Cost: \$2,217,000

#### **Determinations of Coverage**

- **Ambulatory Surgery Centers**

Clearway Surgery Center of Westminster - (Carroll County)

Establish a physician outpatient surgery center (POSC) with one non-sterile procedure room to be located at 826 Washington Road, Suite 102, in Westminster.

Advanced Surgical Center of Maryland, LLC – (Prince George’s County)

Establish a POSC with two sterile operating rooms and one non-sterile procedure room to be located 4395 Nicole Drive, in Lanham.

Potomac Urology Surgery Center, LLC – (Montgomery County)

Establish a POSC with two sterile operating rooms and two non-sterile procedure rooms to be located at 251 National Harbor Boulevard, Suite 400, in Oxon Hill.

- **Acquisition/Change of Ownership**

Crofton Care and Rehabilitation Center – (Anne Arundel County)

Acquisition of a CCF by 2131 Davidsonville PROPCO LLC from Crofton Convalescent Associates Limited Partnership LLP. A separate company, 2131 Davidsonville OPCO LLC, will operate the facility under a lease agreement with 2131 Davidsonville PROPCO LLC.

Gentiva Certified HealthCare Corp d/b/a Kindred at Home

Acquisition of an of an indirect ownership interest of an HHA by Humana Inc. from Gentiva Certified Healthcare Corp. d/b/a/ Kindred at Home. The HHA is authorized to serve Anne Arundel, Baltimore, Calvert, Carroll, Charles, Frederick, Harford, Howard, Montgomery, Prince George’s, and Queen Anne’s Counties and Baltimore City.

Home Health Care Services LLC d/b/a Health at Home

Acquisition of an HHA by Inspired HomeCare of Maryland, LLC. The HHA is authorized to serve the continuing care retirement community residents of the Blakehurst (Towson/Baltimore County), North Oaks (Pikesville/Baltimore County), and the Residences at Vantage Point (Columbia/Howard County).

- **Licensure**

- **Relicensure of Bed Capacity or a Health Care Facility**

Bay Woods of Annapolis – (Anne Arundel County)

Relicensure of two temporarily delicensed CCF beds, bring total bed capacity of this CCF back to 27 CCF beds

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

Ellicott City Health Care Center

Ellicott City (Howard County)

Transaction: Acquisition of the real assets

Current owner and owner of beds rights: Maryland NH Asset, LLC

Operator and owner of beds rights post-transaction: OHI Asset (MD) Ellicott City, LLC

Purchase Price: \$14,206,033.17

South River Healthcare Center  
Edgewater (Anne Arundel County)  
Transaction: Acquisition of the real assets  
Current owner and owner of beds rights: Maryland NH Asset, LLC  
Operator and owner of beds rights post-transaction: OHI Asset (MD) Edgewater, LLC  
Purchase Price: \$9,240,076.43

Forestville Healthcare Center  
Forestville, Prince George's County  
Transaction: Acquisition of the real assets  
Current owner and owner of beds rights: Maryland NH Asset, LLC  
Operator and owner of beds rights post-transaction: OHI Asset (MD) Forestville, LLC  
Purchase Price: \$12,517,730.45

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

***Health Information Technology Division – Nikki Majewski, Division Chief***

**Telehealth Legislative Study**

Six proposals were received in response to the Emergency Request for Proposals to identify a contractor to complete study activities required by the *Preserve Telehealth Access Act of 2021*. An evaluation committee is currently evaluating responses. The evaluation committee expects to recommend an award by the end of September. MHCC's Telehealth report required by *Preserve Telehealth Access Act of 2021* is due to the Senate Finance Committee and House Health and Government Operations Committee on December 1, 2022.

**Patient Generated Health Data**

Planning is underway to develop a patient generated health data (PGHD) privacy and security assessment guide (guide) for providers and consumers. PGHD derived from consumer-facing third-party applications are not subject to HIPAA and may lack adequate security protections. The guide aims to broaden awareness of PGHD and include evidence-based best practices around privacy and security. The guide is targeted for release in Q2 of 2022.

**Hospital Health Information Technology Assessment**

Development of an insights brief is advancing using data obtained from the 2020 hospital health information technology (health IT) survey. All acute care hospitals in the State responded to the survey, which collects information on use and perceived value of electronic health records (EHR), health information exchange (HIE), and telehealth. Release of the insights brief is targeted to occur in December.

**Breaches**

An insights brief on an analysis of health care data breaches was vetted with several stakeholders. Data was obtained from the U.S. Department of Health and Human Services, Office for Civil Rights

online portal and includes breaches reported from 2018 to 2020 affecting 500 or more individuals. The brief is targeted for release in September.

### **Electronic Data Interchange (EDI)**

An analysis of responses to the 2020 EDI Progress Report received from payers is progressing. Payers with annual premiums exceeding \$1 million are required by COMAR 10.25.09, *Requirements for Payers to Designate Electronic Health Networks* to annually report administrative transaction volumes to MHCC. A findings summary is planned for release in November.

### **Nursing Home Health IT Assessment**

Planning is underway to convene several nursing home representatives to explore their perspectives on health IT adoption and use based on key observations identified from an analysis of data obtained from the 2020 *Annual Long Term Care Survey*. The analysis includes trends from data collected regarding use of EHRs, HIE, telehealth, and cybersecurity. An insights brief is targeted for release in Q1 of 2022.

### **CRISP Privacy and Security Audit**

Myers and Stauffer LC are nearing completion on the draft report that includes key findings from their review of the System and Organization Controls (SOC) 2, Type 2 audit reports for CRISP and HIE system integrators. A final report is targeted for release in September. In addition, staff completed a review of the SOC 2 Type 2 audit of CRISP.

### **Cybersecurity Symposium**

Preparatory work related to a cybersecurity symposium (symposium) for hospital and nursing home leadership is occurring. The virtual symposium is a collaborative effort with the Health Services Cost Review Commission, Maryland Hospital Association, Maryland Healthcare Information and Management Systems Society, and Health Facilities Association of Maryland. The symposium will center on mitigating risk across the health care supply chain and is targeted to take place in November.

## **Innovative Care Delivery Division – Melanie Cavaliere, Division Chief**

### **Advanced Care Delivery**

#### **Practice Transformation Grant Activities**

Practice recruitment for the *Advancing Practice Transformation in Ambulatory Practices* program has started. The grantee, MedChi Care Transformation Organization (CTO), is targeting small ambulatory practices for recruitment. Practice selection is anticipated to begin in September. MedChi CTO will provide support for primary care and specialty practices, including developing and redesigning workflows and providing training to prepare practices to deliver efficient, high-quality, team-based care. Grant funding is designed to support up to 50 primary care and specialty practices.

### **Practice Transformation Network**

Work is progressing on an environmental scan to assess transformation progress of about 100 practices that participated in the Centers for Medicare & Medicaid Services Practice Transformation Network initiative (2016–2019). Responses will inform strategies to prepare practices to successfully participate in value-based payment models.

### **Maryland Primary Care Program Advisory Council**

The Maryland Primary Care Program (MDPCP) Advisory Council (Council) met to discuss proposed modifications to the payment structures. Conversations continue between the Centers for Medicare & Medicaid Innovation (CMMI) and MDPCP Program Management Office regarding Track 2 program options. CMMI has proposed changes starting in 2022 to care management fees and alternatives for maintaining the advanced alternative payment model status.

### **Learning Networks**

Planning for an ambulatory provider symposium focused on care management and care coordination is progressing. The symposium includes virtual presentations from advanced care delivery practices, health systems, and payers. Planning is nearing completion for a podiatric webinar on facilitating participation in the Merit-based Incentive Payment System. The webinar is anticipated to occur in October and the symposium in November. In addition, staff presented on MHCC's Care Management Readiness Assessment guide at a national virtual care coordination conference.

### **Electronic Health Networks**

Planning is underway to convene an electronic health network (EHN) workgroup comprised of select EHNs and the State Designated HIE. The workgroup will discuss implementing Chapter 790 and 791 of the 2021 Laws of Maryland that require EHNs to submit electronic health care transactions originating from a Maryland-based provider to the State Designated HIE for public health and clinical purposes.

## **Health Information Exchange Division – Alana Sutherland, Division Chief**

### **Dental Health IT**

Data collection is underway for the 2021 dental health IT questionnaire (questionnaire). The questionnaire focuses on the use of health IT in dental practices. Staff also presented on health IT at the Maryland State Dental Association Chesapeake Dental Conference and to the Maryland State Board of Dental Examiners.

### **Privacy and Security Regulations**

Post & Schell, P.C. (contractor) finalized an initial review of COMAR 10.25.18 *Health Information Exchanges: Privacy and Security of Protected Health Information* (regulation). The regulations consist of 13 sections that address requirements for access, use, and disclosure of information obtained through an HIE operating in Maryland. In addition, the regulations include requirements around secondary uses of information and consumer access to their health electronic information. Staff plans to convene the HIE Policy Board (a staff workgroup) to review draft changes in September.

### **HIE Consent Management Tool**

Activities related to Chapter 798 of the 2021 Laws of Maryland, which requires the State Designated HIE to establish and maintain a consent management utility (CMU) are proceeding. The CMU will enable a consumer to fill out one form to opt-out (or back into) having all or part of their electronic health information stored or disclosed by all registered HIEs.

## **HIE Roundtable**

Program aspects for an HIE roundtable event aimed at discussing policy barriers, challenges, and potential solutions to advance HIE are evolving. About 25 non-profit HIEs across the nation are anticipated to take part in this virtual event, which is planned for the winter of 2022.

## ***CENTER FOR QUALITY MEASUREMENT AND REPORTING***

## **The Maryland Health Care Quality Reports (MHCQR) website**

### **MHCQR Website Redesign**

Staff continue to work with Advanta Government Services (AGS), the website contractor, to redesign the website's functionality, usability, and overall appeal. The first phase of the redesign effort is focused on the full integration of our Long Term Care Guide and our Quick Compare features into a more uniform and comprehensive *Quality Reports* consumer site. The Long Term Care Guide site predates the *Quality Reports* website and its redesign requires a significant amount of reprogramming and database restructuring to enhance and modernize the functionality of the site. Staff is making good progress in transitioning this work from an in-house web-development function to the contractor. Later this month, Center Staff will host internal focus groups for MHCC staff to preview the new web design and offer suggestions and feedback. Results from the focus groups will be available next month.

### **MHCQR website sees steady website traffic**

Staff continues to monitor traffic to the site using Google Analytics software. Based on a rolling 12 months of data through August 31, 2020, web traffic increased by 115% compared to the same period in the previous year. Web traffic in August 2020 was down 12% compared to traffic in July 2020. The most frequently viewed pages on the MHCQR site include hospital quality ratings and the nursing home search feature. Traffic to the site is presented graphically under the Executive Direction section of this update.

### **Consumer Guide to Long Term Care Website**

The August Google Analytics continue to reflect steady traffic on the Consumer Guide. Based on a rolling 12 months of data through August 31, 2020, web traffic increased by 9% compared to the same period of the previous year, user sessions increased by 8% and page views increased by 4%. The period of late March through June 2020 accounted for most of the increased web traffic. August web traffic decreased by 6% from the month of July, with 2,045 total users. Page views decreased significantly (19%) in August to 13,955 page views, compared to 17,134 page views in July. The Services Search Engine continues to be the most frequently accessed section of the Consumer Guide. Traffic to the site is presented graphically under the Executive Direction section of this update.

### **Website Promotion: Approximately 80 social media posts initiated in August**

Promotion of the MHCQR website is a Center priority. There were approximately 80 social media posts made in August. Topics included National Immunization Awareness Month, World Breastfeeding Week, and general marketing posts for the MHCQR. 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 MHCQR website.

## **Hospital Quality Initiatives – Courtney Carta**

### **Hospital Reporting**

CMS recently issued guidance to hospitals regarding quality reporting programs. The guidance extends data submission deadlines and makes the submission of October 2019 to June 2020 data optional. This includes quality measures, patient satisfaction, healthcare associated infections, and other measures required in CMS payment programs. MHCC staff communicated this information to Maryland hospitals and staff continue to monitor CMS communication channels for additional updates.

### **Healthcare Associated Infections**

Submission of healthcare associated infection data from October 2019 through June 2020 is optional, according to the CMS-issued guidance that was described above. The number of hospitals that reported during the optional period varies by infection type; the incomplete dataset will make analyses challenging. Staff continues to collaborate with the Maryland Hospital Association to review statewide infection results and draw meaningful conclusions about infection control during this time period.

### **Specialized Cardiac Services Data**

All Maryland hospitals that provide PCI services are required to participate in the ACC NCDR CathPCI data registries and report quarterly data and detailed reports to the Commission in accordance with established timelines. The last quarterly cardiac data coordinator occurred on August 11, 2020. The group discussed standards during the time of COVID and changes to within the various ACC and AHA reporting systems. Data collection for 2020Q2 data is scheduled for early October.

## **Long Term Care Quality Initiative—Stacy Howes**

### **Nursing Home Family Experience of Care Survey**

The 2020 survey officially began July 6. Nursing home points of contact received detailed instructions about how to submit responsible party lists, and lists are due to the contractor in early August. As of August 28, we have received contact lists from all nursing homes, and more than 75 % have been fully accepted and approved. The remainder are expected to be verified and accepted by early September. Surveys will be mailed to loved ones on October 6. This first mailing will invite loved ones to fill out the survey online, a new option available this year. Non-responders will receive a follow-up paper copy of the survey.

### **Health Plan Quality Initiative**

All data have submitted by health plans. Staff should begin receiving reports at the end of August/beginning of September. The Quality Reports website will be updated by November 2020.

### **Consumer Guide to Long Term Care**

The Consumer Guide has been updated with the results of the 2019-2020 Nursing Home and Assisted Living Facility Health Care Worker Influenza Vaccination survey results. Nursing Home profiles are being updated with the most current data available from the 2018 Long Term Care Survey. Staff continue to provide information and resources directly to consumers who contact the office with questions about long term care facilities and services.

### **Nursing Home and Assisted Living Influenza Vaccination Survey**

The average health care worker vaccination rate for the 227 nursing homes in Maryland has reached 90%, with 51% of facilities attaining “Gold Star” status for achieving vaccination rates over 95%. There are 147 nursing facilities (65%) with mandatory influenza vaccination policies in place, and 23 facilities with intentions to implement a mandatory policy for the 2020-2021 influenza season. This season 338 assisted living facilities with  $\geq 10$  licensed beds completed the annual survey. The current season average of 56% is consistent with the previous flu season. There is a significant increase by 10% in the number of assisted living facilities with a mandatory influenza vaccination policy in place, and over 25% of assisted living facilities have attained “Gold Star” status for achieving vaccination rates over 95%. Maryland assisted living facilities struggle to improve their overall employee vaccination rate, citing various reasons such as the lack of a state mandate, and employee refusal.

### **Outpatient Quality Initiative—Mariama Gondo**

#### **Administering CY 2018 Ambulatory Surgical Facility (FASF) Annual Survey**

The CY2018 survey is open for providers to start reporting their facility data. The survey will close on September 30, 2020 as staff extended the reporting window to account for the challenges with the COVID-19 pandemic. Staff continues to answer questions and concerns providers may have. To date, of the 331 facilities completing the survey, 202 facilities have started the survey, and 91 of those 202 finished and submitted their surveys. The total number of surgery centers changed from last month’s update as facilities have confirmed with staff that they were no longer operating during the reporting year. Staff mailed out courtesy reminder letters to those facilities that have not begun the survey on Wednesday, August 19, 2020. Staff will continue to reach out to facilities to ensure a high completion rate for the survey.

#### **Establishing collaborations with other Agencies**

Staff is working with the Office of Health Care Quality to create processes that are mutually beneficial for both organizations in terms of tracking and monitoring the establishment of various freestanding ambulatory surgical facilities. Staff believes this effort could produce more efficient data collection and improved oversight, while streamlining data submission from the freestanding ambulatory surgical centers.