



Priority Order and Timeline of State Health Plan Chapter Review and Revision

Maryland Health Care Commission

July 20, 2023

The State Health Plan (Health-General § 19-118)



The Commission shall adopt a State health plan that is:

- Consistent with All Payor Model Contract (TCOC in January 2019) considering relevant HSCRC methodologies
- Includes methodologies, standards, and criteria for CON review
- Prioritizes conversion of “acute capacity” to alternative uses
- Annually (or upon petition):
 - Assess each Chapter
 - Determine chapters needing review and revision
 - Establish priorities and timelines for review and revision of chapters
 - Publish changes considered necessary
- Ensure broad public input, public hearings and consideration of local health plans
- Address availability, accessibility, cost, and quality of health care
- Review and revise periodically to reflect new developments in planning, delivery, and technology
- Recognize, but do not apply, develop, or duplicate standards or requirements related to quality which have been adopted and enforced by national or State licensing or accrediting authorities

Current State of the State Health Plan



Old and Largely Outdated

COMAR 10.24.12: Inpatient Obstetrical Services (2002)

COMAR 10.24.14: Alcoholism and Drug Abuse Intermediate Care Facility Treatment Services (2002/2013)

Old and Moderately Outdated

COMAR 10.24.18: Neonatal Intensive Care Services (1998/2006)

COMAR 10.24.10: General Hospital Services (2009) *(informal comments under review)*

Updated in Last Ten Years

COMAR 10.24.09: Rehabilitation Hospital Services (2013)

COMAR 10.24.13: General Hospice Services (completed in 2013; delayed by legislature until 2016) *Work Group review in 2022*

COMAR 10.24.16: Home Health Agency Services (2016)

Updated in Last Six Years

COMAR 10.24.15: Organ Transplant Services (2017)

COMAR 10.24.17: Cardiac Surgery and Percutaneous Coronary Intervention Services (PCI) (2019)

COMAR 10.24.20: Comprehensive Care Facility (Nursing Home) Services (2019) *(Acquisition Work Group in 2023 may require changes)*

COMAR 10.24.11: General Surgical Services (2021)

COMAR 10.24.07: Psychiatric Hospital Services (2021)

Established in Last Six Years - COMAR 10.24.19: Freestanding Medical Facility Services (2017)

Underdeveloped

COMAR 10.24.07: Residential Treatment Center Services (1997/2021)

COMAR 10.24.08: Chronic Care Hospital Services (2007/2019)

Final Action on CON Applications - Frequency



The SHP Chapters guiding the review of CON applications for which final decisions (or application withdrawals) occurred between Jan. 2011 and Apr. 2023 (n=111)

	<u>Projects</u>	
45%		
COMAR 10.24.11: General Surgical Services	20	HIGH FREQUENCY
COMAR 10.24.20: Comprehensive Care Facility (Nursing Home) Services	16	
COMAR 10.24.13: General Hospice Services.....	14	
35%		
COMAR 10.24.10: General Hospital Services	11	MEDIUM FREQUENCY
COMAR 10.24.14: Alcoholism and Drug Abuse ICF Treatment Services	15	
COMAR 10.24.16: Home Health Agency Services	13	
20%		
COMAR 10.24.07: Psychiatric Hospital Services	7	LOW FREQUENCY
COMAR 10.24.09: Rehabilitation Hospital Services	6	
COMAR 10.24.07: Residential Treatment Center Services.....	3	
COMAR 10.24.17: Cardiac Surgery and PCI Services.....	3	
COMAR 10.24.15: Organ Transplant Services	1	
COMAR 10.24.18: Neonatal Intensive Care Services.....	1	

CON Applications and LOIs In the Pipeline – June 2023



Active Applications (Docketed and Undocketed) Projects

COMAR 10.24.10: General Hospital Services (2009)	2
COMAR 10.24.14: Substance Abuse ICF Treatment Services (2002/13)	1
COMAR 10.24.21: Acute Psychiatric Services (2021)	1

Valid Letters of Intent Letters

No valid LOIs at this time



SHP Recommended Updates – High Priority

1. COMAR 10.24.20: Comprehensive Care Facility (Nursing Home) Services (2019)

- Updated in 2019, but 2023 Nursing Home Acquisition WG currently in process
- Update to incorporate Workgroup recommendations, including CMS “Five Star Standard” limitations

2. COMAR 10.24.07: Residential Treatment Center Services (1997/2021)

- These regulations were situated in the previous psychiatric hospital services regulations updated in 2021
- Were not updated in 2021
- Low frequency use but higher priority given chronic problem of hospital overstay and bed capacity issues; obsolescence of current regulations elevate priority

3. COMAR 10.24.14: Alcoholism and Drug Abuse ICF Services (2002/2013)

- Much of the plan is outdated
- Medium frequency use
- Identified in the 2018 CON Modernization Report as a poor fit for the CON regulatory model – 2019 deregulation of bed capacity additions for existing facilities – this statutory change made the need standard for Track 1 ICFs (“private beds”) obsolete

SHP Recommended Updates– Medium Priority



1. COMAR 10.24.13: General Hospice Services (2013)

- Nine years old but delayed implementation to 2016 - needs streamlining based on 2019 legislation
- Declined frequency use in recent years, likely a result of no scheduled reviews (not updating need projections) and the elimination of CON for inpatient beds
- Need to create opportunity for more consumer choice (12 jurisdictions have a single hospice provider)
- Identified in the CON Modernization Report (2018) as a poor fit for the CON regulatory model (not a “bed” service)– bed additions for existing general licensed hospice to add GIP unit deregulated in 2019

2. COMAR 10.24.16: Home Health Agency Services (2016)

- Seven years old but needs streamlining based on use
- Medium frequency use, quality measures in process of being revised by CMS
- Look for ways to align with TCOC payment model
- Identified in CON Modernization Report (2018) as a poor fit for the CON regulatory model (not a “bed” service)

SHP Recommended Updates– Medium Priority



3. COMAR 10.24.19: Freestanding Medical Facility Services (2017)

- These regulations have been used five times for review of hospital conversions between 2017 and 2021 – never used to create new satellite emergency centers
- Never used in CON project reviews – only five exemption reviews
- Review and revision will be informed by that experience
- No hospital to FMF conversions are on the horizon

4. COMAR 10.24.09: Rehabilitation Hospital Services (2013)

- Eight years old
- Low frequency use

SHP Recommended Updates– Medium Priority



5. COMAR 10.24.17: Cardiac Surgery and PCI Services (2019)

- These regulations are rarely used for CON project reviews, but they are frequently used for Certificate of Ongoing Performance reviews
- Minor changes to standards have been recommended by the Cardiac Services Advisory Committee
- Staff recommends additional minor changes to account for a recent change to the rating cycle used by the Society of Thoracic Surgeons
- On the horizon: migration of some elective PCIs to an ambulatory surgery setting

SHP Recommended Updates– Low Priority



COMAR 10.24.18: Neonatal Intensive Care Services (1998/2006)

- MDH perinatal system standards incorporated by reference – this is core of regulation
- No projects for 12 years – then one CON application in 2023

COMAR 10.24.12: Obstetric Services (2002)

- Very old and moderately outdated
- Very low frequency use – prior to 2023 (two filed) only one CON review in prior 21 years

COMAR 10.24.15: Organ Transplant Services (2017) Low frequency – recent update

COMAR 10.24.08: Chronic Hospital Services (CCF regulations became COMAR 10.24.20 in 2019)

- These regulations are a remaining section of the former nursing home chapter, COMAR 10.24.08
- No CON project reviews in last 12 years – policy direction likely to be largely negative with respect to any new development



Projected Timeline for SHP Updates

CY 2024

COMAR 10.24.20: Comprehensive Care Facility (Nursing Home) Services *High Priority*

COMAR 10.24.07: Residential Treatment Center Services *High Priority*

COMAR 10.24.14 Alcoholism and Drug Abuse ICF Services *High Priority*

CY 2025

COMAR 10.24.13: General Hospice Services *Medium Priority*

COMAR 10.24.16 Home Health Agency Services *Medium Priority*

COMAR 10.24.17 Cardiac and PCI Services *Medium Priority*

CY 2026

COMAR 10.24.19 Freestanding Medical Facility Services *Low Priority*

COMAR 10.24.09 Rehabilitation Hospital Services *Low Priority*

Update on the Status of Pending Regulations



A. COMAR 10.24.01 - the **Procedural Regulations** were published in the July 14, 2023 issue of the Maryland Register to initiate the formal 30-day comment period

1. Comment period runs through August 14, 2023
2. Review comments, finalize the regulations and make a recommendation to:
 - Adopt as proposed; or
 - Adopt with non-substantive changes; or
 - Repropose with substantive changes (this draft would come back to the Commission)
3. Notice of Final Action to adopt if no comments received and/or no changes requested

B. COMAR 10.24.11 - **General Hospital Services** proposed regulations were published on MHCC website for informal comment through June 28, 2023

1. Staff to review comments, develop revised draft the regulations, and ask Commission to consider adoption of proposed regulations