

MARYLAND HEALTH CARE COMMISSION

UPDATE OF ACTIVITIES

July 2022

EXECUTIVE DIRECTION

Government Relations and Special Project – Tracey DeShields

State Policy Update

MHCC staff continues to work on studies and workgroups required by bills passed in the 2022 legislative session.

MHCC-related news coverage: selected articles and commentary

Health Facilities

Maryland Department of Health. “Maryland Department of Health announces more than \$81 million in federal funding to support emergency transport services.” June 14, 2022. State of Reform. Available from: <https://stateofreform.com/news/maryland/2022/06/maryland-department-of-health-announces-more-than-81-million-in-federal-funding-to-support-emergency-transport-services/>

Center Maryland. “UMd. Children’s Hospital plans \$600K renovation to emergency department.” June 24, 2022. Center Maryland. Available from: <https://centermaryland.org/2022/umd-childrens-hospital-plans-600k-renovation-to-emergency-department/>

MedStar Southern Maryland Hospital. “MedStar Southern Maryland Hospital Center receives primary stroke designation.” June 29, 2022. Southern Maryland Chronicle. Available from: <https://southernmarylandchronicle.com/2022/06/29/medstar-southern-maryland-hospital-center-receives-primary-stroke-designation/>

Health Disparities and Health Equity

St. Mary’s County Health Department. “Maryland Department of Health to expand primary care program during open application period.” June 16, 2022. Southern Maryland Chronicle. Available from: <https://southernmarylandchronicle.com/2022/06/16/maryland-department-of-health-to-expand-primary-care-program-during-open-application-period/>

Kotz, D. “University of Maryland Medicine launches Precision Health Study to create biggest and most diverse research database in state.” June 21, 2022. University of Maryland School of Medicine. Available from: <https://www.medschool.umaryland.edu/news/2022/University-of-Maryland-Medicine-Launches-Precision-Health-Study-to-Create-Biggest-and-Most-Diverse-Research-Database-in-State.html>

Pasia, N. “What They’re Watching: Angelo Edge, Aetna better health of Maryland.” June 24, 2022. State of Reform. Available from: <https://stateofreform.com/news/maryland/2022/06/what-theyre-watching-angelo-edge-aetna-better-health-of-maryland/>

Behavioral Health

Pasia, N. “Mental Health Association of Maryland supports maternal behavioral health initiatives.” June 29, 2022. State of Reform. Available from: <https://stateofreform.com/news/maryland/2022/06/mental-health-association-of-maryland-supports-maternal-behavioral-health-initiatives/>

Healthcare Data

Medisolv. “The state of Maryland collaborates with CRISP and Medisolv to become the first state in the country to accept electronic clinical quality measure data from hospitals.” June 7, 2022. PR Newswire. Available from: <https://www.prnewswire.com/news-releases/the-state-of-maryland-collaborates-with-crisp-and-medisolv-to-become-the-first-state-in-the-country-to-accept-electronic-clinical-quality-measure-data-from-hospitals-301561299.html>

Telehealth

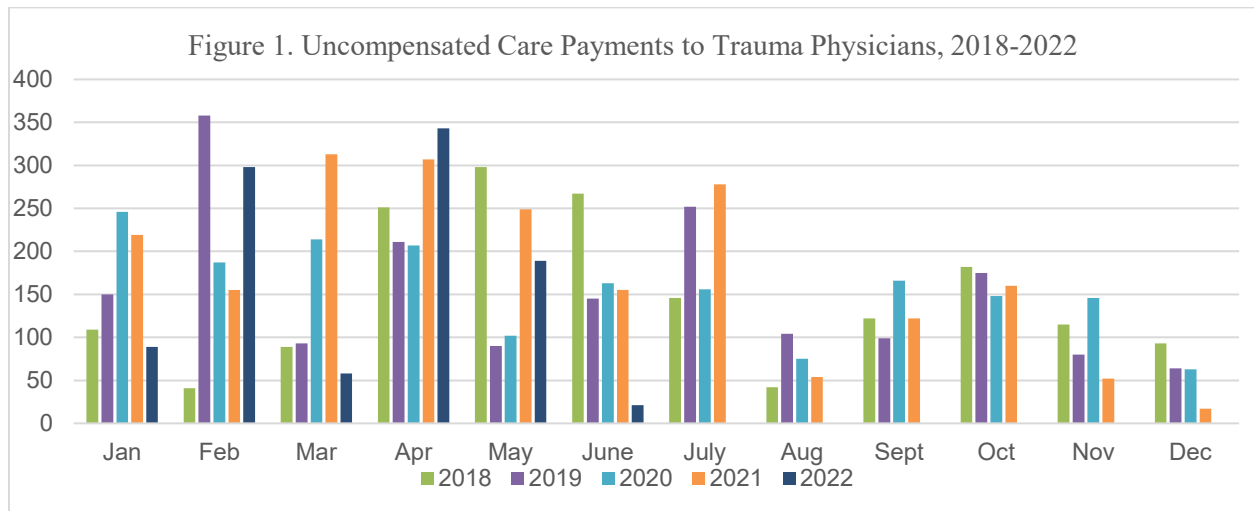
Maryland Department of Health. “MDH announces \$700,000 HHS grant to enhance telehealth services in family planning sites.” June 21, 2022. Southern Maryland Chronicle. Available from:

<https://southernmarylandchronicle.com/2022/06/21/md-dept-of-health-receives-one-year-nearly-700000-hhs-grant-to-enhance-telehealth-services-in-family-planning-sites/>

Maryland Trauma Physician Services Fund

Uncompensated Care Processing

Trustmark Health Benefits, the third-party administrator (TPA) for the Trauma Fund, processed \$21,465.47 uncompensated care claims through June 2022.



MHCC Website: The MHCC website (<https://MHCC.maryland.gov>) had 3,869 users in the month of June 2022.

Wear The Cost

In April 2022, 959 users visited the site.

Maryland Quality Reporting

The Maryland Quality Reporting had 6,775 users, 7,700 sessions and 9,285 pageviews in June. The average session duration was 39 seconds. Website activity metrics decreased overall this month, but this was expected since the second flight of the Maryland Public Television campaign that prompted higher than usual summer website traffic was completed last month.

The site receives the most website referrals from MHCC’s homepage (30.4%). However, this month the website also had 10.9% of its referrals from the Google advertisements associated with the Maryland Public Television campaign. Maryland 211 and pch.com were next accounting for 2.2% and 2.3% of website traffic referrals, respectively.

Referrals from social media sites remain consistent. Facebook continues to be the primary social media referral source, accounting for 99.5% of all social referrals. Instagram Stories, BuzzFeed, Dailymotion, Glassdoor and Tagged are all new social referral sources and are likely related to the MPT campaign.

Figure 2: Number of Website Users per Month, July 2021 - June 2022

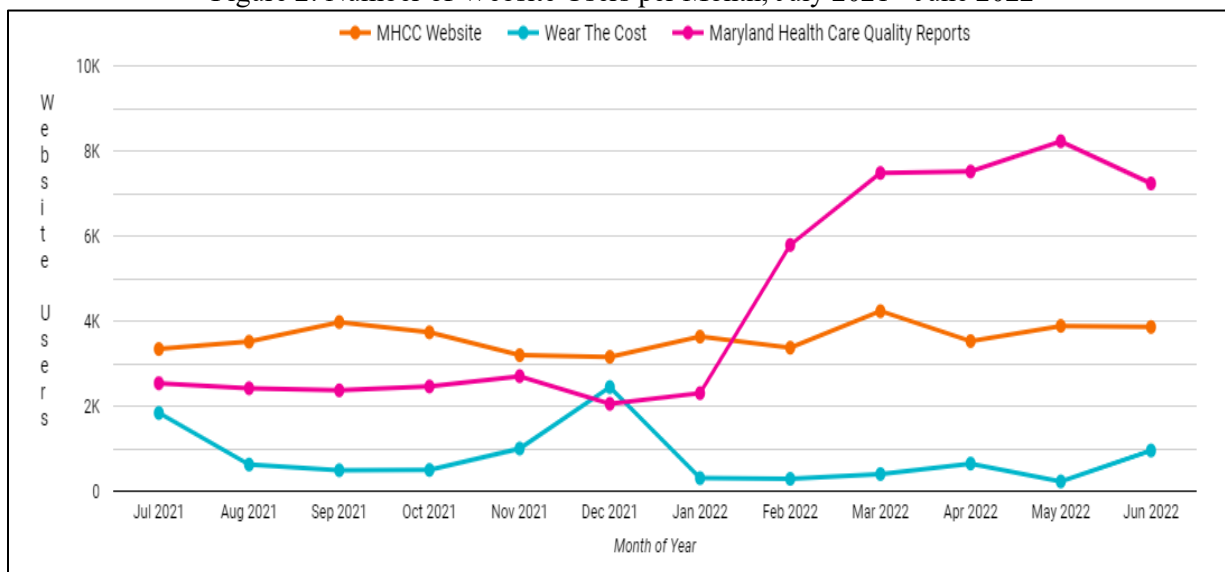


Figure 2 shows the number of website users over a 12-month period for each of the three websites maintained by Commission staff. Specific information about each website is listed above.

CENTER FOR ANALYSIS AND INFORMATION SYSTEMS

Cost and Quality Analysis – Shankar Mesta

No data update reported this month. The staff is monitoring the federal proposed legislation that would fund further development of state APCDs. The grant program was authorized in the 2020 No Surprises legislation that was signed in late 2020. Funding for the state grant program was never approved. Maryland, along with most other APCD states, would be eligible to apply for the grants.

The Agency for Healthcare Research and Quality (AHRQ) is seeking \$5 million in funding in the President’s FY 2023 budget to begin building the infrastructure for a national-level APCD. AHRQ indicates it will work with states that have already established APCDs. This national APCD effort could parallel the work AHRQ is doing on the Healthcare Cost and Utilization Project (HCUP), an initiative under which AHRQ creates national hospital discharge and hospital outpatient data bases, from state data sets containing discharges and outpatient hospital visits. MHCC expects to work with AHRQ and the Assistant Secretary for Program Evaluation (ASPE) on the APCD data systems.

APCD Public Reporting and Data Release – Mahlet ‘Mahi’ Nigatu

Signify Health, the MHCC’s Wear the Cost developer, announced on July 8, 2022, that it would wind down its Episodes of Care Services (ECS) segment in order to focus on its fast-growing and profitable Home and Community Services (HCS) business and recent Caravan Health acquisition. Signify Health informed MHCC on July 11th that it would not meet its obligations under the recently signed contract with MHCC.

The decision to abruptly close the ECS segment coincides with Signify Health’s decision to terminate its participation in the Bundled Payment for Care Improvement Advanced (BPCI-A) program. Signify stated in

a press release that recent policies implemented by the Center for Medicare & Medicaid Innovation (CMMI) affecting BPCI-A pricing have rendered the program unsustainable. The BPCI-A pricing methodology has changed repeatedly over the years and has recently included the imposition of a retrospective adjustment that is not based on publicly available data, cannot be accurately forecasted, and is known only long after a performance period has ended, making it impossible to take real-time action. The BPCI-A program was the cornerstone of the ECS business group's market. Without BPCI-A, the Signify Health leadership concluded that ECS could not survive.

The termination of the Signify Health contract will mean MHCC will need to identify another contractor to complete this work or convert to another episode system. Change Healthcare and several other firms market episode services using the Prometheus Episode Group.

Special Projects – Janet Ennis

Requests for Mandate Analysis

Staff received formal letters of request from the Senate Finance and the House Health and Government Operations Committees to evaluate three proposed mandates that failed during this year's legislative session. Consistent with Insurance Article §15-1501, it is their practice to have MHCC assess the social, medical, and financial impacts of a proposed mandated health insurance service or coverage before approving legislation to adopt the new mandate. The requested evaluations relate to the following failed bills:

- (1) SB 634 – Health Insurance – Home Test Kits for Sexually Transmitted Diseases – Required Coverage
- (2) HB 142 – Health Insurance – Coverage of In Vitro Fertilization – Revisions
- (3) SB 725/HB 974 – Health Insurance – Physical Therapy – Copayments, Coinsurance, and Deductibles

MHCC staff drafted small procurement bid boards for actuarial consulting services to conduct each analysis, also allowed under Insurance Article §15-1501, to carry out the statutory provisions. Regarding, the first bid board for an actuarial consultant to evaluate SB 634, which requires coverage of home test kits for sexually transmitted diseases, staff received four proposals and the Evaluation Committee will select the successful contractor this week. The second bid board on the physical therapy analysis was posted on June 15th, bids were due by July 1st, and the Evaluation Committee is currently reviewing the six proposals received. The successful vendor should be selected by next week. Finally, the third bid board for the IVF analysis will be posted by mid-July. Staff anticipates that each actuarial evaluation will be completed by mid-Fall of 2022 and presented to the Commission for approval. All three mandate studies are due to the legislature by the end of the year.

CENTER FOR HEALTH CARE FACILITIES PLANNING AND DEVELOPMENT

Acute Care Policy and Planning – Eileen Fleck

COMAR 10.24.10 State Health Plan (SHP) Regulations for General Acute Care Hospital Services

The work group formed for updating COMAR 10.24.10 met on June 22nd to discuss changes to the bed need methodology and other project review standards. Materials for the meeting were posted on MHCC's web site at: https://mhcc.maryland.gov/mhcc/pages/home/workgroups/workgroups_acute_care_hospital.aspx

This meeting was likely the final meeting of the work group, and the next step will be development of draft regulations for internal review.

Long-Term Care Policy and Planning – Linda Cole

Minimum Data Set (MDS)/Long-Term Care (LTC) Survey

A Request for Proposals, posted in May, invited bids to serve as a contract consultant for MDS, a patient-level data set of nursing home use, and MHCC's annual LTC facility and program survey. Responses were initially due by June 17. It was extended until July 1. (No bids were received.)

Hospice Work Group

A Hospice Work Group, convened during 2018-2019, will resume meetings in July. The Group will discuss updates needed for the SHP regulations (COMAR 10.24.13). Meeting information has been posted on the Commission's website at:

https://mhcc.maryland.gov/mhcc/pages/home/meeting_schedule/meeting_schedule.aspx

MHCC Facility Surveys – General Hospices and LTC Facilities

Part II of the FY 2021 Hospice Survey is due by July 11, 2022. Staff completed the FY 2021 Long Term Care Survey for comprehensive care facilities (CCFs or nursing homes) on June 14, 2022, with 100% of the surveys accepted. One CCF, Maria Health Care, closed in 2021 and there were twenty-two changes of ownership during FY 2021 (total $n=228$ on July 11th as per MDH). With the survey finalized, staff also completed the Nursing Home Assessment data collection needed for the calculation of the FY 2023 MHCC Nursing Home User Fee Assessment.

On June 30, 2022, staff sent out reminder notices to special chronic care hospitals, assisted living facilities, and adult day care programs that had not yet been completed for the FY 2021 LTC Survey. Data for these provider types is due July 14, 2022.

Certificate of Need (“CON”) – Wynnee Hawk

Changes to Approved CONs

Adventist Healthcare, Inc. d/b/a Washington Adventist Hospital – Docket No. 13-15-2349 (Montgomery County)

Request to change the original CON condition requiring 24/7 operation of an urgent care center in Takoma Park. The new condition is:

With its closure of the urgent care center on the former Washington Adventist Hospital campus, Adventist HealthCare, Inc. shall open a primary care office with embedded behavioral health counseling in Takoma Park as outlined in Exhibit A. Adventist HealthCare, Inc. may not eliminate these services without the approval of the Maryland Health Care Commission.

CON Letters of Intent

Alpas La Plata, Inc. – (Charles County)

Establish a 36-bed Track One Alcoholism and Drug Abuse Intermediate Care Facility at 1014 Washington Avenue in La Plata. In addition to the regulated medically-monitored intensive inpatient bed capacity (ASAM Level 3.7), the project will also include clinically-managed residential-level beds (ASAM Level 3.5) that are not regulated under the CON program.

CON Applications Filed

Encompass Health Rehabilitation Hospital of Southern Maryland – Matter No. 22-16-2458 – (Prince George's County)

Addition of ten beds to the approved 60-bed special rehabilitation hospital currently under construction 5081 Howerton Way in Bowie.

Estimated Project Cost: \$13,109,242

Determinations of Coverage

- **Ambulatory Surgery Centers**

Adventist Healthcare Surgery Center at National Harbor, LLC – (Prince George's County)

Establish an ambulatory surgery center with two sterile operating rooms and two non-sterile procedure rooms at 201 National Harbor Boulevard, Suite 500, at National Harbor.

- **Acquisition/Change of Ownership**

Oak Manor Center for Rehabilitation & Healthcare – (Montgomery County)

Acquisition of the above-referenced CCF. The real property and bed rights are owned by Axis Health at Oak Manor propco LLC and will be acquired by 3415 Greencastle Road Propco LLC. The facility is operated by Axis Health at Oak Manor opco LLC and will be operated, post- transaction, by 3415 Greencastle Road Opco LLC.

Purchase Price: \$142,500,000 for four CCFs; Oak Manor, Birch Manor, Calvert Manor, and Long View

Birch Manor Center for Rehabilitation and Healthcare – (Carroll County)

Acquisition of the above-referenced CCF. The real property and bed rights are owned by Axis Health at Birch propco LLC and will be acquired by 7309 Second Avenue Propco LLC. The facility is operated by Axis Health at Birch opco LLC and will be operated, post-transaction, by 7309 Second Avenue Opco LLC.

Purchase Price: \$142,500,000 for Birch Manor, Oak Manor, Calvert Manor and Long View

Calvert Manor Center for Rehabilitation and Healthcare – (Cecil County)

Acquisition of the above-referenced CCF. The real property and bed rights to the facility are owned by Axis Health at Calvert propco LLC and will be acquired by 1881 Telegraph Road Propco LLC. The facility is operated by Axis Health at Calvert opco LLC and will be operated, post-transaction, by 1881 Telegraph Road Opco LLC.

Purchase Price: \$142,500,000 for Calvert Manor, Birch Manor, Oak Manor, and Long View

Long View Center for Rehabilitation and Healthcare – (Carroll County)

Acquisition of the above-referenced CCF. The real property and bed rights to the facility are owned by Axis Health at Long View propco LLC and will be acquired by 3332 Main Street Propco LLC. The facility is operated by Axis Health at Long View opco LLC and will be operated, post- transaction, by 3332 Main Street Opco LLC.

Purchase Price: \$142,500,000 for Long View, Birch Manor, Oak Manor, and Calvert Manor

Caroline Center for Rehabilitation and Healthcare – (Caroline County)

Acquisition of the above-referenced CCF. The real property and bed rights to the facility are owned by Axis Health at Caroline propco LLC and will be acquired by 520 Kerr Avenue Propco LLC. The facility is operated by Axis Health at Caroline opco LLC and will be operated, post-transaction, by 520 Kerr Avenue Opco LLC.

Purchase Price: \$44,500,000 for Caroline Center and Manokin Center

Manokin Center for Rehabilitation and Healthcare – (Somerset County)

Acquisition of the above-referenced CCF. The real property, and bed rights to the facility are owned by Axis Health at Manokin propco LLC and will be acquired by 11974 Edgehill Terrace Propco LLC. The facility is operated by Axis Health at Manokin opco LLC and will be operated, post-transaction, by 11974 Edgehill Terrace Opco LLC.

Purchase Price: \$44,500,000 for Manokin Center and Caroline Center

Capital Projects

Luminis Health Doctors Community Medical Center – (Prince George’s County)

Renovate existing emergency department (ED) space to create a safe secure space for adult behavioral health patients. The project will renovate space across from the ED to create behavioral health rooms that have the full capabilities and functions of standard ED rooms. The project will take place within the existing hospital without any addition to the existing physical structure and will not add any new services or change bed capacity.

Estimated Project Cost: \$1,400,000

\$500,000 is requested from the Maryland Hospital Association’s 2023 Hospital Bond Program.

- **Notification of Changes to Bed Capacity**

Avenues Recovery Center of Chesapeake Bay, LLC – (Dorchester County)

Addition of 84 beds alcoholism and drug abuse intermediate care facility (ICF) beds by the above-referenced alcohol and drug abuse ICF. The additional beds exist and have been used as American Society of Addictions Medicine (ASAM) Level 3.5 clinically-managed residential beds. The facility proposes to also use the beds for ASAM Level 3.7 medically-monitored intensive inpatient services, i.e., ICF beds. There is no capital expenditure associated with the addition of these 84 beds.

- **“Waiver” Bed Additions**

Montgomery Village Care Center – (Montgomery County)

Addition of ten CCF beds for a total of 157 licensed CCF beds at the facility
Authorization expires 6/28/23 if beds are not licensed within one year.

Johns Hopkins Bayview Medical Center – (Baltimore City)

Addition of ten special rehabilitation hospital beds for a total of 38 beds.

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

Dennett Road Manor (Garrett County)

Transaction: Acquisition of assets

CURRENT

Owner of the real property: Axis Health at Frostburg Propco, LLC

Owner of bed rights: Axis Health at Frostburg Propco, LLC

Operator: Dennett Road Manor, Inc.

POST-TRANSACTION

Owner of the real property: DRM Healthcare Realty, LLC

Owner of bed rights: DRM Healthcare Operations, LLC

Operator: DRM Healthcare Operations, LLC

Purchase price: \$15,543,000

Additional information: The CCF has a bed capacity of 99 beds and is located at 1113 Mary Drive, in Oakland. The facility has no Memorandum of Understanding (MOU) with Medicaid. The anticipated closing date of the transaction is August 1, 2022.

Commission staff notes that the Maryland CCF owned by one of the persons acquiring this CCF has a poor rating (one star out of five) on the CMS Nursing Home Compare Five-Star Quality Rating System. In addition, this facility, Peace Healthcare Lions Center, while operated by the acquiring entity, has been flagged by CMS for instances of abuse. Although the acquiring entity has met the notification requirements for an acquisition, it is notable that the track record of the persons acquiring this CCF would probably fail to meet the requirements for docketing of a CON application to establish or expand a CCF under the State Health Plan Quality Rating standard [COMAR 10.24.20.05A(8)].

Mountain City Center for Rehabilitations and Nursing (Allegany County)

Transaction: Acquisition of assets

CURRENT

Owner of the real property: Axis Health at Frostburg Propco, LLC

Owner of bed rights: Axis Health at Frostburg Propco, LLC

Operator: Axis Health at Frostburg OPCO, LLC

POST-TRANSACTION

Owner of the real property: MC Healthcare Realty, LLC

Owner of bed rights: MC Healthcare Operations, LLC

Operator: MC Healthcare Operations, LLC
Purchase price: \$13,816,000

Additional information: The CCF has a bed capacity of 137 beds and is located at 48 Tarn Terrace, in Frostburg. The facility is in compliance with the minimum level of service to Medicaid patients required by its MOU with Medicaid. The anticipated closing date of the transaction is August 1, 2022.

Commission staff notes that the Maryland CCF owned by one of the persons acquiring this CCF has a poor rating (one star out of five) on the CMS Nursing Home Compare Five-Star Quality Rating System. In addition, this facility, Peace Healthcare Lions Center, while operated by the acquiring entity, has been flagged by CMS for instances of abuse. Although the acquiring entity has met the notification requirements for an acquisition, it is notable that the track record of the persons acquiring this CCF would probably fail to meet the requirements for docketing of a CON application to establish or expand a CCF under the State Health Plan Quality Rating standard [COMAR 10.24.20.05A(8)].

CENTER FOR HEALTH INFORMATION & INNOVATIVE CARE DELIVERY

Health Information Technology Division – Nikki Majewski, Division Chief

Telehealth Study

The National Opinion Research Center (NORC) is advancing study activities related to a literature review, claims analyses, the provider survey, consumer interviews, and the behavioral health focus groups. Drafting and iterative reviews of the Technical Report and Final Recommendations Report (reports) is underway. Staff plans to host payer and provider town hall meetings in July to gather information on the current telehealth landscape that will be considered for inclusion in the reports. Recommendations on telehealth coverage and payment levels are due to the Senate Finance Committee and the House Health and Government Operations (HGO) Committee by December 1, 2022.

Interstate Telehealth Expansion Study

Westat was competitively awarded a contract to complete the interstate telehealth expansion study. The study is being conducted at the request of the HGO Committee to evaluate the benefits, risks, opportunities, and barriers of interstate telehealth. Findings will inform potential future legislation related to health care services from out-of-state practitioners. A preliminary kick-off meeting is planned for July. A report is due to the HGO by December 2023.

Prescription Drug Reporting

Technical discussions with key stakeholders is underway to explore reporting options from dispensers of non-controlled prescription drugs in Maryland. Chapter 296 (House Bill 1127), *Public Health – State Designated Exchange – Health Data Utility*, of the 2022 Laws of Maryland (LOM) requires dispensers to electronically report this information to the State-Designated Health Information Exchange (CRISP) for purposes of care coordination and treatment of patients.

Hospital Assessment

An analysis of data collected via the 2022 *Hospital Health Information Technology Survey* (survey) is progressing. All acute care hospitals responded to the survey, which assesses use of electronic health records (EHRs), health information exchange (HIE), telehealth, social determinants of health (SDoH) technology,

electronic advance directives, and cybersecurity controls. A preliminary assessment of SDoH survey responses was completed.

Federally Qualified Health Centers (FQHC) Environmental Scan

Data collection for the *FQHC Health IT Questionnaire* (questionnaire) is advancing. About 10 FQHCs representing 56 percent of service delivery sites in Maryland have completed the questionnaire that was released in June. The questionnaire was developed in collaboration with the Mid-Atlantic Association for Community Health Centers. Findings will be used to inform health IT FQHC learning network activities.

Electronic Data Interchange

Payers have submitted their 2022 *Electronic Data Interchange Progress Report* and analysis of the data is underway. Payers with annual premiums of at least \$1 million are required by COMAR 10.25.09, *Requirements for Payers to Designate Electronic Health Networks*, to report census level information on administrative health care transactions by June 30th. A findings summary is anticipated in September.

Regulations

Amendments to COMAR 10.25.17, *Benchmarks for Preauthorization of Health Care Services*, were drafted based on stakeholder comments received during the informal public comment period. The changes extend the duration of a benchmark waiver from two to five years; adds language requiring payors granted a waiver to notify MHCC within 30 days when circumstances justifying the waiver have changed; adds language to permit MHCC to withdraw a waiver for cause; and includes other miscellaneous changes. Draft modifications were also made to COMAR 10.25.19, *State Recognition of an Electronic Advance Directives Service*, to remove a vendor technical requirement to use a select standard for non-witnessed advance directives. Chapter 321 (Senate Bill 824), *Health – Accessibility of Electronic Advance Care Planning Documents*, of the 2022 LOM requires vendors to meet the technology, security, and privacy standards set by MHCC.

Cybersecurity

Updates to the Cybersecurity Readiness Assessment Tool are underway. The tool is based on the National Institutes of Standards and Technology Cybersecurity Framework and is designed to assist small practices and FQHCs with evolving cybersecurity practices. Planning is progressing on a series of educational webinars overviewing best practices for cybersecurity.

Innovative Care Delivery Division – Melanie Cavaliere, Division Chief

Advanced Care Delivery

Primary Care Workgroup

Planning activities are underway to convene a Primary Care Workgroup (workgroup). Chapter 667 (Senate Bill 734) *Maryland Health Care Commission – Primary Care Report and Workgroup* of the 2022 LOM requires MHCC to submit a planning report by December 1, 2023 and an annual report beginning in 2024 on (1) an analysis of primary care investment over the preceding year in relation to total health care spending over the previous year; (2) ways to improve the quality of and access to primary care services, with special attention to increasing health care equity, reducing health care disparities, and avoiding increased costs; and (3) any findings and recommendations.

Practice Transformation Grant Activities

Drafting of practice-specific work plans in collaboration with MedChi Care Transformation Organization (CTO) was completed for 44 practices in the *Advancing Practice Transformation in Ambulatory Practices* program. Practice work plan review meetings will conclude in July. Development and workflow redesign activities is underway by the CTO in collaboration with staff.

Practice Roundtable

The practice health equity roundtable (roundtable) discussed opportunities for addressing practice health equity concerns in the medical neighborhood. Strategies considered by the roundtable include identification of social resources for patients, patterns of need in their community, and community-based organizations to facilitate referrals. The roundtable plans to finalize its recommendations in July.

Electronic Health Networks

Three electronic health networks (EHNs) renewed their MHCC certification in the second quarter. COMAR 10.25.07, *Certification of Electronic Health Networks and Medical Care Electronic Claims Clearinghouses* require payers that accept electronic health care transactions originating in Maryland to accept transactions only from MHCC certified EHNs. EHNs seeking MHCC certification must meet national standards related to privacy and confidentiality, business practices, physical and human resources, technical performance, and security. Certification is valid for a two-year period; roughly 30 MHCC certified EHNs operate in Maryland.

Health Information Exchange Division

Privacy and Security Regulations

Revisions to align COMAR 10.25.18, *Health Information Exchanges: Privacy and Security of Protected Health Information*, with federal policies is progressing. Post & Schell, P.C. (contractor) was competitively selected in August 2020 to propose changes to modernize the regulations. A contract modification is anticipated to go before the Board of Public Works for approval in August, extending the contractor's scope of work as it relates to development of regulations in support of legislation passed by the Maryland General Assembly in 2021 and 2022.

Consumer Consent Management

Several HIEs operating in Maryland are reviewing technical specifications for a consumer consent management utility (CMU). The CMU is in development by CRISP and will include several options for HIEs to connect to the CMU. Chapter 798 (House Bill 1375), *Health Information Exchanges – Electronic Health Information – Sharing and Disclosure*, of the 2021 LOM requires CRISP to implement a CMU for purposes of providing consumers with a centralized web-based process for opting out or back into data sharing through HIEs.

Health Data Utility Framework

A review is underway for proposals received in response to an RFP (not to exceed \$50,000) to develop a *Health Data Utility (HDU) Framework – A Guide for Implementation* (framework). The framework will present key considerations for advancing HIEs towards an HDU model that supports clinical and public health purposes. An award is anticipated in July.

CENTER FOR QUALITY MEASUREMENT AND REPORTING

The Maryland Quality Reporting (MQR) website

MQR Website Updates

Staff continue to work with Advanta Government Services (AGS), the website contractor, to update the newly redesigned website. Routine updates and maintenance are ongoing. Staff continues to respond to consumer inquiries received via the quality reports email. Home health data was most recently updated last month.

MQR Website Traffic

Staff monitors traffic to the consumer site using Google Analytics software. Website traffic was lower in June (6,775 users) compared to the May (7,649 users). However, number of users continues to remain higher than usual as a result of the MPT advertising campaign (discussed below in the MQR Website Promotion section). The most frequently viewed topics on the MQR site include assisted living, nursing homes, and hospital price transparency. 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 June. Topics included Men's Health Month, Brain and Alzheimer's Awareness Month, National Safety 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 promote the MQR website using additional social media platforms such as LinkedIn and NextDoor.

Staff also continue to work with Maryland Public Television (MPT) on a promotional campaign to increase public awareness of the MQR website. Digital, social media, and print advertising began in early February and will continue through December. Since the campaign began in February, the number of users to the site has increased significantly. Historically there are approximately 2,000 visitors to the site per month; since February there have been more than 32,000 visits to the site, or an average of approximately 6,400 users per month.

Staff continue to give website demonstrations to various industry stakeholder groups to increase awareness of the website. Staff recently presented at the annual regulatory conference hosted by the Maryland Health Information Management Association (MdHIMA) and the Maryland Association of Clinical Documentation Integrity Specialists (MdACDIS). There were approximately 80 meeting participants made up of coders and documentation specialists. The feedback was overwhelmingly positive, and staff were asked to return to present at future meetings.

Hospital Quality Initiatives – Courtney Carta

Healthcare Associated Infections

All Maryland acute care hospitals are required to report certain healthcare associated infections to the CDC's National Healthcare Safety Network (NHSN). MHCC publicly reports this data annually on the MHCQR consumer website. Required reporting includes the following infection types: central line associated bloodstream infections (CLABSI), catheter associated urinary tract infections, Clostridium difficile (c. diff), and Methicillin-Resistant Staphylococcus Aureus (MRSA), and surgical site infections (SSI). The validation process is nearing completion and the results will be posted on the MHCQR website in July.

Electronic Clinical Quality Measures

Electronic Clinical Quality Measures (eCQMs) are performance measures that track hospital quality using data from electronic health records. Hospitals are required to submit eCQMs as part of the Centers for Medicare

and Medicaid Service’s (CMS) Inpatient Quality Reporting (IQR) program. Although Maryland hospitals do not participate in the CMS payment program, MHCC will require these measures in alignment with CMS. Staff are working with HSCRC, CRISP, and Medisolv to begin this statewide data collection initiative to expand reporting and transparency to the public.

Long Term Care and Health Plan Quality Initiatives—Stacy Howes

Nursing Home Family Experience of Care Survey

The results of the 2021 survey should be available on the consumer website within the next few weeks. The 2022 survey administration kickoff was June 1. Nursing home facilities have received their instruction packets from the vendor, Market Decisions Research. Facilities are in the process of uploading their resident and responsible party data to the secure server.

Health Care Worker Influenza Vaccination Survey (Nursing Homes, Assisted Living, Home Health, and Hospice)

Data reporting has concluded for the 2021-2022 flu season for all long-term care facilities. This was the inaugural season for collecting hospice and home health data, and all hospices and home health agencies participated. The home health and hospice worker vaccination rates were 79% and 83%, respectively. The nursing home worker vaccination rate was much lower than in previous years at 75%, and the assisted living worker vaccination rate was 59%, which is lower than last year but like previous years. Several nursing home and assisted living facilities attributed their lowered flu vaccination rates to staff opting to receive only a COVID-19 vaccine and not receive a flu vaccine, and that in many facilities staff were required to wear masks regardless of flu vaccine status.

Assisted Living Quality Analysis SB531

SB531 requires the MHCC to conduct an analysis of the quality of care in assisted living (AL) facilities with fewer than 10 beds. The purpose is to determine whether AL programs receive sufficient reimbursement to cover costs, there are sufficient staffing and resources, and quality can be improved. A bid board procurement has been developed, and the deadline for submission of proposals to support the study is July 15, 2022.

Health Plan Quality Initiatives

No updates to report.

Outpatient Quality Initiative—Mariama Gondo

Outpatient Quality Initiative

Staff continues to prepare for the launch of the 2021 enhanced freestanding ambulatory surgical facility survey in the fall of this year.