

**MARYLAND HEALTH CARE COMMISSION**

***UPDATE OF ACTIVITIES***

**December 2024**

***EXECUTIVE DIRECTION***

***Government Relations and Special Project – Tracey DeShields***

**State Policy Update**

**Behavioral Health Workforce Assessment**

Work on the Mental Health Workforce Assessment is completed. The report has been received very well. Our consultant, Andy Hall, Trailhead Strategies has done several presentations on the report findings and recommendations. There have been several articles written about the report. See below.

**Website Redesign**

BreakThrough (BT) Technologies is continuing their work on the redesign of MHCC website. They have completed the homepage of the website. They are working on incorporating some of the feedback provided to them regarding the interior page design. They have provided a staging environment that will allow IT staff to experiment and learn the mechanics of formatting the homepage and the interior pages of the website. n.

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

**Behavioral Health**

K. Anderson, MD *Faces a Behavioral Health Workforce Crisis, Conduit Street, Maryland Assn of Counties, December 4, 2024*

<https://conduitstreet.mdcountries.org/2024/12/04/md-faces-a-behavioral-health-workforce-crisis/>

*More Behavioral Healthcare Workers Needed, WCBC Radio, December 4, 2024*

<https://www.wbcbradio.com/?archiv=more-behavioral-healthcare-workers-needed>

**Hospitals**

A. Palmisano, *How to fix Maryland's long emergency room wait times, Commentary, Maryland Matters, December 5, 2024*

<https://marylandmatters.org/2024/12/05/how-to-fix-marylands-long-emergency-room-wait-times/>

**Health Information**

*"Change Healthcare cyberattack drives 2024 into another record year for health data breaches,"*

<https://www.statnews.com/2024/12/05/change-healthcare-cyberattack-2024-record-year-us-data-breaches/>

Stat+ Health Tech, December 6, 2024

*"Zetaris unveils AI tool to revolutionise healthcare data use,"*

<https://itbrief.com.au/story/zetaris-unveils-ai-tool-to-revolutionise-healthcare-data-use>

IT Brief, December 5, 2024

**Nursing Homes**

J. Berklan, "Nursing home association shake-ups hit states, as HFAM votes to dissolve," <https://www.mcknights.com/news/nursing-home-association-shake-ups-hit-states-as-hfam-votes-to-dissolve/>, McKnights Long-term Care News, December 9, 2024

**Maryland Trauma Physician Services Fund**

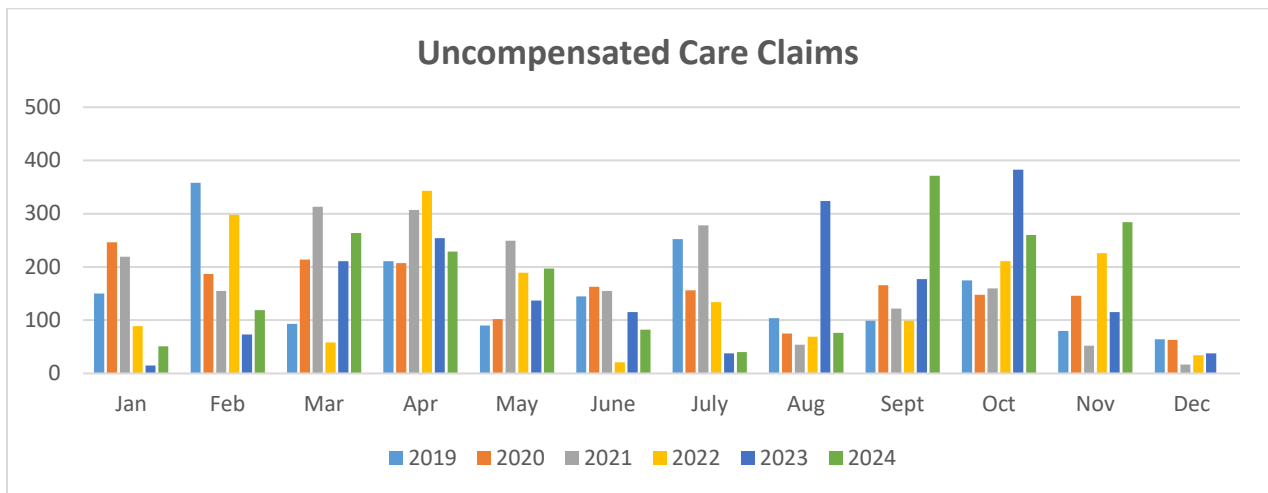
**Uncompensated Care Claims**

The November processing of Uncompensated Care Claims (UCC) for the Trauma Physicians Services Fund totaled **\$284,190** as shown in the chart below. Effective November 30, 2024, Luminare Health is no longer our Third-Party Claims Administrator (TPA) due to a corporate decision to leave the trauma market. MHCC released an RFP in November. The evaluation team has recommended a bidder. The award will be presented to the Board of Public Works in January.

Processing for uncompensated trauma care claims at Luminare concluded at end November. At that time there was no backlog of claims. Practices and trauma hospitals have been informed that processing of uncompensated care claims will pause until a new contract has been awarded.

**Trauma Equipment Grant**

The Trauma Physicians Services Fund issued **\$4,466,321** in one time Trauma Equipment grants to all Level II and Level III trauma centers in the month of November. The grants were awarded from the \$7 million dollar reserve at the end of fiscal year 2024. After the equipment grant awards, the Trauma Fund reserve stood at approximately \$2.5 million.



**COMAR 10.25.10 Maryland Trauma Physician Services Fund**

The comments period for COMAR 10.25.10 Maryland Trauma Physicians Services Fund has ended. There were no substantive comments. The Commission will take final action on the proposed regulations at the December 19, 2024 public meeting.

**MHCC Website:** The MHCC website (<https://MHCC.maryland.gov>) had 4,377 during the month of November 2024.

**WTC Website** had 2,184 visitors during the month of November 2024. The staff is continuing to negotiate a new contract for the episode grouper developed by Change Health Care, a subsidiary of Optum. CareFirst and the Health Services Cost Review Commission also use the Change Health Care grouper.

Maryland Quality Reporting

Maryland Quality Reporting had 1,349 total users in November, a slight decrease from the previous month (a decrease of 13.6%). The website also had similar decreases in new users and sessions (decreases of 10.0% and 14.6%, respectively). The website notably had a 24.2% increase in views per session and a 14.0% increase in the average session duration. These results suggest users are spending more time on the website and viewing more pages.

This month, the site received referrals of at least 10 users or more from Maryland 211(71 or 38.6%), Howard County Government (21 or 11.4%), Maryland Attorney General (15 or 8.2%), and Medicare (11 or 6.0%). Facebook remained the primary social media referral source.

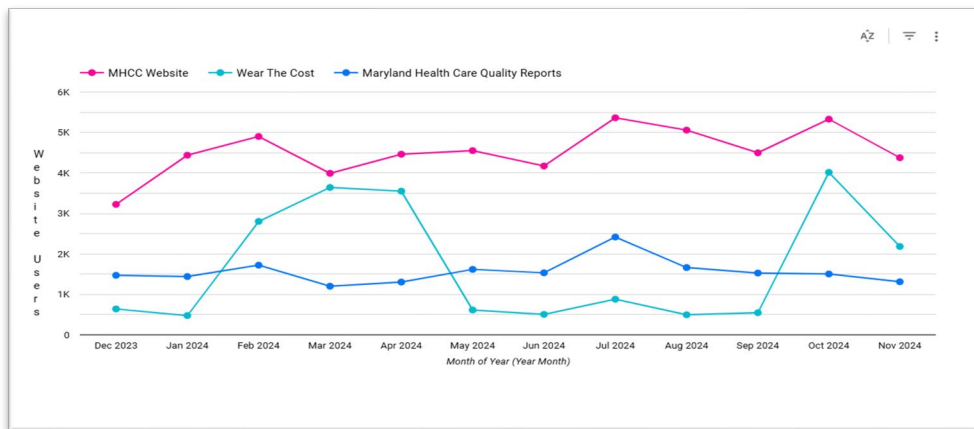


Figure 1 shows the number of website users over a 12-month period for each of the three websites maintained by Commission staff. Specific information about each website is listed above.

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

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

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

**As of the end of November 31 (89%) payors have submitted a complete clean Q3 2024.**

In the third quarter of 2024, 31 payors, representing 89%, successfully met the Tier 3 data quality validation checks. To ensure timely and accurate data submission, the teams from MHCC and Onpoint proactively reached out to payors with weekly reminders during the last two weeks of November. These reminders

emphasized the importance of submitting clean and validated Q3 2024 data before the deadline of November 30, 2024.

However, three payors encountered issues, leading to their data failing the Tier 3 quality checks. The Onpoint team is currently collaborating with these payors to facilitate the resubmission process and rectify the discrepancies. Meanwhile, Alterwood Advantage has not yet submitted its data by the end of November. The payor has communicated that they are facing staffing challenges, but they have assured that they will prioritize submitting the required data as soon as possible.

### **2025 MCDB Data Submission Manual**

The staff presented the 2025 data submission manual to the commissioners, seeking their approval. Based on input from the payor representatives, the manual was updated and posted on the MHCC website.

The staff reviewed the 2024 covered lives report to determine any new reporting entities required to submit data to the MCDB as mandated. They identified that Elevance Health's subsidiary, WellPoint, will offer individual marketplace plans in Maryland starting in 2025. The final list of reporting entities has been posted on the MHCC website.

In January 2025, the staff will conduct annual data submitter training to guide the new changes.

### **MHCC Data Regarding HMO Payments to Non-Participating Providers**

Maryland Health-General Article §19-710.1 specifies a methodology to calculate minimum payment rates that Health Maintenance Organizations (HMOs) must pay to non-contracting (non-trauma) providers that provide a covered evaluation and management (E&M) service to an HMO patient. The Maryland Health Care Commission (MHCC) is required to update these minimum payment rates, which are published by the Maryland Insurance Administration (MIA) annually.

As specified in the law, E&M services as defined by the Centers for Medicare and Medicaid Services (CMS) in the Berenson-Eggers Type of Services (BETOS) terminology are calculated from the CMS Medicare Physician Fee Schedule that applied in August of 2008 adjusted by the cumulative Medicare Economic Index (MEI) prior to the start of each new calendar year. MHCC and MIA have agreed to study modifying the methodology if new E&M service codes are included in the BETOS E&M categories. The new codes would not have fees going back to the 2008 payment baseline. Instead, fee levels for new codes will be based on the current Medicare Physician Fee Schedule for the geographic region and inflated using the MEI in subsequent years.

Staff worked closely with MIA staff to post the latest HMO payment rates to Non-Participating Providers on the MIA website.

## **APCD Public Reporting and Data Release – Mahlet 'Mahi' Konjit-Solomon**

### **Wear The Cost Contract Development**

Significant progress has been made on the five-year sole source contract for the episode development work of Wear The Cost. The contract is now in its final review phase, with plans to submit it to the Board of Public Works by mid-December. This strategic partnership with Change Healthcare (CHC) aims to enhance the development process and drive continuous updates and improvements to the Wear The Cost website.

### **Data Release Activities**

All three applications reviewed by the Data Release Advisory Committee (DRAC) have now received their approval letters. The West Virginia University (WVU) team responded satisfactorily to the DRAC's questions,

resulting in their application being approved. All three applicants are currently reviewing their Data Use Agreements and are in the process of making payments. Onpoint, MHCC's MCDB contractor is on standby to generate the data and proceed with the transfer as soon as the DUA signed, and data fee payment is made.

**HB 570/SB 487 -- HMO Out-of-Network Payment Study**

The HB 570/SB 487 study remains on track for submission by the end of December. Staff are finalizing the report's content and completing edits. This comprehensive analysis compares payment methodologies for non-participating providers between HMOs and PPOs, providing valuable insights for legislative and policy considerations. The final report will be submitted to the Committee by December 31, 2024.

**Special Projects – Jason Caplan**

**Mandated Study on Elimination of Cost Sharing for Genetic Testing**

Lewis & Ellis, a consulting actuarial firm, was hired by MHCC to provide the comprehensive analysis to evaluate the cost of eliminating cost sharing for cancer genetic testing as requested by the November 23, 2023, letter from the Senate Finance Committee and House Health and Governmental Operations Committee. Ms. Traci Hughes, a Vice President and principal consulting actuary with Lewis & Ellis, presented a comprehensive analysis to Commissioners at the November 2024 Commission Meeting.

Ms. Hughes pointed out that while genetic testing is highly accurate in detecting a variation associated with an increased risk of cancer, this does not guarantee that the patient will develop the disease. Only about 10% of all cancers may be caused by genetic inheritance. About 25% of all genetic tests were completed for Cancer gene testing purposes. In a provider interview panel, a key area of importance was ensuring that clearly defined clinical guidelines for what qualifies as an "individual with a personal or family history of Cancer" should be provided. This is to ensure that testing is efficiently targeted to minimize undue patient anxiety and prevent overutilization. Most private health insurers cover genetic counseling and testing at little to no out-of-pocket cost to individuals who meet specific personal or family cancer history criteria. The estimated fiscal impact range from low, middle and high PMPM is \$0.02, \$0.17 and \$0.53.

The Commissioners then voted to approve the report, which will be sent to legislative Committees at the end of the month.

***CENTER FOR HEALTH CARE FACILITIES PLANNING AND DEVELOPMENT***

**Acute Care Policy and Planning – Eileen Fleck**

**Certificates of Ongoing Performance**

Staff presented four Certificate of Ongoing Performance reports at the November Commission meeting. Three of these reports were for percutaneous coronary intervention (PCI) services at MedStar Franklin Medical Center (Docket No. 24-03-CP051), MedStar Union Memorial Hospital (Docket No. 24-24-CP-054), and Carroll Hospital Center (Docket No. 24-06-CP053). One Certificate of Ongoing Performance report was for cardiac surgery services at the University of Maryland Capital Regional Medical Center (Docket No. 24-24-CP045). The Commission approved each application for PCI services for four years with one or two conditions, and the application for cardiac surgery services was approved for three years without any conditions.

## **Long-Term Care Policy and Planning – Jeanne Marie Gawel**

### **Home Health Agency (HHA) Utilization Tables, Fiscal Year 2022**

MHCC's FY 2022 HHA Annual Survey collects a uniform data set from all licensed HHAs in Maryland. The HHA agency and jurisdiction-specific survey data includes utilization and financing information and is used to create HHA Utilization Tables that are posted on the MHCC website. The survey data reported in these 25 tables include admission volumes, referral sources, primary diagnosis on admission, average visits per Medicare client, dispositions, average cost per visit, revenues by payer type, and home health agency personnel. Stakeholder can access the FY 2022 HHA Utilization Tables on the MHCC website at: [https://mhcc.maryland.gov/public\\_use\\_files/homehealthdownload.html](https://mhcc.maryland.gov/public_use_files/homehealthdownload.html)

### **Special Chronic Hospital Bed Occupancy Reports**

MHCC staff developed two chronic hospital bed occupancy reports. One report includes fiscal year 2024 data on the number of licensed chronic hospital beds, patient days, discharges, average lengths of stay ("days"), and average annual bed occupancy rates for the State's six chronic hospitals (four private and two state-operated hospitals). The second report reviews the three-year trend in chronic hospital bed occupancy for fiscal years 2022-2024. Both reports were published in the December 2, 2024, issue of the *Maryland Register*, and can be found on the Commission's website at the following links:

- *Use of Special Hospital Chronic Beds: Maryland, FY 202 --*  
[https://mhcc.maryland.gov/mhcc/pages/hcfs/hcfs\\_hospital/documents/acute\\_care/chcf\\_chronic\\_hospital\\_beds%202024\\_FY.pdf](https://mhcc.maryland.gov/mhcc/pages/hcfs/hcfs_hospital/documents/acute_care/chcf_chronic_hospital_beds%202024_FY.pdf)
- *Average Annual Chronic Hospital Occupancy Rates by Jurisdiction and Facility: Maryland, FYs 2022 – 2024 --*  
[https://mhcc.maryland.gov/mhcc/pages/hcfs/hcfs\\_hospital/documents/acute\\_care/chcf\\_chronic\\_hospital\\_occupancy\\_22\\_24\\_fy.pdf](https://mhcc.maryland.gov/mhcc/pages/hcfs/hcfs_hospital/documents/acute_care/chcf_chronic_hospital_occupancy_22_24_fy.pdf)

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

#### **Creekside Center for Rehabilitation and Nursing (Washington County)**

##### **CURRENT**

Owner of the real property: 1183 Luther Drive LLC

Owner of bed rights: 1183 Luther Drive LLC

Operator: Creekside SNF Operating Company LLC

##### **POST-TRANSACTION**

Owner of the real property: 1183 Luther Drive LLC

Owner of bed rights: 1183 Luther Drive LLC

Operator: Creekside SNF Operating Company LLC

Purchase price: \$0 (lease)

##### **Additional Information**

Creekside Center for Rehabilitation and Nursing (Creekside) is an 80-bed nursing home that is part of a Continuing Care Retirement Community (CCRC) located at 1183 Luther Drive, Hagerstown, Maryland (Washington County). The facility has no beds with more than two residents per room. The facility currently has an average of 1 out of 5-star rating on the CMS Nursing Home Compare website. Because the facility is a CCRC it is exempt from having a Medicaid Memorandum of Understanding (MOU). The anticipated closing date of the transaction is December 1, 2024.

This transaction has no changes to the real property or bed rights. The operator of the facility is undergoing a change in ownership. The operator's sole member (Abraham Smilow) is changing to a new sole member (Matt Weisz).

### **Quality Review of Other Facilities**

In the last three years, Mr. Weisz has held ownership interest in three facilities, Greenwood Center and Manatawney Center in Pennsylvania and Allbridge Rehabilitation in Ohio.<sup>1</sup> Commission staff reviewed recent annual inspection reports and the subsequent plans of correction for the facilities.

- Greenwood Center has a below-average rating of one star in the CMS Nursing Home Compare Five-Star Quality Rating System. On August 4, 2022, Greenwood Center had 26 citations in its most recent survey and was cited with a harm tag for failure to keep the area free from accidents/hazards.
- Manatawney Center is a three-star facility which has an average rating in the CMS Nursing Home Compare Five-Star Quality Rating System. The facility had nine citations in its most recent survey. On October 2, 2023, CMS cited Manatawney Center with a harm tag for inappropriate pressure ulcer care and lack of prevention of new ulcers from developing. On April 13, 2023, the facility was cited again with a harm tag for inappropriate pressure ulcer care.
- The CMS Care Compare website did not have a CMS Nursing Home Compare Five-Star Quality Rating for Allbridge Rehabilitation. There was a complaint survey from March 7, 2024, with two citations. The first was cited as minimal harm for failure to notify of changes related to a resident's dialysis schedule, and the second was cited as actual harm for not keeping the environment free from accidents hazards related to a burn a resident sustained from heating water in the employee break room.

### **Lawsuits**

Commission staff reviews closed or settled cases within the last three years involving criminal conviction or civil finding of fraud or abuse, a federal court database, as well as a search of the Office of Inspector General Exclusions and did not find anything substantive to report. Mr. Weisz identified several lawsuits in the application; however, all were open cases. In addition, Mr. Weisz attested that during the past ten years he has not:

- been convicted of felony or crime;
- pleaded guilty, nolo contendere, or entered a best interest plea of guilty;
- received a diversionary disposition regarding a felony or crime that relates to the ownership or management of a health care facility;
- or has paid a civil penalty in excess of \$10 million dollars

### **Recommendation**

In accordance with Health- General §19-1401.2, before taking any action on a license, the Secretary must consider any findings and recommendations of the Maryland Health Care Commission to the Office of Health Care Quality under Health- General §19-115.

In summary of the findings, the Commission staff concludes Mr. Weisz would probably not meet the requirements for docketing a CON application to establish or expand a comprehensive care facility (CCF)

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<sup>1</sup> According to Medicare, Mr. Weisz is also listed as a Director at two other nursing homes both located in Ohio: Bella Terrace (1 star), and Wesleyan Village (2 stars). However, he has attested that he has no operational responsibilities at these two facilities.

under the State Health Plan Quality Rating standard [COMAR10.24.20.05A (8)]. Only two of the three related facilities had star ratings. One of the facilities was rated below average, and the other average. All three related facilities received harm tags for resident health and safety on annual or complaint surveys within the last three years.

Facility	Star Rating	Surveys and Number of Citations
Greenwood Center, PA	1	3/29/24-26 4/14/23-28 4/22/22-9
Manatawney Center, PA	3	2/15/24-9 4/13/23-9 4/9/22-7-11
Allbridge Rehabilitation, OH	NR	3/7/24 -one complaint survey with two harm tags

MHCC staff accessed CMS Care Compare on 8/31/24 and 11/14/24. The average number of citations nationally is 9.6.

Commission staff have identified performance concerns with Mr. Weisz's facilities based on this limited review. Commission staff recommends that OHCQ consider the above information in its licensing decision.

**Facility Services Planning and Policy/Certificate of Need – Ewurama Shaw-Taylor**

**Certificate of Need (CON)**

**CONs Approved**

**SurgCenter at National Harbor dba Harborside Surgery Center Docket No. 24-16-2470 (Prince George's County)**

Harborside Surgery Center submitted a CON application proposing adding one sterile operating room (OR) to its existing center, resulting in three sterile ORs after project completion and establishing an ambulatory surgical facility (ASF). The project will renovate and convert an existing procedure room to an OR, resulting in a facility with three ORs and two procedure rooms. The estimated capital cost to renovate the existing space into a third OR is \$247,985, to be paid for by the applicant in cash. The Commission approved this project at the November 21, 2024 meeting.

**CON Applications Filed**

**Foundations Inpatient, LLC (Baltimore County)**

A CON application proposing an intermediate care facility (ICF) was filed on behalf of Foundations Inpatient, LLC. to establish a 75-bed Level III.7 Medically Monitored Inpatient program at 7131 Rutherford Road, Windsor Mill, MD 21244. Commission staff had a site visit on November 26, 2024 to review the facility.

**Determinations of Coverage**

- **Ambulatory Surgery Centers (ASC)**

**UM Chesapeake Surgery Center, LLC (Harford County)**

UM Chesapeake Surgery Center notified the Commission of the addition of a surgical specialty and updates to the list of physicians who will be practicing at the facility located at 515 Tollgate Road in Bel Air, Maryland 21014. The ASC currently operates with two sterile operating rooms and two non-sterile procedure rooms. The center anticipates initiating Ear, Nose and Throat (ENT) surgical services and that the following changes to the surgeons who practice at the ASC:

- Richard Zell, M.D., Orthopedic Surgeon, is no longer a practitioner at the ASC. Richard Zell had ownership interest in the ASC at 5.25 percent that will be transferred to UM Chesapeake Surgery Center.
- Micheal Livesay, M.D., Orthopedic Surgeon, will join the ASC, and will perform the same surgical procedures as other orthopedic surgeons at UM Chesapeake Surgery Center.
- Robert Clayton, M.D., Otolaryngologist, will join the ASC and will perform the ENT procedures.
- **Acquisition/Change of Ownership (Not ASC)**

**Hygea Detox, Inc (Baltimore County)**

Hygea Detox, Inc. notified the Commission of an ownership change regarding the CON holders for two Track One intermediate care facilities (ICFs): Hygea Detox at Middle River located at 1210 Middle River Road, Baltimore, Maryland 21237 and Hygea Detox at Camp Meade, LLC located at 817 S. Camp Meade Road, Linthicum Heights, Maryland 21090.

- **Other**

**Jar Inc., d/b/a Americare In-Home Nursing HH7152 (Prince George's County)**

Americare In-Home Nursing notified the Commission of a change in address for the administrative offices of Americare. The existing facility is located at 10001 Derekwood Road, Suite 204, Office #108, Lanham, Maryland 20706 and will relocate to 8181 Professional Place, Suite 105, Landover, Maryland 20785.

**Peninsula Home Care, LLC (Somerset, Wicomico and Worchester Counties)**

Peninsula Home Care notified the Commission of a change of trade name to TidalHealth Home Care. The MHCC will change its records to reflect the new trade name of this home health agency as TidalHealth Home Care, with offices at 1001 Mt. Hermon Road, Suite 200 Salisbury, Maryland 21804.

**Blakehurst CCRC (Baltimore County)**

Blakehurst is adding five CCF beds to its current 44-bed facility, for a total of 49 beds. The project is authorized pursuant to the provisions of COMAR 10.24.01.03K that allows a CCRC that has less than 300 beds to allocate up to 24 percent of the number of independent living units to CCF beds without MHCC review and approval of a CON.

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

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

**Prior Authorization**

The prior authorization report required by Chapters 848/847 (SB 791/HB 932), *Health Insurance – Utilization Review – Revisions* (2024) was submitted to the General Assembly. The law tasked MHCC and the Maryland Insurance Administration with reviewing the development of standards for modifying prior authorization requirements for prescription drugs, medical care, and other services, including approaches implemented or

considered by other states. The report contains findings from a national environmental scan (scan) and recommendations for future legislative consideration. Lewis & Ellis LLC was competitively selected to support completion of the scan.

### **Hospital Health IT Survey**

Drafting of a spotlight overviewing the integration of social needs data into electronic health record (EHR) systems is advancing. The spotlight incorporates notable observations from an analysis of responses to the annual Hospital Health IT Survey and national comparisons as it relates to health-related social needs screening and use of the data to support patient and population health. In addition, staff is analyzing data on hospitals' adoption of artificial intelligence (AI) technologies. A spotlight overviewing the hospital AI landscape is scheduled for release in Q1 2025.

### **Regulations**

Proposed permanent regulations to support legislation passed by the General Assembly in 2021 and 2022 were published in the December 2<sup>nd</sup> edition of the Maryland Register. Existing regulatory frameworks, COMAR 10.25.07, *Certification of Electronic Health Networks and Medical Care Electronic Claims Clearinghouses* and COMAR 10.25.18, *Health Information Exchanges: Privacy and Security of Protected Health Information*, were amended. COMAR 10.25.07 includes new provisions for electronic health networks (EHNs) to submit certain electronic administrative health care transactions to the State-Designed Health Information Exchange (HIE), CRISP. COMAR 10.25.18 includes requirements for CRISP to develop a consumer consent management application, operate a health data utility, and collect noncontrolled prescription drugs (non-CDS) information reported by dispensers.

### **Legally Protected Health Information**

An update on the implementation of Chapters 248/249 (SB 786/HB 812), *Health Reproductive Health Services – Protected Information and Insurance Requirements* (2023), was prepared for the Senate Finance Committee and the House Health and Government Operations Committee. COMAR 10.25.07 and COMAR 10.25.18 include provisions that prohibit the disclosure of mifepristone data and the diagnosis, procedure, medication, and related codes for abortion care. Staff reviewed HIE timelines to implement the necessary technical capabilities to filter and restrict legally protected health information.

### **Non-CDS Prescription Drugs**

Staff wrote an article on the utility of non-CDS dispensing information for the Maryland Board of Pharmacy's Quarterly Newsletter. The article emphasizes how enabling prescribers and pharmacists to access patient medication histories can improve clinical decision-making and increase patient safety. Chapter 296 (HB 1127), *Public Health – State Designated Exchange – Health Data Utility* mandates certain dispensers report non-CDS dispense data to CRISP to support treatment and care coordination. Dispenser reporting to CRISP is expected to begin in September 2025.

### **Electronic Data Interchange**

Staff drafted a summary highlighting findings from an analysis of payers 2023 Electronic Data Interchange Progress Reports. COMAR 10.25.09, *Requirements for Payers to Designate Electronic Health Networks*, requires payers with premiums of \$1 million or more to annually report by June 30th census-level data on electronic health care transactions. The summary is scheduled for release by the end of the year.

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

The independent review of privacy and security audit reports for CRISP and its subcontractors is nearing completion. Meyers and Stauffer LC (MSLC) was competitively selected to review SOC 2, HIPAA, COMAR, and cybersecurity reports relevant to CRISP. A report on MSLC's review and recommendations for improving the adequacy of business and technology-related controls will be released in Q1 2025.

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

### **EHN Certification/HIE Registration – Q4 2024 Update**

Two EHNs were recertified in accordance with COMAR 10.25.07. The regulations require payers operating in the State to accept transactions only from MHCC-certified EHNs. Certified EHNs are accredited or certified by a nationally recognized organization where standards related to privacy and confidentiality, business practices, physical and human resources, technical performance, and security are evaluated. There are currently 29 MHCC-certified EHNs that operate in Maryland. COMAR 10.25.18 mandates that entities meeting the definition of an HIE must obtain certification or accreditation from a nationally recognized organization and register annually with MHCC; 17 HIEs are registered.

### **Practice Transformation Grant**

Recruitment is proceeding for ambulatory practices to participate in the 2024 Advancing Practice Transformation in Ambulatory Practices Program (program). In 2021, MHCC awarded a grant to MedChi, The Maryland State Medical Society, Care Transformation Organization to support this initiative, which aligns with CMS's Transforming Clinical Practice Initiative milestones. The program helps practices prepare for participation in value-based care models. Approximately ten practices are expected to submit applications in Q4 2024.

### **Learning Network**

A learning network event is planned for December that is focused on advancing care delivery through continuous quality improvement. Presenters include the Vice President and Medical Director of a large care transformation organization as well as a hematology and oncology specialist who will discuss setting goals with clear and measurable targets for improvement. Attendees are eligible to receive continuing medical education credits.

### **Episode Quality Improvement Program Primary Care Initiative**

Support continues for the Health Services Cost Review Commission (HSCRC) in reviewing applications for its Episode Quality Improvement Program (EQIP) Primary Care (PC) Pilot Program. In July, HSCRC released a funding announcement to competitively award startup infrastructure funding to selected applicants, aimed at enhancing advanced primary care capacity in designated areas of the State. EQIP-PC funding awards are expected to be announced in Q4 2024.

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

### ***The Maryland Quality Reporting (MOR) website***

#### **MQR Website Updates**

Staff continue to work with Advanta Government Services (AGS), the website contractor, to update the [Maryland Quality Reporting](#) consumer site. Additional enhancements and updated features are underway and routine updates and maintenance are ongoing. Staff continue to respond to consumer inquiries and requests for printed material received via the quality reports email.

**MQR Website Traffic**

Staff monitors traffic to the consumer site using Google Analytics software. Website traffic was slightly lower in November (1,349 users) compared to October (1,561). The most frequently viewed topics on the MQR site include assisted living, nursing homes, and the long-term care planning toolkit. 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 November. Topics included Open Enrollment, National Hospice and Palliative Care Month, Antibiotic Awareness Month, COPD Awareness 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. They 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.

**COMR in the Community**

Staff were invited to present an overview of the Maryland Quality Reporting website and available resources to the Charlotte Hall Rotary Club. These community events provide a unique opportunity to promote and discuss the quality website with community members and share with and learn from other organizations committed to improving the lives of Maryland residents. Many thanks to Commissioner Wood for facilitating!

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

**Specialized Cardiac Services Data**

All Maryland hospitals providing PCI services must participate in the ACC NCDR CathPCI data registries and report quarterly data and detailed reports to the Commission according to established timelines. The final quarterly cardiac data coordinators meeting of 2024 occurred on November 12, 2024. Discussion points included data registry updates, a case study, and a question-and-answer session.

**Leapfrog Hospital Safety Grades**

The Leapfrog Group assigns letter grades (A-F) to hospitals based on performance on various patient safety measures. Grades are assigned twice annually, and the Fall 2024 results were recently released. Nationally, Maryland ranks 30<sup>th</sup> based on percentage of "A" hospitals. Ten hospitals received an A this grading cycle – down from 13 the previous cycle. To view hospital-specific results, click [here](#).

<b>Letter Grade</b>	<b>Maryland Spring 2024 n=40</b>	<b>Maryland Fall 2024 n=40</b>
A	13 (32.5%)	10 (25%)
B	13 (32.5%)	15 (37.5%)
C	13 (32.5%)	15 (37.5%)
D	1 (2.5%)	0 (0%)
F	0 (0%)	0 (0%)

***Long Term Care and Health Plan Quality Initiatives—Stacy Howes***

**Nursing Home Family Experience of Care Survey**

Data collection for the 2024 survey year has begun. The second round of letters inviting loved ones to complete the survey has been delivered. As of December 5<sup>th</sup>, over 2,200 completed surveys had been received.

**Long Term Care Health Care Worker Influenza Vaccination Surveys**

Nursing homes, assisted living facilities, home health agencies, and hospices continue to collect data for the 2024-2025 flu season. Staff sent an email with resources to all facilities notifying them that December 2-6 is Influenza Vaccination Week.

### **Health Plan Quality Initiatives**

Data for the year 2023 is complete, and the data is being formatted for the website. Data on the website should be updated by the end of the year or early 2025. Staff will work with the contractor, HealthData Company, to identify areas of additional investigation to support the Commission's dedication to advancing health equity.

Staff began working with the primary care dashboard workgroup to create a consumer-friendly dashboard with metrics that focus on investment in financing, workforce, access, and quality of care in primary care in the state. Health plan data will be an integral metric on the dashboard.

### **Outpatient Quality Initiative—Mariama Simmons**

#### **Freestanding Ambulatory Surgery Facility (FASF) Survey**

Staff has requested that 2023 FASF data be posted on the Commission public use database webpage. The 2023 survey results will also be posted on the Quality Reporting Consumer website within the next few weeks.

#### **Ambulatory Surgery Facilities (ASFs) and Commercial Insurance Network Report**

In October 2024, staff began working with the Executive Director and the Director of the Center for Analysis and Information Systems to address the legislative request for a report on the status of ASF participation in commercial insurance provider networks; the adequacy of access to outpatient providers across the state; the cost differential between ASF and hospital outpatient services; and the impact of incorporating ASFs in the TCOC/AHEAD model. The staff is collaborating with the Maryland Insurance Administration (MIA) and the Health Services Cost Review Commission (HSCRC) to best respond to this legislative requirement. An interim report with a workplan is due this month and a final report to the legislature is due June 2025.