



**Thursday, April 16, 2026**

**MINUTES**

Commissioner Boyle called the meeting to order at 1:03 p.m.

**Commissioners present via telephone and in person:** Bhandari, Boyle, Cheatham, Douglas, Dzirasa, Foreman, Gelrud, Jensen, O’Kane, Spinner, Stroughton-Duncan, and Wang

**Commissioners Absent:** Blake, Gilmore and Agbabiaka-Ojikutu.

**AGENDA ITEM 1**

**ACTION: CONSENT AGENDA**

- A. Approval of Minutes: March 19, 2026, meeting minutes

Item 1A were approved without objection.

**AGENDA ITEM 2**

**UPDATE OF ACTIVITIES**

Dr. Jacobs, Executive Director, of the Maryland Health Care Commission recognized a few staff members. First, he recognized Valerie Wooding who is retiring after 31 years of dedicated service as she embarks on this exciting new chapter in life. She will be greatly missed by all of us, and thank you, Valerie, for your unwavering commitment to the citizens of Maryland.

Dr. Jacobs introduced Dr. Alankrita Olson, the new Chief of Acute Care Policy and Planning. Dr. Olson brings a wealth of experience in preventive medicine and chronic disease management, along with a strong background in epidemiology. She holds a master’s degree in public health and Epidemiology and has significant clinical and policy expertise. Before joining MHCC, Dr. Olson served as Chief resident at the University of Maryland Medical Center, where she led evaluation and quality initiatives. During her tenure, she spearheaded improvement projects, worked with Medicare to evaluate preventive services, and addressed health disparities in collaboration with the Maryland Department of Health. Additionally, she treats patients at the Baltimore VA Medical Center, focusing on preventive care and chronic disease management. We are thrilled to have Dr. Olson join our division, which oversees certificates of ongoing performance.

Next, we have Melissa Heitt, who has joined MHCC as a Senior Advisor. Melissa comes to us from the Centers for Medicare & Medicaid Services (CMS), where she most recently served as the Technical Director of the Medicare-Medicaid Coordination Office, commonly known as the Duals Office. In this role, she focused on regulatory policy writing and implementation for individuals who are dually eligible for Medicare and Medicaid. Melissa also worked in the Office of Minority Health. With her background as an attorney and her experience as a law clerk, she brings a wealth of knowledge to healthcare policy.

Dr. Jacobs provided an overview of the commission meeting, noting that the agenda is shorter than usual. He discussed a couple of newly formed work groups, including the post-acute care work group led by Andre Davis. This group has conducted three focused sessions related to post-acute care, which was identified in the AHEAD model, and is connected to all regulatory working groups. The work group aims to address issues surrounding patient discharge, as well as equity, access, and affordability in care settings. Commissioner O’Kane has also participated in some of these focus groups. The next steps involve drafting a report to be submitted to the governor’s office, with a final version expected to be released later this year.

Additionally, a workforce work group has been established, with Andre also taking a leadership role. This group includes Jeanne Marie and Stacey for the post-acute care work, and Mahlet from Ken’s team for the workforce initiatives. The workforce group is focused on coordinating various workforce initiatives across different state departments to effectively address workforce challenges.

Next, we will prioritize workforce initiatives moving forward, especially considering the funding available through the rural health transformation and the policies overseen by HSCRC regarding Graduate Medical Education (GME). This work is already in progress, with the first work group meeting recently held. Additionally, there is a work group focused on assisted living, particularly unlicensed assisted living facilities. Theresa from our Quality Center and Alex Bryden have been collaborating on this effort, and a report is currently being developed that involves multiple departments.

### **AGENDA ITEM 3**

#### **ACTION: Certificate of Ongoing Performance: Adventist Shady Grove Medical Center**

Jennay Ghowrwal, Program Manager, presented the staff report and recommendation for the Certificate of Ongoing Performance application submitted by Adventist HealthCare Shady Grove Medical Center for primary and elective percutaneous coronary intervention (PCI) services. She provided an overview of MHCC staff’s analysis of the application. Staff recommended approval of Adventist HealthCare Shady Grove Medical Center’s application to allow the hospital to continue providing primary and elective PCI services for four years. Commissioners approved the Certificate without conditions.

Commissioner Douglas moved to APPROVE the Certificate of Ongoing Performance: Adventist Shady Grove Medical Center, which was seconded by Commissioner Gelrud and, after discussion, unanimously approved.

**ACTION: Certificate of Ongoing Performance: Adventist Shady Grove Medical Center is hereby APPROVED.**

#### **AGENDA ITEM 4**

##### **PRESENTATION: Collecting Denied Claims in the Maryland Medical Care Data Base**

Mr. Kenneth Yeates-Trotman, Center Director, Analysis and Information Systems, started the presentation by stating the scope and purpose of the regulations COMAR 10.25.06 by citing that MHCC is the Medical Care Data Base (MCDB) governing body and that MHCC is responsible for all MCDB operations, including data submission compliance governed by COMAR 10.25.06 regulations. These regulations establish appropriate methods for collecting Statewide healthcare data on selected services provided either under a Maryland contract or to Maryland residents by health care providers. The data is collected from payors (private and public), third-party administrators (TPAs), Managed Behavioral health care organizations, and Pharmacy Benefit Managers (PBMs). Mr. Yeates-Trotman said that the reason for amending the regulations is that the State lacks individual service-level information regarding denials, and that collecting denied claims will provide insights into payors operating in the state, utilization management procedures, and patterns in health care services that are routinely denied. Mr. Yeates-Trotman concluded the presentation by stating that MHCC is requesting informal comments on the proposed regulations during a comment period that ends on 4/30/2026.

**ACTION REQUESTED: NONE**

#### **AGENDA ITEM 5**

##### **PRESENTATION: 2026 Legislative Wrap-Up**

Tracey DeShields, Director of Policy Development and External Affairs, gave a wrap-up of the 2026 legislative session. The update included a review of the status of bills the MHCC monitored and an assessment of their impact on the agency. The review covered bill activities throughout the session, including those that occurred in the final hours. Additionally, the summary highlights the specific studies the MHCC is now required to conduct and identifies the various workgroups where the MHCC is serving as a member, co-chair, or staff lead.

**ACTION REQUESTED: NONE**

## **AGENDA ITEM 6**

### **PRESENTATION: New MHCC Website Demo**

MHCC introduced the redesigned MHCC website, developed to enhance how we communicate, engage, and deliver services to our stakeholders. This redesign prioritizes **accessibility, streamlined navigation, and robust content governance** to ensure compliance and ease of use. By providing a modern, scalable, and maintainable framework, the new site strengthens our digital presence and allows us to better serve our community both now and in the future. Valerie Agwale, Program Manager Director of Policy Development and External, gave a live demo of the new MHCC website.

**ACTION REQUESTED: NONE**

## **AGENDA ITEM 7**

### **OVERVIEW OF UPCOMING ACTIVITIES**

Dr. Jacobs provided a preview of May's Commission meeting, noting several key action items: a Certificate on Ongoing Performance for Cardiac Services, Certificate of Need for Ruxton SurgiCenter, PCI Services for Howard County Medical Center, Non-CDS Manual Update, Acquisitions Reg change, data release advisory committee, two presentations on overview takeaways from our Request for Information on social needs screening and closed-loop referral technology that will connect to CRISP and an update on Primary Care Rural Health Grant.

**ACTION REQUESTED: NONE**

## **AGENDA ITEM 9**

### **ADJOURNMENT**

Acting Chair Boyle asked for a motion to adjourn the commission meeting. There being no further business, the meeting was adjourned at 2:57 p.m. upon the motion of Commissioner Wang, which was seconded by Commissioner Foreman.