



Streamlining the Certificate of Ongoing Performance Process and Updating the State Health Plan for Cardiac Services

MARYLAND HEALTH CARE COMMISSION

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Goals

- 1. REDUCE ADMINISTRATIVE BURDEN**
- 2. IMPROVE REGULATORY EFFICIENCY**
- 3. FOCUS OVERSIGHT ON QUALITY AND PATIENT SAFETY**



Background

- ▶ Maryland regulates cardiac services through the Certificate of Ongoing Performance (COP) process under COMAR 10.24.17.
- ▶ COP reviews currently:
 - ▶ Require periodic hospital applications (usually every four years)
 - ▶ Include staff review of a large volume of submitted data (150+ pages of documents)
- ▶ At the same time:
 - ▶ Many quality metrics are now publicly available to track performance in real time
 - ▶ The need for focused reviews has increased
 - ▶ Unsure if indicative of a quality issue or outdated assessment metrics
- ▶ There is an opportunity to modernize the oversight model.



Vision for a Streamlined Oversight Model

A three-step modernization strategy:



Our Goal

Shift MHCC's role to continuous quality monitoring and targeted intervention.



Step 1: Reduce Data Submission Burden

Eliminate application requirements for data that staff can obtain independently

Examples include:

- ▶ CMS hospital quality reporting
- ▶ Society of Thoracic Surgeons (STS) registry data
- ▶ American College of Cardiology (ACC) registry data

Explore data sharing partnerships:

- ▶ Maryland Institute for Emergency Medical Services Systems (MIEMSS)
- ▶ Maryland Academic Consortium for Percutaneous Coronary Intervention Appropriateness and Quality (MACPAC)
- ▶ Cardiac Community Core Lab (CCCL)
- ▶ Maryland Cardiac Surgery Quality Initiative (MCSQI)



Step 2: Update quality assessment

Realigning quality assessment with the use of evidence-based metrics:

- ▶ Work with the Cardiac Services Advisory Committee (CSAC) to review current quality standards and evaluate new standards that better assess quality of care delivery and patient outcomes
 - ▶ Ensure metrics are clear and succinct, leaving less room for interpretation
 - ▶ Expand oversight of clinical outcomes beyond mortalities
- ▶ Revise methods for measuring compliance with standards to be more meaningful and efficient



Step 3: Update the State Health Plan and the COP Review Process

Modernize the Cardiac Services chapter of the State Health Plan: COMAR 10.24.17

- ▶ Potential reforms include:
 - ▶ Updated quality metrics
 - ▶ Simplified regulatory requirements
 - ▶ Extending COP application cycle

Streamline COP Reviews

- ▶ Develop a continual review process
- ▶ Revise applications to require less documentation from hospitals
- ▶ Improve staff workflow management