

MARYLAND HEALTH CARE COMMISSION

UPDATE OF ACTIVITIES

January 2020

EXECUTIVE DIRECTION

Government Relations and Special Projects- Megan Renfrew

Legislative Study update

EMS Reimbursement for New Care Delivery Models. MHCC submitted the actuarial report on EMS new models of care to the legislature last month (staff presented this report at the December 2019 MHCC meeting). Staff continue to work with the MHA-convened Stakeholder Innovation Group's subgroup on EMS models of care and payment reform.

Assessment of Services at the University of Maryland Shore Medical Center in Chestertown. MHCC is required, under SB 1010, to conduct an assessment of services at the hospital in Chestertown. This report will be presented to the Commission at the January meeting.

Models for Rural Health Care: Options. MHCC has contracted with NORC to develop a set of models for rural health delivery, with a focus on the Mid-Shore region of the State. The purpose of this project is to provide options for discussion within the community and with elected officials. This report will be completed in January.

Legislative Update

The 2020 legislative session begins on January 8.

On January 14, 2020, the Senate Finance Committee will hold a bill hearing on SB 106, a MHCC-proposed departmental bill that removes CON requirements for State-owned facilities. This bill is sponsored by Senator Kelley, the Chair of the Finance Committee. Staff will provide an overview of the legislative session at the January meeting. Legislative Calls with Commissioners will begin January 24th and will be held as needed on Friday mornings at 8 AM during the legislative session.

On January 30th, MHCC staff will provide a briefing to the House Health and Government Affairs Committee on the "Study of Mandated Health Insurance Services as Required under Insurance Article § 15-1502", which was approved by the Commission in November 2019. MHCC's annual budget briefings before the Budget and Appropriations committees are in mid-February.

MHCC in the news: Selected news articles and commentary

[Cohn, Meredith. "University of Maryland Medical Center in downtown Baltimore to get a new face." The Baltimore Sun, December 19, 2019.](https://www.google.com/url?rct=j&sa=t&url=https://www.baltimoresun.com/business/bs-bz-ummc-center-center-addition-20191219-vmlqhhnetfaixgoi36p3fu3vca-story.html)

<https://www.google.com/url?rct=j&sa=t&url=https://www.baltimoresun.com/business/bs-bz-ummc-center-center-addition-20191219-vmlqhhnetfaixgoi36p3fu3vca-story.html>

[Curtis, Tim. "Trump hospital price rule has similarities – and differences –with Md. Practice." The daily Record, December 5, 2019. https://thedailyrecord.com/2019/12/05/trump-hospital-price-rule-has-similarities-and-differences-with-md-practice/](https://thedailyrecord.com/2019/12/05/trump-hospital-price-rule-has-similarities-and-differences-with-md-practice/)

[Eichensehr, Morgan. "LifeBridge Health gives Bon Secours Hospital a new name." Baltimore Business Journal, December 17, 2019. https://www.bizjournals.com/baltimore/news/2019/12/17/lifebridge-health-gives-bon-secours-hospital-a-new.html](https://www.bizjournals.com/baltimore/news/2019/12/17/lifebridge-health-gives-bon-secours-hospital-a-new.html)

Hlavinka, Elizabeth, "Teenager in Psych Crisis Waits 25 days in ED for Admission", MedpageToday, January 7, 2020, <https://www.medpagetoday.com/special-reports/exclusives/84236>

Jones, Natalie. "Md. Youths needing psychiatric care find long waits, drives." *Capital News Service*, December 26, 2019. https://www.times-news.com/news/local_news/md-youths-needing-psychiatric-care-find-long-waits-drives/article_43daf79d-ac0f-5b31-a370-af9f0314d025.html.

Kozel, Kenneth D.. "Recapping 2019: Steady progress at UM Shore Regional Health." *The Star Democrat*, January 5, 2020. https://www.stardem.com/opinion/columns/recapping-steady-progress-at-um-shore-regional-health/article_9d562282-3b73-5331-b1a8-78d07db314df.html

Milligan, Carley. "UMMC's cancer center expansion downtown could bring opportunity-or traffic problems." *Baltimore Business Journal*, December 19, 2019. <https://www.bizjournals.com/baltimore/news/2019/12/19/ummcs-cancer-center-expansion-downtown-could-bring.html>

Schenke, Leann. "Presumptive Senate president visits Chestertown hospital." *Kent County News*, December 11, 2019. https://www.myeasternshorem.com/kent_county_news/news/presumptive-senate-president-visits-chestertown-hospital/article_2ebd9135-c609-5b94-9bf3-8724d2ba66f0.html

Wicklund, Eric. "Maryland Seeks Telehealth Platform to Improve Nursing Home Care." *mHealth Intelligence*, December 11, 2019. <https://mhealthintelligence.com/news/maryland-seeks-telehealth-platform-to-improve-nursing-home-care>

Yamshon, Lyndee. "Officials Seeking Skilled Nursing Telehealth Solutions-with \$750 Reward." *Skilled Nursing News*, December 12, 2019. <https://skillednursingnews.com/2019/12/officials-seeking-skilled-nursing-telehealth-solutions-with-750k-reward/>

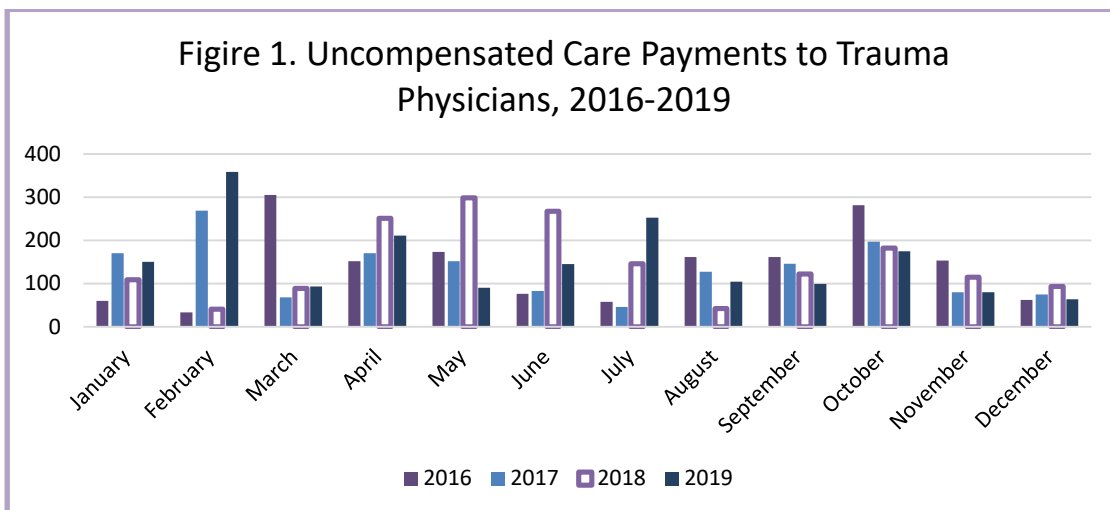
Maryland Trauma Physician Services Fund

Uncompensated Care Processing

CoreSource, Inc., the third party administrator (TPA) for the Trauma Fund processed \$64,284.64 for uncompensated care claims through December, 2019.

Equipment Grant applications for the FY 2020-2021 period have been received from Meritus Medical Center, UM Prince George's Hospital Center, LifeBridge Health, Western Maryland Health System, and Peninsula Regional Medical Center. Suburban Hospital and Johns Hopkins Bayview Medical Center will submit their applications in January.

Staff issued the first payment of \$1,833,525 to the State Primary Adult Resource Center (PARC) which will support PARC standby expenses for trauma physicians. MHCC will issue the second payment for the remaining \$611,175 by the end of March 2020.



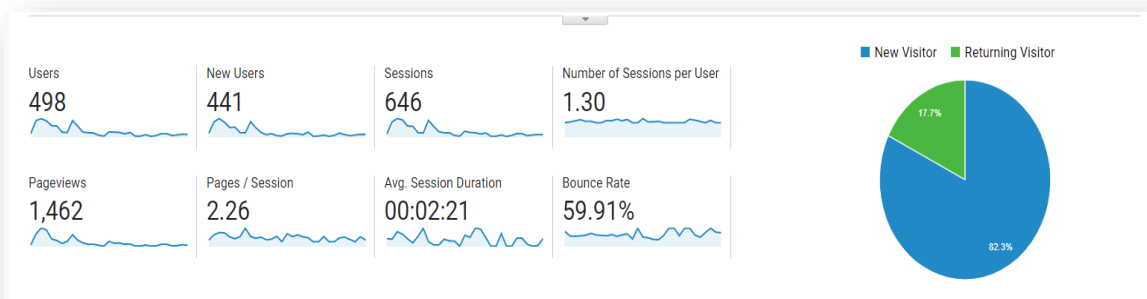
Internet Utilization – Contributors: Valerie Wooding, Julie Deppe, Sametria McCammon and Mahlet Nigatu

This section of the update describes traffic to the MHCC, the Maryland Health Care Quality Reports, and the Wear the Cost websites.

Internet Activities

MHCC Website

Data from Google Analytics for December 2019

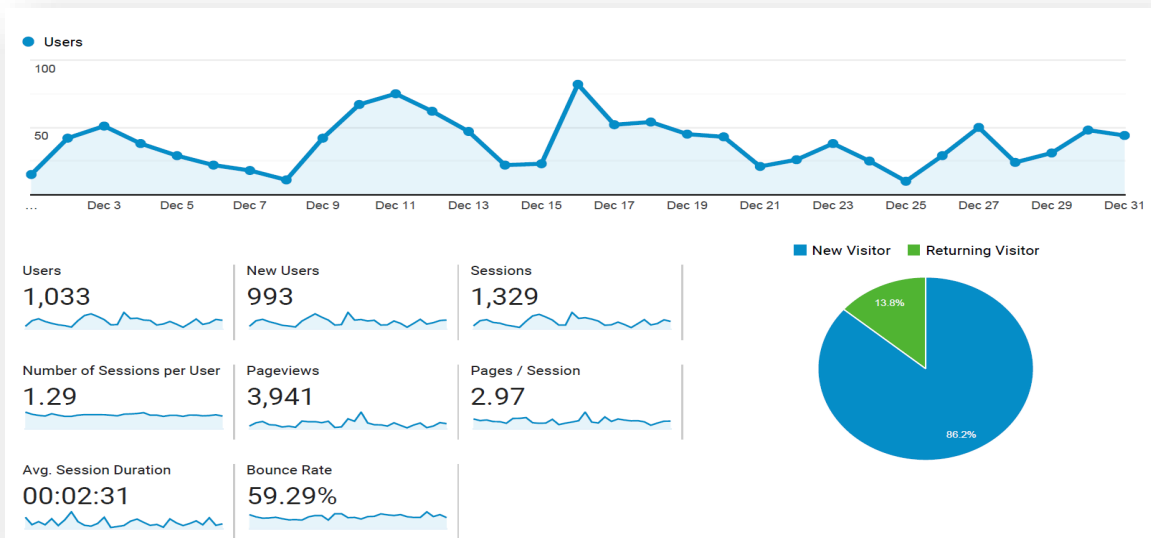


• Bounce rate is the percentage of visitors that see only one page during a visit to the site.

- As shown in the chart above, the number of sessions to the **MHCC website** for December 2019 was 646, and of these, there were 441 new users. The average time on the site was 2:20 minutes. The bounce rate of 60% is the percentage of visitors that see only one page during a visit to the website and is included in the percentage rate of both unique and returning visitor categories.
- Typically, visitors to the MHCC website arrive directly, by entering an MHCC URL or referencing our saved URL, via a search engine such as Google, or from a referral through another State site. Visitors who arrive directly are typically aware of MHCC, but visitors arriving via search engines and referrals are more likely to be new users.
- The highest referral source was from the mhcc.maryland.gov. Other government agencies include dhmh.maryland.gov and hsrcr.state.md.us. Among the most common search keywords in December were: “Maryland Health Care Commission,” “assisted living facilities,” “home-based care” and “home health care agencies.”

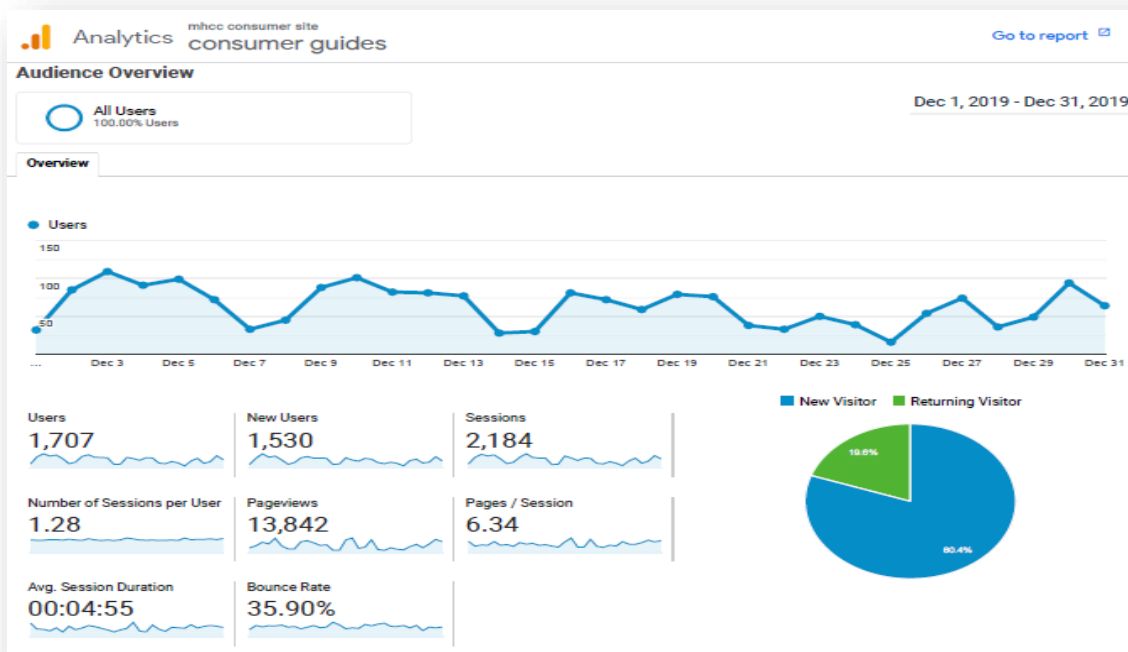
Maryland Health Care Quality Reports

The Maryland Health Care Quality Reports (MHCQR) website activity for December experienced a significant increase in website traffic but a slight decrease in user engagement once they arrived at the site. There were 1,033 users and 3,941 page views in December, an increase of 105% and 51%, respectively. The percentage of returning visitors decreased slightly to 14%. The average time spent on the site was 2.31 minutes which is lower than the historical average time on the site of 4.16 minutes. The bounce rate was 59% which indicates moderate user interest once they get to the site.



Consumer Guide to Long Term Care

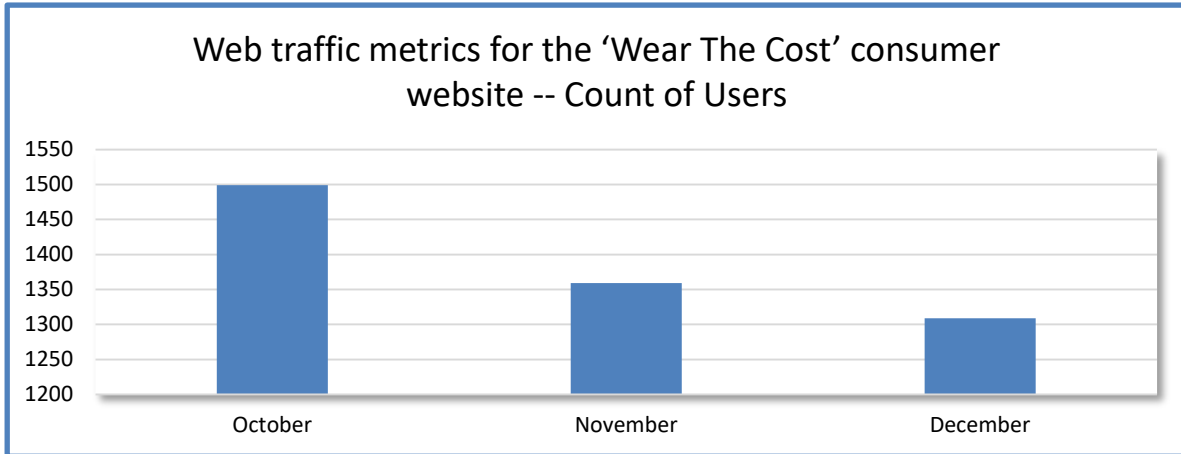
The Consumer Guide to Long Term Care website had 1,530 new users in December, representing a 4% decrease in new user traffic compared to November. The percentage of returning users increased slightly to 20%. The average time spent on the site remained consistent at 4.55 minutes, which is comparable to the historical average time on the site of 5.01 minutes. The page view rate decreased 15% in December compared to November, with an average of 6.3 pages per session. The bounce rate increased slightly to 36%; however, this percentage still indicates strong interest once a visitor gets to the website. More discussion of the website is found in the Center for Quality Measurement and Reporting section.



Wear The Cost

Web traffic metrics for the 'Wear The Cost' consumer website

The total number of visitors in December was 1309 which is a slight decrease from the month of November which was 1359. Staff expects this number to go up with the addition of new data. The average time spent on the site was one minute. The bounce rate remained the same from last month for the site at 82%.



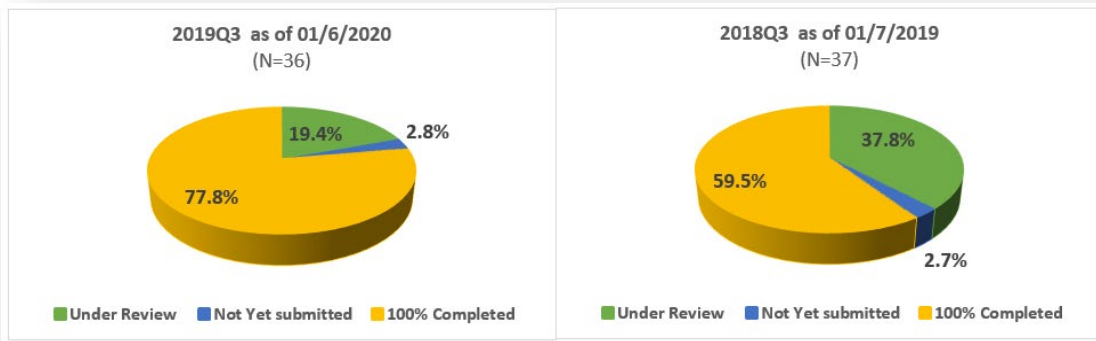
CENTER FOR ANALYSIS AND INFORMATION SYSTEMS

Cost and Quality Analysis– Shankar Mesta

MCDB Data Submission Status, Payor Compliance, and Technical Support

The number of payors under review status during third quarter of 2019 (19%) is almost 50% lower compared to the same quarter in 2018 (38%). The deadline for the 2019 Q3 submission was 11/30/2019. Thirty-six payors were required data to the MCDB for 2019 Q3 deadline. Results show that about 78% of payors had passed the data validation checks performed by Social & Scientific Systems (SSS, MCDB data vendor) compared to 60% in 2018 Q3.

Staff attributes the improvement to increased proficiency of the new SSS staff in conducting the automated and manual data review processes. SSS experienced significant staff turnover in 2018 and these transitions significantly compromised the data review. At the end of 2018, about 40% of the payors' submissions were still under review. Staff held several meetings with SSS leadership and requested a corrective action plan. These actions and SSS's responses have produced the desired impact. Staff will continue to aggressively manage SSS's performance as the need for rapid turnaround of MCDB data continues to grow.



Professional Services Report Update (2016 -2018)

Private professional payments per RVU for in network services were 104% of Medicare payments for 2018.

Results from the latest report show that private payments per RVU are about 4% higher than Medicare for 2018 about 3% higher than Medicare for 2017 and about the same as Medicare for 2016. Compared to Medicaid payment rates on average, private payer rates are about 20%, 18%, and 15% higher than Medicaid payment rates for 2018, 2017, and 2016 respectively for the same in-network services.

For the 2018 report, staff included in-network payment rates for each type of services categories. Consistent with 2016 and 2017, private payment rates are similar to Medicare for evaluation and management services, and generally pay more for imaging and tests. Private payment rates were 27%, 28% and 30% more than Medicare for imaging services during 2016, 2017 and 2018 respectively. Payment rates for procedure and test services were 34%, 42% and 48% more than Medicare for 2016, 2017 and 2018 respectively.

The payment rates for private payers are the highest relative to Medicaid payment rates as they have been since MHCC started these comparisons. For imaging services, private payers paid 59%, 63% and 66% more than Medicaid during 2016, 2017 and 2018 respectively. For procedure and tests services, private payers paid 87%, 93% and 104% more than Medicaid during 2016, 2017 and 2018 respectively.

MHCC staff will present the results of the report at the January Commission meeting.

2020 Data Submission Manual Update All Payor Meeting

MHCC staff in association with SSS held all payor meeting/training for the 2020 MCDB Data Submission on January 9th, 2020.

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

Episode of Care – Consumer-Centric Price Transparency Initiative

Commercial 2016/2017 Episode data run begun. SSS delivered the data extract to Remedy Partners. Upon receiving the data Remedy completed the data normalization and begun the Episode construction run. The data run is slated to be completed by the first week of February. The plan is to update the ‘Wear The Cost’ site with new episodes by Spring 2020.

CENTER FOR HEALTH CARE FACILITIES PLANNING AND DEVELOPMENT

Acute Care Policy and Planning – Eileen Fleck

State Health Plan: COMAR 10.24.07

Staff submitted the required report on updating the psychiatric hospital services chapter of State Health Plan regulations to the Senate Finance Committee and the House Health and Government Operations Committee on December 17, 2019. This report was required because the Commission did not adopt updated regulations for acute inpatient psychiatric services by the end of 2019.

Long Term Care Policy and Planning – Linda Cole

Minimum Data Set

During the past month, the MHCC approved the following tasks completed by the Hilltop Institute, MHCC’s consultant for the Minimum Data Set: Update on Medicaid reimbursement changes; Routine tables for nursing homes; Processing of data and episode construction.

Hospice Data and Planning

Planning is underway for the FY 2019 Maryland Hospice Survey, which is due to launch in February. Work is also underway to develop a Hospice Work Group to assist staff with updates to the State Health Plan Chapter on hospice services.

Chronic Hospital Occupancy Reports

The two Chronic Hospital Occupancy Reports, one titled “Use of Special Hospital Chronic Beds: Maryland, FY 2019” and the second titled “Average Annual Chronic Hospital Occupancy Rates by Jurisdiction and Facility: Maryland, Fiscal Years 2017 -2019” were published in the December 6, 2019 issue of the *Maryland Register*. Both reports have been posted on the Commission’s website at the following links:

https://mhcc.maryland.gov/mhcc/pages/hcfs/hcfs_hospital/documents/acute_care/chcf_chronic_hospital_use_beds_2019_20191206.pdf and
https://mhcc.maryland.gov/mhcc/pages/hcfs/hcfs_hospital/documents/acute_care/chcf_chronic_hospital_occupancy_2017_2019_20191206.pdf

Home Health Agency (HHA) Survey

The FY 2018 Home Health Agency Survey data collection period ended on December 16, 2019 and 100% of the surveys were accepted. Staff will start the data reconciliation process and create the HHA utilization reports during the next month. Staff finalized the creation of the FY 2017 HHA utilization reports.. The reports will be posted on the Commission’s website at

https://mhcc.maryland.gov/mhcc/pages/hcfs/hcfs_homehealth/hcfs_homehealth.aspx

Certificate of Need – Kevin McDonald

CON’s Approved

Rehabilitation Hospital Corporation of America d/b/a Encompass Health Rehabilitation Hospital of Salisbury – (Wicomico County) – Docket No. 18-22-2435

The addition of 10 special rehabilitation hospital beds.

Approved Cost: \$5,717,015

Determinations of Coverage

- **Ambulatory Surgery Centers**

Family Footcare ASC- Dundalk – (Baltimore County)

Establish a physician outpatient surgery center (POSC) with two non-sterile procedure rooms at 1103 North Point Boulevard, Suite 424, in Dundalk.

Chesapeake Plastic Surgery – (Anne Arundel County)

Addition of a second procedure room to the facility located at 8028 Ritchie Highway, in Pasadena.

Washington Vascular Specialists of Frederick d/b/a WVS of Frederic ASC – (Frederick County)

Establish a POSC with one non-sterile procedure room to be located at 75 Thomas Johnson Drive, Suite I, in Frederick.

Anne Arundel-SCA SurgiCenter, LLC d/b/a AAMC Surgery Center-Pasadena – (Anne Arundel County)

Addition of a second operating room to an existing POSC located at 8109 Ritchie Highway, Suite 250, in Pasadena.

- **Acquisition/Change of Ownership**

Caton Manor – (Baltimore County)

Acquisition of 3330 Wilkens Ave Operations L.L.C. d/b/a/ Caton Manor by Wilkens Ave Baltimore MD Opco L.L.C.

Purchase Price: \$23,800,000

Augsburg Lutheran Home of Maryland, Inc. d/b/a Augsburg Village – (Baltimore County)

Acquisition of the Augsburg Lutheran Home of Maryland, Inc. d/b/a Augsburg Village by National Lutheran Communities and Services. National Lutheran Communities and Services will become the “sole member” of Augsburg Lutheran Home of Maryland, Inc. (“Augsburg”), while Augsburg Lutheran Home of Maryland, Inc. will retain ownership of the building in which the facility operates, the real-estate and the CON bed rights and continue to be the operator and licensee of the comprehensive care facility.

Purchase Price: N/A

Restructuring of Integrace, Inc. (“Integrace”).

Integrace is a wholly owned subsidiary of ACTS Retirement-Life Communities (“ACTS”) and is the sole member of Bayleigh Chase, Inc. (Talbot), Buckingham's Choice, Inc. (Frederick), Copper Ridge, Inc. (Carroll), and Fairhaven, Inc. (Carroll), all of which are CCFs. In this transaction, each of the operating entities will be merged with Integrace. The transaction will not result in any changes to the owners of the real property and improvements, the owners of the bed rights, or the operator of any of these facilities.

River Road Surgery Center, L.L.C. – (Montgomery County)

Change in ownership of this POSC. Located at 5110 Ridgefield Road, Suite 106, in Bethesda.,

Union Hospital of Cecil County – (Cecil County)

Acquisition of The Union Hospital of Cecil County, Inc. (UHCC), through Christiana Care Health Services, Inc. (CCHS), a Delaware non-profit, nonstock corporation, becoming the sole member of Affinity Health Alliance, Inc. (AHA), which is the sole member of UHCC.

- **Licensure**

- **Relicensure of Bed Capacity or a Health Care Facility**

Signature Healthcare at Mallard Bay – (Dorchester County)

Relicensure of 25 temporarily delicensed CCF beds for a total 160 CCF beds.

Chesapeake Shores – (St. Mary’s County)

Relicensure of seven temporarily delicensed CCF beds for a total of 125 CCF beds.

- **Waiver Beds**

Elkton Nursing & Rehabilitation Center – (Cecil County)

Addition of 10 CCF waiver beds for a total of 187 CCF beds at the facility.

Fox Chase Rehabilitation and Nursing Center – (Montgomery County)

Addition of seven CCF waiver beds for a total of 81 CCF beds at the facility.

CENTER FOR HEALTH INFORMATION & INNOVATIVE CARE DELIVERY

Health Information Technology Division – Nikki Majewski, Division Chief

Social Determinants of Health

Social determinants of health (SDoH) data on patient housing, economic stability, neighborhood and physical environment, and access to healthy food options can help improve population. Variation occurs in how providers record SDoH in electronic health record (EHR) systems and no industry best practices yet exist. Staff have started a process to catalog approaches used by providers to collect (SDoH) data. Working with providers, staff will develop a report that describes the current processes and highlights best practices. These findings will inform provider strategies aimed at increasing consistent collection of SDoH data at the point of care.

Home Health Care and Hospice

Staff developed a questionnaire to assess home health and hospice providers' use of health information technology (health IT). The Maryland-National Capital Homecare Association (MNCHA) and Hospice & Palliative Care Network of Maryland (HPCNM) will reviewed the questions in January. The MNCHA and HPCNM membership will to complete an online questionnaire in February.

Health IT Value Assessment

A focus group organized by staff provided feedback on draft survey questions about the value of health IT in care delivery. The questions will be distributed online to physician practices in January with assistance from MedChi, The Maryland State Medical Society. Information obtained will be used to inform initiatives aimed at addressing challenges in the use of health IT.

Telehealth Grants

Staff received letters of intent from 25 organizations for the *Announcement for Grant Applications: Advancing Telehealth in Nursing Homes*. Staff anticipated that roughly 10 organizations would respond. The greater than expected interest may suggest that the implementation of telehealth is a priority among many organizations. The grant applications must be submitted by January 31st. MHCC hopes to award the grant in March. Discussions continue with CRISP and the University of Maryland Quality Care Network to obtain data on admission, discharge, or transfer alerts for patients with chronic obstructive pulmonary disease. Sustainability options are being explored with Charles County Public Schools to support continuation of teletherapy at the conclusion of the grant (July 2020).

School-Based Telehealth

Promotional activities for a three-part webinar series (series), *Using Telehealth in School Health Services*, are occurring in collaboration with the Maryland Association of School Health Nurses (MASHN) and the Maryland Nurses Association (MNA). The series was recorded in November and is available on the

MASHN and MNA website. Participants are eligible to receive continuing education credits through November 2020.

Electronic Preauthorization

Staff completed a review of State regulated payors (payor) and pharmacy benefit managers (PBM) compliance with Health-General Article § 19-108.2 (2012). The law requires payors and PBMs to implement electronic preauthorization processes through four benchmarks. In 2013, MHCC adopted COMAR 10.25.17, *Benchmarks for Preauthorization of Health Care Services* (regulations). Payors and PBMs were deemed to be in compliance with the regulations by staff.

Nursing Home and Hospital Health IT Assessment

Stakeholder feedback was used to finalize health IT survey questions for nursing homes. The questions will be part of the Annual Long Term Care Survey targeted for release in March. A robust health IT infrastructure is essential to nursing homes as they strive to control costs by improving quality. Beginning October 2018, nursing homes are subject to Medicare payment adjustments (ranging from a 2 percent reduction to a 1.5 percent increase) based on re-hospitalization rates.

Innovative Care Delivery Division – Melanie Cavaliere, Division Chief

Dental Health IT

Development of a dental health IT educational webinar is proceeding, the webinar will be recorded and promoted by the Pennsylvania Academy of General Dentistry and Maryland State Dental Association (MSDA). Webinar participants will receive continuing education credits. The MSDA, Howard County and Baltimore County Dental Societies, and University of Maryland Dental School Alumni Board encouraged dentists to complete an MHCC online health IT adoption questionnaire.

Privacy and Security Regulations

A Request for Proposal (RFP) was released to identify a contractor to provide support in developing amendments to COMAR 10.25.18, *Health Information Exchanges: Privacy and Security of Protected Health Information* (regulation). A pre-proposal conference occurred that provided interested bidders with an opportunity to ask questions about the RFP. Proposals were due on January 10th; an award is expected in March. HIE registration required by the regulation was completed for three HIEs operating in the State.

Telehealth Readiness Assessment Tool

The staff review of the *Telehealth Readiness Assessment Tool* (tool) online prototype was completed. The tool consists of guidelines, best practices, and resource information that practices can use to gauge their readiness to implement telehealth. Tool development is in collaboration with Research Triangle International (RTI). Stakeholder testing of the tool is anticipated to conclude in February.

Care Management Focus Group

A subgroup of the Care Management Focus Group was convened to develop best practice self-assessment guides (guides) to assess practice readiness to implement care management, and identify practice specific care manager qualifications and key duties. The subgroup will continue to develop the guides through February. A focus group will be convened to provide feedback on the guides in March.

Learning Symposium and Nursing Home Webinar

Planning is underway for a learning symposium (symposium) focused on innovative care team models and managing patient populations. The symposium will provide information from national and local providers that can help practices better manage high-risk individuals. Planning has also started for a nursing home webinar aimed at improving care coordination using health IT. The webinar is targeted to occur in February.

Maryland Primary Care Program (MDPCP) Advisory Council

The MDPCP Advisory Council (Council) will convene a subgroup to formulate recommendations for increasing practice financial accountability in Track 2 and developing a new Track 3. A separate subgroup will explore reducing practice reporting requirements. Final recommendations will be determined by the Council and included in the draft annual report to CMS. The Council was established by request from the Secretary of the Maryland Department of Health (Secretary), under the authority of Health General § 2-104(d), to provide input on MDPCP operations, and to serve an advisory role to the Secretary and MDPCP Program Management Office.

CENTER FOR QUALITY MEASUREMENT AND REPORTING

Request for Expressions of Interest (RFI) Released to the Public

A Request for Expressions of Interest (RFI) document was developed and released to the public on December 6, 2019. The RFI solicits responses from entities interested in exploring MHCC designation as the Patient Safety Center for Maryland. The RFI identifies six program objectives including the development of initiatives that align with and support the priorities of the Maryland Total Cost of Care Model, as well as the priorities of the Maryland Department of Health (e.g., elimination of health disparities, implementation of the Diabetes Action Plan).

The RFI also solicits comments on the performance of the current designee, the Maryland Patient Safety Center, Inc. Responses and public comments are due by January 14, 2020.

The Maryland Health Care Quality Reports (MHCQR) website

The next update will occur in January with updated measures for both hospitals and long term care facilities. Hospice information will be added as a drop down on the Long Term Care Guide menu for ease of access. Other priorities such as developing an Outpatient Guide, consolidating the Consumer Guide to Long Term Care, and overall redesign of the website are ongoing.

Website Promotion: Approximately 70 social media posts initiated December

Staff continue to focus on the promotion of the MHCQR website. There were approximately 70 social media posts made in December. Topics included National Influenza Vaccination Week, National Handwashing Awareness Week, open enrollment, and general website marketing posts. These topics 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 MHCQR website.

Website Promotion: Hospice marketing materials

The CQMR team continues to create marketing materials for use at promotional events. Nationally and locally, only about 20% of hospice users are African American. Staff worked with a graphic designer to develop a hospice brochure geared towards African-Americans. The brochure highlights the racial disparities of hospice use, cultural barriers, and the benefits of hospice care. The team also developed an infographic with similar information for use on social media platforms.

MHCQR website sees increase in website traffic

Staff continue to monitor traffic to the site using Google Analytics software. Approximately 5,055 users visited the site in calendar year 2019 - nearly 20 percent higher than 2018. For the month of December, the site had 1,033 users and 3,941 page views. This represents more than a 100 percent increase in users compared to the previous month. Traffic to the site is presented graphically under the Executive Direction section of this update.

Hospital Quality Initiatives – Courtney Carta

Healthcare Associated Infections

Staff contributed an article to the Maryland Department of Health Infection Prevention Monthly Newsletter highlighting the CY2018 HAI results. Staff plans to become regular contributors to the publication. Staff are also preparing for the upcoming annual HAI public reporting cycle.

Specialized Cardiac Services Data

All Maryland hospitals that provide PCI services are required to participate in the ACC NCDR CathPCI data registries and report quarterly data and outcome reports to the Commission in accordance with established timelines. Data collection for Q3 2019 will begin at the end of the month. The next meeting is scheduled for February 11, 2020.

Long Term Care Quality Initiative—Stacy Howes

Nursing Home Family Experience of Care Survey

The vendor completed data collection for the 2019 survey in mid-December. The Spanish-language option was offered again this year; but only one participant completed the survey in Spanish. Staff will evaluate the benefit of offering a survey in Spanish in future years. Staff received 7,498 completed surveys, which yields a response rate of 42.6%. Staff received the state and individual facility reports at the end of December. These results will be distributed to facilities and posted on our Consumer Guide by February.

Health Plan Quality Initiative

AGS (the website contractor) received health plan quality data for 2019, and the results were posted on our website in November. Staff held the kick off meeting for the Health Plan Quality Initiative for 2020 on December 3. Health Plans will begin data reporting in early January.

Consumer Guide to Long Term Care

The Long Term Care website has been updated with the most recently available data from CMS Home Health CAHPS patient satisfaction measures. The Advance Directive page on the Consumer Guide was rewritten to align with the MDH development of an information sheet on advanced directives and the planned refresh of the Attorney General's webpage. Staff continue to provide information and resources directly to consumers who contact the office with questions about long term care facilities and services.

Over 202,000 page views of the Consumer Guide to Long Term Care website in 2019

Over 21,000 new users have visited the website during the 2019 calendar year. For the month of December, 1,530 new users visited the long term care site and accessed 13,842 page views. This represents a decrease in new users and page views compared to November. Return users account for 20% of the website traffic. The Services Search Engine function on the site continues to be the most frequently accessed section of the Consumer Guide. Traffic to the site is presented graphically under the Executive Direction section of this update.

Outpatient Quality Initiative—Mariama Gondo

Transitioning Ambulatory Surgical Center (ASC) Annual Survey Administration

Staff of the Center for Facilities Planning and Development (CFPD) and the Center for Quality Measurement and Reporting (CQMR) met to discuss plans for transitioning the management and administration of the ASC survey from CFPD to CQMR. The staff is developing new survey instructions, a technical guidance document, and updating the contact distribution list in anticipation of administering the 2018 survey by the spring of this year and the 2019 survey shortly thereafter. Future plans for the survey include working with the ASC industry to continue to streamline the surveying process, modifying survey questions as needed, and fully integrating survey results into the forthcoming redesigned outpatient services guide on the quality reports website.