DELAWARE HEALTH CARE COMMISSION MARCH 6, 2008

Action Liem **DELAWARE TECHNICAL & COMMUNITY COLLEGE CONFERENCE CENTER, ROOM 400 B** DOVER

MINUTES

Commission Members Present: Lt. Governor John C. Carney, Jr., Chair; Lisa Barkley, MD; Theodore W. Becker, Jr.; Richard Cordrey, Secretary of Finance; A. Richard Heffron; Carol Ann DeSantis, Secretary, Department of Services for Children, Youth and their Families; Vincent Meconi, Secretary, Delaware Health and Social Services; Janice Nevin, MD; and Dennis Rochford, President, Maritime Exchange for the Delaware River and Bay Authority

Members Absent: Matthew Denn, Insurance Commissioner

Staff Attending: Paula Roy, Executive Director; Leah Jones, Director of Planning and Policy; Marlyn Marvel, Community Relations Officer; and Linda G. Johnson, Administrative Specialist

CALL TO ORDER

The meeting was called to order at 9:05 AM by Chairman John Carney.

MEETING MINUTES OF FEBRUARY 7, 2008

Vincent Meconi made a motion to accept the February 7 meeting minutes. Ted Becker seconded the motion. There was a voice vote and the motion carried.

UNINSURED ACTION PLAN

UPDATE: Community Healthcare Access Program (CHAP)

Action: Community Healthcare Access Program Annual Report 2007 Rich Heffron made a motion to accept the Community Healthcare Access Program Annual Report 2007. Ted Becker seconded the motion. There was a voice vote and the motion carried.

The CHAP Quarterly Report for the period of October through December 2007 was distributed to Commissioners at the February Commission meeting. Commissioners discussed the report and the following points were raised.

- The number of enrollees in New Castle County is disproportionate to that of Sussex County. The aggressive outreach activities of providers in Sussex County may be a factor. Beebe Medical Center is a very high enroller.
- Christiana Care Health Services and Nanticoke Health Services anticipate increased numbers of enrollees.
- Christiana Care has agreed to recognize the CHAP enrollment card at entry for access to all of their services. Beyond that, they have agreed to forgive any bad debt on any CHAP enrollee who has ever used their organizational services starting with the date of the person's CHAP enrollment.
- The number of outreach encounters appears to be small.
- The number of outreach encounters at the Federally Qualified Health Centers (FQHC) is much higher than other referral sources.

Action

The February 7, 2008 meeting minutes were accepted.

Action

The 2007 CHAP Annual Report was approved.

• When people enroll in CHAP they are asked how they heard about the program. Word of mouth accounts for 29 percent of the applicants.

UPDATE: Geo-Mapping

Dr. James Gill, of Delaware Valley Outcomes Research, presented updated geo-maps to determine if CHAP enrollment matches the areas of highest need. Copies of the geo-maps are attached to these minutes.

Dr. Gill divided the State of Delaware into census tracts to determine, based on income, how many people within the tract are in the income bracket that is the primary target for CHAP (100 to 200 percent of poverty, adults, non-elderly. Children would be eligible for CHIP and the elderly for Medicare). The census tracts were sub-divided into 5 areas to identify where the target population resides.

Dr. Gill updated the 100 - 200 percent poverty maps and compared them to 2006 penetration maps to:

- Identify areas of improvement
- Identify areas for future outreach
 - Develop penetration maps for the black population only to identify areas for additional outreach efforts

Areas of improvement in New Castle County include:

- Downtown, West and East Wilmington
- One area in Northern New Castle County, just outside of Claymont

Areas of improvement in Kent County include:

- Little Creek
- Harrington

Areas of improvement in Sussex County include:

- Laurel
- Delmar

Areas identified as the highest priority for future focus based on total population data include:

- Northeast Boulevard, Northeast Wilmington
- Smyrna and east of Smyrna
- Clayton
- Sandtown
- Frederica
- Long Neck
- Dagsboro/Frankford

Dr. James Gill of Delaware Valley Outcomes Research, presented updated geo-maps to determine if CHAP enrollment matches the areas of highest need. Areas identified as the highest priority for future focus based on black population data include:

- Two areas in downtown Wilmington
- Claymont area
- Dover
 - Between State Street, Lockerman Street and DuPont Highway
- Long Neck
- Delmar
- East of Seaford/Blades
- South of Seaford/Blades

Discussion

Dr. Lisa Barkley asked if mapping other ethnic groups has been considered. Dr. Gill said initially the Latino population was considered but there is not sufficient data available to do so.

Chairman Carney asked if the geo-map results are used to inform the CHAP outreach providers. In fact outreach providers have asked for the maps and are incorporating them into outreach activities.

UPDATE: CHAP/Astra-Zeneca

Ms. Roy updated the Commissioners on the *Healthy Delawareans Today and Tomorrow* program, sponsored by Astra Zeneca and the Delaware Public Policy Institute. John Taylor, Executive Director of the Delaware Public Policy Institute and Jeanine Boyle, Senior Director of State Health Policy at Astra Zeneca will give a presentation at the April Commission meeting.

Astra Zeneca's policy goals and those of the Commission are very much in alignment.

ASTRA-ZENECA APPROACH TO UNINSURED

- ACCESS/EDUCATION Make sure people know what services are available, e.g. HelpLine
- ACCESS/ENROLLMENT –
 Make sure eligible but un enrolled become enrolled, e.g.
 contribution to Covering Kids
 and Families
- 3. ACCESS/ LONG TERM
 COVERAGE STRATEGY –
 Develop a coverage program
 over a longer period of time,
 e.g. DPPI project proposing to
 build on CHAP

HEALTH CARE COMMISSION APPROACH TO UNINSURED

- ACCESS Provide health homes and key services to low income uninsured people in Delaware, e.g. CHAP
- ACCESS Eligible but not enrolled

 Find ways to reach out to those
 eligible for programs but not
 enrolled, e.g. CHAP outreach
 component. Support for and
 participation in Covering Kids and
 Families
- 3. COVERAGE LONGER TERM
 - a. Primary care program, built on CHAP delivery network
 - b. Modeling for: Massachusetts-style comprehensive reform

Single Payer reform

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Discussion

Dr. Janice Nevin asked how much funding CHAP receives each year. Chairman Carney responded that CHAP receives \$1,250,000.00 annually through the State's Tobacco Master Settlement Agreement. Astra Zeneca has contributed \$500,000 to the CHAP network that has been distributed in the form of grants to the Federally Qualified Health Centers (FQHCs). The Centers have used the additional funds in different ways to meet their unique needs.

Dr. Jonathan Gruber from the Massachusetts Institute off Technology (MIT), Dr. Elliot Wicks of Health Management Associates, and Ms. Roy have been having conference calls to discuss formulating a universal health care coverage plan for Delaware. Another call is scheduled in two weeks. Dr. Gruber is planning to meet with the Commission's Universal Coverage Committee in April. There may be a presentation at the May Commission meeting.

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INFORMATION & TECHNOLOGY

<u>Update: Delaware Health Information Network</u>

Ms. Roy reported that, overall, things are going well with the DHIN. It is continuing to add new users, and no one is aware of any technical glitches. St. Francis Hospital will be coming on board as a data sender very soon. There are 270 current users and 22 practices enrolled (including specialty practices).

Representatives from West Virginia and Tucson, Arizona, have visited Delaware and are using DHIN as a model for their own networks. Dr. Robert Kolodner, National Coordinator for Health Information Technology, U.S. Department of Health and Human Services, visited Delaware on February 29. Delaware is being recognized as the first state to establish a state wide health information network.

U.S. Department of Health and Human Services Secretary Mike Levitt is coming to Delaware on March 26 to promote a new initiative within his office to reimburse physicians for using electronic medical records.

The DHIN staffing contract was approved at the February Commission meeting and advertising for project managers has begun.

Chairman Carney noted the February Commission meeting minutes indicated more than 40 practice sites were participating in DHIN but 22 practice sites were mentioned today. This will be clarified for the April meeting.

Prue Albright of Advances in Management was asked to clarify the actual number of sites. The current information Ms. Albright has from Ms. Gina Perez is there are 22 sites, and 270 active users (150 are physicians). Ms. Albright was asked to confirm the numbers to make sure the minutes are accurate.

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Dr. Robert
Kolodner, National
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Technology, U.S.
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Delaware is being recognized as the first state to establish a state wide health information network.

Ms. Albright, who is assigned to market the DHIN, reported that the Medical Society of Delaware held their first annual spring event, highlighting medical health records and technology, at Christiana Care Health Services. DHIN was very well received and the event is expected to generate additional site participation.

Gary Haber, a reporter with the News Journal, is working on an article on electronic medical records scheduled to run on Sunday. The DHIN will be mentioned in the article.

Mr. Roy said nationally the average number of physicians using electronic medical records is 12 percent and in Delaware it is 28 percent.

WORKFORCE DEVELOPMENT

Update: Health Care Workforce Committee

Dr. Barkley and Dr. Nevin have agreed to chair the Health Care Workforce Committee and have identified a plan to revitalize its work. The doctors participated in a conference call with Ms. Roy and the following key points were discussed:

- There is not a shortage within a particular healthcare group; rather, it is across the board. In addition to nurses, there is a real need for primary care physicians in areas around the state.
- The Committee will review local and national efforts to address health professional workforce shortages, to identify best practices and to avoid duplicating efforts.
- A sustainable structure needs to be put in place.
- There are generational differences in the workforce. The current generation values personal time.
- Members of the Health Care Workforce Committee have been identified.
- A meeting of the committee is planned in April, following the Commission meeting. Thereafter, the committee will meet monthly, or more often if necessary.
- Committee work will include focus on the K -12 level pipeline to prepare more students to go into the health field.

Mr. Carney asked about the status of the Area Health Education Center (AHEC). Ms. Roy said it is defunct at this time. Discussions are underway between Jefferson Medical College and a local non-profit agency about becoming an AHEC, but nothing conclusive has developed at this time.

Cari DeSantis asked if the Health Care Workforce Committee will focus on the mental health workforce. Dr. Nevin responded that the Committee will include this important issue in its work. Ms. DeSantis offered one of her staff in the child mental health area from Division of Services for Children, Youth and Their Families to become a Committee member. It was also suggested that James Lafferty, of the Mental Health Association, be included. Dr. Nevin responded that it is important to have a functional committee and then bring in people to help with specific issues.

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OTHER BUSINESS

Governor's Fiscal Year 2009 Recommended Budget

Copies of the Governor's Fiscal Year 2009 Recommended Budget were included in the March meeting materials. Ms. Roy said that the Commission's funding was recommended as requested; however, due to revenue reductions, the budget may be reduced. Internal meetings have been scheduled with staff from the Office of Management and Budget, and with the Chairs of the DIDER and DIMER Boards of Directors to discuss budget cuts.

At the 2007 DHCC Retreat, one of the requests was that the funding history of DIMER be researched in response to a request for additional funds for Jefferson Medical College and Philadelphia College of Osteopathic Medicine. A copy of the funding history was included in the meeting packet and is attached to these minutes. The one million dollars allocated for Jefferson has not increased since 1996.

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PUBLIC COMMENT

Dr. Frelick reported that a debate would be held on Saturday, March 8, at the Cardiology Education Center at the Christiana Hospital. Representatives from the single payer system and the American Medical Society will debate.

Dr. Frelick reported that on Saturday, March 1, there was a Medical Society Summit attended by the Director of the U.S. Health and Human Services Department of Information and Technology. Dr. Frelick suggested that the federal government was slow to development standards for electronic medical records (EMR).

Mr. Carney responded that the federal government has said it will not determine a standard, but will allow the marketplace set the standards.

George Meldrum, of Nemours, said that April is *Uninsured Month*. St. Francis Hospital is organizing an event around *Uninsured Month*. People interested in participating can call Ms. Carrie Casey at St. Francis. Also, Nemours has been sponsoring a statewide quality improvement initiative that addresses childhood obesity in all 15 pediatric practices. The Nemours Annual Conference will be October 23 and 24 with a focus on public policy and childhood obesity.

NEXT MEETING

The next meeting of the Delaware Health Care Commission will be held on Thursday, April 3, 2008 at 9:00 a.m. at Del Tech Terry Campus in Room 400 B.

ADJOURN

The meeting adjourned at 11:30 AM.

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GUESTS

Prue Albright
Anthony J. Brazen, D.O.
Jeanne Chigione
Kathy Collison
Barbara DiSabastiani

Michael Duva Robert Frelick Joann Hasse Jonathan Kirch

Lolita Lopez
Becky Magdycz
George Meldrum
Linda Nemes
Sheila Nutter
Brian Olson
Rosa Rivera
Albert Shields
Jeanne Chigione

Advances in Management

Division of Medicare & Medicaid Assistance

American Cancer Society Division of Public Health

Wheeler & Associates/MACHC Delaware Healthcare Association Medical Society of Delaware

League of Women Voters of Delaware

American Heart Association and American Stroke Association

Westside Health

Electronic Data Systems (EDS)/CHAP

Nemours

Department of Insurance

Electronic Data Systems (EDS)/CHAP

LaRed Health Center

Henrietta Johnson Medical Center

Office of the Lt. Governor Delmarva Rural Ministries