

**DELAWARE HEALTH CARE COMMISSION
OCTOBER 5, 2006
DELAWARE TECHNICAL & COMMUNITY COLLEGE
CONFERENCE CENTER, ROOM 400 B
DOVER**

MINUTES



Commission Members Present: John C. Carney, Jr., Chair; Theodore W. Becker, Jr.; Carol Ann DeSantis, Secretary, Department of Services for Children, Youth and their Families; Jacquelyne W. Gorum, DSW; Joseph A. Lieberman, III, MD; Dennis Rochford; and Lois Studte, R.N.

Members Absent: Richard Cordrey, Secretary of Finance; Matt Denn, Insurance Commissioner; and Vincent P. Meconi, Secretary, Department of Health and Social Services.

Staff Attending: Paula Roy, Executive Director; Sarah McCloskey, Director of Planning and Policy; and Marlyn Marvel, Community Relations Officer.

CALL TO ORDER

Chairman John Carney called the meeting to order at 9:10 a.m.

MINUTES OF JUNE 1, 2006 and SEPTEMBER 7, 2006 MEETING

Dr. Jacquelyne Gorum made a motion that the minutes of the June 1, 2006 and September 7, 2006 meetings be approved. Dr. Joseph Lieberman seconded the motion. There was a voice vote. Motion carried.

PRESENTATION: TOTAL COST OF HEALTH CARE IN DELAWARE –

Simon Condliffe

Simon Condliffe, of the University of Delaware, Center for Applied Demography and Survey Research, gave a presentation on “The Total Cost of Health Care in Delaware 2005”. A copy of the presentation is attached to these minutes.

Key observations include the following:

- In Delaware, \$5.8 billion (about \$7,000 per person) was spent on personal health care in 2005, compared with \$5 billion in 2003.
- Total cost is growing at approximately 8 percent per year.
- Medical prices are rising 4 percent annually.
- Nationally, cost shift is increasing.
- The health care industry is an engine for job growth in Delaware. Projections show that employment in the industry will continue to increase, but shortages may also exist. This could place upward pressure on wages, costs and ultimately charges for services.

Discussion

The following points were raised during discussion.

- Commissioners need to determine how to make better use of the cost data, and whether the study should continue on an annual basis.

Action:

The minutes of the June 1, 2006 and September 7, 2006 meetings were approved.

Commissioners heard a presentation on “The Total Cost of Health Care in Delaware 2005”. A copy of the presentation is attached to these minutes.

In Delaware, \$5.8 billion (about \$7,000 per person) was spent on personal health care in 2005, compared with \$5 billion in 2003.

- Simon Condliffe was asked to assist the Commission with workforce data to reconcile the differences in numbers from the Department of Labor and the Division of Professional Regulation. What are the projected categories of health workforce needs?
- Mental health data needs to be broken out. Claims data would help to measure utilization rates for mental health and other specific conditions.
- There is a need for better data on costs, charges, and revenue from private and public payers to evaluate cost shift. This requires cooperation from providers, purchasers, and insurers.

Commissioners were asked to consider what types of data they would like to be collected and used to allow Simon Condliffe to make the report more useful to the Commission.

2006 RETREAT REPORT

The Commission's annual strategic planning retreat was held September 26 - 27, 2006 in Rehoboth Beach. Paula Roy presented the 2006 Retreat Report.

The Commission faces the following issues during the period of September 2006 through June 2007.

- Four new Commissioners will be appointed to fill one current and three pending vacancies.
- The absence of federal planning grant funds after August 2007.
- The need for attendance at Commission meetings in order to complete business.

The following steps will be taken to address the issues at hand.

- Begin preparing early to make new appointments
- Recruit new Commissioners for committee participation
- Investigate options regarding meeting frequency and voting
- Increase Commission marketing and public relations.

Uninsured Action Plan

The Uninsured Action Plan is a comprehensive project to preserve and expand coverage for all Delawareans. The project will work to preserve coverage by targeting small group employers and employees. It will work to expand coverage by targeting all Delawareans; with priority on low-income residents.

One means of preserving coverage is through small group insurance reforms. Current Chapter 72, Title 18 of the Delaware Code Annotated needs to be reformed to make the law easier to understand and enforce. Rate variation needs to be reduced to make premiums more predictable and stable.

The Commission has entered a contract with Health Management Associates, to conduct an analysis of how this might be accomplished. A

report and recommendations are expected by December.

Action:

Ted Becker made a motion that the Commission support legislation to implement the recommendations of the report on small group insurance reforms. Dennis Rochford seconded the motion. There was a voice vote. Motion carried.

In addition, the Commission will:

- Support legislation to create a subsidized insurance pool for small business.
- Market the website healthinsurancechecklist.com.
- Follow the progress of the downstate pilot program, Creenaght, and invite representatives of the program for a presentation in the spring.

Efforts to expand coverage include:

- S-CHIP expansion
- Community Health Center Marketing
- Geographic facility expansion into underserved areas
- Primary/preventive care analysis
- Universal coverage approaches

Action: S-CHIP Expansion

Cari DeSantis made a motion that cost estimates be finalized and steps be determined to expand the S-CHIP program to parents of eligible children to the extent it is affordable for the State. Dr. Joseph Lieberman seconded the motion. There was a voice vote. Motion carried.

Action: Community Health Center Marketing

Ted Becker made a motion that the Commission receive the Community Health Center Marketing research report and determine how to use the information in CHAP program designs and infrastructure considerations for expansion programs. Dr. Joseph Lieberman seconded the motion. There was a voice vote. Motion carried.

Action: Geographic Expansion

Funds are available to award grants to create new health care access points in geographically underserved areas. A review committee has been empanelled to review proposals submitted in response to a request for proposals.

Dr. Joseph Lieberman made a motion that the Commission receive and act on the recommendations of the review committee and determine how the new access points fit into the general expansion recommendations. Dennis Rochford seconded the motion. There was a voice vote. Motion carried.

Action: Primary/Preventive Care Analysis

Dr. Joseph Lieberman made a motion that the Commission initiate and complete a report on the estimated cost and delivery design of a program

Action:

The Commission will support legislation to implement the recommendations of the report on small group insurance reforms.

Action:

Cost estimates will be finalized and steps will be determined to expand the S-CHIP program to parents of eligible children to the extent it is affordable for the State.

Action:

The Commission will receive the Community Health Center Marketing research report and determine how to use the information in CHAP program designs and infrastructure considerations for expansion programs.

Action:

The Commission will receive / act on recommendations of the Geographic Expansion review committee.

Action:

The Commission

to provide preventive and primary care services to a broad array of Delawareans and determine how the results fit into an overall coverage expansion. Cari DeSantis seconded the motion. There was a voice vote. Motion carried.

Action: Universal Coverage – Traditional Single Paper Approach

Dennis Rochford made a motion that: 1) Preliminary work on basic design issues be completed and a report be prepared; and 2) Micro-simulation be conducted to determine costs and financing more precisely. Lois Studte seconded the motion. There was a voice vote. Motion carried.

Action: Universal Coverage – Building Blocks Approach

Dr. Jacquelyne Gorum made a motion that: 1) The Universal Coverage Analysis Committee work on the “straw proposal” be completed; 2) The steps needed to implement the proposal be determined; 3) A cost analysis of implementation be conducted; and 4) How the Uninsured Action Plan work fits into the plan be determined.

Action: Community Healthcare Access Program (CHAP)

Cari DeSantis made a motion that the Commission accept the following action steps with regard to CHAP.

- Continue rigorous evaluation.
- Evaluate existing outreach results prior to releasing a new request for proposals; find new opportunities (state service centers). Commission staff will develop a time line for review, evaluation and recommendations for program design prior to contract renewal.
- Continue health risk assessments and disease management.
- Calculate the value of donated services for a total picture of CHAP
- Geo-map pockets of 100–200 % of the federal poverty level in DE.
- Re-create the monitoring/oversight committee, including state agency staff and Commissioners.

Lois Studte seconded the motion. There was a voice vote. Motion carried.

Information and Technology

Delaware Health Information Network (DHIN)

The following is an update of DHIN activities.

- Three main contract components are nearing completion for the Utility project. The implementation and quality assurance contracts have been signed. The staffing contract is being negotiated.
- A press release announcing the contract award to the implementation vendor (Medicity, Inc) was released on Wednesday, October 4, 2006.
- There are three sources of funding: Federal Agency for Healthcare Research and Quality (AHRQ), State Bond Bill, and private contributions.
- The required project plan has been submitted to the Office of Management and Budget and Controller General; awaiting sign-off in

will initiate and complete a report on the estimated cost and delivery design of a program to provide preventive / primary care services.

Action:

- 1) Preliminary work on basic design issues will be completed and a report will be prepared.
- 2) Micro-simulation will be conducted to determine costs and financing more precisely.

Action:

The Commission accepted the recommendations with regard to Universal Coverage.

Action:

The Commission accepted the recommendations with regard to CHAP.

order to receive the state share of \$2 million.

- Financial commitments have been secured from some private sector partners.
- The details of the governance model for the new Utility Corporation are being resolved; January 2007 legislative action anticipated.

Action:

Dr. Joseph Lieberman made a motion that the DHIN proceed with the Utility implementation, resolve the governance issues, and request \$3 million in the Fiscal Year 2008 Bond Bill. Jacquelyne Gorum seconded the motion. There was a voice vote. Motion carried.

Health Professional Workforce Development

Delaware Institute of Medical Education and Research (DIMER)

The following points were raised during the retreat about DIMER.

- The relationship with Jefferson Medical College and Philadelphia College of Osteopathic Medicine is good.
- Indirect benefits are the residency programs at Christiana Care Health Services and A.I. DuPont Hospital for Children.
- The racial, ethnic, geographic diversity of applicants remains a challenge.
- Jefferson Medical College is requesting additional funding.
- Fiscal Year 2007 loan repayment funds are already spent – pending the Commission’s approval.
- The Delaware Area Health Education Center (AHEC) is promoting health professions in schools. Federal funding has been reduced. Other funding sources need to be explored.

Action:

Ted Becker made a motion that the Commission: 1) Secure official communication from Jefferson Medical College requesting additional funding; 2) Request an additional \$100,000 for loan repayment in the Fiscal Year 2008 budget request; and 3) Review options for funding the Delaware Area Health Education Center (AHEC). Dr. Joseph Lieberman seconded the motion. There was a voice vote. Motion carried.

Delaware Institute of Dental Education and Research (DIDER)

In Fiscal Year 2007, DIDER has a new initiative; an agreement with Temple University School of Dentistry to provide dental education to Delawareans.

Request for approval of the Hope Clinic as a site for volunteer dentists:

The Delaware Health Care Commission has statutory authority to designate non-profit sites for the purpose of allowing dentists issued a “volunteer license” to serve patients in those sites. By and large the patients being served are expected to be low income and uninsured.

Action:

DHIN will proceed with the Utility implementation, resolve the governance issues, and request \$3 million in the Fiscal Year 2008 Bond Bill.

Action:

The Commission will: 1) Secure official communication from Jefferson Medical College requesting additional funding; 2) Request an additional \$100,000 for loan repayment in the Fiscal Year 2008 budget request; and 3) Review options for funding the Delaware Area Health Education Center (AHEC).

Through DIDER, the Health Care Commission has received a request to designate the HOPE CLINIC in Dover. Equipment has been donated and dentists are being recruited to provide services to uninsured patients. Action is needed by the Commission so that dental services may begin to be delivered.

The Delaware Code Annotated, Title 24, Professions and Occupations, Chapter 11, Dentistry and Dental Hygiene, Subchapter I, Board of Dental Examiners states:

(14) Working in conjunction with the Board of Directors of the Delaware Institute of Dental Education and Research, develop programs to encourage and allow dentists to practice in under-served areas of the State, as designated by the Delaware Health Care Commission, in lieu of hospital-based residency training as a condition of licensure. Such programs may include preceptorships and reciprocity; and

(15) Issue a volunteer license to an individual who is duly licensed as a dentist or dental hygienist in this State or to any individual who has ever been so licensed provided proof of continued competence is provided to the satisfaction of the Board.

Such individuals shall certify on the license application that the individual will perform no dental or dental hygiene services for any direct compensation and that the individual volunteers his or her time exclusively in a nonprofit dental clinic or nonprofit dental service designated by the Delaware Health Care Commission and approved by the Delaware Board of Dental Examiners.

A volunteer license shall be issued at no charge to a qualified individual approved by the Board. All other costs associated with meeting the requirements for such license will remain the responsibility of the applicant. The applicant for a volunteer license shall be responsible for completing the continuing education required for an active Delaware licensee by the Board and shall adhere to all standards of practice and supervision required of a Delaware licensed dentist or dental hygienist. Any dentist or dental hygienist having a volunteer license shall not practice dentistry or dental hygiene in this State in any setting other than in an approved nonprofit dental clinic or nonprofit dental service.

PROPOSED PROCESS FOR SITE APPROVAL

1. Require a formal request in writing from the site, including hours of operation and anticipated start-date.
2. Conduct an interview with the director (may include a site visit or be conducted via phone if necessary.)
3. Review mission statement, operations management, and quality control plan.
4. Review documentation of IRS non-profit status.
5. Review patient eligibility requirements.

6. If approved by DIDER and DHCC the site will be reviewed on an ongoing basis, such as every other year, to be sure it is continuing to meet the appropriate standards. The site will also be asked to report the names of volunteer dentists/dental hygienists and the total number of patients served.

Action:

Lois Studte made a motion that the proposed process for site approval be accepted. Dennis Rochford seconded the motion. There was a voice vote. Motion carried.

Action:

The proposed process for site approval was accepted.

HOPE CLINIC – Modern Maturity Center, Dover

- Hours of operation: Tuesday 9:00 AM – 4:30 PM and Wednesday 9:00 AM – 12:00 PM
- Since expanding the facility in February 2006, the space has been renovated to include a dental treatment room. All equipment has been donated and services will begin as soon as it is delivered – anticipated start date is end of September.
- Conducted interview with Hope Clinic Director – Vicenta Marquez, MD
- Mission Statement: To provide non-emergency medical and dental consultation and treatment to non-Medicaid and non-Medicare uninsured patients ages 18 – 65 years old.
- Services offered: pain relief, denture adjustments, tooth extraction, restoration of decayed tooth, incision and drainage of abscess, cleaning, tooth fillings, intra-oral radiographs, prosthetic repair, and biopsy of suspicious lesions.
- The Clinic is covered for professional liability through a July 2006 grant from the Delaware Foundation for Medical Services through the Medical Society of Delaware.
- Provided documentation of IRS 501(c) 3 status
- Patient Eligibility: Uninsured, non-Medicaid, non-Medicare, Ages 18-65 years
- Currently recruiting volunteer dentists and dental hygienists

Action:

Jacquelyne Gorum made a motion that the Hope Clinic be approved as a practice site for volunteer dentists. Dennis Rochford seconded the motion. There was a voice vote. Motion carried.

Action:

The Hope Clinic was approved as a practice site for volunteer dentists.

State Loan Repayment Program

The Loan Repayment Committee met on July 13, 2006, followed by DIDER on July 18, 2006 and DIMER on July 26, 2006. The current available balance of state loan repayment funds for DIDER is \$271,979, which includes \$100,000 from the FY 2007 budget allocation. The available

balance for DIMER is \$105,677, which includes \$100,000 from the FY 2007 budget allocation. There is \$92,751 available in federal matching funds. The following recommendations for funding were made:

DIMER APPLICANTS

I. Westside Health- Wilmington, Site Application

a. **Jeff Dassel**, MD- Family Practice

Dr. Dassel participated in the DIMER scholarship/loan program and currently owes 3-years of service to the State, therefore will not qualify for loan repayment.

b. **Joanne Lundholm**, MD- Family Practice

Dr. Lundholm is a graduate of Tufts University School of Medicine. She is currently licensed in NJ and is Board Eligible. She speaks Spanish fluently. She is available for service at Westside in August. She has \$225,000 in loans and is eligible for the federal funding match.

II. **Christian Wathen**, MD- Internal Medicine, travels in Kent and New Castle

Dr. Wathen lives in Bear, DE and operates "Home Physician Network LLC", a practice serving homebound elderly, debilitated and disabled patients in their homes. She sees approximately 18 patients per week in New Castle and Kent Counties. Visits include an extensive review of medications, assessment of living status, preventative medical care, review of emotional well-being of the caretaker, and determination of need for medical supplies/equipment. She is the only employee in the practice, and thus is responsible for all clerical, billing, and administrative duties. 95% of her patients are on Medicare and/or Medicaid. She is Board Certified and has \$215,000 in loans.

III. **Susanne Jacobs**, MSN- Family Medicine Certified Nurse Practitioner ShIPLEY State Service Center- Seaford, Site Application

Ms. Jacobs is a graduate of the University of North Carolina's School of Nursing. She is Board Certified and employed by the ShIPLEY Center. She conducts family planning services, STD testing/treatment, and well-woman exams. She has \$38,000 in loans.

IV. **Ifeanyi Udezulu**, MD- Internal Medicine

Bayhealth - Milford Memorial Hospital, Site Application

Dr. Udezulu completed a residency at Drexel Medical School in 2004 and is Board Eligible. He is currently employed by Bayhealth, but the site application states that his hospital hours are irregular and therefore his schedule is not specified. He has \$95,000 in loans.

Recommendation: The Loan Repayment Committee and DIMER recommend that Dr. Udezulu not be funded due to the nature of

service provided at Milford Memorial Hospital.

V. **Rebecca Gazze- McIlroy**, DO- Family Medicine

Dr. Teresa Little- Dover, [Site Application](#)

Dr. McIlroy is a Delaware native and a graduate of the Philadelphia College of Osteopathic Medicine. She will complete a residency at Christiana Care in June 2006. She is Board Eligible and is pursuing certification. She has \$143,000 in loans. Dr. McIlroy plans to join Dr. Little's family practice in July 2006 where she will work 40 hrs/week.

VI. **Helen Catts**, Certified Nurse Practitioner

La Red Health Center- Georgetown, [Site Application](#)

Ms. Catts graduated from Wilmington College with a Master's in Nursing in December 2006. She completed a clinical rotation at La Red where she is currently employed 40 hrs/week. She speaks conversational Spanish. Ms. Catts has \$25,000 in loans and is eligible for the federal funding match.

VII. **Katherine Cook**, MD- Family Practice Physician

Georgetown Family Practice (owned by Nanticoke Hospital), [Site Application](#)

Dr. Cook is a graduate of Tufts University School of Medicine. In 2002, she completed a residency in Lancaster, PA. Currently, she is employed in rural Alabama and would like to re-locate to the Mid-Atlantic region to be closer to family. She is being recruited by Georgetown Family Practice and states that she is dedicated to serving rural populations. Dr. Cook is available for service July 29, 2006 and has 175,000 in loans.

DIMER Funding Recommendations:

Name	Site	Loans	State \$	Fed \$	Total
Dr. Lundholm	Westside	225,000	27,250	27,250	54,500
Jacobs, CNP	Shipley	38,000	4,000	0	4,000
Catts, CNP	La Red	25,000	5,163	5,163	10,326
Dr. Wathen	Travels	215,000	35,000	0	35,000
Dr. Gazze	Dr. Little	143,000	10,000	0	10,000
Dr. Cook	Georgetown	175,000	24,264	0	24,264

Eligible for Federal Funds	Totals	105,677	32,413
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Available	
State \$	105,677
Fed \$	92,751

*All awards for a 2 year contract

Action:

Lois Studte made a motion that the recommendation for funding the DIMER applicants be approved. Dr. Joseph Lieberman seconded the motion. There was a voice vote. Motion carried.

Capital Loan Repayment Policy & Procedures

The Commission reviewed the following recommended policies and procedures for capital expenditures loan repayment.

Requirements: Applicants must meet the following conditions:

- Is (or will be) located in a health professional shortage area identified by the Delaware Health Care Commission;
- The practice site must provide services during open office hours for a minimum of 40 hours a week, for a minimum of two (2) years in the underserved area;
- Certify that the practice site will provide health care services to Medicare, Medicaid, State Children Health Insurance Program (S-CHIP), and uninsured patients.
- Employ clinician(s) practicing in an eligible specialty with United States citizenship or a legal permanent resident of the United States; or be a selected refugee approved by the U.S. Attorney General;
- Employ clinician(s) with a valid, unrestricted license to practice in the State of Delaware at the time the service obligation begins;
- Have not been convicted of any felony, including but not limited to violent felonies, as so defined under either Federal or State law and as more particularly defined and enumerated in 11 **Del. C.** Sec. 4201;
- Have not been convicted or found guilty of, or disciplined by this or any other State licensing Board or Agency authorized to issue a certificate to practice medicine or dentistry in this or any other State, for unprofessional conduct as so defined in 24 **Del. C.** Sec. 1731(a). Such a bar to applying for the Delaware State Loan Repayment Program For Health Professionals shall occur if the applicant was disciplined by means of levying a fine or by the restriction, suspension or revocation, either permanently or temporarily, of the applicant's certificate to practice medicine or dentistry, or by other appropriate action, which may include a requirement that the applicant who was disciplined must also complete specified continuing professional education courses.
- Have outstanding qualifying capital expenditure loans that are not in default;
- All **dentists** must agree that a minimum of 20% of their scheduled appointments will be comprised of Medicaid patients, S-CHIP patients and/or low-income (<200 FPL) dentally uninsured patients who will be provided care at reduced rates or free-of-charge. Low-income patients may include participants in the Nemours Dental Outreach program and the Vocational Rehabilitation program administered through the Delaware Division of Public Health. Unannounced audits of office scheduling records may be made periodically by Loan Repayment

Action:

The recommendations for funding the DIMER applicants were approved.

officials.

- All **non-dental clinicians** must agree to participate in the Delaware Community Healthcare Access Program (CHAP) and the Voluntary Initiative Program Phase II (VIP II) sponsored by the Medical Society of Delaware. CHAP provides low cost or no cost primary care "medical homes" to individuals who are ineligible for the Diamond State Health Plan or the Delaware Healthy Children Program, yet within established income limits. Enrollment in CHAP also provides eligible individuals with access to a statewide network of medical subspecialty services. Other benefits currently under negotiation include discounted lab and x-ray services, and pharmaceuticals. CHAP recipients receive discounted medical services based upon their income. VIP II is a statewide network of private physicians who accept CHAP patients into their practices and serve as their health home or provide medical subspecialty services.

Procedures:

- Applicants should complete the Health Professional Application Form and the Site Application Form to the best of their ability, including detailed information about the intended use of the capital purchases.
- The \$35,000 per year maximum award threshold for advanced-degree health professionals also applies to capital loan repayment awards. Awards will be determined on a case by case basis by the Loan Repayment Committee, DIMER, DIDER, and the Health Care Commission based on the availability of funds.
- The Delaware State Loan Repayment Committee will review and rank applications in priority order. This will be based on the objective review of data (including public health indicators, the number and spatial distribution of providers practicing in Delaware), the availability of funding, practice sites and (where applicable) the outcome of face-to-face interviews with selected applicants.

Action:

Lois Studte made a motion that the policies and procedures for capital expenditure loan repayment be approved. Dr. Joseph Lieberman seconded the motion. There was a voice vote. Motion carried.

DIDER Loan Repayment Applicant:

Karen Rose, DDS – Capital/equipment Loan Application for a new practice in Dover

Dr. Rose has a five-year lease agreement for a property on New Street in Dover where she will open "Access Dental" in August. She plans to work 40 hrs/week and has been approved for a "voluntary reduced work-hours schedule" for her position at the DE Psychiatric Center, where she will work 30 hrs/week. She is accustomed to this type of schedule, as she worked 48-84 hrs/week at the Dover Air Force Base doing forensic and clinical dentistry. She has no plans to hire additional dentists at the practice within the next couple of years. All of her dental equipment, hardware and

Action:

The policies and procedures for capital expenditure loan repayment were approved.

software have been ordered, totaling about \$125,000 in loans. She is requesting a three-year contract.

Recommendation

The Loan Repayment Committee recommended that Dr. Rose be awarded \$70,000 for capital/equipment loan repayment for a three-year obligation to practice in Dover.

Action:

Lois Studte made a motion that the recommendations for funding the DIDER applicant be approved. Dennis Rochford seconded the motion. There was a voice vote. Motion carried.

Commissioners reviewed the remaining recommendations from the strategic planning retreat:

Health Workforce Data Committee

- Continue the partnership with the Division of Professional Regulation
- Receive final reports from the nursing and educational pipeline studies.
- Inactivate the Nursing Implementation Committee and transfer the work to the Workforce Data Committee to streamline efforts.

Research & Policy Development

- Continue the current arrangement with the Health Fund Advisory Committee.
- Identify ways to restructure the Total Cost of Health Care in Delaware report to improve its usefulness.
- Continue the Delawareans without Health Insurance report annually.

Specific Health Care Issues

- Continue dialogue with the Health Resources Board.
- Receive a report from the Disparities Task Force and determine appropriate action.
- Draft a work plan for implementation of the recommendations from the Mental Health Data Collection project.
- Receive a report from the Chronic Illness Stroke Task Force and determine next steps.
- Continue participation with the Medical Liability Task Force as required.

New Quality Initiative

Commission staff will conduct research and develop options for a work plan to:

- Promote quality initiatives in Delaware.
- Building on and support recent national trends and market changes:
 - Price transparency and availability]Outcome measures
 - Evidence-based best practices/clinical guidelines
 - Enhanced and expanded data collection-claims data
 - Reimbursement strategies (pay for performance)

Action:

The recommendation for funding the DIDER applicant was approved.

Action:

Dr. Joseph Lieberman made a motion that the Commission accept the recommendations. Ted Becker seconded the motion. There was a voice vote. Motion carried.

PUBLIC COMMENT

Joann Hasse, of the League of Women Voters, requested that the commission use the term “small group employers”, rather than “small business.” “Small group employers” includes non-profit organizations. The term “small business” assumes for-profit only.

NEXT MEETING

The next meeting of the Delaware Health Care Commission will be held at 9:00 a.m. on Thursday, November 2, 2006 at the Delaware Technical and Community College Conference Center, Terry Campus, Room 400B.

ADJOURN

The meeting adjourned at 11:20 a.m.

Action:

The Commission accepted the remaining recommendations from the strategic planning retreat.

Next Meeting:

The next meeting of the Delaware Health Care Commission will be held at 9:00 a.m. on Thursday, November 2, 2006 at the Delaware Technical and Community College Conference Center, Terry Campus, Room 400B.

GUESTS ATTENDING

Jack Akester, NMHA – Board Member
Kellie Burris, NAMI, Delaware
Judy Chaconas, Division of Public Health, Bureau of Health Planning & Resources Management
Jeanne Chiquoine, American Cancer Society
Simon Condliffe, University of Delaware
Michael Duva, Delaware Healthcare Association
Robert W. Frelick, M.D., Medical Society of Delaware
Joann Hasse, League of Women Voters
Barbara Jackson, Electronic Data Systems
Lolita Lopez, Westside Health Services
Gregory McClure, DMD, MPH, Division of Public Health
Linda Nemes, Department of Insurance
Sheila Nutter, Electronic Data Systems
Rosa Rivera, Henrietta Johnson Medical Center
Debra Singletary, Delmarva Rural Ministries
Diana Stubbolo, Delaware Area Health Education Center
Jose Tieso, Electronic Data Systems
Calvin Young, UAW Community Health Care