# Delaware Health Care Commission Thursday, February 7, 2013 9:00 a.m. Department of Transportation Administration Building First Floor, Farmington/Felton Room 800 Bay Road, Dover

# **Meeting Minutes**

**Commission Members Present:** Theodore W. Becker, Jr., Acting Chair; A. Richard Heffron; Rita Landgraf, Secretary, Delaware Health and Social Services; Kathleen S. Matt, PhD; Janice E. Nevin, MD; and Dennis Rochford

**Commission Members Absent:** Thomas J. Cook, Secretary of Finance; Bettina Riveros; and Karen Weldin Stewart, Insurance Commissioner

**Staff Attending:** Jill Rogers, Executive Director and Marlyn Marvel, Community Relations Officer

#### **CALL TO ORDER**

The meeting was called to order at 9:00 a.m. by Ted Becker, Acting Commission Chair.

# **APPROVAL OF JANUARY 3, 2013 MINUTES**

#### Action

Richard Heffron made a motion to approve the January 3, 2013 minutes. Rita Landgraff seconded the motion. There was a voice vote. Motion carried.

# **HEALTH WORKFORCE**

Beebe Medical Center Partnership with Philadelphia College of Osteopathic Medicine Marilyn Hill, Director of Physician Services, and Dr. Jeffrey Hawtof, Vice President of Medical Operations and Informatics at Beebe Medical Center, gave a presentation on the partnership with the Philadelphia College of Osteopathic Medicine (PCOM).

Beebe Medical Center routinely conducts a physician needs assessment to learn what the true needs of the community are. There is an estimated need for about 50 additional physicians in the next three years, and that need is expected to become larger over time. This is what prompted the establishment of a relationship with PCOM.

Through the Delaware Institute of Medical Education and Research (DIMER), Delaware has a relationship with PCOM and Jefferson Medical College to serve as Delaware's medical schools. Beebe Medical Center hosts PCOM's third-year medical students and second-year physician assistant students to shadow Beebe Medical Center physicians at the hospital and in private practices. This is a special affiliation for those students who want to come and rotate through Beebe Medical

Center. The affiliation began about three years ago and to date about 170 students have rotated through Beebe Medical Center.

Housing is provided for the students. Beebe Medical Center staff does the scheduling for them in its practices and there is a formal affiliation agreement.

The program also serves another important need by retaining those physicians who have an interest in teaching. Rather than having to leave Beebe Medical Center and Sussex County, Beebe Medical Center brings academics to them.

From a recruitment standpoint, the idea is to develop a relationship with these students and ultimately have them establish practice in Delaware. The students who are participating in the rotations are from other states in addition to Delaware.

One of the challenges is resourcing. In order for a program to grow it needs to be supported so that it is done well and in a quality manner. Some of the lessons learned include the need for physician champions and dedicated administrative and secretarial support.

When a physician is training a physician or physician's assistant there is a difference in the way they have to run their daily schedule. Some practices are more set up for that than others. Having a champion who can mentor the practices, get them to alter their practices and have the willingness to do that has been a difficulty. There are tips and techniques to make the process more comfortable for the patients and the practitioners as well.

Beebe Medical Center is looking to expand the program to include residents, as well as students, having rotations at Beebe Medical Center.

#### **Questions and Comments**

Dr. Janice Nevin suggested that Beebe Medical Center ask PCOM for some resources because they are providing them with a valuable service. PCOM needs a venue such as this for training.

Ms. Hill responded that those conversations have transpired. PCOM is reimbursing Beebe Medical Center for the cost of the housing, and the physician assistant school is paying \$500 per preceptor for rotation. The medical school does not have the funding to pay preceptors. Pennsylvania has reduced their education budget by \$6 million.

Dr. Nevin noted that most medical school teaching is done by volunteers. The clinical piece is often a volunteer faculty position.

Dr. Nevin asked if Beebe Medical Center has considered starting a primary care residency program. Dr. Hawtof responded that they have thought about it. They need to formalize the administrative and secretarial support into a department. They have an educational department for their nurses and staff. They need to decide whether to put this program under the medical staff office and the medical

affairs office, or under the education office which already has a lot of resources involved in this. Once that is operationalized, a residency program is something that ultimately down the road they are looking at doing.

Kate McKenzie, of Komen, asked what Beebe Medical Center is doing to enhance the education of nurse practitioners who are also front line with patient care.

Dr. Hawtof responded that Sussex County already has a few nurse practitioner programs. Many of the physicians on staff at Beebe have trained nurse practitioners.

Pat Maichle, of the Developmental Disabilities Council, said that part of what doctors need to learn is bedside manner. She asked if there is a way to teach people about serving diverse populations.

Dr. Hawtof said that certain doctors are better at it than others and part of that is in the curriculum of the medical schools and residency programs. There have been a lot changes in those programs, especially since the Joint Commission has requirements about professionalism and communication skills. Patient care and medical knowledge are two of six core competencies that they require all medical schools and physicians to be trained in.

Kathleen Matt said this reminds her of some comments that Tom Ferry made in his report about the things being done to attract health care providers to not only come to Delaware to learn, but also to choose to stay in Delaware to practice. Each of the hospitals individually can be doing these things but it also raises the question of what could be done on a state level for physicians, physician assistants, and nurse practitioners. She asked if this is something that the Health Care Commission should consider or if it is already covered in the workforce development activities. The infrastructure needs to be put in place to get people to choose to stay in Delaware.

Jill Rogers responded that this is a foundation piece on which the Commission can build when it is thinking about the recommendations discussed at the last meeting. This is a demonstration that could be used as a model.

Judy Chaconas, of the Division of Public Health said, as part of the workforce effort being spearheaded by the Health Care Commission and through the Office of Primary Care and Rural Health, the Division of Public Health is launching a feasibility study of developing a primary care residency rotation program for underserved areas of the state. She asked anyone who is interested in this topic to either connect with her or Jill Rogers so they can make sure they are part of that process.

Ms. Rogers added, in terms of timing, they hope the study aligns with the CMMI process so that by the time the statewide health innovation plan is finished there will be a better understanding about how Delaware could approach residencies.

Dr. Nevin said there is an opportunity via a rural training tract to actually build a program. There is some benefit from a rotation, but the recruitment benefit is optimized when there is a residency program. About half of the people who complete their residency training in Delaware remain in Delaware to practice. The way to do it less expensively is by doing a training tract and having another institution such as Christiana Care sponsor it so it is not necessary to build infrastructure. The residents are integrated into the community and they do not want to leave when they complete their training.

Gary Johnson, of the Delaware Psychological Association, said there is now an entire health psychology department at Christiana Care and also an affiliated cancer center that work with patients to speed their stay in the hospital and assist physicians and it is an area that is easy to over look. He encouraged the Commission, as they think about physician training, to consider this as part of the training program.

Ted Becker said in three years with this program there have been 170 participants. He asked if capacity is an issue. Ms. Hill said yes, because there is a need for housing, scheduling, and preceptors. There were many more students who wanted to participate that had to be turned away.

#### Health Workforce Recommendations

The health care workforce recommendations that Ms. Rogers presented at the last meeting were distributed to everyone for review and comment. The comments received were about making sure there are provisions for retired health care professionals to continue to practice and contribute, and determine how to reduce the barriers for the retired medical professionals.

There were comments on making sure that the long term care needs, both in facilities and in the community, are considered. In 2030 Delaware will be the ninth oldest state and it must make sure that the workforce is ready to meet those needs. It was also recommended that specialties be considered. This came up several times in the working groups with regard to children's special needs and neurological disorders and the need to make sure there are professionals to treat those. As the Commission thinks about its recommendations it needs to make sure that those specific populations are addressed, as well as making sure that home health care agencies are considered in the context of whatever is done around patient centered medical homes.

It is hoped that these recommendations will be folded into the CMMI process. The staff will take these recommendations as written and begin to put some specifics around them, such as what has to be done, by whom, the cost, the funding source, and the chronological or priority order.

#### Action

Rita Landgraf made a motion that the Commission staff incorporate the workforce recommendations into the CMMI process. Kathleen Matt seconded the motion. There was a voice vote. Motion carried.

## **Highmark Funding**

Ms. Rogers reported that Highmark has made additional funds available to the State Loan Repayment Program. With the next round of loan repayment applications, nearly all of the funds currently allocated to the program will be obligated for loan repayment awards. The additional funds from Highmark will allow the program to continue for the remainder of Fiscal Year 2013.

Mr. Becker noted that Highmark's contribution helps to demonstrate the need for additional funds for the Loan Repayment Program.

# **CENTER FOR MEDICARE & MEDICAID INNOVATION (CMMI) UPDATE**

Ms. Rogers reported that less than two weeks ago the CMMI asked for the Health Care Commission's Data Universal Numbering System (DUNS) number to be confirmed. That is the number used to track a grant through their system, so this appears to be a hopeful sign.

Regardless of whether the funding is awarded, so much work has been done and so much commitment has been made by so many organizations that the time is right to have these discussions and continue with this work with or without the funding.

# <u>HEALTH CARE REFORM – HEALTH BENEFIT EXCHANGE PROGRESS</u> <u>REPORT</u>

Crystal English, Linda Nemes and Bernadette Schad presented an update on Delaware's Health Benefit Exchange. A copy of the presentation is posted on the Delaware Health Care Commission's website at http://dhss.delaware.gov/dhss/dhcc/presentations.html.

#### **Questions and Comments**

Rich Heffron said that the Delaware State Chamber of Commerce has had meetings with Delaware's small business people. They are totally confused and there are a lot of questions. He is concerned that there will be trouble once this gets implemented.

Ms. Schad said that being able to clarify the information is very important. For example, at the Small Business Caucus meeting Bettina Riveros presented a large amount of information and the distinction was made that there was an incorrect assumption that small employers had to guarantee that the employees are "provided" for, and they are only obligated to "offer". It is a complicated program to implement. She will continue to try to improve the communication in a very clear unambiguous way.

Mr. Becker said having those workshops throughout the state will be helpful. It will also be helpful to publish the dates and post them on the website as early as possible.

#### **OTHER BUSINESS**

Ms. Rogers said that the March meeting will include an update of mental health services and the progress that has been made. There will be a presentation about organ donation from Gift of Life. Loan repayment applications will also be reviewed and an update will be provided on the available funds.

Mr. Becker reported that Kim Book, Executive Director of Victims Voices Heard, will be hosting the internationally known speaker, Marilyn Van Derbur, in both New Castle County and Sussex County in early May.

## **PUBLIC COMMENT**

Brian Olson reported that La Red Health Center has increased its mental health providers by nine providers.

Cheryl Heiks, of Cozer O'Conner, noted that the people who attend Health Care Commission meetings and the Small Business Caucus have more than the average amount of information on the things that are happening in the market place with Exchanges. A large number of people do not have that opportunity or do not choose to participate in those opportunities. That is the group that is going to be the most concerned when they realize that their avoidance of this and hoping it is going to go away does not work. She is interested in helping to assist with reaching out to that group of people.

Ms. Schad responded that her input is welcome. One of the responsibilities of the Marketplace Assisters will be conducting outreach into the community. A separate outreach and education campaign will also be implemented sometime in the spring. It is to reach people who otherwise would not be reached including special communities and populations of uninsured and underinsured. Updates on those activities will be provided at the next several Health Care Commission meetings.

Ms. Rogers added that the campaign will target specific groups including uninsured, small businesses and health care providers.

A public observer asked who people should contact with questions prior to submitting a response to the Request for Proposal (RFP) for Marketplace Assister Services. Crystal English suggested that they submit their question in writing to her. That is included in the RFP. She would encourage them to attend the pre-bid meeting, as well.

#### **NEXT MEETING**

The next meeting of the Delaware Health Care Commission is 9:00 a.m. on March 7, 2013 at the Department of Transportation Administration Building, First Floor, Farmington/Felton Conference Room, 800 Bay Road, Dover.

# **ADJOURN**

The meeting adjourned at 10:30 a.m.

#### **GUESTS**

Michelle Amadio

Kim Amerl

Amelia Auner

Kyle Bain

Janet Bailey

Karen Parker Bender

Delaware Hospice
Integrated Benefits
Planned Parenthood
United Medical
Hewlett Packard
Hewlett Packard

David Brock Coventry

Judy Chaconas Division of Public Health
Jeane Chiquon American Cancer Society
Jeanne Corman Claymont Community Center

Alex Eldreth MS Society
Thomas Ferry Star-Med LLC

Dr. JoAnn Fields Family Practice Physician

Robert Hall

Michele Haranin DEOA

Cheryl Heiks Cozer O'Conner

Karen Helensky Delaware Physicians Care

Dina Hughes Coventry

Kathy Janvier Delaware Technical Community College Gary Johnson Delaware Psychological Association

Tyrone Jones Astra Zeneca Rebecca Kidner RBKidner PA

Jonathan Kirch

Jim Lafferty Mental Health Association

Paul Lakeman Bayhealth Jan Lee DHIN

Don Licorish Highmark Delaware

Lolita Lopez Westside Family Healthcare

Pat Maichle Developmental Disabilities Council

Kim Marsh United Health Care Sarah Marshall DSCYF-DPBHS

Noel Mazade University of DE College of Health Sciences

Kate McKenzie Komen George Meldrum Nemours

Nicholas Moriello
Linda Nemes
Sarah Noonan
Mary Nordenson
Carolanne Obrien
Brian Olson
Department of Insurance
Westside Family Healthcare
Delaware Physicians Care
Department of Labor
La Red Health Center
Senator Carper's Office

Faith Rentz Office of Management & Budget/State Benefits Office

Rosa Rivera Henrietta Johnson Medical Center

Paula Roy Roy Associates

Bernadette Schad Public Consulting Group Marj Shannon Division of Public Health Michele Sloan Wayne Smith Shari Thomassen James Welch Lisa Zimmerman Office of Management & Budget Delaware Healthcare Association Nemours Department of Correction DMMA