



The Delaware Health Care Commission (DHCC) Meeting

October 1, 2020

9:00 a.m. to 11:00 a.m.

Meeting Attendance and Minutes

Commission Members Present: Dr. Nancy Fan (Chair), Theodore W. Becker (Mayor of Lewes), Secretary Rick Geisenberger (DOF), Richard Heffron, Nick Moriello (Highmark), and Secretary Molly Magarik, Melissa Jones

Meeting Facilitator: Dr. Nancy Fan (Chair)

Commission Members Not Present: Dr. Robert Dunleavy (DSCYF), Dr. Jan Lee (DHIN), Trinidad Navarro (DOI)

Health Care Commission Staff Marques Johnson (Administrative Specialist III), Eschalla Clarke (Social Services Sr. Administrator), Latoya Wright (Manager of Statistics and Research), and Ayanna Harrison (Public Health Administrator I)

CALL TO ORDER

Dr. Fan called the meeting to order at approximately 9:00 a.m. via Webex video and phone conference. The meeting started with an attendance roll call to check if the commissioners were all on the line. All commissioners were present except for Dr. Robert Dunleavy. Dr. Fan asked public attendees to virtually sign-in by placing their name and affiliation in the chat box or by sending their name and contact information to the DHCC Resource Account (dhcc@delaware.gov).

Approval of September 3, 2020 Meeting Minutes

Dr. Fan asked the commissioners to review the September 3, 2020, meeting minutes. There were no comments. Nick Moriello motioned to approve the minutes and Secretary Molly Magarik seconded the motion. The motion to approve was unanimously accepted by all Commissioners who were present. Minutes can be viewed on the DHCC website: <https://dhss.delaware.gov/dhss/dhcc/files/dhccmmfnlsep2020.pdf>

BOARD BUSINESS

Board Transition

Dr. Fan announced the departure of Dr. Dunleavy. She reported that he was retiring from his position at the Division of Children Services for Youth and their Families. He was not present, but she took a moment to thank him for the time and commitment he provided to the board. She shared her gratitude for his strong participation and stated that his advocacy for children and their families was of great value to the commission. She wished him luck with his future endeavors. Dr. Aileen Fink, who was not present was

introduced as Dr. Dunleavy's replacement (Correction: Dr. Dunleavy's successor will be Dr. Richard Margolis).

POLICY DEVELOPMENT

My Healthy Community

Dr. Fan was pleased to introduce Dr. Karyl Rattay, the Director of the Division of Public Health (DPH). She explained that Dr. Rattay and the Division of Public Health (DPH) have been at the forefront of the fight to keep Delaware safe. Their efforts have been organized and led by focusing on science and utilizing their public health expertise.

Dr. Rattay thanked Dr. Fan for the introduction. She also thanked her for her partnership. She announced that Dr. Fan has been leading a Governor appointed health committee focusing on issues related to the Delaware's COVID response. She began her presentation by sharing that DPH has been keeping a close eye on the recent increase in percent positive cases. There has been a significant increase in Newark largely related to the University of Delaware and an increase in Dover related to Delaware State University. DPH is also keeping a close eye on Wilmington and New Castle zip codes as well as Western Sussex. She reminded the attendees about the outbreaks connected to the poultry plant, beach and long-term care facilities. She thanked Mayor Becker, BeeBee and the other healthcare systems for their strong partnerships. As a result of their participation, DPH has been able to conduct a tremendous amount of community testing. DPH will be enhancing education and enforcement initiatives in Newark, Wilmington and other communities experiencing an elevation in numbers.

Dr. Rattay transitioned the meeting to her colleague, Dr. Silverman who has an extensive background in data analytics. Dr. Silverman provided the attendees with an overview of the My Community Health webpage (<https://myhealthycommunity.dhss.delaware.gov/locations/state>). He began by sharing the complexity of the processes that lead up to the data being posted on the webpage. Test results are submitted electronically to Delaware DPH from hospitals, laboratories and other health facilities. These results are collected into the Delaware Electronic Reports Surveillance System (DERSS). This system collects between 3,000 – 6,000 test results daily. These results are separated, positive from the negative. Epidemiologists use the Delaware Health Information Network data to supplement the lab reports data. They determine hospital status, race and ethnicity and other items that are not included but needed. Each case is contacted by phone and information on their exposure is collected (places they visited, known contacts, symptoms, etc.). DPH follows up with the known contacts. All of the information is entered into the Sales Force database. Dr. Silverman reported that DPH currently has over 300,000 patient records in data and close to 350,000 lab results. All information is updated daily from multiple systems (DERSS, DHIN, Sales Force). Delaware DPH has contracted the services of Green River, a company in Vermont. Green River pulls the data information and posts daily on the system. The contractor also performs multiple checks to identify and resolve problems. The data systems that are being used were not created to handle this volume of data. Green River performs updates regularly and implements measures to improve performance and add new features based on user feedback.

Dr. Silverman demonstrated how to review contact tracing data. Data can be downloaded from the website into excel spreadsheets allowing the public to conduct analyses not presented on the website. He reviewed the map feature, pointing out that users can search the map by zip code, census tract, neighborhoods, cities to get data specific to the area. Also, positivity rates can be reviewed by location. He reviewed the trendlines for current hospital and new hospital rates, new positive rates, and emergency

room visit rates. He highlighted the breakdown of the week's status and the return to school scenarios. This information can be viewed by week as far back as July 24th. Demographics related to testing and the rate of cases per 10,000 people over time can be viewed on the site. He pointed out the usefulness of viewing the trends that are taking place over time. He used this feature to share the trends by age, showing the increase related to the beach outbreak and now recently the outbreak related to the University of Delaware.

Dr. Silverman reports that improvements are made consistently, largely based on user feedback. They are currently working on adding data on venues that are visited by cases within the fourteen days prior to the onset of their symptoms or when they were tested. This will provide DPH with additional information on where these individuals were before being tested and treated.

Comment (Chat box)

- Leslie Ledogar asked if any other states doing analyses at this extraordinary level of granularity? This is truly amazing! Dr. Paul Silverman responded that Delaware is unique because DPH built our technology on a system that can provide data at so many geographic levels.
- Ruth Lytle-Barnaby stated that it would be great to have a spot to mark if you already had COVID.
- David Baker shared that in Western Sussex it is my perception that people in general are much more relaxed than before regarding wearing masks.
- John Dodd asked if this pandemic report posted somewhere. Secretary Molly Magarik shared that the report can be found at <https://governor.delaware.gov/prac/>.
- Melissa Jones asked Dr. Rattay, what the turnaround time for testing at the State Service Centers and school testing. She also asked if she could share a resource for healthcare workers who need rapid testing.

Dr. Fan thanked Dr. Silverman for his insightful presentation, and she invited Dr. Rattay to provide some additional remarks about COVID-19 testing. Dr. Rattay thanked Dr. Silverman for his presentation and began her comments by sharing the importance of standing up testing sites to combat the pandemic. An effective response involves standing up a statewide system in dimensions much bigger and greater than has been done in the past. The contact tracing system has 300,000 data points in that system is extraordinary compared to what normally comes in, which is 1,000 a year. Testing is an incredibly important part of our response, for data and infection control. She attributes the efficiency of DPH's response to the partnerships with health care systems and medical society, adding that every hospital in the state stepped up to provide testing. DPH plans to implement more pop-up/mobile sites, as they play an important role in our response to outbreaks. As we move forward, we are working to ensure people have testing available when and where they need it. The locations of the mobile testing sites are data driven. DPH utilizes several data points, including infection rates, and inadequate testing availability, overlaid with the identification of vulnerable population. Dr. Rattay also shared that there is a new home testing option. The Division understands that places of worship are trusted entities in the communities, so they have introduced a faith-based strategy. They are also conducting testing in the schools and they anticipate this will increase as more students move back into face to face learning. They have also been working with the FQHCs to partner to do more testing in the community. She acknowledged DPH's imperfections and reaffirmed their need to hear feedback and suggested solutions from the community.

Dr. Rattay took a moment to quell misinformation circulating throughout the community. She disclosed that leaders within the health care system have suggested that DPH's testing plan was horrible and even

went as far as to call their methodology racist. Comments like this are not helpful. She reiterated that DPH was willing and prepared to listen. The pandemic continues to evolve and DPH and DEMA need the participation and partnership of all Delawareans to combat this pandemic.

COVID Response

Pandemic Resurgence Advisory Committee

Dr. Fan expressed her gratitude for the presentation. The My Healthy Community website has provided the foundation to ensure citizens are knowledgeable about the status of our state and the activities that are being implemented. She highlighted the sincere and consistent desire of DPH to seek the input of the community and use the feedback received to drive enhancements to their activities. Dr. Fan also noted the comments in the chat box. She encouraged the attendees to continue sharing their thoughts in this forum or directly with DPH on the My Healthy Community site and/or other COVID related activities.

Dr. Fan provided an overview of the Pandemic Resurgence Advisory Committee (PRAC) activities. The PRAC sought to identify the needs of the community and they recently released their final report. Dr. Fan stated that Delaware is not headed for a resurgence, as the State has never left the first wave. At one-point Delaware came very close when the positive percentage rate dropped to 4%. Dr. Fan reviewed some of the recommendations of the committee. The report outlines preventive measures and lessons learned. There are 12 recommendations that range from testing, PPE, and flu season plans. The report includes graphics of hospitalization rates. As the flu season begins the numbers will climb and there is some concern the health care system will become stressed. The report also includes information on how to keep our local businesses open.

She briefly discussed the CAREs relief fund act. She shared that over 25 million dollars was released in first round. The large number of applicants was overwhelming causing the first round to close after only 36 hours. A second round was recently reopened.

Dr. Fan shared a few details in the report from other subcommittees. The Business subcommittee worked closely with the chamber of commerce to develop strong recommendations regarding certifications processes to assist business with demonstrating their completion of trainings. The Equity subcommittee provided recommendations to ensure that the needs of the community are addressed, for example, ensuring all Delaware citizens have access to accurate and timely communication. The response to the pandemic is not a “one size fits all” approach. The pandemic has affected populations differently. The Governor felt strongly about including an Equity subcommittee to provide strong recommendations to mitigate some of the outcomes. She concluded her comments by encouraging the attendees to download and review the report (https://governor.delaware.gov/wp-content/uploads/sites/24/2020/09/Pandemic-Resurgence-Advisory-Committee-Final-Report_-09302020.pdf).

Secretary Rick Geisenberger thanked the Division of Public Health for the presentation. He visits the My Healthy Community website often, sharing Delaware’s COVID status with his Division Directors. He gained new insight on functionality options, and he is looking forward to visiting the site to practice. He expressed his gratitude to DPH for being extremely accessible. He has received prompt responses to all his inquiries. He has also learned from several local businesses that they have appreciated the quick response from DPH and overall accessibility. He also noted the vast testing sites and reported being tested at a local church. He asked Dr. Rattay how DPH is addressing the college outbreaks. He heard that several campuses had implemented enhanced testing among their student populations. He expressed concern that this strategy

would do little towards encouraging behavior modification. He asked if DPH planned to deliver new messages for these students.

Dr. Rattay thanked him for his comments and questions. She reported that influencing this age group has been challenging. Several Universities and colleges in the state have implemented testing protocols varying in levels, some are testing 1,000 students weekly, others are conducting testing twice a week. These approaches are successfully catching positive cases; however, modification of behavior has been a challenge. The City of Newark, DPH, DEMA and the University of Delaware are working closely together to enforce compliance. They have addressed some of the non-compliant businesses in the area. They are also cracking down on private gatherings. She added that congregant living settings are challenging. When one roommate becomes ill and they don't practice distancing within the household, then entire groups are becoming ill.

Sec. Geisenberger asked Dr. Rattay if DPH planned to provide guidance to families who have students returning home for the holiday break. The group discussed staying distanced for up to 14 days along with being tested. Dr. Rattay shared that DPH will be working to reframe the message. They will be adding guidance on distancing in and outside of the home depending on your socialization habits. She added that behavior modification is challenging for this particular demographic.

Rich Heffron offered his gratitude for the presentation and tremendous efforts of DPH. He asked about the data on number of recovered cases and suggested that DPH consider adding a caveat to the description. The data captured in that number represents the number of individuals who have answered the contact tracing calls and completed the program and eventually cleared. It does not capture those who drop out, don't response to calls, and those who don't get investigated, like the hospitalized or deceased. She agreed that a stronger explanation of the gap between recovered and positive cases, could be added to avoid confusion.

Molly Magarik (via chat box comment encouraged everyone to download the new exposure notification app on their phones: <https://coronavirus.delaware.gov/covidalert/>. It is available in the App Store and on Google Play. She added that it is a great way to track symptoms. Users receive notifications when there was an exposure to a positive case. Dr. Rattay stated that DPH Contact Tracers are working very hard but there are times when individuals do not remember the names of who they were with or the locations they visited. She added that the more people that download the app the more effective it becomes.

Community Perspectives

Medical Society of Delaware

Dr. Fan transitioned the meeting to the next agenda item, "Community Perspectives". She announced that several organizations had been invited to the meeting to share the impact of the COVID-19 pandemic from their unique perspectives. As she introduced the first speaker, Dr. Joseph Straight, she emphasized the importance of learning from the members of our community who have been serving on the forefront of the pandemic. Dr. Straight serves on the PRAC Health subcommittee, and he is also a practicing clinician.

Dr. Joseph Straight thanked the Commission and Dr. Fan for giving him the opportunity to speak today. He is in the ninth month of his presidency at the Medical Society of Delaware and he reports that seven of them have been consumed with the COVID-19 pandemic. He shared that his goal to focus on enhancing Primary Care and Mental Health systems throughout the state has not changed. They continue to make

efforts to work on mental health, addiction health and primary care. As we enter the fall and winter months we need to prepare for a resurgence, it is important to push forward in strengthening Delaware's health care system.

After facing shutdowns, many of the independent practicing physicians, especially Primary Care physicians in our state are doing their best to return to a pre-pandemic practice. Patient volumes range between 40% and 60% depending on the type of practice due to deferred or delayed care. Many are still nervous about contracting the virus. The reality is chronic disease, addiction and mental health will not take a holiday. The multiple loan programs that have been established, especially the one covering Personal Protective Equipment (PPE) have been extremely beneficial but they are not a permanent solution. He expressed his gratitude for the work and leadership of Congress woman Lisa Blunt-Rochester, Senators Coons and Carper, the various state representatives', and our Governor.

The Medical Society published guidance on safe reopening options for practices. They have provided practices with information on telehealth and loan programs and worked to sign a group purchasing agreement to access PPE for our members and physicians across the state. He attributed the effectiveness of their approach to their partnerships with the Office of the Governor, DHSS/DPH, and the Insurance Commissioner's office. He added that because of these partnerships, they have been able to make sure doctors across the state have received updated information. He also mentioned the improvement and enhancement of telemedicine efforts which has increased access to care for all patients. Dr. Straight thanked the Governor, Secretary Magarik, Dr. Rattay/DPH, and Insurance Commissioner Navarro for the excellent job implementing the State's response.

Dr. Straight emphasized the importance of staying prepared in order to continue fighting the pandemic. He encouraged the attendees to get flu shots and continue their preventive care. The Medical Society of Delaware will continue to work with DPH to coordinate strategies Pandemic exposed weaknesses in primary care health system. Delaware must continue to invest more into primary care and our primary care physicians to sustain physicians and meet the need for Delawareans. He encouraged the Commissioner to support activities to advance health care work for recruiting and retaining physicians throughout the state. Physician suicide rates are on the rise and Delaware needs to address physician burn out and fatigue. The physician community has been stressed and pressed while they are resilient, they are not supernatural. Chronic disease and mental health and addiction does not take a holiday. The health of Delawareans relies on physicians being able to be available to patients. Dr. Straight thanked everyone for the opportunity. He thanked Dr. Fan for her leadership, adding that it was a pleasure to serve under her on the PRAC Health Subcommittee.

Secretary Geisenberger mentioned the workforce subcommittee's goal to develop long-term initiatives to retain and sustain providers in the state. He stated that he was looking forward to working with Dr. Straight to implement strategies to get engage young people and encourage them to consider working within the field of health care. Dr. Straight welcomed the collaboration.

David Baker, a member of public, commented on the shortage of doctors in Sussex County. He asked for suggestions to help mitigate this issue and bring primary care and other physicians into the county. He has seen an increase in concierge service practices. Dr. Straight shared that he has a meeting with CEO of Beebe Health Systems. They plan to discuss strategies to increase primary care in Sussex County. They plan to tackle issues surrounding sustaining current physicians and encourage others to come home after

completion of their education. Dr. Fan shared the Commission's recent initiative to increase workforce development activities.

Westside Family

Tom Stephens, MD, the Chief Medical Office for Westside Family Healthcare provided the Commissioners with insight on the impact of the COVID-19 pandemic from the Federally Qualified Health center perspective. Dr. Stephens reported that the 5 FQHCs in the state are serving nearly 28,000 Delaware citizens. These centers offer primary medical, prenatal, dental and behavioral health services. Eighty-six percent of their patients are living at or below the 200% of the poverty level. Care is provided regardless health care insurance status or the ability to pay.

Dr. Stephens reviewed the key areas of impact. He pointed out that the Westside Family underwent delivery model transformation nearly overnight. The delivery model transformation evolved as Westside Family moved from all in-person primary care to a virtual option in late March. He added that 50% of all primary care visits are completed virtually and 100% behavioral health visits are completed virtually. Westside Family patients have taken advantage of this option and has responded well, reducing some of the barriers to care like transportation. However, other barriers, like lack of computer or internet access, have been identified.

Patients have delayed preventive care like wellness visits in response to the COVID-19 pandemic. There has been a noted decrease in cancer screenings (colorectal, cervical and breast), A1C testing and HIV testing. Childhood immunizations have seen improvement. As they seek to serve some of the most vulnerable populations, the efficiency of the collaborations across public health and delivery systems has been noted. The increased collaboration allowed for expanded testing access to critical communities across the state (poultry industry, agricultural industry). New Castle County and Sussex county testing sites were made available along with the development of several permanent locations, including Westside health centers.

Dr. Stephens also addressed the challenges of the Delaware's workforce capacity. He stated that the pandemic has placed pressure on the already stretched workforce. They are now doing more with less. The constant change in patient workflows, evolving COVID treatment information, and delivery model modifications, have staff fatigued. They are working with their leadership to implement mitigators as much as possible. They are holding weekly teleconferences with staff and providers, weekly informational emails, highlighting the process changes of the week and lastly, they have an intranet portal dedicated to COVID-19 related information. Dr. Stephens shared his email address with attendees

(tom.stephens@westsidehealth.org). For the full presentation visit:
<https://dhss.delaware.gov/dhss/dhcc/files/dhccovidimpctwststdefmlyhlthcr10022020.pdf>

Dr. Fan thanked Dr. Stephens and opened the floor for comments or questions. Hearing none, she introduced the next presenter, Alexis Teitelbaum for the Division of Substance Abuse and Mental Health.

Comment (Chat box)

- Lolita Lopez thanked Dr. Stephens and thank you to the commission for inviting us to contribute to this important conversation.
- Eschalla Clarke thanked Dr. Stephens, on behalf of Delaware Institute of Dental Education and Research (DIDER), thank you for the dental plug in your presentation today. Tom Stephens responded to Eschalla, letting her know she is welcome. He added that Westside was excited that their population will have more access to oral health services because of the addition of adult dental

services coverage by Medicaid today. He shared that they already have patients scheduled. He also thanked the Commission for the invite to present.

- Jill Fredel shared that adult dental coverage begins today in Delaware's Medicaid program: <https://news.delaware.gov/2020/09/30/dental-coverage-for-low-income-adults-in-delaware-begins-oct-1/>

DSAMH

Alexis Teitelbaum, Acting Director of the Division of Substance Abuse and Mental Health (DSAMH) provided the commission with an overview presentation of their experiences as related to the COVID-19 pandemic. Delaware currently has the second highest overdose death rate in the nation. In 2019, 431 Delawarean's died from overdose. Seventy-nine percent of the overdose deaths in involved fentanyl, a 5% increase since 2018. This year, through the end of August, there have been 268 deaths from suspected overdose -- that's a 40% increase over the same time frame in 2019.

Ms. Teitelbaum shared the results of a CDC's study of over 5,000 participants published in the August Morbidity and Mortality Weekly Report (MMWR). Of the 5,000 participants, 40% reported struggling with mental health and substance abuse, 26% reported symptoms related to trauma and stress, 13% have started or increased substance use and 1% report having seriously considered suicide. She continued by adding that special attention and focus has been placed on special populations (older population, communities of color, English as second language populations, pregnant women, homeless, people working in industries at high risk for substance misuse, and criminally involved clients) in efforts to minimize disparities in the care they receive.

DSAHM has been tracking national trends in behavioral health disparities, which have highlighted various systemic issues in healthcare. They have developed an equity analysis based on literature on behavioral health disparities. The findings of the analysis illuminated several focus areas for the Division. The COVID-19 pandemic has exacerbated these areas of concern.

Ms. Teitelbaum reported that telehealth services have allowed a proactive approach to treatment via virtual connectivity. Telehealth will allow Delawareans to continue receiving medications needed for treatment, contact crisis centers when necessary, work with peers virtually and continue to use public health precautions for general health and wellness during the pandemic.

DSAHM has responded to the alarming effects of COVID-19 by expanding virtual connections, including launching their public portal called Treatment Connection, training individuals with experience to serve as peer support, increasing the outbound call processes, and canvassing communities at risk through their Mobile Services. DSAHM has worked closely with community partners to distribute over 8,000 pallets of food, over 1,200 units of Narcan and lastly, they have shared mental health and substances abuse information with over 4,000 families.

Ms. Teitelbaum concluded her presentation by sharing the Division recently received a grant from Substance Abuse and Mental Health Services Administration (SAMHSA) for efforts related to suicide prevention within high risks groups. As a result, the Delaware Emergency Response to Suicide Prevention project will provide: Training and outreach, tools to identify and screen individuals, interventions for those who are experiencing suicidality, and support for anyone in the state experiencing domestic or intimate partner violence. Dr. Fan took a moment to speak about the mental health concerns that have increased as

a result of the pandemic. She thanked Ms. Teitelbaum for her presentation and called for questions. For the full presentation visit: <https://dhss.delaware.gov/dhss/dhcc/files/carecommissionslides.pdf>

DIMER

The Chair of DIMER, Sherman Townsend, provided an update from their September board meeting. The 2020-2021 academic year saw the largest number of applicants in 13 years, with 47 students from Delaware in their first-year class at Philadelphia College of Osteopathic Medicine (PCOM) and Sidney Kimmel. Twenty-four at Sidney Kimmel and 23 at PCOM. The program currently pays PCOM for 10 slots and Sidney Kimmel for 20 slots. There are 94 students in all four classes at PCOM. Sidney Kimmel had 88 applicants, 31 were offered acceptance, 2 will defer until next year. This year the program has 24 who have matriculated at Sidney Kimmel.

The DIMER program continues to conduct outreach programs around the state, increasing the program's awareness. He attributes this to DIMER's partnership with the Delaware Health Science Association (DHSA). Dr. Omar Khan and Pamela Gardner have worked closely with Mr. Sherman to plan outreach activities around the state. They sent welcome letters to all first-year student and check-in letters to current students. Dinner events have been postponed until Spring. The program engages high school students and undergrad college students. A virtual outreach events will be held on October 8th. This event targets Kent County and the December 8th event will target Sussex County.

The DHSA held an essay contest among the medical students. They plan to publish the top five essays that are selected. Lisa Maxwell, ChristianaCare held focus groups. There were three one-hour sessions, with residency and medical students. The discussions covered a variety of topics and highlighted our need to assist in the recruitment and retention efforts throughout the state.

DIMER will release an updated annual report in early 2021. He also encouraged the Commissioners to support the Apollo program that aims to increase students' interest in medical fields. He was inspired by Dr. Straight and Nick Moriello's comments about family medicine and primary care needs and emphasized DIMERs shared commitment to focus on these needs.

There was some discussion about the Student Loan Repayment Program. Mr. Townsend shared his interest in implementing a state program that will not include the strict restrictions within the federal program.

Comment (Chat box)

- Lolita Lopez thanked Mr. Townsend for the great work he is doing to recruit and retain qualified providers to our state. She added that this important work will continue to have long term efforts on our healthcare system.
- Dr. Tom Stephens congratulated Mr. Townsend on such a successful year with DIMER. He shared his appreciation for his ongoing commitment to recruiting our workforce.

DIDER

Dr. Rafetto thanked the Commissioners for the invitation to present DIDER updates. He stated that despite testifying on behalf of inclusion into the state loan repayment program, the most recent version of House Bill 257 did not include dentistry. He is hopeful that they will be included in future funding for a Delaware Student loan repayment program (HB257).

Dr. Raffetto mention the recommendation from the Health Care Commission to develop a partnership to utilize a manpower survey. DIDER has focused much of its attention this year on developing a framework for a survey to better understand dental workforce capacity in Delaware, as it relates to the number and distribution of dentists.

He shared draft questions and comments intended to be used by a vendor in establishing and implementing the survey. DIDER hopes to identify important elements like, what attracts and discourages dentists from practicing in underserved areas and examine the connection between the licensure process and capacity. All comments and/or feedback about the survey from the Commissioners can be forwarded to him.

He recently learned the Public Health Department conducts a survey about dental workforce capacity. Several years ago, two surveys were conducted with the intent to collect similar information. He expressed interest in partnering to avoid duplication of efforts. DIDER is currently researching and developing questions to ensure the results are accurate and informed.

Dr. Raffetto provided an update on DIDER's Temple University partnership. Out of an applicant pool of 2,763, 11 out of 29 Delaware applicants accepted admission to the first-year class, with another 3 enrolling in the Post-Baccalaureate Program. Four Delawareans declined admission to attend other schools. Those accepting admission, join 3 sophomores, 3 juniors and 4 senior students from Delaware, representing a significant uptick in Delaware students this year. Fifteen of the 29 applicants attended the University of Delaware for their undergraduate education.

The State, through DIDER, compensated the School of Dentistry on a per student basis of \$12,500 with a cap on this amount. Tuition this year is \$67,376. That monies available for this program have diminished since the inception of this contract based on cutbacks by the State of Delaware with the number of Delaware residents enrolled exceeding the number of slots funded by DIDER. This does not include the number of Delaware residents entering the post-baccalaureate program. It is important to note the average indebtedness of recent graduates from Kornberg School of Dentistry is \$279,878.00 and DIDER does not have any funds allocated to help students with the cost of obtaining a dental education.

Temple has been particularly aggressive recruiting students from Delaware and letting them know about the DIDER program when they attend. They also host lunch and dinner meetings for enrolled students with representatives from DIDER. Of the 15 successful applicants the majority were from the University of Delaware.

The ChristianaCare General Practice Residency Program has eight residents. Five are from Delaware and three are from out of state. The residency program is a strong recruiting tool, as the majority of individuals who complete the program remain in the state to practice.

A Dental Hygiene exam was conducted. Sixteen individuals took the exam and 15 passed. The Dental Exam was conducted at an 18-share clinic in Sussex county. Over the past five years the pass rate has been approximately 94%. Dr. Raffetto thanked the Commissioners for the invitation to present and reminded them a more comprehensive report will be given during the upcoming Strategic Retreat in November. Dr. Fan thanked Dr. Rafetto for the presentation. She mentioned that Ted Becker is on the DIDER board as a representative of the Health Care Commission and Commissioner Melissa Jones also works closely with the Dental community.

Dr. Fan apologized for the time, stating that the meeting had reached the scheduled end time. She encouraged attendees to remain on the call for the remaining important topics.

Workforce Development Taskforce

Nick Moriello shared that the Commission is standing up a Workforce Development Subcommittee. Initially, they planned to identify short-term initiatives that could leverage CARES ACT funding. After some discussion it was decided to focus efforts on establishing a subcommittee to identify long-term initiatives. He will be contacting many of the Commissioners and various stakeholders asking for their participation. The subcommittee will be focusing on the needs of the state over the next 5-15 years and identifying policy or initiatives that can be supported by the Commission. He concluded by reminding the Commissioners that he would be contacting several of them in the coming weeks.

Secretary Rick Geisenberger, the Workforce subcommittee Co-chair stated that the initiatives of the Commission are connected to a sustained workforce. If the CARES Act funding deadline is expanded the subcommittee will revisit the possibility of leveraging the funding. There was some discussion about the name of the subcommittee, and it was suggested to add "Health" to the title. Dr. Fan expressed her gratitude to both Chairs and shared that she is looking forward to watching this initiative progress.

Marketplace

Insurance Commissioner Trinidad Navarro in his remarks, delivered by Leslie Ledogar of the Department of Insurance, Commissioner Navarro reported that for the past two years, the ACA marketplace has stabilized. In addition, the 1332 Waiver program, spearheaded by DHSS, has led to an overall decrease in health insurance premiums.

For the first time ever, Highmark will be rebating premium back to those on the individual marketplace, with individuals seeing, on average, a \$600 rebate. This is happening at a time when it's needed most. So, between the individual and small group markets, Highmark will return \$21.5 million to consumers. It's important to note that COVID has no impact on the rebate because the rebates are based off of last year's medical loss ratio (MLR).

There has been some criticism as some have said the rebates are only because people overpaid in the first place. The truth is, we only had assumptions from actuaries and anticipated a decrease, but at the end of the day, the impact was much higher than we first thought. As the State Insurance regulator, it is our job to make sure Highmark's numbers fell within the medical loss ratio. This is why the rebates will be returned to consumers.

We anticipate a larger interest in open enrollment this year as many Delawareans have lost their work sponsored health insurance. Open enrollment is just around the corner. The DOI will be assisting again with getting the word out through the media and promoting navigator services, including the services of the Department's Delaware Medicare Assistance Bureau.

Lastly, we are all watching the court battle as the US Supreme Court will begin hearing oral arguments starting November 10th regarding the constitutionality of the ACA.

Nick Moriello was invited to comment further on the rebates. Mr. Moriello added that if there are individuals in need of coverage that it is really important to shop during the open enrollment period beginning November 1st. The market has stabilized and there are more affordable options than in the past.

In terms of the rebates, a calculation that happen for insurance carriers. This calculate how many dollars they spend in medical bills relative to the insurance premiums they collect. It must meet a certain percentage over a three-year rolling average. It can be unpredictable. Rebates are there for protection. The open enrollment for the individual affordable care market, in the Medicaid space market will begin on October 18th. He thanked Leslie Ledogar and Commissioner Navarro for their help. He emphasized the importance of individuals who quality to ensure the prescription drug coverage is appropriate. Ms. Ledogar thanked Mr. Moriello. She concluded her remarks by sharing their DMAB consultants will be up and running. People can make appointment to meet with navigators to help with Medicare enrollment as well. This team is lead by Lakita Turner.

Dr. Fan took this opportunity to correct her announcement regarding Dr. Dunleavy's successor. Dr. Richard Margolis will serve as the Division of Children Services for Youth and their Families appointee. Mr. Margolis thanked Dr. Fan for the introduction. He continued the introduction by sharing that he is a Child Psychiatrist in Children's Department and he has worked for the state in various capacities over the past 32 years. He has presented to the Commission once before as the Program Director of the Delaware Child Psychiatry Access program. He expressed his gratitude for the opportunity to serve and stated that he is looking forward to becoming an active member.

Strategic Retreat

Dr. Fan reported that the Retreat will be held on Friday, November 20th. Devona Williams will once again serve as the moderator. The Retreat may be a hybrid in-person event. Dr. Fan asked if Commissioners were comfortable with meeting in a larger venue such as the Chapel on DHSS campus in person and then live streaming for the public. The other alternative will be to meet virtually. Possible topics include Workforce Development, Health Information Technology (EMR and Telehealth practices), Health Care Delivery, Social Determinants as well as the usual updates from the DIDER and DIMER boards. Lastly, she asked the Commissioners to share suggestions for topics. Details will be shared in the coming weeks.

Health Resources Board Sunset Update

Next, Dr. Fan provided an update about the Health Resources Board (HRB) Sunset review process. The public research survey link is now live on the JLOSC website. This survey is open to the public and all interested stakeholders and will close at 11:59 p.m. on Friday, October 30, 2020. You can also access the survey directly at: <https://www.surveymonkey.com/r/M9ZHSJS>. An additional survey will be sent to the Health Resources Board members. Survey data collected will be one of the drivers used by JLOSC staff as they draft their recommendations for the Health Resources Board review taking place in early 2021.

Primary Care Reform Collaborative

Dr. Fan reported on the continued work of the Primary Care Collaborative stating that she and the other two Co-Chairs are working hard to meet the goals of Senate Bill 257 and make recommendations. She added that the deficiencies exposed during the pandemic have increased the urgency of their work. She shared the dates of the next three monthly meetings and encouraged attendance.

Public Comment

Cheryl Heiks with the Delaware Health Care Facilities Association volunteered the services of the Long-Term Care community for help on workforce development. Steve Costantino shared a link to a survey from CMS in relation to serving children in health care in the chat box for the session. The topics covered include underutilization of child screening, vaccinations and children's behavioral health. Results will inform all levels of health care, from insurance companies, providers, MCOs to patients.

<https://www.medicaid.gov/resources-for-states/downloads/medicaid-chip-beneficiaries-18-under-COVID-19-snapshot-data.pdf>

David Baker thanked the Commission for the insightful meeting and the work they do to increase the health of Delawareans. He shared his concern regarding the lack of compliance regarding mask wearing in Sussex County and his belief that this may be contributing to the spikes in the community. Mr. Baker also offered a recommendation to require DIMER students to practice in state after graduating. Dr. Fan mentioned the program does not provide funding to the students, making it difficult to issue mandates or requirements. Sherman Townsend echoed similar sentiments and encouraged attendees to support the Student Loan Repayment to help attract doctors to the State.

ADJOURN

Dr. Fan thanked everyone for their patience and participation. She encouraged attendees to check the [State of Delaware Public Calendar](#) for the DHCC meeting location and updates. The next meeting is scheduled for November 5th and is likely to be virtual. Dr. Fan adjourned the meeting at approximately 11:22 a.m.

Next Meeting

The next DHCC meeting will be held on November 5, 2020 from 9 a.m. – 11 a.m.

Public Meeting Attendees 10/01/2020

Randy Munson	United Medicaid LLC
Mary Fenimore	Medical Society of Delaware
Mary Perkins	MACHC Goeins-Williams Associates
Bill Howard	BDC – Health
John Dodd	BDC – Health
Lolita Lopez	Westside Family Healthcare
Pamela Gardner	Delaware Health Sciences Alliance
Nina Figueroa	Statewide Benefits Office
Cheryl Heiks	Delaware Health Care Facilities Association
Steven Costantino	The Department of Health and Social Services
Wayne Smith	Delaware Healthcare Association
Leslie Ledogar	Delaware Department of Insurance
Kathy Collison	Division of Public Health
Jill Fredel	The Department of Health and Social Services
Joanne Haase	League of Women Voters of Delaware
Lori Ann Rhodes	Medical Society of Delaware
Elizabeth Lewis	Hamilton and Goodman Partners, LLC
Ruth Lytle-Barnaby	Planned Parenthood of Delaware
Maggie Norris Bent	Westside Family Healthcare
Christina Crooks Bryan	Delaware Healthcare Association
David Roose	DOF
Steve McRae	Tricida
David Baker	Sussex Economic Development Action Committee
Alexis Teitelbaum	DSAMH, DHSS

Dr. Paul Silverman
Liz Brown
Nichole Moxley
Sherman Townsend
Dr. Margolis
Dr. Karyl Rattay
Jillian Small
Shay Scott
Dr. Joseph Straight
Paula Roy
Kristy Hull
Corinne Arman
Claudia Kane
K Macklin
Marsha Horton

DPH
DMMA
DPH
DIMER
DSCYF
Department of Health Director
Highmark Health Options, Delaware Medicaid
Henrietta Johnson
Medical Society of Delaware