

**DELAWARE HEALTH CARE COMMISSION
JANUARY 7, 2010
DELDOT ADMINISTRATION BUILDING
FARMINGTON-FELTON CONFERENCE ROOM
DOVER
MINUTES**

Action Item

Commission Members Present: John Carney, Chairman; Lisa C. Barkley, MD; Theodore W. Becker, Jr.; Thomas J. Cook, Acting Secretary of Finance; A. Richard Heffron; Rita Landgraf, Secretary, Delaware Health and Social Services; Janice E. Nevin, MD; Dennis Rochford and Fred Townsend.

Members Absent: Vivian Rapposelli, Secretary, Services for Children, Youth and Their Families; and Karen Weldin Stewart, Insurance Commissioner.

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

CALL TO ORDER

The meeting was called to order at 9:05 a.m. by John Carney, Chairman.

MEETING MINUTES OF NOVEMBER 5, AND DECEMBER 3, 2009

Ted Becker made a motion to accept the November 5, 2009, meeting minutes. Rita Landgraf seconded the motion. There was a voice vote. Motion carried.

Ted Becker made a motion to accept the December 3, 2009, meeting minutes. Tom Cook seconded the motion. There was a voice vote. Motion carried.

DELAWARE HEALTH SCIENCE ALLIANCE PRESENTATION & DISCUSSION – Kathleen S. Matt, Ph.D., Dean, College of Health Sciences, University of Delaware and Executive Director, Delaware Health Science Alliance

Dr. Kathleen Matt gave a presentation on the Delaware Health Sciences Alliance, a partnership between the University of Delaware, Christiana Care Health System, Alfred I. DuPont Hospital for Children/Nemours, and Thomas Jefferson University Jefferson Medical College to provide health care education with interdisciplinary clinical and translational research.

The new Alliance will focus on bringing together teams from multiple disciplines to address issues of education, training and research in new ways. The new interdisciplinary approach will allow a broader spectrum in learning.

Translational research focuses on bringing research findings from the laboratory to the bedside.

Action

The minutes of the November 5 and December 3, 2009, Commission meetings were approved.

The Delaware Health Sciences Alliance, a partnership between the University of Delaware, Christiana Care Health System, Alfred I. DuPont Hospital for Children/Nemours, and Thomas Jefferson University Jefferson Medical College to provide health care education with interdisciplinary clinical and translational research.

This approach to research, from the bench to bedside, will provide improved linkages between theory and practice.

The Delaware Institute of Medical Education and Research (DIMER) is an important partner in this endeavor, as it has created a pipeline to medical education for Delawareans that has continued to improve the health care of the state over the years.

The Alliance aims to create programs that allow students to move from one institution of higher learning to another in a seamless fashion. Examples of training for new disciplines made possible by the Alliance are occupational therapy and pharmacy. Discussions are underway on the creation of a Public Health program with Thomas Jefferson University offering a Master of Public Health and the University of Delaware offering a minor in Public Health. This allows students to move from one university to another more easily and creates a pipeline of students from one institution to another. The schools are also working together to create some joint nursing programs. The Master of Business Administration (MBA) program is working with the medical program, as well. The schools are considering joint degrees and creative ways to pull various programs together.

The University of Delaware College of Health Sciences includes Nursing, Physical Therapy, Medical Technology, Nutrition, Exercise Science, Health Behavior, Health Promotion, and Athletic Training. The challenge and responsibility of the College is to educate the next generation of health care providers. There are many opportunities to mix these programs together. It is important for the College to be very connected to the community, the Commission, the State and the people in the state so it understands what the needs are and makes sure those needs are being matched by the various professionals being trained.

Information on the Delaware Health Science Alliance faculty, programs, research centers involved and core capabilities is available on its website <http://www.delawarehsa.org>.

The University of Delaware, Thomas Jefferson University, Christiana Care Health System, and Alfred I. DuPont Hospital for Children/Nemours provide clinical sites for many of these academic programs.

In the future other affiliates will join the alliance. The University of Delaware is working on relationships with Bayhealth Medical Center, Beebe Medical Center, Delaware Hospice, Delaware Health and Social Services and Veterans Administration Medical Center.

A Memorandum of Understanding (MOU) will be entered into between the institutions. The goal is to make the connections

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between the institutions “seamless” so that clinicians, clinical scientists and basic scientists do not see the walls of the institutions. The MOU will provide for the grants and students to be exchanged. There will be shared faculty and students, joint educational programs and joint research funding. All of this depends upon investment in research space, senior hires, educational programs and research centers.

The University of Delaware has acquired the site of the former Chrysler Assembly Plant in Newark to serve as the new University of Delaware Health Sciences Campus. It anticipates enhancing the transit to increase the rail service to the area.

The new campus will have third and fourth year students including nursing, physical therapy, occupational therapy, pharmacy, nutrition, medical technology, and behavior therapy. Having multiple disciplines training together will provide the opportunity for inter-professional teams in education and research that hopefully will result in inter-professional teams practicing together.

Discussion

Dr. Janice Nevin, a former DIMER student, said that 25 percent of the physicians in Delaware have a connection to DIMER and Jefferson Medical College. Each year, the Joint Finance Committee asks the Commission staff to explain the value of the DIMER program in order to receive funding. Dr. Nevin asked Dr. Matt how to sharpen the discussion with legislators around the value of DIMER. Dr. Matt suggested that more discussions are needed at the community level to help people understand the value of increasing medical care quality and access through DIMER. It is important to speak with legislators and individuals throughout the government about the importance of DIMER’s activities through presentations, outcomes data, being specific about what is needed, and making large global statements that are translated in a way that makes sense to everybody.

Dr. Lisa Barkley asked how the Health Science Alliance can work collaboratively with the Commission and the State to address Delaware’s health professional workforce needs. Dr. Matt answered that from the University of Delaware’s standpoint, and as the Dean of the College of Health Sciences, they want to work with Delaware State University and all of the educational institutions within the state sitting down together to create a planning process, looking at workforce needs, the various educational programs and where the demand is for those programs and make sure everything is connected. She suggested that perhaps a planning board should be empanelled.

The University of Delaware has acquired the site of the former Chrysler Assembly Plant in Newark to serve as the new University of Delaware Health Sciences Campus.

Chairman Carney said there is already a planning group established, the Delaware Biotechnology Institute (DBI), a partnership involving the State, its academic and medical institutions and the private sector. Since the founding Director, Dr. David Weir, left DBI Mr. Carney believes some of the collaboration has diminished.

Dr. Barkley added that DBI does not focus as much on the medical or clinical component as it does on technology. Practice and workforce aspects need to be looked at statewide so filling the needs of the State can be planned. The new alliance can help fill a big need.

INFORMATION AND TECHNOLOGY

Update: Delaware Health Information Network (DHIN) Progress and Governance Proposal

Rob White, Chairman of the Delaware Health Information Network, said the State of Pennsylvania has publicly announced its intention to collaborate with DHIN.

Gina Perez, Executive Director of DHIN, reported that she participated in a conference call with the Department of Health and Human Services, Office of the National Coordinator (ONC) for Health Information Technology, which gave DHIN a green light on the application for funding.

Delaware is one of only two states to submit a full strategic and operational plan with its application, which means DHIN would go straight to implementation. Other states are somewhere in the middle and would have to do a planning process first.

DHIN was given very good feedback on its plan from ONC. More details have been requested for some areas of the plan and that report will be submitted at the end of this month. Therefore, DHIN's progress should be well documented to allow other Health Information Networks to learn from DHIN's success. ONC made it very clear that DHIN's plan is seen as a national model. The \$4.6 million funding over the next four years is expected sometime in February 2010.

The ONC released another grant opportunity to be awarded to 15 communities across the nation that are advanced health information exchange organizations. DHIN was highly encouraged to respond to that application and will apply on a statewide basis. That grant has the potential for \$20 million over a three year period.

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Mr. White said that DHIN is at the head of the line for receiving federal funding in large quantities to build additional functionality and continue to stay in a leadership position with states in Delaware's region and across the country. The challenge now is to see DHIN's financial future for sustaining the infrastructure on an ongoing basis and charting a course for what needs to be done in the next 18 months to guarantee the future of financial sustainability for DHIN.

The operational side is very closely tied to the governance and how DHIN is incorporated. The biggest risk will be the inability to fully take advantage of all the opportunities currently available, by not getting organized quickly enough to spend the money appropriately and create the results for a return on investment.

Dennis Rochford asked about the parameters of DHIN's operating budget. Mr. White said on an ongoing basis it is about \$5 to \$6 million dollars per year.

Ms. Perez added that the operating budget of \$5 million a year includes licensing, maintenance, organization support, hardware, and interfaces. Staffing costs are approximately \$1 million a year. The \$4.6 million grant coming brings four employees with it.

Mr. Carney asked about the status of the State Auditor's Office audit of DHIN and the Sunset Committee Review. Ms. Roy responded that the audit is ongoing. The Commission staff submitted answers to the third round of questions to the Sunset Committee. Hearings will be scheduled during the Joint Finance Committee break during the month of February and the first two weeks of March. DHIN's hearing date is not known at this time. There will be an opportunity for the Commission to review the Sunset Committee report. All agencies under Sunset Review have been asked to attend a meeting on January 19 to orient them on the process. Perhaps more details on the hearing schedule will be provided at that time.

Rich Heffron, Chairman of the DHIN Governance Committee, reported the basic elements of the proposed DHIN governance structure and the proposed amendments to the DHIN statute.

The Governance Committee went through a very considered and deliberate process to arrive at its recommendations.

DHIN was fortunate to have volunteer assistance of private attorney David Swayze, who has had considerable experience in

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setting up the types of organizations that the Committee wanted to form.

The Committee used the following process, which was recommended by Mr. Swayze:

- Identify what the Committee likes about the current structure and wants to preserve
- Identify what the structure does not have that the Committee would like to gain
- Allow those decisions to guide the new structure

The Committee made the following decisions:

Preserve

- Benefits of being associated with state government (e.g., Governor has designated DHIN as the agency to apply for and receive federal stimulus (ARRA) money – do not want to jeopardize that)
- Current statutory protections (anti-trust)
- Continuity
- Current statutory purposes, powers, privacy provisions, property rights - many elements of current statute work well

Gain

- Independence
- Nimbleness to run like a private company
- Hire staff
- Long term control over assets

In order to achieve its goals, the Committee looked at current structures of public/private entities of the State and decided on Diamond State Port Corporation as its guide to form a quasi-government agency.

The Committee recognized it is easier to amend the existing statute than rewrite new one.

The DHIN Governance Committee made the following recommendations:

- Amend current statute
- Remove DHIN from “direction and control” of the Health Care Commission, and make it a “public instrumentality” of the state, giving it the status of a body “both corporate and politic”
- Create a new Board of Directors, specifically allowing state officials to serve (another advantage of being a public corporation). Board members will be appointed by the Governor, with the recommendation of the DHIN Board.
- Ex-officios will have full voting rights; they will be: Department of Technology and Information, Office of

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- Ex-officios will have full voting rights.

DHIN will retain

Management and Budget, Delaware Health & Social Services, Department of Insurance, and the Controller General, who will represent the Legislature.

There will be one representative from consumers, one representative from business/employer, two representatives from health insurance/health plans, three representatives from hospitals or the health system, three physicians or other licensed health care providers and four representatives from other health care services or providers (labs, pharmacy, etc.).

DHIN will retain the same purposes, powers and protections as the existing statute, except the powers fall to DHIN rather than the Delaware Health Care Commission.

DHIN will be able to promulgate its own rules and regulations.

Discussion

Dennis Rochford asked about involving the Legislature. When the Governor makes the appointments is there any Senate confirmation and, secondly, is there any reason to have the Board nominations coming through the House and Senate?

Mr. Heffron responded no to both questions and said that is why they have the Controller General's Office on the Board.

Mr. Carney made the observation that the Diamond State Port Corporation's Board is approved by the Senate. He asked if there is a Medical Society of Delaware representative on the Committee and was assured there was.

Mr. Carney asked if there was any discussion about the size of the Board. Mr. Heffron said yes. The Committee decided that the Board should have at least 15 and no more than 19 members.

There are 17 members currently serving on the DHIN Board who will continue to serve until their term expires and are replaced by the Governor or until there are 15 appointed members under the new system, at which point anyone with an unexpired term from the old Board will step down.

Mr. Carney asked who owns what the State has paid for and asked about the value of the assets that DHIN owns. Ms Perez responded that the software is licensed, as are upgrades for the software. The vendor owns the software. DHIN owns about \$200,000 in hardware.

Tom Cook asked if DHIN's financials are currently audited by an outside firm. Mr. Carney said that it is an extra step and an extra level of accountability that should be considered. Mr. Cook said he

the same purposes, powers and protections as the existing statute, except the powers fall to DHIN rather than the Delaware Health Care Commission.

DHIN will be able to promulgate its own rules and regulations.

will work with DHIN to achieve this.

The decisions of the DHIN Governance Committee were presented to the DHIN Board at its meeting on Tuesday, January 5, and the vote was to recommend the results to the Delaware Health Care Commission, with one abstaining vote, Dr. Randeep S. Kahlon. The doctor abstained because he did not like the wording in the current statute and not because of the recommendations.

Wayne Smith said that Senator Brian Bushweller, who intends to be the sponsor, has requested that the legislation be submitted in January. It will be helpful in balancing the discussion that is going to take place in February before the Joint Sunset Committee.

Mr. Carney said that Senator Michael Katz has introduced a competing piece of legislation that the Commission does not support.

The Commission needs to be explicit in its approval of the DHIN Governance Committee's recommendation that it supports this approach and not the approach introduced by Senator Katz.

It was noted that the Administration, which includes Tom Cook and Rita Landgraf, has not officially taken a position on the Governance Committee's recommended legislation.

It was agreed that the Commission would accept the broad outline of the Governance Committee's recommendations, and that the specifics of the recommendations will be addressed by staff and DHIN Board members. This will allow Mr. Cook and Ms. Landgraf the opportunity to consult with their Administration colleagues and then communicate with Paula Roy, John Carney, Rich Heffron and Rob White.

Mr. Carney clarified Mr. Rochford's statement as proposing a motion that would focus on the broad outline of the recommendation, with some of the specifics handled by staff and DHIN Board in consultation with the Administration.

Action

Dennis Rochford made a motion that the Commission accept the broad outline of the DHIN Governance Board's recommendations, and agree that the specifics of the recommendations will be handled by staff and DHIN Board members in consultation with the Administration. Dr. Lisa Barkley seconded the motion. There was a voice vote. Motion carried.

Action

The broad outline of the recommendations of the DHIN Governance Committee was accepted, and it was agreed that the specifics of the recommendations will be handled by staff and DHIN Board members in consultation with the Administration.

HEALTH PROFESSIONAL WORKFORCE DEVELOPMENT

State Loan Repayment Program

The Loan Repayment Committee met on Tuesday, December 8, 2009, the DIDER Board of Directors met on Tuesday, December 15, 2009, and the DIMER Board of Directors met on Wednesday, December 16, 2009.

Funding Updates

The Loan Repayment Program has the following funds available for distribution:

- \$100,000 available in State DIDER funds through June 30, 2010
- \$43,500 available in State DIMER funds through June 30, 2010
- \$143,000 available in federal matching funds through August 30, 2010
- \$75,000 available in ARRA federal matching funds through September 29, 2010

Review of DIDER Applications

The Loan Repayment Committee and DIDER Board of Directors reviewed the following applications and made the following recommendations.

1. Site: DeLaWarr State Service Center, Division of Public Health dental clinic
 - 500 Rogers Road, New Castle 19720
 - serves approximately 1,148 patients per year, all of whom are Medicaid and/or SCHIP enrollees.
 - Open 37.5 hours per week – Mon. – Fri. (8:00 am – 4:30 pm)
 - Dentists may be assigned to any of the DPH dental clinics as necessary.
 - Funding: State Funds Only

Yuri ("Judy") Majul, Dentist – (Recruitment)

Dr. Majul was born and raised in Colombia, South America and is bilingual (English/Spanish). She first attended the Metropolitan University of Dentistry in Barranquilla, Colombia, South America. Upon her arrival to the United States she proceeded to pursue her valid U.S. dental license and attended Temple University's School of Dentistry, Philadelphia, PA, where she graduated in May 2007. Dr. Majul completed the General Practice Residency Program at Christiana Care Health Services in August 2008. Dr. Majul has about \$181,795 in loans (verified) and is interested in a two year service commitment and contract.

Dr. Majul started employment with the DeLaWarr State Service

Center dental clinic on April 27, 2009. Subsequent to the Loan Repayment Review Committee meeting on September 9, 2009 Dr. Yuri Majul formally notified the DHCC staff in writing that she resigned from the DeLaWarr State Service Center, DPH dental Clinic. Effective October 26, 2009, Dr. Majul began working full-time (40 hrs/week) at Peninsula Dental Assoc., located at 26670 Centerview Drive, Unit 19, in Millsboro, DE 19966. She is requesting that her application reflect this change, and be duly considered for Loan Repayment to practice at the new site location.

Recommendation

The Loan Repayment Committee and DIDER Board of Directors recommended that Dr. Yuri Majul be awarded \$30,000 for a two year commitment to practice at Peninsula Dental Associates.

Site application: Peninsula Dental, LLC (RECRUITMENT)

- 26670 Centerview Drive, Unit 19, in Millsboro, DE 19966
- newly established practice in Sussex County
- joining the practice: Dr. Glen Goleburn, DMD and Neil S. Woloshin, DMD, 2 Dental Hygienists, 2 Dental Assistants, and one receptionist/treatment coordinator, and are interested in recruiting a third full-time Associate Dentist, with future opportunity for partnership in the practice
- Serve patients in Millsboro community.
- Loan Repayment would serve as a recruitment tool for the new practice.
- open Monday through Friday from 8:00am-5:00pm, and will be on-call on the weekends. They opened the practice in October 2009.

Office Manager, John T. Moore, has assured that the new practice will provide dental services to Medicaid, S-CHIP enrollees as well as uninsured or low-income patients provided care at reduced rates.

Recommendation

The Loan Repayment Committee and DIDER Board of Directors recommended that Peninsula Dental be approved as a practice site.

Review of DIMER Applications

The Loan Repayment Committee and DIMER Board of Directors reviewed the following applications and made the following recommendations.

1. Site: The Birth Center: Holistic Women's Health Care, LLC, Wilmington
 - provides care to approximately 2000 patients per year
 - dedicated to improving prenatal outcomes in Wilmington.
 - one-third of their patients are Medicaid enrollees (others are covered under private insurance)
 - provides free pregnancy confirmation to all patients, prenatal

care, labor/delivery, child birth education classes, post partum home visits, extensive newborn care, breast feeding support, and routine well-woman care

- Their nurse midwives can trade call days and office days as needed to accommodate for personal scheduling conflicts or events. Each midwife is allotted four hours of administration time per week.
- Funding: State Funds Only

According to the federal SLRP Regulations, for OB-GYN physicians and certified nurse midwives, the majority of the 40 hours per week (not less than 21 hours) is expected to be spent providing direct patient care. Also, time spent in "on-call" status will not count toward the 40-hour work week.

Nicole Black, Certified Nurse Midwife – (1 Yr. EXTENSION Request)
Ms. Black graduated from the University of Pennsylvania with a Master's in Nursing in 2006. She is licensed in Delaware as an RN. She works a total of 24 hours per week and spends an additional 60 hours on call: Monday and Thursday 9 AM – 5 PM and Wednesday Noon – 8 PM. She also spends significant time responding to labor/delivery. (The site will provide a full account of hours spent in this capacity.) Ms. Black recently completed a loan repayment service obligation contract effective for the period of August 1, 2007 through July 31, 2009 and was awarded \$10,000. At the time of her award she had \$56,000 in loans (verified). Today, her current total student debt burden is \$28,101.93. She is requesting a one year loan repayment extension.

Recommendation

The Loan Repayment Review Committee and DIMER Board of Directors recommended that all extension requests be placed on "HOLD" due to limited availability of funding and that priority be given to new applicants.

2. Site: The Birth Center: Holistic Women's Health Care, LLC, Wilmington

- provides care to approximately 2000 patients per year
 - dedicated to improving prenatal outcomes in Wilmington.
 - one-third of their patients are Medicaid enrollees (others are covered under private insurance)
 - provides free pregnancy confirmation to all patients, prenatal care, labor/delivery, child birth education classes, post partum home visits, extensive newborn care, breast feeding support, and routine well-woman care
 - Their nurse midwives can trade call days and office days as needed to accommodate for personal scheduling conflicts or events. Each midwife is allotted four hours of administration time per week.
 - Funding: State Funds Only
- Katie J. Mansur, CNM (1 yr. EXTENSION)

Ms. Mansur graduated from Columbia University with an MS in Nurse Midwifery in 2003. She is a licensed nurse mid-wife in Delaware and works a total of 24 hours per week and spends an additional 60 hours on call: Wednesday Noon – 8 PM; Thursday and Friday 9 AM – 5 PM. She also spends significant time responding to labor/delivery. (The site will provide a full account of hours spent in this capacity.) She speaks basic medical Spanish. Ms. Mansur recently completed a loan repayment service obligation contract effective for the period of August 1, 2007 through July 31, 2009 and was awarded \$10,000. At the time of her award she had about \$59,000 in loans. Today, her current total student debt burden is \$32,368. She is requesting a one year loan repayment extension.

Recommendation

The Loan Repayment Review Committee and DIMER Board of Directors recommended that all extension requests be placed on "HOLD" due to limited availability of funding and that priority be given to new applicants.

Westside Family Health Care Applications

This facility has already been approved as a loan repayment site and qualifies for federal matching funds.

3. Site: Westside Health (FQHC), Newark (Brookside Office)

- 27 Marrows Road, Newark, DE 19713
- treats 3,476 patients per year.

Marcia Reynolds, CRNP-BC - (RECRUITMENT- 6/29/2009)

Ms. Reynolds graduated from Widener University in Chester, PA with an RN and MSN in August 2002. She is board certified by the American Academy of Nurse Practitioners, and the sub-specialty board of Family Nurse Practitioners. Throughout her career, she has worked in mostly urban underserved areas primarily providing care to the uninsured in hospitals located in Philadelphia, PA including Temple Children, Temple University Hospital, and the Children's Hospital of Philadelphia, PA. As a Nurse Practitioner, she worked in a state correctional facility for two years, providing care to inmates and later worked for Spectrum Health Service, a Federally Qualified Health Center in Philadelphia, providing care to the underserved, uninsured women and children. Ms. Reynolds total student debt burden is about \$58,592 (verified) and she is interested in a three year service commitment.

Recommendation

The Loan Repayment Review Committee and DIMER Board of Directors recommended that Ms. Reynolds be awarded \$10,000 (\$5,000 state funds plus \$5,000 federal funds) for a two year service commitment to practice at Westside.

4. Site application: La Red Health Center (FQHC), Georgetown
This facility has already been approved as a loan repayment site and qualifies for federal matching funds.

- 505 West Market Street, Georgetown, DE 19947 (302) 855-1233
- treats 4,839 patients per year. Of the total patient population, 3,387 patients fall below 200% of federal poverty level (FPL).

Recruiting one Family Practice physician and one Family Practice Nurse Practitioner (*Waiting for health professional applications*)
Projected hiring timeline is about 4-6 months to recruit

Recommendation

Funds have already been set aside for La Red to recruit one Family Practice physician. The Loan Repayment Committee recommended that La Red keep them informed of progress with recruiting a physician.

5. Site: Beebe Medical Center, Lewes, DE (Beebe Medical Physician Network)

- 424 Savannah Road, Suite B, Lewes, DE 19958
- treats 24,643 patients per year (FY08 stats). Of the total patient population, 16% are Medicaid or S-CHIP enrollees, and about 8% are uninsured. Approximately, 2500 patients in FY08, fell below 200% FPL.
- Funding: State/Federal

Afshin Adili-Khams, MD, Internal Medicine, Geriatrics Fellowship (RECRUITMENT)

Dr. Adili-Khams graduated from the University Medical School of Debrecen, located in Hungary in June 2000. He completed his residency training in Internal Medicine at Seton Hall University School of Graduate Medical Education at the Trinitas Hospital located in South Orange, NJ in June 2004. Dr. Adili-Khams is Board Certified in Internal Medicine, and he is licensed to practice in the State of Delaware. In 2005, Dr. Adili-Khams completed a Geriatrics Fellowship at the Albert Einstein Medical Center in Philadelphia, PA. In December 2008, he began working as a full-time hospitalist for Beebe Medical Center and later in April for Kent General Hospital/Milford Memorial Hospital in Dover. Dr. Adili-Khams total student debt burden is \$38,219 (not verified – Royal bank of Canada, Ontario) and he is interested in a three year service commitment.

Subsequent to the meeting, the Division of Public Health researched Dr. Adili-Khams, who was a J1 VISA Program recipient. According to the USCIS regulations, a physician may not receive lawful permanent resident status until such time as the alien has worked full-time as a physician for an aggregate of 5 years in the shortage area, or 3 years in the shortage area if the doctor

petitioned for the nation interest waiver. According to the case file at DPH, Dr. Adili-Kahms has worked for 4 years as of April 4, 2005 in a Health Professional Shortage Area in Delaware. In addition, he also applied for the National Interest Waiver, once in 2006 and twice in 2007. There is no information as to why he applied so many times, but it is assumed that the letters of support from Delaware Public Health did not help him in seeking his green card. His last residence when he was approved for the J-1 program (4/1/05 to 3/31/08) was Canada, but he was born in Iran.

Recommendation

Leah Jones requested counsel by Stuart Drowos, the Deputy Attorney General to the DIMER Board, to determine whether or not the applicant qualifies. It was determined the applicant is currently not a U.S. citizen, and therefore does not qualify for the Loan Repayment Program.

6. Site: Nanticoke Memorial Hospital

- This site is located at 801 Middleford Road, Seaford, DE 19973 and treats approximately 64, 841 patients per year. Of those, 36, 632 are treated for primary health care and about 65% of the total patient population fall below 200% of fpl. The practice site is open 40 hrs per week and its hours of operation are as follows:
 - Monday: 8:30am – 4:30 pm
 - Tuesday: 8:30am – 4:30 pm
 - Wednesday: 8:30am – 4:30 pm
 - Thursday: 8:30am – 4:30 pm
 - Friday: 8:30am – 4:30 pm

- Funding: State/Federal

Abimbola O. Olowo, MD - Hospitalist (RECRUITMENT)

Dr. Olowo graduated from North Eastern Ohio Universities College of Medicine, located in Rootstown, OH in 2005. He completed his residency training at the Christiana Health Care System (CCHS) in internal medicine in 2008. After graduating from residency, his first job was an attending physician in sub-rural Georgia local hospital. The area was largely populated by aging adults, which sharpened his geriatric competency skills and medical practice. He started working for Nanticoke Memorial Hospital as a hospitalist in June 2009 and is employed full-time, covering admissions, discharges and inpatient rounding and acute health care services to the population of Seaford, DE and its surrounding communities in Western Sussex County. Dr. Olowo's total student debt burden is about \$217,847 and he is interested in a three year service commitment.

Recommendation

The Loan Repayment Review Committee recommended that Dr. Olowo be awarded \$40,000 (\$10,000 state funds, \$10,000 local community match and \$20,000 federal money) for a two year service commitment to practice at Nanticoke Memorial Hospital.

The Committee would like the Health Care Commission staff to explore leveraging additional funds from the private sector, such as hospitals. This would enable an applicant to receive \$10,000 from the state, \$10,000 from the community with \$20,000 in federal match, thus, stretching the state funds.

Local/private match - Under SLRP, innovative methods States may use for obtaining matching funds include the use of funds from donations from other public entities such as eligible healthcare entities, and donations from private sources such as foundations. It was suggested by the SLRP Review Committee based on research and discussion, that the Commission seek matching dollars from downstate hospitals through the hospital foundations.

The DIMER Board of Directors accepted the Loan Repayment Review Committee's recommendation with the stipulation that if Nanticoke does not provide \$10,000 in matching funds for Dr. Abimbola Olowo, the award will be \$12,500 state funds plus \$12,500 federal funds.

Bayhealth Medical Center, located in central Delaware, serves a population of approximately 215,000 in its primary and secondary service areas. Kent County's population is expected to grow at a rate of 11% from 2008 through 2013, which is almost double the projected rate for the entire state.

7. Site: Bayhealth Medical Center at Milford Memorial and Kent General
- Practice sites are located at 21 W. Clarke St. Milford, DE 19963 and 640 South State Street Dover, DE 19901
 - Treats approximately (waiting for information)
 - Funding: State/Federal

Tricia E. Downing, MD – Internal Medicine – Hospitalist
(RECRUITMENT)

Dr. Downing graduated from the University of Pittsburgh School of Medicine, located in Pittsburgh, PA in 2006. She completed her residency training at the Jacobi Medical Center at the Albert Einstein College of Medicine located in Bronx, NY in June 2009. She is currently a Hospitalist contracted to Bayhealth Medical Center which includes both the Kent General Hospital in Dover and the Milford Memorial Hospital in Milford. She provides care to patients who do not have established care in the area whether they are insured or uninsured, those with Medicaid, and underinsured. Dr. Downing can speak some medical terminology in Spanish. Dr.

Downing's total student debt burden is about \$281,461 and she is interested in a three year service commitment.

Recommendation

Deputy Attorney General Stuart Drowos has been asked for an opinion on eligibility of contracted providers who practice at a hospital to be awarded loan repayment. This application is placed on "HOLD" awaiting the DAG's opinion and information on the patient mix at the practice site. This application will be reviewed in February 2010.

8. Site: Bayhealth Medical Group of Harrington

- This practice site is located at 205 Shaw Avenue, Harrington, DE 19952
- Treats approximately 38% Medicare, 12.6% Medicaid, and 2.25% Self Pay
- Funding: State/Federal

Andrew Nash, DO, FACP – Internal Medicine (RECRUITMENT)

Dr. Nash graduated from Des Moines University College of Osteopathic Medicine in Des Moines, IA in 1994. He completed his residency training in Internal Medicine at the Lankenau Hospital located in Wynnewood, A in 1998. Dr. Nash has been involved in the Family and Community preceptor program for CCHS, which involves teaching medical residents to serve the community. He was elected to Fellowship in the American College of Physicians in 2006, which is awarded for clinical excellence and dedication to Internal Medicine and he is board certified in Internal Medicine. He recently joined Bayhealth Medical Center in June 2009 and his office location is in Harrington, working with Dr. Vincent Lobo. Dr. Nash's total student debt burden is approximately \$226,000 and he also has a business loan of approximately \$150,000 from running his own practice at one time.

Recommendation

This application will be placed on "HOLD" and reviewed in February 2010.

9. Site: Delaware Hospital for the Chronically Ill, Smyrna, DE

- This practice site is located at 111 Sunnyside Road, Smyrna, DE and is physically located in a federally designated Mental Health Professional Shortage Area (MH HPSA)
- Funding: The facility is open 24 hrs/day, 7 days/week. As a public, state-run facility, this site is eligible for federal funds.
- This 62-acre campus is a state fun long-term care facility, with 400 licensed beds providing intermediate and skilled care. The hospital staffs four full-time family practice physicians, one dentist, one dental assistant, two full-time psychologists and one psychiatric nurse specialist.
- DHCI treats approximately 198 patients per year. Of the

total patient population, 90 patients were treated for mental health. About 21 patients were below 200% fpl, and about 86% of the total patient population is Medicaid.

Tracey D. Frazier, PSY D, LCSW, LCDP – Psychologist
Dr. Frazier graduated from Immaculata University in Immaculata, PA with a Doctorate of Psychology in 2004. She is a contractual Psychologist with Liberty Health Care and presently works at the Delaware Hospital for the Chronically Ill as a full-time Licensed Clinical Psychologist since 2006. In this position, her responsibilities include clinical and diagnostic evaluation of individuals with organic brain disorders and other mental health conditions as well as interpretation of psychological tests, participation in interdisciplinary meetings, individual and family counseling services, and training of other disciplines in the understanding of mental illnesses and associated functional behaviors. Dr. Frazier's total student debt burden is \$23,391 and she is interested in a two year service commitment.

Recommendation

Deputy Attorney General Stuart Drowos has been asked for an opinion on eligibility of contracted providers who practice at a hospital to be awarded loan repayment. This application will be reviewed in February 2010.

10. Site: Cecil C. Gordon, Jr., MD

- Primary care group practice located at 611 West 18th St., Wilmington 19802. About 15% of the patient population (1,224 annually) is Medicaid enrollees. The practice uses a sliding fee scale for self-pay patients, and is already a CHAP provider.
- Hours of operation:
 - Mon - Fri: 8:30 am – 5:00 pm
 - Saturday: 9:00 am – 3:00 pm
- Funding: State only funds

Valerie Tuck, CNP (1 yr. EXTENSION REQUEST)

Ms. Tuck graduated from Temple University with a BSN in Nursing in 1976, and University of Pennsylvania with a MSN/CRNP in Perinatal Nursing in 1996. The majority of her work experience has been with high-risk underserved populations, which she considers the driving force of her career. Ms. Tuck recently completed a loan repayment service obligation contract effective for the period of August 1, 2007 through July 31, 2009 and was awarded \$10,000. At the time of her award she had about \$19,600. Ms. Tuck She currently has \$11,052 in outstanding educational loans and requests a one year extension.

Recommendation

The Loan Repayment Review Committee and DIMER Board of Directors recommended that all extension requests be placed on "HOLD" due to availability of funding and that priority be given to new applicants.

11. Site: Southern Delaware Medical Group, Milford
 - This site is located at 119 Neurology Way, Milford, DE
 - Approximately 3,662 patents are treated for primary health per year
 - Funding: State Funds Only

Megan Williams, FNP

Ms. Williams graduated from the University of Carolina with a MSN in 2005. She is bilingual in English/Spanish. Ms. Williams's total student debt burden is approximately \$11,600 and she is interested in a three service commitment.

Recommendation

The Loan Repayment Committee and DIMER Board of Directors recommended that this application be placed on "HOLD".

12. Southern Delaware Medical Group, Milford
 - This site is located at 119 Neurology Way, Milford, DE
 - Approximately 3,662 patents are treated for primary health per year
 - Funding: State Funds Only

Shalini Gough, MD

Dr. Gough graduated from the University of North Carolina in Chapel Hill, NC in May 2006. Dr. Gough completed her residency training at Clarkson Family Practice in Omaha, NE in 2009. Dr. Gough's total student debt burden is approximately \$81,754 and she is interested in a three year service commitment.

Recommendation

The Loan Repayment Committee and DIMER Board of Directors recommended that this application be placed on "HOLD".

Action

Rita Landgraf made a motion to accept the recommendations of the Loan Repayment Committee, DIDER Board of Directors and DIMER Board of Directors. Dr. Janice Nevin seconded the motion. There was a voice vote. Motion carried.

Workforce Development Committee

Mr. Carney suggested that the Workforce Development Committee include on its agenda the Hospital Association's Nursing Study and the physician/health professional needs that may result from the Health Care Reform bill.

Dr. Nevin said that more nurses and primary care physicians are

Action

The Commission accepted the recommendations of the Loan Loan Repayment Committee, DIDER Board of Directors and DIMER Board of Directors.

needed. The Workgroup needs to determine how to accomplish this proactively, rather than reviewing more reports. Perhaps it can partner with the Delaware Health Sciences Alliance.

Mr. Carney said that part of the Commission's function is to report to the Legislature on issues of critical importance. This issue is very critical and needs to be reported.

Dr. Nevin will schedule a conference call with Dr. Barkley, Paula Roy and Leah Jones to determine the next steps. She is eager to meet with Dr. Matt and others to really start to think about what needs to be done. She believes the Commission needs to reformulate how it demonstrates the value of the programs that are in place. That will be a very worthwhile discussion to have.

RESEARCH AND POLICY DEVELOPMENT

Paula Roy said the Commission is required by statute to submit a report to the Governor and General Assembly by January 15 each year. There is usually a two-step process whereby the Commission reviews at a draft report in advance. However, because the Commission's strategic planning retreat was so late, the first draft of the report was distributed to Commissioner's via e-mail on Monday. Commissioners are welcome to review the report more carefully and submit comments for incorporation. She asked that the Commission vote to approve the report with the understanding that comments can be submitted up until the report due date.

Action

Dr. Janice Nevin made a motion to approve the Health Care Commission's Annual Report and Strategic Plan with the understanding that comments can be submitted by January 15, 2010. Dennis Rochford seconded the motion. There was a voice vote. Motion carried.

PUBLIC COMMENT

Judy Chaconas, of the Division of Public Health, asked that Division of Public Health staff be included when the Workforce Development Committee has its discussions. The Division of Public Health is preparing a health careers fair and it would be helpful to participate.

Mr. Carney asked Ms. Chaconas to update the Commission on surgery center charity care when the report is available in June.

Marykate McLaughlin, the Governor's Health Policy Coordinator, said she has been included in the DHIN meetings and she needs to see the proposed legislation to make sure operationally the Administration agrees with it.

NEXT MEETING

Delaware Health Care Commission
Meeting Minutes
January 7, 2010

Action

The Health Care Commission's Annual Report and Strategic Plan was approved with the understanding that comments can be submitted by January 15, 2010.

The next meeting
of the Delaware

The next meeting of the Delaware Health Care Commission will be held on Thursday, February 4, at 9:00 a.m. in the **Tatnall Building, Room 112, William Penn Street, Dover.** A photo ID will be required to enter.

Health Care Commission will be held on Thursday, February 4, 2009, at 9:00 a.m. in the **Tatnall Building, Room 112, William Penn Street, Dover.** A photo ID will be required to enter.

ADJOURN

The meeting adjourned at 11:25 p.m.

GUESTS

Shannon Backus	Delmarva Rural Ministries
Joan Barnwell	Division of Public Health
Judith Chaconas	DHSS/Division of Public Health/Bureau of Health Planning Management
Kathy Collison	Division of Public Health
Barbara DeBastiani	Wheeler and Associates/CHAP
Robert Frelick, MD	Medical Society of Delaware
Joann Hasse	League of Women Voters
Jon Kirch	American Heart Association/ASA
Lolita Lopez	Westside Family Healthcare
Marykate McLaughlin	Services for Children, Youth & Their Families
George Meldrum	Nemours Foundation
Sheila Nutter	Hewlett Packard
Gina Perez	Advances in Management/DHIN
Brian Posey	AARP
Lillian M. Ronneberg	Hewlett Packard
Wayne Smith	Delaware Healthcare Association
Sherman Townsend	DIMER
Betsy Wheeler	Wheeler and Associates/CHAP
Rob White	Delaware Physicians Care, Inc./DHIN