



Delaware Health Care Commission (DHCC) Meeting

March 6, 2025

9:00 a.m. - 11:00 a.m.

Meeting Attendance and Minutes

Commission Members Present In-Person: Dr. Nancy Fan (St. Francis), Dr. Jan Lee (DHIN), Dr. Kathy Matt, Nick Moriello (Highmark Delaware), Cabinet Secretary Josette Manning (DHSS), Melissa Marlin (designee for Department of Finance Cabinet Secretary Micheal Smith), and Dr. Stephanie Traynor (DSCYF)

Commission Members Attending Virtually: Insurance Commissioner Trinidad Navarro (DOI), Cheri Clarke Doyle, and Mike Quaranta

Meeting Facilitator: Dr. Nancy Fan, Chair

Health Care Commission Staff: Elisabeth Massa (Executive Director), Latoya Wright (Manager of Statistics and Research, Colleen Cunningham (Social Service Senior Administrator) and Sheila Saylor (Admin)

Anchor Location:

Department of Health and Human Services (DHSS)
Herman M. Holloway Sr. Health and Social Services Campus
Main Admin Building – Conference Room 198
1901 N. DuPont Highway
New Castle, DE 19720

CALL TO ORDER

After confirming a quorum, Dr. Fan called the meeting to order at approximately 9:00 a.m. Public attendees were reminded to identify themselves by placing their name and affiliation in the chat box and those attending in person to sign the sign-in sheet in the Chapel.

BOARD BUSINESS

Welcome New Commissioners

Dr. Fan opened the meeting by welcoming two new commissioners, Secretary of Finance Michael Smith and Cheri Clarke Doyle. Secretary Smith serves on the Commission as an ex officio member. He was sworn in as Delaware's 19th Secretary of Finance on January 28, 2025. The Secretary of Finance is the state's chief financial officer and is responsible for promoting Delaware's fiscal health through fair and efficient forecasting, generation, collection and accounting of state funds. He oversees the State's Division of Revenue, Division of Accounting, Office of Unclaimed Property, and the State Lottery Office. Secretary Smith was not able to attend the meeting, and Melissa Marlin (Deputy Principal Assistant with DOF) attended the meeting as the Secretary's designee.

Cheri Clarke Doyle was appointed by Governor Meyer on February 13, 2025, to represent the seat for the Governor's appointment representing New Castle County. She has over 20 years of experience and has consulted on over 3 million square feet of Healthcare and Senior Housing space. Ms. Doyle's areas of expertise include health system finance, reimbursement, ambulatory network planning, capital structuring, healthcare real estate development and master facility planning. As Managing Director of Healthcare Advisory for Transwestern's national team she works with health systems on providing a better footprint for care delivery to improve efficiency, outcomes and the patient experience

Next, Dr. Fan acknowledge March as Women's History Month and spoke to the contributions of Madame Marie Curie. Madame Curie was a pioneer in research on radioactivity and became the first woman to win a Nobel Prize,

Nick Moriello highlighted it was colorectal cancer month. Dr. Fan shared one colonoscopy could save one's life.

ACTION ITEM: Approve January 9, 2025, Meeting Minutes

The Commissioners reviewed the meeting minutes from the January 9, 2025, meeting. Dr. Fan asked if there were any comments. Hearing none, Dr. Jan Lee made a motion to approve the minutes, and Mr. Moriello seconded. No objections were made. The commissioners approved the minutes which are available on the [DHCC Website](#).

Dr. Fan announced the Workforce Subcommittee update is next on the agenda due to one of the speaker's needing to leave the meeting early.

UPDATES

Health Workforce Subcommittee

To start the update, Dr. Kathy Matt, DHCC commissioner and Subcommittee co-chair, shared a summary of the recommendations developed by the Subcommittee. The recommendations were previously shared at the commissioner's fall 2024 Strategic Retreat. The top two recommendations include: 1) data/survey/license and 2) clinical training/preceptors/ enhancing healthcare workforce pipelines by establishing an "Initiatives Fund."

Next, Nichole Moxley, Subcommittee co-chair, shared a few slides that would explain why there is a need to answer certain questions so that one can fully understand what the health workforce looks like in Delaware beyond what is needed for a Health Professional Shortage Area (HPSA) designation. This can inform a policy planning resource allocation. She started her presentation sharing primary care data from the Health Resources Services Administration (HRSA) and the Shortage Designation Management System (SDMS). The data available has gaps and does not provide the information needed to understand Delaware's health workforce. Ms. Moxley shared dentist provider and mental health provider data. Again, like the primary care data, these data points have data limitations, and it is unknown what the actual workforce looks like. Ms. Moxley shared information on the licensure data collected by the Division of Professional Regulation (DPR) which includes the provider's name, profession, status, discipline, and address. There are, however, data limitations for NPI and it does not directly identify psychiatrists. To address this concern, other states (28 states) have legislated that clinicians answer certain survey questions during the licensure process. Not all states collect information the same way. Ms. Moxley shared she has heard some legislators are interested in the surveys and implementing through legislation.

Dr. Fan inquired about the three states (New Hampshire, Indiana, and Vermont) that require a health professions survey as part of their licensure renewal. Did Ms. Moxley know why it was not done through the regulatory process under their licensure organization. Ms. Moxley thought the participation piece was the challenge and added if it was done under one-body, it was more efficient. Secretary Manning commented lawyers file a registration every year that asks questions to have their license renewed. Surveys are optional and why can't this be addressed through DPR, and done as part of the licensure process? Dr. Fan thought DPR's biggest barrier is they have multiple boards underneath them and having the boards agree is challenging. Dr. Matt shared nursing, as a professional organization, added survey questions. Chris Otto, Delaware Nurses Association, commented he feels the regulatory approach should be exhausted first before going the legislative approach. Ms. Clarke Doyle asked what the biggest barriers are recruiting primary care professionals in Delaware. Dr. Fan said she could have a whole separate meeting on that topic. It is not just primary care, and it is multi layered. Nonclinical (housing, cost of living) are all factors. Mr. Moriello inquired if the Subcommittee

could make a recommendation to the DHCC as to what data is needed and if is a regulatory or legislative approach. The commissioners could then advocate, support, or ask questions. Dr. Lee commented the Commission should pursue the route (legislative or regulatory) that works. She cautioned sometimes legislation can be cumbersome and difficult to modify in the future. If the legislative route was taken, she would advocate the DHCC push for language that DPR will regulate in collaboration under advisement by the Commission which would then create an avenue for keeping it fresh without having to re-legislate.

The Workforce Subcommittee presentation is available on the [DHCC website](#).

Delaware Institute for Dental Education and Research (DIDER)

Dr. Christine Stinton, DIDER board member, provided a DIDER update. At the last DIDER meeting in January, Temple University Kornberg School of Dentistry shared an update on the entering DMD 2025 class which has 140 seats. There are 20 students from Delaware (8 have accepted to-date) which is up from last year. Temple has a post-baccalaureate program for students who have not been admitted to dental school immediately following college. The program is growing and started with 20 students and now has 60 students. The DIDER Board is in the process of setting a date for a lunch at Temple with DIDER students. This will be an opportunity for the DIDER students to have a question-and-answer session with the DIDER board members. The January DIDER Board Meeting also included an update from the Division of Public Health (DPH) on the kindergarten oral health screen program. Finally, a portion of the DIDER meeting included a discussion of updating the DIDER Code, which has not been updated in many years. The next DIDER meeting is scheduled for April 16, 2025. Dr. Fan thanked Dr. Stinton for the update and asked the commissioners if there were any questions. Dr. Matt asked about the DIDER board membership, specifically that one of the possible updates to the Code could be to include a formal liaison to the DIDER board that is non-voting. Dr. Matt shared the DIMER board includes the clinical and academic institutions on their board. She was curious whether the DIDER board would consider giving the liaisons voting authority. Dr. Stinton said she could take to the DIDER board for consideration.

Dr. Stinton's presentation is available on the DHCC website.

POLICY DEVELOPMENT

Children's Behavioral Health

As part of the DHCC seasonal calendar, Dr. Stephanie Traynor, DHCC Commissioner and Deputy Director with the Division of Prevention and Behavioral Health, presented an update on activities and initiatives at the Department of Services for Children Youth & Their Families (DCYTF). Her update included a brief overview of the DCYTF, eligibility (who is served), and key

accomplishments over the last fiscal year, and utilization of what funding looks like in different parts of their service continuum. The Department has four divisions with approximately 1,400 employees (three divisions are direct service divisions and one division is support services).

Mr. Moriello inquired if the DCYTF is working on a social media campaign or website redesign. He thought it was something Dr. Traynor mentioned last year. Dr. Traynor said they are actively working on videos/PSAs that will be released in the coming months for messaging to target youth of LGBT and minority groups due to high suicide rates. Melissa Marlin asked about the breakdown of DCYTF funding – if it was mostly state or federal. Dr. Traynor said a lot of the prevention funding is federal and the treatment continuum is based on Medicaid fee for service.

The Children's Behavioral Health presentation is available on the [DHCC website](#).

UPDATES

Delaware Institute for Medical Education and Research (DIMER)

Dr. Matt, DHCC Commissioner and DIMER Chair, provided an update on DIMER. Her first slide shared the names and seats on the DIMER Board. It is noteworthy all the new organizations that are now represented on DIMER. The DIMER board met December 11, 2024, and February 5, 2025. Dr. Matt shared a brief update on these meetings. She highlighted the purpose of DIMER has always been to give the Delaware residents an opportunity to attend a medical school because Delaware does not have a medical school. The acceptance rate for Delaware students at the partner DIMER schools (Sidney Kimmel Medical College and Philadelphia College of Osteopathic Medicine) is around 30%, while the average acceptance rate for an out of state student is around 3-4%. The DIMER schools also accept more students than what is budgeted for each fiscal year.

Dr. Lee asked if Delaware were to have a state medical school, how many students would be in a typical medical class. Dr. Matt thought it was not uniform across the country. Dr. Fan added Jefferson and Temple's class size is about 250 students. Start up schools have started around 90 students. She shared she feels DIMER has not capitalized on opportunities like the Washington, Wyoming, and Idaho (the three other states that do not have a medical school). These states get 50% of their medical students to come back to practice because of all the clerkships. The cost of education alone is also a barrier. Dr. Neil Hockstein commented when one looks at the ROI for DIMER, it is a heterogeneous population. There are people that have the potential to do their graduate medical education in Delaware and those who do not. Therefore, the ROI is lower because of the graduate medical education (GME) space. When looking at the development of a medical school and DIMER, it is important to look at medical education and GME together. The ROI on DIMER is low because if you practice in any

subspecialty, one's GME training is somewhere far away. Dr. Hockstein shared there are opportunities to build relationships to offer GME in those specialties in Delaware where we have robust practices.

Dr. Matt commented DIMER is in the process of standing up a Rural Health Committee and DIMER Nominating Committee. Meetings are scheduled in March.

Next, Dr. Matt shared the scope of work proposal for DIMER's next contract with the Delaware Health Sciences Alliance (DHSA). DHSA provides marketing and outreach support for the DIMER program. Elisabeth Massa highlighted it is a one-year contract and includes the following: events in each county, the DIMER Annual Report, and new this year, a piece on board engagement. Dr. Lee made a motion to approve, and Mr. Moriello seconded. The DHCC Commissioners voted to approve the scope and move forward with the contract.

Dr. Fan next asked if George Beckerman had a comment (his hand was raised on the Teams channel). Mr. Beckerman spoke and introduced himself as the co-chair of the medical education subcommittee of SEDAC which sponsored a feasibility study in Delaware released April 1, 2024. The report has a model for a medical school. Mr. Beckerman shared he would send the report to the DHCC to share with others. He also asked for an invite to present at a DIMER or DHCC meeting on the report. Dr. Fan asked Ms. Massa if she could send the report to the DIMER members. Mr. Beckerman said there are two proposals on the table for a task force: HCR 160 urging the establishment of a medical school in Delaware and a task force in Governor Meyer's platform campaign literature.

Pam Gardner, DHSA, commented to say thank you for the continued support to Dr. Matt and the Commission.

The DIMER update presentation is available on the [DHCC website](#).

Primary Care Reform Collaborative (PCRC)

Dr. Fan shared an update on the PCRC recent activities. Since the fall of 2024, the PCRC has convened three workgroups: Value-Based Care Model Workgroup, Practice Model Workgroup, and Quality Metrics Workgroup. The PCRC vendor, Health Management Associates, is supporting the workgroups and providing Subject Matter Expertise. Dr. Fan shared a summary on each workgroup's mission and activities. In January 2025, all three workgroups met for an inter-workgroup meeting. The purpose of this meeting was to ensure alignment between the workgroups, avoid redundancy, and breakdown silos. The next inter-workgroup meeting is to-be-determined. In March, the PCRC released an Annual Report. It was the first annual report since 2020 and included recommendations from the 2021 NASEM report: "Implementing High

quality Primary Care.” The report reviewed the PCRC’s 2024 work and is available on the [DHCC website](#).

Dr. Fan’s update on the PCRC is available on the [DHCC website](#).

PUBLIC COMMENT

Chris Frazer, Westside Family Healthcare, thanked Dr. Fan and commissioners for their diligent work on all these activities. He commented there are potential cuts to Medicaid, and he would like to raise awareness that Westside’s Navigator funding for the Marketplace has been cut by 90%. Mr. Moriello added the expanded tax credits are scheduled to go away at the end of the 2025 calendar year unless extended by Congress.

Chery Heiks (Delaware Health Care Facilities Association) requested if the DHCC could offer a comprehensive presentation about the federal changes coming to Delaware.

Secretary Manning shared DHSS is gathering information about the potential federal cuts. Steven Costantino has a document with additional information that could be shared, however, she cautioned at this point in time it is preliminary.

Dr. Fan introduced the new Chair of the Health Care Commission, Dr. Neil Hockstein. He shared a brief bio about himself and commented it is a great honor and opportunity to be on the Commission. He is very appreciative of the Governor’s trust and looks forward to learning and working the Commission to deliver on the quad aim.

Dr. Fan took a few moments to take a point of personal privilege regarding her stepping down as Chair. The March meeting is her last meeting as Chair.

Hearing no additional public comments, Dr. Fan adjourned the meeting.

UPCOMING MEETING

The next DHCC meeting is scheduled for April 3, 2025, from 9:00 a.m. to 11:00 a.m.

**Public Meeting Attendees
March 11, 2025
Public Meeting Attendees (Virtual)**

Bria Greenlee	
Christina Bryan	Delaware Healthcare Association

Cheryl Heiks	Delaware Health Care Facilities Association
Christina Haas	DOI
Jules Villecco	Delaware Healthcare Association
Wayne Smith	Smith Capitol Advisors
Judith Butler	DE League of Women Voters
Richa Shah	United
Cristine Vogel	DOI
Pamela Gardner	Delaware Health Sciences Alliance
Leighann Hinkle	DHR
Krishna Upadhya	DHSS
Victoria Brennan	Office of the Controller General
Richard Holaday	DHSS
Christopher Otto	Delaware Nurses Association
Nick Conte	DHSS
Delaney McGonegal	MACHC
Tyler Blanchard	Aledade
Christine Stinton	La Red
Amy Desmond	YMCA Delaware
Nora Hoban	
Brian Frazee	Delaware Healthcare Association
Chris Fraser	Westside Family Healthcare
Lisa Gruss	Medical Society of Delaware
Maggie Norris-Bent	Westside Family Healthcare
Nicole Moxley	DHSS
Sherry Nykiel	DMMA
Steven Costantino	DHSS
Susan Jennette	DOI
George Beckerman	Hoart Beckerman Consulting
Nicole Freedman	YMCA Delaware