

MARYLAND COMMISSION ON KIDNEY DISEASE
Thursday April 27, 2017
4201 Patterson Avenue
Room 110

PUBLIC MEETING MINUTES

The Public Meeting of the Commission on Kidney Disease was held on Thursday, April 27, 2017 at 4201 Patterson Avenue. Chairman, Dr. Bernard Jaar called the meeting to order at 2:00 P.M. Commissioners' Dr. Jeremy Yospin, Dr. Donna Hanes, Dr. Paul Segal, Dr. William Rayfield, Dr. Edward Kraus, Dr. Sumeska Thavarajah, Denise Collins and Susan Leon, RN were also present.

Commission staff present: Eva Schwartz, Executive Director and Donna Adcock, RN, Surveyor.

Commission Counsel present: Leslie Schulman, AAG

DHMH staff present: Carol Manning, Chief, KDP and Brenda Peterson, RN from the Office of Health Care Quality

Guests present were:

Kim Phillips-McNair, FMC	Jeff Walsh, FMC
Andreas Katsiaras, Relypsa	Angela Moyra, MedStar
Ray Harris, Advocate	Cathy Negley, Davita
Tim Greene, Davita	Tedine Ranich, MD, MANA
Heather Weirich, IDF	Glenda Miller, IDF
Chris Simon, IDF	Debbie Iacovino, Davita
Steve Belcher, ADC	Diane Johnson, USRC
Sarah Steege, Disability Rights, MD	Jay Joyner, Davita
Jessica Cloud, Davita	

I. REVIEW AND APPROVAL OF THE MINUTES OF THE PUBLIC SESSION OF January 26, 2017

Dr. Hanes motioned to approve the Public Minutes from the January 26, 2017 session. Dr. Segal seconded the motion and the Commission voted unanimously to approve the Minutes of the January 26, 2017 Public Session.

II. REVIEW AND APPROVAL OF THE MINUTES OF THE CLOSED SESSION OF January 26, 2017

Dr. Segal motioned to approve the Minutes of the Executive Session. Commissioner Collins seconded the motion and the Commission voted unanimously to approve the Minutes of the January 26, 2017 Executive Session.

III. CHAIRMAN'S REPORT

Dr. Jaar discussed the CDC Care Interventions program launched to reduce the risk of septicemia. He provided the *CDC Approach to BSI Prevention in Dialysis Facilities* handout and reviewed the core interventions. The CDC link to this information will be added to the Commission website.

IV. EXECUTIVE DIRECTOR'S REPORT

Ms. Schwartz discussed the topic of dialysis facility staff member skillset evaluations. She noted that skill evaluations should be observed, and not just reviewed and discussed.

Ms. Schwartz urged the Commission to consider a vote to propose legislation amending Commission's statute that would remove the requirement that Commissioners have no direct ownership in a dialysis facility. This requirement is having the effect of severely limiting the pool of candidates for the Commission. Dr. Kraus motioned to propose amending the law. Dr. Rayfield seconded the motion and the Commission voted unanimously to approve the proposal.

V. OLD BUSINESS

A. Lessons in Dialysis Conference- May 21, 2017 (CNA-DT)

Dr. Thavarajah reported that the Lessons in Dialysis Conference would be held on May 21, 2017 at Johns Hopkins Bayview Medical Center. The flyer has been disseminated. Sessions would include dialysis access management, hepatitis management and common infection control issues. Dr. Thavarajah noted that CEUs for the CNA-DTs have been applied for.

B. Beyond Dialysis Patient Conference – May 7, 2017

Dr. Thavarajah reported that the Beyond Dialysis Conference for patients will be held on May 7th. She noted that the conference was at 50% capacity after only 5 days of registration. Topics will include dialysis modalities, the transplantation evaluation process, transplantation questions and answers, as well as patient engagement opportunities.

C. Discussion – Consideration of Proposing Regulations Regarding Mixed Skills Staffing

1. New Jersey Department of Health Regulations

Ms. Adcock reported that New Jersey's Department of Health Regulations requires one RN for the first 9 patients and an additional RN to be on duty for each additional 9 patients or portion thereof. They also have a 3:1 staffing ratio.

2. Recommendations for State of California Legislation Regarding Nurse Staffing Ratios

Ms. Adcock reported that California's Department of Public Health has proposed legislation that would establish minimum nurse staffing ratios for dialysis facilities and establish a minimum transition time between patients receiving dialysis services at a treatment station. The bill would also prescribe that one social worker would not be allowed to be assigned more than 75 patients; one nurse for every 8 patients with the nurse manager or charge nurse would be not counted toward the nursing ratio; and one technician would be required for every 3 patients. Nurses counted toward the nurse to patient ratio would not count toward the one to three technicians to patient ratio.

Discussion regarding the Commission proposing similar staffing ratios ensued. A public workgroup to be chaired by Dr. Segal was formed.

D. Medical Director Certification Requirement

Dr. Jaar reported that CMS replied to the Commission's inquiry regarding the National Board of Physician and Surgeons (NBPAS) certification for internal medicine/nephrology. He noted that CMS does not recognize board certification by the NBPAS for internal medicine/nephrology.

VI. NEW BUSINESS

A. Kidney Disease Program

1. Stats and Budget

Ms. Manning reviewed the KDP statistics. She reported that she did not have the FY 2018 budget but should have the information at the July meeting.

2. Medicare Coverage Requirement

Ms. Manning reported that KDP law requires that KDP patients apply for Medicare Coverage and maintain enrollment in Medicare Parts A, B and D. She noted that KDP will be enforcing the requirement and will terminate KDP coverage, and recoup funds retroactively paid if the patient does not maintain the required Medicare coverage. Ms. Manning stated that KDP acceptance letters include this language in bold lettering.

Ms. Manning also noted that patients should keep the KDP informed of their current address so that re-enrollment applications are not delayed. She offered to speak with dialysis facilities regarding the KDP program and process.

3. Request to add Veltassa to the KDP Formulary

Andreas Katsiaras, Relypsa Medical Science Director, presented information on Veltassa (Patiromer). This drug is a potassium binder indicated for the treatment of hyperkalemia.

B. Scoring Severity of Citations

Dr. Jaar reported that currently the Commission's Deficiency Survey weighs citations equally. He suggested that survey deficiencies or citations should be scored by severity. By way of example, he was concerned that citations for findings, such as touching a dialysis machine without gloves versus dialyzing a hepatitis B susceptible patient on the same dialysis machine as a hepatitis B antigen positive patient, should not receive the same deficiency or citation.

Discussion ensued. Ms. Peterson discussed CMS's Survey reporting procedures including deficiencies, citations and immediate jeopardy.

The Commission voted in favor of forming a subcommittee, chaired by Dr. Thavarajah, to further discuss the scoring proposal and to have recommendations at the July 2017 meeting.

C. Adding CMS Facility Ratings to Commission survey reports

Dr. Jaar indicated that he would like to include CMS Star ratings on the Commission's survey report. Discussion ensued. After the Commissioners disagreed with the proposal, the Commission decided that the CMS Star rating should not be added to the Commission's survey reports.

D. Dialysis Facility Staff Training

1. Facility Administrators' Training Responsibilities in a Dialysis Facility

Ms. Schwartz commented that Facility Administrators (FAs) are reporting as the responsible person on facility Plans of Correction. She noted that often the FA is not a clinical person but they are responsible for making clinical decisions. She indicated that the facilities should have a better infrastructure for such responsibilities.

Ms. Adcock commented that facilities are hiring FAs that are nonclinical with experience from organizations such as Lowes and Target. She indicated that the nonclinical FAs do receive required training but the concern is that they are placed in the facilities prematurely and are making facility and patient decisions without enough mentorship.

Discussion ensued. Ms. Schwartz noted that the current minimum requirements for Facility Administrators may need to be addressed by the Commission.

2. MBON Clarification Regarding CNA-DT Student Preceptors

Ms. Adcock reported that Ms. Redd, Director of Licensure and Certification for the Maryland Board of Nursing (MBON), contacted the Commission regarding an inquiry from a person from the dialysis community regarding CNA-DT training. Ms. Redd provided clarification via an email that was disseminated to facility administrators through the Commission's email group.

Ms. Redd noted that CNA-DT's may not precept/teach new, not yet certified CNA-DT students. A RN that has been approved by the MBON is responsible for overseeing the didactic and clinical components of the CNA training programs. Ms. Redd indicated that the MBON has the authority to make unannounced site visits at any time. Ms. Adcock noted that facilities or

organizations that do not follow the MBON regulations regarding CNA-DT training could place their training programs in jeopardy.

E. CMS Training and Testing Requirements for the New Emergency Preparedness Final Rule

Information was provided to assist providers in meeting the new training and testing requirements of the emergency preparedness requirements for Medicare and Medicaid participation, which includes ESRD providers. The rule became effective November 15, 2015 with an implementation date of November 15, 2017. Ms. Adcock also forwarded the CMS “Understanding the Emergency Preparedness Final Rule & Training and Testing Requirement” presentation slides to the administrator’s email group.

F. Commission Newsletter

The Commission Newsletter was provided to the guests. The renal community received the Newsletter via email in late March. The Newsletter is also posted on the Commission’s website.

G. New Facilities

Dr. Jaar reported that the following facilities have received Commission certification since the last Commission meeting:

- Davita Kidney Home Downtown
- Davita Largo Town Center
- Davita Greenbelt Home Training
- Davita Briggs Chaney
- Davita Friendly Farms Home
- Davita Odenton
- Kaiser Woodlawn PD

H. Citation Free Surveys

Dr. Jaar congratulated the following facilities for achieving citation free surveys:

- NxStage Baltimore North
- IDF Calvert Center

I. Categories of Complaints

The Commission has received and resolved the following types of complaints this quarter:

- **Verbal**
 1. Hospital complaint regarding difficulty placing medically unstable patient
 2. Patient complaint regarding readmission after hospitalization
 3. Facility water room issue
- **Written**
 1. Four facilities requests to discharge violent/threatening patients and a patient who was discharged by the nephrologist
 2. Complaint regarding multiple issues at a facility – water issues, equipment malfunction, patient rights violations, staff shortages, etc.
 3. Facility fire (small, contained)
 4. Complaint regarding Medical Assistance Transportation

J. Commission Approval/Disapproval for KDP Out of State Transplant Reimbursement

Dr. Jaar noted that since the last meeting, the following hospitals have requested and been granted out of state transplant approvals:

Hospital	Granted	Refused
George Washington Transplant Center	1	0
MedStar Georgetown Transplant Center	1	0
Christiana Care Health System Transplant	1	0

K. Surveys	Citations
Compliance with Federal, State and Local Laws and Regulations	0
Infection Control	16
Water and Dialysate Quality	4
Reuse of Hemodialyzers/Bloodlines	0
Physical Environment	1
Patient Rights	0
Patient Assessment	0
Patient Plans of Care	1
Care at Home	0
Quality Assessment and Performance Improvement	0
Laboratory/Affiliation Guidelines	0
Personnel Qualifications/Staffing	9
Responsibilities of the Medical Director	1
Medical Records	0
Governance	1

For informational purposes, the Commission shared the results of their Survey Findings Deficiency Report for the past quarter. Dr. Jaar reiterated the leading cause for citations remains infection control.

L. Surveys Completed

The following facilities have been surveyed since the last meeting:

FMC QCDC	USRC Oxon Hill
Davita Rivertowne	Davita Owings Mills
IDF Arundel	FMC Elkton
NxStage Baltimore North	Davita Pikesville
Davita Forest Landing	Davita Catonsville North
Davita District Heights	FMC Wheaton
Davita Falls Road	Davita Pasadena
Davita Catonsville	Davita Rockcreek
Davita Bertha Sirk	IDF Calvert
FMC Waldorf	Davita Takoma Park

Ms. Phillips-McNair thanked the Commission for assistance regarding problems with Medical Assistance transportation in Baltimore City. The Commission sent a letter to the Medical Assistance Transportation Director but the issues are still unresolved.

There being no further public business, upon motion made by Commissioner Rayfield and seconded by Commissioner Hanes, the Commission unanimously voted to adjourn the Public Session at 3:47 P.M. and to move into Closed Session.