MARYLAND COMMISSION ON KIDNEY DISEASE OPEN SESSION MEETING MINUTES Thursday July 27, 2006 4201 Patterson Avenue. Room 108-109

The Open Session meeting of the Commission on Kidney Disease was held on Thursday, July 27, 2006 in Room 109, 4201 Patterson Avenue. The Chairman, Dr. Jeffrey Fink, called the meeting to order at 2:10 PM. Commission members present were: Drs. Kenneth Yim, Dean Taylor, Luis Giminez, Jose Almario and Mrs, Tracey Mooney. Commission staff present were: Leslie Schulman, AAG, Commission Counsel, Eva Schwartz, Executive Director and Donna Adcock, RN, Surveyor.

DHMH staff present: Carol Manning, Chief KDP, Pat Nowakowski, Barbara Fagan and Vivian Connard, Office of Health Care Quality.

Guests present were:

Brenda Redilla, Amgen Bill Frederick, Holy Cross Juathawala Harris, Liberty Dialysis Judy Thomas, FMC Debora Evans, UMMS Heather Gould, Bon Secours Debbie Iacovino, Davita Chris Simon, IDF Marc Allegro, Good Samaritan Amanda Bayless, Davita Rhonda Rashad, American AccessCare Laura Kirby, UMMC Stuart Lessner, Union Memorial Eric Thompson, UMMS

I. APPROVAL OF APRIL 27, 2006 MINUTES

The Commission approved the Open Session minutes as submitted.

II. CHAIRMAN'S REPORT

Transplant Committee

Dr. Fink updated the group of the efforts of the Committee to plan a symposium for transplant liaisons in October. He reported that the date will be October 3rd and the symposium will be held at UMBC's Technology Center. The purpose of the meeting is to improve the transplant referral process, help patients navigate through the system and improve transplant rates in the State.

III. EXECUTIVE DIRECTOR'S REPORT

• Disaster Preparedness

Mrs. Schwartz discussed the Guidelines for Renal Facilities During Disasters. She noted that all facilities should have a disaster plan and the patients should be educated on the process. Mrs. Schwartz reported the Guideline may be found on the NKF website and could be incorporated into facility policy.

IV. OLD BUSINESS

CNA-DT

Mrs. Adcock reported that Barbara Newman, Director of Nursing Practice at the Maryland Board of Nursing (BON) has agreed to be the point of contact at the BON for facilities experiencing difficulty obtaining CNA-DT certification for employees. Mrs. Schwartz noted that all facilities must comply with licensure requirements so that their staff is not in violation of their individual Practice Act. Verification of an individual's licensure/certification may be accessed at the BON's website.

V. NEW BUSINESS

A. Kidney Disease Program- Statistics and Budget

Ms. Manning presented and discussed the KDP Budget, Statistics, and Expenditure Reports. She noted that the statistics include a \$4 million deficit. Ms. Manning explained that the deficit was due to the conversion to the electronic claims system. She reported all services have been paid and that they are trying to eliminate all backlog.

Ms. Manning reported that KDP will send out a letter to recipients to inform them of the requirement to have Medicare Part D by January 1, 2007. She reported that KDP will cover the "doughnut" hole, co-insurance and deductibles for drugs on the KDP Formulary.

Mr. Simon noted that this additional requirement may place too many barriers for patients to apply and qualify for KPD coverage. He reported that some patients may not be able to afford the Medicare Part D premium. Ms. Manning noted that some plans are as low as \$7 per month and that the KDP is required to follow the law which requires Medicare Part D coverage form KDP eligibles.

B. Physician Extenders

Mrs. Schwartz reported that the Commission has received concerns that some physician assistants and nurse practitioners are rounding in the dialysis facility without any specific experience in the care of patients on maintenance dialysis. Ms. Lewis noted that she has also received complaints from patients that they only see these "extenders" and not the physicians.

Mrs. Schwartz noted that the Commission may consider regulations requiring physician extenders to have training/experience in the ESRD field, before rounding in the dialysis facilities without the nephrologists. Mr. Allegro noted his concern of how these extenders will gain experience. A discussion ensued on the topic. It was decided to schedule a meeting with the Board of Nursing to discuss the Commission's concerns.

C. Social Work Requirements in an ESRD Facility

Mrs. Schwartz reported that she has received complaints regarding a few social workers with a Bachelor Degree only, assessing and treating patients in the dialysis facilities, while social workers who are properly credentialed signed off on their notes and evaluations. She reminded everyone that this practice is against Federal Regulations and the Maryland Board of Social Works' Practice Act.

D. Patient Advocacy

- Beyond Dialysis 10/8/06
- ESRD Seminar 11/9/06
- Legislative Grant

Ms. Peal Lewis reviewed the Maryland Patient Advocacy Group's schedule for the fall and her most recent efforts in writing a grant proposal to address disparities in care in four counties in Maryland.

E. Home Hemodialysis Equipment

Mrs. Schwartz reported that the Commission has received questions regarding types of home hemodialysis equipment, specifically the NX Stage machine. She noted that the Commission does not endorse any equipment and that all equipment must be FDA approved.

F. Dialysis Provider Acquisitions

Mrs. Schwartz directed the group's attention to the Nephrology News and Issues July 2006 article regarding Fresenius and Davita acquisitions. She noted the Commission's concern that these large entities may discharge from one chain, leaving the patient without a place to dialyze.

G. Complaints

Mrs. Adcock reported that the Commission has received and investigated the following types of complaints since the last meeting:

Written

- Patient complaint that facility is shortening dialysis time
- Facility complaint regarding an abusive patient
- Complaint against social worker at a dialysis facility

Verbal

- Case worker complaint that patient not being accepted into area facilities
- Administrator complaint that patient not accepted back into home facility
- Social worker complaint that patient not accepted back into home facility or facility near home
- Physician complaint that patient not accepted back into home facility
- Facility complaint regarding an abusive patient
- Hospital complaint regarding inability to place an abusive patient in a chronic facility

H. Citation Free Surveys

Dr. Fink commended the IDF Lions Manor facility for having a citation free survey.

I. New Facility Certifications

Mrs. Schwartz reported that Harford Gardens has applied to the Commission for certification.

• Harford Gardens (7/25/06)

J. Surveys (17)

The Commissioners reviewed the results of the surveys and the deficiencies noted:

Deficiencies

	2011010110100				
Compliance with Federal, State and Local	0				
Laws and Regulations					
Governing Body and Management	6				
Medical Supervision	0				
Long Term Program and Care Plan	10				
Patient Rights/Responsibilities	6				
Medical Records	6				
Physical Environment	10				
Transmissible Diseases	2				
Reuse	2				
Affiliation Agreements	0				
Director of Dialysis Center	1				
Staff of a Renal Dialysis Facility	6				
Minimal Service Requirements	5				
Transplant Centers/ Affiliation Agreement	0				
Abusive and Dangerous Patients	0				

Mrs. Adcock reported on the large amount of facilities with Physical Environment (PE) citations. She noted that the PE category includes equipment maintenance, water quality, emergency preparedness and the environment.

K. Surveys Completed (17)

The following facilities have been surveyed since the last meeting:

FMC PG County Davita Landover

FMC Anne Arundel Memorial Hospital Dialysis

IDF Lions Manor IDF Allegany
FMC QCDC Southern MD FMC Baltimore
FMC LaPlata Davita Rockville

Good Samaritan Manor Care IDF Parkview
Davita Pasadena Davita Owings Mills

Davita Southern Maryland Union Memorial Dialysis DCA Rockville

Percent of Surveyed Facilities Meeting MARC's Anemia, Adequacy and Fistula First Goals

GOAL		Q1	Q2	Q3	Q4
ANEMIA	Hgb <u>></u> 11	86%	53%		
ADEQUACY	URR <u>></u> 65/Kt/v <u>></u> 1.2	68%	50%		
FISTULAS	40%	28.5%	40%		
FISTULAS	50%	9%	20%		

Mrs. Adcock noted that the Commission will be reviewing the surveyed facilities progress toward meeting these Network goals.

CLOSED SESSION: Pursuant to Maryland State Government Annotated "10-508, on a motion made by Dr. Jeffrey Fink and seconded by Tracey Mooney, the Commission unanimously voted to close its meeting on July 27, 2005 at 3:30 p.m., in room 108-109 for the purpose of complying with the Maryland Medical Practice Act that prevents public disclosures about particular proceedings or matters.