MARYLAND COMMISSION ON KIDNEY DISEASE Thursday July 28, 2016 4201 Patterson Avenue Room 110

PUBLIC MEETING MINUTES

The Public Meeting of the Commission on Kidney Disease was held on Thursday, July 28, 2016 at 4201 Patterson Avenue. Chairman, Dr. Luis Gimenez called the meeting to order at 2:05 P.M. Commissioners' Dr. Jeremy Yospin, Dr. Bernard Jaar, Dr. Edward Kraus, Dr. Sumeska Thavaraja, Joan Wise, RN, Susan Leon, RN and Barry Hargrove were also present.

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

Commission Counsel present: Leslie Schulman, AAG

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

Guests present were:

Raymond Harris, Patient Advocate Kim Sylvester, MedStar Jessica Quintilian, NKF-MD Jaclyn Bannon, JHH Pam Earll, Davita Gloria Pittman, ARA Lori Hartle, Astellas Virginia Martin, ARA Chris Simon, IDF Allison Brown, JHH Tanya Whitig, USRC Elena Balovlenkov, CMS Kristen Neville, DHMH Pamela Howell, FMC

I. REVIEW AND APPROVAL OF THE MINUTES OF THE PUBLIC SESSION OF April 21, 2016

Ms. Wise motioned to approve the Public Minutes from the April 21, 2016 session. Dr. Kraus seconded the motion and the Commission voted unanimously to approve the Minutes of the April 21, 2016 Public Session.

II.REVIEW AND APPROVAL OF THE MINUTES OF THE CLOSED SESSION OF April 21, 2016

Dr. Kraus motioned to approve the Minutes of the Executive Session. Dr. Jarr seconded the motion and the Commission voted unanimously to approve the Minutes of the April 21, 2016 Executive Session.

III. CHAIRMAN'S REPORT

Dr. Gimenez welcomed everyone to the meeting. He noted the most commonly cited regulatory violations: Infection Control and Staffing. He requested that the facilities continue to work on improving in these areas as the violations represent safety concerns and contribute to patient hospitalizations.

Dr. Kraus added that the Commission should be concerned about violations of Hepatitis B policies, citing multi-dose vials left open, and the lack of staff training. He also noted that at the last American Transplant Congress (June 2016 symposium about the outcomes for kidney transplant recipients of organs from "increased infectious risk deceased donors), it was reported that the risk of contracting hepatitis B infections during the first year following kidney transplantation is the same risk as for patients receiving hemodialysis. Although, the risk of contracting HCV, HBV and HIV in a dialysis unit is low, facilities should never be complacent about following infection control policies because the risk does exist. Discussion ensued.

Dr. Gimenez reminded everyone that we are in hurricane season. He urged the dialysis facilities to be attentive and review emergency plans and conduct drills to be prepared.

Dr. Gimenez also noted his concern regarding the lack of surveillance at uncertified dialysis facilities in the State, highlighting the recent decertification of nursing homes facilities. He requested that the OHCQ survey those facilities more often. Discussion ensued.

Lastly, Dr. Gimenez introduced two newly appointed Commissioners: Reverend Barry Hargrove and Dr. Sumeska Thavarajah. Reverend Hargrove stated that he is a Pastor in Baltimore City and a two time kidney transplant recipient. Dr. Thavarajah stated that she has been a faculty member at Johns Hopkins Bayview since 2000 and works with the National Kidney Foundation.

IV. EXECUTIVE DIRECTOR'S REPORT

Mrs. Schwartz welcomed everyone to the meeting. She announced that in addition to appointment of Dr. Thavarajah and Reverend Hargrove there have been two additional appointments to the Commission: Dr. Donna Hanes from University of Maryland and Dr. Paul Segal, an appointment by MedChi.

Ms. Schwartz also inquired whether the OHCQ surveyor immediately takes action during a survey when staff is observed breaking infection control procedures. Ms. Peterson noted that it would depend on whether the breach in infection control practice is a one-time issue or more prevalent.

Ms. Schwartz reported that the Commission wanted to reach out to facility Medical Directors, in a fall symposium, to discuss expectations, compliance and responsibilities. She also suggested that the Commission would like to consider topics that would interest patients as well and solicited comments from the stakeholders for areas of interest.

She also introduced Raymond Harris, a dialysis patient and patient advocate, who was in attendance at the meeting. Mr. Harris briefly introduced himself as a long term dialysis patient, and voiced his concerns about the lack of empathy shown by dialysis staff to patients. He expressed his desire that facility staff need to be trained in areas of patient interaction and engagement.

Discussion ensued. Dr. Kraus reported on the Hopkins transplant center's efforts to rehumanize medicine.

Lastly, Elena Balovlenkov updated the Commission on the status of the consumer assessment of healthcare providers and systems (ICH CAHPS), which is designed to measure the experiences of people receiving in-center hemodialysis. She reported that results will be reported on the CMS Dialysis Facility compare website in 2017.

V. OLD BUSINESS

Ratify Commission Vote to add Envarsus XR to the KDP Formulary

The Commission ratified their vote on April 21, 2016 to add the drug to the formulary. Dr. Kraus motioned to approve the addition of Envarsus XR to the KDP Formulary, Dr. Jaar seconded the motion and the Commission voted unanimously to approve the addition of Envarsus XR to the KDP Formulary.

VI. NEW BUSINESS

A. Kidney Disease Program - Carol Manning

Stats and Budget

Ms. Manning reviewed the KDP statistics. She noted that the budget information was not available at the time when these reports were printed. She also stated that the KDP expenditures were approximately \$8.2 million and that the Program was fully funded for 2017.

• ICD 10 Codes

Ms. Manning noted that the use of the ICD 10 codes was federally mandated in October 2015. She stated that the rule for payment is to pay according to the primary diagnosis. In some instances, when there are questions regarding appeals, she will defer to the Commissioners for their input. Discussion ensued.

Added Discussion- Medicare Part B Coverage

Ms. Manning reported that KDP is currently re-organizing and will be focused on allocating more resources to certifying patients. She also noted that KDP will be taking a more active role in terminating KDP coverage for those patients who do not maintain their Medicare Part B coverage, or those who let their Part B premiums lapse.

B. Discussion on Commission Meeting Dates

Mrs. Schwartz inquired whether the Commissioners or guests would like to change next year's July Commission meeting to June, or to maintain the status quo. The Commissioners and guests concurred that the status quo be maintained.

C. CNA-DT Requirements

MBON Proposed Regulations

Ms. Schwarz and Ms. Adcock reported on the recent Maryland Board of Nursing (MBON) proposal to amend its CNA-DT regulations. Ms. Adcock reported that she had attended the MBON meeting on July 27th and had discussed with MBON representatives the existing requirement for the dialysis technician applicant to be certified as a CNA-DT. Discussion ensued. The group noted that enforcement of this existing requirement would have an impact on the dialysis facility workforce. A workgroup will be formed to address the issue, and to proactively formulate a response to the new national certification language.

Correspondence regarding CNA-DT certification requirements

Ms. Adcock directed the guests' attention to a MBON memo sent to CNA-DT training programs. The memo clarifies the use of the state-based exam for CNA-DT certification; there is no MBON requirement for a standardized test. Discussion ensued and the guests agreed that the state-based exam did not reflect current practice and that most programs utilize their own internal test.

D. Network Update

Mrs. Adcock reported that the Mid Atlantic Renal Coalition has provided the Commission with reports on the Network's 2016 CROWNweb Clean-Up Project, Patient Grievances and Statement of Work Dashboard. The documents were provided for informational purposes.

E. New Facilities

Dr. Gimenez noted that the following facilities have applied for certification with the Commission:

- Davita Brandywine (12/11/16)
- Davita Glenarden (1/20/16)
- Nx Stage Baltimore North (7/1/16)

F. Closed Facilities

Dr. Gimenez reported that the following facilities have notified the Commission of their closure:

- a. Western Maryland Hospital Center (May 27, 2016)
- b. Davita JB Zachary (7/1/16)
- c. Davita Baltimore Geri Center (7/1/16)
- d. Davita JHH Bond Street (7/1/16)

G. Non-Renewed Facilities - Nursing Home Facilities

Dr. Gimenez stated that the following facilities have opted not to renew their Commission certifications. The facilities are being transitioned to new ownership from Good Samaritan.

- Future Care Coldspring Dialysis
- Future Care Northpoint Dialysis
- Manor Care Dialysis
- Cromwell Dialysis
- Lorien Dialysis

H. Citation Free Surveys

Dr. Gimenez commended the following facilities for achieving citation free surveys:

- NxStage Greenbelt
- Union Memorial

I. Categories of Complaints

Dr. Gimenez reported that the Commission has received and resolved the following types of complaints since the last meeting:

Verbal

- Patient complaints regarding staff members
- Patient complaint regarding physician contacting MVA and the ultimate revocation of the patient's driver's license
- Patient complaint regarding readmission to facility after hospitalization
- Patient complaints regarding facility cleanliness
- Complaint regarding placement of patient in an outpatient facility

Written

- Patient complaint regarding treatments starting late and facility staff not communicating with the patients
- J. Commission Approval/Disapproval for KDP Out of State Transplant Reimbursement Dr. Gimenez noted that since the last meeting, the following hospital has requested and been granted out of state transplant approvals:

Hospital	Granted	Refused
MedStar Georgetown Transplant Center	3	0
Christiana Transplant Center	1	0
George Washington Transplant Center	1	0

K. Surveys (20) Citations

Compliance with Federal, State and Local	0
Laws and Regulations	
Infection Control	12
Water and Dialysate Quality	4
Reuse of Hemodialyzers/Bloodlines	0
Physical Environment	3
Patient Rights	0
Patient Assessment	0
Patient Plans of Care	2
Care at Home	1
Quality Assessment and Performance	3
Improvement	
Laboratory/Affiliation Guidelines	0
Personnel Qualifications/Staffing	14
Responsibilities of the Medical Director	0
Medical Records	1
Governance	5

For informational purposes, the Commission shared the results of their Survey Findings Deficiency Report for the past quarter. Dr. Gimenez reiterated the need for emphasizing improvement in the areas of infection control and personnel qualifications/staffing.

L. Surveys Completed (20)

The following facilities have been surveyed since the last meeting:

Good Samaritan Dialysis
FMC Pikesville
Davita Southern MD
Davita Windsor
Davita Towson
NxStage Greenbelt
Davita Mercy
Davita Largo
Union Memorial Dialysis
Davita Southern MD
Davita Calverton
Davita Lanham
Davita Germantown
Davita Largo

FMC Princess Anne Davita Ballenger Creek

Bon Secours Dialysis Davita Frederick

Davita Glen Burnie Davita Glen Burnie Home

Davita Baltimore County Davita Wheaton

M. Added- Chairman Announcement

Dr. Gimenez publicly announced that his term expired this month and that the Commission would be moving into closed session to discuss new Commissioner Appointments.

There being no further public business, upon motion made by Commissioner Wise and seconded by Commissioner Jaar, the Commission unanimously voted to adjourn the Public Session at 4:01 P.M. and move into Executive Session.