



The Delaware Health Care Commission (DHCC) Meeting

July 11, 2019

9:00 a.m. to 11:00 a.m.

Meeting Attendance and Minutes

Commission Members Present: Dr. Nancy Fan (Chair), Theodore W. Becker (Mayor of Lewes); Trinidad Navarro (DOI), Robert Dunleavy, LCSW (DSCYF), Secretary Rick Geisenberger (DOF), Dr. Edmondo Robinson (CCHS), Dr. Kathleen Matt (UD), Dr. Jan Lee (DHIN), Dennis Rochford (Maritime Exchange for DE River & Bay), and Richard Heffron

Commission Member Absent: Dr. Kara Odom Walker (DHSS)

Meeting Facilitator: Dr. Nancy Fan (Chair)

Health Care Commission Staff: Elisabeth Scheneman, Executive Director and Marques Johnson, Administrative Specialist III

CALL TO ORDER

Dr. Fan called the meeting to order at approximately 9:05 a.m.

Meeting Minutes Approval – May 2, 2019

The meeting convened at approximately 9:05 a.m. at the Del Tech Terry Campus in the Corporate Training Center located at 100 Campus Drive, Dover, Delaware. Dr. Fan welcomed those in attendance and requested that the commissioners review the draft minutes from the DHCC meeting held on May 2, 2019. June's meeting was cancelled. She motioned for the minutes to be approved. Ted Becker motioned to approve the minutes, and Dr. Robinson second the motion for approval. All commissioners present were in favor of approving the May 2, 2019 meeting minutes. Motion carried. View the approved May 2, 2019, meeting minutes here:

https://publicmeetings.delaware.gov/Document/60997_Minutes-Final.pdf

BOARD BUSINESS

Disclosure of State Loan Repayment Awards:

At the May meeting, the commissioners received a handout with the proposed award amount for four eligible State Loan Repayment Program applicants. The commissioners unanimously voted in favor to approve the award amounts. To follow-up, Dr. Fan asked the commissioners at the July meeting what

information they should publicly disclose. Moving forward, Dr. Fan proposed they could share a practitioner's level (mid or advanced), location (county, not facility), specialty, award amount, and duration of the award. No questions or objections were raised by the commissioners. The DHCC will now start making this information public.

POLICY DEVELOPMENT

Delaware Branch Campus Program

Lisa Maxwell, MD MHCD Chief Learning Officer with Christina Care Health System (CCHS) provided an update on the Delaware Branch Campus program and medical education programs at Christiana Care. Dr. Maxwell is also a DIMER (Delaware Institute for Medical Education and Research) board member. She provided a broad overview of all of CCHS' medical education programs which includes graduate medical education, undergraduate medical education, nursing students, allied health, and APC (Advanced Practice Clinicians) fellowships.

Graduate medical education has on average 270-280 residents per year in many different specialties. There are 31 different programs and CCHS is a fully accredited sponsoring institution.

Undergraduate and allied health have over 700 medical student rotations, with the main partners being Sidney Kimmel Medical College (SKMC) and Philadelphia College of Osteopathic Medicine (PCOM). Christiana also takes students from other institutions. The number of PA student rotations have grown to over 225 rotations per year.

APC (Advanced Practice Clinicians) fellowships represented a workforce challenge that CCHS addressed. The fellowship program started at CCHS in 2017 with three new graduates embedded in practices following a residency model where graduates are 50% protected for education and not on the books as providers. CCHS eventually hired the three graduates at the end of the fellowship. The fellowship was continued in 2018 and six more graduates started in March of 2019. Dr. Maxwell is seeing that the graduates are much more comfortable and their time to ramp-up is much more minimal. The APC fellowship has served as an example of education being a solution to the workforce problem.

In 2011, CCHS started a Branch Campus with SKMC. Dr. Maxwell explained the Delaware Branch Campus partnership with Sidney Kimmel Medical College (SKMC) and Philadelphia College of Osteopathic Medicine (PCOM). To date, over 100 have graduated over time. The program is voluntary and participants do not have to be from Delaware. CCHS would like the Branch Campus to be a pathway back to Delaware. 56% of students have a Delaware connection and 44% have no connection to Delaware. From 2013-2020, 30% of DIMER students came to the Branch Campus. A video was shared showing medical students expressing their positive experiences participating in Branch Campus.

Dr. Lee asked if there was data regarding how adding the Branch Campus has changed those who chose to practice in Delaware, versus they trained in Pennsylvania and stayed in Pennsylvania. Dr. Maxwell shared that looking at the strict numbers of which Branch Campus students have come back to residency (and note, they are still training), the residency retention has been small at around 7 out of 100. However, Dr. Maxwell shared that what cannot be calculated, yet, is accounting for other things that are happening. There is no data at this point in time. The purpose of the Branch Campus program has been to prove training at the Branch Campus is equivalent to the mothership. Now the Branch Campus can go after retention.

Dennis Rochford asked if there is a relationship between the Branch Campus activities and University of Delaware (UD) College of Health Sciences. Dr. Maxwell mentioned there is no formal crossover, but informally there is interest and it is happening with students coming back for events and/or mentoring others. Dean Matt added it would be a great opportunity to grow. Looking at the data, 20 of the 45 UD graduates from the Branch Campus participated in the Med Scholars program. Dr. Maxwell commented the students like to “give back” and it would be beneficial to try to increase the amount of opportunities for community services for students, something that Philadelphia is offering.

Dr. Robinson asked if there has been discussion from a DIMER perspective regarding the number of DIMER students that have participated in the Branch Campus program (30% DIMER students choose Branch Campus and 70% chose a non-Branch Campus). Are there efforts or conversations taking place around this topic? Dr. Maxwell shared they have had discussions and it has to be managed correctly with all partners on board. She feels there is an opportunity for DIMER to get in front of the students. This is being done through the partnership with the Delaware Health Sciences Alliance (DHSA). Dr. Fan spoke about the question of retention directly linked to Delaware’s workforce projection. There is a need for tracking.

Public Comment:

Lolita Lopez (Westside Family Healthcare) thanked Dr. Maxwell for her presentation and asked what is the time commitment for students in the program. Dr. Maxwell shared the residents are pretty much full time and many choose to live in Delaware.

A copy of Dr. Maxwell’s presentation is available at:

https://dhss.delaware.gov/dhss/dhcc/files/cchsdecmpusprnt_071119.pdf

Before transitioning to the next item on the agenda, Dr. Fan made an announcement regarding “Delaware Day,” a medical recruitment event sponsored by DHSA on July 13 at Del Tech’s Terry Campus.

Stakeholder Loan Repayment Meeting Recap

In March 2019, there were discussions around the concept of a non-federal, state sponsored student loan repayment program. The Delaware Healthcare Association (DHA) took the lead and wanted to introduce language in the budget under epilogue for the 2020 fiscal year. In early May, Dr. Fan met with a small stakeholder group that included the Medical Society, DHA, DHSA, and Westside to work out the elements of what a student loan repayment program would look like. A framework was developed offering \$50K over a four-year period to any applicant serving in a Health Professional Shortage Area (HPSA). On May 30, the DHCC hosted a large stakeholder meeting on loan repayment.

Loan repayment did not end up making it into budget epilogue. Instead, it was introduced on June 30 as a bill ([HB 257](#)). The bill will likely be discussed in the next legislative session. As currently drafted, the new state program will have less restrictions than the current federal State Loan Repayment Program administered by the DHCC.

A summary of the bill: “This bill establishes a health care provider loan repayment program for qualifying primary care clinicians to be administered by the Delaware Health Care Commission. Under the loan repayment program, the Health Care Commission may grant education loan repayment grants

to primary care clinicians of up to \$50,000 per year for a minimum of 4 years. The Commission may give priority consideration to DIMER-participating students and participants in Delaware-based residency programs. Funding for the education loan repayment grants is contingent on and subject to an annual \$1 million appropriation from the General Assembly, to be matched in an equal amount by Delaware's health insurers. Hospitals that apply for grants on behalf of their qualifying clinicians must match the grant on a dollar-for-dollar basis. Eligible sites must be located in Health Professional Shortage Areas and must accept Medicare and Medicaid participants, and private practice sites must participate in the Department of Health and Social Services' Voluntary Initiative Program."

For more information about the May 30 Stakeholder Meeting, meeting minutes are available at: https://publicmeetings.delaware.gov/Document/62933_Minutes-Final.pdf

Dr. Fan mentioned the DHCC is finalizing a contract with a consultant (Tom Ferry) updating data from his 2011 report. Mr. Ferry's research will look at data from 2012 – 2018, working with the DIMER and DIDER boards.

Dean Matt commented that University of Delaware has a pre-med and pre-health center that tracks UD students that could be useful data for his research. The DHCC will connect Mr. Ferry to UD.

UPDATES

July 10th DIDER Conference and Board Meeting Recap

The Delaware Institute of Dental Education and Research (DIDER) hosted a Dental Health Conference on July 10. The meeting was held at the Chapel in New Castle, and dental health stakeholders from across Delaware participated in the discussion. The objective was to discuss critical issues and challenges related to access to dental care and develop a clearly defined action plan. After the conference, the board held their quarterly meeting.

Dr. Fan attended some of the conference and shared some takeaways. There was a lot of good discussion regarding workforce around the topics of – How do we attract DIDER students in Delaware and keep them in Delaware? Is there a perceived workforce shortage or is it a question of access? What insurance is being accepted? Licensure point of view from a public and private perspective was also discussed.

Elisabeth Scheneman shared that at the meeting, issues and challenges were highlighted which included the topics of retiring dentists, aging dentists, dental recruitment, the cost of a dental education, and loan repayment. Dentists were not included in the loan repayment bill that was introduced on June 30. DIDER would like to be a part of a state sponsored loan repayment program. In addition, they would like to explore looking at a fellowship program for dentists. Moving forward, DIDER is hoping to focus on a few key areas and have a follow-up conference in about six-months. It was also agreed more research is needed about licensure.

At the DIDER board meeting, Ted Becker shared the board set three areas they would like to focus:

1. How to handle adult Medicaid and make it sustainable
2. Issues around licensure
3. What kind of incentives could be offered for dentists to practice in underserved areas?

Public Comment:

Lolita Lopez (Westside Family Healthcare) attended the Dental Health Conference and shared there needs to be an agreement on whether or not there is a shortage in Delaware, not just misdistribution.

UPDATES

Legislative Update

Dr. Fan provided an update on the following bills:

[SS1 for SB25](#) was signed by the Governor and restricts access to tobacco products and tobacco substitutes to individuals under age 21.

[SB 108](#) was reported out of committee, but did not come to a vote by the General Assembly. This bill would have amended Title 16 of the Delaware Code relating to the Delaware Health Resources Board (HRB). The legislation identified three major changes for HRB: reducing the number of members to make it easier to make quorum and fill Board vacancies, updating language to provide for 3-year terms, and authorizing the Board to elect a vice chair. The DHCC has received a performance review question from the Joint Legislative Oversight and Sunset Committee (JSLOC) on June 27. The DHCC will need to submit the questionnaire to JSLOC by October 16, 2019.

[SB 116](#) was passed by the General Assembly and will expand the membership of the Primary Care Reform Collaborative and create an Office of Value-Based Health Care Delivery in the Department of Insurance to reduce health care costs by increasing the availability of high quality, cost-efficient health insurance products that have stable, predictable, and affordable rates. The Collaborative will now have 17 members instead of three.

[HB 193](#) (Reinsurance) was signed by the Governor on June 20. "This Act creates the Delaware Health Insurance Individual Market Stabilization Reinsurance Program & Fund (the "Program"). The Program will be administered by the Delaware Health Care Commission in order to provide reinsurance to health insurance carriers that offer individual health benefit plans in Delaware. The Program will be funded with passthrough funds received from the federal government under the Affordable Care Act, funds provided by the Federal Government for reinsurance, and through a 2.75% annual assessment based on insurance carrier's premium tax liability."

Steven Costantino, Director of Health Care Reform with the Department of Health and Social Services, provided a summary on reinsurance. The passage of reinsurance was a collaboration of multiple agencies. Based on actuarial modeling, over 80% of the cost of the reinsurance program is expected to be funded through federal "pass-through" dollars. Delaware's application will be reviewed by both the U.S. Department of Health and Human Services and the U.S. Department of the Treasury. CMS has 45 days to determine completeness and another 180 days to determine approval. CMS has been expediting approvals. 1332 is a very complicated actuarial analysis and there was a consultant (Oliver Wyman) brought on board. In its simplest form, reinsurance has the potential to stabilize the Marketplace, increase enrollment, and keep individuals in the Marketplace.

Commissioner Navarro shared other states have tried reinsurance and some have failed, however, it has worked well in Alaska and Maryland. If all the moving parts work and the numbers are right, Delaware

could see a potential 20% decrease in premiums. The Commissioner added the Marketplace has now stabilized and for the first time since ACA was introduced, there will be a decrease this year.

Dr. Robinson inquired what is the direct line between reinsurance and Delawareans receiving lower premiums – How do we guarantee it goes straight to the consumer and not being held by insurance companies? Commissioner Navarro shared the target was to help those not eligible for tax credits, for example small business owners. About 85% of Delawareans on the ACA receive tax credits. The Department of Insurance will collect the HIT tax and assessment. It will then cost insurers less because of reinsurance. Lower costs to insurers means premiums will likely go down. With the Marketplace already stabilizing, it is hoped reinsurance will bring more competition of insurance companies to Delaware.

Budget

Secretary Geisenberger shared an update regarding the 2020 final State budget. The base budget grew 4.2%. It was spread across departments with public education (34% of the state’s budget) seeing a 6.1% increase. The Department of Health and Social Services (DHSS) saw a 3.2 percent increase with Medicaid growing 1.5% and everything else at DHSS about 6%.

Secretary Geisenberger shared Delaware is trying to boost reserves. For the first time, the budget includes a Budget Stabilization Fund for \$126.3 m, proposed by the Governor.

The Secretary highlighted the budget for DHSS.

Department of Health and Social Services
(\$ thousands)

Medicaid growth.....	\$11,077.0
DDDS Direct Service Provider Rate Increase.....	\$4,251.3
Child Care Provider Rate Increase.....	\$3,837.2
CHIP.....	\$3,179.4
Special School Graduates & Community Placements.....	\$2,870.2
Behavior Health Consortium Initiatives.....	\$1,825.0
DSAAPD Growth in Community Services.....	\$1,765.2
DE Contraception Access Now (CAN).....	\$1,494.5
DIMER Operations.....	\$250.0

GF Budget: \$1,234,594.3
3.2% growth



For more details about the 2020 budget, please reference Secretary Geisenberger’s presentation: <https://dhss.delaware.gov/dhss/dhcc/files/fy2020budgetfordhcc.pdf>

Marketplace

Commissioner Navarro provided a Marketplace update. First, he shared the Delaware Department of Insurance (DOI) is moving to 1351 West North Street in Dover (about 2 miles from current location). With this move, DOI will save 30% on their rent.

Highmark filed a decrease this year on the exchange of 5.8%. In previous years, the rate increase was about 35%, then 25%, then after some negotiations with Highmark and DOI, the rate increase last year was 3%. This tells DOI that over time, the Marketplace is starting to stabilize. DOI actuaries will be reviewing the 5.8%.

Commissioner Navarro concluded DOI past 12+ bills this year with the help of the General Assembly which included the Pharmacy Benefit Manager bill, cyber security bill, ACA protections bill, and other pro-consumer bills.

Secretary Geisenberger added there is growth in the budget that happens naturally through inflation and population. Some agencies received only a 1-2% increase. By looking at lease expenses and IT resources, there is a savings on renegotiating facilities leased by the state. Secretary Geisenberger is the chair of GEAR (Government Efficiency and Accountability Review Board) and encouraged the audience to share if they know of inefficient or want to share their ideas <https://gear.delaware.gov/>.

Dr. Fan asked if there were any questions or new business from the Commissioners. Hearing none, she asked if there was public comment.

Public Comment:

Jonathon Kirch (American Heart Association) shared he was happy about the reduction of tobacco tax revenue that is being projected. Another piece of legislation he was hoping that would be mentioned at the meeting, but was not, is HB 79 which requires the State food safety standards for restaurants to include a system for requiring healthy beverages to be offered as the default beverage with a combination children's meal inclusive of a drink. Mr. Kirch shared the bill signing is going to be held on July 17.

ADJOURN

Dr. Fan shared there will not be an August meeting. Hearing no other business, Dr. Fan adjourned the meeting at approximately 11:00 a.m.

Next Meeting

The next DHCC meeting will be held on Thursday, September 5, 2019 at Delaware Health and Social Services campus located at 100 Campus Drive, Dover, Delaware located in the Del Tech Terry Campus; Corporate Training Center, 400 A/B from 9:00 a.m. to 11:00 a.m.

Public Meeting Attendees

R.W. Munson, Jr.	United Medical
Robin Taylor	Department of Insurance (DOI)
Frank Pyle	Department of Insurance (DOI)
Fleur McKendell	Department of Insurance (DOI)
Jan Brunory	Department of Insurance (DOI)
John Gentile	Office of Senator Carper
George Meldron	Nemours
Eric Brandt	Department of Health and Social Services (DHSS)
Bill Howard	BDC – Health IT
Jill Fredel	Department of Health and Social Services (DHSS)
Lolita Lopez	Westside Family Healthcare
Nicole Moxley	Department of Health and Social Services (DHSS)
Mary Perkins	Goeins-Williams
Jacqueline Washington	Delaware State University (DSU)
Elizabeth Zubaca	Hamilton Goodman Partners (DGP)
Pam Price	Highmark
Jonathan Kirch	American Heart Association