



Meeting Minutes - Joint Commission on Health Care

December 7, 2022 – 2:00 p.m.

Senate Room A – Pocahontas Building

Members Present

Delegate Dawn Adams

Delegate Emily Brewer

Delegate C. Matthew Fariss

Delegate Karen Greenhalgh

Delegate C.E. (Cliff) Hayes, Jr.

Delegate M. Keith Hodges

Delegate Patrick Hope

Delegate Robert Orrock

Delegate Roxann Robinson

Senator George Barker

Senator Siobhan Dunnivant

Senator John S. Edwards (virtual)

Senator Barbara Favola

Senator Ghazala Hashmi

Senator David Suetterlein

Members Absent

Delegate Sam Rasoul

Senator Jennifer McClellan

Staff Present

Jeff Lunardi

Agnes Dymora

Stephen Weiss

Estella Obi-Tabot

Kyu Kang

Jen Piver-Renna

Call to order and welcoming comments – Chairman Barker

Roll Call - Agnes Dymora

Members voted to change the order of the agenda and discussed the potential study topics for 2023. All Members present unanimously voted to adopt the below study topics for staff to complete next year (see the JCHC [website](#) for approved study resolutions):

- Eating Disorders and Obesity Prevention and Treatment
- Team-based Care Approaches to Improve Health Outcomes
- Vertically Integrated Carriers and Providers

Executive Director Jeff Lunardi provided a quick overview of the agenda and voting rules for Members.

Staff presented the summaries and policy options for Members to vote on for each of the four studies in 2022. Members indicated that where legislation was part of the policy option, the patron may instead choose to submit a budget amendment or send a letter from the JCHC. This is to ensure that bill filing limits do not impede the ability to make policy changes.

Jeff Lunardi, provided a summary of the Provider Data Sharing study findings and the six policy options for Member consideration. After some discussion, Commission Members voted to take the following actions (see the [written report](#) for additional information and the original text of all policy options):

Option 1 – (modified) Introduce legislation directing a state agency to the development of a system to collect data on all prescriptions dispensed in Virginia and use the system to make a patient’s medication history available to a provider with consent of the patient. The legislation will direct the necessary stakeholders to plan the implementation and report to the General Assembly prior to development (pg. 10) **Adopted as a JCHC recommendation by a 7-6-1 vote.**

Option 2 – Introduce legislation to amend § 32.1-372 of the Code of Virginia to require the EDCC program to share information with all state, regional, and local correctional facilities in Virginia. (pg. 14) **No action taken.**

Option 3 – Introduce legislation to amend § 32.1-372 of the Code of Virginia to require that information on all patients receiving services in state mental health hospitals be collected and shared as part of the EDCC program, and that all CSBs be enrolled in the program. (pg. 14) **No action taken.**

Option 4 - Introduce a Chapter 1 bill directing VHI to work with the EDCC IT vendor and appropriate EDCC users to assess the cost to improve the sharing of discharge planning documents, provider contact information, and integration of the EDCC software with MCO case management software. VHI can then work the EDCC IT vendor to make the enhancements if there is agreement among the stakeholders that they are cost-effective. (pg. 15) **No action taken.**

Option 5 – (modified) The Joint Commission on Health Care could endorse the implementation of the Strategic Plan proposed by Virginia Health Information to expand the EDCC system into a health data utility. ~~Send a letter to Virginia Health Information directing them to include a proposal for a consolidated health information exchange platform as part of the strategic plan being developed under Item 295.M.3 of the 2022 Appropriation Act.~~ (pg. 19) **Adopted as a JCHC recommendation by a 14-0 vote.**

Option 6 - Introduce legislation creating a grant program to pay for the initial costs of connecting community-based health care providers to the data sharing platforms operated by large health systems. (pg. 23) **Adopted as a JCHC recommendation by a 14-0 vote.**

Stephen Weiss, provided a summary of the Emergency Department Utilization study findings and the six policy options for Member consideration. After some discussion, Commission Members voted to take the following actions (see the [written report](#) for additional information and the original text of all policy options):

Option 1 – Introduce a Chapter 1 bill directing DMAS to modify its managed care contracts to require MCOs to collect and report on the number of claim denials, the reason for denials, and the number of claim resubmissions prior to payment by

provider type. The bill could direct DMAS to report this information to the Joint Commission on the Health Care and the Joint Subcommittee for Health and Human Resources Oversight. (pg. 20) **Adopted as a JCHC recommendation by a 12-0 vote.**

Option 2 - Introduce a budget amendment directing the Virginia Primary Care Task Force, DMAS, and the Virginia Department of Health, Office of Health Equity to study whether scheduling in primary care practices is limiting access by Medicaid patients, and make recommendations to improve the ability of Medicaid patients to get primary care appointments. (pg. 22) **No action taken.**

Option 3 - Introduce legislation and an accompanying budget amendment to establish a grant program within the Virginia Department of Health, Office of Emergency Medical Services to establish and enhance hospital-based care management programs. (pg. 25) **Adopted as a JCHC recommendation by a 10-1 vote.**

Option 4 - Introduce legislation and an accompanying budget amendment to establish a grant program within the Virginia Department of Health, Office of Emergency Medical Services to establish and enhance ambulance-based care management programs. (pg. 27) **No action taken.**

Option 5 - Introduce legislation to require hospitals to submit ESI codes, reason codes, and social determinant of health codes Z55 to Z65 as part of hospital claims, and that these codes be required on claims submitted to the All Payer Claims Database. (pg. 27) **No action taken.**

Option 6 - ~~Introduce legislation requiring free-standing emergency departments to appropriately identify that they are a free-standing emergency department in their external signage and patient disclosures provided to patients. Send a letter to the Secretary of Health and Human Resources requesting that a workgroup of stakeholders be convened to develop consensus on solutions to consumer confusion regarding free standing or off-campus emergency departments.~~ (pg. 30) **Adopted as a JCHC recommendation by a 11-0 vote.**

Estella Obi-Tabot, provided a summary of the Affordability of Assisted Living Facilities study findings and the eight policy options for Member consideration. After some discussion, Commission Members voted to take the following actions (see the [written report](#) for additional information and the original text of all policy options):

Option 1 - Introduce a budget amendment to increase the base Auxiliary Grant rate to \$2,500 per month. (pg. 12) **Adopted as a JCHC recommendation by a 10-0-1 vote.**

Option 2 - Introduce a budget amendment to provide a one-time, lump sum payment to ALFs that serve a new AG resident, above the number of AG residents that they

currently serve. (pg. 14) **No action taken.**

Option 3 – (modified) Introduce legislation amending the Code of Virginia to expand the list of eligible living arrangements for the Auxiliary Grant program to allow AG recipients to remain in the community and coordinate their own care as needed. The legislation should include an enactment clause directing DARS to submit changes to the AG Program’s eligible living settings to the Social Security Administration for approval, including details on the eligible living settings and how recipients would access those settings. (pg. 22) **Adopted as a JCHC recommendation by a 12-0 vote.**

Option 4 - Introduce a budget amendment directing DBHDS and DARS to develop a plan to create a separate, increased rate for AGSH. The budget amendment should include language directing DARS to submit a rate change for AGSH to the Social Security Administration for approval. (pg. 23) **No action taken.**

Option 5 - Introduce a budget amendment providing funds to increase the personal needs allowance for AG recipients, and include language that the AG personal needs allowance will increase at the same rate as future cost of living AG rate increases. (pg. 26) **Adopted as a JCHC recommendation by a 12-0 vote.**

Option 6 - ~~Introduce a Chapter 1 bill~~ Send a letter from the JCHC directing DSS to update ALF regulations to require ALF administrators to notify the appropriate DARS and local CSB staff at least 60 days prior to closure if they currently have residents on the Auxiliary Grant or Discharge Assistance Program. (pg. 27) **Adopted as a JCHC recommendation by a 12-0 vote.**

Option 7 - Introduce a Chapter 1 bill directing the Virginia Department of Social Services to share access to assisted living facility licensing data with Auxiliary Grant program staff at the Department of Aging and Rehabilitative Services to enable real-time access to the licensing status of ALFs across the state. (pg. 28) **No action taken.**

Option 8 – (Member requested) The Joint Commission on Health Care could introduce a budget amendment directing and providing funds to DMAS to develop a rate to provide reimbursement for assisted living services under the current Commonwealth Coordinated Care plus program. **No action taken.**

Kyu Kang, provided a summary of the Local Health Departments study findings, the eleven policy options for Member consideration and public comments that were received from stakeholders about the policy options.

The Virginia Department of Health Commissioner, Dr. Colin Greene, informed the Members on which policy options he felt would best assist the health departments most.

After some discussion, Commission Members voted to take the following actions (see the [written report](#) for additional information and the original text of each policy option):

New Option – Send a letter to VDH indicating support for all of the policy options that were not otherwise endorsed, and requesting that VDH convene the appropriate stakeholders to develop an implementation plan to reform the local public health system that includes priorities and cost estimates based on the JCHC policy options and other recommendations from stakeholders.

Option 1 - Introduce legislation to amend the Code of Virginia to require LHDs to ensure the availability of clinical services, either by the LHD or by other providers, facilitate access to and linkage with clinical care, as well as address chronic disease and injury prevention. The legislation should include an enactment clause directing VDH to update the Local Government Agreements to reflect these changes. (pg. 12) **Addressed by letter to VDH.**

Option 2 - Introduce a Section 1 bill directing VDH to design a state performance management process for each LHD, with the goals of assessing the ability of each LHD to meet minimum capacity requirements, assisting in continuous quality improvement, and providing a transparent accountability mechanism to ensure public health functions are being met. (pg. 21) **Addressed by letter to VDH.**

Option 3 - Introduce a Section 1 bill directing VDH to develop and submit a plan by November 1, 2023 for the development of a centralized data system that will enable VDH to access necessary data from all LHDs across departments to support LHD assessment and performance management, as well as enable greater data sharing with stakeholders and the public. (pg. 26) **Addressed by letter to VDH.**

Option 4 – Introduce a budget amendment to provide additional funding to VDH for loan repayment programs for LHD staff. (pg. 33) **Addressed by letter to VDH.**

Option 5 - Introduce a budget amendment to fund targeted increases for LHD staff base salaries to align with current industry salary benchmarks. (pg. 33) **Adopted as a JCHC recommendation by a 10-0-1 vote.**

Option 6 - Introduce a budget amendment directing VDH to create regional operations and facilities management positions to assist LHDs, and providing funding for these staff. (pg. 35) **Addressed by letter to VDH.**

Option 7 - Introduce a Section 1 bill directing VDH to require all health districts to participate in the CHA/CHIP process, in coordination with the state health assessment process and local health system Community Health Needs Assessments. The legislation should include an enactment clause directing VDH to update the Local Government

Agreements to reflect these changes. (pg. 38) **Addressed by letter to VDH.**

Option 8 - Introduce a Section 1 bill directing VDH to determine the funding necessary to provide sufficient communications capacity across all health districts. VDH should submit the funding estimate to the Chairs of the House Appropriations Committee and Senate Finance and Appropriations Committee by August 1, 2023. (pg. 39) **Addressed by letter to VDH.**

Option 9 - Introduce a Section 1 bill directing that VDH track cooperative budget funding per capita, compare that funding to the identified needs of each LHD, and make appropriate adjustments as additional funding is made available. (pg. 50) **Addressed by letter to VDH.**

Option 10 - Introduce a Section 1 bill directing VDH to update state regulations for environmental health services to increase inspection fees and adjust them based on the type of establishment being inspected, to account for the typical time it takes to conduct the inspection. (pg. 52) **Addressed by letter to VDH.**

Jeff Lunardi gave a career overview of Senior Policy Analyst Stephen Weiss and informed the Members that he is retiring from his JCHC staff position.

Meeting adjourned.

Senator Edwards participated remotely due to attending another meeting in his home town. He was not counted toward the quorum and did not vote.

All presentations and a link to the archive of the video can be found on the JCHC website: <http://jchc.virginia.gov/meetings.asp>