

**MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
BONE MARROW TRANSPLANTATION SERVICES
STANDARD ADVISORY COMMITTEE (BMTSAC) MEETING**

Wednesday, November 18, 2009

Capitol View Building
201 Townsend Street
MDCH Conference Center
Lansing, Michigan 48913

APPROVED MINUTES

I. Call to Order

Chairperson VeCasey called the meeting to order at 9:10 a.m.

A. Members Present:

Paul Adams, MD, Vice-Chairperson, Self
Aly Abdel-Mageed, MD, Spectrum Health
Grant Grace, UAW
Nalini Janakiraman, MD, Henry Ford Health System
Mary Marks, Alliance for Health
Thomas Ruane, MD, Blue Cross Blue Shield/Blue Care Network
Elna Saah, MD, Michigan State University
Samuel Silver, MD, University of Michigan Health System
Jeffrey Trent, PhD, VanAndel Research Institute
Joseph Uberti, MD PhD, Barbara Ann Karmanos Cancer Institute
Amy Vanderwoude, MD, Cancer & Hematology Centers of West Michigan
Donald VeCasey, Chairperson, Consumer Health Care Coalition

B. Members Absent:

Adil Akhtar, MD, Beaumont Hospitals
Michael Wiemann, MD FACP, St. John Health System

C. Michigan Department of Community Health Staff Present:

Jessica Austin
Michael Berrios
Sallie Flanders
Kasi Kelley
Andrea Moore
Brenda Rogers

II. Declaration of Conflicts of Interests

No conflicts were noted for the record.

III. Review of Agenda

Mr. VeCasey requested that a discussion of possible revision of the minimum volume requirements within Section 3 be added to the agenda after Item IV.

Motion by Dr. Abdel-Mageed, seconded by Ms. Marks to accept the agenda as modified. Motion Carried. Yes – 12, No – 0, Abstention - 0

IV. Review of Minutes October 22, 2009

Motion by Dr. Abdel-Mageed, seconded by Ms. Marks, to accept the minutes as presented. Motion Carried. Yes – 12, No – 0, Abstention - 0

V. Minimum Volume Requirements

Ms. Marks provided draft language to modify the minimum volume requirements (Attachment A). Discussion followed.

Motion by Ms. Marks, seconded by Dr. Ruane, to approve the modifications to the comparative review as discussed. Yes – 12, No – 0, Abstention – 0. Motion Carried.

VI. Final Review of Proposed Language

Dr. Abdel-Mageed provided a draft on the proposed changes to the Standards (Attachment B). Discussion followed.

Dr. Uberti would like to modify the consulting agreement that has to occur with new transplant programs. The criteria for the visits would decrease to 3 during the first, second, and third 12 months of operation.

Public Comment:

Bob Meeker, Spectrum Health

Motion by Dr. Abdel-Mageed, seconded by Ms. Marks, to approve the modifications to the comparative review as discussed. Yes – 12, No – 0, Abstention – 0. Motion Carried.

Motion by Mr. Grace, seconded by , to modify the consulting agreement to specify in state and out of state pediatric and adult specific as appropriate. Yes – 11, No – 0, Abstention – 1 (Dr. Silver). Motion Carried.

Public Comment:

Bob Meeker, Spectrum Health

VII. Final Review of SAC Activities

Chairperson VeCasey gave an overview of the status of each Charge item, and the notes for the December commission meeting. Discussion followed.

VIII. Public Comment

Barbara Jackson, Blue Cross Blue Shield of Michigan
Dennis McCaferty, Economic Alliance of Michigan

IX. Adjournment

Motion by Ms. Marks, seconded by Dr. Abdel-Mageed, to adjourned at 10:30 p.m. Motion Carried.

Section 3. Requirements for approval for applicants proposing to initiate a bone marrow transplantation service

(6)(a) An applicant proposing to initiate an adult bone marrow transplantation service that will perform only allogeneic transplants, or both allogeneic and autologous transplants, shall project that at least ~~10~~ **30 TRANSPLANTS, OF WHICH AT LEAST 10 ARE** allogeneic transplant procedures will be performed in the third 12-months of operation. ~~An applicant proposing to initiate an adult bone marrow transplantation service that will perform only autologous procedures shall project that at least 10 autologous transplant procedures will be performed in the third 12-months of operation.~~

(b) An applicant proposing to initiate a pediatric bone marrow transplantation service that will perform only allogeneic transplants, or both allogeneic and autologous transplants, shall project that at least 10 **TRANSPLANTS, OF WHICH AT LEAST 5 ARE** allogeneic transplant procedures will be performed in the third 12-months of operation. ~~An applicant proposing to initiate a pediatric bone marrow transplantation service that will perform only autologous procedures shall project that at least 10 autologous transplant procedures will be performed in the third 12-months of operation~~

Section 6. Project delivery requirements -- terms of approval for all applicants

(d) Compliance with the following terms of approval:

(i) An applicant shall perform the applicable required volumes as follow:

(A) An adult bone marrow transplantation service that performs only allogeneic transplants, or both allogeneic and autologous transplants, shall perform at least ~~10~~ **30 TRANSPLANTS OF WHICH AT LEAST 10 ARE** allogeneic transplants in the third 12-months of operation **AND ANNUALLY**. ~~If an adult service performs only autologous transplants, the service shall perform at least 10 autologous transplants in the third 12-months of operation. After the third 12-months of operation, an applicant shall perform at least 30 adult transplants in any 36-month consecutive period, with no fewer than 5 allogeneic in any 12-month period, beginning with the third 12-months of operation, and thereafter.~~

(B) A pediatric bone marrow transplantation service that performs only allogeneic transplants, or both allogeneic and autologous transplants, shall perform at least 10 **TRANSPLANTS OF WHICH AT LEAST 5 ARE** allogeneic transplants in the third 12-months of operation. ~~If a pediatric service performs only autologous transplants, the service shall perform at least 10 autologous transplants in the third 12-months of operation. After the third 12-months of operation, an applicant shall perform at least 30 pediatric transplants in any 36-month consecutive period, with no fewer than 5 allogeneic transplants in any 12-month period, beginning with the third 12-months of operation, and thereafter.~~

Necessary Modifications to The Draft CON Review Standards for BMT Reflecting Decisions made by the BMT SAC

Section 2. Definitions

114 (T) "Planning area" means:

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116 either:

117 (A) planning area one that includes the counties in health service areas 1, 2, 5, and 6, and the
118 following counties in health service area 7: Alcona, Alpena, Cheboygan, Crawford, Montmorency,
119 Oscoda, Otsego, and Presque Isle; or

120 (B) planning area two that includes the counties in health service areas 3, 4, and 8, and the
121 following counties in health service area 7: Antrim, Benzie, Charlevoix, Emmet, Grand Traverse,
122 Kalkaska, Leelanau, Manistee, Missaukee, and Wexford.

Section 3. Requirements to initiate a BMT Service

226 (5)(a) An applicant shall demonstrate that the number of existing adult

227 BMT services does not exceed three (3) adult BMT services in planning area one identified in Section
2(1)(T)(A) or one (1) adult BMT service in planning area two identified in Section 2(1)(T)(B) and that approval of
the proposed application will not result in the total number of adult BMT services exceeding the need for each
specific planning area.

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229 230 (b) An applicant shall demonstrate that the number of existing pediatric

231 BMT services does not exceed two (2) pediatric BMT services

232 in planning area one identified in Section 2(1)(T)(A) or one (1) pediatric

233 BMT service in planning area two identified in Section 2(1)(T)(B) and that approval of

234 the proposed application will not result in the total number of pediatric BMT

235 services exceeding the need for each specific pediatric planning area.