

**MICHIGAN DEPARTMENT OF COMMUNITY HEALTH (MDCH)  
CARDIAC CATHETERIZATION  
STANDARD ADVISORY COMMITTEE (CCSAC) MEETING**

Wednesday December 17, 2014

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

**APPROVED MINUTES**

**I. Call to Order**

Chairperson Turner-Bailey called the meeting to order at 9:34 a.m.

A. Members Present:

Renee Turner-Bailey, Chairperson, International Union, UAW  
Luay Alkotob, MD, Hurley Medical Center arrived at 9:36 a.m.  
Duane DiFranco, MD, Blue Cross Blue Shield of MI  
Georges Ghafari, MD, Beaumont Health System  
Ginny Latty, Covenant Healthcare  
Brahmajee Nallamothe, MD, University of Michigan Health System  
Meg Pointon, UAW Retiree Medical Benefits Trust  
Fadi Saab, MD, Metro Hospital arrived at 9:38 a.m.  
Frank Tilli, MD, Genesys Regional Medical Center  
Douglas Weaver, MD, Henry Ford Health System left at 12:06 p.m.  
David Wohns, MD, Spectrum Health  
Karen Yacobucci, Allegiance Health

B. Members Absent:

None.

C. Michigan Department of Community Health Staff present:

Tulika Bhattacharya  
Sallie Flanders  
Natalie Kellogg  
Beth Nagel  
Tania Rodriguez  
Brenda Rogers

## **II. Declaration of Conflicts of Interests**

No conflicts were declared.

## **III. Review of Minutes November 6, 2014**

Motion by Ms. Pointon and seconded by Dr. DiFranco to approve the minutes as presented. Motion Carried.

## **IV. Review of Agenda**

Motion by Dr. DiFranco and seconded by Dr. Alkotob to accept the agenda as presented. Motion Carried.

## **V. Review of Draft Language**

### **A. Discussion**

Chairperson Turner-Bailey reviewed the draft language and discussion followed.

Break from 11:01 a.m. - 11:16 a.m.

Motion by Dr. DiFranco, seconded by Ms. Pointon to have the Department add language into the standard in section 3 (4) as follows: The applicant shall project the following based on data from the most recent 12-month period preceding the date the application was submitted to the Department, as applicable:

- (i) If the applicant is applying for a Primary PCI service, the applicant shall project a minimum of 36 primary PCI procedures per year.
- (ii) If the applicant is applying for an elective PCI service without on-site open heart surgery the applicant shall project a minimum of 200 PCI procedures per year.
- (iii) If the applicant is applying for an elective PCI service without on-site open heart surgery, the applicant will have operated a primary PCI program for at least one year and have data submitted to the state and to a qualified registry and been found to have acceptable performance as compared to the registry benchmarks for the most recent 12 months prior to the application.
- (iv) If the applicant was not approved as a primary PCI service prior to *(insert effective date of these standards)*, then the applicant shall demonstrate that there is no PCI or Open Heart Surgery service within a 60 radius miles or 60 minutes travel time from the applicant hospital.

Motion Carried in a vote of 11- Yes, 0- No, 0- Abstained.

Motion by Dr. Wohns, seconded by Dr. DiFranco to change the threshold and metric volume for compliance performance from 25% to 50% of the statewide average for items in Section 9(5)(f)(ii)-(v). Motion carried in a roll call vote of:

DiFranco- Yes  
Nallamathou- Yes  
Pointon- Yes  
Yacabucci- Yes  
Latty- Yes  
Ghafari- No  
Tilly- Yes  
Saab- No  
Alkotob- No  
Wohns- Yes  
Turner-Bailey- Yes

Motion by Ms. Pointon and seconded by Dr. Alkotob to lower the number of cardiac catheterizations to 100 procedures in section 9(2)(j) that are required as evidence to verify that the director of the service is appropriately trained. Motion carried in a vote of 11-Yes, 0- No, and 0- Abstained.

Motion by Dr. Alkotob, seconded by Dr. Saab to include the following language in section 11(2) (a-d) and accept the document as amended:

- (i) All primary PCIs performed at the applicant facility within the previous 12 months.
- (ii) All inpatients transferred from the applicant facility to another facility for PCI within the previous 12 months.
- (iii) 90% of patients who received diagnostic cardiac catheterizations at the applicant facility and received an elective PCI at another facility within 30 days of the diagnostic catheterization (based on physician commitments) within the previous 12 months.
- (iv) 50% of patients who received elective PCI within the previous 12 months at another facility (but did not receive diagnostic cardiac catheterization at applicant facility first) performed or referred by a physician who commits those PCIs toward the applicant's project.

Motion Carried in a vote of 11- Yes, 0- No, 0- Abstained.

## **B. Public Comment**

Melissa Cupp, RWC Advocacy

## **C. CCSAC Action**

Motion by Dr. Alkotob, seconded by Dr. Saab to accept the Department's draft language including all amendments made during the meeting.  
Motion Carried.

**VI. Adjournment**

Motion by Dr. Alkotob and seconded by Dr. Wohns to adjourn the meeting at 1:47 p.m. Motion Carried.