

**MICHIGAN DEPARTMENT OF COMMUNITY HEALTH (MDCH)
OPEN HEART SURGERY
STANDARD ADVISORY COMMITTEE (OHSSAC) MEETING**

October 2, 2012

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

DRAFT MINUTES

I. Call to Order

Chairperson Sell called the meeting to order @ 9:39 a.m.

A. Members Present:

Kourash Baghelai, M.D. Lakeland Healthcare
Craig Banasiak, Chrysler Group
Kevin Birchmeier, Covenant Healthcare
Alonso Collar, M.D. Sparrow Hospital
Alphonse Delucia III, M.D. Bronson Methodist Hospital
Duane DiFranco, M.D. BCBSM
John Fox, M.D. Priority Health in @ 9:50 a.m.
Jan Penney, MidMichigan Medical Center
Gaetano Paone, M.D. Henry Ford HS
Richard Prager, M.D. University of Michigan
Dagmar Raica, **Vice-Chairperson**, Marquette General HS via conference call
Timothy Sell, M.D. **Chairperson**, Oakwood Healthcare
Francis Shannon, M.D. Beaumont Health System

B. Members Absent:

Charlie Heckman, AFSCME Local 999
Ali Kafi, M.D. The Detroit Medical Center

C. Michigan Department of Community Health Staff present:

Tulika Bhattacharya
Sallie Flanders
Natalie Kellogg
Beth Nagel
Tania Rodriguez

Brenda Rogers

II. Review of Agenda

Motion by Mr. DiFranco, seconded by Dr. Prager, to modify the agenda to move Dr. Fox's presentation to a later part of the agenda as he was running late and accept the modified agenda. Motion Carried.

III. Declaration of Conflicts of Interests

None.

IV. Review of Minutes from September 6, 2012

Motion by Dr. Delucia, seconded by Mr. Birchmeier, to accept the minutes as presented. Motion carried.

V. Review of Charge and Final Recommendations

Dr. Paone gave a brief presentation on the quality measure motions that his sub-committee drafted (See attachment A).

Discussion followed.

Motion by Dr. Paone, seconded by Dr. Collar, to recommend that the MDCH adopt use of the composite star rating system developed by the Society of Thoracic Surgeons as the measure of OHS program quality, using the currently available CABG rating and incorporating all future adult cardiovascular procedure star ratings as they become available from the Society of Thoracic Surgeons. Motion Carried in a vote of 10- Yes, 2- No, and 0- Abstained.

Motion by Dr. Paone, seconded by Dr. Delucia, to recommend that any OHS program receiving a one-star rating be required to submit a report to the MDCH explaining the reason(s) for the unsatisfactory rating, and any program receiving 2 one-star ratings in a row be required to submit an action plan to the MDCH detailing specific actions to rectify program deficiencies. Upon receipt of the second one-star rating in the same composite metric, the OHS program would have 2 years to obtain a two-star rating prior to action being taken by the MDCH. Upon receipt of a two-star rating, the OHS program would be considered to be in good standing. Motion Carried in a vote of 12- Yes, 0- No, and 0- Abstained.

Motion by Dr. Paone, seconded by Dr. Baghelai, to recommend that the MDCH apply the same quality metric to all OHS programs in the state of Michigan. Motion Carried in a vote of 12- yes, 0- No, 0- Abstained.

Public Comment:

Robert Meeker, Spectrum Health

VI. Review of Motions

Dr. Fox reviewed proposed motions (See attachment B).

Motion by Dr. Fox, seconded by Dr. Shannon, any new open-heart surgery program approved under the standards, except those previously approved under CON, shall be required to achieve the minimum annual volume of 300 OHS cases, which demonstrated the need for the program, within three years or shall be required to relinquish their CON. Motion Failed in a vote of 5- yes, 6- No, 0- Abstained.

Public Comment:

Melissa Cupp, Wiener Associates

Motion by Dr. Fox, seconded by Mr. Banasiak, the number of OHS programs statewide is capped at 26. Exceptions are permissible in geographically underserved areas if no existing program is within 75 miles of the applicant. Motion Failed in a vote of 2- yes, 9- No, 0- Abstained.

Break @ 11:10 a.m. – 11:26 a.m.

Motion by Dr. Shannon, seconded by Dr. Fox, the State of Michigan will engage in a formal dialogue with the Michigan Society of Thoracic and Cardiovascular Surgeons (MSTCVS) for the purpose of analyzing open heart surgery outcomes data and recommending quality improvement initiatives. Motion Carried in a vote of 11- yes, 0- No, 0- Abstained.

Dr. Sell reviewed each charge.

Ms. Rogers gave an overview of the Working Draft language (See attachment C). The Department will finalize the language based on the decisions made at this meeting to present to the Commission at its December 13, 2012 meeting.

VII. Public Comment

Robert Meeker, Spectrum Health

VIII. Adjournment

Motion by Dr. Paone, seconded by Dr. DiFranco, to adjourn the meeting at 11:40 a.m. Motion Carried.

Motions Made by the Open Heart Standard Advisory Committee 2012

Motion from May 10, 2012 meeting:

Motion by Dr. Delucia, and seconded by Dr. Collar, for the SAC to decline to adopt quality or volume standards for Transcatheter Aortic Valve Replacement (TAVR) because:

1. STS/ACC/ACAI/AATS have already established institutional criteria for TAVR as well as a longitudinal registry, and
2. Major payers, including the Centers for Medicare and Medicaid Services, have established standards of institutional competence and coverage, and
3. Establishment of standards for a single, rapidly evolving technology could unintentionally constrain innovation and would be ill-advised.

Motion carried in a vote of 11- Yes, 2- No, and 0- Abstained.

Motion from August 7, 2012 meeting:

Motion by Dr. Collar, seconded by Dr. Paone to reduce the number of surgeries performed by a cardiac surgeon from 75 to 50 within the project delivery requirements section.

Motion Carried in a vote of 12- Yes, 1- No, 0- Abstained.

Motion from September 6, 2012 meeting:

Motion by Dr. Prager, seconded by Dr. Shannon, to utilize the STS database for cardiac procedures to reflect accurate maintenance volume reports. Motion carried in a vote of: 13- Yes, 0- No, and 0- Abstained.

Motion by Dr. Fox, seconded by Dr. DiFranco, all current and future open-heart surgery programs shall be required to:

Participate with the STS and the Michigan Society of Thoracic & Cardiovascular Surgeons (MSTCVS) quality collaborative

Submit STS and MSTCVS data to the department.

Motion Carried in a vote of 13- Yes, 0- No, and 0- Abstained.

From: John.Fox@priorityhealth.com [<mailto:John.Fox@priorityhealth.com>]

Sent: Tuesday, September 11, 2012 08:04

To: RodriguezT1@michigan.gov; Kafi, Ali; alonso.collar@sparrow.org; DELUCIAA@bronsonhg.org; checkman@nscl.msu.edu; cb171@chrysler.com; Dagmar.Raica@mghs.org; ddifranco@bcbsm.com; Fshannon@beaumont.edu; gpaone1@hfhs.org; jan.penney@midmichigan.org; kbirchmeier@chs-mi.com; kbaghelai@yahoo.com; rprager@umich.edu; Timothy.Sell@oakwood.org

Cc: NagelB@michigan.gov; BlakeneyS@michigan.gov; KelloggN@michigan.gov; CollinsM11@michigan.gov; GriffithsC@michigan.gov; RogersB1@michigan.gov; DeClarkeJ@michigan.gov; Bhattacharyat@michigan.gov; PotchenJ@michigan.gov; JensonM1@michigan.gov; BrimM@michigan.gov

Subject: RE: 9.6.12 OHS SAC Meeting Materials

Good morning, everyone.

In preparation for the upcoming meeting on October 2nd, I'd like to submit for your review and comment three motions. I've summarized them below. The attached document provides more details including proposed statutory language.

As my ninth grade English teacher Mrs. Klein was fond of saying, there must be humility in authorship. So your comments and criticisms are welcomed. The more we work out ahead of time, the shorter the meeting on the 2nd.

Have a good day.

John

Motion 1

Any new open-heart surgery program approved under the standards shall be required to achieve the minimum annual volume of 300 OHS cases, which demonstrated the need for the program, within three years or shall be required to relinquish their CON.

Motion 2.1

Open-Heart Surgery Programs are required to maintain at least a two-star composite quality rating from the Society for Thoracic Surgery national database. (more details on the implications in the statutory language.

Alternative Motion 2.2

Open-Heart Surgery Programs are required to maintain at least a two-star quality rating in two out of any three consecutive three quality reports from the Society for Thoracic Surgery national database.

Motion 3

The number of OHS programs statewide is capped at 26. Exceptions are permissible in geographically underserved areas if no existing program is within 75 miles of the applicant.

Intent: The intent is not to close existing programs but rather to preclude the addition of new programs until need for additional capacity is demonstrated. The SAC has been presented evidence that we have an oversupply of capacity because of previous approval of additional programs during a period of declining open-heart surgery rates.

John L. Fox, MD, MHA
AVP Medical Affairs
1231 E. Beltline NE, MS 1255
Grand Rapids, MI 49525

616.464.8454 (o)
616.460.0241 (c)
616.942.0024 (f)

PriorityHealth



Please consider the environment before printing this e-mail.

From: Rodriguez, Tania (DCH) [<mailto:RodriguezT1@michigan.gov>]

Sent: Tuesday, September 04, 2012 2:49 PM

To: Ali Kafi; Alonso Collar; Alphonse Delucia ; checkman@nscl.msu.edu; Craig Banasiak; Dagmar Raica; Duanne DiFranco; Francis Shannon ; Gaetano Paone; Jan Penney ; John Fox; Kevin Birchmeier; Kourosh Baghelai; Richard Prager; Timothy Sell

Cc: Nagel, Elizabeth (DCH); Blakeney, Scott (DCH); Kellogg, Natalie (DCH); Rodriguez, Tania (DCH); Collins, Melinda (DCH); Griffiths, Carol (DCH); Rogers, Brenda (DCH); DeClarke, Janet (DCH); Bhattacharya, Tulika (DCH); Potchen, Joseph (AG); Jenson, Melissa (AG); Brim, Melanie B. (DCH)

Subject: 9.6.12 OHS SAC Meeting Materials

Hello Everyone,

Attached is an agenda and materials for the upcoming Open Heart Surgery Standard Advisory Committee Meeting.

Please feel free to contact either Brenda Rogers or me if you have questions.

Thanks,

Tania Rodriguez
MDCH - Certificate of Need Policy
Capitol View Building
201 Townsend Street
Lansing, MI 48913
Phone: (517) 335-6708
Fax: (517) 241-1200
rodriguez1@michigan.gov

** ** * PRIVILEGED AND CONFIDENTIAL ** ** *

This email transmission contains privileged and confidential information intended only for the use of the individual(s) or entity named above. Any unauthorized review, use, disclosure or distribution is prohibited and may be

a violation of law. If you are not the intended recipient or a person responsible for delivering this message to an intended recipient, please delete the email and immediately notify the sender via the email return address or <mailto:postmaster@priorityhealth.com>. Thank you.

** ** * PRIVILEGED AND CONFIDENTIAL * ** ** *

This email transmission contains privileged and confidential information intended only for the use of the individual(s) or entity named above. Any unauthorized review, use, disclosure or distribution is prohibited and may be a violation of law. If you are not the intended recipient or a person responsible for delivering this message to an intended recipient, please delete the email and immediately notify the sender via the email return address or <mailto:postmaster@priorityhealth.com>. Thank you.

** ** * PRIVILEGED AND CONFIDENTIAL * ** ** *

This email transmission contains privileged and confidential information intended only for the use of the individual(s) or entity named above. Any unauthorized review, use, disclosure or distribution is prohibited and may be a violation of law. If you are not the intended recipient or a person responsible for delivering this message to an intended recipient, please delete the email and immediately notify the sender via the email return address or <mailto:postmaster@priorityhealth.com>. Thank you.

This message was secured by [ZixCorp](#)