

MDH - Health Regulatory Commissions - Maryland Health Care Commission, Health Services Cost Review Commission, and the Maryland Community Health Resources Commission

MISSION

The mission of the Maryland Health Regulatory Commissions is to plan for health system needs, constrain costs, improve quality and access, and encourage informed decision-making. The Commissions promote an equitable and efficient health care system for all Maryland residents by providing timely and accurate information, enforcing accountability, improving Maryland's system of rate regulation, and developing strategies to deliver comprehensive health care regardless of ability to pay.

VISION

The Commissions envision a state in which all residents hold the health care system accountable and have access to affordable, high quality, and integrated health care services through programs that serve as national models.

KEY GOALS, OBJECTIVES, AND PERFORMANCE MEASURES

Goal 1. Improve quality of care in the healthcare industry.

Obj. 1.1 By the end of calendar year 2022, at least 95 percent of eligible Maryland acute general hospitals shall perform at or better than the nation on the prevention of Central Line Associated Bloodstream Infection (CLABSIs) in Intensive Care Units (ICUs), Clostridioides difficile infections (C.diff), Catheter Associate Urinary Tract Infections (CAUTIs), and Methicillin Resistant Staphylococcus Aureus (MRSA) infections.

Performance Measures (Calendar Year)	2021 Act.	2022 Act.	2023 Act.	2024 Act.	2025 Est.	2026 Est.	2027 Est.
Percent of acute general hospitals performing at or above the national average on preventing CLABSIs in ICUs	84%	74%	90%	100%	92%	100%	100%
Percent of acute general hospitals performing at or above the national average on preventing C.diff infections	100%	98%	100%	100%	100%	100%	100%
Percent of acute general hospitals performing at or above the national average on preventing CAUTIs	94%	90%	100%	100%	100%	100%	100%
Percent of acute general hospitals performing at or above the national average on preventing MRSA	N/A	94%	100%	97%	97%	100%	100%

Obj. 1.2 Maryland hospitals will improve patient satisfaction such that at least 70 percent of patients report that they rate the hospital 9 or 10 on a scale of 1 to 10 and would recommend the hospital to family and friends.

Performance Measures	2021 Act.	2022 Act.	2023 Act.	2024 Act.	2025 Act.	2026 Est.	2027 Est.
Overall hospital performance on patient experience of care (patients would recommend)	66%	65%	64%	64%	64%	67%	68%
Number of hospitals improving patient satisfaction and recommending the hospital to family and friends	16	11	N/A	N/A	N/A	N/A	N/A
Percent of acute care general hospitals that received a patient rating of 9 or 10 on a scale of 0-10	N/A	N/A	64%	65%	66%	68%	70%

MOOR

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Obj. 1.3 To reduce complication and hospital readmissions and improve compliance with best practices.

Performance Measures (Calendar Year)	2021 Act.	2022 Act.	2023 Act.	2024 Act.	2025 Est.	2026 Est.	2027 Est.
30 Day, all hospital case-mix adjusted readmission rate	11%	11%	12%	11.38%	11%	11%	11%
Case-mix adjusted, potentially preventable complication rate	0.82	0.75	0.80	0.80	0.71	0.71	0.71

Obj. 1.4 To improve care coordination for high needs Medicare fee-for-service beneficiaries through Integrated Care Networks.

Performance Measures	2021 Act.	2022 Act.	2023 Act.	2024 Act.	2025 Act.	2026 Est.	2027 Est.
Number of high needs Medicare fee-for-service beneficiaries with a known primary care provider	11,523	11,902	12,053	11,800	14,994	14,994	14,994
Number of high needs Medicare fee-for-service beneficiaries with a known care manager	2,382	2,495	2,812	2,853	4,364	4,364	4,364
Number of high needs Medicare fee-for-service beneficiaries with a care alert	7,109	8,488	9,141	8,743	N/A	N/A	N/A

Obj. 1.5 By the end of calendar year 2023, at least 80 percent of survey respondents would recommend nursing homes.

Performance Measures	2021 Act.	2022 Act.	2023 Act.	2024 Act.	2025 Act.	2026 Est.	2027 Est.
Overall Nursing Home performance on Experience of Care.	N/A	75%	69%	71%	70%	72%	72%

Obj. 1.6 By the end of calendar year 2023, at least 80 percent of survey respondents would recommend home health agencies.

Performance Measures (Calendar Year)	2021 Act.	2022 Act.	2023 Act.	2024 Act.	2025 Est.	2026 Est.	2027 Est.
Overall Home Health performance on Experience of Care.	N/A	76%	75%	75%	75%	76%	76%

Obj. 1.7 By the end of calendar year 2023, at least 90 percent of survey respondents would recommend hospice agencies.

Performance Measures (Calendar Year)	2021 Act.	2022 Act.	2023 Act.	2024 Act.	2025 Est.	2026 Est.	2027 Est.
Overall Hospice performance on Experience of Care.	N/A	86%	85%	83%	83%	84%	84%

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Obj. 1.8 By the end of the 2022-2023 flu season, the statewide health care worker vaccination rate shall improve for each of the following provider categories.

Performance Measures	2021 Act.	2022 Act.	2023 Act.	2024 Act.	2025 Act.	2026 Est.	2027 Est.
The percent of health care workers in hospice agencies who are vaccinated against influenza will increase by 5% compared to the 2021-22 flu season.	N/A	83%	82%	86%	77%	82%	82%
The percent of health care workers in home health agencies who are vaccinated against influenza will increase by 5% compared to the 2021-22 flu season.	N/A	79%	70%	69%	67%	69%	69%
At least 90% of health care workers in nursing homes will be vaccinated against influenza.	N/A	85%	74%	76%	72%	76%	76%
At least 75% of health care workers in assisted living facilities will be vaccinated against influenza.	N/A	65%	57%	59%	48%	50%	50%

Obj. 1.9 Reduce the average time patients spend in the emergency room in Maryland.

Performance Measures (Calendar Year)	2021 Act.	2022 Act.	2023 Act.	2024 Act.	2025 Est.	2026 Est.	2027 Est.
Median time patients spent in the emergency department before being discharged home.	240	242	250	238	251	250	250

Goal 2. Improve costs in the health care industry.

Obj. 2.1 Improve consumer access to healthcare pricing so that Maryland residents can use informed decision making to choose affordable health care.

Performance Measures	2021 Act.	2022 Act.	2023 Act.	2024 Act.	2025 Act.	2026 Est.	2027 Est.
Number of consumer visits to Wear the Cost website	25,584	9,761	6,777	13,998	12,233	11,010	10,459
Percent change year over year in the number of consumer visits to Wear the Cost website	43%	-62%	-31%	107%	-13%	-10%	-5%
Percentage of reporting entities that submitted “clean” data (no errors) to the APCD thirty (30) days after a submission deadline	N/A	100%	94%	89%	86%	95%	95%

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Obj. 2.2 Finance the Uncompensated Care Fund through the continuation of the new All-Payer model.

Performance Measures	2021 Act.	2022 Act.	2023 Act.	2024 Act.	2025 Act.	2026 Est.	2027 Est.
Maryland hospitals regulated	56	56	56	54	58	58	58
Maryland hospitals paying into Uncompensated Care Fund	18	18	26	21	21	19	20
Maryland hospitals receiving funding from Uncompensated Care	29	29	21	23	23	25	24
Maryland hospitals operating under global (GBR) payment structure	51	52	52	50	53	53	53
Maryland hospitals operating under Potentially Avoidable Utilization	51	47	47	44	48	48	48
Percent of regulated hospitals providing treatment to all patients regardless of ability to pay	100%	100%	100%	100%	100%	100%	100%

Obj. 2.3 Increase access to integrated primary and behavioral health services in community-based settings.

Performance Measures	2021 Act.	2022 Act.	2023 Act.	2024 Act.	2025 Act.	2026 Est.	2027 Est.
Number of Community Health Resources Commission grantees who provide access to integrated behavioral health and primary care services in community-based settings	8	6	5	3	3	5	4

Goal 3. Facilitate the adoption of new technologies and health care data innovations and assess their impact on access and quality.

Obj. 3.1 Increase the use of health information exchange data by 5 percent from the prior year.

Performance Measures	2021 Act.	2022 Act.	2023 Act.	2024 Act.	2025 Act.	2026 Est.	2027 Est.
Number of unique users of the State Designated health information exchange (CRISP)	N/A	N/A	170,226	63,672	70,698	78,500	87,100
Unique number of hospital advanced directives stored in an electronic health record system and made available to CRISP	N/A	N/A	384,039	445,643	798,940	878,000	966,000

Obj. 3.2 Per capita Maryland hospital revenues will grow at an annual rate that does not exceed 3.58 percent, the long term change in the per capita Gross State Product.

Performance Measures (Calendar Year)	2021 Act.	2022 Act.	2023 Act.	2024 Act.	2025 Est.	2026 Est.	2027 Est.
Alternative Rate Methodology (ARM) applications completed	30	27	22	21	18	20	20
¹ Maryland all-payer per capita hospital revenue growth	5.90%	5.67%	3.33%	3.99%	3.58%	3.58%	3.58%

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Obj. 3.3 Medicare fee-for-service hospital expenditures per Maryland Medicare fee-for-service beneficiary will grow more slowly than the national Medicare fee-for-service expenditures per beneficiary.

Performance Measures (Calendar Year)	2021 Act.	2022 Act.	2023 Act.	2024 Act.	2025 Est.	2026 Est.	2027 Est.
¹ Growth in Medicare fee-for-service hospital expenditures per Maryland beneficiary compared to the growth in national Medicare fee-for-service hospital expenditures per beneficiary	<3.22%	>2.07%	<4.16%	<2.91%	=0.00	=0.00	=0.00

Obj. 3.4 Facilitate the adoption of new technologies and health care data innovations and assess their impact on access and quality.

Performance Measures	2021 Act.	2022 Act.	2023 Act.	2024 Act.	2025 Est.	2026 Est.	2027 Est.
The percent of primary care telehealth encounters that resulted in an in-person visit for the same services	N/A	N/A	N/A	0.08	7.0%	6.0%	6.0%
The number of distinct primary care taxonomies where a telehealth encounter resulted in an in-person visit for the same services	N/A	N/A	N/A	0.13	N/A	N/A	N/A

Obj. 3.5 Increase the number of commercial payer members in an advanced payment model (APM) arrangement from the prior year.

Performance Measures	2021 Act.	2022 Act.	2023 Act.	2024 Act.	2025 Act.	2026 Est.	2027 Est.
Total combined APM contracts of the largest commercial payers operating in the state	N/A	N/A	N/A	51	-	-	-
Percent change in the APM member count for the largest commercial payers operating in the state	N/A	N/A	N/A	2%	0%	0%	0%

Obj. 3.6 Decrease use of hospital emergency departments for non-urgent care and reduce avoidable hospitalizations by establishing reverse referral projects and other community-hospital partnerships.

Performance Measures	2021 Act.	2022 Act.	2023 Act.	2024 Act.	2025 Act.	2026 Est.	2027 Est.
Number of reverse referral pilot projects and community hospital partnerships	7	6	3	5	5	7	4

Goal 4. Promote new models of care to address barriers to reducing the Total Cost of Care (TCOC) in Maryland and seize on new authorities under Health Insurance: Two-Sided Incentive Arrangements and Capitated Payments.

Obj. 4.1 Increase the number of providers that participate in new care delivery models.

Performance Measures	2021 Act.	2022 Act.	2023 Act.	2024 Act.	2025 Est.	2026 Est.	2027 Est.
The number of providers that participate in value-based care models	N/A	N/A	5,678	2,837	2,812	2,900	3,000

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Goal 5. Address health disparities among the privately insured population by examining healthcare spending by race and ethnicity using the Medical Care Data Base (MCDB).

Obj. 5.1 Increase race and ethnicity reporting among the privately insured population in the Medical Care Data Base (MCDB).

Performance Measures	2021 Act.	2022 Act.	2023 Act.	2024 Act.	2025 Est.	2026 Est.	2027 Est.
Percentage of payers (reporting entities) that are reporting 75% or more on Race/Ethnicity in the Medical Care Data Base (MCDB)	N/A	N/A	0	60.0%	66.7%	70.0%	75.0%

OTHER PERFORMANCE METRICS

Performance Measures	2021 Act.	2022 Act.	2023 Act.	2024 Act.	2025 Act.	2026 Est.	2027 Est.
Funds raised through HSCRC not directly supporting hospital finance (\$)							
Medicaid Hospital Assessment (M00Q01.03)	294,825,000	294,825,000	294,825,000	244,825,000	294,825,000	444,825,000	444,825,000
Health Care Coverage Fund (M00Q01 & M00L01.03)	200,487,989	206,146,758	211,913,241	224,000,685	231,244,975	241,101,951	249,540,519
Nurse Support Program II (R62I00.38)	17,784,173	17,375,642	18,876,135	19,559,841	20,203,913	21,186,839	21,822,444
Nurse Support Program I (non-budgeted)	17,466,612	17,321,473	19,173,306	19,870,911	20,570,937	21,625,966	22,274,745
HSCRC User Fees (M00R01.02)	18,865,827	17,772,298	16,907,052	17,994,005	23,991,802	26,893,022	26,058,184
Maryland Patient Safety Center (non-budgeted)	521,056	248,028	N/A	N/A	N/A	N/A	N/A
Health Information Exchange (non-budgeted)	5,170,000	9,240,000	4,800,000	4,800,000	8,420,000	12,060,000	12,060,000

NOTES

¹ Updates to prior years to reflect updated census data