

COMMONWEALTH OF PENNSYLVANIA
BOARD OF PENNSYLVANIA RURAL HEALTH REDESIGN CENTER AUTHORITY
THIRD OFFICIAL BOARD OF DIRECTOR MEETING
WEDNESDAY, JULY 29th, 2020
CONFERENCE CALL
9:30AM-10:30AM

Meeting Minutes of Public Session

Call to Order:

Meghna Patel, Deputy Secretary of Health Innovation on behalf of Secretary Levine, RHRCA-Chair, called the meeting to order and introduced Sarah Boateng, PA-DOH Executive Deputy Secretary. Ms. Patel requested that Board Members, Department Staff and Members of the Public introduce themselves and their organization affiliation.

Board Introductions:

Commonwealth Representatives:

1. Meghna Patel, Deputy Secretary for Health Innovation represented as the Chair on behalf of Secretary Rachel Levine from PA Department of Health (DOH);
2. Dr. Doug Jacobs, Chief Innovation Officer represented Secretary Teresa Miller from PA Department of Human Services (DHS);
3. Megan Barbour, Policy Director, PA Insurance Department (PID) represented Jessica Altman, Insurance Commissioner, (PID)

Payer Representatives:

1. Sean Burns, VP Reimbursement and Network Infrastructure, Highmark;
2. John Bulger, CFO, Geisinger;
3. Linda Darga, Regional Lead Value Based Solutions Network on behalf of Jason Rottman, CEO, Aetna;
4. Sarah Macderment, Actuarial Director, Geisinger;
5. Glenn D. Pomerantz, SVP, Gateway; RHRCA Board Vice Chairman
6. Raymond Prushnok, AVP Program Development, UPMC;
7. Andrew Richard, Sr. Director Accountable Care Solutions on behalf of Andrew Sheinen, Senior Director, Aetna
8. Mike Sweeney, VP, UPMC;

Hospital Representatives (1 additional representative pending confirmation):

1. Sara Adornato, CEO, Barnes-Kasson County Hospital;
2. Tammy Anderer, CAO, Geisinger Jersey Shore Hospital;
3. John Lewis, CEO, Armstrong County Memorial Hospital;
4. James Pettinato, Chief Clinician Director of Patient Care Services, Wayne Memorial Hospital
5. Jack Sisk, CFO, Punxsutawney Area Hospital;
6. Kate Slatt, Vice President of Innovative Payment and Care Delivery on behalf of Andy Carter, CEO, Hospital Association of Hospital and Healthsystem Association of PA;
7. Loren Stone, CEO, Endless Mountains Health Systems; and

National Recognized Experts:

1. Donna Kinzer, Global Budget Expert, DK Healthcare Consulting; and
2. Brock Slabach, SVP-National Rural Health Association

Department Staff:

3. Sarah Boateng, Executive Deputy Secretary, PA-DOH;
4. Diana Carpenter, Clinical Project Manager, RHRO
5. Keith B. Fickel, Legal Counsel DOH;
6. Emily Roussel, Executive Assistant Health Innovation Deputate;
7. Jennifer Torres Del Valle, Grant Manager, RHRO;
8. Janice Walters, COO, RHRO;
9. Gary Zegiestowsky, CEO, RHRO;

Members of the Public:

1. David Shafer, CEO of Aetna, PA

Opening Remarks by Dr. Rachel Levin, Secretary of Health and RHRCA Board Chairman

- Secretary Levine thanked Board members and the RHRCA staff for their time and commitment to the PA Rural Health Mode (PARHM) and provided updates on discussions between DOH and CMMI as well as on COVID-19 and the numerous efforts that are being led and directed by the Commonwealth

June 18th Board Minutes Approval-by Ms. Patel on behalf of Dr. Levine, RHRCA-Chair:

- Ms. Patel called for any edits or changes to the meeting minutes. One minor correction was noted. Motions were made and passed unanimously with noted edit to the minutes.

Introduction of the RHRCA-Executive Director: Gary Zegiestowsky- by Ms. Patel on behalf of Dr. Levine, RHRCA-Chair:

- Mr. Zegiestowsky provided an overview of his employment experience and educational background, highlighting prior experience that he will leverage in his position with the RHRCA.

Key Updates

- **Communication of Board Seat Changes**
Ms. Patel reported two new additions to the board:
 - Kate Slatt- Vice President of Innovative Payment and Care Delivery is joining as a board member replacing Andy Carter, CEO-HAP.
 - Keith Mitchell, Regional Lead Value Based Solutions Network at Aetna is joining as a board member replacing Jason Rottman, Aetna-CEO.
- **RHRCA Legal Organization Structure Update**
 - Ms. Patel stated procuring legal services through the Office of General Counsel here in the Commonwealth is being worked on to discuss how DOH will legally incorporate the authority and 501C 3 setup procedures.

Approval of Technical Specifications for Rural Hospital Global Budgets Submissions to CMMI 6/30/20:

- **Unplanned Volume Shift Adjustment (UVS):**

- Ms. Walters stated that the purpose of the discussion was to provide approval for the Board to submit key methodology for UVS that will be part of the detailed business requirements being submitted to CMMI, no later than June 30th.
- Ms. Walters explained for those unfamiliar with UVS that “unplanned volume shift accounts for unplanned market shifts by populations served in the rural hospital service area”.
- The proposed UVS methodology has been preliminarily approved by Medicare. The goal is “to align this methodology with Medicare.”
- Ms. Walters responded to several questions in the areas of defining service line levels, hospital vs. non-hospital settings and unexpectedly higher medication costs. Some amendments to the language were added based on these discussions.
- *Mr. Stone made the motion for the approval of the motion with the amendments to the language added; Mr. Pomerantz seconded it. The motion passed unanimously.*
- **Virtual Cap Methodology Change:**
 - Ms. Walters then moved the agenda forward with a discussion about the virtual cap methodology. Currently the way the methodology is written is, the global budgets are calculated, and there’s a reconciliation that is done monthly that compares the fee for service payments to the global budget.
 - In order to prevent the possibility of hospitals being in a situation where they would have to pay money back due to an overpayment, there was a recommendation that a threshold would be built into interim payment methodology.
 - Specifically, it was suggested that an “adjustment to the virtual cap methodology to allow for a threshold payment to be inserted into it, that basically would say interim payments would be limited 16 to the 12-month rolling fee for service average of the prior 12 months until that final reconciliation can be done.”
 - Another suggestion made to reduce administrative burden was “that the payers are not required to bring forth additional payment to the hospitals until that interim payment threshold would reach \$50,000.
 - Ms. Patel then asked for a motion to expand the virtual cap interim payment threshold methodology for all hospitals.
 - *Mr. Burn made the motion for the approval; Mr. Pettinato seconded it. There were no objections or abstentions and the motion passed unanimously.*

Formal Votes for RHRCA-Policies:

The following policies were reviewed during the Executive Session held on June 18, 2020 from 2:00-3:00. All Board recommendations or changes were incorporated and presented by Ms. Walters.

- **RHRCA-Public Comment Policy:**
 - *Mr. Lewis made the motion for the approval of the motion; Mr. Pomerantz seconded it. The motion passed unanimously*
- **RHRCA-Program Administrative Procedure Policy:**
 - *Mr. Pomerantz made the motion for the approval; Mr. Lewis seconded it. The motion passed unanimously.*

RHRCA-Board Meeting Calendar:

- Ms. Patel asked that Board members be aware of dates and times for upcoming meetings.

Opportunity for Public Comment:

- Ms. Patel opened the floor for public comments. No comments were provided by public members.

Before the meeting concluded, Ms. Patel turned the floor over to Mr. Zegiestowsky to update the Board on his priorities for the next ninety days.

Lastly, Ms. Patel announced that an Executive Session will be conducted today at 2:00pm. Only RHRCA-Board Members were invited.

Before the meeting was adjourned, Ms. Patel announced the date for the Next Board Meeting – July 29th, 2020 from 9:00 am to 11:00 am. The Agenda items are as follows:

- Call to Order
- Board Minutes Approval
- Formal Votes from Prior Meeting’s Executive Session
- Key Updates
 - Communication of Board Nominations
 - Legal Organization Structure
- Review Committee Nominations and Votes
 - Executive Committee
 - Audit and Finance Committee
- Opportunity for Public Comment

The meeting adjourned at 2:00 pm. *Mr. Pomerantz motioned the conclusion of the meeting and Mr. Pettinato seconded. There were no objections or abstentions and the motion was passed unanimously.*