A meeting regarding the Certificate of Need (CoN) hospice services rules convened on September 17, 2015. The meeting was held at the Department of Health, 310 Israel Road SE, in Point Plaza East, Conference Room 153, Tumwater, WA 98504.

PRESENT:
Zosia Stanley, WSHA
Steven Pentz, Providence
Becki Biddulph, Avamere
Frank Fox, Providence
Sonja Houser, Peacehealth
Barb Hansen, WSHPCO
Julie Ostling, Assured
Leslie Emerick, WSHPCO
Leslie Dean, Assured
Jody Corona, HFPD
Mark Rake-Marona, Franciscan
Catherine Koziar, Providence
Nancy Field, Field Associates

STAFF PRESENT:
Bart Eggen, Executive Director
Janis Sigman, Program Manager
Beth Harlow, Analyst
Katherine Hoffman, Policy Analyst

1:00PM – Open Meeting, welcome and introductions

Overview

Katherine Hoffman – goals for workshop, foundations of CoN program
Janis Sigman – current hospice service requirements
Beth Harlow – current hospice need methodology presentation
Discussion

- Participants discussed rules petition that served as the basis for opening this particular rulemaking process.

- Department described rulemaking process, issue identification, drafting, stakeholder participation. Department clarified content of petition, including methodology, and what portion of the rule was opened by CR 101 – only hospice services.

- Participants discussed value in reviewing prior version of draft rules. Some asserted that there was. However, it was noted that the prior workgroup did not draft proposed rules, although there may be other materials providing insight as to prior work completed and group consensus.

- The workgroup identified the following topics for further discussion:
  - Planning areas
    - Currently by county
    - Clarity in definition
    - Redefine planning area
    - Cross-county zip codes
    - Accountable communities of health – impact on planning
  - Data and data sources
    - How to count concurrent patients
    - CMS data
  - Projection horizon
  - Length of stay
  - ADC (Average daily census) – viability projections
  - Death with dignity
  - In/out migration
  - Population trends
  - Closed facilities
  - Value of separating age cohorts
  - Cancer v non-cancer (meaningful distinction)
  - Enforcement/evaluation of post CoN issuance compliance/performance
  - Special populations (including ethnic minorities) - special considerations for utilization
  - Superiority criteria
  - Exceptions
  - Service area (agency specific) vs. planning area (geographic)
  - Hospice specialties (i.e. pediatric, etc.)
• Use of non-medical criteria for scope of care
• Sale/purchase/lease
• Frequency of concurrent review cycles; timing of review
• Source of access/utilization standards (local, state, regional, national)
• Effectiveness of current agencies
• Choice in every county
• Rural vs urban (different stand -35 and ____?)
• Performance standard for issuance
• How to count capacity for closed facilities
• Numeric method
  Is looking at three years average appropriate for projection?
  Growth of total population instead of target population
  Is a statewide standard appropriate? (urban vs rural)
  Look at age cohorts in individual counties
• Aging population
• MCO enrolled populations (impact of Medicaid MCO)
  Be mindful of regional provider contracts
  What does Washington want to see with access to hospice services?
• Tribal
• Financial viability
• For-profit vs. nonprofit
• Competition and choice
• “Red flags” in application that department should be aware of?
  As we review applications, what are the triggers and red flags?

Conclusion

• Participants discussed how consensus will be reached and decisions made; assertion was that once a decision is reached and group consensus obtained, issue will be removed from agenda and considered complete.
• Next steps:

  Department will send petition documents to group participants via listserv and publish to hospice rulemaking webpage.