Meeting Minutes



Joint Commission on Health Care Tuesday, November 22, 2011 10:00 a.m. Senate Room A – General Assembly Building

Members in Attendance

Delegate Robert H. Brink

Delegate David L. Bulova

Delegate Benjamin L. Cline

Delegate T. Scott Garrett

Delegate Algie T. Howell, Jr.

Delegate John M. O'Bannon, III

Senator George L. Barker

Senator Harry B. Blevins

Senator R. Edward Houck

Senator L. Louise Lucas

Senator Ralph S. Northam

Senator Linda T. Puller.

Delegate Christopher K. Peace William C. Wampler, Jr. (conference)

The Honorable William A. Hazel, Jr.

Delegate Benjamin L. Cline, Chair called the Joint Commission meeting to order and recognized Kim Snead who provided an overview of the meeting agenda. In addition, Ms. Snead noted that the *Virginia Department of Health's Report on the Status of Nursing Facility Staffing and Virginia's Conversion Health Foundations 2010 Report* were included in the member's notebooks.

The purpose of the meeting was for Commission members to consider and vote on policy options to address the findings contained within the 2011 JCHC studies. The following options were voted on by JCHC members.

JCHC Member Voting on Decision Matrix

Considerations in Adding Pseudoephedrine as a Schedule III Controlled Substance (SB 878)

✓ **Option 3:** Introduce legislation to amend of the *Code of Virginia* § 18.2-248.8 to require that the log, currently required to be maintained by sellers of products containing ephedrine, pseudoephedrine, or any of their salts, isomers, or salts of isomers, must be kept by a State level law enforcement agency in electronic format, utilizing the National Precursor Log Exchange (NPLEx). <u>Vote 13-0-1</u>

Study of Eating Disorders in the Commonwealth (SJR 294)

- ✓ **Option 2:** Request by letter of the JCHC Chairman that the Virginia Department of Education encourage grade schools, middle schools, and high schools to provide homeroom teachers and school nurses with instruction *or information* approved by the American Medical Association or the National Eating Disorders Association on how to recognize eating disorders and how to help youth who may be affected get the care they need. <u>Vote 9-4-1</u>
- ✓ **Option 3:** Request by letter of the JCHC Chairman that the Virginia Department of Education encourage schools to provide instruction *or information* approved by the American Medical Association or the National Eating Disorders Association on healthy eating habits and positive body image to students at some point during the fourth, fifth, or sixth grade. Vote 9-4-1
 - **X** Potential Option 5: Request by letter of the JCHC Chairman that the Virginia Department of Health and the Virginia Department of Education collaborate with the National Eating Disorders Association, and other interested stakeholders, to develop an evidence-based eating disorder screening program for implementation in Virginia's school systems. JCHC staff will report back to the JCHC in 2012 regarding progress made on developing an evidence-based eating disorder school screening program and deliver staff's recommendations for legislative implementation. Vote 5-8-1

✓ Amended Potential Option 5: Request by letter of the JCHC Chairman that the Virginia Department of Health and the Virginia Department of Education collaborate with the National Eating Disorders Association, and other interested stakeholders, to develop study an evidence-based eating disorder screening program for potential implementation in Virginia's school systems. JCHC staff will report back to the JCHC in 2012 regarding progress made on developing an evidence based eating disorder school screening program and deliver staff's and staff recommendations for potential legislative implementation. Vote 9-4-1

Replicating James Madison University's Caregivers Community Network

✓ **Option 1:** Take no action. No motion was made.

Study of Shaken Baby Syndrome (HJR 632)

- ✓ Revised Option 4: Request by letter of the chairman that the Departments of Health, Social Services, Behavioral Health and Developmental Services, Rehabilitative Services, and Education collaborate with other public and private sector stakeholders to identify current best practices, state-wide programs, surveillance and data, initiatives and interventions dedicated to addressing infant mortality in Virginia, including those efforts dedicated with specific attention to Shaken Baby Syndrome as a cause of infant mortality. The Virginia Department of Health, by July 1, 2013 and in collaboration with other agencies and stakeholders, shall submit a report to the Joint Commission on Health Care [and the Virginia Disability Commission] detailing these efforts with recommendations for improving public awareness and professional intervention and collaborative practices, and future program and policy development, supported by appropriate evaluation and outcome measures. Vote 13-0-1
- ✓ **Option 5**: Introduce a joint resolution to establish the third week of April as Shaken Baby Awareness Week in Virginia. The resolution would be in memory of Jared and the many other victims of Shaken Baby Syndrome in Virginia. <u>Vote 13-0-1</u>

Involuntary Admission of Persons in Need of Substance Abuse Treatment (HJR 682)

✓ **Option 2**: Include in the 2012 work plan for the Behavioral Health Care Subcommittee, a study of whether mandatory outpatient treatment can be structured to address more effectively the needs of persons with substance abuse treatment. In addition, by letter of the Chairman, request that representatives of the Department of Behavioral Health and Developmental Services, community services boards, and other interested parties participate in the study. <u>Vote 13-0-1</u>

Review of Certain Board of Pharmacy Practices (HB 1961 and HB 1966)

✓ **Option 1**: Provide a written report to the Chairman of the House Committee on Health, Welfare and Institutions without taking any other action. No motion was made.

Chronic Health Care Homes (HJR 82 – 2010)

✓ **Option 2**: Continue to monitor the progress of primary care medical homes and other health care innovations in Virginia by including reports on initiatives in the 2012 work plan of the Healthy Living/Health Services Subcommittee. <u>Vote 13-1</u>

All-Payer Claims Databases

✓ **Option 2:** Introduce legislation and accompanying budget amendment (*amount is dependent on decisions made related to the APCD design and funding structure*) to amend Chapter 7.2 of Title 32.1 of the *Code of Virginia* to expand health data collected in order to develop an All-Payer Claims Database. <u>Vote 13-0-1</u>

Option 4: Include in the legislation or a Chairman's letter (if Option 2 or 3 is approved), specific attributes for the All-Payer Claims Database.

- A. Governance structure is housed at:
- ✓ 1. Virginia Health Information (VHI) <u>Vote 13-0-1</u>

- B. Types of data collected
- ✓ 1. Adhere to national reporting standards for medical claims <u>Vote 13-0-1</u> (e.g. Accredited Standard Committee X12 standards when finalized)
 - C. Data collection from health insurers
- ✓ 1. Mandated collection <u>Vote 13-0-1</u>

Public Access to Vital Records (SB 865)

Option 2: Introduce legislation to amend the *Code of Virginia* § 32.1-271(D) to change the time period that birth records "in the custody of the State Registrar may become public information" from 100 years to:

X B. 75 years (in compliance with the Library of Virginia's statutory confidential records time period.)

Vote 4-9-1

Option 3: Introduce legislation to amend the *Code of Virginia* § 32.1-271(D) to change the time period that marriage, divorce, and annulment records "in the custody of the State Registrar may become public information" from 50 years to:

X B. Immediately (the records held by Circuit Courts are open for public inspection already) Vote 5-8-1

✓ *Potential 3C.* 25 years Vote 10-3-1

Option 4: Introduce legislation to amend the *Code of Virginia* § 32.1-271(D) to change the time period that death records "in the custody of the State Registrar may become public information" from 50 years to:

✓ B. 25 years (Social Security Death Index provides extensive information already) Vote 10-3-1

X Potential 4C. Immediately Vote 3-10-1

Option 8: Introduce a budget amendment to require the State Registrar to create by 2014, a publicly-available index of vital records that are authorized for release to the public. (At a minimum, the Index would include first and last name, year of birth, and gender.)

X C. VDH will seek to enter into a public-private partnership to create a publicly-available index and digital copies of public vital records by an organization that has demonstrated experience in copying and indexing historical vital records. (State Registrar and the Library of Virginia may publish the index as well.)

• Budget language

Vote 5-8-1

Delegate Cline recognized Senator Houck as a dedicated advocate for the needs of Virginians with behavioral health issues and for his nine years of service to the Joint Commission; in addition, a plague recognizing his service as Chairman in 2008 and 2009 was presented.

There being no further business, the meeting was adjourned.

Prepared by: Sylvia A. Reid Date: December 8, 2011