



GBMC
2014

HEALTH CARE ISSUES OVERVIEW

*"To every patient,
every time, we will
provide the care that
we would want for our
own loved ones."*

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GBMC HEALTHCARE OVERVIEW

GBMC's Vision for the Future

As our national healthcare system evolves, for GBMC to maintain its status as a provider of the highest quality medical care to our community, we must continue to transform our philosophy and organizational structure, and develop a model system for delivering patient-centered care.

We define patient-centered care as care that manages the patient's health effectively and efficiently while respecting the perspective and experience of the patient and the patient's family. Continuity of care and ease of navigation through a full array of services will be the rule. Our professional staff will be able to say with confidence that the guidance and medical care they are providing mirrors what they would want for their own family.

We will create the organizational and economic infrastructure required to deliver evidence-based, patient-centered care and for holding ourselves accountable for that care. This new organization will be defined by collaboration and improvement. Physicians will lead teams that will manage patient care.

We are moving into the future with renewed energy and increasing insight. We look forward to continuing to build relationships with both community-based and employed physicians that are forming the foundation of the Greater Baltimore Health Alliance. We welcome all those who share our vision of health care as it is transformed to meet the needs of our community and nation in the 21st century.

Vision Phrase: To every patient, every time, we will provide the care that we would want for our own loved ones.

GREATER BALTIMORE MEDICAL CENTER

GBMC HealthCare is a private, not-for-profit corporation that owns and operates the Greater Baltimore Medical Center, a regional hospital in Towson, Maryland, two miles north of Baltimore City. GBMC was incorporated in 1960, through the consolidation of two specialty hospitals: The Hospital for Women of Maryland in Baltimore City ("Women's Hospital"), and The Presbyterian Eye, Ear and Throat Charity Hospital ("Presbyterian Hospital"). The Hospital for the Women of Maryland in Baltimore City (established in 1882 in Bolton Hill) was the second women's hospital in the country. The Presbyterian Eye, Ear and Throat Charity Hospital (established in 1887) had nearly 100 years of excellence in ophthalmology and otolaryngology, originating as a clinic in a Civil War surgeon's East Baltimore carriage house.

The Greater Baltimore Medical Center opened its doors in 1965 as a regional medical center providing general acute and specific specialized services to the northern portion of Baltimore City, most of Baltimore County, and portions of Anne Arundel, Carroll, Harford and Howard counties.

The 255-bed medical center (acute and sub-acute care) is located on a beautiful suburban campus and handles more than 25,000 inpatient cases and approximately 55,000 emergency room visits annually.

GREATER BALTIMORE MEDICAL ASSOCIATES

Greater Baltimore Medical Associates (GBMA) is a group of more than 40 physician practices owned by GBMC, operating on the hospital's main Towson campus as well as in satellite locations across the region. GBMA practices experienced more than 250,000 patient visits last year, with almost 200 physicians available to care for community members.

GREATER BALTIMORE HEALTH ALLIANCE

Greater Baltimore Health Alliance (GBHA) brings doctors and other healthcare providers together with health insurers to give patients the best possible care. All providers in GBHA use the latest Electronic Health Records to more carefully track care, and make sure doctors have the most up-to-date information about their patients' health.

GILCHRIST HOSPICE CARE

Gilchrist Hospice Care, formerly known as Hospice of Baltimore, a Medicare/Medicaid-certified hospice program, is the largest not-for-profit hospice organization in the state of Maryland. On a daily basis, Gilchrist Hospice Care provides care and services to over 500 people terminally ill individuals who reside in Baltimore City and Baltimore, Carroll, Harford and Howard counties (Hospice of Howard County). Care includes medical, nursing, social work, home health aid, spiritual and bereavement counseling and support and volunteer assistance. Hospice services are most often provided in the patient's home or place of residence. When more intensive medical care is required, patients may be admitted to Gilchrist Center for Hospice Care, a 34-bed inpatient facility, located on the GBMC campus.

GBMC FOUNDATION

GBMC HealthCare stands alone in our region as an independent community healthcare system that provides exceptional medical care. GBMC is committed to transforming how we deliver care with three simple objectives: better health and better care at lower cost for our patients. Philanthropic dollars raised for GBMC stay in our community.

These donations are raised through the GBMC Foundation, a 501(c)(3) nonprofit organization created in 1987. GBMC Foundation President, Jenny Coldiron, and 7 full-time staff, engage donors through a wide-range of activities, ensuring strong local support and increased operating revenue.

The GBMC Foundation is registered with the State of Maryland as an approved charitable organization.

Greater Facts

Throughout our nearly 50 year history, GBMC HealthCare has been recognized for excellence on national, regional and local levels. These acknowledgements not only provide confirmation of the value of GBMC's services but also reassurance to patients and pride to our employees. The following list includes a selection of awards, accomplishments and recognitions we have received within the past 10 years.

CLINICAL EXCELLENCE

National Recognition

- The **Advanced Radiology Breast Imaging Center** was designated as a Breast Imaging Center of Excellence by the American College of Radiology Commission on Quality and Safety and ACR's Commission on Breast Imaging.
- **The Greater Baltimore Cleft Lip and Palate Team** was approved by the American Cleft Palate-Craniofacial Association (ACPA) and the Cleft Palate Foundation (CPF) as a Cleft Palate Team. By being an approved Team, the group meets the standards that identify essential characteristics of quality for team composition and functioning in order to facilitate the improvement of team care.
- GBMC's **Comprehensive Obesity Management Program (COMP)** earned Level 1 accreditation by the American College of Surgeons Bariatric Surgery Center Network (ACS BSCN).
- **GBMC** was designated as a Cornelia de Lange Syndrome Center of Excellence by the Cornelia de Lange Syndrome Foundation.
- **GBMC** was one of 263 hospitals that ranked among the top five percent of the nation's hospitals, according to a survey by HealthGrades, and was named a Distinguished Hospital for Clinical Excellence in 2012.
- **GBMC** was one of eight hospitals in the state of Maryland to be awarded the International Lactation Consultant Association Care Award which recognizes hospitals for their efforts to support and promote breastfeeding.
- **GBMC** received accreditation by The Joint Commission, the accrediting body for healthcare organizations.
- **GBMC** has been awarded Advanced Certification as a Primary Stroke Center by the Joint Commission.
- **GBMC** has received a Get with the Guidelines Gold Achievement Award for sustained high quality by nursing and physician teams from the American Heart Association and American Stroke Association.

- **GBMC's** Main Laboratory and Arterial Blood Gas Laboratory received accreditation by the College of American Pathologists' Laboratory Accreditation Program.
- **GBMC** received a Certificate of Accreditation for Transfusion Activities and Transfusion – Autologous by the American Association of Blood Banks (AABB).
- Four **GBMC primary care physician practices** were recognized as Level 3 Physician Practice Connections-Patient-Centered Medical Homes (PPC-PCMH) by the National Committee for Quality Assurance (NCQA). These include GBMC at Hunt Manor, GBMC at Hunt Valley, GBMC at Texas Station and Family Care Associates.
- **Gilchrist Hospice Care** has received:
 - A Circle of Life Award and a Circle of Life Citation of Honor from the American Hospital Association for its innovative and comprehensive approach to end-of-life care.
 - Accreditation from The Joint Commission.
- GBMC's **Radiation Oncology Department** received accreditation from the American College of Radiology/American Society for Radiation Oncology.
- The **Sandra & Malcolm Berman Cancer Institute at GBMC:**
 - Received full three-year accreditation with commendations from the American College of Surgeons Commission on Cancer.
 - Received the American Society of Clinical Oncology (ASCO) Clinical Trials Participation Award.
 - Received full accreditation from the National Accreditation Program for Breast Centers.
 - Received a three-year Quality Oncology Practice Initiative (QOPI) certification from the American Society of Clinical Oncology (ASCO) for outpatient hematology/oncology.
- GBMC's **Sleep Center** was accredited by the American Academy of Sleep Medicine.

Regional/Local Recognition

- *Baltimore* magazine's annual listing of "Top Docs" consistently includes many of the hospital's physicians; in fact, **GBMC** frequently has more doctors highlighted in this ranking than any other community hospital.
- **GBMC** received two Circle of Honor for Patient Safety Innovation awards from the Maryland Patient Safety Center for its patient safety initiatives Know, Show and Go and Lean Daily Management: Hand Hygiene
- **GBMC** has been recognized as a Maryland Patient Safety Center "Top Performer" for the 2nd quarter of 2013 for having a minimum 90 percent overall hand hygiene compliance rate for three consecutive months.

- **GBMC** was designated as a Primary Stroke Center by the Maryland Institute for Emergency Medical Services Systems (MIEMSS).
- *Maryland Family* magazine readers have consistently ranked **GBMC** as the “Best Maternity Hospital.”

ORGANIZATIONAL EXCELLENCE

- **GBMC** was honored with a Trailblazer Award by the Maryland Hospitals for a Healthy Environment (MD H2E) for its leadership in advancing sustainability in its operations.
- **GBMC** has received several awards from Practice Greenhealth, the nation’s leading healthcare membership community, focusing on increasing efficiencies and environmental stewardship while improving patient safety and care:
 - A Partner for Change Award for its success in improving its environmental performance and its dedication to a higher standard of sustainability.
 - A Partner for Change Award which acknowledges healthcare facilities that continuously improve and expand upon their mercury elimination, waste reduction, recycling and source reduction programs.
 - The “Making Medicine Mercury-Free” Award which recognizes facilities that have virtually eliminated the harmful chemical mercury from their facilities through purchasing policies and staff education.

RECOGNITION BY INSURERS

- **GBMC** is a designated Aetna Institute of Quality for Bariatric Surgery.
- **GBMC** has been given the Blue Distinction by CareFirst BlueCross BlueShield for bariatrics.
- **GBMC** is part of the Clinical Sciences Institute (CSI) of Optum’s Bariatric Centers of Excellence network.

2014 MHA LEGISLATIVE AND REGULATORY ADVOCACY PRIORITIES

Maryland's hospitals in 2014 will advocate for funding and innovations that:

Improve the Experience of Care

- Lead Quality and Safety Innovations
 - Advance MHA's strategic goal of leading initiatives to achieve zero preventable harm, reduce readmissions, and increase patient satisfaction in Maryland's hospitals.
 - Support efforts to address the appropriate oversight of the utilization of procedures or services in hospitals to ensure that only necessary care is provided.
 - Advance hospitals' efforts to offer coordinated, efficient, quality care in the appropriate health care setting.
- Guide Next Stage of Reform and Integrated Delivery System Models
 - Ensure that hospitals continue to play key roles in helping to identify and enroll people who are eligible for coverage in the Maryland Health Connection and ensure that new rules give hospitals the flexibility to do so.
 - Advance a collaborative approach between hospitals, state agencies, Regional Connector Entities, and other stakeholders as the state enrolls individuals newly eligible for health coverage.
 - Ensure that regulatory scope of authority complements health care delivery system reform and innovation.

GBMC recognizes and supports MHA's efforts to work with state legislators to improve the experience of care. At GBMC, our strategy is centered around: better coordination of care and a compact with our physicians for better care coordination. Our physicians are helping redesign the system so that everyone gets the care we want for our own loved ones.

Examples of GBMC's efforts include:

- *Roll out of Lean Daily Management (LDM) in April 2013. LDM has helped us improve clinical outcomes and provide better care. For example, as a result of LDM we are moving admitted patients out of the Emergency Department to a floor bed faster. In FY 2013 we reduced this time to 305 minutes - a 23% reduction.*
- *Launch of www.gbmc.org/quality to make our patient safety and quality data available for anyone to see. This website is updated on a monthly basis.*
- *Through the hard work of our pharmacy team collaborating with our nurses, we have reduced missing medications by 30% in 2013.*

Improve the Health of Communities

- Support Policy Innovations
 - Advocate/ensure state agencies' focus on planning for an integrated and seamless continuum of care under a modernized all-payor rate-setting system.

- Promote better population health and cost effective care through an integrated community benefit structure, physician engagement, Health Enterprise Zones, the State Community Integrated Medical Home, and State Health Improvement Plan.
 - Seek continued support for broad adoption of electronic health records and other health IT infrastructure to measure and enable progress, including medical services provided via telemedicine.
- Enhance the primary care, hospital-based physician practice, allied health, and medical liability environment
 - Improve the medical liability climate in Maryland and protect access to safety net services.
 - Enhance patient safety and reimbursement policies that complement and build on existing provisions of state laws, federal laws, and federal pilots.
 - Seek state/federal support where possible for expanding Maryland's nursing and allied health workforce, while maximizing their practice capabilities.
- Strengthen the Fragile Mental Health Infrastructure
 - Ensure seamless implementation of the Firearm Safety Act, working with providers and regulators to meaningfully implement the Act as intended.
 - Continue implementation assistance associated with the statewide psychiatric bed registry, in an effort to monitor its effectiveness and usefulness across all stakeholders.
 - Support restoration and enhancement of community and state-based behavioral health services.
 - Seek better ways to enhance continuity of care for individuals with serious mental illness.
 - Seek better coordination among mental health, substance abuse, and developmental disabilities services — including the restructuring and integration of the state's behavioral health service agencies.

GBMC recognizes and supports efforts to improve the health of communities. At GBMC, we are working towards our vision of providing the care we would want for our own loved ones.

Examples of GBMC's efforts include:

- *The implementation of the medical home model across GBMA;*
- *Use of the 3P (production, preparation and process) lean model to re-design GBMC's Family Care Associates practice to better meet the needs of our patients;*
- *Extended hours at our primary care practices, including weekends;*
- *Daily reporting through CRISP on patients that have been in other hospitals and Emergency Departments.*
- *EMR implementation in GBMA and GBHA practices and the continued use of the myGBMC patient portal.*

Since our renewed focus on the patient in 2012, we have seen steady increases in our overall satisfaction scores at GBMA offices. With the introduction of Saturday office hours, we have seen all time highs in the patient satisfaction access section of the survey.

Reduce the Costs of Healthcare

- Modernize Maryland's Health Delivery and Payment System
 - Lead modernization efforts of Maryland's Medicare waiver to ensure continued viability of the state's unique all-payor rate-setting system.
 - Lead efforts to reduce and eliminate the Medicaid deficit assessment.
 - Seek enhanced state oversight and public transparency of insurer premiums, medical loss ratios, and other insurance filings, while bolstering the public policy and regulatory linkages between the Health Services Cost Review Commission and Maryland Insurance Administration.
 - Seek changes to both state and federal regulatory barriers, particularly those that reduce costly administrative burdens
- Advocate for Fair State and Federal Health Care Budget
 - Ensure the stabilization and sustainability of the Medicaid and Exchange programs during coverage expansion in 2014.
 - Protect health care programs from a disproportionate share of state and federal budget cuts.
 - Advance long-term, fiscally responsible funding of the state's share of federal and state health care reform costs.
 - Affect overall state budget process, to the extent that other programmatic areas increase budgetary resource pressure on health care programs.

GBMC supports effort to reduce the costs of healthcare.

In July 2012, the Centers for Medicare and Medicaid Services (CMS) announced that Greater Baltimore Health Alliance Physicians, LLC (GBHA) was one of the Accountable Care Organizations (ACO) selected to participate in the Medicare Shared Savings Program. This part of the Affordable Care Act (ACA) is designed to incentivize physicians to improve the quality of care and drive waste out of the system through better coordination. This part of the Act is an attempt to lower the cost of care to Medicare beneficiaries.

More than 100 organizations nationwide have been approved for the Shared Savings Program, but GBHA was the first ACO selected in the Central Maryland region and the first in the state with a hospital partner.

Early results have been promising and show a reduction in the following:

- *ED visits per 1,000 plan years;*
- *Hospitalizations per 1,000 plan years;*
- *30 day readmissions per 1,000 discharges;*
- *Total per capita cost.*

GBMC is also contracting with health insurers who are designing "limited network" high-value insurance products. In addition, GBMC is working directly with self-insured employers to save these companies money and to get better health and better care for their employees.

How to Contact GBMC

FREQUENTLY USED PHONE NUMBERS

GBMC HealthCare President & CEO, John Chessare, MD.....	443-849-2121
GBMC Foundation Jenny Coldiron.....	443-849-2774
Gilchrist Hospice Care Catherine Hamel.....	443-849-8200
GBMC Government Relations Greg Shaffer.....	443-849-3248
GBMC Media Relations John Lazarou.....	443-849-2126
GBMC Human Resources Deloris Tuggle.....	443-849-2204
GBMC Patient Information.....	443-849-3111
GBMC Physician Referral Line.....	443-849-GBMC (4262)
GBMC Volunteer Services.....	443-849-2050

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Glossary of Terms & Acronyms

This list explains acronyms used in this document and other acronyms that are commonly used in health care. This list is not a legal document.

ACO	Accountable Care Organization – ACO is an organization of physicians, both employed and in community practice, hospital(s), other healthcare providers and organizations, which assumes the medical responsibility to provide the entire spectrum of care for a defined population of patients.
AHA	American Hospital Association – the AHA is the national organization that represents and serves all types of hospitals, health care networks, and their patients and communities.
Alternative Payment Methodology	Both government and commercial payers are exploring different ways to reward physicians for maximizing quality of care and reducing waste in the system. These new payment mechanisms include shared savings, bundled payments for providers and facilities, as well as increased reimbursement for chronic condition management.
CCO	Community Care Organization – a CCO is a program that provides comprehensive healthcare services to frail elders in an adult daycare setting.
CMS	Centers for Medicare and Medicaid – the Centers for Medicare & Medicaid Services, previously known as the Health Care Financing Administration (HCFA), is a federal agency within the United States Department of Health and Human Services (DHHS) that administers the Medicare program, Medicaid, the State Children's Health Insurance Program (SCHIP), and health insurance portability standards. Additional responsibilities include the administrative simplification standards from the Health Insurance Portability and Accountability Act of 1996 (HIPAA), quality standards in long-term care facilities (more commonly referred to as nursing homes) through its survey and certification process, and clinical laboratory quality standards under the Clinical Laboratory Improvement Amendments.
CON	Certificate of Need – A regulatory mechanism in Maryland intended to ensure that new health care facilities and services are developed in Maryland only as needed.
DBFP	Department of Budget and Fiscal Planning – State of Maryland Department of Budget and Fiscal Planning is an executive department of the State government that is responsible for the preparation of budget and fiscal planning.
DBM	Department of Budget and Management – the Department of Budget and Management helps the Governor, State agencies, and their employees provide effective, efficient, and fiscally sound government to the citizens of Maryland.

DHMH	Department of Health and Mental Hygiene – State of Maryland Department of Health and Mental Hygiene is an executive department responsible for all health related issues. Also known as the “State Health Department.”
DLS	Department of Legislative Services – DLS is the central professional staffing agency for the General Assembly who provide legal, fiscal, committee, research, reference, auditing, administrative, and technological support to the members of the legislature and its committees.
EHR	Electronic Health Records - EHR systems store a patient’s medical history so it can be accessed quickly and easily by other care providers, improving quality of care and cost. As mentioned above, physicians and hospitals must be able to prove meaningful use of a certified EHR system in order to be eligible for incentives. GBMC is currently installing an EHR throughout its employed practices and will offer this system through the Management Service Organization to community physicians.
FMAP	Federal Medical Assistance Percentage – Federal Medical Assistance Percentages are used in determining the amount of Federal matching funds for State expenditures for assistance payments for certain social services, and State medical and medical insurance expenditures. The Social Security Act requires the Secretary of Health and Human Services to calculate and publish the FMAPs each year.
GBMA	Greater Baltimore Medical Associates
GBMC	Greater Baltimore Medical Center
GBMC HealthCare	Includes Greater Baltimore Medical Center, Gilchrist Hospice Care and GBMC Foundation.
HHS	Department of Health and Human Services – the Department of Health and Human Services is the United States government’s principal agency for protecting the health of all Americans and providing essential human services. HHS represents almost a quarter of all federal outlays, and it administers more grant dollars than all other federal agencies combined. HHS’ Medicare program is the nation’s largest health insurer, handling more than 1 billion claims per year. Medicare and Medicaid together provide health care insurance for one in four Americans.
HMO	Health Maintenance Organization – an HMO is a form of health insurance in which members prepay a premium for health services, and which generally includes a defined set of services made available through a defined panel of physicians for enrollees at a preset price.
HSCRC	Health Services Cost Review Commission – the HSCRC was created by the Maryland legislature in 1971 as a result of concern over escalating hospital costs.

The HSCRC sets the rates that Maryland's hospitals may charge and works with Maryland's hospitals to monitor the rate of increase in hospital costs that Maryland residents must pay.

IOM	Institute of Medicine – the Institute of Medicine of the National Academies is a nonprofit organization that provides science-based advice on matters of biomedical science, medicine, and health.
JCAHO	Joint Commission on Accreditation of Health Care Organizations – Established in 1951, the Joint Commission evaluates and accredits nearly 15,000 health care organizations and programs nationally. An independent, not-for-profit organization, the Joint Commission is the predominant standards-setting and accrediting body in health care.
Meaningful Use	The term “meaningful use” refers to a requirement set forth in the American Recovery and Reinvestment Act of 2009 (ARRA) for improving the country’s healthcare system through the use of Health Information Technology (HIT). HIT initiatives like Electronic Health Records (EHRs) are meant to improve patient safety, enhance the quality of healthcare, boost the health of the population and share information for the purpose of efficiency and reduced costs. Physicians and hospitals must prove that they “meaningfully use” an EHR in order to gain financial incentives from the government. Meaningful use requirements are set by the Centers for Medicare and Medicaid Services and have associated deadlines for completion.
MCO	Managed Care Organization – an MCO is a health organization that finances and delivers health care using a specific provider network and specific services and products.
Medical Home	Medical Home is a concept in which the primary care physician is responsible for providing routine care in addition to coordinating acute, chronic and preventive services from outside specialists. The intent is for primary care doctors to ensure that patients get all the care they need and to make certain that necessary follow-up tests or exams are not overlooked.
MedChi	Medical and Chirurgical Society – State Medical Society - The Maryland State Medical Society, (MedChi) represents about 6,500 physicians statewide practicing in more than 50 medical specialties. MedChi is composed of 24 component medical societies, plus a medical students’ and residents’ section.
MHA	Maryland Hospital Association – The Maryland Hospital Association represents Maryland hospitals and health systems through leadership, education, information, communication, and collective action in the public interest. Members include acute care hospitals and health systems, specialty hospitals — including psychiatric facilities — veteran’s hospitals, chronic, and long-term-care facilities.

MHIP	Maryland Health Insurance Plan – MHIP is a state administered health insurance program for Maryland residents who do not have access to health insurance. The Maryland General Assembly established the Maryland Health Insurance Plan under the Health Insurance Safety Net Act of 2002.
MIA	Maryland Insurance Administration – the Maryland Insurance Administration is an independent State agency that regulates Maryland’s insurance industry and protects consumers by ensuring that insurance companies and health plans act in accordance with insurance laws.
MIEMSS	Maryland Institute for Emergency Medical Services System – the Maryland Emergency Medical Services System is a coordinated statewide network that includes volunteer and career EMS providers, medical and nursing personnel, communications, transportation systems, trauma and specialty care centers and emergency department. MIEMSS oversees and coordinates all components of the state EMS system in accordance with Maryland statute and regulation.
MHCC	Maryland Health Care Commission – The Commission’s responsibilities include: development of a comprehensive standard health benefit plan; establishment of the HMO Quality and Performance Evaluation System; establishment of the Nursing Home and Hospital Performance Evaluation Guides and the Ambulatory Surgery Facility Consumer Guide; development of recommendations for a patient safety system in Maryland and other special projects; creation of a database on non-hospital health care services; implementation of a certificate of need program for certain health care facilities and services; adoption of a state health plan related to certificate of need decisions; and oversight of electronic claims clearinghouses.
MSO	Management Service Organization - MSOs assist providers in selecting and implementing an EHR and improving workflow in the practice. MSOs may also offer services such as billing, practice management and access to the statewide health information exchange (HIE). Practices that adopt EHRs, either on their own or through an MSO, may apply for certain government incentives. GBMC is one of three Maryland hospitals applying to become a state-designated MSO.
NSP	Nurse Support Program – the NSP was created through legislation with the goal of expanding the pool of nurses in Maryland by increasing the capacity of nursing programs in two phases. The first statewide initiative provided funding for graduate nursing faculty scholarships and living expenses, new nursing faculty fellowships, and state nursing scholarship and living expenses grants. The second program, the competitive institutional grants initiative, expands the state’s nursing capacity through shared resources, enhancing nursing student retention, and increasing the pipeline for nurse faculty.
OHCQ	Office of Health Care Quality – the Office of Health Care Quality's mission is to protect the health and safety of Maryland’s citizens and to ensure that there is

public confidence in the health care and community service delivery systems through regulatory, enforcement, and educational activities.

SCHIP

State Children's Health Insurance Program – the SCHIP law appropriates funding to help States expand health coverage to children whose families earn too much for traditional Medicaid, yet not enough to afford private health insurance. Maryland, like all States with SCHIP plans, will receive Federal matching funds only for actual expenditures to insure children.