COPA LOCAL ADVISORY COUNCIL 2021 ANNUAL REPORT

Ballad Health Certificate of Public Advantage
Local Advisory Council Report on Public Comments

February 24, 2021
2020-2021 COPA Local Advisory Council

Members:

Chair Linda Latimer, M. D., East Tennessee State University board of trustees

Wallace Boyd, Former Board of Directors, Frontier Health

Dennis Phillips, former Mayor of Kingsport

Major General Gary L. Harrell, US Army (Retired)

Rep. David Hawk, State Representative, Greene County

Ken Maness, Commissioner of the Tri-Cities Airport Authority

Karen Shelton, M. D., Director of Mount Rogers Health District, Virginia Department of Health

Thomas Wennogle, President, Jarden Zink Products

Dr. Brenda White Wright, Former CEO, Girls Incorporated
COPA Local Advisory Council
2021 Annual Report

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To: Larry Fitzgerald, COPA Monitor, and Commissioner Lisa Piercey, MD, MBA, FAAP, Tennessee Department of Health

The Local Advisory Council (LAC) is a volunteer-based group that was established through the Certificate of Public Advantage (COPA) process. The role of the LAC is to facilitate input from residents of the 21 counties in the Northeast Tennessee/Southwest Virginia region impacted by the Certificate of Public Advantage (COPA).

We are tasked with listening, compiling information from the community, and sharing recommendations with the Tennessee Department of Health. It is important to note that the LAC was not envisioned or created to be an investigative or enforcement body.

The COPA’s Terms of Certification outline that the LAC will hold four meetings during the fiscal year and a public hearing once a year to provide a forum specifically for the public to comment on Ballad Health’s annual report.

This year’s public hearing was held virtually on Monday, January 25. In addition to the LAC members present, there were roughly 35 people in attendance online with one member of the community choosing to make comments.

This Annual Report, which comes out of that public hearing and our work over the past year, is one of the LAC’s primary functions with the goal of providing useful information for your review. Along with input from the public hearing, this report also includes a summary of the LAC’s activities to date and an update on the Population Health Initiatives Fund.

We look forward to your review. Please let us know if you have any questions, concerns, etc. or need additional information related to the report.

Sincerely,

Linda Latimer, M.D.
Chair
CHAPTER 1

Background and General Information

The Local Advisory Council (LAC) is part of the Active Supervision Structure established under the Terms of Certification (TOC) for the Certificate of Public Advantage (COPA). The TOC was first published in September of 2017, when the COPA was approved. The Execution Version of the TOC was signed and posted to the Tennessee Department of Health’s (TDH) website on January 31, 2018, when the COPA was granted to Ballad Health.

As stated in the TOC, the LAC’s main charge is to facilitate input from residents of the Geographic Service Area (GSA).

The specific duties and responsibilities of the LAC outlined in the TOC include the following:

- Recommend to the Department how funds in the Population Health Initiatives Fund should be spent;
- In coordination with the Department, host an annual public hearing to allow a formal process for the public to comment on the New Health System’s Annual Report and the ongoing performance of the New Health System; and
- Publish the Local Advisory Council Annual Report on community feedback for review by the COPA Monitor and the Department. Such report shall be published no later than thirty (30) days after the annual public hearing.

The Tennessee Department of Health Commissioner appointed the inaugural members of the COPA Local Advisory Council on April 6, 2018. Doug Varney, Former Commissioner of Mental Health and Substance Abuse Services, was asked to serve as the council’s first Chair.

2018

The LAC held three working meetings in 2018: June 6, September 11, and October 25. The meetings consisted largely of presentations from the COPA Monitor, the COPA Compliance Officer, the TDH Division of Health Planning, and the Office of the Attorney General, as well as several discussions establishing and framing the LAC’s role in the COPA process. A mission statement and a public input proposal were also developed and discussed during these first meetings. In February, the LAC hosted its first public hearing and subsequently published the 2019 LAC Annual Report.

2019

After the LAC's first Annual Report was published in March of 2019, the Council held three working meetings: April 16, July 25, and October 29.
During the April 16, 2019 meeting, a proposed mission statement was approved. The LAC’s mission is:

To assist the Tennessee Department of Health in ensuring that the Certificate of Public Advantage issued to Ballad Health provides a public benefit for residents of Northeast Tennessee and Southwest Virginia by facilitating public input and reporting on information received.

At the end of that April meeting, Doug Varney submitted his resignation as both chair and as a member of LAC. New Officers were named, and a new member was appointed to the LAC for the 2020 Fiscal Year in July.

Throughout 2019, working meetings largely focused on ways to elicit balanced, relevant, and useful feedback from the community. The LAC reviewed a public input proposal developed by TDH staff in coordination with Chairman Varney in 2018 and determined that a subcommittee should be formed to discuss logistics and to develop recommendations for the full council. The recommendations were presented and approved at the October 29 meeting.

In October, TDH staff gave a presentation to the LAC regarding the data challenges they were encountering with the COPA population health sub-index measures. The council members were also given information on the Virginia Department of Health’s (VDH) population health measures and approach to evaluating ongoing public advantage, as well as information on a population health approach that the region’s Accountable Care Community (ACC) had adopted. The council also engaged in a discussion about the COPA population health sub-index measures, at the request of the Commissioner of TDH, and the appropriateness of Tennessee (TN) better aligning with those approaches. The member's thoughts were noted and shared with the Commissioner.

2020

On January 7, 2020, the LAC hosted its second public hearing at Northeast State Community College Center for the Arts in Blountville, TN. The turn-out for the hearing was estimated to be between 75-125 attendees. That evening 20 members of the public presented oral comments to the LAC and one provided a written comment (These comments are included in the LAC's 2020 Annual Report, which can be accessed at this link: https://www.tn.gov/content/dam/tn/health/documents/copa/2020.02.06-2020-LAC-ANNUAL-REPORT.pdf).

Due to the COVID-19 Pandemic, the LAC’s first working meeting, scheduled for April, was canceled. The two subsequent working meetings were held virtually. Working meetings were conducted according to the format recommended by the Public Input Subcommittee's
recommendations. They included updates from TDH’s Division of Health Planning, the COPA Compliance Officer, and the COPA Monitor.

At the July 29 meeting, two new members for the 2021 Fiscal Year were introduced: Thomas Wennogle and Wallace Boyd. Elections were held that resulted in Dr. Linda Latimer, who had been the LAC’s Vice Chair, being named Chair and Wallace Boyd being named Secretary. The council voted to postpone the election for Vice Chair. The members were informed about regulatory requirements that were temporarily suspended due to the pandemic and were referred to the list of those temporarily suspended provisions of the TOC posted on TDH’s COPA webpage for further details. No members of the public elected to speak during the time allotted for public comments.

The ninth and final FY2020 LAC member, Ken Maness, was elected Vice Chair at the council’s November 25th meeting. During that meeting, the council considered how its upcoming Annual Public Hearing must be different from prior years due to the pandemic. Members expressed concern that the public did not understand the LAC’s limited role and considered forming a subcommittee to develop recommendations related to the LAC’s mission, name, and role. No members of the public spoke during the meeting’s public comment period.

The LAC hosted its third Annual Public Hearing on January 25, 2021. While approximately 35 individuals attended the virtual event, only one member of the public chose to speak to the LAC (A summary of public comments can be found in Chapter 4 of this report).

LAC meeting dates are announced on the LAC’s webpage. Meeting agendas and meeting minutes, once they are approved, are posted on the same page. Transcripts of public comments from the 2019 and 2020 public hearings and a recording of the 2021 virtual public hearing are also available on the LAC’s webpage.
LAC Member Terms

- **Members whose term expires June 30, 2021**
  - Linda Latimer, MD, Chair
  - Dennis Phillips
  - Dr. Brenda White-Wright

- **Members whose term expires June 30, 2022**
  - Retired Major General Gary Harrell
  - Karen Shelton, MD
  - Rep. David Hawk

- **Members whose term expires June 30, 2023**
  - Wallace Boyd, Secretary
  - Ken Maness, Vice Chair
  - Thomas Wennogle

*Note: Each Member may be reappointed for a full three-year term after expiration of current term.*
Summary of Written and Public Comments received by the LAC

Related to the COPA

One individual provided public comments at this year’s annual public hearing. In addition, the LAC received several written comments from the public over the past year. The majority of these comments dealt with personal experiences or other issues, including COVID-19, that are outside the scope of the LAC’s review. Below is a summary of the comments the LAC received related to the COPA.

1. **Relocation of Staff**: Raised concerns that certain staff members were being furloughed as a result of the COVID pandemic. (While staffing issues can fall under the COPA’s Terms of Certification, in this case the concerns expressed fall within the state’s State of Emergency provisions regarding the pandemic, and thus were not a violation of the COPA.)

2. **Nurse Staffing Ratios**: Noted that a local business publication reports on the total reduction in the number of Ballad staff annually, but not specifically on nursing positions and questioned why not. (The state has noted that nurse hours per patient by facility are reported publicly and that the ratio of RNs to LPNs by facility is publicly reported, and thus changes in nurse staffing levels can be surmised from these data.)

3. **CMS Readmittance Rate, Hospital Acquired Conditions data, and Overall Hospital Quality Star ratings**: Requested that the state investigate the CMS Readmittance Rate and the Hospital Acquired Conditions data for Ballad hospitals. Additionally, the Overall Hospital Quality Star ratings for the four largest Ballad hospitals were noted.

4. **Physician Recruitment and Retention Rates**: Requested that the COPA Monitor review four years of physician recruitment/retention information that the LAC had initially requested instead of only one year.

5. **Suspension of certain TOC provisions during the COVID-19 state of emergency**: Questioned the wisdom of “waiving” the TOC Certificate of Need restrictions on Ballad during the state of emergency and requested that a public comment period be instituted before any amendments are made to the TOC. (The TOC does not provide for such a public comment period.)
CHAPTER 4

Transcripts from the Annual Public Hearing

A video of the LAC’s virtual January 25, 2021 Public Hearing may be accessed at this link:

https://tngov.webex.com/recordingservice/sites/tngov/recording/7eda335fdd4844559a52adf504458b/playback
CHAPTER 5

LAC Member Comments

No comments were submitted.
CHAPTER 6

Population Health Initiatives Fund

The Population Health Initiatives Fund is defined in the TOC as, “account or accounts, for which the Department shall be the custodian, into which fines, certain past-due Monetary Obligations and other amounts are to be paid by the COPA Parties, pursuant to the Terms and Conditions.”

Further, Section 6.06 of the Terms of Certification states:

Population Health Initiatives Fund. The Local Advisory Council shall, on at least an annual basis in conjunction with its review of the Annual Report, review the amount of cash on deposit in and owed to the Population Health Initiatives Fund. The Local Advisory Council shall recommend to the Department how such amount should be spent within the Geographic Service Area or otherwise for the direct benefit of the Population.

As of the publication date of this report, no monetary penalties have been assessed. Monetary penalties fund the Population Health Initiatives Fund. Since no monetary penalties have been assessed, the current balance of the Population Health Initiatives Fund is $0. This Fund is separate from the $75 million that Ballad Health has committed to spending on population health under the COPA over 10 years.