

Comments on OHCQ Regulations

Name of Person Submitting Comments	Organization (if applicable)	Comments	OHCQ Response
Sarah Meissner	Innovations Surgery Center	Technical issues and unable to come off mute function. OHCQ offered chat function and will follow up.	Thank you for your participation.
Latisha Lee	MedStar's Ambulatory Surgical Centers	I do not have questions or comments at this time, but I am interested in what everyone else brings to the meeting. Thank you for allowing us to participate.	Thank you for your participation.
Robert LaCava	Dulaney Eye Institute	Thank you for having the meeting. Looking forward to learning from others. I have no specific questions but anxious to hear Q&A from others.	Thank you for your participation.
Annie Coble	JH University Medicine	I would like to echo Dr. Hill's comments and emphasize the importance of updating the credentialing cycle. Thankyou.	Thank you for your participation.
Peter Hill, MD	Johns Hopkins Health System	Thank you for having this meeting and looking at these regulations. I wanted to express my support for moving to the every 3-year recredentialing cycle in accordance with CMS. This will allow us to align our entire organization into one standard, will help with efficiency, be easier and friendly for our physicians. I appreciate this effort very much. Can you comment on the time frame for promulgation?	Thank you for your participation. The promulgation process is detailed and starts with MDH review, then the regulations will go to the Governor's Office, then to Division of State Documents, then to the Maryland Register. MDH has a new point of contact, Jordan Fisher, who is helping facilitate the process. I anticipate several months but not years. The process will depend upon the volume of comments received, if there are any controversial issues, and the process for achieving consensus.
Oriell Harris	MBOP	Thank you for the website information. I have no comments for today. Thank you for having the meeting.	Thank you for your participation.
Josie Ogaitis	OHCQ	1) remove language about the fees; 2) update credentialing language (Q 3yrs) to be consistent with CMS; 3) require ASCs to notify OHCQ of changes to name, location, ownership, surgical specialties; 4) add process of conditional license, since it is used when the center opens until they get CMS certified, but it is not currently in the regs; 5) I would also like to add of what constitutes a change of ownership and that if CHOW is happening, an application needs to be submitted; 6) update emergency transfer language consistent with CMS.	From OHCQ Federal Staff