

GOVERNMENT OF THE DISTRICT OF COLUMBIA

ADMINISTRATIVE ISSUANCE SYSTEM

Mayor's Order 2019-051

June 3, 2019

SUBJECT: Establishment — Mayor's Commission on Healthcare Systems Transformation

ORIGINATING AGENCY: Office of the Mayor

By virtue of the authority vested in me as Mayor of the District of Columbia by section 422(2) and (11) of the District of Columbia Home Rule Act, approved December 24, 1973, 87 Stat. 790, Pub. L. 93-198, D.C. Official Code § 1-204.22(2) and (11) (2016 Repl.), it is hereby **ORDERED** that:

- I. **Establishment:** There is established in the Office of the Deputy Mayor for Health and Human Services, under the direction and control of the Deputy Mayor for Health and Human Services, the Mayor's Commission on Healthcare Systems Transformation ("**Commission**").
- II. **Purpose:** The purpose of the Commission is to make recommendations to the Mayor on the strategies and investments necessary to transform health care delivery in the District of Columbia. The Commission's work shall focus on developing recommendations that address the current stresses in the District's health care system, while specifically targeting the following issues: improving access to primary, acute, and specialty care services, including behavioral health care; addressing health system capacity issues for inpatient, outpatient, pre-hospital and emergency room services; and promoting an equitable geographic distribution of acute care and specialty services in communities east of the Anacostia river.
- III. **Functions:** In carrying out its purpose, the Commission shall examine and provide recommendations regarding:
 - A. The District's health care system capacity, with emphasis on the equitable geographic distribution of acute, urgent, and specialty care throughout the city. Recommendations should include long term solutions to the capacity issues faced, including access to services by residents who live in Wards 7 and 8.
 - B. Access to critical and urgent care services, specifically maternal, behavioral, and emergency services. The Commission should examine and report on factors that contribute to problems related to behavioral health care delivery and what policy changes are required to relieve the current strain on the system. The Commission should offer an array of recommendations and should consider all options, including technology-based solutions.

- C. Overcrowding in emergency rooms and the general heavy reliance on inpatient hospital care. The Commission's recommendations should address the existing barriers to decreasing non-emergency 911 emergency medical service call volume, emergency department wait times, and unnecessary demands on the system.
 - D. Obstacles to allied health care professions serving communities throughout the District. The Commission should identify barriers to meeting the demands of communities throughout the District for locally-based allied health care professions and provide insight and recommendations to reduce the obstacles certain provider types face in trying to serve a community.
 - E. Discharge planning and transitions of care. The Commission should provide recommendations on how to improve inpatient discharge processes and respite care capacity, particularly for those in need of intermediate care and nursing home care. This includes identifying strategies to address transitions of care for the homeless population. The Commission should also recommend innovative programs that the city could employ through private partnerships to address the issues.
 - F. Value-based purchasing and how the current financing system (public and private) serves as a barrier or facilitator to transformation. The Commission should offer recommendations that outline how innovative models in health care financing would contribute to better patient outcomes or system efficiencies and explore investments and realignments that can further transformation.
- IV. **Membership:** The Commission shall be comprised of the following healthcare, organizational, and governmental members, appointed by and serving at the pleasure of the Mayor:
- A. The following voting members:
 - 1. Two (2) co-chairs;
 - 2. Five (5) representatives of acute care hospitals located in the District;
 - 3. Three (3) representatives of specialty hospitals located in the District; and
 - 4. Six (6) community representatives with hospital and/or healthcare experience.
 - B. The following *ex officio*, non-voting members:

1. The City Administrator, or his or her designee;
2. The Deputy Mayor for Health and Human Services, or his or her designee;
3. The Director of the Department of Health, or his or her designee;
4. The Director of the Department of Behavioral Health, or his or her designee;
5. The Director of the Department of Health Care Finance, or his or her designee;
6. The Chief of the Fire and Emergency Medical Services Department, or his or her designee;
7. The Executive Director of the Thrive By Five Coordinating Council, or his or her designee;
8. The Chair of the Council of the District of Columbia Committee on Health, or his or her designee;
9. The President of the District of Columbia Primary Care Association, or his or her designee; and
10. The Executive Director of the District of Columbia Hospital Association.

C. The Mayor may appoint other community, business and industry subject matter experts as *ex-officio*, non-voting members.

V. **Appointments and Terms**

- A. A governmental member shall be appointed by the Mayor and shall serve, at the pleasure of the Mayor, for the duration of his or her position held in District government.
- B. If the seat of a member appointed by the Mayor becomes vacant, the Mayor shall appoint an individual to fill the seat for the remainder of the term.
- C. The Mayor may remove any member for cause.

VI. **Meetings; Organization and Administration**

- A. The Commission shall meet at least monthly, at such times and locations as shall be determined by the Co-Chairs.
- B. The Commission shall hold all meetings consistent with the Open Meetings Act (D.C. Code § 2-571 *et seq.*).
- D. The Commission may adopt by-laws and rules of procedure to govern its proceedings.
- E. The Co-Chairs of the Commission may issue such procedures, policies, and guidelines as may be appropriate to ensure the efficient operation and administration of the Commission.
- F. Voting members may send designees on their behalf if a conflict arises with a scheduled meeting. Those designees may participate in the meeting and vote on matters presented before the Commission.
- G. The Office of the Deputy Mayor for Health and Human Services shall provide administrative support to the Commission.

VII. **Conflict of Interest:** Non-governmental members bring an expertise to the Commission that arises from their positions relating to health care, and their participation is sought in all discussions, even ones where they may have a conflict of interest, within the following parameters. The following pertains to non-governmental, voting members:

- A. Commission members understand that public service is a public trust and they will affirm that in all their activities on the Commission, including discussions and making recommendations, they will be acting for the good of the public, not for the benefit of their private financial interests or the interests of their clients, prospective clients, employers, prospective employers, or other organizations on which they serve as board members or organizations to which they owe a fiduciary duty. They will also affirm that they will not be acting to harm competitors of entities where they hold a financial interest, their employers or prospective employers, their clients or prospective future clients, or seek to harm competitors of organizations where they serve as board members or otherwise owe a fiduciary duty.
- B. On any vote, policy recommendation, or other action affecting their personal financial interests or the interests of their employer or any organization to which they owe a fiduciary duty, Commission members must recuse themselves on the record. If a vote will be taken on a report or set of recommendations, and the conflict only relates to a part of the report or recommendations, their concurrence or objection should be noted as pertaining only to the section or sections where there is no conflict.

- C. Commission members shall further affirm that they will not use their service on the Commission for marketing to future clients, though their service may appear on a resume or a biography.
- D. Confidentiality
 - 1. Commission members are bound to hold confidential data provided to them in the course of their service confidential, and to the extent they participate in any deliberations outside the scope of the Open Meetings Act, they will hold those deliberations confidential. Such confidentiality obligations extend beyond the term of their service.
 - 2. On any matters where the confidential information is directly relevant to their disclosed holdings, employment, clients or positions, staff shall endeavor to screen the board member from those materials or that part of the discussion, whether it be at a subcommittee meeting or in a session that has been closed pursuant to the Open Meetings Act. If the Commission member recognizes that a matter directly relates to his or her interests, whereby his or her fiduciary duties to the Commission and his or her outside activity would be in conflict, the Commission member shall exit the room or call and only be called back when that part of the discussion is over.
- E. Staff from the Office of the Deputy Mayor for Health and Human Services shall gather and retain the disclosure forms and affirmations made pursuant to this section. Such disclosure forms shall be available through a Freedom of Information Act upon request.
- F. Staff shall record in the minutes, if minutes are recorded, when any Commissioner recuses himself or herself from a decision or steps out of the room or off a call because of an actual or potential conflict of interest.

VIII. SUNSET

The Committee shall sunset after submitting a final report of its recommendations to the Mayor in December of 2019.

IX. EFFECTIVE DATE: This Order shall become effective immediately.



MURIEL BOWSER
MAYOR

ATTEST: 

KIMBERLY A. BASSETT
ACTING SECRETARY OF STATE OF THE DISTRICT OF COLUMBIA