

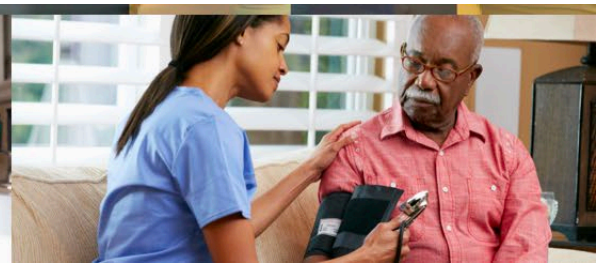
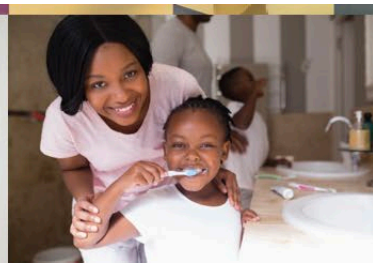
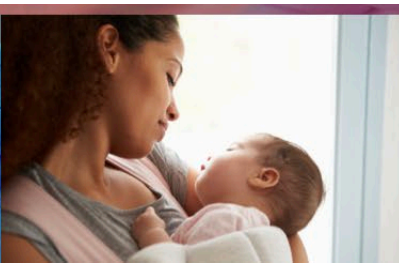


Community Development Network of Maryland Emerging Opportunities in Health and Housing

Mark Luckner, Executive Director

Maryland Community Health Resources Commission

October 5, 2021



CHRC Background & Mission

- Created by Maryland General Assembly in 2005:
 1. Expand access to health care in **underserved communities**;
 2. Support projects that serve **low-income Marylanders**, regardless of insurance status; and
 3. Build capacity of **safety net providers**.

CHRC Commissioners

Eleven Commissioners, appointed by the Governor

Edward J. Kasemeyer, CHRC Chair, Former Senator and Chair of the Maryland Senate Budget & Taxation Committee

J. Wayne Howard, CHRC Vice Chair, Former President and CEO, Choptank Community Health System, Inc.

Scott T. Gibson, Chief Strategy Officer, Melwood Horticultural Training Center, Inc.

Flor de Maria Giusti, LCSW-C, Social Worker, Johns Hopkins Bayview Medical Center

Celeste James, Executive Director of Community Health and Benefit, Kaiser Permanente of the Mid-Atlantic States

David Lehr, Chief Strategy Officer, Meritus Health

Karen-Ann Lichtenstein, Former President and CEO, The Coordinating Center

Carol Masden, LCSW-C, Executive Director, Maryland Rural Health Association

Sadiya Muqueeth, Dr.PH, Director of Community Health, National Programs, Trust for Public Lands

Destiny-Simone Ramjohn, PhD, Vice President, Community Health and Social Impact, CareFirst

Carol Ivy Simmons, PhD, Behavioral Health Operations Manager, Suburban Maryland, Kaiser Permanente

Impact of CHRC Grants

- 639 grants totaling \$98.4 million.
- Funded projects in all **24 jurisdictions**.
- More than **504,000 Marylanders** received services, many of whom have **complex health and social service needs**, and an additional 16,000 individuals receiving services under DDA.
- **75% of projects are sustained after grant ends.**

Recent Strategic Priorities

- Promote access to health services for every Maryland resident.
- Reduce health disparities and promote health equity.
- Support safety-net providers during the COVID-19 pandemic.
- Prioritize projects that are innovative, sustainable and replicable.
- Encourage locally-driven programs and interventions with community buy-in.

Recent Areas of Focus

- Expanding access to primary care services.
- Increase access to dental services.
- Promote maternal and child health.
- Address opioid crisis and promote behavioral health integration.
- Support Maryland Diabetes Action Plan.
- Build safety net provider capacity.

Types of Entities Funded

- Federally Qualified Health Centers
- Local Health Departments
- Community Based Providers
- Outpatient Behavioral Health Providers
- Dental Providers
- School-Based Health Centers
- Hospitals
- Institutes of Higher Education
- Free Clinics
- Substance Use Disorder Providers

CHRC as Steward of Public Funds

- Generate **return on investment**, i.e., cost-savings and improvements in health outcomes.
- Current portfolio of 227 open grants; \$12.7 million in funds managed.
- Prioritize projects that yield quantifiable outcomes, i.e., clinical outcomes and cost-savings (see next slides).
- Grantees are held accountable for performance and achieving goals and outcomes.

Generating Return on Investment

Calvert County Health Department

- “Project Phoenix,” provides integrated behavioral health/SUD services.
- Emphasizes barriers and SDOH, **ED visits dropped more than 70%**.
- Calvert Memorial continues to support project after CHRC grant.



Charles County Health Department

- Achieved **65% reduction** in inpatient admissions.
- Pre-Post analysis (3 months), ED visits among participants **dropped 60%**.
- **Total Cost Savings Calculated: \$1.4 million.**



Generating Return on Investment

Way Station

- Behavioral Health home pilot.
- 84 health homes in State.
- CHRC grant for \$170,000; \$1 million from private sources.



Lower Shore Clinic

- \$105,000 grant; \$927,560 in cost savings.
- Reported a 50% decrease in admissions and observations.

lower
shore
clinic

Improving Health Outcomes

Shepherd's Clinic

- 390 pre-diabetic and diabetic patients.
- **66% lost weight, and 70% had a reduced A1C.**



Mary's Center for Maternal and Child Care, Inc.

- 3,000 women in Prince George's County.
- **Prenatal care in the first trimester increased from 63.6% to 74%.**
- **Low-birth weight babies (2,500 grams or less) was 5%** (County rate is 9.1%, Maryland rate is 8.6%).



Maryland Health Equity Resource Act

To establish Health Equity Resource Communities (HERCs) and target State resources to specific areas of the state to:

- reduce health disparities;
- improve health outcomes;
- improve access to primary care;
- promote primary / secondary prevention services; and
- reduce health care costs, hospital admissions and readmissions.

Maryland Health Equity Resource Act

Pathways to Health Equity Program

- \$13 million in grant funding.
- 2-year grants to be issued by CHRC.
- Applicants should demonstrate self-sustainability as a HERC.
- Provides foundation and guidance to become a HERC.

Health Equity Resource Communities

- \$45 million in grant funding over 3 years.
- Emphasizes longer term interventions that address SDOH:
 - Housing;
 - Transportation;
 - Employment;
 - Food Security.

Definition of HERC

Contiguous geographic area that:

1. Measurable and documented disparities and poor health outcomes;
2. Small enough to allow for incentives to have a significant impact on improving health outcomes & reducing health disparities including:
 - a. Racial;
 - b. Ethnic;
 - c. Geographic; and
 - d. Disability related disparities.
3. Has a minimum population of 5,000 residents.

HERC Advisory Committee

Provide guidance and assistance to the CHRC in the following areas:

- implementation of the HERC program;
- HERC program evaluation and data metrics;
- preparation of an annual program reports; and
- strategies for tax incentives and loan repayments to assist HERCs in achieving their mission.

HERC Advisory Committee

Eleven members, appointed by the Governor and MGA Presiding Officers

The Honorable Edward J. Kasemeyer, Chair,
Community Health Resources Commission and
Chair of the HERC Advisory Committee

Noel Brathwaite, PhD, MSPH, Director, Minority
Health and Health Disparities, Maryland
Department of Health

Alyssa L. Brown, JD, Director, Innovation,
Research, and Development, Office of Health
Care Financing, Maryland Department of Health

Rebecca A. Altman, RN and MBA, Vice President
and Chief Integration Officer, *LifeBridge* Health

Elizabeth L. Chung, Executive Director, Asian
American Center of Frederick

Michelle Spencer, MS, Associate Chair, Inclusion,
Diversity, Anti-Racism, and Equity, Department of
Health Policy and Management, Johns Hopkins
Bloomberg School of Public Health

Maura Dwyer, DrPH and MPH, Former Health
Enterprise Zone Manager

Jonathan Dayton, MS, NREMT, Community
Relations and Population Health Supervisor,
Mt. Laurel Medical Center

Mikayla A. Walker, MPH, Management
Consultant, ReefPoint Group

Jacqueline J. Bradley, MSN, MSS, CRNP,
Bradley Consulting, LLC

The Honorable John A. Hurson, Esq., former
Chair, Maryland Community Health Resources
Commission

Subcommittee Activity

At the kick-off meeting on August 11 the HERC Advisory formed 3 Subcommittees:

- Data & Program Evaluation;
- Pathways Call for Proposals/Design; and
- Consumer Outreach & Community Engagement.

Additionally, Subcommittee members solicited public comment on a number of key questions for the development of the Pathways RFP.

Pathways /HERC Eligible Entities

The following entities are eligible to apply:

1. Nonprofit, community-based organization;
2. Nonprofit hospital;
3. An institution of higher education;
4. Federally Qualified Health Center; or
5. Local Government Agency (i.e., Local Health Department).

 The CHRC intends to use the HERC applicant eligibility requirements for the Pathways RFP

Partner, Partner, Partner!

- Applicants are strongly encouraged to develop coalitions to achieve the objectives of the Act.
- Community-based organizations and other community groups are encouraged to partner with an eligible entity as the lead applicant.
- Examples of entities that should be contacted: Historically Black Colleges and Universities (HBCUs) and Local Health Improvement Coalitions (LHICs).

Key Dates

- **October 6** – CHRC meeting to release Pathways to Health Equity Call for Proposals.
- **October 14** – Statewide Virtual Meeting to brief stakeholders on aspects of the Pathways RFP.
- **Oct/Nov** – Additional Regional Forums to engage community & FAQ Call to discuss specific questions from potential applicants.
- **December 6** – Applications Due to CHRC.
- **Early February 2022** – CHRC meeting to award Pathways grants.

Contact Information

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CHRC Website:

<https://health.maryland.gov/mchrc/Pages/home.aspx>

HERC Website:

<https://health.maryland.gov/mchrc/Pages/herc.aspx>