

MARK LUCKNER



Executive Director of the Maryland Community Health Resources Commission since 2009.

Previously served as senior policy adviser on health care, human services, and public safety issues for Governor Martin O'Malley's StateStat program and legislative aide in the Maryland House of Delegates for eight years, including six years as Assistant-to-the-Chairman for the Health and Government Operations Committee.

B.A. in American Government from Georgetown University and M.A. in American Government from Johns Hopkins University.



BACKGROUND ON THE CHRC



- The Community Health Resources Commission (CHRC) was created by the Maryland General Assembly in 2005 to expand access for low-income Marylanders and underserved communities.
- **Statutory responsibilities include:**
 - Increase access to primary and specialty care through community health resources
 - Promote emergency department diversion programs to prevent avoidable hospital utilization and generate cost savings
 - Facilitate the adoption of health information technology
 - Support long-term sustainability of safety net providers

BACKGROUND ON THE CHRC



- **Eleven Commissioners of the CHRC are appointed by the Governor.**

Allan Anderson, M.D., Chairman

Elizabeth Chung, Vice Chair, Executive Director, Asian American Center of Frederick

Scott T. Gibson, Vice President for Human Resources, Melwood Horticultural Training Center, Inc.

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

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

Surina Jordan, PhD, Zima Health, LLC, President and Senior Health Advisor

Barry Ronan, President and CEO, Western Maryland Health System

Erica I. Shelton, M.D., Physician and Assistant Professor, Johns Hopkins University School of Medicine, Department of Emergency Medicine

Ivy Simmons, PhD, Clinical Director, International Association of Fire Fighters Center of Excellence

Julie Wagner, Vice President of Community Affairs, CareFirst BlueCross BlueShield

Anthony C. Wisniewski, Esq., Chairman of the Board and Chief of External and Governmental Affairs, Livanta LLC

IMPACT OF CHRC GRANTS

- Since 2007, CHRC has awarded 210 grants totaling \$64.1 million. Most grants are for multiple years. CHRC has supported programs in all 24 jurisdictions.
- These programs have collectively served over 458,000 Marylanders. Most individuals have complex health and social service needs.
- Grants awarded by the CHRC have enabled grantees to leverage \$23 million in **additional** federal and private/nonprofit resources.
- **Of this \$23 million, more than \$19M has been from private and local resources.**

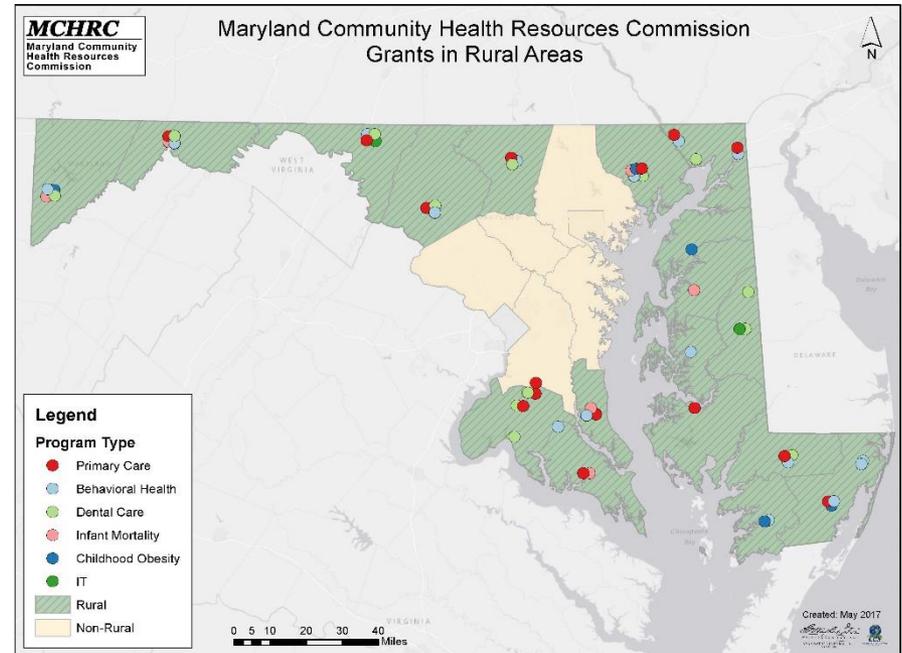
RURAL HEALTH AND CHRC

Awarded 107 grants totaling \$28 million to support programs in rural jurisdictions.

Projects served more than 82,000 residents.

Areas of Focus:

- Primary/Preventative Care
- Dental Care
- Integrated Behavioral Health Services
- Food Security/Obesity Prevention



MRHA-CHRC WHITE PAPERS

1. Social Determinants of Health and Vulnerable Populations in Rural Maryland; Issued: December, 2016

2. Bringing Care Where it is Needed: A Rural Maryland Perspective; Issued: May, 2017

3. Dental Access in Rural Maryland: Innovative Approaches to Care; To be issued: September, 2017

The cover page features the logos for the Maryland Rural Health Association (MRHA) and the Maryland Community Health Resources Commission (MCHRC). The title is "Health Care Innovation Across Rural Maryland: An Executive Summary". Below the title is an "Introduction" section that describes the partnership between MRHA and MCHRC to produce three white papers. It lists the three papers: "Social Determinants of Health and Vulnerable Populations in Rural Maryland" (Dec. 2016), "Bringing Care Where It Is Needed: A Rural Maryland Perspective" (May, 2017), and "Dental Access in Rural Maryland: Innovative Approaches to Care" (Oct. 2017). A URL is provided for more information. The text states that the CHRC has awarded 190 grants totaling \$60.3 million, with more than half (99) supporting programs in rural Maryland. At the bottom is a map titled "Maryland Community Health Resources Commission Grants in Rural Areas" showing the distribution of grants across the state, with a legend for program types and rural/non-rural areas.

MARYLAND RURAL HEALTH ASSOCIATION

MCHRC
Maryland Community Health Resources Commission

Health Care Innovation Across Rural Maryland: An Executive Summary

Introduction

The Maryland Rural Health Association (MRHA) and Maryland Community Health Resources Commission (CHRC) have partnered to produce three white papers over the past year to describe the impact of CHRC grants serving rural communities. MRHA is a nonprofit organization whose mission is to educate and advocate for the optimal health of rural communities and their residents. The CHRC was created by the Maryland General Assembly in 2005 to expand access to health care for low-income Marylanders and underserved communities in the state and to bolster the capacity of Maryland's health care safety net infrastructure to deliver affordable, high-quality health services. This executive summary highlights the lasting impact of CHRC grants in rural communities.

The following three white papers can be found on the MRHA website:

1. *Social Determinants of Health and Vulnerable Populations in Rural Maryland* (Dec. 2016)
2. *Bringing Care Where It Is Needed: A Rural Maryland Perspective* (May, 2017)
3. *Dental Access in Rural Maryland: Innovative Approaches to Care* (Oct. 2017)

<http://www.mdruralhealth.org/about-us/current-publications-educational-documents/>

The CHRC has awarded 190 grants totaling \$60.3 million. Of this, more than half (99 of 190) have supported programs in rural Maryland. The map below shows the CHRC grants in rural areas.

MCHRC
Maryland Community Health Resources Commission

Maryland Community Health Resources Commission
Grants in Rural Areas

Legend

Program Type

- Primary Care
- Behavioral Health
- Dental Care
- Infectious Disease
- IT
- Rural
- Non-Rural

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Created May 2017

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WHITE PAPERS – PROGRAM IMPACT

1. Driving innovation in rural communities

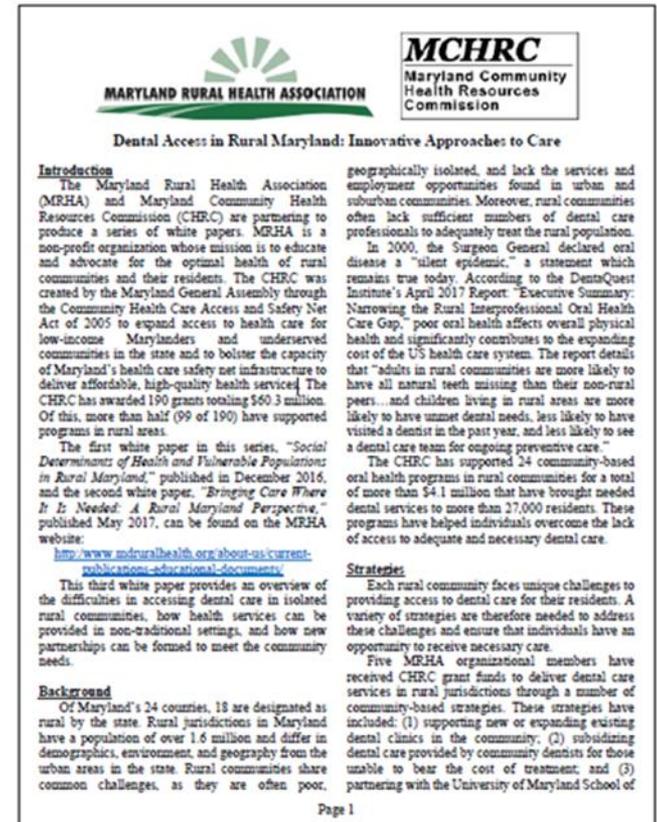
- Mobile Integrated Health
- Telehealth

2. Innovative ways to tackle Social Determinants of Health

- Transportation
- Health Literacy

3. Stretching limited public resources and leveraging private investment

- Private and Family Foundations
- Hospital-Community Partnerships



WHITE PAPERS – LESSONS LEARNED



1. Rural communities are particularly impacted by a shortage of providers, and care coordination programs can be an effective intervention.
2. Lack of access to public transportation is a major barrier to care. Transportation assistance or bringing health care to patients can be effective tools in helping people access care.
3. Promoting health literacy may be an effective tool in improving health outcomes.

CHRC FY 2019 CALL FOR PROPOSALS



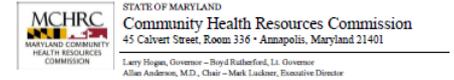
- **\$5.9 million available to support new projects**
- **This year's strategic priorities:**
 1. Serving vulnerable populations regardless of insurance status
 2. Promoting health equity and addressing social determinants of health
 3. Innovation, sustainability, and replicability
- **This year's Areas of Focus:**
 1. Essential health services, i.e., primary/preventative care, dental, and women's health services
 2. Addressing heroin and opioid epidemic through behavioral health integration
 3. Promoting food security and addressing obesity

CHRC FY 2019 CALL FOR PROPOSALS



Timeline of Key Dates of the FY 2019 RFP

October 17, 2018	Release Call for Proposals
November 13, 2018	Letters of Intent due
December 17, 2018	Deadline for receipt of applications
January 2019	Review of applications
Mid-February 2019 present to the CHRC;	Selected applicants grant award decisions follow



Promoting Community Health Resources:
*Supporting innovative, replicable, and sustainable projects
that serve vulnerable populations and promote health equity*

FY 2019 Call for Proposals

October 17, 2018