

**36<sup>th</sup> Meeting of the**  
**Maryland Community Health Resources Commission**  
**Thursday, March 18, 2010**  
**House of Delegate Building, 6 Bladen Street, Annapolis, MD**  
**Room 180**  
**3:00 PM – 6:30 PM**

Chairman Hurson called the meeting to order at 3:16 PM.

In addition to Chairman Hurson, Commissioners Sabatini, Roskos, Martinez-Vidal, Hunter, Tildon, and McClellan (via phone) were in attendance. AAG Mel Franklin was also in attendance.

**MEETING MINUTES**

Chairman Hurson asked for a motion to approve the January 21, 2010 meeting minutes. Commissioner Roskos suggested several minor changes. The motion to accept the minutes as amended, made by Commissioner Roskos and seconded by Commissioner Hunter, was approved through a unanimous voice vote of the Commissioners present.

**GRANT MODIFICATION REQUESTS**

Since the last Commission meeting, the Commission has received a total of seven grant modification requests. Of this total, CHRC staff recommended that two requests, the one for the Chase Brexton ED diversion program (#07-005), and the grant with Greater Baden (#08-025), should include full grantee presentations before the full Commission. Each grantee provided presentations outlining their requests to the full Commission at today's meeting.

A motion was made by Chairman Hurson to go into executive session to discuss grant modifications and individual grantee financial issues. The motion was seconded by Commissioner Hunter, and approved by the Commission on a voice vote. The Commission conducted an Executive Session.

A motion made to continue our public session was unanimous.

The Commission voted to approve the grant modification request with Chase Brexton, and CHRC staff will work with the grantee to develop a detailed "grantee performance template," that will be utilized by the other CHRC ED diversion grantees.

The Commission voted to approve, *with conditions*, the grant modification request with Greater Baden. Commissioners directed CHRC staff to direct Greater Baden to develop a more detailed project timeline for the three areas Baden proposes to utilize the remaining \$400,000 in the Commission's grant. CHRC staff was also directed to implement a robust grantee reporting evaluation with Baden, at least every six months, such that the Commission's funds would be awarded/allocated, on a sequential basis (rather than the full amount being awarded to the grantee 'up-front.' CHRC staff will execute the conditional award, in consultation with AAG Franklin, by developing a modified grant signing agreement with Baden, and work with Baden to ensure grantee compliance with the terms of the Commission.

In addition to the grant modifications involving Chase Brexton and Greater Baden, the Commission considered and approved five grant modifications via a 'consent calendar.' These grant modification

requests were reviewed previously by CHRC staff, and found to be *non-controversial*, as the requests involved time extensions of the grant periods involved.

#### **FINANCIAL REVIEW OF CHRC GRANTS**

The Commission staff presented a financial analysis of the Commission's 63 grants. This analysis identified grantees that were "off-payment" schedule, and grantees that had submitted invoices, but not submitted completed "Milestone & Deliverable" reports, narrative summaries, and expenditure reports. The Commission confirmed that these documents are necessary as a condition of payment, and directed staff to contact these grantees notifying them of their obligations under the terms of the grant agreement. CHRC staff will continue the process of notifying these grantees, which is ongoing. AAG Franklin confirmed that the original language of the Commission's grant agreements affords the Commission the opportunity to withhold grantee payments, as a condition of grantee performance or non-compliance, and Mr. Franklin confirmed the legal ability of the Commission to have funds that have been awarded/allocated to grantees be returned to the Commission's funds in the event of grantee non-compliance.

#### **DISCUSSION OF POTENTIAL AREAS OF CHRC FOCUS IN FY 2011**

As directed by the Chairman, the CHRC staff presented an overview of suggested areas of Commission focus in state FY 2011, which reflected feedback received from a number of stakeholders, including DHMH leadership and program staff, local health departments, and others. Commissioners discussed these areas in earnest, and voted to approve the following areas of focus for the Commission in state FY 2011: (1) Patient-centered medical homes; (2) Infant mortality; (3) drug treatment/re-entry programs; (4) domestic violence; (5) pediatric dental care; (6) care coordination programs; and (7) senior citizens.

Commissioners voted that pursuing patient-centered medical homes (PCMH) is contingent on CHRC's inclusion in the Administration's PMCH bill (HB 929/SB 855) during the 2010 legislative session.

The Commission directed the CHRC staff to provide suggestions regarding which topical areas that were approved by the Commission should be pursued via the Commission's traditional RFP approach (as has occurred in the past) versus which areas should be pursued via a more targeted outreach process. The CHRC staff will develop and provide these recommendations to the full Commission membership over the next few days. The Commission will then decide which areas should be included in the Commission's RFP for FY 2011, and which areas will be pursued via the letter of intent route. The Chairman indicated that this issue will be discussed in a conference call among the full Commission membership in mid-April.

#### **ADJOURNMENT**

**Chairman Hurson adjourned the meeting at 6:15 PM.**

#### **NEXT MEETING DATES**

The Commission will conduct a conference call on Thursday, June 17, 2010 at 4:30 pm, to discuss which applicants will present before the Commission on June 24, 2010 at 2:00 pm.