Presentation to Centers for Medicare & Medicaid Services

Maryland Department of Health and Mental Hygiene Maryland Community Health Resources Commission

April 1, 2013













Building Capacity in Maryland's Safety Net Community

- Community Health Resources Commission (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.
- The CHRC is a quasi-independent agency operating within the Maryland Department of Health and Mental Hygiene. Its 11 members are appointed by the Governor.
- CHRC has a history of working with safety net providers, as its grantees include FQHCs, local health departments, free clinics, and behavioral health providers.
- Over the last seven years, the CHRC has awarded 110 grants totaling \$26.3 million supporting programs in all 24 jurisdictions in Maryland.



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Central Questions of CHRC Business Plan

- Responding to the recommendations of the Health Care Reform Coordinating Council (HCRCC), the CHRC developed a business plan in February 2012 that provided recommendations for how the state could promote the readiness of safety net providers as Maryland implements the Affordable Care Act.
 - 1. What should be expected of traditional safety net providers in an environment in which more people have insurance coverage?
 - 2. How can the capacity of these providers be leveraged and fostered?











Key Findings of CHRC Business Plan

- More than 65% of providers indicated they are "fairly ready" for health care reform with only 8% extremely ready.
- Approximately 15% of safety net providers and 22% of health departments reported fully implementing EMR systems.
- Needs/requests for technical assistance were diverse and varied.
- The favored methodologies for providing assistance including customized/individualized training, learning collaboratives, and peer-topeer initiatives.









Key Recommendations of Business Plan

- Provide technical assistance and support related to "mechanics" of health reform legislation.
- Work with DHMH, the Governor's Workforce Investment Board, and other agencies to support statewide plans for workforce development.
- Assist community health resources by facilitating access to data and interpreting or translating this data to meet customized needs.
- Support efforts to develop expanded systems for eligibility and enrollment of uninsured and underinsured patients.
- Catalyze innovative public-private partnerships that will leverage additional private resources.









Safety Net Provider Planning

- Maryland Health Access Assessment Tool
- Facilitating safety net and health plan relationship building
- Local Health Departments
 - Helping health officers develop business plans for 2014 and beyond
 - Assisting with contracting
 - Assisting with billing
- Community-based health center voluntary certification program









Maryland Health Access Assessment Tool

- Purpose: To collect survey information from Maryland safety net providers on the current uninsured population and where they receive care in an effort to help the State anticipate the likely supply of health care providers that will be needed to meet the needs of the newly-insured in 2014.
- Data collection: Online survey disseminated on 12/20/12 to Maryland safety net providers, data was collected from survey respondents, and aggregate data reports were created for each County.
- Survey respondents: 101 organizations/215 facilities
- Survey respondents facility types: Local Health Departments, Behavioral Health providers, Federally Qualified Health Centers and look alikes, Ryan White grantees, Charitable/Free Clinics, Mobile Clinics, Homeless Services, Family Planning providers









Maryland Health Access Assessment Tool

- County level aggregate data summaries include:
 - County population insured/uninsured
 - Total patients served by survey respondents by payer and coverage status
 - Health care providers by type and FTE
 - Population to provider ratios for primary care, mental health, and dental
 - Provision of essential health benefits
 - Contracting
 - Billing
 - Credentialing







Facilitating Safety Net and Health Plan Relationship Building

Meet and Greet Sessions later this Spring

- The state will host regional "meet and greet" sessions to allow participating carriers and safety net providers to begin discussions on contracting.
 - Information on expected enrollment
 - Information on Medicaid and commercial carrier requirements
 - Technical assistance overview
- Carriers will be encouraged to attend these sessions in order to identify community providers who are available to contract within their service area.









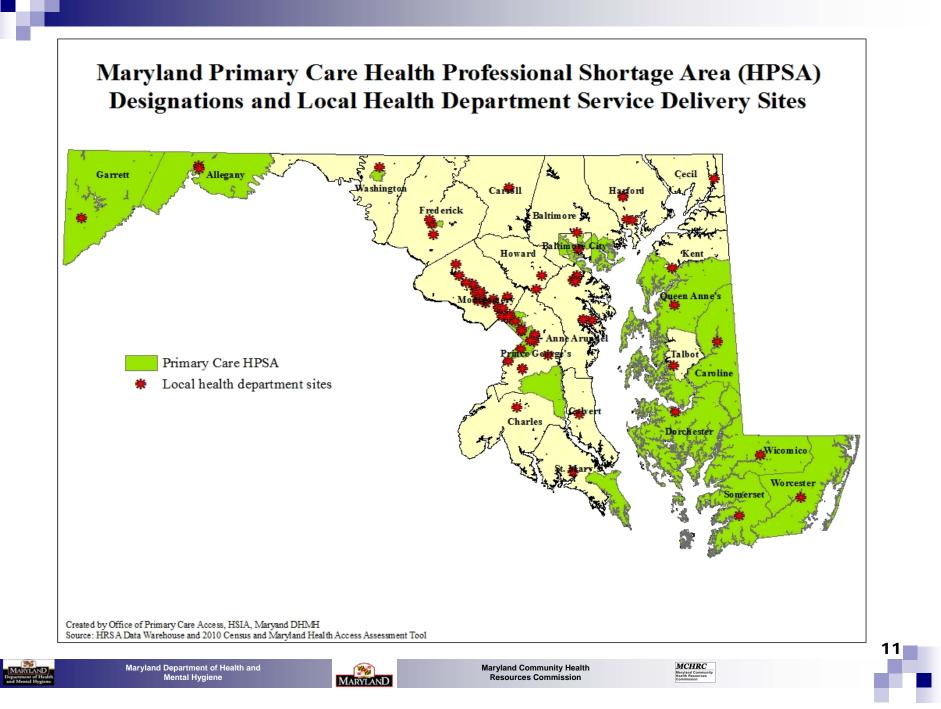
Local Health Department Planning

- Helping health officers develop a "Business Plan" for 2014 and beyond based on community needs
- Helping health officers develop a business case
 - Capacity to improve access for health plan enrollees
 - Capacity to provide care continuity
 - Capacity to partner effectively with health plans
 - Contracting
 - Credentialing
 - Billing
- Contracting assistance through umbrella approach
- Building the technical capacity for billing: CDC Immunization Grant









Community-based Health Center Voluntary Certification

- Purpose: assess safety net provider performance to better target resources/opportunities to improve overall performance
- Readiness dimensions
 - Financial stability
 - Accessibility to community residents
 - High quality health care
 - Active engagement in local public health partnerships
- Request for comment: August 6, 2012 and December 13, 2012
- Proposed regulations planned for later this year







Safety Net Provider Planning

Technical Assistance Program

- The state will provide a technical assistance program to build capacity and promote readiness of safety net providers.
- The assistance will be geared towards helping safety net providers transition from a grant-based revenue structure to one that involves billing third-party payers (Medicaid/MCO and commercial plan/QHP networks).
- The CHRC may also provide opportunities for grant funding to support infrastructure development later this year.



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Safety Net Providers and Potential Areas of Technical Assistance

Grant-Funded Providers	Providers with Medicaid Experience
Examples: free clinics and school-based health centers	Examples: FQHCs, public behavioral health providers, local health departments
Potential areas of Assistance	Potential areas of Assistance
 Credentialing Submitting Claims IT/EMR support Strategic Business Planning & developing "Value propositions" for potential payors 	 Pricing and MCO/QHP contracting Improving efficiencies in practice models Producing outcomes data Utilizing EHR networks





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Concept: Health Access Impact Fund

- The CHRC and private foundations share similar grantees and "constituencies," i.e., FQHCs, free clinics, behavioral health providers, and school-based health centers.
- Create a Health Access Impact Fund by pooling public funding from the CHRC with private funding (local philanthropic partners) to create a "public-private partnership" to support specific projects to build capacity of the safety net infrastructure.
- The Fund could be used to award grants and/or support contracts to provide technical assistance in specific areas such credentialing, contracting, and billing/EMR/practice management.



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