

**Shirley Nathan-Pulliam Health Equity Act of 2021**  
**Maryland Commission on Health Equity (MCHE)**  
**April 20, 2022, 1:00 pm - 3:00 pm**  
**Minutes**

**Welcome and introductions**

**Commission Members In Attendance:** Danielle Meister, Erica S. Chapman, Ernest Carter, Jennifer A. Edwards, Jinlene Chan, Kanishk Sharma, Keisha Peterson, Keva S. Jackson, Kirsten Rob-McGrath, Leonard Croft, Lisa A. Burgess, Momoh Conteh, Roslyn Jones, Sarah Beardsley, Steve R. Schuh

**Guests in Attendance:** Angela J Washington, Ann Ciekot, Becca Lane, Catherine Grason, Christine Krone, Clark Beil, David Cooney, David Mann, Diana Estrada Alamo, Djinge Lindsay, Emily Gruber, Erin Schurmann, Heather Shek, Jean Drummond, Kim Sydnor, Leni Preston, Maisha DouyonCover, Mariama Gondo, Marianne Gibson, Mark Luckner, Mark Martin, Maulik Joshi, Melissa Einhorn, Meredith J. Lawler, Michael Courey, Michelle Blanc, Michelle B. Hammond, Morgan Jones, Nikki Blake, Noel Brathwaite, Rebecca Altman, Sevetra Peoples, Susan Lawrence, Theresa Lee, Walter Sallee, Pilar Bosley, Kerk Allen, Suzanne Ludlow, Danielle Haskin, Marie Grant, Summer Lybarger

**Departments in Attendance:**

Department of Aging -Leonard Croft  
Department of Agriculture -  
Department of Budget and Management - *Not in Attendance*  
Department of Commerce - *Not in Attendance*  
Department of Public Safety and Coordination - Angela J Washington  
Department of Disabilities - Kirsten Robb McGrath  
Department of Education - Walter Sallee  
Department of Environment - Erica Chapman  
Department of General Services - Jennifer Edwards  
Department of Housing and Community Development - danielle Meister  
Department of Information Technology - *Not in Attendance*  
Department of Juvenile Services - Keva Jackson  
Department of Labor - Sarah Beardsley  
Department of Natural Resources - *Momoh Conteh*  
Department of Planning - Kanishk Sharma  
Maryland State Police -  
Department of Transportation - Melissa Einhorn  
Department of Veteran Affairs - Roslyn Jones  
Department of Behavioral Health - Lisa A. Burgess  
Maryland Insurance Administration - David Cooney  
MACHO - Ernest Carter  
Maryland State Senate - Sevetra Peoples  
House of Delegates - *Not in Attendance*

**I. Data advisory committee update- Dr. Mark Martin**

- A. Some specific requirements laid out, legislative requirements
  - 1. Maintain a Health Equity Data Set
  - 2. Analyze impact of 11 social factors on health outcomes
  - 3. Establish a State Plan for Equity
  - 4. Prepare and submit a report with findings and recommendations by 12/1/2023
- B. Data Set
  - 1. Analyzing prevalence and impact of adverse social factors
  - 2. 3 potential database models
    - a) Ecologic data set
      - (1) Zip code, or county level, or something in between
    - b) Impute
      - (1) Zip code or county level social factor data into person level data sets of health outcomes.
    - c) Person level social factor data
      - (1) Linked to person-level health outcome data

**II. Health Equity Policy Committee Update- Dr. Noel Brathwaite**

- A. Goal to advise the commission on implementation of an equity framework
- B. Strategic Mission
  - 1. Consult with and gather information from the experiences of Marylanders and other states in drafting a new Health Equity Framework for Maryland
- C. Meetings Guidelines
  - 1. Held every 6 weeks
  - 2. Discuss reports
- D. Workgroup Formulation
  - 1. Policy
    - a) Review current policy, determines improvements and additional policy as needed
  - 2. Voices of the community
    - a) Perform empathy mapping to determine how to best incorporate community members needs into deliverables
  - 3. Best practices
    - a) Review other jurisdictions practices when it comes to health equity
- E. Workgroup progress
  - 1. Policy
    - a) Compiling beginnings of a health equity policy assessment process
    - b) Analyzing policy regarding elements of health equity
  - 2. Voices of the community
    - a) Determining community members needs and wants
  - 3. Best Practices
    - a) Examining success narratives for their model HE Framework
- F. Phase 3:

1. Work to be completed by May 19th, 2022
  - a) Copy of HEF working draft to be completed
  - b) Collaboration with MACHO Equity Committee for their perspectives
  - c) Collaboration with

**III. Statewide Integrated Health Improvement Strategy (SIHIS)- Erin Schurmann**

- A. Statewide integrated health improvement strategy
  1. State has set population health improvement goals with certain metrics
- B. Presentations on local level interventions
- C. Update on pathways to health equity grant
- D. Plan to engage business on a local level
- E. Hosted a forum for hospital leaders
  1. Shared actionable information on intervention
- F. Substance use response program?? Inquire about

**IV. Legislative recap of Equity initiatives- Heather Shek**

- A. Less Equity Focused year
- B. Significant Legislative session Health Equity bills
  1. Workforce Expansion
    - a) Expanding the healthcare workforce
    - b) HB97 Workgroup on BLAAPI behavioral health providers
    - c) HB625 Commission
    - d) HB1208
    - e) HB1464 MD loan Assistance repayment program for physicians and physician assistants
      - (1) Includes part time/prorated student loan repayment
    - f) SB518 career pathways for healthcare workers program
    - g) SB696 Maryland Loan Assistance Repayment for Nurses and Nursing Workers - Program Establishment and Funding
  2. Access to healthcare expansion
    - a) HB6 Maryland Medical Assistance Program - Dental Coverage for Adults
    - b) HB282 Sales and Use Tax - Diapers - Exemption
    - c) HS288 Sales and Use Tax - Baby Products - Exemption
    - d) HB364 Sales and Use Tax - Medical Devices -
    - e) HB684 Maryland Medical Assistance Program - Psychiatric Inpatient Care - Admissions Restrictions (Psychiatric Hospital Admissions Equity Act)
    - f) HB1080 Maryland Medical Assistance Program p Children and Pregnant Women
    - g) SB734 Maryland Health Care Commission - Primary Care Report and Workgroup
    - h) Medicaid Duala Services

**V. Pathways Grants Update- Mark Luckner and Rebecca Altman**

- A. Maryland Health Equity Resource Act 2021, Policy Objectives

1. To reduce health disparities
  2. Improve health outcomes
  3. Improve access to primary care
  4. Promote primary and secondary
- B. Bill passed last year
1. Pathways to health equity program
    - a) Awarded 9 grants, amounting to 13.5 million
    - b) Estimated to serve 75,000
    - c) Will serve urban, rural, and suburban communities
  2. Health Equity resource communities (HERCs)
    - a) HERC-ability
      - (1) Evidence supporting progress in addressing policy  
adjectives
      - (2) Key stakeholder participation
      - (3) Self sustainability
      - (4) Integration with the states health improvement plans, local  
health improvement coalitions HSCRC Regional  
Partnership
      - (5) Partnership capacity
    - b) Types of data reported/collected
      - (1) Standardized measures
      - (2) Customized measures
      - (3) Additional data provided by CRISP
    - c) Immediate Next Steps
      - (1) Execute grant agreements
      - (2) Finalize data measures to be collected
      - (3) Weekly meetings
      - (4) 90 day progress checkups
      - (5) Submit data for first period my fall 2022

**VI. Special Presentation: Addressing Equity at Meritus Health- Dr. Maulik Joshi**

- A. Five point plan every health care provider can incorporate
- B. 1. Diversity
  1. Supervisor and up must have a racially diverse candidate in the pool
    - a) Rooney Rule
  2. Unconscious bias training
  3. Make leadership reflective of community
- C. 2. Disparities Health Equity Report
  1. Honest and upfront about disparities
    - a) Taking steps to eliminate disparities
- D. 3. Social Determinants of Health
  1. SDOH screenings to patients
  2. Lessons learned
    - a) Gaps exist in care, post operative needs, community resources
- E. 4. Community Health

1. A passion dedicated to simply getting healthier
2. Picking goals and going after it.

**VII. Closing and Wrap up**

- A. Email Marianne Gibson two metrics for health equity