



MARYLAND RURAL HEALTH ASSOCIATION

Educating and advocating for
the optimal health of rural
communities and their residents.

**Community Health Resources Commission Meeting
White Paper Series Presentation**

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Thursday, June 29, 2017

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*

Key Findings from White Paper #1 - Outcomes & Impacts

Social Determinants of Health and Vulnerable Populations in Rural Maryland

- Calvert County Health Department – Healthy Beginnings Program
 - ❖ More than 100 unintended pregnancies have been prevented
 - ❖ Approximately 25 cases of Neonatal Abstinence Syndrome (NAS) prevented
 - ❖ Based on national statistics, this translates to \$1.7 million savings
 - ❖ Seen 6 fewer low-birth weight babies that would have required NICU services; each low-birth weight baby results in \$100,000+ in hospital costs
 - ❖ Placed almost 200 long acting reversible contraceptive devices in women at high risk of substance use; has likely prevented >100 unintended pregnancies
 - ❖ Projected savings in maternal and neonatal health expenses is \$2.3-\$3.9 million
- Garrett County Health Dept. – Medication Assisted Treatment Program
 - ❖ Reduce overdose deaths & overdose admissions to local emergency rooms
 - ❖ Build capacity to deliver Naloxone and provide MAT in Garrett County

Key Findings from White Paper #1 - Outcomes & Impacts

Continued...

- Tri-County Local Health Planning Coalition of the Lower Shore
 - ❖ 85% reduction in total diabetes related ER visits in first 12 months
 - ❖ 89% reduction in ER visits for the highest ER users (3+ visits/year)
 - ❖ Savings of \$189,000 from a reduction in avoidable hospital utilization
- Lower Shore Clinic in Wicomico County – CareWrap Team
 - ❖ Of first 51 referrals, only 3 admissions, meaning 76.9% not readmitted within 30 days
 - ❖ 67% of clients were not readmitted (data from first reporting period)

Key Findings from White Paper #2 - Outcomes & Impacts

Bringing Care Where it is Needed: A Rural Maryland Perspective

- **Community Health Workers – Caroline-Dorchester HEZ**
 - ❖ 87% of participants have improved baseline blood pressure
 - ❖ 61% of participants with diabetes have been removed from at least one medication
 - ❖ 78% of participants on multiple medications for multi-morbidity issues have been removed from at least one medication

- **School-based Health Centers – Wicomico County Health Department**
 - ❖ Increase access to integrated health and behavioral health care services

Key Findings from White Paper #2 - Outcomes & Impacts

Continued...

- **Mobile Integrated Health Care – Charles County Health Department**
 - ❖ Increase the number of participants who visit their Primary Care Physicians twice a year for routine care
 - ❖ Decrease the number of Emergency Department visits and 911 calls among participants by 25% in Year 1
 - ❖ Decrease average number of Emergency Department visits among high utilizers from 32 to 24 visits per patient

Rural Health 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.

THANK YOU

Questions?