



STATE OF MARYLAND

Community Health Resources Commission

45 Calvert Street, Room 336 • Annapolis, Maryland 21401

Larry Hogan, Governor; Boyd Rutherford, Lt. Governor
Edward J. Kasemeyer, Chair; Mark Luckner, Executive Director

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Community Health Resources Commission Impact Report

Background

The Maryland Community Health Resources Commission (CHRC) was created by the Maryland General Assembly in 2005 to expand access to health care services in underserved communities, support programs that serve low-income and vulnerable populations, and strengthen the capacity of Maryland's network of safety net providers across the state through its grant making authority. The CHRC is an independent commission within the Maryland Department of Health (MDH) and works closely with MDH and other agencies at the state level to address Maryland's health care priorities.

The demand for CHRC grants consistently exceeds the available fiscal year budget, with approximately 19% of requests being funded. Since its inception, the CHRC has awarded 665 grants that:

- total \$119.1 million;
- support programs in every jurisdiction in the state;
- have served more than 517,000 low-income individuals with complex health and social service needs; and
- leveraged an additional \$31.8 million, the bulk of which (\$26.8 million) comes from private and local resources

Most of the CHRC grants serve low-income individuals with complex health conditions and are designed to reduce minority health disparities, address Social Determinants of Health, and promote overall health equity in the state.

Steward of Public Resources

The CHRC implements a rigorous grant review process to evaluate, research, and analyze innovative grant requests to present to the 11 Commissioners for their approval. Each grant request is carefully evaluated. Grantees selected for funding are monitored closely by CHRC staff and grantees are held accountable for performance. The CHRC currently administers a portfolio of 135 open grants totaling \$26.8 million, with four full-time staff members.

Stabilizing the Safety Net During the COVID-19 Pandemic

Early in the COVID-19 virus pandemic, the CHRC recognized the unprecedented challenges facing Maryland's safety net providers. In response, the CHRC issued its first ever emergency funding grants to provide emergency funding relief to safety net providers navigating the impact of the COVID-19 pandemic. The CHRC awarded 46 grants totaling \$1.5 million in emergency funding, with a particular focus on organizations serving minority populations as COVID-19 has exacerbated ongoing, persistent minority health disparities in these communities. These funds were used to support the delivery of services via telehealth (e.g., video enabled laptops), the procurement of PPE, and measures to implement social distancing and infection control guidelines.

CHRC Strategic priorities: Innovation; Sustainability; and Cost-Saving

The following three projects illustrate CHRC's approach to addressing its priorities:

- **Charles County Health Department** received a three-year grant (\$400,000) for its new Mobile Integrated Health (MIH) program to serve vulnerable residents with complex health needs who call 911 frequently. The MIH team works with clients to better manage chronic conditions (e.g., hypertension and diabetes) and facilitate access to needed services and resources. The program has served more than 135 clients and achieved demonstrable reductions in avoidable hospital and EMS utilization. A three-month pre- versus post-intervention analysis demonstrated a 57% drop in EMS and ED utilization; a 67% reduction in hospitalizations; and a 90% drop in 30-day readmissions. A subset analysis of hospital and ED visit charges for a one-month pre-and post-intervention period shows a 78% reduction in cost from \$910,000 to \$198,000. Clients saw a 68% improvement in their hypertension and clients with diabetes saw a 38% improvement. The grantee leveraged the initial CHRC grant to secure an additional \$150,000 from Charles Regional Medical Center. In addition to this MIH grant in Charles County, the CHRC has funded MIH programs in Prince George's, Queen Anne's, and Wicomico Counties, and Baltimore City. These programs are under active implementation.
- **Way Station (Frederick)** is an outpatient mental health provider that received a two-year grant (\$170,000) for a pilot program to integrate primary and behavioral health care. The grantee leveraged an additional \$1 million from private sources and the program helped lay the groundwork for the launch of the MDH Medicaid Behavioral Health Home Initiative. There more than 80 health homes in Maryland.
- **Lower Shore Clinic (Salisbury)** is an outpatient behavioral health service provider that received a two-year grant (\$105,000) to support the "CareWrap" program, an innovative partnership with Peninsula Regional Medical Center (PRMC) to serve residents visiting the PRMC emergency department for behavioral health treatment needs in high volumes and to provide care coordination services for these individuals post-hospital discharge. Based on data supplied by PRMC, the CareWrap program achieved an overall cost savings of \$927,560 in reduced hospital utilization over a 15-month period.
- **Garrett County Health Department** received a three-year grant (\$180,000) to support the use of telehealth technology to increase access to Medication Assisted Therapy (MAT) consistent with recommendations from the Maryland Heroin and Opioid Task Force. The program was a collaboration between the Garrett County Health Department and the University of Maryland School of Medicine, Department of Psychiatry. Program participants received outpatient substance use treatment and buprenorphine prescriptions through telehealth sessions with University of Maryland psychiatrists. All program participants obtained at least one MAT prescription after program discharge, and 85.7% of participants continued to engage in alcohol or drug dependence treatment for at least 30 days.

Improving Health Outcomes: Reducing chronic disease and infant mortality

- **Shepherd's Clinic (Baltimore City)** received a two-year (\$105,000) grant to support its diabetes self-management program, providing services to 390 pre-diabetic and diabetic patients. Among patients who participated in diabetes self-management education, 66% lost weight and 70% had a reduced A1C. Among patients who participated in diabetes prevention counseling, just one became diabetic.
- **Chinese Culture and Community Services Center (Montgomery County)** received a three-year (\$200,000) grant to support the relocation and expansion of the clinic in Gaithersburg. The clinic provides primary care, case management, prescription assistance, lab testing, and free screening and vaccinations for Hepatitis B to individuals facing complex health and social needs. At the end of the

second year of the grant, 35% of those diagnosed with diabetes had an A1C below 7, and 60% of individuals diagnosed with hypertension had a blood pressure of less than 140/90.

➤ **Mary's Center for Maternal and Child Care, Inc. (Prince George's County)** received a two-year (\$300,000) grant to increase access to prenatal care and expand its women's health program to improve birth outcomes and reduce infant mortality in Prince George's County. The grant served 3,000 women, and the percentage of women in the program receiving prenatal care in the first trimester increased from a baseline of 63.6% to 74%. The percentage of women delivering low-birth weight babies (2,500 grams or less) was 5% as compared to 9.1% for Prince George's County and 8.6% statewide.

Public-Private Partnerships: Leveraging Resources to Maximize Impact on Individuals and Communities

The \$85.9 million in grants made by CHRC have been leveraged with an **additional** \$31.8 million, the bulk of which (\$26.8 million) comes from private and local sources. These programs have had an impact across the state by improving children's access to health and social services; expanding behavioral health programs; building the capacity of small community-based organizations; and lowering hospital costs to support Maryland's unique health care delivery system transformation.

➤ **MedStar St. Mary's Hospital** utilized their \$150,000 CHRC grant to leverage an additional **\$150,000** from the Rural Maryland Council to increase access to dental services for Medicare, un- and underinsured residents of St. Mary's County.

➤ **Family Services, Inc., Thriving Germantown** increased access to health and social support services at a Title I elementary school with a \$250,000 CHRC grant and **\$2,014,832** in private and local funding.

➤ **La Clinica del Pueblo** utilized a \$300,000 grant and leveraged **\$857,000** of additional resources to open a new federally qualified health center site in Hyattsville.

➤ **Access Carroll** received three grants totaling \$525,000 and leveraged **\$841,708** in additional funding to support their somatic, dental, and behavioral health services, all in one location.

➤ **Pressley Ridge** received a CHRC grant for \$420,000 to expand their evidenced-based family preservation program serving families impacted by the opioid crisis who are referred by Child Protective Services, with specific focus on infants and children at serious risk for removal from the home. Pressley Ridge leveraged this grant to obtain **\$110,000** in additional funding from United Health Care.

For further information, visit the Website at <https://health.maryland.gov/mchrc/Pages/Home.aspx>.