

Community Health Resources Commission

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BACKGROUND ON THE CHRC



- The Community Health Resources Commission (CHRC) was created by the Maryland General Assembly in 2005 to expand access for low-income Marylanders and underserved communities.
- Statutory responsibilities include:
 - Increase access to primary and specialty care through community health resources
 - Promote emergency department diversion programs to prevent avoidable hospital utilization and generate cost savings
 - Facilitate the adoption of health information technology
 - Support long-term sustainability of safety net providers
- The Maryland General Assembly approved legislation (Chapter 328) in 2014 to re-authorize the CHRC until 2025.

IMPACT OF CHRC GRANTS



- Since 2007, CHRC has awarded 190 grants totaling \$60.3 million. Most grants are for multiple years.
- CHRC has supported programs in all 24 jurisdictions.
- These programs have collectively served approximately 395,000 Marylanders.
- Grants awarded by the CHRC have enabled grantees to leverage \$21.4 million in <u>additional</u> federal and private/ nonprofit resources.
- Of this \$21.4 million, \$17.6 has been from private and local resources.

CHRC FY 2018 CALL FOR PROPOSALS



Strategic Priorities:

- (1) Preserving state's ability to serve vulnerable populations, regardless of insurance status;
- (2) Promoting health equity by addressing the social determinants of health; and
- (3) Supporting community-based projects that are innovative, sustainable, and replicable.

MCHRC Maryland Community Health Resources Commission Tay Stope, Community Health Resources Lay Stope, Community Health Resources: Supporting innovative and sustainable projects that serve vulnerable populations and promote health equity FY 2018 Call for Proposals October 19, 2017

Three Types of Projects:

Essential health services
Behavioral health/Substance Use
Obesity and food security

This year's RFP generated 46 proposals requesting a total of \$19.1 million. Budget permits \$2.3 million in new awards this year.

CHRC DENTAL GRANTS



The CHRC has awarded 36 dental grants totaling \$7.2 million. These programs have served more than 55,000 Marylanders.

CHRC has funded three types of oral health programs:

- Promoted partnerships with the University of Maryland School of Dentistry to provide dental care while also providing clinical training to senior students;
- 2. Subsidized dental care provided by community dentists for those unable to bear the cost of treatment; and
- 3. Supported new or expanded existing dental clinics in the community.

IMPACT OF DENTAL GRANTS



Highlighted in a white paper released by the Maryland Rural Health Association, "Dental Access in Rural Maryland: Innovative Approaches to Care".

Outcomes tracked/reported may include:

- Number of patients receiving preventative or advanced dental services
- Number of children receiving fluoride treatment or sealants
- FFS revenue generated by billing
- Number of dental-related ED visits
- Chronic disease metrics, including screenings for hypertension and diabetes



Health Resources

Dental Access in Rural Maryland: Innovative Approaches to Care

Introduction
The Maryland Rural Health Association (MRHA) and Maryland Community Health Resources Commission (CHRC) are partnering to produce a series of white papers. MRHA is a non-profit organization whose mission is to educate and advocate for the optimal health of rural communities and their residents. The CHRC was created by the Maryland General Assembly through the Community Health Care Access and Safety Net Act of 2005 to expand access to health care for low-income Marylanders and underserved communities in the state and to bolster the capacity of Maryland's health care safety net infrastructure to deliver affordable, high-quality health services. The CHRC has awarded 190 grants totaling \$60.3 million. Of this, more than half (99 of 190) have supported programs in rural areas.

The first white paper in this series, "Social Determinants of Health and Vulnerable Populations in Rural Maryland," published in December 2016. and the second white paper, "Bringing Care Where It Is Needed: A Rural Maryland Perspective," published May 2017, can be found on the MRHA

This third white paper provides an overview of the difficulties in accessing dental care in isolated rural communities, how health services can be

Of Maryland's 24 counties, 18 are designated as rural by the state. Rural surjedictions in Maryland have a population of over 1.6 million and differ in urhan areas in the state Rural communities share

geographically isolated and lack the services and employment opportunities found in urban and suburban communities. Moreover, rural communities often lack sufficient numbers of dental care

professionals to adequately treat the rural population. In 2000, the Surgeon General declared oral disease a "silent epidemic," a statement which remains true today. According to the DentaQuest Institute's April 2017 Report: "Executive Summary: Narrowing the Rural Interprofessional Oral Health Care Gap," poor oral health affects overall physical health and significantly contributes to the expanding cost of the US health care system. The report details that "adults in rural communities are more likely to have all natural teeth missing than their non-rural peers...and children living in rural areas are more likely to have unmet dental needs, less likely to have visited a dentist in the past year, and less likely to see a dental care team for ongoing preventive care."

The CHRC has supported 24 community-based oral health programs in rural communities for a total of more than \$4.1 million that have brought needed dental services to more than 27,000 residents. These programs have helped individuals overcome the lack of access to adequate and necessary dental care.

Each rural community faces unique challenges to providing access to dental care for their residents. A variety of strategies are therefore needed to address these challenges and ensure that individuals have an

opportunity to receive necessary care.

Five MRHA organizational members have received CHRC grant funds to deliver dental care services in rural jurisdictions through a number of community-based strategies. These strategies have included: (1) supporting new or expanding existing dental clinics in the community, (2) subsidizing dental care provided by community dentists for those unable to bear the cost of treatment; and (3) partnering with the University of Maryland School of

PARTNERING WITH DENTAL SCHOOL



West Cecil Health Center, a two-year, \$325,000 grant to support new clinic and partnership with University of Maryland Baltimore School of Dentistry (one of five CHRC grants involving Dental School).

- Clinic opened in 2017 and served 1,660 unduplicated patients in 6 months. More than 1,000 adult patients received blood pressure screening.
- Clinic provides transportation assistance where necessary.
- Received additional \$100,000 grant from Dresher Foundation.





PURPOSE OF WEST CECIL PROGRAM



- Increase access to and improve overall oral health care in Cecil and Harford Counties and surrounding communities and decrease burden of dental-related ED visits from local hospitals.
- Identify gaps in overall preventive health care and provide linkage resources to improve overall health of members in the community.



KEY OBJECTIVES



- Increase access to affordable oral health care for target population
- Improve preventative oral health measures
- Improve overall health outcomes
- Decrease preventable dental-related ED visits



PROGRAM GOALS



- Dental related ED patients from local hospitals will be referred to WCHC for a dental home
- Increase patient visit capacity by 20% each for two years
- Create an affordable nominal charge hygiene and preventative oral health package for uninsured adult patients who are 100% of poverty or less
- Identify patients with increased health risks and link them to appropriate resources
- Offer enrollment and navigation services to all eligible patients
- Develop a transportation voucher system for referred Harford County residents 100% of poverty level or below to assist with transportation to Cecil County
- Develop a collaborative relationship and MOU with Cecil County Public Schools to better serve school-aged children
- Incorporate a blood pressure/hypertension evaluation as routine part of adult dental visit
- All dental patients without a medical home will be cross-referred for somatic and behavioral care to WCHC and Beacon Health



POST GRANT SUSTAINABILITY



- Third-party Payers and Sliding Fee Scale for revenue generation.
- Cost savings through clinical services provided in-kind by UMDS dental and hygiene students and specialty care provided by UMDS faculty.
- With increased capacity due to the addition of staff, established referral linkages from area public schools, health departments, and hospitals, the patient revenues will be adequate to sustain the project after the grant funding has ended.
- Develop additional revenue streams through integrating services such as primary care and behavioral health.



SUBSIDIZED CARE IN COMMUNITY



Anne Arundel Health Department, a two-year, \$200,000 grant in 2017 to expand access to emergency dental services for low-income adults.

Partnership with two hospitals –
 Anne Arundel Medical Center
 and Baltimore Washington
 Medical Center.



 Builds on existing Residents Access to a Coalition of Health (REACH) Program by linking patients with dentists in the community and building the capacity of the existing dental clinics at the Health Department to serve more residents.



PURPOSE OF PROGRAM



REACH PLUS

<u>RE</u>sidents <u>Access to a Coalition of <u>Health</u> – <u>Providing Low Income Uninsured/Underinsured</u> <u>Dental Support</u></u>

Expand emergency dental access for both low-income uninsured and underinsured adults with focus on diverting Anne Arundel County residents utilizing hospital EDs to community dental resources



KEY OBJECTIVES



- Increase capacity through patient care coordination
- Partner with both Anne Arundel Medical Center and University of Maryland Baltimore Washington Medical Center emergency departments for patient referrals
- Expand network of discounted private dental providers
- Increase capacity of DOH clinics for emergency services
- Build partnership with Anne Arundel Medical Center's Stanton Community Center



PROGRAM METRICS



- 10% decrease in ED visits by super utilizers resulting in reduced costs for dental encounters in ED
- Increase number of dental providers providing low cost/no cost care by four per year
- Increase number of adults seen in outpatient settings by 285 annually



POST GRANT SUSTAINABILITY



- Fee for Service
- MCO Credentialing/Medical Assistance billing
- Foundation grants and MCO Foundation partnerships
- Engage hospital partners to consider providing Community Benefit Dollars toward continuation of initiative



SUPPORTING EXPANDED CLINICS



Health Partners has received two grants in 2015 and 2017 totaling \$350,000 to provide dental care in two locations in Charles County, Waldorf and Nanjemoy (new site).

- Provided dental services to 2,026 individuals, more than two thirds of whom are Medicaid enrollees.
- Received more than \$287,420 through billing for services provided May 1, 2015 through October 31, 2017.
- Leveraged \$260,000 in <u>additional</u> funding (\$175,000 Weinberg, \$65,000 Charles County, and \$20,000 Delta Dental).





