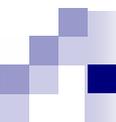


Maryland Community Health Resources Commission

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Today's Remarks

- Background of the Community Health Resources Commission (CHRC) and its Grant-making Activities
- Assisting Maryland's Implementation of the Affordable Care Act (ACA)
- Efforts to Assess the Readiness of Maryland's Safety Net Community and Build Capacity

Background of CHRC

- 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 Maryland Community Health Resources Commission is a quasi-independent agency operating within the Maryland Department of Health & Mental Hygiene.
- The 11 Members of the CHRC are appointed by the Governor. John Hurson, former Chairman of the Health Committee, serves as Chairman of the Commission. Nelson Sabatini, former DHMH Secretary, serves as Vice Chairman of the Commission.

CHRC's Policymaking Function

- Core mission is to articulate areas that are ripe for policy innovation and work with multiple layers of government and regulatory agencies to develop grants that will generate the potential for systematic reform.
- Has developed expertise and relationships with Maryland's safety net providers and awards grants to expand access to health care, reduce health care costs, and improve quality of care for vulnerable populations.

CHRC Grant-making Activity

- Over the last seven years, the CHRC has awarded 110 grants totaling \$26.3 million, supporting programs in all 24 jurisdictions in Maryland.
- These 110 grants have collectively served more than 105,000 patients with more than 320,660 patient visits.
- The \$26.3 million provided by the CHRC to its grantees has enabled them to leverage an additional \$10.2 million in federal, local, and private/non-profit resources.

Seven Core Areas for CHRC Funding

1. *Expanding Access to Primary Care at Maryland's safety net providers – 25 projects, \$6.8 million awarded.*
2. *Increase Access to Dental Care for Low-income Marylanders – 20 projects, \$4.6 million awarded.*
3. *Addressing Infant Mortality - 11 projects, \$2.4 million awarded.*
4. *Reducing health care costs through ER Diversions - 6 projects, \$1.9 million awarded.*
5. *Promoting Health Information Technology at community health centers - 9 projects, \$3.1 million awarded.*
6. *Integrating Behavioral Health Service – 22 projects, \$6.6 million awarded.*
7. *Supporting the State Health Improvement Process (SHIP) - 17 grants, \$600,000 awarded.*

CHRC Grants to support EMR/IT adoption by safety net providers

CHRC, Master Grantee List, Deliverables Report *PROMOTING HEALTH INFORMATION TECHNOLOGY*

Grantee Name	Grant #	Total Award	Cumulative Total		Focus Topic	Time Period
			Patients Seen/Enrolled	Visits Provided		
Allegany Health Department (IT)	08-008	\$99,731	IT		IT	FY 07-08
Baltimore Medical System, Inc. (IT)	08-009	\$293,930	IT		IT	FY 07-08
Choptank Community Health System (IT)	08-010	\$400,000	IT		IT	FY 07-08
St. Luke's House, Inc. (IT)	08-011	\$350,000	IT		IT	FY 07-08
Walnut Street Community Health Center (IT)	08-012	\$400,000	IT		IT	FY 07-09
Community Health Integrated Partnership (IT)	08-013	\$1,000,000	IT		IT	FY 07-08
Howard Health Department (IT)	09-001	\$316,000	IT		One-e-app	FY 08-10
Prince George's Health Department	12-011	\$75,000	IT		IT	FY 11-12
Omni House Behavioral Health System	12-015	\$150,000	IT		IT	FY 11-12
SUBTOTAL	9	\$3,084,661				

IT Grants

- Awarded to FQHCs, local health departments, and mental health providers.
- Projects have enabled grantees to purchase EMR systems or develop plans to install EMR networks (Prince George's Health Department).
- Another grant, \$1,000,000, to Community Health Integrated Partnership, provided initial public funds to support a comprehensive IT platform for eight Maryland FQHCs.

Building Capacity in Maryland's Safety Net Community

- CHRC has a history of working with safety net providers, as its grantees include FQHCs, local health departments, free clinics, and behavioral health providers.
- Responding to the recommendations of the Health Care Reform Coordinating Council (HCRCC), the CHRC developed a business plan outlining recommendations for how the state could promote the “readiness” of safety net providers as Maryland implements the Affordable Care Act.

Central Questions of CHRC Business Plan

- What should be expected of traditional safety net providers in an environment in which more people have insurance coverage?
- How can the capacity of these providers be leveraged and fostered?

CHRC Business Plan

- Surveys were distributed to Maryland's FQHCs, local health departments, free clinics, and other CHRC grantees.
- Interviews were conducted with approximately 40 key stakeholders and opinion leaders.



MCHRC
Maryland Community
Health Resources
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CHRC Business Plan: **Technical Assistance and Ongoing Support** **for Maryland's Safety Net Providers** Maryland Community Health Resources Commission – Health Reform Implementation (Senate Bill 514/House Bill 450)

Prepared by Marla Oros, RN, MS
February 2012



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-to-peer 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.**

Current Efforts/Projects Underway

- Maryland Multi-payor PCMH Program
- NASHP Medicaid-Safety Net Learning Collaborative
- Access to Care Survey and Maryland Health Access Assessment Tool
- Regional Forums to connect Safety Net Providers with Quality Health Plans and Medicaid MCOs in February and March 2013
- Technical Assistance in credentialing, contracting, and billing/EMR/IT systems

Access to Care Survey

Maryland Health Access Assessment Tool

- Following the CHRC Business Plan, the state administered an Access to Care survey to determine the services that the uninsured (future eligibles) currently access, and which providers are providing these services.
- 101 organizations representing 215 sites responded to the survey.
- Developed jurisdictional profiles of the services that are available and the safety net providers in these jurisdictions.

Access to Care Survey

- Requests for technical assistance included the following areas:
 - Contracting – 85 requests; 39.4%
 - Marketing – 85 requests; 39.4%
 - Credentialing – 83 requests; 38.4%
 - Billing – 82 requests; 38.0%
 - Strategic Planning– 67 requests; 31.0 %
- Other requests for technical assistance included:
 - Assistance with funding and implementation of EMR as well as support and training
 - Linkage with local health system partners

Immediate Next Steps

- The information will be utilized by the state for planning purposes to: (1) Prepare for the expected demand for health services in 2014; and (2) Provide information about safety net providers for the Qualified Health Plans.
- The state will host a series of regional forums to connect safety net providers with QHPs and Medicaid MCOs in their service areas and provide a framework for potential contracting conversations among providers interested for inclusion in these networks.