



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



BACKGROUND ON THE CHRC

- **Eleven Commissioners of the CHRC are appointed by the Governor.**

Allan Anderson, M.D., Chairman

Elizabeth Chung, Vice Chair, Executive Director, Asian American Center of Frederick

Scott T. Gibson, Vice President for Human Resources, Melwood Horticultural Training Center, Inc.

J. Wayne Howard, Former President and CEO, Choptank Community Health System, Inc.

Celeste James, Executive Director of Community Health and Benefit, Kaiser Permanente of the Mid-Atlantic States

Surina Jordan, PhD, Zima Health, LLC, President and Senior Health Advisor

Barry Ronan, President and CEO, Western Maryland Health System

Erica I. Shelton, M.D., Physician and Assistant Professor, Johns Hopkins University School of Medicine, Department of Emergency Medicine

Ivy Simmons, PhD, Clinical Director, International Association of Fire Fighters Center of Excellence

Julie Wagner, Vice President of Community Affairs, CareFirst BlueCross BlueShield

Anthony C. Wisniewski, Esq., Chairman of the Board and Chief of External and Governmental Affairs, Livanta LLC

IMPACT OF CHRC GRANTS

- Since 2007, CHRC has awarded 210 grants totaling \$64.1 million. Most grants are for multiple years. CHRC has supported programs in all 24 jurisdictions.
- These programs have collectively served over 458,000 Marylanders. Most individuals have complex health and social service needs.
- Grants awarded by the CHRC have enabled grantees to leverage \$23 million in **additional** federal and private/nonprofit resources.
- **Of this \$23 million, more than \$19M has been from private and local resources.**

IMPACT OF CHRC GRANTS

Reducing avoidable hospital utilization



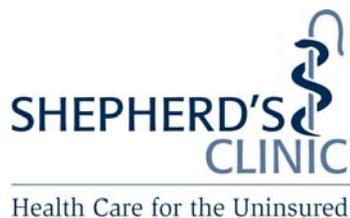
Esperanza Center, a free clinic in Baltimore - A program to expand service capacity at their free clinic in Baltimore City. The project outcomes included essential health services for more than 5,315 individuals and cost savings/avoided charges of \$2.3 million.



Calvert County Health Department - “Project Phoenix,” a program to provide substance use treatment services, including medications, and address the social determinants of health impacting individuals with substance use disorders. The average number of ED visits dropped more than 70%, from 1.57 visits per participant to 0.45 visits per participant. In light of the reductions in avoidable hospital costs, Calvert Memorial Hospital is providing financial support for implementation of the program.

IMPACT OF CHRC GRANTS

Improving clinical health outcomes.



Shepherd's Clinic - Diabetes self-management program, providing services to 390 pre-diabetic and diabetic patients. Regular clinical measurements indicated that 66% lost weight and 70% had a reduced A1C. Among patients who participated in diabetes prevention counseling, just one patient converted to a diagnosis of diabetes.



Mary's Center for Maternal and Child Care, Inc. - Prenatal care and women's health program aimed at improving birth outcomes and reducing infant mortality in Prince George's County. Served 3,000 women. The percentage of women in the program receiving prenatal care in the first trimester increased from a baseline of 63.6% to 74%. Those in the program delivering low-birth weight babies (2,500 grams or less) was 5% (the rate in Prince George's County is 9.1%, and the state is 8.6%).