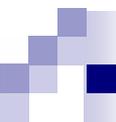


Maryland Community Health Resources Commission

Mark Luckner, Executive Director

The Association of Baltimore Area
Grantmakers

March 18, 2013



Today's Remarks

- Assisting Maryland's Implementation of the Affordable Care Act (ACA)
- Efforts to Assess the Readiness of Maryland's Safety Net Community and Build Capacity

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
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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
- 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 developed the “Access to Care” Program, jointly administered by DHMH, Maryland Health Benefit Exchange, and CHRC.
- As part of these efforts, the state distributed an Access to Care survey to collect information from Maryland safety net providers on the current uninsured population and where they received care in an effort to help the State anticipate the likely supply of health care providers that will be needed to meet the needs of the newly insured in 2014.

Maryland Health Access Assessment Tool

- Data collection: Online survey was disseminated on 12/20/12 to Maryland safety net providers, data was collected from survey respondents, and aggregate data reports were created for each County.
- Survey respondents: 101 organizations/215 facilities
- Survey respondents' facility types: Local Health Departments, Behavioral Health providers, Federally Qualified Health Centers and look alike, Ryan White grantees, Charitable/Free Clinics, Mobile Clinics, Homeless Services, Family Planning providers

Maryland Health Access Assessment Tool

- County level aggregate data summaries include:
 - County population insured/uninsured
 - Total emergency room visits by uninsured
 - Total patients served by survey respondents
 - Uninsured patients served by survey respondents
 - Facility type
 - Health care providers by type and FTE
 - Population to provider ratios for primary care, mental health, and dental
 - Provision of Essential Health Benefits

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
 - Prepare for the expected demand for health services in 2014;
 - Provide information about safety net providers for the Qualified Health Plans; and
 - Guide CHRC-supported grants and technical assistance opportunities

Safety Net Provider Planning

■ Meet & Greet Sessions

- CHRC will partner with the DHMH and MHBE to host regional “meet and greet” sessions to allow participating carriers and safety net providers to begin discussions on contracting
 - Information on expected enrollment
 - Information on Medicaid & Commercial Carrier requirements
 - Technical assistance overview
- Carriers will be encouraged to attend these sessions in order to identify community providers who are available to contract within their service area

Safety Net Provider Planning

■ Technical Assistance Program

- In consultation with the MHBE and DHMH, the CHRC is planning to support a technical assistance program to build capacity and promote readiness of safety net providers.
- The assistance will be geared towards helping safety net providers transition from a grant-based revenue structure to one that involves billing third-party payors (Medicaid/MCO and commercial plan/QHP networks).
- The CHRC may also provide opportunities for grant-funding to support infrastructure development later this year.

Safety Net Providers and Potential Areas of Technical Assistance

Grant-Funded Providers	Providers with Medicaid Experience
Examples: free clinics and school-based health centers	Examples: FQHCs, public behavioral health providers, local health departments
Potential areas of Assistance	Potential areas of Assistance
<ul style="list-style-type: none"> ■ Credentialing ■ Submitting Claims ■ Strategic Business Planning 	<ul style="list-style-type: none"> ■ Pricing ■ Moving from cost-based reimbursement system to FFS ■ Improving efficiencies in practice models ■ Producing outcomes data ■ Utilizing EHR networks

Carrier Network Requirements Checklist for Safety-net providers

Commercial Carrier	Medicaid MCO
Hold credentials with the carrier	Hold credentials with the carrier
Enter into a contract with the carrier	Enter into a contract with the carrier
Ability to verify eligibility of a patient with the carrier	Ability to verify eligibility of a patient with a carrier
Ability to bill claims to the carrier within the designated timeframe	Ability to bill claims to the carrier within the designated timeframe

Developing a Health Access Impact Fund

- Create a Health Access Impact Fund by pooling public funding from the Maryland Community Health Resources Commission with private funding (local philanthropic partners) to create a “public-private partnership” to support discrete projects to build capacity of the safety net infrastructure.
- The Fund could be used to award grants and/or support contracts to provide technical assistance in specific areas such as credentialing, contracting, and billing/EMR/practice management.

Health Care Access Impact Fund

