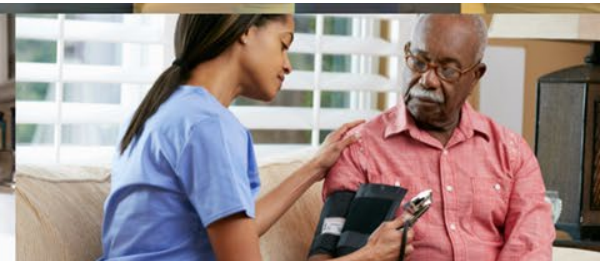




# Pathways to Health Equity Update

Update for the Population Health Management Group  
March 17, 2022

Mark Luckner  
Executive Director,  
Maryland Community Health Resources Commission



# CHRC Commissioners (Three Vacancies)

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**Edward J. Kasemeyer**, CHRC Chair, Former Senator and Chair of the Maryland Senate Budget & Taxation Committee

**J. Wayne Howard**, CHRC Vice Chair, Former President and CEO, Choptank Community Health

**Scott T. Gibson**, Chief Strategy Officer, Melwood Horticultural Training Center, Inc.

**David Lehr**, Chief Strategy Officer, Meritus Health

**Karen-Ann Lichtenstein**, Former President and CEO, The Coordinating Center

**Carol Masden**, LCSW-C

**Sadiya Muqueeth**, Dr.PH, Director of Community Health, National Programs, Trust for Public Lands

**Destiny-Simone Ramjohn**, PhD, Vice President, Community Health and Social Impact, CareFirst



# HERC Advisory Committee

Eleven members, appointed by the Governor and Presiding Officers

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## Chair

**The Honorable Edward J. Kasemeyer**,  
Chair of CHRC and Chair of the HERC  
Advisory Committee

## Data Subcommittee

**Chair: Rebecca A. Altman**, RN and MBA,  
Vice President and Chief Integration  
Officer, *LifeBridge* Health

## Call for Proposals Subcommittee

**Chair: Jacqueline J. Bradley**, MSN, MSS,  
CRNP, Bradley Consulting, LLC

## Outreach Subcommittee

**Chair: Elizabeth L. Chung**, Executive  
Director, Asian American Center of  
Frederick

**Noel Brathwaite**, PhD, MSPH, Director, Minority Health and  
Health Disparities, Maryland Department of Health

**Alyssa L. Brown**, JD, Director, Innovation, Research, and  
Development, Office of Health Care Financing, Maryland  
Department of Health

**Michelle Spencer**, MS, Associate Chair, Inclusion, Diversity, Anti-  
Racism, and Equity, Department of Health Policy and  
Management, Johns Hopkins Bloomberg School of Public Health

**Maura Dwyer**, DrPH and MPH, Senior Officer, the Health Impact  
Project, The Pew Charitable Trusts

**Jonathan Dayton**, MS, NREMT, Community Relations and  
Population Health Supervisor, Mt. Laurel Medical Center

**Mikayla A. Walker**, MPH, Management Consultant, ReefPoint  
Group

**The Honorable John A. Hurson**, Esq., former Chair, Maryland  
Community Health Resources Commission

# Maryland Health Equity Resource Act - Policy Objectives

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## Five Strategic Goals:

- reduce health disparities
  - improve health outcomes
  - improve access to primary care
  - promote primary and secondary prevention services
  - reduce health care costs and hospital admissions and readmissions
- ❖ 40 proposals received, requesting more than \$42 million
  - ❖ 9 proposals awarded, totaling \$13.5 million (next slide)

# Nine Pathways Grantees

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## Baltimore City

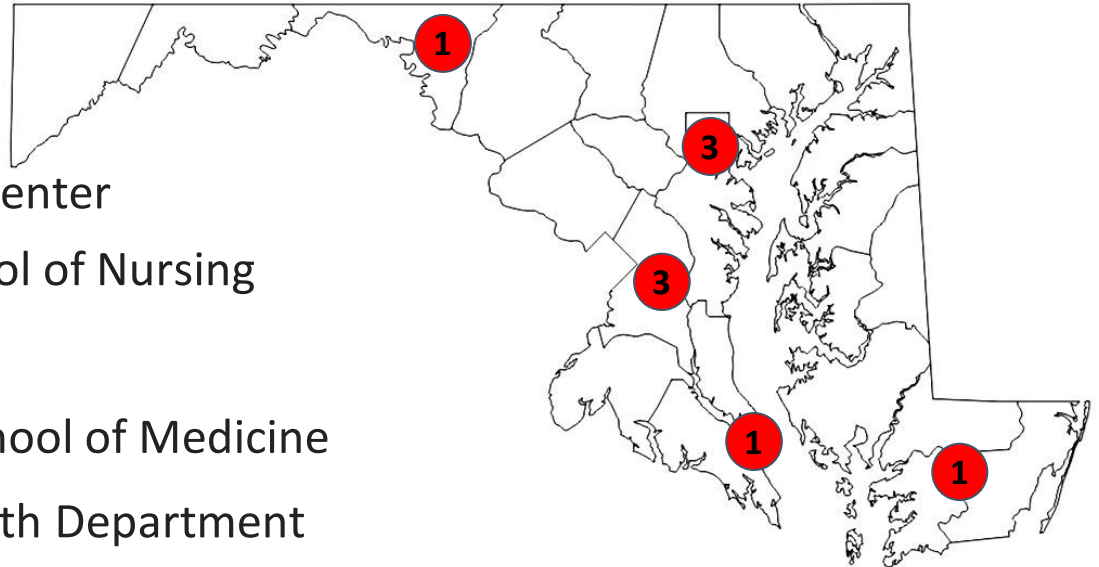
- Baltimore Healthy Start
- Greater Baltimore Medical Center
- University of Maryland School of Nursing

## Prince George's County

- Johns Hopkins University School of Medicine
- Prince George's County Health Department
- La Clínica del Pueblo (also serves Montgomery County)

## Rural Maryland

- Tidal Health (Somerset, Wicomico & Worcester Counties)
- St. Mary's County Health Department
- Horizon Goodwill Industries (Washington County)



# Pathways Grantees

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## Disparities targeted:

- diabetes
- heart disease/  
hypertension
- mental health
- Substance Use  
Disorder
- maternal and  
child health
- Sickle Cell  
Disease

## Grant funds used for:

- **Staff salaries and training:** clinicians, BH providers, CHWs, program managers, etc.
- **Supplies/IT:** medical equipment, health screening supplies, remote monitoring devices, care coordination/referral systems, telehealth equipment, data platforms, etc.
- **SDOH programming:** food security, transportation, etc.
- **Program evaluation**

# Examples of Pathways Interventions

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## Medical Interventions

- **Brick-and-mortar facilities:** hubs for primary and behavioral health services, nurse-managed health centers
- **Bringing care to the community:** mobile health clinics, remote/in-home monitoring, home visiting programs, community screenings by CHWs

## Non-Medical (SDOH) Interventions

- transportation
- food security
- health insurance
- legal assistance
- health literacy/education
- language

“Other” features: care coordination, community outreach, cultural competence

# Data and Metrics

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- Grantees will submit Milestone and Deliverable reports (M&Ds) periodically to CHRC.
  - Process measures
  - Clinical outcome measures
  - Hospital utilization measures
- Some metrics will be standardized across similar programs, other metrics will be customized for each project.
- Design input from CRISP.



# Data and Metrics - CRISP/HSCRC

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- Changes in health disparity rates for hospitalizations
- Geography-based population health
- Pre/post comparisons for patient panels

# Next Steps-Implementation

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Week of March 14	CHRC prepare draft M&Ds
Week of March 21	Grant agreements and M&Ds sent to grantees
April 6 or 7	Group meeting with all grantees
Beginning April 13	Individual meetings with each grantee
By May 1	Grant period begins (2 years)
Beginning in May	Mandatory grantee office hours

# What does this mean for population health in the bigger picture?

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1. Two-year Pathways grants will lay foundation for longer term Health Equity Resource Community (HERC) program to be implemented by CHRC beginning in 2023.
2. Several targeted disparities align with State population health goals (eg. diabetes, SUD, MCH).
3. Supports State's focus on health equity through on-the-ground projects implemented in real-time.
4. Contributes to Shirley Nathan-Pulliam Health Equity Commission.

# Contact Information

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For additional information:

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