



# **Community Health Resources Commission**

**August 17, 2018**

## **Rising Tides of Rural Health Care**

**Mark Luckner  
Executive Director, Maryland  
Community Health Resources Commission**

**mark.luckner@maryland.gov  
410.260.6290**

# 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.**

# 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

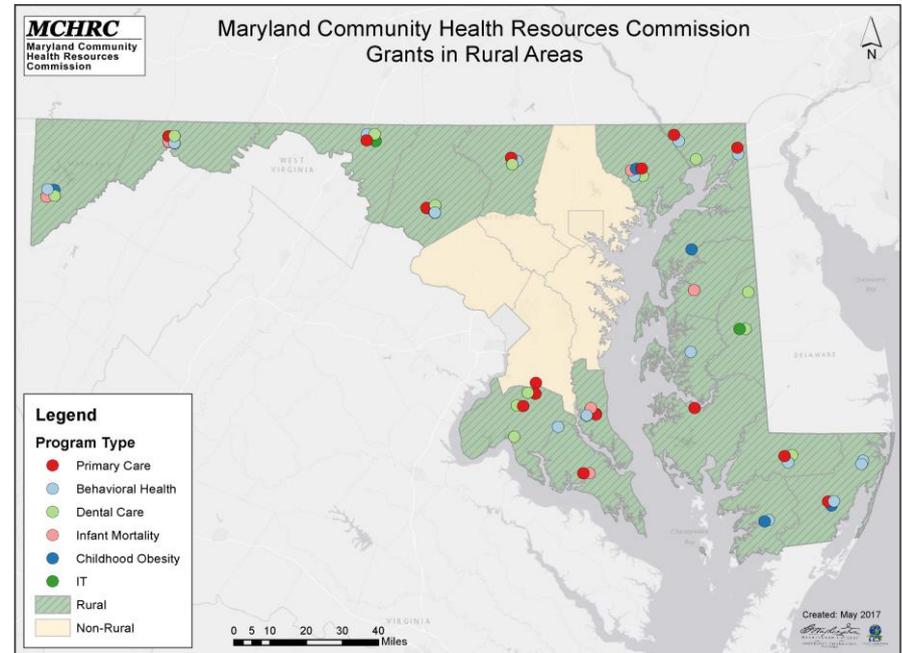
- Since 2007, CHRC has awarded 210 grants totaling \$64.1 million. Most grants are for multiple years. (Currently 55 open grants)
- CHRC has supported programs in all 24 jurisdictions.
- These programs have collectively served over 455,000 Marylanders. Most individuals have complex health and social 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.**

# RURAL HEALTH AND CHRC

- 107 grants totaling \$28 million in rural communities.
- Served more than 82,000 residents in rural areas.

## Types of Programs:

- Primary/Preventative Care
- Dental Care
- Integrated Behavioral Health Services and SUD treatment
- Food Security/Obesity Prevention



# RURAL HEALTH AND CHRC

## 1. *Driving innovation in rural communities*

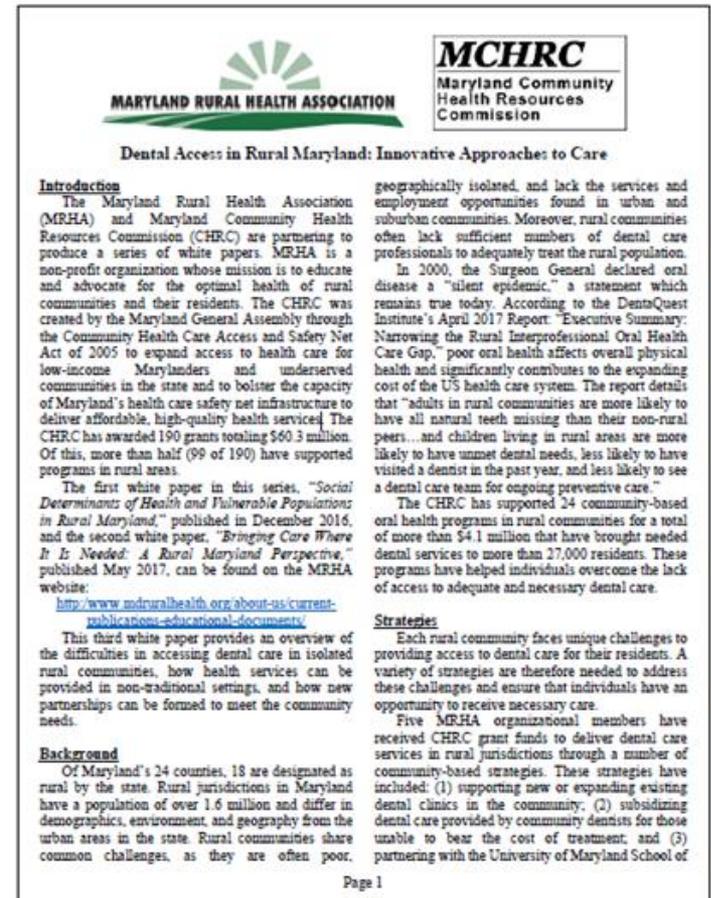
- Mobile Integrated Health
- Telehealth

## 2. *Innovative ways to tackle Social Determinants of Health*

- Transportation
- Health Literacy

## 3. *Stretching limited public resources and leveraging private investment*

- Private and Family Foundations
- Hospital-Community Partnerships



# RURAL HEALTH CHRC GRANTEES



## Charles County– Mobile Integrated Health Program

- Address health/social determinants and repeated use of emergent care.
- Since launch in August 2017, Charles MIH program has served 66 individuals.
- From three-month pre vs post analysis of first 50 program participants:
  - **60% reduction in ED utilization**
  - **48% reduction in EMS utilization**
  - **86% reduction in 30-day readmissions.**



Amber Starn, Charles County Health Department; John Filer, Charles EMS; and Dr. Dianna Abney, Health Officer, Charles County, receiving award at MIEMMS forum in Annapolis, May 2018.

**Charles MIH is estimating \$328,620 in ED reductions in the first year of the program.**

### MIH programs supported by CHRC:

- Charles County
- Wicomico/SWIFT
- Prince George's County

# RURAL HEALTH CHRC GRANTEES

## Lower Shore Clinic's CareWrap

- Targeted individuals with behavioral health needs who presented at PRMC ED in high volumes.
- Provided intensive case management services to 63 individuals over 15 months.
- CRISP calculated six-month pre vs six-month post analysis for the patients in the program and concluded that the **CareWrap program achieved \$923,594 in cost avoidance** (grant was for \$120,000).



A number of state and local elected officials celebrate the launch of the CareWrap program at the Lower Shore Clinic in Salisbury, June 2016.

# CHRC FY 2019 CALL FOR PROPOSALS



- **The next meeting of the CHRC will be Sept. 11, 2018.**
  
- **Last year's strategic priorities:**
  1. Serving vulnerable populations regardless of insurance status
  2. Promoting health equity and addressing social determinants of health
  3. Innovation, sustainability, and replicability
  
- **Last year's Areas of Focus:**
  1. Essential health services, i.e., primary/preventative care, dental, and women's health services
  2. Addressing heroin and opioid epidemic through behavioral health integration
  3. Promoting food security and addressing obesity

# CHRC FY 2019 CALL FOR PROPOSALS



## Timeline of Key Dates of next CHRC RFP

|                             |  |
|-----------------------------|--|
| September 11, 2018          | Planning meeting of CHRC   |
| Late October/Early November | Release Call for Proposals   |
| Late November               | Letters of Intent due  |
| Late December               | Deadline for receipt of applications                                     |
| January 2019                | Review of applications   |
| Mid-February 2019           | Selected applicants present to the CHRC;<br>grant award decisions follow |