• Created by the Maryland General Assembly in 2005

• Legislative policy goals:
  • Expand access to health services in underserved communities;
  • Support programs that serve low-income individuals and vulnerable populations; and
  • Build capacity of Maryland’s safety net providers.

• Statutory responsibilities:
  • 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; and
  • Facilitate the adoption of health information technology.
BACKGROUND ON THE CHRC

• Eleven Commissioners 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

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 233 grants totaling $70.7 million. Most grants are for multiple years.

• CHRC has supported programs in all 24 jurisdictions.

• Programs have collectively served more than 470,000 Marylanders. Most individuals have complex health and social service needs.

• Grants awarded by the CHRC have enabled grantees to leverage $23.7 million in additional federal and private/nonprofit resources.

• Of this $23.7 million, $20 million has been from private and local resources.
COUNCIL ON ADVANCEMENT OF SCHOOL-BASED HEALTH CENTERS

• Created in legislation approved by the Maryland General Assembly in 2015.

• Charged with developing policy recommendations to improve health and educational outcomes of students who receive services from School-Based Health Centers.

• Responsible for advancing the integration of SBHCs into health care and educational systems at the state and local levels and for promoting long-term financial sustainability of SBHCs.
COUNCIL ON ADVANCEMENT OF
SCHOOL-BASED HEALTH CENTERS

Chair - Kate Connor, M.D., MSPH
Vice Chair – Barbara Masiulis, MS, CRNP

Patryce Toye, M.D. – Maryland Assembly on School-based Health Care
Barbara Masiulis, MS, CRNP – school-based health care center
Kate Connor M.D., MSPH – school-based health care center
Uma S. Ahluwalia – school-based health care center
Jonathan Brice – Public School Superintendents Association of Maryland
Cathy Mary C. Allen – Maryland Association of Boards of Education
Kate Connor M.D., MSPH – school-based health care center
Karen Williams – Federally-Qualified Health Center
Arethusa S. Kirk – managed care organization
Jennifer Dahl – commercial health insurance carrier
Diana Fertsch, M.D. – pediatrician

Ex Officio Members
The Hon. Clarence K. Lam, State Senate
The Hon. Bonnie Cullison, House of Delegates
Cheryl De Pinto, M.D., MPH – Maryland Department of Health
Mary L. Gable – Maryland State Department of Education
Michele Eberle – Maryland Health Benefit Exchange
Mark Luckner – Maryland Community Health Resources Commission

Maura J. Rossman, M.D. – Maryland Association of County Health Officers

Jean-Marie Kelly – Maryland Hospital Association
COUNCIL ON ADVANCEMENT OF SCHOOL-BASED HEALTH CENTERS

• The Council has created three Work Groups, comprised of its members and additional members of the public.

• Much of the substantive work of the Council is carried out in Work Groups.

**Systems Integration and Funding** - add financial information to annual MSDE SBHC report and provide T.A. session around Medicaid billing with SBHC Administrators

**Data Collection and Reporting** - work with MSDE to re-write the SBHC annual survey

**Quality and Best Practices** - work with MSDE to update the SBHC Standards
CHRC GRANTS TO SUPPORT SBHCs

- SBHCs are designated community health resources (eligible for grant funding).
- 17 CHRC SBHC grants totaling $3.8 million.
- Supports salary costs for practitioners (MDs, NPs, RNs, LCSWs, dental hygienists) and some administrative costs (office clerks/assistants).
- More than 14,000 individuals served.
- Delivery/expansion of primary care, dental, behavioral health, and obesity prevention services in 11 jurisdictions.
- Metrics collected include:
  - Number of individuals served;
  - Number/types of services provided, i.e., vaccinations, dental sealants, etc.; and
  - ED visits by type: asthma, acute illness, and behavioral health.
CHRC GRANTS TO SUPPORT SBHCs

Barbara Brookmyer, MD, Health Officer, Frederick County

Deborah Somerville, RN, MPH, Coordinator, Office of Health Services, Baltimore County Public Schools

Dr. Arlene Tyler, Medical Director for BMS School Based Health Centers