

The Charles County FY 2014 Maryland Community Health Resource Commission Grant Application



Supporting the Efforts of the
Partnerships for a Healthier Charles County

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Main Goals: Access to Care Team

- ▶ *Reduce the proportion of uninsured in Charles County to the 2008 level of 6.4%.*
- ▶ *Increase primary care and specialty physicians in Charles County by seven providers.*

Access to Care

▶ Patient-Centered Medical Home

- Use of Nanjemoy Clinic
- Part time staff
- MedChi to provide IT assistance

▶ Hispanic Fair

- Department of Health mobile clinic
- Educational materials in Spanish

Main Goals: Behavioral Health Team

- ▶ *Increase the proportion of persons with co-occurring substance abuse and mental health disorders who receive treatment for both.*
- ▶ *Increase the number of people receiving treatment for abuse or dependence of opiates and/or illicit drugs in the past year from 225 to 250.*
- ▶ *Increase the number of persons referred in the hospital emergency department for substance abuse treatment from 85 to 100.*

Behavioral Health

- ▶ Behavioral Health Integration and Opiate Overdose Educational Sessions for County Providers/Practitioners
 - MedChi partner to with CME to educate county physicians.
- ▶ Medication Disposal Program Flyer Design and Distribution
 - Design and print flyer.

Main Goals: Cancer Team

- ▶ *Reduce deaths caused by cancer in Charles County from 199.3 to 190.8 per 100,000 or by 4.3%*
- ▶ *Reduce the incidence of cancer in Charles County from 458.9 to 455.3 per 100,000 or by 2.9%*

Cancer

- ▶ **Prostate Cancer Screening Educational Campaign**
 - Conduct an educational session.
 - Place ads in the local newspaper on prostate cancer screening.
- ▶ **Anti-Tobacco Advocacy Program**
 - Provide funding to educate youth on the dangers of tobacco use and enable those youth to serve as anti-tobacco advocates.

Main Goals:

Chronic Disease Prevention Team

- ▶ *Reduce the death rate from diabetes in Charles County 2% or to 33.4 per 100,000.*
- ▶ *Reduce the prevalence of diabetes in Charles County by 2% or to 5.4.*
- ▶ *Decrease the percent of children and adolescents who are obese from 13.3 to 11.2.*

Chronic Disease Prevention

- ▶ **Diabetes Education Program**
 - Funding will be given to the University of Maryland: Charles Regional Medical Center (formerly Civista Health) to start a diabetes education program.
- ▶ **Edible Schoolyard**
 - Start a garden in the targeted region with the help of local agencies.

Main Goals: Reproductive Health Team

- ▶ *Reduce the infant death rate in Charles County from 7.4 per 1,000 births to 6.6 death per 1,000 live births.*

Reproductive Health

▶ Pre-Conceptual Health Campaign

- Funding to purchase culturally-sensitive materials on pregnancy preparedness.

Main Goals: Accident and Injury Prevention Team

- ▶ *Reduce the number of hospitalizations due to falls by the elderly population in Charles County to 259 per 100,000.*
- ▶ *Reduce the number of hospitalizations due to motor vehicle incidence in Charles County to 89.5 per 100,000.*

Accident and Injury Prevention

- ▶ **Fall Prevention Educational Sessions**
 - 4 presentations in Charles County.
- ▶ **Traffic Safety and Motor Vehicle Injury/Death Prevention Conference**
 - Plan and carry out a regional conference.

Sustainability Plan

- ▶ Take Advantage of the New Opportunities
- ▶ Deliver Services and Provide Support
- ▶ Maximize Technology
- ▶ Leverage State HIT Incentives

Health System Reform Opportunities

We plan to maximize new opportunities created by health system reform.

- ▶ Medicaid – rates will be higher and more people will be eligible
- ▶ Health Exchange – will increase the number of people with coverage starting January 1, 2014
- ▶ Could consider ACO and Medical Home opportunities

Sustainability of the Medical Home

- ▶ **Consulting And Practice Management Support**
 - Business assistance so physicians and staff can focus on the clinical side of their practices
- ▶ **Revenue Cycle Management**
 - Management of finances to optimize billing and collections
- ▶ **Integrated Electronic Health Records And Practice Management**
 - Credible guidance and services

MedChi Plans to Maximize Technology

- ▶ Technology is key to complex payment reforms. Maryland is building a technology network for physicians:
 - Health Information Exchange – CRISP
 - Federal incentives
 - REC program
 - State-based HIT incentives

Leverage State HIT Incentives

- ▶ Available to primary care practices (not individual providers)
- ▶ Maximum incentives are \$15,000 per practice per payor
 1. Aetna
 2. CareFirst BlueCross BlueShield
 3. Cigna HealthCare Mid-Atlantic
 4. Coventry Health Care
 5. Kaiser Permanente
 6. United Healthcare, Mid Atlantic Region

Evaluation Plan

Process and Outcome Measures

Tracking measures

Additional staffing

QUESTIONS