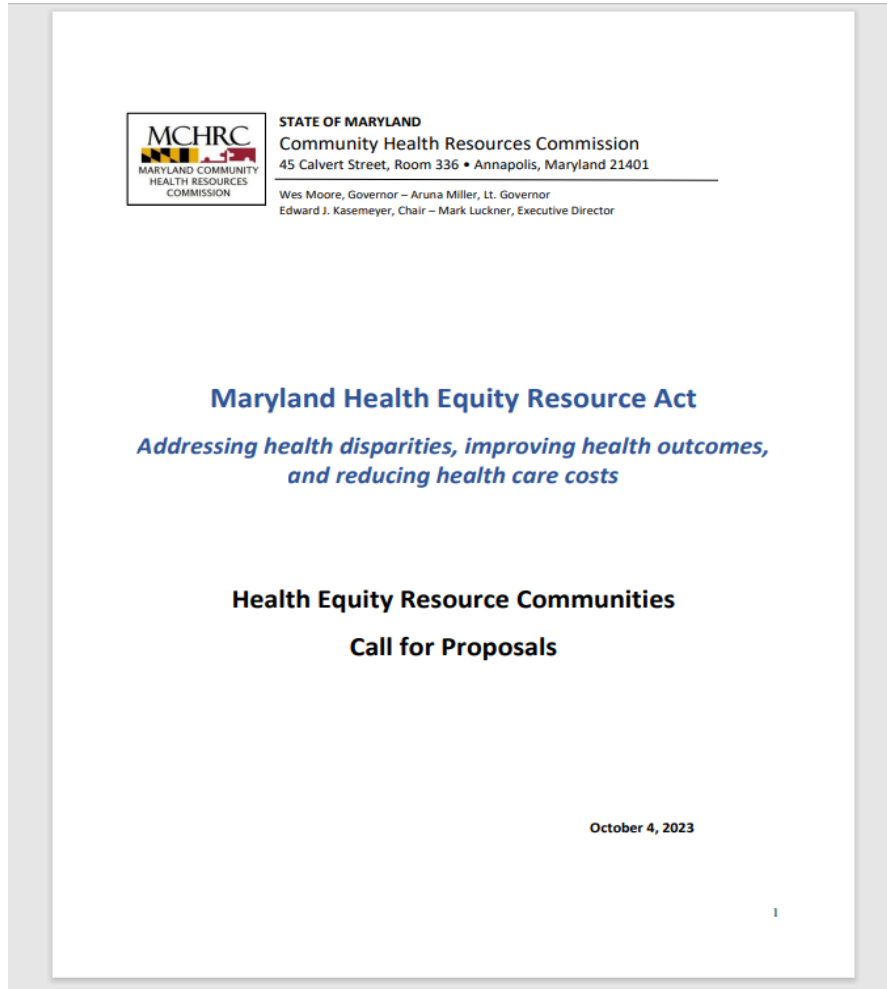


Maryland Health Equity Resource Act



- HERC Call for Proposals Released Oct 4th
- Outreach Events Oct 19 – Nov 10th
- Applications due Dec 5th
- Awards issued mid-Feb

HERC Consumer Outreach and Community Engagement Subcommittee

- October 16th FAQ Call and Kick off Public Outreach
- Host in-person forums statewide
- Additional virtual meetings to be scheduled
 - Contact CHRC staff if you are interested in scheduling a briefing to learn more the HERC Funding Opportunity.

HERC Call for Proposals

Applicants need to demonstrate how the program will address each of the following five policy objectives:

- A. Reduce health disparities;
- B. Improve health outcomes;
- C. Improve access to primary care;
- D. Promote primary and secondary prevention services;
- E. Reduce health care costs and hospital admissions and readmissions.

Maryland Health Equity Resource Act

Pathways to Health Equity Program

- Two-year grant issued by CHRC October 2021
- Applicants demonstrated self-sustainability as a HERC.
- Provided foundation, support and guidance to become a HERC.

Health Equity Resource Communities

- Five-year grants
- RFP released October 4th
- Emphasizes longer term interventions that address SDOH:
 - ⇒Housing;
 - ⇒Transportation;
 - ⇒Employment;
 - ⇒Food Security.

Geographic Definition of HERC

Contiguous (zip codes) geographic area –

1. Measurable and documented disparities and poor health outcomes
2. Small enough to allow for incentives to have significant impact on improving health outcomes and reducing health disparities
3. Minimum population of 5,000 residents

(See page 10 of the HERC Call for Proposal)

HERC Eligible Entities

Eligible Lead Applicants:

- Nonprofit community-based organization
- Nonprofit hospital
- Institution of higher education
- Federally qualified health center
- Local government agency

(See page 9 of the HERC Call for Proposal)

Key Differences for HERC

- Health Disparities and SDOHs
- Partnerships and Coalitions
- Service Target: Unduplicated Individuals Served
- Project Plan Component
- Five-year Budgets

MD Health Equity Resource Act

Definition of Health Disparity

“Health Disparity” means a particular type of health difference, such as a difference in the rates of:

- **Hypertension**
- Asthma
- Substance Abuse
- Maternal and Infant Mortality
- **Heart Disease**
- Diabetes
- Mental Health Disorders

***At least two health disparities and at least three SDOH**

(See page 7 of the HERC Call for Proposals)

Partnerships and Coalitions

Key Consideration:

- Applicants are strongly encouraged to develop community coalitions to achieve the objectives of the Act.
- Community-based organizations (CBOs) are encouraged to partner with eligible entities as the lead applicant.

(See pages 25 and 29 of the HERC Call for Proposal)

Selection Criteria:

- Priority will be given to proposals that demonstrate support and engagement with key stake holders and CBOs.
 - Intent/Commitment letters
 - Budget Allocations
 - Outlined governance structure

Service Target: Unduplicated Individuals Served

(See page 21 of the HERC Call for Proposal)

Pathways	HERC
Grantee <u>must</u> establish an ongoing relationship with the individual.	Ongoing relationship is encouraged but <u>not</u> required.
Grantee confirms services were provided	NO CHANGE
All Unduplicated individuals counted are uploaded to CRISP.	NO CHANGE
New and/or Established Patients/Participants	NEW Patients/Participants

Service Target: Unduplicated Individuals Served

(See page 21 of the HERC Call for Proposal)

**HERC –
Ongoing relationship is encouraged but not required.**

HYPOTHETICAL SCENERIOS

6-week Diabetes Prevention Program (DPP)	Did the participant attend at least one full class?	COUNT THEM
Patient referred to PCP	Did the patient make an appointment and attend?	COUNT THEM
SDOH referral for Medicaid	Did the individual enroll for Medicaid?	COUNT THEM

Key HERC Proposal Requirements Project Plan

1. Community Outreach and Engagement Strategies (target population).
2. Participant Recruitment and Retention Strategies (all project service components).
3. Hiring Plan or Strategy (key project personnel and provider credentialing).
4. Data Management and Evaluation Plan.
5. A Risk Assessment for each plan components above.

(See page 15 of the HERC Call for Proposal)

Key Mandatory Legislative Inclusions

The proposal must provide:

- A description of how the project will expand the capacity of FQHCs or other community-based organizations to provide health care services (wraparound); support to address non-medical SDOH.
- A detailed self sustainability plan.
- A clear description of programmatic address of health disparities and improvement of health outcomes.
- A plan to hire or contract an evaluator during the five-year HERC grant period.

(See page 10 of the HERC Call for Proposal)

Q&A

Gentle Reminders:

- Please state/type (chat) your name and organization
 - All questions/responses will be posted on the website:
 - [Health Equity Resource Communities](#)
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