

How can health IT promote health equity?

CRISP Summit - 04/19/2022





Maryland Community Health Resources Commission

CRISP User Summit April 19, 2022

Mark Luckner
Executive Director
Maryland Community Health Resources Commission



CHRC Background & Mission

Created by the Maryland General Assembly in 2005:

- 1. Expand access to health care in underserved communities;
- 2. Support projects that serve low-income Marylanders, regardless of insurance status;
- 3. Build capacity of safety-net providers.
- 4. Implement the Maryland Health Equity Resource Act (2021)
- 5. Staff Maryland Consortium on Coordinated Community Supports (2020)

CHRC Commissioners

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

TraShawn Thornton-Davis, Assistant Service Chief, OB/GYN, DCSM, Mid-Atlantic Permanente Group

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

Flor Giusti, Johns Hopkins University

David Lehr, Chief Strategy Officer, Meritus Health

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

Roberta Loker

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

Impact of CHRC Grants

- 648 grants totaling \$111.9 million.
- Projects funded in all 24 jurisdictions.
- 517,000 Marylanders have received services including those with complex health and social services needs.
- An additional 16,000 individuals have received services under the DDA Relief Act grants (2021).
- 75% of projects sustained after grant ends.
- \$31.8 million leveraged in additional resources.

CHRC & Health Equity

- Longstanding commitment to addressing health disparities and promoting health equity.
- Health equity is strategic priority of annual RFP.
- Fund projects that address SDOH and remove barriers to accessing care.
- Examples of SDOH include:
 - Transportation challenges;
 - Lack of providers;
 - Food insecurity; and
 - Health literacy.

CHRC & Health Equity (continued)

Maryland Health Equity Resource Act - Policy Objectives (2021):

- 1. Reduce health disparities
- 2. Improve health outcomes
- 3. Improve access to primary care
- 4. Promote primary and secondary prevention services
- 5. Reduce health care costs, hospital admissions and readmissions

Pathways to Health Equity Grantees

Baltimore City

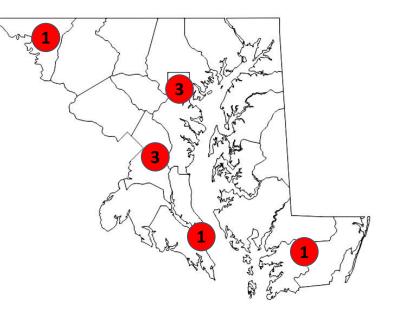
- Baltimore Healthy Start
- Greater Baltimore Medical Center
- University of Maryland School of Nursing

Prince George's County

- Johns Hopkins University School of Medicine
- Prince George's County Health Department
- La Clínica del Pueblo

Rural Maryland

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



CHRC & CRISP Collaboration

Ongoing Grants

- Encourage grantees to use CRISP Reporting Services.
- Assist in documenting program impact.
- Promote long-term sustainability.

Pathways to Health Equity

- CRISP has central role.
- Prepared Public Use Data Files for Pathways Applicants.
- Provide TA to CHRC and 9
 Pathways grantees during implementation.

Contact Information

Mark Luckner, CHRC Executive Director

mark.luckner@maryland.gov / (410) 260-7046