

Montgomery Cares Advisory Board

May 27, 2020 Meeting Notes

MCAB Members Present: Betsy Ballard, Julia Doherty, Sarah Galbraith-Emami, Dr. Travis Gayles, Sybil Greenhut, Sharron Holquin, Lynda Honberg, Yuchi Huang, Peter Lowet, Marie Mann, D. Maria Rice, Langston Smith, Wayne Swann

MCAB Members Absent:

DHHS Staff: Magda Brown, Tara Clemons, LaSonya Kelly, Robert Morrow, Christopher Rogers, Rebecca Smith

County Council Staff: Linda McMillan

Primary Care Coalition: Rose Botchway, Hillery Tumba

Guest: Diana Saladani *on behalf of T.J. Senker*

The Chair, Wayne Swann, called the meeting to order at 6:01 pm. Meeting held via video/teleconference during COVID-19 period.

Item		Action Follow-up	Person Assigned	Due Date
1.	Approval of Minutes – February 26, 2020 <i>Moved by Lynda Honberg, Seconded by Marie Mann</i>		Wayne Swann	
2.	Montgomery Cares Advisory Board Chair Report Introduction: Dr. Christopher Rodgers Wayne highlighted the agenda items and introduced Dr. Christopher Rogers as the new Policy and Strategy Officer with Public Health Services. Dr. Rogers will be managing the Healthy Montgomery and Montgomery Cares Programs and working with population and chronic disease health.		Wayne Swann	
3.	Update: Coronavirus/Healthcare Disparities Dr. Gayles explained what the metrics being considered for re-opening were from a health perspective. He noted that all data is factual, and the numbers look positive. He explained that testing access was to be increased and that there was a partnership with the state for contact tracing. Dr. Gayles mentioned that conversations were taking place with PCC to expand testing. Dr. Gayles also shared that DHHS is finalizing the mobile testing unit that will be able to go to large housing		Dr. Travis Gayles	

<p>complex and will be able to link individuals to social services for continuity of care.</p> <p>Regarding telemedicine, Dr. Gayles stated that moving forward some of these changes could possibly be implemented within the Montgomery Cares model.</p> <p><u>Discussion:</u></p> <ul style="list-style-type: none"> ▪ Lynda questioned which kits were being used and what resources were being made available for zip codes with high numbers. Dr. Gayles explained that the COVID-19 nasal swab (pcr nasopharyngeal test) is what is being used. Two test sites are being opened near the high-volume zip codes. The plan also includes utilizing ready responders team partnership with the state which includes going to people’s homes for pop-up testing. ▪ Langston asked what Dr. Gayles saw as the impact of infrastructure needs. Dr. Gayles explained that Dr. Boyce had been tasked with a developing a plan working, with the medical society, to shore up Dentist and personnel needed. 			
<p>4. Health Care for the Uninsured Report Tara Clemons See Report and handout</p> <p><u>Monthly Status Report</u> Tara reviewed the data for the Health Care for the Uninsured programs:</p> <p>Montgomery Cares has served 22,228 patients through April with a total of 52,421 patient visits at the ten participating clinics. The clinics expended 71% of the FY20 budgeted amount for encounters, the benchmark for April is 83%.</p> <ul style="list-style-type: none"> ▪ During the COVID-19 situation, all clinics are providing telehealth services. We have moved to a block payment schedule to allow for telehealth and in-person visits. Each payment is equal to the average of the individual clinic’s highest 3 monthly payments in FY2020 (July 2019-February 2020). ▪ MCares/OESS Eligibility Data: <ul style="list-style-type: none"> ○ 8,955 cases approved as of May 5th (1,266 cases are QHP eligible or 14% of approved cases) ○ QHP eligible clients end date will be moved from June 30th to December 30th to not interrupt their medical care. This change will occur with the County system and those affected will be contacted. <p>Care for Kids Total program enrollment through May is 6,158 which is a 21% increase over the same time last year.</p> <ul style="list-style-type: none"> ▪ Due to the CFK shortfall, DHHS added \$276,000 to the budget May 2020. This is one-time funding to support the program through the end of the fiscal year. This shortfall existed before the COVID-19 situation. ▪ COVID-19: all the CFK providers are conducting telehealth. Any children 2 and younger are being seen in person to manage immunizations and primary care. All school-based health centers continue to be closed. We are working under our summer status and scheduling children who are treated at school-based health centers at different locations. 			

- Emergency Assistance Relief Payment (EARP) – as you may know, the County sent out payments to CFK families with incomes less than 50% of the fpl who weren't eligible for federal COVID-19 stimulus checks or state benefits received the one-time emergency assistance. The phase 1 EARP assistance only included families that were enrolled through 7/1/19 - 4/3/20 with the income stated above. There will not be an additional automated funds assistance for families enrolled after this date. Phase 2 of EARP began May 18. Applicants are instructed call 311 and ask about completing an application and they will be assigned to a processing organization. See the website for more information - https://www.montgomerycountymd.gov/HHS/RightNav/Coronavirus_EARP.html

The Maternity Partnership Program's enrollment through April was 1,316 teens and women, a 6% increase in enrollment compared with FY19.

- DHHS is reviewing the new open solicitation for the MPP program to be posted in the summer. We have tentative approval for a 3% rate change and requiring additional outcome measures.
- During the COVID-19 period, there is a delay in processing the Emergency Medicaid (X02) that pays hospitals for the delivery. This does not cause any barrier to care but a slower than regular process with the hospitals

Dental Services The dental clinics are only open for emergency appointments. The Dennis Avenue clinic and 1401 Rockville pike are the only locations open. There is 1 provider at each location accompanied by a dental assistant and scheduler in the office

- A number of our dentists have volunteered at the 3 COVID-19 testing sites (Wheaton, Germantown, White Oak). We thank them for continuing to serve County residents in whatever way they can.
- During this time, we are evaluating inventory and making changes to the clinic post COVID. We are testing aerosols and air flow between operatories and other areas of the clinic.

The **Homeless Health** program. The new provider for primary care services is Kelly Collaborative Medicine. There is no current update on the number of encounters. Mass testing has been taking place at the shelters and the most vulnerable clients due to conditions or age have been placed at hotels. There has been an increase in clients from other jurisdictions that have closed to new intakes.

County Updates

- The County Council has recommended a flat budget for FY21. This means the budget will stay the same as FY20 and removing the 1.5% inflationary adjustment that was part of the CE recommended budget.

Discussion

- Peter wanted to comment on behalf of all clinics that this alternative payment method (the block payment schedule) was an extraordinary response to the current needs
- It was also mentioned that the QHP eligibility issue would not be going away since so many residents were losing insurance because of loss of employment.
- Tara mentioned that the telehealth and in-person volume is down. She explained that a better comparison would be March and April's numbers as all the clinics took a big hit the first few weeks.

	<ul style="list-style-type: none"> ▪ Tara mentioned that about 600 checks were sent out for Emergency Assistance for Care for Kids families ▪ Tara also mentioned that there were no barriers to care for the maternity partnership program. She also noted that MPP is operated by open solicitation and Lynda wanted to know if there will be more than 1 provider. Tara explained that White Oak, Shady Grove and Holy Cross Silver Spring and Holy Cross Germantown are providers, however, the goal is to provide more options. There is no minimum or maximum in the solicitation. ▪ Dental services at Dennis Ave. and 401 Rockville Pike. Are open for emergencies only. There is only 1 dentist+1 assistant ▪ Julia wanted to know if appreciation could be shown to the County Executive as well as DHHS for waiving the 2-visit requirement, and telehealth, and for including the CFK funds. She noted their response was remarkable. Wayne stated that traditionally a letter would be sent 			
5.	<p>COVID-19 – Montgomery Cares PCC Staff See Presentation handout.</p> <p>Barbara provided a timeline of the COVID-19 response by the clinics from the time the first cases were announced, she discussed the strategy and priorities as well as the implementation of telemedicine. Barbara also mentioned some of the work that has been done to maintain financial sustainability, the purchase and delivery of PPE and some of the challenges for acquiring the PPE and the Fit testing needed as well as the home monitor equipment needed to safely provide telemedicine. Lastly Barbara noted the communications and collaborations that have taken place, she provided an overview of Clinic’s Status “new normal” as well as the challenges still present for both staff and patients.</p> <p><u>Clinics Status “new normal”:</u></p> <ul style="list-style-type: none"> • All clinics remain open with only evening and weekend hours impacted <ul style="list-style-type: none"> ○ 40%-80% telemedicine ○ Acute and chronic care ○ Laboratory and pharmacy services ○ All clinics accepting new • Behavioral Health and Social Services (100% telemedicine) • Dental Services (closed by State; re-opened mid-May) • Some Staff Furloughs • Infection Control <ul style="list-style-type: none"> ○ Cleaning and Disinfecting ○ Telephone Screening and Triage ○ Monitoring Temperatures (patients and staff) ○ Segregating well and sick patients ○ Staff scheduling to reduce exposure and risk • Policies and Procedures (e.g. clinic operations, staff exposure, PPE conservation) • COVID-19 testing continues to evolve 			

	<ul style="list-style-type: none"> • Planning for the fall (simultaneous seasonal influenza and COVID-19) <p>Discussion</p> <ul style="list-style-type: none"> ▪ Barbara mentioned that the block payment had been great as the clinics were losing copay plus encounter rate due to all the restrictions. ▪ The funds for specialists were redirected to purchase PPE. Rose secured a warehouse for bulk distribution ▪ 90K were received for home monitoring equipment from the Greater Washington Community Foundation ▪ Lynda wanted to know if there was anything the board could do. Barbara suggested that any resource information be sent via email ▪ Tara mentioned that the block payment is approved until June 30, 2020 and more conversations need to take place. 			
6.	<p>Eligibility Process Update</p> <p style="text-align: right;">Julia Doherty/DHHS staff</p> <p>Julia mentioned that while some of the rules had been relaxed, the eligibility policy was still in place and there is a currently a delay in phase 2 clinics, the 2 visit rule has been waived and clients are encouraged to submit electronically. Julia mention to Dr. Rogers that at the 6 month point from when the pandemic started, she hopes to see the number of eligible cases received, the pending cases and denials to be able to understand how many people who were deemed eligible fore Medicare, actually received Medicare. Dr. Rogers noted that there is a data action plan to make data more accessible.</p> <p>Tara also mentioned a mail out to 1,500 people to let them know that they are still eligible</p>			
7.	<p>FY21 Advocacy Priorities - Updates Program Committee and Troika</p> <p style="text-align: right;">Wayne Swann</p> <ul style="list-style-type: none"> • Wayne suggested that each committee meet with their own team and further discuss at the June meeting. • There will be opportunity for supplemental funding and Tara suggested that advocacy efforts focus on COVID-19 issues. • Tara mentioned that Dental is a high needs area since the entire set up had to be modified. • Health Care for the Homeless along with Dental are high priorities since the nature of the work is very hands on • Julia wanted to know if the requests from each committee should be for all items or if the focus should be on COVID-19. Wayne stated that the report from each committee should include all areas and not just COVID-19 as the goal is to be able to expand services. • Linda noted the importance of separating the requests because there could be funding for additional items not COVID related 			

<p>8. June 2020 Agenda and Next Steps</p> <p>Tara provided an update on the current vacancies. The vacancies opened in December and closed in January, 8 people applied, and the process was then halted by County Executive. As of right now we are not sure how many of the 8 will want to interview. The current openings are:</p> <p>2 members of the public 2 members with knowledge of Healthcare for the Uninsured 1 Representative of a Managed Care Organization 1 Hospital Representative (Diane Saladini currently filling this spot)</p> <p>Dr. Rice, Marie Mann, and Tara will interview future candidates.</p> <p>The next meeting will be June 24, 2020</p>	<p style="text-align: right;">Wayne Swann</p>			
<p>9. Meeting Adjourned at 8:34pm</p> <p><i>Motion to adjourn: Julia Doherty</i> <i>Seconded: Peter Lowet</i> <i>Unanimously approved</i></p>				

Respectfully submitted,

Tara O. Clemons
Montgomery Cares Advisory Board