Montgomery Cares Advisory Board

April 27, 2022 Meeting Notes

MCAB Members Present: Betsy Ballard, Melanie Bunting, Kathy Deerkoski, Mark Foraker, Sarah Galbraith-Emami, Melinda Hite, Yuchi Huang, Denise Kishel, Peter Lowet, Helaine Resnick, Diana Saladini, Dr. Langston Smith, Wayne Swann

MCAB Members Absent: Sharron Holquin, Ashok Kapur,

DHHS Staff: Magda Brown, Tara Clemons, Sean Gibson, Ronda Jackson, Sean O'Donnell, Dr. Christopher Rogers, Rebecca Smith

County Council Staff: Essie McGuirre

Primary Care Coalition: Rose Botchway, Sarah Frazell, Marisol Ortiz, Hillery Tsumba

Guests: Tania Alfaro, Oscar Alvarenga (MCPS), Sonya Bruton (CCI)

Wayne Swann, called the meeting to order at 6:05 pm. Meeting held via video/teleconference during COVID-19 pandemic.

Item		Action Follow-up	Person Assigned	Due Date
1.	**Approval of Minutes** – Nov-Dec 2021, Jan–Mar 2022 **Diana Saladini** *Moved by Yuchi Huang* *Seconded by Sarah Galbraith-Emami*			
2.	**Montgomery Cares Advisory Board Chair Report** **Diana Saladini** ▪ Diana announced that her and Wayne have been in conversations with the Council Members and noted they are going well ▪ Diana welcomed all new members and asked them to introduce themselves			
3.	**COVID Updates** **See Report** **DHHS Staff** • Sean ODonnell provided an update on the County's COVID-19 status and noted that we are currently in a period of steady increase of Covid cases he also explained that based on CDC's community level indicators, Montgomery County's community level status is low • There are 161 cases per 100k residents in the past seven days • The increase in the number of cases is much lower that what was seen during Omicron in addition, a corresponding increase in hospitalizations has not been seen with this new wave			

- The percent of staffed inpatient beds occupied by Covid-19 patients is at 3.1% (7-day average)
- The positivity rate is at 4.6%
- Most cases in Montgomery County are BA2 or other sub lineage within BA2. The prediction models show that the BA2 peak may take place in early May
- He highlighted the availability of the Test-to-Treat program and noted that there about 13 sites within a 10–12-mile radius of downtown Rockville
- There are currently 6 locations where PCR tests can be picked-up and dropped-off
- Sean discussed the HRSA funding stream for reimbursing private providers for uninsured administrative cost and wanted to hear from the Clinical partners how this affects what they do since money ran out in those systems. He also detailed that DHHS will try to gather the same data from Pharmacies and others private sector organizations to determine what it would mean if someone needed to test-to-treat and has no insurance
- Dr. Rogers noted that HHS allocated an additional supply of at home Covid-19 antigen test kits to the Montgomery Cares providers. Each provider can receive up to 350 test kits
- Dr. Rogers also added that he had reached to all Montgomery Cares providers and those who serve Care for Kids to assess their capacity and need for technical assistance for outpatient antiviral therapeutic administration of remdesivir. Responses will be shared with Sean and the rest of the team

Discussion:

- Peter wanted to know what the County and the schools are using as metrics for the different safety measures. Sean responded that there is no specific trigger and explained that the CDC has framed their guidance around is a couple of key measures like hospitalizations and case rates. He also provided a summary of the all the data the County looks at to make decisions
- Yuchi asked if the County had the ability to take care of the Montgomery Cares patients since there are no more federal funds available. He also wanted to know if there was a reason for the high infection rates for specific populations around the Bethesda area. Sean explained that unlike previous spikes, they have not seen higher infection rates in the black or Hispanic communities with the most recent spike, he added that they have not seen any specific disproportionate impacts by race. Regarding the funding, the appropriation the federal government made under the emergency declaration for HRSA to reimburse private health care providers ran out and he has not heard about any future allocations. DHHS is working on figuring out how that impacts the private sector partners
- Sean questioned if the HRSA reimbursement was something that the Montgomery Cares providers have been using to cover administrative cost. Dr. Rogers explained that some of the providers participate with LHI, and they are recipients of some of the funding. He noted that ARP funding had been received for other Covid-19 related matters and explained that no HRSA funds had gone directly to Montgomery Cares and noted that those funds are usually disbursed trough other HHS programs
- Regarding the HRSA funding, Dr. Bruton explained that they do take advantage of the reimbursement opportunity as a mechanism to welcome all comers and capture repayment of cost on the back end
- Mark explained that when talking about capacity and need, he has seen a sharp increase in encounter rates and would like to have at least 3 months of data to see what the demand for the core services is. He also wanted to know if there was any guidance on how the individual counties sites are approaching safety measures and if there

	is any guidance regarding which measures should remain in place and is there something they can benchmark against. Sean explained some of the measures currently being followed at some of the clinical spaces and noted that they are still requiring masks. He added that advisory because of increased transmission, Dr. Bridgers put out a public health advisory strongly recommending people to wear masks in indoor spaces			
4.	**Bienvenidos Initiative – Newcomers** **Tania Alfaro/Oscar Alvarenga** **See presentation** • Tania provided a detailed summary of the program and noted that the initiative is a joint effort between Montgomery County Government, Montgomery County Public Schools, and community service providers. She explained that their goal is to support foreign-born individuals and families who have recently arrived in the United States through the provision of culturally and linguistically competent interdisciplinary services and supports. Tania pointed out that this initiative was propelled by the unprecedented increase in the number of unaccompanied migrant children and asylum-seeking families approaching the southern U.S. border and arriving in Montgomery County • Oscar explained that Montgomery County continues to be a primary destination for unaccompanied children seeking to unify with families/sponsors. He noted that between 2014-2022, Montgomery County was the 11th highest receiving county in the nation • According to the Office of Refugee Resettlement (ORR), 1,230 unaccompanied children were released to sponsors in Montgomery County in FY21 (through September 2021) and 489 for FY22 (as of January 2022). Oscar noted that 1,244 children from those reported have been enrolled in MCPS since July 2021 and a total of 3,678 international students have been enrolled • Oscar went over some of the programs initiatives and highlighted the newcomer orientation as well as a peer-to-peer program that are being created for new students among others • Oscar noted some of the program's accomplishments and noted a few items that are on the horizon which include coordinating a support network and pathway for newcomers who have attained a HS diploma in their country of origin and develop systematic newcomer peer-to-peer programs among others Discussion: • Regarding students who've already obtained their H.S. diploma and are enrolled in college, Yuchi asked if this would take away the opportunity of building out their language capabilities so they can be successful in their higher education. Oscar explained that no diploma is given out, they give out paperwork that certifies that the credits from their home country are equivalent to a H.S. diploma and this is accepted by universities and colleges. He highlighted that Montgomery College has an incredible ESOL department and the students have access to all the resources available to improve their language. Tania also added that there are partnerships with non-profit organizations that offer additional services to help bring down the language barrier. Tania clarified that while Montgomery College is the first point of contact for young adults seeking higher education, it is not the only one • Tania explained that all board members are welcome to join the program's subcommittees to help them move the work forward			

5.	**Health Care for the Uninsured Report** **DHHS Staff** **See Report**

Health Care for the Uninsured State Legislation
- Maryland Medicaid – Dental Coverage for Adults.   For the first time in 3 decades, Maryland Medicaid adults will have dental coverage (including preventive, restorative, diagnostic, periodontal) starting in January 2023. This is for eligible Maryland residents enrolled in Medicaid who annual income is at or below 133%
- Maryland Medical - Children and Pregnant Women (Healthy Babies Equity Act) - allows eligible pregnant women to be covered by Medicaid who annual income is at or below 133% regardless of immigration status and their children up to the age of 1 year. The women are covered for postpartum care up to 12 months after delivery
- County Council HHS Committee: The committee will meet May 4th to discuss the FY23 Operating Budget – Public Health programs. The meeting is 2:00 PM - 4:30 PM viewable via video conference

Programmatic Updates
Montgomery Cares
- Montgomery Cares served 17,974 patients through March 2022 with a total of 37,330 patient visits (in-patient and telehealth) at the ten participating clinics. A 9% increase in patients and -6% reduction in encounters compared to the same time last year
- Projections place year-end totals at approximately 45,878 encounters (FY21 - 53,336 encounters).
- July – Mar 2022: The split of encounters is 55% in-patient and 45% telehealth.

Care for Kids
- Program enrollment through Mar 2022 is 7,001 which is a 15% increase over the same time last year (6,095).
- Numbers for new patients are significantly up compared to the same time last year 284% (FY21 – 393, FY22 - 1,511).
- The volume of new and renewing children has resulted in increased workload for CFK including volume of calls.

Maternity Partnership
- Program enrollment through March 2022 is 1,203 which is a 19% increase over the same time last year (1,014). Projected utilization for the FY is 1,503 women (69 more women served than last year)
- The program is exploring if there are other providers who would like to participate in the MPP program (including those outside of Montgomery County). We want to ensure women have options for prenatal care providers and to get them in to care as soon as possible

Health Care for the Homeless
- The new Neel Street shelter has 12 medical beds for men that the Health Care for the Homeless Program nurses manage on a weekly basis. All medical beds for women (4) are full. SEPH is working on a new Medical Permanent Supportive Housing (PSH) Program that will come online soon to serve medically and psychiatrically vulnerable clients hard to place in housing once stabilized.
- Behavioral Health Psychiatric Services - The need for behavioral health services within the SEPH Continuum of Care continues to grow. The number of clients being seen continues to expand and the need continues to grow

with sheltered and unsheltered residents. The physician provides up to 20 hours weekly of onsite psychiatric services for any shelter guest requesting services, transitioning out of the hospital and complex cases that are unable to be served in the traditional community psychiatric environment. Psychiatric referrals have doubled and continue to increase.

- Medical Respite – Program continues to build a steady and consistent process on enhancements to referral process and programmatic needs. Staff is providing educational sessions with hospitals, external partners and internal DHHS departments on the referral process and purpose of program. We will continue to assess ways to increase referrals and admission for appropriate homeless clients in need of recuperative care. Our referral numbers are slowly increasing as awareness increases.

County Dental
- County Dental served 3,704 patients through Mar 2022 with a total of 8,021 patient visits. An 67% increase in patients and 116% increase in the number of visits compared to the same time last year
- We are still experiencing challenging in recruiting staff. There are a few vacancies (Dental Assistant, Princ Admin aid etc) that we're eager to fill asap. Due to COVID-19, the program has had staff and providers out of the office. This has caused greater reliance on temp staff which is not always available and costly.
- School sealant update: the sealant program was put on hold by MCPS for this school year due to COVID, but we are on track to begin next school year.

6.	**MCAB Orientation: Part 1** **Tara Clemons** **-- Purpose, Role of Members & Committees** **See presentation** - Tara went over the board's mission and the programs it serves and highlighted that the board's charter had just been renewed in December 2021 to include the underinsured population - She provided an overview of the board's duties, the membership types as well as the membership terms - Tara also provided information on required training for board members and provided the links to the open meeting act training as well as parliamentary procedure training. She reminded members that the training needs to be completed within 90 days of the confirmation or assignment to a BCC			
7.	**MCares Committee: Eligibility** **Committee Members** - Diana explained that the Montgomery Cares Committee has had several conversations regarding eligibility and the eligibility options and noted that the committee had come up with and eligibility approach that was supported by the HCLC and the MCares Committee. Diane explained the criteria used to make the recommendation and noted that the focus was on the most patient centered option which includes: reducing or simplifying the documentation, making applications forms and information about the program available in multiple languages, extending the eligibility period from one to two years consistent with what is being done for Care for Kids, enabling provisional care while eligibility is being determined, an approach that allows patients to apply and interact with the clinic that is closest to their home or that is most convenient for them, enabling families to renew at the same time on one application form, reducing the threshold to reapply and get approved, a no-wrong			

door approach where patients can apply at non-profits; by dialing 311; at schools; clinics; or at OESS. The second criteria looked at was that this approach would be conducive to a value-based care approach, also ensuring that clinics have real-time data on eligibility status of applications and reasons for the current status, considering the County's existing eligibility plans

- Diana stated that the recommended option the committee came up with would by a hybrid option that would allow OESS and the clinics to be involved in the Montgomery Cares eligibility determinations. OESS would screen patients with a social security number who may be eligible for Medicaid and patients who seek specialty care through project access. The clinics would determine eligibility for all patients who do not have a social security number.
- Diana went over the pros and cons that were identified with this recommendation which include that:

PROS
  o Project access has identified patients who are eligible for or have active Medicaid
  o The system would ensure that the limited funding for specialty care and pro-bono resources are only used by patients who do not have access to any other form of insurance
  o Clients could present at OESS, but this hybrid option includes multiple doors including in-house eligibility
  o There will be presumptive eligibility
  o Individuals sent to OESS are most likely eligible for other programs
  o Technical assistance and training to clinics regarding eligibility

CONS
  o Under project access, OESS currently conducts eligibility screening for all patients referred to specialty care and the process is somewhat cumbersome for some clinics causing the clinic to give up and end up referring clients to specialty care in other network
  o The risk that requiring patients to go trough eligibility could delay access
  o For patients with social security numbers having to apply to OESS may deter them from seeking care

- Helaine noted that all documents had been sent over with the meeting materials and explained that there were 5 options the committee considered. She also explained that those same 5 options were sent over to the HCLC. Helaine pointed out that the committee had come up with 5 evaluation principals and noted that Wayne did not support principal number 5

Discussion:
- Denise stated that she was not ready to vote on the motion. Additional information is needed on the impact this would have both on the value-based proposal and fiscally. She wanted to know what the partners' feedback was regarding the administrative burden increase this option would create. Helaine asked Mark to provide his point of view regarding this proposal. Mark explained that the clinics had done eligibility a few years back in a decentralized model and this would be going back to that process. .
- Mark explained that when this proposal was reviewed by HCLC, all the clinics agreed that this was the best option, but it was acknowledged that there would be more work within this process. He highlighted that eligibility must be conducted in a uniform manner by all 10 organizations to ensure that when a determination of patient eligibility is made, the County can be confident that all regulations are being followed. Denise expressed that this was a major concern for her as well

	▪ Melinda wanted to know if there was any thought of using social work students, nursing students, students in general to help support the eligibility process. Diana explained that the details of how this would be rolled out have not been figured out yet, for right now is just about supporting the idea of a recommended approach on eligibility ▪ Diana asked members to please email her or Tara directly with any questions regarding this proposal.			
8.	**May 2022 Planning Mtg and Next Steps** **Diana Saladini** The May meeting will be held on the 25th at 6:00pm and will include: ▪ A discussion on the MCares Committee Eligibility proposal			
9.	**Meeting Adjourned at 8:18 PM** *Motion to adjourn: Kathy Deerkoski* *Seconded: Yuchi Huang* *The motion was not passed due to not meeting quorum*			

Respectfully submitted,

Tara O. Clemons
Montgomery Cares Advisory Board