FOCUS COMMITMENT IMPACT

ANNUAL REPORT



Our Mission

We are making Maryland healthier by connecting residents to insurance and care, educating the community about healthier living, and advocating a more equitable health care system.

Our Vision

We envision Maryland as a place where all people have equal access to health care and where there are no disparities in health outcomes based on income or race. HealthCare Access Maryland will be a state and national leader in reforming the health care system.

Our Focus

"For time and the world do not stand still. Change is the law of life. And those who look only to the past or present are certain to miss the future" J. F Kennedy

Health Care Access Maryland (HCAM) will identify 2016 as one of the most significant years of change for the organization. In December 2015, Kathy Westcoat, President for over a decade decided to make a career change. Shortly after, I was named CEO.

Our focus became to embrace change and look forward.

In my short tenure as CEO of HCAM, we have successfully completed a new three-year strategic plan, recruited new board members with expertise in fundraising, marketing, legislative affairs and we continue to be a 100% giving board. One thing that has not changed is our commitment to serve those that are the most vulnerable. HCAM served 145K individuals and families over this past year. We are focusing on our staffs' well-being and every day we strive to improve the overall health of Marylanders by ensuring connections to coverage and care.

I invite you to come along and join us in this journey of change. As an organization, we are thankful to our staff, volunteers, leadership, partners, funders and community stakeholders who support our mission.

Traci Kodeck, MPH Healthcare Access Maryland CEO

Our Commitment to the Workplace

FY2016 was a year of significant change for the HealthCare Access Maryland (HCAM) Human Resources (HR) Department. The year began with an audit of the HR practices. As a result of the audit HCAM engaged a consulting firm to assist improving the effectiveness of the department as a whole.

A Human Resources Director was identified in March 2016 and in June 2016 an HR Generalist was added to the team.

The Human Resources Director worked with the Executive and Programs teams on the following key areas:

Compliance, Benefits, Employee Relations, and Strategy.

Compliance

Compliance and risk management is a critical role of the Human Resources Department. The key compliance initiatives were:

- Roll out of a revised trauma informed Employee Handbook
- Completed an audit of the I-9s
- Implementation of online I-9 Verification (e-Verify) as required for government contractors
- Employment files reviewed and updated
- FLSA review to ensure that all employees were properly classified (exempt/non-exempt)
- Implementation of compliant Family Medical Leave Act (FMLA) process
- Hands-on approach to managing the fiduciary responsibility of the 401K (working with the CFO)
- Partnership with firm to get an Affirmative Action plan in place (OFCCP compliance for employers with government contracts)
- Submission of the EEO-1 and the VETS-4212
- Continued monitoring of legislation that impacts employers and regularly updating the executive team on the possible impact
- Developed a compliance and comprehensive New Hire Orientation Process

Benefits

HCAM transitioned to a new benefits brokers, TriBridge Partners, this year to ensure the highest level of service for our staff. By working with the new broker HR was able to do the following:

- Implemented an online benefits enrollment portal (eliminating paper enrollment at open enrollment and for new hires)
- Comprehensive review of plan performance to assist with decisions making regarding plan design
- Implementation of significant changes to plan design by moving to a high-deductible plan with an HSA. This resulted in minimal increases in premium for employees enrolled in the HMO
- Improved access to the benefits related information for HR to allow us to provide better customer service to HCAM employees
- Facilitated benefits fair in which staff were able to speak directly with the carriers and insurance providers regarding their specific needs
- Broker provides constant compliance updates, allowing HR to provide employees with the required notices in a timely manner

Employee Relations

Over the last year, a major focus has been to strengthen the relationship of HR with the employees of HCAM. The department works diligently to respond to employees quickly and ensure that personnel issues are resolved in a timely manner. Additionally, HR has worked to provide managers with the tools that they need to address issues within their teams, using HR has an escalation point when needed.

Strategy

HR has been fully integrated into the Executive team as a strategic partner. The department has been able to assist in shaping the new strategic plan for the organization, where **Human Resources** is a consistent contributor throughout the plan. Our re-focus on the people of HCAM will show in our ability to provide greater levels of care for the communities we serve.

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Our Commitment to the Communities We Serve



In keeping with our mission and vision, HealthCare Access Maryland is committed to the communities we serve. Our goals are concise and measurable. Our impact is seen through the lives we change.

In FY16 the impact of our work was extremely visible. From our Eligibility Unit to our Connector Program to the Care Coordination Program, Behavioral Health Outreach and Population Health Programs the people and programs of HCAM helped the people of Maryland.

Our **FOCUS** on being the best at what we do and a **COMMITMENT** to our personnel and communities we serve creates **STORIES OF IMPACT** across many lives.





Our Impact Eligibility Unit

Volume of Cases

Children (all categories)

10,803



Pregnant and Post-Partum Women (all categories)

2,217



Medical Assistance for Families

19.092



The HealthCare Access Maryland Eligibility Unit had another extraordinary year in FY16. This year's success resulted from hard work and dedication from the Eligibility staff. The team continued to improve work flow processes while maintaining program goals and assisting consumers. The Eligibility Unit contributed to assisting thousands of Maryland residents by connecting them to health insurance and other services.

During FY16 the Eligibility Unit continued to act under the direction of Department of Health and Mental Hygiene. The Maryland Health Connection (MHC) portal continues to be the primary platform for consumers applying for insurance. Maryland Children's Health Insurance Program (MCHP) applications are still received and processed for undocumented pregnant women through Department of Human Resources' (DHR's) legacy system, *CARES*.

FY16 measurement areas include: data regarding newborns, redeterminations, pregnant women, undocumented pregnant women, and Medical Assistance for Families MAF (adult coverage).

HCAM received 209 appeals cases for FY16.

In working in conjunction with various 3rd party entities our appeals representative was able to resolve 40% of the cases prior to the appeals hearing date.

Areas of Impact

- Remained within the 10 day compliance for FY16
- Processed and resolved 9,881 issues related to the Maryland Health Connection portal
- Processed 1,820 requests from 3rd party entities
- Attended trainings related to MHC policy and processing.
- Referred a high volume of consumers to the HCAM Connector Team for Qualified Health Plan enrollment

Our Impact Connector Program

For the fiscal year 2016 the Connector Department completed



55,943 phone calls received by the call center



22,760 total enrollments



3,780 of those were Qualified Health Plans



18,980 of those were Medical Assistance



225 appointments were scheduled by the team



107 presentations and/or events lead to 4,078 individuals being reached as a result



Real People Life Changing Results

Story of Impact

insurance plan.

Erica helped a Maryland resident who lost her coverage because she did not understand her plan and she did not know how the billing process worked. Erica was able to patiently explain to her the basics of health insurance and how billing works. The consumer left our office armed with a lot of useful information and most importantly she left with health insurance.

Chardaye assisted a concerned son who was applying on behalf of his elderly parents. His parents were new to the country and had no understanding of the ACA or Maryland Health Connection. Chardaye was able to guide, educate and enroll the consumer's parents into an insurance plan for 2017.

Mrs. C worked with Nicholas Brown. Mrs. C's husband recently lost his job. Their family was insured through Mr. C's employer and they needed help figuring out the next steps. After two frustrating interactions outside of HCAM, Mrs. C was relieved at her encounter with Nick. She stated she found Nick "to be respectful, resourceful, professional and his follow through and organization were amazing." With Nick's help, Mrs. C ended up enrolling in a plan she and her family is very happy with.

Jonathan Ortega worked with who we will refer to as "Mrs. A." When Mrs. A came to Jonathan she was enrolled in a private health plan with a \$1,700 monthly premium. To make matters worse, Mrs. A was recently diagnosed with a severe health condition, which could have led to death if not instantly treated. Mrs. A was having trouble keeping up with her existing bills and newfound medical expenses. She had forfeited paying her mortgage and was maxing out her credit cards in order to be able to afford her sky high health insurance premium. When Mrs. A sat down with Jonathan, it was clear that she was in desperate need of our assistance. After speaking with Jonathan for a mere 20 minutes, Mrs. A was pleasantly surprised to learn that she was newly eligible for Medical Assistance (MA). Jonathan quickly helped her facilitate the MA enrollment. Mrs. A is now receiving her life saving medical treatments in the comfort of her own home. Since Mrs. A is no longer faced with a high premium, she was able to bring her mortgage up to date and retain her home!

Joshua Morris assisted an individual who has been insured privately for over 20 years through her employer. The consumer lost her job and thus her insurance coverage. She has another job, but the company does not offer insurance. She came in to see Josh and he helped her navigate the MHC to identify an affordable health

Our Impact Care Coordination



The Care Coordination Program is the Administrative Care Coordination Unit serving as the local resource for all *HealthChoice* (Medicaid) members and Medicaid Providers in Baltimore City. The team serves as a "safety net" for clients who are lost to care. The program receives referrals from Managed Care Organization (MCO), Case Managers or Providers for clients that have missed multiple appointments and are in need of outreach/location, education, coordination of care and reconnection to their MCO and Provider for preventative health care, chronic disease management, acute medical needs and follow up to hospitalizations.

The team serves as a <u>single point of entry</u> for Maryland Prenatal Risks Assessments for all pregnant women enrolled or eligible for Medicaid. Women are identified during their initial OB appointments and then linked to prenatal resources to support positive birth outcomes that includes but not limited to WIC, smoking cessation, prenatal home visiting, MCO prenatal incentive programs, and local parenting support groups.

The team is made up of RN Care Coordinators that provide services to our most medically complex clients, SW Care Coordinators that service our clients with psychosocial issues, Community Ombudsmen that service clients with difficulty with access to medical services and several Paraprofessional Staff that service clients with health benefit questions.

The outreach and coordination of services performed by the Care Coordination Program is unique and provides a significant impact to the residents in Baltimore City. The outreach team provides home visitation and telephonic assessments to identify the barriers that prevent clients from accessing benefits and covered services.

How do we make a difference?

- Identified School-Aged Students in Baltimore City Schools who are in need of medical care are linked to a School Health Nurse
- Clients are assisted in establishing medical homes; reducing ER visits

- Prenatal clients are receiving more comprehensive support and education through home visiting and peer support
- Newborns are linked to medical insurance and pediatric care
- Chronically Ill members are receiving MCO case management/
 Disease Management

Our Impact for FY16:



9,136 Baltimore City Residents served



3,891 Pregnant Women



1,528 Infants and Newborns



540 School Aged Children



3,177 Adults with a Disability

32,629 Outreach attempts made

(telephone and home visit)



4,336 Home visits



28,293 Telephone calls



1,092 Prenatal/Postpartum Women linked to Community Home



649 Referred Families to WIC

877 Referrals made to supportive services (transportation/housing/mental health/substance abuse treatment)

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Our Impact Behavioral Health

Since we have developed this partnership, our assistance volume has increased to 3,710 calls in FY16. More than a 1,000 callers were referred to treatment with 53% being successfully connected to treatment

HCAM enrolled more than 500 new clients

and delivered recovery support services to over 5,000 individuals



Our dedicated team
has placed over 70%
of our street homeless
clients into safer
housing



Crisis, Information and Referral and Baltimore Buprenorphine Initiative

In FY16 a collaboration was formed between Baltimore Crisis Response, Inc., and HCAM's Information and Referral Line, to provide 24/7 access to behavioral health crisis services, referrals to treatment and behavioral health resource information for Baltimore City residents. This collaboration provides for one number to call to access all levels of care or information needed related to behavioral health. All calls start at the BCRI crisis line and those requesting treatment or information are warm transferred to HCAM.

We have worked to increase awareness and knowledge of the Crisis, Information and Referral line with targeted populations, such as youth, homeless, LGBT and pregnant woman by developing partnerships with Baltimore Child Abuse Center, B'more for Healthy Babies, Women Infant and Children Services, Treatment Resources for Youth. We have partnered with University of Maryland's STAR TRACK Program, and Your Trans Care Services, a program dedicated to improving health and wellness for Trans youth and young adults in Baltimore.

In collaboration with the Baltimore City Health Department and Behavioral Health System Baltimore, the Baltimore Buprenorphine Initiative (BBI) continues to provide treatment care coordinators who provide six months of care coordination to clients in medication assisted treatment. This initiative supports individuals in recovery by addressing social determinants of health and removes barriers for clients accessing treatment.

Homeless Services

The Homeless Services Division of the Behavioral Health Outreach Program services the most vulnerable of Baltimore City residents. Our outreach team maintains a street outreach presence, with extra coverage during extreme weather conditions and other city side emergencies that impact the unsheltered homeless population (eg: Zika spraying). In FY16 we witnessed a dramatic reduction in HUD grant funded street outreach throughout the city. The reductions resulted in HCAM experiencing a 50% staffing cut for street outreach. HCAM now covers more of the city and has stepped up to triple the clients we serve.

Our Eviction Prevention and Rapid Rehousing (EPRR)

program services clients by providing financial assistance and case management to prevent homelessness or allow families to quickly exit brief periods of homelessness and regain stability.

Recovery Care Services

As a component of HCAM's Behavioral Health Outreach Programs, Recovery Care Services (RCS) provides access to services and resources that assist clients in addressing the barriers to engaging in treatment for substance use disorders. RCS provides State Care Coordination, Maryland RecoveryNet resources, Care Coordination for Women and Children and Overdose Survivors Outreach Services.

HCAM's State Care Coordination (SCC) program assists clients referred by residential or outpatient substance use disorder treatment programs in Anne Arundel County, Baltimore City, and Baltimore County.

Through the fee for service Maryland RecoveryNet (MDRN) program, HCAM connects Maryland residents in early recovery to a variety of medical and nonclinical support resources, such as recovery housing, primary and dental care, as well as transportation and other sources.

Recovery Care Services provides program coordination and intensive case management services to the Baltimore City Women & Children's Supportive Housing Project. This is a 12-month program that targets women who are in, or have completed treatment for a substance use disorder and have custody of at least one child. The Women & Children's program recognizes substance use disorders as chronic illnesses that affect whole families and require whole person approaches to treatment and recovery.

In FY16, a new and exciting program to RCS is the Anne Arundel County's Overdose Survivors Outreach Services (ODSOS) program. This program assists those individuals who are overdose survivors, who were referred through the Baltimore Washington Medical Center. Referred individuals are offered expedited referrals to Medication Assisted Treatment facilities in AA Co. and receive State Care Coordination and MDRN program supports to assist their recovery.



The RCS division enrolled a total of 1,883 new and unique clients into the SCC Program and served a total of 6,302 clients



The RCS division connected 1,000+ clients to MDRN services providing \$355,000+ in client benefits





Since February 2016, 23 survivors have been treated thus far

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Our Impact Population Health

620 clients were
referred by providers
to the Access Health
program and 216
medical and behavioral
health appointments
were scheduled



Sinai Hospitals.

Across these programs, the Population Health team has provided services to more than 1,000 clients and their families



During the first 90 days, 113 clients were referred to the HealthLink program



Of its enrolled clients, Operation Care has facilitated a 911 call volume reduction of 90% in FY16



The Population Health Department has provided care coordination and case management services to clients identified as frequent users of hospital emergency room services and identified as high volume callers of emergency medical response services for non-emergent conditions. The Population Health Department consists of four programs that provide services across Baltimore City and Baltimore County: Operation Care, HealthLink-St.Agnes, and Access Health at Northwest and

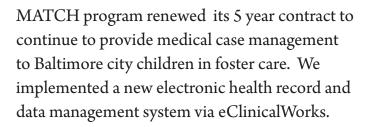
HCAM's Access Health Program, in collaboration with Lifebridge Health, identifies and assists patients who are frequent users of the hospital's emergency department by connecting them to appropriate services and resources and providing post discharge care coordination. The Access Health program was initiated at Sinai Hospital in June 2014 funded by the Maryland Community Health Resources Commission for three years. Due to the early success, Lifebridge funded the project to Northwest Hospital in March 2016. As both hospitals are within the LifeBridge Health System, intrasystem communication and collaboration provide optimal opportunities to facilitate appropriate use of care and prevent healthsystem readmissions.

Established in March 2016, HealthLink is a partnership between Saint Agnes Hospital and HealthCare Access Maryland (HCAM) to provide community-based, post discharge care management services for individuals with multiple high risk chronic conditions. This collaborative approach aims to reduce hospital re-admissions and emergency room visits and improve overall health.

In partnership with the Baltimore City Fire Department, HCAM's Operation Care 911 works with individuals who routinely make non-medical emergency calls to the 911 system and connects them to more appropriate levels of care.

Our Impact MATCH Program

818 children who entered foster cared during FY16 received coordinated health services through MATCH



81% of children received an initial health screen no later than five business days following out-of-home placement.

91% of children received medical, dental, and mental health assessments within sixty days following out-of-home placement.

MATCH completed 3486 Health Case Reviews to ensure children in out-of-home placement have an updated health plan that identifies if chronic health needs are being met, including mental health treatment plans.

89% of caregivers received an updated health passport for any child that had been in care.

Baltimore City (i.e. the MATCH Program) was mentioned as a best-practice model for health care delivery to the foster care population in the American Academy of Pediatrics Technical Report on Health Care Issues for Children and Adolescents in Foster Care and Kinship Care (published Oct 2015) http://pediatrics.aappublications.org/content/136/4/e1142.



Real People Life Changing Results Story of Impact

A 42 year-old female who was identified as a high volume EMS caller was referred to the Operation Care 911 program. The staff was able to learn that the client was calling 911 because she was depressed, facing eviction, facing homelessness, had lost her father and her son to recent deaths, suffering from somatic illnesses, and was without a sustainable income source at the time of referral. Though active engagement with the Operation Care 911 case manager, she was connected to community resources to help her become self-sufficient. She was enrolled in a 12 week work study program offered by My Sisters Place, and at the end of the work study program she was able to secure employment with the Second Chance Program. At the conclusion of the program enrollment and the 90 days after case closure, the client has sustained a 911 call volume of zero.



HealthCare Access Maryland FY 2016

Funding Organizations

HealthCare Access would like to thank all of its funders who supported our programs and services during the fiscal year of 2016. We look forward to your continued support and collaboration.

- Anne Arundel County Department of Health
- Baltimore City Fire Department
- Baltimore City Health Department
- Baltimore City Department of Social Services
- Baltimore City Mayor's Office of Human Services
- Baltimore County Health Department
- Behavioral Health System Baltimore
- The Harry and Jeanette Weinberg Foundation
- Kaiser Permanente
- Leonard and Helen R. Stulman Chartiable Foundation
- $\bullet \ Life Bridge \ Health-Northwest \ Hospital$
- Maryland Community Health Resources Commission
- Maryland Department of Health and Mental Hygiene
- Maryland Health Benefit Exchange
- St. Agnes Hospital



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Healthcare Access Maryland Financials

Balance Sheet

as of June 30, 2016 (Audited)

ASSETS

Current Assets	
Cash	\$570,611
Total accounts receivable	1,912,374
Prepaid expenses	101,315
Total Current Assets	\$2,584,300
Fixed Assets	
Furniture	\$458,673
Equipment	191,915
Software	313,849
Leasehold improvements	58,076
Accumulated depreciation	(557,196)
Total Fixed Assets	\$465,317
Total Assets	\$3,049,617

LIABILITIES

Current Liabilities

Accounts payable	\$232,841
Accrued salaries and expenses	956,957
Due to grantor	238,913
Line of credit	625,000
Deferred rent	90,993
Deferred revenue	503,730
Total Current Liabilities	\$2,648,434

FUND BALANCE

Unrestricted net assets	\$401,183
Total Fund Balance	\$401,183

Total Liability and Fund Balance \$3,049,617

HEALTHCARE ACCESS MARYLAND

Statement of Revenues and Expenditures For the Twelve Months Ending June 30, 2016

REVENUE

Grants	\$15,841,291
Program revenue - FFS	842,077
In Kind Rent	136,302
Miscellaneous	18,657
Total Revenue	\$16,838,327

EXPENSES

Program Services	\$15,383,415
Administrative Expenses	1,641,042
Total Expenses	\$17,024,457
Income (Loss)	\$(186,130)

Overhead ratio 10%

