NO MORE INVISIBLE PATIENTS
Help Give Everyone in Montgomery County Access to Quality Health Care
"The doctor will see you now." It’s a familiar phrase to many of us. It’s a reassuring phrase, from flu shots to major diagnoses, health care providers see us through the ups and downs of life. But many low-income individuals don’t have the opportunity to be seen by a health care provider. Whether because of inability to pay, cultural or linguistic barriers, or confusion over how to access health care, many low-income individuals are invisible to the health care system. When people don’t access primary and preventive health care when they need it, the result is care at its most expensive, often in hospital emergency departments. And the costs don’t stop there; lost work days affect our businesses, and our schools must cope with children less ready to learn due to the illness of a parent or sibling. The Primary Care Coalition (PCC) is working to change this.

For two decades, the Primary Care Coalition has worked with public sector, private, and community based partners to weave a health care safety net for our most vulnerable neighbors. The Montgomery County government paved the way by establishing Montgomery Cares and Care for Kids, the health care access programs for low-income, uninsured Montgomery County residents. Local hospitals, physicians, and foundations have demonstrated their support with in-kind contributions and supplemental funding. The PCC is proud to administer Montgomery Cares and Care for Kids, which now 'see' some 33,000 adults and children, roughly half of the estimated 60,000 low-income Montgomery County residents not eligible to participate in state or federal health coverage programs. We’ve come a long way, but there is more to do.

As the Affordable Care Act (ACA) expands commercial insurance and Medicaid coverage, the PCC has partnered with the Montgomery County Department of Health and Human Services, the Prince George’s County Health Department, and a host of community-based organizations to enroll those eligible for insurance into a health plan. Yet many of the newly insured struggle to navigate the complexities of health insurance and remain invisible to the health care system. We must do more to help the newly insured access care.

The PCC envisions a community in which all residents have the opportunity to live healthy lives. The overall health of our population is a cornerstone of our economic and communal health. To make this vision a reality, we will continue to work with our long-standing partners to increase the access, timeliness, and cultural and linguistic capacities of Montgomery Cares and Care for Kids. Recognizing that the health of our community is impacted by social and economic determinants beyond the health care system itself, we will also forge new partnerships and incorporate new dimensions into our work.

It is our privilege to partner with the Montgomery County Department of Health and Human Services, 12 independent safety-net clinics, five hospitals, and community partners to deliver programs like Montgomery Cares and Care for Kids. With continued support from these partners and the commitment of private donors like you, we have an opportunity to make sure there are no more invisible patients. Please make a donation using the enclosed envelope or visit www.PrimaryCareCoalition.org/Donate to make a secure online contribution.

In November 2014, the PCC welcomes a new CEO to build on the success of the past 18 years and lead us forward. We hope this annual report makes visible to you the work still to be done and inspires you to support our vision and actions for a healthy community. Please contact the PCC if you would like to learn more.

Sincerely,

Leslie Graham, President and CEO

Steve Galen, Senior Advisor, Former President and CEO
MAKING HEALTH CARE HAPPEN

The Primary Care Coalition of Montgomery County (PCC) is making health care happen. The PCC is a 501(c)(3) nonprofit organization that works with clinics, hospitals, health care providers, and other community partners to coordinate health services for our most vulnerable neighbors.

The most vulnerable members of our community frequently have significant health concerns resulting from or intensified by their socio-economic circumstances. The PCC administers a variety of programs designed to increase access to care and improve the quality of care to promote the health and well-being of low-income, uninsured, and underinsured community members. The PCC’s vision is a community in which all residents have the opportunity to live healthy lives.

TRANSFORMING THE HEALTH SAFETY NET

This is a transformative time for health care. Across the country policy makers, payers, and health care delivery systems are placing greater emphasis on quality, efficiency, access, and affordability—the very values that the PCC and our partner organizations have been focused on for years.

Montgomery County, Maryland, is known for being one of the most affluent communities in the country, but the PCC recognized a long time ago that many of our neighbors are invisible to the health care system. In collaboration with partners in the public, private, and nonprofit sectors, the PCC has worked diligently to expand and strengthen the health safety net so that more residents have access to the health services they want and need.

The state of Maryland is implementing reforms to reduce health disparities and improve population health. The Maryland Medicaid program has been expanded to include all low-income children, and adults with incomes below 138 percent of the federal poverty level (FPL). Eligible Marylanders with incomes between 138 percent and 400 percent of the FPL can purchase subsidized health insurance through the Maryland Health Connection. But the reforms extend beyond health insurance coverage. With the goal of improving care and reducing costs, Maryland has revised the way hospitals in the state are paid to incentivize value over volume. Maryland is the only state where hospital payment rates are set by the state. In the past Maryland hospitals were paid using a fee for service model based on admissions. The new payment model is focused on per capita costs of care and limits growth in hospital budgets.

For nearly a decade, the PCC and its partner organizations have worked together to provide a health care safety net that extends culturally and linguistically appropriate care to all community members regardless of their ability to pay. Now, the changes happening at the state and national levels provide an opportunity to take that safety-net health care system to the next level.

We have an opportunity to make sure there are no more invisible patients by closing the gap in health care coverage and providing support and care coordination to help patients navigate the health care system and access care that is timely and appropriate.
HEALTH CARE REFORM IN ACTION

In the fall of 2014, the new health insurance marketplaces that were created under the Affordable Care Act (ACA) opened for business. The new marketplace offered thousands of previously uninsured Marylanders the opportunity to enroll in Medicaid or a health plan qualified for a federal subsidy (QHP). Extending health care coverage to more people is an important first step, but it is just one step in the health reform journey.

The Montgomery County Affordable Care Act Leadership Summit

By extending health coverage, the ACA provided an opportunity to expand access to care for thousands of previously uninsured residents, but it also raised many questions. Montgomery County leaders and stakeholders recognized that the first open enrollment season under the ACA would be a complex and difficult undertaking with many moving parts that needed to be clearly understood and carefully coordinated from the start. In October 2013, the PCC, in collaboration with the Maryland Women’s Coalition for Healthcare Reform and the Montgomery County Department of Health and Human Services (DHHS), hosted the Montgomery County ACA Leadership Summit. During this daylong event, leaders in health care came together with community stakeholders to discuss ACA implementation in Montgomery County. From discussions about outreach and enrollment activities to presentations from insurance carriers, hospitals, and community-based health care providers on their strategies to meet the growing demand for health services, the Leadership Summit provided an opportunity for health care administrators, medical professionals, social workers, and other interested parties to engage directly with those who are shaping the future of health care delivery.

Funding for the Montgomery County ACA Leadership Summit was provided by the Montgomery County Department of Health and Human Services, the Consumer Health Foundation, CareFirst BlueCross BlueShield, the Montgomery County Medical Society, and the PCC.
The State of Maryland awarded six regional grants to Connector Programs throughout the state. These Connectors were charged with reaching out to consumers and enrolling them in a health insurance plan. Spearheaded by the Montgomery County Department of Health and Human Services (DHHS), the Capital Region Connector is responsible for conducting consumer assistance, outreach, and enrollment support for residents of Montgomery and Prince George's Counties. The PCC acted as the performance manager on the Capital Region Connector Program. As performance manager, the PCC collaborated with the Montgomery County DHHS and seven partner organizations to facilitate communication, collect and analyze data, and support program implementation.

The PCC developed an independent data system for Navigators and Assisters—the staff trained to provide enrollment support—to report their daily activities. This system enabled the Connector to monitor application and enrollment rates. PCC analyzed the available data and used the information to provide coordination and communication, and to identify pressing technical challenges, training needs, and short-term process changes that could improve the overall performance of the Capital Region Connector Program.

The PCC also worked with Connector partners to better understand consumer experiences and make sure the Connector Program was meeting their needs. The PCC conducted a consumer satisfaction survey and coordinated focus groups to collect qualitative input from consumers.

CHANGING THE CONVERSATION: A LEARNING JOURNEY TO CAMBRIDGE

In October 2013, the Primary Care Coalition led a 14-person delegation of local leaders in health care from Montgomery County on a learning journey to Cambridge, Massachusetts, to discuss best practices and identify opportunities for reforming the local health care safety net. Learning journey participants included elected officials, clinic leadership, and health policy experts. The event provided an opportunity to examine ways to shape and refine Montgomery County’s local health care system to be more responsive to the needs of the population and ensure that even the most vulnerable members of our community have access to high-quality care. While in Cambridge, the delegation was hosted by the Institute for Healthcare Improvement and engaged in conversations and site visits with best-in-class organizations, including:

- The Vermont Blueprint for Health
- The Massachusetts Health Connection
- The Cambridge Health Alliance
- Community Catalyst
- The Health Improvement Partnership of Santa Cruz County, California

Following the learning journey, the delegates have continued to work together to identify programs and initiatives that will mold Montgomery County’s evolving health care system to be more responsive, effective, and efficient.

The shared learning experience and rich discussion that took place during the learning journey set the stage for new projects that will move Montgomery County’s health safety net toward a more integrated system of care. One of these new projects is working to develop a program designed to achieve the Triple Aim Goals with a specific population group in Montgomery County.

Capital Region Connector Entity Performance Manager

Despite significant challenges, the Capital Region Connector exceeded its goal to enroll 52,000 residents during the first open enrollment period. The PCC estimates that 119,000 individuals either enrolled in Medicaid or a health plan qualified for federal subsidies.
In FY14 the PCC continued efforts to align Montgomery Cares with state and national health reform initiatives. The major efforts included the implementation of an electronic health record (EHR) certified by the Office of the National Coordinator for Health IT, building capacity for Montgomery Cares clinics to become Medicaid providers, and implementing key principles of patient-centered medical homes.

Electronic Health Record Conversion

FY14 saw the culmination of a multi-year effort to update the Electronic Health Records systems being used by eight of the twelve clinics participating in Montgomery Cares. The other four clinics were already using an EHR.

For several years, Montgomery Cares clinics had used CHL-Care—a customized electronic medical record built by the PCC. In anticipation of the changing demands brought about by the ACA, the PCC recognized the need to upgrade the system. After completing an extensive review of the available systems, eClinicalWorks was selected as the EHR platform of choice.

Between July and December 2013, the PCC worked with staff and leadership at eight clinics and more than 20 clinical sites across Montgomery County to implement the new EHR. The conversion occurred in record time, and although productivity declined at each clinic immediately after implementation—as is expected—most clinics recovered within 30 days.
Staff and leaders at the participating clinics worked diligently to implement the new system and are reaping the benefits. The new system includes many features that allow the clinics to better assess and coordinate patient care, such as:

- An interface for downloading lab results
- e-Prescribing medications
- Streamlined dispensing and tracking of on-site medications
- Clinical decision support
- And more…

The new system also provides improved communication among clinic staff and collects the data necessary to perform population health analysis and management.

This project was made possible with support from the Montgomery County Department of Health and Human Services, Kaiser Permanente of the Mid-Atlantic States Fund for Community Benefit, the Healthcare Initiative Foundation, and Adventist Healthcare’s ACES Program.

**Medicaid Capacity Building**

Long before the ACA, Montgomery Cares provided health coverage to vulnerable residents of Montgomery County. Montgomery Cares was launched in 2005, and by 2013 the program offered health services to nearly 30,000 adults living in Montgomery County. The expansion of the Maryland Medicaid Program and launch of the health insurance marketplaces under the ACA have extended health coverage to many people who used to receive care through Montgomery Cares. To maintain continuity of care for these patients and to promote sustainability at participating clinics, the PCC has offered technical assistance to clinics interested in becoming Medicaid providers.
In FY14 the PCC offered two coding and documentation group trainings and provided on-site technical assistance for some clinics. Seven Montgomery Cares clinics are now able to see Medicaid patients, and an eighth is in the process of establishing the infrastructure necessary to participate in Medicaid. Of the clinics not on the path toward becoming Medicaid providers, two clinics chose to keep their focus on serving uninsured clients and opted not to participate in Medicaid at this time. Two more do not meet the structural requirements to participate in Medicaid—they have too few staff and are not open enough hours each week.

In the coming year, the PCC will continue to support clinics as they build internal capacity to improve coding and documentation processes and enhance billing infrastructure. The PCC will also continue to assess Medicaid patient volume and identify opportunities for shared services across the network of participating clinics.

This project was made possible by support from the Montgomery County Department of Health and Human Services and Amerigroup Foundation.

Patient-Centered Medical Homes

A patient-centered medical home (PCMH) is more than just a clinic; it is a culture of care and a model for organizing and delivering primary health care that revolves around the patient and takes his or her unique preferences into account, including cultural values, family considerations, and individual motivations for wellness. It is a comprehensive approach that uses nurse care management to synchronize all aspects of patient care across the care team and throughout the health care system.

The PCC is working with Holy Cross Health Center in Aspen Hill and Proyecto Salud to implement a pilot project based on PCMH principles. Patients who have multiple co-morbidities that are not well controlled are matched with RN care managers. Together they identify the patients’ motivations for wellness and consult with other members of the care team to develop care plans that include national guidelines and document patients’ self-management goals, readiness for change, and progress toward change.

In FY14 the first of two planned evaluations was performed. The results are impressive.

- 59 percent of patients with hypertension experienced improved systolic blood pressures
- 62 percent had improvements in diastolic blood pressures compared to baseline
- 43 percent of diabetic patients experienced improvements in A1c compared to baseline
- LDL levels decreased (improved) in 30 percent of patients with hyperlipidemia

Patients Enrolled as of June 30, 2014

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<th>Patients Enrolled as of June 30, 2014</th>
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**Patient Story:**

A 66-year-old woman with diabetic complications (retinopathy, neuropathy, and nephropathy) and other chronic conditions was discovered alone and crying in the exam room. She was feeling overwhelmed and confused by her medical conditions and prescribed medications. She admitted to a fear of needles, and could not self-inject her insulin. She lived with her daughter, who was not consistently available to help. Working with the care manager, the family gained a better understanding of diabetes and the importance of lifestyle modifications and medication adherence. The patient ultimately learned to self-inject her insulin, and the daughter was able to more explicitly define her role and boundaries.

The patient reduced her A1c from 11.8 to 9.7 and her blood pressure from 163/85 to 102/62.

The Patient-Centered Medical Homes project is funded by a generous grant from CareFirst BlueCross BlueShield.

**COLLABORATING TODAY TO TRAIN THE HEALTH CARE WORKFORCE OF TOMORROW**

Montgomery Cares participating clinics have a track record of providing culturally sensitive care to ethnically diverse community members. Through partnerships with academic institutions, the PCC is facilitating two programs to provide the hands-on training that is essential to develop a pipeline of culturally competent clinicians to work in community clinics.

**Nursing Scholarships**

The PCC is collaborating with the nursing programs at Montgomery College and the Universities at Shady Grove on a pilot project to place nursing students in clinical rotations at safety-net clinics. Holy Cross Health Centers, Mary’s Center, and Mercy Health Clinic are hosting the nursing students as they complete their seven-week clinical rotations. Through these rotations participating safety-net clinics benefit from the clinical services offered by the students and their supporting faculty. The students gain valuable hands-on experience to enhance their knowledge and skills and prepare them to work in a safety-net setting.

Participating nursing students had positive experiences through the rotations, which enhanced their interest in working in community health and serving disadvantaged populations.

“I never realized how much community health clinics do for the populations they serve. … The nurses really got to know the patients, and there were many patients that could not thank the nurses enough for helping them get the appropriate care and referrals.”

- Travis, Nursing Scholarship Recipient

**Medication Therapy Management**

Through the PCC’s medication therapy management (MTM) program, clinical pharmacy residents from the University of Maryland Schools of Pharmacy Baltimore and Eastern Shore are gaining valuable clinical experience while helping patients understand and manage their prescriptions. 108 patients received medication therapy management assistance through this program in FY14.
Medication therapy management is a collaborative approach to improving patient care. Clinic providers refer patients for confidential consultations with pharmacy residents, supervised by a pharmacist, who review patients’ medications and discuss their overall health. This process engages patients in their self-management and helps them to better understand and correctly use their prescribed medications.

In FY14 the MTM partners worked together to develop the MedCheck Passport, a medication reconciliation resource to help patients and their providers to keep track of their various medications. The MedCheck Passport was produced with an accompanying video to teach community health workers and patients about the importance of medication reconciliation and demonstrate how to use the MedCheck Passport.

The MedCheck Passport was developed with funding from the Delmarva Foundation for Medical Care (DFMC), the Disparities National Coordinating Center, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy 10SOW-MD-DNCC-071114-558.

BREAST HEALTH QUALITY CONSORTIUM

Breast cancer is the second highest cause of cancer-related deaths among women in the United States. In the DC Metro Area, breast cancer mortality rates are higher than the national average, due in part to limited service coordination and lack of access to breast health services. In 2012 the PCC launched the Breast Health Quality Consortium (BHQC), a collaborative effort to reduce disparities in breast cancer screening, diagnosis, treatment, and outcomes by improving the quality of breast health services for low-income women in the region.

BHQC staff work with participating organizations to conduct a qualitative environmental scan and gather data on 16 identified breast health measures, which can then be used in a comparative analysis to evaluate the quality of care across providers. Baseline data collection is complete for 13 safety-net primary care clinics and four hospitals, reflecting annual rates through 2012. Initial aggregate data trends show low mammography screening rates at primary care providers—most likely as a result of low referral rates. However, after abnormal screenings, providers are quick to follow up with patients.

Since its launch in 2012, the BHQC has grown considerably and is now composed of more than 40 organizations in Montgomery and Prince George’s Counties in Maryland, the District of Columbia, and Northern Virginia, including primary care providers, radiology centers, and hospitals. Participating organizations meet regularly to share best practices and discuss challenges.

The BHQC is funded by Susan G. Komen for the Cure.
A healthy childhood is the foundation for a healthy life. Care for Kids provides affordable primary and specialty care to children of low-income families in Montgomery County who are not eligible for other state or federal health insurance programs. Care for Kids services range from well-child visits to case management for children with complex care needs.

Care for Kids is a collaborative program that includes private practices, safety-net clinics, school-based health and wellness centers, Kaiser Permanente, the Montgomery County DHHS, and the PCC. In FY14, 3,024 children were served by Care for Kids. And nearly one out of five of these children were new to the program.

In recent months, Care for Kids has noticed a spike in enrollment that corresponds with the wave of undocumented and unaccompanied minors crossing the U.S.–Mexico Border. In July 2014, Care for Kids enrolled 63 children who had been detained by Homeland Security—that’s 57 percent of the total number of children who applied for Care for Kids in July.

Most of the children coming into the country are from countries in Central America where violence and poverty are endemic. When minors are released from U.S. Immigration and Naturalization Service detention centers, they are often placed with relatives or sponsors who then become responsible for caring for the child. But usually these relatives cannot afford health care for the children; they have very low incomes, and the children are not eligible for Medicaid or other state or federal insurance programs.

The number of unaccompanied children entering the U.S. is projected to increase in the next year; and for those who eventually make their way to Montgomery County, Care for Kids will be there to provide health services ranging from routine preventive health visits and immunizations to more complex primary and specialty care services, including case management and linkage to behavioral health services.

The Getting Covered Guide

In FY14 the PCC increased efforts to inform low-income parents and families about different health coverage options for their children. Staff participated in 16 health fairs and community events and developed and distributed informational materials, including the Getting Covered Guide, a tool for helping children and families access health care.

The Getting Covered Guide is available in Spanish and English and provides an overview of all of the health coverage options available to low-income children who live in Montgomery County, including eligibility criteria and application guidelines. The guide also includes information about child development, the importance of well-child visits, and information to help parents manage their children’s health care.

The Getting Covered Guide was developed with funding from the Morris and Gwendolyn Cafritz Foundation.
Montgomery Cares is the only health care access program for low-income adults who live in Montgomery County and are not eligible for any state, federal, or commercial health coverage programs. Montgomery Cares is a publicly funded, privately managed partnership among 12 independent safety-net clinics, five hospitals, individual providers, the Montgomery County DHHS, and the PCC.

Following the implementation of the ACA, some Montgomery Cares patients obtained Medicaid, and others qualified for subsidized health insurance plans available from the Maryland Health Connection. Despite outflows from Montgomery Cares due to the ACA, the need for health services for uninsured residents remains high. In FY14 Montgomery Cares provided health care to 28,011 individuals.

The PCC recognizes that the newly insured face the same cultural, linguistic, and health literacy barriers to obtaining quality health care that they faced prior to gaining insurance. The PCC and Montgomery Cares partners are working together to promote continuity of care for uninsured and newly insured individuals by developing and maintaining a high-performing primary care network that provides culturally appropriate care for all low-income community members.

Montgomery Cares 2.0

Montgomery Cares is a national model for increasing access to primary care for vulnerable people and the most successful large-scale program in Maryland. In the coming year, the PCC will work with Montgomery Cares partners to align the safety-net program with state and federal health reform trends. Our focus will be to strengthen Montgomery Cares by increasing capacity to serve more patients and providing essential non-hospital services, such as behavioral health, specialty care, and oral health care, comparable to those available through Medicaid.

Montgomery Cares Patients & Encounters Over Time

Montgomery Cares Snapshot

In Fiscal Year 2014

- Montgomery Cares served 28,011 patients in 76,596 clinic encounters
- 85 percent of the Montgomery Cares budget expenditures went to direct patient care, 5 percent of the budget went to information technology costs to support the EHR implementation, with only 10 percent of the budget for program administration costs.
NO MORE INVISIBLE PATIENTS

With the expansion of health coverage for low-income individuals made possible by the Affordable Care Act and the continued growth of Montgomery Cares, universal access to care for all Montgomery County residents is in sight.

It is estimated that the ACA will reduce the number of uninsured in Montgomery County by half. However, 60,000 Montgomery County residents are not eligible to participate in Medicaid or the QHPs that were established under the ACA and will remain uninsured. In FY14 Montgomery Cares served nearly half of the 60,000 remaining uninsured. In a step toward the goal of universal access to care in the community, Montgomery Cares aspires to expand in the coming year to serve 40,000 individuals by FY16.

With backing from the county and the continued support of local foundations, hospitals, community health care providers, and individual donors, we have an opportunity to build a health safety net that extends access to primary and preventive care for all community members.

Quality Assurance

Ensuring that all low-income community members have equitable access to high-quality, effective, patient-centered primary health care is central to the PCC’s mission. The PCC conducts regular on-site reviews at each Montgomery Cares clinic to assess the quality of care, establish priorities for improvement, inform policy and funding decisions, and provide objective assessments of changes over time.

The PCC and clinic medical directors have selected measures for annual reporting and track performance against the Healthcare Effectiveness Data and Information Set (HEDIS) Medicaid benchmarks. Montgomery Cares clinical indicators in FY14 showed continued improvement and met or exceeded national benchmarks in most cases. This was a result of careful monitoring of clinic performance and the strong partnerships among the PCC, the Medical Directors, and clinics committed to providing high-quality care.
Montgomery Cares 2014 Clinical Measures Compared to National HEDIS Benchmarks

Cancer Screening

Early detection and treatment of cancer greatly increase the chances of successful treatment and favorable outcomes for the patient. But many low-income and minority individuals face barriers to accessing routine cancer screenings. Coordinating preventive care for vulnerable neighbors is a critical part of the PCC’s work.

In order to meet its goals of providing early cancer screening to residents of Montgomery County, the PCC is partnering with Community Radiology Associates Inc., Holy Cross Hospital, and Adventist Health Care to provide mammograms for women referred from Montgomery Cares clinics.

Cancer Screening Snapshot
In Fiscal Year 2014

- 1,814 mammograms were performed
- 86 colonoscopies were performed
In an effort to provide enhanced preventive care, the Montgomery Cares clinics adopted a colorectal cancer screening protocol and began performing fecal immunochemical testing (FIT) and referral for colonoscopy in October 2013. By the end of FY14, 160 FIT kits had been ordered (representing 5,600 FIT tests) and 86 colonoscopies had been performed, representing a significant improvement in colorectal cancer screenings compared to previous years.

Cancer screenings are funded by the Montgomery County Government.

**Project Access**

A person’s health care needs are varied and often require attention from multiple providers in different settings. When Montgomery Cares patients require specialty care, they are referred to Project Access or the Catholic Charities Health Care Network.

Project Access is a specialty care referral network that provides timely access to needed specialty care, and potentially prevents more serious medical problems or complications. Project Access is administered by the PCC and consists of a dedicated group of health care specialists, local hospitals, and diagnostic facilities that provide pro-bono or reduced-rate services for low-income individuals.

The overall demand for specialty care services among Montgomery Cares patients is far greater than what Project Access can presently meet, with more than 4,000 requests for specialty care coming in each year. In FY14 Project Access staff developed an outreach program to expand the network of specialty care providers who accept and treat Montgomery Cares patients. Project Access staff conducted provider outreach visits to specialty provider practices to enhance provider engagement and improve their understanding of the referral network as a whole. During these visits Project Access staff informed providers about support services available through Project Access, such as labs and...
diagnostic imaging, and asked providers if they knew of colleagues who might be interested in joining Project Access. These outreach visits contributed to greater provider retention compared to past years and the successful recruitment of 12 new providers, an outpatient surgery center, and an urgent care facility. Together the new providers cared for more than 350 patients in FY14.

Project Access outreach and recruitment activities were made possible by a grant from the Clark-Winchcole Foundation.

Montgomery Cares Behavioral Health Program

Through the Montgomery Cares Behavioral Health Program (MCBHP), the PCC promotes the integration of behavioral health care into primary care settings with a collaborative care model that is focused on identifying and treating patients with depression, anxiety, and post-traumatic stress disorder diagnoses. The program has embedded teams of behavioral health care providers at eight Montgomery Cares clinic sites throughout the county and provided behavioral health services to 1,482 individuals in FY14.

During FY14 the MCBHP expanded to provide behavioral health services in four new clinic sites. The program expansion continues in FY15 with goals to:

• Expand full behavioral health services to one additional Montgomery Cares clinic site—Community Ministries of Rockville Mansfield Kaseman Clinic
• Educate Montgomery Cares providers on identification, assessment, and management of behavioral health disorders
• Increase access to psychiatric consultation for Montgomery Cares primary care providers
• Support implementation of regular screening for behavioral health problems for all Montgomery Cares patients

Elma’s Story

Elma settled in Silver Spring, Maryland in 2003, having fled an abusive relationship in her home country of Guatemala. After two miscarriages that resulted from violent beatings at the hands of her husband, Elma knew that she had to get away. She chose to come to the United States because of the opportunities it offered to build a new life and earn enough money to support her mother and two daughters back home in Guatemala. Elma worked tirelessly for seven years cleaning construction debris out of recently built houses, and on weekends she had a second job cleaning carpets.

In 2009 Elma suffered a severe leg injury at work. The accident prevented her from continuing at her job, and without a steady income, she could not save enough money to send back to Guatemala. Elma became desperately depressed; she slept all the time and stopped taking care of herself. After being told she would not be able to work, Elma became suicidal. “If I can’t work,” she thought to herself, “If I can’t help my family, it would...
In the spring of 2014, five MCBHP staff participated in an intensive motivational interviewing training sponsored by the National Network to End Disparities in Behavioral Health and the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA). The program contracted with the same trainer to extend the intensive training to all MCBHP staff, as well as PCMH care coordinators and behavioral health staff from two Montgomery Cares clinics. MCBHP plans to offer motivational interviewing training to another cohort of clinicians in the spring of 2015.

Oral Health Program

According to the American Dental Association, dental disease is almost entirely preventable with good nutrition, oral hygiene, and regular dental check-ups. Unfortunately, uninsured and underinsured people with low-incomes have few options for accessing dental care. Montgomery Cares patients can receive oral health care at the Spanish Catholic Center’s dental clinic and the Montgomery County DHHS’ Adult Dental Program. 2,037 individuals received dental care at these facilities in FY14, but wait times are long and the need for dental care greatly exceeds services available.

Montgomery Cares participating clinics are committed to expanding access to dental care for vulnerable residents. Dental services are available on a sliding fee schedule based on patient income. The Muslim Community Center Medical Clinic opened a dental clinic in August 2014. Additional resources are needed to address the oral health needs of more low-income Montgomery County residents.

Medicine Access

The Primary Care Coalition manages two medicine access programs that fall under the Montgomery Cares umbrella: Community Pharmacy and Montgomery County MedBank.

The Community Pharmacy provides point-of-service generic medications and diabetic testing supplies to Montgomery Cares patients directly in the clinics. Not only is providing medication at the end of an office visit more convenient for patients, it also improves medication compliance. In FY14 the Community Pharmacy provided nearly $1.5 million worth of medications and diabetic testing supplies to low-income patients.

Montgomery County MedBank provides access to the pharmaceutical industry’s patient-assistance programs for free brand-name medications. MedBank supports people referred by safety-net clinics and community and faith-based organizations to apply for these assistance programs. In FY14 MedBank staff helped 1,790 individuals to fill 5,180 prescriptions valued at nearly $5 million.

be better to die.” She went to the bank of a river, took off her shoes, and prepared to drown herself. Thankfully, she did not go through with it. Instead she told her doctor about what she was feeling and was quickly referred to the Montgomery Cares Behavioral Health Program.

Elma began to meet regularly with a licensed mental health professional who was a behavioral health care manager at her clinic. At first she was cautious, but her care manager helped Elma realize that holding on to her story was causing her harm. Elma slowly began to open up and share her story. She started taking antidepressants and other medication to help her cope with PTSD. She was also referred to other programs that provide assistance with food and clothing.

Now, Elma is able to stay focused on the positive things in her life. She is concentrating on healing both physically and emotionally, and is now able to walk unassisted; she hopes to be able to work again soon. “I’m grateful to everyone who has helped me. I’m grateful to God. I feel good.”
ACA Impact on Montgomery Cares

Following the implementation of the ACA, some Montgomery Cares patients have obtained Medicaid or other insurance coverage. The PCC and Montgomery Cares partners are working together to promote continuity of care for uninsured and newly insured individuals with Medicaid and QHPs by developing and maintaining a high-performing primary care network that provides culturally appropriate care for low-income community members.
THOUGHT TO ACTION: INNOVATION FUND AND SPEAKER SERIES IN HONOR OF STEVE GALEN

When Steve Galen took the helm of the PCC in 1997, he set the organization and the health care safety net in Montgomery County on a new course. Realizing the enormous need for safety-net care, even in an area as wealthy as Montgomery County, Steve saw that too many residents in this affluent community weren’t receiving the health services they needed.

Visionary leadership and an exceptional ability to work collaboratively with diverse partners and stakeholders are Steve’s hallmarks. He has continuously pushed the PCC and the community to apply innovative thinking and steadily improve the health safety net in Montgomery County.

In November 2014 Steve Galen retired as CEO of the PCC. To recognize his achievements and maintain his legacy, a group of community leaders and the PCC have launched the Thought to Action: Innovation Fund and Speaker Series to mark and honor Steve’s contributions. The speaker series will convene key health care delivery and policy stakeholders to discuss critical issues related to improving the health and health care of those who reside in our community.

To learn more or to make a donation to support this series, please visit PrimaryCareCoalition.org/Innovation

Steering Committee
Ike Leggett, Honorary Chair, Montgomery County Executive
Marion Ein Lewin, Chair

MEMBERS
Uma Ahluwalia, Director, Montgomery County DHHS
Denise Dixon, PCC Board Member
Carol Garvey, PCC Board Member
George Leventhal, Vice President, Montgomery County Council
Margaret O’Bryon, Founder, Accelerating Change Group
Primary Care Coalition of Montgomery County
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Leslie Graham
MAJOR AWARDS AND RECOGNITIONS SINCE 2009

2013 Robert Wood Johnson Foundation Health Policy Fellowship
Maria Rosa Watson, PCC Research Director

2013 Communities Joined in Action, Mary Lou Anderson Lifetime Achievement in Healthcare Transformation Award
Steve Galen, PCC President and CEO

2012 Health Resources and Services Administration Measurable Improvement Award
Rosemary Botchway, PCC Medicine Access Director, and
PCC Pharmacy Safety and Clinical Pharmacy Collaborative Team

2010 Bank of America Neighborhood Builder Award
Primary Care Coalition

2010 Maryland Society for Healthcare Strategy and Market Development Alfred Knight Award
Primary Care Coalition Annual Report

2009 NPower Technology Innovation Award
Primary Care Coalition

2009 Eugene and Agnes Meyer Foundation Exponent Award
Steve Galen, PCC President and CEO

MEMBERSHIPS

• Communities Joined in Action
• Clinicians for the Underserved
• Healthcare Council of the National Capital Area
• National Association of Community Health Centers (Associate)
• Nonprofit Montgomery
• Regional Primary Care Coalition

PCC PARTNERS AND COLLABORATORS

Montgomery Cares Participating Clinics

• Care for Your Health
• Chinese Culture and Community Services Center – Pan Asian Volunteer Health Clinic
• Community Clinic, Inc.
• Community Ministries of Rockville – Mansfield Kaseman Clinic
• Holy Cross Hospital Health Centers
• Mary’s Center for Maternal and Child Health
• Mercy Health Clinic
• Mobile Medical Care, Inc.
• Muslim Community Center Medical Clinic
• The People’s Community Wellness Center
• Proyecto Salud
• Spanish Catholic Center
Care for Kids Providers

• All Day Medical Care
• Broad Acres Elementary School-Based Health Center
• Community Clinic, Inc.
• Gaithersburg Elementary School-Based Health Center
• Gaithersburg Wellness Center
• Harmony Hills Elementary School-Based Health Center
• Highland Elementary School-Based Health Center
• Kaiser Permanente of the Mid-Atlantic
• Mary’s Center for Maternal and Child Care
• Milestone Pediatrics
• New Hampshire Estates Elementary School-Based Health Center
• Northwood Wellness Center
• Rolling Terrace Elementary School-Based Health Center
• Spanish Catholic Center
• Summit Hall Elementary School-Based Health Center
• Viers Mill Elementary School-Based Health Center
• Weller Road Elementary School-Based Health Center

Public Sector Partners

• Montgomery County Department of Health and Human Services
• Housing Opportunities Commission of Montgomery County
• Montgomery County Cancer Crusade

Hospitals

• Adventist Rehabilitation Hospital
• Children’s National Medical Center
• Dimensions Healthcare System
• Doctors Hospital
• Holy Cross Health
• MedStar Montgomery Medical Center
• MedStar Southern Maryland Hospital Center
• Shady Grove Adventist Hospital
• Suburban Hospital
• Washington Adventist Hospital

Academic Institutions

• Georgetown-Howard Universities Center for Clinical and Translational Science
• Georgetown University Center for Trauma and the Community
• Georgetown University Department of Psychiatry
• Georgetown University Innovation Center for Biomedical Informatics
• Montgomery College Nursing Program
• University of Maryland Baltimore County Department of Sociology and Anthropology/Center for Aging Studies
• University of Maryland Schools of Pharmacy Baltimore and Eastern Shore
• University of Maryland School of Nursing
• University of Maryland School of Public Health
Other Programs and Organizations

- 501-c Tech
- African Immigrant and Refugee Foundation
- African Women’s Cancer Awareness Association
- African Wellness Center
- Archdiocesan Health Care Network
- Arlington Free Clinic
- Associates in Process Improvement
- Cambodian Buddhist Society, Inc.
- Capital Breast Care Center
- CASA de Maryland
- Catholic Charities, D.C.
- Center on Health Disparities, Adventist Health Care
- Community Health and Empowerment through Education and Research (CHEER)
- Community Health Care Network
- Community of Hope
- Community Radiology Associates
- Consejo Salud
- D.C. Primary Care Association
- Delmarva Foundation
- Education Network to Advance Cancer Clinical Trials (ENACCT)
- Emergency Assistance Coalition Agencies
- Everest Institute
- Glorifying our Spiritual and Physical Existence for Life (GOSPEL)
- Granito de Arena
- Greater Baden Medical Services, Inc.
- Health Tank, Inc.
- Hilltop Institute, Inc.
- Impact Silver Spring
- Inova Health Systems
- Institute for Healthcare Improvement (IHI)
- Interfaith Works
- International Rescue Committee
- Korean Community Services Center
- Maryland Health Care Commission
- Maryland Pharmacy Association
- Maryland Vietnamese Mutual Association
- Metropolitan Chicago Breast Cancer Task Force
- Montgomery County Collaboration Council for Children, Youth, and Families
- Montgomery County Medical Society
- Prince George’s County Breast and Cervical Cancer Program
- Regional Primary Care Coalition
- Summit Health Institute for Research and Education, Inc.
- U.S. Office of Minority Health Resource Center
- Workforce Solutions Group

PCC FUNDERS: FISCAL YEAR 2014

Foundations

- Bernton Family Fund of the Community Foundation of Collier County
- CareFirst BlueCross Blue Shield
- Clark Winchcole Foundation
- Consumer Health Foundation
- Daniel F. Lynch Memorial Fund
- Delta Dental Community Care Foundation
- Eagle Bank Foundation, Inc.
- George Wasserman Family Foundation
- Greene-Milstein Family Foundation
- Healthcare Initiative Foundation
- Kaiser Permanente Fund for Community Benefit
- Lester Poretsky Family Foundation
- Meyer Foundation
- Morris and Gwendolyn Cafritz Foundation
- Nancy Peery Marriott Foundation
- Robert Wood Johnson Foundation
- Susan G. Komen for the Cure
- White Family Fund

Public Funders

- Maryland Department of Health and Mental Hygiene
- Montgomery County Department of Health and Human Services

Private Organizations

- CVS Caremark
- Eileen Fisher, Inc.
- Holy Cross Church
- North Bethesda United Methodist Church
- River Road Unitarian Universalist Congregation
- Social and Scientific Systems
Fiscal Year 2014 Individual Donors
(July 1, 2013 - June 30, 2014)

• Elizabeth A. Allaben
• Beth Barnett
• Shawn D. Bartley
• Marc Berk
• Richard C. and Elizabeth Bohrer
• Lynn D. Booth
• George Borababy
• Denise Dixon
• Julia Doherty
• Adrienne Dungee Felton
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• Thomas Garvey
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• Louis Hemstreet
• Arva M. Jackson
• Jeffrey Karns
• Rev. Mansfield and Dianne F. Kaseman
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• Areta Kupchyk
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• Dr. Jerry and Mrs. Cathy Shier
• Victor Small
• Hedrick L. Smith
• Hillery E. Tsumba
• Barbara and Donald Turnbull
• Robert D. and Nancy R. Turner
• Paul Valette
• Gloria J. Verfuerth
• Jean E. Withee
Revenues

- 83% Montgomery County Health Initiatives ($13,138,802)
- 8% In-kind Medical Services ($1,300,774)
- 8% Grants and Donations ($1,231,193)
- 1% Other Government Funders ($113,895)
- **TOTAL: $15,784,664**

Expenses

- 49% Montgomery Cares ($7,551,956)
- 13% Project Access ($2,054,148)
- 13% Community Pharmacy/MedBank ($1,960,267)
- 6% Center for Health Improvement ($965,928)
- 6% Care for Kids ($935,979)
- 5% Minority Health Initiative ($752,649)
- 4% Child Assessment Center ($662,046)
- 4% Community-Based Health Informatics ($661,023)
- 1% Health Care for the Homeless ($110,617)
- 1% Recovered Overhead (-$140,783)
- 0% Fundraising ($6,793)
- **TOTAL: $15,520,623**
Help give everyone access to quality health care and make Montgomery County the healthiest community in the nation.