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Regional Partnership Catalyst Grant Program

MedStar St. Mary's Hospital Summary Form

Regional Partnership Name:
Totally Linking Care in Maryland, LLC (TLC-MD)
Program Focus (Diabetes or Behavioral Health Crisis Services):
Diabetes
Participating Hospitals (add rows as needed):
1. UM Prince George's Hospital Center
2. UM Laurel Medical Center
3. MedStar Southern Maryland Hospital Center
4. MedStar St. Mary's Hospital
5. Adventist HealthCare Fort Washington Medical Center
6. Luminis Health Doctors Community Medical Center
Program Summary:

Diabetes

TLC-MD's strategy to meet the objectives as outline by the RFA include the following:

1) Expansion of DPPs and DSMTs- In addition to brick-and mortar expansion of existing and creation of new DPPs and DSMTs, the RP will promote mobile services that go to where clients live and/or work.

2) Outreach-The RP will conduct a provider education campaign to raise clinicians' awareness of diabetes screening guidelines and improve diabetes screening rates; aid providers to engage in bi- directional e-referral; and participate in diabetes care and treatment quality improvement efforts. The RP will launch a social marketing campaign to promote consumer awareness of pre-diabetes and diabetes to prompt residents to seek screening.

3) Screening- The RP's participating providers will screen patients according to uniform screening guidelines and make bi-directional referrals of persons testing positive to the RP. RP nurses will review patient clinical and service utilization data that are available through the bi-directional e- referral system to assess the need for care coordination, medication therapy management and/or medical nutritional therapy. RP CHWs will screen for SDOH and identify patients' need for health-related social needs support provided by wraparound services.

4) Wraparound services – The RP will offer patients care coordination, medication therapy

5)	management, medical nutritional therapy and/or CHW services-referral and linkage to resources that mitigate SDOH and provide care plan and medication adherence support. Training and technical assistance (TTA) to Providers- Clinicians will receive TTA to enhance their adherence to diabetes screening guidelines; facilitate use of the bi-directional e-referral system; improve their use of SDOH assessment data; and improve the quality of the diabetes prevention and treatment services they offer. DPPs and DSMTs will receive TTA so that they become eligible for reimbursement from Medicare, Medicaid and other payers and know how to use CRISP's bi-directional e-referral system.

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Behavioral Health

TLC-MD's strategy to meet the objectives as outline by the RFA include the following:

1) Crisis Call Center Air Traffic Control Technological Enhancement. TLC-MD proposes to support the Crisis Call Center Air Traffic Control Technological Enhancement to the call center with an advanced reporting dashboard. Features include the ability to track and connect individuals with community resources by allowing community partners to indicate appointment and/or bed availability and facilitate digital referrals. The system has the potential to coordinate with the first responder systems as well as electronic health records, emergency medical services, schedules, and bed registries.

2) Mobile Crisis Team Expansion to six mobile crisis teams to meet the estimated behavioral health crisis need – currently, there are only one to two mobile crisis teams serving the entirety of Prince George's County of nearly one million residents. In order to reduce response time, designating teams for various geographic regions would make this service stronger and we would plan to do this with this funding. Furthermore, mobile crisis team expansion would enable the MCTs to also respond to SUD-related emergencies as well as mental health emergencies.

3) Crisis Receiving and Stabilization to safely prevent unnecessary emergency room visits and hospitalizations for a large population of people with behavioral health needs without an alternative destination that is not the hospital or jail.

4) Residential Crisis Bed Expansion of six additional beds each year for five years through a competitive RFP process for startup residential crisis bed funds. These programs provide short-term, intensive behavioral health and support services in a community-based, non-hospital residential setting.

5) Wrap-Around Care Coordination Program with intensive case management and care coordination to improve inpatient psychiatry readmission rate by engaging a behavioral health focused technology company to provide 24/7 technology-enabled virtual and in-person case management through their Care Coordination Program.

6) Transportation to support expansion of behavioral health crisis services in Prince George's County to access the services listed above. Given the county has urban, suburban, and rural environments, some areas have limited access to behavioral health services, known as

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"treatment deserts" as seen on the map. TLC-MD will support connecting these residents to care by providing transportation services to ensure that people are physically connected to care when necessary.

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Program Summary:

Diabetes

TLC-MD's strategy to meet the objectives as outline by the RFA include the following:

6) Expansion of DPPs and DSMTs- In addition to brick-and mortar expansion of existing and creation of new DPPs and DSMTs, the RP will promote mobile services that go to where clients live and/or work.

7) Outreach-The RP will conduct a provider education campaign to raise clinicians' awareness of diabetes screening guidelines and improve diabetes screening rates; aid providers to engage in bi- directional e-referral; and participate in diabetes care and treatment quality improvement efforts. The RP will launch a social marketing campaign to promote consumer awareness of pre-diabetes and diabetes to prompt residents to seek screening.

8) Screening- The RP's participating providers will screen patients according to uniform screening guidelines and make bi-directional referrals of persons testing positive to the RP. RP nurses will review patient clinical and service utilization data that are available through the bi-directional e- referral system to assess the need for care coordination, medication therapy management and/or medical nutritional therapy. RP CHWs will screen for SDOH and identify patients' need for health-related social needs support provided by wraparound services.

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TLC-MD's strategy to meet the objectives as outline by the RFA include the following:

11) Expansion of DPPs and DSMTs- In addition to brick-and mortar expansion of existing and creation of new DPPs and DSMTs, the RP will promote mobile services that go to where clients live and/or work.

12) Outreach-The RP will conduct a provider education campaign to raise clinicians' awareness of diabetes screening guidelines and improve diabetes screening rates; aid providers to engage in bi- directional e-referral; and participate in diabetes care and treatment quality improvement efforts. The RP will launch a social marketing campaign to promote consumer awareness of pre-diabetes and diabetes to prompt residents to seek screening.

13) Screening- The RP's participating providers will screen patients according to uniform screening guidelines and make bi-directional referrals of persons testing positive to the RP. RP nurses will review patient clinical and service utilization data that are available through the bi-directional e- referral system to assess the need for care coordination, medication therapy management and/or medical nutritional therapy. RP CHWs will screen for SDOH and identify patients' need for health-related social needs support provided by wraparound services.

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8) Mobile Crisis Team Expansion to six mobile crisis teams to meet the estimated behavioral health crisis need – currently, there are only one to two mobile crisis teams serving the entirety of Prince George's County of nearly one million residents. In order to reduce response time, designating teams for various geographic regions would make this service stronger and we would plan to do this with this funding. Furthermore, mobile crisis team expansion would enable the MCTs to also respond to SUD-related emergencies as well as mental health emergencies.

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10) Residential Crisis Bed Expansion of six additional beds each year for five years through a competitive RFP process for startup residential crisis bed funds. These programs provide short-term, intensive behavioral health and support services in a community-based, non-hospital residential setting.

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12) Transportation to support expansion of behavioral health crisis services in Prince George's County to access the services listed above. Given the county has urban, suburban, and rural environments, some areas have limited access to behavioral health services, known as

"treatment deserts" as seen on the map. TLC-MD will support connecting these residents to care by providing transportation services to ensure that people are physically connected to care when necessary.

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