FINANCIAL SERVICES

GREATER BALTIMORE MEDICAL CENTER
Population Health Strategic Plan
Executive Summary

Please find attached the summary table of Greater Baltimore Medical Center's Strategic Transformation Plan. Over the past few years monies that have been distributed by the HSCRC have been utilized to form population health activities that are based upon community needs. GBMC's overarching goals have been to provide care within the community, to improve overall quality of life, increase access to care outside of the acute care setting, address chronic conditions and to improve maternal and infant health. The Community Health Assessment report detailed for GBMC the need to provide services around diabetes, obesity, chronic diseases and mental health. As such GBMC has put into place the following programs:

1. Increasing Access to Care: GBMC has dedicated a full time geriatric nurse practitioner to service the healthcare needs of low- income seniors within its community benefit service area. This nurse practitioner's sole responsibility is to provide education and primary care services (physical history, medication management assistance, blood pressure screenings and seasonal vaccinations) at Towson area low-income senior living facilities.
2. Sexual Abuse Program: The GBMC program provides medical/forensic examinations for victims of sexual assault and rape in Baltimore County. GBMC is the only hospital in Baltimore County to provide these services to victims 13 and above. The program provides compassionate care to these victims and forensic examinations provide invaluable evidence to law enforcement and the Baltimore County State's Attorney's office for prosecution.
3. Care Management: Through the creation of the Patient Centered Medical Home, patients have a team of a care coordinator and care manager who assist the patient in self-management of chronic diseases, collaborate with other needed resources to ensure the patient is cared for appropriately within the community versus within the acute care system

As GBMC seeks to further their population health efforts it has been determined that there is a great need to provide mental health services as part of the care team offering within the patient centered medical home, and through a behavioral health network. The targeted patient population not only demonstrated high utilization but also a high percentage of patients (over 50%) with a mental health diagnosis as well as diagnoses of chronic conditions. The mental health diagnosis included bi-polar and schizophrenia diagnosis as well as depression, and anxiety to list a few.

In collaboration with multiple partners such as Gilchrist, MedStar, Sheppard Pratt and Mosaic as well as multiple behavioral and community providers, GBMC seeks to prevent avoidable admissions by addressing behavioral/chronic health needs through working partnerships with these providers that will facilitate regular communications regarding high utilizers as well as the application of telemedicine.

GBMC is seeking to enhance and expand these population health intervention strategies by seeking additional funding through the HSCRC Care Coordination grant process. Through this effort, GBMC has targeted a patient population to create core competencies and immediate success. Utilizing resources such as CRISP to monitor population health efforts and the productivity of Care Management, GBMC looks to scale these population health efforts further in the future. Once the programs are fully established, additional patient populations will be included into the programs across the broader GBMC service area. Reinvestments will be made back into the programs to increases resources and enhance care management technologies.

GBMC believes that the sum of these population health intervention strategies will have the direct result of decreasing readmissions, reducing unnecessary admissions, and ultimately decreasing the total cost of care in the GBMC service area. We also believe these strategies, while improving the quality of care and health status of all patients in the service area will have the most significant impact on the Medicare population. This impact reduction in Medicare costs and improvement in patient outcomes will directly support the goals of CMS's three part aim and the new demonstration model in Maryland.

GBMC will work diligently to monitor and manage its key care coordination intervention plans and population health performance metrics utilizing internal data, shared information with other providers and community partners as well as utilizing the resources of the CRISP health information exchange.

If you have any questions regarding the Strategic Transformation Plan report, please contact Michael Myers directly at mmyers@gbmc.org or (443) 849-4328.