

**LHIC Access to Care Work Group Meeting**  
**8.25.2016 – 9:00 am**  
**Minutes**

**Members Present:**

Bob Anantua, Build Haiti Foundation	DeWayne Oberlander, Columbia Medical Practice
Anne Brinker, Community Action Council HC	Maura Rossman, HCHD
Tara Butler, HCGH	Kate Schulz, United Way of Central MD
Alyse Cooper, HCHD	Kate Talbert, HCGH
Maureen Heim, Association of Community Services	Linda Zumbrun, HCDSS
Sharon Hobson, HCHD	
Elizabeth Menachery, HCHD	

**Guests Present:**

Reena Rambharat, University of Maryland, Baltimore  
Kendrell Taylor, HCHD

**Staff Present:**

Kelly Kesler, Director, Howard County Local Health Improvement Coalition  
Amy Skaggs, Program Administrator, Howard County Local Health Improvement Coalition  
Vanessa Michel, Program Coordinator, Howard County Local Health Improvement Coalition

**Introductions:**

Sharon Hobson, Co-Chair, called the meeting to order at 9:10 am. Dr. Elizabeth Menachery, Medical Director introduced the LHIC staff to the members of the group. Dr. Menachery reminded all members that the Disaster Assistance Center is available to assist anyone affected by the Ellicott City flood. Members introduced themselves.

Sharon Hobson wants the group to provide what resources are available from respective member organizations to better identify access to care issues. Members provided general information about data that they may be able to provide specific to their organization. Dr. Maura Rossman stated that the Howard County Health Assessment Survey has been completed and the data is being finalized.

**Presentation from Howard County Regional Partnership:**

Representative, Kate Talbert, gave a brief overview of the Howard County Regional Partnership. The partnership wants to transform health care by: improving the health of the population, enhancing the patient experience of care, and reducing the per capita cost of care. A full presentation will be given at the full LHIC meeting in September.

The LHIC group was asked to vote on a new name for the regional partnership. The selections of choices for the names were:

- Howard County Health Collaborative (HCHC)
- Howard Health Partnership (HHP)
- Howard Community Health Partnership (HCHP)

The new name will be announced at the full LHIC meeting on September 22.

**Approval of Minutes:**

A motion for approval of the minutes with amendments was made by Sharon Hobson and seconded by DeWayne Oberlander.

Minutes were amended as follows:

Amended wording: (HCHD Health Expo) Amy Skaggs noted that the event was very successful with over 250 people educated. The LHIC Healthy Weight table tied for third with Environmental Health as the most interesting and informative table based on participant feedback forms.

**Task Group's Reporting:**

Task groups were asked to provide an update on the activities of their groups.

Language Barrier: Discussion postponed. Paula Blackwell and Melissa Clark were not present to report. Dewayne Oberlander discussed how the cost for interpreters was becoming a financial burden for health care providers and agencies.

Access to Care: Kate Schulz mentioned that during previous meetings the group came to the conclusion that databases would not be created. Kate also shared what types of data and resources that are available from United Way. Kate mentioned that another member was doing research about Navigators. Alyse Cooper suggested we look into resources for residents with cancer.

Health Insurance: Bob Anantua stated that the Medicare recipients that his agency assists are unable to pay the 20% cost of care that Medicare does not cover. He would like to know what resources are available to help cover these costs. DeWayne Oberlander highlighted that the lack of insurance for oral health care has created a significant access problem.

**Maryland's State Health Improvement Process (SHIP) Measures:**

Handouts about Maryland's State Health Improvement Process (SHIP) were provided to members. SHIP provides a framework for continual progress toward a healthier Maryland. All work groups will be reviewing the activities and priorities of their groups to determine task groups and strategies that align with SHIP measures and community need. Kelly Kesler, LHIC Director, described the new LHIC structure. Dr. Menachery provided an overview Group was reminded that each of the four LHIC work groups will be expected to Workgroups will report on the progress of accomplishing their strategies at full LHIC meetings which will require the action groups to update the larger workgroup about their activities. A crosswalk will be created to share the strategies and actions of the three Workgroups to limit redundancy and share resources.

**Next Steps and Meeting Schedule:**

- Work group members are to compile data from their respective agencies on access to care issues and the resources available to better serve citizens.
- Members should review strategies for alignment with SHIP measures and other relevant measures at gaps in the Access to Care's composition and suggest new members from other agencies.
- In order to accommodate members that attend more than one LHIC work group, Vanessa Michel will send a survey to assess possible new meeting days/times.

The meeting was adjourned at 10:20 a.m.

The next Access to Care Work Group meeting will be on September 28, 2016 from 9:00 am – 10:30 am in the Potomac Room.

Respectfully submitted by  
Vanessa L. Michel  
LHIC Program Coordinator