Advisory Group Recommendations

Facilitated Discussion of Advisory Group Ideas and Concepts
Overarching Concept - The Rural Community Health Complex

• Goals:
  • Create a center for health care delivery in a rural community
  • Better integration/coordination of existing services (clinical, government and social)
  • Decrease transportation barriers
  • Create a community of wellness

• Sized to respond to the needs of the population
• Local governance council
Rural Community Health Complex

- Patient-Centered Support HUB - Technology Infrastructure to enable
  - Coordination between providers
  - Assistance in getting social, governmental and behavioral services needed
  - Education and counseling to help manage chronic conditions.

- Types/Components of Complexes
  - Essential Care - full or part-time primary care site
  - Advanced Primary Care – FQHC, or primary care practice site
  - Advanced Ambulatory Care/ with or without FMF
  - Special Rural Community Hospital

- Acute general hospitals and regional medical centers would be important links to the local hubs
Rural Community Health Complex
Recommendations to Further Development

- Increase coordination of care through the use of care managers.
- Enhance dental services to rural residents.
- Expand the availability of new telehealth and mobile capacity.
- Expand or enhance community paramedicine and/or Mobile Integrated Health Care.
- Create and extend tax credits, loan or grant opportunities.
- Charge the Community Health Resources Commission with incubating pilot projects in rural communities in support of demonstration project.
Additional Recommendations

• Establish and support a Rural Health Collaborative/ Rural Health Planning Collaborative

• Establish a Rural Health Scholarship Program for medical students and students in other health professions willing to practice in Rural Maryland.

• Create incentives for students and residents to practice in rural communities by:
  • Identifying sustainable funding for a primary care track program
  • Establishing a rural primary care residency elective

• Streamline and expand the Maryland Loan Assistance Repayment Program
Additional Recommendations

• Realign the prioritization of the J-1 visa program and encourage/assist communities where J-1 visa recipients are placed.

• Develop and fund additional nurse practitioner and physician assistant programs in rural colleges and universities.

• Enhance behavioral health and substance abuse services in the community

• Revisit the Recommendations of the Workgroup on Workforce Development for Community Health Workers

• Create a Special Hospital designation for rural communities
Additional Recommendations

- Expand non-medical and non-emergency transportation
  - Promote the use of innovative approaches to non-emergent transportation in rural areas where transportation deficits are the most acute.
  - MDH and MDOT should develop standards for non-emergency transportation programs based on best practices.
- Address the health needs of the immigrant and elderly populations