



# Frederick County Board of Health

## October 22, 2025

- I. **Orientation for Liaisons (5:30pm)**
- II. **Call to Order (6pm)** – Dr. Barbara Brookmyer, Health Officer for Frederick County
- III. **Public Comments (6:00p.m. – 6:15 p.m. p.m.) - Members of the public will be given three (3) minutes to provide comments** - available to attendees in the room.
- IV. **Approval of Minutes**: 7/21/2025
- V. **Respiratory Season Update** – Dr. Miriam Dobson
- VI. **Updates on Medicaid** – Dr. Barbara Brookmyer
- VII. **Community/Public Health Nursing: Opportunities for Partnership** – Dr. Jen Cooper
- VIII. **Administrative Updates** – Dr. Barbara Brookmyer
- IX. **Old Business**
- X. **New Business** - none
- XI. **Upcoming Meetings**: May, 2026
- XII. **Adjourn**



Frederick County, Maryland

# Orientation for Liaisons



# BoH Liaison – Orientation

## 1. Board of Health

- Membership
- Purpose
- Meeting schedule
- Website and contact info

## 2. Liaisons

- Qualifications
- Appointment
- Engagement
- Current Cohort

## 2. What is public health?

- History of PH in FC
- Foundational public health areas
- Public health 1.0, 2.0, and now 3.0

## 3. Public health in Frederick County

- Our programs
- Accreditation



# An Act To Establish a Board of Health

- Under Md. Code Ann., Health-Gen. § 3-201(b), **the county's "governing body" [Council + Executive] was its ex officio board of health**, unless and until the county established a board of health. Under Health-Gen. § 3-306(c) the health officer is the executive officer and secretary of the county board of health.
- Frederick County Council passed legislation April 18, 2023 to establish a Board of Health and the County Executive signed it April 25 for an effective date of June 17, 2023.



Bill No. 23-06  
Concerning: Establishing a Board of Health

Introduced: March 7, 2023

Revised: \_\_\_\_\_ Draft No. \_\_\_\_\_

Enacted: April 18, 2023

Effective: **June 17, 2023**

Expires: June 5, 2023

Frederick County Code, Chapter 1-2

Section(s) 900-905

**COUNTY COUNCIL  
FOR FREDERICK COUNTY, MARYLAND**

By: Council Member Jerry Donald

AN ACT to: Establish a Board of Health in Frederick County.

Date Council Approved: 4/18/2023 Date Transmitted to Executive: 4/25/2023

Executive: Jurria Fitzgerald Date Received: 4/25/2023

Approved: ✓ Date: 4/25/23

Vetoed: \_\_\_\_\_ Date: \_\_\_\_\_

Date returned by County Executive with no action: \_\_\_\_\_

By amending: Frederick County Code, Chapter, 1-2 Section(s), 900-905

Other: \_\_\_\_\_



# Board of Health Membership

Membership =

- ✓ The 7 County Council members
- ✓ The County Executive
- ✓ The Frederick County Health Officer

- ✓ Executive officer and secretary = the Frederick County Health Officer
- ✓ All members have full voting privileges



# Purpose of Board of Health

The local Board of Health may:

- Advise the County Executive and County Council on health matters including behavioral health.
- adopt and enforce rules and regulations on any nuisance or cause of disease in the county as long as these are not contrary to and are at least as stringent as existing State laws, rules and regulations.
- adopt guidelines and recommendations to express its current thinking on health-related topics pertinent to Frederick County, and to provide policy guidance for other entities.
  - The guidelines and recommendations are advisory only and do not have the force and effect of law.



# Board of Health - Meetings

- May and October of each year and at any other time the Board considers necessary.
- July/August meeting held to confirm new liaisons.
- Meetings shall take place at a Frederick County location which is open and accessible to the public.
- A majority of the members shall constitute a quorum for the transaction of business.
- Any motion of the Board requires the affirmative vote of at least five (5) members to pass.



# FC Board of Health Website

[FrederickCountyMd.gov/BoardofHealth](http://FrederickCountyMd.gov/BoardofHealth)

Past meetings can be viewed in the [video archives](#) under "Other Boards and Commissions" on FCG TV website.

## Proposed Regulations

- None

## Current Regulations

- [2025 Environmental Health Fee Schedule](#)

## Past Regulations

- [BOH 01-2021](#)
- [BOH-01-2020](#)
- [BOH 02-2020](#)
- [BOH 02-2021, expired 2/12/2022](#)

## Agendas

[Most Recent](#) / [View All](#)

## Meeting Handouts

[Most Recent](#) / [View All](#)

## Minutes

[Most Recent](#) / [View All](#)



# Liaison Positions - Qualifications

**Purpose:** Liaisons shall serve as a resource, provide information and data, and answer questions as needed or requested by the Board of Health.

The Board shall appoint the following 6 liaisons:

- An epidemiologist
- A nurse
- A mental health professional
- A veterinarian
- A member from the Frederick Chamber of Commerce, and
- One (1) person with a science related background

# Liaison Positions – Appointment

- Liaisons shall be appointed and confirmed by a majority of the Board of Health
- Liaisons shall have no voting privileges, and will not be counted in determining the presence of a quorum
- Liaisons will serve without compensation.
- The term of office of each of the members shall be for a period of three (3) years.
- Liaisons may be reappointed but may not serve more than 2 full consecutive 3-year terms.
- Vacancies shall be filled on the same basis as the original appointments for unexpired terms and shall be filled with a person of the same or similar background of the liaisons being replaced.
- Liaisons shall continue in office until their successors are appointed and qualified.



# Liaison Engagement

- Answer BOH questions about current issues (measles, rabies, etc.)
- Provide context and support for Environment Health cost of service adjustments
- Provide local insight into behavioral health and mental health issues during discussions
- Provide presentations of topics related to liaison subject matter expertise on topics connected to the role of local public health



# FY2026 Liaison Cohort

Liaison	Term Details
Chamber of Commerce member – Katie Silver	3 years, ends 6/30/2028
Mental Health Professional – Sara Signh	3 years, ends 6/30/2028
Epidemiologist – Dr. René F. Najera	1 more year, ends 6/30/2026
Veterinarian – Dr. Michael Schaden	1 more year, ends 6/30/2026
Nurse – Dr. Jennifer Cooper	2 more years, ends 6/30/2027
Science Related Background – Dr. Scott Staley	2 more years, ends 6/30/2027



Frederick County, Maryland



# What is Public Health?

**Public Health**  
Prevent. Promote. Protect.

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**Frederick County Health Department**

# Public Health

- Affects our daily lives
- Place matters
- Historically underfunded

**Local health departments impact our lives every day**





# Public Health in Frederick County

## HISTORY — OF — FREDERICK COUNTY MARYLAND

FROM THE EARLIEST SETTLEMENTS TO THE BEGINNING  
OF THE WAR BETWEEN THE STATES

BY

T. J. C. WILLIAMS

[AUTHOR OF A HISTORY OF WASHINGTON COUNTY]

CONTINUED FROM THE BEGINNING OF THE YEAR 1861  
DOWN TO THE PRESENT TIME

BY

FOLGER MCKINSEY

[THE BENTZTOWN BARD]

### DIPHTHERIA IN FREDERICK CITY.

From August, 1881, Frederick had been experiencing an excessive mortality from diphtheria. This disease was destroying on an average fifty children per annum, or 3 1-2 per cent. of the population of the city under ten years of age; and while there was great dissatisfaction at this state of affairs, and several spasmodic efforts had been instituted to detect the cause and arrest the further progress of this scourge, nothing of any practical value had been done.

During the first few weeks after my appointment, numerous verbal complaints were heard by me from the citizens of Frederick and its vicinity, and on August 25th the following letter was received, which is here given in full because it presents the prevailing sentiment of the community at that time, and because from this date was initiated your efficient action in seeking out the causes of that dreadful plague and inaugurating with the efficient aid of the City Health Department the measures which have effectually stamped it out.

LETTER FROM HON. MILTON G.  
URNER.

Frederick, August 25th, 1886.

Dr. F. B. Smith, Health Officer for Frederick County:

Dear Sir: There are now within the "limits of your sanitary jurisdiction" in this city numerous cases of diphtheria—which is a "disease dangerous to the public health." As a citizen of Frederick, I call your attention to the prevalence of said disease in our midst, in the hope you will "immediately investigate the matter and take all proper steps for the restriction or suppression of said disease," as required by the Act of the General Assembly of Maryland, passed at the session of 1886, Chapter 21. I have the honor to be

Very respectfully yours,  
MILTON G. URNER.

Diphtheria in Frederick County 1881 was "destroying on average fifty children per annum". Inaugurated City Health Department was told to "immediately investigate the matter and take all proper steps for the restriction or suppression of said disease."

# Public Health 1.0

## Public Health 1.0

- Tremendous growth of knowledge and tools for both medicine and public health
- Uneven access to care and public health

From 1880s to 1980s, public health provided direct services.



FCHD Dental Clinic trailer, circa 1950s.



# Public Health 2.0

## Public Health 1.0

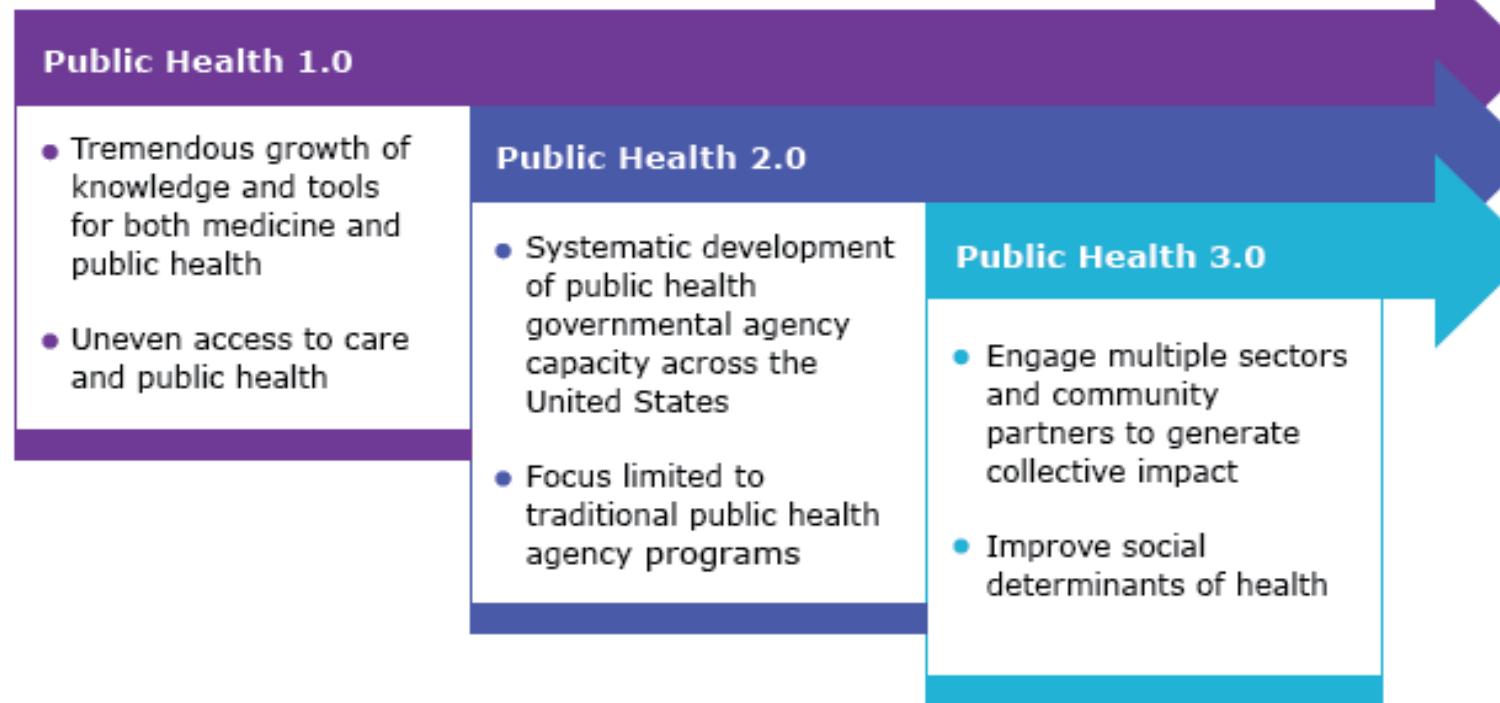
- Tremendous growth of knowledge and tools for both medicine and public health
- Uneven access to care and public health

## Public Health 2.0

- Systematic development of public health governmental agency capacity across the United States
- Focus limited to traditional public health agency programs

1980s:  
Started shifting from just direct services to complex, integrated systems.

# NOW: Public Health 3.0



- Issues addressed by Public Health 1.0 and 2.0 have not gone away.
- Public Health 3.0 focuses attention where it belongs: on ***health***, not limited to health care or health care delivery.
- Health Department role is of **Chief Health Strategist**

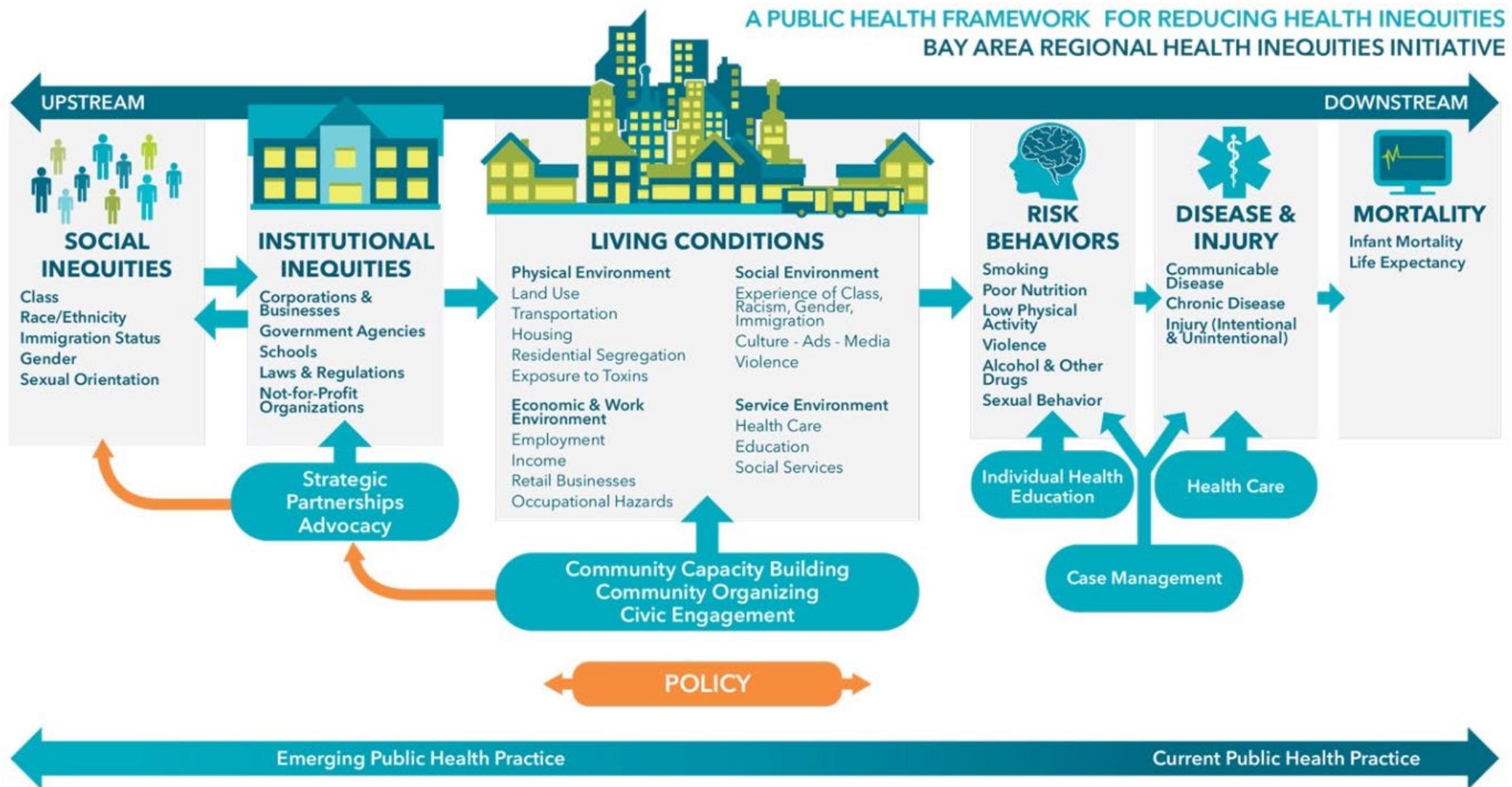


# Public Health 3.0 – where we focus first





# Public Health 3.0 – a fuller view





So how do we  
tackle this?





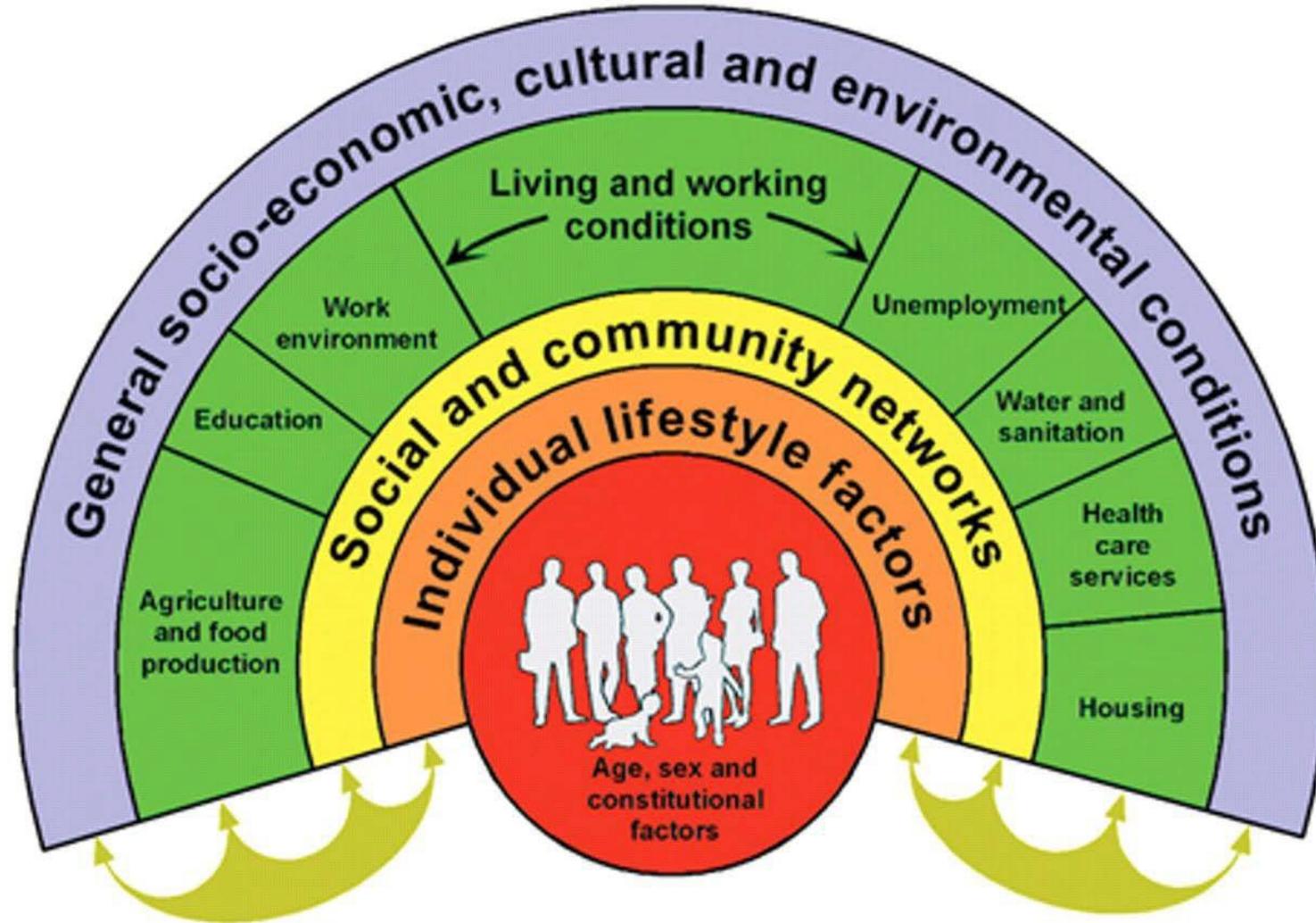
# Role: Chief Health Strategist

The local health department serves as **Chief Health Strategist**, partnering across multiple sectors and leveraging data and resources to address social, environmental, and economic conditions that affect health and health equity for our Whole Community.





# Social Determinants of Health





# Where we live matters!



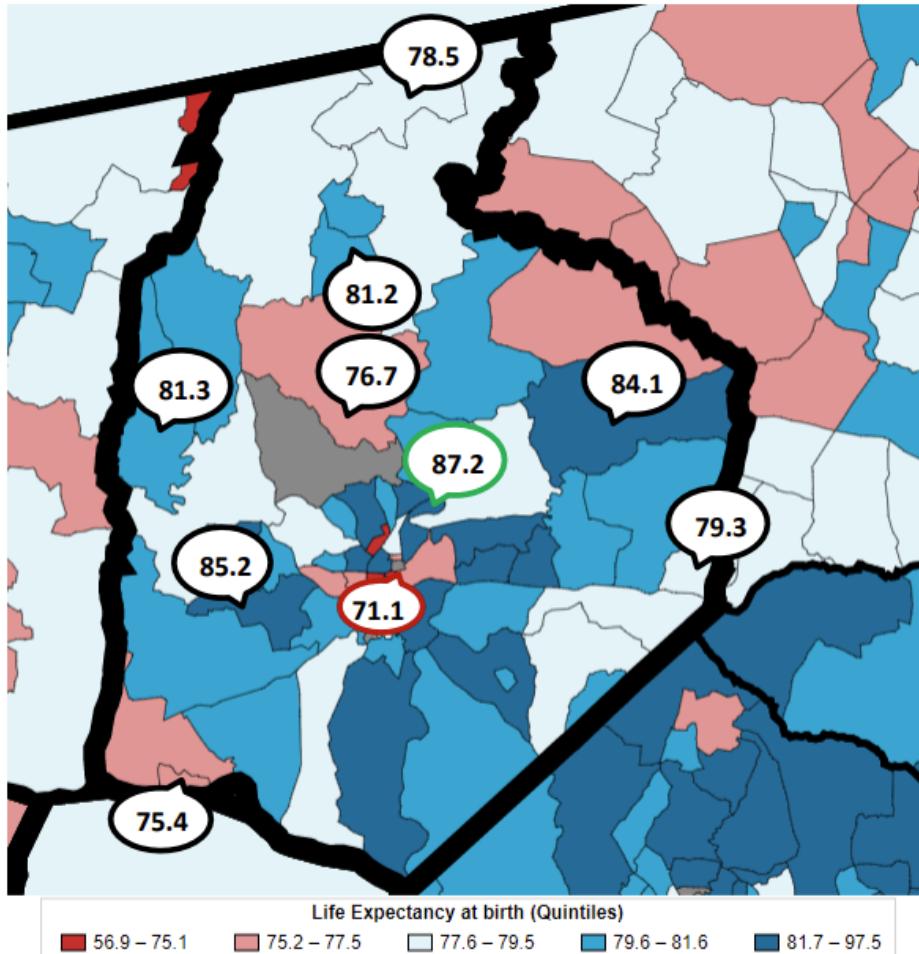


# Our Options

It's not just the **choices we make**,  
but also the **options we have**.



# Life Expectancy in Frederick County



Tejada-Vera B, Bastian B, Arias E, Escobedo LA., Salant B, Life Expectancy Estimates by U.S. Census Tract, 2010-2015.  
National Center for Health Statistics. 2020.

- The highest life expectancy in Frederick County is **87.2** years in Walkersville.
- The lowest life expectancy in Frederick County is **71.1** years in the city of Frederick in the area of South Bentz and West South streets.
- Maryland state average life expectancy is **79.6** years.



# Equality vs Equity

**What is the difference?**



Frederick County, Maryland

# Equality vs Equity

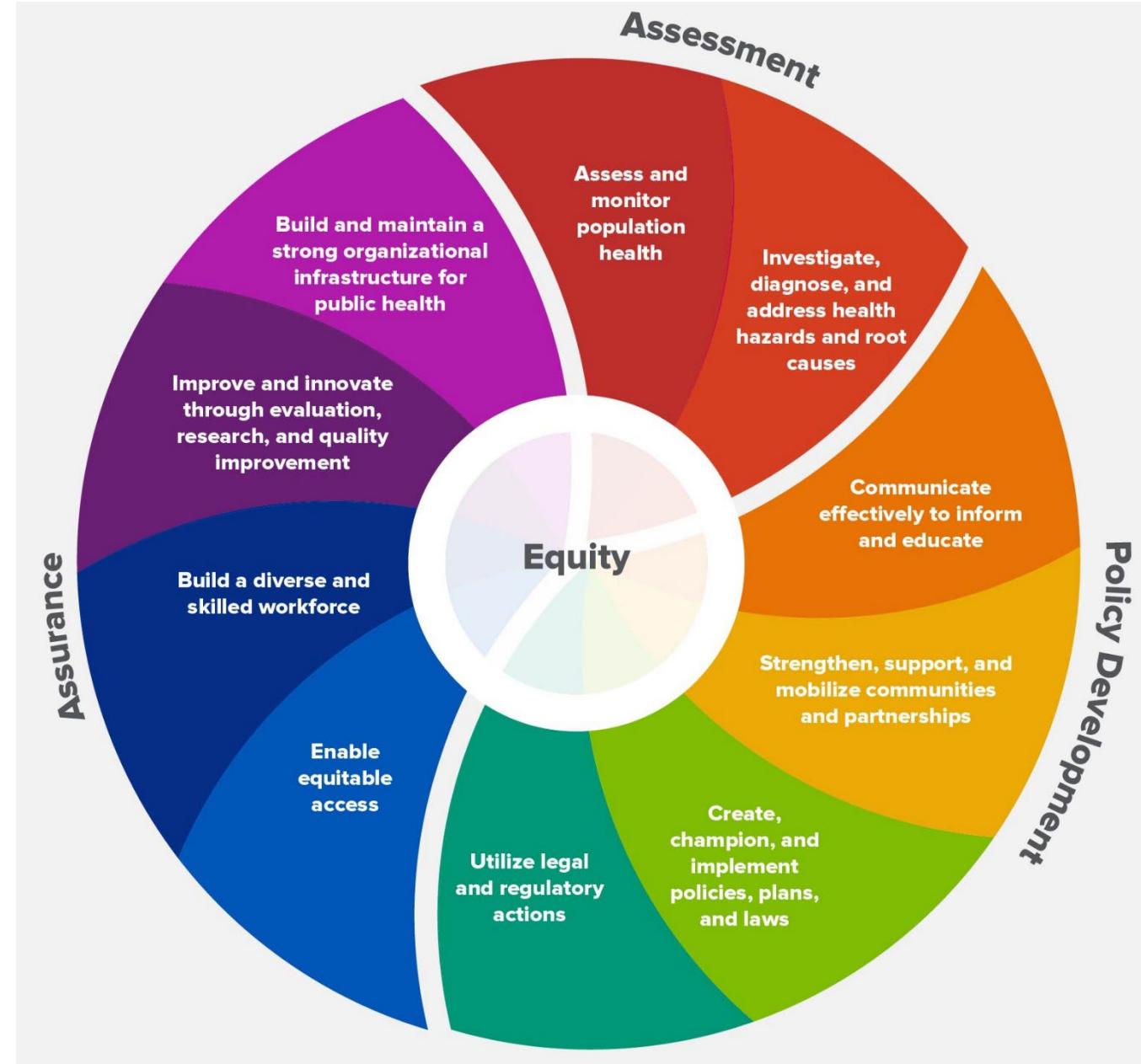




# Health Department Role

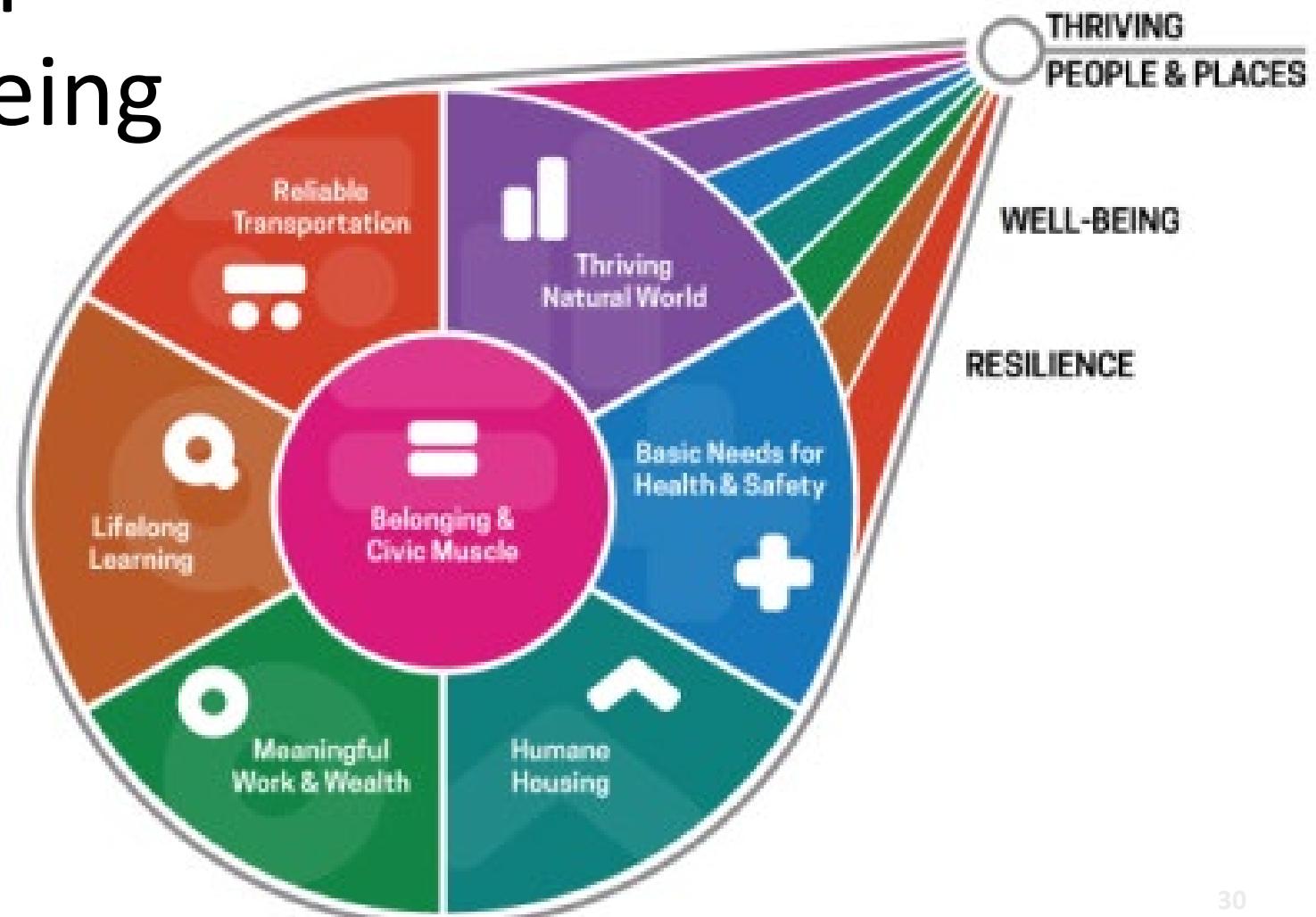
Local Health Departments in Maryland are a crucial component of a whole community.

Provide **essential services** that healthcare and commercial sectors do not to support the Whole Person.



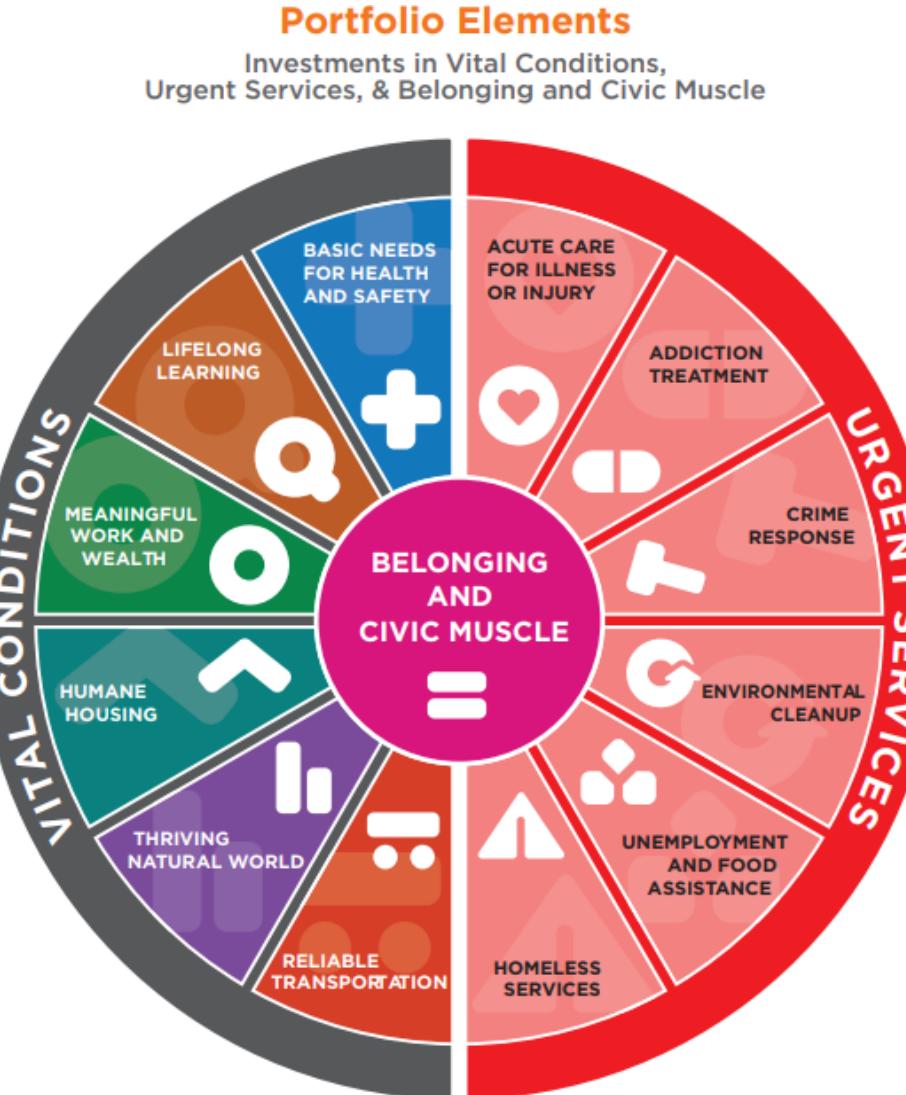


# The Rippel Foundation: Vital Conditions for Health and Well-Being Framework





# A Portfolio of Investments to Assure Vital Conditions & Services to Address Urgent Needs





## FOUNDATIONAL AREAS



Communicable  
Disease Control



Chronic Disease  
and Injury  
Prevention



Environmental  
Public Health



Maternal,  
Child, and  
Family Health



Access to and  
Linkage with  
Clinical Care

## FOUNDATIONAL CAPABILITIES

✓ Accountability & Performance Management	✓ Emergency Preparedness & Response
✓ Assessment & Surveillance	✓ Equity
✓ Communications	✓ Organizational Competencies
✓ Community Partnership Development	✓ Policy Development & Support



# Frederick County Health Department Divisions

The Frederick County Health Department is made up of Maryland State employees and Frederick County employees. Here is an overview of which divisions are state and county:

## Maryland State

- Administration
- Behavioral Health Services
- Community Health Services
- Environmental Health Services
- Equity Office
- Health Care Connection & Preparedness
- Office of Planning, Assessment & Communication (OPAC)

## Frederick County

- Developmental Center
- School Health

# Frederick County Health Department Services

## PREVENT

### Administration

301-600-1029

- Birth Certificates
- Death Certificates

### Behavioral Health Services

301-600-1755

- Assessments, Evaluation & Review Services (AERS)
- Adult Recovery Services
- Harm Reduction Services
- Local Behavioral Health Authority
- Prevention Programs
- Youth Support Services

### Equity Office / Golden Mile

301-600-2337

- Community services
- Black maternal health project



## PROMOTE



### Community Health Services

301-600-1733

- Cancer Screening
- Chronic Disease Prevention
- Communicable Diseases
- Immunizations Clinic
- Maternal Child Health
- WIC—301-600-2507

### Developmental Center

301-600-3367

- Audiology
- Dental Clinic
- Infants & Toddlers
- Respite Care
- School Based Services

### Environmental Health Services

301-600-1719

- Community Services & Development Review
- Food Control
- Rabies
- Well & Septic

## PROTECT

### Health Care Connection & Preparedness

301-600-3124

- Administrative Care Coordination/Ombudsman Program
- Maryland Children's Health Program/Qualified Health Plans
- Medical Assistance Transportation
- Public Health Preparedness
- HIV/AIDS Services

### Planning, Assessment & Communication

301-600-6005

### School Health Services

301-600-3312



# Accreditation

## PHAB

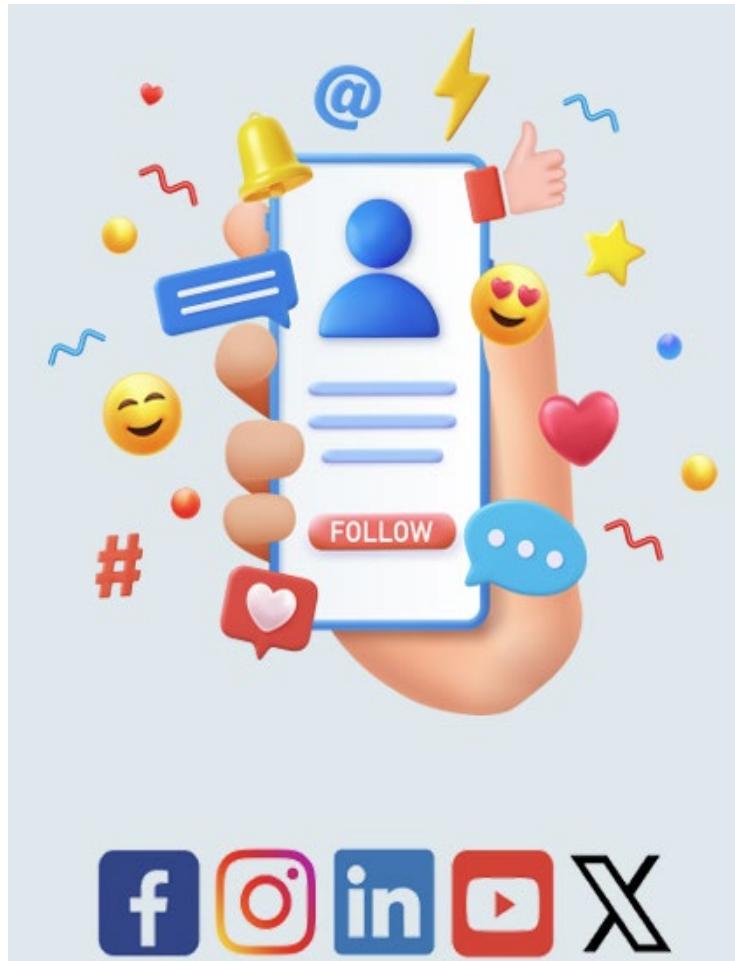
Accredited status was granted by the Public Health Accreditation Board (PHAB) to the Frederick County Health Department in December 2014. The Health Department was reaccredited in 2021 and is currently working towards reaccreditation in 2026.



## CARF

Our Project 103 in the Adult Detention Center was accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF) in 2017 and reaccredited in November 2023. CARF is a non-profit organization that accredits health and human services programs and facilities. CARF accreditation means that a program or service has met internationally recognized standards for quality and performance.

# Communications



In addition to the main FCHD social media pages (**@FCHealthDept**), several programs maintain their own pages as well. These include:

- Harm Reduction on Facebook **@FCHarmReduction** and Instagram **@frederickharmreductionssp**
- Maternal Child Health in Instagram **@MCHFrederickCounty**
- CORE on Facebook **@COREFrederick**
- On The Mark on Facebook and Instagram **@otmfrederick/**
- Developmental Center on Facebook **@FCDevCenter**



# Questions?



# Frederick County Board of Health

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- XII. **Adjourn**



Frederick County, Maryland

# Public Comment

# Public Comment



The Frederick County Board of Health welcomes and encourages public comment.



Public comment is open to members of the public who are present in the room. Individual providing public comment have up to 3 minutes and will be asked to complete comments when the buzzer sounds. A total of 15 minutes is allocated for public comment on today's agenda.



Public comment is not intended to be a question-and-answer platform with the Board members. Generally, Board members will not respond to comments made.



Members of the public wishing to share additional comments with the committee may do so by emailing [boardofhealth@frederickcountymd.gov](mailto:boardofhealth@frederickcountymd.gov).



Frederick County, Maryland

# Approval of Minutes



Frederick County, Maryland

# Respiratory Update

by

## Dr. Miriam Dobson



**Public Health**  
Prevent. Promote. Protect.

**Frederick County Health Department**

# Respiratory Virus Season

Prevention in Infants and Young Children  
**Communicable Disease Program**

October 14, 2025

**Dr. Miriam Dobson, DNP, RN, CRNP-PMH, PMH-C, CPH**



# Respiratory Virus Overview

Each year, respiratory viruses are responsible for millions of illnesses and thousands of hospitalizations and deaths in the United States.

In addition to the virus that causes COVID-19, there are many other types of respiratory viruses, including flu and respiratory syncytial virus (RSV).

The good news is there are actions you can take to help protect yourself and others from health risks caused by respiratory viruses.

# Respiratory Illness Activity as of October 14, 2025 (unless otherwise noted)

## Respiratory illness activity in the United States

- VERY LOW

## Emergency department visits in the United States

- COVID-19
- LOW
- **Decreasing**
- FLU
- VERY LOW
- **Increasing**
- RSV
- VERY LOW
- **Increasing**



## Community viral activity level in the United States

- COVID-19
- **Moderate**
- FLU
- **VERY LOW**
- RSV
- **VERY LOW**

# Current Situation

Covid-19, Influenza, and Respiratory Syncytial Virus (RSV) continue to cause significant morbidity and mortality in the community

Vaccines are safe and provide the best protection against severe illness

Until recently, the FDA, CDC/ACIP, and professional medical associations agreed upon who should receive each vaccine

# Respiratory Season Guidance for Maryland Clinicians



MDH issued a Clinician Letter on September 19, 2025, providing recommendations for:

COVID-19, Flu (influenza), Respiratory Syncytial Virus (RSV) vaccines

Standing Order for COVID-19 Vaccine



MDH recommends that all Maryland healthcare providers follow evidence-based vaccine guidance issued by:

American Academy of Pediatrics (AAP)

American College of Obstetricians and Gynecologists (ACOG)

American Academy of Family Physicians (AAFP)

# Covid-19 Vaccine Recommendations for Maryland Clinicians (Pediatrics)

- All children 6-23 months be vaccinated
- Risk-based approach for children and teens 2-18 years
- Supports ongoing access for anyone 2-18 whose parent/guardian desires a vaccine.
- We currently **DO NOT HAVE** an inventory of COVID-19 vaccines. We will update our website, once we receive our Vaccines For Children (VFC) Program COVID vaccine allotment.

# COVID-19

## Vaccines for our Adult Population

- All pregnant and lactating persons
- Postpartum and contemplating pregnancy
- All adults 19 and older should receive a vaccine. It is especially important for those:
  - 65 years and older
  - At increased risk for severe infection
  - Who have never received a vaccine

# Influenza Vaccine Recommendations for Maryland Clinicians

- Everyone 6 months and older without medical contradictions should receive the 2025-2026 Flu (influenza) vaccine
- We are currently offering Flu vaccines to Vaccines For Children (VFC) Program-eligible children, at no cost to them or their families

# RSV Vaccine Recommendations for Maryland Clinicians

- One-time respiratory syncytial virus (RSV) vaccine for adults age 75 and older, and for ages 50–74 at increased risk
- During September–January, pregnant patients are advised to receive the RSV vaccine (**Abrysvo®**) at 32–36 weeks pregnancy
- Infants under 8 months without maternal protection should receive **nirsevimab** or **clesrovimab**
- Infants 8-19 months entering their second RSV season, at increased risk for severe RSV disease, may receive **nirsevimab**

## RSV Continued...

- We currently have and are offering **Beyfortus (Nirsevimab)**, to our Vaccines For Children (VFC) Program-eligible **infants**, at no cost to them or their family.

# Helpful Tips

# Respiratory Virus Guidance

**Prevention is Key**

**Immunizations for  
Respiratory  
Viruses**

**Hygiene: hand  
washing, cover  
your cough**

**Preventing Spread  
of Respiratory  
Viruses: stay home  
when you're sick**

**Masking**

**Physical  
Distancing**



# Respiratory Virus Guidance Snapshot

## Core Prevention Strategies

### Immunizations



### Hygiene



### Steps for Cleaner Air



### Treatment



### Stay Home and Prevent Spread\*



## Additional Prevention Strategies

### Masks



### Distancing



### Tests



\*Stay home and away from others until,



Your symptoms are  
getting better



You are fever-free  
(without meds)

for 24 hrs



Then take added precaution  
for the next 5 days

Layering prevention strategies can be especially helpful when:

- ✓ Respiratory viruses are causing a lot of illness in your community
- ✓ You or those around you have risk factors for severe illness
- ✓ You or those around you were recently exposed, are sick, or are recovering



# Resources

- [Maryland COVID-19 Standing Order](#)
- [American Academy of Pediatrics \(AAP\)](#)
- [American College of Obstetricians and Gynecologists \(ACOG\)](#)
- [American Academy of Family Physicians \(AAFP\)](#)
- [Health.Maryland.gov/Flu.](#)
- To learn more about our immunization clinic, visit  
[Health.FrederickCountyMD.gov/Immunization](#)



Frederick County, Maryland

# Updates on Medicaid

by

## Dr. Barbara Brookmyer



# OBBBA Impact on Marylanders: Medicaid

## September 2025





# Medicaid Background

Medicaid is a joint federal-state program that provides **health and long-term care coverage** to low-income individuals, pregnant women, the elderly, and people living with disabilities

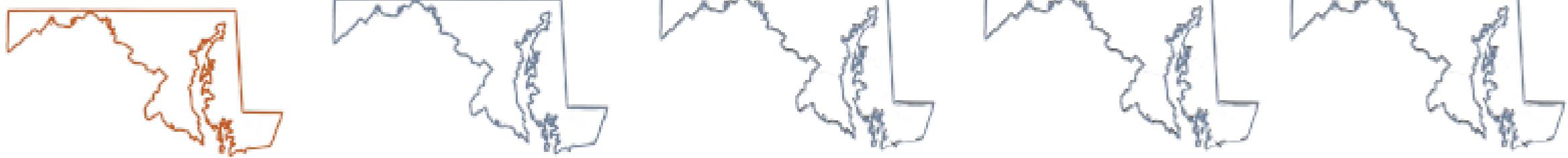


As of July 31, 2025, the Maryland Medical Assistance Program,  
often referred to as  
Maryland Medicaid, covers  
**1,495,528 people**



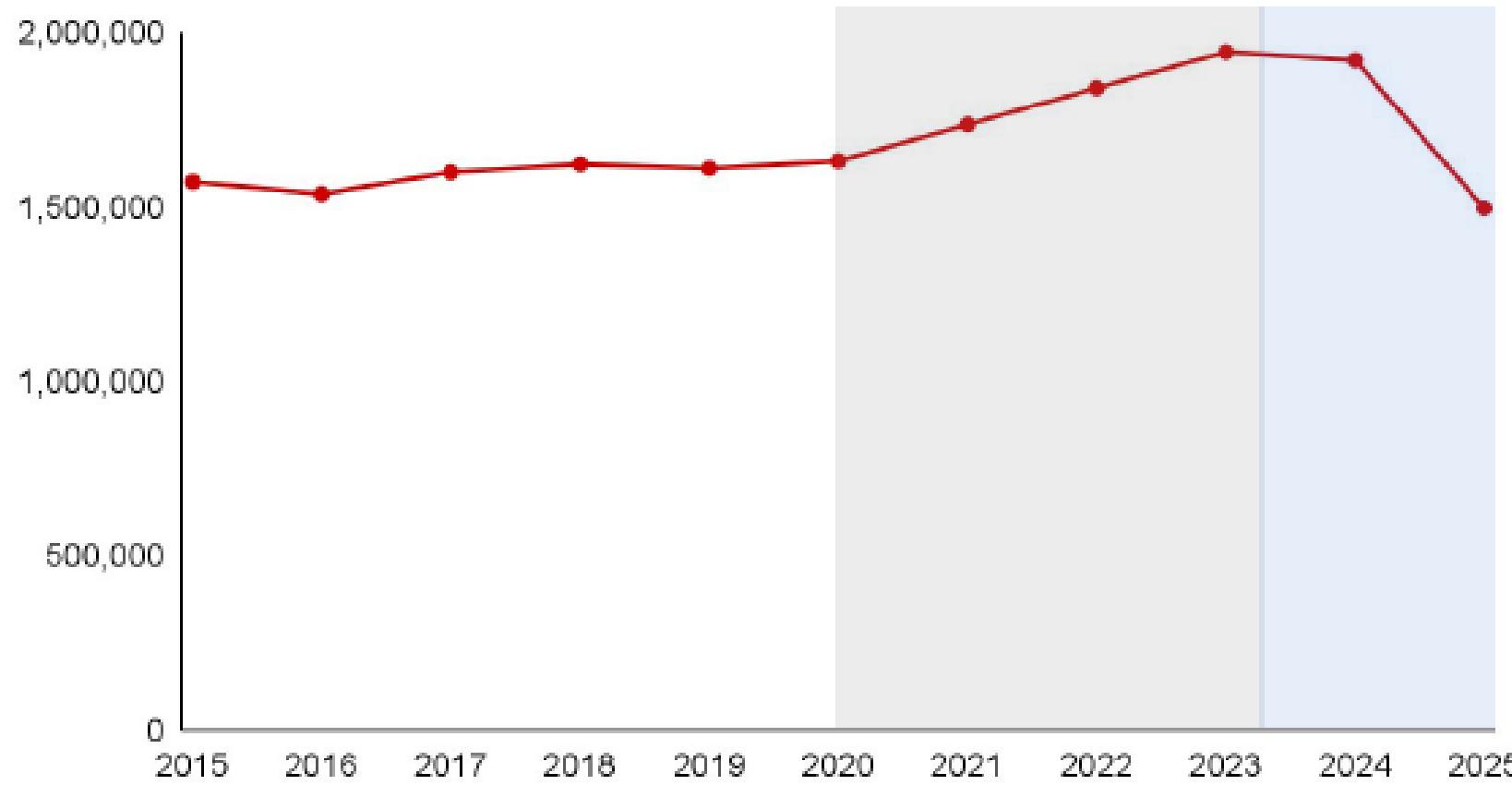
Frederick County, Maryland

This represents almost  
**a quarter of the state's population,  
more than 1 in 5 Marylanders**



Note: Population wide data based on 2024 Census estimates.

# Major Policy Changes Have Impacted Medicaid Enrollment



During the COVID-19 Public Health Emergency (grey shaded area), Maryland did not disenroll participants from Medicaid, except in specific circumstances. This led to steep growth between 2020 and 2023.

Maryland began the process of resuming eligibility checks, known as the “unwinding” in April 2023, leading to a return to more typical enrollment levels today.

Note: Data from CY 2015 through CY 2024. 2025 data as of July 31, 2025.



# A Safety Net in All Phases of Life

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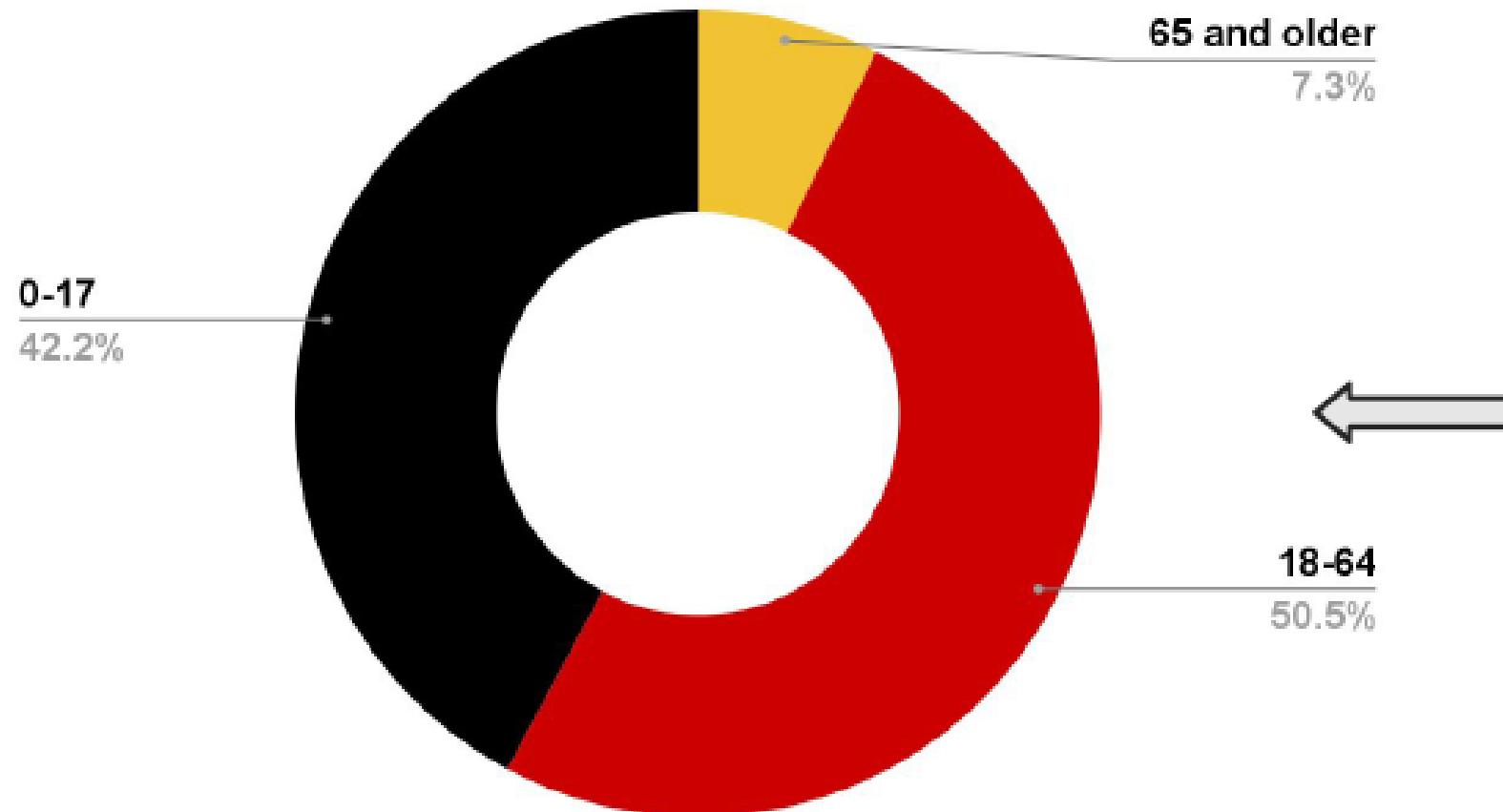
Medicaid covers...

- **over 40% of all births**
- **almost half (46%) of all children\* in the state**
- **More than 320,000 adults who qualify under the Affordable Care Act**
- **almost 80% of all nursing home revenue, supporting long-term care**

*\*defined as age 0-17. Note: Population wide data based on 2024 Census estimates.*



# Medicaid Enrollment Broken Down by Age Group



*Several OBBBA provisions impact working age adults!*

Half of all Medicaid enrollees are age 18-64



Medicaid is also an economic engine of the state's healthcare system,  
supporting **122,981 providers**  
**and 660 hospitals\***

\*Based on *unique* tax IDs.

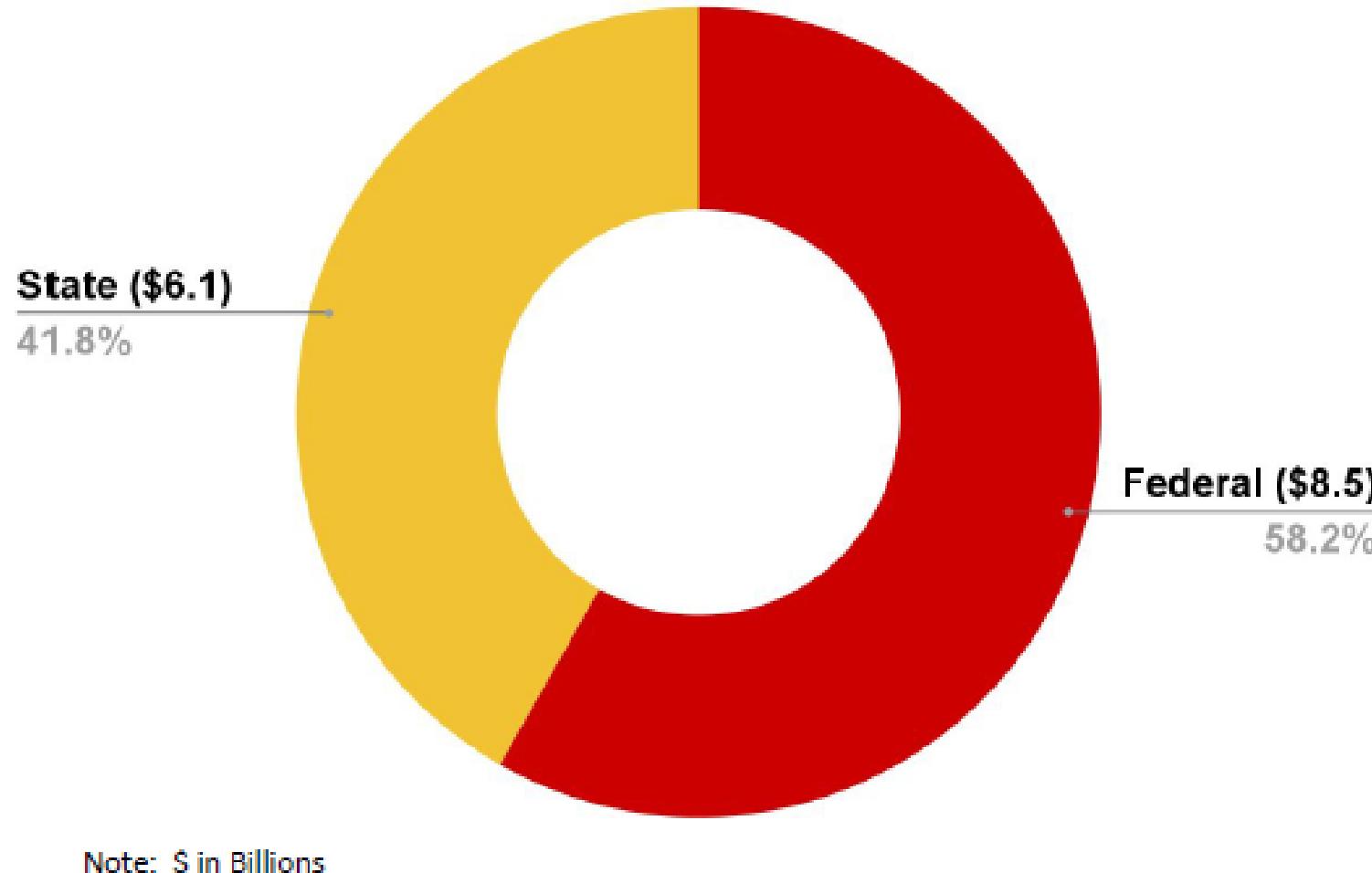




In 2024, Medicaid supported  
**more than half (54%) of all revenues for  
community health centers in Maryland**

## Almost 60% of the Medicaid Budget Comes from Federal Funds

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In total, the state Medicaid budget is over **\$14 billion** per year

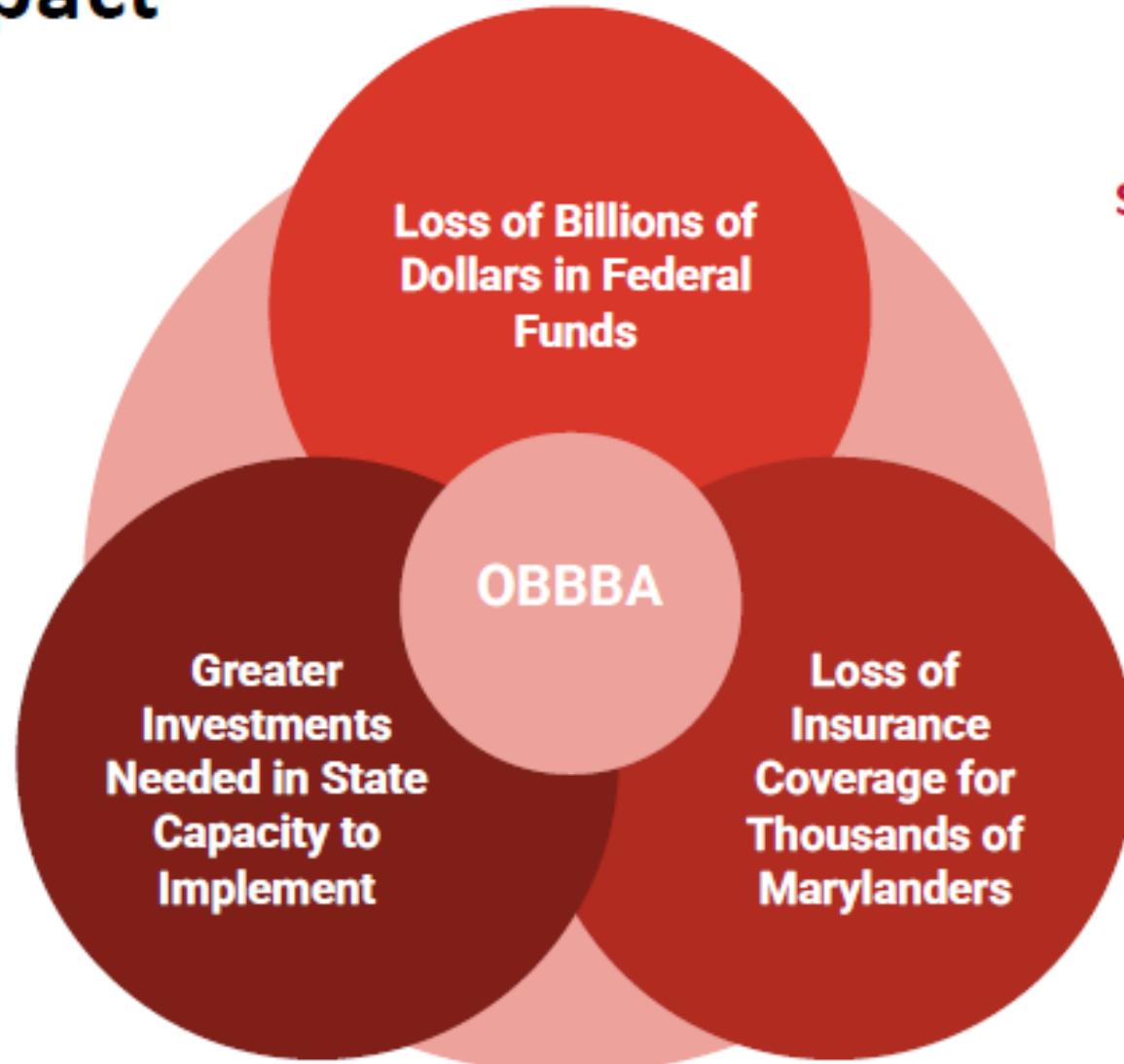


# Impact of OBBBA on Maryland Medicaid

## Background on OBBBA

- OBBBA is also known as “The One Big Beautiful Bill Act”
- Passed by Congress and signed by President Trump on July 4, 2025
- Includes major changes to programs like Medicaid and SNAP, as well as qualified health plan coverage through the Maryland Health Connection

# Overall Impact



OBBA will have a **significant impact** on Maryland Medicaid and enrolled Marylanders



# \$2.7 Billion in Annual Federal Funding Potentially Lost

*This is the estimate of funding lost once all bill provisions are fully implemented (based on current \$14.6 billion budget).*

■ Federal and State Funds Remaining ■ Projected Federal Funds Lost



This represents  
almost 20% of  
Maryland's current  
Medicaid budget

Note: \$ in Billions



# 175,000 Medicaid Enrollees Projected to Lose Coverage

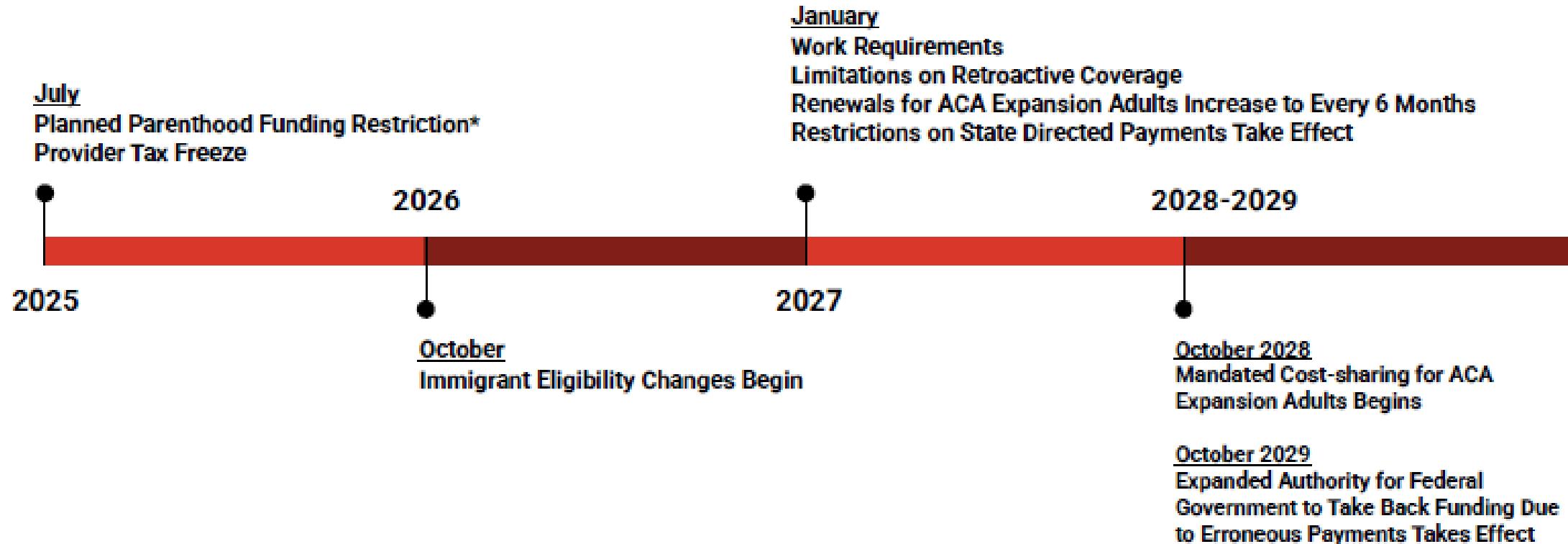
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This is **more than 1 in 9** Marylanders who are currently on Medicaid





# OBBBA Implementation Timeline



17

\*As of August 2025, this provision is not being enforced due to court injunctions.

# Implementation Timeline (2025)

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July

Planned Parenthood Funding  
Restriction\*

Provider Tax Freeze



- Potential **loss of more than \$2.7 million in federal funds**, which the State would be responsible to cover
- **Federal funds cannot go to large family planning and abortion clinic service providers (Planned Parenthood)**
  - As of August 2025, an injunction has been granted by the courts

# Implementation Timeline (2025)

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July

Planned Parenthood Funding

Restriction

Provider Tax Freeze



- **Provider taxes, a key source of revenue for our Medicaid program**, are frozen or must be altered in structure under this provision
- **At risk of losing \$1.17 billion annually in federal funds**
- Maryland must work with CMS to understand if three current provider taxes will be grandfathered

***Effective July 4, 2025***



# Impacts of OBBB – July 2025 Analysis by MDH

	<b>Policy</b>	<b>Effective Date</b>	<b>Impact on Maryland</b>
<b>Restriction on payment for services</b>	Restricts federal funding to non-profit, essential community providers who deliver family planning and abortion services, primarily Planned Parenthood clinics.	July 4, 2025-July 4, 2026	<p><u>Federal funding lost:</u> more than \$2.7 million</p> <p><i>*Note as of 7/14: a recent Temporary Restraining Order (TRO) on 7/7/2025 enables funding to continue at this time. The Department is working closely with impacted providers on next steps.</i></p>



# Implementation Timeline (2026)

---

2026



October  
Immigrant Eligibility Changes  
Begin

- Certain immigrants are **no longer eligible for Medicaid**
  - Refugees,
  - Asylees,
  - Immigrants granted parole for at least one year, and
  - Certain victims of abuse and trafficking
- As a result, at least **60,000 may lose benefits in Maryland**
- However, states may continue to provide coverage for pregnant women and children who would otherwise be impacted by this provisions.
- Note, emergency Medicaid is not impacted by this provision

***Effective October 1, 2026***



# Impacts of O BBB – July 2025 Analysis by MDH

	<b>Policy</b>	<b>Effective Date</b>	<b>Impact on Maryland</b>
<b>Immigrant Eligibility Changes</b>	<p>Limits coverage to legal permanent residents, certain Cuban/Haitian immigrants, and individuals living in the U.S. through Compacts of Free Association. At least 60,000 participants, including refugees and asylees, covered today will lose benefits.</p> <ul style="list-style-type: none"><li>● <i>States continue to have the option to provide coverage for pregnant women or children in these categories. Emergency Medicaid is not impacted.</i></li></ul>	Oct. 1, 2026	<u>Impact on Marylanders:</u> At least 60,000 participants may lose benefits ( <a href="#">Migration Policy Institute (MPI)</a> )

# Implementation Timeline (2027)

---

## January

### Work Requirements

Limits on Retroactive Coverage

Renewals for ACA Expansion Adults

Increase to Every 6 Months

Restrictions on State Directed Payments

Take Effect



2027

*Maryland Impacted*  
*January 1, 2027*

- **Work requirements** imposed on adults ages 19 through 64 who are covered by the ACA Medicaid Expansion
- Requirements apply to the **more than 320,000 adults** in this coverage group
- **Tens of millions of dollars will be needed to implement and administer this provision**



# Implementation Timeline (2027)

---

## January

Work Requirements

Limits on Retroactive Coverage

Renewals for ACA Expansion Adults

Increase to Every 6 Months

Restrictions on State Directed Payments

Take Effect



2027

- Prior to OBBBA, enrollees could get up to three months of retroactive Medicaid coverage
- With the implementation of OBBBA,
  - **ACA expansion adults** are limited to **one month of retroactive coverage**, and
  - **All other enrollees** are limited to **two months retroactive coverage**.

***Maryland Impacted  
January 1, 2027***

- **\$3.1 million in annual federal funds will be lost and uncompensated care will increase.**



# Implementation Timeline (2027)

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## January

Work Requirements

Limits on Retroactive Coverage

Renewals for ACA Expansion Adults

Increase to Every 6 Months

Restrictions on State Directed Payments

Take Effect



2027

**Effective January 1, 2027**

- ACA expansion adults are now subject to Medicaid **eligibility checks every six months to renew their coverage, as opposed to annual redeterminations**
- New requirements **impact the more than 320,000 adults eligible under the ACA Expansion**
- **Tens of millions of dollars** will be needed to implement

# Implementation Timeline (2027)

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## January

Work Requirements

Limits on Retroactive Coverage

Renewals for ACA Expansion Adults

Increase to Every 6 Months

Restrictions on State Directed Payments

Take Effect



2027

***Maryland Impacted***  
***January 1, 2027***

- **State Directed Payments** are a tool Maryland uses to enhance Medicaid payments for certain providers
- In Maryland, State Directed Payments facilitate access to primary and preventive care
- Lowering the payment ceiling for State Directed Payments puts **\$52 million in federal funds at risk annually**



# Impacts of OBBB – July 2025 Analysis by MDH

	<b>Policy</b>	<b>Effective Date</b>	<b>Impact on Maryland</b>
<b>Work Requirements</b>	Establishes work requirements for ACA expansion adults aged 19-65 for 80h/mth. Includes certain categorical and optional exemptions.	Dec. 31, 2026	<u>Impact on Marylanders</u> : New requirements will apply to the 331,577 adults who qualify under the Affordable Care Act.  <u>Substantial new costs</u> : Potentially tens of millions of dollars needed to implement and administer
<b>Retroactive Coverage</b>	Reduces retroactive coverage from three months to one month prior to application for ACA expansion adults and two months for all other participants.	Dec. 31, 2026	<u>Impact on Marylanders</u> : Increases the risk of uncompensated care and places financial burden on families.  <u>Federal funding lost</u> : \$3.1 million annually



# Impacts of OBBB – July 2025 Analysis by MDH

	<b>Policy</b>	<b>Effective Date</b>	<b>Impact on Maryland</b>
<b>Renewals</b>	Requires eligibility renewals for ACA expansion adults every 6 months.	Jan. 1, 2027	<u>Impact on Marylanders:</u> New requirements will apply to the 331,577 adults who qualify under the Affordable Care Act.  <u>Substantial new costs:</u> Tens of millions of dollars needed to implement and administer



# Implementation Timeline (2028-2029)

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2028-2029



October

**Mandated Cost-sharing for ACA Expansion Adults Begins**

Expanded Authority for Federal Government to Take Back Funding Due to Erroneous Payments Takes Effect

***Effective October 1, 2028***

- ACA Expansion Adults are subject to **cost-sharing requirements (ex: co-pays)**
- New requirements impact the more than 320,000 adults eligible under the ACA Expansion
- **Major administrative changes** will be needed to ensure Medicaid enrollees' cost sharing does not exceed 5% of their annual income



# Implementation Timeline (2028-2029)

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2028-2029



October

Mandated Cost-sharing for ACA Expansion Adults Begins

Expanded Authority for Federal Government to Take Back Funding Due to Erroneous Payments Takes Effect

- Federal government will have greater ability to **reclaim funding allocated** to the state following certain audit findings

- **This has the potential to impose a significant fiscal impact on the state of Maryland**

*Effective October 1, 2029*



# Impacts of OBBB – July 2025 Analysis by MDH

	Policy	Effective Date	Impact on Maryland
<b>Cost-Sharing Requirements</b>	<p>Mandates imposition of cost-sharing for ACA expansion adults, not to exceed 5% of total income. Certain services are exempt from these requirements.</p>	Oct. 1, 2028	<p>Participants currently pay copays of \$1 or \$3 for prescription drugs.</p> <ul style="list-style-type: none"><li>It is unclear at this time if these copays meet this requirement.</li><li>Upwards of 330,000 ACA expansion adults may experience increased cost-sharing in the event that this requirement is not met by current copays.</li></ul> <p><u>Substantial system changes</u> are required to track expended copays and ensure cost sharing does not exceed 5% of an individual's income.</p>



# Recent federal actions are bringing major changes that impact health insurance, including Maryland Health Connection

Most Marylanders will experience these changes during the upcoming open enrollment period for plan year 2026. More changes will happen in 2027.

 <b>Cost</b>	<p>Due to federal changes, your monthly premium for a 2026 health plan may increase. To ensure you get the best value from your plan, come back and <a href="#">shop</a> during open enrollment. There may be better options for your needs and budget.</p>
 <b>Eligibility</b>	<p>DACA recipients are no longer considered eligible for coverage through Maryland Health Connection. Some immigrants with lower incomes are no longer eligible for premium tax credits. While some immigrants are no longer eligible for coverage or savings, other family members may still qualify.</p>
 <b>Application</b>	<p>Some people may need to submit extra paperwork this year. If you get a message asking for documents, don't wait. Respond quickly to avoid losing coverage.</p>

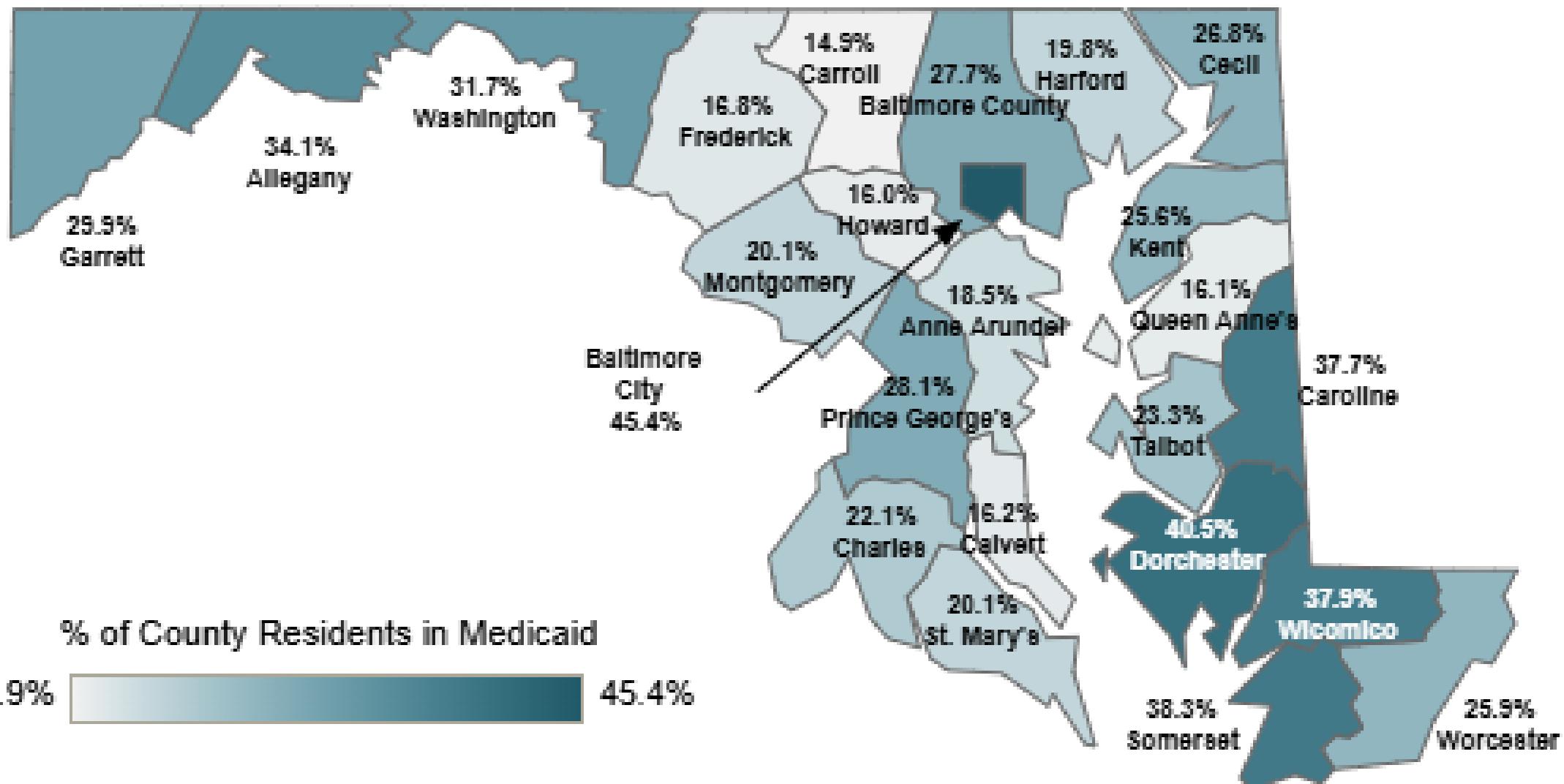


# Apply for Medicaid or MCHP

- ✓ Apply online at [marylandhealthconnection.gov](http://marylandhealthconnection.gov)
- ✓ Apply via mobile app Enroll MHC: [Apple](#) or [Android](#)
- ✓ Apply over the phone 1-855-642-8572
- ✓ Request a paper application by calling 1-855-642-8572; Deaf and hard of hearing Relay Service
- ✓ Walk-in to the Frederick County Health Department
- ✓ Go to Department of Social Services



## How much of each county's population was in Medicaid in CY 2024?





# What Action is FCHD Taking?

1. Contingency planning to respond to increased support needed by Medicaid enrollees – to remain enrolled when eligible, verify work requirements are satisfied, and respond to questions and concerns
2. Coordinate information sharing and planning among the medical safety net providers
3. Provide information to stakeholders about the changes and opportunities to mitigate the impact of the changes



# Medicaid Enrollment Assistance at TWO Locations!

Under the age of 65 and need health insurance?  
We can help! The Frederick County Health Department offers FREE Medicaid enrollment assistance in TWO locations!

- Location 1: 350 Montevue Lane, Frederick, MD 21702
  - Walk-in hours are Monday, Tuesday, Wednesday and Thursday 8 am-3 pm and on Friday 8 am-12 pm.
- Location 2: 1100 West Patrick St. Suite H, Frederick, MD 21703
  - Walk-in hours on Thursday 2-4pm.

Open Enrollment coming soon! Nov 1 – Jan 15

**Under the age of 65 and need health insurance? *We can help!***

The Frederick County Health Department offers *FREE* Medicaid enrollment assistance in TWO locations!

1

**Location:** 350 Montevue Lane, Frederick, MD 21702 (1st Floor, Entrance A, first door on the right)

**Walk-in hours:** Monday, Tuesday, Wednesday and Thursday 8 am-3 pm; Friday 8 am-12 pm

2

**Location:** 1100 West Patrick St. Suite H, Frederick, MD 21703

**Walk-in hours:** Thursday 2-4pm





Medicaid, also called Medical Assistance (MA) pays the medical bills of needy and low-income individuals. It is administered by the State and pays medical bills with Federal and State funds.

You may apply online at (<https://marylandbenefits.gov>) or in person at one of DHS's 24 local departments of social services.

### **Medicare Buy-In Program**

Medicare Buy-In Program also known as QMB (Qualified Medicare Beneficiary) and SLMB (Specified Low-Income Medicare Beneficiary) is designed to protect low-income Medicare beneficiaries from the costs of Medicare coverage, including out-of-pocket cost sharing expenses (deductibles and co-payments).

**QMB (Qualified Medicare Beneficiary)** Program serves individuals with modest assets (up to \$9,090 per individual or \$13,630 per couple) with combined incomes that do not go over 100 percent of the federal poverty level. The State Medicaid program pays their Medicare Part B premiums and cost-sharing amounts.

**SLMB (Specified Low-Income Medicare Beneficiary)** Program pays only the Part B premium for those with incomes between 100 and 120 percent of poverty with assets up to \$9,090 per individual or \$13,630 per couple.

### **Long Term Care Medical Assistance**

Long Term Care Medical Assistance (LTC), is designed to cover the cost of nursing home care for low income individuals who meet eligibility requirements, including a look back at resources in the five years prior to application. Applications for LTC may be filed online at <https://marylandbenefits.gov> or mailed to your local health department or local department of social services. Office of Long Term Care 746 Frederick Road Catonsville, Maryland 21228 covers applications from Baltimore City, Baltimore County, Anne Arundel County, and Prince George's County.



Frederick County, Maryland

# Community/Public Health Nursing: Opportunities through Partnership

by

Jennifer Cooper, DNP, RN, PHNA-BC, CNE

# COMMUNITY/PUBLIC HEALTH NURSING: OPPORTUNITIES THROUGH PARTNERSHIPS

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Jennifer Cooper, DNP, RN, PHNA-BC, CNE

Chair, Department of Nursing

Associate Professor of Nursing

Hood College

Frederick, MD

*“Health care is vital to all of us  
SOME of the time, but public health  
is vital to all of us ALL of the time”*

*-Dr. C. Everett Koop, U.S. Surgeon General 1982-1989*

# DEFINITIONS

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## NURSING (ANA)

“Nursing integrates the art and science of caring and focuses on the **protection, promotion, and optimization of health** and human functioning; **prevention of illness and injury**; facilitation of healing; and alleviation of suffering through compassionate presence. **Nursing is the diagnosis and treatment of human responses and advocacy in the care of individuals, families, groups, communities, and populations** in recognition of the connection of all humanity.

## PUBLIC HEALTH NURSING (ANA + APHA)

“The practice of promoting and protecting the health of populations...PH nursing specialty employs **all levels of prevention, with an emphasis on primary prevention**...focuses on improving outcomes by **addressing social, physical, environmental and other determinants of health**...includes assessment, **program planning, evaluation, advocacy, cross-sector collaboration, research, policy development and assurance**.”

# CHALLENGES

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## IN NURSING PRACTICE

- View of the role of a nurse
- Caring for those most in need vs. those who can pay
- Reactive health care
- C/PH nursing is easier
- Funding to pay nurses in the community or public health

## IN NURSING EDUCATION

- Reactive health care
- Requirement that nursing graduates all MUST start in acute care – those are the skills that matter most
- Faculty undervalue or do not feel experienced to teach skills/competencies needed for C/PH nursing



# HISTORY OF COMMUNITY/PUBLIC HEALTH NURSING

“A pill can’t cure a community that’s been made sick by disinvestment, injustice, and profit-driven systems. It can’t clean the air, increase access to health care, or create people-centered policies. That’s the work of public health. Being a public health nurse means integrating our profession’s core values of critical thinking, assessment, health promotion, disease prevention, education, and advocacy—not just with individual patients, but with entire communities. Our goal is to improve health and well-being at the population level.”

Sheila Guiracocha, DNP, RN  
American Journal of Nursing, Oct 2025

# GUIDANCE FOR NURSING PRACTICE & EDUCATION

## NURSING PRACTICE

### AMERICAN NURSES ASSOCIATION

- Scope and Standards of Practice
- Code of Ethics for Nurses
- Nursing's Social Policy Statement



## NURSING EDUCATION

### AMERICAN ASSOCIATION OF COLLEGES OF NURSING

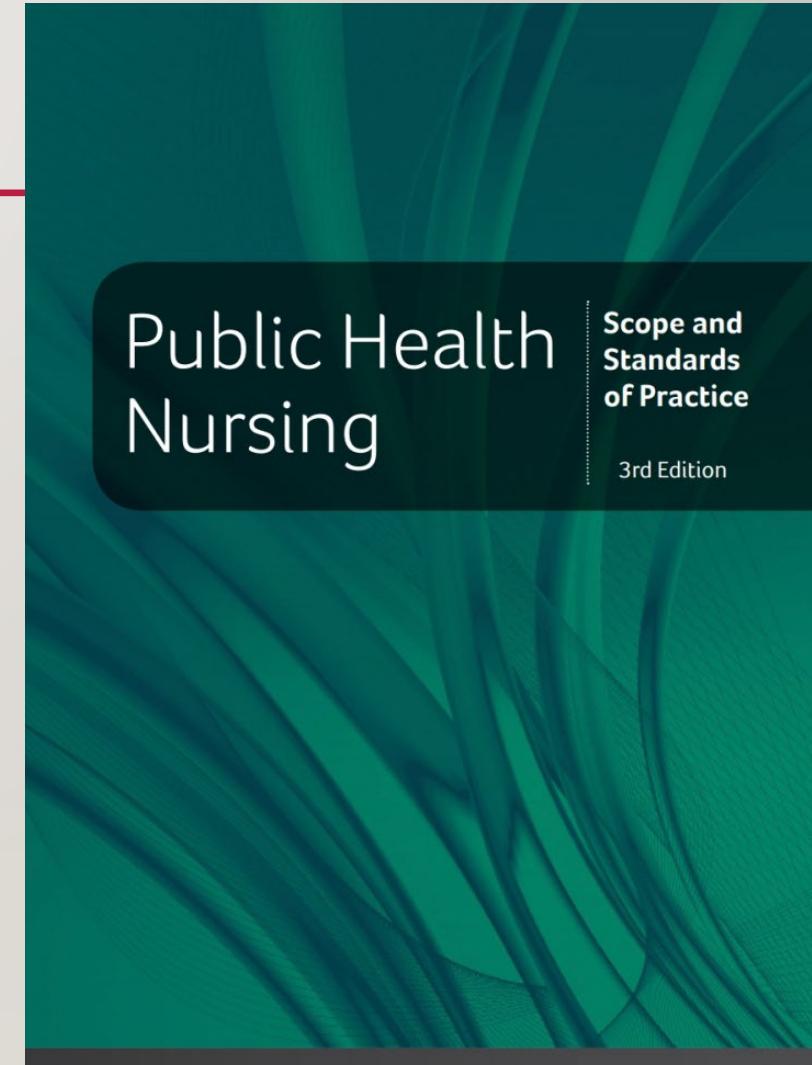
- The Essentials: Core Competencies for Professional Nursing Education
- Standards for Accreditation (Commission on Collegiate Nursing Education)
- NCLEX Test Plan

# COMPETENCIES FOR C/PHN

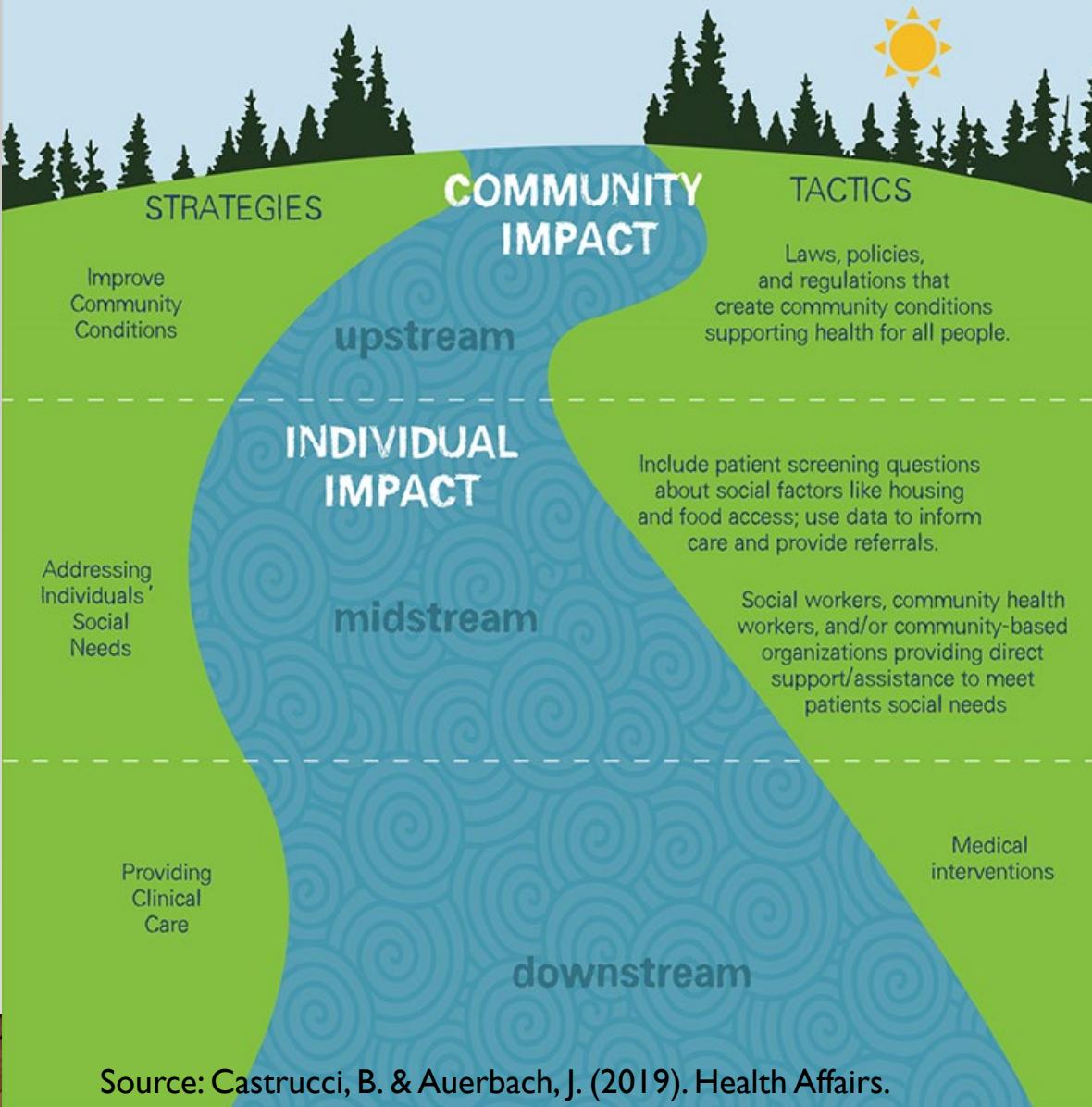
*Focus is care of **communities/populations** and **prevention!***

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- Assessment & Analytic Skills
- Policy Development/Program Planning Skills
- Communication Skills
- Cultural Competency Skills
- Community Dimensions of Practice
- Public Health Science Skills
- Financial Planning, Evaluation and Management Skills
- Leadership & Systems Thinking



# SOCIAL DETERMINANTS AND SOCIAL NEEDS: MOVING BEYOND MIDSTREAM



Source: Castrucci, B. & Auerbach, J. (2019). Health Affairs.

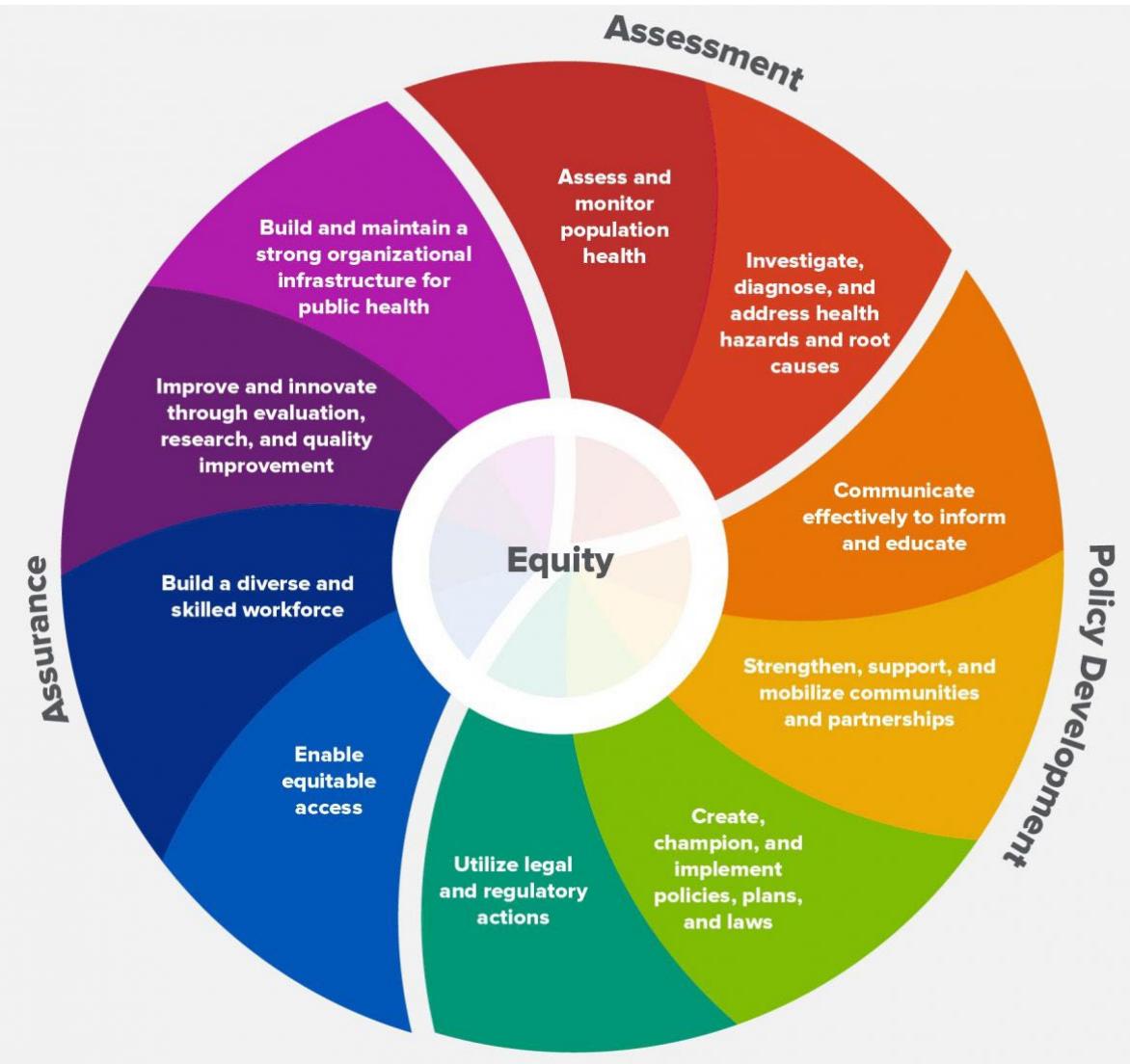
# WHERE DO C/PHNS WORK?

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- Health Departments
- Health Systems
- Community Clinics
- Home Care/Residential Housing
- Corrections
- Occupational Health
- Faith Communities
- Forensics
- Schools

In the places where  
people live, work, learn,  
play and pray!

# The challenge: focusing on care of populations & prevention in pre-licensure nursing education

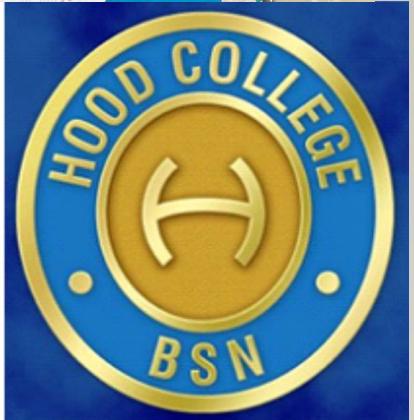


# Addressing the Challenge with Partnerships



## HOOD COLLEGE

DIVISION OF ACADEMIC AFFAIRS  
The Ruth Whitaker Holmes School  
of Behavioral and Health Sciences





Frederick County, Maryland

# Administrative Updates by Dr. Barbara Brookmyer



# Final report on the Maryland Commission on Public Health

- The Commission adopted its final report on September 25, 2025.

**“The time has never been more urgent for a call to action to recognize public health as a fundamental driver of social and economic productivity.”**



## Building the Future of Maryland Public Health

2025 FINAL REPORT



# Final report on the Maryland Commission on Public Health - Findings

- Need for Strengthening Governance, Supporting Leadership, and Improving Internal Administrative and Communication Operations
- Need to Enhance our Information Technology Capabilities
- Need to Build a Stronger Human Resources System to Support the Public Health Workforce
- Need to Expand Funding and Examine Funding Models
- Need to Leverage and Strengthen Relationships with Partners
- Need to Be More Prepared and Proactive
- Working to Ensure Health for All



# Final report on the Maryland Commission on Public Health – Recommendations

- Strengthen Public Health Infrastructure
  - Leadership and Governance
  - Human Resources
  - Funding
- Modernize and Maximize Communication, Data, and Information Technology Tools
- Leverage and Formalize Partnerships
- Bridge Public Health and Health Care Service Delivery
- Pave the Way for Current and Future Public Health Leaders

**By acting on the recommendations, the State has an opportunity not only to enhance the health of Marylanders, but also to position Maryland as a national leader in multidisciplinary and innovative approaches to public health system improvement**



# Closure of FCHD Mental Health Program

- **Effective August 1, 2025**, the Frederick County Health Department Mental Health Services (MHS) has closed their clinic at 350 Montevue Lane, Frederick, MD 21702 and 300 A South Seton Avenue, Emmitsburg, MD 21727
- Our team successfully connected all clients to other providers AND this move prompted other providers in the community to start taking Medicaid clients!

**NOTE: Mental Health Association's Walk-In Clinic at 340 Montevue Lane is *still open!***





# Implementation of EHS Cost Adjustment

- Change announced 7/22 and went into effect 9/1
- **Notified:** County Permitting Office, all septic system installers, licensed liquid waste haulers, event organizers who get food permits, permanent food service license holders, surveyors, municipal planners, pool companies, and Office of Childcare (to contact daycares)
- **Responses:** thanks for notification, no negative feedback
- **Next steps:** Staff working to identify strategies for future cost adjustments and/or areas that may need attention



# Maryland Rural Health Transformation Listening Sessions

- ❖ Federal funding is available for rural communities
  - If Maryland is awarded, funding will be available from 2026-2030
- ❖ Maryland requested that local health departments hold two sessions to gather public input.
  - September 26 – PBHS Provider Council
  - October 1<sup>st</sup> in Emmitsburg
  - October 2<sup>nd</sup> in Brunswick

Frederick County Health Department invites you to:

## Rural Health Listening Session



Frederick County Health Department is working on behalf of the Maryland Department of Health to hear from Frederick County residents about what you think can help transform rural health in our community. This is part of a new federal program: the Rural Health Transformation Program (RHTP).

**When:** Wednesday, Oct. 1<sup>st</sup> at 2:30-3:30 p.m.

**Where:** Seton Center, 226 E Lincoln Ave, Emmitsburg, MD 21727

**Who:** All Frederick County residents are welcome

**What:** We want to hear from you, so we will be holding a listening session for 1 hour with some guiding questions.

Can't attend but have Ideas? Share them at [bit.ly/MdRuralHealth-Input](http://bit.ly/MdRuralHealth-Input)

  
Public Health  
Prevent. Promote. Protect.  
Frederick County Health Department

Questions? Contact Rissah Watkins at [rwatkins@frederickcountymd.gov](mailto:rwatkins@frederickcountymd.gov) or 301-600-6005.





# Feedback from Rural Communities

## Challenges

- Lack of Transportation
- Food insecurity
- Housing insecurity or poor housing issues
- Long wait times for care
- Lack of specialty care
- Mental health provider shortage

## Our Future

- Equitable access to care
- More providers living/working in the community
- Transportation systems for health access
- Safe, inclusive public spaces
- Aging in place support for elders
- Coordinated care across systems
- Prevention-focused systems

# Maryland's Engagement Process

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- 17 Local Listening Sessions, covering all State-designated rural counties. 250+ participants.
- >325 RFI responses, received through online survey and email
- Roundtable discussions with:
  - Rural Hospitals (arranged by MHA)
  - Local DSS directors (arranged by DHS)
  - Local Health Officers
  - MD Medicaid Advisory Committee

# MD's Transformation Plan Framework

**Grow MD's  
Health Workforce**

**Ensure World Class  
Health System for Rural  
Marylanders**

**Food is Health**

## ***PART 1 - IMMEDIATE IMPACT FUND***

Direct funding for specific shovel ready programs, with emphasis on those that create enabling infrastructure or support scaling of key initiatives.

## ***PART 2 - TRANSFORMATION FUND***

Competitive grant opportunities to transform health. Each Pillar will have a set of discrete grant programs. Funding “tracks” are informed by community listening sessions and RFI process.

# Timeline and Resources

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## Key Dates

- Application due:  
11/5/25
- Award notification  
expected by: 12/31/25

## Staying Connected

- All updates will be posted  
on MDH's State Office of  
Rural Health [webpage](#)
- Email:  
mdh.transformruralhealth  
@maryland.gov



# FY25 Annual Report

Focuses on the foundational public health areas:



October 2025



## FY25 SNAPSHOT

### Services supporting children:



**1,012**

children with developmental needs received early intervention services in our Infants & Toddlers program



**24,166**

visits made for children to receive occupational or physical therapy



**4,012**

visits made for quality dental care for Frederick County children who have Medical Assistance or are uninsured



**6,502**

women, infants and children received WIC services



**7,222**

children newly enrolled in Medicaid



**299,762**

visits made to school health rooms, including sick, injured, and medication management



### Environmental Health:



**1,804**

food service  
facility inspections  
completed

**921**

Percolation tests  
& evaluations

### Harm Reduction:



**3,791**

pounds of medicine collected  
during Drug Take Back events  
and from drug disposal boxes



**2,539**

people trained to  
administer Narcan

### Chronic Disease Care:



**864**

women screened for  
breast and cervical cancer

**103**

people screened for  
colorectal cancer

### Vaccinations:



**4,900**

vaccinations given, including back-  
to-school immunizations and flu  
shots for children

### Vital Records issued:

**10,240**

birth  
certificates



**15,965**

death  
certificates



# Maryland WIC is Open

The Frederick County WIC office is OPEN!

We know there is a lot of confusion at the moment, but at this time there have been no changes to the status of our WIC office or Maryland WIC benefits.

All appointments are continuing as scheduled and new appointments can still be made.

For more information call 301-600-2507 or visit [Health.FrederickCountyMD.gov/WIC](http://Health.FrederickCountyMD.gov/WIC)

# Maryland WIC is OPEN!

There has been NO CHANGE in Maryland WIC benefits status or Frederick County WIC operations.

**Appointments can continue as scheduled and new appointments can be made**

For more information, visit [Health.FrederickCountyMD.gov/WIC](http://Health.FrederickCountyMD.gov/WIC) or call 301-600-2507



**wic MARYLAND**  
BETTER NUTRITION, BRIGHTER FUTURE



Public Health  
Prevent. Promote. Protect.  
FREDERICK COUNTY  
HEALTH DEPARTMENT



# Drug Take Back Day

## October 25

On Saturday, October 25, 2025 Frederick County will take part in the Drug Enforcement Agency's (DEA) "National Prescription Drug Take Back Day". This drive-through event will take place from 10 a.m. and 2 p.m. at the two following locations:

- Frederick County Health Department – 350 Montevue Lane in Frederick
- Maryland State Police, Frederick Barrack – 110 Airport Drive East in Frederick



**Saturday, October 25  
10 a.m. - 2 p.m.**

**Safely dispose of  
unwanted or expired  
medicine and sharps!**

Frederick County Health Department - 350 Montevue Lane

Maryland State Police, Frederick Barrack – 110 Airport Dr East in Frederick



Frederick County, Maryland

# Old Business

- Orientation for newly appointed liaisons - completed



# Future Topics

May 2026 Meeting – Special Feature – Local Behavioral Health System

- Newly added/expanded
  - Positive Childhood Experiences
  - Academic Detailing expanded beyond the clinical office boundaries
  - Suicide and Violence Prevention – Extreme Risk Protective Order support and coordination and much more
  - Hub for the Maryland Consortium for Coordinated Community Supports for FCPS families
- Landscape Analysis of the local system of care
- Jurisdictional Plan
- Much more



# Frederick County Board of Health

## October 22, 2025

- I. **Orientation for Liaisons (5:30pm)**
- II. **Call to Order (6pm)** – Dr. Barbara Brookmyer, Health Officer for Frederick County
- III. **Public Comments (6:00p.m. – 6:15 p.m. p.m.) - Members of the public will be given three (3) minutes to provide comments** - available to attendees in the room.
- IV. **Approval of Minutes**: 7/21/2025
- V. **Respiratory Season Update** – Dr. Miriam Dobson
- VI. **Updates on Medicaid** – Dr. Barbara Brookmyer
- VII. **Community/Public Health Nursing: Opportunities for Partnership** – Dr. Jen Cooper
- VIII. **Administrative Updates** – Dr. Barbara Brookmyer
- IX. **Old Business**
- X. **New Business** - none
- XI. **Upcoming Meetings**: May, 2026
- XII. **Adjourn**