



PrimaryCareCoalition.org



primary care coalition

# Annual Report 2022

# Where “who” meets “how”

We’ve taken a new approach to reporting on the breadth and depth of our work in this Fiscal Year 2022 (FY22) Annual Report. Instead of presenting highlights for individual programs, we wanted to focus on **who we serve and how**. But to put that work in context, I want to take a note from leadership author Simon Synek and **“start with why.”**

At the Primary Care Coalition (PCC) we believe that everyone should have the opportunity to be healthy. We believe that no matter where you were born, how much money your household earns, or how well you navigate systems, you should have the basic building blocks for good health. That is not the world in which we currently live. But it is the future we are working toward.

As you read this report, I hope it will help you make sense of how all our efforts connect. For example, why capacity building among organizations that serve Asian American residents co-exists at PCC with programs serving uninsured patients, or how orchestrating a county-wide behavioral health crisis collaborative belongs in the same organization serving newly resettled children.

The elevator pitch version of PCC has never been easy, and it only gets more complicated over time as we expand our work. I hope this “who,” “how,” and “why” way of thinking about our work helps illustrate the mission driving it and the vision of health we’re working to achieve.

Thank you for partnering with us. Together, we can make health happen!

Sincerely,



Leslie Graham  
President & CEO

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## mission

Our mission is to improve the health of vulnerable individuals and families by building partnerships and strengthening systems.

## vision

PCC envisions a strong, vibrant community that supports all people in achieving healthy lives.

# why



Who do we serve? WHAT CHALLENGES DO THEY FACE?

# who

At PCC, we say we serve people experiencing vulnerability. For much of our history, that has meant focusing on people who are literally outside the traditional U.S. healthcare system:

- because they lack health insurance
- because they earn incomes too low to pay out-of-pocket for care
- because they face additional hurdles finding providers who can care for them in their own language and in line with their customs.

As our population health partnerships and community have evolved, though, the population we serve has too.

**In this section, we look at the people our client and service numbers represent and some of the challenges they face.**

# Who

## Care for Kids: GROWTH

The number of children enrolling in Care for Kids (CFK) for the first time (vs. renewing membership) increased by 235% in FY22 compared to FY21.

The driver for that growth? Children fleeing violence and disasters in other countries. An estimated 84% of new enrollees arrived in our community driven not by choice but by desperate circumstances. Most were very recent arrivals in our county when they found the CFK program, with 53% reporting they had been in our community for 6 months or less when they enrolled in CFK.

Who are the families behind the dramatic enrollment increase? We hear stories about fleeing gang violence, including families facing targeted extortion and death threats that make staying in their home countries impossible. Starting a new life is never simple, and these families are no exception. Lack of money doesn't just affect access to daily necessities but also the process of starting over. Some families find themselves unable to get identity documents from their country consulates because the processing fees are unaffordable. Housing isn't just a matter of money but of establishing credit history for rental contracts. In short, challenges are far from over once families arrive here.

**82**

countries of origin.

**80%**

from Central America's  
Northern Triangle  
region (Guatemala,  
Honduras, El Salvador).

**86%**

are between 6  
and 19 years old.

of **31**

primary languages,

**92%**

speak Spanish.



# Who

## Montgomery Cares: DEMOGRAPHICS

Most of the patients (78%) who received care through the Montgomery Cares program in FY22 were Hispanic or Latino adults of working age (77% were aged 30-64) from households that earned very low incomes.

Living at or below the poverty level is always hard, but it can be especially challenging in an expensive community like Montgomery County. The Maryland 2023 Self-Sufficiency Standard Calculator\* helps put Montgomery Cares incomes into perspective:

The total estimated cost for essential expenses to support a family of two adults and two school-aged children is **\$111,536**, while the Federal Poverty Level for a family of four is **\$30,000**.

The maximum amount of household income to qualify for MCares from a family of four: **\$70,000** (250% of the Federal Poverty Level).

**70% of FY22 participants reported incomes at or below the Federal Poverty Level.**

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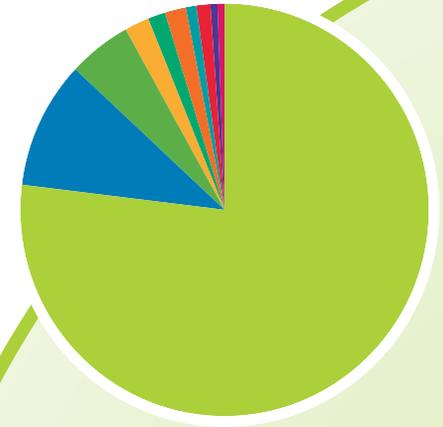
# Who

## Other Populations

The Montgomery Cares and Care for Kids patient populations reflect the groups currently experiencing the greatest challenges to accessing and affording health care. **“But low household incomes and a lack of health insurance are not the only things that make people vulnerable,”** says Hillery Tumba, PCC’s Director of Organizational Strategy.

“Having a physical or developmental disability, aging-related changes, or language gaps matter too. Most important is the stigma that can go along with these challenges. That stigma is baked into our conventional systems, and it drives inequity.”

During the pandemic, PCC worked with the Montgomery County government to implement programs serving the COVID-19-related needs of specific groups. In FY22 that work included serving Asian American residents by supporting Asian American community-based organizations, from Chinese and Korean communities to residents with origins in the Indian subcontinent or the Philippines. Some of those programs met needs shared across communities with information tailored to specific ones, like domestic violence concerns or COVID vaccine information. Others addressed emerging issues like anti-Asian violence.



**LANGUAGES SPOKEN BY  
FY22 MCARES PATIENTS:**

- 77.0% Spanish / Castilian
- 10.3% English
- 5.2% Declined / Unknown
- 1.8% Portuguese
- 1.3% Other
- 1.2% French
- 0.8% Chinese (Mandarin or Cantonese)
- 0.8% Amharic
- 0.1% Creoles and Pidgins
- 0.1% Urdu

# Care for Kids

In FY22, the **Care for Kids Program (CFK)** provided access to care for **7,903** children, including **5,589** primary care visits and **316** behavioral health visits.

**1,912** children received case management assistance to access specialty services or interventions related to their primary care.

**1,745** children received short-term care coordination, and **167** received long-term case management.

**490** children received eye exams, and **422** received glasses.

**261** children received **585** prescriptions.

**104** children received specialty dental care.

Satisfaction with CFK remains very high:

**100%** of families surveyed would recommend the program to friends and family.



# Montgomery Cares

**21,940** patients received primary care through the Montgomery Cares program in FY22.

The Montgomery Cares Behavioral Health Program served **1,368** patients, a **13%** increase over FY21.

MedBank secured medications worth **\$6.47 million** for **1,259** patients, a **10.5%** increase in the value of medications received and a **5%** increase in active patients over FY21.

Project Access provided **627** unique patients with **2,596** specialty care appointments. The program also leveraged **\$868,390** in donated services and secured **\$160,000** in approved Maryland Cancer Fund grants to provide additional treatment access.





**How do we serve? HOW DO WE MAKE HEALTH HAPPEN?**

# How

In the book *Nickled and Dimed*, undercover journalist Barbara Ehrenreich describes her experience of the sheer, exhausting volume of phone calls, forms and other time-consuming effort required to get help when you have limited resources and your time is valued at a low wage.

And Ehrenreich's experience of who could help and how was as an English-speaking American with an advanced degree purposely living hand-to-mouth for journalistic purposes, not as a recent immigrant juggling multiple jobs and children while learning to get by in an entirely new community. **The process is hard.**

It's also hard for our partners in county agencies and nonprofit service organizations, trying to maintain awareness of what services are available, how best to make connections, or simply how to do their best work.

We work constantly to find new ways of connecting our shared patients/clients with the services they need in the simplest way possible. We also work to help providers offer the best service possible.

# How

## Integrated Services

**Being able to integrate services is one of the simplest wins for serving clients.** It often means a single trip can address multiple problems and makes it more likely that clients get the full scope of services they need. Entire categories of retail stores grew up around this idea that being able to do multiple things in one place made life easier. Imagine that convenience applied to the safety net.

**As an example, FY22 was the first full year PCC was able to participate in the state's breast and cervical cancer program (BCCP) with five Montgomery Cares (MCares) partner clinics.**

BCCP brings screening within clinic operations, where the same clinics that provide a patient's primary care can now provide clinical breast exams and pap smears, while also coordinating referrals for mammograms, a service that has long been available to MCares patients. The BCCP coordination helps ensure clinics can follow the health status of their patients. Otherwise,

"results from non-affiliated providers don't always make it back to the clinics," says PCC's Mary Jane Joseph, RN, who provides technical assistance on cancer screening to clinics throughout the state. "I've seen cases where the patient's primary care provider wasn't even aware the patient had cancer until the patient came in for another reason and had no hair." Enrolling in the program from a patient's primary care home also helps avoid additional application processes for diagnostic follow-up, which can add administration times that delay care.

As another example, **Care for Kids** began working on more integrated services with the debut of the Caring for the Whole Child program in 2017, an effort to replicate the success of integrated behavioral health care for the MCares program within a pediatric population. The project worked with 4 partner clinics to screen patients for behavioral health needs during primary care visits and to introduce them to on-site behavioral health providers in the same visit—a so-called "warm handoff."

Patients struggling with mental health concerns didn't have to start visiting a new place and learning another clinic system. They could receive new kinds of care in places they already knew and trusted. The Health Resources and Services Administration provided a five-year grant for the project, in addition to seed funding from the Health Care Initiative Foundation and the Clark-Winchcole Foundation. PCC was able to secure annual county funding for behavioral health services, making them part of the standard CFK scope well before grant funding ended in FY22.

PCC debuted the **Point of Entry Project (PEP)** in FY22 to serve the newly-arrived children and families in our community as they enroll in public school. School enrollment workers have coordinated with PCC's PEP staff to be sure families have all the documents they need for school and other assistance programs in hand when they come in for enrollment services. This coordination means PEP staff can help families enroll in programs like Care for Kids in the same visits they make for school enrollment. Having documents in hand and helping families with their applications is making CFK approvals happen much more quickly, often within two weeks of submitting an application. A combination of grants, including from the Maryland Community Health Resources Commission, the Clark-Winchcole Foundation, and CareFirst supported the project in FY22, along with individual donations, a donation match from the Morris and Gwendolyn Cafritz Foundation, and funding from Montgomery County.



# How

## Provider Collaboration

One of the biggest challenges getting patients connected with the care they need is understanding service capacity in our community.

Refer patients to programs that are already understaffed or over-referred, and patients face impossible wait times for care. Miscommunicate about who is coordinating which parts of the referral process, and patients experience delays in care. There are real struggles to provide enough services for our community. PCC collaborates with other providers to be sure we're doing the best we can with what exists and working together to find new ways forward.

**Behavioral health** was a challenge pre-pandemic, and the needs have only gotten more severe. PCC meets providers at multiple levels to understand the needs and how to connect patients with existing care:

### **INTERNAL:**

In FY22 PCC began regular internal meetings for staff working on various behavioral health issues and programs to identify common needs and areas for collaboration across different programs.

### **EXTERNAL:**

PCC'S Montgomery Cares Behavioral Health Program (MCBHP) staff met with the Community Health Nurse at Montgomery County's Adult Behavioral Health (ABH), which serves adult residents with severe or acute behavioral health needs. Together they designed a workflow for referrals each way, so that ABH can send patients with less severe needs for counseling through MCBHP, which helps free up spots when MCBHP needs to refer patients with severe needs to ABH.

### **SYSTEM:**

As part of our work with the Nexus Montgomery Regional Partnership, PCC established a quarterly meeting called the Behavioral Health Crisis Leadership Collaborative. The idea was to convene all local decision-makers and policy-setters—folks who had the power to address missing pieces in our local behavioral health systems. Participants include representatives of all six county hospitals and the directors of county agencies involved in crisis response.

Together this collaborative is researching and adopting best practices, and building out large scale new services to support county residents experiencing behavioral health crisis.

# How

## Expanded Capacity

**In FY22, PCC worked on expanding capacity within our systems and with external partners so we could serve our community better, together.**

Working with the Montgomery County Asian American Health Initiative (AAHI), PCC managed a COVID response grant program for organizations serving the local Asian American and Pacific Islander community. Eleven organizations received grants ranging from **\$30,000-\$200,000**. In addition to managing the grants process, PCC worked with grantees on reporting. The collaboration helped grantees build reporting muscle and helped the program understand where changes to future grant requirements could meet information needs with less reporting burden.

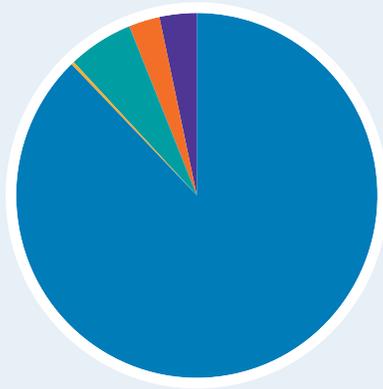
PCC also brought electronic billing to our local safety net in FY22. In prior years, our Project Access specialty care providers still had to submit paper invoices for reimbursement—which added time in the billing process for PCC and the providers alike. The reason? It takes a large up-front effort, in both time and funding, to switch from paper to digital processes. “But COVID changed everything,” says PCC Provider Services Coordinator Danielle Carter. “Suddenly, people were working from home, and the need to process invoices electronically became urgent.”

We’re happy to report that PCC’s support for providers now includes making it easier to get paid, ensuring more stable cash flow to keep caring for patients.

# Financial Statements

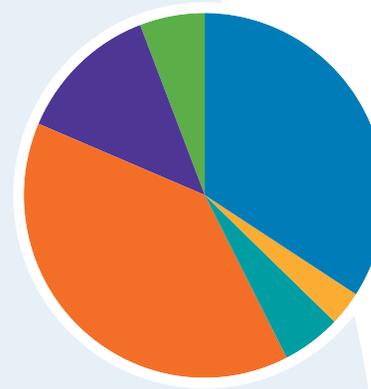
Sources and uses of funds for the fiscal year ended June 30, 2022.

## Revenue and Support



	<b>Unrestricted</b>
● County Funders	\$ 27,771,751
● Federal Funders	37,796
● Hospital Funders	1,869,373
● In-Kind Medical Services	858,780
● Grants, Donations, and Other Income	997,021
<b>Total Revenues</b>	<b>\$ 31,534,721</b>

## Expenses



	<b>Unrestricted</b>
● Montgomery Cares	\$ 10,667,620
● Care for Kids	906,523
● Nexus Montgomery	1,614,237
● LHI-PNSB	12,052,221
● Other Projects	3,990,887
● General Administration	1,767,187
<b>Total Expenses</b>	<b>\$ 30,998,675</b>

# FY22 Partners

## PARTNERS AND COLLABORATORS

### MONTGOMERY CARES PARTICIPATING CLINICS

- Catholic Charities Center
- Chinese Culture and Community Services Center – Pan Asian Volunteer Health Clinic
- CCI Health and Wellness
- Community Reach of Montgomery County – Kaseman Health Clinic
- Holy Cross Health Centers
- Mary's Center for Maternal and Child Care, Inc.
- Mercy Health Clinic
- Mobile Medical Care, Inc.
- Muslim Community Center Clinic
- Proyecto Salud

### CARE FOR KIDS PROVIDERS

- All Star Pediatric Dentistry, LLC.
- A Plus Pediatrics
- Broad Acres Elementary School-Based Health Center
- Catholic Charities Center
- Capital Children's Healthcare, LLC
- CCI Health and Wellness
- Casa Ruben CRI Clinic
- Chevy Chase Pediatric
- D.C. Endodontics - Dr. Julian Moiseiwitsch
- Dr. James R. Clarke, P.T., P.A.
- Dr. Vu Tran
- Endodontics Associates of Greater Washington
- Endodontics of Gaithersburg
- Gaithersburg Wellness Center
- Georgetowne Park Endodontics, LLC.
- Gold Pediatrics, LLC.
- Harmony Hills Elementary School-Based Health Center

- Highland Elementary School-Based Health Center
- Holy Cross Health Center Germantown
- Kaiser Permanente of the Mid-Atlantic
- Kidz & Family Dental Center, LLC
- Mary's Center for Maternal and Child Care, Inc.
- Mercy Health Clinic
- MRB Counseling Services, Inc.
- My Eye Doctor
- New Hampshire Estates Elementary School-Based Health Center
- North Bethesda Endodontics
- Northwood Wellness Center
- Prime Pediatrics, LLC.
- Rockville Pediatric Dental
- Rolling Terrace Elementary School-Based Health Center
- Summit Hall Elementary School-Based Health Center
- Veirs Mill Elementary School-Based Health Center
- Watkins Mill Wellness Center
- Weller Road Elementary School-Based Health Center
- Wheaton High Wellness Center

### PROJECT ACCESS PARTICIPATING PRACTICES

- Advanced Neuro & Orthopedic Physical Therapy, LLC
- Adventist HealthCare Imaging
- Adventist Medical Group – Cardiovascular Specialists
- Adventist Medical Group – Infectious Disease
- Affiliated PET Systems, LLC
- ARSO Neuro Rehab and Orthopedic Center
- Arthritis and Rheumatology Associates, P.C.
- Associates in Gastroenterology
- Bayada
- Capital Cardiovascular and Thoracic Surgery Associates, PLLC
- Capital Choice Pathology Laboratory
- Community Audiology Services
- Community Hematology-Oncology
- Community Radiology Associates
- Dr. Asif Qadri
- Dr. Daniel Lahr
- Dr. George Gibeily
- Dr. G.M. Din, MD, PA, Inc.

- Dr. John Merendino, Jr.
- Dr. Jonathan Rhee & Dr. Kasey Morrison
- Dr. Laurie Wenger
- Dr. Maria Belledonne
- Dr. Mushtaq Shah
- Dr. Nirupma Rohatgi
- Dr. Patricia O'Neal
- ENT & Allergy Specialists of Shady Grove
- Eternal Dermatology
- Foot & Ankle Specialists of the Mid-Atlantic
- Greenbelt Endoscopy Center
- James Clarke Physical Therapy
- Maryland Oncology & Hematology

### HOSPITALS AND HEALTH SYSTEMS

- Adventist Health Care
- Dimensions Healthcare System
- Doctors Community Hospital
- Holy Cross Health
- MedStar Montgomery Medical Center
- Sheppard Pratt Health System
- Suburban Hospital
- Nexus Montgomery LLC

## **PUBLIC SECTOR PARTNERS**

- Housing Opportunities Commission of Montgomery County
- Maryland Department of Health
- Montgomery County Cancer Crusade
- Montgomery County Department of Health and Human Services
  - Public Health
  - Services to End and Prevent Homelessness
  - Adult Behavioral Health Services
  - Asian American Health Initiative
  - Latino Health Initiative
- Montgomery County Fire and Rescue
- Montgomery County Police Department
- Montgomery County Public Schools
- Prince George’s County Department of Social Services
- Prince George’s County Health Department
- Montgomery County Recreation

## **ACADEMIC INSTITUTIONS**

- Georgetown University Department of Psychiatry
- Montgomery College
- University of Maryland School of Nursing
- University of Maryland Schools of Social Work at Baltimore County and Shady Grove

## **SKILLED NURSING FACILITIES**

- Adelphi Nursing and Rehabilitation Center
- Althea Woodland Nursing and Rehabilitation Center
- Autumn Lake Healthcare at Arcola
- Autumn Lake Healthcare at Oakview
- Autumn Lake Healthcare at Oak Manor
- Asbury Methodist Village (Wilson Health Care Center)
- Bedford Court Healthcare Center
- Bel Pre Nursing and Rehabilitation
- Brooke Grove Nursing and Rehabilitation Center

- Cadia Healthcare Hyattsville
- Cadia Healthcare Springbrook
- Cadia Healthcare Wheaton
- Carriage Hill Bethesda
- Collingswood Rehabilitation and Nursing Center
- Crescent Cities Nursing and Rehabilitation Center
- Fairland Center
- Peak Health at Fox Chase
- Friends Nursing Home
- Hebrew Home of Greater Washington
- Kensington Healthcare Center
- Layhill Nursing and Rehabilitation Center
- Montgomery Village Care Center
- Peak Healthcare at Sligo Creek
- Potomac Valley Rehabilitation and Healthcare Center
- Promedica Skilled Nursing and Rehabilitation (Bethesda)
- Promedica Skilled Nursing and Rehabilitation (Chevy Chase)
- Promedica Skilled Nursing and Rehabilitation (Potomac)

- Promedica Skilled Nursing and Rehabilitation (Silver Spring)
- Promedica Skilled Nursing and Rehabilitation (Wheaton)
- Regency Care of Silver Spring
- Shady Grove Nursing and Rehabilitation Center
- Sterling Care Bethesda Nursing Home
- Sterling Care Rockville Nursing Home
- Tuckerman Nursing and Rehabilitation Center
- The Village at Rockville
- White Oak Rehabilitation and Nursing Center

## **OTHER PROGRAMS AND ORGANIZATIONS**

- Abused Persons Program
- Access to Behavioral Health
- Action in Montgomery
- Affiliated Sante Senior Services
- ALFA Specialty Pharmacy
- American Diversity Group
- American Muslim Senior Society
- Bethesda Cares

- Caring Matters
- C-4 Clothing Closet
- Capital Area Food Bank
- Capital Breast Care Center
- Catholic Charities D.C.
- Coaching Salud Holistica
- Community Health and Empowerment through Education and Research (CHEER)
- Cornerstone Montgomery
- EveryMind
- Family Justice Center
- Family Services, Inc.
- Gilchrist Center
- Healthcare Council
- Identity
- Interfaith Works
- Intercultural Counseling Connection
- Innovative Clinical Associates
- Jewish Social Services Agency
- Leadership Montgomery
- Manna Food Center
- Mil Mujeres
- Montgomery County Coalition for the Homeless
- Montgomery County Crisis Center
- Montgomery County Food Council

- Montgomery County Holiday Giving Project
- Montgomery County Local Behavioral Health Authority
- Mid County United Ministries (MUM)
- Ministries United Silver Spring/Takoma Park(MUSST)
- National Alliance on Mental Illness
- Nonprofit Montgomery
- Potomac Care Pharmacy
- Shepard's Table
- RI International
- Story District
- The Arc Montgomery County
- The Coordinating Center
- VASAP
- Vesta

## FUNDERS

### FOUNDATIONS

- Clark-Winchcole Foundation
- if – A Foundation for Radical Possibility
- Delta Dental Community Care Foundation
- Eagle Bank Foundation
- Kaiser Permanente National Community Benefit Fund

- The Morris and Gwendolyn Cafritz Foundation
- Tides Foundation

### PUBLIC GRANTS

- Maryland Cancer Fund
- Maryland Community Health Resources Commission
- Maryland Department of Health
- Maryland Health Services Cost Review Commission
- Montgomery County Department of Health and Human Services
- U.S. Health Resources & Services Administration
- U.S. Substance Abuse and Mental Health Services Administration

### FAMILY FOUNDATIONS AND CHARITABLE FUNDS

- The Allaben Chambers Family Fund of Vanguard Charitable
- Belle Negrin Davis Family Fund of the Jewish Communal Fund
- Cliff and Deborah White Family Fund of the Greater Washington Community Foundation

- Engel Giving Fund of Fidelity Charitable
- GLADS Giving Fund of Fidelity Charitable
- The Greene-Milstein Family Foundation
- The J & E Myerberg Charitable Fund
- Jonathan E. Hardis Charitable Fund of Fidelity Charitable
- Rossetter Foundation
- Wetterhahn Family Foundation of Fidelity Charitable

### ORGANIZATIONS

- CareFirst BlueCross BlueShield
- Central Maryland Eye Associates
- Holy Cross Church
- North Bethesda United Methodist Church
- Otsuka Cares
- Resnick, Chodorow and Associates
- Temple Shalom

### INDIVIDUALS

- Shawn Bartley
- Francine and Harvey Berger
- Marc Berk
- Ron Bialek
- Allison and Shirley Blakely
- Eshetu Bogale
- Richard and Elizabeth Bohrer
- Michael and Lois Boland
- Lynn and Arthur Booth
- George Borababy
- Marika Brown
- Elizabeth Carrier
- Archana Chidanandan
- Maricel Claro
- Tony Conrad
- Jacy D'Aiutolo
- Julia Doherty
- Elizabeth Arend Dutta
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- Grif Johnson
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- Tristram Kruger
- Paul Lauria
- Isiah and Catherine Leggett
- Thomas and Joan Lewis
- Steven and Hannah Lieberman
- Ravi Melwani
- Roberta Milman
- Lanning Moldauer
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- Donna Perry
- Susan and Steven Raetzman
- Helaine Resnick
- Lenora Rhodes
- Sheila and Peter Rowney
- Mary Rubino
- Kevin and Mary Sexton
- Jerry and Cathy Shier
- K J Doneby Smith
- JD Teitelman
- Hillery Tumba
- Gloria and Richard Verfuert
- Jason Wilcox
- Jean and Carl Withee

## PRIMARY CARE COALITION STAFF (JULY 1, 2021 – JUNE 30, 2022)

- Daniela Acero\*\*
- Flor Alfaro
- Fareed Anjum
- Elsie Ansong\*\*
- Alma Aviles
- Mauricette Ayechemi†
- Eve Bailey-Cerna
- India Ball†
- Iris Beltran\*
- Nilsa Benavides
- Jenny Bernal de Baker
- Eshetu Bogale
- Amanda Bonilla†
- Rosemary Botchway
- Beth Burdette
- Cristina Cabezas
- Maria Caro
- Danielle Carter
- Maricel Claro
- Alyse Cooper
- Blanca Cuervo
- Felicia Davenport
- Elizabeth Arend Dutta
- Diana Escobar
- Meyvelin Escobar
- Sougol Ezzati
- Natalie Fernandez†
- Sarah Frazell
- Kristine Gallagher Sargsyan
- Eveling Gamarra
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- Tabitha Gingerich
- Awilda Gomez-Hernandez\*
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- Jenna Hall
- Yvette Hammond\*\*
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- Adriana Hernandez†
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- Laura Rodriguez Guzman\*
- Karla Rodriguez
- Gabriela Rosales
- Mariana Serrani\*\*
- Joshua Singer
- Sheliese Smith\*
- Shawnda Sullivan\*\*
- Maria Torres
- Grace Townsend
- Hillery Tumba
- Benjamin Turner\*\*
- Leydi Vanegas
- Pamela Vega
- Nelly Velazquez†
- Nikia Wilson
- Sophy Yang
- Miriam Zamudio Coria
- Carolina Zuniga\*

\* Left the organization in FY22

\*\* Left the organization since FY22

† Joined the organization in FY23

## BOARD OF DIRECTORS

### OFFICERS

- Shawn D. Bartley, Esq., Chair
- Kevin Sexton, Vice-Chair
- Steven Raetzman, Secretary
- Ron Bialek, Treasurer

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- Pierre-Marie Longkeng, MHSA\*
- Ravi Melwani
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- Helaine Resnick, Ph.D., M.P.H.
- Jennifer Rodriguez Pippins, MD, MPH\*
- Jessica Wilson
- Ruth Enid Zambrana, Ph.D.†

### EX OFFICIO

- Leslie Graham

\* Resigned from the Board in FY22

† Joined the Board since FY22

**THANK YOU to our donors, funders and supporters everywhere.**





## primary care coalition

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(301) 628-3405 | [PrimaryCareCoalition.org](http://PrimaryCareCoalition.org)

This Annual Report has not been reviewed by the Montgomery County Department of Health and Human Services, Nexus Montgomery Board of Directors, or any of our partners or funders.

## Supporting Providers



## Helping Patients



## Building Systems