



# Policy Honors Program

## Summer 2025 Presentations

### Policy Honors Students

In Order of Presentation:

Gianna Burris Page 2  
MSN Entry Into Practice Student Timestamp: 6:07  
Mentor: Kamila Alexander, PhD, MSN/MPH, BS, RN

---

Angel Nguyen Page 3  
MSN Entry Into Practice Student Timestamp: 12:27  
Mentor: Kathryn Spates, JD, ACNP-BC

---

Maxwell Fontaine Page 4  
MSN Entry Into Practice Student Timestamp: 20:40  
Mentor: Tamar Rodney, PhD, MSN, BSN, BS, RN

---

Joel Clark Pages 5-7  
MSN Entry Into Practice Student Timestamp: 27:55  
Mentor: Naomi Fener, NP, MPH

---

Shinbee Waldron Page 8  
MSN Entry Into Practice Student Timestamp: 36:30  
Mentor: Marian Grant, DNP, BS, RN

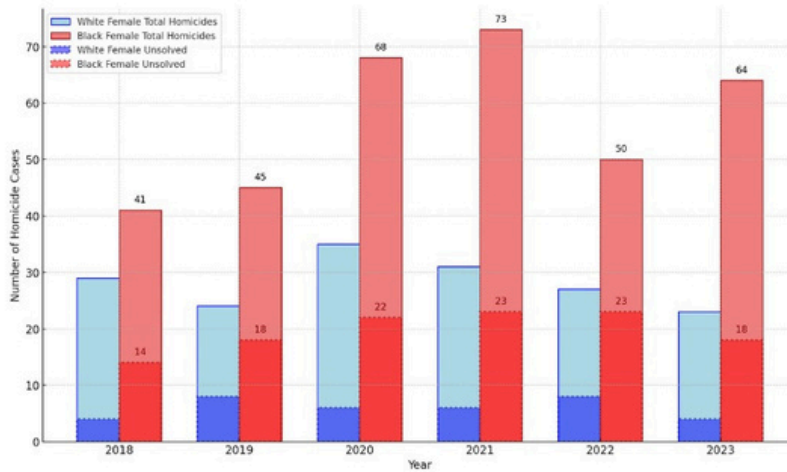
---





## Black Females are nearly 3x more likely to be victims of homicide

Total vs. Unsolved Homicide Cases  
(White and Black Females, Maryland 2018-2023)



## Why are more Black Females going missing?



**118**  
UNSOLVED HOMICIDES

**341**  
HOMICIDES

## From Erasure to Empowerment:

### IMPROVE REPORTING



Enhance data collection and encourage case reporting

### ALLOCATE RESOURCES



Invest in services for prevention, intervention, and support

### INCREASE WORKFORCE TRAINING



Train professionals on identifying and responding to cases

### RAISE AWARENESS

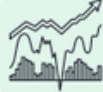


Educate the public and advocate for systemic change

# Federal Pathways for Cost-Effective & Sustainable Healthcare

Angelina Nguyen  
Johns Hopkins School of Nursing  
Policy Honors Program 2025

## The Impact



- US healthcare contributes to ~8.5% of the nation's greenhouse gas emissions.
- These emissions contribute to the disease burden and exacerbate adverse effects on public health.

## Saving Costs



- Environmentally sustainable initiatives can save the healthcare sector \$5.4 billion in 5 years and \$15 billion in 10 years.

## Anesthesia Sustainability



- Select anesthesia gases with low GHG emissions
- Reduce anesthesia waste
  - Low flow anesthesia (LFA)
  - Waste anesthetic gas (WAG) trapping



### Federal & State Legislation

- Tax credits & grants for funding



### Centers for Medicare & Medicaid Services (CMS)

- Value-Based Purchasing Programs
- Bundled Payments



### EPA & DOE EnergyStar

- Benchmarking & tracking
- Certifications

## Next Steps



- Policy Reforms
  - State & Federal
- Creation of a Bill
- Increase Awareness



## Bridging the Gap:

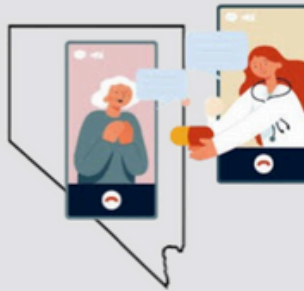
### Improving Mental Health Access In Nevada

#### Why?

- Nevada ranks **LAST** (51<sup>st</sup>) in the nation in **mental health**
- Major **provider shortages**, especially in **rural** regions
- High **suicide** rates and **unmet** behavioral health needs
- Structural barriers: stigma, insurance issues, long waitlists



#### Policy Solutions



- **Telehealth** & broadband infrastructure expansion
- Join & implement interstate licensure **compacts**
- **Train & retain** mental health care professionals

#### What Can You Do?

- **Contact** your legislators & **advocate** for you, your patients, & communities
- **Educate** others on how policies **affect mental health** care and encourage them to **take action**



- Join **groups** that support your cause (ANA, AANP, APNA, & Unions)

For resources & references



# What is Medicaid, and Why Does it Matter to Ohioans?

Medicaid is not a handout, it is a lifeline that provides care to working families, older adults, children, and pregnant women to afford the medical care that they need to stay healthy.

## Medi**CAID**

A joint program between the federal and state government to provide healthcare to those who can't afford it.<sup>1</sup>

vs.

## Medi**CARE**

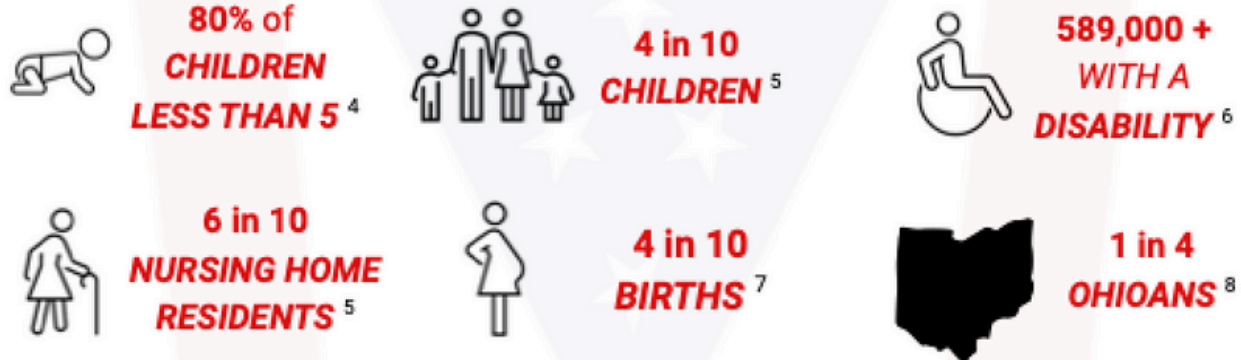
A federally run program for retired individuals over the age of 65.<sup>2</sup>

Medi**CAID** is an entitlement program meant to support people when the unexpected happens. Although states choose a payment model, they must provide coverage for anyone that meets the eligibility requirements, with no waitlist or cap on the number of enrollees. At minimum, states must provide hospital, physician, and long-term care coverage.<sup>3</sup>

We are all one layoff, one accident, or one 911 call away from needing insurance through Medicaid.

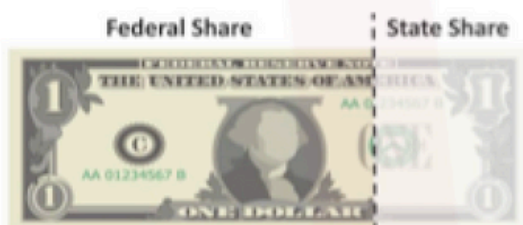
**Life doesn't ask if you're insured.**

**In Ohio, Medicaid Covers:**



**64% of Ohio Medicaid enrollees are working.**

**Building Health & Wealth...**



**Federal Medical Assistance Percentage (FMAP)** is the guaranteed cost covered by the Federal Government. All states **automatically receive at least 50 cents per dollar**, but this increases based on lower per capita income. **In Ohio, the federal government pays 70¢ per \$1 spent.**<sup>9</sup>

Federal matching dollars help state economies by covering costs, bringing in money from 15% of spending, and cutting down on unpaid hospital and clinic bills.<sup>9</sup>

**Proposed Medicaid cuts could cause**

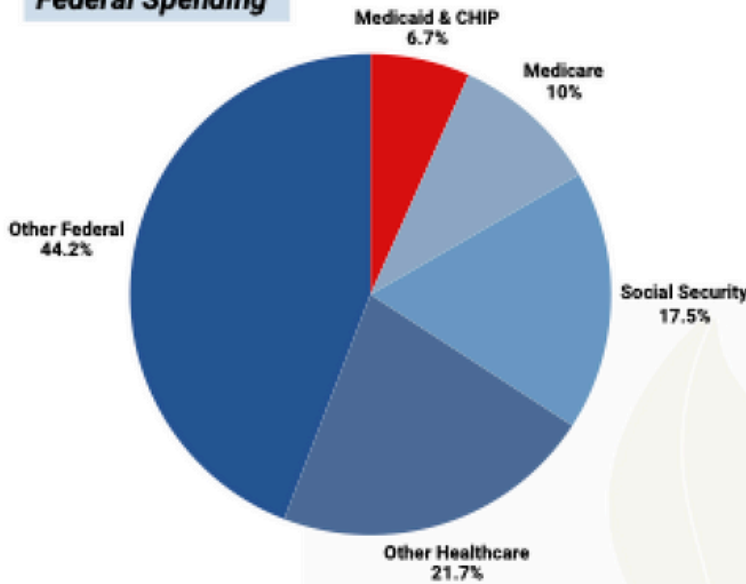
**Ohio to lose \$32 billion in revenue by 2029.**

In Ohio, Medicaid makes up nearly a quarter of state spending.

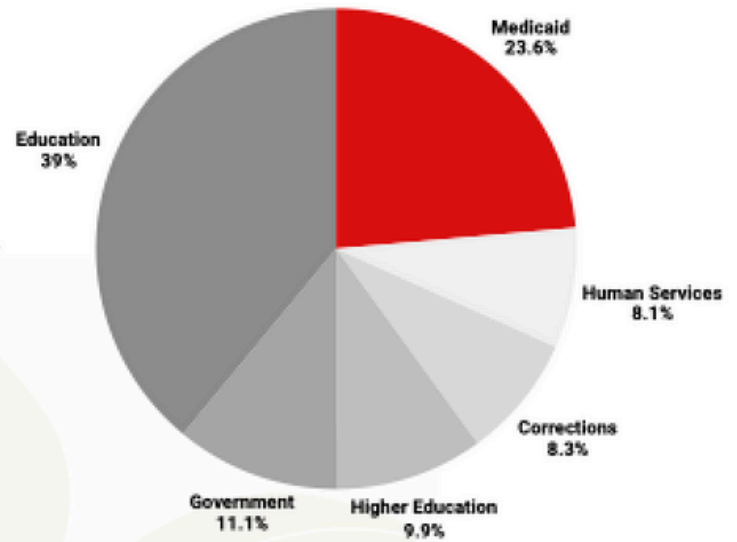
Cutting it would reduce federal funds, leading to cuts in areas such as K-12 education and public safety.

*Federal funds help states function.*

**Federal Spending<sup>9</sup>**



**State Spending<sup>14</sup>**



If federal Medicaid funding is cut, Ohio could lose 15% of its revenue, as many individuals may be unable to afford any remaining medical costs.<sup>9</sup>



Mount Carmel invested **\$250 million** in a new hospital to provide care to the community. Medicaid cuts put that investment at risk.<sup>15-16</sup>



**"Partners for Kids"** ensures that over **400,000 children** in Ohio get the care that they deserve. They ensure that children are screened for preventable, chronic conditions that ultimately will **save the state money while keeping our children healthy.**<sup>17</sup>



Springfield Regional Medical Center is owned by Mercy health, and has over **9,000 active employees**. In 2021, they brought in **\$6 billion in revenue** that went to the district and state.<sup>18-19</sup>

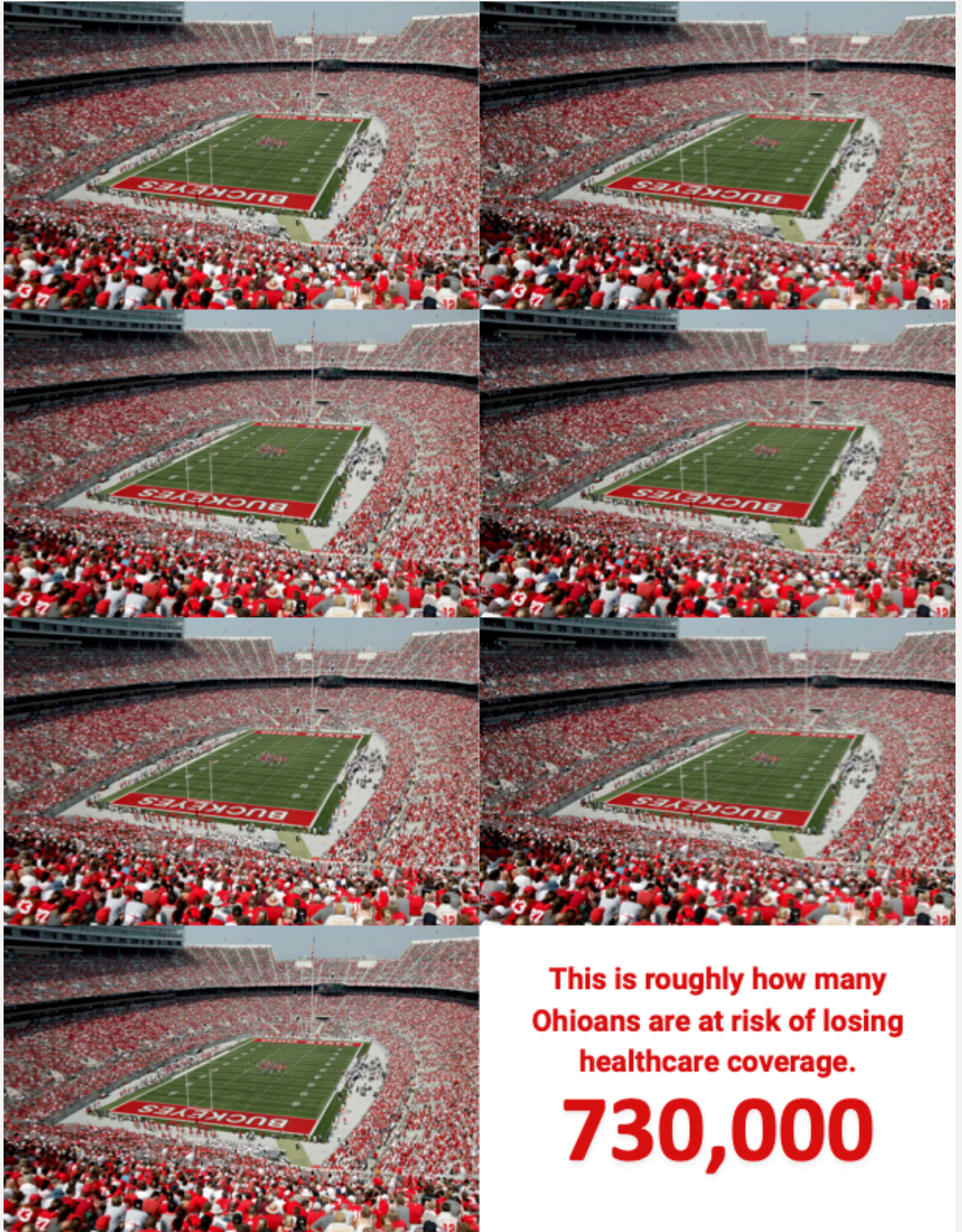
**Ohio healthcare accounts for 15% of state employment.  
Medicaid accounts for 22% of hospital encounter payments.  
Cuts to Medicaid risk these sources of jobs and revenue for the state.**<sup>20-21</sup>

Sen. Jon Husted, Sen. Bernie Moreno, & Rep. Mike Carey,

Your fellow Buckeyes are counting on you!

**We encourage you to oppose the budget reconciliation to ensure that working people, children, and pregnant women get the care that they deserve and to save Ohio's economy!**

Student: Joel Clark  
Mentor: Naomi Fener



# Federal rulemaking: What it is and why it affects YOU

How everyday people shape the regulations that govern their health, safety, and rights

## What is rulemaking?

- Rulemaking = how agencies create or change regulations
- Congress passes laws, agencies fill in the details
- Rules affect everything, especially healthcare



## How rules affect everyday life

Example: the DEA proposed a rule about telemedicine, requiring providers to obtain special licensure, specialization, or board certification to prescribe Schedule II drugs and prescribe at least half of Schedule II drugs in-person. This would reduce access to many areas of healthcare, especially in low-staffed and/or rural areas.

## How Many Americans Know They Can Comment on Federal Rules?

25%

75%

**Who Participates in Rulemaking**  
75% Don't know the public can comment  
25% are aware or have participated in rulemaking



Public Comments Submitted in 2023



Public Comments Submitted in 2024

## DEA Telemedicine Rule, specifically

The Drug Enforcement Administration received a record 38,000 comments on its proposed telemedicine rules.

As a result, the DEA is temporarily extending telehealth flexibilities to 12/31/2025, which would've otherwise expired along with the COVID-19 public health emergency on May 11, 2025.

**YOUR VOICE MATTERS!!**

Anyone can get involved in the federal rulemaking process by submitting a public comment on proposed regulations at [Regulations.gov](https://www.regulations.gov). Your feedback can help shape the final rule.