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Community Health Workers: Implementing a System in Kentucky

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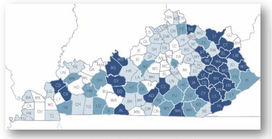
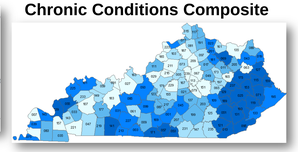
Chronic Diseases Burden in Kentucky

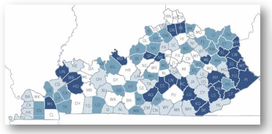
Adult Smoking[1]



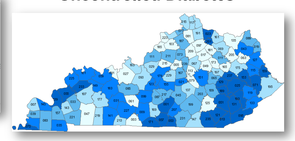
Avoidable Hospital Stays 2011[2]: Chronic Conditions Composite



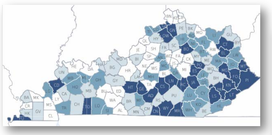
Adult Obesity[1]



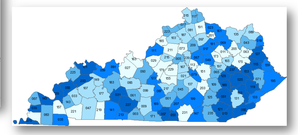
Uncontrolled Diabetes



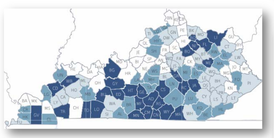
Physical Inactivity[1]



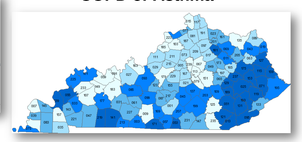
Hypertension



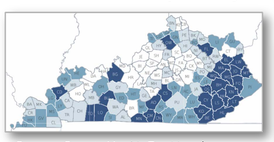
Uninsured[1]



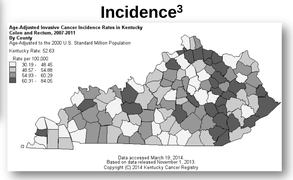
COPD or Asthma



Preventable Hospital Stays[1]



Invasive Colon Cancer Incidence[3]



Source: County Health Rankings[1]
Kentucky Quality Indicators 2011[2]
Kentucky Cancer Registry[3]

Challenges

1. Kentucky Ranks at the bottom in Health Outcomes
2. Medicaid expansion: 300,000 enrollees by end of March 2014
3. ACA recommends shift of medical home from ER to doctor's office
4. Aging baby boomer population
5. Healthcare workforce shortage especially PCPs per Deloitte's Kentucky Healthcare Workforce Capacity Report
6. Worsening of existing disparities and tremendous healthcare costs if 1→5 are not addressed

Table 17 - Selected Kentucky Rankings from America's Health Rankings, 2012.	
MEASURE	RANK (OUT OF 50)
Annual Dental Visit	44
Smoking	50
Obesity	40
Sedentary Lifestyle	43
Children in Poverty	37
Lack of Health Insurance	30
Preventable Hospitalizations	50
Low Birth weight	43
Diabetes	41
Poor Mental Health Days	48
Poor Physical Health Days	49
Cardiovascular Deaths	43
Cancer Deaths	50
Premature Death	44
Infant Mortality	28
Youth Obesity	41
Youth Smoking	43
Cardiac Heart Disease	49
High Cholesterol	43
Heart Attack	48
Stroke	46
High Blood Pressure	46
Preterm Birth	44

Source: http://www.americashealthrankings.org/KY/2012

Community Health Workers: Introduction

- A Community Health Worker (CHW) is a frontline public health worker who is a **trusted member** of and/or has an **unusually close understanding** of the community served. This trusting relationship enables the CHW to serve as **a liaison/link/intermediary** between health/social services and the community to facilitate **access** to services and improve the **quality** and **cultural competence** of service delivery. A CHW also builds **individual and community capacity** by increasing health knowledge and self-sufficiency through a range of activities such as outreach, community education, informal counseling, social support and advocacy. *(American Public Health Association)*
- Recognized as professional members of the health care workforce who effectively address social determinants of health and reduce health disparities *(US Department of Health and Human Services)*
- Roles and Responsibilities:
  - Outreach and community mobilization
  - Community/cultural liaison
  - Case management and care coordination
  - Home-based support
  - Health promotion and health coaching
  - System navigation
  - Participatory research

Community Health Workers and Triple AIM

- CHWs positively contribute towards achievement of the Triple Aim of Healthcare

Improve Patient Experience

- Effective connectors
- Trusted members
- Unusually close understanding of social context of patient's lives
- Understand risk behaviors
- Motivate to engage in risk management
- Strengthen patient's self-efficacy
- Improve medication adherence
- Improve access and quality of care

Improve Population Health

- Integral member of primary care team
- Contribute to chronic disease management through ensuring continuity of care, coordination of care and overall quality of care
- Increase use of preventive health services
- Encourage self-care
- Collect accurate patient data and contribute to community based research

Reducing Costs

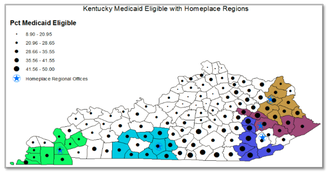
- Coaching patients on preventive health behavior
- Reducing ER visits
- Reducing hospital admissions and readmissions
- Navigate and connect patients to community based primary care services
- Enhancing health provider's understanding of patient needs
- Follow-up and appropriate referrals

Community Health Workers in Kentucky

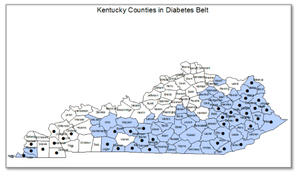
- **Bridge (El Puente) Program:**
  - Designed to increase access to primary care, dental and mental health services for low-income, uninsured or underinsured residents in a service area that includes Montgomery, Bath and Menifee counties in Kentucky
  - 2006-2011: enrolled nearly 700 people, 98% were Latino. 620 medical encounters, 513 dental encounters, and 80 mental health encounters provided. 33 promotoras were trained who provided 726 home visits and outreach encounters
  - 2011-2012: CHW model expanded to the larger low-income, uninsured Appalachian population in the service region
  - Funding: "Soft Monies" grant funded

Community Health Workers in Kentucky

- **Kentucky Homeplace:**
  - Mission: provide medical, social, and environmental services to Kentuckians
  - Vision: Educate Kentuckians to identify risk factors and use preventative measures to become healthier with knowledge and skills to access healthcare and social systems
  - FY 2001-2013: served over 1200 clients per year, provided over 4 million services, accessed over $256 million services and medications
  - Funding: "Soft Monies"; grant based



Kentucky Medicaid Eligible with Homeplace Regions



Kentucky Counties in Diabetes Belt with Homeplace Regions

Health Outcomes	Kentucky	Kentucky Homeplace	Kentucky Homeplace Medicaid Eligible
Obesity	30.4%	47.6%	48.4%
Diabetes	10.8%	31.7%	29.7%
High cholesterol	41.3%	50.2%	46.2%
Physical Inactivity	29.3%	67.6%	67.6%
Smoking	29.0%	35.1%	40.5%
Poor mental health days	5.0%	17.2%	17.3%
Heart disease	5.9%	17.3%	13.7%

Kentucky Health Disparities

Community Health Workers at Homeplace

Opportunities for Community Health Workers in ACA

- Definition of Community Health Workers in the Affordable Care Act *(§5313)*
- Reimbursable services under ACA:
  - Community Health Teams to Support the Patient Centered Medical Home *(§3502)*
  - Patient Navigator Program *(§3509)*
  - National Diabetes Prevention Program *(§10501)*
  - Medicaid Incentives for the Prevention of Chronic Diseases *(§4108)*

Medicaid Reimbursement for Community Based Prevention

- The Centers for Medicare and Medicaid Services (CMS) created a new rule which allows state Medicaid agencies to reimburse for preventive services provided by professionals that may fall outside of a state's clinical licensure system, as long as the services have been initially recommended by a physician or other licensed practitioner
- Preventive services means services recommended by a physician or other licensed practitioner of the healing arts acting within the scope of authorized practice under State law to—
  - Prevent disease, disability, and other health conditions or their progression;
  - Prolong life; and
  - Promote physical and mental health and efficiency
- *It is up to each State to decide whether to pursue this option. States that chose to move forward will need to submit a Medicaid State Plan Amendment to CMS*

Opportunities

- Examples of services by non-licensed providers that could potentially be reimbursable by Medicaid:
  - Care coordination and educational counseling
  - Home visiting
  - Group health education
  - Community health worker services, such as asthma education to Medicaid enrollees
  - Lactation consultation
  - Developmental screening done by trained consultants in child care centers
  - YMCA diabetes prevention program

Barriers

- Develop standardized scope of practice for CHWs
- Develop standardized competency based training curriculum and certification
- Addressing State Medicaid agency bandwidth, churning and competing priorities
- Educating providers about this change and working with them to develop referral relationships with new providers/programs
- Determining how to bill

Plan of action

- Formation of advisory board/alliance: Community Health Workers of the Commonwealth
- Four workgroups:
  - **Scope of Practice and Workforce Development:** Develop standardized scope of practices, and determine preferred CHW attributes
  - **Training and Credentialing:** Finalize training curriculum, methodology, and delivery model, model for continuing education and "grand parenting"
  - **Policy and Financing:** Develop State Medicaid Amendment Plan to include CHWs for reimbursement, finalize a policy brief making the case for CHW reimbursement, initiate return on investment analysis
  - **Communications and Outreach:** Produce one-page summaries for targeted audiences, launch and implement a statewide campaign to increase awareness of CHWs in Kentucky through the Web, and social media

Scope of Practice

1. Advocate for individual and community needs
2. Navigate the health and social systems
3. Network with and coordinate the health and social systems to remove barriers to bridge the gaps
4. Case management and care coordination
5. Health education, preventive health promotion, health coaching
6. Participatory research

Core Competencies

1. Communication and Cultural Competence
2. Advocacy
3. Community Outreach
4. Organizational Skills
5. Teaching and Capacity Building
6. Health Education and Preventive Services
7. Legal and Ethics
8. Practice Internship

National Support and CHW Recognition

- Patient Protection and Affordable Care Act of 2010
- CDC Division for Heart Disease and Stroke Prevention 2011
- National Prevention Council 2011
- HHS Action Plan to Reduce Racial and Ethnic Health Disparities 2011
- HHS National Health Action Plan to Improve Health Literacy 2010
- Agency for Healthcare Research & Quality 2009
- American Public Health Association 2009, 2001
- Institute of Medicine 2003
- American Medical Association 2002