

2023 Rural Population Health Webinar Series

Welcome!

Community Health Workers: Approaches to Health Equity and Payment Strategies

Iris Bicksler | PacificSource
Anne King | Oregon Health & Science University
Summer Prantl Nudelman | EOCCO

May 25, 2023

2023 Rural Population Health Webinar Series

Register for the full series:

- June 22: Building Healthy Communities Through Strategic Partnerships
- July (Date TBA): Setting Up Your Population Health Program
- August 9: What's Next? Learning From Each Other

2023 Rural Population Health Webinar Series

Rural Population Health Grant Program

The Rural Population Health Grant is designed to support programs that address a specific population health need for an identified rural population. A strong application demonstrates an innovative, sustainable and scalable model with strong community partners. This initiative is currently open to Critical Access Hospitals (CAHs), CAH-owned Rural Health Clinics (RHCs), or organizations who are conducting programming in collaboration with a local CAH or CAH-owned RHC.

Request for proposals will be released **June 1, 2023** for the 2023-2024 grant cycle.

Today's Speakers:



Iris Bicksler received her BA in Women's Studies from the University of Oregon in 2000, and is an OHA-certified Community Health Worker, Peer Support Specialist, and Birth Doula. Her 20-year professional career is rooted in health equity with experience in nonprofit management, school-based health centers, affordable housing, and Traditional Health Worker program development. Since 2019, Iris has been the Senior Traditional Health Worker (THW) Liaison for PacificSource Community Solutions, and is the current Policy Chair on the Board of Directors for the Oregon Doula Association. She has two grown children and lives in Eugene with her husband and rescue dog Charlie Brown.



Anne King has spent the last 20+ years focused on understanding and advancing health equity for rural and low-income populations through research, policy, advocacy, and grantmaking. She serves as the Associate Director of the Oregon Rural Practice-based Research Network where she directs a team that provides education and technical assistance for Coordinated Care Organizations, clinics, and their communities. Anne teaches in the Masters of Science in Health Care program at Oregon Health & Science University.



Summer Prantl Nudelman has worked in the health care space for 15 years and has been with EOCCO since its inception in 2012. Over the past 10+ years with EOCCO, she has worked to engage the delivery system to shape and evolve EOCCO policies, has overseen and ensured operational success and efficiencies, and most recently in her current role as Director of Medicaid Programs, she focuses on CCO 2.0 priorities and deliverables, quality initiatives, and metrics performance. The EOCCO THW Liaison and Health Equity Administrator are on Summer's team and together, look to improve the delivery of Medicaid benefits to recipients in Eastern Oregon.

2023 Rural Population Health Webinar Series

Disclosures:

- None of the speakers today have any conflicts to disclose.

Community Health Workers: Approaches to Health Equity & Payment Strategies

5/25/23

Anne King, MBA

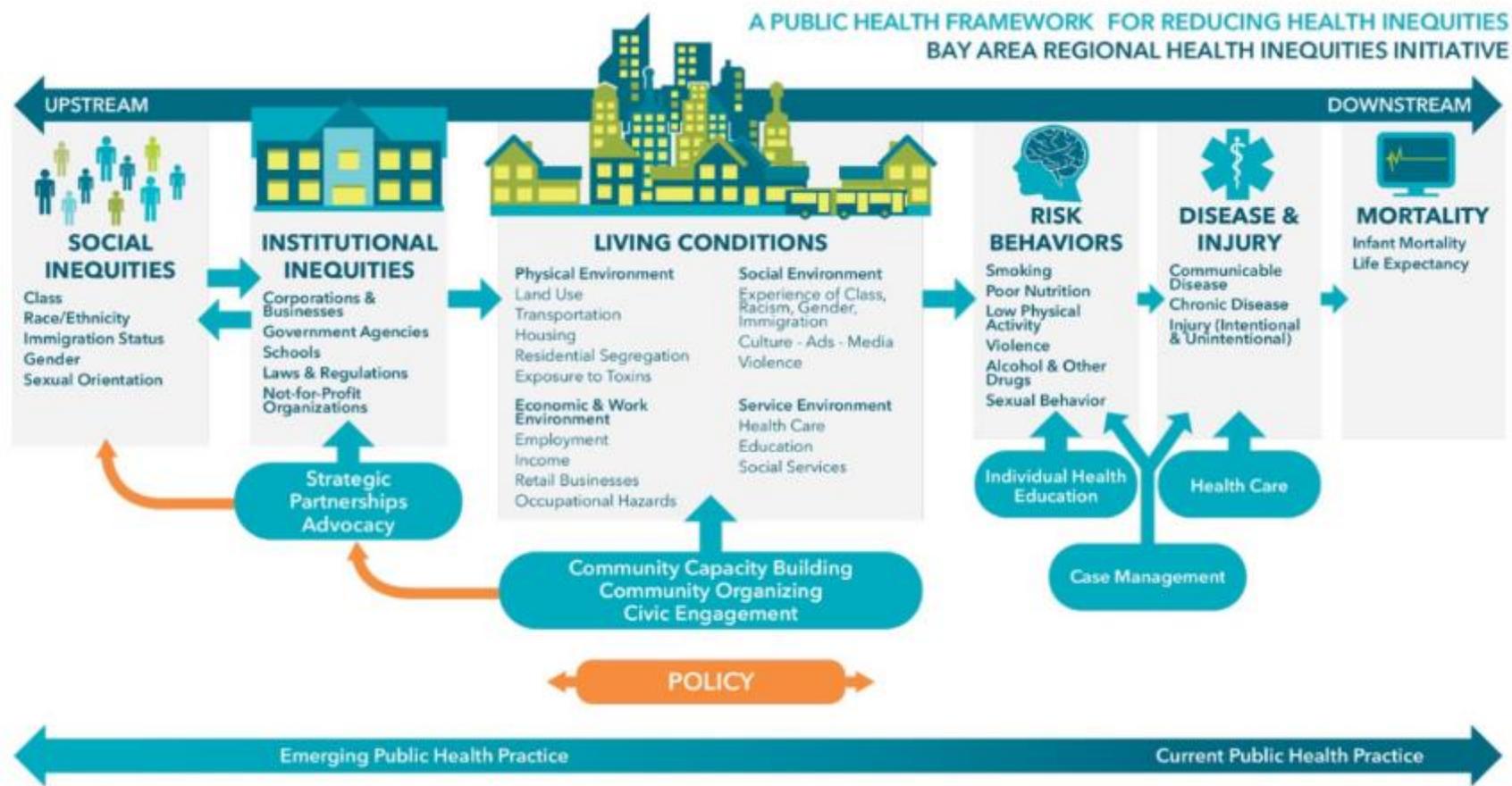
Oregon Rural Practice-based Research Network

Oregon Health & Science University

How Community Health Workers (CHWs) Impact Population Health

- A 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 worker 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.”
 - “...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 CHW definition <https://www.apha.org/apha-communities/member-sections/community-health-workers>

Health Equity Framework



- <https://www.barhii.org/barhii-framework>
- <https://www.aafp.org/about/policies/all/social-determinants-health-family-medicine-position-paper.html>

Diabetes & CHWs



**Race/ethnicity
Class**

Racism
(e.g. redlining,
segregation,
discrimination)

**Community
food
environment**
(e.g. number,
type, location,
and accessibility
of food stores)

**Consumer-
level
environment**
(e.g. healthful,
affordable
foods in stores)

**Individual
food
access and
choices**

**Increased
mortality**

- CHWs not only work to reduce inequities and improve individual and population health, but they also reduce overall healthcare costs. For example, for individuals with diabetes, CHWs have been found to reduce overall healthcare costs by **10%**

- Hill-Briggs et al, 2021. Social Determinants of Health and Diabetes: A Scientific Review. Diabetes Care: <https://doi.org/10.2337/dci20-0053>
- Christiansen et al, 2017

CHW Payment Strategies

- Direct employment
- Grants
- Value-based payment arrangements
- Fee for service payments (regular claims, In Lieu of Services)
- Hybrid, and Multi-sector approaches

Grants

- Foundations
- Federal and state agencies
- Hospital and health systems
- Etc.

Value-based Payment Arrangements

- Reimbursement is generally tied to quality rather than quantity of care

- APM Framework, Health Care Payment Learning & Action Network, 2017
- ORCHWA Payment Model Guide: <https://www.orchwa.org/resources/Documents/ORCHWA%20Payment%20Model%20Guide%202020.pdf>

			
CATEGORY 1 FEE FOR SERVICE - NO LINK TO QUALITY & VALUE	CATEGORY 2 FEE FOR SERVICE - LINK TO QUALITY & VALUE	CATEGORY 3 APMS BUILT ON FEE-FOR-SERVICE ARCHITECTURE	CATEGORY 4 POPULATION - BASED PAYMENT
	A Foundational Payments for Infrastructure & Operations (e.g., care coordination fees and payments for HIT investments)	A APMs with Shared Savings (e.g., shared savings with upside risk only)	A Condition-Specific Population-Based Payment (e.g., per member per month payments, payments for specialty services, such as oncology or mental health)
	B Pay for Reporting (e.g., bonuses for reporting data or penalties for not reporting data)	B APMs with Shared Savings and Downside Risk (e.g., episode-based payments for procedures and comprehensive payments with upside and downside risk)	B Comprehensive Population-Based Payment (e.g., global budgets or full/percent of premium payments)
	C Pay-for-Performance (e.g., bonuses for quality performance)		C Integrated Finance & Delivery Systems (e.g., global budgets or full/percent of premium payments in integrated systems)
		3N Risk Based Payments NOT Linked to Quality	4N Capitated Payments NOT Linked to Quality

Fee-for-Service Payments

- Paying for a provider to provide a specific service
 - In Oregon, CHWs can provide services to Medicaid members on a fee-for-service basis by following guidance from the Oregon Health Authority
 - Guidance includes that CHWs must be certified by the state, registered with the Traditional Health Worker Registry, have a National Provider Identifier and be enrolled as an Oregon Medicaid Provider. Then they can perform services within their scope of practice under the supervision by a licensed provider.

- Oregon Medicaid Fee-for-Service reimbursement for Community Health Workers, https://www.oregon.gov/oha/HSD/OHP/Tools/CHW_Billing%20Guide.pdf

Hybrid and Multi-Sector Approaches

- Of course there are hybrids of payment arrangements, such as grants for start up and overhead costs plus value-based payment arrangements or fee-for-service arrangements layered on top.
- There are also multi-sector approaches, such as government grant funding layered under value-based payment arrangements.
- Ultimately the goal of these arrangements is maximizing value for the population served, and stable funding to support the CHWs and their organization.



eoocco

**EASTERN OREGON
COORDINATED CARE
ORGANIZATION**





eooco

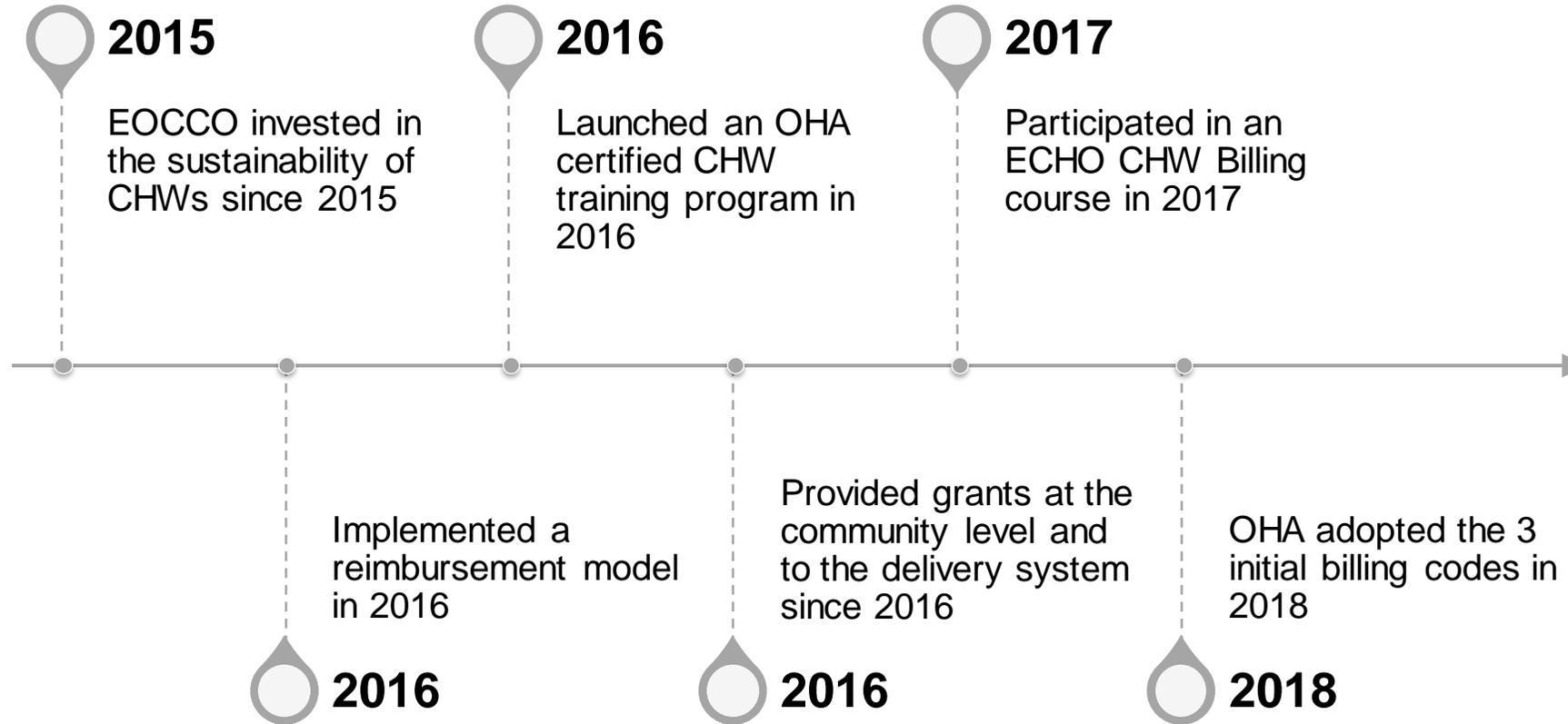
EASTERN OREGON
COORDINATED CARE
ORGANIZATION

EOCCO THW Reimbursement

Summer Prantl Nudelman
Director, Medicaid Programs

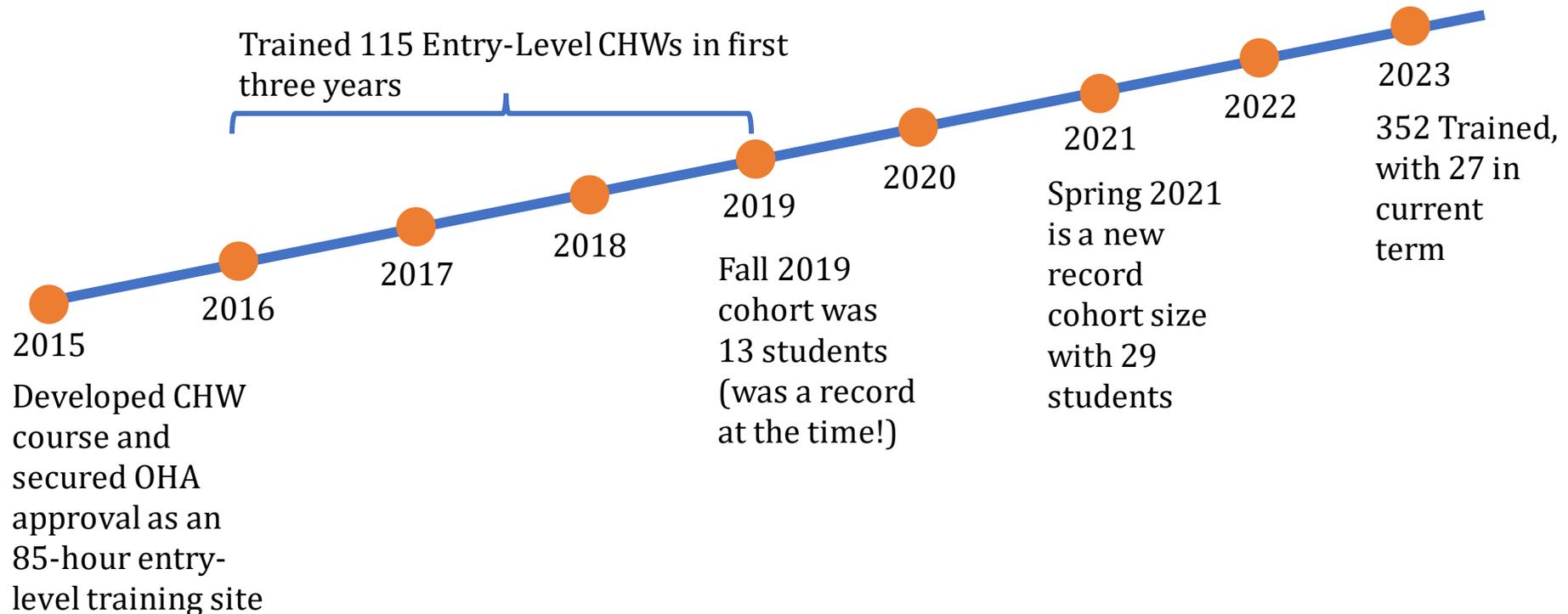


Background



Background

- EOCCO Partnered with Oregon State University (OSU) for an OHA certified CHW Training Program
- EOCCO has contributed \$150,000 annually since 2015



About the CHW Training Program



Prepares individuals to work as an entry-level Community Health Worker (CHW)



“Blended” format: Online self-paced + virtual synchronous + in-person

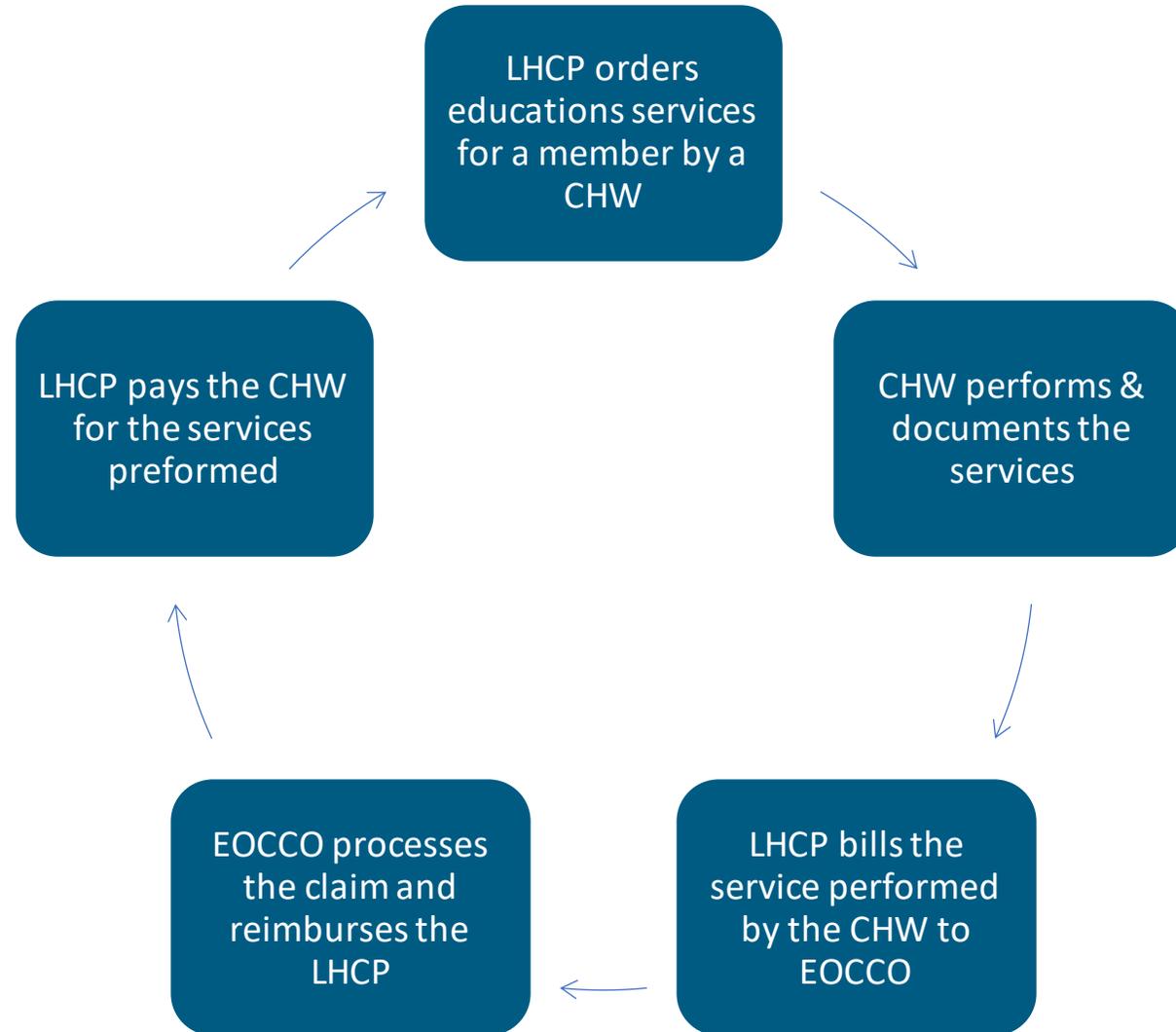


Cost is \$800 for students within the EOCCO region and \$1200 for students from outside the region



Three Continuing Education modules are also offered/available

Life of a Claim



EOCCO Funding Sources

- OHA Fee for service billing
- Medical Home Payments
- EOCCO Shared Savings Model
- Community Benefit Initiative Reinvestment (CBIR) Grants
- Community Reinvestments
 - EOCCO Quality Measure Bonus Payments
 - 12 Local Community Partnership funding
 - Additional investments

Sustainability of encounter billing

CHW works 40
hours a week

1/2 time spend in
billable CHW time

40 units of 98960
per week

27 units per week x
\$21.44 per unit
(approx)= \$579 per
week

52 weeks in the
year

= \$32,436 per year
in reimbursement

Resources



EOCCO CHW Policy

Doula Billing Policy

CHW DMAP
Enrollment and
Reimbursement
Instructions

Doula DMAP
Enrollment and
Reimbursement
Instructions

Community Health Workers DMAP Enrollment and Reimbursement Instructions

STEP 1: BECOME CERTIFIED AND REGISTERED

To be eligible for reimbursement from EOCCO, you must be a certified CHW. For more information on EOCCO's CHW certification partnership program with Oregon State University, please visit their website: [Oregon State University CHW Training Program](#). To learn more about CHW training, certification, and registration, visit the OHA Office of Equity and Inclusion's (OEI) Traditional Health Worker Program website:

- [How To Become a Certified Traditional Health Worker](#)
- [OEI Traditional Health Worker Registry](#)
- [Traditional Health Worker Resources, Policies, and Laws](#)
- [THW-Approved Training Programs and Continuing Education](#)

STEP 2: OBTAINING AN NPI (NATIONAL PROVIDER IDENTIFIER)

To obtain an NPI, apply on the National Plan and Provider Enumeration System website: <https://nppes.cms.hhs.gov/#/>.

- Taxonomy code for CHW is 172V00000X.

STEP 3: BECOME AN OREGON MEDICAID PROVIDER

To enroll as an Oregon Medicaid Provider, follow directions listed on the application to complete the OHA Managed care plan provider application found on the EOCCO website: https://www.eocco.com/-/media/EOCCO/PDFs/oha_provider_application.pdf.

- Provider Type: 13
- Specialty code: 601
- Include your NPI and a copy of your OEI certification

IMPORTANT REMINDERS:

- All fields are required for registration, including social security number and birthdate. Any

Community Health Worker Utilization

Doula Utilization

Peer Services Utilization

Resources

- EOCCO's CHW policy: www.oregon.gov/oha/OEI/Documents/EOCCO-CHW-Policy.pdf
- Scope of THW work: www.oregon.gov/oha/OEI/Documents/Traditional%20Health%20Worker%20Scope%20of%20Practice.pdf
- Oregon Medicaid Fee-For-Service reimbursement for CHW guide www.oregon.gov/oha/HSD/OHP/Tools/CHW_Billing%20Guide.pdf
- Oregon Medicaid Fee Schedule: www.oregon.gov/oha/HSD/OHP/Pages/Fee-Schedule.aspx



eoocco

**EASTERN OREGON
COORDINATED CARE
ORGANIZATION**



Community Health Worker (CHW) Payment Models

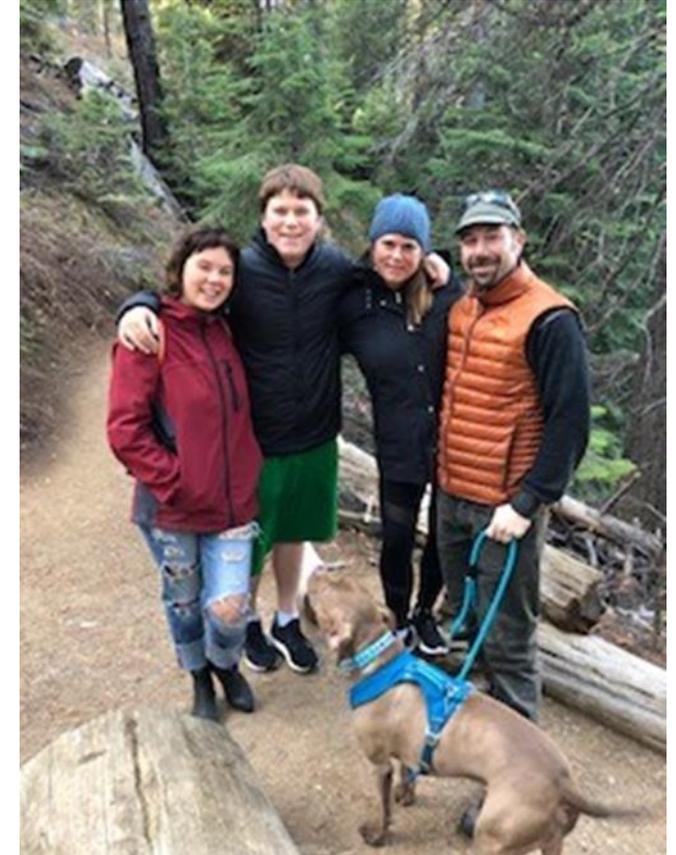
Today we will discuss...

- CHW History
- OHA CHW Training and Certification
- OHA CHW Fee for Service
- PacificSource CHW Value Based Payment
- PacificSource CHW Community Based Contracts
- PacificSource Funding Opportunities

Iris Bicksler, CHW, PSS, Doula

Senior Traditional Health Worker Liaison
PacificSource Health Plan

- Practicing Birth and Postpartum Doula for 20+ years
- Co-Founder of Doulas Supporting Teens 2003-2010
- Professional background in school-based health centers, affordable housing, and THW program development
- Started at PacificSource 2019
- Boards and Commissions:
 - Oregon Doula Association Board of Directors, Policy Chair 2020-present
 - OHA's THW Commission, Doula Representative 2018-2022
 - Daisy Chain (doula nonprofit), Board President 2020-2022
 - Lane Equity Coalition, Chair 2018-2021



I grew up and also raised two kids in Eugene, Oregon. Our family loves traveling, make homemade pizza, and hiking with our rescue dog Charlie Brown.

Community Health Worker (CHW) History

- CHWs have served in their own communities all over the world for centuries
- Historically grassroots healthcare in rural areas lacking services
- Provides care and information in culturally specific way
- Medicaid “square peg, round hole”



OHA Training and Certification

- Traditional Health Worker (THW) certification requires attending 90-hour OHA approved training
- THW certification required for Medicaid billing
- Barriers:
 - THW certification application challenging
 - Trainings can be hard to find/expensive



OHA Fee for Service

- History of how Oregon approved CHW codes
- Since CHW codes released in 2020, clinics continue to struggle to use them
- Codes don't encompass full scope of CHW work
- Supervision requirement a barrier



PacificSource Value Based Payment (VBP)

- PacificSource VBP began in 2022 for Tier 3+ Patient Centered Primary Care Homes (PCPCHs)
- Per member per month (PMPM) + allows fee for service billing
- THW Liaison supports best practice education
- CHW encouraged to work outside clinic walls at full scope of practice
- Reporting requirements based on CCO 2.0 contract



PacificSource Community Based Contracts

- PacificSource payment model for non-clinical community-based CHW and Peer Support services
- Payment for 1:1 services and groups
- Requires contract & THW credentialling (validation)
- Organization checks Member benefits via InTouch for Providers
- Submits monthly Excel template for payment with Member name, ID, Date of Service
- 2022 pilot in Marion/Polk and Lane CCOs, expansion to Central Oregon and Gorge CCO regions in 2023



PacificSource Financial Support Opportunities

- **Healthy Communities Program**
 - Employee-driven community giving program
 - [Investing in Our Communities | PacificSource](#)
- **PacificSource Foundation**
 - 501c3 in Oregon, Washington, Idaho and Montana
 - [Foundation for Health Improvement | PacificSource](#)
- **Community Health Excellence**
 - Workforce development for PacificSource contracted providers
 - [Community Health Excellence Grants | PacificSource](#)
- **Regional health councils**
 - PacificSource holds contract with OHA
 - Joint Management Agreement between health councils and PacificSource
 - Community Governance structure
 - [Willamette Health Council](#)
 - [Central Oregon Health Council](#)
 - [Lane Community Health Council](#)
 - [Columbia Gorge Health Council](#)



Additional Resources

PacificSource Community Solutions Provider Documents

[Documents & Forms | PacificSource](#)

Oregon Health Authority: Office of Equity and Inclusion

<https://www.oregon.gov/oha/OEI/Pages/THW-Become-Certified.aspx>



PacificSource THW Liaisons: Contact Information



Iris Bicksler, CHW, PSS, Doula
Senior Traditional Health Worker Liaison, **Lane CCO**
Iris.Bicksler@pacificsource.com



Nancy Burham, CHW
Traditional Health Worker Liaison, **Central Oregon CCO**
Nancy.Burham@pacificsource.com



Chad Mann
Senior Traditional Health Worker Liaison, **Marion/Polk CCO**
Chad.Mann@pacificsource.com



Samantha Baker
Traditional Health Worker Liaison, **Gorge CCO/Legacy**
Samantha.Baker@pacificsource.com



Questions?

Thank you!

Sarah Andersen
Director of Field Services
ansarah@ohsu.edu