

Community
Health Worker
Medicaid
Reimbursement

Implementing SSB 5693 Sec 211 (103)

Community presentation part 2 May 2023



## Agenda

Background and project timeline

Key priorities and potential barriers

HCA's approach and next steps

Questions



## Background and Timeline



# Community health worker (CHW)

"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."

- CHW Task Force (2019)





## CHWs in Primary Care Supporting Children and Youth

#### **Legislative direction**

2-year grant program Jan 2023 – Jan 2025



Outreach, informal counseling, and social supports for health related social needs



Determine if eligible for federal matching funds



Report on impact and health outcomes



Explore long term reimbursement options for the integration of CHWs in primary care

#### **Policy implementation**



Administer grant to primary care settings serving children, youth, and their families



Collaborate with Department of Health (DOH) to align with CHW core curriculum and new health-specific modules



Conduct a mixed methods evaluation to assess impact and support sustainability efforts



Collaborate with community and partners to gather feedback on reimbursement approaches



Submit an agency decision package for 2024 Legislative Session



## Project Timeline

CHW grant development activities took place June through December 2022 with the grant launch in January 2023. The grant ends in December 2024.

Aug – Dec 2022

 Conduct state interviews

#### Mar 2023

First community presentations



#### Apr – May 2023

 Second Community Presentations

#### Goal: January 2025

 Reimbursement established















Jan – Feb 2023

 Develop project plan

#### **Apr 2023**

- Incorporate community feedback
- Update HCA project team

#### May – June 2023

 Initiate agency decision package process



## Preview of Options

○ All of these options per CMS require a referral from a licensed practitioner

Referral based preventative services
Preventative services associated with licensed practitioner
Working under the scope of a licensed practitioner
Create a CHW state credential to become a licensed practitioner

Administrative tasks

Scope of services

State credential

Supervision

Payment



## **Key Considerations**

- Address gaps
  - Address current limitations for who can access, where, and how
  - Explore approaches to define settings and eligible populations
- CHW perspectives
  - Align approach with CHW defined role and explore models that reflect CHW defined activities
- Requirements
  - Understand additional resources and processes each approach would require
  - ► Examples include administrative tasks, supervision requirements, and state credentials

# Outside the scope of this project

Comparable community-tailored roles, such as peers and doulas

Payors and insurers outside of Apple Health

Does not address all community settings where CHWs work



## Overview of Input Received



## Opportunities for Input

- Community Presentations (March 2023)
  - What is important to you as HCA explores state plan options for CHWs?
  - What do you see as potential barriers for CHWs participating in Medicaid?
  - Do you have concerns about any of the options shared?
  - Would you support HCA's proposed approach?
  - What would you like to learn more about?

- CHW Medicaid Reimbursement Presentation Survey (April 4 - 21, 2023)
  - Respondent information, including experience as a CHW
    - > 60% currently a CHW
    - > 40% advocate for CHW
  - Rank preferences for CHW Medicaid Options
  - What is most important to you as HCA explores State Plan options for CHWs?
  - Do you have concerns or see any barriers to the options?



## **Key Priorities**

Scope of CHW Services Sustainability & Workforce **Inclusion & Equity** 

- Prevention-based, client-centered, responsive care
- Ability to offer services outside clinic and appointments
- CHWs are treated as a trusted member of the care team
- Sustainable options for CHWs
- Livable wages
- Reducing administrative burden and burnout for CHWs
- Pathways for community-based organizations
- Accessibility to CHW services regardless of insurance, setting or CHW employer
  - Specifically respondents are interested in options for reimbursement beyond Medicaid
- CHWs are "protected" by the companies where they work



## **Potential Barriers**

Scope of services

Sustainability and workforce

Inclusion and equity

- Adequate training and support, specific for specialty areas
- Accountability for CHW services
- Ability to access services regardless of insurance type, setting, and CHW employer
- Referral process delaying access to services
- Career pathways to continue to build skills and earning potential
- Timeline to establish being aligned with HCA CHW grant
- Accessible training
- Reasonable qualifications for CHWs
- State credential
  - Concerns around equity, inclusion, and accessibility
  - Alignment with CHW purpose and approach



## HCA Implementation Components

## Components beyond Medicaid

- Aligning implementation with the end of HCA's CHW grant
- Policy development, including:
  - Place of services
  - Qualifications in alignment with CHW competencies
  - Identifying allowable licensed practitioners and supervision requirements
  - Service codes and rate development

- CHWs valued as a trusted members of care teams
- Reducing administrative burden and burnout
- Pathways for community-based organizations
- Protections for CHWs in their workplace
- Adequate training and support, especially for specialty topics
- Referral process for accessing CHW services
- Reasonable qualifications for CHWs

- Sustainable financing for CHW services outside of Medicaid
- Establishing salary and wages for CHWs
- CHW career pathways
- Accessibility of CHW training and professional development
- Development of a state credential for CHWs



# HCA's State Plan Approach and Next Steps



# What do states need to implement new Medicaid services?



- States have three authorities
  - Medicaid State Plan
    - ➤ Agreement with CMS about what services will be covered and how by the state Medicaid agency
  - ▶ Medicaid waiver
    - > Provides authority for states to pilot or implement demonstration projects
  - Managed care
- Funding is a combination of state and federal dollars



## Pathways for CHW Medicaid Reimbursement



### State Plan Amendment

Goal to establish by January 2025

Focuses on CHW reimbursement within current Medicaid delivery settings and established payment options

## Medicaid Transformation Project (MTP) Waiver

Anticipate Center for Medicare and Medicaid Services (CMS) by June 2023

 Additional approvals and distribution of funds will be required prior to initiating payment for CHWs

Goal to accelerate care delivery and payment innovation on health-related social needs, including community-based workforce capacity and payment



## CHWs and MTP Waiver renewal

- Goal: Develop new services for health related social needs (HRSN) and community-based coordination
  - **Primary strategy:** 9 ACHs will contract with community-based organizations (CBOs) to fund existing or create new CHW roles
- What does HCA hope to learn?
  - ► HCA plans to use the waiver to assess and identify strategies for:
    - Building infrastructure and workforce capacity
    - > Partnership with CBOs
    - > Billing and contracting practices for non-traditional Medicaid services
      - > Including reimbursement options for CHWs who are not currently a part of the Medicaid system
    - Sustainable Medicaid funding beyond the waiver period
  - ► HCA will evaluate and elevate payment recommendations for new, non-traditional Medicaid services and community-based coordination
- How will CHWs perspectives be included?
  - ▶ HCA will partner with ACHs in planning incorporation of CHW perspective in implementation planning and design
  - Additionally, CHW input will be incorporated in the formal waiver evaluation



## CHWs and MTP Waiver renewal resources

- Reach out to your <u>regional ACH</u>
- **○**Visit HCA's MTP renewal page
- ▶Email medicaidtransformation@hca.wa.gov



## Community Preferences for State Plan Options



- 74% of responses indicated a preference for prevention services
  - ➤ 45% ranked Option 2 (preventive services associated with licensed provider) #1 preferred option
    - > 71% ranked as first or second choice (26% ranked as #2 preferred option)
  - ▶ 29% ranked Option 1 (referral-based preventive services) as #1 preferred option



#### HCA's State Plan Approach: Preventive services associated with licensed practitioner (Option 2)

- Alignment with feedback received, including:
  - Prevention focused services
  - Reduction of administrative burden on CHWs
  - Encourages collaboration within care teams
  - ► Timeline for implementation
  - Does not require development of a state credential
- Additional benefits of this approach:
  - Expanded CHW services for Apple Health enrollees
  - ► Encourage embedding CHWs in places where enrollees receive care

#### **Administrative Tasks**

- Clinic and/or supervising licensed practitioner would do the following:
- Support adding CHW as one of their Medicaid service providers
- Negotiate adding CHW services to their contracts with MCOs
- Support submitting of claims for CHW services

#### Scope of Services

- CHWs would receive referral internally from clinic and/or supervising licensed practitioner. Services must meet the following:
- Prevent disease, disability, and other health conditions or their progression
- Prolong life
- Promote physical and mental health and efficiency

#### **State Credential**

Not required

#### Supervision

• CHW would practice under the supervision of a licensed practitioner

#### **Payment**

 Payments would go to the clinic and/or supervising licensed practitioner who would establish a contract and employment with CHW



## **Implementation Components**

#### Financing (May 2023 - Spring 2024)

#### Initiated through the Agency Decision Package (DP) process

#### May – June

Write decision package to submit to agency finance

#### July – September

Agency fiscal modeling

#### Spring 2024

State budget finalized

#### Authority (May 2024 – December 2024)

#### Initiated through State Plan Amendment process

#### May - December

Work with Centers for Medicare and Medicaid Services (CMS) on approval for State Plan Amendment (SPA)

(Timeline for SPAs vary, though expect at least 9 months)

Program Implementation (June 2024 – December 2024)

#### June - December

Create rates

Write policy

Develop billing guidance

Configure billing system

Partner with MCOs on implementation



### CHW Medicaid Resources



**CHW Medicaid Reimbursement slides** 



#### **CHW Medicaid Reimbursement FAQ**

 HCA will continue to update with responses to new and pending questions as needed



Community Health Worker State Interview Findings





## Questions?

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