

Community
Health Worker
Medicaid
Reimbursement

Implementing SSB 5693 Sec 211 (103)

Community Presentation March 2023



Agenda

Background and Project Timeline

Apple Health (Medicaid) 101

Learning about CHWs and Medicaid

Future State Plan Options

Community Input

Stay Involved



SSB 5693 Sec 211 (103)

Background & Timeline



Community Health Workers (CHW) in Primary Care supporting children and youth [ESSB 5693, Sec. 211 (103)]

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

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



Include CHW services in Medicaid Transformation Project Waiver renewal as means for possible federal match funds



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



Exploring CHW Reimbursement

ESSB 5693, Sec. 211 (103) states:

"In collaboration with key stakeholders including pediatric primary care clinics and Medicaid managed care organizations, the authority shall explore longer term, sustainable reimbursement options for the integration of community health workers in primary care to address the health-related social needs of families, including approaches to incorporate federal funding."



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

 2nd Community Presentations













Jan - Feb 2023

- Share findings internally
- Develop project plan

Apr 2023

- Incorporate community feedback
- Update HCA project team

May - June 2023

 Initiate agency decision package process



Apple Health (Medicaid)



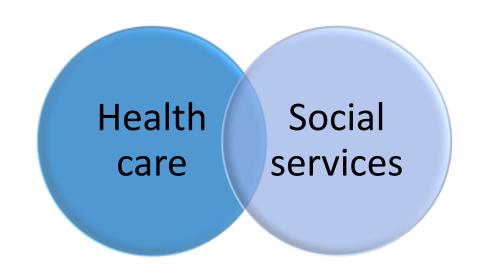
Medicaid = Health Insurance

- Provides coverage for health care and other related services
 - Medicaid is funded by both the federal and state government
 - ► Eligible populations include low-income children and their families, low-income seniors, and low-income people with disabilities.
- Centers for Medicare and Medicaid Services (CMS) = Medicaid at the federal level
 - Establish federal mandates requiring states to cover core (required) benefits
 - Each state has the option of including additional benefits beyond federally required components



Medicaid Services

- States may propose new services, though this is dependent on approval by CMS
 - Federal benefit rules constrain the extent to which states can use state plan benefits to address health related social needs*
- CMS implements new standards and policies
 - Approvals for services may change over time as new initiatives and guidance is implemented







What do states need to implement new Medicaid services?



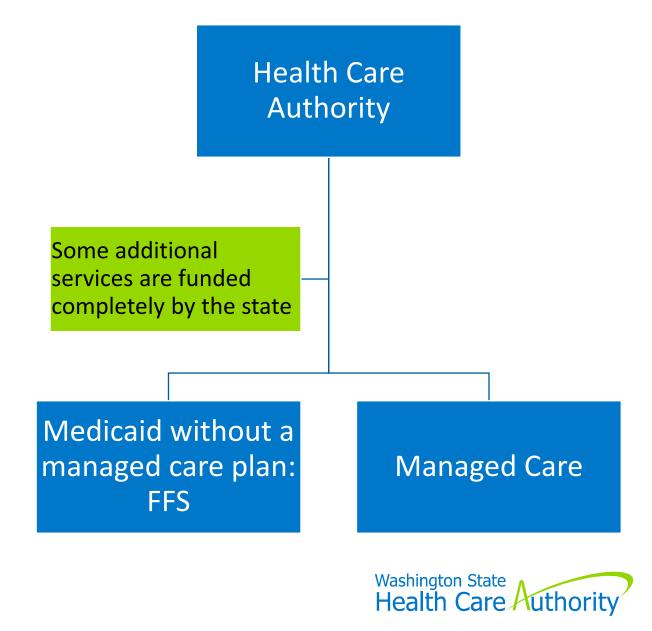
Services under these authorities must meet CMS standards and approval

- 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



Washington Apple Health

- Managed care
 - ► HCA contracts with a private or nonprofit entity to manage cost, utilization, and quality.
- Medicaid without a managed care plan
 - Also known as fee-for-service (FFS)
 - ► HCA directly reimburses providers and agencies
- Most clients under 18 enrolled in Medicaid without a managed care plan are American Indian/Alaska Native and Hispanic.



Community Health Workers and Medicaid



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)





Washington's Current State

Where are CHWs already incorporated into Apple Health:



Federally Qualified Health Centers



First Steps Maternity
Support Services (MSS)





Findings in state Medicaid agencies

Interviewed representatives for state Medicaid agencies and partners like Department of Health

Successes

- Partnerships, including:
 - Sister state agencies
 - CHWs and CHW associations
 - Community organizations
 - Tribal partners
- Collaboration aligning services with the CHW defined role
- Partnership with CHWs in developing guidance

Challenges

- Broad range of scope of practice, qualifications, and functions across settings and communities
- Use of various titles
- Similarities with other community-tailored roles (e.g. doulas, peers, navigators)
- Multitude of different training and professional development agencies
- CHW services are billable through Medicaid; states report low use of available codes



Future State Plan Options

Medicaid reimbursement for CHW services



Phased Approach

- Phase 1: Future State Plan Options
 - ► Focuses on CHW reimbursement within current Medicaid delivery settings and established payment options
 - Phase 2: Medicaid Transformation Project (MTP) Waiver Renewal
 - ▶ Goal: To accelerate care delivery and payment innovation on healthrelated social needs, including:
 - > Services to address health-related social needs
 - > Health equity investments
 - > Community-based workforce capacity and payment
 - Future Phases:
 - Apply lessons learned from initial phases to inform updates to policy, delivery settings, and 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/or doulas

Payors and insurers outside of Apple Health

Does not address all community settings where CHWs work



Preview of Options

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

Option 1	Referral based preventative services
Option 2	Preventative services associated with licensed practitioner
Option 3	Working under the scope of a licensed practitioner
Option 4	Create a CHW state credential to become a licensed practitioner

Administrative tasks

Scope of services

State credential

Supervision

Payment



Option 1:

Referral based preventative services

Administrative Tasks

- CHW will need to complete the following tasks:
 - Enroll as a Medicaid provider
 - Negotiate contracts with MCOs
 - Submit claims for services

Scope of Services

- CHWs must receive a referral from a licensed practitioner and services must meet the following descriptions:
 - Prevent disease, disability, and other health conditions or their progression
 - Prolong life
 - Promote physical and mental health and efficiency

State Credential

Not required

Supervision

Not required

Medicaid Payment

• CHWs will be paid directly when they bill for their services



Option 2:

Preventative services associated with licensed practitioner

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



Option 3:

Working under the scope of a licensed practitioner

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

- There is not a specific list of allowable services
- Services would need to align with the scope of practice for the supervising licensed practitioner

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



Option 4:

Create a CHW state credential to become a licensed practitioner

Administrative Tasks

- CHW will need to complete the following tasks:
 - Enrollment as a Medicaid provider
 - Negotiate contracts with MCOs
 - Submit of claims for services

Scope of Services

- There is not a specific list of allowable service
- Services would need to align with the scope of practice developed in creating the state credential for CHWs

State Credential

Would require the development of a state credential through DOH

Supervision

Not required

Medicaid Payment

• CHWs will be paid directly when they bill for their services



State Credential

- Establishes scope of practice and ethics for an individual to provide certain services
- Indicates that a certain set of criteria have been met, regarding:
 - Education and training
 - Experience
 - Other professional supports
- Types include a registry, certification, or license
 - ▶ Require background checks, immigration status, fees (initial and with renewals), etc.
 - ► Learn more about Washington Department of Health's requirements for credentialed health care providers by reviewing WAC 246-12.

Does DOH's CHW training count as a state credential?

DOH's CHW training was not developed to meet the standards of a state credential.

Individuals who complete the DOH CHW training will receive a certificate of completion for the training.



HCA Proposed Approaches

HCA recommends either:

Option 2

Preventative services associated with licensed practitioner

Option 3

Working under the scope of a licensed practitioner

Reasons for proposing these options:

- Less administrative burden on CHWs through optimizing current Apple Health billing providers
- Does not require development of a CHW state credential
- Provides additional support and collaboration through licensed practitioners
- Encourages embedding CHWs within settings already working with Apple Health enrollees



Community Input

Questions and sharing input



▶ 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?



Stay Involved!



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Questions?

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