

South Carolina Medicaid and the Community Health Worker Program

Agenda

- Overview of the CHW Program
- Midlands Technical College's CHW Curriculum
- Statewide Coordinators
 - Billing & Coding
 - Reporting and Evaluation
 - Contract Content
- Questions
- Breakout Groups



CHW Program Overview

Presented by:
BZ Giese

- Clinical workforce shortage; with or without ACA expansion
- ACA recognizes Community Health Workers (CHWs) as important members of the healthcare workforce
- CHWs working within the health care system can act as extenders to promote health in their communities
- One of the only Medicaid states in the nation to recognize and reimburse services provided by a CHW

SC Strategy for CHWs

1. Payment reform

- CHWs will reach the most underserved populations and work with care team to improve access, quality of care and health outcomes

2. Clinical integration

- CHWs will provide care coordination by linking the patient to a PCP and involving the clinical team and patient in health management

3. Targeting “hotspots”

- CHWS will serve rural areas and underserved health populations

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Goals of Community Health Worker Initiative

Presented By:
Bz Giese

Goals

- To increase value of the partnership between recipients and health care providers
- To decrease emergency room visits, hospitalizations, and hospital readmissions
- To improve Medicaid recipients' engagement in their health care management
- To reduce costs and improve health outcomes

Value in Having a CHW

- Long term costs savings
- Decrease “no shows” for appointments
- Assist practices in meeting health outcome goals
- Improve population health within the practice and the community served
- Consistent with the direction of health care change



Community Health Workers' Roles

Presented by:
Dr. Marion Burton

CHWs will act as members of health care delivery teams to:

- Help patients make and keep appointments
- Promote understanding of health care recommendations
- Teach strategies for managing chronic disease
- Promote understanding and appropriate use medications
- Communicate with patients after hospital discharge

CHWs as members of health care delivery teams (cont.)

- Assist with patient risk assessment or screenings
- Identify patients at risk for poor adherence
- Involve the patient and patient's family in the treatment plan
- Spend a large portion of time in the community or in the beneficiaries' environment
- Establish a trusting relationships with beneficiaries

Examples of Covered Services

Covered services include but are not limited to the following:

- CHW can be supervised through a team approach but the final responsibility for CHW's contributions and outcomes is the responsibility of the designated clinical supervisor
- CHWs are a non-enrolled provider and services must be billed by a Medicaid enrolled provider to receive payment
- Face-to-face with the recipient (individually or in a group) in an outpatient, home/clinic, or other community setting to improve patient self management

Examples of Non-Covered Services

Non-covered services include but are not limited to the following:

- social services such as enrollment assistance, case management, or advocacy delivered by a CHW
- interpreter services
- services to non-Medicaid patients



Who is Eligible to be a CHW?

Presented by:
Allie Gayheart

The employer of a CHW must document the CHW is:

- A member of the community to be served
- At least 18 years of age
- Proof a high school graduate/GED
- Legally able to work in the U.S.
- Passes a SLED background check

Additional recommendations include:

- Interested in health, able to work with medical staff; understands confidentiality requirements
- Comfortable with home visiting
- Good communication and ability to establish trusting relationships
- Prior experience using a computer
- Access to reliable transportation



Partnerships

Presented by:
Allie Gayheart

Primary Care Practices

- Geographic location mix
- Patient mix--ages, ethnic diversity, gender
- Areas of need—low socioeconomic status, high chronic disease levels, health care shortage areas
- Percent of clinic population served by Medicaid
- Mix of types of PCPs: Pediatrics, Ob-Gyn, Family Practice, Internal Medicine
- Capacity to integrate a CHW into care team

Participating Practices

- Carolina Pediatrics
- Palmetto Family Medicine Center
- Lakeview Family Medicine
- Fairfield Medical Associates
- KershawHealth Primary Care Clinics
- Colonial Family Practice
- Greenville Hospital System OB-GYN Center
- Spartanburg Center for Family Medicine
- AnMed Health Williamston Family Medicine
- AnMed Health Anderson Family Medicine
- Family Healthcare-Ware Shoals
- Palmetto Primary Care Physicians, Kingstree
- Palmetto Primary Care Physicians, Lake City
- MUSC Children's Care Network
- CareSouth Carolina Cheraw Center
- Little River Medical Center

Primary Care Practices Partnership

- PCP is defined as: Pediatrics, Ob-Gyn, Family Practice, Internal Medicine, Rural Health Clinic or Federally Qualified Health Center (FQHC)
- Selected primary care practices receive a \$6,000 grant
 - Use to fund the CHW's 6 week structured educational curriculum
 - Remaining funds to be used for CHW integration into practice



Expectations for Primary Care Practices

Presented by:
BZ Giese

Expectations for Clinical Practices


- Identify a CHW candidate and Clinical Supervisor
- Employ the CHW who will attend mandatory training starting April 1
- Manage the grant contract
- Attend quarterly meetings
- Have the clinical supervisor and others in the practice as needed to participate during site visits and communication with the AHEC Coordinator
- Complete reporting requirements
- Participate in evaluation surveys

Expectations of Clinical Supervisor for CHW

- Integrate into clinical care team
- Provide guidance and support
- Clinical supervisor and team define outreach expectations & daily routine
- Maintain ongoing communication
- Arrange for needed supplemental on-site training
- Assure accurate and timely documentation of services

Grandfathering Policy

- “Grandfathering” will be an option for candidates who have served as a CHW in the community at least 3 years
- CHWs who qualify will have the opportunity to take core competency classes to prepare for certification exam
- Must pass the competency test to be certified

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Training

Presented by:
Dr. Diane Carr
Midlands Technical College

Training

- Midlands Technical College will administer curriculum and certify the CHWs
- Tuition is \$3500 for full time 6 week program
- Six week, full time training program includes classroom and in office/community curriculum covering the South Carolina recognized core competencies
- Regional training site locations
- “Grandfathering” is an option for CHWs who qualify

Education site locations

- Midlands Technical College – Northeast Campus
- Greenville Technical College – Barton Campus (downtown)
- Trident Technical College

South Carolina Core Competencies

1. Outreach Methods and Strategies
2. Client and Community Assessment
3. Effective Communication
4. Culturally Appropriate Communication and Care
5. Health Education for Behavior Change
6. Information about Common Chronic Diseases
7. Support, Advocate and Coordinate Care for Clients
8. Apply Public Health Concepts and Approaches
9. Community Capacity Building
10. Writing and Technical Communication Skills
11. Ethics

Course Content

- Introduction to CHW; ethics and legal reporting requirements; role in health care team; boundaries and self-care
- US healthcare system; triple aim; Patient-Centered Medical home; role of primary care; funding of health care
- Assessing client and community needs; active listening; motivational interviewing

Course Content, cont.

- Facilitating behavior change; change models; barriers to change; intervention; helping client set priorities, goals and plan; evaluating progress
- Teaching individuals or groups about health and wellness; adult learning styles
- Medication management; using health care and social service systems
- Cultural humility; respecting differences in perceptions of health and health care

Course Content, cont.

- Basic information about wellness, nutrition and specific chronic conditions: diabetes, cardiovascular disease, mental health and addictions, HIV
- Basic needs of patients served by OB/GYN, pediatrics, geriatrics
- Communication and medical terminology addressed throughout curriculum

Competency Exam for Certification

- All CHWs must pass a competency exam reflective of the 6 week training curriculum in order to become certified as a CHW
- Competency check-offs for skill areas exam
- Remediation offered for those who are unsuccessful on exam

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Statewide Coordination

Presented by:
Dr. David Garr

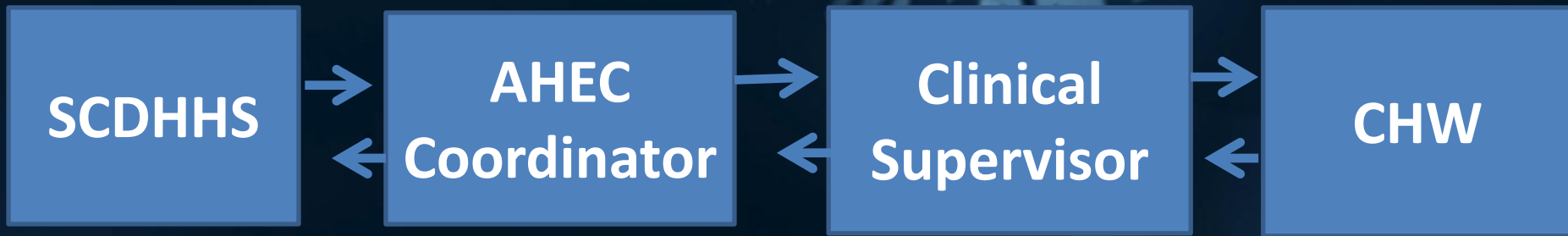
AHEC Coordinator Role

- AHEC has identified part-time Coordinators throughout the state who will work with the CHW supervisor at each practice site
 - Serves as a liaison between practice sites and DHHS
 - Provides guidance and support for each clinical practice
 - Reviews expected outcomes
 - Schedules an initial meeting with clinical supervisor on-site within the first week
 - Communicates at least once weekly in person or by phone during the training and for the next month
 - Communicates once every 2 weeks for the next three months, then monthly by phone or in person
 - Organizes meetings for CHWs to communicate and share best practices
 - Provide assistance as needed

AHEC Center Headquarter Locations

- Greenville
- Florence
- Walterboro
- Lancaster

Communication Chain



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Billing, Coding, Data Collection and Evaluation

Presented by:
Dr. Ana Lopez-Defede

Coding and Eligible Medical Services

Identified CMS approved CPT codes for CHW services :

S9445	Individual Code
S9446	Group Code

- Physician or Nurse Practitioner will bill under their NPI

Individual Encounter Code

- S9445 Patient education, not otherwise classified, non-physician provider, face to face, individual per session- \$20.00 per patient for no more than 4 units per day (30 min units=2 hrs) with no more than 8 units per month (4 hrs)

Group Encounter Code

- S9446 Patient education, not otherwise classified, non-physician provider, face to face, group per session- \$6.00 per patient with a maximum of 5 recipients in a group for no more than 2 units (1 hr) maximum session per day with no more than 8 units (4 hrs) per month

PCP Billing and Reporting

To bill the recipient's record must contain:

- A Physician Order for services signed by a provider with number of units ordered and whether group or individual
- Documentation of date of service, start and end time, group or individual service, number of participants if a group, summary of services or session content, CHW signature and printed name
- Specific quality measures will be determined based on patient population and disease categories

Data Collection and Evaluation

- SCDHHS tracks the billing codes of CHW activities
- In addition to HEDIS quality measures other outcomes measures will be utilized
- Surveys will be implemented to assess provider and CHW satisfaction, skill development and lessons learned
- Interactions with AHEC Coordinator will be evaluated



Contract Content

Presented by:
Zenovia Vaughn

Contract

- Grant funds will be issued on March 31st, 2013
- 1 year contract April 2013-April 2014
- Contract requirements

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Q & A

Breakout Session

- Introductions between Coordinator and practice sites
- Practices identify targeted Medicaid population
- Best communication modes

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Adjourn