



## CY 2021 Traditional Health Worker (THW) Deliverables

### PURPOSE

This document provides instructions for the annual THW deliverables listed below required by Exh. K, Sec. 11 of the [2021](#) CCO Contract. This document also includes the reporting template for the THW Integration and Utilization Plan Update.

1. [THW Integration and Utilization Plan Update](#)
2. [THW Integration and Utilization Data Report](#)
3. [THW Payment Model Grid](#)

These deliverables are due to OHA **by Monday, November 15, 2021**, by email to: [CCO.MCOCDeliverableReports@dhsosha.state.or.us](mailto:CCO.MCOCDeliverableReports@dhsosha.state.or.us)

### INSTRUCTIONS

#### 1. [THW Integration and Utilization Plan Update](#) (Exh. K, Sec. 11 f)

The CCO must provide this update using the template that starts on page 3 of this file. There are 6 sections in the update template. The update should be based on the CCO's THW Integration and Utilization Plan submitted with its CCO 2.0 RFA Application in 2019 and the feedback from OHA on the CCO's 2020 update (due in January 2021). Each CCO was provided with OHA's feedback in a file called "2020 THW Integration and Utilization Plan Evaluation and Feedback Form".

**CCOs are required to provide an update on each area in their THW Integration and Utilization Plan that includes:**

- a. A brief progress update on planned activities in year 1 (2020)
- b. A summary of any challenges to year 1 (2020) implementation and any steps taken to address challenges,
- c. A summary of key successes the CCO would like to highlight, and
- d. Any changes, additions, or updates to the activity for year 2 (2021). OHA recommends that the CCO report on any changes, additions, or updates for any area of its 2020 (submitted in January 2021) for which it **received a score less than "2 – meets requirements**

### **Submission requirements:**

- Must be written in 12-point Arial font with single spacing to meet readability and accessibility standards.
- All pages should be clearly numbered.
- 30-page maximum (5 pages per section) not counting referenced supporting documentation.
  - While OHA has provided generous page limit guidelines to accommodate each CCO's unique needs and experience, OHA encourages CCOs to provide comprehensive responses while being as brief as possible.
- All supporting documentation referenced in the update template must be clearly labeled to reflect the content (e.g., CCOxyz\_LEP\_Policy). Please include document names and page numbers when referencing supporting documentation. Documents submitted but not referenced in the narrative will not be reviewed.

## **2. THW Integration and Utilization Data Report Template (Exh. K, Sec. 11 g)**

The CCO must submit this report using the Excel file provided by OHA. For the 2021 report, the CCO can choose from two versions of the reporting template:

- The “old” version provided with the CCO 2.0 RFA in 2019; or
- The “new” version created in August 2021.

Both versions are available on the CCO Contract Forms [webpage](#) and also on OHA's THW information [webpage](#). The “old” version will not be used after 2021.

The following timelines apply for reporting purposes:

- Responses to items related to **THW Integration** should be as of June 30, 2021 (point in time)
- Response to items related to **THW Utilization** should be for the period of January 1, 2021 - June 30, 2021
  - OHA is not able to utilize its internal data systems, such as CCO encounter data, for THW utilization data because only a portion of such utilization is reported through encounter data.

## **3. THW Payment Model Grid (Exh. K, Sec. 11 b)**

The CCO must submit its grid with the THW payment models utilized by the CCO for 2021. There is no formal template for this grid. However, the CCO is encouraged to model its grid after the table in OHA's [model payment grid](#) on the THW [webpage](#).

## CY 2021 THW Integration and Utilization Plan Update

### Section 1: Integration of THWs into delivery of services (5-page maximum - not including attachments)

#### Progress update:

Please provide a brief progress update on your efforts to *integrate THWs into delivery of services* to your members as planned in your year one THW Integration and Utilization Plan and then answer the remaining questions.

*The needs of the community, capacity, and resources foster the successful integration of health care workers. This year, Yamhill CCO used several platforms to provide information and education to its provider network, plan members, and community stakeholders. The THW program and plan were shared in multiple settings to inform and generate interest of the community and representative locally and statewide. Yamhill CCO further surveyed organizations to assess interest, capacity and supports required to support THWs integration and use, including entities focused on SDoH. Providers who indicated an interest in increasing the capacity and use of THWs are working alongside Yamhill CCO to provide necessary supports for program longevity. Yamhill CCO relies partially on the quarterly delivery system network (DSN) reports ensuring adequate network capacity to improve Members' access to services. the proof doulas into the care delivery system by proving startup momentary funds and support to a local doula hub, [REDACTED] [REDACTED] [REDACTED] [REDACTED] Yamhill CCO does not have plans to not hold direct contracts with any doulas or doula hubs because this strategy best fits organizational needs and enables members to elect a doula of their choosing thereby acknowledging all state-certified doulas as participating providers. Additionally, this process streamlines services between the doula and the member by relying on active OAH certification for doula providers to provide timely care. Yamhill CCO will continue to monitor this process for effective integration and process efficiency to minimize. Furthermore, Yamhill CCO communicates with its members, providers, and the community about all traditional health workers, presents information about THW organizations, and ways to access the different worker types. The network lacks patient health navigators due to the persisting barriers that exist most significantly with the absence of billing codes.*

*For additional information see YCCO THW Payment Grid*

#### Key questions:

1. What, if any, challenges did you encounter in *integrating THWs into delivery of services* and what steps did you take to address the challenges?

*It is exceptionally challenging to recruit for positions in rural towns because of many factors, however, Yamhill CCO did not experience a significant shortage of THWs to result in services interruptions. Very few organizations did express having the capacity to integrate THWs into their organizations.*

## CY 2021 THW Integration and Utilization Plan Update

*The momentum around integrating patient health navigators (PHNs) is lacking considering other worker types provide navigation in addition to the absence of billable codes, generating uncertainty about sustainability. Should billable codes for PHNs exists organizations could sustain programs and compensate THWs at improved wages providing that there are multiple funding streams. Plus, providers and heads of organizations express frustrations with the lack of clarity concerning system challenges with THW integration and reporting requirements. Supervision requirements limit the integration of THWs and THW-led programing in various settings. Additionally, it will be very helpful for organizations to be given instruction and education on what is needed and how to compose a billing infrastructure to best prepare for successful integration.*

### 2. What successes did you have in *integrating THWs into delivery of services*?

*Yamhill CCO used previous years' data to guide expansion projects for its network. In 2020, there were no doulas providing services to members and at present, there are four full-time doulas with plans to increase count. Yamhill CCO awarded grants to build infrastructure for one doula hub locally and awarded three micro-grants to community-based organizations to provide advanced skill training to current THWs and to recruit, mentor, and individuals interested in becoming a THW. The above-mentioned successes align with and meets targets for Yamhill CCO CHIP priorities. There is infrastructure build to support and process billing to Yamhill CCO by THWs Furthermore, Yamhill CCO provided seed funding to another community-based organization to jumpstart THW-delivered services. It is a desire to increase bi-lingual and bi-cultural representation within the workforce.*

*See attachments: Contract Worksheet [REDACTED] and [REDACTED] [REDACTED] CHIP2021\_Cover*

*See updated policy attachments: SVC-010 Traditional Health Worker Program and SVC-003 Systems of Care (pgs. 2&4)*

*See attachments illustrating THW Provider Enrollment and Billing with Yamhill CCO: Doula Billing guidance\_Final*

### 3. Please describe any changes, additions, or updates planned for year 2 (2021) in terms of *integration of THWs into delivery of services*.

*Yamhill CCO hopes to create and execute strategies to engage with networks in its other service counties to encourage the growth and use of THWs in the delivery of care. Presently, Yamhill CCO onboarded personnel to lead and provide expertise in implementing strategies for the long run. YCCO and its partners, like other entities supporting the THW program, still face technical issues with executing items presented in the CCO 2.0 contract, which in some part prevented and or delayed delivery of THW strategies. Too, organizations are reluctant to integrate THWs because of reporting expectations and have voiced that it is burdensome for their network and operations. YCCO awaits OEI-OHA to provide meaningful technical assistance to keep moving the work forward.*

## CY 2021 THW Integration and Utilization Plan Update

### **Section 2: Communicate to Members and Providers about the scope of practice, benefits, and availability of THW services (5-page maximum - not including attachments)**

#### Progress update:

Please provide a brief progress update on your efforts to *communicate to members and providers about the scope of practice, benefits, and availability of THW services* as planned in your year one THW Integration and Utilization Plan and then answer the remaining questions.

*Yamhill CCO uses multiple platforms to engage and inform its Members about services, programs, and directions to accessing them. Information about traditional health worker services is available in the member handbook, the organization's website, and communication materials. This year, Yamhill CCO identified various means to communicate to the community about the availability of doula services by including a questionnaire in the maternity outreach script. The Health Services Department uses community health workers to conduct weekly outreach to members who indicate being pregnant to offer resources and provide information about eligibility for other health services. The newly added questions enhance the prenatal assessment to highlight peer and doula services and offer locations and warm handoffs to medical and social service organizations. Most specifically, the Health Services ensures members are paired with a traditional health worker fitting their goals and needs. Information about traditional health workers is shared on rotations throughout the year so far as to showcase the different THW organizations and service offerings. Yamhill CCO brings awareness to traditional health workers by participating in community outreach and engagement activities and uses its member engagement tools like but not limited to Facebook and LinkedIn to highlight traditional health worker types and access points.*

*The Provider Site-Visits, Provider Newsletters, Peer Coalition meetings, Culturally-Responsive Health Worker Workgroup, Patient-Centered Primary Care Collaborative, and the Service Integration Teams are core groups/routes for sharing and updating YCCO providers about traditional health worker services availability.*

*See attachments: PC3 Agenda\_THW\_8.2021; THW Card\_Final\_ENG; THW Card\_Final\_SPA; YCCO Provider E-news (pg.2); YCCO Provider Handbook 2021 (pg. 18), YamhillCCO\_May\_2021\_SITNewsletter (pgs. 7-9); and THWCommunication\_YCCO\_webpage*

#### Key questions:

1. What, if any, challenges did you encounter in *communicating to members and providers about the scope of practice, benefits, and availability of THW services* and what steps did you take to address the challenges?

## CY 2021 THW Integration and Utilization Plan Update

*There were no significant challenges other than a decline in in-person community engagements and promotional activities. Due to the COVID-19 pandemic, some activities did not occur, or the delivery format was changed, resulting in low engagement rates.*

2. What successes did you have in *communicating to members and providers about the scope of practice, benefits, and availability of THW services?*

*Success in communicating with members and providers is because of strengthening old partnerships and finding ways to create new connections with community organizations. Cross collaborating has brought awareness of Yamhill CCO's efforts to support the THW workforce in its service areas. THW organizations are requested to support ongoing communication activities. Further, Yamhill CCO provides resources for specialized outreach events; the local doula hub connects with at-risk individuals (i.e., having a history of substance use disorder) to provide peer and prenatal education and resources.*

*Yamhill CCO enhanced its electronic provider search directory which now includes all active and certified THWs by name, specialty, location and contact information. The data feeds to this tool are monitored quarterly to provide most updated information to the network and members.*

*See attachment titled Social Media Post\_Engagement*

*See [link](#) to the Provider Directory*

3. Please describe any changes, additions, or updates planned for year 2 in terms of *communicating to members and providers about the scope of practice, benefits, and availability of THW services.*

*Yamhill CCO convened a Member Engagement Workgroup to support strategies for meaningful engagement. The workgroup comprises Yamhill CCO employees whose work contributions are vital to responding to the social health needs of the population. The workgroup provides a foundation for specialized outreach and engagement, monitoring activities, and identifying gaps in member education and participation. The hope is to gain insight to advise the evolution of THW programs and services needed by Plan members.*

## CY 2021 THW Integration and Utilization Plan Update

### Section 3: Increase member utilization of THW services (5-page maximum - not including attachments)

#### Progress update:

Please provide a brief progress update on your efforts to *increase member utilization of THW services* as planned in your year one THW Integration and Utilization Plan and then answer the remaining questions.

*THW information circulates through Yamhill CCO communication channels. Part of the THW promotional activities is to create awareness service availabilities and use of THWs to improve health care delivery. The THW Liaison shares and engages with service providers, community services representatives, and members about internal and external activities and services of the traditional health worker program.*

*See attachment: Social Media Post\_Engagement*

*See [link](#) to the traditional health worker page on Yamhill CCO website*

*Yamhill CCO continues to use various channels to inform the community about the availability of distinct types of traditional health worker programs, and services to boost utilization. Yamhill CCO outreaches to new members to provide information on covered services. Additionally, braided funding methodologies allow consumers of behavioral health and peer services to engage in services requiring a care plan since this has been a barrier indicated by said consumers and supporters of community-based services. Contractual agreements established between Yamhill CCO and its partners provides grounds to review data on member-level data on a quarterly basis.*

#### Key questions:

1. What, if any, challenges did you encounter in your efforts to *increase member utilization of THW services* and what steps did you take to address the challenges?

*THW services require no authorization and thereby presents challenges to tracking the use of some services, specifically for non-claims reports. Community-based organizations do not capture referral and member-level data because this model goes against the organization's model, and some have shown no interest in building the infrastructure necessary to capture and report on data points in the Integration and Utilization Data. Yamhill CCO continues to encourage and aid THW service organizations and providers to identify avenues to improve processes for collecting and reporting data without adding to current system burdens. Equally important, it has been challenging to get THW organizations to provide reports on time and/ or all the requested data components to allow for data comparison.*

## CY 2021 THW Integration and Utilization Plan Update

*Yamhill CCO is committed to working with and continually engaging these organizations.*

2. What successes did you have in your efforts to *increase member utilization of THW services*?

*2021 Utilization Report will serve as baseline measurements monitoring for service use. Some of the baseline data gathered from the past does not always allow for synchronized comparison. Ongoing education and support to organizations will hopefully remedy this hardship in the future.*

3. Please describe any changes, additions, or updates planned for year 2 in terms of your efforts to *increase member utilization of THW services*.

*Yamhill CCO and Plan Partners receive periodic communication about the availability of services which is then shared with the community at large. A flex transportation pilot program during the COVID-19 pandemic providing non-medical services for Members. Utilization of these services suggests THW services are in use and rates to peer-related services have increased.*



## CY 2021 THW Integration and Utilization Plan Update

**Section 4: Implement OHA's Office of Equity and Inclusion THW Commission best practices which includes contracting with community-based organizations. (5-page maximum - not including attachments)**

### Progress update:

Please provide a brief progress update on your efforts to *implement THW Commission best practices, including contracting with community-based organizations*, as planned in your year one THW Integration and Utilization Plan and then answer the remaining questions.

*Yamhill CCO took into consideration feedback from its five-year THW Plan. The organization sought to add THW programs to support Members' additional needs by seeking out community-based organizations with the capacity to provide these services. Yamhill CCO remains in talks with interested organizations and is providing the necessary assistance required to establish an agreement conducive to successful operations. Yamhill CCO recognizes that payment structures and methods offered to providers are unique to meet members' and community needs, and that all involved parties must be able to fulfil reporting requirements tied with funding. In ensuring that there is adequate capacity of providers to meet community needs, Yamhill CCO relies on varying types to financial contributions and supports for traditional health worker organizations by not imposing stringent expectations on data-tied fundings. Employing blended payment models, grants, and such allow to support these organization and providers.*

### Key questions:

1. What, if any, challenges did you encounter in your efforts to *implement THW Commission best practices, including contracting with community-based organizations*, and what steps did you take to address the challenges?

*Billing for THW services does not necessarily follow the same method for traditional claims payments hence, Yamhill CCO examined how to best support the integration of THW providers to meet Members' needs. The organization eliminated the need to credential individual THWs and relies on active OHA THW certification as an attestation for community-based organizations to bill for services with meeting supervisory and regulatory requirements for each THW type. A challenge that arose from claims billing is some THW providers need technical support and advanced teaching about claims billing and paperwork completion in addition to an understanding of OHP reimbursement processes. These challenges have resulted in either the denial of claims, incorrect rates of payment, or delayed payments nevertheless, the Yamhill CCO team operates to resolve concerns, provide education to THW providers as deemed appropriate, and configure operations to monitor for billing processes.*

*See attachments: CHW Billing Guidance\_Final, Doula Billing guidance\_Final, PSS Billing Guidance\_Final, and PWS Billing Guidance\_Final*

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2. What successes did you have in your efforts to *implement THW Commission best practices, including contracting with community-based organizations?*

*Efforts remain the same. See attachment: SVC-011 Wraparound Services (pgs. 5,7&8)*

3. Please describe any changes, additions, or updates planned for year 2 in terms of your efforts to *implement THW Commission best practices, including contracting with community-based organizations.*

*Yamhill CCO updated its THW Program policies to demonstrate supervision competencies and support for THWs.*

*See attachment: SVC-010 Traditional Health Worker Program*

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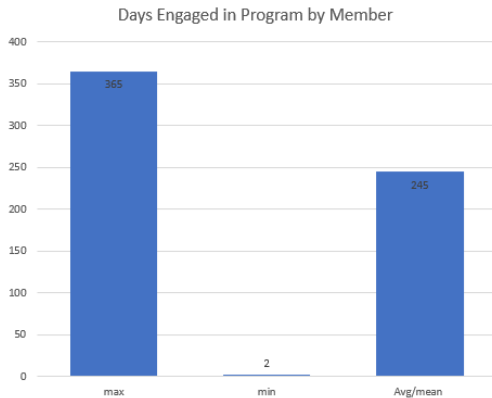
### Section 5: Measure baseline utilization and performance over time. (5-page maximum - not including attachments)

#### Progress update:

Please provide a brief progress update on your efforts to *measure baseline utilization and performance over time* as planned in your year one THW Integration and Utilization Plan and then answer the remaining questions.

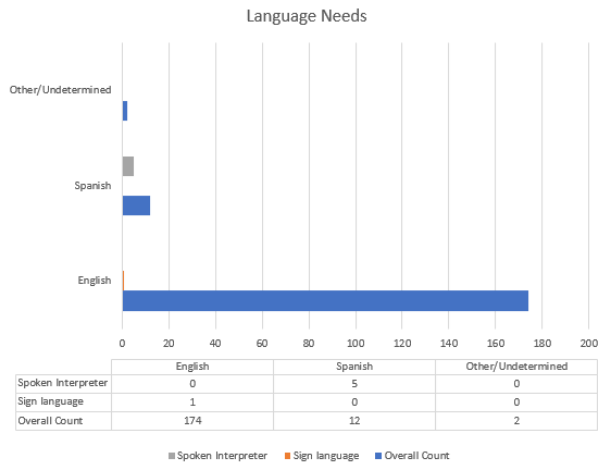
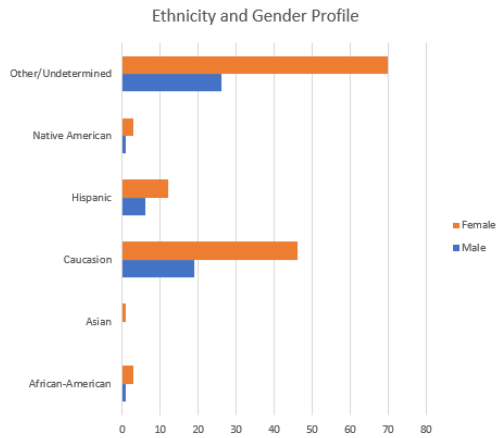
*Efforts remain the same. Yamhill CCO looked at its internal community health hub to review performance and activities. See attachment titled Community Health Hub Program-2021 as an example of how the cco monitors service and performance.*

### Member Engagement Rate in Hub Programs

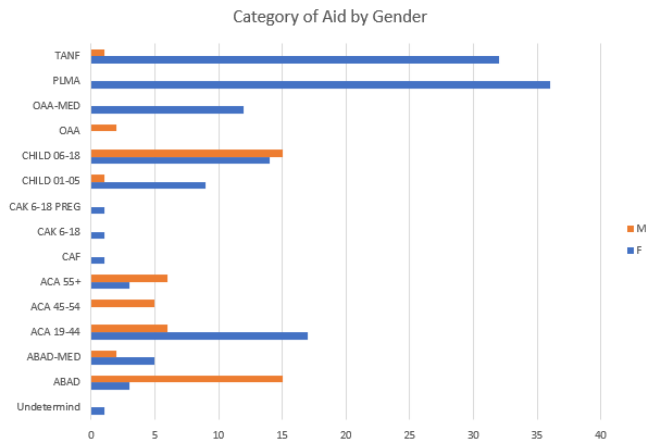
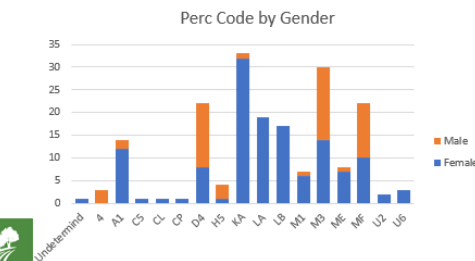
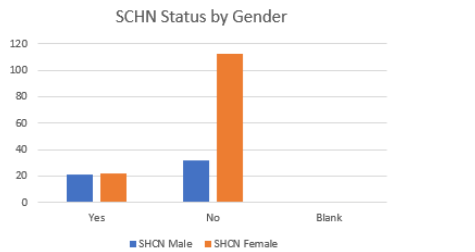


- The minimum number of days are mostly linked to maternity outreach calls; does not necessarily generate a case.
- Members engaged for longer days tend to present with multiple needs.

# 2021 Membership Case Demographics (N=188)



# 2021 Membership Case Demographics



Furthermore, Yamhill CCO tracks demographic identities of the THW providers, and below is a chart analysis for baseline measurement and tracking over time.

Gender/Sex	%
Male	17.4%
Female	56.5%
(Blank)	26.1%

## CY 2021 THW Integration and Utilization Plan Update

Language	%
Bi-languag	10.9%
English	57.6%
(Blank)	31.5%

Race	%
White	10.9%
Hispanic/Latinx	7.6%
Asian	1.1%
Puerto Rican/Latinx	1.1%
(Blank)	79.3%

Setting	%
Community-based	84.8%
Clinical	15.2%

### Key questions:

1. What, if any, challenges did you encounter in your efforts to *measure baseline utilization and performance over time* and what steps did you take to address the challenges?

*THW organizations have shared difficulties collecting utilization data and express guidance in streamlining gathering the data. Additionally, OEI must provide timely feedback and suggestions to inquiries regarding reporting of service utilization as organizations need enough time to develop systems to ensure the correct information is collected and reported on and due to the COVID-19 pandemic and balancing of priorities, Yamhill CCO assumes gaps in reporting from entities employing THWs.*

2. What successes did you have in your efforts to *measure baseline utilization and performance over time*?

*A notable success was engaging with the network to formulate plans to improve data collection and to establish an understanding of criteria for reporting on THW network*

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*activities. 2021 Utilization Report will serve as baseline measurements monitoring for service use. The cco has the foundations to monitor its internal services delivered by the community health hub and has allowed to track and report on referrals and care coordination activities led by community health workers, track program members health impact prior to entering and exiting any of the health hub's programs, and to measure impact based on individual community health workers inhouse.*

3. Please describe any changes, additions, or updates planned for year 2 in terms of your efforts to *measure baseline utilization and performance over time.*

*Yamhill CCO continues to identify and refine THW data tracking to inform plans.*

## CY 2021 THW Integration and Utilization Plan Update

### **Section 6: Utilize the THW Liaison position to improve access to members and increase recruitment and retention of THWs in its provider network. (5-page maximum - not including attachments)**

#### Progress update:

Please provide a brief progress update on your efforts to *utilize the THW Liaison position to improve access to members and increase recruitment and retention of THWs in your provider network*, as planned in your year one THW Integration and Utilization Plan and then answer the remaining questions.

*The THW Liaison has taken roles in different workgroups and advisory groups both in the organization and externally to foster relationship building, provide support and technical assistance to entities. The liaison assisted the workforce on issues around certification, training, and resource identification, and partook in recruitment activities. Additionally, the liaison develops promotional and educational content for the traditional health worker program, monitors quality improvement efforts and, reports on all other related work. The Liaison holds some responsibility in ensuring YCCO and its subcontractors and sub delegators meet contractual agreements and identify solutions to issues that exist. A huge component of this role is serving as a provider and member relations when discussions about traditional health workers arise which includes a monitor for incidents and modeling a corrective action plan in alignment with YCCO policies.*

#### Key questions:

1. What, if any, challenges did you encounter in your efforts to *utilize the THW Liaison position to improve access to members and increase recruitment and retention of THWs in your provider network* and what steps did you take to address the challenges?

*It is exceptionally challenging recruiting for positions located in rural towns because of many factors, however, Yamhill CCO did not experience a significant shortage of THWs to result in services interruptions. The success of liaison to ensure contractual agreements with the traditional health worker program is executed is dependent on the OEI's ability to provide timely guidance, feedback, and technical support. This yet to be the case.*

2. What successes did you have in your efforts to *utilize the THW Liaison position to improve access to members and increase recruitment and retention of THWs in your provider network*?

*This year, Yamhill CCO gained six birth doulas into its provider network. The liaison provided input to organizations on creating job descriptions that are equitable and reflect THW values. The liaison connected with members to give resource navigation to THW programs. In terms of workforce retention, the focus was geared at providing technical assistance and resources to organizations to upskill and recruit workers.*

## CY 2021 THW Integration and Utilization Plan Update

*Added to that was assisting individuals to be grandfathered as THWs and sending out reminders about the renewal of expired certifications.*

3. Please describe any changes, additions, or updates planned for year 2 in terms of your efforts to *utilize the THW Liaison position to improve access to members and increase recruitment and retention of THWs in your provider network.*

*Efforts remain the same.*