



CY 2022 Traditional Health Worker (THW) Deliverables

PURPOSE

This document provides instructions for the THW deliverables listed below required by Exh. K, Sec. 11 of the [2022](#) 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 Payment Model Grid](#)
3. [THW Integration and Utilization Data Report](#)

These deliverables are due to OHA **by Tuesday, November 15, 2022**, by email to: CCO.MCOCDeliverableReports@odhsoha.oregon.gov

INSTRUCTIONS

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

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 2021 update. Each CCO was provided with OHA's feedback. CCOs with multiple contracts must submit separate THW deliverables for each contract.

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 3 (2022)
- b. A summary of any challenges to year 3 (2022) implementation and any steps taken to address challenges,
- c. A summary of key successes in year 3 (2022) the CCO would like to highlight, and
- d. Any changes, additions, or updates to the activity for year 2 (2021). OHA requests that the CCO report on any changes, additions, or updates for any area of its 2022 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 Payment Model Grid (Exh. K, Sec. 11 b)

The CCO must submit its grid with the THW payment models utilized by the CCO for 2022. 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](#). CCOs with multiple contracts must submit separate THW deliverables for each contract.

3. THW Integration and Utilization Data Report Template (Exh. K, Sec. 11 f)

The CCO must submit this report using the 2022 Excel file provided by OHA on the CCO Contract Forms [webpage](#) and also on OHA's THW information [webpage](#). Do not use any prior version of the Excel file. CCOs with multiple contracts must submit separate THW deliverables for each contract.

The following timelines apply for reporting purposes:

- Responses to items related to **THW Integration** should be as of June 30, 2022 (point in time)
- Response to items related to **THW Utilization** should be for the period of July 1, 2021 - June 30, 2022
 - 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.

CY 2022 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 three (2022) THW Integration and Utilization Plan and then answer the remaining questions.

Success for Year 3, YCCO found success in the maintenance of existing THW agreement and expansion of THW agreements with both clinical and community-based agencies who employ THWs. All agreements centered around key goals of furthering the integration of the THW workforce through training development, and certification; providing technical assistance and resources for expanding organization infrastructure; and ensuing appropriate THW resource to meet the community's needs.

Integration through PCP Alternative Payment Contracts

Primary Care Alternative Payment arrangements have a Community Health Worker/Health Coach role identified in the Advanced Primary Care Support section of the agreement that influences the Per Member Per Month payment amount. For 2022, 5 of the 14 primary care clinics holding an APM agreement employ clinic based THWs. These clinic systems include Virginia Garcia Memorial Health Centers, Providence Medical Group, Sunrise Clinic, Hillsboro Pediatrics, and Northwest Human Services representing approximately 13.5 FTE at the time of this reporting.

County Local Mental Health Authority/Local Public Health Authority Integration:

Inclusion of language in contracts with Yamhill, Polk, and Washington Counties to "Ensure continued utilization and further development of peer services and supports for mental health and substance use disorder consumers through family advocates, youth partners, Peer Wellness Specialists, Peer Support Specialists and Certified Recovery Mentors. Assist in the development of a network of traditional health workers to work with primary care providers, emergency departments, dental providers, and other service providers to aid members in improving overall wellness." Effective January 2022.

Expanded Peer Support Integration:

Agreement with Provoking Hope to support the coordination of potential Peer Support Specialists (PSS) and Certified Recovery Mentors (CRM) with training supports, THW certification, and mentorship support to increase the availability of local certified THW workforce. Effective November 2021.

Expanded Doula Integration:

An agreement with Pacific Northwest Doulas and Yamhill Valley Community Doulas to support the connection of local doulas and potential doulas with training supports, THW certification, and mentorship support to increase the availability of local certified doulas in the workforce. Effective September 2021 and November 2021.

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Integration with Family Core

Yamhill Valley Community Doula joined the local home visiting network that is a resource of Family Core, a program that is a community service network that connects parents with a broad support system to meet challenges head-on and to nurture strong families with children ages 0-5. Provoking Hope, a peer organization was already part of the home visiting network representing an expansion of THW organizations.

Integration for DHS Involved Support:

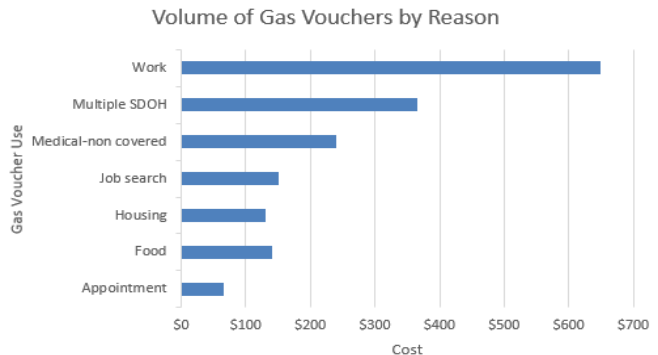
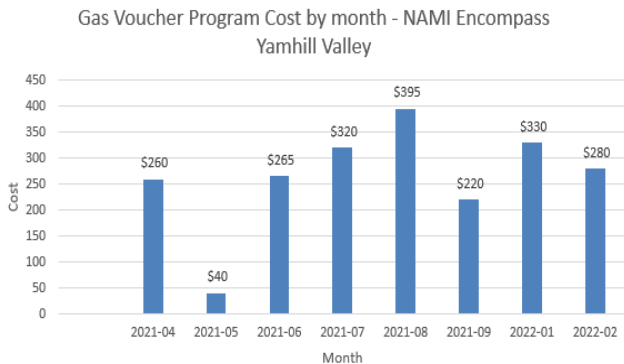
Focused on Yamhill County, an addition of a Peer Navigator resource with Lutheran Community Services, both a clinical behavioral health provider and community support agency. This role added a second staff resource who has lived experience by successfully going through the child welfare system as a parent, becomes certified as a THW, and add to the OHA-OEI THW program registry. Effective July 2021.

Integration for SDOH Needs – Transportation:

In response to the COVID experience in delivering health care, Health Related Services (flexible services) was a significant need. These services included the need for transportation support to go to places like the grocery store for food, the bank, DHS offices, housing authority for housing applications, and to meet and attend community based THW programs and services. After a successful piloting from the prior year, YCCO permanently expanded its non-emergent medical transportation agreement to include paying for rides to community settings to meet with THWs regardless of if those services are encountered (paid through claims system.) Effective July 2021.

Integration for SDOH Needs – Employment and Housing Stopgap:

With rising gas prices was identified as a significant barrier for both operating personal vehicles for both transportation, vehicle sheltering, and climate (heat and cooling) protection. An agreement with National Alliance on Mental Illness Oregon (NAMI) on behalf of a newly forming peer organization Encompass Yamhill Valley received YCCO funding to give out gas vouchers in the community. Peers engaged people in the community, specifically those with housing security concerns and those who a vehicle was their housing and provided support and financial assistance through gas vouchers.



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Integration of THW workforce in Community Health Assessment:

Partnership agreement with Providence Health and Services Foundation to advise the implementation of Community Health Improvement Plan Strategies and represent their agency in making recommendations (THW specific and broader) in the interest of the community at large by providing respectful, honest feedback and collaboration. Effective September 2021.

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?

Challenges arose during the year related to integrating THW services into

Financing the THW model is challenging. Billing codes for THW services are not substantial enough to sustain the position and requires multiple payment methods for each agency (fee-for-service, capacity, value-based payment, project grant funding.) The payment arrangements and program funding support offered was not accepted by OHA as part of the overall CCO budget and rates making it challenging for the CCO to sustain the various funding streams.

Likewise, to with supporting workforce development, certification, and supervision training and support resources must come from a finite admin resource and do not qualify under Health-Related Services spending as previously understood. YCCO is still navigating the recently released guidance Health-Related-Services-Guide-THWs to understand what is allowable and where the funding and support services gaps still exist.

Like other areas of health care delivery, the THW agencies are struggling with workforce shortage gaps related to retention, burnout, and recruitment. Activities listed above and throughout this report sought to address these challenges by increasing contract rates and service allowances, offering self-care and mindfulness training, and recognizing and celebrating the hard work that these individuals do each day to meet member's needs.

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

Despite the ongoing challenges related to the public health emergency and workforce shortage, THW agreements were expanded increasing the awareness and integration of THWs through the healthcare delivery system and community programs.

THW organizations were early adopters of Community Information Exchange (CIE) through the implementation of Connect Oregon, UniteUs. The CCO Community Health Hub, and Wellness to Learn Program went live with the platform in April 2022 along with

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other peer organizations Project Able and Provoking Hope. As it gains momentum, this platform will be a great resource for coordinating closed loop social needs referrals.

Expanding the integration of the various THW programs has a direct Member impact in connected with the resources and supports available to achieve their health and wellness goals. Data systems are still evolving with the hopes of having the ability to measure this impact over time. Information from member satisfaction surveys report

I am treated with respect and dignity at all times - 98.6%

The staff and peers believe I can recover, can grow, change, and succeed – 98.5%

My recovery is based on my stated wants and needs – 93.9%

My culture, values, beliefs, traditions and/or lifestyle are respected here - 98.5%

Support I receive here considers my whole health – 97.1%

Supporting Documents:

- *THW Tracking*
- *YCC Peer Satisfaction Survey 2021_updated*

3. Please describe any changes, additions, or updates planned for year 3 (2023) in terms of *integration of THWs into delivery of services.*

Integration Goals for Year 4 (2023)

Identify financial and business resources to support THW business development (increasing organizational capacity)

Increase training infrastructures and resources to include broader offerings of technical assistance and mentoring programs for agencies to agency support

Continue supporting CIE integration and expand the tool to other THW programs

CY 2022 THW Integration and Utilization Plan Update

Section 2: Communication 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 three (2022) THW Integration and Utilization Plan and then answer the remaining questions.

Communication to Members

The 2022 Member Handbook received updates in the Traditional Health Workers (THW) portion (page 24). The information includes a description of the distinct types of THWs, how to learn more by visiting the corporate website within various webpages, calling Customer Service, or by talking with Primary Care providers or other care team members. THW services are referenced as an OHP member right (page 27, 28, 29), resources to help file a complaint (page 4), as services that do not require a referral (page 33, 37), and as part of a benefits and coverage grid (page 52, 53, 70.)

As part of the annual mailing sent to all members at the beginning of each year, a Member FAQ was developed by the CCO's Community Advisory Council to highlight specific benefits and services most desired by members. The FAQ send out referenced who to call for extra support and if help is needed to file a complaint (YCCO Member FAQ 2022, page 1, 2.)

Along with the member handbook and annual member letter, the next primary source of information is the YCCO corporate website. Embedded throughout the site are pages that reference THW services and how to connect to them. Pages include:

Member Handbook -

<https://yamhillcco.org/members/member-handbook/>

Find a Provider -

<https://yamhillcco.org/members/find-a-provider/traditional-health-workers/>

Provider Resources -

<https://yamhillcco.org/providers/policies-and-forms/>

Community Health Hub -

<https://yamhillcco.org/community-programs/community-health-hub/>

Traditional Health Worker Program -

<https://yamhillcco.org/community-programs/traditional-health-workers/>

Additional member resources developed in year 3 include:

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- *Doula and THW services postcard. Cards were shared with providers, community partner agencies, and the YCCO Community Health Hub to give to members and consumers. The post cards are available in English and Spanish (THW Card_Final 10.7.21 English; THW Card_Final 10.7.2021 SPANISH).*
- *Member Magazine that was mailed out to all members highlighting key services (Member Magazine, page 2,4 English/Spanish)*
- *Updates to the YCCO general brochure on the second page of the Health and Wellness Programs (YCCO Brochure 2022, page 2 English/Spanish)*
- *Member Language Access Toolkit that describes a member's legal rights and what language services are available. Currently available in English, at the time of this reporting, the Spanish version was in development (Member LA Toolkit, page 4)*

An informational video was produced that gives a broad overview of THW services. Distribution of the video was soft launched starting with THW program presentations for providers and community partners

Video Link: https://www.canva.com/design/DAFC2dHhoAY/sFiM5BCInt-PGInGsRW8Sq/watch?utm_content=DAFC2dHhoAY&utm_campaign=designshare&utm_medium=link&utm_source=publishsharelink

Communication to Providers

Broad communication to providers took place throughout the year in multiple formats and settings including the corporate website, Provider Newsletter, live and virtual training events, and community collaborative meetings

The provider newsletter is shared out monthly and included THW relevant topics including the promotion of the THW scholarship and grant award program application, language access and cultural care resources and trainings, and promotion of Community Information Exchange (CIE). See Provide Newsletter 2021-2022 THW for additional content.

September 2021 – Included the State-wide Traditional Health Worker Toolkit and Tip Sheet for Support and Supervision to the YCCO website Provider Policies and forms page <https://yamhillcco.org/providers/policies-and-forms/>

October 2021 – Added provider billing guidance documents specific to four of the THW provider types CHW, Doulas, PSS and PWS.

March 2022 – YCCO sponsored educational event Get Cultured! offered by the Interprofessional Primary Care Institute (IPCI). The event focused on ways to decolonize and decenter whiteness in the healthcare workforce by creating the opportunity to hear and deeply reflect on the voices and lived experiences of BIPOC identifying healthcare colleagues.

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June 2022 - Presentation to Primary Care Providers via the Primary Care Collaborative meeting (PC3 Presentation June.2022)

Supporting Documentation:

- *YCCO-Member-Handbook-2022*
- *YCCO Member FAQ 2022*
- *YCCO Member FAQ 2022_Spanish*
- *YCCO Member FAQ 2022_Large Print*
- *THW Card_Final 10.7.21 English*
- *THW Card_Final 10.7.2021 SPANISH*
- *Member Magazine – Final*
- *Member Magazine - Spanish Draft FINAL*
- *YCCO Brochure 2022*
- *YCCO Brochure 2022_es_updated*
- *Member LA Toolkit*
- *CHW-Billing-Guideance_FINAL-2021*
- *Doula-Billing-guideance_YCCOFINAL_2021*
- *PSS-Billing-Guideance_FINAL-2021*
- *PWS-Billing-Guideance_Final-2021*
- *PC3 Power Point 2021_8_18*
- *PC3 Presentation June.2022*
- *Provide Newsletter 2021-2022 THW*

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?

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Continued limitations with in-person engagement is an on-going challenge. Communicating and promoting services is so much about work of mouth and personal testimonies from people who benefited from these supports. Satisfaction survey data reflects that 52% of the respondents would like to receive services in person siting virtual connections.

“Does not always work”

“It’s just not for me”

“It goes great, I just prefer in person”

Supporting Documents:

- *YCC Peer Satisfaction Survey 2021_updated, page 26-29*

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

The year three communication plan was strong and consistently executed throughout for members, providers, and the community. To highlight one piece of communication as a success, the member magazine was a significant piece of collateral developed. It encourages connection, highlighted the importance of mental wellness, resources available to get extra support both adults and families, and introduces the Health Services Team including Community Health Workers from the Community Health Hub.

3. *Please describe any changes, additions, or updates planned for year 3 (2022) in terms of communicating to members and providers about the scope of practice, benefits, and availability of THW services.*

Strategies remain the same

CY 2022 THW Integration and Utilization Plan Update

Section 3: Increasing 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 three (2022) THW Integration and Utilization Plan and then answer the remaining questions.

Key goals of increasing member utilization of THW services were to increase communication to promote workforce development (providers) and awareness of available resources (members); address social barriers that prevent members from accessing THW services; understanding and documenting baseline services to establish realistic goals for increasing utilization.

A key strategy to increase utilization of THW services is through promotion. See the member communication activities described in section 2. The member magazine was a significant piece of collateral that encourages connection, highlighted the importance of mental wellness, resources available to get extra support both adults and families, and introduces the Health Services Team including Community Health Workers from the Community Health Hub.

To increase utilization of services, YCCO expanded Flexible services trips to include getting a ride to and from peer support services. Transportation was already covered for visits with a Community Health Worker and for a billable Doula service. This expansion closed the gap for Peer Support Specialists and Peer Wellness Specialist services in the community as stated locations.

Another important strategy that was a focus for year 3 was the development of a THW service dashboard. By combing provider data, claims data, REALD data, and contract reporting received through survey tools, YCCO can see volume and type of THW services provided seek to understand strengths and service gaps in the system.

Supporting Documentation:

- *Member Magazine – Final*
- *Member Magazine - Spanish Draft FINAL*
- *THW Service Sites for NEMT.2022*

Key questions:

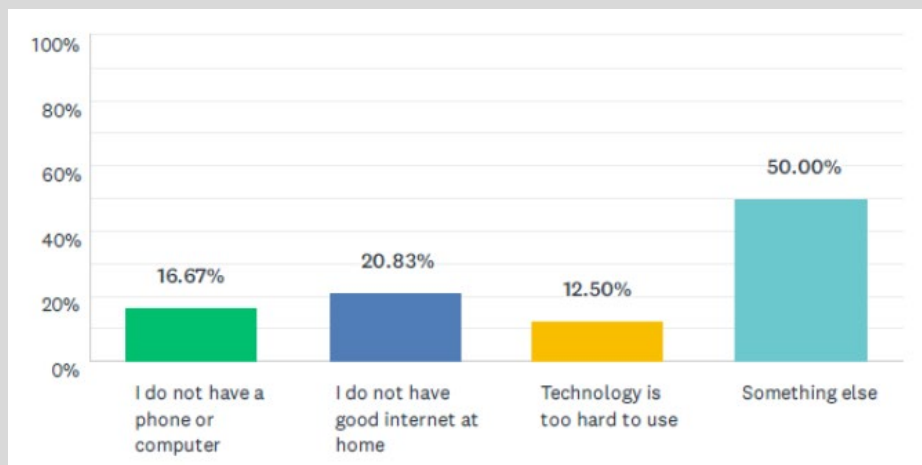
1. What, if any, challenges did you encounter in your efforts to *increase member utilization of THW services* and what steps did you take to address the challenges?

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Service tracking and data system infrastructure is still a challenge in both clinical and community-based settings making it challenging for agencies to report out the information outlined in their contracts. Data about the THW workforce and service utilization comes in different forms including claims, contract reporting spreadsheets, survey responses, and through 1:1 meeting information collection.

To address this challenge, the THW Liaison will enhance and strengthen Community-Based Organization reporting support both through offering technical assistance, reporting tools and data templates, and will explore how the CCO can help financially support one-time data system infrastructure development and data resourcing.

The experience from the public health emergency and the workforce shortage still had a significant impact on organizations and the delivery of THW services. Agencies reported high staff turnover and burnout. Staff vacancies are difficult to fill leaving gaps in the availability of services. Programs still have limited in-person supports and offering services and groups in the virtual setting which does not work for all consumers. The Peer survey reported that over fifty percent (51.9%) preferred to receive services in-person. Reasons why people were not receiving services via telehealth include not having access to a phone or computer, no good internet, technology too hard to use, or other reasons.



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

Success was found in the creation of a Tableau dashboard that displays THW services. For the first round, claims, provider data, and member demographics were the data sources included. As stronger more complete reporting comes in for community-based, non-encounterable services, these data will also be included.

3. Please describe any changes, additions, or updates planned for year 3 (2022) in terms of your efforts to *increase member utilization of THW services*.

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Key goals for Year 4: Inclusion of all THW utilization and provider data in the central THW services dashboard including claims-based and non-encounter CBO service utilization and provider data

Develop strategy to expand regional Patient Health Navigators

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Section 4: Implementation of 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 three (2022) THW Integration and Utilization Plan and then answer the remaining questions.

Commission Best Practices: *YCCO used a variety of contracting, funding, and technical assistance strategies to implement THW Commission best practices.*

Contracts with CBOs - *Contracts described above in Section 1, were executed in reference to this best practice. Contracts were updated with clearer language, agreements were expanded to a greater scope of services, and new agreements were established in the effort to maintain an adequate network of THWs to meet the needs of YCCO members and the community. Reference THW Agency Tracking for more detail.*

Align and retain THW workforce – *YCCO recognizes the importance of promoting sustainability from a financial and workforce prospective. Efforts in this area included expanding billing guidance for more sustainable revenue for clinical-based THW services and providing support to the current THW workforce. Support to the THW network was delivered in three predominate ways 1) direct provider relations from the THW Liaison when a provider expressed challenges with billing and claims or anything related to their contract, 2) Funding a mindfulness training for over 30 THWs through a 25-week self-care course, 3) Sponsored a community event called Peers in the Park, a picnic that brought together 73 guests from the community and 28 peers. Along with this event, YCCO contributed gift card funds to support a drawing specifically for peers as a token of appreciation for the great work they do in the community.*

THW support and supervision – *YCCO created an opportunity for a scholarship/grant funding for THW agencies to apply for financial resources to support overall integration of THW commission best practices and increase utilization of THW services. Three agencies were awarded funds through this program. An additional expanded budget was approved for upcoming years and will be based on application. Engagement with the Peer Coalition and offering trainings like the Mindfulness program contributed to the support and supervision of THW activities.*

Supervision competencies – *Ongoing training support for Member Engagement Supervisor who oversees the Community Health Hub, CWH workforce.*

Understanding THW provider enrollment - *THW dashboard created and developed infrastructure to include in provider DSN reporting; A standard operation procedure was developed to track, verify, and monitor over time THW certification for quality assurance purposes. See THW-001 Traditional Health Workers SOP certification tracking*

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Improve billing and payment procedures – Updated THW billing materials for all worker types paired with direct technical assistance from the THW Liaison to support navigating the enrollment process, understanding billing and claims submission process issues, how to request a reconsideration for denied claims, and the required documentation.

Understanding benefits of integrating individual THWs – Offered member and provider communications in different formats throughout the year that spoke to the importance of integrating THW services and the benefits to members and as a coordinated care system. See section 2 content.

Understanding THW scope of practice – Updating and ensuring THW language is integrated into organizational policies, procedures, and practices. These policies included:

CHW-001 CHW Safety

CM-002 Care Coordination

CM-003 Health-Related Services Policy

SVC-003 Children & Youth Behavioral Services Systems of Care

SVC-004 Network Capacity Service Adequacy and Availability

SVC-005 Behavioral Health Services

SVC-006 Assertive Community Treatment

SVC-007 Psychiatric Facility Care Services

SVC-010 Traditional Health Worker Program

SVC-011 Wraparound Services

Supporting Documents:

- THW Agency Tracking
- THW-001 Traditional Health Workers SOP
- CHW-Billing-Guideance_FINAL-2021
- Doula-Billing-guideance_YCCOFINAL_2021
- PSS-Billing-Guideance_FINAL-2021
- PWS-Billing-Guideance_Final-2021
- CHW-Billing-Guideance_FINAL-2021
- Doula-Billing-guideance_YCCOFINAL_2021
- YCCO Provider Handbook 2022, page 25-26
- THW Folder of policies

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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?

Most challenges have been with community-based agency contracting and contracting and the administrative challenges with reporting outside of a claims system. As well as defining the type of support, both technical and financial support for newly forming entities that need assistance in all areas of the commission best practices.

Sustainable funding for THW provider certification, professional development, and supervisor training was reported as not accepted by OHA as a legitimate expense covered by HRS funding. It is important and part of the CCO commitment to resource and support the THW Liaison in this work. Discussions of where to identify funds for these efforts is underway to ensure continued support.

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

The THW scholarship grant to support THW programs to hire and train more THW and expand the overall workforce was a success in not only the first pilot program, but also to retain on-going funding from the CCO to support this resource over time. This work would not have been possible to support with the integrated HRS/SDOH workgroup to strategically align organizational decisions and allocate resources to support these efforts.

3. Please describe any changes, additions, or updates planned for year 3 (2022) in terms of your efforts to *implement THW Commission best practices, including contracting with community-based organizations*.

Efforts remain the same

CY 2022 THW Integration and Utilization Plan Update

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

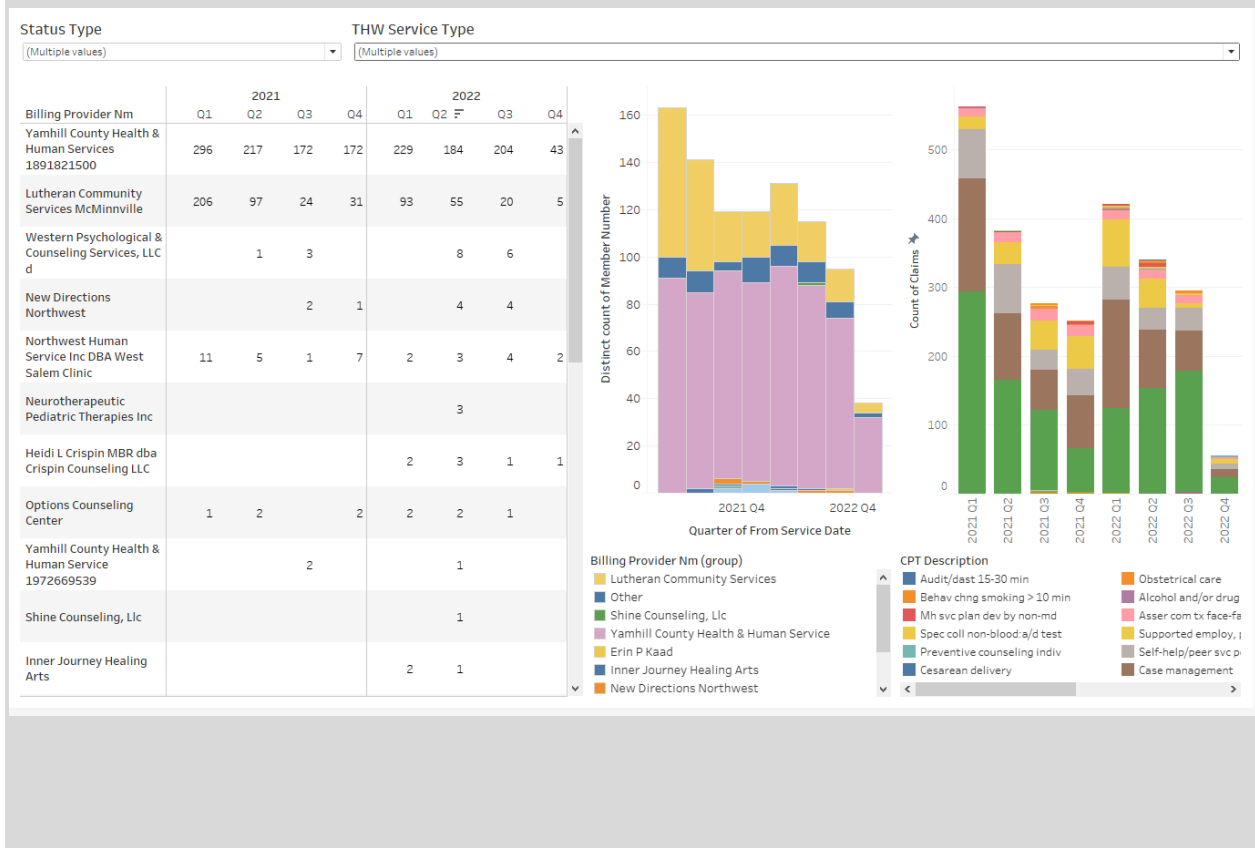
Progress update:

Please provide a brief progress update on your efforts to *measure baseline utilization and performance over time* as planned in your year three (2022) THW Integration and Utilization Plan and then answer the remaining questions.

The updating and inclusion of THW services dashboard has been a significant tool for measuring baseline utilization and to track performance over time. The Tableau-based dashboards allow for tracking and filtering based on the various Functions based on: Service Type, THW Status Type, Services Detail, Member REALD demographics, and any combination of these statuses.

Service Type – All, Community Health Workers, Doula Services, Peer Support/Wellness Specialists

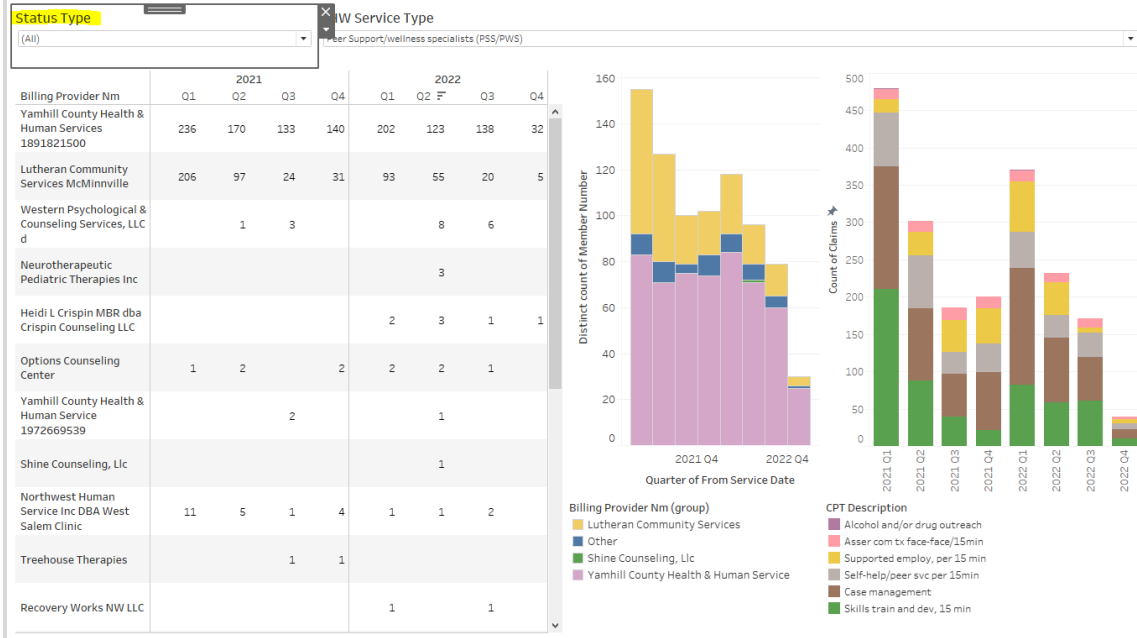
Overall, services have declined in the past year, mostly connected with Lutheran Community Services. This provider has indicated workforce challenges with recruiting and retaining staff due to competitive wages. This issue was addressed in a restatement of their contract executed in June 2022 with the hopes of addressing this issue.



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THW Service Status Type – All, Approved, Denied, Pended

Service Status Type has been a helpful point of measurement to understand the rate by which billed services are denied vs. paid and investigate why certain services or providers are receiving denials.



Services Detail List - including Service data, CPT code, THW service type, CPT Description, Billing Provider, Rendering Provider Name, Status Type, Place of Service, Net Amount, Cumulative Profile

Overall helpful in diving deep to understand services utilized and by the rendering provider and initiating contract discussions and system integration.

| From Service Date | Cpt Code | THW Service Type | CPT Description | Billing Provider Nm | Rendering Provider Full Name | Status Type | Place Of Service | Net Amount |
|-------------------|----------|---|------------------------------|---|------------------------------|-------------|------------------|------------|
| 7/1/21 | H2014 | Community Health Workers | Skills train and dev, 15 min | Yamhill County Health & Human Services 1891821500 | Figueroa Alvarez, Katie | APP | 12 | \$1,505.75 |
| | | | | | | | 53 | \$53.25 |
| | | | | | | | 99 | \$557.25 |
| | H2023 | Peer Support/wellness specialists (PSS/PWS) | Supported employ, per 15 min | Yamhill County Health & Human Services 1891821500 | Gallagher, Frances E | APP | 53 | \$96.00 |
| | | | | | Zoliner, Meagan | APP | 53 | \$192.00 |
| 7/2/21 | T1016 | Peer Support/wellness | Case management | Northwest Human Service Inc | Davidson, Jessica Lynn | APP | 2 | \$22.56 |
| 7/6/21 | 59400 | Doula Service | Obstetrical care | PNW Doulas LLC | Rubi, Shayna | APP | 21 | \$1,150.00 |
| | | | | | | DENY | 21 | -\$350.00 |
| | H0038 | Peer Support/wellness | Self-help/peer s... | Yamhill County Health & Huma... | Andrews, Hope Elizabeth | APP | 53 | \$120.00 |
| | H0039 | Peer Support/wellness | Asser com tx fac... | Yamhill County Health & Huma... | Duff, Delta Alaina, PMHNP | APP | 53 | \$75.50 |
| | H2014 | Community Health Workers | Skills train and dev, 15 min | Yamhill County Health & Human Services 1891821500 | Figueroa Alvarez, Katie | APP | 2 | \$53.25 |
| | | | | | | | 12 | \$792.50 |
| | | | | | | | 99 | \$554.75 |
| | T1016 | Peer Support/wellness | Case management | Lutheran Community Services | Dudley, Justina | APP | 2 | \$37.50 |
| 7/7/21 | H2014 | Community Health Workers | Skills train and dev, 15 min | Yamhill County Health & Human Services 1891821500 | Figueroa Alvarez, Katie | APP | 12 | \$237.75 |
| | | | | | | | 53 | \$1,011.75 |
| | | | | | | | 53 | \$90.00 |
| | | | | | | | 53 | \$266.25 |
| | T1016 | Peer Support/wellness specialists (PSS/PWS) | Case management | Yamhill County Health & Human Services 1891821500 | Cogswell, Tiffany | APP | 53 | \$159.75 |
| | | | | | Prata, Ricardo B | APP | 53 | \$106.50 |
| 7/8/21 | H0038 | Peer Support/wellness specialists (PSS/PWS) | Self-help/peer svc per 15min | Yamhill County Health & Human Services 1891821500 | Andrews, Hope Elizabeth | APP | 53 | \$30.00 |
| | | | | | Petit, Nancy | APP | 53 | \$90.00 |
| | H2014 | Community Health Workers | Skills train and d... | Yamhill County Health & Huma... | Figueroa Alvarez, Katie | APP | 12 | \$2,219.00 |
| | H2023 | Peer Support/wellness specialists (PSS/PWS) | Supported employ, per 15 min | Yamhill County Health & Human Services 1891821500 | Brooks, Karen, QMHA | APP | 53 | \$288.00 |
| | | | | | Gallagher, Frances E | APP | 53 | \$192.00 |
| | | | | | Zoliner, Meagan | APP | 53 | \$192.00 |
| 7/9/21 | H2014 | Community Health Workers | Skills train and d... | Yamhill County Health & Huma... | Figueroa Alvarez, Katie | APP | 12 | \$317.00 |
| 7/10/21 | H2014 | Community Health Workers | Skills train and dev, 15 min | Yamhill County Health & Human Services 1891821500 | Figueroa Alvarez, Katie | APP | 12 | \$237.75 |
| | | | | | | | 99 | \$973.00 |
| 7/12/21 | H2014 | Community Health Workers | Skills train and d... | Yamhill County Health & Huma... | Figueroa Alvarez, Katie | APP | 12 | \$1,268.00 |

CY 2022 THW Integration and Utilization Plan Update

Member Level equity demographics based on THW Service Type

This dashboard is critical for establishing and tracking SMARTIE goals centered in equity to determine how the various THW programs, providers and services are meeting the various needs of all members. This dashboard will help track not only performance goals, but also expose any unintentional barriers that exists in the system.



Contract reporting and tracking

Supporting Documents:

- [THW Services Dashboard_Tableau](#)

CY 2022 THW Integration and Utilization Plan Update

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?

As data tracking tools and structures continue to develop, the following challenges have been identified:

- *Challenges with tracking referrals and referral source (Self-refer vs. care team vs. other identification method).*
- *Ability to capture Peer Support Services differentiated from Peer Wellness Services given billing codes are the same and the rendering provider listed on the claim is often not the name or certification number of a THW.*
- *Contracted agency capacity to capture in a complete and consistent manner to feed the reporting outline in their agreements. Many of the peer ran agencies lack robust data systems and staffing resource to facilitate reporting outside of service delivery.*

YCCO is actively working to address these data challenges through provider billing technical support and encouragement to enhance billing practices. Is working to integrate the survey and provider contract reporting data that is not billed through the traditional claims and encounter systems and updating agreement language in its contracts to reflect the correct data elements that need to be included to report THE services rendered to have a complete and comprehensive view.

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

Establishing the THW service dashboard described above has been a game changer regarding transparency with organizational data and service data. This dashboard provides the opportunity to truly track over time, to pinpoint gaps, and measure success in reaching specific short-term and long-term goals.

3. Please describe any changes, additions, or updates planned for year 3 (2022) in terms of your efforts to *measure baseline utilization and performance over time*.

Plan goals remain the same.

Short-term actions planned are, based on pain claims, reach out to agencies not holding a direct THW program agreement and inquire on THW workforce and contracting status.

CY 2022 THW Integration and Utilization Plan Update

Section 6: Utilization of 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 three (2022) THW Integration and Utilization Plan and then answer the remaining questions.

For year three, the THW Liaison role has continued deepening the integration and impact of THW practices on the CCO systems and processes. This role participated and presented in different internal and external committees: Quality and Clinical Advisory Panel (QCAP), Behavioral Health Quality Management Committee (BHQMC), Community Advisory Council (CAC), Health Related Services/Social Determinants of Health (HRS/SDOH) Strategy workgroup, Peer Coalition, Latinx Advisory Council, and other statewide THW focuses meetings. Attending all these gatherings has allowed the Liaison to promote THW services, provider recruitment, and integrate program supports all in alignment with THW best practices.

A significant part of this role is advocating for the THW activities to integrate within the organization through presentation and individual provider relation with the THW agencies, the Liaison maintenance relationships to be able to identify where the barriers exist for provider, gaps in the system related to equitable reimbursement, contracting, and referral pathways like Unite Us CIE.

Lastly, a significant shift that is occurring within this role is deeper alignment with other roles in the organization and integrating THW practices with disparate workstreams. The Liaison role has taken a more integrated role in the review and updating of organizational policies to ensure appropriate and accurate reference to THW service and structures. Examples - HRS/SDOH funding strategy, behavioral health services, claims billing support for providers, contracting & credentialing workflows and communication, community partnership with CBOs.

Supporting Documents:

- *Community presentations*
- *PC3 Power Point 2021_8_18, page 7, 17-26*
- *PC3 Presentation June.2022*
- *HRS SDoH Meeting MINUTES 2021-2022*
- *YCCO Policies*

CY 2022 THW Integration and Utilization Plan Update

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?

One of the greatest challenges this role faced was navigating the decision-making processes within the CCO. As an expert in the THW service model and in direct working relationship with the agencies, it took informational sessions, discussion, and data to educate the rest of the organization and key decision makers on the importance of, and the best systems to support the integration and increasing utilization. The challenge was in timing of these conversations and to ensure the appropriate audience was present to hear the proposal. This resulted in prolonged decision making and repeating the same information in multiple places with multiple audiences.

To address this challenge, the THW Liaison streamlined how proposals are brought forward to the various group, included the background and current state in every conversation for individuals to recall previous conversations, and added hard data analysis along with the proposal. The gathering of all this information allowed a clearer pathway for decision making.

At the very end of this reporting cycle, the THW Liaison took a different role and left the organization. In the months following, it has been a challenge to both hire a replacement, maintain the current structures developed, support providers to the level desired, and losing so much historical knowledge from the organization. YCCO continues to recruit for this replacement role and hopes to hire before the end of 2022.

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*?

Appointed as the CCO seat on the THW Commission, this role seeks to promote the engagement and utilization of the THW workforce in this integrated and coordinated health care delivery system and advise OHA on the development, implementation, and sustainability of this program overtime to be responsive to consumer and community needs. YCCOs local region is fortunate for its involvement and voice at the table when discussing how to further the THW Commissions' best practices.

Success this year involved the Liaisons role in supporting newly forming THW, specifically Doulas and Peer Support agencies to establish sound business practices and navigate through the OHA certification and OHP registration processes, while also figuring out all the billing, coding, and reimbursement functions for sustainable revenue

3. Please describe any changes, additions, or updates planned for year 3 (2022) in terms of your efforts to *utilize the THW Liaison position to improve access to*

CY 2022 THW Integration and Utilization Plan Update

members and increase recruitment and retention of THWs in your provider network.

No significant changes planned for this role. The position description defines the key functions and are appropriate. At the time of this reporting, YCCO is recruiting a new THW Liaison with the hopes of filling this role by the end of the year (2022). After this individual is hired and onboarded, they will contribute to any changes or additions that will be incorporated into the plan goals.

YCCO is also going through an organizational shift that allows this role to more closely align with key operational teams: provider relations, contracting, Community Health Hub, and claims and encounter data. This role alignment will allow greater integration of the THW programs and supports across the entire system.