2021

THW Utilization & Integration Plan



Narrative

Yamhill Community Care (YCCO) will expand its Traditional Health Worker (THW) network over the next five years. YCCO will review the current THWs in the service area, auditing them for certification through an OHA-approved certification process, evaluating effectiveness of current programs and number of YCCO members served by each program, and vetting the THW plan with local THW agencies and community members. YCCO will report on its Traditional Health Worker plan annually per the OHA contract.

INTEGRATE THWS INTO THE DELIVERY OF SERVICES

YCCO acknowledges Traditional Health Workers (THWs) as:

- A. Community Health Workers (CHW)
- B. Doulas
- C. Peer Support Specialists (PSS) including Adult Addictions, Adult Mental Health, Family and Youth Support Specialists
- D. Peer Wellness Specialists (PWS) including Adult Addictions, Adult Mental Health, Family and Youth Support Specialists
- E. Personal/Patient Health Navigators (PHN)

Currently, the Health Services department along with the Community Health Hub integrates THWs into service delivery by receiving and coordinating referrals between physical, behavioral, and dental health systems including clinics, plan and non-plan members, and Social Determinants of Health (SDoH) partners including faith-based organizations. YCCO has performed an assessment of current THW programs and organizations and there is ongoing work to identify opportunities for system-wide quality improvement projects within existing and new partnerships while consistently accessing the number of THWs the network requires to effectively run its programs. Such activities include improving current integration efforts, addressing barriers to care, and creating more opportunities for individuals to become certified THWs. Further support the integration and monitor the quality of these models through utilization analysis and feedback from providers and members inclusive of systems such as Behavioral Health Quality Management Committee (BHQMC), Peer Coalition, Systems of Care Review/Advisory subcommittees, and Early Learning Council. YCCO and its governance will work to determine which agencies are best equipped to pilot and implement THW programs.



YCCO partakes in George Fox Interprofessional Primary Care Institute (IPC-Institute), a collaborative learning community for learners and professionals who strengthen primary care sharing solutions with care teams to build on knowledge, skills, and abilities. In addition, the THW workgroup engages healthcare groups to educate and address barriers with integrating community health workers. Below are the current state of integration and plans for furthering the integration in the delivery system for each THW category listed:

- A. Currently, YCCO does not hold contracts with certified birth doulas. Plan: The THW Liaison will continue engagement with doula hubs and individual doulas to provide services to its members. It will further engage with individuals interested in certification and provide necessary support to increase diversity within the provider network as it continues creating strategies to attract doulas and their services. YCCO has proposed a case rate reimbursement in the interim while it builds out a cohesive, sustainable process for credentialing and contracting with the doula network. Integration of doula services with maternal medical homes, social services agencies and other women's health pre- and post-natal services will be evaluated with the Family CORE team advising on activities boosting provider and member connections.
- B. Peer Support Specialists are integrated within clinic-based behavioral health services and offered by community-based organizations (CBOs) Dave Romprey Warmline, Oregon Family Support Network, Project ABLE, Yamhill County Health and Human Services, Better Outcomes Thru Bridges (BOB) Program and Provoking Hope. Plan: Continue program promotion, support of certified training programs and capacity building efforts. Plan: Volunteers who indicate interest to become certified THW will receive assistance from their host-site and the CCO.
- C. Peer Wellness Specialists are integrated into both clinic-based and community-based services with local certified training programs available in the community. Plan: Continue program promotion and recruit for Family and Youth Support Specialists and support certified training programs and capacity building efforts.
- D. Personal/Patient Health Navigators are currently available in limited setting such as hospital-based urgent/emergent care. Further evaluation has identified that patient health navigator activities are held by clinic/hospital/emergent care staff who do not hold a THW certification, a part of which is attributed to the absence of reimbursement support (i.e., billing codes) for this provider type. Plan: YCCO continues to engage with the local hospitals/clinics with the placement and expansion of Patient Health Navigators in the emergency room or other settings.



For more information, see CM-002 Care Coordination pgs. 4,9 & 10; SVC-010 Traditional Health Worker Program; SVC-003 Systems of Care and Wraparound pgs. 2 & 7; SVC-005 Behavioral Health Services pg. 4; SVC-004 Network Capacity, Service Adequacy and Availability pg. 2.

COMMUNICATE TO MEMBERS ABOUT THE SCOPE OF, BENEFITS, AND AVAILABILITY OF THW SERVICES

YCCO will identify and engage members with THW services by using claims data to identify high cost and/or high-risk members; receiving referrals internally from the care management team, the Early Learning Hub and Family CORE program, YCCO customer service; receiving referrals externals from hospitals, primary care clinics, behavioral health, oral health providers, social services organizations, etc.

Plan members receive information about available THW services and support through the following methods:

- I. Member handbook includes a section on THWs and how to request those services.
- II. Promotional materials and press releases to members through social media, print and electronic messaging, and targeted mailing is sent to individuals identified to have high SDoH needs.
- III. Outreach calls from YCCO Health Hub, clinics and YCCO Case Management Team to pregnant members, high ED utilizers, new members, referrals from partners, and members involved with DHS.
- IV. Referral processes through the YCCO Multi-Disciplinary Team, Systems of Care and Wraparound referrals, Wellness-to-Learn program in McMinnville school district, DHS, clinics, and others.
- V. Promotion through Yamhill Service Integration Teams, Early Learning Hub, clinic partners and CBO/SDoH agencies.

For more information, see Member Communications on THWs_Screenshoots and/or see link https://yamhillcco.org/community-health-hub/community-health-hub-staff/; and the Community Health Worker Hub Referral form.



COMMUNICATE TO PROVIDERS ABOUT THE SCOPE OF PRACTICE, BENEFITS, AND AVAILABILITY OF THW SERVICES

YCCO continues to educate the community, partners, and providers about the value of THWs, strategies for integrating them into clinical and non-clinical spaces, and referral processes through various methods not limited to:

- I. Email outreach and newsletters to provider network and community partners.
- II. Promotional materials to the community through social media, print and electronic messaging and, press releases.
- III. Provider meetings like the Primary Care Collaborative, Metrics Subcommittee, Behavioral Health Taskforce Meeting, Interprofessional Primary Care Institute, Peer Coalition Meeting and Quality and Clinical Advisory Panel.
- IV. Community meetings and events, like the Service Integration Teams, MDT, SOC.

For more information, see SVC-010 Traditional Health Worker Program, SIT Communication Newsletter, and PC3 Agenda

MEASURE BASELINE UTILIZATION AND PERFORMANCE OVER TIME

All funded agencies must have the capability to provide, at minimum, member-level data and track measurable outcomes for their clients. They must have THWs certified in their field through an OHA approved certification training program and set goals for certifying additional THWs.

YCCO Community Health hub Pathways Model is designed to track whether members are engaged, connected with additional services, and whether outcomes improve. The Community Health Hub monitors member-level data in the Community Integration Manager (CIM) that YCCO-contracted providers also use, allowing data sharing between THWs and providers and streamlining integration and communication about clients. Other THW programs in the community would be able to utilize CIM to accelerate their integration with clinical care and overall care coordination. Additionally, YCCO will use its Integration and Utilization Report to inform strategies to enhance quality in care delivery and network capacity solutions.

Yamhill CCO did identify and obtained some data elements outlined in the THW Utilization and Integration Report template but has decided to withhold submitting this report due to gaps that has been identified. The CCO hopes to obtain a response regarding simplification and interpretation of the components asked and welcome any opportunity for clarification.



INCREASE MEMBER UTILIZATION OF THWS

The YCCO and its Community Health Hub partners with the following agencies to meet members' needs and increase utilization of THW services:

- I. DHS Child Welfare and Self Sufficiency field offices in the service area
 - a. YCCO utilizes THWs support to engage and coordinate with the local Child Welfare offices to gather pertinent information to assist in promoting person-centered care which aid to achieving the DHS Child Welfare quality measure. THWs are integrated into local Systems of Care and Wraparound services and partake in the coordination of intensive behavioral health services for our shared members and families who are in behavioral rehabilitative services (BRS where intensive care coordination services are provided).
- II. Juvenile Departments and Community Corrections
 - a. Peer Support and Wellness Specialists work alongside behavioral health providers to engage and coordinate with the regional Community Corrections and Juvenile Departments for Systems of Care and Wraparound work providing some integrated behavioral health services to individuals enrolled in its programs.
- III. Local Mental Health Authority (Health and Human Services) and Behavioral Health Providers
 - a. THWs except for doulas and patient health navigators participate in various community outreach activities to assess the needs of individuals reintegrating back into the community from incarceration. Individuals are provided resources including transportation resources, clothing, personal hygiene items, and when needed, meet with an OHP assistor to have coverage re-instated or started for those who qualify. THWs assist in removing barriers for those needing to attend inpatient alcohol and drug treatment, court obligated appearances, community service, or other mandated appearances required by the parole board.
 - b. THW programs and services are integrated into member treatment plans addressing addiction, rehabilitation, and recovery needs both in clinic and community settings. Awareness and availability of THW services are part of the Level of Care (LOC) determination and a core element of treatment. Individual supports, skills training and development, group programs, and supportive sober housing programs offer a wide array of services to meet member's unique service needs.



IV. School districts and Willamette Education Service District

a. YCCO's Wellness-to-Learn program uses THWs to work with providers, IEP teams, school administrators, teachers, and families within McMinnville School district to obtain necessary skills, health services, social needs, or items supporting educational growth and success in supporting learning benchmarks. The YCCO Early Learning Hub also engages the school districts and early childhood service providers in connecting families with parenting, support services and educational resources in the community.

V. Developmental Disabilities Program

a. THWs work closely with local I/DD programs to remove barriers for non-covered medical services and SDoH-E by utilizing health-related services and community support programs when a need is identified. YCCO regularly engages and coordinates with local I/DD programs to ensure members needs are being addressed.

VI. Local housing organizations, including Yamhill Housing Authority and transitional housing

a. YCCO Community Health Workers, the Early Learning Hub and community peer organizations partner with transitional housing agencies as well as permanent affordable housing to houseless individuals in our service area. THWs coordinate various services for members to address housing/lodging needs. Some of these activities include transportation to housing-related appointments, completing necessary forms and gathering of support documents, securing temporal living arrangements, etc.

VII. Peer Support Organizations

a. YCCO supports local agencies employing certified and volunteer peer support/wellness specialists. Project ABLE, one of YCCO's key partners, delivers OHAcertified THW training for Peer Support Specialists. Each peer support agency receives funding from YCCO, and YCCO will continue to engage them to ensure quality, increase reach, and develop system infrastructures.

Project ABLE, Provoking Hope, Oregon Family Support Network, David Romprey Warmline are all peer support agencies within the YCCO service area.

VIII. Doulas

a. YCCO continues to engage with doula collectives and independent doulas and has identified some funding streams and partnership models. YCCO will offer technical support in having doulas credentialed to offer care to YCCO members. The maternal outreach program will share information on doulas and how to request services. In



partnership with the local public health and the Family CORE leadership team, will pilot a close loop referral pathway for members in its maternal-child health program.

For more information, see SVC-005 Behavioral Health Services pgs. 6 & 9.

Implement OHA's OEI THW Commission best practices which includes contracting with CBOs

YCCO recognizes the administrative and organizational capacity constraints that community agencies may face to provide THW programs and services. YCCO will offer capacity payments, technical assistance, training resources, data collection and analysis support, and convene THW network partners for shared learning. YCCO's Behavioral Health Taskforce conducted a review of current behavioral health related HRS and Community Benefit Initiative (CBI) funded projects/contracts to make recommendations to YCCO Executive Leadership regarding continuation of funding and whether the contracts should sit with the LMHA/CMHP or with the CCO. THW CBOs were among the contracts reviewed. Considerations in making these recommendations included whether the contracts included braided funding and interdependency with other LMHA/CMHP programs. The Taskforce has completed the review but has not yet issued final recommendations. Ongoing evaluation and monitoring of THW programs will assure continuous quality improvement and fidelity to OHA's OEI THW Commission best practices.

YCCO currently tracks the following elements in each HRS-funded program, including any THW activities. Any HRS-funded community-based organizations are subject to ongoing evaluation for program effectiveness and impact on members by requiring documentation of the following:

- Approval, start date, and length of funding
- Amount of funding
- Name(s) of members
- Birthdate(s) of members
- Member ID number(s)
- Kind of funding used
- Rational for investing in this THW agency/program
- Whether recipient is non-clinical SDoH partner, public health entity, or clinical provider
- Whether the investment is designed to measurably improve health outcomes
- Whether the investment is designed to prevent avoidable hospital readmissions, improve patient safety, support wellness activities, improve health information technology, and/or address the social determinants of health
- Any additional relevant notes



For more information, see the HRS Funding Strategy; THW Payment Grid; Fully Executed LOA_CBO; YCCO Provider Handbook 2020 pgs. 13-14; and SVC-005 Behavioral Health Services pgs. 3 & 4.

UTILIZE THW LIAISON POSITION TO IMPROVE ACCESS TO MEMBERS AND INCREASE RECRUITMENT AND RETENTION OF THWS IN YAMHILL CCO'S PROVIDER NETWORK

YCCO will utilize its THW liaison to coordinate and monitor community-based agencies offering THW services. This includes oversight of communicating the benefits of and process for integrated THW services with members, providers, and partners. It also includes working in partnership with provider relations staff to promote and education partners about the value of THWs. The liaison will also offer technical support for recruiting, retaining, and monitoring certification for THWs if providers employ them, and technical support for referring into and working with THW programs. This role will contribute to budget development in support to CBI projects/contracts, THW investments and quality incentives.

The liaison integrates its duties externally through the Behavioral Health Quality Management Committee, Peer Coalition meetings, Statewide Liaison Workgroup, THW commission meetings and the IPC-Institute; and internally through the Equity, the Provider Relations, and the Social Media workgroups and the HRS/SDoH Strategy meetings. Plan: Continue collective advocacy for health system transformation and policy innovation involving THWs through participation in the mentioned meetings/workgroups.

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For supplemental information, see SVC-010 Traditional Health Worker Program and the THW Liaison Position Description.

