

Public Health Division (PHD) Population & Community Health Bureau (P&CHB)

Office of Community Health Workers (OCHW)

2022-2025 Key Priorities



Learning Objectives

- Understanding of the Office of Community Health Workers renewed vision and mission and refocused direction for New Mexico.
- Overview of the 2022-2025 Office of Community Health Workers Key Priorities and partnerships in support of the CHW profession and workforce development.
- Overview of the partnership with the Human Services
 Department and the proposed Medicaid Reimbursement Model for New Mexico.

BEFORE WE START...

On behalf of all colleagues at the Human Services Department and the Department of Health, we humbly acknowledge we are on the unceded ancestral lands of the original peoples of the Pueblo, Diné, and Apache past, present, and future.

With gratitude we pay our respects to the land, the people and the communities that continue to contribute to what today is known as the State of New Mexico.



Los Alamos Main Hill Overlook Photo courtesy of NMDOH employee, Andrea Cunningham





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Mission

To ensure health equity, we work with our partners to promote health and well-being, and improve health outcomes for all people in New Mexico.

Goals



We expand equitable access to services for all New Mexicans



We ensure safety in New Mexico healthcare environments



We improve health status for all New Mexicans





We support each other by promoting an environment of mutual respect, trust, open communication, and needed resources for staff to serve New Mexicans and to grow and reach their professional goals



<u>Vision</u>

A unified, thriving, and well-trained network of CHWs in New Mexico.

<u>Mission</u>

The NMDOH, OCHW exists to

support the community health worker **3.** profession and workforce development by leading strategic partnerships and capacity-building **4.** initiatives.

Office of Community Health Workers (OCHW)

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2023-2025 OCHW Key Priorities:

- 1. NMDOH-OCHWs seeks to become a statewide convener with the overall goal to support the CHW profession and workforce development.
- 2. Customer centered use of technology to increase access to trainings and resources for CHWs and CHW affiliate organizations.
- 3. Increase the NMDOH CHWs Workforce to build capacity by expanding the number of CHWs hired by the NMDOH within the 8 divisions statewide.
- 4. Best place to work to develop a safe and exciting organizational culture.

Critical inputs for successful community health worker programs

| Improving Occupational Regulations and Workforce Development | Integration of CHWs into Organizations and Care Teams | Organizational Data Systems & Engagement | Program Sustainability |
|--|---|---|---|
| Supportive Supervision On the Job Training Certification & Background Checks | Building and Continuing Institutional Support from Non-CHW Groups Access to EHRs | | Effectiveness of CHWs 2. Identify Sustainable Financing Strategies |



Demonstrate the



- The Office of Community Health Workers (OCHW) CHW Champions:
- Dr. Laura Parajon, NMDOH Cabinet Deputy
- Dr. Roberto Martinez, PHD Health Equity Interim Director
- Eric Lujan, Western Sky Community Care (WSCC)
 OCHW Team

Devona Quam, Director | Bea Martinez, Southern Coordinator | Eleanor Dominguez, Cert Coordinator | Monica Ibarra, Admin Support | Diana Abeyta, Tribal & Northern Coordinator | Jamie Slama, Trainer

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2023-2025 Office of Community Health Workers (OCHW) Key Priorities & Statewide Strategies:

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Key Priority #1: NMDOH, OCHW seeks to become a statewide convener and explore sustainability efforts for NM CHW workforce.

STRATEGY: Develop strategic partnerships across New Mexico with organizations employing, training, and mentoring or advocating for CHWs across the state.

Key Priority #2: Customer centered use of technology.

STRATEGY: Increase access to trainings, resources for CHWs, and increase our ability to evaluate the impact of CHWs by investing in an online training platform, a statewide CHW digital hub for CHWs and organizations, and a statewide data collection platform to evaluate and further elevate the CHW profession.

Key Priority #3: Increase the New Mexico Department of Health (NMDOH) CHWs Workforce.

STRATEGY: Grow the number of CHWs hired by the NMDOH to increase access to knowledge and services for the New Mexico Populations.

Key Priority #4: Best place to work.

STRATEGY: Develop a safe and exciting organizational culture that promotes teamwork and collaboration by developing annual OCHW key work plans, clarifying objectives and roles, investing in professional development for staff, and incorporating restorative practices.



Continuous Collaborative CHW Support – UNM/Community Health Workers Initiatives

- UNM-CHWI and NMDOH-OCHW work to offer continuous statewide support to CHWs/CHRs/Promotores de Salud and partner organizations through ongoing training for CHWs, supervisors, and other key stakeholders.
- This includes multi-day trainings, single day trainings and a biweekly online CHW meeting for ongoing professional development and skill-building.
- In these meetings, CHWs discuss challenges, share tips, and strengthen their knowledge.
- Collaboratively UNM-CHWI and NMDOH-OCHW CHWI work with CHWs, supervisors and partner organizations to improve understanding and practices of reflective and supportive supervision, integration of CHWs into the organization's mission and goals, culturally appropriate learning and continuous improvement. This collaborative work is rooted in health equity where community voices are centered.

- Longitudinal Training
- Longitudinal Learning
- Professional Development
- Community Impact
- Community Support Networks

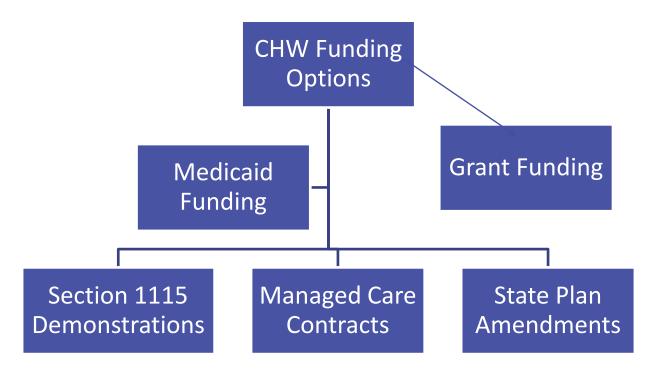








CHW Funding Options

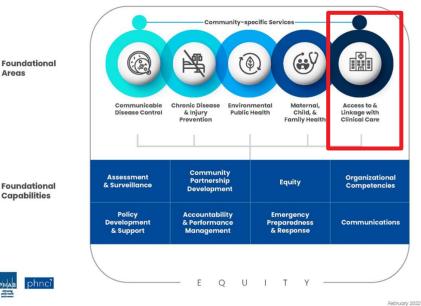




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To improve the population health equity, integration of primary care, behavioral health, and public health is a critical step

- Integration of primary care, behavioral health and public health can improve the health and well-being of populations
- **Community health workers** are a critical piece for linking to people, places and communities to the healthcare system







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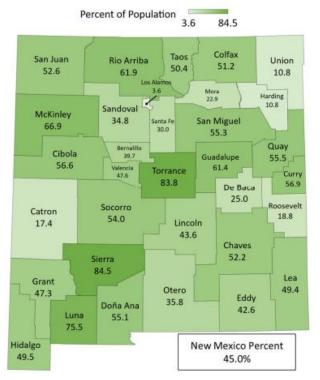
Human Services Department Partnership



Medicaid Enrollment in Context

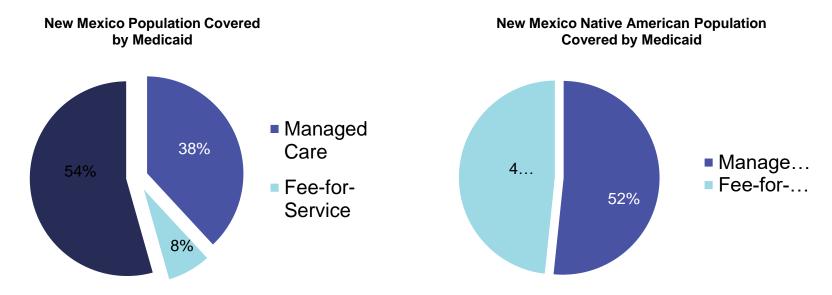
- 970,371 total beneficiaries in March 2022
 - 987,355 peak anticipated by July 2022
 - 919,829 anticipated by December 2022 after MOE ends
- 83% are enrolled in managed care
- 46% (up from 40% pre-COVID) of all New Mexicans are enrolled in Medicaid
- 40% of beneficiaries are children
- 58% (up from 56% pre-COVID) of New Mexico children are enrolled in Medicaid
- 80% of all births in New Mexico are covered by Medicaid

NM Medicaid & CHIP Recipients as a Percentage of Population by County, October 2021





New Mexico Medicaid Program Population Data as of January 2022







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CHW Return on Investment Data

CHW Published Data

CHW

- Reductions in A1c, cholesterol, BP
- Reduction in mortality at 6 months, colorectal cancer navigation program with CHWs
- ROI 4:1 for asthma program, 3:1 for high needs Medicaid program
- CHW program reduced urgent care visits saving between \$1316-1849 per patient (monthly)
- Reduces acute care need
 - ER visits
 - Hospitalizations
 - Readmission
 - Urgent care visits

CHRS

- Increased utilization of services
 - 3.2% increase in PCP visits
 - 6.3% increase in BH services
 - 9% increase in pharmacy visits
- Reduction of falls



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Reimbursement Exploration – New Mexico's Direction

Potential Medicaid Payment Structures

| | Pros | Cons |
|-------------------------------|---|---|
| MCO contracts | Already existing structure | Hired by MCOs, embedded within their structure |
| 1115 waiver | Easier to pilot programs, more flexibility in scope of work, more flexibility in settings of care delivery | Does not include FFS bills, starts in 2024, only a 5-year demonstration and then needs to be renewed, not necessarily approved by CMS |
| State Plan Amendment (SPA) | Includes FFS bills, will be in the state plan permanently, can start within a year | More restrictions on scope of work and settings |



Proposed Reimbursement Model for NM

| Certification MM Office of CHW DOH certification CHR certification | 98 |
|--|-------|
| Structure | |
| CHWs are independent provider types | |
| Do not need a relationship with a clinician necess (standardized order set) | arily |
| Scope of Work | |
| Health Education (health coaching, diabetes, heal disease) | rt |
| Health Navigation (transportation, cultural liaisor community outreach, connection to resources) | 15, |
| Screening and Assessment (DV, BP) | |
| Support and Advocacy (peer support workers) | 98 |
| Outcomes | 00 |
| Reduction in acute care use | |
| Linkages to care once we have a closed-loop reference | rral |
| Improvement in metrics with certain populations (DM, CV, asthma control) | |

| Billing Code | Name |
|--------------|---|
| 98960 | Self management education and training 1 person |
| 98961 | Self management education and training 2-4 |
| 98962 | Self management education and training 5-8 |

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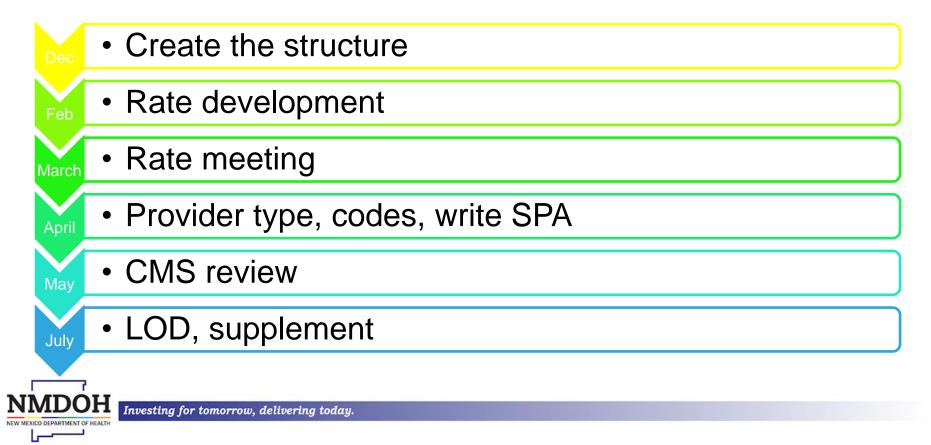
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HSD Medicaid Reimbursement TIMELINE

Timeline, with Deployment GOAL: July 2023



Questions?



