



NOTES

Sustainability Committee

The goal of the Sustainability Committee is to

Date: Tuesday, January 28, 2020 • Time: 2:00 pm – 3:00 pm

❖ **Members present:** Mariah Chrans, Dr. Manuel Solano, Kelly Nightengale, Dr. Laila Cure, Kim Downes, Diana Lady, Barbara Wiman, and Alissa Rankin

❖ **Discussion**

- Follow-up email with Secretary Norman
 - Erika, Broderick, Carolina, and Alissa have been meeting. Erika is drafting a response email to Dr. Norman regarding our well defined CHW Scope of Practice and next steps in CHW Certification.
- Future for Sustainability
 - Coalition Sustainability & CHW Profession Sustainability
- Does the Sustainability Committee want to focus on coalition sustainability or CHW profession sustainability or both? What is the difference for our Committee? Discussion notes:
 - They are one in the same. The Coalition is not sustainable without the professional sustainability?
 - How do we ensure sustainability for the profession as a whole?
 - We need to refer back to workforce assessment. Include this in the strategic planning process. What are some of the challenges that we could overcome easily?
 - Some states do not have CHW certification process
 - Texas does
 - California is marginal with community colleges with support of insurers
 - Minnesota has an alliance
 - There is a symbiotic relationship between professional and coalition sustainability. Coalition sustainability does not guarantee professional sustainability, but professional sustainability depends on the Coalition.
 - The Coalition is now supporting the profession. Eventually the Coalition will "go away" once we have achieved the desires. Then it might be the profession itself that needs to be sustained.
 - The profession sustainability is important. Ways to increase professional sustainability?

- A conglomeration of summaries may increase the value of CHWs: Grant reporting summaries about the difference that a CHW makes, employer statements about the work of CHWs and improved whole communities. This may increase the number of CHWs that employed by organizations.
- Highlight the other areas around the nation where they have had private and public options that reimbursed
 - Integration of CHWs into health systems
- We need to also highlight alternative ways to bill for services by beginning to identify how is it currently being done. In order to bill, individuals need to have National Provider Identifier (NPI) number that anyone can obtain. There is a specific taxonomy code to use to fill out the NPI form. Then you have enroll each CHW with each payer to bill for payer sources. This takes three weeks to six months to become a provider.
 - Codes for Education are the 99-402 through 99-406 and provide \$15-45 per visit.
 - This works best with a medical provider. The patient education billing codes or "provider as a payer source," is on the employer to ensure the CHW has a NPI number and organization becomes a payer source. An example is a lactation consultant can become a provider.
 - The NPI taxonomy code for CHWs is 172V00000X.
- TO DO: Incorporate this into Strategic Planning
 - BRAINSTORM: What CHW profession sustainability activities do you hope get included in the KCHWC Strategic Plan?
 - Recruit four CHW employers to test this: two medical sites and 2 non-medical sites
 - Community Health Council of Wyandotte County is a potential non-medical site as an approved provider under a payer
 - Live and active case study for feasibility
 - Other providers of CHWs that might work for rural health? Case study on United States Rural Health with CHWs as an integrated part of the team billing for their time.
 - Look into CHW programs that are funded by federal grants such as Health Resource Services Administration (HRSA) grants for rural telemedicine and telehealth
 - Kansas Statewide Farmworker Health may be doing something different because of HRSA requests
 - Look at rural health and K-State Research & Extension
 - Optimize Return on Investment - What is the return per dollar for investment into CHW programs?

- How can CHWs work with the Public Health Indicators? (e.g., 21st in poverty, Cardiovascular Disease, etc.)
 - Use CHWs to help increase public health Health Indicators/rankings
 - Can bill for general and special education codes in one visit
 - Define and track performance metrics that can be used to create a shared understanding the costs and benefit of community health workers on individual and population health.
 - Identify "Who owns the data?"
 - Start with smaller performance measures.
 - How would the organization start assessing?
 - An example would be the trauma registries and quality improvement (in Michigan and Dr. Cure).
 - Look at National Trauma Registry - This is a potential model.
 - Ideally, reporting organizations can use the data. Non-reporting organizations cannot necessarily use it.
 - Start small and define possible intermediate metrics to project potential impact.
 - Grant funded CHW programs likely have to summarize and that is often public knowledge.
 - Managed Care Organizations (MCO) data is often difficult to obtain but it is reported as maybe general Centers for Medicaid and Medicare Services (CMS)
 - MCOs in KanCare may be more willing to cooperate than we anticipate
 - CMS reporting requirements are listed by state and KS is not included online
 - Enrollment, program audits, market information, encounter reporting
 - Look at: <https://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/FinancialAlignmentInitiative/MMPInformationandGuidance/MMPReportingRequirements>

❖ **KDHE Updates**

None.

❖ **Next steps**

- Mariah & Dr. Solano – Will work on getting CHWs at CHCWYCO NPI#s and identifying one public & one private payer.
- Diana will investigate telehealth and rankings and who is addressing these in KS.
- Alissa will relay information to Executive Committee and work into Strategic Plan for KCHWC
 - Also share billing/NPI # information with Aaron Davis for his input on feasibility.
- Barb will identify grant reports for ROI information with Kansas City Regional CHW Collaborative (e.g., what and how collected/reported).
- Dr. Cure will look at research with CHWs to identify what is currently available for performance measures and data used for analysis.
- Kim will apply for NPI Codes for all KCQIC CHWs and look at CMS reporting requirements (Look at taxonomy numbers, specific educator codes to tack onto the codes)

➤ **Next Meeting Dates**

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| 02/25/2020 | 08/25/2020 |
| 03/24/2020 | 09/22/2020 |
| 04/28/2020 | 09/27/2020 |
| 05/26/2020 | 11/24/2020 |
| 06/23/2020 | 12/22/2020 |
| 07/28/2020 | |