

APPENDIX:

Michigan Health Plan Survey Instrument: CHWs & Population Health

INTRODUCTION

The Michigan Association of Health Plans (MAHP) is partnering with the Michigan Community Health Worker Alliance (MiCHWA) to facilitate information exchange on the resources/services available by Community Health Workers (CHW's), the development of sustainable policies and financing mechanisms for CHWs in Michigan.

As part of our efforts to better understand how CHWs are currently being utilized and reimbursed for their services, we would appreciate it if you would take a few minutes to complete this survey so we may better provide the Health Plans with resources that are useful.

For the purpose of this survey, Population Health as defined in the Michigan Department of Health and Human Services (MDHHS) Medicaid contract is as follows:

Management to prevent chronic disease and coordinate care along the continuum of health and well-being. Effective utilization of these principles will maintain or improve the physical and psychosocial well-being of individuals through cost-effective and tailored health solutions, incorporating all risk levels along the care continuum.

Also per the MDHHS Medicaid contract, a Community Health Worker is defined as follows:

Frontline public health workers who are trusted members of and /or have an unusually close understanding of the community served. This trusting relationship enables CHWs to serve as a liaison/link/intermediary between health/social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery.

ADDRESSING POPULATION HEALTH

- 1) Please rank on a scale of 1-5 the level of need among your members (1 being least, 5 being highest).
 - Connecting to resources
 - Housing
 - Employment
 - Food Security
 - Education
 - Income
 - Transportation
 - Establishing/maintaining health insurance
 - Immunizations
 - Connecting to a medical home and/or primary care provider
 - Human services
 - Health services
 - Other (Please specify)

- 2) What challenges does your health plan face in tackling population health issues? (free response)

- 3) Do you currently contract with external agencies for services that impact or address population health?

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- Yes
- No

3. a) If yes, what types of agencies do you contract with? (*Checkboxes*)

- Academia/Research
- Community-based organization (not faith-based)
- Faith-based organization
- Federally qualified health center (FQHC)
- Medical practice
- Hospital/Medical clinic (Not FQHC)
- Local health department
- Other (Please specify)

4) Are you interested in support or technical assistance on addressing population health of your members?

- Yes
- No
- Maybe

5) Are there specific topics you are interested in learning more about? If yes, please include them in the box below. (*free response*)

UTILIZATION OF COMMUNITY HEALTH WORKERS

Per the current MDHHS contract, plans are mandated to pay for CHW services in some manner, one CHW per 20,000 members.

6) How is your health plan currently utilizing CHWs? (*Checkboxes*)

- Direct Employment
- Contracting with individual CHWs
- Contracting with or reimbursing external agencies for CHW services
- Other (please specify)

6.a) If direct employment

6.a.i) How many CHWs do you currently employ?

6.a.ii) What population(s) do your CHWs primarily work with?

6.a.iii) Why did you choose to directly employ CHWs?

6.a.iv) Do your direct-employed CHWs provide health services? (examples include diabetic foot checks, blood pressure screening, etc.)

6.b) If contracting with individual CHWs

6.b.i) How many CHWs do you contract with individually?

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6.b.ii) What population to these CHWs primarily work with?

6.b.iii) Why did you choose to contract with individual CHWs?

6.c) If contracting with or reimbursing external agencies for CHW services

6.c.i) How many agencies do you contract with for CHW services?

6.c.ii What types of agencies do you contract with for CHW services? (*Checkboxes*)

- Academia/Research
- Community-based organization (not faith-based)
- Faith-based organization
- Federally qualified health center (FQHC)
- Medical practice
- Hospital/Medical clinic (Not FQHC)
- Local health department
- Other (Please specify)

6.c.iii) What type of payment model(s) are being used in contracting with agencies for CHW services? (check all that apply) (*Checkboxes*)

- Per member per month payment for the CHW only
- Per member per month payment for the clinical care team, including the CHW
- Outcomes-based or value-based payment for specific health outcomes per member
- Bundled payment for services, including those of the CHW
- Service-based payment
- Other:

6.c.iv) What population(s) to these CHWs primarily work with?

6.c.v) Why did you choose to contract with external agencies for CHW services?

6.c.vi) Are your contracted agencies using specific billing codes for CHW services?

- Yes (If yes, which codes? _____)
- No

6.c.vii) How often are payments issued to these agencies? (*Checkboxes*)

- Monthly
- Bi-Monthly
- Quarterly
- Every six months
- Other (please specify)

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To be completed by everyone

7) How does your managed care organization plan to use CHWs in the coming year? (check all that apply) (*Checkboxes*)

- Direct Employment
- Contracting with individual CHWs
- Contracting with or reimbursing external agencies for CHW services
- Reimbursing for services
- Other

Contact Information:

Name:

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Title/Area (ie.: QI, Care/Clinical Case Management, Member Engagement, CEO/COO):

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