



Michigan Community Health Worker Alliance (MiCHWA)

COMMUNITY HEALTH WORKERS 101

Understanding the CHW

What is a community health worker?

A Community Health Worker (CHW) is a frontline public health worker who is a trusted member of and/or has an unusually close understanding of the community served. This trusting relationship enables the CHW 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.

A CHW also builds individual and community capacity by increasing health knowledge and self-sufficiency through a range of activities such as outreach, community education, informal counseling, social support and advocacy. (American Public Health Association CHW Section, 2009)

Michigan is reported to have 2,724 CHWs¹ and Michigan employers reported 655 current CHW employees in 2012.²

Other names for CHWs^{1,2}

- Patient health navigator
- Patient educator
- Maternal child health worker
- Family health advocate
- Peer support specialist
- Community outreach worker
- *Promotore(a)*
- Community health advocate
- Lay health advisor
- Patient advocate
- Community-based doula
- Recovery coach
- Parent support partner
- Peer educator
- Community care coordinator
- HIV peer counselor

What do CHWs do?³

- Outreach and community mobilization
- Community/cultural liaison
- Case management and care coordination
- Home-based support
- Health promotion and health coaching
- System navigation
- Participatory research

National support and movement towards CHW recognition

The Patient Protection and Affordable Care Act of 2010 (PPACA) cites CHWs in three sections — §5101, §5313, and §5403 — and identifies them as an important part of the health care workforce. Several organizations have recognized CHW as health professionals and provided support for their increased use:

- Association of State and Territorial Health Officials 2012
- CDC Division for Heart Disease and Stroke Prevention 2011
- National Prevention Council 2011
- HHS Action Plan to Reduce Racial and Ethnic Health Disparities 2011
- American Association of Diabetes Educators 2010
- Bureau of Labor Statistics 2010
- HHS National Health Action Plan to Improve Health Literacy 2010
- Agency for Healthcare Research & Quality 2009
- American Public Health Association 2009, 2001
- National Conference of State Legislatures 2008
- National Fund for Medical Education 2006
- Institute of Medicine 2003
- American Medical Association 2002



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CHW Legislation in Other States⁴

Description of Legislation	Number of States
Addressing CHW infrastructure, professional identity, workforce development, or financing	16 including the District of Columbia
Establish CHW scope of practice	8
Authorize Medicaid reimbursement for some CHW services	7
Encourage or require integration of CHWs into team-based care models	7
Establish CHW advisory board	6
Authorize creation of standardized curricula	6
Workforce development laws for creating a certification process or require CHWs to be certified	5
Authorize certification board for setting education requirements and governance for certification process	4

Return on Investment

Spectrum Health, Grand Rapids, MI⁵

- More than 50 CHWs work with maternal child health, hypertension, diabetes, nutrition, healthy lifestyles; work in schools, hospital, community through Health Communities Department
- Core Health ROI over 3 years: “\$2.53 in savings for every \$1.00 of cost”

Muskegon Community Health Project/Mercy Health Community Benefit Program, Muskegon, MI⁶

- Enrollment and program and home visits both positively impacted health outcomes for individuals with diabetes
- CHWs collaborated with financial counselors to increase enrollment in financial assistance plans by 270%; CHWs recovered \$350,000 in 2009 by enrolling patients in Medicaid

Molina Healthcare of New Mexico, 2012⁷

- Medicaid managed care uses CHWs to intervene with the plan’s highest resource-consuming patients, including those with high ED usage and low treatment adherence
- ROI: Approximately \$4.00 savings for every \$1.00 of cost

Denver Health, 2006⁸

- Community Voices outreach program works with underserved populations on issues including appropriate outpatient service utilization
- ROI: \$2.28 saving for every \$1.00 invested in the program

¹ Bureau of Health Professions, Health Resources and Services Administration. *Community Health Worker National Workforce Survey*. Washington, D.C.: U.S. DHHS, 2007.

² Education and Workforce Working Group, Michigan Community Health Worker Alliance. *MiCHWA Employer Survey 2012: Final Report*. Ann Arbor, MI: University of Michigan School of Social Work, Curtis Center Program Evaluation Group. 2012, October 10.

³ Matos S, Findley S, Hicks A, Legendre Y, Do Canto L. Paving a path to advance the community health worker workforce in New York State: a new summary report and recommendations. CHW Network of New York City website. http://www.chwnetwork.org/clientFiles/nycchw/media/chw_initiative2011report.pdf. Accessed January 22, 2013.

⁴ Centers for Disease Control and Prevention. *A Summary of State Community Health Worker Laws*. Atlanta, GA: Centers for Disease Control and Prevention; 2013.

⁵ Inman E. Optimizing your investment in community health. Presented at: Michigan Community Health Worker Alliance Annual Meeting, *Innovation in Action: Community Health Workers are part of Michigan’s Health Future*; October 11, 2012; Lansing, MI.

⁶ Analysis of “Call to Care” in Muskegon: Community Health Worker Outreach and Education to At-Risk Diabetics in Muskegon 2007 through 2009.

⁷ Johnson D, Saavedra P, Sun E, et al. Community health workers and Medicaid Managed Care in New Mexico. *Journal of Community Health*. 2012;37:563-571.

⁸ Whitley EM, Everhart RM, Wright RA. Measuring return on investment of outreach by community health workers. *Journal of Health Care for the Poor and Underserved*. 2006;17(1):6-15.