



NDMA 2024 Policy Forum

October 4, 2024

Policy No. 2

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Subject: Community Health Workers

Summary:

The Community Health Worker Task Force, created by the ND 2023 Legislature House Bill 1028 <https://www.hhs.nd.gov/health/regulation-licensure-and-certification/chw-task-force> , was directed to:

- Develop a data-driven plan for community health worker
 - Scope of work,
 - Education and training,
 - Certification and regulation,
 - Medical assistance reimbursement, including reimbursements to FQHCs, and
 - A ND community health worker collaborative.
- Provide to HHS a proposal for a Medicaid state plan amendment or waiver to include community health workers.
- Provide to HHS proposed administrative rules for the community health worker
 - Scope of work,
 - Education and training,
 - Certification and regulation,
 - Medical assistance reimbursement, and
 - A ND community health worker collaborative.
- Collaborate with existing clinical, public health, and home and community-based service systems.

Relevant Information:

- Community Health Worker (CHW) scope of practice is widely variable based on the needs of the community and the talents/capacity of the CHW, including but not limited to screening (paper screens as well as blood sugar checks, blood pressure monitoring, foot screens for presence of

ulcers...things one would expect a patient/family member could be trained to do at home), improving access to care via transportation/care coordination, home visits

- Community Health Worker-supported interventions have been shown to be **especially helpful in underserved populations**, including increasing the likelihood of obtaining primary care, increasing mental health improvements, and reducing the likelihood of multiple 30-day readmissions from 40% to 15.2%. <https://www.astho.org/globalassets/pdf/community-health-workers-summary-evidence.pdf>
 - As of the August 19, 2024, meeting, there was no tribal representative
- The current task force membership does not include any physicians, any practicing local public health providers, nor anyone who is working in direct patient care
<https://www.hhs.nd.gov/health/regulation-licensure-and-certification/chw-task-force>
- While the plan for funding has not been finalized, the tasks typically reimbursable by Medicaid will likely not result in sufficient funding to support CHWs
- Per the last meeting, 200 hours of traditional internship and/or supervised work, as well as 1000 hours of supervised experience hours were agreed upon, with 12 hours of annual continuing education
- Per the last meeting notes from 8.19.24, administrative rule recommendations from this committee will not be ready until 12/2024, resulting in review by the administrative rules committee no earlier than summer, 2025.
 - Plan to distribute a “draft” of certification and regulation requirements/rules to CHW/Community Health Responders (CHRs) once it is developed and voted on (there are CHRs in ND currently, but no CHWs)

Proposed Action:

NDMA will monitor and advocate where needed to support the CHW task force. Some of the options of support may be:

- Scope of practice: monitor administrative rules that reflect practice of skills that can be reasonably taught to and performed by a typical high school graduate.
- Reimbursement: Community Health Worker funding source; competitive worker payment model; and CHW training program support.
- Program Continuation: Adoption of a succession plan to maintain program after mandate has expired.

Adopted November 26, 2024

Erica Hofland, MD

Policy Forum Chair