

Meeting Notice

Community Health Worker Task Force Regular Meeting

Monday, Feb. 12, 2024 1:00-2:30 p.m., CST Join by computer:

https://zoom.us/j/95882647625?pwd=Q3NINW9GcGhZKy9zSjJIZjAwWU9kdz09

Join by phone: 1-669-900-6833, Conference ID: 958 8264 7625,

Passcode: 040778

Agenda

Call to Order

- I. CHW Impact Story
- II. Review ND Century Code Section 43-66-01(4) as it relates to CHW Scope of Practice
 - a. Should the Task Force adopt a more general scope based on this definition?

"A frontline public health worker who serves as a liaison, link, or intermediary between health and social service and the community. CHW's facilitate access to services and improve the quality and cultural competence of service delivery.

Providing preventive services includes:

- 1). Screening and assessments,
- 2). Prevention and health education, and
- 3). Health system navigation and resource coordination.

Community health worker services do not include any services which require licensure or training outside what is required for CHW certification". Adapted from the American Public Health Association definition. https://www.apha.org/apha-communities/member-sections/community-health-workers/.

- Many states use the APHA definition or a modified version of it.
- Healthcare entities employing CHWs can then craft their own policies outlining how CHW's will function within their entity while operating under ND Century Code and Administrative Code requirements.
- ND Medicaid will have its own policy outlining what it will/will not reimburse as CHW services based on state plan amendment coverage approval from the Centers for Medicare and Medicaid.

- The <u>C3 Project lists 10 CHW roles</u>
 - Cultural mediation among individuals, communities, and health and social service systems
 - Providing culturally appropriate health education and information
 - Care coordination, case management, and system navigation
 - Providing coaching and social support
 - Advocating for individuals and communities
 - Building individual and community capacity
 - Providing direct service (this is listed as providing essential services like blood pressure or first aid or facilitating access to food and other resources through food banks and local programs). See current <u>Qualified Service Provider Competencies</u> (QSP), <u>Direct</u> Support Professional (DSP) scopes
 - Implementing individual and community assessments
 - Conducting outreach
 - Participating in evaluation and research
- State Medicaid programs typically include CHW coverage for health promotion and coaching, health education and training, and health system navigation and resource coordination
 - Learn more about State CHW Programs and Medicaid coverage in a newly updated <u>State Community Health Worker Policy tracker</u> from the National Academy for State Health Policy (NASHP) (1-11-24)
 - 14 states appear to have Medicaid state plan coverage, 5 states include coverage through a 1115 waiver (ND does not have a waiver currently), and 11 states cover CHWs through Managed Care
- b. Does the Task Force need to list what services CHWs cannot provide within their proposed scope of practice to help define what is in the scope of practice or does using the phrase CHW "services do not include any services which require licensure or training outside of what is required for CHW certification" firm up the scope within CHW education?
- c. Should the Task Force revisit CHW scope of practice after defining the required competencies for Education/Training?
- III. Decide how to move forward with Education/Training and Certification/Regulation
 - a. Should these be worked on concurrently or separately?
 - b. Should we assign workgroups to work on these in between monthly meetings and then have discussion/decisions at monthly meetings? FYI Workgroup meetings would be subject to open meetings and records rules.

c. Decision items for Education/Training and Certification/Regulation

Education and Training

- o Core competencies/training program curriculum content
 - Core competencies are often chosen from the <u>C3 Project</u>
 - Communication skills
 - Interpersonal and relationship-building skills
 - Service coordination and navigation skills
 - · Capacity building skills
 - Advocacy skills
 - Education and facilitation skills
 - Individual and community assessment skills
 - Outreach skills
 - Professional skills and conduct
 - Evaluation and research skills
 - Knowledge base
 - Does any of this training align with that done through the Community Connect/Free Through Recovery peer support and care coordinators? Can trainings be integrated?
- o How is training/experience obtained?
 - Are apprenticeship or on-the-job training models allowed?
 - How should training last so it is effective but not a barrier?
- Cost-effectiveness

Certification Requirements

- There is no national proficiency exam like exists in many other professions so we will need to lay out the minimum qualifications to apply for certification as identified in Education and Training
 - CHRs are able to attend training through IHS, this is not a certification
- Components of certification to consider
 - Minimum age
 - Residency requirements
 - Education requirements
 - · High school diploma, and
 - What type of training program? How are training programs approved by HHS?
 - Experience pathway to certification? (under supervision, how many hours, paid or supervised experience or both etc.)
 - Is continuing education required?
 - How often does someone need to recertify?
 - What are grounds for denying certification?
 - What are grounds for revoking a CHW's certification?
 - What the CHW's appeal rights for denial/revocation?
 - Is there reciprocity?

Public Input

IV. Strategic Planning

Adjourn.

Individuals with disabilities who need accommodations to participate in the meeting or who would like more information about the Community Health Worker Task Force can contact Ashley Gerving at 701-328-4807, toll-free 800-755-2604, 711 (TTY) or email at gervingashley@nd.gov

Date Posted: 2/2/24

Date Revised: