Pennsylvania’s State Innovation Model (SIM)

Pennsylvania Health Funders Collaborative
Eight Annual Meeting
November 17, 2014
The SIM Test Model Grant Opportunity

• State Innovation Models Initiative provides funding for multi-payer payment and healthcare delivery system transformation
• Design and Testing (25 states-$300 Million)
• Pennsylvania was awarded $1.2 million for design
• Submitted the testing application July 30th 2014 for testing
• PA applied for almost 100 million dollars to invest on the infrastructure of our healthcare delivery system
PA has developed a seven-pronged change model to accelerate delivery system transformation:

- Implementation of Evidence-based Delivery System Transformation Models
- Payment Reform to Support Delivery System Transformation
- Development of a Robust Data Collection, Analysis and Reporting Process
- Provision of Robust Technical Assistance to Providers by the Transformation Center
- Effective Use of State Policy and Regulatory Levers
- Enhanced HIT Infrastructure
- Broad-based Stakeholder Engagement
How is SIMs affecting your work?
We can provide all services we think patients need, but with no coordination the results will continue to be the same.
Focus on Increased Coordination

Who?
When?
Where?
How?
Who pays for it?
• Community Health Workers
• Promotoras/es de Salud
• Community Health Representatives
• Community Health Advisors
• Patient Navigators
• And many more.
Community Health Workers - Organizations

Source: Alliance of PA Councils Report (July 2013)
Location of CHWs in PA

Community Health Worker (CHW) Survey Results:
Total Number of Community Health Workers and Pennsylvania Population by County

Number of FTE CHW positions per county (Mapped according to organization’s base of operations.
NOTE: many organizations utilize CHWs that conduct interventions beyond their base county.)*

- 0.5 - 9.9 FTEs
- 10.0 - 49.9 FTEs
- 50.0 - 99.9 FTEs
- 100.0 or more FTEs

Estimated 2012 County Population**
- Less than 100,000 residents
- 100,000 to 199,999 residents
- 200,000 to 499,999 residents
- 500,000 or more residents

* Data source: 2013 CHW Survey
Community Health Workers- Roles in PA

*National Community Health Advisor Study Seven Core Areas
*Source: PA percentages based on Alliance of PA Councils Report (July 2013)
Funding Sources of CHWs

- Medicaid, 17.6%
- Federal Grant Categorical Funding, 13.6%
- State Government, 11.0%
- Other Sources, 11.0%
- Commercial Health Plan/insurance, 10.6%
- Other Sources, 11.0%
- Local government, 4.7%
- Program fees, 6.0%
- Research grant or contract, 6.3%
- Funding from a private foundation or entity, 9.6%
- Medicare, 9.6%
Examples of other sources

- Community Development Block Grant
- Community Health Center Funding
- Contractual & Fundraising
- County MH/ID Office
- General Operations
- Head Start
- HRSA
- Hospital
- Wellspan
- State Tobacco Settlement Fund
Community Health Workers - Education

Minimum Level of Education Required of CHWs in PA

- GED/High School Diploma: 31.0%
- Associate Degree: 15.1%
- Bachelor Degree: 24.6%
- Master Degree or above: 0.0%
- *Other: 12.7%
- No Response: 13.40%
- No Educational Requirement: 3.2%

Source: Alliance of PA Councils Report (July 2013)

*Other: Civil Service Qualified; Individually Determined; Must be bilingual; no educational requirements, but minimum of 5 years experience or minimum of bachelors degree and 3 years experience; nursing license; peer support specialist certification; RN and MSW; varies with position, etc.
**Community Health Workers – Training**

**Existing Types of Trainings for CHWs in PA**

- **On-the-job training by shadowing others**: 70.6%
- **Structured in-house training**: 46.8%
- **Web-based training**: 45.2%
- **Clinic based training**: 32.5%
- **Training provided by a formal educational institution**: 27.0%
- **Structured external training (e.g., “Welfare to Work” program)**: 17.5%
- ***Other***: 9.5%

*Other*: Conferences; 10 week courses; Tobacco Cessation Certification/Training; Peer Support Specialist Certification; OMHSAS Training; Health Dept. etc.

*Source: Alliance of PA Councils Report (July 2013)*
Community Health Workers - Salary

Hourly Salary of CHWs in PA

Source: Alliance of PA Councils Report (July 2013)
Specific Diseases and Conditions CHWS focus on in PA

- Other*: 1.5%
- Missing: 3.2%
- High Cholesterol: 19.8%
- Cancer: 19.8%
- Asthma: 19.8%
- HIV/AIDS: 22.2%
- No focus on specific diseases/conditions: 24.6%
- Heart Disease: 24.6%
- Diabetes: 25.4%
- Mental Health Conditions: 26.2%
- High Blood Pressure: 27.0%

Source: Alliance of PA Councils Report (July 2013)
Community Health Workers – Specific Risk Factors

Specific Risk Factors CHWS focus on in PA

- *Other: 8.70%
- Missing: 3.20%
- Pregnancy: 33.30%
- Risk of hospital re-admission: 23.00%
- Low community-level vaccination rates: 12.70%
- Environmental risks (pesticides): 9.50%
- Tobacco use/smoking: 35.70%
- Obesity: 30.20%
- Nutrition: 34.10%
- Not applicable, no focus on specific risk factors: 21.40%

Source: Alliance of PA Councils Report (July 2013)
Proposed Community Health Worker (CHW) Project Strategy

**Definition and Scope of CHW Roles**

**GOAL:** Develop a more explicit and concrete definition of CHWs in PA.

Develop and use one common CHW definition in all communications pertaining to CHWs.

Job title “Community Health Worker” will be used consistently in communications as an umbrella term that encompasses the following job titles: Allied Health Providers, Community Health Advisors, Peer Counselors, Peer Leaders, Promotores de Salud, Community Lay Workers, etc. *There are many job titles that fall under Community Health Worker.*

**Workforce Development**

**GOAL:** Establish a statewide infrastructure to support standardized training for CHWs.

CHWs should receive proper training and disease-specific education

Trainings will be based on national standards:
- Communication Skills
- Interpersonal Skills
- Knowledge of community/specific health issues/health and social service systems
- Service coordination skills
- Capacity-building skills
- Advocacy skills
- Teaching skills
- Organizational Skills

**Successful Completion of Training = Certification**

**Guidelines for Research & Evaluation**

**GOAL:** CHW related programs, definitions, roles, scope of practice, training, and certification will be grounded in evaluation research.

Performance Measures Examples:
- # of consumers who receive information
- # of CHW program activities consumers engage in
- # of referrals made by CHWs
- # of consumers screened
- # of education programs facilitated by CHWs
- Improved Health outcomes
- Cost savings

**Funding**

**GOAL:** Create a sustainable funding stream for CHWs

Use Medical Assistance administrative match funds

Expand Medicaid Fee-for-Service reimbursable CHW services beyond scope of mental health

Providers should be able to bill Medicaid, Medicaid Managed Care & CHIP for CHW services.

Determine use of Section 1115 & Section 1915 Medicaid waivers
“Hopefully the cascade of changes on the drawing board in health policy, payment, technology, regulation, and public reporting will compel health leaders to embrace available methods to seek successful transformations.”

*Moving Beyond Repair* by Karen Wolk Feinstein
Questions
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