Written feedback should be submitted by April 17, 2018 via email to healthy@la.gov.

- Louisiana Community Health Outreach Network
 - If an organization, type of organization:
 - Other (please describe): Community health worker professional group
 - Region represented by organization:
 - Statewide

h. Improve Care Management/Care Coordination at MCO and Provider Levels

Request for input:

• Please offer suggestions for the RFP and/or model contract functions and elements related to improving care management and coordination at both the MCO and provider levels.

We strongly suggest that the RFP include the American Public Health Association's definition of Community Health Workers (CHWs) to ensure that all MCOs in Louisiana understand which of their current and future employees are members of the CHW workforce. The definition follows:

Community Health Workers (CHWs) are 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. CHWs also build 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.¹

• In addition, please provide your opinion on whether MCOs should be required to employ, support, and/or utilize Community Health Workers for certain populations and care management interventions? Please elaborate.

We recommend that MCOs in Louisiana be required to employ CHWs (either through direct hiring or subcontracts to agencies that currently employ CHWs) to provide services for some under-resourced populations and care management interventions. Specifically, we recommend that MCOs employ CHWs to serve enrollees with multiple chronic physical and behavioral health conditions, as well as otherwise underserved populations. We suggest that MCOs used evidence-based practices for employing CHWs, adapt these models to the local context, and collect data on their outcomes.

In considering how MCOs will supervise CHWs, we suggest that experienced CHWs may be the most effective supervisors. We are aware that CHW training will be an important consideration. We recommend highly that the state of Louisiana consider this issue very carefully, with significant input from existing CHWs. Please note that it is the policy of the American Public Health Association that boards or commissions making decisions about CHW workforce training and standards include at least 50% CHWs.² We at the Louisiana Community Health Outreach Network (a professional group for CHWs) would be happy to provide additional input. We also suggest consulting the Community Health Worker Core Consensus Project,³ which recommends that all CHW training be competency based.

1. https://www.apha.org/policies-and-advocacy/public-health-policy-statements/policydatabase/2014/07/09/14/19/support-for-community-health-workers-to-increase-health-access-and-toreduce-health-inequities

2. <u>https://www.apha.org/policies-and-advocacy/public-health-policy-statements/policy-database/2015/01/28/14/15/support-for-community-health-worker-leadership</u>

3. https://sph.uth.edu/dotAsset/55d79410-46d3-4988-a0c2-94876da1e08d.pdf