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The Honorable Eddie Day Pashinski
Chair
House Agriculture and Rural Affairs Committee
152 South Pennsylvania Avenue
Wilkes Barre, PA 18702

The Honorable Dan Moul
Republican Chair
House Agriculture and Rural Affairs Committee
30 West Middle Street
Gettysburg, PA 17325

Dear Chair Pashinski and Chair Moul,

On behalf of the PA Community Health Worker Collaborative, I would like to thank you for the opportunity to raise awareness for this vital work force. Community Health Workers (CHWs) have been serving rural communities across Pennsylvania, connecting individuals to services, improving health outcomes, reducing hospitalizations, reducing preventable deaths and helping to control Medicaid spending. Through coaching, education, and coordination of care, CHWs address mental health symptoms, such as depression and substance use disorder, social determinants of health, and chronic disease control. Without sustainable financing, these vital CHW services and programs remain at risk.

Background

Pennsylvania ranks 27th in the country for rural health care access and outcomes for a number of reasons.¹ A shortage of primary care health providers across the state of Pennsylvania is one clear reason. As of 2022, there are 148 geographical locations in Pennsylvania that are designated as “Health Professional Shortage Areas” and most of them are in rural areas.² In fact, twenty-two (22) percent of all Pennsylvanians live in an underserved area (either Health Professional Shortage Area or Medically Underserved Area).³ That means that the average person living in these areas struggles to find accessible primary care which includes routine check-ups, vaccinations and screening for cancer. When we talk about oral health, the need is even greater.⁴ The Pennsylvania Area Health Education Centers (AHECs; www.paahec.org) are working to address access to care through recruiting, training, and retaining health care professionals.

In addition to the shortage, health care providers have an increased awareness of the large role that factors outside the medical office or hospital play in an individual's health; otherwise known as Social Determinants of Health (SDoH). Research suggests that only about 20% of an individual's health is impacted by the clinical care they receive;⁵ yet, health care providers have limited time with patients and

a lack of expertise in resource availability. The answer to bettering the health of individuals in rural communities and in all of Pennsylvania is in enhancing the Community Health Worker (CHW) profession.

The Pennsylvania Community Health Worker Collaborative (PA CHW Collaborative) formed in 2021 as a grassroots coalition comprised of community organizations, Federally Qualified Health Centers, health systems, government agencies, payers, funders and other CHW stakeholders. The PA CHW Collaborative (www.pachw.org) facilitates active collaboration, advocacy, and support for and with CHWs employed by PA community health centers, community-based organizations, faith-based organizations, and health systems and has expanded to include CHW employers and CHWs statewide. Since CHW services are currently not reimbursable or billable in PA, the PA CHW Collaborative advocates for the development of long-term financing mechanisms to sustain the PA CHW workforce.

Community Health Workers 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 the worker to serve as a liaison between health and social services and the community to facilitate access to services and improve the quality and cultural competence of service delivery. A community health worker 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 Association⁶).

Rural areas in PA possess a vast shortage of health care providers. The ratio of physicians to rural PA residents is 586:1 compared to 420:1 for all Pennsylvanians and 350:1 in the U.S. Twenty-six percent of PA's rural residents live in Health Professional Shortage Areas (PA Office of Rural Health⁷). Furthermore, Pennsylvania has 131 mental health shortage areas and these areas meet less than 40% of the demand for psychiatric care.⁸ CHWs in rural areas fill the void created by this provider shortage by acting as a conduit to care, providing informal mental health support, and connecting individuals to needed health and human service resources. CHWs are vital to residents in rural communities who lack access to health care, behavioral health services, and transportation and serve the community by:

- Building 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;
- Serving as a liaison between communities and health care agencies;
- Providing guidance and social assistance to community residents;
- Enhancing community residents' ability to effectively communicate with healthcare providers;
- Providing culturally and linguistically appropriate health education;
- Advocating for individual and community health;
- Providing referral and follow-up services or otherwise coordinates care; and
- Identifying and helping enroll eligible individuals in federal, state, and local private or nonprofit health and human services programs

CHWs address health inequities and disparities by working with diverse and marginalized populations, meeting residents in a variety of settings, which typically include home and community settings. CHWs serve many diverse populations included, but not limited to:

- Individuals experiencing multiple social determinants of health barriers, such as employment, housing, and food security;
- People experiencing homelessness;

- High-risk pregnant women;
- People living with substance use disorder;
- Immigrants and refugees;
- Incarcerated individuals;
- Those experiencing financial hardship and unemployment; and
- Those who are uninsured or underinsured.

According to the 2023 PA CHW Employer Survey distributed by the PA CHW Collaborative, a wide array of organizations employ CHWs in rural areas of PA, including but not limited to:

- Alleghenies United Cerebral Palsy
- Alosa Health
- AHN Jefferson Hospital
- Alliance for Nonprofit Resources
- Beginnings Inc.
- Blueprints
- Carestar
- Center for Family Services
- Center for Healthcare Solutions
- Centerville Clinics, Inc
- Community Action Partnership of Cambria County
- Cornerstone Care, Inc.
- CSO Community Action Agency
- Dasher, Inc.
- Dress for Success Pittsburgh
- Family First Health
- Family Health Council of Central PA
- Family Links
- Geisinger
- Harrisburg Area YMCA
- Hartzell’s Pharmacy
- Healthy Start, Inc
- HOPE at St. Luke’s Hospital
- Keystone Health
- Keystone Rural Health Consortia, Inc.
- Latino Connection
- Laurel Health/North Penn Comp Health
- Lawrence County Social Services, Inc.
- Lehigh Valley Health Network
- North Penn Comprehensive Health Services
- Penn State Health
- PSU COM- Cancer Institute: Office for Cancer Health Equity
- Regional Integrated Human Services
- River Valley Health and Dental Center
- Sadler Health Center
- Sharon Community Health Center
- St. Luke's University Health Network
- The Primary Health Network
- The Wright Center for Community Health
- Women for Healthy Environment
- UPMC Children’s Hospital of Pittsburgh
- UPMC Health Plan

Issue

According to the 2022 PA CHW Employer survey conducted by the PA CHW Collaborative, 58% of PA CHW employers rely on grants to fund CHW positions, which makes long-term planning and continuity of programming tenuous. Survey respondents represent more than 440 CHWs and 95 CHW employers in PA, including FQHCs and medical clinics, community organizations, and health systems. Collectively they serve all 67 counties in the Commonwealth. 58% of employers identified philanthropic, state, and federal grants as the most common funding source, and 72% of grants have grant periods of three years or less. Grant funding for CHWs poses challenges, including employment insecurity, narrow program goals and populations, and discontinuation of critical peer-based care coordination services for vulnerable individuals. PA Physical Health Managed Care Organizations (PH-MCOs) have latitude to incorporate CHWs through the PA HealthChoices Community Based Care Management program, but only 13% of CHW positions are currently funded through PH-MCO contracts.

PA Medicaid expenditures are among the highest in the nation, and Medicaid spending accounts for one-third (\$37 billion) of all state spending. In addition to providing a positive social return on investment, CHWs improve health outcomes, reduce hospitalizations, reduce emergency care use, and reduce health care spending. For example, every dollar spent on patients receiving support from CHWs through the IMPaCT intervention resulted in an annual return on investment of \$2.47 for every dollar invested annually by Medicaid, mostly through reducing hospitalizations (Kangovi et al, 2020)⁹.

A state plan amendment that ensures CHW services are covered medical costs under Medicaid is the most effective method for sustainable CHW financing across the U.S. States can authorize Medicaid payment for CHW services under different state plan benefits, including under the preventive services benefit or outpatient services benefit. As of December 2022, ten U.S. states have incorporated CHW services into their Medicaid programs through state plan amendments, including California, Indiana, Louisiana, Minnesota, Nevada, North Dakota, Maine, Oregon, Rhode Island, and South Dakota. Four additional states, including Michigan, New York, Kentucky and Illinois, plan to introduce their state plan amendment in 2023 (Kaiser Family Foundation, 2023)¹⁰.

Conclusion

A statewide Pennsylvania strategy to address health inequities, control costs, and improve health outcomes must include steps to secure sustainable financing for CHWs. The PA CHW Collaborative recommends that PA legislators and PA Department of Human Services support CHWs in PA by submitting a State Plan Amendment to formally add CHW services to the state plan to ensure these services are considered medical costs.

Sources:

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