

Central Ohio Community Pathways HUB
RFP Frequently Asked Questions
Updated 7/23/2019

Question: Do the individuals providing Pathways services have to be Community Health Workers (CHWs)?

Answer: If the individual has had a positive work history without certification they are still permitted to work through the HUB. While we would prefer CHWs that are properly certified, we recognize this certification takes time and money that we will not require the CCAs to take on at this point, but it should be the goal of the CCAs to get to a point of all CHWs having met certification.

Question: Is the cost for CCS a per person cost?

Answer: Yes. Each CCS license is a flat rate of \$1500 per license per year. Each CHW and each supervisor is required to have a license for the program.

Question: How are individuals assigned to a CCA?

Answer: Your CHWs will still engage individuals in the community through their normal course of work, gaining people to provide Pathways services to through that mode. The HUB will also be performing a referral service that intends to refer individuals to the most appropriate CCA for them – whether based on location, services needed, current engagement.

Question: Is the list of reimbursable services on the RFP comprehensive?

Answer: No. The table on the RFP is a list of example reimbursable services. All 20 Pathways will be reimbursable, including housing.

Question: What is the cost to participate?

Answer: The licensing of each CHW and supervisor for use of CCS is a start up cost that the CCA will have to be prepared for. There may be HR related costs but that is agency dependent. We require a laptop or tablet and would also recommend that each CHW have a cell phone if they don't already, simply for safety purposes.

Question: Is there a list of the 20 Pathways?

Answer: Yes – all information related to the general information on the HUB can be found in the webinar materials. This list is included in that slide deck.

Question: When can CCAs expect to receive their first reimbursement?

Answer: The program is intended to go live on March 1st. The information to bill for March will be sent to the Plans at the end of the month. There is a lag time in receiving money back from the plans but the reimbursement should be seen approximately 8 weeks after billed.

Question: Will reimbursements be retroactive through Jan 1st?

Answer: All agencies who are selected to participate in the HUB reimbursements will be for March 1st moving forward. For those agencies who participated in CCN, there is no current reimbursement for January and February.

Question: How do we find information concerning the CHW Certification process via OSU?

Answer: Here is the website for the Statewide information for certification programs <http://www.nursing.ohio.gov/CommunityHealthWorkers.htm> We will be working on other potential options in this space as well.

Question: Is there a minimum of CHWs required?

Answer: No there is not a minimum. Our focus is less on the quantity and more on the quality of those participating - all are expected to participate in the trainings and to deliver a successful Pathways model.

Question: How are the reimbursement rates going to be determined?

Answer: The rates are based on the negotiations with the Managed Care Plans – they are determined based on areas of focus for the Plans, patient populations and other factors.

Question: How much client contact is required of the CHW? What is a standard caseload?

Answer: We require at least one face to face meeting with each client per month from the CHWs as well as one form of outreach – text, phone call or email. This allows for a building of trust and a relationship between the CHW and the individuals they serve. It also allows for clarity about what Pathways are necessary, working and need to be addressed. We will have a performance improvement plan for any CHW who does not stay up to date on their monthly engagement with clients. The average caseload is approximately 30 clients per CHW. We want to focus on making sure that the quality of the relationships is the focus so that the clients can be successful and the Pathways are accomplished.

Question: Is a Facetime call an option if the resident prefers that as opposed to an in person meeting?

Answer: The managed care plans require that in person meetings be, in fact, in person. If an individual doesn't want to meet in person, there is a strong likelihood that they will not want to engage on the other core tenants to be successful in this model. As long as the CHWs safety is priority, we would suggest that being flexible about meeting location be considered for the individual's comfort.