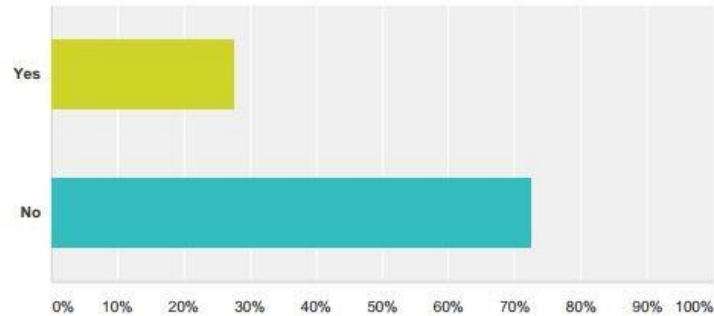


Question 1 – Employment of CHWs

The majority of survey respondents (72.5%) indicated that they are not currently employing CHWs, while 27.54% are currently employing CHWs.

Q1 Is your organization currently employing Community Health Workers or Aides?

Answered: 69 Skipped: 0



| Answer Choices | Responses |
|-----------------------|-----------|
| Yes | 27.54% 19 |
| No | 72.46% 50 |
| Total Respondents: 69 | |

- What other titles are used besides CHW?

- Community Health Representatives
- SNAP-Ed or EFNEP Nutrition Educators, SNAP-Ed Program Managers
- Outreach Workers
- CAC's
- Navigators
- Resource Advocates
- Personal Care Attendants

Question 2 - If you do not employ CHWs, how likely are you to employ them in the future?

Approximately 12% of survey respondents stated they would "Likely" employ CHWs in the future, while 27.5% indicated that they were "Not sure" if CHWs would be hired in the future. 36% of survey respondents also specified that they would not hire CHWs in the future. Additionally, survey data included that 25% of respondents already employed CHWs.

- In what capacity would you use CHWs?

- Identify and Register Agricultural Workers, identify health care and social service needs and make appropriate referrals with follow-up, CAC, preventive health education, interpreting, and limited transportation (Migrant workers)

- Once Medicaid expansion is approved for those over 50 – 65
- Post-hospital follow up visit to home to review discharge instructions and medications.
- Peer education for diabetes, support for lifestyle change programs such as the Diabetes Prevention Program.
- We want to promote the use of CHWs in the healthcare field as a public health model to provide quality patient care.
- In rural areas I can see them being utilized as navigators to assist patients throughout the healthcare process especially if referrals are made.
- To help provide healthcare services on the Fort Peck reservation where we are short healthcare providers (like through telehealth coordination)
- Assistance with transitions of care and diabetes self-management education
- Unsure, but perhaps a hospital/public health partnership for better health outcomes
- Visiting aid, CNA or Nurse
- Health education

Questions 3 & 4 - Asked for additional organizations that should be included in the survey and if they were willing to be contacted by phone.

Question 5 – Please explain what your role will be in reimbursing or helping other organizations utilize CHWs?

- Transportation on reservation - Sheridan and Billings
- Paid through IHS 638
- Can fill for services from the state. Need help in paying for coverage in order to continue services.
- The Montana State University Extension Nutrition Education Program consists of two federally funded nutrition education programs, SNAP-Ed (Supplemental Nutrition Assistance Program Education) and EFNEP (Expanded Food and Nutrition Education Program). We employ educators across the state to teach nutrition and physical activity low income audiences, and also work in the area of creating policy, systems, and environment change to improve access to and appeal for nutrition and physical activity.
- We would primarily refer people to navigators. When Medicaid expansion is approved we might consider being more involved with those 50 and above.
- Training them to facilitate peer diabetes education classes.
- I would be happy to assist others in developing CHW programs now that the grant I am currently working on has completed.
- State public health department, supporting CHWs in finding roles in diabetes public health programs, networking, and training.
- Marketing-letting others know the program is available.
- We are very interested in payment models that could make this a break-even program.
- I am working on a CMS Special Innovation Project that would employ CHWs to do patient outreach work with super-utilizer patients. The intent is expand this program to multiple locations.

- We (MHA/MHREF) will happily help facilitate the management of CHWs at facilities that employ them, and analyze the impact of their use.
- We can facilitate the use of CHWs, assess impact statewide, work with facilities and insurers to advocate for reimbursement, and provide other coordination/communication functions.
- Utilizing revenue cycle setup to fund the program.
- I manage the CHW here at this facility and I am an advocate for this program in our community.
- MTGEC would be interested in assisting with education of CHW's, particularly in the area of older adults.
- As a payer we look forward to participating in the discussions and exploring the future of CHW's.
- May administer funds – community discussion required.
- Analysis and conduit for policy changes.

Question 6 – How many Full time and Part time CHWs do you employ?

Of the 25% survey respondents that indicated they currently employ CHWs, the total numbers of Full time positions within their organizations are 92 FTE and number Part time CHW positions within their organizations are 38 PT.

Question 7 – Would you be likely to hire additional CHWs in the future?

Approximately 44% of survey respondents stated that they would “Definitely [hire additional CHWs] within the next 12-18 months.”

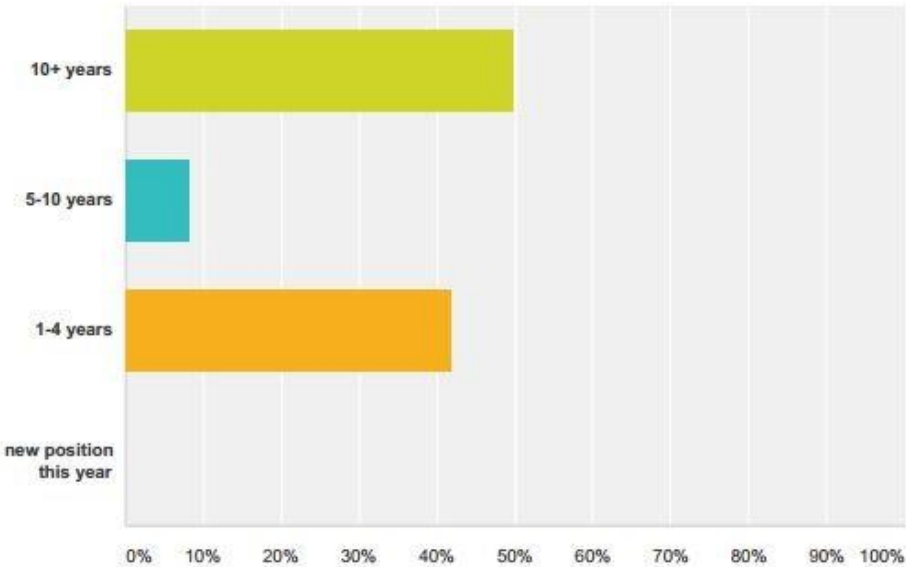
28.6% of survey respondents indicated that they were “Unsure”.

The majority of survey respondents (55%) specified “Lacking funding to hire additional CHWs” would be a concern for future employment of community health workers.

Question 8 – How long have you employed CHWs?

Q8 How long have you employed CHWs?

Answered: 12 Skipped: 57



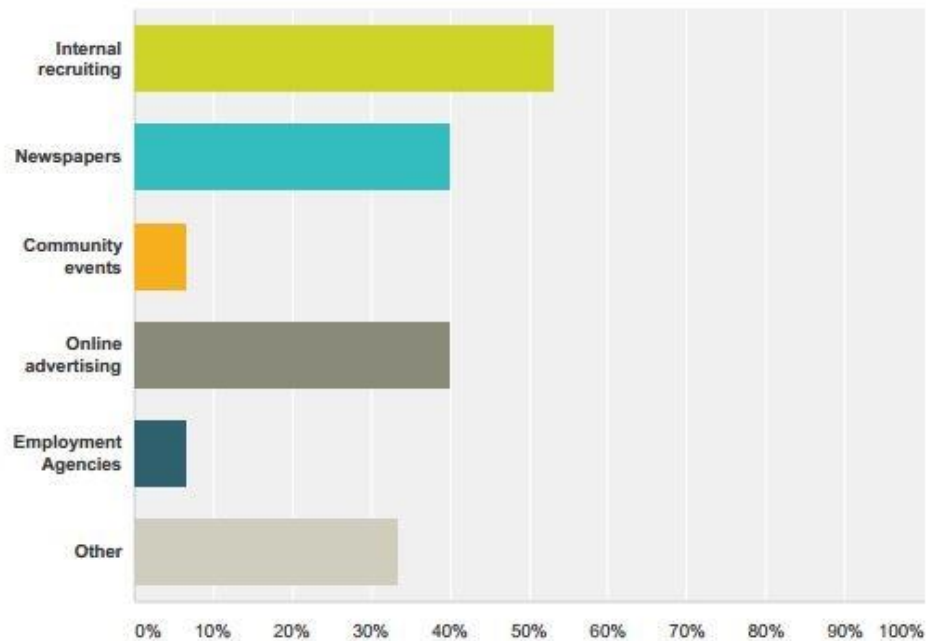
| Answer Choices | Responses | Count |
|------------------------------|-----------|-------|
| 10+ years | 50.00% | 6 |
| 5-10 years | 8.33% | 1 |
| 1-4 years | 41.67% | 5 |
| new position this year | 0.00% | 0 |
| Total Respondents: 12 | | |

Additionally survey data indicated that some organizations, such as those within the Tribal Health Department and Expanded Food & Nutrition Education Program (EFNEP), have used CHWs for many years. EFNEP has used nutrition educators for over 45 years while tribal health departments have used Community Health Representatives since 1969.

Question 9 – What is the main method you use for recruiting?

Q9 What is the main method you use for recruiting?

Answered: 15 Skipped: 54



| Answer Choices | Responses | Count |
|------------------------------|-----------|-------|
| Internal recruiting | 53.33% | 8 |
| Newspapers | 40.00% | 6 |
| Community events | 6.67% | 1 |
| Online advertising | 40.00% | 6 |
| Employment Agencies | 6.67% | 1 |
| Other | 33.33% | 5 |
| Total Respondents: 15 | | |

Additionally, survey data indicated that tribal health departments are in the process of hiring new directors and upgrading job descriptions for CHRs.

Question 10 – What are the required qualifications for the CHWs you employ? Is there a difference in qualification for entry level or experienced workers?

- Driver's license, auto insurance, vehicle registration, own vehicles (GSA) gov. vehicle
- CHR basic through IHS, Driver's license, background check, CPR/First Aid/HIPAA
- Job descriptions are so old. High School diploma; CNA if doing diabetes screenings - mostly they transport patients/ (New director is being hired)

- CNA certification / High School diploma / drug test / background check
- Many levels - paraprofessional level, entry level professional level, experienced professional level
- Bilingual
- Prefer medical or social service background with work in care management.
- They had to have a high school diploma or GED, had to have a driver's license
- Caregiving experience, Adults, Clear background check
- Lives in the community & active in the community. Aware of community resources for clients; Communication Skills; Non-clinical Patient- focused.

Question 11 – What are the factors that affect wages and benefits? Please provide minimum/maximum salaries.

Survey respondents indicated a range for salary for FTE as \$12 to \$14, plus benefits.

Question 12 – What type of training is offered by your organization?

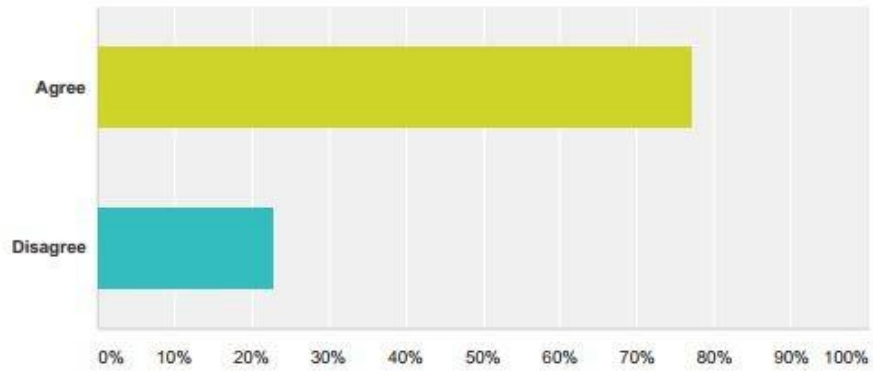
_CPR training, Supervisor goes to training

- IHS does training
- Trainings offered by state, IHS, anything pertaining to health
- Career development / Certification renewals / IHS CHR conferences and training
- New hire training, annual training for all employees, webinar training's throughout the year
- Risk Management, general staff orientation, other trainings offered of organizational memberships to NACHC, MCN, CHAMPS, NCFH
- All offerings by the federal government
- We did 2 days of training based off the Minnesota curriculum and had monthly educations
- We participated in the MHA pilot program so the criteria, qualifications, and training came from MHA.
- CNA and other online and on the job training
- Direct Agency Training and caregiving training from clients.

Question 13 – Should the state of Montana have a standardized program for CHWs?

Q13 Should the state of Montana have a standardized training program for CHWs?

Answered: 22 Skipped: 47



| Answer Choices | Responses |
|------------------------------|-----------|
| Agree | 77.27% 17 |
| Disagree | 22.73% 5 |
| Total Respondents: 22 | |

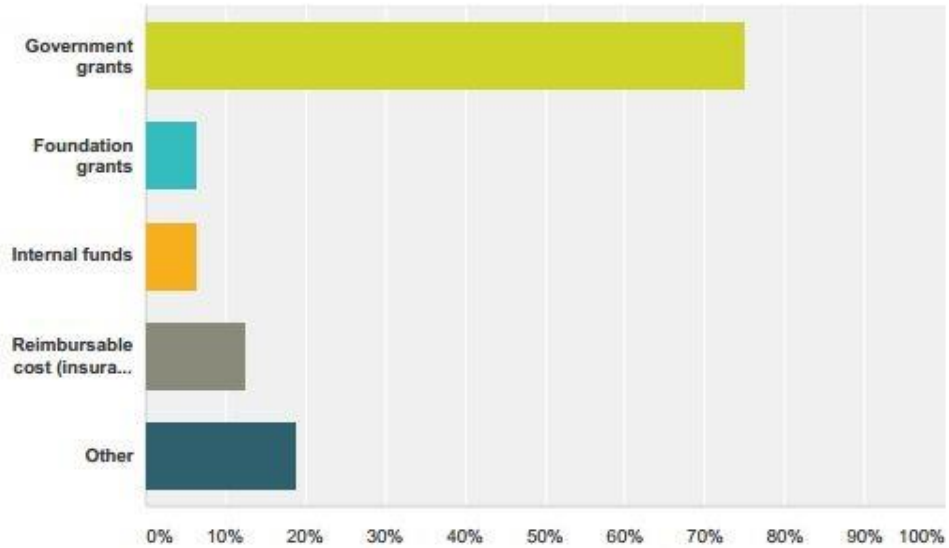
Several respondents expressed an interest in standardized training, but noted that they felt they would still need specialized training for their circumstance. Some expressed an interest in “training in place” rather than going off-site.

NOTE: The Indian Health Service CHR website has an in-depth list of Core Standards and Standards of Practice.

Question 14 – What is the source of funding for financing CHW positions?

Q14 What is the source of funding for financing CHW positions?

Answered: 16 Skipped: 53



| Answer Choices | Responses |
|---|-----------|
| Government grants | 75.00% 12 |
| Foundation grants | 6.25% 1 |
| Internal funds | 6.25% 1 |
| Reimbursable cost (insurance or Medicaid) | 12.50% 2 |
| Other | 18.75% 3 |
| Total Respondents: 16 | |

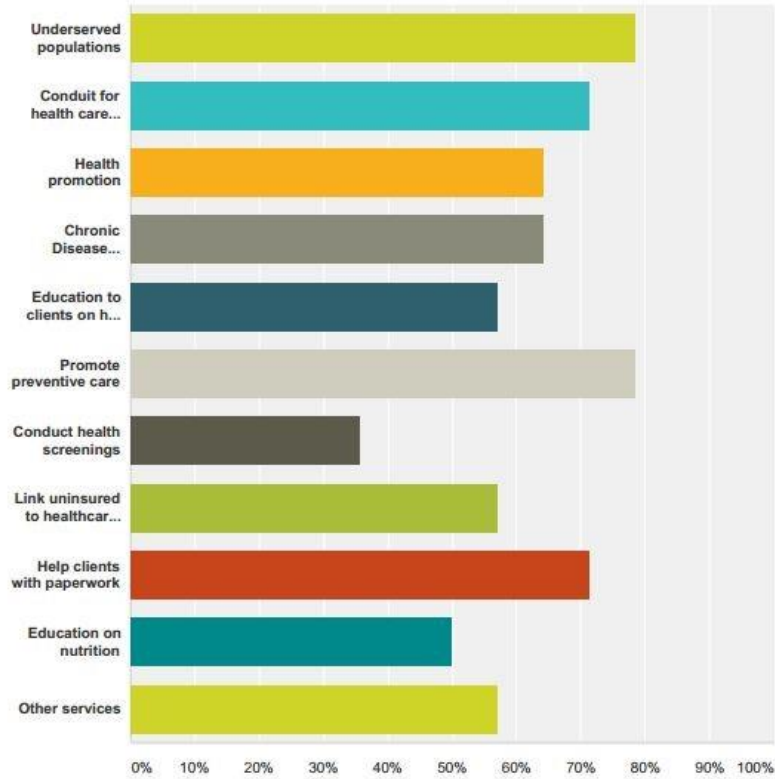
The majority of survey respondents (75%) indicated government grants as a funding source which include but are not limited to the Federal Farm Bill, IHS, and Medicare.

Other survey participants indicated "Other" (18.75%), "Reimbursable cost (12.5%), "Foundation grants" (6.25%), and "Internal funds" (6.25%) as sources of funding for financing CHW positions.

Question 15 –What services are provided by the CHWs that you employ?

Q15 What services are provided by the CHWs that you employ?

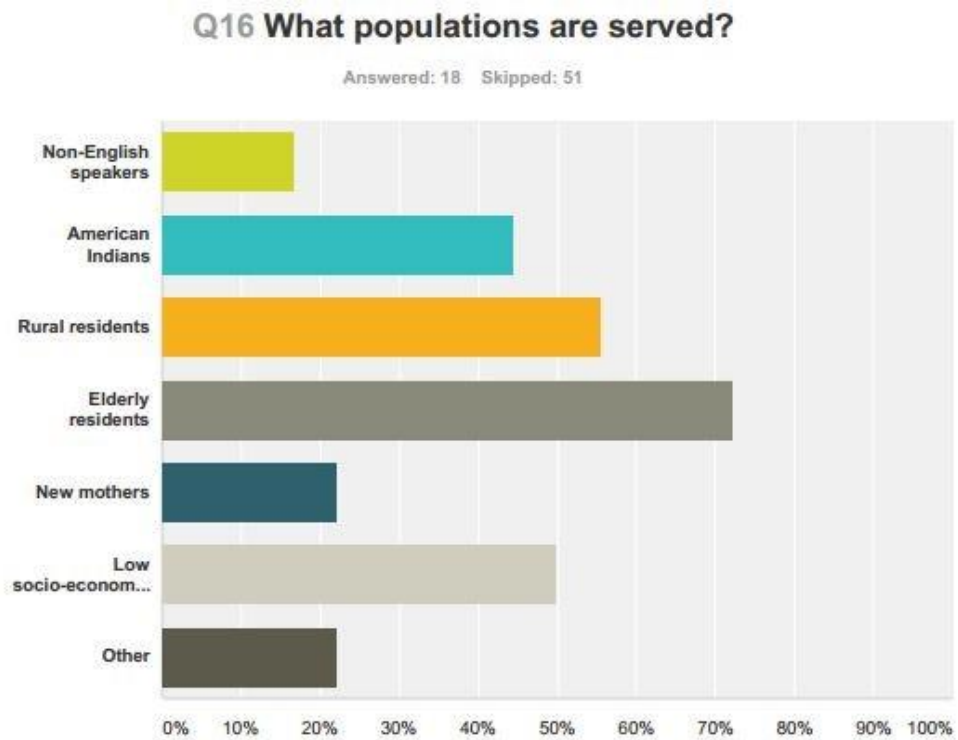
Answered: 14 Skipped: 55



| Answer Choices | Responses |
|--|-----------|
| Underserved populations | 78.57% 11 |
| Conduit for health care information and services | 71.43% 10 |
| Health promotion | 64.29% 9 |
| Chronic Disease management | 64.29% 9 |
| Education to clients on how to navigate and get access to healthcare | 57.14% 8 |
| Promote preventive care | 78.57% 11 |
| Conduct health screenings | 35.71% 5 |
| Link uninsured to healthcare coverage | 57.14% 8 |
| Help clients with paperwork | 71.43% 10 |
| Education on nutrition | 50.00% 7 |
| Other services | 57.14% 8 |
| Total Respondents: 14 | |

Other services included Transporting clients/patients.

Question 16 – What populations are served?

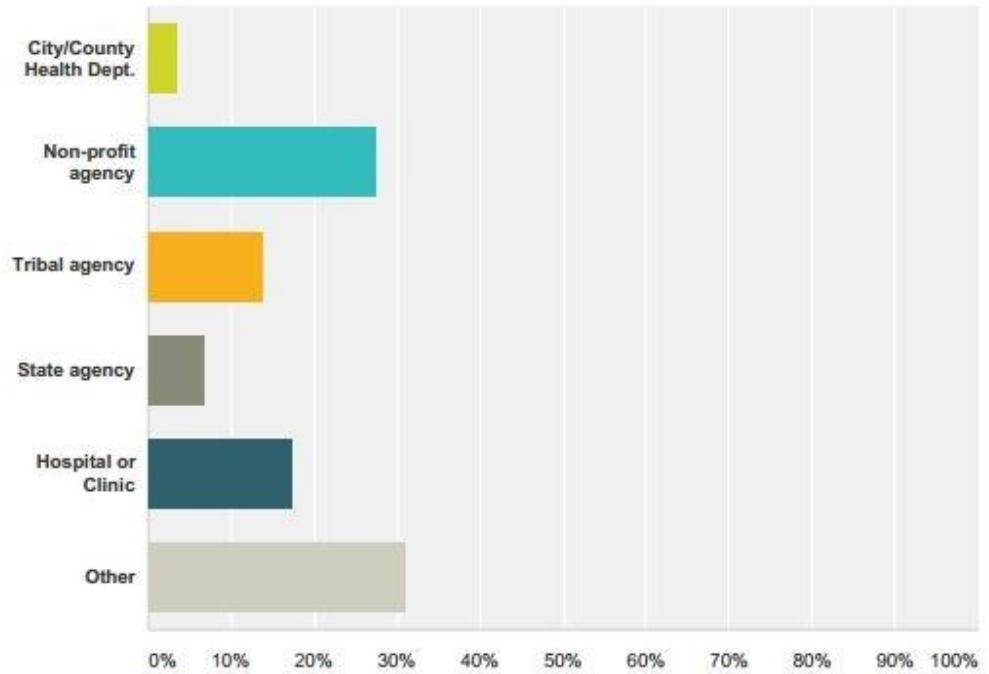


| Answer Choices | Responses |
|-------------------------------|-----------|
| Non-English speakers | 16.67% 3 |
| American Indians | 44.44% 8 |
| Rural residents | 55.56% 10 |
| Elderly residents | 72.22% 13 |
| New mothers | 22.22% 4 |
| Low socio-economic households | 50.00% 9 |
| Other | 22.22% 4 |
| Total Respondents: 18 | |

Question 17 – How would you describe your organization?

Q17 How would you describe your organization?

Answered: 29 Skipped: 40



| Answer Choices | Responses |
|------------------------------|-----------|
| City/County Health Dept. | 3.45% 1 |
| Non-profit agency | 27.59% 8 |
| Tribal agency | 13.79% 4 |
| State agency | 6.90% 2 |
| Hospital or Clinic | 17.24% 5 |
| Other | 31.03% 9 |
| Total Respondents: 29 | |