



Health Resources and Services Administration

Office of Intergovernmental and External Affairs

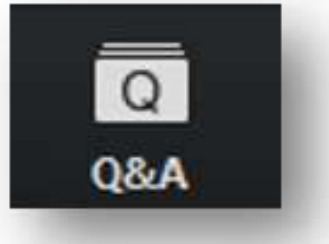
February 8, 2022

Telehealth and the Impact of Community Health Workers (CHWs)

Christopher J Bersani, Psy.D., ABPP
Captain, U.S. Public Health Service
Deputy Regional Administrator
Office of Intergovernmental and
External Affairs Region 1 Boston



Webinar Logistics



Our Speakers



Christopher J Bersani, Psy.D., ABPP
Captain, U.S. Public Health Service
Deputy Regional Administrator
Office of Intergovernmental and
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Danielle Louder, Program
Director, Northeast
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Laurie Somers, Northern
Counties Health Care
(NCHC) Lead Community
Resource Coordinator St
Johnsbury, VT

Reid Plimpton,
Program Manager,
Northeast Telehealth
Resource Center



Agenda

- **Welcome and Logistics**

Veronica Roa, Public Health Analyst, HRSA IEA - Region 1

- **HRSA Telehealth Resources Overview**

Christopher Bersani Captain, U.S. Public Health Service, Deputy Regional Administrator, HRSA IEA - R1

- **Northeast Telehealth Resource Center Updates**

Danielle Louder, Program Director, Northeast Telehealth Resource Center

- **Behavioral Health Access through Community Health Worker Legislative Reform and Workforce Development in Rural FQHC**

Anne Perry, Boston University School of Public Health, MPH Candidate

- **Community Health Workers at the Heart of our Mission, Northern Counties Health Care, Inc.**

Kari white, Director of Quality Initiatives and Compliance, Privacy Officer at Northern Counties Health Care, Inc.

- **Q&A | Closing Remarks**

Reid Plimpton, Project Manager, Northeast Telehealth Resource Center



Office of Intergovernmental and External Affairs (HRSA IEA)

Ten Regions - One HRSA

Mission: To provide on-the-ground outreach to increase the reach, impact, and awareness of HRSA programs.



Current Telehealth Activities in HRSA

Overview



Currently approximately **1,886 awards** include a telehealth component



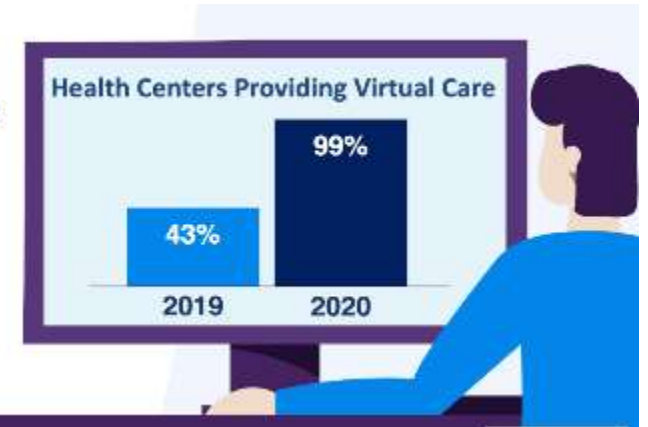
50 states and 8 federal districts/territories have awards



Target populations

Include the underserved, health care providers, and rural communities

HRSA-funded health centers dramatically increased access to virtual care in 2020.



Benefits of Telehealth



Provider Benefits:

- Workforce multiplication/serve more patients
- Workforce development
- Fewer no-shows
- Improved care delivery/more, easier checkups



Patient Benefits:

- Increased access to care
- Reduced travel
- Less wait time for service
- Health care while isolated to prevent infection (new use)



Payer Benefits:

- Reduced cost for transport (Medicaid)
- More timely care for better outcomes/lower cost



TELEHEALTH.HHS.GOV

An official website of the United States government [Here's how you know](#) Español

TELEHEALTH.HHS.GOV

About **For patients** For providers For researchers Funding opportunities Events

Best practice guide

Telehealth for behavioral health care

[For providers](#) [Best practice guides](#)

Introduction to telehealth for behavioral health care

[Print this page](#)

Behavioral health — like other areas of health care — has changed significantly due to the COVID-19 public health emergency. Mental health providers can now offer and get reimbursed for behavioral telehealth services.

Behavioral telehealth also benefits patients who can access care from their homes with more options for safety, privacy, and convenience.

Behavioral telehealth may also be referred to as telebehavioral health, telemental health, telepsychiatry, or telepsychology.

[Getting started](#)

[Developing a telebehavioral health strategy](#)

In this guide

- Introduction**
- Getting started
- Developing a telebehavioral health strategy
- Billing for telebehavioral health
- Preparing patients for telebehavioral health
- Individual teletherapy
- Group teletherapy
- Tele-treatment for substance use disorders



FCC Programs Supporting Consumer Broadband Access



<https://www.lifelinesupport.org/>

Lifeline is a federal program dedicated to making phone and internet service more affordable for low-income households. The benefit provides consumers with a monthly discount of up to **\$9.25**. **Consumer living on Tribal lands are eligible for an enhanced discount of up to \$24.25 a month**



<https://www.fcc.gov/acp>

The benefit provides a discount of up to **\$30 per month toward internet service for eligible households and up to \$75 per month for households on qualifying Tribal lands**

Community Health Workers Impact

- Improve patient engagement in care
- Bridge language, culture, social supports and health care
- Coordinate care across sectors
- Advance population health
- Allow primary care and other providers to focus more on patient care
- Decrease costs of care



HRSA Telehealth Related Funding Opportunities



GRANTS.GOVSM
FIND. APPLY. SUCCEED.™

HELP | REGISTER | LOGIN

SEARCH: Grant Opportunities | Enter Keyword... GO

HOME | LEARN GRANTS | SEARCH GRANTS | APPLICANTS | GRANTORS | SYSTEM-TO-SYSTEM | FORMS | CONNECT | SUPPORT

GRANTS.GOV > Search Grants

SEARCH GRANTS

BASIC SEARCH CRITERIA:

Keyword(s):

Opportunity Number:

CFDA:

SEARCH TIPS | EXPORT DETAILED DATA |

SORT BY: Relevance (Descending) DATE RANGE: All Available

1 - 25 OF 46 MATCHING RESULTS: 1 2

Opportunity Number	Opportunity Title	Agency	Opportunity Status	Posted Date	Close Date
HRSA-22-030	Telehealth Strategies to Maximize HIV Care	HHS-HRSA	Posted	01/11/2022	04/08/2022
PA-FPH-22-002	Family Planning Telehealth Infrastructure Enhancement and Expansion Grants	HHS-OPHS	Posted	11/23/2021	02/03/2022
HRSA-22-121	American Rescue Plan Act – Pediatric Mental Health Care Access – New Area Expansion	HHS-HRSA	Posted	01/05/2022	04/05/2022
HRSA-22-115	Rural Maternity and Obstetrics Management Strategies Program	HHS-HRSA	Posted	01/05/2022	04/05/2022
HRSA-22-117	Rural Public Health Workforce Training Network Program	HHS-HRSA	Posted	12/17/2021	03/18/2022
HRSA-22-072	Leadership Education in Adolescent Health (LEAH) Program	HHS-HRSA	Posted	11/03/2021	02/15/2022
HRSA-22-009	Fiscal Year 2022 Health Center Controlled Networks	HHS-HRSA	Posted	10/26/2021	02/01/2022
HRSA-22-056	Nurse Education, Practice, Quality and Retention-Mobile Health Training Program (NEPQR-MHTP)	HHS-HRSA	Posted	12/03/2021	02/22/2022
HHS-2022-IHS-ALZ-0001	Addressing Dementia in Indian Country: Models of Care	HHS-IHS	Forecasted	05/26/2021	
HRSA-22-019	Ryan White HIV/AIDS Program Part C Capacity Development Program	HHS-HRSA	Posted	12/14/2021	02/15/2022
USDA-NIFA-RHSE-008841	Rural Health and Safety Education Competitive Grants Program	USDA-NIFA	Posted	01/20/2022	04/29/2022
HRSA-22-008	Service Area Competition	HHS-HRSA	Posted	12/09/2021	02/07/2022
HRSA-22-125	Service Area Competition-Additional Areas: Lexington, KY and Worcester, MA	HHS-HRSA	Posted	12/09/2021	02/07/2022
HRSA-22-064	Rural Communities Opioid Response Program-Behavioral Health Care Technical Assistance	HHS-HRSA	Posted	12/08/2021	03/09/2022
HRSA-22-050	Grants to States to Support Oral Health Workforce Activities	HHS-HRSA	Posted	11/17/2021	01/31/2022
HRSA-22-053	Area Health Education Centers Program	HHS-HRSA	Posted	01/06/2022	04/06/2022
HRSA-22-059	Rural Health Network Development Planning Program	HHS-HRSA	Posted	10/29/2021	01/28/2022

OPPORTUNITY STATUS:

Forecasted (2)

Posted (44)

Closed (22)

Archived (275)

FUNDING INSTRUMENT TYPE:

All Funding Instruments

Cooperative Agreement (28)

Grant (20)

Procurement Contract (1)

ELIGIBILITY:

All Eligibilities

City or township governments (12)

County governments (12)

For profit organizations other than small businesses (5)

Independent school districts (0)

CATEGORY:

All Categories

Agriculture (1)



When should you contact HRSA IEA?

- When you want to know more about HRSA programs or initiatives
- When you need contextual information about the state, local, tribal, and regional landscape that may impact your stakeholders
- When you are looking for technical assistance, resources (including funding opportunities) or new partners
- **Simply to connect!**



HRSA IEA Contact Information

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<https://www.hrsa.gov/about/organization/offices/hrsa-ia>



Office for the Advancement of Telehealth

Telehealth Resource Centers




The purpose of the **Telehealth Resource Center Program** is to support delivery of telehealth technical assistance.

- **National Policy Telehealth Resource Center**
- **National Technology Telehealth Resource Center**
- **Regional Telehealth Resource Centers**

In 2021, the Telehealth Resource Centers had over 5,500 technical assistance inquiries, and more than 2,700,000 website visits

In 2021, the Telehealth Resource Centers reached more than 175,000 participants through over 3,000 outreach events





Telehealth
Protocols &
Workflows

Policy, Legal
and
Regulatory
Factors

Technology
Assessment

Business and
Strategic
Planning

Our services

Technical Assistance

We provide expert technical assistance to help build and enhance telehealth programs across the nation. Key focus areas include but are not limited to: telehealth policy, technology, business planning, workflow, etc.

Development

We develop educational materials and resources for health systems, providers and patients. Includes: designing/ executing needs assessments, identifying funding sources, and assisting with telehealth technology selection is also among our specialties.

Business strategy

We connect telehealth leaders at local, state, and federal levels to raise awareness and collaboratively produce specialized tools and templates for telehealth programs and providers.

Training Resources for CHWs

Community Health Worker Online Training Program:

- Includes CHW Chronic Conditions Training, COVID-19 CHW Training, COVID-19 Vaccine course for CHWs, and Community Health Worker Core Competency Training – visit the MCD [Global e-Training & Technical Assistance Center](#) to learn more and access trainings!
- [CHW Core Competency Training](#) - Developed in collaboration with community health workers (CHW) from across the U.S. - virtual training in response to heightened need for CHWs as essential frontline professionals in our health care and public health systems; 12 self-paced modules and 40 hours of live training; follows the [CHW Core Consensus Project \(C3\)](#) CHW Roles and Competencies recommendations

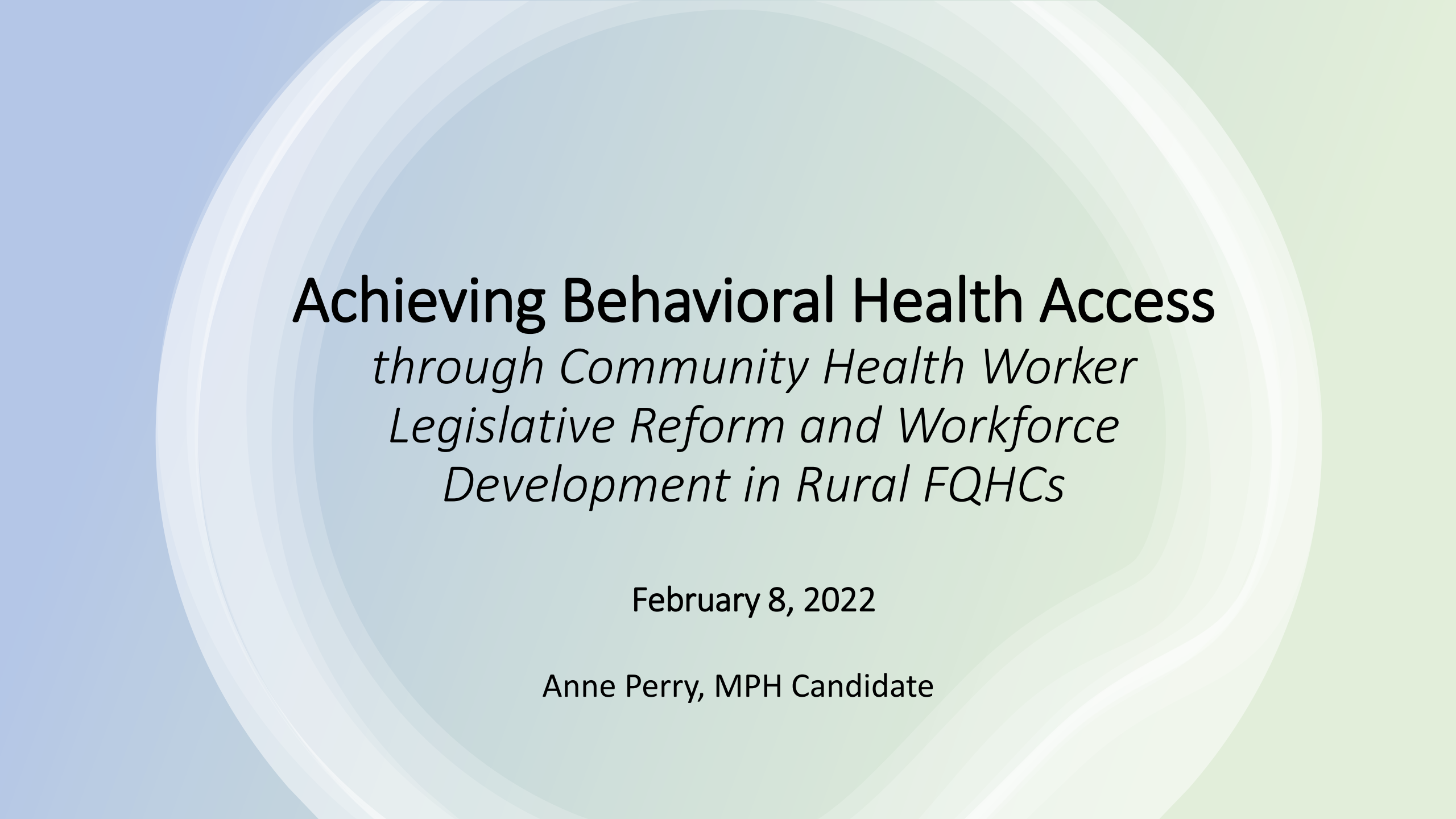


CHW Training Program has reached **50 states** and more than **9,000 end users** from health departments, health systems, and community-based organizations.



Collaborative project of the MCD eTraining and NETRC teams – can be found on the CHW Training Portal and on [NETRC's Telehealth Classroom](#)

White House Office of Science and Technology Policy (OSTP) Request for Information (RFI) on Strengthening Community Health Through Technology. [Provide Your Expertise/Input!](#)



Achieving Behavioral Health Access

*through Community Health Worker
Legislative Reform and Workforce
Development in Rural FQHCs*

February 8, 2022

Anne Perry, MPH Candidate

Agenda

- Problem at hand
- Current Strategies
- CHW Background
- CHW Behavioral Health (BH) Studies
- Proposed Strategies
- Resources





A historical crisis in health equity

- Shortage of Mental Health (MH) providers: 65% MH care from Primary Care Physicians (PCPs)
- 61.47% of Primary Care Health Professional Shortage Areas (HPSAs)
- Pre and post COVID-19 (2021)
- 93,000 deaths from drug overdose (2020)
- Lack of comprehensive Substance Use Disorder (SUD) services
- Medically vulnerable
- 1 in 5 rural residents served by Federally Qualified Health Centers (FQHCs)

Current Strategies

J-1 Visa Exchange Visitor Program

- Most utilized recruitment and retention program
- Retention rates after required service (4% in 5-10 years)
- Ethical concerns
- Unfair treatment

Telemedicine

- Telepsychiatry (75.9% in 2019)
- Tele-SUD on the rise (13.5% to 17.4%)
- Provider-to-provider telehealth (RT)
- Broadband access (33% rural Americans lack; 34% fewer visits)



CHW Background

- American Public Health Association (APHA) definition
- Chronic disease management
- Individualized Management for Patient-Centered Targets (IMPACT)
\$2.47 return for every dollar invested (2020)
- U.S. Department of Labor recognition (2010)
- Key functions
- Staffing



The CHW is defined as a, "trusted member of the community that has an unusually close understanding of that community served that enables the CHW 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." (APHA, 2000)

CHWs in BH



- 62.24% of FQHC patients are racial/or ethnic minorities
- Major barriers to treatment*:
 - Mistrust, stigma, miscommunication, financing, and burden of illness.
- CHWs have common culture, language, and community with patients
- Familiarity in social determinants of health (SDOH):
 - Socioeconomic status (SES), incarceration, risk behavior, disease, limited access to resources, poor quality of care, and homelessness.
- Mental Health Task Sharing

Office of the Surgeon General (US); Center for Mental Health Services (US); National Institute of Mental Health (US). Mental health: Culture, race, and ethnicity. A Supplemental to Mental Health: A Report of the Surgeon General. <https://www.ncbi.nlm.nih.gov/books/NBK44243/>.

Published 1999. Accessed November 17, 2021. *

CHW BH Studies

Study	Findings
CHW Systemic Review (2018)	Clinical trials 1990 to 2015 found three major types of CHW roles in behavioral health services: sole treatment providers, stepped care, and auxiliary roles.
CHWR scale v SRH (2020)	Researchers determined the ability of CHWs to accurately score patients' mental health from a CHW-rated health (CHWRH) compared to a self-rated health (SRH) by patients.
CHWPSP v ESR (2020)	The Personalized Support for Progress (PSP) method ran by CHWs reduced health care utilization and costs among women with elevated depression compared to the lower intensity standard care model, the Enhanced Screening and Referral (ESR).
CHW-ODU ECHO (2021)	In post-test, CHWs showed a marked increase to knowledge of Opioid Use Disorder (OUD) after ECHO telehealth training on behavioral health integration with a focus on opioid prescription misuse to properly assess, plan, and implement evidence-based treatment.

Proposed Strategies

- Policy reform
- Workforce development



Defining, Certification, Reimbursing, and Training



- Working definitions of CHWs (2019)
- Credentialing/certification (2021)
- Community Health Worker Associations
- Community Health Worker Core Consensus (C3)
- APHA Recommendations

Certification Programs

State operated certification program: Massachusetts, Connecticut (required), New York, Maryland, Ohio (required for Board of Nursing certified CHWs), Indiana, Kentucky, Texas (required), New Mexico, Arizona, Nevada, Oregon, Illinois (required), Rhode Island, and Vermont.

Privately operated certification program: Pennsylvania, Virginia, South Carolina, Florida, Michigan, and Missouri.

Certification program under development: Minnesota, Mississippi, New Hampshire, and South Dakota.

Certification program under consideration: District of Columbia, West Virginia, North Carolina, Georgia, Iowa, Arkansas, Louisiana, Nebraska, Kansas, Oklahoma, Montana, Colorado, Utah, and Alaska.

Reimbursement



Prospective Payment System
(PPS)

Alternative Payment
Methodology (APM)

State Plan Authority (SPA)

Medicaid Managed Care
Organizations (MCOs)

Funding Mechanisms

States	Funding Mechanism
Connecticut	Connecticut does not reimburse for CHW services through its Medicaid program. CHWs receive grant funding through HRSA, CDC, and NIH.
Maine	Maine reimburses for CHW services through its Medicaid Community Care Teams program, a MaineCare service. It is funded through a per member per month (PMPM) payment. Community Care Teams have the option to employ a CHW as an additional staff member, per policy.
Massachusetts	Massachusetts provides funds to MCOs to support partnerships with and hiring of CHWs. Through Massachusetts' 1115 demonstration, Delivery System Reform Incentive Payment (DSRIP) funds were directed to MassHealth ACOs to assist with hiring and training significant numbers of CHWs. Many MassHealth ACOs use DSRIP funds to reimburse CHWs.
New Hampshire	New Hampshire does not reimburse for CHWs through its Medicaid program.
Rhode Island	Rhode Island reimburses for CHW services through MCOs and FFS. Rhode Island's Medicaid Accountable Entities may use funds earned through the Health System Transformation Project Incentive Fund to fund CHW services.
Vermont	Vermont has incorporated CHW services through their Community Health Team all-payer model structure through medical homes, ACOs, and other VBP models. The state has used Medicaid waivers, and SPAs to pay for these services, as well as other mechanisms like hospital budgets and grants.

CMMI

State Innovation Models (SIM) Initiative for CHWs

- Connecticut
- Michigan
- Idaho
- Rhode Island

CMS

Proposed action plans for CMS

Value-based care APMs: consistency, upfront investments, adjust payment for social drivers of health, invest in CHWs, and downside risk for FQHCs, **especially in rural areas.**

Training

- Standardized training
- ASPIN
- BHA program



Workforce Development

- Grant funding
- Administrative support
- Demonstrations
- Direct employment
- Employer toolkits



Conclusion



- Policy:
Clear definitions, opportunities for certification, consideration of value-based APMs, and standardized training
- Workforce development:
Participation in CHW interventions, benefits of hiring, and best employer practices
- Chronic illness and mental health comorbidities

Resources

- ✓ [Public Health Jobs Corps: Responding to COVID-19, rebuilding the community health workforce \(2021\)](#)
- ✓ [Critical inputs for successful community health worker programs \(2021\)](#)
- ✓ [Community Health Worker Payment Guide \(2020\)](#)
- ✓ [The Centers for Disease Control and Prevention's Community Health Workers \(CHW\) Inclusion Checklist \(2019\)](#)
- ✓ [Sustainable Financing Models for Community Health Worker Services in Connecticut: Translating Science into Practice \(2017\)](#)
- ✓ [Community Health Worker \(CHW\) Toolkit A guide for employers \(2016\)](#)

Contact

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Northern Counties Health Care, Inc.
*Community Health Workers
at the Heart of Our Mission*

Kari White, Director of Quality/Compliance & Privacy Officer
Laurie Somers, Lead Community Resource Coordinator

History

Caledonia Home Health Care was founded in 1968 by Dr. Ralph Jardine and community members.

In 1977, with the award of Vermont's first Community Health Center grant, **Northern Counties Health Centers** was formed as the successor to the "Comprehensive Health Planning Council".



The two organizations merged in 1988 to create:

Northern Counties Health Care, Inc. (NCHC).



Our Service Area

NCHC's Service Area covers a three-county region (Caledonia, Essex, Orleans) of Vermont commonly known as the **Northeast Kingdom (NEK)**. These three counties are the most rural and poorest in our state.



Three hospital service areas, two divisions,
ONE MISSION:

*To provide high-quality, accessible,
patient-centered health care.*

Primary Care

- Primary Medical Care
- Behavioral Health Counseling
- Care and **Resource Coordination**
- Dental Care
- **Outreach & Enrollment**
- Pharmacy Services

Home Care & Hospice

- Home Care
- Hospice & Palliative Care
- Long Term Care
- Maternal and Child Health
- Private Duty



Vision, Values and Point of View



Convenient, same day primary care for all.



Northern Express Care is now open to everyone to treat routine medical needs: Sprains, bumps and bruises, allergies, colds, flu, sore throat, stomach issues, ear infections, urinary tract infections, and vaccines.



LYNDONVILLE
at Corner Medical

ST. JOHNSBURY
In the heart of downtown

CALL
for a same-day
appointment



WALK IN
No appointment
necessary



More to Health than Healthcare

Bundle Bags Available!



Worried about food?

We're here to help, and there are no income requirements to qualify!

Thanks to Northern Counties Health Care's great partnership with Sid's Pantry, we're able to offer Bundle Bags to those who need a little extra help!

Please ask our front desk for more information.



July 20, 2021

A GOOD NIGHT'S SLEEP

With Abby Young, FNP

Join us and NEK Prosper for Rise and Walk tomorrow at 6 PM at the corner of Winter Street and Main Street in St. Johnsbury for this short health talk followed by a walk.

Community Resource Coordinator (CRC) Definition



Vermont Community Health Worker Definition



Understand the community

They are frontline public health professionals who are a trusted members of or have a close understanding of the community being served.



Build relationships

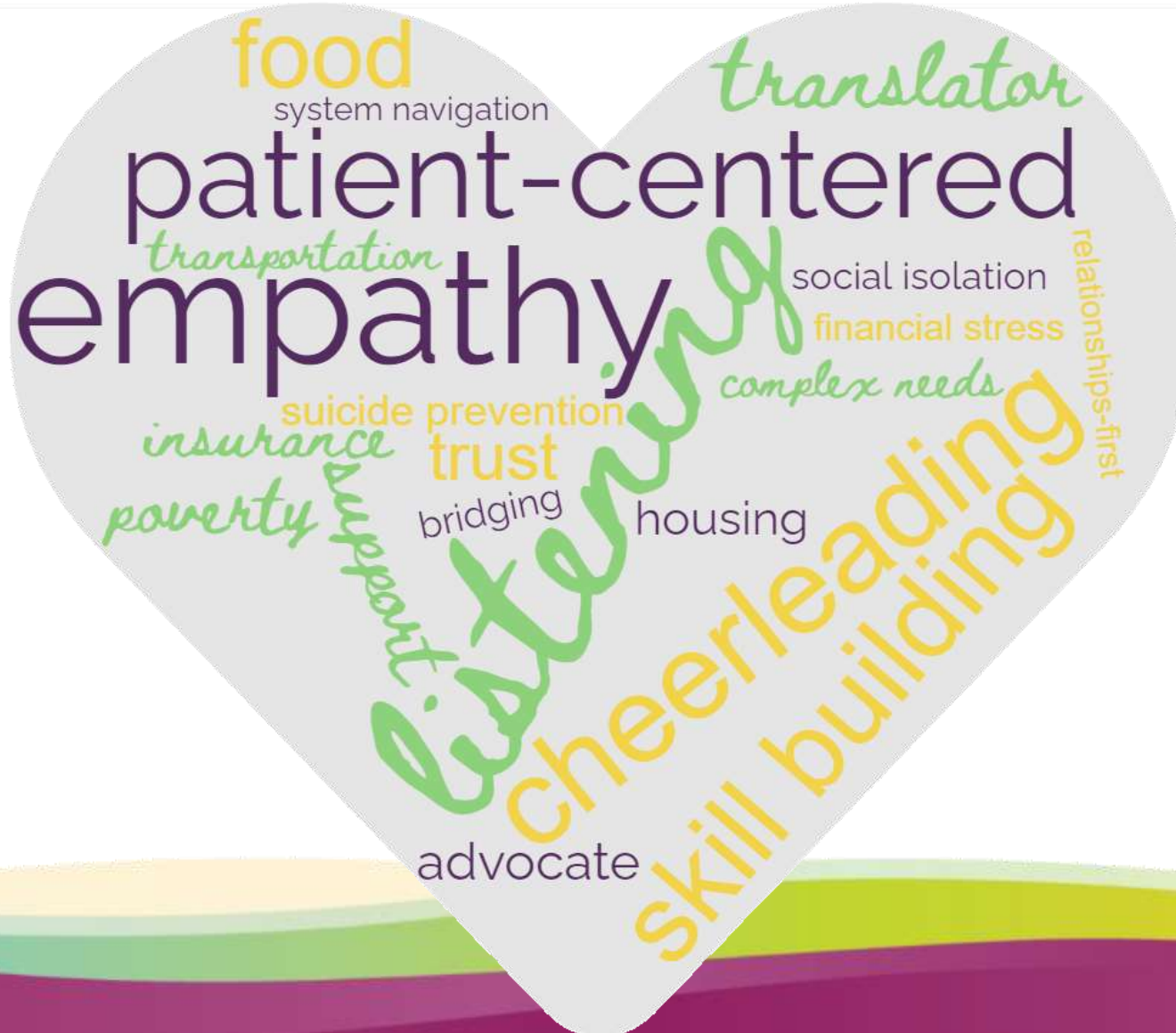
They use a person-centered approach to build trusting relationships that enable them to serve as a liaison between health and social services and the community. This facilitates access to services and improves the quality, and cultural and linguistic competence, of service delivery.



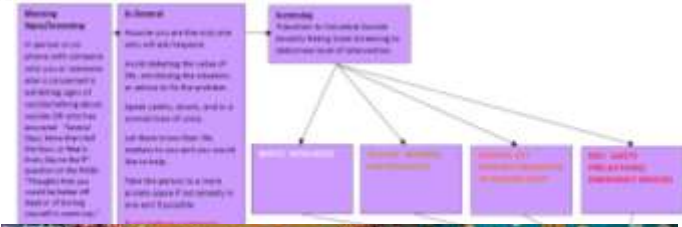
Increase positive health outcomes

They increase self-sufficiency, wellbeing and positive health outcomes through a range of activities. These include outreach, community education, supportive guidance, self-management, coaching, and the provision of social support and advocacy.

What Does a CRC Do?



CRCs See and Fill the Gaps



What is Create HEALTH?

Create HEALTH was created by Northern Counties Health Care and Catamount Arts as a place for people who were feeling isolated during the COVID-19 pandemic to meet, get support, share their thoughts, feelings, fears, and joys, and access needed resources and support. Modeled on Catamount Arts' program, Zoom Covid Chronicles, in which community members created multimedia stories that they shared with others. Those stories were collected, photographed, and are now in a virtual gallery on the Catamount Arts site.

How does it work?

A representative from a health or social service agency will be your primary contact. You will receive a bag of arts materials including watercolors, paper, and a notebook. Each week, you'll receive a prompt to inspire your creativity. You have to use all the prompts, but something weekly that stands out to you.

We will check in on you weekly to help connect you to resources. At the end of the program, you will have your work with us, either published in some format (online, in a book, or in a gallery) or in a group.

How do I participate?

If you know you'd like to participate, it's that easy!



Northeast Kingdom Create HEALTH

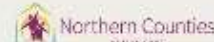


But I'm not an artist!

Everyone is an artist! You do not need any training or special talent to participate. You are invited to respond to the prompts in any way that feels fun or comfortable to you: writing, drawing, painting, making collages, taking photographs, and capturing them... And if you try a medium with which you are unfamiliar and you want some tips, you can ask for help from Catamount Arts.

How long does the project last?

Create HEALTH is a four-week program. There may be an option to continue beyond that time by joining others in an ongoing or on-call group.



Have Questions About Your Child's Car Seat?



-Now available-
Hardwick Area Health Center's Diaper Bank

If you need assistance with infant or adult diapers, we're here to help! Ask us today about accessing Hardwick Area Health Center's Diaper Bank.

What can you do to help?
Contact Victoria Foster at 802-473-3300 x4135 to donate!

Any brand of diaper for any age is welcome. Diapers will be accepted whether they are opened, partial or un-opened.



Northern Counties
HEALTH CARE
Compassionate Care in Our Home or Yours

CRC Value at NCHC

I think the CRCs help, in small, incremental ways, at addressing some of the social determinants of health. They help “fill in the chinks” between the medical home’s structural logs, making it a tighter, more complete, structure.

Dr. Tim Tanner, NCHC Medical Director

Telehealth Wins for Care Team and Patients

Northern Counties Health Care



Open Enrollment is happening now through December 15th!

Now is a great time to make the changes you need or sign up for health insurance with Northern Counties Health Care's Community Resource Coordinators!



"It's Open Enrollment for health coverage for 2021! If you have questions about income changes, household changes, or your current plan, feel free to call for a confidential, no cost chat. Our trained Vermont Health Connect assisters are ready to answer your questions. Please call us anytime with questions at 802-748-9405 x1042."

— Laurie Somers, Community Resource Coordinator
Northern Counties Health Care

To learn more about Northern Counties Health Care, visit www.ncchc.org today.



Application for Health Coverage

20SINFA
8/2016

-  **Apply faster and easier online by visiting VermontHealthConnect.gov**
-  **Reporting changes** If you have already applied for health coverage and simply need to report a change, **DO NOT** use this application, instead call 1-855-899-9600.
-  **Get help with costs** You need to use a **different application to get help with costs**. You could qualify for:
 - A new tax credit that can immediately lower your premiums for health coverage
 - Free or low-cost coverage from Medicaid/Dr. Dynasaur**You may qualify for a free or low-cost program even if you earn as much as \$95,400* a year (for a family of 4). Visit VermontHealthConnect.gov or call 1-855-899-9600 to learn more.** *This number changes every January.
-  **Who can use this application?**
 - If you do not need help to pay for your health coverage, you can use this application. **You will be responsible for the full cost.**
 - If you are seeking dental coverage only, you can use this application.
 - If someone is helping you fill out this application, you may need to complete **Appendix A.**
-  **What happens** Send your completed and signed application to the address on page 5. **After we receive your application we ask for, sign and submit your**

Barriers to Telehealth for CRC Work



Tangible supports: food, car seats, diapers

Access to broadband and technology (smart phones, laptops, printers)

Complex and older population: hearing and vision barriers

Fear and frustration hamper trust building

What's Next?

- Maintain flexibility and adaptability
- Seek out new partnerships to expand access
- Continue redefining: “patient-centered access”

- Formalization of role
- Pursuing reimbursement models
- Demonstrable financial ROI
- Recruitment and retention



Evaluation Survey



We hope you consider joining us again in March for our second webinar session-
which is a continued conversation on:

Telehealth to Advance Pediatric Behavioral Health, Successful Interventions

**Stay tuned for more information, or contact your NETRC & HRSA OIEA
colleagues here!**



Connect with HRSA

Learn more about our agency at:

www.HRSA.gov



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Contact Us!



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www.netrc.org | 800-379-2021

More Resources

Community Health Workers in Vermont

<https://www.healthvermont.gov/sites/default/files/documents/pdf/HPDP-VT-CHW-Scan%20Brief.pdf>

Vermont Community Health Worker Scope of Practice and Core Competencies

https://www.healthvermont.gov/sites/default/files/documents/pdf/hpdp_Community-Health-Workers_ScopeOfPractice-CoreCompetencies_FINAL%20October%202020.pdf

Community Health Workers in Vermont Professional Identity Snapshot -

https://www.healthvermont.gov/sites/default/files/documents/pdf/hpdp_Community-Health-Workers-Prof%20Identity%20Brief_Nov%202020.pdf

Community Health Workers in Vermont Community Health Workforce Snapshot

https://www.healthvermont.gov/sites/default/files/documents/pdf/hpdp_Community-Health-Workers_Workforce_Brief_Nov%202020.pdf

Thank you!

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Telemental Health Resources

- **US Center for Disease Control and Prevention (CDC)** - Using Telehealth to Expand Access to Essential Health Services during the COVID-19 Pandemic
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/telehealth.html>
- **Kaiser Family Foundation (KFF)** White Paper: <https://www.kff.org/womens-health-policy/issue-brief/telemedicine-and-pregnancy-care/>
- **Health Resources and Services Administration (HRSA) Maternal and Child Health Bureau (MCH)**- MCH Navigator Online Training: <https://mchb.hrsa.gov/training/mch-navigator-description.asp>
- **Suicide Prevention Resource Center (SPRC)** –Treating Suicidal Patients During COVID-19: Best Practices and Telehealth
<https://www.sprc.org/events-trainings/treating-suicidal-patients-during-covid-19-best-practices-telehealth>

Patient/Client Resources

HHS Telehealth Webpage for Patients/Consumers: <https://telehealth.hhs.gov/patients/>

TRC and Other Consumer Resources: [How Patients Can Engage Telehealth](#), [Telebehavioral Health](#), [Tips to Keep Your Telehealth Visit Private](#), [Downloadable Tech Guides](#), [Virtual Healthcare for Patients/Consumers](#), [How to Prepare for a Video Visit with Your Mental Health Provider](#)

Devices/Connectivity:

FCC [LifeLine Program](#) - provides devices and subsidies on monthly voice and data fees for low income consumers. There are eligibility requirements (see webpage) and an application process.

[National Digital Equity Center](#), has a device loaner program – any Maine resident over 70 years of age can borrow devices for 90 days at no charge, and pay \$25/month after that 90 days if they wish to keep it longer.

Older adults from other states can participate for a small fee.



Telehealth Resource Center Resources



- [NETRC Site & Telehealth Resource Library](#)
 - Latest in national and regional telehealth news and resources
 - Over 6,000 publicly available journal articles and other resources
 - NETRC/MATRC 2020 Virtual Conference Series Archives
 - <https://telehealth2020.swoogo.com/launchtelehealth2020/>
- [National Telehealth Resource Center website](#)
 - Fact Sheets, Guides and Templates
 - Evidence for Telehealth, Webinar series, etc.
- NCTRC Webinar Series
 - Every 3rd Thursday of the month from 2 PM – 3 PM EST.
 - Watch recordings of previous webinars on our Youtube channel:
www.youtube.com/c/nctrc