

## Public Policy Memo/MPA Public Administration

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### Problem Definition Argument

Chronic health diseases such as asthma, heart disease, diabetes, cancer, or obesity are some of the leading causes of disability or death in the United States. Chronic diseases as defined by the Center for Disease and Control Prevention (CDC) are conditions that last 1 year or more and require ongoing medical attention or limit activities of daily living or both. The negative impacts on daily living, ongoing management of health issues, and the high medical costs of care can place emotional and financial strains on individuals, families and on community resources.

### Policy Evaluation Argument

In many states, Medicaid programs reimburse payments for qualified Community Health Workers (CHW) to support people living with chronic health conditions. CHWs are trusted members of communities. Many CHW services are integrated in health care delivery systems. CHWs provide support to individuals and communities through outreach, education, advocacy and linkage to additional support and services. The use of CHWs has been shown to be a good return on investment and a particularly effective approach with often underserved populations in reducing health disparities. Important support provided by lawmakers and policy/program developers are state led training for CHW certifications and continued considerations for reimbursements for CHWs.

### Policy Recommendation

The use of CHWs is a proven effective strategy for helping people in managing chronic health diseases. According to the CDC, six in ten adults in the US have a chronic disease and four in ten have two or more. Given the complexities of managing medical conditions and barriers to medical care access, a nurse led team-based case management approach that includes CHWs would be a cost effective and worthwhile strategy for improving health and lowering health care costs. Funding for this team-based approach should be considered by policy makers and funders.