

Application for the Workgroup on Workforce Development of Community Health Workers in Maryland

The Department of Health and Mental Hygiene and the Maryland Insurance Administration are jointly tasked through the recently enacted House Bill 856 with conducting a stakeholder workgroup to study and make recommendations regarding:

- 1) the training and credentialing required for community health workers to be certified as nonclinical health care providers, and**
- 2) reimbursement and payment policies for community health workers through the Maryland Medical Assistance Program and private insurers.**

The workgroup will include individuals with knowledge and experience of the provision of community health worker services in clinical and non-clinical settings and represent a cross section of stakeholders, including:

- local health departments**
- community colleges that have training programs for health care workers**
- 4 year colleges or universities**
- minority health**
- public health**
- hospitals that provide training for community health workers**
- nurses**
- physicians**
- social services and housing**

The workgroup will hold approximately five 2 hour meetings between August and December 2014 to discuss key issues and options on training, credentialing and payment for CHWs in order to arrive at recommendations for the legislature.

If you would like to become a member of the workgroup please help us by answering the following questions. Please direct any questions about the application process to dhmh.marylandchw@maryland.gov.

Workgroup for Workforce Development for CHWs_pdf

Final selection of members to serve on the workgroup will aim to ensure a broad and balanced contribution of experience and expertise including clinical and nonclinical healthcare perspectives. Thank you for your interest, and we look forward to hearing from you. Selected members will be contacted by DHMH by 7/31/14. A schedule of CHW Workgroup meetings will be posted on the DHMH Website and all meetings will be open to the public.

1. Contact details

Name	<input type="text"/>
Address	<input type="text"/>
Address 2	<input type="text"/>
City/Town	<input type="text"/>
State/Province	<input type="text"/>
ZIP/Postal Code	<input type="text"/>
Email Address	<input type="text"/>
Phone Number	<input type="text"/>

*2. What sector do you work/volunteer with?

- Community-based organization
- Health department
- Social services provider
- Health plan
- Hospital
- Primary/Specialty care provider
- Behavioral health provider
- Faith-based organization
- University/College
- AHEC
- Government
- Other (please specify)

3. Please state the name of the organization you work for or volunteer with.

***4. Do you provide non-clinical healthcare services to people (this may include things such as education, outreach, connection to services, attending appointments with people or any other non-clinical healthcare service)?**

Yes

No

5. Why do you want to join the CHW Workgroup (please add an additional sheet if you do not have sufficient space to answer here)?

***6. Are you a Community Health Worker (or promotora de salud, community health advisor, outreach worker, lay health advisor or equivalent role)?**

Yes

No

Thank you for taking the time to complete this survey.

Please return it to: “CHW Workgroup Application Process, Health Systems and Infrastructure Administration, DHMH, 201 W. Preston Street, Baltimore, Maryland 21201”, posted dated by 7/14/14.

You must also include:

- i) a copy of your resume (not required if you are a Community Health Worker or equivalent), and**
- ii) a letter of support from the community that provides a reason you should be selected to serve on the CHW Workgroup.**