From: ShaRhonda Love
To: Elizabeth Smith (DIG)

Cc: Stephanie Williams; Romero, Jose
Subject: Health Equity Response Team Proposal
Date: Wednesday, August 19, 2020 4:43:55 PM

Attachments: <u>Document1.docx</u>

chronic care coordination ppt (002).pptx

image002.jpg image004.jpg

Good afternoon Sec. Smith,

Please accept the attached adjusted budget and narrative for the Health Equity Response Team. Sec. Romero, Chief of Staff Williams and I have worked with the team in an effort to reduce duplication and refer to appropriate state entities for assistance. This proposal is targeted towards all minority populations statewide, however services will be provided to all in need. The proposal has been updated in the following ways:

- Reduced budget to remove clinical assistance; clinics will be referred to DHS for available funding
- Incorporate statewide Mobile Health Unit (MHU) plan to support current mobile health community engaged programs to increase testing
- Testing Promotion thru radio, TV and social media
- Utilization of Coordination of Care and Referral follow up services thru Community Health/Peer Support Providers to deliver COVID-19 health education and connect Arkansans to resources at the county level
- Community base subgrant awards through AMHC to support COVID-19 initiatives (i.e. COVID Care packets, Masks, Sanitizer, Cleaning supplies, etc.)

I am in support of the attached budget and proposal being reviewed by the committee. I am happy to resend the initial proposal if you need it as a reference. Please feel free to contact me with any questions.

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#### Director

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#### **Budget Narrative**

Mobile Health Units will support statewide efforts to provide transportation for pop-up testing and educational services. There have been five organizations identified with this capability. The Health Department should guide the collaborative efforts with a mapping of locations. The national annual average costs are \$430,000.00. Arkansas's average costs are \$325,000.00. The request is calculated at a per day rate of \$809.00 of additional funding to cover mileage, equipment, supplies, cleaning, and multipractice personnel (APRN/MD, Project Coordinator, Driver, LPN/RN, etc.).

Non-profits supporting temporary lay workers shall be apportioned regionally to connect local practices and the highest level chronically ill patients. Lay workers will also provide translations, disability accommodations, and education to local communities. Lay workers will be hired by non-profit medical membership organizations at a rate of \$25 per hour.

Testing and management of in place teams is a strategy to expand testing efforts statewide. Teams should be designated regionally with labs selected by the Health Department. Testing kits may be procured with Abbott labs. Kits have been identified to range \$16.00-\$40.00.

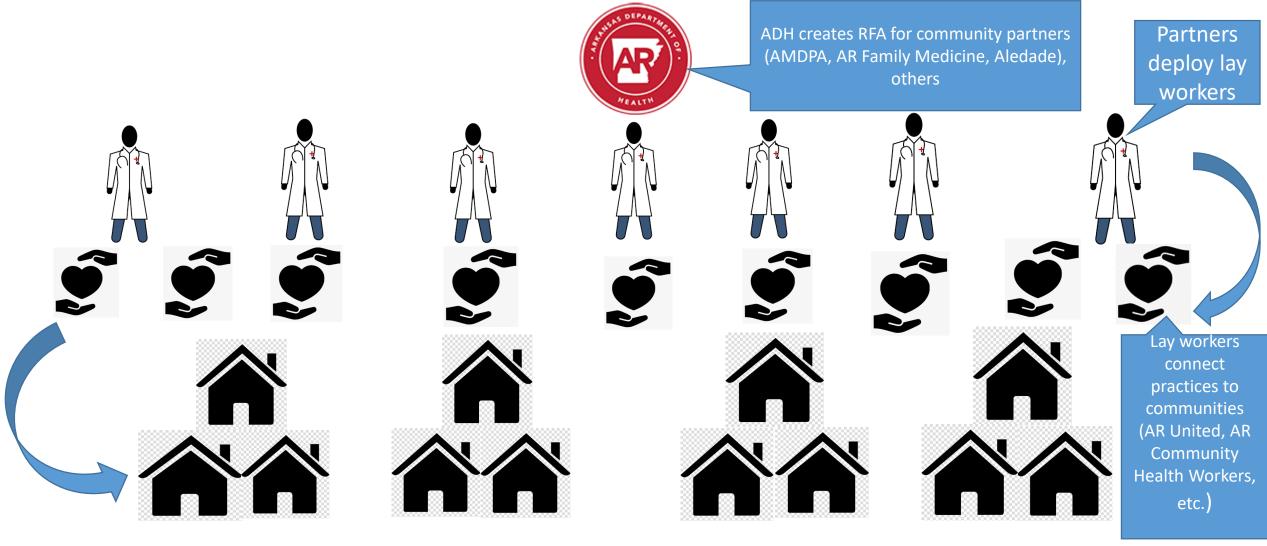
Non-profit peer support provides ground level wrap around services. Multiple non-profits have been identified to services local citizens. Services may include provisions for food insecurity, quarantine facilities for special populations, and additional supports for highly at-risk populations.

Research and administration provides support for an entity to conduct follow-up and tracking of services. This includes personnel and a short term software license. All data collected must accommodate ADH needs.

Marketing and promotion can provide small localized advertisements for services. Services may support testing and local non-profits.

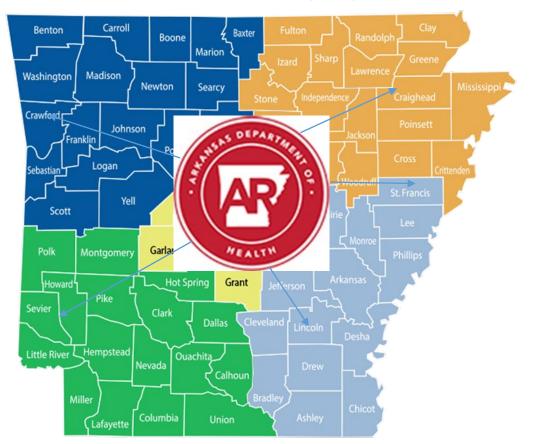
# Chronic Care Coordination

Integrating Lay Health Workers in Practices



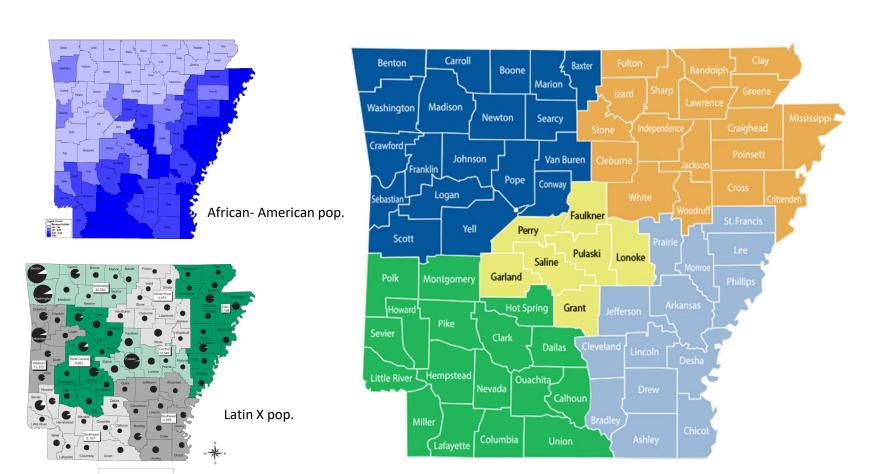
## MOBILE HEALTH UNITS

### **Coordination of Deployment**



Arkansas Department of Health coordinates with mobile units statewide to coordinate supportive services. Funding to four to five non-profit organizations or practices supported by RFA.

### Testing Point of Care (POC)



Arkansas Department of Health/ Minority Health Commission coordinates five non-profit organizations, practices or center in each health region to provide rapid POC testing care for vulnerable community access supported by RFA.

Program Budget for Personnel & Field Support					
Expense Type	<u>Unit</u>	<u>Level of Effort</u>	Cost per Unit	Number of Units	Total Expense Cost
- Temporary Health Lay Worker	1	22 Weeks (30hrs/week at rate of \$25/hr)	16,500.00	120	\$1,980,000.00
Mobile Health Unit	1	90 Days (\$809/day)	72,810.00	5	\$364,050.00
Nonprofit Peer Support	1	Peer Support Award	15,000.00	67	\$1,005,000.00
Research and Administration		Award 90-120 days		1	\$223,000.00
Marketing and Promotion	1	Social Media / Radio / Paper	125.00	400	\$50,000.00
Test Kits	1	45 Days (3,000 test/day)	22.00	135,000	\$2,970,000.00
Total Budget					\$6,592,050.00
Note: Costs are all-inclusive. They include contractor labor, training, mileage, maintenance, focus group fees, hardware, advertisement, etc.					