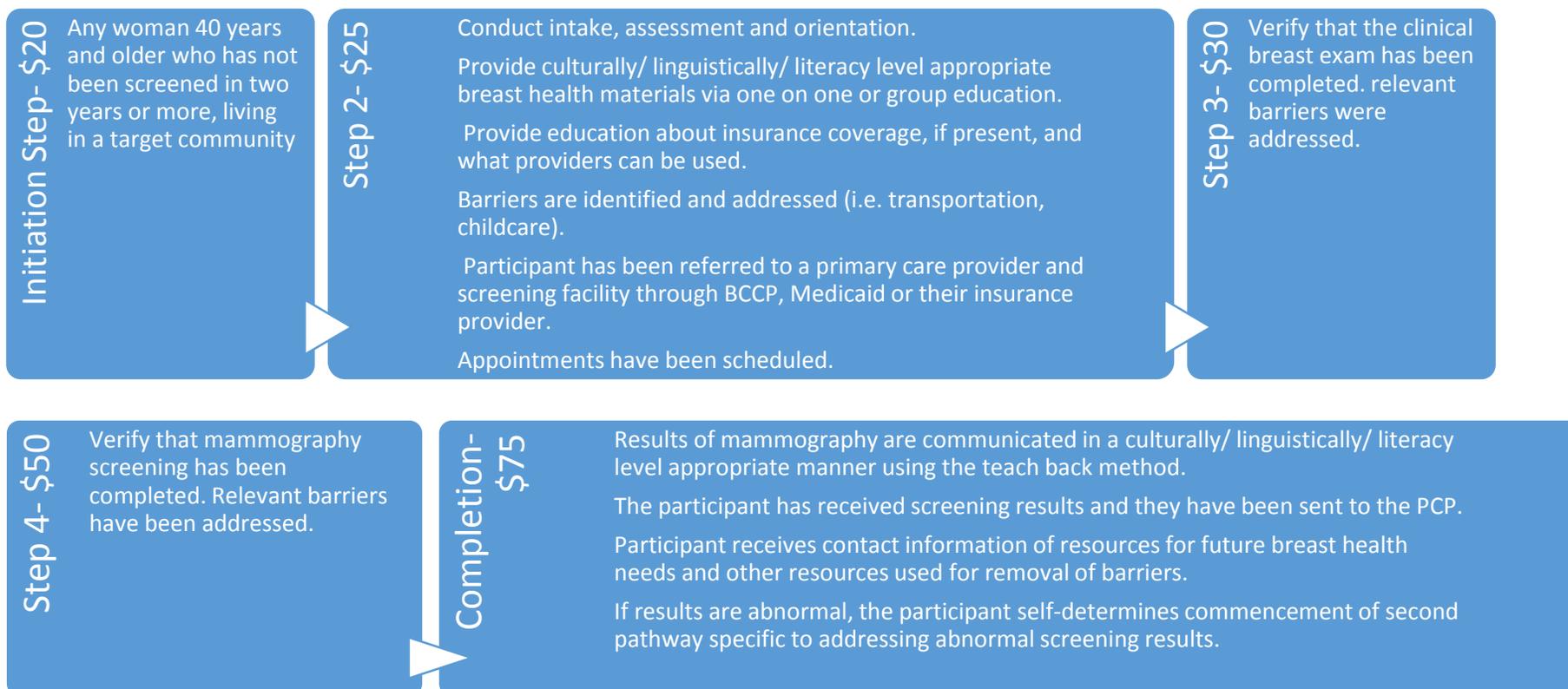


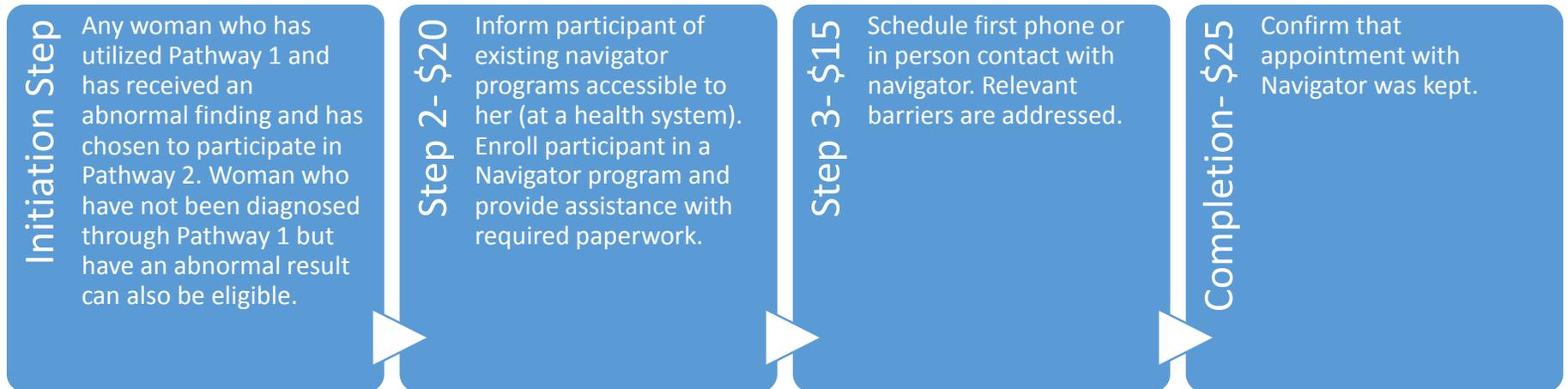
Pathway Model for Community Health Workers

Patient navigation is a process by which an individual- a navigator- guides patients through and around barriers in the complex cancer care system, to help ensure timely diagnosis and treatment. There are a number of models for navigation. Susan G. Komen Columbus seeks to build a collaborative model, leveraging relationships with all current and future partners, for seamless navigation from screening to survivorship. In this model, community-based navigators will conduct outreach to link women to screening, and health system-based navigators will conduct diagnostic, treatment and survivorship navigation. The Pathways model will first focus on utilizing trained/certified members of the community, who serve as a liaison between health/social services and the patient to facilitate access to and improve the quality of service delivery. In this model, the CHWs will provide the navigation to screening and to connect clients to health-system based navigation if necessary.

Pathway 1: Screening navigation via community health workers



Pathway 2: Referral to health system-based navigation



Training for both lay, community-based navigators (or community health workers) is available via the Susan G. Komen Columbus Patient Navigation Training Program. Other training costs may be requested for one navigator/ community health worker per program.

Applicants using the Community-based Pathways model (Pathway 1 and 2) in their proposal should provide letters of support for referring partners for diagnostic/ treatment, health-system based navigation.

Paying for Screenings

You must create an intake and assessment form to identify eligible clients and conduct an assessment of potential barriers.

Financing for screening for women should be referred based on eligibility below:

- Uninsured, <200% FPL, 50+, **BCCP**
- Uninsured, <200% FPL, 40-50, **refer to Komen funding**
- Insured, utilize **insurance**

Other imaging or medical costs should only be involved in exceptional circumstances, since all diagnostic and further testing would be referred on to health systems.

- Underinsured, 0-200% FPL and out of pocket costs over 5% of income, **utilize insurance and supplement with Komen funding**

- Underinsured, 200-400% FPL and out of pocket costs over 10% of income, **utilize insurance and supplement with Komen funding**

Addressing Barriers

Funding for addressing barriers may be requested in the proposal for translation services, transportation assistance, childcare assistance, etc.

Pay for Performance and Personnel costs

This is a pay for performance model meant to enable organizations to expand capacity/ infrastructure to conduct breast health outreach, referral and linkage. Applicants should determine the number of pathways to complete as an objective, and request that pathway completion rate times the number of pathways in salary. Benefits may also be requested. If all pathways are not completed by awarded programs, the program must report partial steps completed for the incomplete pathways. The program will return the pro-rated amount to the affiliate at the end of the grant award period.

By paying out the grant in the traditional manner of two payments, the applying organization should be able to sustain the salary of the community health worker completing the Pathways. Near the end of the grant award, it will be apparent to the institution whether that salary will be fully reimbursed or not based on performance.

Deliverables

The deliverables for the implementation of the Pathways model under this RFP are listed in the RFP.

- Applicants must demonstrate that they can identify, measure and report on:
 - Number of patients educated via one on one or group education
 - Number of patients referred to screening
 - Number of patients who have completed screening
 - Number of screenings paid for
 - Number of abnormal screening results
 - Number of patients referred to diagnostic testing
 - Number of diagnostic tests completed
 - Number of diagnostic tests paid for
 - Number of each barrier assessed
 - Number of each barrier addressed
 - Number of breast cancers diagnosed and staging
 - Number of patients referred to health-system based navigator
 - Number of patients referred to a primary care provider
 - Number of patients referred to a health system for diagnostic follow-up or treatment