
Pathways to Better Health Program Overview



WHAT do we do?

- Community Health Workers (CHWs) meet with clients in their home to assess needs related to the social determinants of health.
- CHWs administer a checklist to identify needs, assess progress, solve barriers, and provide education and support.
- The checklist triggers Pathways (i.e., protocols for resolving needs) and the CHW and client work together to achieve the client's "health" goals.
- CHWs connect clients to needed medical services (primary care, dental, behavioral health, other specialists, pregnancy/post-partum) and social service supports (transportation, food, housing, utilities, clothing etc.) to improve health
- No-cost service to those who qualify

WHY is this program important?

- CHWs are trained in an evidence-based curriculum with goals:
 - Improve participants' health
 - Increase participants' utilization of primary care services
 - Decrease cost of participants' health care by decreasing utilization of ED and hospitalizations

WHO qualifies?

- Have Medicaid, Healthy Michigan or be eligible for Medicaid; Medicare; uninsured
- Have 2 or more "chronic conditions" (ranging from depression to diabetes to chronic pain to COPD, etc.)
- Have challenges overcoming barriers to improve health and better manage health conditions (ie. accessing medical care and preventive health care services, accessing resources to reduce unneeded hospitalizations and emergency room visits, etc.)
- 18 years or older
- Live in Barry, Clinton, Eaton, Gratiot, Ingham, Montcalm or Ottawa Counties

HOW to make a referral?

- The CareHub serves as a central point of entry for referrals. The CareHub screens and determines eligibility. Participants are assigned to the Community Health Worker.
- Call CareHub at 866-291-8691 or 517-336-3777; or Submit on-line Intake Form at www.ihpmi.org/carehub