

COMMUNITY HEALTH AIDE PROGRAM



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INTRODUCTION

The Community Health Aide Program (CHAP) has been a successful healthcare model for Alaskan communities for over 50 years and consists of Community Health Aides (CHA), Dental Health Aides (DHA), and Behavioral Health Aides (BHA). There are over 500 Community Health Aide Practitioners (CHA/Ps) in Alaska. By working within the guidelines of the Alaska Community Health Aide Manual (CHAM), they can assess and provide emergent, acute, and chronic care to their communities. Alaska's Tribal health System educates and employs four levels of Dental Health Aides. The highest level providing the more common dental treatments- leaving Dentists available for the higher acuity treatment plans needed for patients in need of a higher level of care. Behavioral Health Aides are the most recent addition to Alaska's CHAP and are a staple in many communities. They are a village-based counselor, health educator, and advocate who is trained to work with community members to address behavioral health topics that affect individuals, families, or whole communities.

While this program has been a successful and sustainable option to Alaska for decades, it wasn't available in the contiguous United States until its nationalization in 2018. This was facilitated through the collaboration of the Alaska Native Tribal Health Consortium (ANTHC), Tribal CHAP grantees, Northwest Portland Area Indian Health Board (NPAIHB) and the Tribal Community Healthcare Provider Program (TCHPP), and numerous vested partners. The Portland Area was the first IHS area outside Alaska to have an operating CHAP Area Certification Board and has partnered with Tribes and Academic Institutions to establish tailored education programs for CHAP providers. For more information on these programs, please visit tchpp.org.

FAQ'S

WHAT IS THE COMMUNITY HEALTH AIDE PROGRAM (CHAP)?

The CHAP is based on a multidisciplinary approach consisting of Primary, Behavioral, and Oral Health providers working under the supervision of licensed providers to create a system of care that increases accessibility and better knowledge systems and cultural responsiveness to care. CHAP was first created in Alaska to train local people who were familiar with village life and likely to stay in the community. In 1968, the Alaska CHAP was recognized and funded by Congress.

Health aides do not practice independently but under the direct/indirect supervision of a licensed clinician. These health aides are extensions of their supervising clinicians to provide direct patient care. Health aides expand the system of care to mobilize health care.

All CHAP providers are certified based on national standards set by the CHAP National Certification Board, which consist of Tribal representatives from all IHS service areas. Additional provisions can be added based on regional needs set forth by the Area Certification Boards.

WHEN WAS THE NATIONALIZATION OF THE COMMUNITY HEALTH AIDE PROGRAM (CHAP) APPROVED?

Recognizing the success of CHAP in Alaska, Congress authorized the creation of the national federal CHAP. See 25 U.S.C 1616l(d)(1).

In 2020, CHAP was approved and authorized; [Updated IHS circular 24-16.](#)

WHAT IS THE GOAL OF THE CHAP?

The overarching goal of CHAP is to train local people familiar and connected with their community and thus likely to stay in it. This is done by providing educational opportunities for community members, and expanding the local economy through job creation, cost of care savings, and improved health. In Alaska, CHAs have successfully taken on an increasing role in the provision of primary care services and have helped meet rising expectations for community-based, culturally affirming healthcare. The CHAP includes emergency, acute, chronic, and preventative care.

WHAT IS THE PURPOSE OF THE COMMUNITY HEALTH AIDE PROGRAM TRIBAL ASSESSMENT & PLANNING (TAP) GRANT AS PART OF THE CHAP NATIONALIZATION EFFORTS?

The Southern Plains Tribal Health Board (SPTHB) was awarded the IHS CHAP TAP (Tribal Assessment and Planning) grant to assess community readiness for CHAP implementation. Since 2021, SPTHB has been working to:

- Assess the feasibility of CHAP implementation into existing tribal health systems (i.e., interviews, focus groups, surveys, environmental analyses).
- Identify systematic barriers that may prohibit the complete integration of CHAP into an existing healthcare system.
- Plan partnerships across the tribe/tribal organization's region to address the systematic barriers.
- Collaborate with other Tribal CHAP grantees,

At the direction provided by Tribes through listening session, talking circles, and other formative assessments, SPTHB has continued the CHAP integration process by:

- Implementing guidance provided by the Tribes

- Internal capacity building to include CHAP branding, recruit personnel, and leverage internal programs for alignment with CHAP development
- Establish partnerships with state programs, higher education, and other vested partners for CHAP sustainability
- Establishing CHAP regulatory functions driven by the CHAP Tribal Advisory Group
- Addressing Indigenous Determinants of Health (IDOH) by creating accessible educational programs that reflect cultural values.

WHAT IS A BEHAVIORAL HEALTH AIDE (BHA)?

BHAs are counselors, health educators, and advocates. They help address individual and community-based health needs such as substance abuse and misuse and mental health using combination of Western and traditional based practices to provide care.

WHO CAN BE A (BHA)?

- Natural Helpers and Advocates- crave to tie in cultural activities into their day-to-day work.
 - Counselors-good listeners, empaths, aunts/uncles, and storytellers.
- Community & Tribal Members- homegrown collective committed to serving a tribal community, regardless of age.

- Holistic Caregivers & Healers- who would like to utilize tribal traditional practices.
- Anyone interested in improving the health of their community.
- Anyone who has an interest in the behavioral health field.
- Anyone who has an interest in serving their community.

WHAT ARE THE BENEFITS OF HAVING A BHA?

BHA's are educated in traditional healing/spiritual healing as mentored by Tribal practitioners, providing culturally responsive care for their community. BHAs seek to achieve balance in the community by integrating their sensitivity to cultural needs with specialized education in behavioral health concerns and approaches to treatment.

WHAT IS A DENTAL HEALTH AIDE (DHA)?

DHAs are primary oral health care providers that provide basic restorative dental care, patient education, and preventative services.

WHAT ARE THE BENEFITS OF DENTAL HEALTH AIDE THERAPISTS (DENTAL THERAPY)?

A DHAT is the practitioner level of DHAs. Under the supervision of a dentist, DHATs can:

- Expand access to consistent, routine, quality oral health care.
- Increase AI/AN oral health care providers in professional wage jobs.
- Create a more efficient and effective oral health team that brings care where it is needed most, inside and outside of the clinic.
- Establish cost-effective solutions for clinics striving to maximize care on limited budgets.

WHAT IS A COMMUNITY HEALTH AIDE (CHA)?

CHAs are certified, medically guided health care workers who assess and provide emergency, acute, and chronic care to residents and their respective rural communities.

WHAT CLINIC IMPROVEMENTS OCCUR FROM EMPLOYING CHAS?

- Increase patient access to healthcare in Tribal communities.
- Reduce workload on other healthcare providers that may focus time on more complex patient issues and quality improvement efforts.
- Improved continuity of care in the community.
- Recruit and train from within:
 - * Creating jobs in communities that will economically benefit the region.
 - * Career opportunities that keep talent in their communities.

WHAT IS THE GENERAL SCOPE OF PRACTICE FOR A COMMUNITY HEALTH AIDE PRACTITIONER(CHA/P)?

The scope of practice for CHA/Ps will generally include: medical histories, physical exams, vital signs, basic specimen collection for labs, medication management, acute care, wound care, chronic wound care, adolescent health, family planning, prenatal care, postnatal care, newborn care, well child care, sick child care, reproductive health, chronic care of major systems, clinical management, team leadership, mentorship, and support to all CHA levels. The scope of practice will vary depending on the level of CHA/P completion.

WHAT MEASURES ARE TAKEN TOWARDS QUALITY ASSURANCE IN THE CHAS?

Licensed Medical Providers will provide supervision, chart reviews, routine reporting, field visits, and consulting provider agreements testing.

CHA LICENSURE OR CERTIFICATION?

As CHAs progress through education programs, they become eligible for certification at each level. The Area CHAP Certification Boards are responsible for certifying the CHAs who meet criteria for certification outlined in the standards and procedures.

CHA LICENSURE OR CERTIFICATION (CONT'D)?

CHAs practice under the supervision and direction of a licensed physician. They also consult and collaborate with advanced practice providers in day-to-day clinical patient care.

WHAT DO CHAS USE TO SUPPORT THEM IN THE FIELD?

CHAs use the Community Health Aide Manual (CHAM). The CHAM is a guide for the CHA for every patient encounter. Identifies specific sections to guide history, exam, and determine assessment. The CHAM contains specific sections covering a full range of topics and issues, which the CHAP uses to note history, conduct exams, and determine assessments under the supervision of a licensed practitioner.

WHAT IS THE EHAM AND THE ECHAMP?

The Electronic Health Aide Manual (eHAM) is a platform to host content for all CHAP disciplines; Community (Primary Care) Health, Behavioral Health, and Dental Health Aides. The Electronic Community Health Aide/Practitioner Manual (eCHAMP) for Practice is a sub-component of the eHAM that contains all CHA/P practice content.

WHAT IS THE EHAM AND THE ECHAMP (CONT'D)?

The eCHAMP is a key and necessary resource for CHA/Ps to use in real time to guide every patient encounter.

The eCHAMP is used as an electronic textbook during CHA/P training. The curriculum is ultimately guided by the content of the eCHAMP. The eHAM will be exclusively electronic. There isn't a nationally available eHAM for the lower 48 yet.

DO COMMUNITY HEALTH AIDE/PRACTITIONERS HAVE TO USE THE ECHAMP?

Use of the eCHAMP by CHA/Ps is required from the beginning to the end of each patient visit.

DO COMMUNITY HEALTH AIDE PRACTITIONERS (CHA/PS) HAVE TO COMPLETE A PRECEPTORSHIP AND A WRITTEN CLINICAL EXAM PERIODICALLY?

Yes, CHA/Ps are required to complete both upon finishing their initial training and at regular intervals to maintain Practitioner status. However, details are determined by the academic review committee and the certification board which has not yet been established for the IHS OKC Area.

WHO SUPERVISES THE COMMUNITY HEALTH AIDE PRACTITIONERS (CHA/PS)?

A Physician (MD, DO) will be assigned to provide oversight to CHA/P's. A referral provider by proxy can be identified, which can include other physicians, Physician Assistants or Nurse Practitioners.

DOES A CHA NEED TO COMPLETE CONTINUING EDUCATION (CE) CREDITS/COURSES LIKE OTHER PROVIDERS?

Yes however, the CE requirements are yet to be established.

HOW DOES THE COMMUNITY BENEFIT FROM EMPLOYING CHAS?

- CHAs increase career options within the community.
- CHAs create career advancement opportunities for community members that allow them to remain in their communities for most of their education and training.
 - * Opens options to parents and caregivers.
- CHAs create new possibilities for clinic offerings with additional staffing.
 - * Additional services
 - * Extended hours

HOW DOES THE COMMUNITY BENEFIT FROM EMPLOYING CHAS (CONT'D)

- CHAs reduce health care open service gaps in communities by supplementing the services of licensed providers.
- The community benefits by receiving care from fellow community members.
- Addresses the social determinants of health by creating professional wage jobs, providing accessible education and training, and keeping talent in communities.

HOW IS THE SPTHB WORKING WITH TRIBES TO SUPPORT SUCCESSFUL CHAP IMPLEMENTATION AND SUSTAINABILITY?

SPTHB is facilitating the Oklahoma Area CHAP Learning Collaborative to provide support and resources for Tribes working through the CHAP planning and assessment process. SPTHB is also talking to Tribal Health Directors, providers, and community members about barriers to health in their area and how CHAP might address those barriers. SPTHB is working with state, academic, and other vested partners on sustainability measures to ensure long term CHAP success.

WHAT EFFORTS ARE BEING MADE AT A NATIONAL LEVEL TO SUPPORT AREA IMPLEMENTATION AND SUSTAINABILITY?

The national IHS CHAP Tribal Advisory group sunset in November of 2024, leading to the formation of the National CHAP Board (NCHAPB). Connect with your area NCHAPB Tribal representative by reaching out to chap@spthb.org.

WILL CHAP SERVICES BE REIMBURSABLE?

Various services are reimbursable, depending upon the Medicaid provisions in the respective states and the CHAPs level of certification.

Approximately 150 CPT codes are covered in Alaska and Washington, allowing for a broad range of reimbursable services to be provided.

WHERE CAN I FIND MORE RESOURCES AND INFORMATION ABOUT CHAP?



CERTIFICATION REQUIREMENTS:

To be certified as a BHA, students will need

BHA I	<ul style="list-style-type: none">• 1,000 work experience hours under the direct or indirect (as applicable) supervision of a licensed and or certified behavioral health clinical or behavioral health professional• 100 hours of clinical practicum
BHA I	<ul style="list-style-type: none">• 1,000 work experience hours under the direct or indirect (as applicable) supervision of a licensed and or certified behavioral health clinical or behavioral health professional• 100 hours of clinical practicum
BHA III	<ul style="list-style-type: none">• 4,000 work experience hours under the direct or indirect (as applicable) supervision of a licensed and or certified behavioral health clinical or behavioral health professional• 100 hours of clinical practicum
BHP	<ul style="list-style-type: none">• 6,000 work experience hours under the direct or indirect (as applicable) supervision of a licensed and or certified behavioral health clinical or behavioral health professional• 100 hours of clinical practicum

Note: SPTHB would like to thank the ANTHC and the NPAIHB for creating and sharing these resources supporting CHAP expansion. Once Oklahoma Area has an established certification board, they will vote on the structure of certification requirements while meeting the minimum standards and procedures requirements.

BEHAVIORAL HEALTH AIDE I (BHA-I)

- Community Needs Assessment
- Screening
- Intake
- Referral
- Crisis Management
- Case Management
- Orientation to Services
- Life Skills Development
- Psychology education
- Individual & Group Interventions

BEHAVIORAL HEALTH AIDE II (BHA-II)

BHA-I & II plus:

- Treatment Planning & Implementation for Co-Occurring Disorders
- Child/Youth Services
- Clinical Case Review
- Quality Assurance Case Review

BEHAVIORAL HEALTH AIDE III (BHA-III)

BHA-I plus:

- Substance Use Disorder (SUD) Assessment
- SUD Diagnosis
- SUD Treatment Planning
- SUD Treatment Implementation
- Community Readiness Assessment
- Individual, Group, Family, Counseling

BEHAVIORAL HEALTH AIDE PRACTITIONER

BHA-I, II & III plus:

- BHA Mentoring
- Child-Centered Interventions

DENTAL HEALTH AIDE TRAINING SCHEDULE

	Session I PDHA I	Session 2 PDHA II	Session 3 EFDHA I	Session 4 EFDHA II	DHAH	DHAT
Duration	80 hours	6-10 Weeks	6-10 Weeks	6-10 Weeks	Enter a 3-year accredited dental hygiene education program or a CHAP certified dental hygiene education program	Enter a 3-year accredited dental therapy education program or a CHAP certified dental therapy education program
Preceptorship Clinic hours	80 hours	Under direct supervision - 200 hours	Under direct supervision of a dentist 6 months or 800 hours	Under direct supervision of a dentist 6 months or 800 hours	Enter a 3-year accredited dental hygiene education program or a CHAP certified dental hygiene education program	Enter a 3-year accredited dental therapy education program or a CHAP certified dental therapy education program

SPTHB would like to thank the Alaska Native Tribal Health Consortium and the Northwest Portland Area Indian Health for creating and sharing these resources that are supporting CHAP expansion.

COMPARISONS TO MEDICAL PROVIDERS

	Physicians	Nurse Practitioners & Physician Associates	Community health aide practitioners
Practices under their own license	Yes	Yes	No
Visit length	15 - 30 minutes	15 - 30 minutes	1 hour
Training in primary care, emergency medicine, women's health/prenatal care, elder care, pediatrics	Yes	Yes	Yes
Certifications require continuing medical education	100 hours every 2 years	100 hours every 2 years	40 hours every 2 years
Take call	Yes	Yes	Yes
Work in clinic alone	Yes	Yes	Yes
Services can be billed with Medicare or Medicaid	Yes	Yes	Yes
Services can be billed with third party insurance	Yes	Yes	Some
Administers Vaccinations	Yes	Yes	Yes

COMPARISONS TO MEDICAL PROVIDERS CONT'D

	Physicians	Nurse Practitioners & Physician Associates	Community health aide practitioners
Education	<ul style="list-style-type: none"> • HS Diploma • Bachelor's Degree • Medical Degree • Varying Residency • Certification/Board Exams 	<ul style="list-style-type: none"> • HS Diploma • Bachelor's, Master's, or Doctoral Degree • Varying Residency • Certification/Board Exams 	<ul style="list-style-type: none"> • HS Diploma • 6-8 Grade reading/math proficiency • 4 Training sessions pt visit # & type req't • 2 Weeks Preceptorship/Cert Exam
Medication Privileges	Prescribes	Prescribes	Dispenses
Diagnostic skills	Makes Diagnoses	Makes Diagnoses	Makes Assessments
Performs sports physicals	Yes	Yes	No
Interprets complex labs, (cbc,cmp, Hga1, etc.)	Yes	Yes	No
Interprets basic labs (UA, pregnancy test, rapid strep or flu test, etc.)	Yes	Yes	Yes
Performs pap smears	Yes	Yes	After additional training with supervising physician

LEVELS OF COMMUNITY HEALTH AIDE PROVIDERS

Levels	Training, Field Hours & Encounters	General Scope of Practice	Milestones
CHR	Quarter 1 • 100 + hours of education		
CHA I	Quarter 2 • 160 hours of didactic & skills • 100 hours of clinical time • 20 patient encounters • Future Learning Needs Assessment (FLNA) & Checklist (FLNC)	<ul style="list-style-type: none"> • Medical Histories • Physical Exams • Vital Signs • Basic specimen collection for labs 	<ul style="list-style-type: none"> • Eligible for CHA II certification • CHA can take call independently • Can work alone in a clinic • May have consulting provider agreement in place to treat simple conditions without reporting to provider
CHA II	Quarter 3 • 160 hours of didactic & skills • 100 hours of clinical time • 60 patient encounters • FLNA & FLNC	<ul style="list-style-type: none"> • Medical Histories • Acute Care • Physical Exams • Medication Management • Wound Care • Adolescent Health • Sick Childcare 	<ul style="list-style-type: none"> • Eligible for CHA II certification • CHA can take call independently • Can work alone in a clinic • May have consulting provider agreement in place to treat simple conditions without reporting to provider
CHA III	Quarter 4 • 160 hours of didactic & skills • 100 hours of clinical time • 60 patient encounters • FLNA & FLNC	<ul style="list-style-type: none"> • Medical Histories • Reproductive Health • Newborn Care • Family Planning • Prenatal Care • Well Childcare 	<ul style="list-style-type: none"> • Eligible for CHA III certification

LEVELS OF COMMUNITY HEALTH AIDE PROVIDERS CONT'D

Levels	Training, Field Hours & Encounters	General Scope of Practice	Milestones
CHA IV	<p>Quarter 5</p> <ul style="list-style-type: none"> • 160 hours of didactic & skills • 100 hours of clinical time • 60 patient encounters • FLNA & FLNC 	<ul style="list-style-type: none"> • Medical Histories • Chronic Care of Major Systems • Clinical Management • Chronic Wound Care 	<ul style="list-style-type: none"> • Eligible for CHA IV certification • Finished all didactic training
CHP	<p>Preceptorship</p> <ul style="list-style-type: none"> • 300 + hours supervised direct patient care • Preceptorship critical skills list • Testing 	<ul style="list-style-type: none"> • Team Leadership • Mentorship and support to all CHA levels 	<ul style="list-style-type: none"> • Eligible for Community Health Practitioner (CHP) Certification • Eligible for Community Health Aide related degrees by an accredited higher education institution

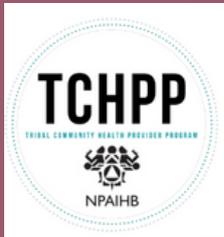
COMMUNITY HEALTH REPRESENTATIVE V. COMMUNITY HEALTH AIDE

LEGISLATIVE AUTHORITY - CHAP IS AUTHORIZED UNDER 25 USC § 1616 A-D WHILE THE CHR PROGRAM IS AUTHORIZED UNDER IHCA PL. 100-713.

FUNDING SOURCES - THE ALASKA CHAP IS FUNDED THROUGH THE HOSPITAL AND HEALTH CLINICS (H&HC) LINE ITEM IN THE IHS BUDGET AND CHRS ARE FUNDED THROUGH A SPECIFIC CHR LINE ITEM.

SCOPES OF WORK - WHILE THE “COMMUNITY HEALTH” PORTION OF THE NAMES ARE SIMILAR, THE SCOPE OF WORK FOR A COMMUNITY HEALTH AIDE AND COMMUNITY HEALTH REPRESENTATIVE ARE VASTLY DIFFERENT. CHAS ARE MID-LEVEL PRIMARY MEDICAL PROVIDERS WHO CAN PROVIDE BASIC MEDICAL ATTENTION AND CAN CONNECT A PATIENT TO CLINICAL CARE. CHRS PROVIDE CASE MANAGEMENT, HEALTH SCREENINGS, HEALTH PROMOTION, PREVENTION, AND OUTREACH TO COMMUNITY MEMBERS.

A SPECIAL THANKS TO



Tribal Community Health Provider Program (TCHPP)



Alaska Native Tribal Health Consortium (ANTHC)



NPAIHB

Northwest Portland Area Indian Health Board's (NPAIHB)

GLOSSARY OF TERMS

BHA- Behavioral Health Aide

BHP- Behavioral Health Practitioner

CE- Continuing Education

CHA- Community Health Aide

CHAM - Community Health Aide Manual

CHA/P - Community Health Aide Provider

DHA - Dental Health Aide

DHAH - Dental Health Aide Hygienist

DHAT - Dental Health Aide Therapist

ECHAMP - Electronic Community Health Aide Practitioner Manual

EHAM - Electronic Health Aide Manual

EFDHA - Expanded Functions Dental Health Aide

FLNA- Future Learning Needs Assessment

FLNC- Future Learning Needs Checklist

NCHAPB- National Community Health Aide Program Board

PDHA- Dental Health Aide Practitioner

SPTHB- Southern Plains Tribal Health Board

UA- Urinalysis



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