

Measuring return on investment of outreach
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Abstract

Community health workers (CHWs) are effective in improving access to health care, promoting client knowledge and behavior change, and contributing to improved health status of individuals. However, few outreach programs have evaluated the financial impact of CHWs on health care systems and policies. A longitudinal repeated measures design was used to assess the return on investment (ROI) of outreach by CHWs employed by Denver Health Community Voices. Service utilization, charges and reimbursements for 590 underserved men were analyzed 9 months before and after interaction with a CHW. Primary and specialty care visits increased and urgent care, inpatient, and outpatient behavioral health care utilization decreased, resulting in a reduction of monthly uncompensated costs by \$14,244. Program costs were \$6,229 per month and the ROI was 2.28:1.00, a savings of \$95,941 annually. These data provide evidence of

Measuring Return on Investment of Outreach by Community Health Workers

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Key words: Community health worker, cost effectiveness, return on investment, outreach.

Community health workers (CHWs) deliver necessary health care services to underserved populations in many capacities, including providing culturally relevant health education, care management, system navigation, and enrollment in publicly funded health insurance. Community health workers, also known as *promotoras*, *lay health workers*, or *community health advisors*, are trusted members of their communities who provide community-based health services and vital links between health systems and communities.^{1,2}

Evaluation of CHW services and programs across the U.S. vary widely. Most commonly, data are collected to reflect process measures, such as the number of clients seen, applications taken, or referrals given.^{3,4} However, some CHW programs have outcomes data to demonstrate effectiveness of CHW interventions.^{4,5} In fact, the CHW literature provides support for CHWs improving access through the provision of health screening, patient navigation, and referrals to primary care providers,^{6,7,8} promoting client knowledge and behavior change (primarily through health education),^{9,10} and contributing to improved health status of patients with chronic diseases, such as diabetes and hypertension.¹¹

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