COMMON HEALTH Coalition
Together For Public Health

CASE STUDY: WASHINGTON

Reimagining care through CHW-powered regional hubs: Washington state's vanguard model

Washington state's model for integrating Community Health Workers[1] (CHWs) into clinical and community-based settings stands out nationally. Born from partnership between the state's public health and health care agencies, the Community Care Hubs refer community members to local resources while promoting continuity of care across the state.

Washington's path to embedding CHWs across settings

Despite CHWs' longstanding and proven impact as essential trusted messengers and frontline health navigators, programs across the country remain underfunded, underutilized, and often isolated from the broader health system. But Washington state has taken a different path: building robust infrastructure to integrate CHWs within their health and social care delivery system across the state.

In 2023, state lawmakers passed legislation requiring Medicaid to support CHWs as part of the health care workforce. In response, the state health care authority launched a pediatric primary care pilot, placing 46 CHWs in more than 20 clinics across six regions and seven Tribes. Through the pilot, CHWs reached over 11,000 clients and their families[2]—delivering services that strengthened patient resilience, improved retention, deepened family engagement, and enhanced care coordination. This pilot led to a formal Medicaid State Plan Amendment (SPA), defining CHW roles in clinical teams, establishing training standards, and enabling reimbursement.

While the pilot and SPA laid the foundation for CHWs in clinical settings, state leaders recognized the importance of supporting the workforce in community settings as well. **This paved the way for the Community Care Hub system in place today.**

From clinical pilot to community infrastructure, thanks to health system partnerships

Washington's Community Care Hubs allow CHWs to connect people to the health care and social services they need. This system rests on a web of interdependent roles and braided funding from across the health sector.

Health care: The Washington Health Care Authority has invested in the Community Care Hubs, and each hub is connected to multiple health care providers within the region.

Public health: The Washington State Department of Health provides investments, strategic alignment across the region, and technical assistance.

Community-based organizations: CBOs deliver wraparound services and provide the local expertise and trust needed to meet complex needs.

Community Health Workers: At every node of the hub network, CHWs serve as a vital bridge, helping individuals navigate an overwhelming ecosystem of clinical, public health, and social service offerings.

[1] While the term CHW is used throughout this case study, Washington's Community Care Hubs label their workforce as community-based workers (CBWs) to represent the clinical and non-clinical contexts in which they work.

[2] Data provided by Washington State Health Care Authority as of June 2025

"No resource directory will ever have as much information as someone who lives in the community and puts the pieces together."

—**Maria Courogen**, Executive Director, Center for Access to Whole Person Care, Washington State Department of Health

Collaboration between health care and public health has been integral to each stage.

Stage 1: Medicaid waiver investments provide a catalyst. Washington used its first Medicaid Transformation Project (MTP 1.0, an 1115 waiver) to launch community-based care coordination in a handful of regions. By building care coordination into an already streamlined and standardized health delivery system, Washington took a major step toward more connected care.

Stage 2: Public health invests. Recognizing the critical role of community-based services for meeting public health goals during the COVID-19 pandemic, Washington's state health department then invested in completing the care coordination system across all nine regions. These investments created what are now known as Community Care Hubs.

Stage 3: Health care invests. Through MTP 2.0, the state's leading health care authority built on the health department's investments, expanding support for the nine hubs and establishing a statewide Native hub.

"When you try to bridge between social care and a health care system for people who either historically in their own life or for generations have not had adequate access to the resources that they need, you need to create access in a tangible way."

—**Nichole Peppers**, Executive Director, Southwest Washington Accountable Community of Health

What Community Care Hubs do

Each hub is embedded within a regional Accountable Community of Health (ACH), serving multiple counties and tribal nations. They bring together local health care providers, social service agencies, and CBOs to address complex needs that no single sector can meet alone.

Individuals can be referred to their regional hub by a health care provider or social services worker, or they can self-refer. From there, they are connected to a CBO, social service organization, federally qualified health center, or clinic that offers CHW-led care coordination services based on the person's specific needs.

Visual inspired by Olympic Connect.

Core functions:

Care coordination: Hubs contract with a network of partners within their geographic area (see visual above). These contracted partners then hire CHWs to work in community settings, where CHWs connect individuals to housing, food, behavioral health care, and other essential services.

Capacity building: Hubs support workforce development, providing training, career pathways, and shared learning and support. They also reduce administrative burdens for CBOs through shared tools, infrastructure, and technical assistance.

Shared data and metrics: Hubs track a unified set of measures across Washington enabling consistent tracking of performance and impact statewide. They handle oversight, agreements, and reporting to help ensure their work is sustainable. This data collection feeds back into the community and government.

Interested in replicating this model?

Washington's connected, statewide network ensures that no matter where someone goes, a CHW-powered hub is there to support them. While Community Care Hubs exist elsewhere, Washington's unique structure and shared data systems reduce delays and ensure continuity of care—resulting in healthier communities for everyone.

How health system leaders can follow Washington State's example:

Solving care coordination challenges? Embed CHWs across clinical and community settings: To close care coordination gaps, health care and public health organizations should look to CHWs as the solution. Integrate CHWs across a range of settings to maximize their role as trusted messengers and care navigators and ensure there are clear and formalized pathways for the sharing of information, referrals, and continuity of services.

Align regional health agencies and community partners around shared metrics: Even without a regional backbone like Washington's ACHs, shared metrics can anchor collaboration across partners. Metrics capture community priorities, ease reporting burdens, and enable public health agencies to aggregate data for a broad view of performance and impact. Most importantly, they foster a commitment to reinforcing one another's efforts.

Cross-sector partnerships—and investments: Partnerships across the health sector allow any one organization to serve people better by helping them get from one point to the next. Whether part of a regional network or within jurisdictions, all partnerships allow for greater care connectivity. But it works best when partners bring investments to the table. Washington's hubs would not be possible without funding from both the state's public health and health care authorities. Consider leveraging innovative partnerships where public support may be limited.

Let communities lead the way: Empower community partners and CHW organizations to direct implementation efforts, supported by a strong coordinating body. Community expertise ensures systems are responsive to community needs, and their participation builds trust in health institutions. Consider adopting recommendations for strengthening partnerships between health organizations and CBOs.

Take the Common Health Challenge

The 2025 Common Health Challenge invites organizations to develop CHW-led solutions that bridge the divides between health care and public health. Organizations can take the Challenge and find curated resources for working with CHWs, including more information on Washington state's model.

Acknowledgements

The Common Health Coalition would like to thank the following individuals for meeting with us to share their stories about work, challenges, and community-driven changemaking: Maria Courogen, Executive Director, Center for Access to Whole Person Care, WA State Department of Health; Nichole Peppers, Executive Director, SW Accountable Community of Health; the Medicaid Transformation Project (MTP) team WA State Health Care Authority; and JP Anderson, CEO, CHOICE Regional Health Network. We also thank our partners at ChangeLab Solutions and PGP for their support developing this case study.