

Integrated Care, at the Speed of Primary Care

Time is one of the scarcest resources in primary care. Physicians have limited time with each patient, and office staff have limited capacity for follow-up. Yet patients with complex needs often require more attention. A child with diabetes may need access to nutritious food. A patient with asthma may be struggling with housing conditions that make managing the disease more difficult.

For Medicaid members facing challenges like food insecurity, housing instability, or lack of transportation, the need for additional support can be even greater. As the medical community has long recognized, unmet social needs interfere with patients' ability to manage their health, attend appointments, and follow care plans.

As much as physicians and their staff may want to help, they often lack the time and resources.

An integrated care model helps close that gap without adding to the workload of already busy clinical teams. By providing social care screening and navigation through primary care offices, the HEALI Social Care Network acts as an extension of primary care, connecting patients with services that support their health.

HEALI community health workers (CHWs) are now embedded in 15 care settings across Long Island, including independent primary care practices like MD365 and behavioral health organizations like Victory Recovery.

A CHW in the Practice

Jenniffer Jimenez is a HEALI CHW embedded at a pediatric practice in Mastic. Every Monday and Wednesday, she arrives at 8 a.m. and spends the day working alongside the physician and office staff, speaking with families and helping Medicaid members connect with social care services.

Jenniffer has a small workspace toward the back of the office, but much of her day is spent near the front desk, where the physician brings her into conversations with members about nutrition and social needs.

Jenniffer sees firsthand how easily social needs can go unaddressed in a busy medical practice.

“Sometimes you put them in the notes and that's the end,” she explains. “But who addresses that need?” That's where the CHW comes in, following up on concerns identified during a medical visit and helping patients and families access support.

With experience in care coordination and Medicaid programs, Jenniffer understands the importance of adapting to the pace of the medical office.

“Everything is so fast. One after another, one after another. And there's so many regulations.”

Building Social Care into Workflows

For Jennifer, successful integration starts with understanding how the practice operates. She builds relationships with the physician, office manager, and front-desk staff, learning how each contributes to patient care and where she can be most helpful.

She also adapts her own workflow to the practice's schedule. Rather than asking families to stay for a lengthy social care screening during an appointment, she introduces herself in person and follows up by telephone, when parents have more time to discuss their needs.

This approach allows Jennifer to address the needs of the entire household without slowing down the practice or asking more of its staff.

Jennifer's experience demonstrates a basic principle of HEALI's integrated care model. Successful integration requires building relationships, trust, and workflows tailored to the realities of each individual practice.

Scaling integrated care means building a model that can adapt to each practice, allowing clinical teams to focus on medical care while providing patients with the social support they need.