



June 2025

## **Strengthening the Primary Care Workforce: Embedding Community Health Workers Within Care Teams**

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Implementation Spotlight



California Quality  
Collaborative



## Executive Summary

This implementation spotlight examines Reddy Care Medical's approach to embedding community health workers (CHWs) into its care team to better meet the needs of its patients. A participant of the California Quality Collaborative (CQC)'s [Equity and Quality at Independent Practices in LA County \(EQuIP-LA\)](#) Initiative, Reddy is a small, independent primary care practice serving communities throughout Pomona, California.

The EQuIP-LA Initiative (2023-2025) supported 31 independent primary care practices throughout Los Angeles County to reduce disparities related to chronic conditions and preventative care. These practices collectively served over 50,000 Medi-Cal enrollees, the majority of whom self-identify as Hispanic or Latino, American Indian or Alaska Native, Asian, Black or African American, Native Hawaiian or Other Pacific Islander.

Practice-level quality improvement (QI) efforts were supported by a network of community-based coaches embedded within four participating provider organizations, [Allied Pacific IPA](#), [Angeles IPA](#), [L.A. Care Direct Network](#) and [Omnicare Medical Group](#). Coaches received ongoing training and tailored guidance from CQC's team of improvement advisors on the application of an [equity-centered QI framework](#).

This implementation spotlight builds on CQC's commitment to embedding health equity across its programming and improvement efforts.<sup>1</sup>

## The Role of Community Health Workers

As trusted members of their community, CHWs play a critical role in advancing health equity and improving outcomes. By bridging cultural, linguistic and systemic gaps between individuals and the health care system, CHWs help patients navigate care, access resources and manage chronic conditions. Their deep community connections foster trust, promote preventive care and address social drivers of health—such as housing, food security and transportation—that influence overall well-being.<sup>2</sup> As members of interdisciplinary care teams, CHWs support more person-centered, coordinated and effective care, particularly for underserved populations.

## Piloting an Innovative Approach to Strengthen Primary Care

Finding viable strategies to strengthen the primary care workforce, while also addressing the holistic physical, behavioral and social needs of patients, is an ever growing imperative within the field. An emerging approach is integrating CHWs into the primary care team. This can be achieved either by cross-training existing practice staff, such as medical assistants, or by engaging external CHWs to support practices.

Reddy Care Medical piloted this approach, integrating CHWs within its practice. The practice serves a diverse panel of nearly 3,000 individuals, predominately from Hispanic and Vietnamese communities. Through its participation in EQUIP-LA, Reddy made the strategic decision to train several internal team members to become qualified CHWs, leveraging their skills to enhance patient engagement, facilitate access to social services and strengthen ties to the community.





## Reddy Care Medical's Community Health Worker Journey: Reflections From Alex Hernandez III



Alex Hernandez III, Business Development Director, Reddy Care Medical

At a time when primary care practices are increasingly expected to deliver more with limited resources, one private practice in Pomona, California, found itself at a crossroads. Through its participation in the EQuIP-LA Initiative, Reddy Care Medical's leadership team began exploring new strategies to extend their reach and improve care delivery. As Alex Hernandez III, Reddy's Business Development Director, explained:

*"From the primary care standpoint and especially for private practices... we're always spread pretty thin... it's really difficult... it requires dedicated resources to make a difference."*

This recognition led Reddy to consider integrating CHWs into its care team. From the practice's perspective, CHWs provide an opportunity to better engage the local community.

*"When the opportunity for the CHW came up, it was really a no brainer for us. We felt like that position would be able to have a direct impact on most of the areas that we really needed to have a better focus on, particularly in our community, here in Pomona, where the majority of our population are Hispanic and Vietnamese."*

After careful consideration, the practice decided to upskill existing staff into CHW roles. As Alex noted, the staff members already had strong relationships with patients and a deep understanding of the clinic's workflows.

*"Having our own staff in the CHW role added a personal touch and strengthened trust with patients."*

Two team members who had previously worked as medical assistants were enrolled in an intensive, multi-week CHW training program. The training required full-day attendance over a two-week period and concluded with a final exam. While valuable, the process was not without disruption and required the practice to adapt. Losing two team members for that amount of time required the practice to reconfigure internal workflows and redistribute duties. The practice began planning for CHWs to work exclusively in that role.



Once trained, CHWs quickly became integral to Reddy's patient care. The CHWs fostered stronger relationships with patients and helped improve communication across the care team.

*"Our patients develop a better rapport with the CHWs than they do sometimes with the providers."*

This dynamic helped alleviate the burden on providers, who often face long appointment lists and limited time. With CHWs maintaining contact between visits, patients felt supported and better able to manage their care.

*"That ongoing communication alleviates time during a patient's medical appointment."*

The journey was not without its hurdles. One significant challenge was the delay between CHW certification and the ability to bill for services. Credentialing and contracting with managed care plans took 60 to 90 days, underscoring the importance of initiating this process as early as possible, ideally before training ends.

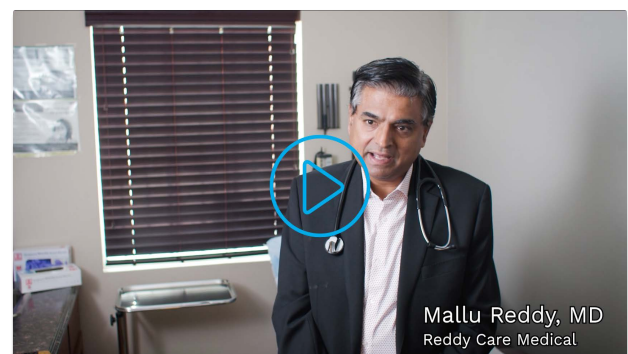
Reflecting on the experience, the practice identified several lessons learned. Strong internal communication is crucial, particularly when defining the CHW role for other staff. Initially, this was a point of confusion, but over time, other team members began to refer patients to CHWs proactively.

*"Now, other staff are more proactive in referring patients to CHWs, which has strengthened care coordination."*

Looking ahead, the practice plans to expand CHW responsibilities to include home visits and proactive outreach to patients who are less engaged in care. Currently, CHWs work at the clinic, supporting patients with high needs and coordinating across the care team. Their daily work involves outreach calls, assessments, scheduling follow-ups and liaising with providers to address clinical questions.

The success of this initiative is due in large part to strong leadership and a clear vision. Their advice to others considering CHW integration is pragmatic: understand the time and training commitment, plan for contracting delays and see the investment as one that pays dividends not just in billing, but in patient outcomes and team efficiency.

To learn more about Reddy Care Medical's journey directly from the care team, as well as patients and their community-based coach, we invite you to watch a [short video](#) highlighting their experience. The team shares firsthand reflections on the impact of participating in the EQUIP-LA initiative and the role of CHWs in transforming care delivery.



[CLICK PLAY BUTTON TO WATCH VIDEO](#)

## Conclusion

The integration of CHWs into Reddy Care Medical's primary care team underscores the critical role they play in addressing social drivers of health, strengthening patient-provider relationships and supporting team-based care. Their ability to build trust, maintain consistent follow-up and connect patients with essential services has proven invaluable. As demonstrated by Reddy's experience, successful CHW integration requires thoughtful planning, strong leadership and a willingness to adapt workflows. While challenges such as credentialing delays and internal role clarity may arise, the long-term benefits to both patient outcomes and team efficiency make CHWs a vital asset in the evolving landscape of primary care.

This implementation spotlight is dedicated to the countless CHWs who tirelessly serve as connectors, trusted partners and champions for numerous communities, especially those that are underserved. We recognize you, we applaud you and we appreciate you.

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## Endnotes

- 1 Bau I., Au M. [Building an Equitable Health Care System. A Health Equity Roadmap and Recommendations for Collective Impact in California](#). California Quality Collaborative, November 2024
- 2 Centers for Medicare & Medicaid Services. (2024). Social Drivers of Health and Health-Related Social Needs | CMS. Cms.gov. <https://www.cms.gov/priorities/innovation/key-concepts/social-drivers-health-and-health-related-social-needs>



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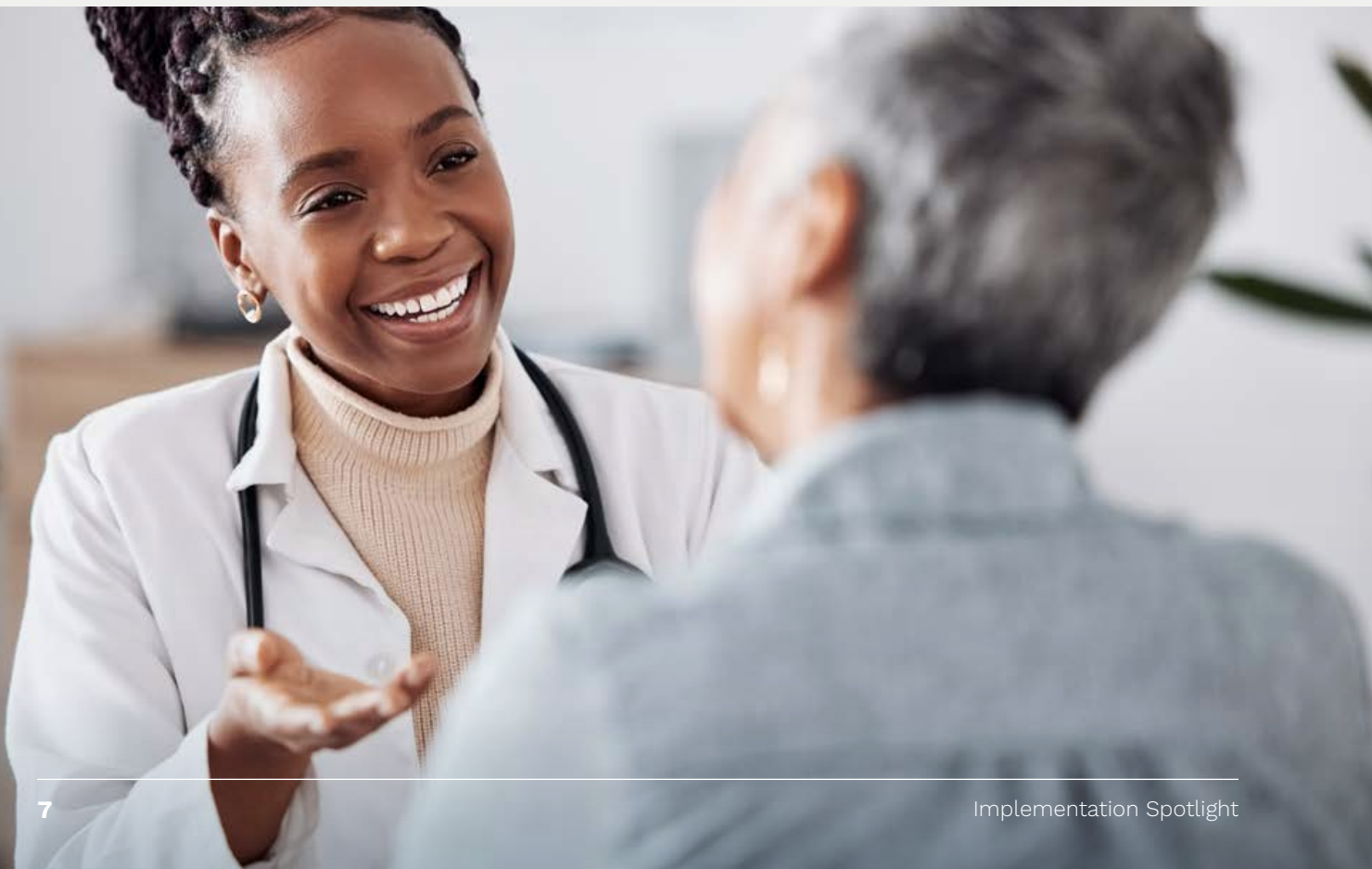
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[calquality.org/initiative/equity-quality-improvement-los-angeles](https://calquality.org/initiative/equity-quality-improvement-los-angeles)

## About the California Quality Collaborative (CQC)

California Quality Collaborative (CQC) is a health care improvement program dedicated to helping care teams gain the expertise, infrastructure and tools they need to advance care quality, be patient-centered, improve efficiency and thrive in today's rapidly changing environment. CQC is committed to advancing the quality and efficiency of the health care delivery system across all payers, and its multiple initiatives bring together providers, health plans, the state and purchasers to align goals and take action to improve the value of health care for Californians. Visit [calquality.org](https://calquality.org) to learn more.







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