
START HERE: How are you feeling? Is anyone in your household feeling ill?

What do you feel is wrong?

What can I help you with?

Do you have insurance, or do you know how to use your insurance?

Ask about food needs (offer community food access resources, Combined Application for SNAP)
Ask about financial needs (Eviction or shelter needs, Utility Assistance, Combined Application, Application for LIHEAP)
Ask if they know how to get their medications (offer resources for home delivery through the pharmacies, special pharmacy hours at local retail outlets such as Walmart and HyVee)
Ask about transportation and if they are on public assistance insurance, teach them how to call for rides to medical, dental, and pharmacy appointments.

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Ask about transportation and if they are on public assistance insurance, teach them how to call for rides to medical, dental, and pharmacy appointments.

Help with insurance navigation (paper or online application or have them get their cards out and discuss)
- If proofs are needed to complete the application, discuss strategies on how to get these submitted
  - a. Drop Box option at county offices
  - b. Can they mail them to the county offices?
  - c. Can a CHW meet them outside of work or public space to retrieve documents, scan at IMAA, and forward to the county offices?

After assisting with insurance needs, proceed to asking about other needs.

If no or unsure:

Do you currently have a primary care provider and from which clinic?

If yes and it is Mayo:

Assist them with making the call to Primary Care Connections (507-284-2272) and connecting them. Ask if they would like to work with a Community Health Worker or would they like a referral requested for CHW services. Ensure they know there is no cost for the service and describe your role and goal of the program. If they agree, ask them for their Mayo Clinic Number and Date of Birth, and send a request to Tara to initiate the referral. Record the contact in the COVID-19 share point database.

If no and they request Mayo as a provider:

Ask if they are working with a Community Health Worker or would they like a referral requested for CHW services. Ensure they know there is no cost for the service and describe your role and goal of the program. If they agree, ask them for their Mayo Clinic Number and Date of Birth, and send a request to Tara to initiate the referral. Record the contact in the COVID-19 share point database.

If no and they request OMC as a provider:

Assist with making the call with them (507-285-3441) and record the contact in the COVID-19 share point database.

If yes and it is OMC:

Ask if they currently have a primary care provider and from which clinic?