

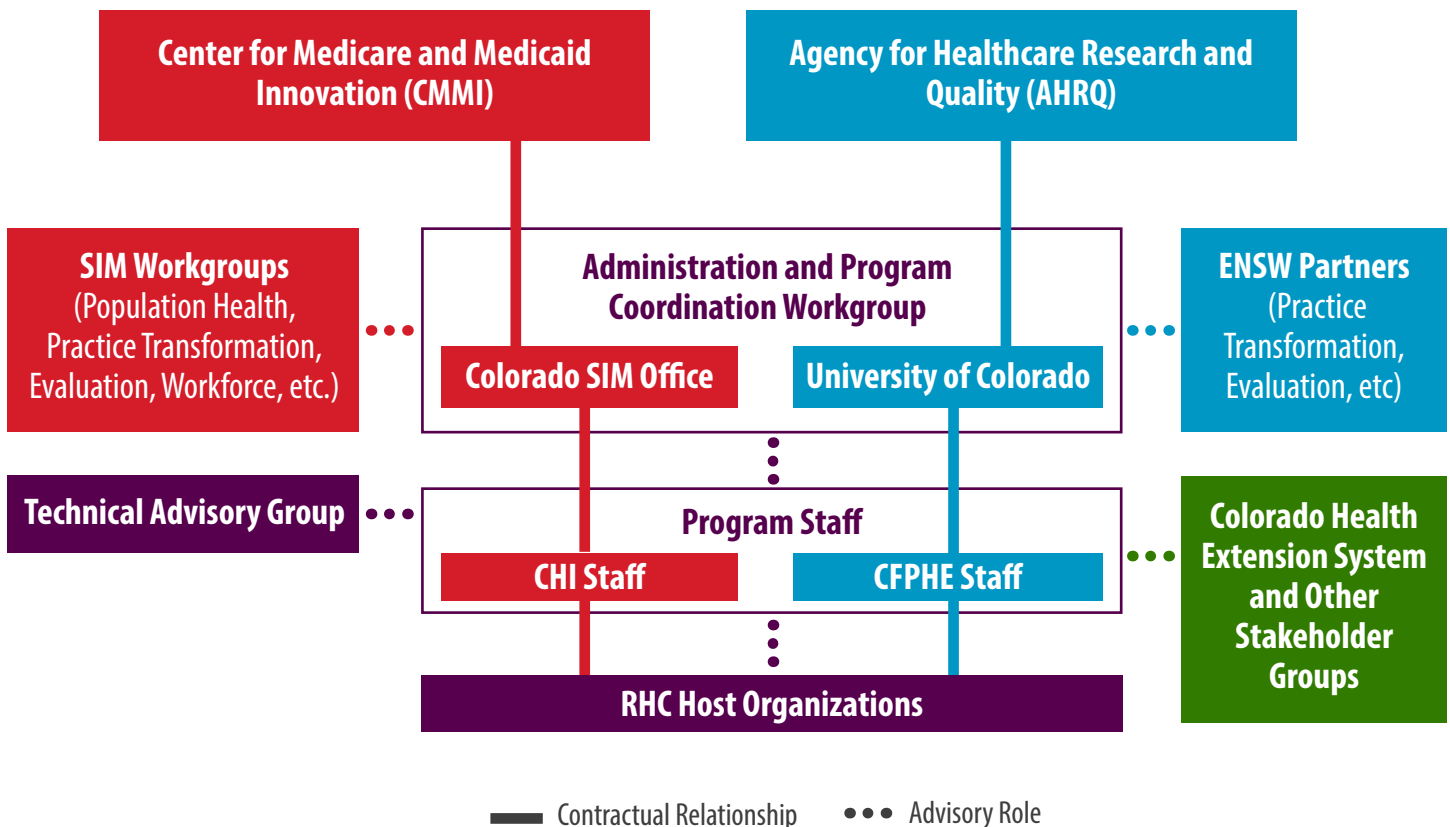
Regional Health Connector Program Structure, Administration, and Funding

The Regional Health Connector (RHC) program is supported by two federally funded initiatives: the Colorado State Innovation Model (SIM) and EvidenceNOW Southwest (ENSW). As shown in Figure 2, the program is developed and managed by the Colorado Health Institute (CHI) and the Colorado Foundation for Public Health and the Environment (CFPHE) under contract with the Colorado SIM Office (for SIM funding) and the University of Colorado (for ENSW funding). CFPHE and CHI have jointly selected local organizations across the state to host a Regional Health Connector (RHC) in their region.

Figure 1 depicts the program coordination and oversight of the RHC Program.

- Entities in red are part of the SIM funding mechanism.
- Entities in blue are part of the ENSW funding mechanism.
- Entities in purple, or outlined by purple, are part of both the SIM and ENSW funding mechanisms.
- Entity in green is the Colorado Health Extension System, which provides statewide oversight of practice transformation activities.

Figure 1. Colorado Regional Health Connector program coordination and oversight relationships



How a RHC connects clinics and communities

Administration and Leadership

As shown in Figure 1, there are five leadership groups guiding the work of the RHC Program.

Administration and Program Coordination Workgroup

The scope of the Administration and Program Coordination Workgroup (APC) includes: coordinating various initiatives funded by SIM and ENSW; advising other projects that may align with the RHC program; monitoring contracts for CHI and CFPHE; and overall program budgeting. The APC will convene for the duration of the RHC funding period. The APC is comprised of eight-12 individuals who:

- Represent SIM and ENSW administrators and decision-makers.
- Bring objective expertise in contract monitoring, budgeting, sustainability, program evaluation and program coordination.
- Are knowledgeable about connecting health systems on a statewide basis.

Technical Advisory Group

The Technical Advisory Group (TAG) advises program staff on the development and delivery of the RHC program. The TAG provides guidance on communication, sustainability, governance, and leadership. General guidance and advice is sought and requested on a case-by-case basis. The TAG is comprised of 12-16 individuals who:

- Represent various stakeholders within the health system.
- Are knowledgeable about connecting health systems on a statewide and/or local basis throughout Colorado.
- Represent urban, suburban, rural, and frontier regions of the state.
- Bring objective expertise to the work and role of Regional Health Connectors.
- Can connect program staff to individuals, organizations, and resources in the community.
- Includes at least two RHCs representing rural and metro areas of Colorado.

Colorado Health Extension System

- CHI and CFPHE are partners in the Colorado Health Extension System (CHES). CHES is a cooperative of organizations working to create a statewide infrastructure to support and coordinate practice transformation and to connect and support practices, other health care providers, local public health agencies, and community organizations in carrying out community health improvement initiatives. CHES is convened by the Practice Innovation Program Colorado (PIPCO) housed in the Department of Family Medicine at the University of Colorado School Of Medicine. Throughout the development and implementation of the program, CHI and CFPHE coordinate closely with other CHES partners to maximize coordination and minimize duplication of efforts.

ENSW Partners and SIM Workgroups

The work of ENSW Partners and SIM workgroups is informed by experts in practice transformation, evaluation, and other core content areas of ENSW and SIM. The involvement and advisory capacity of the ENSW partners and SIM workgroups varies based on topic area and program development phases.

Host Organizations

To ensure the work is locally driven, each RHC is hosted by a local organization or a collaboration of agencies/ organizations with existing relationships and a history of community-based work in the region. Hosts receive ENSW funding through CFPHE and Colorado SIM funding through CHI. All Hosts and RHCs are required to participate in both programs under separate, but similar, contracts with CHI and CFPHE.

Program Staff

While each Host receives funding through CFPHE and CHI, staff member of both organizations work together to ensure the coordination of funding-specific requirements and to minimize administrative duplication. Employees of CFPHE and CHI form the RHC Program staff and work together as a single team. Program staff turn the advice of the leadership groups into action, and act as liaisons among contractual entities, advisory groups, and RHCs.

A JOINT PROGRAM BY



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