



## Connections for Community Care TIERED TECHNICAL ASSISTANCE PROGRAM

All TA falls within the ***Connections for Community Care*** umbrella.

*Why Connections for Community Care?* We are all about outcome impact to help our rural communities become and remain “more well.” Not only better health but comprehensively more well. That goal is accomplished in lots of different ways by lots of different people, groups, and organizations. Our part is connection. By connecting people to each other...connecting SORH to resources... we facilitate rural communities becoming more well through *Connections for Community Care*.



For SORH by former SORH. The Tiered Technical Assistance offering is designed to bridge, supplement, strengthen, and grow existing SORH efforts, partnerships, and resources, at the request of the SORH. This service set is intended to provide capacity building and support while developing a longer-term strategy for SORH. The goal is to assist the SORH to develop needed capacity to provide quality TA services geared toward rural primary care providers where and when needed. NOSORH’s goal is not to compete with other TA providers but to provide support services for unmet need(s) to SORH and the communities they serve while strengthening the SORH TA infrastructure.

A set of innovative TA strategies and resources for SORH have been developed. Through engagement with rural primary care providers and communities, SORH will gain a better perspective and understanding while working toward an innovative rural health landscape and infrastructure. The TA has been informed by the work of the leaders and partners of NOSORH’s Primary Care Committee and is focused on limiting fragmentation and growing a national repository of TA resources and expertise for rural primary care services while not subjugating established relationships.

All TA services are provided and/or coordinated by Tonne McCoy, NOSORH Technical Assistance Director. Tonne is a Certified Rural Health Clinic Professional, holds Lean Six Sigma – Green Belt status, has a master’s degree in psychological science, and will soon be completing her Ph.D. in experimental psychology with an emphasis in rural health. Tonne served rural communities during her 6-years at the Idaho State Office of Rural Health (2 years in the Primary Care Office and 4 years in the SORH). The cornerstone of her experience is in research, data analysis, and RHC compliance expertise to aid in allowing flexibility and innovative approaches to program and project management, as well as challenge resolution.

## ***Purpose:***

SORH are invited to contract with NOSORH to develop, enhance and/or implement their TA and/or engagement strategies in support of their rural primary care providers, including, but not limited to, Rural Health Clinics, Federally Qualified Health Centers/Community Health Centers, private providers, and other rural primary care providers. This hands-on opportunity positions NOSORH to come alongside SORH to engage rural primary care providers and rural communities to better understand and build an innovative rural health landscape and infrastructure by providing direct TA to rural communities and primary care providers. The goals and deliverables are accomplished using innovative and individualized service and TA strategies, resources, and tools.

Subjects to be addressed may include operational literacy (revenue cycle management, clinical documentation practices, scheduling/workflow, etc.), building TA skills, as well as technology/benchmarking tools. All areas/topics addressed will support and grow TA, reach, and engagement strategies of SORH.

## ***Background Facts:***

- Rural Primary Care Providers – including RHC, FQHC/CHC, FFS Clinics, etc. - are a priority focus of the rural health landscape and infrastructure for NOSORH
- Provider-based Rural Health Clinics are included as recipients of TA in SORH, SHIP, and Flex grant guidance, providing a natural funding source for these services and resources
- Primary care services are becoming as important as hospital services in this time of population health and health equity. Engaging this segment of the rural health landscape and infrastructure in innovative ways is a primary focus of the NOSORH Board
- CAH networks may include RHCs, FQHC/CHCs, or other rural primary care provider types – need for facilitation and establishment of strategic collaboration, participation in meetings, inclusion in action plans, shared data, etc.
- There is a broad range of TA offerings across SORH in terms of understanding, engagement, provider types served (RHC, FQHC/CHC, private), and support strategies for rural primary care providers
- Outreach and development of a TA strategy may be challenging and take time; however, with the current funding guidance, now is the time to develop and implement a strong strategy that may carry rural health providers into their next chapter
- Data analysis and evaluation is rapidly becoming an important facet of SORH and their stakeholders' ability to enhance anecdotes and “tell their story” in a meaningful and effective way to potential collaborative partners, community members, and funders

## Program Options:

Level	Included Technical Assistance Services*
<p><b>Tier 1</b> Project focused</p> <p><b>Annual Fee</b> \$7,500</p>	<ul style="list-style-type: none"> <li>• Determination of SORH staff capacity and bandwidth using SORH Proficiencies Benchmarking assessment and SORH self-assessment using RHC – specific matrix, if appropriate</li> <li>• Development of SORH TA continuation strategy (SORH team member or outsourcing), if appropriate</li> <li>• Assessment of rural primary care provider needs/project readiness</li> <li>• Development and implementation of a TA plan/strategy for focused project/identified need(s)</li> <li>• Project-specific remote assistance with execution of TA plan/strategy while increasing the SORH team capacity</li> <li>• Project-specific remote TA offered to the rural primary care provider and/or project participants to supplement Local SORH efforts, as needed</li> <li>• TA offered is focused on a single issue, such as adding a service line, recruitment, retention, or compliance issue (not an exhaustive list).</li> <li>• Remote TA up to 3 organizations (not to exceed 10 individual rural primary care providers) not participating in the Tier 1 Project</li> </ul>
<p><b>Tier 2</b> Open-ended – general needs</p> <p><b>Annual Fee</b> \$10,000</p>	<p>All of Tier 1 PLUS –</p> <ul style="list-style-type: none"> <li>• TA offered to supplement Local SORH efforts as needed</li> <li>• Remote TA for up to 6 organizations (not to exceed 18 individual rural primary care providers)</li> <li>• TA may include workflow, revenue cycle – including coding, billing &amp; documentation, quality metrics, process efficiencies, community development, leadership/management development, etc.</li> <li>• High level of rural primary care provider engagement with regular contact, as appropriate; enhance rural primary care provider collaboration efforts</li> </ul>
<p><b>Tier 3</b> For SORH starting primary care engagement and TA. Project-focused or more open-ended for general needs.</p> <p><b>Annual Fee</b> \$15,000</p>	<p>All of Tier 2 PLUS -</p> <ul style="list-style-type: none"> <li>• Remote TA for up to 10 organizations (not to exceed 25 individual rural primary care providers) needing in-depth/hands-on assistance. TA may include compliance, emergency preparedness, workflow, revenue cycle (including coding, billing &amp; documentation), quality metrics, process efficiencies, community development, establishing relationships with rural primary care providers, leadership/management development, etc.</li> <li>• SORH desire to begin work with rural primary care providers or enhance rural primary care provider engagement</li> <li>• May have limited SORH staff time or new SORH staff</li> <li>• Bi-weekly touch-point calls with SORH &amp; TAD (as needed)</li> <li>• Other individualized activities as deemed appropriate and necessary based on SORH goals and need</li> </ul>

## Additional Option:

**\$1,500 – Basic Primary Care Data Add-on** to selected *Tiered Technical Assistance* subscription. This service set will include the determination of basic data opportunities related to rural primary care work and incorporating those opportunities to enhance TA work. This add-on will explore basic data management resource needs and the next steps.

[www.nosorh.org](http://www.nosorh.org)

## ***Expected Impact:***

- Improve overall business literacy of participating rural primary care leaders, SORH team members, and other participating stakeholders
- Increase TA and community outreach capacity of SORH
- Evaluate the sustainability potential of SORH TA capacity through the development of a TA continuity plan as appropriate
- Establish and/or strengthen relationships with rural primary care providers and rural communities

### ***What participants & partners say***

The “assistance was super helpful.”

"... they know you go above and beyond! Thanks so much!"

“Having access to a national subject matter expert that knows SORH because she was a SORH has been invaluable.”

"It was a huge success and I hope we can explore other ventures together in the future. I have heard nothing but rave reviews..."

"I just want to send a huge shout out to all for the wonderful workshop yesterday. The feedback [we] are hearing is awesome." - Email from participating Chief Nursing Officer

## ***Registration:***

**For questions, additional information, registration information, or assistance, please contact:**

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