



Organizational Models for Registry Implementation

CCCN Steering Committee
April 15, 2005



What is the CCCN?

A community collaboration to improve the health of people living with diabetes and other chronic health care conditions.



A handshake among healthcare providers...

- Central Coast Alliance for Health
- County of Santa Cruz Health Services Agency
- Physicians Medical Group of Santa Cruz County
- Safety Net Clinic Coalition of Santa Cruz County
- Santa Cruz Medical Foundation



Other hands...

- Regional Diabetes Collaborative
- Pajaro Valley Community Health Trust
- Health Improvement Partnership Council of Santa Cruz County
- Cabrillo College



Accomplishments 2004-2005

- Developed consensus for grant to AHRQ.
- Pajaro Valley Community Health Trust agreed to be fiscal agent for grant funding.
- Awarded AHRQ grant.
- Hired staff and set-up office.
- Organized Steering, Clinical and IT committees.
- Re-named collaborative CCCN.
- Adopted mission and goals.
- Developed Evaluation Plan.
- Completed IRB Application.





Accomplishments 2004-2005 cont.

- Introduced vision at Safety Net Clinics
- Completed needs assessment of Safety Net Clinics
- Agreed on clinical definition of registry patients
- Selected new data elements for registry
- Adopted IT architecture including master patient index
- Set-up website chroniccarenetwork.org
- Invited to participate in CalRHIO Summit
- Invited to present at June AHRQ Conference

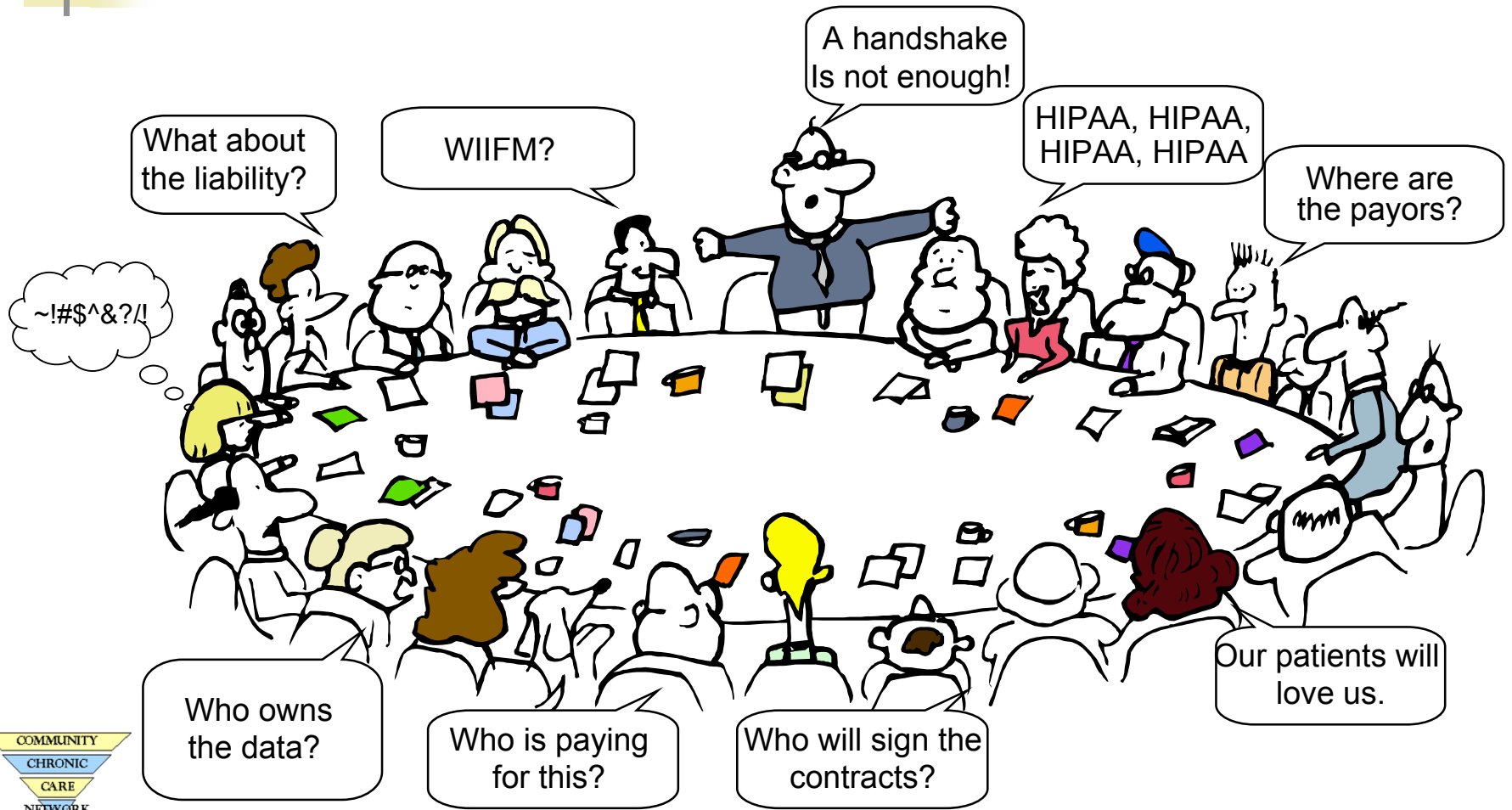




Why change?

- Document commitment of partners.
- Demonstrate compliance with anti-kickback regulations.
- Enter into binding agreements.
- Assign responsibility for regulatory compliance including HIPAA.
- Authorize individuals to enter into agreements.
- Define business model.

Other AHRQ HIT collaboratives...





Why change now?

To implement CCCN Registry we need:

- Software license agreement with PMG
- Business Associate Agreements with Alliance, labs, Medicare, HMOs...
- Participant agreements with Safety Net Clinics, PMG offices, SCMF...



Organizational Arrangements

- Contractual Approach
 - Memorandum of Understanding
 - Need lead agency for HIT projects
 - “early” Santa Barbara model
 - Tennessee State RHIO
- Entity-based Approach
 - Corporation
 - Partnership
 - Limited liability company
 - current Santa Barbara model
 - CareSpark, Inc. (Kingsport, Tennessee)



Four Options

 Contractual arrangement with local lead entity

 Contractual arrangement with outside lead entity

 HIP-C is legal entity for CCCN

 CCCN becomes a legal entity



Jargon Check

- Health information service provider is the entity that operates the data exchange for a group of direct care providers. This may include the development of health information technology. (hub and spokes)



Option 1: Contract with local lead

Lead entity serves as initial health information provider including responsibility for regulatory compliance.

Pro's

- Maintains contractual relationship among partners
- Postpones decision on legal entity
- Lead entity could be:
 - County
 - Alliance
 - PMG
 - SCMF
 - Hospitals

Con's

- Changes equal relationship among partners
- Time required for agency to obtain approval to serve in role
- No local agency may be willing/ able to assume responsibility
- May not shield partners from liability



Option 2: Contract with outside lead

Lead entity serves as initial health information provider including responsibility for regulatory compliance.

Pro's

- Maintains equal relationship among partners
- Adds external expertise
- Potential external leads:
 - UCSF
 - Stanford
 - CA Healthcare Foundation
 - Other foundations
 - Public Health Institute

Con's

- Time required to involve outside entity
- Cost to Project of outside entity involvement
- Diminish local control
- External agenda



Option 3: HIP-C as legal entity

Pro's

- HIP-C is incorporated
- CCCN partners overlap with Health Improvement Partners
- Maintains collaborative structure
- CCCN Steering Committee becomes Advisory Committee to HIP-C Board

Con's

- HIP-C is newly incorporated
- HIP-C would need liability insurance, policies & procedures
- Time for HIP-C Board to make strategic decision
- Future funding for HIP-C?



Option 4: CCCN as legal entity

Pro's

- CCCN becomes own legal entity
- CCCN Steering Committee becomes CCCN Board
- Structured to apply for grant funding in future

Con's

- Time and cost of incorporation
- Project resources to setting up new corporation
- Premature to form legal entity until know scope of services beyond AHRQ grant



Other options?

