

HEALTH EQUITY COHORT 2.0

Frequently asked questions

General information

Q1: What are the benefits of participating in the Health Equity Cohort?

- Opportunities to pilot innovative projects and receive funding support.
- Shared learning with other leaders to develop scalable solutions.
- Strengthened connections between health and social service systems.
- Access to training and tools for fostering equity and community-led action.

Application process

Q2: What is required to apply?

- **Previous cohort participants:** A short form confirming your interest, any organizational updates, and logistical details about who, when, and how you can participate.
- **New applicants:** A detailed application covering your organization's work, alignment with cohort themes, and capacity to participate. This process is not meant to be a tool to screen out interested participants, but to ensure we gather the information we need to inform planning and provide adequate orientation and support to participants.

Participation and expectations

Q3: What kind of projects will the cohort focus on?

Projects will focus on addressing health-related social needs (e.g., housing, food, transportation) through community-led solutions that bridge formal and informal systems of care.

Q4: Are participants required to pilot a project?

While pilot projects are encouraged, they are not mandatory. Participants can also contribute by sharing insights, best practices, and lessons learned.

Q5: Will there be funding available for projects?

Yes, we plan to invest in pilot projects that align with the cohort's goals and demonstrate scalability and sustainability.

Onboarding and support

Q6: What support will participants receive?

- Orientation for new members to align on goals and expectations.
- Peer mentoring opportunities
- Ongoing technical assistance and access to resources for pilot projects.
- Financial support can be discussed to cover cost of participation on a case-by-case basis

Additional questions

Q7: How does the cohort align with the region's health equity goals?

The cohort supports our region's efforts to improve health outcomes and reduce costs through collective commitment that everyone should have what they need to thrive.

Q8: Can I join if I don't have experience with pilot projects?

Yes! Whether you're new to pilot projects or have extensive experience, your unique perspective and commitment to health equity are what matter most.

Q9: What happens after the cohort ends?

We hope participants will continue to collaborate, scale successful projects, and apply lessons learned to their work. CHOICE will also use lessons learned from process and products to inform their ongoing approach and future investments related to Medicaid Waiver 2.0.

Cohort 2.0 Informational Webinar Questions

Q10: Is it possible to be both a member of the cohort and an eligible applicant for the CHOICE pilot projects?

Yes! We encourage Health Equity Cohort members to apply for pilot projects if interested.

Q11: Do you need to be a member of the Health Equity Cohort to apply for pilot project funding?

No. There will be a general expectation that pilot project awardees will share information about their projects with the cohort, but they do not need to be cohort members. This could include providing regular project updates, sharing relevant data, and participating in shared learning. This collaboration will enable the cohort to learn from the pilot projects and contribute to our region's collective advancement of health equity. The commitment to engaging with the cohort is informal and can align with the awardee's capacity.

Q12: What is the commitment timeline for the cohort/pilot?

The Health Equity Cohort will run for approximately one year, from April 2025 to April 2026. The pilot project period will begin with open applications in early April 2025, and there is no definitive project implementation end date yet. We will know more about the timeline as we receive pilot project applications and share learning in the cohort. Each project may have slightly different start/end dates.

Q13: Will cohort members be prioritized for choice pilot project funding?

The pilot project funding application will be open to the entire CHOICE service region. Membership in the cohort does not increase the likelihood of a pilot project award.

Q14: Is the funding for the pilot projects public (state or federal) or private?

Funding for pilot projects comes from CHOICE's discretionary funds. It is not related to state or passthrough dollars.

Q15: Is there an emphasis on mental health in the Regional Health Equity Improvement Plan?

Mental health is not explicitly addressed in the plan, but many of the themes and strategies outlined in the plan are related. Our recent workshop with Dr. Ben Miller on Community-Initiated Care, a promising care model outlined in our plan, is focused on mental health.

