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## APPENDIX D

### CHILDREN'S HEALTH INITIATIVE PROJECT CHARTER

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#### Background

By [insert year] the community stakeholders of [insert county name] County will implement a program initiative that maximizes the enrollment of children in Medi-Cal and Healthy Families and provides a new comprehensive insurance product called Healthy Kids for children ineligible for existing coverage programs. The [insert name] Initiative will reach and enroll all children who are in families with incomes at or below 300% of the federal poverty level (FPL). Results from the 2001 California Health Interview Survey indicate that approximately [insert number of] children from birth to age 19 did not have health insurance coverage all or part of the year. It is also estimated that 2 out of 3 uninsured children are eligible but not enrolled in Medi-Cal or Healthy Families, with the third child ineligible for existing public programs.

Recent findings indicate that [insert number] hospitals in the county reported in [insert year] that [insert percentage] % or more of their emergency room visits were for a condition that could have been addressed in a non-emergency setting. In addition, it was found that hospitals in the county are spending approximately \$[insert amount] million annually in uncompensated care. Without access to regular preventive and primary care, children in [insert county name] County lack a regular source of coordinated and continuous care (i.e. a medical home). This lack of access leads to poorer health outcomes, higher health system costs and overburdened emergency departments. Furthermore, inappropriate health care utilization will continue to drain county health and safety resources. [Insert any relevant research specific to the county.]

For these reasons, it is of utmost importance for the county to implement a seamless, family-friendly system for insuring its youngest and most vulnerable residents. A diverse group of stakeholders must implement effective and sustained Medi-Cal and Healthy Families outreach, enrollment and retention strategies and a new Healthy Kids program in order to: (1) maximize families' participation in available public programs, (2) increase the number of insured children in the county, and (3) optimize revenues to ensure children's access to health care services. The successful implementation of these objectives will improve the health and development of all children in [insert county name] County.

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1 UCLA Center for Health Policy Research, California Health Interview Survey (CHIS), 2001. These data are the best estimates currently available, however statewide surveys such as CHIS have traditionally undercounted the number of persons ineligible for public programs.

2 Brown ER, Ponce N, Rice T, and Lavarreda SA. The State of Health Insurance in California: Findings from the 2001 California Health Interview Survey. Los Angeles, CA: UCLA Center for Health Policy Research: June 2002.

3 The American Academy of Pediatrics released its policy statement and an operational definition of a medical home in July 2002. This definition of a medical home is that "medical care of infants, children and adolescents ideally should be accessible, continuous, comprehensive, family centered, coordinated, compassionate and culturally effective. Physicians should seek to improve the effectiveness and efficiency of health care for all children and strive to attain a medical home for every child in their community."

While this initiative is an important step towards universal health coverage for children, it does not ensure access to health care for every child due to resource and system constraints. In order to achieve true universal health care for children, a commitment to changing public policy and an allocation of the necessary resources must be made to provide comprehensive health care for all children in California.

### **Vision**

*“Every child in [insert county name] County will have health coverage by [insert year].”*

### **Project Goals**

1. Implement a single, seamless application and enrollment process for children’s health coverage programs.
2. Create an integrated outreach and enrollment effort among all stakeholders in [insert county name] County, including but not limited to, the [insert all relevant organizations, e.g., County Health and Human Services Agencies, the local First 5 Commission, schools, community health centers, health plans, hospitals, and community-based organizations].
3. Maximize appropriate health care utilization, including educating families on the value and appropriate utilization of preventive and primary care services.
4. Implement a comprehensive health insurance product for children from birth to age 19 in families with incomes at or below 300% FPL who are not eligible for existing public programs.
5. Maximize health coverage retention through the year and during the annual renewal process to ensure continuity of care.
6. Support sufficient provider capacity to provide accessible health services and a medical home to children in [insert county name] County.
7. Advocate for simplified outreach, enrollment and retention policies and procedures at the state and federal levels.
8. Advocate for changes in public policy to support universal health care for all children in California.

### **Challenges and Opportunities**

Successful implementation of the [insert name] Initiative will require effective collaboration and communication between county partners and agencies. These partners include, but are not limited to, the County Board of Supervisors, the First 5 [insert county name] Commission, the County Health and Human Services Agencies, health plans, hospitals, health systems, physicians and other health care providers, the [insert county name] Medical Society, county and community health centers, schools (including preschools), businesses, and many community-based organizations. It is anticipated that by [insert name] a Steering Committee will be formed to guide this initiative to and through implementation.

Adapted from the Sacramento County CHI

Developing an ongoing county collaboration is both a challenge and an opportunity for this initiative. Other challenges that simultaneously pose unique opportunities for the [insert name] initiative include [others to be added]:

Topic	Challenges	Opportunities
<b>Securing Financing for All Children Age Birth to 19</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Lack of funding availability due to economic downturn</li> <li><input type="checkbox"/> Determining true cost of care under current scenario</li> <li><input type="checkbox"/> Long-term donor commitment for financial sustainability</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Collaborate in creative &amp; new ways with multiple donors</li> <li><input type="checkbox"/> Modest cost-sharing with families</li> </ul>
<b>Securing a Health Plan (if no LI/COHS) and Sufficient Provider Network</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Low reimbursement rates (Medi-Cal) for providers</li> <li><input type="checkbox"/> No local initiative in (_____) County</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Ability to offer providers higher rate or other incentives</li> <li><input type="checkbox"/> Health plans will gain Healthy Families and Medi-Cal enrollees in the process</li> </ul>
<b>Systems Change in Publicly Funded Agencies</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> System is overly complex</li> <li><input type="checkbox"/> Competition for limited public resources</li> <li><input type="checkbox"/> “Innovation” and “reform” associated with expensive price tags</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Restructure and simplify the current system</li> <li><input type="checkbox"/> Long-term cost savings from efficiencies gained</li> <li><input type="checkbox"/> Incorporate community input and leadership into systems changes</li> </ul>
<b>Engaging Business, Schools and Community-based Organizations</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Businesses, schools, and CBOs are already overwhelmed or short staffed</li> <li><input type="checkbox"/> Engaging the Chamber of Commerce in the issue</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Educate about the cost savings of access to health care</li> <li><input type="checkbox"/> Strong dialogue occurring</li> <li><input type="checkbox"/> Solid partnerships already exist</li> <li><input type="checkbox"/> Increasing awareness of who the uninsured are and their plight</li> </ul>
<b>Sustaining Political and Institutional Support Turnover in politicians/staff</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Turnover in politicians/staff</li> <li><input type="checkbox"/> Public resources for the undocumented is a tough sell</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> New people open to fresh ideas</li> </ul>
<b>Implementation of One-e-App</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Many stakeholders involved</li> <li><input type="checkbox"/> High up-front costs</li> <li><input type="checkbox"/> Still “experimental”</li> <li><input type="checkbox"/> Requires job reorganizing</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Many partners to provide resources or in-kind assistance</li> </ul>
<b>Educating families on the value and utilization of health services</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Approximately [insert number of] languages spoken in [insert name of] County</li> <li><input type="checkbox"/> Populations can be hard to reach</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Increased number of families utilizing health care services</li> </ul>
<b>Maximize health coverage enrollment and retention</b>	<ul style="list-style-type: none"> <li><input type="checkbox"/> After enrollment, families drop off</li> <li><input type="checkbox"/> Tracking families and contacting them at renewal time is tough</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Once enrolled, families will have one year of coverage</li> <li><input type="checkbox"/> One Open Door enrollment scheme includes tracking for utilization and retention</li> </ul>

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