

APPENDIX E
CHILDREN’S HEALTH INITIATIVE IMPLEMENTATION PLAN

ID	WBS	TASK NAME	DURATION	START	FINISH	% Work Completed	Resource Names
1	1	Identify Work Groups and Chairs					
2	1.1	Financial					
3	1.2	Eligibility Determination					
4	1.3	Outreach					
5	1.4	Marketing and other Material Development					
6	1.5	Fundraising/Publicity					
7	1.6	Research Evaluation					
8	1.7	Material Modification					
9	2	Financial					
10	2.1	Actuarial analysis					
11	2.1.1	Contract for Actuarial analysis					
12	2.1.2	Completion of Preliminary analysis					
13	2.1.3	Review of Preliminary analysis					
14	2.1.4	Complete more detailed analysis					
15	2.2	Determine Payment Structure					
16	2.2.1	PMPM					
17	2.2.2	Family Premiums					
18	2.2.3	Co-pays					
19	2.3	Determine Provider Payment Levels					
20	2.4	Fund Holder Issues					
21	2.4.1	[insert organization name] as Fund Holder					
22	2.4.1.1	Determine number of contracted entities (e.g., health plan, health & human services agencies)					
23	2.4.1.2	Determine frequency of payments to contracted entities					
24	2.4.1.3	Refine Contract					
25	2.4.1.4	Determine need for Fund Oversight Committee and governance structure					
26	2.4.2	Contracts with primary Children Health Initiatives Entities					
27	2.4.2.1	Develop contract language and length of contracts					
28	2.4.2.2	Sign contracts with entities					
29	2.4.2.3	Determine number of individuals authorized to release fund					

Adapted from the San Mateo County CHI

ID	WBS	TASK NAME	DURATION	START	FINISH	% Work Completed	Resource Names
30	2.4.3	Determine if First 5 dollars will run through Fund Holder					
31	3	Eligibility Determination					
32	3.1	Investigate eligibility determination in other CHI counties					
33	3.2	Identify all the proposed approaches for determining eligibility					
34	3.3	Investigate IT needs for eligibility determination					
35	3.4	Determine where Healthy Kids applications will be sent (i.e., single point of entry)					
36	3.5	Determine how child premiums will be handled and passed on to health plan					
37	3.6	Determine how new member information will be passed on to health plan					
38	3.7	Hire/reassign staff for eligibility determination					
39	3.8	Determine if any Union issues need to be resolved					
40	3.9	Develop and implement any needed MIS upgrades (e.g., logic for eligibility determination)					
41	3.10	Develop Eligibility Determination Process					
42	3.10.1	Develop review process and QA safeguards					
43	3.10.2	Train staff					
44	3.10.3	Ready to go live					
45	4	Outreach					
46	4.1	Develop Outreach and Enrollment Plan and Cost for First Two Years of Activities					
47	4.1.1	Identify and Prioritize Outreach Strategies (e.g., Inreach-health/hospital/human services sites)					
48	4.1.2	Identify Target Populations and Geographic Regions					
49	4.1.3	Determine needs for additional agency staff (health, hospital, human services)					
50	4.1.4	Develop Budget and cost breakdown/distribution for internal staff					
51	4.1.5	Determine who will administer CBO contracts					
52	4.2	CBO Selection					
53	4.2.1	Determine criteria for CBO selection					
54	4.2.2	Develop RFP guidelines					
55	4.2.3	Release RFP					
56	4.2.4	Review and Select CBOs					
57	4.2.5	Develop contracts with CBOs, etc.					

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ID	WBS	TASK NAME	DURATION	START	FINISH	% Work Completed	Resource Names
58	4.2.6	Convene meetings of contracted CBOs and key health, human services, school staff to develop outreach plan					
59	4.2.7	Allocate/prioritize activities among organizations (agency-based, community-based, school)					
60	4.2.8	Determine how to involve non-contracted CBOs					
61	4.3	New Outreach, Enrollment and Retention Staff					
62	4.3.1	Develop job descriptions for new staff					
63	4.3.2	Request new positions					
64	4.3.3	Recruit new staff					
65	4.3.4	Interview and hire additional staff					
66	4.3.5	Develop training curriculum					
67	4.3.6	Train all assistors and CBO contracted staff on MC, HF, HK					
68	4.3.7	Develop process for integrating HK into HSA Medi-Cal BAs workload					
69	4.3.8	Train health/human services staff on HK					
70	4.4	Develop tracking/data/monitoring systems					
71	4.4.1	Determine types of information to be collected					
72	4.4.2	Determine needs for additional MIS tracking/health utilization systems					
73	4.5	Involve other health programs					
74	4.5.1	Work with CHDP to ensure state CHDP is linked to HK					
75	4.5.2	Develop plan with Labor to publicize and promote program					
76	4.5.3	Develop plan to get community involved in publicizing/promoting program					
77	4.5.4	Seek invitations to present program to community					
78	4.6	Kick-Off Event					
79	4.6.1	GO LIVE					
80	5	Marketing Materials and Material Development					
81	5.1	Collect materials from other county CHIs					
82	5.1.1	Review materials and determine best application and marketing strategies					
83	5.1.2	Seek permission to closely mirror materials					
84	5.2	Revise application forms					
85	5.3	Create logo					
86	5.4	Produce documents					

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*Children's Health Initiative
Implementation Plan*

ID	WBS	TASK NAME	DURATION	START	FINISH	% Work Completed	Resource Names
87	6	Fundraising/Public Relations					
88	6.1	Fundraising					
89	6.1.1	Secure enough private funding to cover some of the 6-18 population					
90	6.1.2	Continue to push for AB 495 funding					
91	6.1.3	Secure funding from hospital districts/hospitals					
92	6.1.4	Write grants to private foundations					
93	6.1.5	Determine need to hire development consultant					
94	6.1.6	Convene fundraising events					
95	6.2	Press/Publicity					
96	6.2.1	Develop plan to get community involved in publicizing promoting program					
97	6.2.1.1	Get Labor, Chamber of Commerce, School Districts involved					
98	6.2.1.2	Seek invitations to present in public settings					
99	6.2.2	Continue to get press to write articles					
100	7	Research Evaluation					
101	7.1	Convene an evaluation task force and determine membership					
102	7.2	Determine outcome measurements					
103	7.3	Decide on Evaluation approaches (i.e., surveys, admin data)					
104	7.4	Hire/select consultants to implement evaluation plan					
105	8	Material Modification					
106	8.1	Item E. Summary					
107	8.1.1	Description of Program					
108	8.1.1.1	Benefits					
109	8.1.1.2	Eligibility (Enrollee Population)					
110	8.1.2	Funders and funding arrangement, includes funding commitments					
111	8.1.3	Partners (brief description)					
112	8.1.4	Network					
113	8.1.5	Geographic area					
114	8.1.6	Changes in health plan staffing or systems					
115	8.2	Item H: Description of Geographic Area Served					
116	8.2.1	Maps for provider network (dental, vision if not subcontracting with DMHC approved plan)					

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ID	WBS	TASK NAME	DURATION	START	FINISH	% Work Completed	Resource Names
117	8.3	Item I: Description of Health Care Arrangements (The Provider Network)					
118	8.3.1	PCPs (Changes only if using Healthy Families Network)					
119	8.3.2	Specialists (Changes only if using Healthy Families Network)					
120	8.3.3	Hospitals (Changes only if using Healthy Families Network)					
121	8.3.4	Dental					
122	8.3.5	Vision					
123	8.3.6	Mental Health (AB 88 coverage)					
124	8.3.7	CCS carve out arrangement					
125	8.3.8	Pharmacies					
126	8.3.9	Changes in Referral and Authorization Systems					
127	8.4	Item J: Internal Quality of Care Review System					
128	8.4.1	Will use DMHC approved System					
129	8.5	Item K: Provider Contracts					
130	8.5.1	Copies of contracts or amendments to contracts (Standard Form only)					
131	8.5.2	Changes in Compensation					
132	8.6	Item L: Organization Chart (Only if not previously approved by DMHC)					
133	8.7	Item M: Narrative information of the organization chart (Only if not previously approved by DMHC)					
134	8.8	Item N: Contracts for Administrative Services (only if changes)					
135	8.9	Item P: Health Care Services Plan Contract					
136	8.9.1	Contract with Fund holder (if needed)					
137	8.9.2	Contract with First 5 (if needed)					
138	8.10	Item U: Combined Evidence of Coverage and Disclosure Forms					
139	8.11	Item V: Advertising					
140	8.12	Item CC: Enrollment Projections					
141	8.13	Item EE: Summary Enrollment Projections (on a monthly basis for initial period and quarterly)					
142	8.14	Item FF: Prepaid and Periodic Charges					
143	8.14.1	Determination of Prepaid Charge					
144	8.14.2	Schedule of Prepaid Charges (Premiums, co-payments)					
145	8.14.3	Collection of Prepaid Charges (Description of how prepaid charges will be collected)					

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ID	WBS	TASK NAME	DURATION	START	FINISH	% Work Completed	Resource Names
146	8.15	Item GG: Current Financial Viability, Including Tangible Net Equity					
147	8.15.1	Most recent audited financial statements					
148	8.15.2	Financial Statements for a period ended more than 60 days before the filing date					
149	8.15.3	Calculation of Tangible Net Equity					
150	8.16	Item HH: Projected Financial Viability					
151	8.16.1	Projected Financial Statements					
152	8.16.2	Projected financial statements during initial period of operation					
153	8.16.3	Information to substantiate the assumptions and conclusions upon which projections are based					
154	8.16.4	Information regarding projected reimbursements					
155	8.16.5	Administrative costs					
156	8.16.6	Statement describing health plan's system for processing claims (if any differences from prior)					
157	8.16.7	Representation of adequate insurance coverage					