



LOS ANGELES COUNTY DEPARTMENT OF PUBLIC HEALTH
NAVIGATORS PROJECT WORK PLAN

Program Planning and Startup Plan

Section 1: Identify specific Navigators Project's planning and start-up activities and the anticipated completion dates for the activities identified.

PROGRAM PLANNING AND START-UP ACTIVITIES	ANTICIPATED COMPLETION DATE	ACTUAL COMPLETION DATE
Finalize workplan, refine activities for normal operations and PHE operations following input from state and local stakeholders.	09/30/22	N/A
Obtain LA County Board of Supervisors approval to accept AB74 funds.	09/30/22	N/A
Amend and/or extend existing contracts with CHOI contractors for the delivery of health navigation services.	10/31/22	N/A



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Normal Operations

Section 2: Identify specific outreach, application assistance, enrollment, access & utilization to health care, troubleshooting, and retention strategies and activities that meet the core objectives of AB 74 you will conduct to implement this approach. Identify specific target population(s) and the responsible entity who will implement these activities. Please list an activity(ies) for each task. For reference, a short list of examples of activities under each task is on Tab 6.

TASK	STRATEGIES AND ACTIVITIES	TARGET POPULATIONS	RESPONSIBLE ENTITY
Outreach	Develop, or review and revise, outreach protocol including: outreach contact forms/event summary sheets, sign-in sheets, and educational materials. Outreach and educational materials shall be culturally and linguistically appropriate and include information regarding Medi-Cal, Healthy Kids and other no or low-cost health programs.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Outreach	Schedule outreach and maintain a list or calendar of sites, dates, and times.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Outreach	Conduct outreach at events, (e.g., presentations, fairs, etc.), and complete event summaries. Event summaries to include site, date, name of outreach worker(s), flyers, number of individuals contacted, sign-in sheets, if appropriate, and materials presented.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Outreach	Conduct outreach (e.g., telephone outreach, walk-ins, etc.) and maintain contact documentation including but not limited to: sites, dates, name of outreach worker(s), number of individuals contacted, family name/identifier.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Application Assistance	Develop, or review and revise, enrollment protocol. Review changes to guidance and update enrollment process accordingly.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Application Assistance	Conduct enrollment activities utilizing Public Health approved client intake form. Note, "Completed applications" is defined as assisting clients to fill out health insurance applications line-by-line, through in-person, telephone assistance or electronic submission. It may also be defined as providing in-depth assistance (troubleshooting) toward facilitating enrollments for clients whose applications were unsuccessfully completed by another agency or DPSS.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Application Assistance	Develop, or review and revise, application assistance protocol.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)



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Application Assistance	Screen and refer clients for referrals to appropriate services. Document referral information with appropriate codes on client intake form. "Referrals" are defined as referring clients in person or by telephone for services to other health programs (i.e. Healthy Way LA, CCS, Community Partners, Health Benefit Exchange, Public Health, early detection programs, legal services for health issues, substance abuse disorder services, mental health services, federal Medi-Cal, etc.). Does not include referrals for shelter, food, and other non-direct medical needs.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Enrollment	Develop, or review and revise, enrollment verification protocol. Review changes to guidance and update enrollment verification process accordingly.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Enrollment	Conduct enrollment verification and troubleshooting. Note, "Investigated enrollment status" is defined as 1) attempted contact with clients within three months of application completion date to find out whether or not client has received insurance card or 2) checking status with appropriate insurer through telephone or computer (e.g. MEDS/AEVS/IVR/IEVS). This objective documents agency effort to ascertain enrollment status. A minimum of three (3) attempted calls must be made and documents unless successful contact has been made.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Enrollment	Document dates of enrollment follow-up and enrollment status. Note, "Confirmed enrollment" is defined as: 1) client has stated that they received notification from insurer or 2) appropriate insurer or computer system has verified that client has been successfully enrolled.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Access & Utilization	Develop, or review and revise, utilization protocol. Review changes to guidance and update process for supporting client access and utilization of benefits accordingly.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Access & Utilization	Conduct utilization assistance and document results on utilization forms using the appropriate codes. "Offer utilization assistance" is defined as attempting to contact 100% of clients and making successful contact with 70% of clients either in-person or by telephone to determine whether benefits have been utilized.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Troubleshooting	Develop, or review and revise, utilization protocol. Review changes to guidance and update troubleshooting process accordingly.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)



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Troubleshooting	Conduct troubleshooting/problem solving for clients. Document results on appropriate forms and/or CHOI database. Note, "Troubleshooting" defined as in-depth assistance or problem solving designed to help clients overcome barriers to health insurance enrollment, utilization, or retention. Assistance may be provided to: 1) clients who originally applied with Contractor or 2) clients who submitted applications with another agency or DPSS but have requested assistance from Contractor. A minimum of three (3) attempted calls must be made and documents unless successful contact has been made.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Retention	Develop, or review and revise, redetermination protocol. Protocol to include process for remaining in contact with DPSS, maintaining the correct address/contact information, and preserving the redetermination date.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Retention	Conduct redetermination assistance and document results on redetermination forms using the appropriate codes. "Offer redetermination assistance" is defined as attempting to contact 100% of clients and making successful contact with 65% of clients either in-person or by telephone to determine whether redetermination assistance is desired. A minimum of three (3) attempted calls must be made and documents unless successful contact has been made. This applies to clients who submitted their original application elsewhere, but have requested redetermination assistance from Contractor and/or clients who submitted their original application with the Contractor and have already renewed that coverage at least one time since their original enrollment confirmation date.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)



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Public Health Emergency (PHE) Plan

Section 3: On this tab, partners should list additional activities that go above and beyond the core AB74 activities as for the following phases of PHE. 1) Identify activities relating to outreach focus during PHE to encourage beneficiaries to provide their local county social services agency with any updated contact information such as: name, address, phone number, and email so the county can contact beneficiaries with important information about keeping their Medi-Cal coverage. Identify specific target population(s) and the responsible entity who will implement these activities. 2) Identify activities relating to outreach and retention during the 60 days prior to PHE termination. Identify specific target population(s) and the responsible entity who will implement these activities. 3) Identify activities relating to the PHE unwind which focuses on retention. Identify specific target population(s) and the responsible entity who will implement these activities.

TASK	STRATEGIES AND ACTIVITIES	TARGET POPULATIONS	RESPONSIBLE ENTITY
During PHE			
Media Outreach	Subcontractors will run quarterly social media reminders about how and where to receive Medi-Cal assistance.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Outreach	Subcontractors will use DHCS "ambassador" materials focused on address updates, print fliers for availability in offices give out flyers physically and send .pdf files via email and text with all outreach activities.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Outreach	Subcontractors will be encouraged to provide a tag line on emails and banner on their websites reminding recipients of address updates.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Outreach	Subcontractors will run social media reminders on their agency social media no less than once a quarter, promoting messaging in "ambassador" materials.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Outreach	Develop consistent messaging/reminders at every client encounter to update contact information with DPSS.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Outreach	Develop consistent messaging/reminders at every client encounter to ask whether anyone in the home needs assistance with health coverage support, particularly anyone over age 50.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Outreach	Develop messaging campaign using email signature messaging with a hyperlink to one-pager providing education to peers/community partners about the possible impact of PHE termination (e.g. similar to efforts for Census Count education).	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)



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Outreach	Revise outreach protocol to include emphasis on virtual meetings and events (e.g. Facebook, Google Meet), develop outreach and educational materials for texting, email, social media use.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Outreach	Schedule outreach and maintain a list or calendar of events, dates, and times as available at locations that continue to be open/available including select schools, clinics, and COVID-19 vaccination sites.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Outreach	Organize on-line classes or seminars with youth and adults, aimed at promoting health care enrollment and utilization, along with appropriate COVID-19 safety protocols. When possible, utilize peer-to-peer engagement or Promotora programs with adults.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Outreach	All subcontractors enroll into the DHCS "ambassadors" campaign.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
60 Days Prior to PHE Termination			
Outreach	Conduct outreach event per DHS directive provided via email on 6/27/22 focused on renewals. Template or toolkit and incentives for clients may be provided by state. Per state staff, additional information to follow.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Outreach	Conduct specific outreach to all active caseloads informing that the date for the PHE termination and the beginning of the Public Health unwinding is now known and making sure that any new address is on file.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Outreach	Provide accurate messaging to active caseloads regarding watching for important mail and the importance of informing DPSS of correct addresses (i.e. not everyone is going to be cut off immediately - one's redetermination date still governs, but don't delay).	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Retention	Require that subcontractors obtain a BenefitsCal agency account and can submit/upload requested documents with a recorded upload date to assure accountability.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Retention	Assist clients/consumers with creating and linking a BenefitsCal account, which includes creating a personal email account for some clients as its required step to creating an account.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Retention	Assist clients with navigating the BenefitsCal portal and showing them how to update contact information within the system.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)



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Retention	Participate in stakeholder meetings/groups to advocate change to allow completion of ARs and contact information updates through BenefitsCal agency portal. Currently, the BenefitsCal agency portal does not support completing annual renewals, these can only be completed within the individual participant account.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Retention	Submit annual renewals whenever possible using fillable blank forms (MC216) and upload ARs along with income proof to BenefitsCal through the agency portal	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
12 Month PHE Unwinding Period			
Retention	Subcontractors will be encouraged to continue with the tag line/banner with an updated message about the post-PHE time period and redeterminations/renewals.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Retention	Subcontractors identify previously assisted clients (terminated status) backdated to the implementation of the PHE utilizing the CHOI database and offer troubleshooting or new application assistance.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Retention	Subcontractors develop/update messaging campaign using email signature messaging with a hyperlink to one-pager providing education to peers/community partners about how to easily get help for redetermination/renewals.	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Retention	Subcontractors identify staff to focus solely on renewals/redetermination as needed. If needed, shift staffing patterns to best support clients in need of redetermination (e.g. hours of availability, additional staff training).	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Retention	Subcontractors utilize/adopt any future DHCS-sponsored campaign materials geared towards increasing renewals (e.g. similar to "ambassadors" campaign).	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)
Retention	Subcontractors receive training on information about the PHE unwinding timelines and any loss of enhanced/extended eligibilities and benefits and how to transition to other insurance option (e.g. Covered CA).	1,2,3,4,5,6,7,8,9,10	DPH/MCAH Contracted Agencies (Tab 7)