***Redesigning Medicaid Payment Policies:***

***A New Pathway for Achieving High-Value Care for Medically Complex Children***

*Funded by the Robert Wood Johnson Foundation*

*May 15, 2012-May 14, 2015*

**Operational Plan Template**

**MM/DD/YYYY**

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| **OBJECTIVE/TASK**  | **WHO** | **DUE DATE** |
| ***I. Engage Key Stakeholders*** |  |  |
| **1. Future Advisory Board & Learning Collaborative meetings**  |  |  |
| **-Determine resource to take lead on future Learning Collaboratives** |  |  |
| **-Solicit input from practices on topics/dates/times/locations for future Learning Collaborative meetings** |  |  |
| -Invite speakers, arrange logistics for Learning Collaborative |  |  |
| -Send invites for future LC meetings |  |  |
| **-Reschedule August 6 Advisory Board meeting** |  |  |
| **2. Work Group meetings** |  |  |
| -Approve meeting minutes for distribution |  |  |
| - Distribute meeting minutes on behalf of PIs, including dates for future meetings |  |  |
| -Determine future roles & meeting dates of Work Group |  |  |
| -Schedule next Work Group meeting |  |  |
| - Prepare for Work Group meetings (i.e., invitations, agendas, materials) & handle related follow up (i.e., preparation & dissemination of meeting minutes on behalf of PIs) as needed |  |  |
| **4. Project team meetings (every Tues @ 2 pm)**- Prepare updates on progress for each meeting based on this task list; add new tasks for current time period as needed |  |  |
| **5. Practice Observations** |  |  |
| -Schedule practice observations with each practice |  |  |
| -Conduct practice observations & take notes |  |  |
| -Create summary/findings document for observations |  |  |
|  |  |  |
| ***II. Design Payment Model*** |  |  |
| **1. Expanded payment component**-Work with EpiCare to add new and existing codes and flag patients in system |  |  |
| -Share paper invoice/documentation for expanded payments with practices |  |  |
| -Determine process flow for invoicing expanded payments on provider and UPMC *for You* end, including invoice reconciliation |  |  |
| -Hold monthly calls with practices to answer questions about payments, care management resources or other project questions |  |  |
| **2. UM improvements**- Meeting with UM to learn about limits and what can be improved |  |  |
| **3. Family focus groups** - Review plans for recruitment and confirm budget with leadership team, including any special needs for participations (child care, transportation)  |  |  |
| -Create written materials for recruiting focus group participants |  |  |
| -Book location for focus groups |  |  |
| - Recruit families for focus groups |  |  |
| -Conduct focus groups |  |  |
| - Prepare focus group summary report |  |  |
| **4.Complete draft of how-to design manual (Step 1)**  |  |  |
| **5. Plan next steps for Step 2: behavioral health inclusion** |  |  |
| -Request behavioral health data from CCBH |  |  |
| -Identify additional resources to help guide behavioral health step |  |  |
| **6. Plan next steps for Step 2: consumer-directed accounts****-** Determine project scope and deliverables of CDA |  |  |
| -Vendor contracting  |  |  |
| -Card set-up |  |  |
| -Operational processes development |  |  |
| -Communication to families, providers, staff |  |  |
| -Go live rollout and monitoring |  |  |
| ***III. Implement Payment Model***  |  |  |
| **1. Practice & physician participation**-Determine ways to motivate, monitor and support practices in changing care delivery |  |  |
| **2. Monthly reporting to participating practices & physicians** |  |  |
| -Securely send May reports with revisions to participating practices & physicians |  |  |
| -Design meaningful shared savings financial reports by practice |  |  |
| **3. Nurse care coordinators** |  |  |
| -Pay practices for care coordinator salaries based on payments outlined in Step 1 timeline |  |  |
| **-Confirm job descriptions for care coordinators** |  |  |
| **-Create contract language (scope of work) for care coordinators** |  |  |
| **4. Additional services/supports to be implemented in Step 1**  |  |  |
| ***IV. Evaluate Payment Model*** |  |  |
| **1. Track key success factors as well as barriers and strategies for overcoming them**  |  |  |
| 2. Support RWJF independent evaluation |  |  |
| ***V. Other***  |  |  |
| **1. Quarterly calls with RWJF/AcademyHealth**-Schedule remaining quarterly calls |  |  |
| - Prepare agendas for approval by PIs |  |  |
| **2. RWJF Grantees Meeting**- Participate in next meeting |  |  |
| **2. Budget**-Prepare Budget to Actual for Year-End Report |  |  |
| - Distribute stipends to consumer advocates/family members/others & arrange for transport and child care as needed |  |  |
| **3. Prepare annual narrative and financial reports for RWJF and submit no later than 30 days after close of project period** |  |  |
| **4. Track key decisions & rationale**  |  |  |