As of June 22, 2026

Table 3: Proposed Budget Details

California Rural Healthcare Transformation (CalRHT) – Initiative 1: Transformative Care Model – Accelerator Partners

Source: CMS Guidance for Preparing a Budget Request and Narrative

Example Table 3: Proposed Budget Details for Telehealth Expansion

Budget Category	***Explanations of costs***
Fringe Benefits	*Fringe benefits are calculated at 30% of personnel costs, or $72,750, to cover payroll taxes, health insurance, retirement contributions, workers' compensation, and other standard employee benefits for California-based staff.*
Travel	*Local travel to participating provider sites for implementation support, workflow assessment, and project coordination meetings*
Equipment	*Telehealth carts, monitors, peripheral devices, secure connectivity equipment, and durable technology required to support virtual care delivery*
Supplies	*Software licenses, minor technology supplies, patient education materials, and office supplies needed to support telehealth implementation*
Contractual	*Contracted implementation consultant to support telehealth platform configuration, workflow design, and staff training*
Other	*Stakeholder meeting costs, community partner convenings, and other direct project costs that do not fit within the standard cost categories above*

Indirect Charges	*Prorated indirect costs for accounting, payroll, and human resources required to manage the grant*

Fillable cell	*Note: On this worksheet, you may enter or delete text in the blue cells and adjust column widths or r*

Table 3: Proposed Budget Details for Early Identification & Engagement Module

Budget Category	Explanations of costs
Fringe Benefits	Fringe benefits are estimated at 57% based on FY 2026-27 budgeted employee benefit costs for proposed personnel and include payroll taxes, health insurance, retirement, workers' compensation, and other employee benefits.
Travel	Total Travel Costs Module 1: $2513. Details as follows: First 5 Riverside staff mileage costs to Mecca $134. Mecca FRC staff mileage to each location 4x = $621, plus 2 night hotel / food for Blythe /Anza site visits $700. Calculated based on mileage to each target community. Community asset mapping: travel for CHWs and like roles to help with community asset mapping $529. Community Asset mapping will help determine key access points and trusted partners to promote first trimester care. Calculated assuming 2 people from each target community. Travel to education and training for pregnancy navigators $529 for travel. Prenatal education for pregnancy navigators will ensure trusted partners are able to help engage pregnant people in care throughout pregnancy and be competent partners to them. Calculated assuming 2 people from each target community.
Equipment	
Supplies	Public-facing early prenatal care campaign flyer printing / mailing to community partners $2500 (two cycles of dissemination.) Key access points and trusted partners will promote early access to prenatal care.

Contractual	•Design of campaign & materials promoting early access to prenatal care $10,000. •Translation costs of materials and social media $500. •Contractor to facilitate community asset mapping and outreach plan and to develop and implement pregnancy navigator training at $106,432
Other	Social media buy for early pregnancy care campaign $10,000 Community asset mapping convening costs: half day convening including stipends for Community Health Workers and like roles to help with community asset mapping and campaign promotion: $4575, includes venue and stipends calculated at $30/hour. Ongoing community workgroup convenings(virtual) 6 at total of $2700(for CHW and like stipends calculated at $30/hour at 15 participants). Education and training for pregnancy navigators: $5220, includes venue, stipends for participating CHWs and like roles, calculated at $30 per hour for 10 hours for 10 participants; $30 per hour for 7 hours for 2 participants. RivCoONE CONNECT system modifications to support early pregnancy identification, risk/referral triggers, and closed-loop prenatal and specialty care pathways: $250,000.
Indirect Charges	Not requesting a separate indirect cost allocation. Administrative costs are budgeted as direct personnel costs and associated fringe for staff supporting grant administration, fiscal management, claims/billing, and related administrative functions.

Table 3: Proposed Budget Details for Prenatal Clinical Care Pathways Module

Budget Category	Explanations of costs
Fringe Benefits	Fringe benefits are estimated at 57% based on FY 2026-27 budgeted employee benefit costs for proposed personnel and include payroll taxes, health insurance, retirement, workers' compensation, and other employee benefits.

Travel	
Equipment	
Supplies	
Contractual	Prenatal clinical technical assistance subcontractor at $323,190 to provide: •Staffing support and preparation for monthly clinical advisory committee •Support establishing clinical standard of care for clinical learning collaborative •Draft, adopt and administer clinical readiness assessment to determine clinics' current practices, gaps, readiness and goals. •Curriculum and training for pregnancy navigators •Training for clinics in clinical standard of care •Ongoing technical assistance for clinics in risk stratification and clinical workflows •Technical assistance for clinical sustainability - so clinics may maintain workflows, bill, etc. Avocado Health – providing pregnant people real-time information on milestones and sound answers to common questions assumes 1000 pregnant people at $4 / month at 9 months = $36000

Other	Stipends for clinic participation: •Clinic leadership = 8 hours / month, data reporting and training =8 hours / month, = Assumes total staffing effort at $150/ hour for 8 hours per month for 12 months at 3 clinics= $43,200 •1.0FTE per clinic for pregnancy navigator, based on clinic readiness assessment, assumes 3 clinics needs pregnancy navigator = $255,000 ($85,000/clinic) Clinical Advisory Committee – stipends for committee member participation = 15 hours per advisory member at $350 / hour, 4 members = $21,000
Indirect Charges	Not requesting a separate indirect cost allocation. Administrative costs are budgeted as direct personnel costs and associated fringe for staff supporting grant administration, fiscal management, claims/billing, and related administrative functions.

Table 3: Proposed Budget Details for Prenatal Telehealth Expansion Module

Budget Category	Explanations of costs
Fringe Benefits	Fringe benefits are estimated at 57% based on FY 2026-27 budgeted employee benefit costs for proposed personnel and include payroll taxes, health insurance, retirement, workers' compensation, and other employee benefits.
Travel	
Equipment	Telehealth capacity for 3 clinics at $636,775. Based on historical experience of HeRCARE. Home based monitors at $100 each for 400 pregnant people. Tech enabled communication of results and monitoring.

Supplies	
Contractual	Clinical subject matter expert to support 3 clinics with technical support to implement telehealth infrastructure and workflows for low-risk pregnancies at $69,931
Other	
Indirect Charges	Not requesting a separate indirect cost allocation. Administrative costs are budgeted as direct personnel costs and associated fringe for staff supporting grant administration, fiscal management, claims/billing, and related administrative functions.