



BlueCross BlueShield
Kansas



WALK WITH A DOC COMMITMENT FORM

Thank you for your interest in beginning a Walk with a Doc program in your community. In support of the Kansas Hospital Association's vision of *Optimal Health for Kansans*, we are pleased to sponsor the first year of WWAD chapter sponsorship through the support of Blue Cross and Blue Shield of Kansas' Blue Health Initiatives. The time period for this grant-funded initiative is January 2021 through December 2023. This commitment form outlines what is included in the KHA-BCBSKS sponsored WWAD starter kit available to KHA members, what becoming a KHA-Blue Health Initiatives Walk with a Doc site means, and how to sign up.

KHA-BCBSKS SPONSORED WALK WITH A DOC HOSPITALS / HEALTHCARE ORGANIZATIONS WILL RECEIVE:

- The first year of WWAD chapter sponsorship, valued at \$650. Existing chapters that paused during the COVID-19 pandemic may be eligible to receive one year of renewal (\$250 value).
- Support from WWAD in setting up, marketing and making your walk successful.
- Liability insurance coverage for your walk for one year. This covers everyone including medical professionals, volunteers and walkers.
- Webpage development and maintenance on WWAD's site, outlining everything you wish to share, including links to your hospital's website.
- A starter set of WWAD t-shirts for walk participants or volunteers (one of each size, or 10 shirts).
- A set of "prescription pads" prescribing walking, to share with your physicians.
- A sample pedometer and water bottle.
- A how-to guide, along with starter documents including waivers, flyers, newsletter sign-up sheet and sample media release.
- Newsletter mention welcoming your hospital to the WWAD family.
- Digital marketing resources, including social media templates, videos and images.

KHA-BCBSKS SPONSORED WALK WITH A DOC HOSPITALS / HEALTHCARE ORGANIZATIONS WILL BE ASKED TO:

- Complete this commitment form, with CEO signature, as noted below.
- Complete the applicable WWAD paperwork which will be forwarded by WWAD staff upon completion of this commitment form.
- Coordinate and host a monthly walk in your community, school or worksite (with the first walk hosted within six (6) weeks of signing up).
- Include KHA and BCBSKS sponsorship support in your promotional materials.
- Share pictures and mention KHA and BCBSKS in your social media coverage of WWAD events (@kansashospitals and @BCBSKS).
- WWAD chapter renewals (\$250 annually) after the first year of sponsorship are the responsibility of the KHA member hospital / health care organization.

FOR MORE INFORMATION:

To learn more about this sponsorship, contact Karen Braman (kbraman@kha-net.org)

To learn more about Walk with a Doc, contact Rachael Habash (rachael@walkwithadoc.org)

YES, OUR HOSPITAL IS READY TO SIGN UP!

Please complete this form and return to Susan Pattie at spattie@kha-net.org by August 15. Your information will be forwarded to a member of the Walk with a Doc staff, who will contact you with more information about how to get your walk up and running.

WALK WITH A DOC COMMITMENT FORM*

Yes, our hospital is interested in hosting a regular Walk with a Doc event in our community. I understand that KHA-BCBSKS will sponsor our hospital / healthcare organization's basic walk membership for one year. We commit to hosting our first walk within six (6) weeks of signing up and will include KHA-BCBSKS in the promotion of local WWAD events.

Hospital / Healthcare Organization Name: _____

Contact/Project Lead Name: _____

Contact/Project Lead Email: _____

Contact/Project Lead Phone: _____

CEO Name: _____

CEO Signature: _____

Date: _____

*This form applies to KHA members located in the BlueCross BlueShield of Kansas service area. A different form is available for KHA members located outside of the BlueCross BlueShield of Kansas service area (Wyandotte and Johnson counties).