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Grantmakers and Health Care Reform

A Conversation With E. Richard Brown, Ph.D.
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Q: From your perspective, how has the regulatory environment for grantmakers and their partners changed since health care reform was passed?

A: While there have been no direct regulatory changes for grantmakers, health care reform—and its resulting implementation—is having a considerable effect on what most of us in public health and health care policy are doing.

The state has been given broad responsibility on multiple levels to implement health care reform legislation, which includes significant funding, along with new directives for public health efforts. But the bigger issues addressed by health care reform are coverage, access, quality of care and costs—each of which is being implemented at state and federal levels.

Some states, led by governors who are unhappy with the laws, are sitting it out or challenging the federal law. But others, like California, are moving ahead with implementation. That was true under our Republican governor and will remain so under our new Democratic governor.

Q: So, in what ways might health care reform impact local grantmakers and their partners, and what can—or should— grantmakers be doing in response to health care reform?

A: Health care reform issues are becoming important areas of focus for grantmaking in health for both local and national funders. The implementation of all of these policy changes at the federal and state levels is tremendously complex. It involves coverage expansions and changes, brand new health insurance exchanges, access to care issues, the organization of health care delivery systems and attempts to control costs. There is a big emphasis on quality of care throughout the health care delivery system, including the

private sector, the safety net, and Medicaid and Medicare—with cost concerns permeating all of it.

Of course, grantees are looking for support to help them fulfill for their roles in the face of all these changes. Research groups like our Center are providing support through research and analysis on a broad range of health policy issues that states, counties, safety net providers, and the private sector are facing. And we look to grantmakers at the local and state levels, where policy truly interacts with the people, to provide support that enables us to help these entities and advocates see what is working, what is not working as well as it should, and how to maximize the benefits of reform.

Q: Can philanthropy demonstrate program effectiveness to policymakers?

A: Unfortunately, what the Senate and House of Representative will do in the new Congress remains to be seen. While the new Republican majority in the House has offered some very grim goals with respect to dismantling health care reform, it's hard to know what will be part of it they will attempt to repeal and what they will try to handicap through controlling the public purse. If the Congress starves health care reform implementation, the states will be even more dependent on the support of grantmakers to help fund some of the most essential provisions. They may have authority to expand Medicaid because it is an entitlement, but they may not have resources to implement that and funds for the implementation of health insurance exchanges may be blocked. These issues will change the environment for state stakeholders, and ultimately frame the context of how Grantmakers set their priorities.

However, as some federal reforms remain in place and join state-passed reforms, such as those enacted in California, organizations need solid measurement tools and data to clearly and definitively demonstrate where progress was made tied to a grantee's programs and efforts. High-quality data needs to be collected and analyzed to measure change and the results widely shared with policy makers, the media and advocates.

Q: What role do foundations play in helping preserve the Children's Health Insurance Program (CHIP)?

A: Foundations have been instrumental in making this program effective. In California, foundations have funded the state's CHIP efforts to make the program more accessible to families, and also have funded advocates to put a focus on those things that pose barriers to families, such as getting information about the program, enrolling eligible children, and actually obtaining needed health care. In addition, many foundations have stepped up to fund The Healthy Kids program, which supplemented Medi-Cal and Healthy Families to provide for children who do not qualify for federal matching funds. All of this has played a very important role in sustaining CHIP. If health care reform is implemented effectively, part of that role will change with the expansion of Medicaid.

Q: How should philanthropy measure policies and programs in one state against those of other states and national benchmarks? And what kinds of national efforts are currently underway to provide grantmakers with more and better tools to measure the effectiveness of their programs?

A: To measure policies against other states, we need data that's collected focused on outcomes on California, as well as other states, in order to benchmark our own measures against national ones. Population health surveys are very valuable because there's virtually no other way to measure who is left out of these programs, as well as to identify the difficulties people are having finding out about the programs in the first place. Surveys also provide the best opportunities for learning about such things as health behaviors, chronic illness and mental health needs. Foundations can play a critical role by encouraging the development of these surveys across the country, promoting efforts to make state health surveys comparable across states, and supporting innovative ways to actively disseminate and communicate data and analyses to a wide range of stakeholders. . We need grantmakers to support this effort.

Q: How does the State and Local Health Surveys Initiative increase understanding of how health care reform is working?

A: The Congress's health care reform legislation calls for data to be collected at the most local levels feasible. The California Health Interview Survey (CHIS) is a model for the nation. CHIS provides a detailed health profile of the state and local areas that helps policymakers, researchers, public health professionals and advocates understand and find solutions to a wide range of challenges. CHIS takes an in-depth approach in looking at health issues and populations included. CHIS is the only survey that routinely provides estimates at the county level for adults, adolescents and children. Only a few states have surveys with the broad scope and sampling of CHIS and its major investment in disseminating and communicating the data, which explains why CHIS is widely and intensively used in policy making and analysis—and why other states want to have that ability.

Many states and a number of federal agencies recognize the strength of these characteristics, which has led several NIH units to commission a study to understand what other state and local surveys are out there, and how state surveys and national partners might work together to ensure the data we do collect is comparable. More than two dozen state surveys are participating in these discussions.

Although health care reform will be implemented at all levels of our society and it's at the local level that policy truly interacts with the people. And, while much of the responsibility for implementing reforms falls to states and local jurisdictions, the sad truth is that most don't have the data they need to support their efforts. California is almost alone in having the kind of data that CHIS provides. A national system of state and local survey data that are directly comparable to federal surveys is needed to address disparities and assess how health care reform is working.

Q: How important is it for grantmakers to track the effectiveness of programs and grants? And how essential is data to help measure grantmakers' effectiveness?

A: An evaluation plan is a critical component of any grants program and should be an integral factor early in the program planning process. Beyond specifying program objectives clearly and in measurable terms, a tracking and evaluation plan helps ensure the ongoing ability to monitor program successes and challenges. High-quality data is also essential to tracking key program elements over the long term, especially during times of reform. Tracking program effectiveness provides the means to help identify needs and gaps in specific policies and programs, inform policy makers and advocates, while also enhancing grantmakers' ability to accurately measure change over time. In addition, this "bank" of information can be invaluable in facilitating greater collaboration on multiple levels among funders, enhance foundations' effectiveness and help target scarce resources. As a result, tracking and measuring program effectiveness is vital to achieving the objectives of health care reform to enable the many disadvantaged sectors of society begin to get quality, affordable health care.