

# Heartland Conference on Health Equity and Patient Centered Care

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REACH Healthcare Foundation



# ABOUT REACH

## VISION

All people in our communities achieve equitable health outcomes

## MISSION

Advance health equity through coverage and care for underserved people in our region

## GRANTMAKING

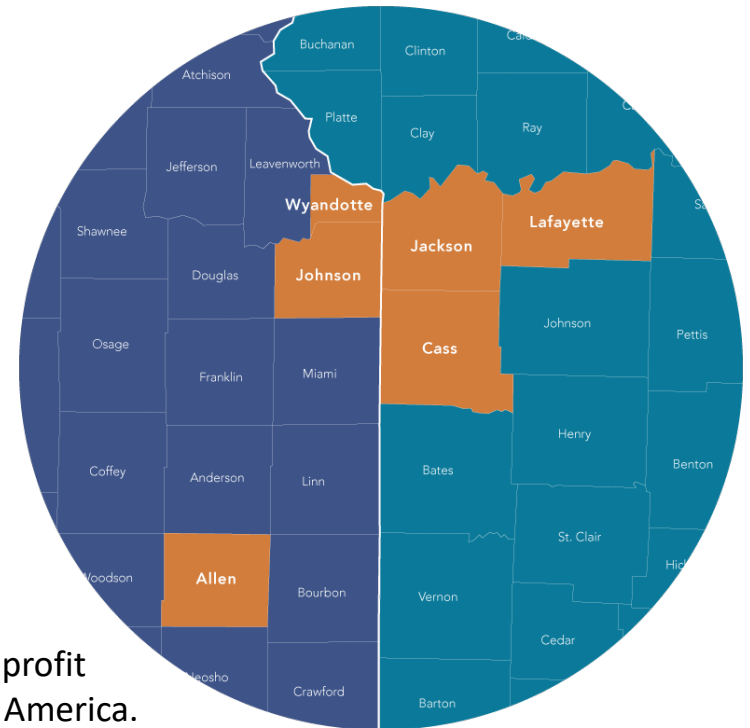
- **\$4.4 million** invested in grants in 2019
- **\$65.5 million** invested in programs and initiatives since 2005
- Assets: **\$136 million** as of December 31, 2019

## SERVICE AREA

- REACH's service area encompasses both Kansas and Missouri:
  - **Allen, Johnson and Wyandotte** counties in Kansas
  - **Cass, Jackson and Lafayette** counties in Missouri
  - The **City of Kansas City, Missouri**

## HISTORY

- The REACH Healthcare Foundation was established in 2003 with proceeds from the sale of Health Midwest, a regional nonprofit healthcare organization, purchased by Hospital Corporation of America.
- The first board of directors was appointed in 2003.
- The IRS granted REACH 501(c)(3) status in May 2004 and the following month the foundation received nearly \$100 million in initial assets.



# SOCIAL DETERMINANTS OF HEALTH



The **social determinants** of health are the conditions in which people are born, grow, live, work and age. **These circumstances are shaped by the distribution of money, power and resources at global, national and local levels.**

# APPROACHES TO FUNDING SOCIAL DETERMINANTS OF HEALTH

## Why is it important for health philanthropy to fund social determinants of health?

- Increase health equity
- Decrease health disparities
- Improved health outcomes

### Single-focused Foundations:

- Fund one social determinant of health – that's why they exist
  - Education – NEA Foundation

### Primary-focused Foundations:

- Grantmaking is focused on one or more social determinants of health
  - Kauffman Foundation – fund in many areas, but largely

### Health Funders:

- Cannot meet our long-term goal without addressing social determinants of health
  - Colorado Health Foundation



# OUR APPROACH

## REACH Guiding Principles and Core Values

- Catalyst: Serve as a leader and community catalyst for health care change
- Inclusive: Demonstrate inclusiveness, respect, and appreciation for the backgrounds, differences and points of view of others
- Collaborative: Promote open dialogue and collaboration to share knowledge and create strategic alliances.
- Foster Change: Foster an environment of positive change through innovation, creativity and continuous improvement.
- Act Ethically: Act ethically, with integrity, accountability and attention to excellence.
- Fund Change: Fund change, not just need, in order to create hope and a true system of care for our communities' poor and underserved populations.

# OUR APPROACH

- 2020 concludes a five-year strategic plan
- Next two years will serve as a research and education period leading into our next full strategic plan
- Adapted target to protect gains made in lowering the uninsured rate
- Continue to use **Community Investment Framework** to provide to guide our grant making and other community investments
- Priority populations:
  - **Undocumented immigrant and refugees**
  - **Youth transitioning out of foster care**
  - **Homeless persons**
- Three defined outcome areas linked to a set of strategies with defined targets, benchmarks and populations
- The outcome areas and identified strategies frame the **long-term impact** we seek
- Social determinants are not obvious, but strategically embedded within our investment strategies

Target		
Protect the gains made in lowering the uninsured rate by county and continue to decrease the uninsured rate <ul style="list-style-type: none"> <li>• Track disparities in uninsured rates in certain racial and ethnic groups, documented vs. undocumented, counties, certain zip codes, and in children</li> </ul>		
<b>Outcome</b> <b>Enroll All Eligible</b> Enroll all eligible people in the health insurance marketplace and existing public benefit programs	<b>Outcome</b> <b>Close the Coverage Gap</b> Close the coverage gap through expanded eligibility/availability of Medicaid and other publicly funded insurance options	<b>Outcome</b> <b>Strong Safety Net</b> Strengthen the capacity of the safety net and community to provide high quality, whole person care for consumers with no or inadequate health insurance
<b>Strategies</b> 1. Advocacy, outreach and media campaigns to increase enrollment in health insurance among targeted vulnerable populations, e.g. immigrants, refugees, youth transitioning out of foster care 2. Navigators and other assisters and community initiatives to help eligible consumers enroll in health insurance and public benefit programs 3. Analyze and scale the non-profit broker model	<b>Strategies</b> 1. Advocacy, lobbying and citizen and voter engagement to advance policy solutions that close the coverage gap 2. Research to inform policy and action to improve population health 3. Build leadership and partnership capacity to identify, test and create coverage and care opportunities for those historically and currently underserved	<b>Strategies</b> 1. Core support for health and advocacy organizations to strengthen the region's safety net 2. Invest in partnerships that promote system level transformation including trauma-informed initiatives, best practice approaches, and whole person care which seek to address health inequities 3. Connect health care consumers, providers and services to reduce the gap between consumer need and health care

The 5-Year Strategic Plan focused on systemic approaches with the following Vulnerable Populations:

- 1) Immigrants
- 2) Refugees
- 3) Youth transitioning out of foster care
- 4) Homeless youth and adults



# CONTACT INFORMATION

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*“Good health begins in the places where we live, learn, work and play.”*

*RWJF*