Special Audio Report Transcript

Headline: Foundations Provide Helping Hand as California

Takes Steps To Implement Health Reform Law

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TEXT:

California's private foundations are playing a key role in developing the new health care models required by the federal health reform law. This is a special report for California Healthline, a daily news service from the California HealthCare Foundation. I'm Deirdre Kennedy.

Even before the Affordable Care Act became law, the state's biggest health care foundations were preparing to help state agencies implement the provisions.

(Figueroa): "Pretty early on, both the California Endowment and a number of other California foundations stepped forward and said, we'd like to know what the needs of state government are going to be, plus there are some things that we as the Endowment have always stood for."

Richard Figueroa is the program manager for health reform at the California Endowment, which is supporting a broad range of health reform activities in the state. Figueroa says the foundation has long been focused on improving health care for children; so when the federal government offered matching funds to states that include "health homes" in their Medicaid programs, the Endowment put up half a million dollars on behalf of the state. Under the health home model, patients with at least two chronic conditions can designate a health care provider to coordinate their treatment.

(Figueroa): "The Endowment right away said, you obviously need some planning funds, let's take a look at how that might be implemented in California. We were able to work with the administration such that we would provide the dollars to do the kind of planning necessary to decide whether or not implementation of health homes in our state Medicaid program made sense."

The Endowment joined forces with the Blue Shield of California Foundation and the California HealthCare Foundation to decide how best to deploy their resources. Blue Shield hired experts to help the state build a timeline for its health care reform plan; to advise members of the newly formed California Health Benefit Exchange; and to create a plan for Medicaid enrollment.

The California HealthCare Foundation -- which publishes *California Healthline* -- hired a consultant to help the state apply for a \$40 million federal grant to fund the insurance exchange in 2012.

All three foundations have also provided state officials with technical expertise and analytic resources. David Maxwell-Jolly, undersecretary of the California Health and Human Services Agency, says foundations are able to use their funds in ways that state agencies can't.

(Maxwell-Jolly): "They've been able to pay for engagement of academic support for economic modeling, to make estimates for example under the Affordable Care Act, for the kinds of enrollments we're going to get in various aspects of the program when we get to 2014. That kind of funding, that kind of planning money, is just really hard to come by."

In 2014, states must begin enrolling new beneficiaries in Medicaid programs and run health benefit exchanges where individuals, families and small business can shop for private or public health coverage.

Marian Mulkey is director of CHCF's health reform and public programs initiative. She says as independent entities, foundations can get things done quicker than state agencies. More importantly, she says, they can help states stay focused on long-term goals.

(Mulkey): "We think it's incumbent upon us to pay attention to what the state is doing, to offer resources and assistance where we can, and to encourage and promote accountability for the outcomes that we think matter."

Maxwell-Jolly agrees:

(Maxwell-Jolly): "I think sometimes foundations do a good job of prodding us and encouraging us to expand our thinking and do a better job of providing services to our beneficiaries."

This public-private partnership to implement health reform is playing out in other states as well. The Robert Wood Johnson Foundation has launched a \$10 million State Health Reform Assistance Network. Program Director Heather Howard says it will work with ten states chosen to represent the widest range of health care scenarios.

(Howard): "They're diverse in terms of geography, their demographics, their coverage statistics, their rates of uninsured and their approaches to implementation. And even within that their health care systems are very different -- which is important in terms

of developing these successful models that we hope other states can learn from."

Instead of providing direct funding, the program will assemble a team of experts to help state officials implement the coverage provisions of the Affordable Care Act. RWJF plans to continue the project through 2014.

This has been a special report for *California Healthline*, a daily news service from the California HealthCare Foundation. If you have feedback or other issues you'd like to have addressed, please e-mail us at CHL@CHCF.org. I'm Deirdre Kennedy. Thanks for listening.