

The Group Health Children's Access Fund

Progress Report May 2008



Background

In fall 2006 Group Health Cooperative established the Children's Access Fund (CAF) with a \$1 million gift to the Group Health Community Foundation, to support statewide and community-based programs to expand access to health care for low-income children outside of King County. Potential programs were judged against a set of criteria, including community need and readiness, sustainability, innovation, outcome orientation, and alignment with the *Covering All Kids* state legislation enacted in March 2007. Six programs that successfully met the review criteria were selected for funding. In addition two "pilot" projects were awarded funds outside of the review process. The selected programs and their main strategic foci are:

| Strategy | Program |
|--|--|
| Outreach to enroll children in state health plans and link them to health care homes | <ul style="list-style-type: none"> ▪ Benton-Franklin Access to Care: Pilot project to implement a Children's Access Network for enrollment outreach in Benton and Franklin counties. ▪ Health for All: Outreach to un/underinsured individuals and groups, training of agency staff and mass media campaigns in Spokane and surrounding counties. ▪ Yakima Kids Connect: Coordination of access specialists, web-based case management, and reduction in inappropriate utilization of emergency departments. |
| Innovative technology | <ul style="list-style-type: none"> ▪ WithinReach: Enhancements to ParentHelp123, a web-based state benefit screening and application tool including outreach to encourage use of the tool. |
| Sharing of knowledge | <ul style="list-style-type: none"> ▪ Communities Connect: Conference to share best practices and develop performance measures for access improvement efforts. |
| Direct health services | <ul style="list-style-type: none"> ▪ Smile Partners: Coalition of registered dental hygienists in 6 counties on both sides of the mountains to expand school-based preventive and referral services. ▪ State Department of Health: Planning grants to communities to establish school-based health centers (pilot project). |
| Advocacy and policy development | <ul style="list-style-type: none"> ▪ Children's Alliance: Implementation of <i>Covering All Kids</i>, including coordination of state and local efforts, plus long-term policy planning. |

Evaluation planning

The Group Health Center for Community Health and Evaluation (CCHE) worked with each program to define goals and expected outcomes, determine qualitative and quantitative indicators of progress, and to develop evaluation plans. In implementing their strategies, the programs identified several common outcomes, including increased awareness of eligibility for health benefits, simplified enrollment, reduction in number of uninsured children and parents, increased coverage stability, more children and families with identified health care homes, standardized performance measures, strengthened partnerships, and continued legislative support for children's access to care.

Progress

Since the CAF grants were awarded, three agencies received notification that they would receive funding from the state Health Care Authority. In addition, the Children's Alliance received a multi-year grant from the David and Lucile Packard Foundation, and Within Reach secured grants to include early childhood dental services on the benefit finder and to partner with Yakima Kids Connect – an example of the collaboration that has been fostered by the Children's Access Fund. To date, six programs have submitted progress reports. Their successes and challenges are summarized on the following pages.

Outreach and enrollment

| Sucesses | Challenges |
|--|---|
| <ul style="list-style-type: none"> ▪ The Children's Alliance has successfully advocated for inclusion of community based organizations (CBOs) in State outreach contracting. The Children's Alliance is also working with the Office of the Governor on the statewide media campaign. ▪ The monthly calls to Health for All in Spokane from people needing health insurance assistance more than doubled between September 2007 and February 2008. ▪ Benton-Franklin Access to Care demonstrated that personal contact with school nurses was an effective way to reach families needing coverage. Flyers distributed in local schools resulted in an increase in calls to Within Reach. ▪ Yakima Kids Connect has reinstated its coordinated network of community access specialists, including an integrated web-based case management system. ▪ WithinReach has made personal contact with over 300 health care providers and shared information about its benefit finder/enrollment tool. ▪ The members of Smile Partners have referred 40 children in Kitsap County and 100 in Benton-Franklin counties for enrollment in Medicaid coverage. ▪ 14,000 children were enrolled in state health plans during the first four months of <i>Covering All Kids</i>. | <ul style="list-style-type: none"> ▪ The launch of the statewide public information campaign for <i>Covering All Kids</i> has been delayed. ▪ Information on the number of children losing medical coverage is still not readily available by county. ▪ Many parents are still confused about their children's and their own eligibility for state health coverage. Also, an element of mistrust in immigrant communities about government-sponsored programs persists. ▪ Strong networks between health departments, schools and CBOS are not in place in all counties of the state. ▪ Targeted outreach campaigns are effective in increasing applications for insurance, but such messages need to be frequently repeated. ▪ Lack of operating funds caused Benton-Franklin Access to Care to suspend operations in April 2008. |

Innovative technology

| Sucesses | Challenges |
|---|---|
| <ul style="list-style-type: none"> ▪ Within Reach continues to enhance and refine its benefit finder/application tool, including a Spanish-language version and the addition of the ABCD early childhood dental program to the benefit list. The toll-free call center and web-based resources are in the process of becoming better integrated. WR has won state awards, including one from NPower, for its innovative technology. ▪ Yakima Kids Connect is expanding its web-based case management system to capture more information to support continuity of coverage and medical home. | <ul style="list-style-type: none"> ▪ The implementation of the collaborative online program for the geographically dispersed members of Smile Partners has been hindered by problems with computer hardware and software. Entering patient information at time of service into the planned consolidated database requires Internet access, which is not available at all schools. |

Sharing of knowledge

| Sucesses | Challenges |
|---|---|
| <ul style="list-style-type: none"> ▪ Communities Connect has scheduled a statewide conference on building successful collaboratives to improve health care access. Group Health is listed as a sponsor of the conference that will take place in June 2008. Benton-Franklin Access to Care is participating in conference planning, and since the CAF grants were awarded, Within Reach has joined Communities Connect. ▪ There is widespread participation in committees and working groups that are responsible for implementing <i>Covering All Kids</i>. There is also growing recognition at the State level of the role of CBOs in enrolling hard-to-reach families. | <ul style="list-style-type: none"> ▪ There are some communication barriers, but they have been minimized with the commitment at both the State and local levels to work together on children’s health care access. |

Direct health services

| Sucesses | Challenges |
|---|---|
| <ul style="list-style-type: none"> ▪ The Department of Health announced that 11 communities have received grants for planning new school-based health centers; 5 of these are in the CAF service area. ▪ Smile Partners screened over 2,000 elementary school students, nearly 10% of whom were identified as needing follow-up care. | <ul style="list-style-type: none"> ▪ Safety net capacity in Washington may not be adequate to meet demand, particularly for dental care. In many areas, it is difficult to find dentists willing to accept patients on Medicaid. |

Advocacy and policy development

| Sucesses | Challenges |
|--|---|
| <ul style="list-style-type: none"> ▪ Experience with the Smile Partners project will be included in a report to the Legislature for its review of legislation enabling school-based services. ▪ The Children’s Alliance continues to serve as the voice in Olympia for issues related to the health and well being of Washington’s children. | <ul style="list-style-type: none"> ▪ The availability of public insurance coverage can fluctuate with changing political climates. The State Children’s Health Insurance Program has been vulnerable, and the current Administration has proposed rules that restrict coverage for middle-income families. |

Preliminary lessons learned

- The CAF Criteria and Guidelines are an effective method for selecting programs to fund. Review according to these criteria ensures a greater likelihood of success in meeting stated objectives.
- Outreach works. Targeted information campaigns result in increased enrollment in State-sponsored health programs.
- Nonprofit organizations which rely mainly on government and private grants often experience financial instability that can lead to suspension or termination of services.
- Community readiness is an important predictor of success. Organizations with established collaborative relationships in their communities are better able to implement strategies once funding is secured.
- "All health care is local." The integration of community-based efforts into State implementation strategies is key to ensuring that all children have access to needed health care.



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