blue of california foundation

request for applications

moving toward comprehensive coverage programs for the remaining uninsured

Proposal due date: 5:00 p.m., Friday, July 10, 2015

About the initiative:

While the Affordable Care Act (ACA) has significantly reduced the number of uninsured in California, current projections show that by 2019 there will still be 2.7 to 3.4 million Californians without healthcare coverage, up to half of whom will be undocumented immigrants.[1] In the absence of federal or state policy changes that would further extend insurance coverage or address affordability issues, California's counties have had to take on the challenge of meeting the healthcare needs of the remaining uninsured. Stakeholders and systems in a number of counties have made efforts to develop solutions for those who cannot afford the cost of coverage or are ineligible due to immigration status. However, significant variations in county approaches - including disparate standards of eligibility and scope of services - have created inequities in access to, and availability of, care for uninsured patients in counties across the state.

In this Request for Applications (RFA), Blue Shield of California Foundation aims to support communities in evolving their county programs to more closely mirror comprehensive coverage like Medi-Cal and the former Low Income Health Program. This involves re-

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[1] UCLA Center for Health Policy Research and UC Berkeley Center for Labor Research and Education, January 2015 CalSIM Report, "Which Californians will Lack Health Insurance Under the Affordable Care Act?", Laurel Lucia, Miranda Dietz, Ken Jacobs, Xiao Chen, and Gerald F. Kominski

designing or developing new programs that emphasize prevention, primary care, and health management for California's remaining uninsured, inclusive of undocumented immigrants.

While this initiative is designed to be responsive to the unique needs of each county or region, priority will be given to proposals that demonstrate clear goals and evaluation approaches for measuring progress toward one or more of the following outcomes over a 12 month period:

- Strong collaborations are built or strengthened among a range of stakeholders in the community to provide leadership on care and coverage options for the remaining uninsured.
- A shared understanding of the population - and its needs and care preferences - is developed, and the current system's capacity to deliver on those needs is established.
- Recommendations and plans to move towards more comprehensive systems of care for the remaining uninsured are developed and disseminated; key roles, responsibilities, and needs from all stakeholders are identified.
- Infrastructure and resources to support the implementation of comprehensive coverage programs for the remaining insured are in place (enrollment systems, medical home assignments, provider networks, scope expansions, etc).
- A measurement framework is used to track progress on greater patient access, utilization, experience, and outcomes to inform quality improvement.

Strong proposals will:

- Demonstrate significant need and opportunity for developing systems of care for the remaining uninsured and reference relevant data
- Demonstrate some history of collaboration among stakeholders working together on the uninsured or other safety net access challenges
- Include the voices and experiences of the remaining uninsured in their collaboration and planning efforts – for example, through focus groups or surveys.
- Demonstrate a plan or vision for moving toward comprehensive care that reaches a substantial number of the uninsured population.
- Candidly assess the political and financial risks and identify local leaders to help champion this effort and help drive the work forward.

Activities Eligible for Funding

For counties or regions interested in planning:

- Coordination of key stakeholders
- Assessment of needs and resources of the safety net
- Financial analysis

For counties interested in implementation or improvement of programs:

- Coordination of key stakeholders
- Establishment of an enrollment system
- Development of provider networks
- Coordination and/or implementation of medical home assignment
- Planning for enhancement of program scope or breadth
- Development of patient access, utilization, experience and outcome measures to inform quality improvement and program design
- Evaluation and/or return-on-investment studies

Useful Resources

1. [Which Californians Will Lack Insurance Coverage under the Affordable Care Act?](#)

2. [Re-orienting the Safety Net for the Remaining Uninsured: Findings from a Follow-Up Survey of County Indigent Programs after the Affordable Care Act](#)

3. [Ensuring a Strong Safety Net for the Remaining Uninsured](#)

Eligibility

We prefer a single applicant, representing a larger group of local safety net organizations. The focus of the collaborative must be on advancing community-wide solutions to serve the uninsured, not just serving this population in a single provider entity or system. We also prefer to receive only one proposal per county. Proposals from multi-county or regional applicants are also acceptable; we especially encourage small rural counties that are part of the County Medical Services Program to develop regional proposals.

Safety net organizations eligible to serve as lead applicants include:

- County health departments;
- County hospital systems;
- Regional community health center consortia;
- Community health centers that provide comprehensive primary care;
- Community-based organizations with deep involvement in the safety net healthcare system;
- Local initiative health plans or county organized health systems;
- Healthcare districts;
- Private nonprofit safety net hospitals or systems.

All applicants must meet Blue Shield of California Foundation's standard organizational requirements:

- Have a mission consistent with, or related to, the mission of Blue Shield of California Foundation
- Be a nonprofit and tax-exempt organization under 501(c)(3) of the Internal Revenue Service Code (IRC) and defined as a public charity under 509(a) 1, 2, or 3 (types I, II, or a functionally integrated type III) or a governmental, tribal, or public entity
- Have a reputation of credibility and integrity
- Primarily serve Californians
- For past and current Foundation grantees, meet current grant agreement requirements, and be up-to-date on any and all reports from previous grants

Use of Funds

Use of funds should align with the priorities outlined above and the steps outlined in the paper. Grant funds cannot be used to fund direct services.

For more information about what the Foundation does not fund, please visit:
http://www.blueshieldcafoundation.org/grants/what-we-fund/eligibility-guidelines

Requirements

Participation in foundation-sponsored learning activities will be developed in partnership with awardees.

Grant Size and Term

Grant Size: $75,000 - $150,000

Grant Term: 12 months, starting October 1, 2015.

Applicants should align their proposed activities and grant amount with the size, diversity and complexity of the community or communities served.

Proposal Evaluation

Review of, and due diligence on, the proposals will be conducted from July through August 2015. Applicants will be notified about their proposal's status by the end of September 2015.

How to Apply

Apply through our online grant system using the following custom link: http://www.cybergrants.com/BSCF/Remaining_Uninsured

Enter registered grantseeker email and password to login, or register as a new grantseeker following the instructions at the top of the page.

Note: Applications must be submitted using the link above. DO NOT submit through the Foundation's website. Only one grantseeker can be connected to each application.

Contact Information

Content Questions:	Technical Questions:
Rachel Wick	Jessica Gau
Program Officer	Grants & Contracts Administrator
(415) 229-6147	(415) 229-5468
rachel.wick@blueshieldcafoundation.org	jessica.gau@blueshieldcafoundation.org