

Equitable Access to Care Funding Opportunity

Increasing Insurance Enrollment for Equitable Access to Care

Several studies by the National Institute of Medicine conclude that a lack of insurance is hazardous to individual and community health. Uninsured adults and children obtain fewer preventive services, have more avoidable hospitalizations, have worse health outcomes, and, in some cases, are more likely to die from serious acute conditions than their insured peers. Evidence suggests that in communities with high uninsured rates, even people with insurance have a difficult time accessing care. The landmark Oregon Health Insurance Experiment found that insurance coverage improved symptoms of depression and provided financial protection to vulnerable patients.

The Patient Protection and Affordable Care Act, signed into law in 2010, has led to historic gains in health insurance coverage. A robust enrollment effort in North Carolina helped reduce the uninsured rate from about 21 percent in 2010 to a little more than 10 percent in 2017. Still, there is work to be done to expand access to health services for the more than 1 million North Carolinians who remain uninsured. We know there are urban areas where large numbers of eligible residents are not enrolled in coverage. There also are rural areas where the insurance enrollment penetration rates are especially low. And some populations, especially immigrants, face unique barriers to signing up for insurance.

We also know that a significant portion of uninsured North Carolinians do not qualify for help purchasing private insurance because these individuals and families fall into the Medicaid coverage gap. Currently, some parents living below

the poverty line and most low-income childless adults do not qualify for Medicaid. They also are not eligible for subsidized insurance plans. Under the Affordable Care Act, states can choose to extend Medicaid to this group that falls into coverage cracks. If the state opts to expand the availability of insurance, the federal government will pay 90 percent of the costs. A study commissioned by the Cone Health Foundation and the Kate B. Reynolds Charitable Trust found that closing this coverage gap could create or maintain 43,000 jobs in the state and stimulate business growth, especially in the health care sector.

As part of our long-standing commitment to increasing health care access, the Trust supports strategies that boost insurance enrollment and that educate the public about the opportunity to expand Medicaid coverage.

Goal

Maintain or increase overall enrollment of low-income individuals in the Affordable Care Act and Medicaid.

Strategy

Support data collection and dissemination to better understand Affordable Care Act enrollment and its impact on financially disadvantaged residents.

Timeframe for Applications

Call-by date: September 14, 2019

Application deadline: October 10, 2019

Geographic Focus

Statewide

Opportunity Details

The Trust is interested in efforts to analyze the value and effectiveness of in-person, nonprofit enrollment assistance in Affordable Care Act insurance plans. Since the launch of subsidized Affordable Care Act insurance policies in 2014, the federal government, foundations, private insurers, and other stakeholders have supported enrollment assisters who provide guidance to the most

vulnerable consumers. More recently, the federal government has drastically ramped down funding for the navigator program. This has led to a reduction in nonprofit assistance across the country and the creation of new enrollment models. A better understanding of the effectiveness and benefits of in-person assistance could prove helpful for sustainability and improving enrollment efforts.

To meet this goal the Trust will support an analysis of nonprofit, in-person assistance to gain more information on its reach and efficacy. This may include data collection, interviews with consumers and stakeholders, survey research or other quantitative and qualitative approaches. Applicants should be able to explain and disseminate information in ways that are digestible to a general audience.

Contact

To schedule a conversation about this opportunity, please contact Program Coordinator Alison Duncan for an initial consultation at alison@kbr.org or 336-397-5521.