Kate B. Reynolds Charitable Trust Investing in Impact

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Equitable Health Outcomes Funding Opportunity

Engaging in Consumer Education and Feedback to Decrease Health Disparities

Because the health care system is undergoing a sweeping shift driven by rising costs, poor outcomes, and federal reform, it is moving away from traditional reimbursement methods built on individual payments for each medical service to a concept called value-based care. Value-based care is meant to encourage population health improvement and keep people out of the hospital.

The movement toward value-based care takes many forms in North Carolina. Networks called Accountable Care Organizations work to integrate groups of doctors, hospitals, and other health care providers to deliver high quality, coordinated care to a defined patient population such as Medicare recipients. Attempts to transform the health system also are reaching into neighborhoods to coordinate clinical care with social services and community-based organizations. This model is referred to as Accountable Care Communities. Accountable Care Communities aim to address some of the underlying drivers of poor health outcomes such as food insecurity, substandard housing, inadequate transportation, and interpersonal violence.

The Trust has an overarching goal of achieving equitable health outcomes. During the implementation of value-based care over the next several years, we want to ensure that populations traditionally suffering the worst health outcomes, especially people with low-incomes, immigrants, and people of color are directly engaged in reform efforts and have an equitable opportunity to enjoy improved health and well-being.

The largest experiment implementing value-based care in North Carolina that most impacts low-income communities is the remaking of the state's Medicaid program. Medicaid is a joint state and federal program that pays for the care of approximately 2 million North Carolinians, or about 20 percent of the state's population. Because our state has not expanded Medicaid, most Medicaid recipients in North Carolina are children, pregnant women, seniors, and people with disabilities. Value-based care and Medicaid reform hold the promise to provide better care at lower costs. But a change of this size and scale also can reproduce or exacerbate the deficiencies and disparities of the current structure.

Goal

Utilize Medicaid reform and a value-based care environment to facilitate health improvement for financially disadvantaged North Carolinians.

Strategy

Support system change efforts that engage consumers with low incomes and build feedback loops to state agencies, health care providers, and payers to improve Medicaid and value-based systems of care.

Timeframe

Call-by date: January 26, 2021

Application deadline: February 16, 2021

Geographic Focus

Statewide

Opportunity Details

The Trust aims to ensure that a strong infrastructure exists to educate consumers, understand the experiences of Medicaid enrollees, and share information among stakeholders as the state shifts to managed care and pilots new approaches to addressing social drivers of poor health.

Organizations engaging directly with consumers can inform underserved populations about their rights and options, as well as identify barriers faced by patients as new payment models are implemented. To inform systemic improvements it is important that consumer experiences be shared regularly with stakeholders such as health care providers, insurers, state agencies, and nonprofits. These connections should form a robust feedback network where consumers are informed of changes in Medicaid and stakeholders hear about the challenges faced by patients accessing care. This feedback loop can spur fixes that facilitate health improvement for residents with low incomes.

The Trust may support several approaches to meeting this goal. Applicants could include, but is not limited to, consumer advocacy or legal service organizations, groups with experience convening health care stakeholders, or other nonprofits with expertise in Medicaid and patient engagement.

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.