

## Episcopal Health Foundation

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The Episcopal Health Foundation (EHF) was established in 2013 through the transfer of a regional hospital system. A public charity, EHF operates as a supporting organization of the Episcopal Diocese of Texas and works to improve the health and well-being of the 10 million people—including a large Hispanic population, families living in poverty, and rural residents—in the 57 counties and 49,000-square-mile area of the diocese, which includes major metropolitan areas of Houston and Austin, smaller cities such as Waco, Tyler, and Beaumont, and dozens of rural communities across Central and East Texas. The foundation carries out this charge by investing in communities through grantmaking, convening, community and congregational engagement, and research to advance community health.

**Program Information:** EHF's theory of change is that healthy communities are created when diverse people join together to create community-driven, people-centered, health-oriented systems. EHF seeks opportunities to work with organizations that actively engage their communities in the development of their work. To make long-lasting improvements to community health, the foundation works to address the root causes of health problems. EHF believes the best way to do that is by investing in programs and organizations working to transform systems affecting health. EHF seeks to build connections with communities, especially among service providers, planners, and other groups.

➤ **Financial Information:**

Total Assets: \$1.2 billion (FY 2015)  
 Amount Dedicated to Health-Related Grants: \$16.5 million (FY 2015)

➤ **Special Initiatives and/or Representative Health and Human Services Grants:**

- **People's Community Clinic-Austin (PCC)** – EHF's grant supports the Austin Medical-Legal Partnership, which works to address the root causes of health problems for low-income and uninsured individuals and families in Central Texas. Attorneys help patients resolve legal issues with housing and employment that are causing poor health (\$257,500).
- **Primary Care Innovation Center (PCIC)** – PCIC is using EHF funding for its groundbreaking program in Houston that is dramatically improving the health of frequent emergency room (ER) patients, while reducing the substantial costs to the health system. By identifying them and coordinating their care, PCIC's efforts have shown large reductions in 911 calls, lower costs to the county public health system, and much better health for these vulnerable patients (\$150,000).

- **Rice Medical Center School Telemedicine Program** – EHF helps fund a school-based telemedicine program for all students in two rural school districts. Doctors at the medical center provide primary care services and urgent care to students at seven campuses—many who are uninsured and come from low-income families. This pilot program is being evaluated to determine whether access to telehealth services on campus improves attendance and reduces absenteeism (\$120,500).
- **Austin Harm Reduction** – EHF's grant supports a 20-year organization that helps reduce the spread of HIV and other diseases by intravenous drug addicts. Funding helps the organization move to the next level by building its capacity, staff, and ability to provide needed health services. EHF's grant will increase the size of the organization's operating budget by more than 100% and is also likely to leverage new funds statewide (\$251,400).
- **Community-centered Health Homes** – EHF is working with the Prevention Institute to develop community-centered health homes in Texas. These centers do more than provide medical services—they help patients and communities achieve health by investing in prevention, social determinants, and other nonmedical interventions (\$120,000).

**Role of Philanthropy in Meeting Pressing Needs:**

*"Philanthropy is at its best when it works with communities to address complex problems that require structural changes in multiple systems.*

*For us, this means working in different ways, not just making more grants to more clinics to provide medical services to more people. Rather than only bolstering the safety net with more and more clinics, our approach is to build an inclusive health system that addresses the barriers that create health disparities."*

**Elena Marks**  
 President & CEO

