



# Philanthropy and Health Care Reform

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# Agenda

- MMF
- Assumptions
- Federalism at Play
- Frame Work for Policy Making
- Roles for Philanthropy (Examples)
- Discussion

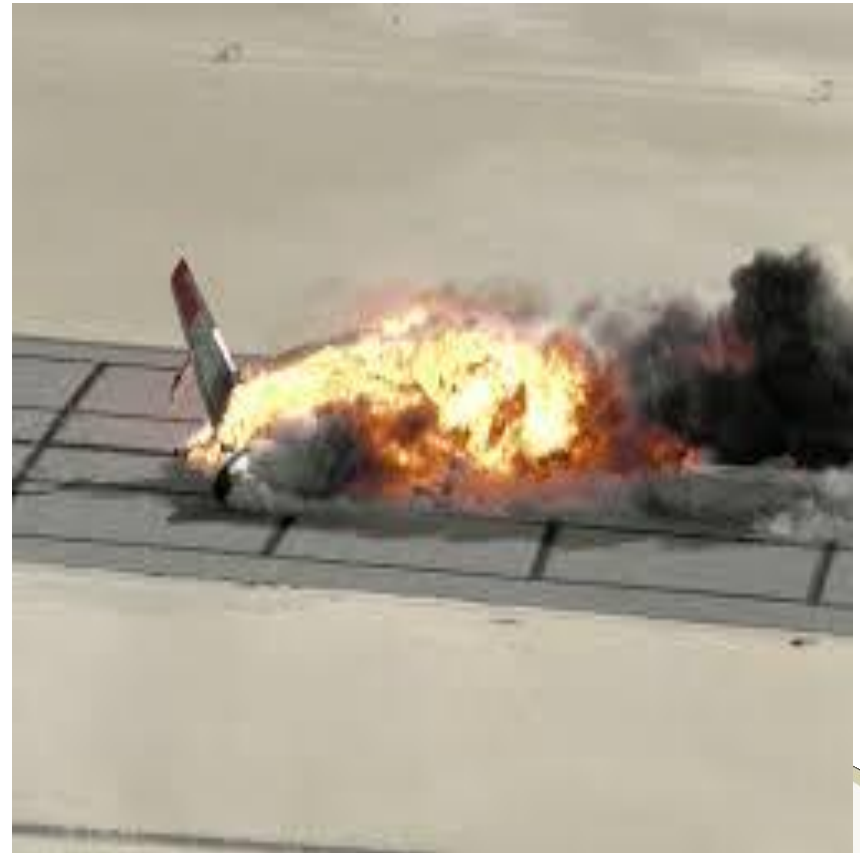


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- 105 year old operating foundation
- National scope
- “Improving Population Health by connecting leaders and decision makers with the best evidence and experience”
- Three priorities
  - Be a source for evidence and experience in response to state requests
  - Build state health policy capacity
  - Increase impact of Milbank Quarterly



# Assumption one: When philanthropy says we want impact, what do we mean?



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# Assumption two: Health care - the goal is a full lifespan for all



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Assumption three: Meeting the goal requires public policy, and public policy is often not pretty



# A Simple Public Policy Making Framework

1. Problem Awareness
  - (Research, public consensus)
2. Evidence and Experience for a Viable Policy/Intervention
  - Research, pilot projects.
3. Political and Economic Consensus for Viable Policy
  - Law or regulation or culture (way we work)



# Philanthropies and Government: Lead or Follow?



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# Health Care Policy Making: What are some of the Issues?

Insurance Financing	- Medicaid, Federal Subsidies, Budget
Insurance Eligibility	- Rules and Enrollment
Insurance Laws	- Commercial Market Reforms
Payment Reform	- Single and Multi payer
Workforce	- New Roles, Education
Quality Improvement	- Measurement, alignment, achievement
Public Health and Prevention	- Diet, Exercise, Behavior
Social Determinants	- Employment, Education, Justice



# Health Care Policy Making: Where is the real action?

	Federal	State	Local
Insurance Financing	X	X	
Insurance Eligibility	X	X	X
Insurance Laws	X	X	
Payment Reform		X	
Workforce		X	X
Quality Improvement			X
Public Health and Prevention			X
Social Determinants		X	X

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# Implications for Philanthropy

1. What is your community of focus?
2. Where is your expertise and focus in the policy making process?
3. Pick your issues based on these answers
  - Issues are usually at different places along the policy making process,



# Picking Your Issues

## National Philanthropies

- Expected to focus on feds.
- If you work in states – focus vs being responsive to the states.

## State-focused Philanthropies

- An embarrassment of riches
- Two possible roles: let state government lead; take the lead

## Local Philanthropies

- Pick your issues carefully
- Setting the local agenda.



# Opp'ty for Local Philanthropy - the Convener: Improving Flu Vaccination Rates in Community

## 1. Raise Problem Awareness

- Know the data. Neutral facilitator with providers. Public advocacy

## 2. Identifying viable interventions

- What works? Creating culture of cooperation.

## 3. Implementing Policy

- Local law even needed? Sustaining collaboration and focus.





# Opportunity for State and National Philanthropy: Stimulating Payment Reform

## 1. Raise Problem Awareness

- Are you an evidence producer or a megaphone and communicator?

## 2. Identifying viable interventions

- What are public and private payers doing already?
- Neutral conveners for multipayer coordination.
- Can a national foundation do local issues?

## 3. Implementing Policy

- Role of Foundation in administrative law or statute?



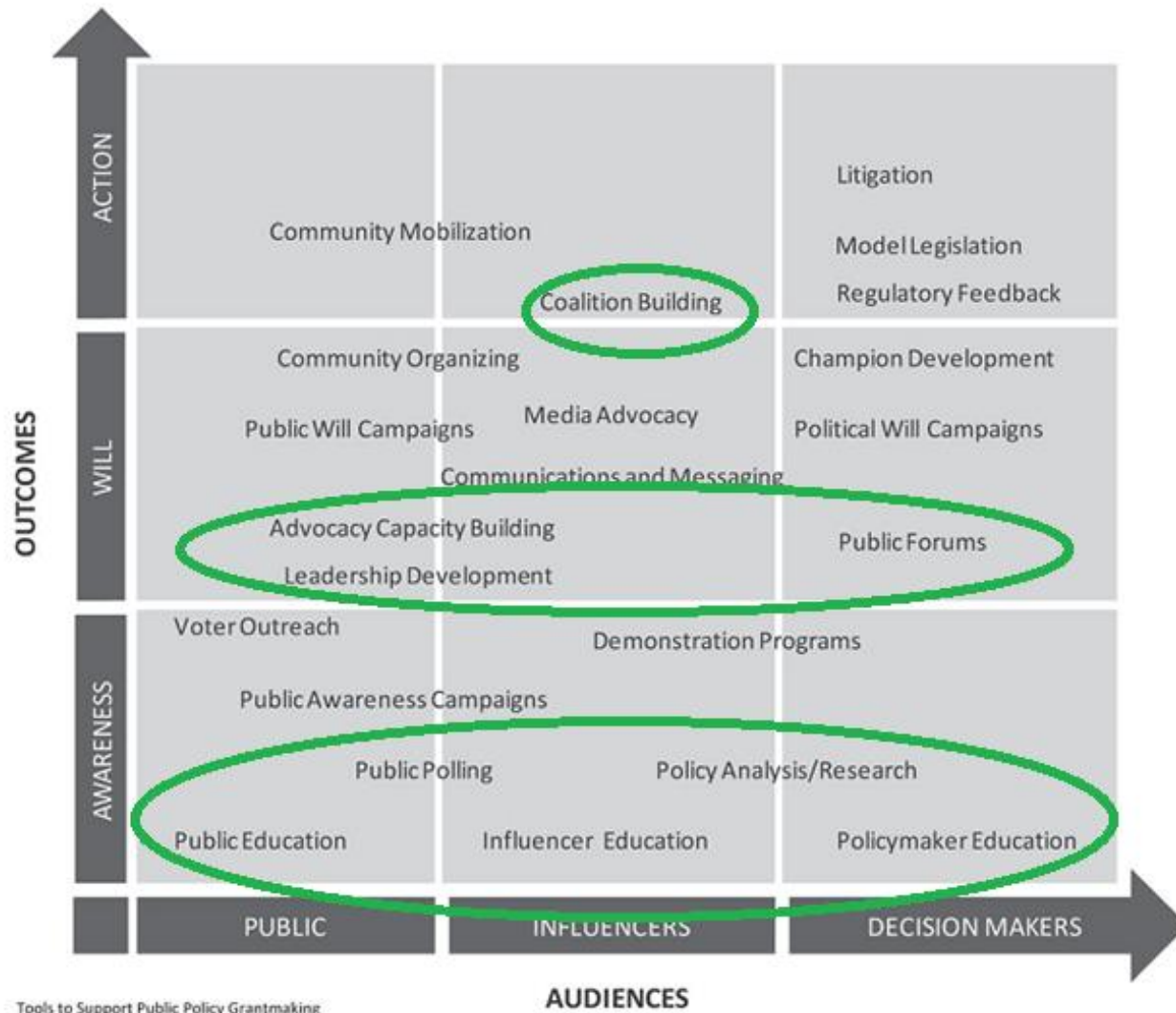
# Closing



- Are the assumptions here correct?
- What is your tolerance for focus?



# Common Direct Strategies



Tools to Support Public Policy Grantmaking

AUDIENCES

