2023 Grantmakers In Health Policy Priorities

Grantmakers In Health’s (GIH) five-year strategic plan elevates leadership and influence as one of four strategic pillars for our work. GIH seeks to take a more active role in defining the key issues that will advance better health for all and support health philanthropy with the thought leadership and programming to make a lasting impact by influencing advocacy, policy, and funding in targeted areas.

This policy agenda identifies our public policy priorities for the coming year. Informed by health funders, these priorities will guide our programming, influence decisions related to issuing public statements on timely policy issues, and focus our emerging advocacy efforts. We hope these priorities will also inspire the field of health philanthropy and encourage greater collaboration and commitment to common policy goals among funders. We look forward to working with funders and others to advance this agenda.

Policy Goals

Our public policy priorities seek progress on four overarching goals:

- **Advance health equity and social justice.** GIH supports policies that ensure everyone has a fair and just opportunity to achieve their highest level of health by removing structural obstacles to equitable participation in society. Policy changes at the local, state, and national levels are necessary to address the social determinants of health, prevent discrimination, and guarantee social justice for all.

- **Expand health care access and improve quality of care.** GIH supports policies that promote the timely use of patient-centered personal health services to achieve the best possible health outcomes. Access and quality are complex concepts influenced by a broad range of factors including affordability, availability, acceptability, timeliness, proximity, ease of use, cultural and linguistic responsiveness, effectiveness, and efficiency. Addressing these myriad issues through a health equity lens will require policy changes related to data and metrics, capacity development investments, provider payment incentives, quality monitoring, and regulatory protections.

- **Improve population health.** GIH supports policies that emphasize prevention and elevate the needs of people facing disproportionate health risks due to age (e.g., youth, older adults), geography (e.g., rural communities), identity (e.g., people of color, LGBTQ people, people with disabilities), health conditions (e.g., pregnancy, chronic diseases), or circumstances (e.g., immigrants and refugees, homeless people). Investments in public health infrastructure, workforce, and community-level public health interventions are required to prevent disease and promote wellness.
• **Promote community engagement and empowerment.** GIH supports policies that promote meaningful engagement and build power by facilitating individual and community agency in the decisions that shape people’s lives and health. Public policies, particularly those related to the structure and functioning of our democracy, strongly influence how and when communities can use their voice to advocate for their interests and priorities.

While these goals have long been reflected in our work, GIH seeks to improve the effectiveness of our efforts by clearly identifying the policy changes we support and acknowledging the need to build our capacity to assume new and expanded roles. As a national organization supporting a diverse network of philanthropic organizations, our activities will focus largely on federal policies, with attention to how these policies are implemented in states and localities. We will focus on inspiring the field of health philanthropy with an eye toward strengthening the field’s ability to influence policy change.

**Policy Objectives**

Advancing these policy goals requires both a long-term commitment and a short-term resolve to action. GIH has identified the following policy objectives to advance our priorities in the coming year:

1. **Ensure comprehensive health insurance coverage for all.** Examples of policies related to this goal include:
   - adopting ACA-authorized Medicaid expansion in all 50 states,
   - increasing state uptake of option to extend Medicaid 12 months post-partum via state plan amendment,
   - improving outreach and eligibility redetermination processes in publicly subsidized programs as well as broadening eligibility to protect the continuity and affordability of health coverage,
   - ensuring an inclusive array of covered services, including behavioral health care, oral health care, clinical preventive services, and reproductive care.

2. **Expand the supply, diversity, cultural responsiveness, and safety of the health workforce—including paraprofessionals, Community Health Workers, and peer specialists.** Examples of policies related to this goal include:
   - developing a national workforce strategy,
   - supporting health care workers’ recruitment, training, and retention,
   - eliminating health profession shortage areas by increasing practice incentives and expanding scholarship and loan repayment opportunities,
   - fostering safe working environments for health workers in a variety of settings (e.g., hospitals, long-term care, etc.) and
o optimizing state and federal approaches to scope of practice, licensing, and reimbursement.

3. **Invest and encourage innovation in the public health infrastructure at federal, state, and local levels.** Examples of policies related to this goal include:

   o increasing investments in noncategorical funding mechanisms to improve flexibility and support capacity building (e.g., restoring full funding to the Prevention and Public Health Fund),
   o modernizing surveillance and data systems, including investments in collecting complete, standardized, self-identified race, ethnicity, and other sociodemographic data,
   o building communications capacity,
   o expanding access to broadband, and
   o supporting workforce development.

4. **Increase access to high quality equitable care for mental health and substance use.** Examples of policies related to this goal include:

   o enforcing and expanding parity laws,
   o advancing equity through practice, payment, and system changes that remove care limitations and enhance prevention, crisis response, early intervention, harm reduction, treatment, and recovery services,
   o integrating physical health, mental health, and substance use services in primary care, schools, and other community-based settings,
   o expanding the telehealth infrastructure for behavioral health services, and
   o fully reimbursing an adequate network of diverse providers.

5. **Increase the availability of high-quality health care services.** Examples of policies related to this goal include:

   o supporting the safety net, including community health centers, critical access hospitals, public hospitals, rural health centers, school-based health centers, and certified community behavioral health clinics,
   o promoting development and reimbursement of innovative care models that advance equity,
   o expanding the availability of home- and community-based services,
   o ensuring access to comprehensive reproductive services, and
   o making permanent the flexibility for telehealth services reimbursement available under the public health emergency.

6. **Eliminate nutrition insecurity by making fresh, healthy food accessible and affordable in every community.** Examples of policies related to this goal include:
expanding and strengthening public assistance programs (such as SNAP, WIC, and school meals),
integrating screening for food insecurity and “Food Is Medicine” interventions, such as medically tailored meals, into primary care services, and
supporting innovations that promote equitable, sustainable local and regional food systems.

7. **Ensure safe and affordable housing.** Examples of policies related to this goal include:

- increasing and strengthening tax incentives for the development of affordable housing,
- enhancing publicly sponsored rental assistance,
- providing home maintenance support to low-income homeowners, and
- improving tenant protections for renters (e.g., ensuring legal representation for tenants in eviction hearings).

8. **Reduce poverty and advance economic mobility.** Examples of policies related to this goal include:

- lowering the tax burden on low-income families (such as expansions in the value of and eligibility for the Earned Income Tax Credit),
- establishing a living wage based on the local cost of living,
- providing paid sick, medical, and family leave to all workers, and
- increasing investments in the economic development of low-income communities.

9. **Protect and strengthen democracy.** Examples of policies related to this goal include:

- safeguarding voter rights (such as ensuring due process in voter roll maintenance),
- encouraging voter engagement and participation (such as allowing no-excuse absentee ballots),
- ensuring equitable representation (such as non-partisan redistricting and investments in the decennial census), and
- supporting free and fair elections (such as investments in electoral infrastructure).

**Policy Agenda Development Process**

In developing these goals and objectives, GIH solicited Funding Partner input through several mechanisms, including focus groups, widely circulated requests for written comments and suggestions, and one-on-one outreach. We also reviewed policy agendas developed by our Funding Partners, considered policy agendas developed by other philanthropy serving organizations, and sought the guidance of nonprofit leaders.

While input from our Funding Partners informed priority selection and the issues highlighted are widely championed by health funders, it is important to note that this is not a consensus document.
Priorities have been identified by GIH leadership and staff. We sought to select priorities that effect policy and systems change towards health and health equity; align with GIH’s strategic plan; are actionable, timely, relevant, and realistic for GIHs involvement; are evidence-based; galvanize staff, Board, Funding Partners, and health philanthropy; leverage organizational resources and unique positioning to lead; and allow GIH to remain nonpartisan.

Reframing and Implementing Policy Objectives

Operationalizing this ambitious policy agenda will be challenging and our plans are still being finalized. We have identified a broad set of goals and an inclusive list of objectives that reflect health funders’ wide-ranging interests. Within the list of nine objectives, the first four have consistently been identified by health funders as the most critical to advance better health for all.

Implementing this agenda will involve the collective efforts of GIH working together with our Funding Partners and others. In helping our Funding Partners be more policy-engaged and impactful, GIH will be required to take on new and expanded roles including:

- Continuing to highlight policy issues in GIH's traditional programming (e.g., providing examples of how funders can shift from programming to advocacy, developing case studies of effective advocacy efforts, offering additional “Advocacy and Lobbying 101” trainings, and developing policy analyses on timely topics),
- Taking public positions on policy issues to advance the national dialogue (e.g., participating in and leading sign-on letters, publishing op-eds, providing consultation to federal agencies, submitting comments on proposed rules and regulations, and publishing position papers and policy recommendations),
- Coordinating Funding Partner policy change efforts on issues of shared interest (e.g., convenings to share strategies and align grantmaking investments, creating pooled funds, facilitating partnership between local, state, and national funders, and establishing a network of health funders’ policy staff), and
- Partnering with federal agencies to better coordinate public-private investments.

These activities obviously represent varying levels of effort and engagement. Some require a modest, time-limited investment of resources, while others will involve the sustained dedication of significant labor and funding. We recognize the need to be realistic about what we can accomplish over the next year. Although we plan to offer some amount of programming for all the policy objectives identified, we intend to select a more targeted set of priorities to guide more resource intensive efforts.