

REACH HEALTHCARE FOUNDATION THEORY OF CHANGE

VISION

All poor and underserved people in our community will have quality health care.

MISSION

To advance equity in health care coverage, access and quality for poor and underserved people.

LONG-TERM IMPACT

Achieve health equity by reducing barriers to coverage and care.

TARGET

Reduce the percentage of uninsured in the foundation's service area from 11% in 2014 to less than 5% by 2020.

TARGET

Increase the number of consumers served by the health care safety net in the foundation's service area from 185,000 in 2014 to 220,000 by 2020.

OUTCOME

Enroll All Eligible

Enroll all eligible people in the health insurance marketplace or existing public health insurance programs.

OUTCOME

Close the Coverage Gap

Close the coverage gap through expanded eligibility/availability of Medicaid and other publicly funded insurance options.

OUTCOME

Strong Safety Net

Strengthen the capacity of the safety net and community to provide high quality, integrated care for consumers with no or inadequate health insurance coverage.

STRATEGIES

1. Navigators and other assisters and community initiatives to help eligible consumers enroll in health insurance.
2. Advocacy, outreach and media campaigns to increase the number and types of consumers enrolled in health insurance.

STRATEGIES

1. Advocacy and lobbying and other forms of citizen and voter engagement to advance policies that close the coverage gap.
2. Research and analysis to inform policy, and engage voters and policymakers regarding health coverage and population health.
3. Partnerships to identify, research, test and create new coverage and care opportunities for those who remain uninsured or under-insured.

STRATEGIES

1. Core support for health and advocacy organizations to strengthen the region's safety net.
2. Advocacy and policy strategies and training programs to expand the oral health care workforce.
3. Implementation of strategies to transform care such as trauma-informed care, patient-centered medical home and care integration.
4. Connect health care consumers, providers and services to reduce the gap between consumer need and health care.

Note: REACH has identified four priority vulnerable populations: 1) undocumented immigrants; 2) refugees; 3) youth transitioning out of foster care; and 4) homeless youth and adults. Proposed strategies should prioritize one or more of these populations.

OUTCOMES AND STRATEGIES

OUTCOME 1: ENROLL ALL ELIGIBLE

Enroll all eligible people in the health insurance marketplace or existing public health insurance programs.

Strategy 1	Navigators and other assisters and community initiatives to help eligible consumers enroll in health insurance. Invest in effective use of assisters such as navigators, CACs, community health workers & Promotores de salud to conduct outreach & enrollment to educate & enroll uninsured consumers in health plans offered through the health insurance marketplace.
Strategy 2	Advocacy, outreach and media campaigns to increase the number and types of consumers enrolled in health insurance. Invest and partner with advocacy organizations, navigator coalitions, regional community support agencies, and local navigator organizations to increase enrollment of our target population in the REACH service area.

OUTCOME 2: CLOSE THE COVERAGE GAP

Close the coverage gap through expanded eligibility/availability of Medicaid and other publicly funded insurance options.

Strategy 1	Advocacy, lobbying and other forms of citizen and voter engagement to advance policies that close the coverage gap. Invest in direct and grassroots lobbying, support community-level organizing and actions to raise awareness and educate consumers, and support collaborative efforts to influence policymakers and legislative leaders to address the coverage gap.
Strategy 2	Research and analysis to inform policy, and engage voters and policymakers regarding health coverage and population health. Engage policy researchers and research and evaluation organizations to produce nonpartisan research and analyses to inform state and local policy discussions and governmental actions.
Strategy 3	Partnerships to identify, research, test and create new coverage and care opportunities for those who remain uninsured or under-insured. Invest in the examination of community, state-based and systems-level efforts and initiatives across the U.S. to provide affordable health coverage to aspiring citizens and other highly vulnerable populations, such as undocumented immigrants, refugees, children aging out of foster care and homeless persons.

OUTCOME 3: STRONG SAFETY NET

Strengthen the capacity of the safety net and community to provide high quality, integrated care for consumers with no or inadequate health insurance coverage.

Strategy 1	Core support for health and advocacy organizations to strengthen the region's safety net. Invest in core operations of advocacy organizations, community health coalitions and direct service providers in primary care, mental health and oral health care whose work is highly aligned with the REACH Foundation's focus on increasing access to health coverage and quality health care through the safety net.
Strategy 2	Advocacy and policy strategies and training programs to expand the oral health care workforce. Invest in advocacy and policy efforts to gain legislative approval that adds a dental therapist to the oral health team with appropriate training, supervision and reimbursement for services; and invest in development and implementation of curricula and training for dental therapists that reflect national accreditation standards.
Strategy 3	Implementation of strategies to transform care such as trauma-informed care, patient-centered medical home, and care integration. Invest in clinical transformation that employs evidence-based practices to address the impact childhood and adult trauma has on health outcomes, as well as other quality initiatives that meet consumer needs for comprehensive and coordinated patient care.
Strategy 4	Connect health care consumers, providers and services to reduce the gap between consumer need and health care. Invest in safety net organizations to expand the number of community health workers, engagement specialists, care coordinators, care navigators and connectors supporting uninsured and underinsured consumers; higher education to prepare individuals to serve in connector roles; and technology innovations (e.g., telehealth, technology-facilitated personal care management, health information exchanges) to increase patient engagement in care.