

Blue Shield of California Foundation (BSCF)

San Francisco, CA

www.blueshieldcafoundation.org

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An interview with Brenda Solórzano, the BSCF chief program director.

NCRP: What is the foundation doing to aid the implementation of the Affordable Care Act (ACA) in California, and how does that contribute to the foundation's mission of improving the lives of all Californians?

BS: BSCF has long been committed to the transformation of California's health care system to improve access to care for all. With the passage of the Affordable Care Act, the foundation further reinforced this commitment to systems transformation through targeted support for grantees, providers, key stakeholders and policymakers as they respond to new challenges and opportunities.

Even before the ACA was signed into law, BSCF was investing in its future. Our first grants went to support California's efforts to secure a Medicaid waiver that would serve as the "bridge to reform." Grants included support to convene key stakeholders, conduct research and develop the successful waiver application. Through this initial groundwork, California was able to establish the low-income health programs (LIHP) that are currently providing coverage for more than 600,000 previously-uninsured, low-income adults across the state.

BSCF is helping strengthen California's health care system and improving the efficiency, efficacy and reach of safety net providers. For example, the foundation has made investments in a number of strategic areas, including new care delivery and payment models, the development of performance-measurement

tools, research into the health care preferences of low-income patients, leadership training and care coordination.

To help ensure that policymakers have the tools they need to support the successful transformation of our health care system in the lead-up to January 2014 and beyond, BSCF grants are currently supporting new policy analyses and proposals for federal resources, as well as funding for the transition of LIHP enrollees into Medi-Cal or other coverage options through Covered California.

NCRP: Why does the foundation prioritize giving that benefits and empowers underserved communities?

BS: Research shows that underserved communities experience a greater burden of health challenges. Historically and currently, health disparities fall along the same fault lines as wealth disparities. In addition to lack of financial resources, fewer educational opportunities, language barriers, and rural and hard-to-reach locations mean that marginalized populations have less access to the services that keep them healthy and safe.

BSCF works to build a world in which everyone – regardless of income or background – has access to high-quality health care and domestic violence (DV) services, and the systems that provide those services are strong and effective.

NCRP: Ending domestic violence is one of the foundation's two main program areas. Why is this issue so important and what are examples of how foundation funding has shown results?

BS: BSCF has a longstanding commitment to the issue of domestic violence, and is the state's largest private funder of DV services and prevention efforts.

As many as one in three women will experience domestic violence during her lifetime, affecting people from all ethnic backgrounds and all education and income levels. With a focus on two outcomes – providing greater access to services and improving systems of care – BSCF supports a broad spectrum of DV projects and practices to effectively reach these goals.

To improve access to services, BSCF partnered with the Robert Wood Johnson Foundation to fund teen dating violence prevention programs in California. We've seen this project work successfully across the entire Los Angeles Unified School District, which has adopted a district-wide safety policy and is using innovative approaches to recognize and effectively respond to teen dating violence among middle school students.

To improve systems of care, we've also made significant investments in preventing violence in military families. Through this work, we've produced new research and training models, have seen greater national interest and investment in this issue, and spurred a number of cross-sector collaborations to respond more effectively to and prevent intimate partner abuse within the homes of our veterans.

Additional investments include grants to encourage culturally competent DV services for California's diverse populations, as well as capacity-building, leadership training for DV service providers, general operating support and forging new partnerships. ■