

# Making a difference.

## THE COMMUNITY BENEFITS OF NONPROFIT HEALTH PLANS.

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### INTRODUCTION

In the health sector, there is a rich tradition of community benefit that has been forged by non-profit hospitals, health plans and other organizations. This tradition extends beyond basic legal distinctions regarding the distribution of net income and, more importantly, reflects the essence of the nonprofit organization's mission to provide social benefit to the communities served.<sup>1</sup>

With heightened competition over the past two decades, some contend that this tradition has been lost and that the distinction between nonprofit and for-profit health plans has become blurred. The purpose of this report is to provide evidence that the community benefit tradition is alive and well, based on a survey of a sample of members of the Alliance for Advancing Nonprofit Healthcare: BlueCross BlueShield of Alabama, BlueCross BlueShield of Florida, Blue Cross and Blue Shield of Massachusetts, Excellus BlueCross BlueShield, Univera Healthcare, Fallon Community Health Plan, and Kaiser Permanente. These health plans sponsor community benefit programs directly and/or through affiliated foundations. The programs sponsored under both corporate arrangements are described in this report.

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<sup>1</sup> For a full discussion of the role of nonprofit health care, see "Advancing the Role of Nonprofit Health Care," Marcia Metcalfe, *Inquiry*, Summer, 2002

## FORMALIZATION OF COMMUNITY BENEFIT PROGRAMS

The Alliance members surveyed generally have formal governance mechanisms and policies for providing community benefit in order to insure that scarce resources are directed at areas of high priority need and are coordinated with the programs of other community-based organizations. Their community benefit policies and practices are, in many cases, complemented by health plan-sponsored volunteer programs for employees. The success of these programs reflects the strong community service cultures that permeate these health plans.

**BlueCross BlueShield of Florida's (BCBSF)** community benefit program is guided by an aspiration, that "BCBSF's history as a not-for-profit mutual company leads our publics to hold us to a higher standard than other area companies," and is governed by a formal Corporate Charitable Contributions Policy that provides guidelines for budgeting, planning and participating in community benefit activities. The policy is significant in that it distinguishes charitable contributions in two general categories:

- Social Impact—Programs and organizations that positively impact quality of life
- Business and Public Relations—Programs and organizations that have public relations value, enhance business relationships and have high community visibility

The policy directs that community benefit spending decisions take into account the incidence and severity of a problem and the potential for BCBSF's involvement to favorably leverage a solution to the problem. The policy includes formal definitions and guidelines for planning and budgeting community benefit expenditures, including the types and magnitude of support that may be provided.

The BCBSF policy also encourages and supports employee involvement in community activities that satisfy its community benefit goals. In fact, BCBSF expects its senior managers to assume a leadership role in the communities they serve. Employee volunteerism is encouraged through a formal program, Blue Community Champions, which, in 2002, resulted in employees volunteering more than 30,000 hours in community service to 150 agencies statewide.

**Blue Cross and Blue Shield of Massachusetts (BCBSMA)** is dedicated to going beyond its membership to improve the health and quality of life for people across the Commonwealth. BCBSMA maintains a formal community benefit program which is governed by a Corporate Policy Committee composed of members of senior management, with the support of a Senior Vice President of Community Relations and internal and external community benefit advisory councils. The community benefit program is formally directed at improving the health of the people in the communities it serves.

BCBSMA also supports employee involvement in community benefit activities through Blue Crew, the employee volunteer program, which encourages Plan employees to contribute up to eight hours in paid time off for community benefit activities. More than 2,000 associates provided over 12,000 hours of service to the community in 2004.

**Excellus BlueCross BlueShield**, including Univera Healthcare in Buffalo, sponsors a comprehensive community benefit program, reflecting a coordinated focus in key areas across its various communities as well as various programs to address unique local needs. A specific goal of the health plan's community benefit efforts is to "...reinforce the value of nonprofit health care—with our members, families, friends and neighbors as the beneficiaries."

Excellus BCBS also has a corporate-wide policy that enables its full-time employees to devote a company-paid eight hours per year for volunteer work.

Based in Worcester, MA, the **Fallon Community Health Plan's (FCHP)** community benefit programs are governed by a formal Community Benefits Policy Statement which emphasizes working cooperatively with health care and community service organizations to create innovative health care solutions, to seek healthy outcomes and to improve access to health care services. Overall direction for the Community Benefits Program is provided by a Community Benefits Committee composed of individuals that represent key FCHP and community leadership. Consistent with FCHP's commitment to work collaboratively with others, it formally reviews community needs assessments conducted by other organizations in the formulation of its program. This assessment results in the development of a formal Community Benefits Plan. FCHP's community benefit programs are

complemented by its support of related employee volunteer efforts.

Based in Oakland, California, and with a presence in several large markets nationally, **Kaiser Permanente's** community benefit program is focused on improving the health of the many communities it serves. With the guidance of a Community Benefit Governance Council, its broad scope of effort is supported by several hundred million dollars in services and funding each year.

## BASIC CATEGORIES OF COMMUNITY BENEFIT

The Alliance for Advancing Nonprofit Health Care has developed guidelines<sup>2</sup> for nonprofit health plans that include a description of the range of community benefits that a health plan might conceivably provide. Two basic categories of community benefit are presented:

- Providing broad benefit to the community through demonstrated excellence in its regular business operations
- Providing specific community investments that are generally aimed at improving access to benefits and care for at-risk population segments, improving the health status and quality of life for the broader community and/or reducing the cost and/or improving the quality of care of the health care delivery system

Community benefit that stems from demonstrated excellence in regular business operations generally is reflected in the nonprofit health plan's performance on a number of business measures compared to that of other health plans. Examples of such business measures are:

- Higher portion of the premium dollar devoted to patient care and less to administration
- Lower premiums
- Higher customer satisfaction rates
- Better quality outcomes and/or greater efficiency in the delivery system achieved through the health plan's particular business relationships with health care providers

- More accessible benefits, i.e., fewer pre-existing condition clauses, waiting periods and/or other underwriting-based restrictions
- Greater participation in government and other safety net programs<sup>3</sup>

The absence of detailed performance data for other health plans in the same geographic areas as the nonprofit health plans described in this report did not permit a comparison of performance against such measures. Even the research literature is generally lacking in empirically sound geographic comparisons.<sup>4</sup>

The Alliance previously commissioned one geographic study, in New York.<sup>5</sup> There, nonprofit health plans are the predominant insurers throughout most of what is referred to as "upstate" New York and for-profit health plans dominate the New York City metropolitan area and the surrounding "downstate" counties. The study, based on 2001 and 2002 data, showed that nonprofit health plans (in **bold**) outperformed for-profit health plans in:

- Percentage of premiums devoted to profits (**2.3%** versus 8.1%)
- Percentage of premiums devoted to administrative expenses (**10%** versus 11.5%)
- Percentage of premiums used to pay medical expenses (**87.7%** versus 80.4%)
- Average premium rates (**\$184** versus \$221)

Moreover, the statewide nonprofit plans studied supported 88% of the total enrollment in state-sponsored safety net programs for underserved populations, compared to 12% for the for-profit plans.

Lacking comparative performance data on the other health plans in the geographic areas served by the health plans described here, the next section provides a brief summary of the considerable breadth and depth of specific community investments that these plans have been providing to:

1. improve access to benefits and/or care for at-risk or underserved populations;
2. improve the health status and quality of life for the broader community; and/or

<sup>2</sup> Advancing the public accountability of nonprofit health care organizations: guidelines on governance practices, May, 2005

<sup>3</sup> Some nonprofit health plans may choose to describe their participation in safety net health insurance products under the category of specific community investments.

<sup>4</sup> In a national study, also commissioned by the Alliance, Susan Barrish compared nonprofit Blues plan and for-profit health plan performance. She concluded that, compared with investor-owned insurers, the nonprofit Blues plans devoted a significantly higher percentage of the customers' premium dollar to pay healthcare claims and a lower percentage on administrative expenses, and were more financially stable despite a lower average net operating margin. "Nonprofit Health Insurers: The Financial Story Wall Street Doesn't Tell," Susan Barrish, Alliance for Advancing Nonprofit Health Care, December 2003

<sup>5</sup> Costs, Commitment and Locality: A Comparison of For-profit and Not-for-Profit Health Plans," Treo Solutions, Alliance for Advancing Nonprofit Health Care, May/June, 2004

3. reduce the cost and/or improve the quality of care of the health care delivery system

The last section provides more specific examples of these plans' community investments in these three categories.

## SUMMARY OF THE BREADTH AND DEPTH OF THESE PLANS' SPECIFIC COMMUNITY INVESTMENTS

In 2002 and 2003, **BlueCross BlueShield of Florida** invested \$45 million in 286 educational and charitable community organizations and programs with emphasis on the uninsured and underinsured, higher education, volunteerism and quality of life. Through its affiliated foundation whose endowment has grown to \$25 million, it has awarded 75 grants in support of a diverse set of activities including educating older adults about prescription drugs, training physicians on women's heart disease symptoms, and improving the lives of Hispanics with diabetes.

During 2003, **Blue Cross and Blue Shield of Massachusetts**' Community Benefit Plan expenditures totaled nearly \$14 million which included a \$12.9 million contribution to the BCBSMA Foundation. Activities supported by the Foundation in 2003 included:

- \$600,000 in one-year grants to 20 healthcare organizations to promote culturally competent care
- A commitment of \$1.87 million in three-year grants to 15 community collaborations to expand access to children's mental health services
- \$1.6 million in one-year grants to 50 organizations across Massachusetts to improve coordination of care, connect consumers to physicians and support health care advocacy

**Excellus BCBS** sponsors a broad range of community benefit investments that are directed at:

- Improving access to coverage and decreasing the number of uninsured
- Insuring a future health care workforce, particularly in areas of expected shortage
- Improving services to meet the special needs of the seriously ill, especially children and the terminally ill
- Sponsoring programs that address the risks associated with pre-term labor, smoking, eating disorders, as well as the creation of healthy communities

**Fallon Community Health Plan's** Community Benefits Program commits to:

- Develop and implement programs to improve the health status of the economically disadvantaged, elders, pregnant and parenting teens and the youth within its service area. Children in the first three years of life and at-risk adolescents will be receiving priority attention.
- Continue FCHP's role as a health educator by providing school-based programming, hosting health fairs and conferences, and providing general information to the public
- Work collaboratively with other health care providers to develop and implement programs targeting specific populations as determined by the community
- Develop, support and implement health initiatives that are identified by local businesses, social service organizations and other related agencies
- Continue to find ways to deliver high quality, low cost health care coverage

FCHP made available over \$1,126,000 to various programs in 2003. This was accomplished through the distribution of over \$199,000 in grants, and other charitable donations, and the remaining \$927,000 in programs that involved direct expenses and staff time.

Through the many regions and markets it serves, **Kaiser Permanente's** community benefit investments of several hundred million dollars are focused on:

- Expanding and fortifying safety net partnerships with community clinics, health departments and public hospitals
- Addressing the delivery of care to low-income families through its dues subsidy programs, charity care, and participation in government programs
- With community partners, actively supporting community health initiatives linked to specific community goals
- Broadly disseminating critical health knowledge by sharing its research outcomes and its evidence-based approach to medicine and offering health education through live theatre and other programs
- Fostering clinical education by maintaining residency programs and forging work force development partnerships with organized labor, colleges, universities and high schools

**Blue Cross Blue Shield of Alabama** has committed to a broad range of community investments, but with some particular immediate areas of emphasis, including access to care for at-risk or underserved children, health promotion and disease/illness prevention for the community in general and seniors in particular, and youth development.

## MORE SPECIFIC EXAMPLES OF THESE PLANS' COMMUNITY INVESTMENTS

### Improving Access to Benefits and/or Care for At-Risk or Underserved Populations

**BlueCross BlueShield of Alabama** sponsors an important initiative aimed at improving access to health services for children. It is called "The Caring Program for Children," and is focused on making health care services accessible to children whose parents cannot afford health insurance and for whom a public program is not available. The program is sponsored by the Plan-created Alabama Child Caring Foundation (ACCF) through which 100% of available funds are devoted to providing health services to these children. The Plan donates the administration of the Foundation and matches community donations on a dollar for dollar basis.

The Foundation enrolled its first child in March, 1988 and, since that date, has supported 46,000 children. Services provided through the Foundation include: periodic well child checkups, MD visits, routine immunizations, emergency care, hospital outpatient care, outpatient surgery, laboratory, X-ray and pathology services and vision services. Most PPO providers associated with the program waive co-pays for covered children. From 1988-2003, the Foundation provided direct support to services for children of over \$10,000,000.

The Foundation also sponsors a program in Blount County, Alabama, in cooperation with the Blount County Board of Education, which is called "Karing for Kids, Inc." In its first year, the program conducted physical assessments that determined that: 10.5% of children were uninsured, 13.4 % needed glasses, and 11% needed dental care. As a result, all of the uninsured children were enrolled in the Foundation's medical coverage. The program reflected strong local coordination involving the support of Alabama Power Foundation, the Blount County Health Care Authority and the Wallace State College Nursing Program.

**BCBS of Florida's** programs to improve access to care are largely implemented through its philanthropic affiliate, **The Blue Foundation for a Healthy Florida**, which was created in 2001. The Foundation's mission is to enhance access to quality health-related services for residents with a particular focus on the uninsured and underserved.

In 2004, the Foundation identified as a key priority maximizing its impact in the area of community-based health clinics and outreach services, with the goal of improving access to needed services for underserved and uninsured residents of Florida.

BCBSF also supports Hispanic Health Initiatives (HHI), a grass-roots organization that provides health and prevention education and referrals to free and low-cost clinics in central Florida, including providing principal underwriting support for HHI's Los Amigos/Buddies Program which is focused on Type 2 diabetes education.

**Blue Cross and Blue Shield of Massachusetts** has a strong historical commitment to improving access to needed health care benefits and services. In 1995, the Plan developed the Blue Health Plan for Kids which provides an affordable choice for those parents that are caught between Medicaid ineligibility and unaffordable family health coverage to provide health care coverage for their children.

Building on its commitment to improve access to care, in 2000, BCBSMA created the **Blue Cross Blue Shield of Massachusetts Foundation** to which BCBSMA has contributed \$73 million since its creation in 2001. The Foundation is the largest single benefactor of BCBSMA's community benefit program. The mission of the Foundation is to expand access to health care services, particularly for the most disadvantaged people in the community.

In November, 2004, the Foundation hosted a health care summit to address the growing problem of the uninsured in Massachusetts. The summit was a part of the Foundation's "Roadmap to Coverage" initiative, which seeks to inform the public debate and generate a practical roadmap to provide coverage for the uninsured in Massachusetts.

Since its inception in 2001 through 2003, the Foundation has awarded 223 grants totaling \$7.6 million to 138 organizations in support of philanthropic and policy initiatives to expand access to health care.

Through grants and other support, BCBSMA supports the Massachusetts League of Community Health Centers and its 50 member Centers who play a critical role in ensuring access to quality care to the neighborhoods across the Commonwealth.

BCBSMA also partners with Health Care for All, a leader in health care reform and improved access, to ensure that adequate and affordable health care is accessible to everyone, regardless of income or social and economic status. The collaboration has focused on a variety of issues including expanding access for uninsured children and sustaining MassHealth, the state's Medicaid program.

In the Rochester, New York area, **Excellus BCBS** has sponsored two programs directed at improving access to coverage. As part of a partnership with the Ibero-American Action League, Excellus BCBS joined other key organizations to provide a \$500,000 collaborative grant in support of The Hispanic Uninsured Project. The project is focused on enrolling eligible people in government-sponsored health programs. Nearly 1,100 people have been enrolled since the program's inception in 2002, and the goal for 2004 is to enroll an additional 1,200 people. Excellus BCBS also supports the Reweaving the Safety Net project, aimed at ensuring that coordinated, culturally sensitive, high quality public health and human services are available in some of the poorest sections of Rochester.

In its Utica region, Excellus BCBS supports the Adirondack Medical Center-Uninsured Project, in a partnership which includes Adirondack Medical Center, Excellus BCBS, and the New York State Department of Insurance, community organizations and municipalities. Its task is to identify uninsured families and individuals and their needs in the tri-lakes area of the "North Country" and determine their needs. Project goals include ensuring that all children in the region have access to health insurance and reducing the number of uninsured by 25 percent.

Excellus BCBS also has committed substantial resources to programs for specific at-risk individuals. Through its partnership with the March of Dimes, it has provided \$200,000 to improve prematurity risk detection, to help fund research to identify causes of pre-term labor and prematurity, and to test promising treatments.

In its Southern Tier region (Binghamton and Elmira), Excellus BCBS helps to support the Healthy Women's Partnership Program in its efforts to provide services for uninsured and underinsured women. In 2003, nearly 1,300 adult females received services.

In Worcester, Massachusetts, **The Fallon Community Health Plan (FCHP)** is a leader in reducing cultural, linguistic and physical barriers to health care largely through its service to 8,000 MassHealth (Medicaid) members. This activity includes publishing member information in four languages. Also, FCHP's provider directory contains information regarding languages spoken by network providers, as well as the availability of interpreter services and handicapped accessibility. Offering enrollment to all population segments including large and small employers, individuals, Medicare beneficiaries and MassHealth members, FCHP is the oldest Medicare HMO in the USA and has participated in the Medicaid program since 1980.

FCHP's Elder Service Plan (ESP), which provides acute and ongoing services for Medicare-eligible individuals that are eligible for nursing home care but prefer to remain in their homes, is the first HMO-sponsored elder care program in the country and the only program of its kind in central Massachusetts.

**Kaiser Permanente** sponsors a diverse set of community benefit initiatives aimed at improving access to health care benefits and services. With respect to strengthening the healthcare safety net, Kaiser Permanente has helped to expand access to primary and preventive services for low income, uninsured people by working closely with community health centers to improve the quality and cost-effectiveness of care, to build effective clinic management infrastructure, and to collaborate on projects that reduce health disparities and promote community-based systems of disease prevention and management.

An important area of focus for Kaiser Permanente is children's asthma—especially for children from low-income communities. In 1997, Kaiser Permanente helped found the YES WE CAN Urban Asthma Partnership. Through this effort, a prevention-oriented, culturally sensitive model of asthma care for low-income children has been developed and tested at three demonstration sites. The program has achieved significant results as measured by the following:

- Use of written asthma plans to follow latest guidelines
  - Before—0%
  - After—100%
- Use of preventive medications
  - Before—40%
  - After—83%
- Use of mattress covers
  - Before—6%
  - After—94%
- Emergency Department use
  - Before—63%
  - After—32%
- Hospitalization rates
  - Before—21%
  - After—4%

One important product of this effort is a “tool kit” which offers step-by-step instruction for a primary care clinic or Medicaid managed care plan to replicate the asthma program. Several additional community-based primary care clinics are now offering the program.

Kaiser Permanente also provides dues subsidy programs to people ineligible for any other kind of assistance. Subsidized Kaiser Permanente coverage has been provided to workers retraining for new professions, women in transition from welfare to work, children whose family income or immigration status makes them ineligible for state programs, and poor men ineligible for any public program. Kaiser Permanente also participates in the Medicaid program in the majority of its regions.

As a further component of its efforts to care for low-income families and extend access to benefit coverage, Kaiser Permanente has created the Kaiser Permanente Child Health Plan (KPCHP). Through the program, children in families with income up to 300 percent of the federal poverty level who don't have access to employer-subsidized coverage or qualify for state programs are enrolled. By the end of 2003, over 10,000 California children were enrolled.

## Improving the Health Status and Quality of Life of the Broader Community

**BlueCross BlueShield of Alabama's** community benefit programs and services also include:

- Sponsoring Alabama's version of the national program to build and strengthen the character and competence of youth
- Advocating anti-smoking policies and smoking cessation programs
- Sponsoring a Car Seat Screening Program which emphasizes child passenger safety
- Providing focused educational support for mathematics, science and technology
- Sponsoring an Emergency Patient Information (EPI) system which enables users to list emergency contact and medical information online and to make this information available to rescuers
- Sponsoring health fairs, life skills workshops for school aged children, and a School Touring Program which brings live musical and dramatic performances to schools with limited or no access to arts education
- Conducting a Senior Health and Wellness Program in which Plan staff visit nursing homes, assisted living facilities and other sites and provide information on nutrition, fitness and disease prevention and management

**BlueCross BlueShield of Florida's** “Blue Community Champions” program, which supports employees in volunteer efforts throughout the state, has effectively involved several employees in BCBSF's formal sponsorship of the Partnership to Advance School Success (PASS), through which funding and a mentorship are provided to a specific elementary school. As a result of the combined corporate sponsorship and the Blue Community Champions program, fifteen BCBSF employees are provided mentoring services to 14 at-risk fourth and fifth graders.

BCBSF also serves as primary underwriter for the traveling eye lab of Jeppesen VisionQuest (JVQ), a non-profit organization that provides free comprehensive vision exams and new eye glasses to 15,000 at-risk children.

**Blue Cross and Blue Shield of Massachusetts** has identified improving children's health and education as a key

area of activity. Its Jump Up and Go! program is a signature effort that encourages behavior for lifelong health among today's youth. It promotes youth physical activity and healthy eating and is the primary focus for the children's health initiative. Launched in 1998, the program has invested nearly \$2 million in 169 grants to increase the capacity of community organizations to provide youth physical activities. Jump Up and Go! Won AHIP's highest community leadership award in 2004.

Along with the Jump Up and Go! Program for young people, BCBSMA has been promoting physical activity regardless of age as an excellent method for preventing disease and staying healthy. In 2003, the company inaugurated the Go Walking program through a debut event which included health screenings.

Another BCBSMA program, conducted in collaboration with the Boston Private Industry Council, is aimed at helping to build tomorrow's diverse and skilled workforce. It entails a comprehensive partnership with Madison Park Technical Vocational and Brighton High School. The partnership offers students a link between classroom learning and the workplace and provides job shadowing, an intense mentoring program called "Blue Scholars," bilingual mentoring, internships, scholarships and conflict mediation training. In 2002, BCBSMA expanded its education focus to include the town of Quincy and, in collaboration with the Big Brothers Big Sisters organization, created the Quincy School Partnership.

Addressing the special needs of seriously ill individuals is a high priority for **Excellus BCBS**. The health plan provides a program for its members called CompassionNet, expanding the scope of care for emotional and social support for very sick children and their families. Also, in the Utica region, as part of a partnership with other organizations, Excellus BCBS supports the Palliative Care Center. Its goal is to coordinate end-of-life services for residents of Herkimer and eastern Oneida County.

In the Southern Tier (Binghamton and Elmira), the 2Smart 2Start program aims to affect students' attitudes about smoking and to reduce smoking prevalence.

In the Utica and Central New York regions, Excellus BCBS, along with other partners, is addressing eating disorders by raising awareness, identifying gaps in services and providing

support to sufferers and their families. In Utica, the program is known as Adolescents with Eating Disorders, and in Central New York, as Ophelia's Place. A first-ever NYS Eating Disorders Conference is planned for February 2005 in Syracuse.

In addition, in the Rochester area, Excellus BCBS sponsored the BuddyCheck 8 program to help raise awareness about breast cancer. Through the program, the health plan distributed over 48,000 breast cancer information kits. At the end of the five-year program, over 130,000 women had contacted the BuddyCheck Hotline to request kits.

Throughout the regions that it serves, Excellus BCBS also launched an initiative designed to help get Upstate New Yorkers more physically active and eating healthier. Called Step Up, the program addresses the growing problem of obesity and associated health care costs. Along with its partners, the Plan promotes the adoption of small changes in behavior to bring about big results. Participants can track their progress at a Plan Web site.

In Gowanda, NY, **Univera Healthcare** is supporting the efforts of the Healthy Community Alliance, a NY-based nonprofit organization that is working to convert that community's vacated Center Street Elementary School into Academy Place, a multi-use community and health center. The goal of Academy Place is to improve access to health and human services in an underserved rural area located 20 miles south of Buffalo. Univera Healthcare provided \$250,000 in seed money for the project.

Univera Healthcare also sponsors a program called "2Smart 2Start" which was created to teach children in grades three through five that there are consequences to the decisions that they make. The program focuses on tools and techniques the children can use to resist peer pressure to try alcohol, tobacco, other drugs and even gambling.

Univera Healthcare was a key organization in the planning and implementation of a program called "Target the Heart," a ten-year program created in 2003 to stimulate permanent environmental change to reduce the number of strokes and heart attacks, especially among women. In addition, the Plan is also a major sponsor of the Susan G. Komen Breast Cancer Foundation Race for the Cure of which 75% of the net Race proceeds are distributed to local projects aimed at breast health education and research.

**Kaiser Permanente** sponsors a number of community health initiatives that reflect long-term partnerships with public health agencies and community organizations and that focus on environmental and social conditions that will have a significant effect on the health of a community. These initiatives include: playing a leadership role in the creation of the Solano Coalition for Better Health focused on reducing racial and ethnic health disparities; helping to launch a health partnership in Clark County, Washington that uses a community report card to track community health; and helping to found the Community Health Improvement Partners in San Diego, a collaboration of providers and public and non-profit agencies that sponsor a training and resource center for community health workers and other activities.

Within the Clark County health partnership, as a result of the community health assessment, key stakeholders formulated community health goals (Community Choices 2010) that focus on environmental health, population health, and individual health. The efforts have resulted in sharp reductions in the number of adult and teen smokers.

A unique and innovative Kaiser Permanente community benefit program is its Educational Theatre Program (ETP) which uses live theatre to provide health information to young people between the ages of 5 and 18 on such subjects as substance abuse, self-esteem, AIDS and HIV, alternatives to violence, and grief coping skills. The program is usually provided in schools and 11 million people have attended since its inception nearly 20 years ago.

### **Reducing the Cost and/or Improving the Quality of Care of the Health Care Delivery System**

These plans are also increasingly involved in efforts aimed at directly supporting improvements in the quality and cost effectiveness of the health care system. These efforts range from training health manpower to conducting research for improving health care services delivery. Several examples are described below.

In Central New York, **Excellus BCBS** supports the Virtual College and Career Center whose goal is to develop an adequate supply of well-trained health care workers for the future. Excellus BCBS has partnered with several other organizations in Central New York on the four-year plan to attract students to local health care careers. Recently, more

than 1,000 students were assessed for their skills in various subjects. Based on these assessments, grade level and content standards were established, and training for teachers and guidance counselors is ongoing. Students can participate in job shadowing and internship programs to expose them to health care careers. Excellus BCBS has committed \$182,000 to the program thus far.

In the Oswego County area, as with many rural areas, there is a shortage of well-trained RNs. Excellus BCBS, in collaboration with other organizations, sponsored the development of the Rural Health Network of Oswego County. Its accomplishments include the establishment of an RN program at Cayuga Community College and work setting exposure for students. In the works are opportunities such as enhanced leadership training for RNs and LPNs and the creation of well designed paths to meet specific needs, e.g., a certified training program for coders.

Excellus BCBS has also invested \$200,000 in a five-year collaborative effort in Rochester called the MCC Nursing Shortage program. Its goal is to increase the number of graduates from the Monroe Community College nursing program by 30 percent.

### **Training tomorrow's clinicians through its interns, residents and allied health training programs**

Each year Kaiser Permanente trains more than 2,000 physician residents and interns. In many of its residency programs, a signature element is a community service rotation through a community clinic or public hospital. **Kaiser Permanente** also sponsors a School of Allied Health Sciences which offers certificate courses in radiography, sonography, nuclear medicine, cardio-pulmonary resuscitation (CPR), basic and advanced phlebotomy, venipuncture, fluoroscopy and mammography.

**Kaiser Permanente** sponsors eight research centers across the nation through which a broad range of topics are investigated. In 2003, Kaiser Permanente conducted 1,776 clinical trials, epidemiological studies, and health services research studies.

In an innovative partnership, **BCBSMA** is working with the Institute for Healthcare Improvement (IHI) in its national effort to save lives by reducing medical errors and improving specific care processes in hospitals. Through this partnership, BCBSMA

will provide up to \$2.5 million in grant funds for Massachusetts hospitals that apply to the Plan for funding for quality improvement projects.

In 2004, BCBSMA worked with 32 other organizations to form the Massachusetts e-Health Collaborative (MaeHC), whose mission is to improve the safety, cost effectiveness and quality of health care in Massachusetts through electronic clinical information systems.

BCBSMA also has a joint program with Tufts Health Plan and the community health centers to increase e-prescribing. The eRx collaborative recently reached the 25,000 milestone for the number of scripts sent electronically in a one-week period.

## CONCLUSION

The community benefit programs of these health plan members of the Alliance reflect a diverse and substantial commitment to “making a difference” by improving the health and well-being of the communities they serve, thereby providing a social benefit “dividend.” The community benefit programs generally include formal assessments of community need, strong collaboration with key political, business and other community stakeholders, and an emphasis on measuring the results of their investments. The resulting programs include those that are focused on the uninsured and other “at-risk” population segments, those that are aimed at improving the cost effectiveness and quality of the health system, and those that are aimed generally at improving the overall health of the community. Finally, the community benefit activities demonstrate strong commitment from governance and executive leadership of the health plans, as well as formal support for the involvement of employees.