

February 201

# Grant Outcomes Report

# The Uninsured Task Force: Tackling the High Rate of Uninsurance in the Tri-Lakes Region of New York State

### I. Executive Summary

Under this grant, Adirondack Medical Center's (AMC's) goal was to continue to reduce the number of uninsured throughout its region. Its strategy was to expand the activities of the Uninsured Task

**KEY INFORMATION:** 

GRANTEE Adirondack Medical Center

### GRANT TITLE The Tri-Lakes Uninsured Task Force

DATES February 2008 to February 2009

**GRANT AMOUNT** \$61,933

Force (UTF), which AMC formed in 2002. The primary goal of the grant was to show an increase in the number of insured Tri-Lakes adults from 89% in 2005 to 91% in 2008, and an increase in the number of insured children from 97% in 2005 to 98.5% in 2008. Although UTF performed all its proposed activities, it was unable to track the number of individuals who were enrolled as a result of its work (i.e., facilitated enrollment agencies and other relevant organizations were unable to provide specific enrollments resulting from UTF events). UTF was able to look more broadly at local insurance enrollment, however, by using the grant funding to conduct a survey of the region in December 2008; the results showed that despite the economic downturn, the region's rate of uninsured showed little change from the last survey conducted in May 2005.

### II. The Problem

In 2002, the AMC formed the UTF to address the challenges of providing access to care, a consistent concern among community members. This voluntary group comprises more than 25 local, regional, and statewide organizations, including health care and insurance providers, schools, businesses, chambers of commerce, and churches. The task force has been working together for more than seven years on projects including creating a low-cost private insurance product for people who do not qualify for public programs, and helping to secure additional facilitated enroller positions through grant funding. UTF has collected data to track coverage rates in the community, which—despite national trends at the time—increased since UTF's inception. Under this grant, UTF hoped to continue to reduce the number of uninsured throughout its region.

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### **III. Grant Activities and Outcomes**

The primary goal of the grant was to show an increase in the number of insured Tri-Lakes adults from 89% in 2005 to 91% in 2008, and an increase in the number of insured children from 97% in 2005 to 98.5% in 2008. UTF collected data to track progress on this goal through a follow-up survey to surveys it fielded in 2003 and 2005.

Grant funds were requested to hire a part-time project coordinator to lead the following activities:

- Work with organizations and businesses to target enrollment of hard-to-reach populations and make enrollment initiatives more efficient and cost-effective, including investigating electronic applications.
- Continue and expand current efforts with school nurses and education institutions to enroll all children in available health insurance options.
- Continue and expand efforts to educate businesses and the Chambers of Commerce about public insurance options, Healthy NY, and other public/private and private insurance options for employees, and explore new models of coverage.
- Disseminate the Tri-Lakes Uninsured Task Force (UTF) model to other rural areas in New York State.

As planned, UTF conducted its survey of the uninsured in the Tri-Lakes area and found that the uninsured rate had remained steady since the 2005 survey, even during this period of economic downturn. It hypothesized that a loss of jobs reduced access to employer-based insurance and thus increased uninsurance rates. UTF expects that any enrollment gains made through its efforts may have been offset by increases in the uninsured resulting from the downturn.

The UTF team accomplished many of the planned activities to reduce the number of uninsured. Prior to the start of the New York State Health Foundation (NYSHealth) grant, AMC collaborated with local facilitated enrollment agencies to create and staff a full-time Health Insurance Enrollment Office. Led by its Project Coordinator, UTF developed a traveling display detailing available health insurance options and created business cards with the Enrollment Office's phone number. Several UTF members—

### FUNDING AND RATIONALE

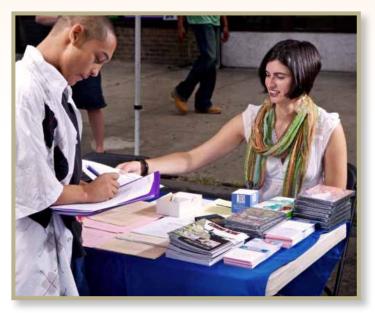
This grant to AMC was funded under NYSHealth's 2007 Coverage request for proposals (RFP). The RFP sought projects that could help increase insurance coverage in the State. By funding this project, NYSHealth hoped to enable this well established task force to propel its outreach and coverage initiatives in a rural, underserved part of the State.

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including all school districts in the area, one of the county public health agencies, and a local chamber of commerce—displayed the business cards. UTF tracked the number of calls to its Enrollment Office credited to these business cards—111 callers identified the business card as their motivation for contacting the Enrollment Office.

UTF coordinated activities during the "Cover the Uninsured Week" and "Covering Kids and Families" back-to-school campaigns. UTF hosted a series of insurance eligibility screenings in six Tri-Lakes communities. A total of 42 people double the number screened the previous year—were screened at one of those events. The back-to-school campaign (August/September 2008) consisted of direct-mailing all families a



flyer and letter from the superintendent that encouraged parents to call the Enrollment Office. The impact of this particular mailing is unclear—the Enrollment Office received 21 calls in September 2008, compared with 17 in September 2007, and UTF could not track how calls were referred to the Enrollment Office.

Thirty-five businesses attended a luncheon to learn about Healthy NY and the Family Health Plus Premium Assistance programs; the luncheon was part of UTF's "Cover the Uninsured Week" activities in April 2008. Much of the marketing efforts toward businesses were undertaken through the NYSHealth 2008 Small Group grant to the Plattsburgh Chamber of Commerce.

UTF also used radio and newspaper ads to direct calls to the Enrollment Office. It estimates that nine first-time calls were the result of these ads.

Wayne County and a rural health network contacted UTF to learn from its experience.

Many counties in UTF's region do not have ready access to the Internet, particularly the facilitated enrollers using laptops. UTF felt it was important to develop an actual software tool that did not require any Web interface and thus developed an eligibility screening for public health insurance programs. The software is free and available to the public via the Internet.



## **IV. Lessons Learned**

The main goal of the UTF project was to increase the number of individuals with health insurance in the Tri-Lakes area. UTF, with the help of a dedicated part-time coordinator, undertook many activities toward this end and did reach members of their community through marketing and screening efforts. While UTF could track the number of individuals who are receiving screenings, the number of calls to the Enrollment Office, and the number of businesses attending informational sessions, it could not track the number of individuals who are now enrolled in health insurance as a result of these efforts. The inability to track individuals actually enrolled in an insurance plan as a result of the program is a weakness of many of NYSHealth's 2007 Coverage grants. Future grants that strive to directly increase health insurance enrollment should have a clear and feasible strategy for tracking the number of enrollments generated by grant activities.

This project did not include a sustainability strategy and ultimately proved unsustainable. NYSHealth now emphasizes the need for realistic sustainability strategies in proposals. The case for sustaining a project is strengthened when a project can evaluate its efforts and assess whether it has indeed had an impact. UTF was unable to evaluate the ultimate impact of its work, which may have made it harder to make the case for sustaining a part-time coordinator and the task force itself. In addition, there are still uninsured living in the Tri-Lakes area, and thus efforts are still needed to connect the uninsured with insurance.

## V. The Future

At the close of the grant, the future of UTF was uncertain. UTF estimated it needed to secure at least \$35,000 annually to sustain the higher level of activity undertaken in 2008. It received some member donations, but they were only sufficient to continue efforts through summer 2009. By May 2009, however, the coordinator position was vacant and there were no plans to fill it until a decision was made at the UTF's June meeting about how to proceed. In fall 2009, one of UTF's partner organizations, Fidelis, provided a \$10,000 grant that allowed UTF to hire a project coordinator.



## BACKGROUND INFORMATION:

#### **ABOUT THE GRANTEE**

Adirondack Medical Center provides care for more than 80% of the population in its five-county service area, which spans 1,200 square miles and covers many of the State's hard-to-reach populations. In 2001, the Center formed the Uninsured Task Force (UTF) to address the challenges of providing access to care, a consistent concern among community members. This voluntary group comprises more than 25 local, regional, and Statewide organizations, including health care and insurance providers, schools, businesses, chambers of commerce, and churches. Some of the Task Force's projects included creating a low-cost private insurance product for people who do not qualify for public programs and helping to secure additional facilitated enroller positions through grant funding.

#### **GRANTEE CONTACT**

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