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About the Center for Health Policy

The Center for Health Policy (CHP) was established by the University of Missouri in 2002 to foster dialogue and analysis of health policy issues important to the welfare of Missouri. Recognizing its mission as a land-grant institution and responsibility as the state’s academic flagship, the university has developed the CHP as an objective, nonpartisan center of excellence committed to addressing questions of access to quality and affordable health care.

Part of the MU School of Medicine, the CHP responds to trends and emergent issues in health care by providing objective analysis, education and communication. CHP activities incorporate the interests and concerns of all stakeholders and enhance an ongoing awareness of the rapidly changing health care environment.

Focus areas pursued by the CHP include:
- Improving the quality and efficiency of MO HealthNet, Missouri’s Medicaid program,
- Improving health literacy,
- Reducing health disparities,
- Ensuring an adequate health care workforce in Missouri,
- Expanding health insurance coverage in both the private and public sectors,
- Expanding rural and urban access to services otherwise not available locally via innovative interventions such as telehealth.

All activities and projects are guided by the principles of collaboration, issue awareness and education, translation of research into practice, policy formation and strategic communication. CHP strategies include education initiatives, summits, conferences, research, outreach to communities, and multimodal communication. All efforts are multidisciplinary and supported by collaborators from academia, public and private communities, interest groups, community partners, state and local agents, and elected officials.

Learn more on the web at:
healthpolicy.missouri.edu
With most segments of society now afflicted by some form of inequity, our nation as a whole is facing the fear and uncertainty once reserved for its minorities. Tremendous income inequality has forced many former members of the middle class to taste the type of injustice historically associated with race, religion or sexual orientation.

While wealth inequity has become pervasive, inequity of any kind is particularly painful when applied to health care. Lack of access to quality care literally leads to tens of thousands of deaths each year. Attempts to address the problem from the payor perspective, such as the Affordable Care Act, have had limited impact on states like Missouri that haven’t used the ACA to expand Medicaid.

The MU Center for Health Policy has conducted research on Medicaid in Missouri since the Center was founded in 2002. Today, the Center is the state’s leading Medicaid claims data resource for researchers to use for studies that improve population health, health policy and more.

Now more than ever, Missouri and the nation need the resources, experience and expertise at the MU Center for Health Policy. The Center uses non-partisan study and analysis to find evidence-based solutions for some of our most pressing problems. New grassroots efforts to identify the unique needs of rural communities and a new training method that tackles the social determinants of health are among the most exciting endeavors on the horizon.

One of the Center for Health Policy’s strongest partners, the Missouri Foundation for Health, awarded the Center $491,000 in 2016 to help up to five Missouri communities identify and address local health issues. The grassroots effort builds on the Center for Health Policy’s record of combining community engagement with the University of Missouri’s unique resources.

The Center’s new training method is gaining national attention for its success at integrating health care within a social justice framework. Ethnicity, race, gender identity, income, sexual orientation and religion are among the social determinants targeted to show how the health system — like society in general — values some identities and penalizes others. More than 700 professionals participated in the training during the first half of 2016.

Growing interest in the training program, which is presented by National Conference for Community and Justice certified experts, is only one encouraging indicator of what the future holds for the Center for Health Policy. In addition to the country’s moral outcry for greater equity in health care, profit incentives are becoming more common. Providers who want to be players in the era of value-based purchasing will have to become better at understanding the social determinants of health if they want to be compensated. Providers who want to be paid for meaningful use of electronic health records will need training to accurately collect data on race, ethnicity and gender identity. The following pages describe how the Center for Health Policy helps institutions adapt to these new rules and regulations.

Further changes to our health system will probably follow 2016’s unprecedented presidential election, which has candidates debating everything from racial unrest in Ferguson, Missouri, to fighting in Fallujah, Iraq, to the fate of the ACA. In any event, the Center for Health Policy is positioned to take advantage of the attention all parties place on improved health care as part of a more equitable society.

Our nation has seen uncertain times before, only to emerge from the Great Depression of the 1920s and civil rights battles of the 1960s. It was in 1964, during a commencement address at another university, that Martin Luther King Jr. worried that a country coping with war abroad and cultural upheaval at home would be too frightened by his call for further change. He courageously stated, as we should: “The time is always right to do what’s right.”

Karen Edison, MD
Founding Director
Center for Health Policy
University of Missouri
Emphasizing Equity

MOHEC is leader in addressing health disparities

Health disparities and inclusive care were still novel concepts when the Missouri Health Equity Collaborative (MOHEC) was created more than a decade ago. Today, these concepts have evolved into critical components for improving population health at a national level.

New rules released by the U.S. Department of Health and Human Services are perhaps the best example that health equity has become a national priority. As part of its provisions for incentivizing better electronic health records, HHS announced in 2015 that it is placing more emphasis on capturing demographic data in such areas as race, ethnicity, sexual orientation and gender identity, as well as socioeconomic information. The announcement was hailed as a victory by social justice organizations and other groups that believe everyone should have the opportunity to achieve their highest level of health.

“MOHEC’s lengthy focus on health equity and social justice is unique. We actually helped define health disparities by being one of the first organized efforts to address them."

- Ioana Staiculescu, Manager
  Missouri Health Equity Collaborative

“MOHEC’s lengthy focus on health equity and social justice is unique. We actually helped define health disparities by being one of the first organized efforts to address them,” says MOHEC project director Ioana Staiculescu. “In the course of our efforts to create more inclusive care environments, we formed strong partnerships with many different groups across Missouri. These partnerships help give MOHEC an extraordinary ability to develop and disseminate information and programs.”

The MU Center for Health Policy in Columbia and Washington University in St. Louis established MOHEC through a contract with the Missouri Foundation for Health, and later, the Health Care Foundation of Greater Kansas City. Continued funding from the Missouri Foundation for Health will support MOHEC’s health equity and data collection training.

In light of HHS’ new standards, improving demographic data collection practices and policies will be a focus for MOHEC in coming years. Findings from MOHEC studies done in collaboration with the Missouri Hospital Association, Missouri Primary Care Association, PROMO, and SAGE Metro Fund St. Louis show that the majority of hospitals and clinics struggle to collect patient demographic data through standardized and accurate procedures. MOHEC is working closely with those organizations to enhance policy and implement data collection standards.

“Our conversations with clinic managers, patient-service representatives and other staff members revealed that procedures need to change significantly,” Staiculescu says. “Many times their data collection was based on assumption and observation, such as guessing at race based on a patient’s skin color. Gender identity data isn’t collected at all.”

MOHEC training on data collection begins by building knowledge and awareness of social identities like race, ethnicity, preferred language, sex, gender identity and sexual orientation. Clinic managers and front-desk staff are also taught how the data will be used and how to communicate this to patients. Tools provided with the training include scripts to use when collecting data, definitions for demographic categories, and educational material for staff and patients.

MOHEC has produced a large library of educational material. In partnership with University of Missouri Extension and with support of a dozen MU students, MOHEC implemented the Missouri Latino Health Survey in 2014. The survey of 245 Latinos was conducted through hour-long, face-to-face interviews in seven different communities throughout Missouri. Results and analysis were shared through fact sheets and websites.

Also online, MOHEC has produced and shared a podcast and video to improve care for transgender patients. Other MOHEC videos address such topics as the challenges of providing health care in rural areas, how faith-based organizations can support...
health and fitness, and how community health workers can improve patient care while saving money by reducing emergency room visits and unnecessary hospitalizations. Online videos are also generated as part of MOHEC’s Healthy Lives-Healthy Communities Conference in Columbia, Mo. The 2016 conference addressed health equity issues raised by recent unrest in Ferguson, Mo.

Community conversations organized by MOHEC strengthen Missouri’s health equity network. MOHEC staff members work closely with communities to help them define and frame priorities, as well as develop potential new collaborations and align resources toward common state and regional health equity goals. Common concerns cited by Springfield, Sikeston, Charleston, Cape Girardeau and other Missouri communities showed that transportation, access to mental and dental health services, and more health literacy education is needed across Missouri.

"MOHEC continues to grow, reinforce its vision and ensure that our actions are meaningful to the communities which make up our membership," Staiculescu says. “There are many opportunities like this for MOHEC, in part because Missouri still has so many needs that prevent it from significantly improving health equity.”

Videos, podcast part of large online library

The Missouri Health Equity Collaborative (MOHEC) has produced a large library of educational material that is available online. A podcast and video were created to improve care for transgender patients. Other MOHEC videos address such topics as the challenges of providing health care in rural areas, how faith-based organizations can support health and fitness, and how community health workers can improve patient care while saving money by reducing emergency room visits and unnecessary hospitalizations. Online videos are also generated as part of MOHEC’s Healthy Lives-Healthy Communities Conference. The 2016 conference addressed health equity issues raised by recent unrest in Ferguson, Mo.
Expanding Engagement
Foundation supports growing grassroots efforts

With new funding from the Missouri Foundation for Health, the Center for Health Policy is expanding its aid to localities looking for better ways to serve their most at-risk residents.

The foundation awarded the Center $491,000 in 2016 to help up to five Missouri communities identify and address specific local health issues. The two-year program builds on the Center for Health Policy’s record of combining community engagement with the University of Missouri’s unique resources.

“The Center for Health Policy was selected for this funding because it has spent years working closely with communities and agencies across the state to address a wide variety of health issues,” says Nick Butler, project director for the center at MU. “As part of the University, the Center also provides a comprehensive collection of tools and technical expertise that communities require to develop effective and sustainable solutions to address those issues.”

The new program will focus on improving health for community members who are most at risk, including those with disproportionately low incomes and members of racial, ethnic and cultural minorities. The Missouri Foundation for Health and Center for Health Policy have spent a decade collaborating to help such underserved populations.

“The Missouri Foundation for Health is proud to partner with the Center for Health Policy in working to increase health equity in Missouri,” says Ryan Barker, the foundation’s vice president for health policy. “MFH has supported the work of the center’s Missouri Health Equity Collaborative since 2006 as it has continued to prove its effectiveness in conducting research, education and community engagement to reduce health disparities and make our state a healthier place for all Missourians to live, work and play.”

The MU Center for Health Policy in Columbia and Washington University in St. Louis established the Missouri Health Equity Collaborative (MOHEC) through a contract with the Missouri Foundation for Health, and later; the Health Care Foundation of Greater Kansas City. MOHEC serves as a conduit for connecting policy experts, practitioners, communities and researchers. The collaborative hosts meetings to bring together professionals working around the state in the area of health equity, conducts workshops focused on inclusion and diversity in health care, and raises awareness about the intersection of health and social justice.

“Our activities in health equity and health literacy have allowed MU’s Center for Health Policy to develop a deep knowledge of communities across Missouri, as well as strong relationships with state and local agencies that serve them,” Butler says. “We’ve earned their trust as a valuable partner in identifying and addressing health issues at the grassroots level.”

Dozens of public and private health care, social service and educational organizations throughout Missouri -- including several departments of state government -- have partnered with the Center for Health Policy to improve health equity and literacy. Health literacy is defined as the capacity to obtain, process and understand basic health information and services. People with limited health literacy have less knowledge of disease management, report poorer health status and are less likely to seek preventive services.

Several innovative health literacy training programs have been developed by the MU Center for Health Policy, which created a nationwide board-certified Health Literacy Quality Improvement Program. In 2015 and 2016, hundreds of professionals and students participated in the center’s health literacy and equity training sessions.

In addition to its accomplishments in community engagement and training, the Center offers communities technical expertise and resources that aren’t available anywhere else in Missouri. For example, the Center is the state’s leading provider of Medicaid data for efforts to improve health outcomes. In 2010, the Center for Health Policy and its partners secured $6.8 million in federal funds to help providers throughout Missouri adopt electronic health records. The Center is also closely connected to MU’s telehealth network, and it leverages MU’s expansive network of health care providers, educators and researchers to meet the needs of communities across Missouri.
“The center uses all of its resources to design projects that bridge science, education and service, and link academic and local resources back into communities,” Butler says. “At its heart, the Center for Health Policy’s work is about building trusting relationships, engaging all levels of stakeholders, providing or aligning expertise, and looping it all back to inform continuous improvement and innovation.”

The center’s new partnership with the Missouri Foundation for Health will begin by engaging community leaders in discussions about their most pressing health problems. The interactions will include a diverse cadre of representatives from such areas as health care, education, social services, business and media, as well as a variety of civic, government and faith-based organizations.

“We continuously ask who else needs to be at the table,” Butler says. “The best information and ideas don’t always come from traditional sources. By gathering all affected stakeholders, everyone learns more about each other and how their common needs can lead to better alignment of resources.”

After the center has helped community stakeholders identify their needs, it will assist in developing sustainable action plans. The plans will present potential sources of support, including continued support from the Missouri Foundation for Health and technical assistance for the Center.

“Looking ahead, we’ll be partnering with communities to create comprehensive plans that focus on stimulating, monitoring and maintaining participant investment and follow-through,” Butler says. “It’s a continuous process that takes significant time and resources, but that is what is required to make the upstream social and policy changes that lead to lasting improvements in health and quality of life for all Missourians.”

The Missouri Foundation for Health is a resource for the region, working with communities and nonprofits to generate and accelerate positive changes in health. As a catalyst for change, MFH improves the health of Missourians through partnerships, experience, knowledge and funding. The foundation takes a multifaceted approach to health issues, understanding that programs, policy and collaboration all play a role in creating lasting impact.

An independent philanthropic foundation, MFH was created in the year 2000, following Blue Cross and Blue Shield of Missouri’s conversion from nonprofit to for-profit status. It is the largest organization of its kind in the state and among the largest in the country.

Powerful Partnerships

Dozens of organizations have partnered with the University of Missouri Center for Health Policy. The following list is not exhaustive, but it represents some of the Center’s most connected collaborators outside of MU.

- Area Agencies on Aging
- Area Health Education Centers
- Centro Latino de Salud
- Federal and State Offices of Minority Health
- Health Care Foundation of Greater Kansas City
- Health Network of Missouri
- Missouri Association for Community Action
- Missouri Association of Local Public Health Agencies
- Missouri Bootheel Regional Consortium
- Missouri Department of Elementary and Secondary Education
- Missouri Department of Health and Senior Services
- Missouri Department of Social Services, MOHealthNet Division
- Missouri Foundation for Health
- Missouri Hospital Association
- Missouri Primary Care Association
- Missouri Public Health Association
- National Network of Libraries of Medicine
- Northeast Missouri Rural Health Network or Heartland Physicians
- PROMO of St. Louis
- SAGE of St. Louis
- Sedalia Blue Ribbon Health and Wellness Planning Committee
- Small Business Development Centers
Health Justice for All

Novel training gaining national attention

Thousands of professionals have already participated in Center for Health Policy training programs in such areas as health literacy, community engagement and advocacy, and research analysis. Now, a novel training method for addressing diversity and inclusion in health care has become an increasingly popular component of the Center's educational offerings.

Stan Hudson, the Center’s associate director, and his colleagues began developing the new method after he became a Certified Diversity Facilitator with the National Conference for Community and Justice in 2014. With more than 15 years of experience as a health literacy expert and policy analyst, Hudson has developed and implemented Center workshops and training sessions that have reached more than 5,000 health professionals and policy makers.

“The Center has now created a completely new way of integrating health care within a social justice framework,” Hudson says. “For more than a decade, we’ve known that health care providers are going to have to become better at understanding the many social determinants of health if they want to be compensated in the new era of value-based purchasing. Today, the growing emphasis on inequity and injustice on many levels in our society has brought even more attention to our method of training.”

The Center has adopted the National Conference for Community and Justice model of using group participation, interaction, and dialogue to teach about the many social determinants of health. Ethnicity, race, gender identity, income, sexual orientation and religion are among the determinants used to show how the broader social system values some identities and penalizes others.

“The goal of our workshops is to make professionals understand how their conscious and unconscious biases affect their ability to be effective health care providers,” Hudson says. “No one can be culturally competent for all patients all of the time, but we can grow our cultural consciousness to recognize our biases as well as those of our patients, and we can then develop tools to address them.”

Improving health literacy among providers and patients is considered crucial to improving diversity and inclusion in health care. Only 12 percent of adults in the United States are deemed proficient in the health literacy skills they need to effectively navigate and use the nation’s health care system, according to the Institute for Healthcare Advancement (IHA).

“The University of Missouri Center for Health Policy has become a national leader in integrating health literacy and inclusion into formal educational programs,” Hudson says “We’ve known for many years that health literacy saves time, money and lives. However, the policies and procedures in health care often keep patients with limited health literacy from even asking questions about their own care. We have to change this.”

MU Center for Health Policy’s Nick Butler, center, and Ioana Staiculescu, center left, help lead a health literacy and inclusion training session at the Institute for Healthcare Advancement annual conference in May 2016.
In summer 2016, Hudson and his colleagues presented the Center’s latest training efforts in day-long sessions for health providers at IHA’s 15th Annual Health Literacy Conference in Anaheim, Calif., and the Health Literacy Leadership Institute in Boston. In the first six months of 2016, more than 700 health professionals from MU and elsewhere participated in inclusion sessions offered by the Center.

“Creating inclusive health care environments training gave our staff an opportunity to know each other in a much more personal way. It opened an opportunity for staff to learn about the many diversities within the organization and how each can be affected differently,” says Morgan Lynch, business office manager and privacy policy officer for Katy Trail Community Health in Sedalia, Mo. “Since the training, I’ve been able to see where the teams have been able to relate to each other on a different level than they had before. They’ve even been able to take the training and apply it to our diverse population of patients in an attempt to provide better customer service and care.”

**Curricular Integration**

Increasing numbers of students, faculty and staff at the University of Missouri are participating in the Center for Health Policy’s new training method for teaching about the many social determinants of health. Ethnicity, race, gender identity, income, sexual orientation and religion are among the determinants included to show how the broader social system values some identities and penalizes others.

The Center developed a health care inclusion course that will be offered in 2016 as an elective for students in MU’s new health sciences degree program, which is the largest undergraduate degree program at the university. The training is currently being integrated into curricula for health professional and medical students.

“The Center for Health Policy has played a key ongoing role in the planning, development and implementation of important parts of the medical school curriculum. Its staff has provided content expertise in the areas of health literacy, culturally effective care, unconscious bias, and inclusion,” says Debra Howenstine, MD, associate professor of family and community medicine at MU. “The Center’s staff members have undergone extensive training in the facilitation of discussions and workshops related to inclusion and bias. Their expertise in this area has been a great resource for the School of Medicine not only in regards to the curriculum but also in regards to faculty development. Recently working with MU’s Office of Medical Education, the Center provided inclusion workshops for educational leaders within the School of Medicine, with plans for additional faculty development over the next year.”

**Inclusion Training Participants**

839

**Inclusion training participants since July 2015**

150

**Hours of inclusion training since July 2015**
Rich Resource for Research
Center is leading source for Medicaid claims data

Research ranging from autism to nursing home care is enriched by a distinct data service offered only at the University of Missouri Center for Health Policy. The Center’s MO HealthNet Data Project is the state’s leading provider of Medicaid information used for studying the quality and cost of care.

Nearly a million residents are enrolled in Medicaid in Missouri, which spends billions annually on the public health program for low income families with children, senior citizens and people with disabilities. MU’s Center for Health Policy and Office of Social and Economic Data Analysis work in close collaboration with the state’s Medicaid agency (MO HealthNet Division) to make information on the residents available to researchers.

“Our Medicaid data project is a tremendous resource for researchers at the University of Missouri and others throughout the state,” says project director Jill Lucht. “Buried in these large and complex data sets, there’s great potential for improving population health, epidemiology, policy reform and more.”

The MO HealthNet Data Project originated from work the Center for Health Policy completed as part of the MU Medicaid Workgroup in 2005. The research group convened to provide an overview of trends in the Missouri Medicaid program. The group produced the Missouri Chartbook 2005: A Graphical Profile, which detailed Medicaid enrollment and expenditure data from 1998 to 2005 for the Missouri Medicaid Reform Commission.

Over the past decade, the Center for Health Policy has continued to provide research and analysis to help improve quality and save money for the MO HealthNet program. Center analyses included the examination of antipsychotic medication use in Mo HealthNet children and evaluation of the Medicaid Transformation Grant, Money Follows the Person, as well as the Chronic Care Improvement Program. The Center’s MO HealthNet Data Project also published a web-based “dashboard” analysis tool that included quality comparisons of fee-for-service and managed care MO HealthNet clients.

At the same time, the Center has made Medicaid claims data available for a variety of other research. The data is currently being used to evaluate MU telehealth network’s Show-Me Extension of Community Healthcare Outcomes (ECHO) project. The project trains primary care clinicians to better serve patients with asthma, autism, chronic pain, endocrinologic conditions, hepatitis C and dermatologic conditions.

“In my own specialty of dermatology, we used the data to look at melanoma in Missouri to determine where people were being diagnosed with advanced forms of the cancer,” says Karen Edison, MD, who directs MU’s Center for Health Policy and Missouri Telehealth Network. “With Show-Me ECHO, we are actually using the data to direct clinical and educational programs for some of the most common, complex and costly conditions in our state.”

“Buried in these large and complex data sets, there’s great potential for improving population health, epidemiology, policy reform and more.”

- Jill Lucht, Director
MO HealthNet Data Project

Elsewhere at MU, the Sinclair School of Nursing uses the Medicaid data to study long-term care for the elderly, while the Harry S. Truman School of Public Affairs uses the data to examine Missouri’s food stamp program. The Truman school’s published research has revealed links between food insecurity and mental health issues.

“Our ability to match food stamp data with Medicaid data is a good example of how MU’s Center for Health Policy has the potential to support a wide variety of studies,” Lucht says. “For me, it’s fun to see how excited some people become when they learn how much information is contained in our Medicaid data and the seemingly endless possibility for research.”

Lucht encourages anyone interested in using Medicaid data for research to contact her at the MU Center for Health Policy at luchtj@missouri.edu or 573-882-2300.
Year in Numbers
Grants and contracts are core sources of support

Center brings $7 million in external funds to MU

The Center for Health Policy has been awarded $7 million in grants and contracts over the past decade. Funding from these sources, combined with gifts and fees, account for more than 80 percent of the Center’s average annual operating budget, which is $938,000. In other words, the Center earns more than $4 for every dollar invested in it by the University of Missouri.

Center for Health Policy Consolidated Budget
Fiscal Years 2005-2015

- Grants/Contracts: 74%
- Gifts: 1%
- MU Health System: 18%
- MU Funding: 1%
- Service Fees: 6%

Total Operating Budget: $9,381,935

Thousands Attend Annual Policy, Equity Conferences

Brian Smedley, PhD, co-founder and executive director of the National Collaborative for Health Equity and a member of the National Academies’ Health and Medicine Division, is the keynote speaker for the 14th Annual Health Policy Summit on Oct. 28, 2016, in Columbia, Mo. He is the latest in a long line of distinguished presenters at the MU Center for Health Policy’s annual policy and equity conferences.

National health care leaders participate in the policy summit each October and the Missouri Health Equity Collaborative’s biannual conference in April. The events give local leaders the knowledge, expertise, and resources they need to identify and meet the health challenges facing their communities. Attendees include health care providers, students, community advocates, health policy makers, academic researchers, health department officials, legislators, and members of non-profit and for-profit organizations and the business community.
‘In this transformative era of health care, establishing partnerships and networks is essential. The University of Missouri Center for Health Policy is a key partner for MHA and Missouri hospitals in the quest to improve health status and outcomes. Working together, and with others, we are focused on innovative approaches to provide safe, timely, equitable, efficient, effective and patient-centered care.’

Leslie Porth, PhD
Senior Vice President of Strategic Quality Initiatives
Missouri Hospital Association

‘Missouri Foundation for Health is proud to partner with the Center for Health Policy in working to increase health equity in Missouri. MFH has supported the work of CHP’s Missouri Health Equity Collaborative since 2006 as they have proven their effectiveness in conducting research, education, and community engagement to reduce health disparities and make our state a healthier place for all Missourians to live, work and play.’

M. Ryan Barker
Vice President of Health Policy
Missouri Foundation for Health

‘The Health Care Foundation has been very pleased to partner with the Center for Health Policy, specifically in our health literacy work. This kind of investment for us makes the grant dollars we spend in the community more effective and long lasting.’

Bridget McCandless, MD
President and CEO
Health Care Foundation of Greater Kansas City