

The Fund's Mission, Strategy, and Goals

The Fund carries out its broad charge of advancing the common good by supporting efforts that help people live healthy and productive lives and by assisting specific groups with serious and neglected problems. To that end, it supports independent research on health and social issues and makes grants to improve health care practice and policy.

The foundation's current goals — which express the Fund's long-term mission and its assessment of how it can best address certain pressing social issues — are fourfold:

- Improve health insurance coverage and access to care for all Americans
- Improve the quality of health care services and stimulate innovation in health care delivery
- Promote international exchange on health care policy and practice
- Enhance the quality of life in New York City

The Fund's programs are organized in pursuit of those goals, following a well-defined set of principal strategies:

Goal: Improve health insurance coverage and access to care for all Americans

- Provide new information and analysis on coverage trends and consequences, focusing on employment-based coverage
- Mobilize groups particularly affected by inadequate coverage
- Develop or assess practical ways to expand insurance coverage, with an emphasis on those that build on current bases, such as public or employer-based coverage
- Assess the experience of state and community initiatives to improve coverage, with the aim of disseminating lessons useful for future federal, state, and local strategies
- Analyze and develop policies to reshape the structure and benefits of Medicare — particularly the addition of prescription drug coverage — and assess the impact of such policies on beneficiaries, especially those vulnerable by virtue of low income or high health care needs
- Address the major trends and issues in private plans that provide both Medicare managed care and supplemental benefits

- Increase outreach to and enrollment of low-income seniors into programs that provide health insurance and other benefits
- Improve coverage and access to care in New York City

Goal: Improve the quality of health care services and stimulate innovation in health care delivery

- Stimulate the generation of available, accessible, and reliable information on health care performance and quality
- Examine incentives — financial, regulatory, institutional governance, and others — to foster quality
- Help build organizational and systemic capacity for change to improve quality
- Enhance understanding of problems in quality of care for minority and low-income populations
- Identify and support the implementation of practices that will lead to improved quality of care and reduced disparities in care received because of race, ethnicity, or income
- Develop physician leaders who will improve the capacity of the health care system to address the health needs of minority and disadvantaged populations
- Remedy the shortfall of minority physicians who are well-trained academically and professionally in clinical medicine, public health, health policy, and health management

- Generate reliable information on the impact of health system change on the missions of academic health centers, in order to enable responsible payment policies under Medicare and other programs and promote appropriate institutional responses in ever-changing managed care markets
- Improve the training of pediatric clinicians to use evidence-based strategies to integrate preventive and developmental services for young children into the practice of pediatric primary care
- Promote the development and use of innovations that improve the quality of preventive and developmental primary pediatric care for young children and their parents
- Improve and facilitate the implementation of policies that support the integration of child development services into pediatric primary care
- Promote best practices in nursing home care and diffuse quality improvement principles into nursing home settings

Goal: Promote international exchange on health care policy and practice

- Sustain and continue to develop a growing international network of policy-oriented health care researchers and practitioners
- Continue to help keep health care policymakers in the United States informed of developments in, and transferable lessons from, other industrialized countries
- Foster the development of international collaborative programs to improve care

Goal: Enhance the quality of life in New York City

- Improve public spaces and services in New York City

In addition to grants programs pursuing those strategies, the Fund conducts programs in communications and in research, evaluation, and health policy that advance its objectives.

The Fund's total programmatic spending over the five-year period 2002–06 is expected to be \$125 million. It is anticipated that 44 percent of those funds will be allocated to improving the quality of health care services, 20 percent to improving health insurance coverage and access to care, 13 percent to international health policy and practice, 11 percent to communications, 5 percent to research, evaluation, and health policy, and 6 percent to improving public spaces and services in New York City and

other continuing programs. The foundation expects to spend approximately 7 percent of its major program budget annually on surveys, which have proven to be useful in informing policy debates and developing programs.

In all its work, the Fund seeks particularly to target issues that affect vulnerable populations. It also aims to achieve a balance between information-generating and action-oriented activities, and between public- and private-sector work. Other concrete objectives that help guide its grantmaking strategy include keeping its doors open to new talent, working in partnership with other funders, being receptive to new ideas, undertaking appropriate risks, and contributing to the resolution of problems and improvement of conditions in its home base, New York City, even while pursuing a national and international agenda.

**Planned spending
Fiscal years 2001–02 through 2005–06**

Five-year total in millions

