

# Covering Kids and Families Evaluation

## Expectations of Sustainability: What Do CKF Grantees and State Officials Predict Will Happen Once RWJF Funding Ends?

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### SUMMARY

The Covering Kids and Families (CKF) program was designed to develop and launch state and local coalitions that would work to expand public health insurance coverage of the uninsured. The Foundation intended, once these coalitions were launched, to begin reducing its funding, with the eventual goal of having the coalitions fund themselves entirely from local support. Beginning in January 2006, the Foundation will indeed begin to phase out its funding for the 46 CKF state grantees. But what will happen in this post-grant period? Will CKF grantees find other sources of support and continue to operate? Or will they disappear or shift their goals? To find out what the grantees, and the state officials who have worked with them, predict will happen, the evaluation team surveyed them in July 2005. The survey found that most grantees, and a majority of state Medicaid and SCHIP officials, are optimistic that the CKF projects in their states can continue at least some activities after funding ends. Both groups believe it is likely that the current grantee, in some instances with other organizations, will be able to continue activities. Indeed, 16 of the 46 state grantees have secured continued funding from other sources. However, as of summer 2005, most grantees—including those whose grants end soonest, in early 2006—had not yet secured funding for the future, which has raised concerns that activities will not be sustained in many states.

### INTRODUCTION

The CKF program was designed and implemented with the explicit intention of building the capacity of communities to address CKF goals after RWJF funding ended. Research on the sustainability of social services programs indicates that planning at the outset to establish strategies and amass resources and support increases the likelihood that activities will be sustained (Stevens and Peikes 2004; Scheirer 2005; Wooldridge 2005).

This highlight memo explores the expectations and plans of CKF state grantees as they approach the end of their RWJF funding, addressing the following questions:

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## **Expectations of Sustainability: What Do CKF Grantees and State Officials Predict Will Happen Once RWJF Funding Ends?**

- Do CKF grantees and the state officials who have worked with them think their CKF activities will continue after the grant ends?
- Do they expect the grantee organizations and/or their coalitions will survive?
- What efforts have CKF grantees made to achieve some form of sustainability?
- Are state officials willing to help sustain CKF projects? And if they are, how do they intend to do so?

The data for this analysis come from a summer 2005 survey of all 46 CKF state grantees and 65 state Medicaid and/or SCHIP officials.<sup>1,2</sup>

### **BACKGROUND**

The CKF program pursues three goals: (1) undertaking outreach to uninsured low-income children and parents to encourage them to enroll in public health insurance programs; (2) simplifying enrollment and renewal procedures in order to increase the likelihood that the uninsured will apply for and successfully enroll in these programs; and (3) improving the coordination between different public health insurance programs so as to reduce the incompatibilities that prevent successful enrollment and renewal. These activities can be sustained via several paths. In its most simple form, sustainability can mean the survival of the CKF grantees themselves and the continuation of current operations without interruption. This is, perhaps, the ideal form of sustained operations, providing continuity in working toward program goals. Often, however, a lack of funding means that paid grantee staff can no longer remain with the project. Sustained operations might then be achieved by the CKF coalition. In some instances, the coalition as a whole continues to undertake CKF activities; in others, responsibility for CKF efforts is divided among coalition member organizations as they institutionalize some activities into their own ongoing operations. Or, if neither of these paths is taken, sustainability might be found when a new organization, such as the state government itself or a local health care provider, takes up CKF's efforts.

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<sup>1</sup> Grantees identified the relevant state Medicaid and SCHIP officials. In 19 states, both a Medicaid and a SCHIP official were interviewed; in 27 states, a Medicaid official, a SCHIP official, or an official representing both Medicaid and SCHIP was interviewed, for a total of 65 respondents.

<sup>2</sup> For a detailed description of who the CKF grantees are and what the CKF coalitions are like, see *CKF Grantees: Who Are They and How Do They Spend Their Grants? CKF Highlight Memo #15* and *Coalition Membership and Classification: CKF Highlight Memo # 4*.

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## FINDINGS

**Nearly all CKF grantee staff and a majority of state officials expect CKF activities to survive after their RWJF funding ends.**

Ninety-six percent of grantees and 68 percent of state officials interviewed believe that CKF activities will be sustained in some manner (Table 1). The majority of grantee staff and state officials expect that CKF will be continued either by the grantee or by a combination of the grantee and other organizations. State officials were less certain than the grantees about CKF's future: 27 percent of state officials interviewed did not know whether the CKF project will survive, compared with just 2 percent of grantees. This greater uncertainty among state officials may reflect a less intimate knowledge of sustainability plans than that of the grantee staff, more skeptical views about the sustainability of grass roots efforts, or perhaps superior awareness of future state budget and policy priorities.

TABLE 1

WHO IS EXPECTED TO SUSTAIN CKF ACTIVITIES IN THE POST-GRANT PERIOD?

Expectation of Which Organization(s) Will Continue CKF Activities	Grantee Respondents N=46	State Official Respondents N=65
Grantee only	8 (17%)	16 (25%)
Grantee and other organizations	29 (63%)	26 (40%)
Other organizations only	7 (15%)	2 (3%)
Activities will not continue	1 (2%)	3 (5%)
Don't know	1 (2%)	18 (28%)

Source: Survey of CKF State Grantees and State Medicaid and SCHIP Officials, July 2005.

Both grantees and state officials cited factors they felt were important for the survival of CKF activities in some form. Both groups identified having a committed organization and coalition as the chief factor in survival; next in importance was enjoying political support; third was funding that finances continued efforts. Table 2 compares the responses of grantees and state officials.

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TABLE 2

WHAT ARE THE FACTORS THAT LIKELY CONTRIBUTE TO SURVIVAL?

	Grantees (N=44)	State Officials (N=44)
Committed organization and coalition	9	13
Political support	8	7
Funding	6	11
Other	25	31

Source: Survey of CKF State Grantees and State Medicaid and SCHIP Officials, July 2005.

**Two-thirds of the grantee staff expect that their CKF coalition will continue, in most instances because of committed coalition members.**

CKF grants require that grantees work in partnership with community groups, building coalitions to achieve program goals. When we asked grantees whether they expected their coalitions to continue, 30 responded affirmatively, while 9 said they did *not* have such expectations, and 7 said they did not know. Of the 30 grantees that expected their coalitions to survive, 13 said they expect their coalition to expand its focus beyond CKF goals and strategies, while another 7 say that their coalition already has an expanded focus that will continue into the future. Among the 20 grantees saying their coalitions would expand focus or continue an expanded focus, 10 named access to care as a likely area of future focus.

Of the 30 grantees who predict that their *coalition* will continue to operate, half said that this was because their coalition members had invested in the cause and were committed to work for children’s health. The remaining half posited a variety of reasons, such as that the coalition predated the CKF program or that they have found another group willing to provide administrative support for the coalition. Of the 9 grantees that expect their coalitions to dissolve, 3 cited a lack of funds, 2 said their coalition duplicated an existing group and was unnecessary, and the other 4 gave a variety of reasons.

**Most CKF grantees predicted that they would not be able to continue all CKF activities once RWJF funding ends.**

The picture becomes more complex when we begin to explore *how* the CKF will continue. We asked the grantees, “Do you expect that all your CKF activities will continue after RWJF funding ends, or that just some of your CKF activities will continue?” Most grantees acknowledged that they did not expect to continue all their CKF activities; 83 percent said that only *some* activities would continue. Among grantees who expect CKF activities to continue in some manner, we then asked, “If forthcoming resources are not enough to support the activities

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you expect will continue, we want to understand how you expect to prioritize which activities would continue.” Grantees answered in complex ways. Some said that their CKF activities were so interrelated that they had to name more than one activity as their number one priority. As a result, 5 grantees named two activities as their highest priority; 3 named all three activities; 28 named only one; while 7 did not know what their priorities would be.

Continuing outreach to uninsured children and parents was named the highest priority 33 percent of the time; simplification was named the highest future priority equally as often, while coordination was named 30 percent of the time (Table 3). Six grantees named six different “other” activities as their highest priority: examples include sustaining the coalition and trying to enact legislative changes.

TABLE 3

PRIORITIES FOR FUTURE ACTIVITY IF FUNDS ARE INSUFFICIENT

Highest Priority	Frequency as Highest Priority	Highest Priority as a Percentage of Grantees Answering Question (n=43)*
Outreach	14	33
Simplification	14	33
Coordination	13	30
“Other”	6	14

Source: Survey of CKF State Grantees, July 2005.

\*Percentages do not sum to 100, since respondents could choose more than one response.

### **The outlook for financing from other sources after foundation funds end is, at best, mixed.**

The continuation of CKF activities would be difficult without financial or in-kind support. The foundation tried to improve the chances for sustainability by requiring that each state grantee find local funding to match the RWJF grant during the grant period. In the post-grant period, each grantee needs to secure additional funding (beyond the matching requirement) to finance future operations.

Over two-thirds of state grantees have tried to raise these new funds; while just under a third have not done any fundraising for future activities. As of July 2005, of those 30 grantees that have pursued new funding for the post-grant period, 16 have *secured* funding to continue after their RWJF grant ends. This relatively low success rate occurred even though over half (57 percent) the grantees said that they had received some kind of technical assistance that taught

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them how to raise funds. Among those 27 grantees that said they had not secured commitments for future funding, 6 had only 6 months remaining on their grants, and 11 had between 6 and 12 months remaining. These figures could paint a cloudy picture, since the clock is ticking for these grantees.

**CKF state grantees that have raised funds for their future have received them from a variety of sources; many of them are the same funders that helped them meet the matching requirements during the CKF program.**

Of those 16 grantees that have found funds, 81 percent received them from local foundations, 19 percent from another national foundation, 44 percent from state governments, and, finally, 13 percent from their local governments (Table 4). Much of this future funding, according to these grantees, is coming from the same sources as those that gave grantees the funding to meet the matching funds requirement set by RWJF. In fact, three-quarters of the “new” (non-matching) future funding is from these familiar sources.

TABLE 4  
SOURCES OF COMMITTED FUNDING

	Number Reporting (N=16)	Percentage*
Local foundations	13	81
National foundations	7	19
State governments	7	44
Local governments	2	13
In-kind	6	38
Other	5	31

Source: Survey of CKF State Grantees, July 2005.

Note: Percentages do not sum to 100, since respondents could name more than one source of funding. There were 16 grantees reporting 6 different sources of committed funding.

**State officials do not expect state governments to be strong financial and in-kind supporters in the future.**

Despite the close working relationships most CKF projects have developed with State Medicaid and SCHIP officials, the prospects of future support from state governments seem cloudy. As we can see in Table 5, only 13 percent of state officials predict that their state government will give both funding and in-kind support (such as office space, staff time or services) to sustain the CKF project. Eleven percent said that their state would give only in-kind

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support. A quarter of state officials said that their state would give neither; while many state officials simply did not know whether CKF would get any future support from the state government. These estimates were made during a period of gradual improvement in the state budget climate, but state officials are still likely to be cautious about making financial commitments (see Kaiser 2005).

TABLE 5

### VIEWS OF STATE OFFICIALS ON FUTURE SUPPORT FROM STATE GOVERNMENTS

		State Will Provide In-Kind Support in Future		
		Yes	No	Don't Know
State Will Provide Funding in the Future	Yes	8 (13%)	1 (2%)	0 0%
	No	7 (11%)	15 (25%)	6 (10%)
	Don't Know	7 (11%)	6 (10%)	11 (18%)

Source: Survey of CKF State Medicaid and SCHIP Officials, July 2005.

## **DISCUSSION**

The results of our surveys of state grantees and state officials show that the clear majority expect that CKF efforts will survive past the end of RWJF funding. This optimistic prediction exists alongside the reality that only 36 percent of the grantees have actually secured funding to take them into that post-RWJF period. Moreover, one-third of the grantees have not yet tried to secure the financing that would help them continue. Those that have secured funding have returned to the same sources that funded the original match and have not broken new ground in searching for different types of support. Both grantees and state officials, however, have great confidence that the commitment of their coalition to the goals of CKF, and to the effort to obtain public health insurance for uninsured children, will help them survive. Whether grantees secure the financing or in-kind resources to continue, and whether the commitment of coalition members leads to the adoption of CKF activities by individual members, remains to be seen. We will be tracking the survival of the bulk of CKF grantees through 2006 and 2007 to document the survival or diminution of CKF activities and trying to uncover the factors that determined the longer-term outcome.

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