

Consumer Advocacy Funding Strategy - Brief 7: Results of the December 2017 Convening

Prepared by Spark Policy Institute on behalf of The Colorado Health Foundation January 2018

INTRODUCTION

In 2014, The Colorado Health Foundation (Foundation) kicked off the Consumer Advocacy Funding Initiative, a new funding strategy designed to ensure public policy adequately addresses consumers' needs for a health insurance system that is stable, affordable, and adequate.

As part of this strategy, the Foundation meets with advocates twice a year for an Advocacy and Strategy Learning Convening with the goal of understanding the health policy environment, the viability of specific policy targets, the strategies the field of advocates should pursue, and supports advocates will need to be effective in the coming year. Each convening is followed by a brief that shares the learning.

Source of Information for the Report

The assessment of the health policy environment and its implications in this report comes primarily from three sources:

Bellwethers: We conducted post-election interviews in November 2017 with embedded individuals deeply knowledgeable about health policy and/or politics. These bellwethers represented various sectors and interests on both sides of the aisle including private public policy firms, grassroots advocacy organizations, government agencies, legislators, and the media. See Figures 1 and 2 for more information. The interviews focused on top policy priorities for the coming year, the current political environment in Colorado as it relates to health care reform, and what it would take to get to policy wins in each policy target area.

This brief includes information specific to Colorado about:

- Bellwethers' understanding of policy priorities in 2018
- Advocate's visions for advancing three policy targets and a movement building target in Colorado
- Advocacy strategies employed in 2017 and viable strategies for 2018
- Ways for foundations to support advocates in 2018

Figure 1. Bellwether Area of Expertise

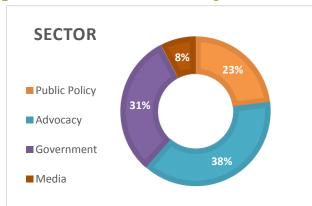
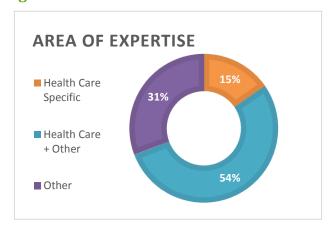


Figure 2. Bellwether Sector



- Grantee Reports: In August and September 2017,
 20 Foundation rapid response, program, and general operating grantees were interviewed regarding their work on the policy targets.
- December 2017 Consumer Advocacy Convening:
 Consumer advocates met to process the information gleaned from the bellwether interviews, discuss the political and policy environment, plan next steps on specific upcoming policy opportunities as it relates to the policy targets, and identify the supports needed to take those next steps.

POLITICAL AND POLICY ENVIRONMENT IN COLORADO

Bellwethers placed transportation funding at the top of the state policy agenda (ie. expected action or priorities at the legislature) for the upcoming 2018 legislative session, followed by education funding and Public Employees' Retirement Association (PERA) reform, and then health care issues, which included specific mentions of health insurance affordability and transparency, Medicaid sustainability, and addressing the opioid crisis. Infrastructure and growth (e.g. of growth management, road, energy, and housing needs) rounded out the top policy priorities on the state agenda. Most of the policy priorities were discussed with the caveat that 2018 is an election year and the policymaker's focus will be pulled away from policy towards re-election campaigns, and bellwethers expect very little policymaking to occur. How legislative priorities and programs will be funded also dominated the discussion of Colorado's policy priorities, particularly around TABOR restrictions and the instability of the policy environment at the federal level. Some bellwethers only talked about policy priorities in terms of balancing the budget, indicating the focus on these priorities will be in terms of financials. Considering this information, advocates that attended the convening wondered aloud how to address the need for funding distinct issues such as both education and health care and how to position policy to avoid having to choose between the two.

Narrowing the focus on health policy, we identified some consensus among bellwethers about specific likely priority issues in the upcoming session, including health care costs for the individual and system, addressing the opioid crisis, cost containment and transparency, accessibility to care, health insurance premiums and affordability,

Health Policy Priorities

- Opioid Crisis
- •Cost Containment & Transparency
- Accessability to Care
- Health Insurance Premiums & Affordability
- Exchange Stability

exchange stability, CHIP reauthorization, Medicaid protection, surprise medical billing, and mental/behavioral health. Costs specific to populations living in high expense and rural areas were also discussed.

In addition to focusing on health policy specifics, bellwethers provided nuances surrounding the top priorities related to fiscal policy. Those include transportation and infrastructure funding, the general state budget and any potential tax implications, K-12 education funding, reforming PERA, and TABOR.

Fiscal Policy Priorities

- •Transportation Funding
- State Budget & Taxes
- Education Funding
- •PERA Reform
- •TABOR

TABOR is consistently discussed as a stranglehold in the state funds; bellwethers felt it would be discussed but no action taken.

Bellwethers were split in their current view of the political environment in Colorado related to efforts to reform the health care system compared to last year. About one third of the bellwethers felt the current political environment in Colorado is less favorable and another one third felt it was the same compared to last year. The predominant explanation given for choosing less favorable or as favorable is that the 2018 session is during an election cycle, which will deter focus from policymaking – the status quo is likely to remain. Choosing "less favorable," another bellwether mentioned interest groups that have a lot of power to hurt health care reform are more empowered. Others indicated the environment has

not changed because it is still very divided and contentious.

"I see [the environment] as less favorable. I see the noose tightening a little bit. We are seeing conservatives making a loud argument about Medicaid expansion coming at the cost of fixing our roads, etc. we see things federally sabotaging the ACA. I see an increasing imperious environment where I worry we will have to make concessions on decreasing coverage."

~ Bellwether interviewee

Most of those who felt the political environment is more favorable compared to last year did so even though they felt the federal policy environment is unstable and that Colorado's political environment is divisive. Favorability pointed to high levels of insured rates and general support for many parts of the ACA. Additionally, bellwethers believed in a more favorable climate because the same legislators that supported health care reform previously are returning this upcoming session.

In general, bellwethers felt good about the climate in Colorado. They indicated that there is less rhetoric surrounding the ACA and the health care exchange in the state despite a sense that at the federal level health care is polarized. Bellwethers in the more favorable position indicated that there is a recognition Colorado that the federal in administration is not prioritizing full access to high quality affordable health care, so the state must take matters into its own hands. One bellwether summed this up as, "those people waiting for guidance from

"I think actually there is a lot of bipartisan agreement in terms of wanting to solve root cause problems of affordability and access but it's also very contentious when it comes to Medicaid expansion and universal health care."

~ Bellwether interviewee

Congress, they are willing to give up on that and are wanting to make progress here in Colorado."

POLICY TARGETS AND STRATEGIES

In 2017, advocates employed advocacy strategies best suited to help them navigate the divisive political environment and ensuing challenges. Overall, the polarized political environment, challenges from the federal level, and fiscal barriers led advocates to prioritize protecting critical programs and policies while advancing policy wins through regulatory advocacy. As Table 1 below indicates, across policy targets, advocates focused on frame and message development, media engagement, and community engagement. Multiple grantees noted that they spent a lot of effort on the frame and talking points used when meeting with legislators and communities, and they highlighted the need for supports to improve their effectiveness. The following section summarizes how advocates advanced work on each policy target over the past year and describes the discussions among advocates at the December 2017 convening to continue the work in 2018.

Table 1. 2017 Strategies Across Policy Targets

Primary Strategies in 2017	Policy Targets			
	Protecting Successes	Health care Reform	Fiscal Reform	Movement Building
Legislative Policymaker Engagement – including one-on-one meetings, meetings with constituents (ex. "lobby days"), committee testimony, and other activities.	~	~	~	
Regulatory Policymaker Engagement – including draft comments, working in coalition to promote a unified voice on proposals, and sitting on or advising committees.	~	~		
Frame and Message Development – research on frames which appeal to different audiences, aligning messages with allies, and countering opposition narratives.	~	~	~	~
Media Engagement – LTEs, op-eds, interviews, building story banks, and training spokespeople in different media markets.	~	~	~	~
Building Capacity of Allied Organizations – speaking engagements, advocacy trainings, identifying legislative opportunities, and services (ex. power mapping session).	~	~	~	
Educating and Activating Consumers – training on systems like Medicaid, action alerts, and other opportunities to engage.	~	~		~
Community Engagement - leadership training, advocacy training, community listening sessions, and support for community organizers.	~	~	~	~

Policy Target 1. Protecting Our Gains and Core Values

Definition: Protecting our statewide health coverage and access gains, while maintaining a commitment to our values of equity, addressing social determinants of health, and securing coverage for uninsured and underinsured populations.

Policy target 1 reflects advocates' prioritization of protecting health policy successes, particularly considering the federal environment. This means ensuring the focus is on sustaining current gains even if they are not yet fully achieved successes, and promoting core values like equity and the social determinants of health. In 2017, Grantees deployed various tactics to neutralize threats to critical health policies and programs, including Medicaid, Connect for Health Colorado, the Accountable Care Collaborative, and CHP+.

Some grantees focused on engaging directly with the Colorado Congressional delegation. The aim of these

specifically Republican meetings, with the lawmakers, was to educate people on the potential impacts of changes to the ACA and Medicaid expansion. Advocates also worked through coalitions to influence policymakers. For example, the Protect Our Care coalition organized to protect coverage gains and access to care under ACA. The coalition included various grantees and adopted a range of tactics including press conferences, a rally, messaging, and consumer engagement with policymakers. Other grantees trained key partner associations on useful issue frames and associated messaging to influence important constituencies. For example, a multi-stakeholder group including organizations like the Denver Chamber of Commerce came together to advance the frame that "repealing ACA is bad for businesses." Many of those involved in these efforts feel they contributed to the failure of the legislative effort to repeal and replace Obamacare.

Some grantees who maintain networks of advocates have similarly focused on educating and activating their members, including efforts to train members on the Medicaid system and ways to engage at both the legislative and regulatory levels. Recognizing that most of their members do not understand the seriousness of the threat, grantees noted that a significant portion of their work with partners is for education and awareness building. Over the past year, these efforts have increased the number of consumers with the ability and willingness to engage. Moreover, grantees learned important lessons about engaging consumers, including the necessity of contextualizing issues, providing multiple channels for advocacy, and approaching community engagement as a long-term investment.

To reach the wider public, many grantees prioritized media engagement. Motivated to educate the public about the costs of proposed federal changes to health care and to correct mistaken views on programs like Medicaid, many wrote letters to the editor (LTE), opeds, and gave interviews to trusted media outlets. In some cases, articles written by grantees led to consumers calling their representatives. For example, Colorado Gerontological Society's articles included a request for readers to call members of the Joint Budget Committee, who later reported voting against a proposal in part because of those calls.

Often, advocates engaged the media by drawing on reports or other analyses conducted by themselves or partners or bringing in stories from affected populations. Some grantees prioritized building their capacity to influence media, including through story banking, training spokespeople in different media markets to localize issues, and deepening relationships with the media. In coalition, grantees have focused on sharing materials like fact sheets and talking points.

Protecting Gains in 2018 - Convening Discussions

Given the uncertain state of health care at the federal level, the advocates at the December 2018 convening continue to see protection of Medicaid, CHP+, Connect for Health Colorado, the Healthy Kids Colorado Survey, and other programs as an essential task in 2018. Advocates also pointed to other emergent issues which threaten their constituents,

including initiatives that would allow individuals, businesses, or government to use their religion to discriminate, including in health care settings.

Strategies identified at the convening focused on community engagement, efforts to educate and connect local community leaders to advocacy organizations, nurturing and starting broad-based coalitions to speak out against rollback efforts, building capacity for media engagement, and continuing to engage policymakers.

Advocates noted a few specific opportunities to come together for action:

- **Spokespeople Network** support the development of a shared network of issue experts and those with lived experience and willingness to talk about the importance of preserving key policies and programs.
- "Advocacy Days" Calendar work together to schedule with advocacy organizational partners to streamline and increase the impact of effort to advocate with lawmakers.
- Research the "Value" of the Social Safety Net fund a research project to capture the value of social programs like Medicaid in ways that resonate with a wider audience.

Policy Target 2. Consumer-driven Health Care System Structure and Design

Driving cost containment, payment and delivery reform, and integration of care (including primary care, specialty care, oral health, behavioral health, and substance use treatment) policy change that better meets consumer needs and elevates their health outcomes.

Policy target 2 reflects the close relationships advocates see between the policy priorities of cost containment, payment and delivery reform, and integration of care. Advocates incorporated consumer-driven language into this policy target to reflect their commitment to keep the focus on consumers and their goal of redesigning the system to work for people. In 2017 grantees focused on

improving Medicaid and the Exchange, securing payment parity between physical and behavioral health through the ACC 2.0 contracts, addressing the Hospital Provider fee, a range of issues related to mental health, the intersection of criminal justice and health, and equity for marginalized populations including the LGBTQ population.

At the legislative level, grantees implemented a variety of tactics around connecting consumers to legislators to engage them more in the legislative process. This included holding "lobby days," bringing consumers to testify at committee hearings, and advocating to get those with lived experience on taskforces. Some organizations focused on building up their list of consumers willing to testify, while others, largely those with a lot of experience and connections to professional lobbvists, engaged directly with policymakers, aiming to influence the committees through testimony and draft legislation. Finally, other grantees focused on ways to improve their legislative strategy. For example, one grantee put together a resource list that they send to all nonpartisan candidates running for city council, mayor, and school board in the counties surrounding Denver, thereby introducing themselves as a resource for legislators.

At the regulatory level, grantees contributed to multiple changes in regulatory policy by working closely with the Department of Health Care Policy and Financing, the Division of Insurance (DOI), and Connect for Health Colorado to improve programs and processes. This work included a spectrum of activities from data analysis to improve programs and providing research on important topics like the dual eligible Medicaid and Medicare populations to drafting comments on the ACC 2.0 redesign to influencing and strategizing with other advocacy organizations to advance a collective voice on redesign proposals. In addition to changes in regulatory policy, mental health advocates believe their sustained engagement with agencies has elevated the importance of mental health as apriority within those agencies...

The challenges posed by the current political environment means grantees focused efforts on

public awareness and engagement to advance the policy target. Advocates continued to engage the media using a combination of trend reporting and stories to illustrate trends. These resources have been built up by some grantees in the form of story banks and networks of consumer advocates to influence the public through the media and other channels. Awareness and engagement also included efforts to expand capacity building with advocates, community leaders and teens including offering speaking engagements, trainings, and services like power mapping sessions.

Advancing Health Care Reform in 2018 - Convening Discussions

In addition to protecting the major health policies and programs, advocates at the December 2017 convening identified a range of issues to be addressed this year, including the DOI's rate review process, free standing emergency departments, the implementation of ACC 2.0 and the new Regional Accountable Entities (RAEs) contracts, and increased transparency and accountability from hospitals and prescribers.

In 2018, advocates see continued legislative and regulatory engagement as critical, with additional effort around direct consumer advocacy and support for efforts to organize the field around a common vision. Advocates pointed to a few specific opportunities for joint action:

- Legislation to Support SB65
 Implementation Recently passed Senate
 Bill 65 with new legislation to increase hospital accountability to new transparency requirements is going to require implementation support.
- Advocacy on RAE Contracting Advocate for the prioritization of parity in contracts during transitions from RCCOs to RAEs.
- Advocacy of the Opioid Interim Committee – Use the Opioid crisis as a wedge issue with legislators to address large challenges around mental health.

Policy Target 3. Fiscal Reform

Identifying innovative fiscal reform opportunities to address local and statewide fiscal challenges as it relates to health care spending and budgeting.

Fiscal reform was added as a policy target during the December 2016 convening in recognition of the ongoing challenges posed by the state's budget process and TABOR and by the heightened risk of losing Federal dollars because of a change in administration. In 2017, through legislative advocacy, advocates helped secure a major win in moving the Hospital Provider fee out of the TABOR cap into an Enterprise fund (Senate Bill 267). Other efforts focused on engaging the Joint Budget Committee (JBC) or cultivating the public to support challenges to TABOR in coming election cycles.

At the legislative level, work has primarily focused on influencing the JBC to allocate monies to specific priority areas, including funding for criminal justice-related health issues and mental health. In this work, advocates have both directly engaged policymakers and adopted novel techniques to connect policymakers to constituents, including handwritten postcards making the case for a larger fix to the budget process.

Outside of the legislature, advocacy organizations focused on capacity-building. Some organizations more involved in fiscal policy provided capacity building trainings to fellow advocates, including sessions on the budget process and ways to advocate effectively. One of these organizations also organized lunch and learn opportunities around the budget and budget opportunities, which was attended by legislators as well as community members.

Finally, one organization focused on building the knowledge and awareness of the public through a statewide tour. Since in Colorado, voters decide on tax policy through the ballot, the group hosted discussions around the state on the pros and cons of various tax proposals.

Advancing Fiscal Reform in 2018 – Convening Discussions

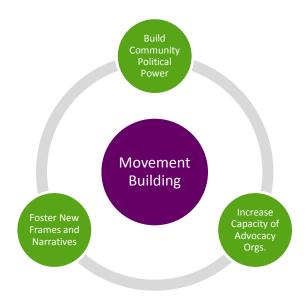
Advocates at the convening noted that going into 2018, opportunities to advocate to the JBC and to mobilize and educate the public remain, including opportunities to support the Governor's budget on line items related to the Older Coloradans Act. Elections in 2018 promise to include a tax policy measure on the ballot, providing a focus point for efforts to increase the salience of fiscal reform. Specific proposals include:

- Capacity Commitment from Advocacy
 Organizations Secure commitments from
 advocacy organizations to advocate for
 increased public investments during the 2018
 election cycle.
- Shared Language Emphasizing
 Community Use common, tailored
 messaging to reinforce the notion that "we
 are each better off when we are all better off."

Policy Target 4. Movement Building

Organizing, educating, and building leadership in local communities – and among historically marginalized populations – in an effort to unite communities on health coverage-related policies.

During the December 2016 convening, advocates noted lessons learned from the presidential election, As one put it, "we as a field failed to unite communities," especially rural. As a result, advocates identified movement building as an important target in and of itself to advance the other three policy targets. Since then, grantees have described three aims of their movement building: building political power in local communities, increasing the capacity of advocacy organizations, and fostering new frames and narratives related to health care. Some advocates see all three aims as critical to building a movement while others prioritize one or two. At this stage, there is not a clear consensus on whether one, two, or all three aims are sufficient to advance a movement strategy.



Those who focused on the first aim (building political power in local communities) stressed either the inherent value in empowering local communities to self-advocate and drive the agenda or the challenges in using traditional channels to influencing legislators. To empower local communities, these advocates focused on various types of community engagement activities, ranging from specific programs designed to build the advocacy skills of local leaders, to community conversations to share information and hear about local concerns, to providing financial and technical support to new groups emerging from local communities. These groups tended to stress the long-term nature of this work and the need for investments to maintain the process.

The second group focused on building the advocacy capacity of the field including forging a stronger web of relationships among both grassroots and grasstops organizations. The motivation for this focus generally related to need for policy work at various levels and the importance of cultivating consumers who can advocate in order to elevate the voices of community members. Over the past year, these consumer advocates have focused on participating in various roundtables and initiatives and encouraging aligned messaging. The main progress in cultivating consumer advocates was in laying the foundation for ongoing engagement, including the completion of trainings around advocacy and showing people how they further engage.

The final group, focused on fostering new frames and narratives related to health care, was motivated by the recognition that long-term change is likely to require a shift in how people think about health care and the underlying associated values. Moreover, this group stressed the challenge of combatting counterproductive frames which the opposition has effectively sowed for decades, including the narrative that "small government, bootstraps, and racism is a thing of the past." Work in this vein has focused on linking messages used by advocates to underlying shared values and general acceptable frames like "health care is a right." Other advocates have prioritized testing messages to find common space or identifying trusted messengers to engage new audiences.

Movement Building in 2018 - Convening Discussions

Rather than focus on movement building as a policy target at this year's convening, the conversation served to prepare advocates for another late December meeting focused exclusively on this topic. Since advocates met in May, there has been general consensus on the need to work on movement building and at this December convening the same three themes continued to surface.

First, advocates noted the importance of engaging new and oftentimes overlooked populations, including the younger generations and rural communities. Part of the challenge with this group of voters may be a lack of interest, competing beliefs about government and taxes, and the polarized state of current politics.

Second, related to focus on framing, some advocates stressed the importance of challenging prevailing narratives and the groups that support them. The challenge going forward is to both "reclaim the narrative about public good" by persuading people about, for example, the need for public investments, and challenging the "conservative interest group communication machine" which provides counterproductive frames.

Finally, advocates stressed the importance of getting to a "common, statewide agenda" to organize the work of advocates on movement building. Recognizing the power of aligned messaging and a consistent narrative, advocates talked about the importance of frames that cut across various issue areas and enable shared work.

How Advocates Can Strategically Influence Policy

Across policy targets, we asked bellwethers to provide suggestions on strategies advocates could use to influence the policy wins they are seeking. Many of these came up from advocates during the December 2017 convening, and others felt too far out of reach. Bellwethers highlighted the need to:

- Reframe issues;
- Find bipartisan consensus;
- Participate in coalition building; and
- Work directly with legislators.

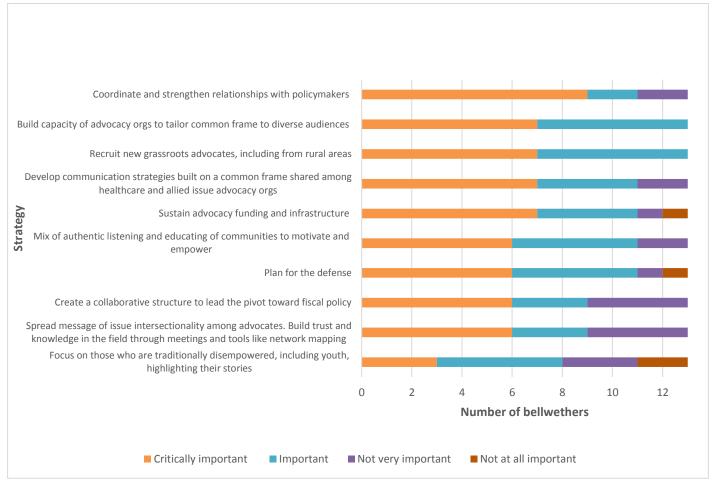
Bellwethers discussed the need to reframe issues away from politics and party lines and frame the issues around their impact to Colorado and the individual. One bellwether articulated this need well. "We have a big messaging and framing fight to win. We need to get people to stop thinking it's a binary choice. It's not access to health care or fix our roads. We need to talk about these things as part of the same ecosystem." Bellwethers also highlighted the need to ensure policy goals are supported by both sides of the aisle and holding legislators and policymakers accountable for their actions. One bellwether stated, "bipartisan consensus is key. Without it, you're looking at election year entrenchment." And another one echoed, "the number one thing advocacy groups can do is find bipartisan bicameral sponsorship of legislation. It sends a clear signal to both sides that it's not a democratic or republican issue." A few bellwethers focused on coalition building and encouraging advocates to form broad cross-sector coalitions of stakeholders to advance their policy goals. "I think the important thing is really building a broad cross section of stakeholders. If you just break things up into patient community or providers or underserved populations or people of color, I think it's too easy to paint any one of those groups into a

corner. But if you have a group like that with standing allies with a common goal in mind, that's where you start to see change." Groups like the Colorado Health Policy Coalition exemplify this commitment to bringing together diverse stakeholders for a common cause – protecting the ACA. Lastly, bellwethers discussed the need to work directly with policymakers both individually and through interest groups by discussing bill ideas, asking for sponsorship, and communicating the pros and cons of bills.

Advocates at the convening confirmed and advanced a frustration in acquiring bipartisan consensus. As a strategy, several felt that it would be impossible within the current environment to get consensus and that we need to think beyond what it means to gain consensus and look towards new ways to engage and measure success. One attendee stated, "Participation might be possible, occasional support may be real, but consensus is so far out of anything that looks like reality at all levels." Attendees also agreed that there is a need to reframe issues out of political affiliation to party lines. However, there is concern that we are so focused on elections, the parties, who is in power, and where the power lies that reframing could be an equally impossible strategy.

In addition to asking about strategies advocates could use to advance policy wins, bellwethers were also asked to rate a list of strategies advocates see as important in getting at the health policy wins they are seeking. Results indicated consensus that coordinating and strengthening relationships with policymakers is critically important but less so for the two current legislators interviewed. Next highly rated included building capacity of advocacy organizations to tailor common frames to diverse audiences and recruiting new grassroots advocates, including those from rural areas. The least amount of consensus was on focusing on those who are traditionally disempowered, including youth, and highlighting their stories. The remaining strategies had similar strength of consensus with most interviewees ranking it as either critically important or important. Table 2 outlines the complete list of strategies bellwethers rated.

Table 2. Bellwether Rated Lists of Consumer Advocate Strategies



BARRIERS AND ADAPTATIONS

Grantees identified various barriers that hindered their ability to make progress on the policy targets. Many of these barriers were reiterated by the bellwethers as challenges for advocates.

Polarized Political Environment

The health care and fiscal reform debates are marked by challenging frames and competing ideologies, most notably views related to small government, individualism, taxes, and the free market which predominate in some cities and in many rural areas. For example, a major challenge identified by grantees is that "access to health care" in the current political environment has become a toxic and polarizing idea. Many grantees struggled to figure out how to be effective with Republican lawmakers, especially a handful of elected officials who seem to be ideologically driven and not interested in fact-based

information. Additionally, Medicaid and other important programs are vulnerable to widespread misinformation and stigma about government and government programs. Finally, some grantees noted polarization on the left as well, with some groups only focused on getting Republican lawmakers out of office.

To adapt, grantees stressed the importance of community engagement and working with local partners to engage populations outside of the Denver metro area. In areas like Fort Collins and the Western Slope, grantees stressed the value of engaging through important community institutions like local churches and focusing on stories rather than discussions of policy. Other grantees are also working to streamline messaging, build narratives which resonant with these populations and those living in rural areas of the state, and identify allies in these communities to carry the message forward. For example, on fiscal reform some advocates have

worked to better understand which narratives and frames can be used to influence communities to see taxes and government spending as "public investment" and to adopt a willingness to consider the impact of low taxes on their communities.

Challenges at the Regulatory Level

The recent change in federal administration has posed other challenges to advocates. As the federal government continues to squeeze resources from health care, Medicaid threatens to take over a larger portion of the state budget. Rather than address the cost drivers of Medicaid, grantees see most legislators talking instead about how to cut important sections of the program. Moreover, barriers erected by new leadership at federal agencies has trickled down to work at the state-level, restricting the abilities of state agency allies. Even when adjustments to regulations can be counted as wins, some grantees noted that the allies are getting tired of "winning small" as large structural changes have not been realized.

Regulatory engagement faced other challenges as well, including agencies like the Division of Insurance citing a lack of statutory authority to dig into root causes of increased health care costs and poor performance by agencies in implementing their mandates. Other grantees noted difficulties in countering the efforts of well-moneyed opposition groups. In response, advocates relied on building stronger and more unified coalitions and taking advantage of recent opportunities to inform regulatory policy like the ACC 2.0 redesign.

Challenges Related to Fiscal Reform

Regarding the budget process, advocacy efforts were challenged by how money is allocated to lower levels of government, particularly county governments. Because county agencies are siloed, each agency has an incentive to fight for their budgets rather than work cross-agency to identify opportunities to save. Advocates have relied on research to illuminate the problem to make progress, although success is not yet in reach.

Finally, some noted the continued challenges posed by TABOR. Some grantees adapted by moving their efforts to the regulatory space while others focused efforts on community engagement, including identifying trusted messengers to conservative audiences.

Barriers Identified by Bellwethers

Bellwethers discussed some barriers they thought exist that prevent getting to health policy wins. This included getting bipartisan support, having limited state budget and resources to meet all the needs and having to pick priorities, and the fact that it is an election year – which means priorities and resources will be pulled into that area of focus.

OPPORTUNITIES TO SUPPORT ADVOCATES

Advocates at the December 2017 convening identified various ways the Colorado Health Foundation and other foundations in Colorado can support advocates in upcoming year. The supports requested fell into four broad categories:

- Technical Support: advocates noted that many of their activities would benefit from various types of technical support, including polling as a tool to aid in mobilizing communities, legal expertise to help translate recent events like the Aetna-CVS merger, and support to develop and set up an effective action alert platform with tracking to activate consumer activists.
- Messaging Support: advocates' plans to prioritize narrative change and movement building would benefit from resources to develop framing and messaging strategies, including the development of story banks, access to new messengers (eg. comedians), research on how best to engage different audiences, and services to translate complicated health system materials for the public.
- Collaboration and Convening Support: advocates continue to stress the value of collaboration and requested support to enable more effective collaborative work. They are interested in support for shared

- events and an advocacy day calendar, and collaborative resources like a phone line and food for convenings.
- General Operating Support: finally, advocates continue to request general operating support which allows them to take advantage of windows of opportunity to advance policy.

CONCLUSION

Overall, advocates have a clear sense of the road ahead for 2018's legislative session. They are well aware of the challenges they face, and how to generally navigate those challenge. Less clear are the ways to overcome them in a way that moves the policy targets forward. Though they did not face an election year in 2017, the federal political environment and the divided state political environment was similar to what we will face in 2018, and advocates were able to have a successful legislative session then. There is reason to hope for a successful 2018 session.

RESOURCES

- For more information about the Consumer
 Health Advocacy Funding Opportunity, please
 visit: http://www.coloradohealth.org/funding-opportunity-consumer-health-advocacy
- To learn about the convenings associated with this Funding Opportunity, please contact Hillary Fulton, Senior Program Officer, at: hfulton@coloradohealth.org
- For more information about the learning in this report, please contact Spark Policy Institute at: <u>alison@sparkpolicy.com</u>

