



2014 Legislative Guidebook to Colorado's Community Health Centers

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Dear Legislator,

Community Health Centers (CHCs) provide access to cost-effective, high quality primary and preventive care to Coloradans in your district and across the state. I hope this quick guide to Colorado's 19 CHCs, which includes important details, statistics, and contact information, is a useful resource during the 2014 legislative session and beyond.

Thank you for your commitment to ensuring access to health care and your continued support of CHCs.

My best for a fruitful 2014 legislative session,



Annette Kowal
CEO
Colorado Community Health Network

The Colorado Community Health Network (CCHN) represents Colorado's 19 CHCs that together are the backbone of the primary health care safety-net in Colorado. Since its inception in 1982, CCHN has made significant strides in ensuring that Colorado's low-income working families and individuals have access to affordable, efficient, high quality primary health care.

CCHN is committed to:

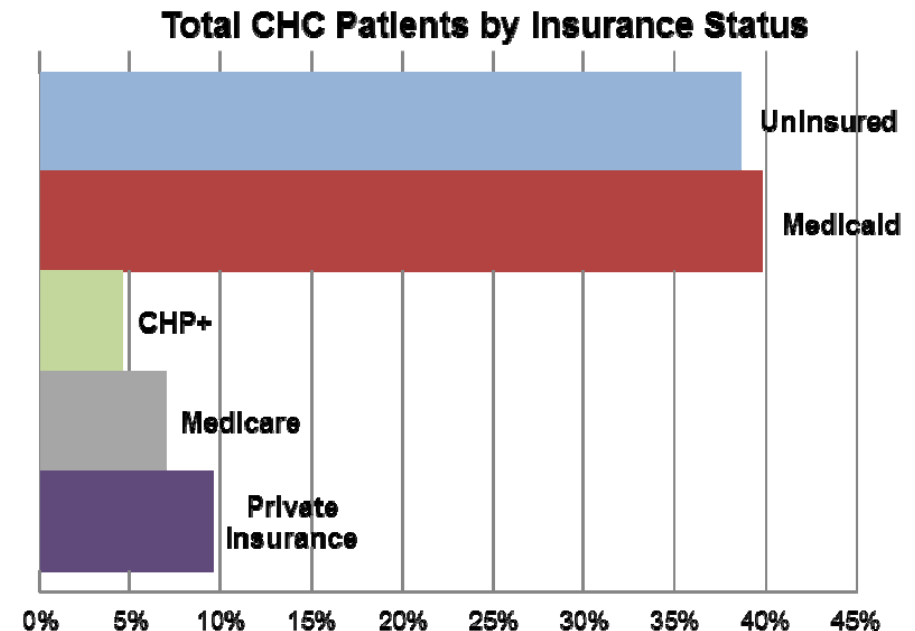
- Educating policymakers and stakeholders about the unique needs of CHCs and their patients;
- Providing resources to ensure that CHCs are strong organizations; and
- Supporting CHCs in maintaining the highest quality care.

About CHCs

Colorado's 19 Community Health Centers (CHCs) serve as the health care home for more than 600,000 individuals – over one in 10 people in the state. Patients are seen at a total of 168 clinic sites (see map on back cover). CHCs provide services that include:

- Primary and preventive health care for all ages
- Disease management
- Dental health care
- Mental and behavioral health care
- Referral to care for specialty treatment
- Care management

In 2012, more than 94 percent of patients seen at CHCs lived at or below 200 percent of the Federal Poverty Level (\$46,100 per year for a family of four in 2012). Ninety percent of CHC patients are either uninsured or enrolled in Medicaid, Medicare, or Child Health Plan *Plus* (CHP+).



CHCs are also called Federally Qualified Health Centers (FQHCs) and receive this federal designation because they are governed by five core principles:

- Serve all patients regardless of ability to pay for services
- Are located in high-need areas
- Provide comprehensive primary health care
- Are governed by community boards – 51 percent of board members must be patients
- Operate as nonprofits or public agencies with a mission to provide health care to low-income, working families

CHCs provide a health care home to low-income working individuals and families. CHCs also employ more than 3,800 individuals throughout rural, urban, and frontier areas of the state. In addition, more than 2,400 jobs in the community are created at companies who provide the CHCs with services, equipment, and supplies, and at the stores and restaurants where CHC employees spend their wages.

Although CHCs receive federal funding*, on average, federal grants from the Bureau of Primary Health Care comprise only 21 percent of CHC budgets. State funding makes up approximately 51 percent of CHC budgets on average. This funding includes:

- Medicaid – 36 percent of revenue
- Grants and contracts – 19 percent of revenue, including the state's Primary Care Fund, disease prevention and treatment grants, and the Colorado Indigent Care Program

Though the majority of patients cared for at Colorado CHCs have family incomes at or below 200 percent of the Federal Poverty Level, most wish to pay what they can for their health care. Fifteen percent of CHC revenues come from patient copayments for services, based on a sliding fee scale that keeps care affordable.

* One of Colorado's CHCs is a "look-alike" and does not receive federal funding

Cost-Saving, Quality Care

Studies have demonstrated that investment in CHCs results in cost-effective access to quality care. A 2011 *Health Affairs* study found that Colorado Medicaid patients seen at CHCs, when compared to those seen by other Colorado providers, have:

- One-third fewer hospital admissions;
- One-third fewer readmissions to the hospital within 90 days after discharge; and
- One-third fewer preventable hospital admissions for both acute and chronic preventable conditions.

Though CHC patient populations are traditionally underserved and deemed at-risk for health problems, CHCs meet or exceed national practice standards for chronic condition treatment. The coordination of care, use of evidence-based practices, behavior change coaching, and partnerships with other local health care organizations yields sizable savings in health expenditures - \$1,262 per patient according to one study.

In 2011, CHCs began applying this cost-effective, case management approach to the Department of Health Care Policy and Financing's Accountable Care Collaborative (ACC) program. Under the program, seven Regional Care Collaborative Organizations (RCCOs) work with local organizations in their region to improve health outcomes of Medicaid clients and save money. Each RCCO is responsible for care coordination among providers, community organizations, and government services. Within each RCCO, primary care providers offer a medical home for clients and work with the RCCO to coordinate care and manage client needs across specialties and along the continuum of care.

CHCs are playing an active role in the ACC statewide by:

- Serving as the health care home for nearly 50 percent of all of the Medicaid patients enrolled and attributed to a provider in the ACC;
- Working with RCCO partners to provide a complete continuum of care to patients; and
- Acting as leaders through active participation in the RCCO governance and advisory committee structure in several regions.

Access for All Colorado

Colorado CHCs have a plan to increase capacity to care for one million Coloradans by 2020. This plan is achievable through federal*, state, patient, and foundation support.

The Access for All Colorado plan to increase CHC capacity will:

- Help meet the health care needs of the uninsured now.
- Provide access to the thousands of Coloradans who will gain coverage under the Medicaid expansion and the state health insurance exchange in 2014.
- Ensure that CHCs continue to care for individuals that are expected to remain uninsured after health care reform is fully implemented.

***Note: Much of the funding from the Patient Protection and Affordable Care Act (PPACA) to expand CHCs has been eliminated through federal budget cuts.** Remaining funding from PPACA is uncertain, and when made available, will be through national competition. All PPACA grants must be used to expand hours, services, and sites in order to expand access to health care for new and existing patients. The funding comes with strict clinic growth requirements and cannot replace state funding. **State funding remains critical to CHCs.**



(970) 335-2288
www.axishealthsystem.org

Serving: La Plata County

Congressional District: 3
State Senate District: 6
State House District: 59

Southwest Colorado Mental Health Center (SWCMHC) was founded in 1960 to serve the five counties of southwest Colorado, SWCMHC began a transformation from a traditional community mental health center to an integrated health system in 2006 – bringing together primary care, mental health, substance use and healthy lifestyle resources, treating the whole person. In support of the transformation, the organization changed its name to **Axis Health System** (Axis) in 2010.



CEO:
Bern Heath, Ph.D.

Axis has embedded behavioral healthcare in 6 primary care sites including 3 school-based health centers where Axis serves as Medical Sponsor. In January of 2012 Axis opened its first fully integrated primary care facility; Cortez Integrated Healthcare.

In September 2013, Axis received a Federal 330 grant. With this grant, Axis has established its first and only Federally Qualified Health Center (FQHC) in Durango, Colorado. La Plata Integrated Healthcare opened on January 6, 2014 and plans to provide 8,620 visits to 2,925 patients at full operational capacity. Of these patients, an estimated 1,230 will be at or below 200 percent of the Federal Poverty Level and 17 percent will be uninsured. In addition, the clinic has provided more than 20 new jobs in La Plata County.

Axis Health System FQHC clinic location:
Durango



(303) 650-4460
www.clinica.org

Serving Adams, Boulder, and Broomfield counties

Congressional Districts: 2, 7
State Senate Districts: 17, 18, 21, 25
State House Districts: 10, 12, 31, 32, 35



President and CEO:
Simon Smith

Since 1977, Clinica Family Health Services, Inc. (Clinica) has provided primary health care to low-income, uninsured people living in southern Boulder, Broomfield, and western Adams counties. The People's Clinic site in Boulder has been providing primary care since 1970. Clinica believes that everyone should have access to basic health care, no matter their ability to pay. Clinica provides care to young and old, men and women, people with jobs and those without. Clinica offers patients the full spectrum of primary care, behavioral health care, chronic disease management, health education, preventive care, and dental care to help people stay well.

In 2012, Clinica provided 205,293 visits to 40,962 patients. Ninety-five percent of these patients lived at or below 200 percent of the Federal Poverty Level and 43 percent were uninsured. Additionally, 43 percent are under the age of 18, and 20 percent are five years old or younger. Clinica provides medical, dental, mental health, and full-service pharmaceutical services.

Clinica Family Health Services, Inc. clinic locations:
Boulder, Lafayette, Federal Heights, Thornton, and unincorporated Adams County



Health Care: (303) 293-2220
Administration: (303) 293-2217
www.coloradocoalition.org

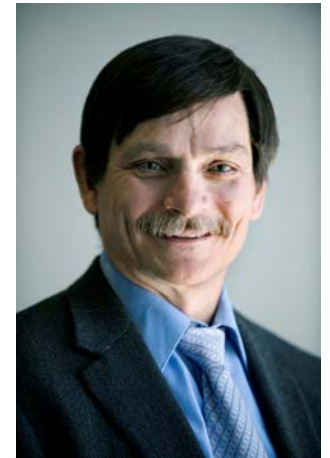
Serving Denver metropolitan area

Congressional Districts: 1
State Senate Districts: 31, 32, 33, 34
State House Districts: 2, 4, 5, 8

The mission of the Colorado Coalition for the Homeless (CCH) is to work collaboratively toward the prevention of homelessness and the creation of lasting solutions for homeless and at-risk families, children, and individuals throughout Colorado. CCH advocates for and provides a continuum of housing and a variety of services to improve the health, well-being, and stability of those it serves. Since its founding more than 25 years ago, the organization has earned state and national recognition for its integrated health care, housing, and service programs. In an effort to assist individuals and families, CCH offers a comprehensive approach that addresses the causes of homelessness as well as the consequences.

In 2012, CCH provided 105,311 visits to 13,896 patients. Nearly 100 percent of these patients lived at or below 200 percent of the Federal Poverty Level and 67 percent were uninsured. CCH provides integrated medical, dental, mental health, and substance treatment services, as well as housing and other homeless support services such as job training and benefits acquisition.

Colorado Coalition for the Homeless clinic locations:
Eight metro Denver area locations: Denver, including the Five Points, Lowry, Lower Downtown, and West Colfax neighborhoods, Aurora, and Lakewood. In addition, the CCH Mobile Health Outreach Program serves a variety of locations in the metro area.



President and CEO:
John Parvensky



(303) 602-4954
www.denverhealth.org/dchs

Serving City and County of Denver

Congressional Districts: 1
 State Senate Districts: 31, 32, 33, 34
 State House Districts: 1, 2, 4, 5, 6, 7, 8



CEO and
 Medical Director:
 Paul Melinkovich, M.D.

Founded in 1966, Denver Health's Community Health Services (DCHS) network includes eight Community Health Centers, an urgent care center, 15 school-based health centers, and a women's mobile clinic. DCHS serves one-third of Denver's children and 25 percent of Denver County's population.

In addition to providing primary care, DCHS also provides preventive and community services vital to Denver, including immunization outreach clinics, Head Start clinics, dental and mental health services, Women, Infant's, and Children (WIC) services and outreach and insurance enrollment services.

In 2012, DCHS provided 416,543 visits to 128,731 patients. Ninety-seven percent of these patients lived at or below 200 percent of the Federal Poverty Level and 28 percent

were uninsured.

Denver Health's Community Health Services clinic locations:
 Denver Health's Medical Campus, Eastside, La Casa, Lowry, Montbello, Park Hill, Westside, Westwood, and 15 school-based health centers



(970) 677-2291

Serving Dolores, Montezuma, and San Miguel counties

Congressional Districts: 3
 State Senate Districts: 6
 State House Districts: 58

The Dolores County Health Association/Dove Creek Community Health Clinic opened its doors in 1975 with the belief that health care should be accessible to all and neither lack of insurance nor low-income status should prevent access.

The Dove Creek Community Health Clinic, the only health care facility in Dolores County, offers primary health care, oral health services, and integrated behavioral health services all from a single site.

In 2012, Dove Creek Community Health Clinic provided 5,211 visits to 1,402 patients. Seventy-nine percent of these patients lived at or below 200 percent of the Federal Poverty Level and 43 percent were uninsured.

Dove Creek Community Health Clinic clinic location:
 Dove Creek



Executive Director:
 Dianne Smith



(719) 336-0261
www.highplainschc.net

Serving Prowers, Baca, Cheyenne, Kiowa, and Kit Carson counties

Congressional Districts: 4
State Senate Districts: 35
State House Districts: 64



Executive Director:
Jay Brooke

After many years of dedicated work by Prowers County citizens, High Plains Community Health Center (High Plains) opened its doors in 1995. The central goal is to provide access to medical and dental care for this rural area located on the eastern plains of Colorado. Nearly half of the people in Prowers County (population 12,551) live in families with incomes below 200 percent of the Federal Poverty Level. These are mostly hard working families that the local economy can only support with slightly above minimum wage jobs. The three scourges of a poor economy, rising health insurance premiums, and weather including drought, blizzards, and tornadoes, have intensified the struggles of all people

in this agricultural-dependent county. High Plains' mission centers around providing accessible primary health care to all, and particularly those who are unserved or underserved.

In 2012, High Plains provided 29,670 visits to 7,677 patients. Seventy-eight percent of these patients lived at or below 200 percent of the Federal Poverty Level and 37 percent were uninsured. High Plains Community Health Center provides integrated medical, dental, and mental health services. High Plains is recognized as a Patient Centered Medical Home by the National Committee for Quality Assurance and has been an economic booster in their community, providing over 90 jobs.

High Plains Community Health Center clinic locations:
Five sites in Lamar, one site in Wiley, and a migrant farm worker site in Granada



Metro Community Provider Network

(303) 360-6276
www.mcpcn.org

Serving Arapahoe, Adams, Jefferson, Douglas, and Park counties

Congressional Districts: 1, 2, 5, 6, 7
State Senate Districts: 4, 19, 20, 22, 25, 26, 28, 29, 30
State House Districts: 3, 23, 24, 27, 28, 30, 36, 40, 42

Metro Community Provider Network (MCPN) was established in 1989 in response to the primary health care needs of the medically indigent population in suburban Denver. Populations that face significant difficulties accessing care remain MCPN's primary clientele. In addition to providing health care, MCPN offers transportation and translation services to break down the barriers that limit access to care. With a service area the size of the state of Delaware (2,500 sq. mi.), and one of the largest population bases (1.2 million) of any Community Health Center in Colorado, MCPN strives to address the needs of one of the largest groups of underserved individuals in the state, approximately 21 percent of its service area's total population.



President and CEO:
Dave Myers

In 2012, MCPN provided 153,143 visits to 38,838 patients, of which 123,541 were medical visits. Ninety-five percent of these patients lived at or below 200 percent of the Federal Poverty Level and 55 percent were uninsured. MCPN provides medical, dental, and mental health services. MCPN's mission is to partner with the community to provide culturally-sensitive health services to meet the needs of each individual... every touch, every time.

Metro Community Provider Network clinic locations:
Arvada, Aurora, Edgewater, Englewood, Parker, Wheat Ridge, Littleton and Lakewood



(970) 945-2840
www.mountainfamily.org

Serving Garfield, Boulder, Clear Creek, Eagle, Gilpin, Pitkin, and Rio Blanco counties

Congressional Districts: 2, 3
State Senate Districts: 5, 8, 16
State House Districts: 13, 26, 37, 57, 61



CEO:
Ross Brooks

Founded in 1978, Mountain Family Health Centers (MFHC) are located in Glenwood Springs, Rifle, Basalt, and Black Hawk. In 2014, MFHC will open a fifth location in Edwards, CO. Each center is as unique as the community in which it is located, but all share the same mission: “to provide high-quality primary, behavioral, and dental health care in the communities we serve, with special consideration for the medically underserved, regardless of ability to pay.”

In addition to direct medical services, MFHC provides dental and behavioral services, as well as extensive community outreach with an emphasis on wellness, prevention, and early screening. MFHC is a statewide leader in using Health Information Technology to improve the quality of care delivered to patients.

In 2012, MFHC provided 43,030 visits to 12,673 patients. Eighty-five percent of these patients lived at or below 200 percent of the Federal Poverty Level and 50 percent were uninsured.

Mountain Family Health Centers clinic locations:
Basalt, Black Hawk, Glenwood Springs, Rifle, and Edwards (2014)



(970) 824-8233 – Craig
(970) 879-1632 – Steamboat Springs
www.nwcovna.org/community-health-programs.php

Serving Moffat and Routt counties

Congressional Districts: 3
State Senate Districts: 8
State House Districts: 26, 57

In 2005, the Northwest Colorado Visiting Nurse Association (NWCOVNA) took over a small community clinic in Craig and grew it into a Community Health Center (CHC), which became a designated Federally Qualified Health Center in August 2008. In January 2013, NWCOVNA opened a second CHC in Steamboat Springs. NWCOVNA’s CHCs serve clients from the northwest corner of the State of Colorado, primarily from Moffat and Routt counties.

NWCOVNA CHCs are currently piloting behavioral health and primary care integration, and work in very close cooperation with chronic disease management and wellness and prevention programs. NWCOVNA is proud of its achievements and looks forward to continuing to build capacity in order to serve the growing community of northwest Colorado.

In 2012, NWCOVNA CHC provided 11,704 visits to 3,056 patients. Eighty-two percent of these patients lived at or below 200 percent of the Federal Poverty Level and 55 percent were uninsured. NWCOVNA’s CHCs provide medical and mental health services, as well as referrals for dental services.

Northwest Colorado Visiting Nurse Association Community Health Center clinic locations:
Craig and Steamboat Springs



CEO:
Lisa Brown



(970) 323-6141

Serving Montrose and Delta counties

Congressional Districts: 3

State Senate Districts: 6

State House Districts: 58



CEO:
Debby Harrison-Zarkis

The Olathe Community Clinic, Inc. (OCC) received a New Access Point award in 2012, designating them as a federally qualified Community Health Center providing comprehensive primary health care to all ages.

The OCC is centrally located in the northwest section of Montrose County, midpoint between the Cities of Montrose and Delta, and is the nucleus for underserved and vulnerable populations, including migrant and seasonal farm workers. The Clinic offers integrated medical and mental health care and Outreach and Enrollment services for the ACA. The target population includes approximately 21,458 residents.

The OCC's service delivery model includes a wide range of medical, behavioral health, and support services across the lifecycles, including general primary medical care services, basic laboratory tests, screenings, immunizations, assistance with enrollment in Medicaid and the Insurance Marketplace, translation, and preventive health services.

In 2012, the OCC provided 1,399 unduplicated patients with 3,498 office visits. Eighty-five percent of these patients lived at or below 200 percent of the Federal Poverty Level and 48 percent were uninsured.

In the summer of 2014, the clinic will be moving to a new facility in Olathe that will provide the space to serve at least twice as many patients as they are currently.

Olathe Community Clinic, Inc. clinic locations:
Olathe



(719) 344-6453

www.peakvista.org

Serving El Paso, Douglas, Elbert, Lincoln, Park, and Teller counties

Congressional Districts: 5

State Senate Districts: 2, 9, 10, 11, 12

State House Districts: 14, 15, 16, 17, 18, 19, 20, 21

Peak Vista Community Health Centers (Peak Vista) provides a patient centered medical home model in the Pikes Peak region of Colorado through a network of 21 health centers. Founded in 1971, Peak Vista provides high quality integrated primary medical, dental, and behavioral health care, plus pharmacy, laboratory, and enrollment services. Women, children, seniors, working families, and the homeless receive care supported by system-wide electronic medical records and hundreds of community partnerships. Peak Vista is driven by the commitment to treat people with dignity and respect and a belief that helping patients improve their lives will result in improved health status and wellness.



President and CEO:
Pam McManus

In 2012, Peak Vista provided 298,739 visits to 66,017 patients. Ninety-four percent of these patients lived at or below 200 percent of the Federal Poverty Level and 33 percent were uninsured.

Peak Vista Community Health Centers' clinic locations:
Colorado Springs, Divide, Falcon, Fountain, Cripple Creek, and two mobile centers serving all of the Pikes Peak Region.



(719) 775-2367
www.pmchc.org

Serving Lincoln, Adams, Arapahoe, Elbert, and Kit Carson counties

Congressional Districts: 4
State Senate Districts: 1, 25, 29
State House Districts: 30, 63, 64



CEO:
Morgan Honea

Plains Medical Center, Inc. (PMC) was established as a Community Health Center in 2003. PMC currently serves over 5,000 square miles along the I-70 corridor in eastern Colorado.

Patients rely on PMC for medical, dental, and behavioral health services because of the organization's ability to overcome the unique geographic and socioeconomic barriers facing each of its diverse communities. At PMC, patients receive an integrated electronic medical and dental record to ensure that the care they receive is coordinated, consistent, and high quality. Furthermore, PMC is dedicated to a

culture of collaboration and quality improvement in an effort to more effectively manage disease and reduce the burdens of duplicate and unnecessary services on its patients and payers.

In 2012, PMC provided 39,420 visits to 9,560 patients. Seventy percent of these patients lived at or below 200 percent of the Federal Poverty Level and 30 percent were uninsured.

Plains Medical Center clinic locations:
Flagler, Kiowa, Limon, and Strasburg



Pueblo
Community
Health Center

(719) 543-8711
www.pueblochc.org

Serving Pueblo and Huerfano counties

Congressional Districts: 3
State Senate Districts: 3, 35
State House Districts: 46, 47, 62

Pueblo Community Health Center, Inc. (PCHC) began in 1983 with the mission of providing primary health care to those in need, regardless of their ability to pay. Thirty years later, over 24,000 residents of Pueblo have received their behavioral, dental, and health care at PCHC.

In 2009, PCHC built a 41,000 square foot Colorado Avenue Clinic to accommodate the on-going need. With growth expected to swell again in 2014 post-ACA implementation, the Colorado Avenue Clinic is slated for capital expansion that will increase the integrated care capacity to accommodate up to 10,000 new patients in the coming decade. Currently, PCHC has 12 locations in Pueblo and Huerfano counties, including four school-based wellness centers.

Partnerships within the community are critical to PCHC's ongoing success and include St. Mary-Corwin and Parkview Medical Centers, the Pueblo City-County Health Department and Department of Social Services, Spanish Peaks Mental Health Center, Posada Homeless Shelter, Pueblo City Schools and County School District 70, Pueblo Migrant Coalition, Pueblo Step Up, Southern Colorado Family Medicine and Parkview Residency Clinics, and the University of Colorado Schools of Dentistry, Medicine, and Pharmacy. These collaborative relationships enable PCHC to provide an integrated continuum of care.

The population served by Pueblo Community Health Center is diverse. In 2012, 24,330 patients from newborn to over age 85 accessed services and 112,819 medical, dental, and mental health visits were provided. Over 96% of these patients lived at or below 200 percent of the Federal Poverty Level and 34 percent were uninsured.

Pueblo Community Health Center, Inc. clinic locations:
Pueblo, Avondale, and Walsenburg



CEO:
Donald Moore

Salud

Family Health Centers

(303) 892-6401, (800) 388-4325
www.saludclinic.org

Serving Weld, Adams, Boulder, Larimer, Logan, Morgan, Phillips, Sedgewick, Washington, and Yuma counties

Congressional Districts: 2, 4, 6, 7
State Senate Districts: 1, 14, 15, 17, 21, 23, 25
State House Districts: 32, 49, 52, 56, 63



President and CEO:
John Santisteven

Plan de Salud del Valle, Inc., also called Salud Family Health Centers (Salud), was founded in 1970 in response to critical health needs of the migrant farm worker population in the Fort Lupton area. Forty-two years later, Salud has evolved into an extensive primary health care delivery system with nine community, migrant, teen, children, and women's health clinics in northeastern and north central Colorado, as well as a mobile unit that provides health outreach services throughout the service area.

Salud maintains a firm commitment to provide quality primary medical and dental care to all community members and does not turn patients away based on a patient's insurance coverage or ability to pay. All services are delivered in a culturally sensitive and linguistically

appropriate manner ensuring patient satisfaction and compliance, with an emphasis on prevention and early intervention. Salud has developed collaborations with other area health services providers to insure a strong referral system.

In 2012, Salud provided 279,480 visits to 72,669 patients. Ninety-seven percent of these patients lived at or below 200 percent of the Federal Poverty Level and 41 percent were uninsured. Salud Family Health Centers provides medical, dental, and mental health services.

Salud Family Health Centers clinic locations:
Brighton, Commerce City, Estes Park, Fredrick, Ft. Collins, Ft. Lupton, Ft. Morgan, Longmont, and Sterling



Sheridan Health Services

COLLEGE OF NURSING
UNIVERSITY OF COLORADO

(303) 797-4260
www.sheridanhealthservices.com

Serving City of Sheridan and surrounding communities

Congressional Districts: 1
State Senate Districts: 26, 32
State House Districts: 1, 3

Sheridan Health Services (Sheridan) was designated as a federally qualified Community Health Center (CHC) grant-ee in 2012.

In 1995, Sheridan Middle School opened a school-based health center as a pediatric community-based safety-net clinic. Since 2005, The University of Colorado College of Nursing (CUCON) has been fully staffing the practice as an integrated care model with behavioral health. Sheridan has opened an additional, free standing CHC with funds from the Affordable Care Act. Together, the two clinics serve the City of Sheridan and surrounding communities.



CEO:
Erica Schwartz

Sheridan is a nurse-managed health care entity, the only CHC of this type in Colorado. Providers from CUCON allow Sheridan to offer a variety of health care services that focus on wellness and disease prevention. This partnership with CU led to Sheridan applying for and receiving the CHC grant. Additionally, they have partnered with CU School of Dental Medicine and Skaggs School of Pharmacy and Pharmaceutical Sciences to provide oral health and pharmacologic services.

In 2012, Sheridan provided 5,985 visits to 1,861 patients. Ninety-seven percent of these patients lived at or below 200 percent of the Federal Poverty Level and 38 percent were uninsured. Sheridan provides integrated medical, dental, prenatal, pharmaceutical, and behavioral health care services.

Sheridan Health Services clinic locations:
Denver and a school-based health center in Englewood



summit community
CARE CLINIC

(970) 668-4040
www.summitclinic.org

Serving Summit County and Neighboring Communities

Congressional District: 2
State Senate District: 8
State House District: 61



CEO:
Sarah Vaine

Summit Community Care Clinic (Summit) was established in 1993 as a one-night-a-week walk-in clinic staffed entirely by volunteers and managed by Summit County Public Health. Over time Summit added extra evening hours and eventually day-time hours. In 2006, Summit separated from Summit County Public Health and became an independent non-profit.

Summit became a Federally Qualified Health Center Look-Alike (Look-Alike) in 2012. The Look-Alike designation

means that Summit meets the standards and requirements of the federally qualified Community Health Center program but does not receive the federal grant that other Colorado CHCs receive, though they are eligible to apply for this funding in the future if it becomes available. Summit operates five clinics in Summit County, one primary care site and four School-Based Health Centers, providing integrated medical, dental, prenatal, pharmaceutical, and behavioral health care services.

In 2012, Summit provided 14,931 visits to 4,250 patients. Eighty-five percent of these patients lived at or below 200 percent of the Federal Poverty Level and 89 percent were uninsured.

Summit Community Care Clinic clinic locations:
Frisco



(970) 353-9403
www.sunrisecommunityhealth.org

Serving Weld and Larimer counties

Congressional Districts: 2, 4
State Senate Districts: 13, 15
State House Districts: 50, 51

Sunrise Community Health (Sunrise) began in 1973 as a migrant health clinic. Today, the family medicine, pediatric, prenatal, dental, and school-based health centers are health care homes for more than 34,000 people in northeastern Colorado. Sunrise is a recognized leader in integrated care, advanced Health Information Technology (HIT), safety net collaborations, and professional health education.



President and CEO:
Mitzi Moran

Sunrise co-founded the North Colorado Health Alliance, a community collaboration focusing on the low-income, uninsured, and underinsured people within its service area. Partners include community health, public health, hospital, behavioral health, specialists, local foundations, education, county commissioners, and county social services. Projects focus on integrated service expansion, shared HIT infrastructure, workforce development, and system accountability and efficiencies.

In 2012, Sunrise supported the health of 33,252 patients with 137,616 clinic visits. Ninety-five percent lived at or below 200 percent of the Federal Poverty Level (FPL), 71 percent lived at or below 100 percent FPL, and 44 percent were uninsured. Sunrise offers medical, dental, and behavioral health services, as well as laboratory, radiology, pharmacy, and patient education services to people regardless of their ability to pay.

Sunrise Community Health clinic locations:
Greeley, Evans, and Loveland



UMC

UNCOMPAHGRE MEDICAL CENTER

(970) 327-4233
www.umclinic.org

Serving San Miguel and Montrose counties

Congressional District: 3
State Senate District: 6
State House District: 58



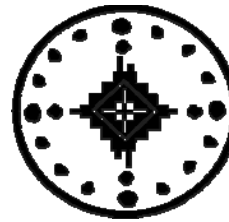
Executive Director:
Lainie Conley

Uncompahgre Medical Center (UMC) has been serving the frontier region of southwest Colorado for over 33 years in a primary service area of 2,000 square miles. UMC is a single-site CHC that offers medical, dental, and behavioral health services under one roof. The diversity of care offered is of great significance, as the nearest hospital and population center is 90 minutes away. UMC is committed to eliminating financial and geographic barriers to care while constantly refining the health care delivery model to manage costs, assure high-quality care, and encourage a healthy community.

UMC has a small, dedicated, high-performing staff that is aware of their contribution to the region and prepared for the changing future of health care. UMC partners with other Community Health Centers, Tri-County Health Network, Colorado Midwest Center for Mental Health, Rural Health Centers, regional hospitals, state agencies, county agencies, and private foundations that are aligned with the UMC mission.

In 2012, UMC provided 7,460 visits to 2,206 patients. Sixty-two percent of these patients lived at or below 200 percent of the Federal Poverty Level and 28 percent were uninsured.

Uncompahgre Medical Center clinic location:
Norwood



Valley-Wide Health Systems, Inc.

(719) 589-5161
www.vwhs.org

Serving Alamosa, Bent, Cheyenne, Conejos, Costilla, Crowley, Delta, Fremont, Kit Carson, Mesa, Mineral, Montrose, Otero, Rio Grande, and Saguache counties

Congressional Districts: 3, 4
State Senate Districts: 1, 2, 6, 7, 35
State House Districts: 47, 54, 55, 60, 62, 64, 65

Valley-Wide Health Systems, Inc. (Valley-Wide) is committed to providing safe and effective health care services in a respectful and inclusive manner with special consideration for medically underserved populations.

In 2012, Valley-Wide provided 144,250 visits to 35,552 patients. Eighty-eight percent of these patients lived at or below 200 percent of the Federal Poverty Level and 36 percent were uninsured. Valley-Wide provides integrated health services encompassing medical services, dental health services, physical therapy and works with community partners to provide behavioral health services in Valley-Wide clinics.

Valley-Wide Health Systems, Inc. clinic locations:
Alamosa, Antonito, Center, La Jara, Monte Vista, San Luis, Moffat, Canon City, La Junta, Las Animas, and Rocky Ford. Valley-Wide Health Systems, Inc. also arranges for the provision of health care services to farm workers in Burlington, Cheyenne Wells, Grand Junction, and Palisade.



President and CEO:
Gigi Darricades



Find out more about CCHN and Colorado's Community Health Centers by visiting www.cchn.org, following us on Facebook at www.facebook.com/coloradocommunityhealthcenters and Twitter www.twitter.com/CoCHCs, or contacting:

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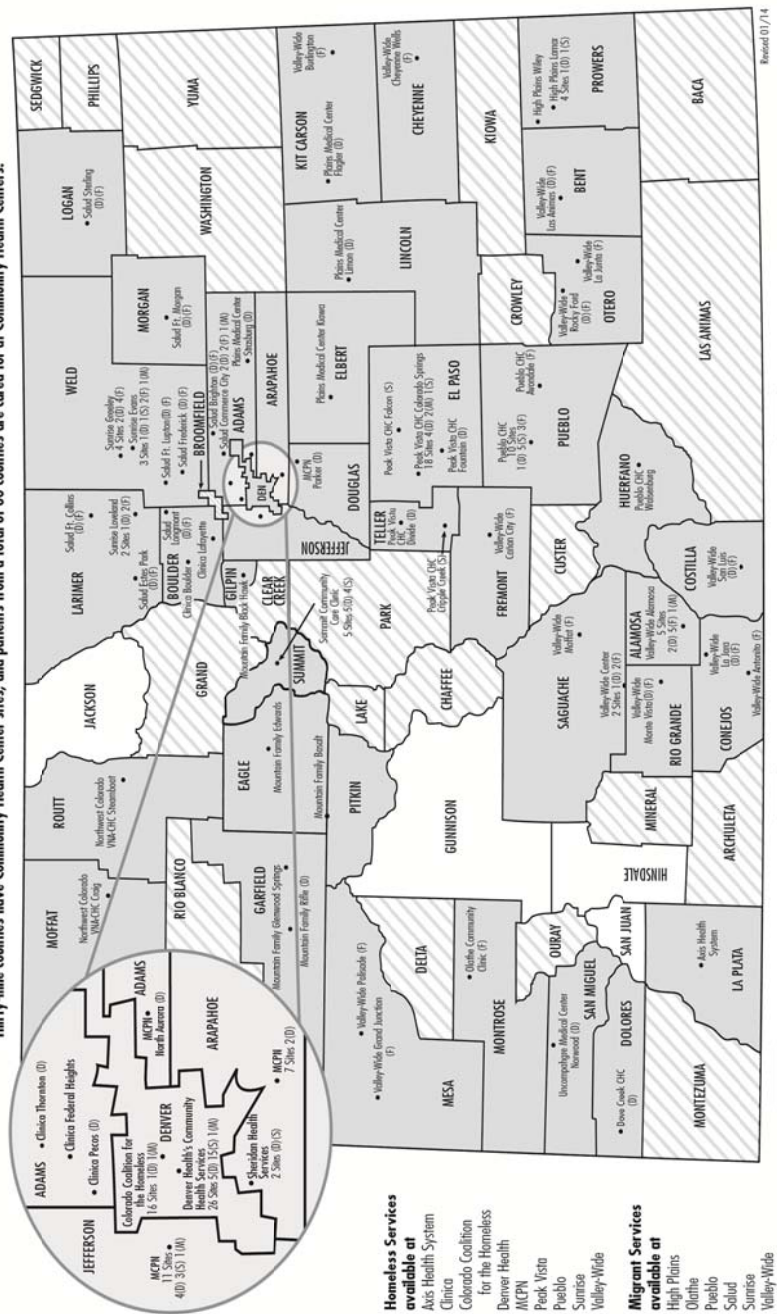
Or CCHN's government relations representative:



Jennifer Miles
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jennifer@milesgovtrelations.com

COLORADO'S COMMUNITY, MIGRANT, SCHOOL BASED & HOMELESS HEALTH CENTERS

(D) = Dental Services Available (S) = School-Based Health Center, limited services (F) = Farmworker Site, limited services (M) = Mobile Health Care Unit
Thirty-nine counties have Community Health Center sites, and patients from a total of 60 counties are cared for at Community Health Centers.



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Data sources:

1. Fact source: 2012 Uniform Data System.
2. Colorado Community Health Network, 2013 Economic Impact Analysis, <http://cchn.org/wp-content/uploads/2013/10/CCHN-Econ-Impact-Study-pages.pdf>
3. Jennifer Rothkopf et al., "Medicaid Patients Seen At Federally Qualified Health Centers Use Hospital Services Less Than Those Seen By Private Providers," *Health Affairs* 30:7 (July 2011).
4. Shi, L et al (2004). "America's Health Centers, Reducing Racial and Ethnic Disparities in Prenatal and Birth Outcomes" *Health Services Research*, 30(6), Part 1, 1881-1901