

NEWS RELEASE

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Study Shows Colorado Community Health Centers Reduce Medicaid Costs
CCHN Responds to Study Published Today

DENVER— A study published in [Health Affairs](#) today finds that Medicaid clients who use Community Health Centers (CHCs) are one-third less likely than Medicaid clients of private fee-for-service providers to have an emergency room visit, an inpatient hospitalization, or a preventable hospital admission. The study conducted by staff of the [Colorado Department of Health Care Policy and Financing](#) examined Colorado Medicaid claims data.

“Hospital and emergency room visits are more expensive than primary health care visits, and primary care visits can address health conditions before they become emergencies and can often prevent the need for more costly care altogether,” explained Polly Anderson, Policy Director of the Colorado Community Health Network (CCHN). “There have been multiple studies that show that Community Health Centers save Medicaid dollars, as well as delivering high quality care – this study focuses specifically on what Colorado Community Health Centers do.”

The study examined the claims data on 179,749 Colorado Medicaid enrollees ages 0 to 64 years old, who were not enrolled in managed care, and who had a usual source of care (called a medical home or health care home) with either a Community Health Center or a fee-for-service health care provider. The researchers found the following:

- Hospital Admissions: The odds of a CHC Medicaid patient being admitted to the hospital were 32 percent less than a private-FFS provider patient.
- Hospital Readmissions: The odds of a CHC Medicaid patient being readmitted to the hospital 90 days after discharge were 35 percent less than a private-FFS provider patient.
- Preventable Hospital Admissions: The odds of a CHC Medicaid patient being admitted to the hospital for a primary-care preventable condition were 36 percent less than a private-FFS provider patient overall.
 - For acute preventable conditions including dehydration, bacterial pneumonia and urinary tract infections: CHC patients were 34 percent less likely to be admitted to the hospital.
 - For chronic preventable conditions including diabetes chronic obstructive pulmonary disease (COPD), hypertension, congestive heart failure, angina and asthma: CHC patients were 38 percent less likely to be admitted to the hospital.

Colorado CHCs care for 33 percent of Medicaid enrollees, 25 percent of Child Health Plan Plus (CHP+) enrollees, and 33 percent of the state’s uninsured; yet CHCs comprise less than 3 percent of the Department of Health Care Policy and Financing’s annual budget. CHCs are also known as federally qualified health centers, and meet stringent federal standards and reporting requirements. The federal funding they receive is primarily to cover care of the uninsured and makes up approximately 17 percent of the annual budgets of Colorado CHCs.

“CHCs provide comprehensive primary and preventive care with a “medical home” or health care home approach, which we know and research shows helps people better maintain their health,” said Dave Myers, president and CEO of Metro Community Provider Network (MCPN). “Patients who have used us as their health care home over the years know we can help them stay healthier. We do that with case management, care

coordination, extended evening and weekend hours to increase access to care, use of electronic health records, and dedicated health care professionals with whom it is my honor to work every day.”

“As Congress and President Obama negotiate reductions to the federal budget, they must consider what programs work and which ones provide the best return on the federal dollar. CHCs are essential to the success of Medicaid, to the health of Medicaid clients, and as this study shows, to getting the best return on taxpayers’ dollars that we can get,” said Anderson.

“Colorado’s CHCs have a plan called Access for All Colorado to double the number of patients cared for by CHCs in our state over the next five to ten years. This expansion is planned to help care for the Coloradans that will become insured under Medicaid and the state Health Insurance Exchanges in 2012 and 2014, and to care for those who will remain uninsured,” explained Anderson. “This study shows that investments in Health Centers are wise investments. CHCs help control spending by providing high-quality, affordable care to communities in need, and reducing the overall cost of health care by helping people stay healthy, employed, in school, and out of the emergency room.”

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To read the full text of the study, click [here](#).

To read the abstract, click [here](#).

For a reprint, click [here](#).

To interview Ms. Anderson, please contact Maureen Maxwell at (303) 861-5165, Ext. 259, cell (303)913-9078, or maureen@cchn.org.

To contact Mr. Myers, please call him at cell (303) 619-0149, or his assistant Liz Martin at (303) 360-6276 to schedule a specific time. [MCPN](#) has a network of eleven Health Centers located throughout metropolitan Denver, serving Arapahoe, Jefferson, Douglas and Adams counties.

The Colorado Community Health Network (CCHN) is the collective voice for Colorado’s 15 Community Health Centers (CHCs) and their patients. CHCs provide a health care home to more than 500,000 of their community members - one in 10 people in Colorado - from 58 of the state’s 64 counties. Without CHCs, hundreds of thousands of Colorado’s low-income families and individuals would have no regular source of health care. CCHN’s mission is to increase access to high quality health care for people in need in Colorado. For more information about CCHN, please visit www.cchn.org.

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