Colorado by the Numbers: Thousands with New Health Coverage

More than 300,000 Coloradans have enrolled in new health insurance coverage options made available by health care reform. The Colorado Department of Health Care Policy and Financing (HCPF) reports that approximately 178,500 adults have enrolled in expanded adult Medicaid coverage as of April 15, 2014. In addition, nearly 124,000 individuals have enrolled in private health insurance purchased through the state’s marketplace, Connect for Health Colorado, as of April 26. Combined, a total of 302,407 Coloradans have new health care coverage through Medicaid or Connect for Health Colorado.

Increased awareness and enrollment efforts tied to health care reform also impacted statewide enrollment in categories beyond new adult coverage. HCPF recently estimated that approximately 22,700 children who enrolled in Medicaid and Child Health Plan Plus (CHP+) between October 2013 and February 2014 were previously eligible for a public coverage program but had not enrolled due to lack of awareness or other barriers. According to HCPF’s caseload reports for March 2014, the total number of Coloradans who now have health care coverage through Medicaid or CHP+ exceeds one million – or about one in five people living in Colorado.
CHCs have played an integral role in educating Coloradans about new coverage options and providing enrollment assistance. Outreach and Enrollment (O&E) staff at Colorado’s 19 CHCs helped more than 57,800 individuals enroll in coverage between July 2013 and March 2014. When compared to Colorado’s total number of new enrollees, CHCs could be responsible for up to 19 percent of those enrollments.

O&E workload was especially heavy in the first three months of 2014. About half of the total applications CHCs helped people submit between July 2013 and March 2014 were submitted at the beginning of this year. Many CHC staff worked overtime to make sure Coloradans got covered.

CHC outreach workers gave presentations to community members, set up tables at local grocery stores, and attended community events to spread the word. In addition, CHC staff worked hard to reach out to current patients who became eligible for Medicaid with the adult expansion, and patients who were enrolled in the Colorado Indigent Care Program, a discount program for uninsured or underinsured Coloradans who aren’t eligible for Medicaid or CHP+.

The O&E work that CHCs engaged in has had a real impact on Coloradans. Uncompahgre Medical Center’s outreach staff reported that they helped a woman who was battling cancer enroll in coverage – ultimately helping her receive more comprehensive care and reducing the cost of medical supplies. Peak Vista Community Health Center staff helped a small business owner who had already attended a different seminar understand his options for coverage. He said, “I learned more in 20 minutes with a patient guide than I learned during a full day seminar.”

The next open enrollment period to purchase private health insurance will begin November 15, 2014, but CHC O&E staff are staying busy with special enrollment periods, and assisting people with Medicaid and CHP+ applications, which are accepted year round.

**CHCs Discuss Advocacy and Honor Community Health Champions**

CCHN’s 2014 Policy & Issues (P&I) Forum provided Colorado CHC staff and board members with an opportunity to learn about CCHN’s top legislative priorities for the current legislative session and to spend a day at the state capitol speaking with elected officials. This year’s P&I focused on effective advocacy when working with legislators, health care reform implementation in Colorado, and the importance of restoring CHCs’ Medicaid Alternative Payment Method (reimbursement) rate.

The Forum included a policy panel on health care reform and the Colorado political environment. Panelists included Suzanne Brennan, Medicaid director at the Department of Health Care Policy and Financing (HCPF); Patty Fontneau, chief executive officer of Connect for Health Colorado; and Lorez Meinhold, senior associate at the Keystone Center. The panelists discussed health care reform in Colorado and how CHCs can continue to play an important role in ensuring Coloradans get health insurance coverage.

The Forum continued with a special lunch, as CCHN recognized two leaders for their tireless advocacy efforts supporting the Community Health Center movement. The 2014 Community Health Advocate Award was presented to Mitzi Moran, president and chief executive officer of Sunrise Community Health (Sunrise). Under her advocacy leadership, she reminds her staff of the importance of voter engagement and seeking new and innovative ideas for encouraging patients to register to vote. Due to Ms. Moran’s continued follow-up and encouragement of her staff to sign up as CHC advocates, Sunrise became a winner of CCHN’s first ever Advocacy Challenge, increasing their registered advocates by 56 percent between the months of March and August 2013.
CCHN also introduced its new Stanley J. Brasher Community Health Gratitude Award, named in honor of Jerry Brasher, recently retired CEO of Salud Family Health Centers and a leader in the Community Health Center movement in Colorado and nationally. The inaugural award was presented to Dr. Paul Melinkovich, director of Community Health Services at Denver Health. Dr. Melinkovich has advocated on behalf of Colorado CHCs at both the state and national levels, and developed and maintained relationships with members of Congress and state representative that have led to important policy achievements.

Celebrations continued into the evening as the 2014 Community Health Champions were recognized at the P&I Legislator Reception and Awards Ceremony. Sen. Larry Crowder (SD 35) and Rep. Crisanta Duran (HD 5) both received the Legislator Community Health Champion Award; Dr. Samuel Langstaff, who volunteers for Sheridan Health Services, received the Volunteer Clinician Award; and 9News received the Media Community Health Champion Award.

Sen. Crowder is emblematic of rural Colorado values that place constituents, friends and neighbors above politics. One of the biggest wins for Coloradans and CHCs has been the expansion of Medicaid. Sen. Crowder, recognizing that service to his constituents on this issue was imperative, voted in favor of this expansion and was the only member of his party to do so. He recognized that support for the Medicaid expansion was the moral choice and the most financially sound decision to insure the future of the health care structure in rural Colorado.

Rep. Duran is the chair of the House Appropriations Committee and the vice-chair of the Joint Budget Committee. Throughout her time in office, Rep. Duran has been a supporter of CHCs and of CCHN’s policy priorities. During the 2013 legislative session, she supported a bill to eliminate the three-month waiting period in the Child Health Plan Plus program, the bill to expand Medicaid eligibility to 133 percent of the Federal Poverty Level, a bill to create an adult dental benefit for Medicaid clients, and a bill for the creation of oral health community programs.

Dr. Langstaff has volunteered with Sheridan Health Services since 2000, seeing patients two days a week on a pro-bono basis. He has worked tirelessly to develop specialty referral resources, using his contacts from private family practice. Dr. Langstaff also works to raise funds for patients unable to pay for required medical visits, laboratory, imaging, or medications. His attitude, sense of humor, and commitment to patients and staff has been a true blessing to the Sheridan Health Services clinic.

9News was selected for the Media Community Health Champion Award for their valuable reporting on health care issues in Colorado. 9News has provided extensive coverage on the challenges faced by health care consumers and health care providers, including coverage of health care reform themes with the passage of the Affordable Care Act. 9News goes above and beyond to put health care and the health of Coloradans in the spotlight, and their reporters take care to depict families, children, and patients in a humane and respectful manner.
Colorado CHCs work hard to fulfill the requirements of the Patient Centered Medical Home (PCMH) model. Below is a snapshot of Colorado’s PCMH progress. Click here for supplemental information on the content below.

**PCMH SNAPSHOT**

CHCs meeting the Healthy People 2020 goal of 61.2% Controlled Hypertension.

50%

<table>
<thead>
<tr>
<th>Percentage of CHCs who have implemented Patient Portals</th>
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<tbody>
<tr>
<td>50% CURRENT 100% GOAL</td>
</tr>
<tr>
<td>High Plains Community Health Center 22%</td>
</tr>
<tr>
<td>Salud Family Health Centers 21%</td>
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<tr>
<td>Northwest Colorado VNA 14%</td>
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</tbody>
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% of patients enrolled in Patient Portal

5 Sites in the APCP Demonstration that will submit their NCQA PCMH applications for PCMH recognition by Oct. 1, 2014*.

6 Sites in the APCP Demonstration have submitted their NCQA PCMH applications for PCMH recognition.

*11 Colorado CHC sites are currently participating in the Centers for Medicare & Medicaid Services Advanced Primary Care Practice Demonstration. This pilot demonstration is a unique pay for performance model. For additional information, please click here.

Data source: internal documents from Colorado Community Health Network Advanced Data for Quality. 2014.
Santistevan is New CEO at Salud

John Santistevan is president and CEO of Salud Family Health Centers, taking over following the retirement of Jerry Brasher. Mr. Santistevan was formerly deputy president. He joined Salud in 1996, serving as chief financial officer. In that role, he oversaw the finance, information technology, billing and facilities departments, along with the management of all construction projects including land acquisition, financing, design and construction management.

Mr. Santistevan currently sits on the NACHC Board of Directors. He was the recipient of NACHC’s Jeffrey T. Latman Leadership in Health Care Finance Award in 2010. He is a member and has served as chair of CCHN’s Board of Directors. In addition, he is the treasurer for the board of the Colorado Community Managed Care Network (CCMCN), and is a member of the board of directors of Colorado Access.

Colorado CHC Representatives Visit D.C. and Make Strides at Capitol Hill

In March 2014, staff and board members from 10 of Colorado’s CHCs traveled to Washington, D.C., to visit Colorado’s congressional delegation and to participate in the National Association of Community Health Center’s (NACHC) annual Policy and Issues Forum. They fanned out across Capitol Hill and visited the offices of all nine Colorado members of Congress.

These meetings, as well as calls from other CHC supporters, resulted in all seven of Colorado’s U.S. representatives and both senators cosigning letters to the House and Senate Appropriations Committees supporting CHCs, asking the committees, “as you continue to face difficult choices on budget priorities, you support this proven and cost-effective model of care.”

In 2010, when Congress passed the Affordable Care Act (ACA), it created a five-year Health Center Trust Fund to expand the CHC network to care for approximately 20 million more people, double the number cared for by CHCs in 2010. This funding was in addition to the annual appropriation, also called discretionary funding, for the CHC program. The funding increased each year over the five-year life of the Trust Fund, with the intention of expanding access to primary health care for people newly insured under the provisions of the ACA.

However, in April 2011, Congress cut CHC discretionary funding (and that of other programs, particularly some funded by the ACA) by $600 million, plus a 0.2 percent across-the-board cut applied to all federal non-defense discretionary program (about $4.4 million for the CHC program). The annual discretionary funding for the Health Center program has not increased since then, and was reduced further as a result of budget legislation and sequestration cuts enacted by Congress. The Trust Fund expires on Sept. 30, 2015. This will result in a 70 percent drop in CHC funding for Fiscal Year 2016 from Fiscal Year 2015.
Without assistance from the Health Center Trust Fund, CHCs would have had to reduce staff and services, and close facilities. The Trust Fund has enabled CHCs to continue caring for their current patients, and expand and build some facilities in areas still underserved by the health care system. The last 15 years have seen successive presidential administrations and Congress working together to double the number of CHCs, growing from serving 11 million patients in 2000 to more than 22 million today, while remaining at the cutting edge of quality improvement, health IT adoption, and care transformation. The expansion of the CHC program has made significant progress in reducing barriers to access and health disparities in underserved communities nationwide.

Also facing a fiscal cliff is the National Health Service Corps (NHSC), a vital program that provides scholarships and loan repayment to health care providers who commit to serving in underserved areas. The NHSC currently receives the entirety of its funding from the ACA. Because of this, NHSC is funded only through 2015. The Teaching Health Center Program, which is an innovative effort focused on growing the supply of primary care providers trained in community-based settings, is also funded through the ACA with funding ending in 2015. Congressional intervention continues to be imperative to ensure continued funding for the Community Health Center program as well as both the NHSC and the Teaching Health Center.

**Peak Vista, Plains Medical Center Complete Merger**

Peak Vista Community Health Centers (Peak Vista) has finalized a merger with Plains Medical Center (PMC). Peak Vista and PMC announced the merger in December 2013, and have since worked on due diligence needed for the official merge.

The merger of these two high-quality CHCs will together provide even greater access to primary care. The merged organization, to be called Peak Vista Community Health Centers, will combine the best facets of a CHC serving a large urban-and-mountain area of Colorado with a smaller-but-geographically-widespread CHC serving the Eastern Colorado rural population. Together, the merged CHCs can better meet the needs of the communities they serve.

Peak Vista anticipates that the merger process will continue for some time. “There’s more work to be done,” said Kandi Buckland, Peak Vista’s chief operating officer. “As we work through the operational side of the merger, the goal is to deliver a seamless transition to our patients while simultaneously orientating staff to the new Peak Vista.”

Vicki Jo Moore, exiting vice chair of the PMC board, adds, “The main focus is to ensure that patients continue to get exceptional health care in a local setting. This merger will provide helpful support systems that mean our existing patients will continue to have access to great medical, dental and behavioral care in their own communities.”

Each founded in the 1970s, the two CHCs provide primary health care to a broad swath of Colorado. They are both federally qualified Community Health Centers, a health care model dedicated to providing comprehensive, high-quality, primary health care to communities and populations that otherwise are medically underserved. Peak Vista cares for 70,500 people within the Pikes Peak region through 21 outpatient centers in El Paso and Teller counties, while Plains cares for more than 9,400 patients in Eastern Colorado in a service area that extends over 5,000 square miles.
Loan Repayment Directly Benefitting Colorado's Safety Net

In October 2013, CCHN received funding from Kaiser Permanente Community Health Fund to build upon workforce and clinical quality efforts over the next three years. The new area of focus aims to expand and modernize the safety net workforce through loan repayment and skill development webinars for clinical support staff. CCHN has designed programs and activities to assist Colorado's CHCs and safety net clinics in 1) improving retention of health professionals who care for underserved Coloradans and 2) providing affordable training development webinars for entry and mid-level staff.

CCHN developed the Kaiser Permanente Educational Loan Repayment for Safety Net Clinical Support Staff Program in partnership with Colorado CHCs, Colorado Rural Health Center (CRHC) and ClinicNET. In January 2014, CCHN, CRHC and ClinicNET kicked off the first loan repayment cycle of the grant period. Two additional loan repayment application cycles will occur in January 2015 and January 2016. Learn more about loan repayment here.

During the first round of loan repayment, CCHN had an outpouring of applications from the safety net organizations, receiving 113 eligible applications. Representatives from CCHN, CRHC, and ClinicNET evaluated applications on the basis of a well-written personal statement, strong letters of support, quality of the application, commitment to serving the underserved, diverse background, rural/urban experience, safety net clinic type, health profession, and years of employment. The three organizations convened as part of the review committee and collectively determined the 26 award recipients, who received a total of $174,600 in loan repayment funds to pay off their education debt.

Click here for the full list of 2014 Kaiser Permanente Educational Loan Repayment For Safety Net Clinical Support Staff Program Award Recipients.

The Kaiser Permanente Loan Repayment Program is one of several programs CCHN administers to reward the service of those who work in medically underserved areas of the state. In addition to the loan repayment program, CCHN in partnership with CHAMPS developed six lunchtime learning professional skill development webinars. These webinars are taking place between April and September 2014, and include the following topics:

- Tell Your Money Who's Boss – Get the Most Out of Your Paycheck: Click here to view the archive.
- Create Great Credit
- Foundations for Influencing – Presuming Good Intent
- Foundations for Influencing – The Art of Developing Trust and Personal Power
- Foundations for Influencing - Influencing Through Negotiation
- Motivational Interviewing

Click here to view archived webinars. For more information and to register for future webinars, click here.

Learn more about all of CCHN's programs, events and training opportunities here: http://cchn.org/training-and-events/
Group Purchasing Update

On behalf of its members, CCHN serves as the Group Purchasing Organization (GPO), using the collective purchasing power of its CHCs to negotiate deeply discounted rates for certain goods and services. The savings achieved by these group purchasing arrangements help members lower the cost of caring for the underserved.

The following contracts are available under the CCHN GPO:

**Henry Schein Dental**
Discounts up to 21% for 4000 of the most commonly used dental items

**LabCorp**
Extensive price discounts for the top 2000 lab tests

**Sun Office Solutions**
Guaranteed delivery anywhere in Colorado within 2 business days

**TACHC - 340B Pharmacy Supplies**
CCHN members receive TACHC’s pharmaceutical group pricing discounts

The following are additional contracts available through CCHN and the NACHC’s Community Health Ventures (CHV) Value in Purchasing (ViP) Program:

**Henry Schein Medical**
Product portfolio encompasses high-quality, high-value products ideally suited for the needs of CHCS

**Staples Advantage**
Tailored pricing for CCHN members based on the national GPO pricing agreement

**McKesson Medical-Surgical**
McKesson mission is to streamline medical supply operations and improve CHC financial performance to deliver savings of up to 25% on operations for CCHN members

To participate in a GPO contract or to learn more, visit [http://cchn.org/group-purchasing/](http://cchn.org/group-purchasing/) or contact Katlyn Leight at kleight@cchn.org or (303) 867-9562.
Clinica RN Receives CDC Immunization Award

In April 2014, Delfina Ramirez, a nurse who has worked at Clinica Family Health Services, Inc. (Clinica) for 20 years, was named Colorado's 2014 Centers for Disease Control and Prevention Childhood Immunization Champion. The award honors individuals who are doing an exemplary job to promote childhood immunizations in their communities.

As nurse team manager at Clinica, Ms. Ramirez has worked toward standardizing vaccine administration during medical visits so that immunization becomes forethought, not an afterthought, for the parents of her patients. Ms. Ramirez assisted in developing a system that ensures vaccines are proactively administered to children through standing orders, rather than when a doctor specifically requests them. She also helped create a report that shows when vaccination opportunities are missed, and she provides feedback to colleagues about how to avoid such situations. Moreover, in the predominantly Spanish-speaking community where she serves, Ms. Ramirez connects with patients and their parents in culturally and linguistically appropriate ways. She is also a teacher, educating nurses and medical assistants on how to understand vaccine schedules and how to educate families about immunization.

“It’s inspiring to know that Delfina has dedicated so much of her nursing career to assuring that kids are fully immunized,” said Heather Blatchley, clinic director at Clinica’s Pecos Medical and Dental Clinic, where Delfina works. “She has done a tremendous amount to make our patients and our community healthier.”

Ms. Ramirez’s efforts have contributed to high rates of fully immunized children from birth to three years old who visit her clinic. In 2013, the Pecos clinic where Delfina works had an immunization rate of 96 percent, while the overall Clinica rate was 93 percent. In addition, Ms. Ramirez is recognized by her colleagues as a vaccine expert. They turn to her routinely for answers to vaccination questions, and she inspires them to strive for best practices. While the high numbers show great success, Delfina finds her motivation in keeping children well.

“There are so many diseases that we cannot prevent in our children, but vaccines give us the opportunity to prevent many devastating diseases like polio, measles, and pertussis,” Delfina said. “Parents trust us. We as health care providers have the responsibility to inform parents about preventing these diseases and the importance of the vaccines.”

Olathe Community Clinic to Change Name and Location this Summer

In January 2014, Olathe Community Clinic, Inc. (Olathe) purchased a building in downtown Olathe, Colorado, and began construction of what will be their new location. The new facility will allow Olathe to enlarge their space and provide outreach to more patients. It will be designed to meet the health care needs of Delta and Montrose counties. Construction on the new facility is slated for completion in August 2014.

As this transition occurs, Olathe is also rebranding to ensure their mission is fully understood by the community and other provider agencies. The new name, River Valley Family Health Center, will be effective after they move into their new building. For more information and construction progress, visit Olathe’s website: www.olatheCclinic.com.
Morgan Honea Appointed New CORHIO Executive Director
The Colorado Regional Health Information Organization’s (CORHIO) board of directors named Morgan Honea as the new executive director. Previous to joining CORHIO, Mr. Honea was the chief executive officer at Plains Medical Center, where he recently helped lead negotiations for the Plain’s merger with Peak Vista Community Health Centers. Morgan assumed his new role at CORHIO on May 1, 2014.

Long-Time Volunteer Clinician Remembered
The staff of CCHN extends their condolences to the family of Dr. C. Neal Jepson, CCHN’s 2013 Volunteer Clinician of the Year. Dr. Jepson passed away Jan. 13, 2014.

Dr. Neal Jepson donated his time and expertise to patients at Peak Vista Community Health Centers in the Pikes Peak region. He was a published ophthalmologist specializing in retinal disease and intraocular lenses. A longtime Colorado Springs resident, he volunteered his time in order to give back to a community that gave him so much.

Dr. Jepson volunteered at Peak Vista’s Volunteer Specialty Center and was well known for his willingness to see last-minute referrals that needed immediate care. He was one of Peak Vista’s more active volunteers and his patients appreciated the level of care and education he provided.

In addition to caring for patients, Dr. Jepson actively recruited other specialists to support Peak Vista’s patient population, since there is always a waiting list for a variety of specialties. He always said yes when called upon, and was genuinely happy to be at Peak Vista volunteering his time.

Mountain Family Opens New Clinic
During the Mountain Family Health Center (MFHC)-Edwards Grand Opening celebration on February 27, 2014, Ken Davis, PA-C, and MFHC Medical Director of Integrated Care, reads a letter from Colorado President of the Senate, Morgan Caroll, congratulating MFHC on opening a new access point.
Pueblo CHC Contributes to State Meaningful Use Public Health and Technology Objective

Pueblo Community Health Center is one of six providers in Colorado who contributed to the achievement of a recent success in health information technology: participants in the reporting of child immunizations using the Colorado Regional Health Information Organization (CORHIO) interface with the Colorado Immunization Information System (CIIS) recently exceeded 40,000 immunizations reported to CIIS this way. The CIIS registry helps providers contribute to an ongoing medical record to ensure their patients receive all the recommended immunizations in a timely manner and to reduce duplication of shots.

“The CORHIO interface to CIIS has saved Pueblo Community Health Center staff approximately two hours a day and led to greater efficiency. We no longer have to enter immunizations manually into CIIS,” says Chad Hess, RN, PA-C, director of nursing services, Pueblo Community Health Center. “And the process of testing and verifying accuracy of immunizations received into CIIS was not labor intensive.”

Six providers in the state are successfully sending immunization data to CDPHE through CORHIO, including Pueblo CHC. Five hospitals or systems in the state are currently in the process of testing their immunization registry interface, and several more providers are in the process of implementing their immunization interfaces. For more details, please visit http://www.corhio.org/news/corhio-e-newsletter/corhio-participants-exceed-40000-immunizations-reported-to-ciis-using-hie.aspx

TRAINING BRIEF

CCHN Hosts NACHC Corporate Compliance and Grants Management Training

In late February 2014, 70 participants from Colorado and out-of-state CHCs gathered in Golden, Colorado, for the CCHN-hosted NACHC Corporate Compliance and Federal/Financial Grants Management training. Presented by a skilled team of lawyers from Feldesman Tucker Leifer Fidell LLP, the two-day training featured structured sessions concentrated on the evolution of corporate compliance and clinical risk management.

During the first day of training, participants learned about the seven key elements to implementing an effective compliance program, the enforcement environment, and financial risk areas.

The second day of training took an in-depth look at financial and federal grants management for CHCs. Participants learned about new uniform grant guidance, budget Provider Identification Numbers (PIN), how to adequately document, and things to avoid when utilizing federal funds.

As a result of this training, CCHN is putting together a corporate compliance peer group. The purpose of this group is to offer a space where CHC staff responsible for corporate compliance activities can meet and discuss challenges, issues, solutions, and share resources with peers. If interested in participating in this group, please contact Erin Lantz at erin@cchn.org or Suzanne Smith at suzanne@cchn.org for more information.
CCHN New Additions and Staff Changes

Joanna Leonard is CCHN’s quality initiatives coordinator for the Quality Initiatives Division (QID), joining CCHN in February 2014. Her primary responsibility is to help CHCs advance their clinical practice as part of their Patient Centered Medical Home (PCMH) transformation efforts. Ms. Leonard earned a doctor of pharmacy degree from Rutgers University and a master’s degree in public health from Johns Hopkins University. Prior to CCHN, Joanna worked as a clinical pharmacist in both hospital and clinic settings.

Christine Howard is CCHN’s executive assistant, joining CCHN in February 2014. Her primary responsibilities are providing administrative support and coordination for various projects to Polly Anderson, COO, and Kerry Cogan, VP of managed care. Ms. Howard has an extensive background working in the private sector, including experience in event and conference planning and medical logistics administration.

McKenzie Rieder is CCHN’s quality initiatives coordinator for QID, joining CCHN in February 2014. Her primary responsibilities are working on the Institute of Healthcare Improvement’s scholarship program and PCMH transformation and recognition efforts. Ms. Rieder earned dual bachelor degrees in environmental studies and linguistics from the University of Colorado at Boulder. Prior to working at CCHN, McKenzie served as a Peace Corps Volunteer in Guadalupe, Nicaragua, as an environmental education teacher.

Jill Phillips is CCHN’s operations manager, joining CCHN in February 2014. Her primary responsibilities are coordination of contracts and insurance and corporate compliance. Ms. Phillips earned a bachelor’s degree from Colorado State University and has a certificate in human resources. Jill has extensive non-profit experience that includes accounting and office administration.

Ryan Flach is CCHN’s special projects assistant for QID, joining CCHN in April 2014. He is responsible for providing administrative and other programmatic support for QID projects that help CHCs provide high quality health care to patients. Mr. Flach earned a bachelor’s degree in psychology from the University of California at San Diego. Prior to working at CCHN, Ryan served as a Peace Corps Volunteer in a rural community in the Philippines, teaching English and public health at a public high school.

CCHN would like to say farewell and good luck to three staff members who greatly contributed to CCHN’s efforts - Nadine Carr, Julie Larkin, and Renee Karl. Nadine is now enjoying retirement, Julie will soon be relocating to Grand Junction, while Renee has moved on to new endeavors. We wish you well!

Polly Anderson is CCHN’s chief operating officer. She joined CCHN in 2004. Her primary responsibilities are working closely with the chief executive officer in the administration and execution of CCHN’s strategic plan. Her work also includes oversight of CCHN’s public affairs agenda, managed care contracting, technical assistance and training, community development, and CCHN operations. Ms. Anderson was formerly the chief policy officer.

Kerry Cogan is CCHN’s vice president of managed care. She joined CCHN in 2013. Her primary responsibility is helping the CHCs with managed care contracting strategies, including the newly formed CHC Independent Physician Association, Community Health Provider Alliance (CHPA). Ms. Cogan was formerly the director of managed care.

Kristen Pieper is the Covering Kids and Families (CKF) project manager, joining CCHN, the lead agency for CKF, in September 2009. Her primary responsibilities are to raise funds and ensure grant compliance, and develop and implement an advocacy strategy to reach the project’s goals. Ms. Pieper was formerly CCHN’s policy manager.
2014 State Legislative Session Comes to a Close

Colorado’s 2014 legislative session ended on May 7. CCHN staff and lobbyists’ as well as CHC staff, worked hard throughout the session to ensure that legislators were aware of the valuable role CHCs play in providing health care to Coloradans. During the session, CCHN’s top priority was working to inform legislators of the importance of restoring CHC Medicaid reimbursement rates to the Alternative Payment Method (APM). CCHN and Colorado CHCs thank all of the legislators who worked to ensure that restoration of these rates was included in the Long Bill, which was signed by Gov. Hickenlooper on April 30.

In addition to supporting the restoration of CHC Medicaid reimbursement rates, CCHN also supported several other items in the Governor’s proposed Fiscal Year (FY) 14-15 budget, including funding to fully implement House Bill (HB) 09-1353 to end the federally-mandated bar for lawfully residing immigrant children and pregnant women who are otherwise eligible for public health coverage (federal law permits states to make this exception). In addition, the Governor’s proposed FY14-15 budget included a request to align Child Health Plan Plus (CHP+) oral health care benefits with the federal Child Health Insurance Plan Reauthorization Act, increasing the benefit cap to $1,000 per year. These items were included in the Long Bill as a part of the FY14-15 budget.

In addition, CCHN supported several bills passed this session that were designed to continue, expand, and improve efficiency of existing programs, including: HB14-1045, sponsored by Rep. Diane Primavera (HD33) and Sens. Irene Aguilar (SD32) and Larry Crowder (SD35), which extends the Breast and Cervical Cancer Treatment Program for an additional five years; and Senate Bill (SB) 14-144, sponsored by Rep. Joann Ginal (HD52) and Sens. Jeanne Nicholson (SD16) and Irene Aguilar, which extends the Commission on Family Medicine’s support of the development of family medicine residency programs in rural and other underserved areas of the state. CCHN staff and lobbyists also worked closely with the legislature and stakeholders on SB14-180, which creates the Colorado Dental Health Care Program for Low-Income Seniors, at the Colorado Department of Health Care Policy and Financing (HCPF).

Furthermore, CCHN supported HB14-1053, allowing the Commissioner of Insurance to adopt rules to ensure that requirements for pediatric dental benefits in health benefit plans offered in Colorado are consistent regardless of whether a plan is purchased inside or outside of Colorado’s health insurance Marketplace. This bill was sponsored by Rep. Beth McCann (HD8) and Sen. Irene Aguilar, and signed by Gov. Hickenlooper on Feb. 19. Previously, only plans purchased outside of the Marketplace were required to include pediatric dental benefits. In another effort to improve consistency and efficiency, CCHN supported SB14-067, sponsored by Rep. Jonathan Singer (HD11) and Sen. Irene Aguilar, that makes changes to Colorado statutes to align the eligibility provisions of Medicaid and CHP+ with the changes made to eligibility groups under the Affordable Care Act (ACA). This bill was signed by Gov. Hickenlooper on Feb. 27.

For the state budget, the Colorado legislature agreed to a $23 billion balanced budget for FY 2014-15. This budget reflects the legislature’s commitment to Colorado’s future, with significant investments being made in higher education and economic development. Health care remains a large portion of the state budget, with the Colorado Department of Health Care Policy and Financing budget items accounting for $7.85 billion, including $2.25 billion in state general funds, $4.6 billion in federal funds, and almost $1 billion in cash funds. This represents a total increase of 18 percent over the FY13-14 budget. CCHN looks forward to ensuring continued advances in health care during next year’s legislative session.
Please join CCHN’s grassroots network and make your voice heard by your elected officials, helping to ensure that health care bills benefit CHCs and the people and communities they serve. The voice of every CHC advocate will be needed in the coming months – now is the time to make a difference. This year is a pivotal, make-or-break year for the CHC movement, both in ensuring that the growth of the CHC network and the people served continues, and to protect the very foundations of the program. Please join us in this effort.

Sign up for CCHN emails about legislation affecting health care and your CHC. You will receive action alerts that have specific, easy-to-understand ways to talk to your legislators. Go to www.cchn.org, click on Get Active!, and your information will be added to CCHN’s grassroots network. For more information please contact Alice Gibbs, policy analyst, at agibbs@cchn.org or (303) 867-9531.

CHAMPS UPDATE

SAVE THE DATES!

CHAMPS/NWRPCA Annual Primary Care Conference

The Community Health Association of Mountain/Plains States (CHAMPS) and the Northwest Regional Primary Care Association (NWRPCA) will hold their combined Regions VIII and X Annual Primary Care Conference on Sunday, Oct. 19-Wednesday, Oct. 22, 2014, at the Westin Denver Downtown in Denver, Colo. The conference will include clinical, operations, IT, fiscal, workforce, outreach and enrollment (O&E), community health improvement, patient centered medical home (PCMH), policy, and governance tracks in addition to several networking opportunities. For more information on the conference and to submit an abstract, click here.

Training for New Medical Directors

Sponsored by the National Association of Community Health Centers (NACHC) and hosted by CHAMPS and NWRPCA, the training for new medical directors will be held in conjunction with the Annual Primary Care Conference on Saturday, Oct. 18, 2014 (half day) and Sunday, Oct. 19, 2014 (full day) in Denver, Colo. The training will provide an overview of core knowledge and competencies that all CHC medical directors need to function as effective leaders. Additional topics include regulatory expectations, delivery models, FTCA, risk management, PCMH, electronic health records, quality management, the role of the medical director, and more. The course fee is $250, and is deemed by the American Academy of Family Physicians to be acceptable for up to ten elective continuing medical education credits.

UPCOMING EVENTS

August 10-16, 2014
National Health Center Week
The theme for this year’s National Health Center Week (NHCW) is "Celebrating America’s Health Centers: Local Engines for Healthier Communities." Events will be held at CHCs across the state. Stay tuned for a calendar of events in CCHN’s July newsletter.
About CCHN

The Colorado Community Health Network (CCHN) is the unified voice for Colorado’s 18 Community Health Centers (CHCs) and their patients. CHCs provide a health care home to more than 600,000 of their community members - one in 10 people in Colorado - from 60 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.

If you would like to be added to the newsletter e-mail distribution list, or if you have comments about this newsletter, please contact Maureen Maxwell, CCHN federal policy and communications manager, at maureen@cchn.org or (303) 861-5165, ext. 259.