HEALTH CENTER NEWS

High Plains – From Infancy to Adulthood
By Jay Brooke, President/CEO

How time can fly when you’re having fun. It seems like only yesterday that High Plains Community Health Center opened with a ragtag crew of five. Can it really be 20 years?

I remember going to yard sales to get chairs for the waiting room. Really, I can’t put those orange chairs out there? At first, a few patients trickled in. Then we got busier and had to move the dental chairs to a new building, so we could have more exam rooms. One of our first grants paid for the renovated dental office. We had a request from Lamar Community College to provide access on their campus and opened a part-time site there, that later became a full-time site and served community members as well. Then we added another medical provider, space became cramped in our small building again and they wanted me to move out to another place so my office could be utilized for patient care. Surely, things will fall apart without the executive director to provide oversight.

I moved, things didn’t fall apart, and much of my time was spent the next few months planning, reviewing bids, and hovering over the construction of a new building. Our current 12,000 square foot Main Site was completed in 2001, and we began seeing patients at it in August. I actually had an office in the new building and could go back to thinking it was important for me to be around.
It was about this time that we were having a lot of demand for care and our supply of appointments was not sufficient to meet their needs. It was several weeks out to get an appointment and we had a lot of no-shows. That was when we undertook a patient visit redesign initiative. We introduced same day appointments, team-based care and productivity expectations. Change is difficult and this is when I first learned the lesson of thirds: when you undertake major changes like this, there is a third of the employees that embrace it, a third that take a wait-and-see approach, and a third that don’t like it and fight it to the death. I remember sitting in a meeting one day and everybody was complaining about the changes, we can’t do this and we can’t do that, and for some reason the expression “The dogs may bark, but the wagon train moves on” came up. It did, some of the naysayers left, and High Plains moved on.

Then it was time to expand the dental program, purchase some more space, and add a dentist, hygienist and four operatories. More people flocked to our medical program and we began adding more medical teams. In 2007, we were an early adopter of an electronic medical record. I remember our medical providers desperately held onto their paper records for about six months, not trusting that the electronic record was trustworthy. Finally, they stopped asking for them and we moved all the paper records upstairs.

It was during this time that we began to receive state and national recognition for our outstanding clinical outcomes. At one point, I thought I had something to do with it, but so much for grandiosity. We had some great people who had a lot of high standards and took a lot of pride in taking care of our patients.

This was also a time of growth and our number of patients and employees steadily grew. It was in 2009 that we became interested in becoming a patient centered medical home. Fortunately, because of the changes we had made with the visit redesign and early implementation of an electronic medical record, we didn’t need to make too many additional changes to be recognized as a Level II Patient Centered Medical Home by NCQA. This was a big feather in our hat and something we are very proud to flaunt and know it is the very best model for taking care of our patients. A critical step here was adding health coaches to our medical teams to assist patients with working on their self-management goals.

Like most rural communities, we are a quickly aging population and in 2012, we undertook to build an adult health center to accommodate our aging population and many patients with chronic diseases. We got the beautiful building built and ready to go, but were stymied in our attempts to secure a Medicare number so we could bill for the many Medicare patients that would be seen there. Defiant of the bureaucracy, we opened anyway and wrote-off the Medicare costs so we could become operational.

In the last couple of years, we have added a pediatric program, hired behavioral health clinicians so we can provide integrated care, opened a Saturday Clinic, added evening clinics, started a SafeCare program to assist families with small children, a chiropractic service, a fulltime site in Wiley, Colo., and soon a site in Holly, Colo.

It has truly been an amazing ride, starting with six employees, adding multiple services and sites, growing the employee number to more than 100, and most of all providing quality accessible care to the people in our community. May the next 20 years be as good as the first 20.
CHCs Gather to Advocate and Honor Community Health Champions

CCHN’s 2015 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 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, and the importance of fixing the federal primary care funding cliff.

The Forum included a policy panel on health care reform and the Colorado political environment. Panelists included Gretchen Hammer, Medicaid director at the Department of Health Care Policy and Financing (HCPF); Marguerite Salazar, commissioner of insurance at the Colorado Division of Insurance; and Lorez Meinhold, senior associate at the Keystone Center. The panelists discussed health care reform implementation in Colorado, how the health care landscape has changed over the past year, and how CHCs can continue to play an important role in ensuring Coloradans get the health care they need.

CCHN recognized two leaders for their tireless advocacy efforts supporting the Community Health Center movement. The 2015 Community Health Advocate Award was presented to Colleen Laeger, board chair at Salud Family Health Centers (Salud). Ms. Laeger has been on the Salud Board of Directors since 1986, advocating on behalf of CHC patients and promoting the good work of Salud throughout the Northern Colorado community. Because of her knowledge and support of Salud and the patients they serve, Ms. Laeger is never shy when advocating on behalf of Salud.

CCHN also presented the annual Stanley J. Brasher Community Health Gratitude Award, named in honor of Jerry Brasher, retired CEO of Salud Family Health Centers and a leader in the Community Health Center movement in Colorado and nationwide. The award was first given in 2014. This year’s award was presented to Dave Myers, president and CEO of Metro Community Provider Network (MCPN). For the last 32 years, Mr. Myers has dedicated his life to affordable health care, CHCs, and their patients. Mr. Myers is on a first-name basis with many municipal, state, and federal legislators. As a long-time partner of CCHN and the National Association of Community Health Centers, Mr. Myers advocates on behalf of CHCs across the nation. He works tirelessly with many organizations and the state, sitting on committees and working to create a better system of care for CHC patients.

In the evening, CCHN and CHCs celebrated the 2015 Community Health Champions at the P&I Legislator Reception and Awards Ceremony. Senator Pat Steadman (SD 31) and former Senator Gail Schwartz received the Legislator Community Health Champion Awards. Dr. Randall Maharry, who volunteers for Salud, received the Volunteer Clinician Community Health Champion Award; and Marci Krivonen, reporter for Aspen Public Radio, received the Media Community Health Champion Award.
Sen. Steadman has served in the Colorado State Senate since 2009, and throughout his time in the state legislature, has been a champion of issues important to CHCs. As a member of the Joint Budget Committee, Sen. Steadman played the pivotal role in restoring Colorado CHCs’ Alternative Payment Method Medicaid reimbursement rate through making a motion to include funding for this restoration in the 2014 Long Bill for the Fiscal Year 2014-15 state budget. His work to ensure this reimbursement was included in the Long Bill has resulted in approximately seven million dollars of additional funding annually for the care provided to Medicaid enrollees at CHCs.

Sen. Schwartz has been a champion of CHCs for years and prioritized access to high-quality, affordable health care during her legislative tenure. In 2013-2014, Sen. Schwartz was a key supporter of Mountain Family Health Centers’ (MFHC) efforts to expand primary health care services in Eagle County, Colo. Her support helped lead to a successful New Access Point award for the Mountain Family Edwards site, which will provide comprehensive medical, dental, and behavioral health care services to more than 3,500 vulnerable Coloradans this year. Sen. Schwartz also sponsored Senate Bill 14-144: Family Medicine Residency Programs in Rural Areas, which extended the Commission on Family Medicine’s support of the development of family medicine residency programs in rural and other underserved areas of the state.

Dr. Maharry has volunteered with Salud for the past ten years. He brings his skills and more than 40 years of experience as a dermatologist in Iowa to patients at Salud’s Estes Park health center. Through his volunteer work, Dr. Maharry has made access to this much-needed service a reality for many of Salud’s patients. In addition, he has developed a relationship with several local dermatologists, extending the network of providers performing procedures free of charge for Salud patients in facilities outside of the Salud clinic. Dr. Maharry’s concern for his patients and level of perfectionism and professionalism is boundless.

Marci Krivonen was selected for her valuable reporting on health care issues on the Western Slope of Colorado. She has provided comprehensive coverage of the introduction to the Affordable Care Act (ACA) and how it has impacted patients in the Roaring Fork Valley. Ms. Krivonen has covered the insurance rate issue in-depth, while also informing listeners of the health care options available to them. She also reports on patients who are benefiting from having health insurance for the first time due to the ACA and expanded Medicaid coverage. Ms. Krivonen has been a champion for MFHC and CHCs statewide by portraying the human face of health care issues.
The Community Health Center network in Colorado is set to expand access to affordable, high-quality, primary health care soon: the U.S. Department of Health and Human Services announced $101 million in grants for 164 CHC sites, $1.95 million to three in Colorado.

With this grant, Summit Community Care Clinic (the Care Clinic) is now designated as a federally qualified Community Health Center (CHC). The Care Clinic plans to use the new funding to expand access to health care to residents of Summit County and surrounding counties. The only safety net provider in Summit County, the Care Clinic was previously designated as a “Federally Qualified Health Center Look-Alike,” and is now eligible for federal support for the comprehensive primary care model of health services it provides. The Care Clinic was established in 1993 as a one-night-a-week, walk-in clinic staffed by volunteers and managed by Summit County Public Health.

Axis Health System, headquartered in Durango, plans to use the new grant to support the development of the CHC model at its clinic in Cortez and increase services for Montezuma County. Axis, founded as Southwest Colorado Mental Health Center, Inc. in 1960, was awarded funding in 2013 to establish a federally qualified CHC in Durango.

Marillac Clinic, located in Grand Junction, is newly designated as a federally qualified Community Health Center. The grant will allow Marillac to expand to care for as many as 12,600 patients, up from the current 7,600. The grant will also enable Marillac to serve patients from birth to death, an expansion from previously serving only patients 18 to 64 years old. Marillac was founded 27 years ago by St. Mary’s Hospital to deliver medical services to uninsured people using volunteer providers. It now has its own staff and will be providing the core services required of CHCs.

In April 2015, CCHN awarded 25 clinical support staff with loan repayment funds through the Kaiser Permanente Educational Loan Repayment for Safety Net Clinical Support Staff Program. Funded by Kaiser Permanente Community Health Fund, the program is designed to expand and modernize the safety net workforce through loan repayment and skill development webinars for clinical support staff. Awardees live and work throughout Colorado, from Fort Lupton to Lamar, Pueblo to Grand Junction, and Trinidad to Frisco.

In October 2013, CCHN in partnership with Colorado CHCs, Colorado Rural Health Center, and ClinicNET, was funded by the Kaiser Permanente Community Health Fund to administer a loan repayment program for clinical support staff as part of the Preparing the Safety Net for the Future of Health Care initiative. Through the program, CCHN designed programs and activities to assist Colorado’s CHCs and safety net clinics to:

1) improve retention of health professionals who care for underserved Coloradans, and
2) provide affordable training development webinars for entry and mid-level staff.

Clinical support staff do not qualify for other loan repayment programs that are available to providers at safety net clinics, so this loan repayment program helps close this gap. Clinical support staff play an essential role in quality improvement and health care reform implementation. Safety net clinics benefit from retaining high performing staff. Loan repayment will help ease the burden of prior educational debt for clinical support staff in exchange for a one-year service commitment to the safety net clinic.

“Throughout my four years of working for Valley-Wide, not a day goes by that I do not appreciate having the opportunity to work here and without a doubt will continue working here whether I receive the loan payment or not. If chosen, I can completely pay off my student loan debt and go back to school to further my education and continue helping educate and care for the medically underserved.” Marisa Atencio, VWHS, in her application.
During the initial loan repayment application cycle in January 2014, CCHN awarded 26 clinical support staff with loan repayment funds to pay off education debt. Applicants are eligible to receive up to $10,000 in loan repayment, dependent on their completed years of service at their place of employment. Loan repayment awards are made using a tiered approach based on length of employment. The final application cycle will occur in January 2016.

The Kaiser Permanente Loan Repayment Program is one of multiple 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 Community Health Association of Mountain/Plains States (CHAMPS) developed six lunchtime learning professional skill development webinars. This year’s webinars will take place between April and September 2015 and will include the following topics: Student loan management and repayment options; customer service; civility; tools for asking for what you want; problem solving; and cultural competency.

Congratulations to the 2015 Kaiser Permanente Educational Loan Repayment for Safety Net Clinical Support Staff Program Award Recipients serving the underserved.

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<th>Organization Name</th>
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<td>Button Family Practice</td>
<td>Alisha Smith</td>
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<td>Julie Chhea Arnoldy</td>
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<td>Veronica Labra</td>
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<td>Shae Emick</td>
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<td>Alison Milke</td>
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<td>Sarah Smith</td>
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<td>Peak Vista Community Health Centers</td>
<td>Monica Muniz</td>
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Colorado CHCs Visit U.S. Capitol, Meet with Congressional Delegation

Representatives from 10 Colorado CHCs and CCHN traveled to Washington, D.C., in March to explain to representatives and senators the threat to health care for one in eight people in Colorado if the “funding cliff” was allowed to go into effect. As a result of these visits; and thousands of letters, calls, and emails from other Coloradans in support of their CHCs; all nine of Colorado’s U.S. representatives and senators cosigned letters to the House and Senate Appropriations Committees urging continued support for the CHC program. Six representatives and both senators voted in support of H.R. 2, a bill that extended the Health Center Trust Fund, one of the two federal sources of funding for the Health Center Program, for two years.

H.R. 2 also provides two years of funding for the National Health Service Corps, an important source of health care providers to communities cared for by CHCs. Funding for the Child Health Insurance Plan, which supports Colorado’s Child Health Plan Plus (CHP+), is provided for two years. Finally, H.R. 2 provides two years of funding for Teaching Health Centers, CHCs that provide residency training in primary care.

While on Capitol Hill in D.C., the Colorado group said thank you for past support for the CHC program by presenting awards to eight of the nine members of Colorado’s congressional delegation (Rep. Buck is newly elected and was not therefore in Congress last year to vote on legislation of interest to CHCs).
High Plains CHC and Lamar Healthy Places Make Being Active More Fun

High Plains Community Health Center is a partner of Lamar Healthy Places (LHP), a community-led initiative that aims to improve health in Lamar by making it easier, safer, and more fun to be active. During the first year of this three year initiative, the focus was on collaboration, community, and priority identification.

The LHP partnership asked for and received advice from residents about transforming Lamar into a healthier community. With that, LHP got to work implementing community transformations. It partnered with residents to design improvements to community parks and trails. LHP connected with community leaders to maximize LHP as an economic development tool. It armed community youth with cameras to document how they live well in Lamar. LHP transformed spaces, such as underutilized parks, and drew people to them by holding community events such as free outdoor movies. It also completed the Lamar Parks, Trails, and Recreation Master Plan, a road map to achieve improvements for the community.

Based on community feedback, the second year will bring a continued commitment to enliven existing parks and create opportunities to deepen community connections in Lamar. LHP will focus on The Lamar Loop, Shore Arts Center Park, and Wheels Park. The Lamar Loop is a 7.2 mile trail that will connect neighborhoods and amenities. Shore Arts Park will bring a downtown vacant lot to life with landscaping, seating, lighting, and a performance area. Wheels Park will transform an underutilized park into a BMX/Skateboard park.

LHP has invited the community to participate in the transformation of Lamar by participating in LHP’s series of summer events. June is National Bike to Work Month. LHP is partnering with The Hope Center to open a bike shop in the LHP storefront with a grand opening celebration on June 12. On June 13, LHP is sponsoring a free swim night and glow bike ride. LHP will be partnering with Lamar Parks and Recreation and the Lamar Chamber of Commerce for National Bike to Work Day on June 24. June 27 is Family Fun Day. This event will bring Willow Creek Park to life with a full day of family-friendly, free events including a bike rodeo, and ending with a free movie under the stars. As the summer progresses, LHP is making plans for a BMX/skateboard interactive party on July 25 with workshops and competitions. On August 4, LHP is partnering with Lamar Police Department and Lamar Parks and Recreation for National Night Out with a free swim and movie under the stars. September 19 is LHP’s second Annual Northside Park Birthday Bash, inviting the community to come together to celebrate the rebuilt and rejuvenated Northside Park.

Health Center News From Around Colorado

News Briefs

Dental and Pharmacy Open at the Fort Collins Salud Family Health Center

In February, the Fort Collins Salud Family Health Center opened a new, onsite dental clinic and full service pharmacy. The dental clinic staff includes one full-time dentist and two full-time dental hygienists. The dental clinic offers comprehensive dental care services for children and adults.

In addition, Salud-Fort Collins has added a full-service pharmacy, with two full-time registered pharmacists. Patients can request medication refills conveniently and securely through the Salud patient portal. All dental and pharmacy services are offered in both English and Spanish.
First Mike Bloom Scholarship Awarded

Amy Carpenter, Greeley West High School, is the first recipient of the Mike Bloom Community Scholarship. Ms. Carpenter plans to attend Colorado State University and pursue a degree in biochemistry. She is the daughter of Yadira (Sunrise Family Dental) and Eduardo Saldana and Josh Carpenter. She plans to attend dental school in the future.

The Mike Bloom Scholarship is an annual scholarship presented to high school graduates who are children of Sunrise and Alliance employees based on a student’s demonstrated community service. The scholarship was created to honor Mike Bloom’s life-long dedication to helping those in need while celebrating his commitment to health care, education, and growth. Mike Bloom, a leader to the Community Health Center movement in Colorado, passed away in May 2014. He was a tireless, dedicated, and visionary founder of community health in Colorado.

Donations to the scholarship fund can be given by credit card at http://www.sunrisecommunityhealth.org/donate/ or checks can be addressed to: Mike Bloom Community Service Scholarship Fund, c/o Sunrise Community Health, 2930 11th Avenue Evans, Colo. 80620.

Pueblo CHC Dedicates Wall to Supporters

PCHC Foundation hosted a donor wall dedication at PCHC’s Colorado Avenue Clinic on March 9, 2015. The event drew about 50 supporters of the $1.4 million 2014 expansion for integrated care. The group was feted with a reception and unveiling of the wall created by local artists Rick Willits and Terry Montoya. Leaves on the tree were handmade from acrylic and include names of grantors, individual and corporate sponsors, as well as members of both the PCHC health center and foundation board of directors.
Salud to Open Audrey Farley Women’s Center

In June, Salud will open a new women’s clinic that is dedicated to meeting women’s specific health needs. The Audrey Farley Women’s Center will be located in Brighton, where an all-female medical team will offer a full range of integrated services tailored for women and provided by a bilingual staff.

Peak Vista Appoints Director of Family Medicine Residency Program

In March 2015, Peak Vista Community Health Centers (Peak Vista) appointed Scott Robinson, D.O., as director of the Peak Vista Family Medicine Residency Program. Dr. Robinson will lead the charge of developing the residency program, which will begin post-graduate training of residents and qualified medical school graduates in July 2016.

“This marks a significant step toward advancing Peak Vista’s Family Medicine Residency Program,” said Peak Vista chief medical and dental officer Michael Welch, D.O. “Dr. Robinson’s expertise will help us continue our mission of providing access to exceptional health care for the Pikes Peak and East Central regions of Colorado.”

The three-year Family Medicine Residency Program will emphasize several primary care clinical training areas, from outpatient pediatrics and family medicine to gynecology and geriatric care. The program is expected to reach its full capacity of 24 residents by 2019.

“The residency program is a result of community collaboration and Peak Vista’s dedication to enhancing our local pool of family medicine providers,” Robinson said. “I am grateful for the opportunity to lead this program for Peak Vista and for the patients and communities we serve.”

Dr. Robinson served as the program director of the Bay Area Family Medicine Residency in Corpus Christi, Texas, from 1999-2005. Afterwards, he continued working as a family physician in Texas for a number of years before joining Peak Vista in 2010. Most recently, he served as vice president of medical services, overseeing six of Peak Vista’s 25 locations.

For more information on Peak Vista’s Family Medicine Residency Program, visit http://www.peakvista.org/clinical-training.

Pueblo CHC Therapist Honored

PCHC Mental Health Therapist Jeannette Grant, LCSW, was honored at the YWCA’s Tribute to Women event on April 30, 2015. Tribute to Women recognizes and honors exceptional women in the Pueblo community. Being nominated and winning has become a highly prestigious commendation. Ms. Grant won in the “Triumph Over Adversity” category, and was nominated in the Professional Achievement category as well. Comedienne Vicki Lawrence, the keynote speaker, brought levity and humor to the crowd of 500.

Jeannette Grant, far right, shows off her award with other winners, April 30, 2015.
Advocacy Celebrations at Salud

Staff at Salud Family Health Centers celebrated the passage of H.R. 2 with cakes at each Salud clinic. The cakes celebrated the legislative victory over the “funding cliff,” also referred to as the “fiscal cliff.” (See “Colorado CHCs Visit U.S. Capitol,” page 7). Salud staff worked tirelessly to collect a grand total of 21,696 signatures on petitions to Congress, among the highest number collected by CHCs nationwide.

Pueblo CHC Thanks Supporters at Annual Luncheon

PCHC hosted its 31st annual luncheon on April 16, 2015 at the Pueblo Country Club. Community partners, employees, and donors were invited to join the annual update festivities, which included a menu featuring a Mediterranean theme. With approximately 120 in attendance, PCHC Board President Rev. John Mark Hild, Foundation Board Vice President Dr. Henry Roman, and CEO Donald Moore updated and thanked the group for a successful 2014. Annual reports were also distributed to all attendees and are now available on PCHC’s website: http://www.pueblochc.org/about/annual-reports

River Valley Family Health Center Plans to Open Satellite Clinic in Montrose

River Valley Family Health Center (RVFHC) is in the planning stages of opening a satellite clinic in Montrose, Colo. The clinic will be designed to meet the needs of the city’s residents, allowing RVFHC to increase health care services and access in the area. Forty-six percent of RVFHC’s current patients reside in Montrose, demonstrating the need for primary care services in the area.

RVFHC is currently in the process of purchasing the building formerly used by the Montrose Athletic Club. With fundraising and remodeling, the new clinic could be open in 18-24 months.

In May 2015, the Montrose City Council passed a referendum in support of the clinic’s expansion, and River Valley is asking for letters of support from local organizations. Since opening the remodeled Olathe clinic in September 2014, RVFHC has seen 800 new patients. This is partially attributed to the Affordable Care Act, which expanded coverage for the uninsured across the country. “We are a solution, but we’re not the solution,” Harrison-Zarkis said. “We have to grow, but we have to grow wisely so that we don’t burn out.”
POLICY UPDATE

2015 State Legislative Session Comes to a Close

Colorado’s 2015 legislative session ended on May 6. CCHN staff and lobbyists and 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.

CCHN actively supported several items in the Governor’s proposed Fiscal Year (FY) 15-16 budget, including increased funding for the Colorado Health Service Corps program, a valuable program that supports loan repayment for providers that serve in Colorado’s rural and underserved areas. In addition, the Governor’s proposed FY15-16 budget included a request to change income determination for Medicaid and Child Health Plan Plus (CHP+) to annualized income. This is meant to reduce gaps in coverage and improve access to benefits, as well as a request to add 25 full-time-equivalent employees to the Medicaid Customer Service Center to handle call volume better. These items were included in the Long Bill as a part of the FY15-16 budget.

CCHN also actively supported a bill that eliminates barriers for Advanced Practice Registered Nurses (APRNs) in achieving full prescriptive authority. Senate Bill (SB) 15-197 was sponsored by Sens. Larry Crowder (SD35) and Cheri Jahn (SD20) and Reps. Rhonda Fields (HD42) and Yeulin Willett (HD54). It eliminates the currently required preceptorship, reduces the number of hours to achieve independent prescriptive authority from 3,600 to 1,000, and authorizes other APRNs with independent prescriptive authority to mentor APRNs working towards prescriptive authority. The passage of this bill is a huge victory for CHCs as it will help to address some critical workforce issues in Colorado’s underserved communities. Another bill that CCHN supported and that also addresses critical workforce issues is House Bill (HB) 15-1309. This bill will allow dental hygienists with additional training and a permit to place a temporary filling on a tooth at the direction of a dentist.

For the state budget, the Colorado legislature agreed to a $26 billion balanced budget for FY 2015-16. 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 HCPF budget items accounting for $6.52 billion, including $1.8 billion in General Funds, $4.1 billion in federal funds, and almost $714 million in cash funds. CCHN looks forward to ensuring continued advances in health care during next year’s legislative session.

Governor John Hickenlooper signs SB15-197, the Advance Practice Nurse Prescriptive Authority bill, into law at MCPN Jeffco Family Health Service Center in Wheat Ridge, May 18, 2015.
Get Active! And Influence Policy: Your Voice Needed Now

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 number of people served continues, and to protect the foundation 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.

CCHN UPDATE

CCHN New Additions

Holly Kingsbury is CCHN’s oral health specialist, joining CCHN in April 2015. Her primary responsibilities are to develop and implement the Oral Health Integration Project, facilitate a collective voice for oral health among CHCs, and support oral health initiatives and partnerships with CHCs and other state oral health organizations. In May 2015, Holly received a master’s degree in public health from the Colorado School of Public Health at the University of Colorado, Denver. She earned a bachelor’s degree in geology and Latin American studies from Bowdoin College in Brunswick, Maine. Prior to joining CCHN, Holly worked at The Denver Foundation, managing a summer internship program and supporting a wide variety of projects.

Jessica Rosenthal is CCHN’s outreach and enrollment learning collaborative project lead for Covering Kids and Families (CKF), joining CCHN in May 2015. She will be working with the Colorado Health Foundation’s community outreach and enrollment (O&E) grantees and other partner organizations to identify best practices and to implement O&E strategies and solutions. In May 2009, Jessica earned her bachelor of arts degree in political science with an emphasis in public administration from Colorado Mesa University. Prior to joining CCHN, Jessica worked at Connect for Health Colorado as the eligibility and enrollment coordinator.

Jessica Smith is CCHN’s policy division special projects assistant, joining CCHN in June 2015. Her primary responsibilities include providing administrative support and working on policy and communications projects in the Policy Division. In August 2013, Jessica earned her master’s degree in social work with an emphasis on social policy from the University of Denver. She earned a bachelor of arts degree in interdisciplinary studies from Fort Lewis College in Durango, Colorado. Prior to joining CCHN, Jessica worked as the legislative coordinator and as a stroke recovery navigator for National Stroke Association.

Margaret Davidson is CCHN’s operations division special projects assistant, joining CCHN in June 2015. Her primary responsibility is to provide programmatic support for a number of ongoing projects in the Health Center Operations Division. In May 2011, Margaret earned her bachelor’s degree in biology from Johns Hopkins University in Baltimore, Maryland. Prior to joining CCHN, she served as a Peace Corps volunteer in Senegal, where she developed projects and implemented trainings to improve maternal and child healthcare outcomes.
Save the Date: NWRPCA/CHAMPS Annual Primary Care Conference

Community Health Association of Mountain/Plains States (CHAMPS) and the Northwest Regional Primary Care Association (NWRPCA), in partnership with Western Clinicians Network (WCN), will hold their combined Regions VIII and X Annual Primary Care Conference on Saturday, Oct. 17 - Tuesday, Oct. 20, 2015, in Seattle, Wash. The conference will include clinical, operations, IT, fiscal, workforce, outreach and enrollment, community health improvement, patient centered medical home, policy, and governance tracks in addition to numerous networking opportunities. CHCs and other partners with innovative programs and best practices to share should consider submitting an abstract to present during the conference. The abstract portal is currently open, and submissions are due by Friday, June 19, 2015. For additional conference information and to submit an abstract, visit http://www.champsonline.org/Events/Conference.html.

UPCOMING EVENTS

August 9-15, 2015
National Health Center Week
The theme for this year’s National Health Center Week (NHCW) is “Celebrating Our Legacy, Shaping Our Future.” 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 almost 650,000 of their community members - one in eight 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.