



# CCHN Newsletter

## January 2018

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## HEALTH CENTER NEWS

### In Gratitude to Be Part of Our Past, Present, and Future

*By Katie Pachan Jacobson*  
*CCHN Policy Director*

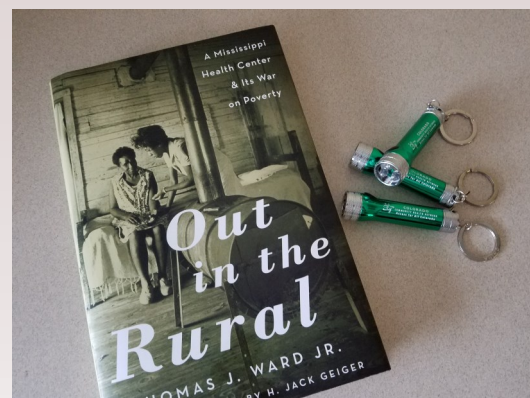
January 2018 marks the Community Health Center (CHC) movement's 53rd anniversary, CCHN's 36th, and my 13th. I was introduced to CHCs in 2002 as an intern at the Metro Community Provider Network (MCPN) in their Healthy Communities Project. The project worked to reduce a disproportionately high infant mortality rate among African American children in Aurora. I had the opportunity to shadow Wendy, an incredible case manager who would do home visits to check in on moms and their kids under 2 years of age. She genuinely cared for her clients, building trust and bridges from people's homes into MCPN. Wendy was the first of many CHC advocates who inspire and humble me, and who continue to make me feel genuinely lucky and proud to be a part of the CHC movement. I'm proud of what CHCs do, and the heart, integrity, respect, and passion by which our work is accomplished. This is a reflection of our current community of CHC leaders, board members, staff and patients combined with our 50+ year historic inheritance. Our history and how it's reflected in our current work makes me even prouder of what CHCs accomplish every day in our communities. We've stayed true to our roots, and I'd like to share those roots as a reminder of where we come from and where we are going.

CHCs emerged out of the civil rights movement and from the recognition that a critical component of racial equity was improvements in access to health care. In the book *Out in the Rural*, author Thomas J. Ward, Jr, describes the life of Dr. H. Jack Geiger, considered one



of the founding fathers of today's national CHC movement, and the experience of establishing the first rural CHC in Mississippi in 1965. The book describes how the CHC founders went out into the communities of the patients they hoped to serve. There they were confronted with a lack of food, clean water, sewer systems, safe heating mechanisms, and housing - a result of rural isolation and rampant racism.

To address their patients' needs, the CHC providers started writing prescriptions for food, employees began installing water pumps, and nurses made home visits. In the foreword of the book, Dr. Geiger wrote that the Mississippi experiment tested a bold hypothesis: "... that a community health center can serve as an instrument of social change, intervening not only in the social determinants of its population's health but also launching a process of structural change that starts to liberate that population, through community empowerment, from repetitive cycles of poverty and political exclusion. . . [The health center's] most important tool in these efforts was slow, patient, community organization, rooted in the belief that even poor, largely unemployed, often poorly educated, politically oppressed and socially isolated people and communities had within themselves the intelligence, resilience, and determination to confront these problems and create significant change. The ultimate goal was to establish pathways out of poverty and into a better life."



Above: Thomas J. Ward's book, *Out in the Rural*.

Colorado's first CHC began in 1966, with federal funding from the new Office of Economic Opportunity, part of President Johnson's War on Poverty, intended to provide federal funds for local application in education and health care to cure and prevent poverty. Denver Health Eastside Family Health Center in Five Points was established as the first CHC west of the Mississippi River. According to Denver Health's report of their first 150 year history, at the time of Eastside's start, approximately 200,000 people lived in the area, earned low wages, and lived in substandard housing. It was no surprise that the residents also suffered from serious health conditions. Only 17 percent of five-year-olds had up-to-date polio and diphtheria immunizations, and infant mortality rates were 37 percent higher than in other more affluent Denver neighborhoods. Staffed by primary care physicians and other specialists, the Eastside Family Health Center was designed to treat a number of diseases and to educate the community about wellness and the importance of preventing disease through regular check-ups. The clinic opened its doors on March 7, 1966, and in the first 14 days of operation, the Health Center served 1,200 people. Within the first year, more than 14,000 patients were seen at the Center. The response was unprecedented, and Denver Health was well on its way to becoming an integrated system providing care for everyone in Denver, regardless of income, class, race, or gender.



Above: Denver Health's present-day logo.

From the 1970s to present day, additional Colorado communities have established CHCs with federal funding support. In 1982, several CHC leaders started CCHN as a statewide association for Colorado's CHCs, with CCHN's first office located in Denver Health's Eastside Family Health Center. Today, CCHN supports 20 CHCs that operate 202 clinic sites in 41 Colorado counties and care for patients living in 61 counties. More than one in eight Coloradans

receive comprehensive affordable health care at their local CHC run by a patient majority board, and CHCs continue to care for all patients regardless of their race, ethnicity, sex, birth country, military experience or status, sexual orientation, bank balance, housing, or family and health status.

In addition, Colorado's CHCs have been national leaders in quality, specifically in chronic disease treatment, immunizations, and weight and tobacco use screening. CHCs demonstrate accountability through transparency in their costs and quality shown in reporting of publicly available data. Research shows that the CHC model results in lower-per-patient spending due to savings resulting from lower spending on specialty care and fewer hospital admissions and inpatient costs. CHCs also directly provide 5,353 full-time jobs and



support more than 2,300 additional jobs in other businesses in rural and urban communities across the state.

Fifty years after the beginnings of the program, CHCs are continuing to use the intelligence, resilience, and determination within their communities and themselves to confront problems and create significant change. Current problems and change include the uncertain and shifting federal and state landscape, filled with both threats and opportunities. One of the most significant immediate problems we are confronting is Congress's inability to complete appropriations for Federal Fiscal Year 2018, which began Oct. 1, 2017. Without Congressional action to extend current CHC funding beyond March, access for at least 62,000 patients is at risk, along with significant job losses and the increased emergency room utilization due to site closures. Also at risk is federal funding for the National Health Service Corps and Teaching Health Centers, which help recruit and retain 20 percent of CHC's providers.

These federal challenges are happening amidst significant state change and opportunities with a new phase of the Accountable Care Collaborative (ACC), Colorado's regionally based Medicaid care delivery system. ACC Phase II will launch July 1, 2018, and includes a number of new regional contractors that will be taking on the administration of both primary and behavioral health care in Medicaid. CCHN has also been working with the Colorado Department of Health Care Policy and Financing (HCPF) on piloting a primary care capitation payment model. The intent of the pilot is to allow CHCs to maximize their care teams (nurse visits, more electronic interactions between providers and patients, greater utilization of group visits, etc.). This will allow for enhanced access to care at CHCs, and the opportunity for CHCs to be more proactive in understanding the full spectrum (i.e. social determinants) of patients' health, specifically working to positively impact diabetes, hypertension and asthma.



*Above: Dr. Jack Geiger, one of the founders of the CHC movement.*

Our current work remains closely aligned to our beginnings. Colorado CHCs are continuing to work to ensure access to high quality comprehensive primary care for people in medically underserved communities throughout the state, just as they did over fifty years ago. Our long history is a testament of the importance and value of CHCs. Dr. Jack Geiger gave a keynote address in 2002 that acknowledges the importance of this work and our ongoing commitment to it. He said:

"Now it would be easy to say in our work we are just nibbling at the edges, that we are not really capable of making structural changes... And that would not only be wrong, it misses the point in a fundamental way. The real message in our volunteer work and in our human rights work is threefold:

- What we are saying to the people we work with is that their lives are as worthy as our own; that their lives are as worthy of life as everyone else's; that all life is equally valuable...
- Second, what our work does... is empower people and communities . . . and is the most important thing we do.
- The third thing we are really doing is saying to the people we work with that we presume there will be a future. We presume social change. We presume a future that will be different.

"...how long are we going to have to do it? I think the answer is clear: for all of our lives.... Because it is going to take that and longer. It is not reason for despair. It is not a reason for pessimism. It is the nature of what is best in us as human beings: to join the struggle, to build a life around it, to commit to it, to make sure that it will continue."

In gratitude for being among you – past and present, and our continued work together creating better lives,

Katie Pachan Jacobson  
CCHN Policy Director

## Fighting the Cold: Community Health Centers Address the Risk of Cold Weather to the Homeless

On January 21, Colorado was hit by the biggest winter storm of the season so far. The Denver metro area was blanketed in six inches of snow, while other areas of the state were buried in 10 inches or more. For most Colorado residents, the storm meant delayed travel plans, a lot of shoveling, or an opportunity to avoid leaving the house all day. But for more than 10,000 homeless Coloradans, winter storms and cold temperatures bring serious threats to health and safety. Frostbite, hypothermia, and increased risk of illness are all dangers facing homeless individuals and families during the winter season.

Two Colorado Community Health Centers are fighting back against the cold. The Colorado Coalition for the Homeless and Metro Community Provider Network (MCPN) are both part of collaborative teams working to address the threat of winter weather in their communities.

The Colorado Coalition for the Homeless, or the Coalition, has four CHCs across Denver and one CHC in Bent County in southern Colorado. Staff are prepared to assist people experiencing homelessness during the winter season, and work in close collaboration with other organizations in the community, including Denver organizations St. Francis Center and Urban Peak. The Coalition's outreach team travels throughout Denver to engage individuals living on the streets, focusing on areas with dense homeless populations as well as areas where people are marginalized, isolated, and have little access to services. The outreach team also responds to requests from concerned citizens, police, and other city officials.



*Above: ACOT faces the cold to provide services to homeless individuals in Aurora.*

The Coalition's services vary depending on each individual's or family's need. For some, the outreach team will provide items from their cold weather survival kits, including hats, gloves, socks, blankets, sleeping bags, coats, and other cold weather gear. For those with pressing health concerns like frostbite, outreach team members work hard to get them care at one of the Coalition's clinics or other medical facilities. There, they can receive treatment like foot baths and other best practices in medical care. For those who are seeking shelter but lack transportation, the Coalition will get them to where they need to go.

Along with those immediate interventions, the Coalition focuses heavily on prevention work. Behavioral health specialists located in the CHCs help clients prepare for impending cold weather, ensuring they are aware of emergency shelters and other services that are elevated during severe weather. Another important preventative service is education for homeless clients around frostbite prevention and treatment.

Similar to the Coalition's partnerships with community organizations, MCPN is working with several partner organizations in Aurora to combat the threat of winter weather to the homeless. Making up the Aurora Community Outreach Team (ACOT) are MCPN, the Aurora Fire and Police Departments, Colfax Community Network, Aurora Community of Faith, Mile High Behavioral Healthcare/Comitis Crisis Center, Aurora Mental Health Center (AuMHC), and Aurora Warms the Night.

ACOT brings services and access to safe shelter directly to homeless individuals through their Outreach Van. The van is staffed with a health care provider from MCPN, a licensed therapist from Aurora Mental Health Center, an outreach case manager from Colfax Community Network, and two Crisis Intervention Team-trained police officers. The team drives directly to homeless individuals in Aurora, reducing the need for those people to navigate a sometimes complex web of services. Homeless individuals who accept



*Above: ACOT's Outreach Van.*

assistance from ACOT are examined on the van for any immediate concerns (physical or psychological) and transported to the local Comitis shelter or an overflow shelter. Those who refuse assistance are given a kit that includes a food packet, blanket, cold weather essentials such as gloves, hats, and more, and a resource card.

The collaborative nature of ACOT allows for a robust follow-up system. Any individual contacted by ACOT is followed up with by a member of the Aurora Mental Health Center's PATH team. PATH, or Projects for Assistance in Transition from Homelessness, operates through a government-funded grant, linking homeless individuals to potential resources that give them access to both temporary and permanent housing. In this way, ACOT's teamwork-centered approach allows them to address varying needs of homeless individuals.

The Colorado Coalition for the Homeless and MCPN are proof of the meaningful collaborative work CHCs are accomplishing in their communities. Through the sunniest days and the coldest storms, the Coalition, MCPN, and other CHCs all across the state are here to serve Colorado's most vulnerable communities.



*Steve Holloway, Director of the Primary Care Office, CDPHE, introduces Corps Community Day*



*David Keller, MD, Children's Hospital, Professor at CO School of Medicine, NHSC alumni*

## Corps Community Day

On Oct. 27, 2017, clinicians and students from around the state gathered in Golden, Colo., for the seventh annual Corps Community Day. The event included a full day of training on a variety of medical topics, as well as an evening reception honoring the work being done in Colorado with underserved populations. This all-day event was made possible through a partnership between the National Health Service Corps (NHSC); the Colorado Primary Care Office (PCO); the Colorado Community Health Network (CCHN); the Colorado Rural Health Center; the Colorado Behavioral Health Council; and the Colorado Area Health Education Center.

The day started off with a packed schedule of free training opportunities. The trainings focused on best practices in medical care and covered a wide range of topics, including long-acting reversible contraception, care to transgender patients, chronic disease prevention, and safely prescribing opioids.

After a full day of training, participants attended a networking and awards reception in the evening. Steve Holloway, director of the Colorado Primary Care Office, kicked off the reception with an overview of the Colorado Loan repayment programs. These programs support qualified health care providers who are dedicated to working in areas of the U.S. with limited access to care. The other speakers of the night were Colorado Health Service Corps awardee, Josh Gannon, and National Health Service Corps Alumni, David Keller, M.D. They both spoke of their experience with CHSC and NHSC, as well as how they have continued to uphold the Corps' mission.

Angela Rose from CCHN closed out the evening by handing out the annual Corps Community Connection Awards. This year there were six award recipients: Erica Elliott, LPC, from Solvista Health; Sophia Meharena, DO, from Rocky Mountain Youth Clinics; Margaret Brugger, LCSW, from Mental Health Center of Denver; Samuel (Doug) Richesin, MD, from Denver Health; Richard Jacobsen, LCSW, from Axis Health Systems; and Katherine Speckman, MD, from Clinica Family Health. Each one of them was nominated by their peers for their outstanding work in providing care to underserved populations.



*Corps Community Day Award Recipients (from left): Erica Elliott, LPC, Solvista Health; Sophia Meharena, MD, Rocky Mountain Youth Clinics; Margaret Brugger, LCSW, Mental Health Center of Denver.*



## Northwest Colorado Health CEO Steps Down

Northwest Colorado Health's Board of Directors announced that Lisa Brown is stepping down from her position as chief executive officer (CEO).

Brown was named CEO in January 2011 when she took the place of longtime Executive Director Sue Birch. Prior to that, Brown served as the director of development for two years. Brown led the organization through significant growth including the addition of a primary care clinic in Steamboat Springs, integration of dental and behavioral health services at all clinics, the addition of home health and hospice services in Grand County, and the process of assuming operations at the dental clinic in Craig (formerly the Dental Coalition).

"Working at Northwest Colorado Health has been a tremendous joy and opportunity," said Ms. Brown. "We continue to serve more people, with increasingly needed services, in the most compassionate and quality way. I am proud of the work we do on a daily basis. I leave with a top notch team in place and they are ready to continue this work with our next leader."

"We are going to miss Lisa's thoughtful innovative approach to advancing the mission of Community Health Centers," said Annette Kowal, CEO of CCHN.

Ms. Brown plans to move to Denver in the upcoming months and was actively involved in the search for her successor.

## Stephanie Einfeld Selected as New CEO of Northwest Colorado Health

Stephanie Einfeld was selected by the Board of Directors of Northwest Colorado Health as the new CEO.



Einfeld started with Northwest Colorado Health as a revenue cycle manager five years ago. In 2014, she joined the Leadership Team as director of performance improvement. In that time, she has developed and delivered an ambitious data and improvement strategy that supports the organization in providing leading national outcomes for health and in its Community Health Center and Home Health services.

"Along with our Board of Directors, I am delighted to announce that Stephanie Einfeld has been selected as our next Chief Executive Officer," said departing CEO Lisa Brown. "Through a national search that garnered many qualified applicants, Stephanie's knowledge, vision and experience consistently aligned with the current goals and focus of our agency."

*Above: Stephanie Einfeld*

## Hispanic Affairs Project Awards MarillacHealth

The Hispanic Affairs Project (HAP) awarded MarillacHealth with the 2017 John Kiernan Award in October 2017. The award recognized MarillacHealth as an Outstanding Community Organization Serving Immigrant & Refugee Communities. Several staff and board members of MarillacHealth were present to receive the award, including Dental Operations Manager Diana Flinn; Board Member Joanna Little; Development Director Kristy Schmidt; Medical Director-County Clinic Dr. Erica Lovett; and Chief Medical Officer Dr. John Whiteside. MarillacHealth serves more than 9,000 patients in Mesa County, Colorado. To learn more, visit [www.marillachealth.org](http://www.marillachealth.org).



*Above: (from left to right): Diana Flinn, Joanna Little, Kristy Schmidt, Dr Erica Lovett, Dr John Whiteside*

## Five Coloradans from Three CHCs Honored by CHAMPS

In October, Coloradans were selected for the majority of the annual awards given by the Community Health Association of Mountain/Plains States (CHAMPS), with representatives of Salud, Peak Vista, and Valley-Wide earning five of the six awards.

Eileen Flaherty, FNP (pictured at right), clinic medical director at Salud Family Health Centers' Estes Park Clinic, was awarded the Stanley J. Brasher Legacy Award for dedicating her career to promoting health equity and community-based care for all. Receiving this award named for Jerry Brasher, who led Salud for more than four decades and has mentored and inspired many in the Community Health Center movement across the country, was a special honor. Ms. Flaherty started working for Salud at the Longmont site, and has worked for the Estes Park Clinic for 25 years.



Linda Hughes (pictured at left), board member for Salud Family Health Centers, received the Exceptional Board Leadership Award in recognition of her service to Salud Family Health Centers and to her community.

Rebecca McCay (pictured at right with David Pump), Chief Nursing and Clinical Officer at Peak Vista Community Health Centers, was given the

Exceptional Administrative Leadership Award for demonstrating dedication to the CHC mission through inspirational leadership and service.



David Pump (pictured at right with Rebecca McCay), deputy director of Peak Vista Community Health Centers, was awarded the Outstanding Legislative Leadership Award for championing accessible, affordable, quality health care for all.

Ricardo Velasquez, M.D. (pictured at left with Gigi Darricades, CEO of Valley-Wide Health Systems, Inc.), medical consultant of Valley-Wide Health Systems, Inc., was honored with the Exceptional Clinical Leadership Award for demonstrating clinical excellence and commitment to providing quality health care for all. Dr. Velasquez was a physician on staff at Valley-Wide for many years, serving as medical director and as CEO for part of that time.



CCHN's friend and "next door neighbor" Alan Pruhs (pictured at right), executive director of the Association for Utah Community Health, received the Outstanding Advocate of the Underserved Award for demonstrating dedication to the CHC mission through innovative and visionary leadership.

[CHAMPS](http://www.champs.org) serves CHCs in Colorado, Montana, North Dakota, South Dakota, Utah and Wyoming.

## Former CHC CEO leaves HCPF, Heads for Washington State

Sue Birch left her role as executive director of the Department of Health Care Policy and Financing (HCPF) in November 2017 to become the director of the Health Care Authority for Washington State. Ms. Birch formerly served as CEO of Northwest Colorado Health, which includes CHC facilities in Steamboat Springs and Craig in Colorado, and she has given many years of service in health care in rural and frontier Colorado.

Governor John Hickenlooper appointed Birch to lead HCPF in January of 2011. In announcing her departure, Gov. Hickenlooper said, "With her guidance, we've expanded coverage for all Coloradans, streamlined services and worked to contain costs. She has been an integral part of my Cabinet and will be missed."

Ms. Birch oversaw implementation of the Affordable Care Act (ACA), including the expansion of Health First Colorado, Colorado's Medicaid Program; and served as a board member of Connect for Health Colorado, Colorado's health insurance marketplace intended to increase access to affordable health insurance coverage for individuals and small businesses. Prior to implementation of the ACA, Colorado's uninsured rate was 14.3 percent, and now is 6.5 percent. An estimated 600,000 Coloradans gained coverage since 2013 and many of the newly insured were eligible for Health First Colorado.

Ms. Birch oversaw other changes to eligibility for public insurance programs, including the launch of the Medicaid Buy-In Programs for Working Adults with Disabilities and Children with Disabilities, as well as 12-month continuous coverage for children enrolled in Health First Colorado and Child Health Plan Plus (CHP+). In addition, during Ms. Birch's tenure, significant modernizations to medical assistance eligibility systems, online application, and improvements to consumer experience were made.

Prior to her appointment to HCPF, Ms. Birch gave more than 20 years of nursing care and health care administration primarily in rural and frontier areas of Colorado. She has been extensively involved in community, regional and national efforts with health care program development in community health services including public health, home health, and hospice care. Her expertise lies in leadership, management, strategic collaboration, and resource development related to rural health care.

Ms. Birch leaves behind a lasting legacy that CCHN plans to help move forward under the leadership of the new HCPF Executive Director, [Kim Bimestefer](#).

## **POLICY UPDATE**

### **Federal Funding for Primary Care Cliff Not Yet Resolved**

#### ***Join the advocacy effort***

On Jan. 22, 2018, Congress passed another short-term continuing resolution (CR), this one ending the government shutdown and funding government operations through Feb. 8, 2018. The CR included a six-year reauthorization of funding for CHIP. It is not yet known exactly when Colorado's portion of that funding will be distributed. Please visit the HCPF [Future of CHP+ website](#) for more, and sign up for the [Future of CHP+ distribution list](#) to receive updates.

This latest CR did not address the Primary Care Funding Cliff. The previous CR (Dec. 23-Jan. 19) provided funding for the first two quarters of Federal Fiscal Year 2018, intended to cover these programs until sometime in March. This has left them in an unstable situation. CHCs are mission-driven and will continue to care for their patients and communities with whatever resources they have, but they are also businesses with salaries and bills to pay. Federal funding provides approximately 17 percent of the funding received by Colorado CHCs. To try to work through the current uncertainty, CHCs already have hiring freezes in place, are reducing costs wherever possible, and have reluctantly fleshed out contingency plans for reducing hours, services, and possibly close clinics if Congress fails to act.

While every member of Colorado's Congressional Delegation has been supportive of CHCs, as have hundreds of members of Congress from both major parties, funding for Health Centers, the National Health Service Corps (NHSC), and Teaching Health Centers has been caught up in the debates over budget deficits, immigration rules, and party politics.

CHC staff, patients, and community supporters and partners continue to advocate for these important programs. We support the extension of CHIP, but are also aware that less than three percent of CHC patients 18 and younger are covered by CHIP – most have family income too low to qualify for CHIP.

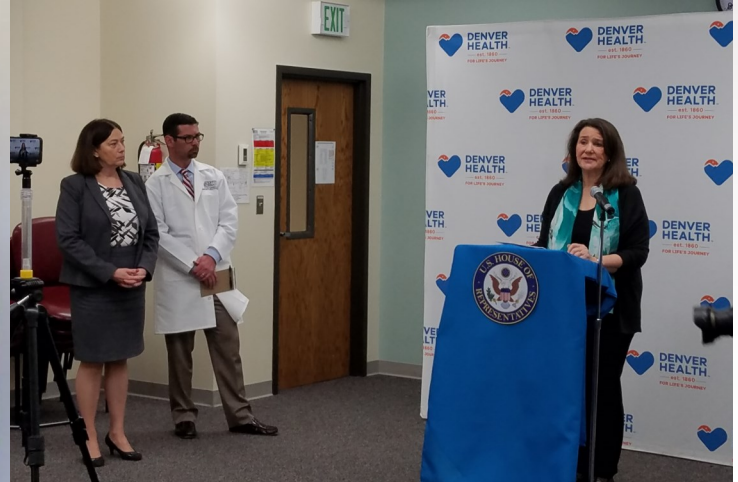


In addition, the NHSC is valuable for bringing health care providers to underserved communities in Colorado: approximately one in seven health care providers at Colorado CHCs are recruited through the NHSC, and many stay beyond their term of service (given in exchange for the student loan repayment provided by the NHSC). Teaching Health Centers are valuable for helping health care providers learn about CHCs and the rewarding careers they provide.

Please join us in reminding Congress of the value of CHCs, the NHSC, and Teaching Health Centers. They must continue to hear how important these vital health care programs are to the communities of Colorado. Please go [here](#) to sign up to be a Community Health Center Advocate. You will receive action alerts and informational alerts from the Colorado Community Health Network and the National Association of Community Health Centers, allowing you to easily take action on issues of importance to your Community Health Center.



*Rep. Tipton visited MarillacHealth on Jan. 26, 2018, and met with Kay Ramachandran, CEO of MarillacHealth; Sean DeVeau, Medical Operations Director; and Kristy Schmidt, Community Relations and Development Director.*



*From left: Robin D. Wittenstein, CEO of Denver Health, and Steve Federico, M.D., Director of Outpatient Pediatrics and Director of School and Community Programs at Denver Health, look on as U.S. Rep. Diana DeGette discusses federal funding delays at Denver Health's Sam Sandos Westside Family Health Center on Jan. 25, 2018.*

## CHAMPS UPDATE

### **CHAMPS Spanish Language Training for Health Care Professionals – Registration Now Open!**

In partnership with the Denver Medical Society, CHAMPS is again offering its popular Spanish Language Training from April 20-23, 2018 in Denver, Colo. This four-day intensive medical and conversational Spanish language course is designed for clinicians and clinical support staff at Region VIII Community Health Centers (CHCs), and incorporates medical dialogues, role-plays, visual aids, cross-cultural discussions, and daily practice. Using an immersion learning model, participants are prepared to immediately use their new language skills with their Spanish-speaking patients. Beginner and intermediate skill levels will be offered, with separate classes for each level. Continuing Medical Education (CME) credit is available.

The course fee is \$649 for CHAMPS and/or DMS Members and \$799 for Non-Members; please visit <http://champsonline.org/about/champs-overview/champs-organizational-members> to determine whether your organization is a CHAMPS member. Space is limited, so please register as soon as possible before the April 1 deadline at <http://champsonline.org/events-trainings#SLT>.

## **CHAMPS CORE Competency Training for (Relatively) New CHC Supervisors and Managers**

This biennial course will be held April 24-25, 2018, in Golden, Colo. Specifically designed for new supervisors and managers at CHCs, the CORE Competency Training offers intensive, hands-on, and immediately applicable skill-building to successfully navigate management and supervisory roles in the fast-paced CHC environment. This training is recommended for CHC supervisors and managers who have been in their positions for 18 months or less, and contains a balance of face-to-face, virtual, group, and one-on-one educational and networking components. Registration will open in late January. Please visit <http://champsonline.org/events-trainings/leadership-learning-opportunities#CORE> to learn more.

## **CCHN/CHAMPS Team-Based Care Distance Learning Series**

The first webcast of this five-part series has already taken place, but there are still four more coming up! This webcast series will bring together locally and nationally recognized experts to focus on the specific skills that clinical support staff, providers, and others need to be effective in implementing team-based care and health equity-focused initiatives. These events are tailored to CHC clinical teams and support staff, although staff from all areas of the CHC are welcome. Registration is separate for each individual event; space is limited, so individuals from the same organization are encouraged to share a computer. Please visit <http://champsonline.org/events-trainings/distance-learning/upcoming-live-distance-learning-events#Foundations> to learn more about and to register for each event. The four remaining webcast dates and topics are as follows:

Wednesday, February 21, 2018: Strategies for Maximizing the Team

Wednesday, March 14, 2018: Effective Team Communication with the Patient in Mind

Wednesday, April 18, 2018: Integrating Motivational Interviewing into Clinic Workflows

Wednesday, May 23, 2018: Sustaining Team-Based Care

## **DynaMed Plus Preferred Pricing Program Winter Enrollment**

CHAMPS is offering Region VIII health center clinicians a Preferred Pricing Program (PPP) for DynaMed Plus. This evidence-based, peer-reviewed clinical decision support tool is designed to help clinicians provide quality patient care by answering clinical questions quickly and easily via personal computers or mobile devices. In addition, DynaMed Plus can be integrated into CHC EHRs at no additional charge. The Winter Enrollment Period will last until Feb. 28, 2018. Each subscription provides access to DynaMed Plus through July 31, 2018. Cost per subscription is \$185 per provider for CHAMPS member organizations, and \$235 per provider for non-member health centers in Region VIII. To learn more, visit <http://champsonline.org/tools-products/clinical-resources/dynamed-plus-preferred-pricing-program> or contact CHAMPS Clinical Quality Improvement Director Jen Anderson at [Jen@CHAMPSonline.org](mailto:Jen@CHAMPSonline.org).

## **Have You Seen CHAMPS's New Offsetting Patient Costs Resources Webpage?**

The CHAMPS Offsetting Patient Costs Resources webpage (<http://champsonline.org/tools-products/clinical-resources/offsetting-patient-costs-resources>) is designed to help CHC patients afford the preventive care and treatment they need. This diverse compilation includes condition-specific resources for diseases from breast cancer to hypertension, as well as resources for medical device assistance and prescription assistance. A selection of social determinants of health-related resources have also been included to help patients and CHC staff identify programs for food assistance, energy assistance, exercise, and more. If you utilize a resource that is not included on this webpage, please contact CHAMPS Clinical Quality Improvement Director Jen Anderson at [Jen@CHAMPSonline.org](mailto:Jen@CHAMPSonline.org).

## CCHN & CHAMPS Give Back to Denver Families



*Pictured left to right: Rachel Steinberg (CHAMPS), Holly Kingsbury (CCHN), Peter Stevinson (CCHN), Valerie Steinmetz (CHAMPS), Valerie Nielsen (CCHN), and Margaret Williford (CCHN)*

On Dec. 8, 2017, staff from the Colorado Community Health Network (CCHN) and Community Health Association of Mountain/Plains States (CHAMPS) volunteered for [GIVE Denver's](#) 2017 Adopt-a-Family, Teen, or Senior Holiday Gift Drive. Along with donating gifts themselves, the staff members sorted through and organized gift donations from organizations and community members.

GIVE Denver is a program of Denver Human Services (DHS) that focuses on fostering children, the homeless, and Denver's most vulnerable communities. The GIVE Denver donation drive ensures that children, families, teens, and seniors served by DHS programs have presents to open during the holidays, regardless of their financial or family situation. Working hand-in-hand with their clients, DHS case workers nominate families and individuals to be sponsored by donors in the Denver community who will purchase gifts for the holiday season.

To learn more about GIVE Denver, [click here](#) to visit their webpage.

## CCHN & CHAMPS Staff Update

### CCHN New Addition

Jessica Higgins is the new Policy Division Special Projects Assistant at CCHN. She started in early January 2018. Her primary duties include providing administrative support and working on policy and communications projects in the Policy Division. Ms. Higgins earned a bachelor's degree in English at Colorado College. Her professional experience includes extensive work with sexual health education and relationship violence direct services. As the communications coordinator at Colorado Youth Matter, a comprehensive sexual health organization, she planned events, provided trainings, and managed communications efforts. While working as the development coordinator at The Initiative, an organization focused on the intersection of disability and abuse, Ms. Higgins created and provided trainings for victim service providers. In her free time, she enjoys drawing, singing, and hanging out with her cat and her horse.

## UPCOMING EVENTS

### CCHN Policies and Issues (P&I) Forum

**Wednesday and Thursday, February 7-8, 2018**

CCHN is hosting the 2018 Policy & Issues Forum. Wednesday's training events (from 9:30-4:00) will be held at the History Colorado Center (1200 Broadway, Denver, Colo.) and the Legislator Award Reception will be held at the ART Hotel directly across the street from the Museum from 5:00-6:30 p.m. Register online by clicking [here](#). Please be sure to register for both the training day and the reception. Registration closes on Feb. 1. Please contact Alice Gibbs at [agibbs@cchn.org](mailto:agibbs@cchn.org) or (303) 867-9531, with questions.



*History Colorado Center (Image credit: [www.colorado.com](http://www.colorado.com))*



## NACHC Policies and Issues (P&I) Forum

March 14-18, 2018

Registration for NACHC's 2018 Policy & Issues (P&I) Forum is now open. Taking place in Washington, D.C., NACHC's P&I Forum is an opportunity for clinicians, board members, consumers, executives and other community health leaders to bring perspectives to Members of Congress. Click [here](#) to learn more and register.

## Save the Date: MCPN's Annual Green Tie Gala March 10, 2018, Denver, Colorado

For more information, visit <http://mcpn.org/giving/>



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### About CCHN

*The Colorado Community Health Network (CCHN) is the unified voice for Colorado's 20 Community Health Centers (CHCs) and their patients. CHCs provide a health care home to almost 740,000 of their community members - one in eight people in Colorado - from 61 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](http://www.cchn.org).*

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