It is hard to come up with adjectives adequate to describe the times we live in. I also am finding it hard come up with adequate language to express how inspired and grateful I am for the people who work at Colorado Community Health Centers. They have risen to the challenge in communities across the state, ramping up telehealth services to help people while slowing the spread, continuing to provide in-person care with use of protective equipment and processes updated to be even more stringent than they already were prior to the pandemic, reaching out to patients and families afraid to leave their homes but in need of care for ongoing health conditions, working with community partners to provide testing and treatment and thereby taking some pressure off emergency rooms and hospitals, all while working to keep their staff safe and struggling to maintain their services in the face of radical drops in revenue due to steep declines in in-person care and necessary temporary suspension of non-emergency services.

I am also deeply grateful and inspired by so many of the patients and families who rely on Community Health Centers as their health care home. Some of them have lost their jobs to the economic blows of the pandemic. Many others are essential workers who have not been able to stay at home and who have
continued to work through this crisis. I think of the farm workers, food handlers, grocery store employees, restaurant workers, and all the first responders, including the health care providers and staff at CHCs and all the other health care providers who continue to care for people in Colorado, the police and fire departments, the EMTs and paramedics, the staff at long term care facilities where reside especially vulnerable populations, the home health workers, and so many others that the rest of us could not do without.

This crisis exploded shortly before Cesar Chavez Day, March 31, a day that celebrates a true American hero and it celebrates all the people who bring the food to our tables. Mr. Chavez wrote the beautiful Prayer of the Farmworkers Struggle, honoring farm workers and how the farm worker movement rose to meet the many challenges workers face. CCHN created a video of CHC employees and board members, and CCHN staff reading the Prayer of the Farmworkers Struggle for Cesar Chavez Day. I am sharing it with you today because it speaks to the challenges of this time we are living through and the permanent changes that are likely to come from it. May the changes be positive and beneficial.

Underlying all the challenges CHCs face—now including an extensive public health crisis—is the determination to keep going, to find a way, and to keep fighting for access to health care for everyone. Part of working hard for this goal involves advocacy at the state and federal level. CCHN’s May edition of our newsletter usually focuses on the outcomes of the most recent state legislative session, as well as federal advocacy. This year is different. This May edition will focus on all of the ways that CCHN and CHCs are helping our communities with and through the COVID-19 public health crisis.

At the heart of these stories is the belief that CHCs are strong organizations that maintain the highest quality care under all circumstances and keep communities healthy. The CHC movement was founded on the idea that everyone deserves access to health care and flourished from a few small sites scattered around the country to an integral part of America’s health care system. That same optimistic spirit still thrives in the CHC movement today, and the stories about communities staying strong during crisis are proof of it.

Thank you to Colorado’s Community Health Centers for the work that you do. Podemos cambiar el mundo — we can change the world, and as the stories below show, we are doing it!

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Policy Update

**CHCs Ramping Up Telehealth in the Time of COVID-19**

The COVID-19 public health crisis has had unprecedented impacts on Colorado’s CHCs, including a significant decrease in the number of in-person visits. With patients and staff needing to stay at home to slow the spread, telehealth services have become more important than ever. CHCs across Colorado implemented or enhanced their telehealth services very quickly and are providing medical, behavioral, and limited oral health care services by video and phone.

Before the crisis, Colorado CHCs were not allowed to be reimbursed for telemedicine services under Medicaid. Earlier this year, before COVID-19 amplified the importance of telemedicine for health care providers, CCHN partnered with Colorado Coalition for the Homeless to champion House Bill (HB)20-1092, which would allow CHCs to be reimbursed for telemedicine services provided to Medicaid recipients. The bill is sponsored by Reps. Caraveo and Will, and Sens. Donovan and Rankin. The bill passed through its first committee unanimously and was a step forward in modernizing CHC reimbursement in Colorado and expanding access to care.

Before the bill could progress further, the COVID-19 crisis hit Colorado and the state legislature paused their session, with plans to reconvene in late May. Meanwhile, the Colorado Department of Health Care Policy and Financing (HCPF), the state Medicaid agency, recognized the importance of CHCs being able to provide telemedicine services during the COVID-19 crisis. The Medical Services Board authorized an emergency rule which temporarily expands its telemedicine policy for Medicaid and CHP+ members, allowing CHCs to bill for
telemedicine visits. Thanks to this emergency rule, CHCs were able to quickly build up telemedicine services to provide access to patients and help stabilize revenue during this time of COVID-19.

CCHN is now working with the bill sponsors and HCPF to find a long-term solution for telemedicine reimbursement for CHCs, whether through rule or legislation.

**Federal Regulations for Telemedicine**

National changes have impacted the ways CHCs provide telemedicine services, as well, particularly under Medicare. Both the Families First Coronavirus Response Act (FFCRA) and the CARES Act included provisions that eased Medicare’s restrictions on billing for telemedicine services at CHCs. This means that CHC providers can now care for their patients with Medicare via telehealth and be reimbursed for those services. Although it is temporary, it is a step in the right direction.

The importance for CHCs to provide audio-only telehealth services in both Medicaid and Medicare has been highlighted through these policy changes. CHCs have found that their patients may not have stable broadband at home for video calls, some may not feel comfortable with video technology, and others cannot afford the cell phone data needed for a video call. Although audio-visual is preferred by most providers, the option of telephone is necessary to meet the unique needs of CHC patients.

**Continuing Telemedicine after the Public Health Emergency**

It has been fundamental for CHCs to receive temporary regulatory changes from both the state and federal governments to provide telemedicine services during COVID-19. However, these federal changes to Medicare and state changes to Medicaid are set to last only as long as COVID-19 is considered a public health emergency.

Telehealth is not only critical during a public health crisis; CHCs need a long-term solution to provide telehealth services and be reimbursed for them now and in the future. This long-term solution includes making sure that Medicaid and Medicare reimburse CHCs for telemedicine services, ensuring that telephone (audio-only) as well as video services are covered for CHCs, and expanding accessibility to telemedicine services for Colorado’s most underserved communities. CCHN will continue to advocate that CHCs be reimbursed for critical telehealth services to patients, so that they can continue to provide them after the public health emergency.

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**Health Center News**

**Marillac in the Time of COVID**

MarillacHealth, serving Mesa County and surrounding communities, instituted an Incident Command Team that meets daily with the purpose of monitoring and responding to public health advisories, instituting COVID-specific operational strategies, putting safeguards in place, and informing patients and community of the changes. The team’s decisions revolve around Marillac’s number one priority: keeping staff and patients healthy and safe, and sustaining the ability to deliver health care to those in need.

Some of the first actions taken included:
- Instituted “quick screens” for anyone entering Marillac, including patients, staff, visitors and vendors (taking temperatures, asking questions, and distributing masks);
- Temporarily closed the clinic housed at Mesa County Public Health and consolidated operations at the Main clinic on 6th Street in Grand Junction (re-opened this
location on May 4);
• Developed a triage system for patients presenting symptoms of COVID-19;
• Shut down dental operations in response to Governor’s mandate to prevent viral spread, except for emergency/urgent treatment. Since then, dental operations re-opened May 4;
• Activated telehealth;
• Closed optical operations for now;
• Began “work from home” strategies for identified personnel;
• Purchased and installed plexiglass guards for front desks and other PPE;
• Obtained 150 COVID-19 tests and created a test site in the parking lot; and
• Partnered with Homeward Bound, Catholic Outreach, and Child & Migrant Services to provide telehealth clinics for homeless or migrant individuals and families at these sites.

Peak Vista Offers Curbside Pharmacy Services to Combat Coronavirus (COVID-19)
In order to comply with social distancing recommendations and to increase efforts to mitigate further spread of Coronavirus (COVID-19), Peak Vista Community Health Centers is now offering curbside pharmacy pick-up services in two locations; Peak Vista’s Pharmacy at its North Academy location and at its South Union Boulevard location, both in Colorado Springs. “We are proud to offer this service to protect our patient population and our staff,” commented Director of Pharmacy Paul Reilly. “We saw an increase of 30 percent in the month of March and we knew we had to make an adjustment to better serve our patients.”

To use the Curbside Pharmacy Pick-up service, patients are encouraged to call their Peak Vista pharmacy as normal and order a prescription refill. A pharmacy technician will walk patients through the process and answer any questions they may have. “This service is only for Peak Vista patients and I highly encourage those interested to become patients,” commented Reilly.

Telehealth and Telemedicine

MarillacHealth Patients Use Telehealth
After just one week of implementation and learning, MarillacHealth’s providers contacted patients to let them know Marillac has a telemedicine system for communicating with patients using telephone and video capabilities. This enables providers to "see" patients remotely, preventing COVID exposure while addressing health needs.

Here is the story of how one patient, Lenni, came to use this new method of care: Lenni works at Sam’s Club. It’s not as busy these days due to the COVID-19 scare, but she’s thankful she still has a job. She’s also thankful for Marillac. When the Stay-at-Home order went into effect, she found herself in need of parts for her prosthetic leg, but the clinic that supplies them required a doctor’s authorization before they could help her. Because her regular doctor was unavailable, the clinic suggested she call Marillac.

“I was a little leery of going to Marillac; I thought they only saw people without insurance, and I have Blue Cross/Blue Shield. But they do take insurance, and thank goodness! And then I didn’t want to come into the clinic if I could avoid it because of the Coronavirus, so the phone appointment worked great.”

Lenni was quickly established as a new patient and talked to her new provider, Dr. Owens, over the phone. Her medical needs were easily taken care of from the comfort of her own home where she was following the Stay-At-Home order. Now she looks forward to the time when she will go to Marillac to follow up with more care, and to meet her new doctor face-to-face.

A Telehealth Story from Mountain Family Health Centers
Mountain Family Health Centers provides high quality, integrated primary medical, behavioral, and dental health care to over 21,000 patients on the western slope. Recently, for the safety of patients and staff,
Along with other CHCs, they have transitioned to telehealth when possible.

With telehealth, patients can speak with medical or mental health providers via video chat and/or telephone. Mountain Family staff are assessing upper respiratory symptoms for the coronavirus either over the phone or video and referring patients if needed to one of the respiratory clinics for testing. For select patients, they are also conducting drive-up primary care curbside visits at Mountain Family facilities in Basalt, Glenwood Springs, Rifle, and Edwards, where patients are treated in cars or in a tent.

After screening for upper respiratory symptoms, staff bring patients into the clinic if necessary. In this way, they are able to reduce the risk of transmission and provide necessary primary care services.

Jenny Lang, FNP, recently shared a moving story about one of her recent telemedicine visits with David, a Roaring Fork resident who is living at home with his parents who are both positive for COVID-19. When she visited with him and his mom on the video screen, she was able to assess that David was improving. She encouraged David to eat and to drink to recover from the coronavirus that he likely has. David, for the first time in days ate a sandwich, drank some fluids, and smiled. His mom said he had not smiled for days. Lang said, “The beauty of this visit is in my heart, seeing David take the first steps to recovery.”

**Peak Vista Community Health Centers Expands Operations to Include Telehealth**

To ensure that patients have access to necessary care, Peak Vista has extended services to include medical and behavioral telehealth care for the Pikes Peak and East Central regions. Patients are now able to schedule a telehealth appointment to address concerns by phone, all from the comfort of their own home. Peak Vista is also still open for in-person medical and dental care.

“In this time of confusion, there is hope and we are here to help,” commented President and CEO Pam McManus. “We commend our staff, and the many other community providers, who have worked tirelessly to be able to provide this critically needed testing and treatment for COVID-19 patients.”

The addition of behavioral telehealth is crucial during this time for patients dealing with worry related to the COVID-19 outbreak. “We have seen an influx in anxiety within the community during the rise of COVID-19,” explains Vice President of Behavioral Health, Sherri Sharp, PhD. “We urge individuals who are feeling distressed to schedule a behavioral health appointment to work through this together.”

Patients are encouraged to call the location near them to schedule an appointment or inquire about COVID-19 testing. Peak Vista remains open for in-person care, as well. “We feel it is our responsibility and our mission to share our expertise and contribute however we can to support patients during this crisis,” commented Chief Medical and Dental Officer, Dr. Lisa Ramey.

**Telehealth at Northwest**

Northwest Colorado Health quickly moved to increase the use of telehealth – video and phone interactions with patients – when the COVID-19 virus arrived in Colorado. Telehealth tools are not a full substitute for a face-to-face appointment but do allow for patient and health care provider safety while making it possible for providers to find out a patient’s needs and issues and determine if they should go to the Health Center for in-person medical services.

In addition, Northwest Colorado Health is providing virtual mental and behavioral health services. Demand for these has increased during the pandemic, and providing virtual services makes it possible for therapists to care for patients living miles away and in different communities on the same day.

Stephanie Einfeld, CEO of Northwest Colorado Health, commented on the long-term viability of telehealth, “In general, this experience has pushed us to be more flexible with how we can provide services. We’re guided by what’s best for the community. I think COVID-19 has helped us prepare for future emergencies and has absolutely shined a light on the passion and abilities of our health care workers.”
Peak Vista Community Health Centers Establishes Community COVID-19 Drive-through Testing
Peak Vista Community Health Centers was the first CHC within El Paso County to provide a COVID-19 drive-through testing site to the Colorado Springs public for symptomatic individuals 12 years of age and older. The testing site opened on Friday, April 17, at Peak Vista’s Academy Campus in Colorado Springs.

On May 5, Peak Vista added a drive-through testing site at Peak Vista’s Health Center at Divide in Teller County. The Teller Combined Agency Team, consisting of the Sheriff’s Office, Fire Department, Emergency Management Officer and Public Health Official EMTs will be onsite to provide screeners, traffic control and security.

No appointment or doctor’s referral is required to receive testing. Those who are symptomatic will be tested for COVID-19 and will be asked to present a form of ID and insurance card, if applicable. Peak Vista will also be screening patients for a sliding fee scale discount.

"Peak Vista is committed to doing what we can to help fight COVID-19 in our communities," commented Chief Medical and Dental Officer Dr. Lisa Ramey. "Thanks to the valiant efforts of our providers and dedicated front-line staff, we will be able to test members of our communities and make decisions about treatment and appropriate next steps."

STRIDE Community Health Center Expands Testing Options
In coordination with state efforts, STRIDE Community Health Center will expand its COVID-19 and IgG Antibody testing to include mobile on-site testing for Front Range rural and suburban communities and businesses in need. Mobile testing is available to businesses, school districts, and local public health agencies who have identified a need in the community. Opportunities for both swab testing and IgG antibody testing are available. Interested organizations may submit a Mobile Testing Request Form.

Drive-thru testing remains open to the general public and individuals do not have to have symptoms in order to be tested. Testing is offered on a first come, first served basis until supplies are depleted. Stridechc.org is updated daily with the latest information about location and hours. As Colorado moves into the next phase of COVID-19 mitigation, STRIDE is also treating patients who have tested positive for COVID at two CHC facilities. This allows STRIDE to care for patients who are not sick enough to go to an emergency room but have not yet completed the requirements for receiving general care at the CHC. This is another way STRIDE is helping to manage the pandemic by helping keep people out of emergency rooms.

STRIDE Community Health Center and Cherry Creek School District partnered together to provide drive-through COVID-19 swabbing for community members at Overland High School on Friday, May 8. Testing was open to any individual in need in the community that had experienced COVID-19 symptoms in the previous 14 days. Additional testing dates at Cherry Creek Schools will continue through June.
STRIDE Community Health Center Providing Telehealth Care to COVID-19 Patients in City of Aurora’s Isolation/Quarantine Hotel

The City of Aurora started a program to help persons experiencing homelessness to access the basic health precautions. The program is a collaboration of several partners, included STRIDE Community Health Center, as well as Adams and Arapahoe County, Aurora@Home, Children’s Hospital Colorado, Medical Center of Aurora, Social Services Partners, University of Colorado Hospital and the VA Hospital.

In this program, community members experiencing housing insecurity are provided with temporary housing, transportation to a non-contact shelter established in a vacant hotel, 24/7 care, meals, and a referral to STRIDE Community Health Center for medical and behavioral health needs.

“With the help of STRIDE providers, we can keep people experiencing homelessness or overcrowded, unstable housing situations safe for the duration of their illness as well as their recovery. The best possible outcome is that folks who stay at the center leave to a more stable housing situation than when they came to us,” said Shelley McKittrick, Homelessness Program Director of the City of Aurora. More details here.

Partners submit a referral for individuals who have tested positive, are symptomatic, or live in an overcrowding situation where quarantining would be difficult. They are either seen by STRIDE or by a Primary Care Provider.

Colorado Coalition for the Homeless Opens Satellite Clinic and Motel Rooms, and is Awarded Grant

Colorado Coalition for the Homeless (CCH) was awarded $35,000 through a funding partnership between Kaiser Permanente and the National Health Care for the Homeless Council (NHCHC). CCH was one of sixteen nonprofits meeting the health needs of people experiencing homelessness in the midst of the COVID-19 pandemic selected to receive the grant.

The Colorado Coalition for the Homeless (CCH) continues to provide integrated health services to meet the needs of people experiencing homelessness in Metro Denver—a population which is extremely vulnerable during the COVID-19 pandemic. On April 11 and 12, CCH set up a satellite clinic at the National Western Complex to provide primary and behavioral health services to the guests of the auxiliary shelter. CCH staff are providing health screenings at the door to help contain the potential spread of the virus in the new shelter facility. Individuals with symptoms or known exposure are further triaged and evaluated for testing. For those who meet the public health guidelines for testing, CCH staff transport them to motel rooms designed for “activated respite” set up by CCH and the City of Denver to await testing results.

Since the COVID-19 public health crisis began, CCH has secured 374 motel rooms for individuals who are experiencing homelessness and are either awaiting test results or recovering from the COVID-19 virus, for both activated respite and protective action stays, which includes places for people experiencing homelessness who are referred from shelter providers because they are at high risk for health complications if they contract the virus. That contract has an option to add an additional 138 units if CCH reaches capacity with the other rooms and locations.

This effort would not have been possible without the partnership between the City of Denver and CCH, and the support provided by the Governor’s Office for National Guard deployment. CCH staff continue to engage in outreach to local motels across the city to encourage partnership in providing these critical resources to individuals who are unable to “stay at home” during this crisis. CCH encourages hotel or motel operators to contact them if they have rooms they can make available for this purpose.

The critical screening, testing, and isolation services provided by CCH for those with COVID-19 symptoms have likely slowed the spread of the virus among those experiencing homelessness in Denver but much more needs to be done. CCH is going through supplies like masks, gloves, soap, and other sanitation supplies quickly in order to keep facilities clean, patients and staff safe. These steps are expected to cost an extra $1.3 million over the next four months.
CCH has also been very engaged in advocating for more resources from the Governor’s Office to address the critical and unique needs of those experiencing homelessness. On April 7, CCH supported the action of 23 elected officials who sent a letter to Governor Polis requesting the commitment of additional resources, staff, testing capacity, and personal protective equipment for providers to immediately address the needs of people experiencing homelessness in the Denver area. CCH also joined a letter to Governor Polis as a member of the Denver Homelessness Leadership Council, requesting action to increase the number of motel and hotel rooms available to people experiencing homelessness for isolation and recovery, and for high-risk individuals. Finally, CCH sent a letter directly to Governor Polis requesting immediate action to secure deployment of the National Guard to de-densify current shelters in Denver and a request that the Governor exercise executive power to secure additional motel and hotel spaces for people experiencing homelessness across the state by whatever means necessary.

**Peak Vista’s Health Center at Rio Grande Partners with Springs Rescue Mission to Better Serve Community**

Peak Vista Community Health Centers is taking new measures to protect people experiencing homelessness from the ongoing spread of Coronavirus (COVID-19) by temporarily relocating the Health Center at Rio Grande to the Spring Rescue Mission (SRM) campus in Colorado Springs, and providing primary medical and behavioral health care, COVID-19 testing, and transportation assistance to those in need.

According to Peak Vista’s Director of Health Equity Anne Beer, “people who are experiencing homelessness have a higher incidence of chronic illnesses and shorter life expectancy. Because we know that underlying health conditions put people at higher risk, this translates directly to a higher risk for our homeless patients.”

Larry Yonker, President & CEO of SRM, said, “we believe that Peak Vista’s full-time presence on our campus will help hundreds of our neighbors experiencing homelessness receive essential physical and behavioral medical care.”

Peak Vista and Springs Rescue Mission have been in partnership for many years and share a common goal to protect those most vulnerable during this pandemic. Peak Vista will provide services Monday through Friday from 8:00 a.m. – 5:00 p.m. at the Springs Rescue Mission campus.

**CHAMPS COVID-19 Resources**

Community Health Association of Mountain/Plains States (CHAMPS) has been working diligently to support Region VIII Community Health Centers (CHCs) and Primary Care Associations during the current novel coronavirus outbreak, striving to optimize learning and promote public health by providing online resources, targeted trainings, region-specific data, and more.

In March, CHAMPS released a robust webpage of Coronavirus Disease 2019 (COVID-19) Resources that is continuously updated with new materials as they become available. This clearinghouse provides a wealth of information pertinent to CHC staff, operations, and training, as well as resources that address and promote mental, physical, financial, and familial wellness during and beyond this pandemic.

In May, CHAMPS published a new webpage of Resiliency Resources that introduces resiliency concepts and contains articles, tools, personal resilience resources, and guides for organizational programming. These resources have been selected to help CHCs and CHC staff practice strength, compassion, and mindfulness as they build resiliency skills.

In collaboration with the Western Montana Area Health Education Center, CHAMPS is hosting a Resiliency Learning Community: “Building Resiliency Skills: Walking Together Towards Healing in a Time of Collective Loss.” The Resiliency Learning Community is being offered for free and is open to any Region VIII CHC or Primary Care Association staff. The four sessions will be held every Thursday in May from 12:30-1:30 p.m.
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MT. To learn more or register, visit the CHAMPS Project ECHO Learning Communities webpage.

Additionally, CHAMPS hosted a call with New York Community Health Center Chief Medical Officers on April 23 to discuss lessons learned during the pandemic. Five New York CMOs graciously gave their time to share experiences, ideas, strategies, and insights from their COVID-19 response with Region VIII CHC clinicians. View the recording of that event on the Archived CHAMPS Distance Learning Events webpage.

Content of other CHAMPS intensives, including Spanish Language for Health Care Professionals and CORE Competencies for First-Time CHC Supervisors and Managers trainings, was updated to address the pandemic, and CHAMPS hosted a special session of the Region VIII Health Care for the Homeless Collaborative in April to allow for peer-based discussions on serving people experiencing homelessness during the COVID-19 pandemic.

CHAMPS is compiling the Region VIII state results from the weekly Health Resources and Services Administration (HRSA) COVID-19 Health Center Survey, comparing Region VIII figures with national data and illustrating the current Region VIII response to, and resource needs related to, COVID-19. CHAMPS encourages all CHCs to complete the survey each week; the results help CHAMPS better serve Region VIII CHCs and the findings also influence policy and funding decisions at a national level. To review the Region VIII results of this survey each week, visit CHAMPS Coronavirus Disease 2019 (COVID-19) Resources webpage. For more information about the survey, visit HRSA’s Coronavirus Disease 2019 (COVID-19) Frequently Asked Questions webpage.

CHAMPS sincerely thanks CCHN and all Colorado CHCs for the tremendous, courageous, and inspiring work you are doing to support your communities. CHAMPS wants to ensure you have the resources you need to serve your patients and communities during this difficult time; please do not hesitate to contact us if we can be of assistance.

Medical Assistant Education in the time of COVID-19

The National Institute for Medical Assistant Advancement (NIMAA) successfully launched its first ever spring cohort, with three partner health organizations in three states in early March 2020. COVID-19 created some unexpected challenges; however, NIMAA’s long-standing distance-learning model helped the organization transition to this new reality smoothly and with minor adjustments. Students were able to continue their didactic learning without skipping a beat. While the in-clinic experience is paused, students are gaining new and timely skills as they wait to complete their externship work later in the program.
Students are learning about COVID-19 and, through NIMAA’s partners at the Weitzman Institute, about telehealth and the role it plays during this global pandemic. During this time, NIMAA graduated 65 students from the fall 2019-20 cohort, with 33 graduates in Colorado. On behalf of Valley-Wide Health Systems, Inc., a new partner organization in that cohort, Janelle Lucero and Denise Trujillo commented, “NIMAA is a great program that helps personalize learning for each student to fit their own learning needs based on both data, teacher observation, and self-awareness. Valley-Wide Health Systems has benefited from acquiring confident, curious, and motivated Medical Assistants (MA). Thank you, NIMAA!”

In addition, NIMAA staff are supporting other organizations by sharing their expertise in the field of online education through blog posts on NIMAA’s website and in a webinar series on the role of the MA (registration for the series is located here). The clinic environment will be forever altered when students re-start their externship, and NIMAA is ensuring their instruction and student experience reflect this new reality. Applications are currently open for the Fall 2020 cohort, and NIMAA staff look forward to welcoming a new class of future MAs and new CHC partners, including NIMAA’s first partner in Montana this September.

**Surprise Parade at Sunrise in Evans Honors Front Line of Pandemic Responders**

On April 21, Sunrise’s North Campus (Monfort Children’s Clinic, Sunrise Family Dental, Sunrise Adelante Clinic, Sunrise North Range Clinic, Prenatal) organized a surprise parade honoring health care workers and other first responders for Sunrise’s South Campus (Monfort Family Clinic; and the School Based Health Centers, Kids Case Clinic and Bond Children’s Clinic). Sunrise’s respiratory cases are being treated at the South Campus and in Loveland.

Word got around about the parade between first responders and the show of support was larger than anyone expected. Participants included police departments from Evans and Garden City, Evans Fire District, La Salle Fire District, Front Range Fire Rescue, and UCHealth Paramedics.

Watch the video shared by the City of Evans [here](#).

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**CCHN Staff**

CCHN using Zoom to participate in a staff meeting virtually, in order to continue serving our member CHCs during the COVID-19 pandemic.
Sara Wittner was the Senior Executive Assistant to CCHN’s CEO and was a valued member of our team. Ms. Wittner joined CCHN in April 2019 and, in her spare time, fought to help break stigma associated with substance use disorder through participation in the Lift the Label Campaign through the Office of Behavioral Health, and advocated through Young People in Recovery and the Harm Reduction Action Center. Ms. Wittner also enjoyed performing arts and was a member of a local choral music group.

Ms. Wittner suffered with substance use disorder and fought hard over several years for her sobriety. She passed away on April 16, 2020, as a result of her ongoing struggle with addiction. Ms. Wittner leaves behind a large, loving family, and she is missed by friends and coworkers.

Sunrise Community Health staff welcome Sara Wittner to their community fair in Loveland during National Health Center Week 2019. From left: Madisha Guzman, Sunrise; Ms. Wittner; and Macayla Roberts, Sunrise.

Sara Wittner, joined by Polly Anderson and other CCHN staff, in advocacy for federal funding, wearing “blue to renew,” Sept. 10, 2019.

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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 more than 830,000 of their community members - one in seven people in Colorado - from 63 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 senior manager for federal policy and communications, at maureen@cchn.org or (303) 861-5165, ext. 259.