

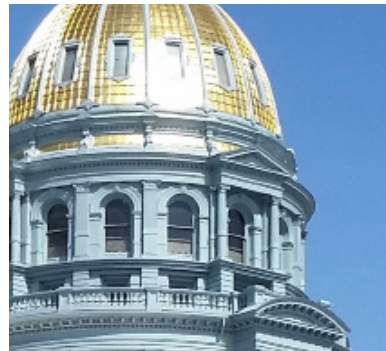
# 2019

Report to the Colorado General Assembly

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## Statewide Health Review Committee



Prepared by Legislative Council Staff  
Research Publication No. 737  
December 2019

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# **Statewide Health Care Review Committee**

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***December 2019***

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December 2019

To Members of the Seventy-second General Assembly:

Submitted herewith is the final report of the Statewide Health Care Review Committee. This committee was created pursuant to Article 16 of Title 10, Colorado Revised Statutes. The purpose of this committee is to study health care issues that affect Colorado residents throughout the state.

Sincerely,

/s/ Senator Leroy Garcia  
Chair

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*This report is also available online at:*

*<https://leg.colorado.gov/committees/statewide-health-care-review-committee/2019-regular-session>*

## **Committee Charge**

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The year-round Statewide Health Care Review Committee was created pursuant to Senate Bill 19-015 to study health care issues across the state. The committee is authorized to meet two times during each interim, unless additional meetings are authorized by the Executive Committee of the Legislative Council. Two of the meetings may be field trips. The committee is charged with studying health care issues that affect Colorado residents throughout the state, including the following:

- emerging trends in Colorado health care and their effects on consumers, providers, and payers;
- the ability of consumers to obtain and keep adequate, affordable health insurance coverage;
- the effect of changes in the way health care is delivered and paid for;
- trends in health care coverage rates for individuals, employees, and employers and in reimbursement rates for health care services;
- access to and availability of federal funds and waivers of federal law;
- innovations in health care and health care coverage;
- health care issues that arise in or are unique to rural areas of the state;
- access to timely and quality health care and emergency and nonemergency medical transportation;
- options for addressing the needs of uninsured and underinsured populations;
- issues related to the health care workforce, including network adequacy and the adequacy of access to providers; and
- any other health care issue affecting Colorado residents that the committee deems necessary to study.

The committee cannot recommend legislation.

## **Committee Activities**

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During the 2019 interim, the committee traveled to southeast Colorado and the San Luis Valley to learn about health care issues that arise in or are unique to rural areas of the state. Staff from the Colorado Rural Health Center and Healthier Colorado collaborated with committee staff to organize the three-day tour.

During the tour, the committee held two public meetings and toured and met with staff at:

- the Walsh Medical Clinic;
- the High Plains Community Health Center;
- the San Luis Valley Health Antonito Clinic;
- the Conejos County Hospital;
- the Alamosa County Public Health Department;
- San Luis Valley Area Health Education Center;
- the Alamosa County Jail;
- Crossroads' Turning Points detoxification facility and methadone clinic; and
- the Center for Restorative Programs.

The following sections discuss the committee's activities during the 2019 interim in more detail.

## **Tour of Southeast Colorado – Day One – Walsh and Lamar**

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**Walsh Medical Clinic, Dental Clinic, and Ambulance Service.** The committee met with local health care providers and toured the Walsh Medical Clinic, Walsh Ambulance Service, and the Walsh Dental Clinic. Staff at the medical clinic told the committee about the services they provide, which includes wellness exams, family planning services, cancer screenings, acute visits, chronic illness management, and care for minor emergencies and trauma. The health care providers discussed the payer mix for the clinic, which is 26 percent Medicaid patients, 27 percent Medicare patients, and the remaining patients are uninsured or covered by private insurance. The local providers spoke about the challenges the community faces accessing services beyond those offered at the clinic due to the distances community members must travel, such as lack of access to a pharmacy and specialty care; the difficulty Medicaid members face getting coverage for medical services provided in Johnson City, Kansas, where the health care providers closest to Walsh are located; and access to full dental services.

The Emergency Medical Services (EMS) director of the Walsh Ambulance Service told the committee that his organization provides basic and advanced life support to residents in the eastern half of Baca County under the supervision of the Walsh Hospital District Board. He discussed the challenges related to finding enough qualified individuals to operate an ambulance service, the burden on EMS providers to comply with national association certification requirements, rather than the previous requirements established in Colorado law, and the grants awarded by the Colorado Department of Public Health and Environment to his agency to purchase EMS equipment and a new ambulance.

The dental hygienist spoke about the challenges she faces providing dental hygiene services to the community and the difficulty local residents have accessing full dental services after the only dentist moved away. She discussed the difficulty related to recruiting a dentist to provide services in Walsh.

**High Plains Community Health Center.** The committee toured the High Plains Community Health Center, which is a federally qualified health center that serves patients from all over southeastern Colorado including Prowers, Baca, Bent, and Kiowa Counties. The committee learned about services provided at the clinic, including acute medical and dental care; well-child exams; obstetrics care; pharmacy access; health education; radiology and laboratory services; chronic illness care; well woman exams; and individual, group and family psychotherapy. The health center also operates clinics in Holly, Wiley, and Lamar Community College.

**Public meeting.** The committee held a public meeting at the Lamar Community Building on October 1, 2019. The committee heard presentations from representatives of the following local government agencies, health care agencies, and nonprofit organizations:

- Lamar Police Department;
- Prowers County Department of Public Health and Environment;
- Kiowa County Public Health;
- Baca County Public Health Agency;
- Regional Health Connector Program;

- Southeast Health Group;
- Crossroads Turning Points, Inc.; and
- High Plains Community Health Center.

Three general themes emerged from the testimony provided during the public meeting: the difficulty all agencies face hiring and retaining qualified health care and public health professionals; the challenges the community faces due to increased mental health and addiction issues in the area; and the need for collaboration between local law enforcement officials, public health and human services agencies, and private health care agencies and providers to leverage key resources and provide care and services to the residents of southeast Colorado.

The Lamar Chief of Police presented on issues that law enforcement officials face when handling individuals who are experiencing a mental health crises and individuals who use drugs. The committee learned about the city's implementation of a co-responder program, which pairs law enforcement and behavioral health specialists to respond to behavioral health related calls for police service. The committee also learned about the loss of grant funding for the Regional Health Connector Program located in southeast Colorado. This program focuses on building and strengthening networks of primary care, public health, human services, and community organizations working to improve health.

Representatives of county departments of public health discussed their efforts to administer all of the public health programs under their jurisdiction with limited staff and funding. The committee learned about how these agencies partner with other community resources to provide services and the difficulty these agencies experience in complying with burdensome paperwork related to grant funding. The committee also learned that grant funding helps support many public health initiatives, but the funding often does not cover the cost of hiring staff to implement to the programs.

The representatives of Southeast Health Group, Crossroads Turning Points, Inc., and High Plains Community Health Center discussed the services they provide to the community, such as mental health and substance use disorder treatment; primary care; physical therapy and wellness; and peer support services. The committee learned about the use of the federal school loan repayment programs to recruit dental and medical professional to work in the area. The committee also learned about the social determinants of health that impact the population of southeast Colorado, including the rate of childhood poverty. Other issues discussed included: the need for affordable housing for at-risk populations; the increase in suicide and substance abuse rates; provider reimbursement rates; and behavioral health services offered including, detoxification facilities, outpatient services, and methadone clinics.

## **Tour San Luis Valley – Day Two – Antonito, La Jara, and Alamosa**

**San Luis Valley Health Antonito clinic.** The committee toured the San Luis Valley Health Clinic in Antonito. The clinic serves the primary health care needs of the residents of Costilla County and the surrounding areas, including some residents of New Mexico. The clinic staff discussed the types of services provided and the types of patients who visit the clinic, which includes many children and people with diabetes. The staff stated that the clinic sees over 700 patients a month and about

80 percent of the clients are on Medicare or Medicaid. The clinic staff discussed the need for more space and that the nearest pharmacy is in La Jara, which is about 15 miles away.

**Conejos County Hospital.** The committee toured the Conejos County Hospital, which is part of San Luis Valley Health, and met with members of hospital staff. Conejos County Hospital is a 17-bed, critical access hospital, and the only emergency service provider in Conejos and Costilla Counties. The hospital provides emergency services, acute care, laboratory services, and radiology, as well as on-site physical and occupational therapy. The hospital staff discussed the difficulties with hospital and paramedic staffing, the need for behavioral health services in the area, and issues related to mental health holds.

The staff discussed issues related to opioid use. The hospital is participating in the Colorado Clinicians United to Resolve the Epidemic (CO CURE) Initiative, which is an initiative of the Colorado Hospital Association, Colorado Medical Society, and Colorado Consortium for Prescription Drug Abuse Prevention designed to address the opioid epidemic in Colorado. The CO CURE Initiative is working towards resolving the opioid epidemic in Colorado by developing guidelines targeted towards limiting opioid use, using alternatives to opioids for the treatment of pain, implementing harm reduction strategies, and improving the treatment and referral of patients with opioid use disorder. The staff also discussed potential improvements to the Prescription Drug Monitoring Program, such as increasing the ability to flag people who could be potentially abusing opioids.

**Rural county public health departments.** The committee met with a number of county public health directors in the San Luis Valley. The directors discussed the challenges facing rural public health departments, including minimal staffing and the amount of personnel time needed to complete paperwork for various grants. They also discussed the rigidity of many of the funding streams that fund public health departments, which restricts how departments can pay for crisis services when there is a disease outbreak or wildfire. During this discussion, the directors explained how beneficial the financial risk management system adopted by the Colorado Department of Public Health and Environment has been to public health departments, and expressed how other state departments could use this as a model to better coordinate contracts with local departments. The directors also discussed the Rocky Mountain Prevention Research Center (RMPRC), which is housed in the Colorado School of Public Health on the University of Colorado Anschutz Medical Campus. The RMPRC conducts community-engaged research with schools and communities to achieve health equity by optimizing social-emotional, mental, and physical health.

**Public meeting.** The committee held a public meeting at the Alamosa Family Recreation Center on October 2, 2019. The committee heard presentations from representatives of local government agencies, health care agencies, and nonprofit organizations, including:

- the Alamosa County Public Health Department;
- the Rio Grande County Public Health Department;
- San Luis Valley Behavioral Health Group;
- Valley-Wide Health Systems, Inc.; and
- San Luis Valley Health.



Emerging themes from these presentations included challenges regarding substance use, behavioral health, health care staffing shortages, lack of adequate transportation, and the limited availability of affordable housing in the community.

During the meeting, a representative from the Alamosa County Public Health Department discussed the community's demographics, the need to coordinate care for the residents of the San Luis Valley, recent legislation concerning substance use disorder treatment, and immunizations rates in the area. A representative from the Rio Grande County Health Department discussed issues related to the poverty rate in the San Luis Valley, food insecurity, foster care funding, and the need to safeguard funding for rural hospitals.

The committee heard a presentation from the San Luis Valley Behavioral Health Group, which is a nonprofit organization that provides behavioral health services in the San Luis Valley. Representatives from the organization discussed the services the organization provides, the difficulties of providing integrated care due to federal privacy rules, involuntary mental health holds, issues related to substance use, the availability of affordable housing in the area, and suicide rates in the San Luis Valley.

The committee heard a presentation from the Valley-Wide Health Systems, Inc., which is a federally qualified health center that provides integrated primary and preventive care at 19 clinics in southern Colorado. A representative from Valley-Wide Health Systems discussed the services and programs provided by the organization, the barriers to care for residents of the San Luis Valley, the transportation limitations in the area, the impact on the community of the opioid epidemic, and the uninsured rate in the area.

The committee heard a presentation about San Luis Valley Health, which is a regional health provider that operates two hospitals and five clinics in the San Luis Valley. A representative from San Luis Valley Health discussed the organization's employees, patients, services, and budget; the challenges of providing behavioral health services; reimbursement requirements for federally qualified health centers; and ways to reduce the shortage of health care professions.

Additionally, the committee took public testimony at the meeting. Members of the public discussed the Law Enforcement Assisted Diversion (LEAD) Program, which provides wrap-around case management services and is more fully discussed later in this report; substance use disorders; limited housing options; lack of transportation in the area, and the need for healthy recreational opportunities for youth living in the community.

## **Tour San Luis Valley – Day Three – Alamosa**

**San Luis Valley Area Health Education Center (AHEC).** The committee met with staff from the San Luis Valley Area Health Education Center. The AHEC Program was established in 1972 by Congress. AHECs are nonprofit organizations located in designated regions where health care and health care education needs are not adequately met. The San Luis Valley AHEC was formed in 1978, and is one of six independent AHECs in the state. The San Luis Valley AHEC provides multidisciplinary services to underserved areas in the following six counties: Alamosa, Conejos, Costilla, Mineral, Rio Grande,

and Saguache. The San Luis Valley AHEC provides a number of programs and services, including: caseworkers, health screenings, Home Instruction for Parents of Preschool Youngsters (HIPPY), HIV and AIDS prevention, housing for medical students, naloxone trainings, suicide prevention, and workforce development. The San Luis Valley AHEC works with a number of community partners throughout the area, such as the organization discussed below, which the committee also toured.

**Crossroads' Turning Points, Inc.** The committee toured the Crossroads' Turning Point facility in Alamosa. Crossroads' Turning Point is southern Colorado's largest evidence-based alcohol and substance use disorder treatment organization. It is a nonprofit organization that serves 12 counties. The facility in Alamosa operates a 12-bed detoxification center, where the average stay is about eight days. The facility operates a methadone clinic, which serves about 90 clients. The facility provides other outpatient substance use services and group and individual counseling. Staff at the facility stated that there are not any inpatient treatment options in the San Luis Valley.

**Alamosa County jail.** The committee toured the Alamosa County Jail. The committee observed how the staff manages the jail population. The jail staff discussed the recent improvements to the facility that address staff and prisoner safety. The county sheriff discussed participation in the LEAD Program and medication-assisted treatment. The LEAD Program is collaborative partnerships between local law enforcement, district attorney's offices, sheriffs, treatment providers, and other community stakeholders. More information about the LEAD Program can be found in the next section of this report. Medication-assisted treatment is the use of medications in combination with counseling and behavioral therapies for the treatment of substance use disorders. The staff discussed how certain inmates can receive Vivitrol, which is a prescription medication used to treat alcohol dependence or prevent relapse to opioid dependence, after opioid detoxification.

**Center for Restorative Programs.** The committee visited the office of the Center for Restorative Programs and had a roundtable discussion with several of the staff members. The center is a community-based nonprofit organization serving youth-in-conflict in south-central Colorado. It operates a number of different programs, including the LEAD Program, which was the focus of the discussion with the committee. The LEAD Program is a pre-booking diversion program that aims to improve public health and to end recidivism. Instead of being charged and booked following an arrest, the arresting officer identifies the arrestee as a potential participant for the diversion program and subsequently connects them with a case manager. The case manager then provides a holistic approach to connecting the individual with resources such as housing and substance use treatment services or enrolling the participant in vocational training courses. The LEAD caseworkers shared how they interact with their clients to provide a variety of services. Each caseworker has a caseload of about 60 clients.

The staff discussed the needs in the community for transportation, housing, and treatment centers. The issue of the ability to keep staff was raised, since much of the organization's funding is through grants or pilot programs. The point was made that often pilot programs or grants only provide funding for a relatively short time, such as three years, which does not allow enough time for a program to become fully operational and produce results before the funding ceases.

## Resource Materials

Meeting summaries are prepared for each meeting of the committee and contain all handouts provided to the committee. The summaries of meetings and attachments are available at the Division of Archives, 1313 Sherman Street, Denver (303-866-2055). The listing below contains the dates of committee meetings and the topics discussed at those meetings. Meeting summaries are also available on our website at:

<https://leg.colorado.gov/content/committees>

### Meeting Date and Topics Discussed

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October 1, 2019

- ◆ Presentations by local agencies and organizations
- ◆ Public testimony

October 2, 2019

- ◆ Presentations by local agencies and organizations
- ◆ Public testimony