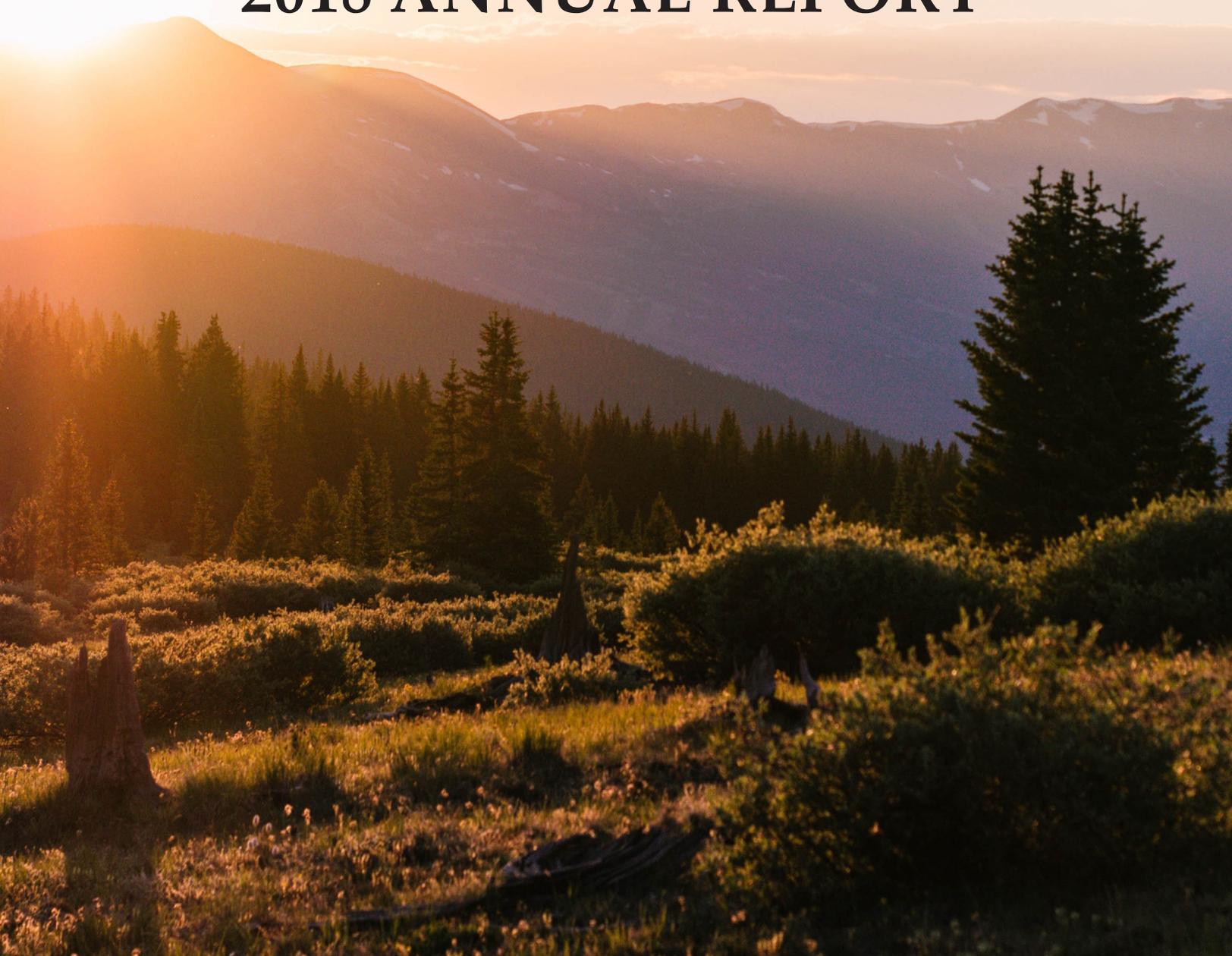


The logo features a stylized green sunburst with a blue crosshair intersecting it, positioned between the letters 'O' and 'L' in the word 'COLORADO'.

# COLORADO RURAL HEALTH CENTER

*The State Office of Rural Health*

## 2018 ANNUAL REPORT





## *Thank you for making 2018 an amazing year!*

On behalf of the staff and board of the Colorado Rural Health Center (CRHC), I want to offer my heartfelt gratitude for all the support and collaboration in 2018. As the State Office of Rural Health and Rural Health Association, the commitment to CRHC's mission "to enhance healthcare services by providing information, education, linkages, tools and energy towards addressing rural healthcare issues" and our vision "to improve healthcare services available in rural communities to ensure that all rural Coloradoans to have access to comprehensive, affordable, high quality healthcare" has never been stronger.

### *CRHC invested \$2.6 Million in rural communities in 2018.*

CRHC receives grant funding each year that aligns with our mission and vision, over \$1,100,000 in federal funding was received to support Colorado's rural hospitals and clinics, over \$750,000 in private funding to support quality improvement efforts to Colorado's rural hospitals and clinics and over \$780,000 in state funding to support quality improvement and emergency preparedness efforts. CRHC provided just over 14,000 technical assistance encounters, worked with 15 rural clinics on oral health integration and worked with 14 critical access hospitals and rural health clinics on the iCARE program that demonstrated a 3% readmission rate. Our educational events continued to grow with over 130 opportunities offered and 375 hours of direct Health Information Technology support provided to rural communities. On top of our work directly with members, our policy team supported 33 bills and CRHC testified on a number of bills that directly impact rural communities.

As the Chief Executive Officer of CRHC, it is my privilege to serve all 47 rural communities. With your ongoing support, CRHC will continue to be a voice and a resource. Thank you!

Michelle Mills, CEO  
Colorado Rural Health Center

# About Us

## Our Organization

The Colorado Rural Health Center (CRHC) was established in 1991 as Colorado's State Office of Rural Health. As a 501(c)(3) nonprofit organization, CRHC serves dual roles as the State Office of Rural Health with the mission of assisting rural communities in addressing healthcare issues; and as the State Rural Health Association, advocating for policy change on behalf of its members and all rural healthcare providers.

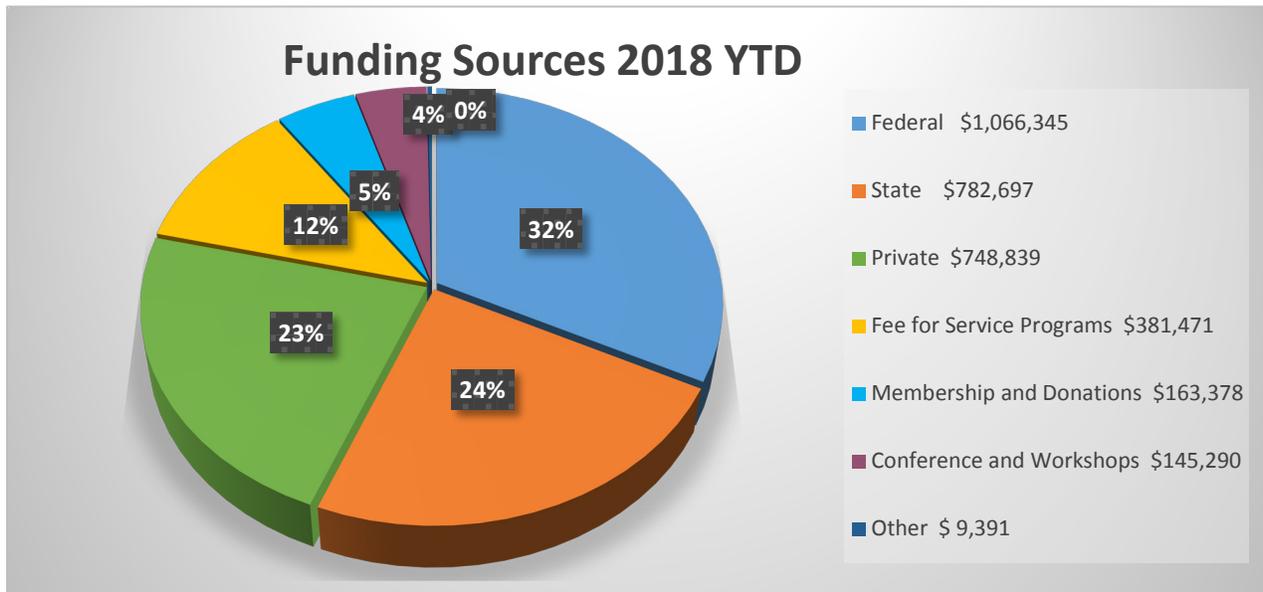
## Mission & Vision

Our mission is to enhance healthcare services in the state by providing information, education, linkages, tools, and energy toward addressing rural health issues. Our vision is to improve healthcare services available in rural communities to ensure that all rural Coloradans have access to comprehensive, affordable, high quality healthcare.



137  
2018 Members

## 2018 Operating Budget



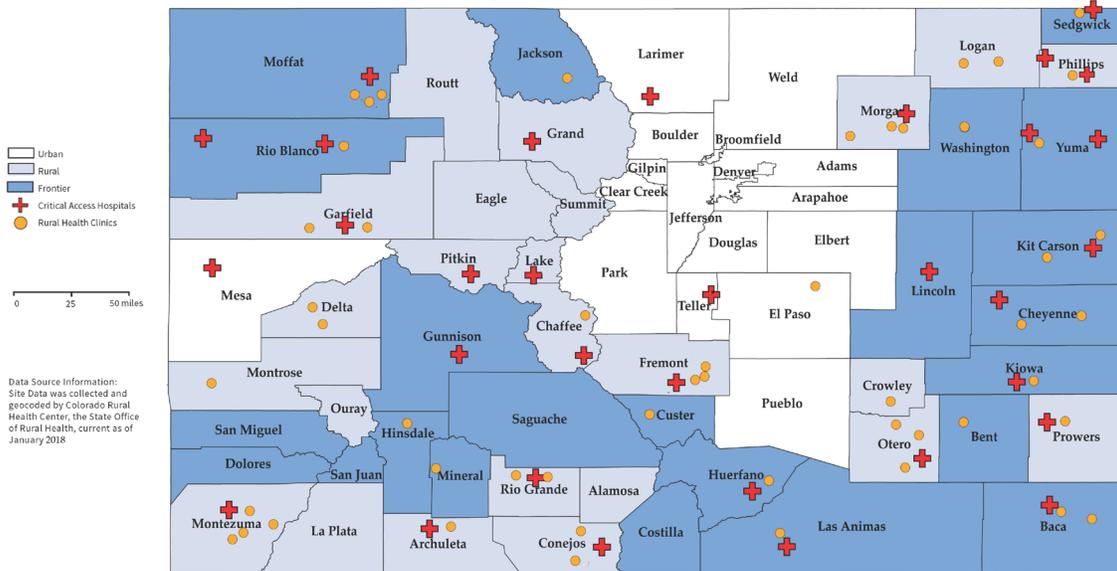
Thank you to all of our members, partners, sponsors, board members, and staff.



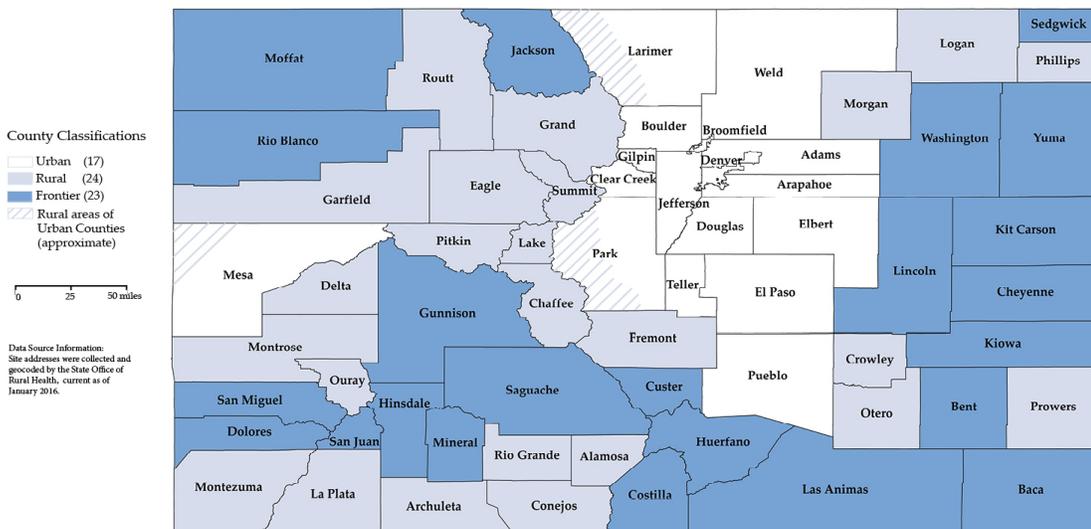
# Key Maps



## Colorado: Rural Health Facilities within County Designations, 2018



## Colorado: County Designations, 2018



# Clinics

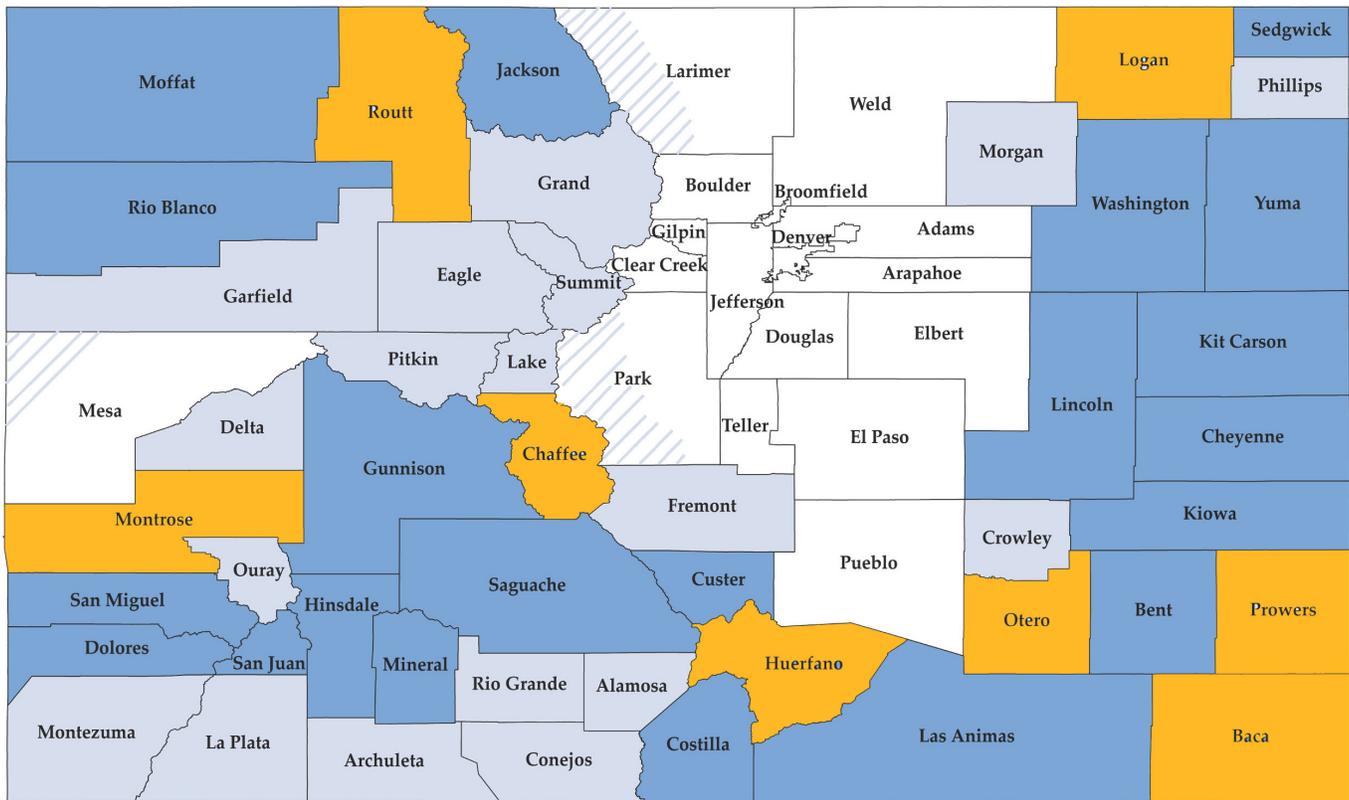
Colorado's 48 Rural Health Clinics (RHCs) were supported through certified rural health clinic compliance training and support, billing and coding workshops, healthy clinic assessments, gap analysis studies, HIT support, feasibility studies, customer service trainings, and quality improvement initiatives.

## Clinic Transformation and Sustainability Assessments (CTSA)

CRHC helps rural clinics by facilitating Clinic Transformation and Sustainability Assessments (formerly known as Healthy Clinic Assessments) on the clinic's daily operations and processes. The CTSA focuses on streamlining processes and workflow which increase efficiency and clinic revenue by assessing and optimizing basic business operations, while creating an overall improvement in quality.

Clinics that have been evaluated for consecutive years have shown marked improvement in both specific measures and overall scores.

# 8 CTSA's Conducted in 2018



Eight counties benefited from CTSA's and four recommendations were made that led to the clinic participating in other CRHC activities.

## Clinic Improvement Services Conducted



RHC 101s completed



Policy and Procedure Manuals Distributed



Mock Surveys Completed



Annual Evaluation Templates Distributed



# Quality

## iCARE: Improving Communications and Readmissions

The three primary goals of CRHC's iCARE program are to work with hospitals and clinics to:

1. Improve communications in transitions of care
2. Improve the clinical process and systems to reduce readmissions, particularly for heart failure, pneumonia, and diabetic patients
3. Maintain low readmission rates

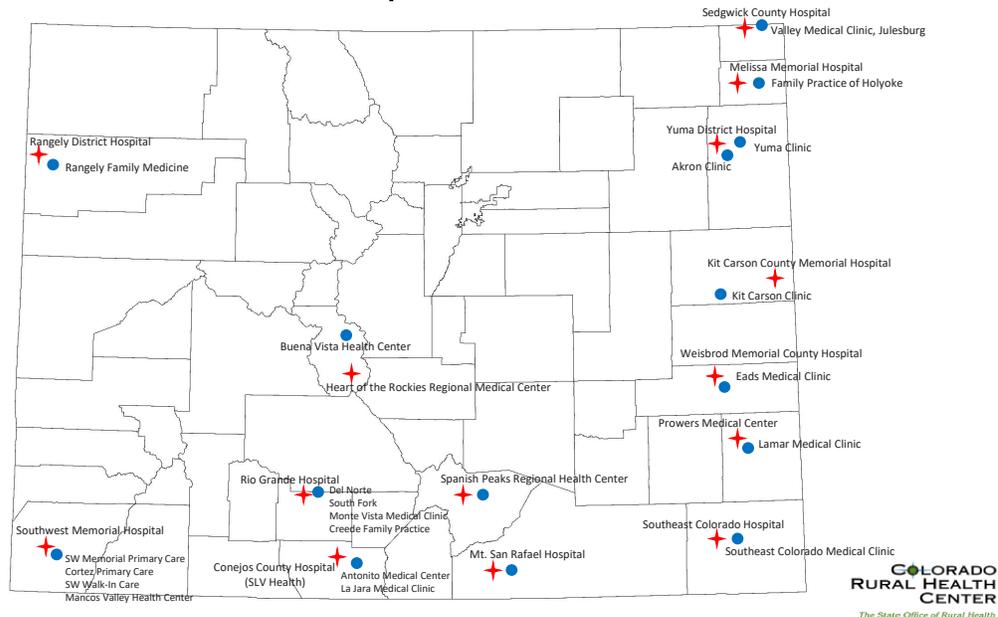


## iCARE Participation and Progress



### Colorado: iCARE Hospitals and Clinics, 2018

**Facility Participation**  
 14  
 Critical Access Hospitals  
 15  
 Clinics



### Diabetic Patients Demonstrating Good Control

58% of diabetic patients who receive care at iCARE participating clinics demonstrate good control of blood glucose levels. Nationally only 55% of diabetic patients with Medicaid, have good control.



73% of patients at iCARE facilities are receiving HbA1C testing

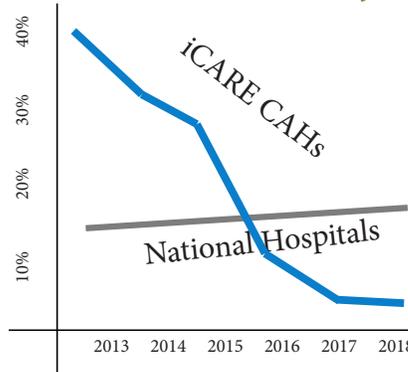
### Controlling High Blood Pressure



# 66%

Percentage of patients showing good control of high blood pressure

### Readmission Rates (2013-2018)



From 2016-2018, iCARE CAHs reported an average 3% readmission rate, a 35% decrease since 2013. The national hospital average is 15.3%





# Emergency and Trauma Education

The Colorado Resource for Emergency and Trauma Education (CREATE) provides education and training for emergency medical and trauma service providers working in Colorado.



Colorado Resource for Emergency And Trauma Education

## 2018 CREATE Accomplishments

- 81 general CREATE applications reviewed
- Typical courses approved for funding: EMT, Intermediate to Paramedic Bridge, Paramedic, Critical Care Review, Rural Trauma Team Development Course, State EMS Conference



**\$561,600 total awarded for education**

875 students completed their approved education

### Types of facilities that received funds

24



EMS  
Transport

20



Fire with  
EMS

3



Fire with  
EMS, non  
transport

5



Hospitals

1



College



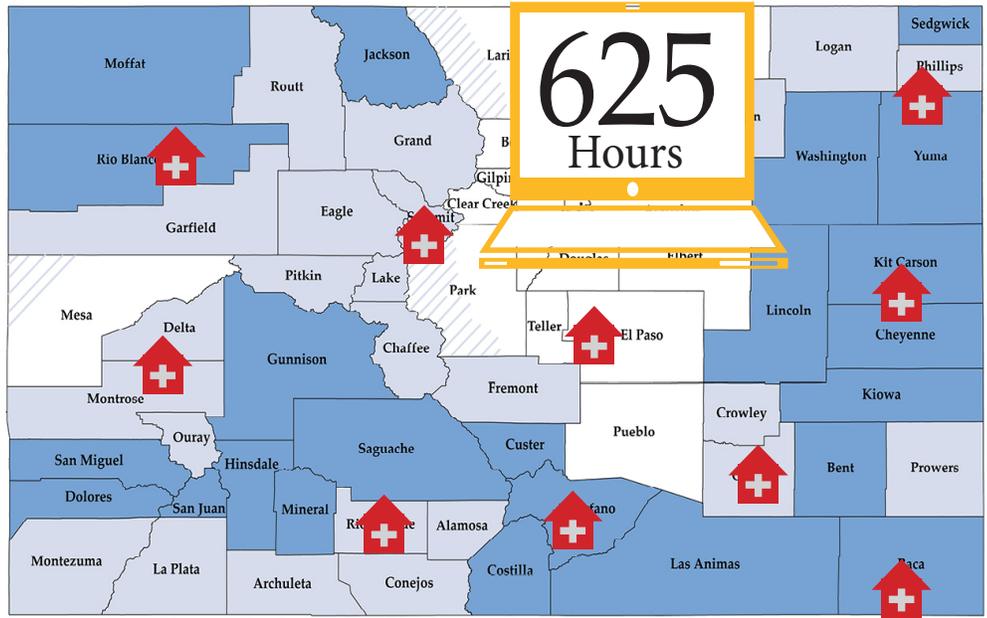
# Health Information Technology

Health information technology (HIT) is the use of applications to record, store, protect, retrieve and transfer information electronically. Through Technology for Healthcare Excellence (THE) Consortium, CRHC assists rural facilities to advance their HIT solutions.

## Direct IT Support

In 2018, CRHC provided 625 hours of HIT support across the state. Activities included the following:

- Onsite and Remote Support
- Chartered Quality Institute (CQI)
- State Innovation Model (SIM) Support
- Remote Monitoring
- Exchange Migration
- Remote Monitoring Setup and Server Installation
- Remote Monitoring/NAS/ Server Installation
- HIPAA Risk Assessments



## HIT Report Writing

CRHC IT staff wrote 109 reports for members in 2018. Report topics:

- County Health Rankings (CHR) Reports
- Rural vs. Urban comparisons CHR
- Total Access to Healthcare, Obesity/Diabetes, Opioids, Oral Health white papers
- Snapshots of Rural Health (Regional and State-wide)



109 Reports Written

## HIT Data Services

- Data Assessment
- Data Coaching
- Observation/Data Shadowing
- Workflow Mapping
- Report Writing
- Community Health Needs Assessment
- Population Health Reports



# SIM

State Innovation Model

The Colorado State Innovation Model (SIM) is a governor's office initiative that is helping primary care practice sites integrate behavioral and physical health in primary care settings and learn how to succeed with alternative payment models.



Hours of SIM Technical Assistance in 2018



# Policy

CRHC's policy and advocacy program tracks state and federal legislation and regulations that hold the potential of impacting access and delivery of care for rural health providers and communities.

## 2018 Accomplishments:



9x

Testified on  
Legislation

Bill included:

- HB18-1009 Diabetes Drug Pricing Transparency Act
- HB18-1260 Prescription Drug Price Transparency
- HB18-1311 Single Geographic Rating Area Individual Health Plan
- HB18-1384 Study Health Care Coverage Options
- HB18-1416 Student Suicide Prevention Grant Program
- HB18-1177 Youth Suicide Prevention
- SB18-024 Expand Access Behavioral Health Care Providers



3

Call-To-Action  
Emails Sent  
to Members

1



Bills Opposed

22



Bills Monitored

32



Bills Supported



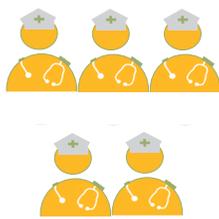
### Policy and Legislative Committee

Policy and Legislative Committee (PLC) members met 10 times throughout the legislative session to discuss monitored bills, take positions, and to strategize CRHC involvement in the legislative process.

# Workforce

 13

14   
Contracted CPR Sites



3 Workforce recruitment placements at 3 different facilities

Total presentations to potential rural workforce candidates. CPR staff marketed rural facility jobs at health professional training programs including medical schools, dental schools, and Physician Assistant and Advanced Practice Nursing programs.



 27 Jobs recruited for

## Preparing Colorado's Leadership Workforce of Tomorrow

With support from The Colorado Health Foundation, CRHC partnered with The Center for Creative Leadership (CCL) to design, implement and recruit participants for an innovative and dynamic leadership program for rural primary care leaders in Colorado. Through a highly facilitative learning approach, including face to face sessions, executive and peer coaching, and virtual learning, the program equipped 40 rural primary care providers with skills to better lead themselves, their colleagues, and their communities. The 2 year program culminated in a capstone day of advocacy at the Colorado State Capitol. CRHC educated participants about the policy landscape in Colorado and coordinated meetings with participants' respective representatives. In total, 30 participants conducted 15 meetings with 18 Colorado state legislators to discuss policy strategies that will improve the health of their rural communities.





# Events

## The Forum 2018



**April 18-20, 2018**  
**Denver Sheraton West**  
**Lakewood, CO**

- Topics Included:
- Behavioral Health
  - Cyber Security
  - Healthcare Equity
  - Patient Navigation

- Patient Engagement
- Telehealth
- Palliative Care
- Quality Improvement



Participants



35

Speakers



8

Sponsors



32

Exhibitors

*“Good topics in the sessions, good presenters... [The most valuable part was] the group discussions and hearing different perspectives.”*

*-Survey Respondent*

## Annual Rural Health Conference 2018

**October 17-19, 2018**  
**Marriott Colorado Springs**  
**Colorado Springs, CO**

Topics Included:

- Medicare Updates
- Mental and Behavioral Health
- State and Federal Policy

- Community Paramedicine
- Culture Transformation
- Pain Management
- HIT and Cybersecurity



Attendees



35

Speakers



34

Exhibitors



12

Sponsors

93%



“Satisfied” or “Very Satisfied”  
with presenters

100%



of responding attendees would  
recommend the conference to  
a colleague



# Education

## Billing and Coding Workshops

Injection and Infusion (I&I) Therapy is a complex area of CPT coding for hospitals that requires detailed knowledge of charging, coding, reimbursement methodologies, and clinical terminologies.

Learning Objectives:

- Explain CPT reporting requirements for hydration therapy; therapeutic, prophylactic, and diagnostic injections and infusions; and chemotherapy
- Describe documentation requirements for infusion therapy records
- Discuss compliance issues associated with infusion therapy coding and billing
- Assign appropriate CPT codes to case studies

**Thank you to our 2018 Participating Facilities!**

Tuesday August 14, 2018

Rifle, CO

Thursday August 16, 2018

Yuma, CO

Tuesday September 11, 2018

Alamosa, CO

Thursday September 13, 2018

La Junta, CO

27

Total Facilities

86

Total Participants

4

Total Workshops

## Billing and Coding and THE Consortium Webinars

THE Consortium exists to provide expert consultation, education and resources to facilities to support their current HIT and Electronic Medical Record (EMR) efforts. Many federal policies and programs address the HIT challenges rural facilities face, including the (SHIP), and the Medicare Rural Hospital Flexibility (Flex) Program. As the State Office of Rural Health, CRHC manages both of these programs in the state of Colorado.

20

Billing and Coding and  
THE Consortium Webinars

741

Total Webinar Participants

## Revenue Cycle Trainings

In 2018, CRHC hosted three Revenue Cycle Training Modules spread across June, July, and August. Trainings aimed to provide an overview of the administrative and clinical functions that contribute to the capture, management, and collection of patient service revenue.

98

Total Participants

# 2018 Board of Directors

Jason McCormick, Board Chair  
Tammy Dunker  
John Gardner

Craig Loveless  
Beka Warren  
Alan-Michael Vargas, MD

## 2018 Funders



**COLORADO**  
Department of Public  
Health & Environment



Center for  
Creative  
Leadership®



**KAISER  
PERMANENTE®**



**INITIATIVE**



The Colorado Health Foundation™



University of Colorado  
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# 2018 Organizational Sponsors

Ann King  
White, CPA



Thank you for your  
continued support of  
the Colorado Rural  
Health Center!



*The State Office of Rural Health*

