



Colorado Hospital Association  
*Impacting Rural Hospitals*





# Colorado Hospital Association



## Mission

Support members' collaborative commitment to advance the health of their communities through affordable, accessible, high-quality health care

## Vision

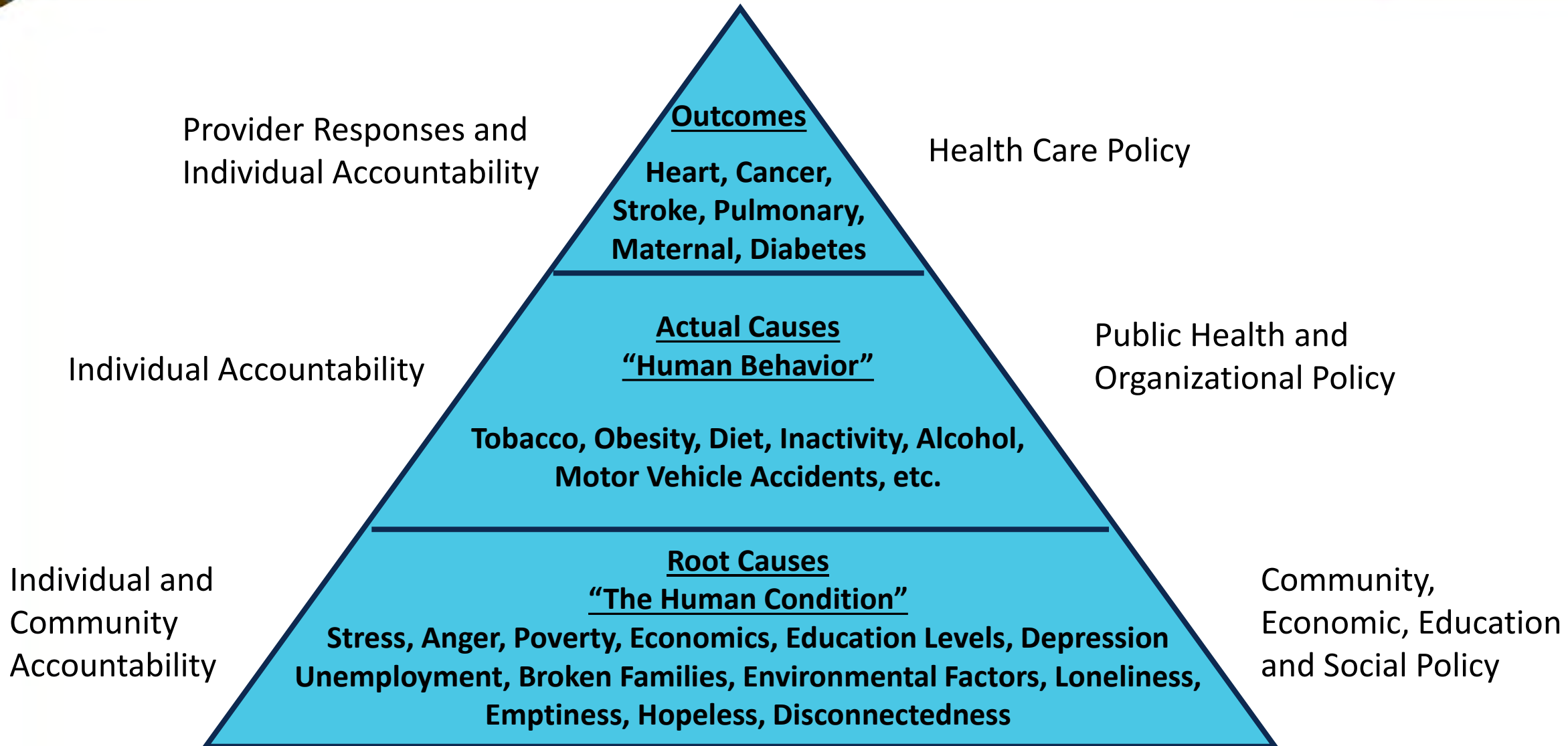
Members succeeding in achieving optimal health care value in their communities

## Priorities

Leadership, Unity, Learning



# Root Causes of Death – Strategy Map





# Connecting Problems with Solutions

Solving structural problems requires vision and strategy that originates with high-performing, engaged governance.



# 2020 – 2022 CHA Rural Strategy



## Leverage Data to Inform System Development and Interventions

- Develop outmigration and financial dashboards for rural hospitals
- Analyze and report on care migration and community health needs
- Develop baseline capacity dataset for rural organizations and communities
- Partner with academic institutions to conduct community health engagement surveys in four rural Colorado communities



## Increase Leadership and Workforce Capacity

### Governance Capacity

- Access to case-based learning
- Trustee Recognition and Accountability Program

### Administrative Leadership Capacity

- Academic partnerships
- Two-year Rural leadership fellowship
- Certification-based training
- Access to case-based learning

### Clinical/Technical Workforce Capacity

- Access to rural Baldrige framework



## Improve Access to Excellent and Holistic Care

- Introduce annual education program that prepares rural organizations and communities to recruit and retain high-quality primary care providers
- Initiate annual “fly-in” recruitment weekends to recruit clusters of primary care providers
- Develop statewide “air transportation highway” to increase access to specialty care for rural Coloradans



## Strengthen Partnerships and Collaborations

- Design private insurance framework to encourage value-based insurance design
- Collaborate with stakeholders to decrease redundancy and improve value
- Lead annual innovation trips to encourage collaboration and strategic alliances and foster innovation in healthcare delivery transformation

### CHA Mission

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### Rural Health Vision

Value-driven systems, increased capacity, and innovative payment structures that optimize health and strengthen rural communities



# CHA Providing Value: PPE Access

## #HEART4HEROES

100+ Flights

2,280 Boxes of Personal  
Protective Equipment  
(PPE)

Received by 65 Colorado  
Rural/Safety Net  
Providers  
and First Responders



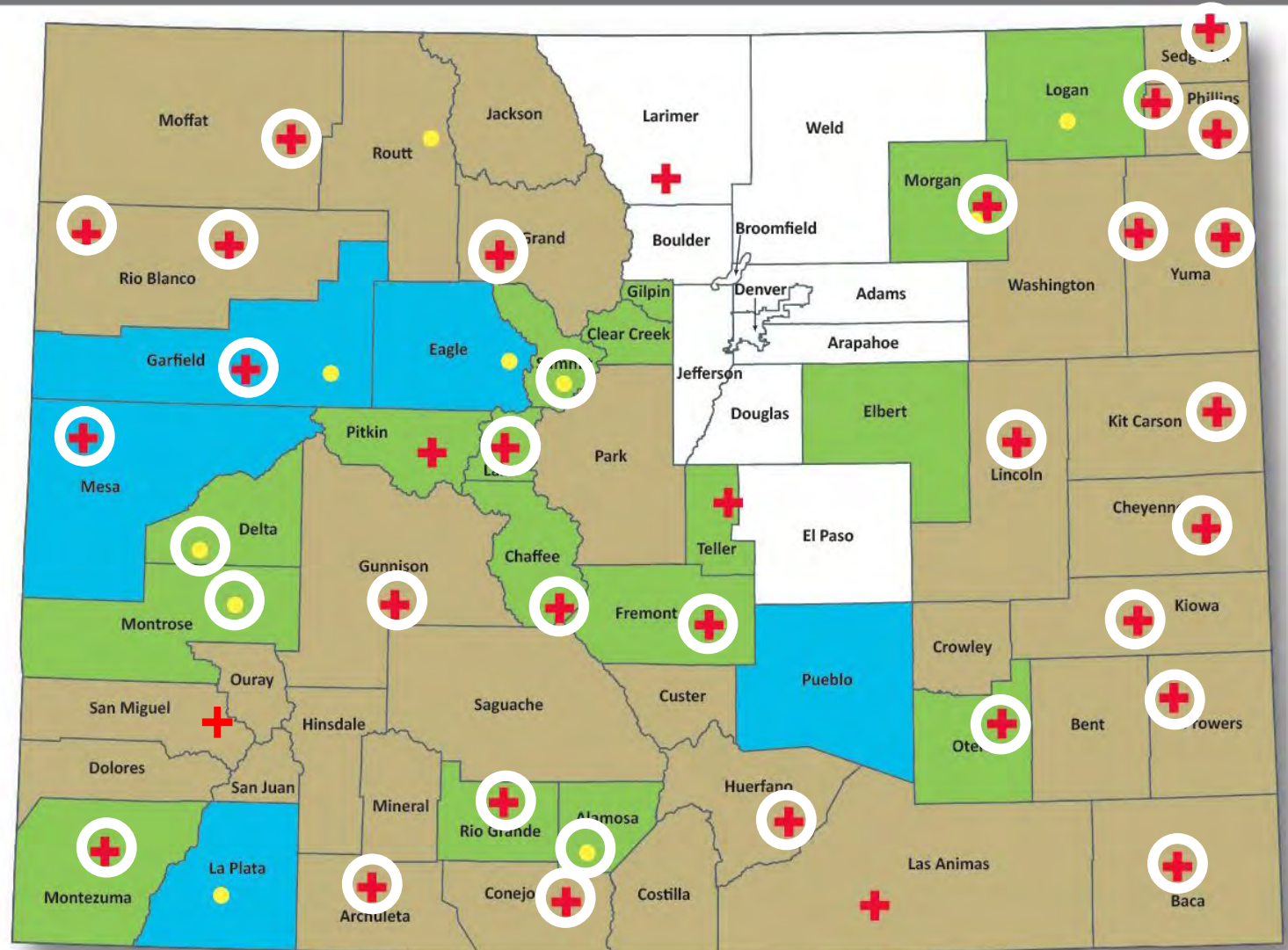


# CHA Providing Value: PPE Access



#HEART4HEROES

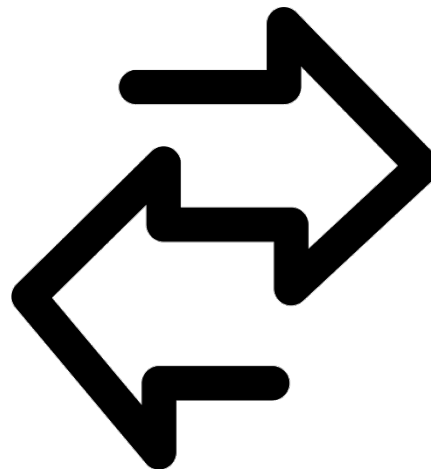
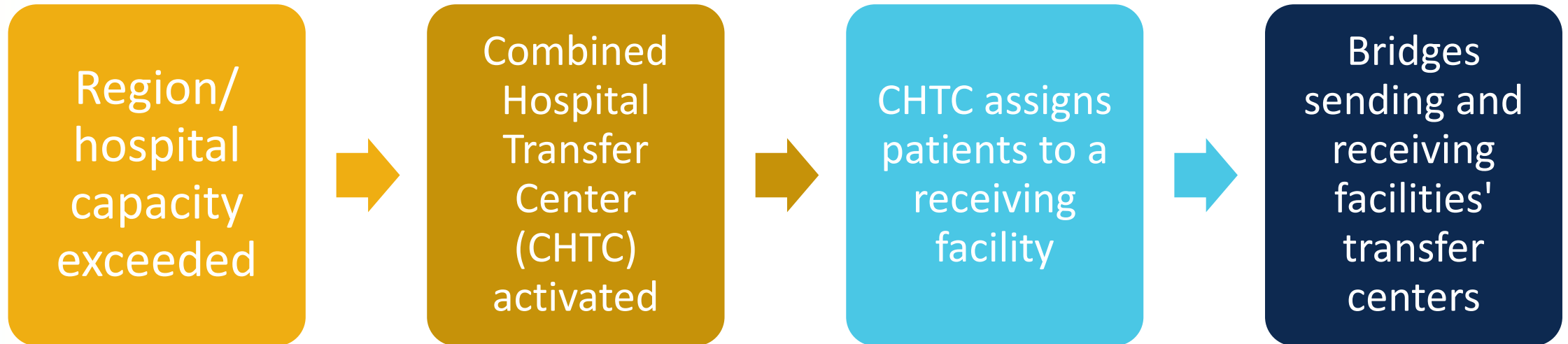
32 Rural Colorado hospitals have received PPE



METRO  
  MICRO  
  RURAL  
  COUNTIES WITH EXTREME ACCESS CONSIDERATIONS  
+ CRITICAL ACCESS HOSPITALS  
 ● RURAL HOSPITAL



## Combined Hospital Transfer Center







# CHA Providing Value: Air Transportation

- Utilize Angel Flight West and telehealth technology to expand access to specialty care (including behavioral health) for patients with all payer types in rural areas
- Partners: Angel Flight West, urban specialists, rural hospitals, The Colorado Health Foundation, and others





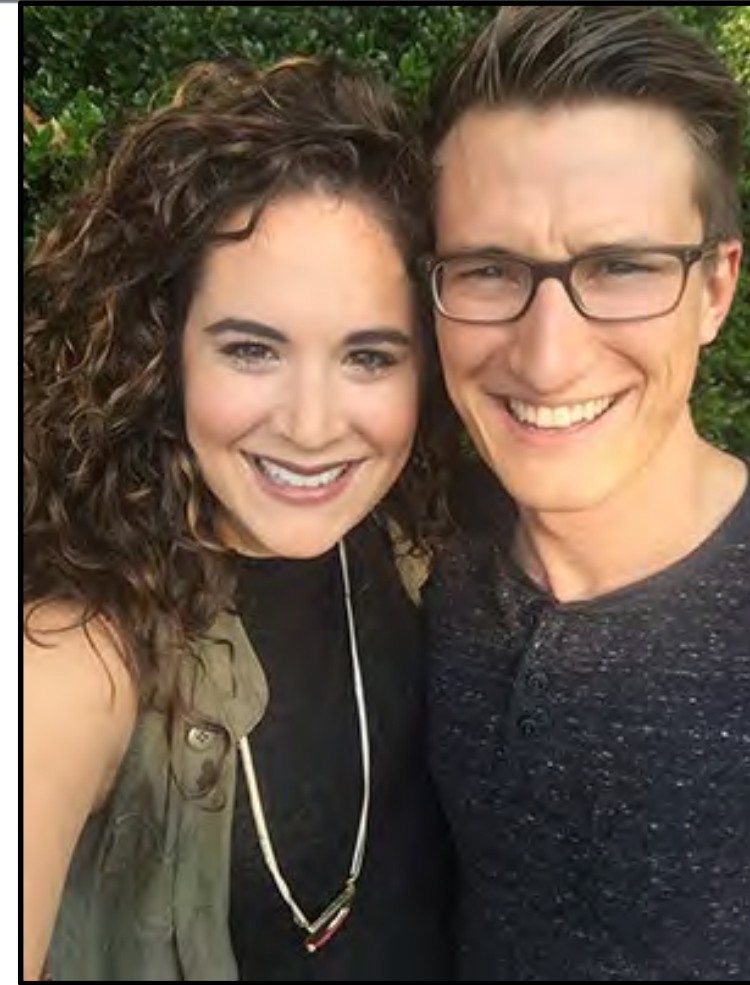
# CHA Providing Value: Staffing



Catherine Jiminez, MD



Katie Rose-Borcherding, DO



Daniel Frantz, DO

# Migration detail

Select your Hospital

Hospital Exclusion

Multiple selections

County ZIP

All All

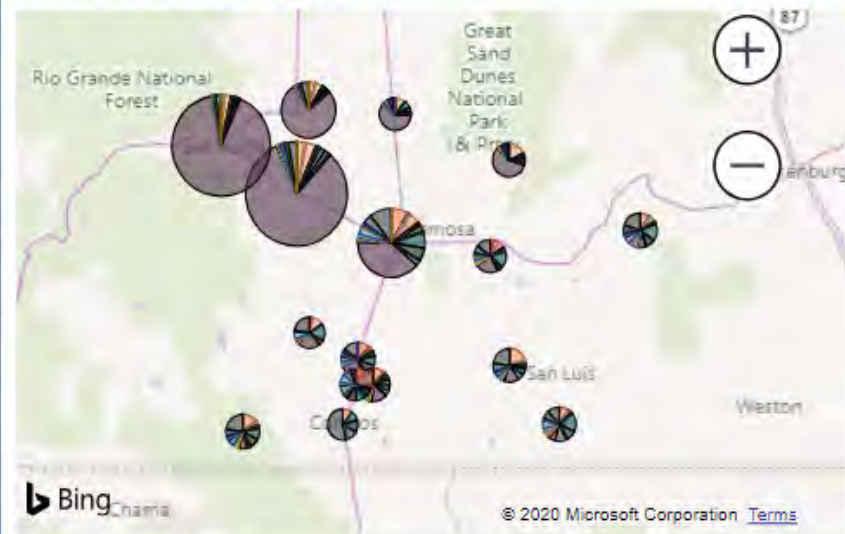
Migration Type

All

Patient Type

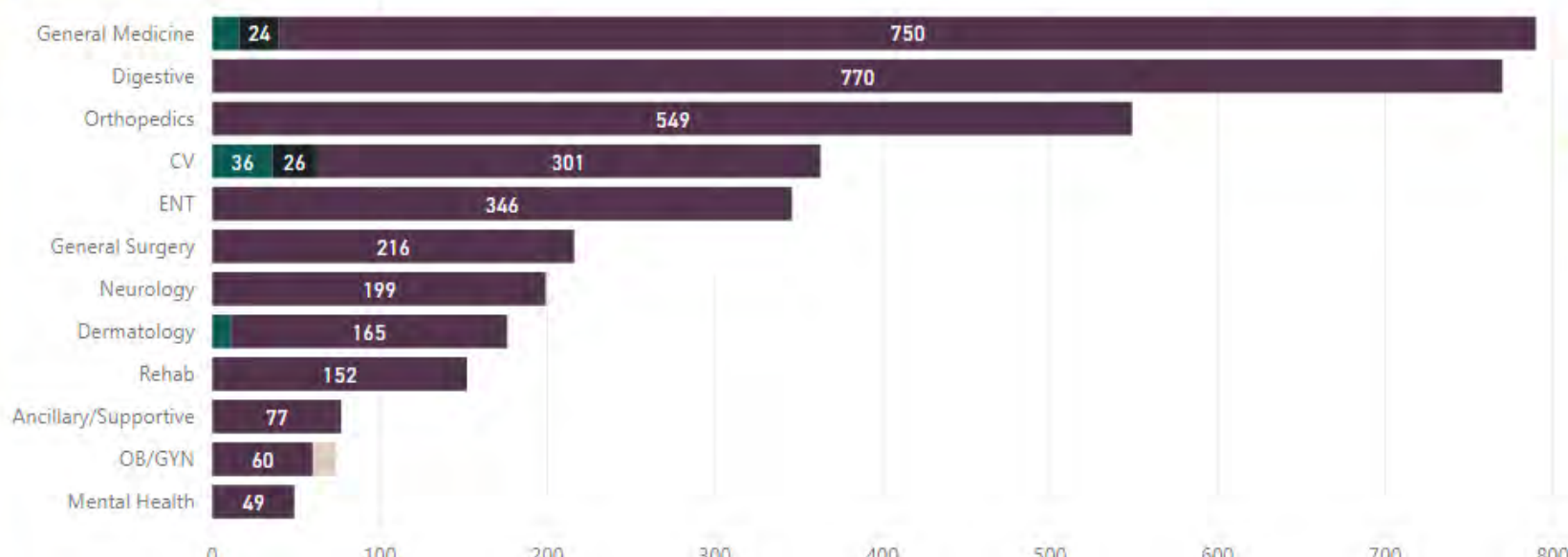
All

## Market Share by ZIP

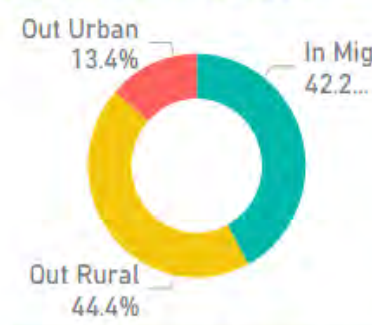


Discharged Hospital	City	Count	CMI	Avg. Miles
Rio Grande Hospital	Del Norte	26617	1.02	13.44
Univ of Colorado Hospital	Aurora	1987	2.28	233.98
Children's Hosp	Aurora	1426	1.64	236.46
Heart Of The Rockies	Salida	1285	1.60	82.50
Parkview Medical Center	Pueblo	1250	1.97	131.99
Penrose Hosp	Colorado Springs	1035	2.26	179.51
UCH Memorial Hosp	Colorado Springs	765	2.17	178.78
St Mary-Corwin Med Cent	Pueblo	680	1.91	130.73
Presbyterian St Lukes Med	Denver	458	2.47	230.77
National Jewish Health	Denver	412	0.79	230.14
Mercy Regional Med Ctr	Durango	225	2.43	134.90
<b>Total</b>		<b>38056</b>	<b>1.91</b>	<b>53.40</b>

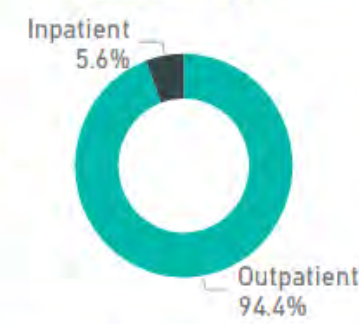
## Service Lines



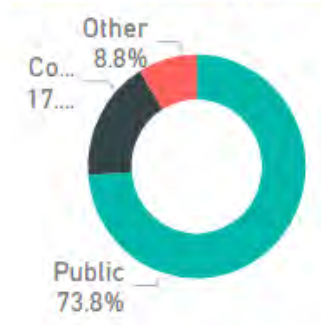
## Migration Type



## Patient Type



## Payer Type



# Finance detail



Hospital name

**RURAL**

Your hospital designation

**40.49%**

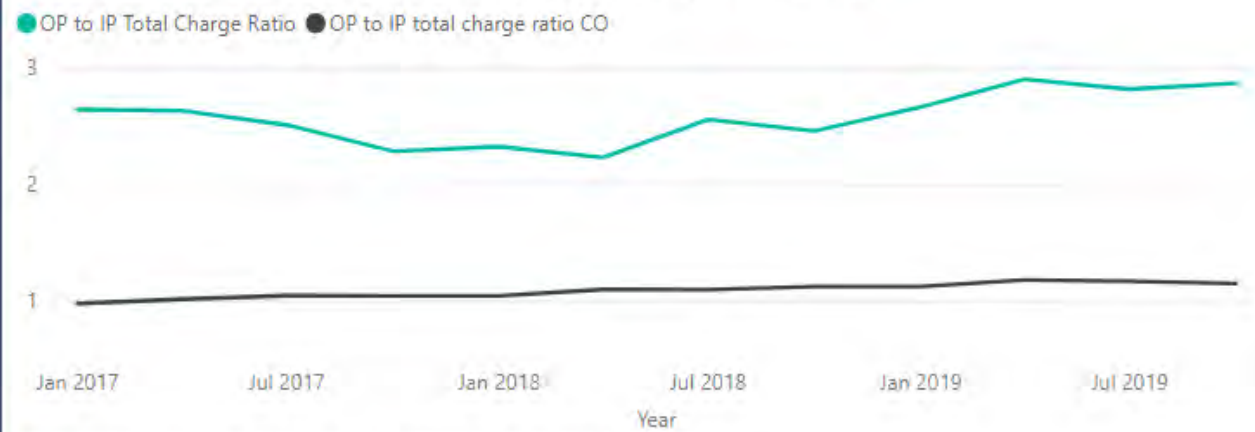
Occupancy Rate

**1.28**

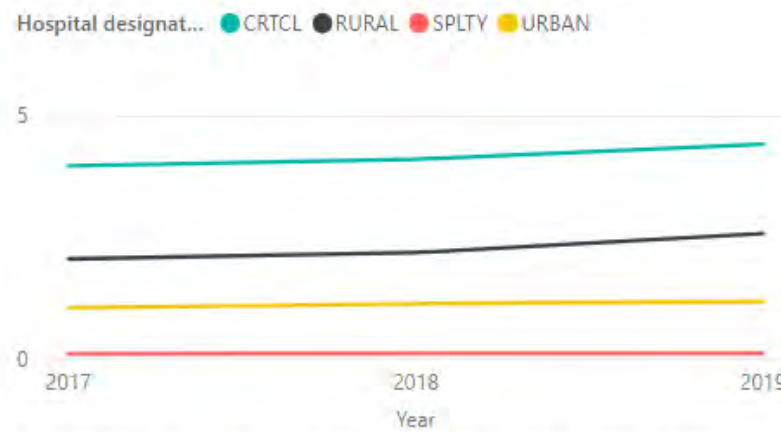
CMI

Hospital designation	Occupancy Rate	CMI
CRTCL	17.59%	1.13
RURAL	31.10%	1.39
SPLTY	84.39%	1.25
URBAN	46.95%	1.64

OP to IP Total Charge Ratio and OP to IP total charge ratio CO by Year and Quarter



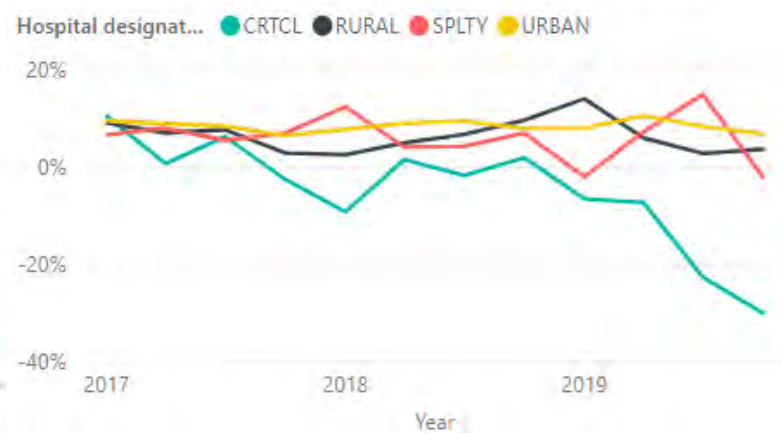
OP to IP Total Charge Ratio by Year and Hospital designation



Total revenue % change and Total revenue % change CO by Year



Total revenue % change by Year, Quarter and Hospital designation





# CHA Providing Value: Tools



A partnership between CHA and the Farley Health Policy Center, and the CU School of Medicine

Funded by ZOMA Foundation and CPSI

Endorsed and distributed nationally by AHA, NRHA, and CPSI



## Re-imagining Leadership:

*A pathway for rural health to thrive in a COVID-19 world*

*A collaborative effort between*



Eugene S. Farley, Jr. Health Policy Center  
UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS



Capacity assessments for CHA rural member hospitals

Partners: EPHC

Funders: Caring 4 Colorado Foundation and ZOMA Foundation

## Rural Health Care Delivery System Capacity Assessment

### Clinical Care

Health Outcomes and Performance Improvement, Access to Care

### Community Engagement

CHNA, PFAC, SDOH, Collaboration

Financial Health  
FDI, VBC Readiness

Leadership  
Board  
Administration  
Clinical

Emergency Preparedness and Readiness  
Response Coordination, Continuity, Medical Surge



# CHA Providing Value: Scholarships

Increasing rural administrative leadership capacity through establishment of health transformation cohort in partnership with premier academic institutions



THE UNIVERSITY OF  
**TEXAS**  
— AT AUSTIN —



**Dartmouth**



Amy Gallagher, Psy.D.  
Mind Springs Health



Kayla Ray, BSN  
Middle Park Health



Andy Bertapelle, MSN  
Gunnison Valley Health



Heidi Helgeson, MD  
Rio Grande Hospital



Rachel Smith, BSN  
Lincoln Health

**First Cohort**



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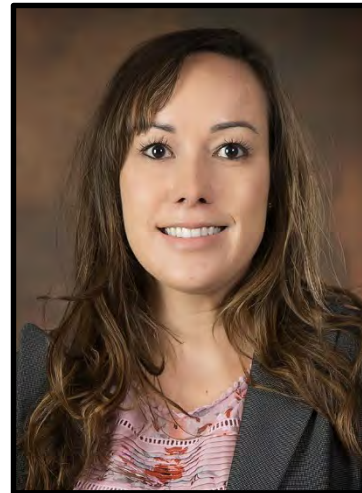
**Dartmouth**



Jennifer Cano, BSN  
Melissa Memorial Hospital



Marnell Bradfield  
Western Healthcare Alliance



Elly Lambertson, BSN  
Melissa Memorial Hospital



Jennifer Slaughter  
Aspen Valley Health

**Second Cohort**





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Increasing rural administrative leadership capacity through establishment of health transformation cohort in partnership with premier academic institutions



THE UNIVERSITY OF  
**TEXAS**  
— AT AUSTIN —



**Dartmouth**



Joe Theine  
Animas Surgical Hospital

Third Cohort



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# CHA Providing Value: Vaccine Mandate

Navigating  
the vaccine  
mandate





# CHA Providing Value: Technical Support



The Hospital Transformation Program (HTP), a **value-based care initiative in Colorado**, ties some Medicaid supplemental payments to hospitals' ability to **hit performance targets**.



The **Hospital Quality Improvement Collaborative (HQIC)** is a Center for Medicare & Medicaid Services (CMS) funded, project to partner with hospitals across the US in rural, critical access, and urban settings that provide care for vulnerable populations. **HQIC** is a four-year project to improve outcomes in several patient safety-related areas.





# CHA Providing Value: Financial Support

The **provider fee** is assessed on hospitals by the State of Colorado. The resulting revenue is then used to draw a dollar-for-dollar federal match that is used to cover the uninsured by expanding eligibility for Medicaid. It disproportionately benefits rural hospitals.





# CHA Providing Value: Broadband Services



More affordable,  
faster internet access  
for rural hospitals  
across Colorado





# CHA Providing Value: Case-based Learning



“Rural Health Care Leadership  
Conundrum: The Burnout of a  
Good Doctor.”



**CENTER FOR  
PRIMARY CARE**  
HARVARD MEDICAL SCHOOL







# CHA Providing Value

CHA COVID-19 Regulatory Resources

HRSA COVID-19 Uninsured Program

Payment for Transfers

Support with State Quality Improvement Programs

Supporting the Health Care Workforce



# CHA: A New Strategy in a New Environment

## Environmental Drivers

- COVID as endemic
- Workforce shortages
- Behavioral Health
- Focus on Affordability
- Rural financial sustainability
- Shift in hospital services and health care delivery
- Strong political dynamics
- Regulatory overload
- Insurer practices
- Growth and competition



Talent Optimization and Sophisticated Operations



# 2022 CHA Legislative Agenda - Workforce



**Anti-Doxxing:** Protect health care workers from threats, intimidation, and harassment that causes irreparable harm.

**Workforce Support:** Comprehensive workforce package with short, medium and long-term policy and funding proposals focused on crisis response as well as recruitment and retention today and tomorrow.

**Labor Peace Act:** Ensure Colorado maintains its balanced approach on labor issues that has held for nearly 80 years.



# 2022 Legislative Agenda – Reg. Relief



**Surprise Billing:** Align state and federal requirements by focusing on simplifying administration, addressing shortfalls in existing state law, and ensuring consumers benefit from cost savings.

**Crisis Behavioral Health:** Colorado should not increase regulations on behavioral health care provided in emergency departments and instead of invest in what works.

**Prevent Additional Regulations through Budget Process:** Ensure budget process is not used as a tool to enact additional regulatory requirements on hospitals, such as through mandatory reporting or payment models.



# 2022 Legislative Agenda – What Works



**Fulfill Promise of Coverage:** Expand outreach and enrollment efforts for individuals who are eligible for subsidized health coverage but are not currently enrolled.

**Incentivize Vaccination:** Marginalized communities – including many with Medicaid coverage – continue to have lower rates of vaccination, and the state should increase opportunity and outreach to these populations.

**Fund Behavioral Health Community Treatment:** Invest funds allocated to behavioral health (SB 21-137) in solutions that work, specifically community-based treatment.



# 2022 Legislative Agenda – Other Issues

Colorado has a unique opportunity to leverage the infusion of federal resources to address both longstanding issues within the health care system and the impacts of the COVID-19 pandemic.

Colorado should work to provide additional behavioral health supports for health care workers who continue to care for us.

Colorado should align hospital reporting and community engagement requirements to reduce duplication, support multi-sector collaboration, and better use limited resources.

# The Road Ahead

## 2022 CHA Rural Health and Hospitals Conference

March 3-4





# Questions/Discussion



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