The four core functions around which the work of CHI has been organized are consistent with its organizational mission and in fulfillment of the functions spelled out in the first five-year business plan.

I. **SERVING AS AN INFORMATION CLEARINGHOUSE FOR HEALTH AND HEALTH CARE DATA** -
   CHI staff engaged in a variety of activities and projects in 2006 as part of an ongoing effort to enhance and expand CHI’s capacity to provide resources that respond to constituent needs. These activities included:

**Web site**
- Completed Phase II of Web site development, including addition of an advanced search function. Initiated Phase III to allow health, safety net and workforce indicators to be queried in graph, table, map, rank and trend formats. Beta testing to begin December 2006.
- Increased unique visitors to the Web site by more than 19 percent over a year ago (11,945 total unique visitors, October 2006; 1,194 avg. number of unique visitors per month).
- Increased total visits to Web site by nearly 17 percent over a year ago (18,900 total number of visits, October 2006; 1,890 avg. number of visits per month).
- Increased number of Web data resources to 288 (interactive data sites, national and state database descriptions, geographic inventory, county indicators and state health rankings/profiles).
- Posted 80 new HealthStats on the front page of the CHI Web site in 2006.

**Information requests**
- Made presentations about CHI’s Web site and related data resources to meetings of the Colorado Rural Health Association, The Colorado Trust, the Colorado Association of Local Public Health Officials and the Public Nurses Association.
- Responded to nearly 150 information requests from organizations and individuals across the state, including legislators, state agency officials, foundations, universities, the media, mental health workers, advocacy groups, private providers, hospitals, local health departments and others.

**Analytic projects**
- Brought 60 databases in-house to use for analytic purposes (e.g., briefs, technical papers, fact sheets).
- Released the *Colorado Health Care Data Needs Assessment*, reporting on findings about types of data Colorado health leaders need and the problems they experience in locating and/or accessing these resources.
- Completed a project with the Department of Health Care Policy and Financing to evaluate the benefits of SAS software in data analysis and delivered two reports, one a technical report and the second an analysis of dental claims for children.
- Expanded use of Geographic Information System software and produced numerous maps to illustrate the impact of poverty on health insurance, location of safety net clinics, state agency regions and other related information.

- Completed three additional health professions surveys including: CNAs, dentists and dental hygienists.

- Released and posted on the CHI Web site an RN and physician Public Use File, codebooks and a technical paper on the findings from the 2005 RN survey. As of November 30, more than a dozen organizations had downloaded the data contained in the public use files.

- Analysis of the 2005 pharmacist survey is currently underway.

- Developed estimates of children income eligible but not enrolled in Medicaid or CHP+ for Colorado Children’s Campaign and other data requestors.

- Developed estimates of “churn” among children enrolled in Medicaid and CHP+ for the Colorado Children’s Healthcare Access Program “A Medical Home for Every Child”

**Collaboration with Colorado data stewards and users**

- Held focus groups with state and local health officials and organizational representatives to get feedback and suggestions on how to improve the data section of the CHI Web site.

- Prepared materials for Children’s Hospital and the Colorado Coalition for the Medically Underserved on children’s health insurance status for a press conference about survey results.

- Updated and released on the CHI Web site the former CCHN database *Colorado Health and Health Care Indicators*. This county level set of indicators is used by CDPHE, the Rural Health Center, the Family Residency Programs and CCHN and is publicly available to all Web site visitors.

- Presented two years of physician data (2001 and 2005) from the Health Professions Database to the Colorado Medical Society.

- Negotiated patient-level data sharing agreements from a group of federally qualified health centers (FQHCs) and the Colorado Behavioral Health Council on behalf of the state’s community mental health centers as part of the Safety Net Monitoring activities of CHI.

- Set up a database for CDPHE Office of Primary Care containing HPSA designated communities and provide on-going technical assistance regarding its community survey form.

2. **CONDUCTING HEALTH AND HEALTH CARE-RELATED RESEARCH AND POLICY ANALYSIS** - CHI staff engaged in a variety of activities and projects to respond to salient health policy related topics facing public and private Colorado policymakers. These include both “hot issues” perceived as most immediate, and those identified by policy makers as emerging within Colorado and that warrant timely analysis. Highlights of analytical projects during 2006 include:

**Trends in insurance coverage, access and health status**

- Published and distributed seven issue briefs for policymakers: *Colorado’s High-risk Pool, Spending on Health-related Programs in Colorado, Profile of the Uninsured in Colorado: An Update for 2005, The Colorado Health Care Marketplace: Coverage and Trends, Colorado’s Aging Baby Boomers: Challenges...*
Published the 2004 updated data bulletin, *Profile of the Uninsured in Colorado*; a supplementary data bulletin, *Profile of the Working Uninsured in Colorado*; and a 2005 update.

- Completed the first *Colorado Health Report Card* and subsequent county-level analyses of report card indicators.
- Initiated a study of children in foster care placement and developed a Medicaid Primer on Foster Care.
- Completed additional analyses of findings from the oral health environmental scan completed in 2005.
- Completed an annual *Primary Care Report* for the Colorado Department of Public Health and Environment.

**Capacity of the Safety Net**

- Completed an assessment of Colorado rural health clinics and their capacity as vital components of Colorado’s system of safety net providers, to respond to Amendment 35 and the availability of Primary Care Funds. The report is based on visits to 35 of the state’s 44 rural health clinics around the state.
- Published *ClinicNet: Capabilities and Opportunities*, an evaluation of these 22 safety net clinics ability to meet the Amendment 35 Primary Care Fund requirements.
- Presented CHI’s *Safety Net Indicator and Monitoring System* on an invited peer-reviewed panel at the 2006 AcademyHealth Annual Research meeting special interest group on state health policy.
- Facilitated a multi-state dialogue to establish an ongoing research collaboration to share and improve safety net monitoring activities and methods.

**Community based innovations**

- Participated in Rural Aging Forum and the subsequent development of an evaluation plan for the *Yampa Valley Aging Well Initiative* in cooperation with the School of Nursing at the Colorado Health Sciences Center.
- Presented findings of the CHI assessment of the El Paso County HealthTrack Project to CEOs of the major health providers in El Paso County. This federally funded project has supported the development of a local RHIO for the two hospitals, faith-based clinics, public health department and federally qualified health center that share uninsured patients in the county. The local provider community is now looking at whether and how to continue its initial investment in HealthTrack.

**Health professions/workforce**

- Poster presentation on the Health Professions Database project at the 2006 AcademyHealth Annual meeting.
- Technical paper completed and released featuring analysis of the 2005 RN survey findings.
HIT: Improving health and health care in Colorado

- Participating in national project to assess and make recommendations to the Secretary of Health and Human Services about roles and implications of state-level health information exchange initiatives. Participated in the report, *Development of State Level Health Information Exchange Initiatives*.

- Designated by Governor Owens to lead a Colorado effort to analyze privacy and security issues and solutions related to electronic health information and achieving statewide interoperability.

3. **Convening Stakeholders and Disseminating Health and Health-related Information in Forms and Formats That Inform Health Policy Decision-Making** - Using a variety of strategic communication strategies, CHI staff engaged in a range of activities during 2006 to promote the availability and use of CHI resources, support project-related work and serve CHI’s mission and core functions.

**Sponsoring special events**

- Sponsored two events for Colorado leaders with former Oregon governor John Kitzhaber which attracted 25 business leaders to a dinner and another 50 business leaders, physicians and foundation staff and board members to a dialogue with the governor.

- Hosted six Lunch ‘n’ Learn sessions to which the public was invited as well as CHI staff. (see Meetings list for details).

- Co-sponsored and presented at an HIT Symposium with the Colorado Health Information Management Society which was attended by 250 individuals from around the state.

- Co-sponsored the fifth annual Culture of Data conference.

**Presentations**

- Presented an overview of health and health care issues in Colorado at a breakfast sponsored by gubernatorial candidate Bill Ritter for the health care community.

- Presented at a meeting co-sponsored by the Denver Homeless Coalition and the Colorado Consumer Health Initiative on legislative approaches in Colorado and other states for increasing access to health care for vulnerable populations.

- Made more than 50 presentations across the state on issues including the health workforce, health information technology, CHI’s Web site, the uninsured, the safety net, Amendment 35, Colorado’s aging population and numerous others (See presentation database).

- Participated in a live Web cast on the myths and realities of who is among the uninsured in Colorado sponsored by the Colorado Healthcare Financial Management Association.

- Participated in kick-off press conference for Cover the Uninsured Week at the State Capitol to answer media questions about the uninsured in Colorado and addressing related policy options.

- NPR Pam Discussed uninsured with National Public Broadcasting

- Sponsored four Hot Issues in Health Care luncheons for legislators and legislative staff (see Meetings list for details)
Planned and carried out the 4th Biennial Hot Issues in Health Care Legislative Conference in Colorado Springs with about 70 attendees, including 25 legislators.

Provided private briefings to individual legislators on issues such as health information technology, transparency policies, the uninsured and others topics.

Facilitation/participation

- Completed the facilitation of the SB 173 Long-Term Care Advisory Committee and submitted final report to the Department of Health Care Policy and Financing per legislative deadline.

- Facilitated ongoing activities of Long Term Care Advisory Committee such as formation of a speaker’s bureau subsequent to submission of final report.

- Facilitated statewide CORHIO Steering Committee meetings and continued to serve as a neutral convener and provide staff support through external funding to develop a business plan and governance structure for a new 501(c) 3 organization to be known as CORHIO (also see Meetings list for details).

- Participated in the Blue Sky Initiative, a multi-state initiative to transform Americans’ debate about health policy reform from a discussion of incremental changes to one of how to reorganize and integrate health and health-related services so the system can do a much better job of producing health for the entire population.

- Appointed by Speaker Andrew Romanoff to serve on an interim legislative task force charged with exploring health reform options for Colorado.

- Participating in All Colorado Kids Covered by 2010 group designing policy options for the 2007 legislatives session.

- Participating on Metro Denver Health and Wellness Commission and serving on the Metrics and Policy subcommittees.

- Participated in evaluation planning committee for Denver’s Road Home (end homelessness in Denver by 2010).

- Participated on a national panel to review RFPs for the AHRQ HCUP project.

- Participated in a national focus group for the National Center for Health Statistics’ Web site.

Information dissemination

- Issued 20 news releases and e-mail blasts to constituents and media informing them of new materials, upcoming meetings and other news from CHI.

- Published the second CHI Annual Report (2005).

- Launched and produced five issues of CHI HealthTalk, a bi-monthly electronic newsletter.

- Quoted or mentioned in 49 news articles around the state and nationally (See News Coverage summary).
4. **BUILDING CHI’S ADMINISTRATIVE INFRASTRUCTURE** – To be successful as an organization, CHI has been constant in its pursuit of building an administrative structure that is efficient and supports the work of its greatest asset, its staff. In 2006, the administrative team completed the following:

- Instituted and refined electronic time tracking, information request tracking and presentation databases to better track our work.
- Further developed and refined quality assurance processes and procedures for data collection, cleaning and analysis.
- Completed a 3-year external evaluation of CHI.
- Revised CHI Style Manual.
- Updated the CHI Employee Handbook.
- Developed new accounting and budget tracking processes for core budget and sponsored project expenditures.
- Implemented a SPAM filtering software system that eliminated 100 percent of the SPAM volume and all email viruses.
# Colorado Health Institute
## Statement of Activities
### Year Ended December 31, 2006

### Changes in unrestricted net assets

**Revenue and Support:**
- Grant revenue: $3,500
- Contract revenue: 504,061
- In-kind contributions: -
- Interest income: 9,226
- Miscellaneous income: 1,573
- Net assets released from restrictions: 1,221,941

**Total revenue:** 1,740,301

**Expenses:**
- Program services:
  - Health information: 1,833,613

**Total program services:** 1,833,613

- Supporting services:
  - Management and general: 250,603

**Total supporting services:** 250,603

**Total expenses:** 2,084,216

**Decrease in unrestricted net assets:** (343,915)

### Changes in temporarily restricted net assets:

**Revenue and Support:**
- Contributions-amortization of discount on contributions receivable: 73,090
- Other contributions: 211,432
- Net assets released from restrictions: (1,211,941)

**Decrease in temporarily restricted net assets:** (937,419)

### Change in net assets

**(1,281,334)**

### Net assets at beginning of year

3,008,650

### Net assets at end of year

$1,727,316