Choosing to Grow in Uncertain Times

Dear friends of CHI,

Last year was full of questions.

When January arrived, it looked like the Affordable Care Act — the cornerstone law of the past decade of health reform — was in its final weeks of life. CHI’s analysts worked diligently to track developments in Congress in real time and project what each new ACA repeal bill would mean for Colorado. But as the year went on, repeal attempts failed and eventually ground to a halt, along with most congressional health policy.

We couldn’t have done our work on ACA repeal and many other important topics without the support of our core funders — The Colorado Trust, Caring for Colorado, the Rose Community Foundation, the Colorado Health Foundation and Kaiser Permanente.

Still, the health policy stalemate had us concerned. We provide evidence-based policy research. At times during the past year, it seemed that policy — much less evidence-based policy — was not a priority for political leaders. Does anyone care anymore about making good policy?

The answer is a resounding yes. The Colorado Health Institute had our busiest year ever in 2017 because we understand that health policy happens everywhere — not just in the halls of Congress. Health providers and government agencies sought out our experts for important projects using medical records for public health decisions, surveying the state’s substance use prevention efforts, evaluating Medicaid benefits for substance use treatment, and connecting clinical care to social resources in the community, just to name a few.

At the same time, we are taking care to keep our public benefit mission as our top priority. We make our core research available for free to the people of Colorado. If we learned one thing from 2017’s debate over ACA repeal, it’s that Coloradans care deeply about their health care system and the policy that underlies it. You can count on CHI to be here to answer the most pressing questions Colorado faces.

To your health,

Michele Lueck
President & CEO
At the Colorado Health Institute, we believe that good policy can help all Coloradans live healthier lives, and that disciplined, nonpartisan analysis shapes good policy. That is what we provide every day.

Policy is made not just in the halls of federal and state government, but also in our towns, our neighborhoods and our families.

**We are all policymakers. CHI is here to help.**

CHI provides both paid consulting and evaluation work and free public benefit analysis. We work for:

- State government
- Health systems
- Safety net providers
- Public health agencies
- Policy advocates
- The people of Colorado, through our public benefit work.
Our Consulting Specialties

CHI offers its services to the health policy community at competitive rates. We have expert consultants well-versed in the major topics of health policy.

- **Behavioral Health**
  Investigating mental health and substance use problems in Colorado.

- **Community Health**
  Helping to build the healthiest foundation for Colorado’s communities.

- **Evaluation**
  Learnings to inform decision-making and promote program sustainability.

- **Facilitation**
  Smoothing the way toward reaching goals together.

- **Financial Analysis and Modeling**
  Making sense of health care costs and what drives them.

- **Health Workforce**
  Supporting efforts to create a healthy workforce.

- **Market Trends and Sense-Making**
  Adding context and understanding to data and decisions.

- **Policy Implementation**
  From the policy lines to the front lines, making it happen.

- **Project Management**
  Supporting innovative programs, ensuring successful outcomes.

- **Strategic Communications**
  Translating health policy to make it understandable and useful.

- **Analysis for Strategic Grantmaking**
  Targeting philanthropy so it is effective for all Coloradans.

- **Strategic Planning**
  Setting priorities, focusing energy, targeting resources.

- **Surveys**
  Gathering data and information to inform health policy.
OUR WORK IN 2017

- 43 Publications
- 120 Presentations
- 74 Blog posts
- 200+ Info requests answered
- 4,900 Twitter followers
- 1,000 Facebook likes
- 775 LinkedIn followers
Writing for All

Disciplined analysis is just the first part of our work at CHI. We take the extra step of translating that analysis into engaging, easy-to-understand reports and insightful graphics. For us, clear communication is a health equity issue. Health policy affects everyone, so everyone should be able to participate, even if they don't know the difference between an APTC and a CSR.

Our New Website

In 2017, we launched a new website to replace our four-year-old version—ancient by Internet standards. Our new platform gives users access to our reports with one click, rather than downloading a PDF. The screen resizes automatically for mobile phones. And it's easier to find and download CHI's wide body of work in reports, graphics and data compilations.

Our New Look

The same day we launched the website, we unveiled a new logo and visual identity. Brian Clark, associate director of visual communications, led the redesign. The new logo evokes Colorado's mountains and CHI's data-driven graphics.
62,964 Website Visitors

58% increase over 2016

REACHING FAR BEYOND DENVER: Colorado Cities by Website Visitors

TOP REPORTS by Website Pageviews

- Affordable Care Act repeal graphic: 23,591
- Colorado Health Access Survey: 5,488
- Hot Issues in Health: 4,580
- Re: ACA collection of reports: 2,069
- Suicides Reach All Time High: 2,055
- County Health Profiles: 1,886
- Colorado County Drug Overdose Death Rate: 1,877
- Climate and Colorado's Health: 1,866
- Miles Away from Help: Medication-Assisted Treatment Availability: 1,343
- Future of CHP+: 1,314
- The Route to the RAEs: 1,000
Rapid Analysis
CHI’s Strike Team

The day after the 2016 election, we knew our research agenda would have to change quickly to cover the possible repeal of the Affordable Care Act. We gave our top analysts a mandate to track how the most important developments would affect Colorado and get the news out quickly. The Strike Team became Colorado’s go-to source for tracking the effects of ACA repeal bills.

Results

• 12 Reports and Graphics
• 40+ Presentations
• A Viral Hit: More than 20,000 people saw our graphic comparing repeal plans.
A Trusted Voice
Under the Gold Dome

CHI’s Legislative Services

CHI is the health policy staff that Colorado legislators don’t have. We don’t lobby and we don’t endorse candidates, so legislators trust us to explain bills in committee, help them think through the implications of legislation, present at town halls and find the analysis they need to inform their decisions.
The Gold Standard for Tracking Health Access in Colorado

6.5: It’s a little number that says a lot.

It’s Colorado’s uninsured rate, as measured by the 2017 Colorado Health Access Survey. The number was virtually unchanged from 2015, after a dramatic drop from 2013, before the Affordable Care Act took effect. The 6.5 number says Colorado held on to the gains it made in coverage, despite a rocky economic and political environment. It also says the low-hanging fruit has been picked, and further advances will be harder to make.

The CHAS continues to earn its reputation as the state’s premiere data source for measuring health access. With all the changes in national health policy, the 2019 survey will be more important than ever.

What We Know Thanks to the CHAS

These statistics and hundreds more wouldn’t be available without this important survey.

- **11.8%** of Coloradans report poor mental health, up from **9.9 percent** in 2015
- **86.6%** of Coloradans report excellent, very good or good health

Top Reasons for Non-Emergency ED Visits

<table>
<thead>
<tr>
<th>Needed Care Outside of Normal Hours</th>
<th>More Convenient</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>72%</strong></td>
<td><strong>61%</strong></td>
</tr>
</tbody>
</table>

The Number of Uninsured Coloradans Who Say They Can’t Afford Insurance Dropped

<table>
<thead>
<tr>
<th>Year</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>591,000</td>
</tr>
<tr>
<td>2015</td>
<td>280,000</td>
</tr>
<tr>
<td>2017</td>
<td>262,000</td>
</tr>
</tbody>
</table>
One Epic Road Trip

We do our work for all Coloradans, no matter where they live. That’s why we dispatched CHI staff members across the state to present CHAS results, including customized local data for each community we visited. Over two days, we covered 15 towns, from Cortez to Sterling and points between.

Clockwise from top: CHI analysts set out for the four corners of Colorado on September 18. Emily Johnson presents CHAS data in Pueblo. TRAIN PIC. Ashlie Brown gets to know the residents of Colorado Gators near Alamosa.

CHAS Presentations on September 19 and 20
Colorado’s Essential Health Policy Conference

It’s a month after the fall election and a month before the legislature convenes — a perfect time for more than 250 people from all corners of Colorado’s health policy community to get together and keep tabs on the rapidly changing environment. CHI’s annual conference, Hot Issues in Health, attracts legislative leaders and nationally known thinkers. It’s a can’t-miss event for anyone who cares about improving health policymaking in Colorado.
Colorado Health Institute

OUR PEOPLE

CHI’s Board of Trustees

• Ruth N. Benton, MBA (Chair)
  New West Physicians
• Christine D. Woolsey (Vice Chair)
  SCL Health
• James Beaudry, MBA
  Kaiser Permanente Colorado

• Bruce Cooper, MD, MSPH
  Health District of Northern Larimer County
• Arthur Davidson, MD, MSPH
  Denver Public Health
• Kay Ramachandran
  Marillac Clinic

• Leo Tokar, MBA, MA
  Lockton Companies
• Shale Wong, MD, MSPH
  University of Colorado School of Medicine

OUR PEOPLE

CHI’s 2017 Staff

Karam Ahmad, Research Analyst
Paige Backlund Jarquin, Senior Program Manager, SIM
Kate Bennett, Office Manager
Jeff Bontrager, Director of Research on Coverage and Access
Ashlie Brown, Director of SIM Extension Service
Alex Caldwell, Associate Director of Program Development and Analysis
Brian Clark, Associate Director of Visual Communications
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Jalyn Ingalls, Research Analyst
Emily Johnson, Associate Director of Economic Analysis
Tamara Keeney, Policy Analyst
Michele Lueck, President and CEO
Laura Manes, Office Manager
Teresa Manocchio, Policy Analyst
Emily Morian-Lozano, Policy Analyst
Allie Morgan, Associate Director for Legislative Services
Adrian Nava, Research Analyst
Ian Pelto, Research Analyst
Rebecca Rapport, Program Manager, SIM
Sara Schmitt, Director of Community Health Policy
Rebecca Silvernale, Senior Data Analyst
Edmond Toy, Director
Natalie Triedman, Policy Analyst
Jaclyn Zubrzycki, Communications Specialist

Paige rescued orphan ducks she found on her commute.

Allie organized a tour of the state Capitol for CHI analysts.

Karam and Ian climbed to Boulder’s Royal Arch.

Jeff celebrated 10 years at CHI in 2015.

Chrissy ran the Boston Marathon.
# Statements of Activities: Years Ended December 31, 2017 and 2016

## Changes in unrestricted net assets:

### Revenue and Support:

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contract revenue</td>
<td>$ 2,899,317</td>
<td>$ 1,077,636</td>
</tr>
<tr>
<td>Grant revenue</td>
<td>$ 377,000</td>
<td>$ 318,000</td>
</tr>
<tr>
<td>Investment return</td>
<td>$ 52,082</td>
<td>$ 67,119</td>
</tr>
<tr>
<td>Conference income</td>
<td>$ 119,568</td>
<td>$ 35,054</td>
</tr>
<tr>
<td>Miscellaneous income</td>
<td>$ 8,975</td>
<td>$ 14,325</td>
</tr>
<tr>
<td>Net assets released from restrictions</td>
<td>$ 3,841,396</td>
<td>$ 2,964,665</td>
</tr>
<tr>
<td><strong>Total revenue</strong></td>
<td><strong>$ 7,298,338</strong></td>
<td><strong>$ 4,476,799</strong></td>
</tr>
</tbody>
</table>

### Expenses:

### Program services:

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health information</td>
<td>$ 6,119,086</td>
<td>$ 3,265,170</td>
</tr>
<tr>
<td><strong>Total program services</strong></td>
<td><strong>$ 6,119,086</strong></td>
<td><strong>$ 3,265,170</strong></td>
</tr>
</tbody>
</table>

### Supporting services:

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Management and general</td>
<td>$ 359,576</td>
<td>$ 353,614</td>
</tr>
<tr>
<td>Fundraising</td>
<td>$ 181,635</td>
<td>$ 255,938</td>
</tr>
<tr>
<td><strong>Total supporting services</strong></td>
<td><strong>$ 541,211</strong></td>
<td><strong>$ 609,552</strong></td>
</tr>
<tr>
<td><strong>Total expenses</strong></td>
<td><strong>$ 6,660,297</strong></td>
<td><strong>$ 3,874,722</strong></td>
</tr>
</tbody>
</table>

**Increase (decrease) in unrestricted net assets**

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>$ 638,041</strong></td>
<td>$ 602,077</td>
<td></td>
</tr>
</tbody>
</table>

## Changes in temporarily restricted net assets:

### Revenue and Support:

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grants and contributions</td>
<td>$ 464,823</td>
<td>$ 4,642,051</td>
</tr>
<tr>
<td>Net assets released from restrictions</td>
<td>($ 3,841,396)</td>
<td>($ 2,964,665)</td>
</tr>
<tr>
<td><strong>Increase (decrease) in temporarily restricted net assets</strong></td>
<td>($ 3,376,573)</td>
<td>$ 1,677,386</td>
</tr>
</tbody>
</table>

### Change in net assets

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>($ 2,738,532)</strong></td>
<td>$ 2,279,463</td>
<td></td>
</tr>
</tbody>
</table>

### Net assets at beginning of year

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>$ 7,275,657</strong></td>
<td>$ 4,996,194</td>
<td></td>
</tr>
</tbody>
</table>

### Net assets at end of year

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>$ 4,537,125</strong></td>
<td>$ 7,275,657</td>
<td></td>
</tr>
</tbody>
</table>
# Statements of Financial Position December 31, 2017 and 2016

<table>
<thead>
<tr>
<th>Assets:</th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and cash equivalents</td>
<td>$1,282,309</td>
<td>$1,725,448</td>
</tr>
<tr>
<td>Accounts receivable</td>
<td>$603,220</td>
<td>$499,784</td>
</tr>
<tr>
<td>Prepaid expenses</td>
<td>$27,743</td>
<td>$58,412</td>
</tr>
<tr>
<td>Contributions receivable</td>
<td>$1,180,680</td>
<td>$4,260,012</td>
</tr>
<tr>
<td>Investments</td>
<td>$1,755,725</td>
<td>$1,703,821</td>
</tr>
<tr>
<td>Leasehold improvements</td>
<td>$212,478</td>
<td>$212,478</td>
</tr>
<tr>
<td><strong>Property and equipment:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Furniture and fixtures</td>
<td>$303,210</td>
<td>$268,759</td>
</tr>
<tr>
<td>Office equipment and computer software</td>
<td>$651,678</td>
<td>$599,326</td>
</tr>
<tr>
<td>Website</td>
<td>$41,950</td>
<td>$89,909</td>
</tr>
<tr>
<td><strong>Total property and equipment</strong></td>
<td>$1,209,316</td>
<td>$1,170,472</td>
</tr>
<tr>
<td>Less accumulated depreciation and amortization</td>
<td>$859,027</td>
<td>$784,791</td>
</tr>
<tr>
<td><strong>Net property and equipment</strong></td>
<td>$350,289</td>
<td>$385,681</td>
</tr>
<tr>
<td>Deposits</td>
<td>$13,946</td>
<td>$13,946</td>
</tr>
<tr>
<td><strong>Total assets</strong></td>
<td><strong>$5,213,912</strong></td>
<td><strong>$8,647,104</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounts payable</td>
<td>$79,598</td>
<td>$390,912</td>
</tr>
<tr>
<td>Accrued payroll liabilities</td>
<td>$94,420</td>
<td>$66,433</td>
</tr>
<tr>
<td>Deferred rent</td>
<td>$143,962</td>
<td>$202,269</td>
</tr>
<tr>
<td>Deferred revenue</td>
<td>$358,807</td>
<td>$711,833</td>
</tr>
<tr>
<td><strong>Total liabilities</strong></td>
<td><strong>$676,787</strong></td>
<td><strong>$1,371,447</strong></td>
</tr>
<tr>
<td><strong>Net assets:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unrestricted</td>
<td>$2,699,349</td>
<td>$2,061,308</td>
</tr>
<tr>
<td>Temporarily restricted</td>
<td>$1,837,776</td>
<td>$5,214,349</td>
</tr>
<tr>
<td>Total net assets</td>
<td>$4,537,125</td>
<td>$7,275,657</td>
</tr>
<tr>
<td><strong>Total liabilities and net assets</strong></td>
<td><strong>$5,213,912</strong></td>
<td><strong>$8,647,104</strong></td>
</tr>
</tbody>
</table>
The Colorado Health Institute is a trusted source of independent and objective health information, data and analysis for the state’s health care leaders. The Colorado Health Institute is funded by the Caring for Colorado Foundation, Rose Community Foundation, The Colorado Trust and the Colorado Health Foundation.

303 E. 17th Ave., Suite 930, Denver, CO 80203 • 303.831.4200
coloradohealthinstitute.org

OUR FUNDERS