



Coloradans are not waiting on national policymakers to take action to improve their health.

From county commissioners and mayors to community-based organizations and voters, Coloradans are working locally to address the needs and opportunities in their communities. The success of 10 local ballot initiatives in 2018 to raise tax dollars for addressing behavioral health issues is one example.

State policymakers are also promising change. A new governor and an emboldened Democratic majority in the Colorado legislature aim to shift state policy to the left. In Washington, a populist president is shifting the federal government to the right. National health policy is unclear, but rhetoric from the administration stresses state choice and innovation.

The need for impartial data, expert policy analysis, and evidence-based insight about innovation is more important than ever. With this in mind, the Colorado Health Institute (CHI) presents our 2019 Health Agenda.

Our 2019 Health Agenda emerges from three observations: health is everywhere, politics are shifting, and the mandate for change is urgent.



Health is Everywhere

Health policy is no longer the sole domain of legislators, state agencies, providers and insurers. Every major aspect of our lives influences our health, from our schools and workplaces to our homes and neighborhoods. And if we want to improve health, we need to reach and support local policymakers and community leaders alike.

Sound local and state policy decisions require analysis and insights that are granular and community-informed. CHI's lens has become wider in terms of examining issues that are adjacent to health care, such as transportation, housing, and education. We are focused on details at the ZIP code and even Census tract levels.

A Community-Driven Agenda

This Health Agenda builds on CHI's work in Colorado communities.

We Engage

Our community-based work takes us to communities all across the state. From San Miguel to the San Luis Valley to Steamboat Springs, our qualitative work engages with local leaders and community residents.

We Participate

CHI staff contribute to advisory boards, consult with legislators, present at town halls, and serve on state commissions.

We Listen

Throughout our community work, we listen to local and community concerns. Our Health Agenda reflects those interests.

Delivering Practical Solutions

Every proposed deliverable in this Health Agenda is focused on providing ideas and tools that one or more of our key audiences can apply to their work. Those audiences are:

Community advocates and leaders. Health is local and health policy is local, too. We strive to provide information to those seeking to make a difference in the communities where they live, work and play.

Advocates, community groups, and public health. CHI's data and analysis provide the evidence they need to pursue their own work.

The industry. CHI creates context and framing for health systems and payers to understand a rapidly changing market.

Policymakers. Evidence-based policymaking is CHI's hallmark, and our published work seeks to point out improvements that are possible with new policies.

If health is everywhere, so too must be the information and data that lead to better outcomes. We work hard to reach a wide audience with clear. accessible and local research that empowers people to participate in discussions and decisions that affect their health.

Most importantly, CHI helps bring to light the most effective policy solutions based on independent, evidence-based evaluation.

Our work blends data and analysis with personal stories and local insights. To broaden our reach, we intend to disseminate, for the first time, several of our planned deliverables in Spanish.



Politics are Shifting

The last two elections brought seismic changes at the local, state, and national levels.

Locally, Coloradans are taking matters into their own hands, particularly in addressing the crisis in mental health and substance abuse. After passing successful funding measures, communities must now prioritize how to spend these resources efficiently and effectively.

Governor Jared Polis and the new Democratic majority in the legislature have a chance to inject progressive policies into Colorado's health system. The new administration has placed consumers at the center of its health platform, with a special emphasis on lowering costs of both insurance and hospital care. Balancing those initiatives with the constraints of the state budget will be a significant challenge.

Nationally, health policy seems chaotic. But it's important to pay attention to Washington's interest in state innovation. State and federal priorities may dovetail in surprising ways. Meanwhile, Democratic presidential candidates are already looking to 2020 with health at the forefront of their platforms.

Our 2019 Health Agenda seeks to translate the opportunities that federal decisions offer to our state.

Our legislative services program brings independent research and evidence to discussions on the most pressing health policy issues of the year.



The Mandate of Urgency

Regardless of political crosscurrents, some problems are so pressing that policymakers cannot ignore them:

- · Every day, three Coloradans die by suicide, and the problem is growing. A similar number die from drug overdoses, led by opioids and, increasingly, methamphetamines.
- Health care and health insurance have become unaffordable for many Coloradans, especially in rural communities.
- And the factors that influence health most educational attainment, affordable housing, and a solid foundation in early childhood — remain out of reach for many Coloradans, resulting in health inequities.

From local school districts to county health departments to the state Capitol, CHI brings sound evidence and independent analysis to clarify these issues and identify effective policy options at every level.

Our portfolios speak to today's policy choices. We build our agenda to adapt to new or changed conditions.

Our 2019 Health Agenda will lead to better health policy. And CHI believes that better policy leads to better health for all Coloradans.

Support Our Work.

The Colorado Health Institute has brought evidencebased, impartial analysis to Colorado for the better part of two decades. We have analyzed, questioned, and guided the most important health policy decisions over that time.

The projects in this agenda will make concrete contributions to improving health in Colorado this year. But we cannot complete this plan without help from our community.

Please consider supporting a portfolio or focus area.

Contact CEO Michele Lueck at 303.831.4200 or lueckm@coloradohealthinstitute.org

Finally, we thank The Colorado Trust, Rose Community Foundation, Caring for Colorado, Kaiser Permanente Colorado, the Colorado Springs Health Foundation, and the Community First Foundation for supporting our legacy work and our ability to respond to fast-changing developments.



Community Health

Director: Sara Schmitt



The evidence is increasingly definitive that health outcomes are influenced the most by issues outside of health care. To improve our health, we must tend to the environments in which we live, work, and learn.

Our past work in Community Health has focused on broadening the definition of health. In 2019, our portfolio focuses on strengthening our impact. Knowing what we know, how do we create policy that improves the social determinants of health?

FOCUS AREA A

Creating Healthy Communities: Housing, Education, and Transportation

CHI's work in Creating Healthy Communities will provide tools and analyses that communities can use to promote better health through equitable and accessible housing, education, and transportation policies and programs. Our research will identify areas of greatest opportunity and highlight local innovations.

Proposed Deliverables:

- Health Equity Atlas. With detail at the Census tract level, the atlas will include measures of social determinants of health such as educational attainment, housing costs, income levels, violence, and resiliency to identify areas of opportunity and need.
- Transportation and Health. An assessment of public transportation, including nonemergent Medicaid transportation, will deepen our understanding of the impacts on access to care, jobs, and mobility.
- Schools and Behavioral Health. An analysis
 of youth behavioral health and school-based
 services will include data from the Colorado Health
 Observation Regional Data Service (CHORDS) and
 Colorado Healthy Schools Smart Source.

FOCUS AREA B

Climate and Health

Climate change is widely recognized as a health issue. CHI's 2019 portfolio will examine how communities can prepare for and mitigate the health impacts of rising temperatures, poor air quality and extreme weather, including health conditions such as asthma and heart disease.

Proposed Deliverables:

- Impact and Opportunities Index. This work will assess county-level climate-related health impacts and highlight solutions and policies.
- The Financial Cost of Climate-Related Health Concerns. An analysis of health care costs associated with climate-related health impacts will quantify and qualify the financial burden of climate change.

FOCUS AREA C

Aging in Community

Supporters: NextFifty Initiative

Colorado's aging population is growing. Increasingly, seniors look to stay in their homes and communities as they grow older. This creates new demands on families and requires smart, bold policies to ensure that local programs, housing, supportive services, and workers are available to support older Coloradans.

- Tool Kit for Local Action. CHI is preparing tool kits with relevant data and policy resources for local leaders to address aging and housing in their communities.
- The Hidden Costs of Caregiving. Our work will quantify the costs associated with informal caregiving that are "paid" by Colorado families and will detail how costs differ by race, ethnicity, and community.

Behavioral Health

Director: Alex Caldwell



Drug overdoses have surpassed firearms and car accidents as a leading cause of early death in Colorado and the nation. In Colorado, suicide causes even more premature deaths than accidental drug overdoses. The statistics are bleak, but the situation isn't hopeless.

Decades of research have identified effective ways to combat deaths due to behavioral health problems — such as evidence-based prevention and early childhood health promotion, medication-assisted treatment for opioid addiction, and service delivery strategies like teletherapy. This portfolio analyzes opportunities in suicide prevention, substance use disorder trends, and the best ways to promote mental health in children and youth.

Proposed Deliverables:

- The Theory and Practice of Parity. This analysis will explore parity issues in terms of access, workforce, and reimbursement and examine how gaps can be overcome to advance equitable outcomes.
- Guns and Suicide. We plan to build an evidence-based model to assess the relationship between firearm laws and suicide.

FOCUS AREA A

Early Childhood Mental Health

A healthy childhood is a strong predictor of a healthy life. Promoting mental health and well-being for children, parents, and caregivers is an essential building block. CHI's work highlights best practices in early childhood mental health and looks at issues of scale and accessibility.

Proposed Deliverables:

- ACE Atlas. A quantitative analysis of adverse childhood experiences (ACEs) by geography and demographics will identify where support is most needed. Our analysis will include a review of current evidence-based programs that promote healthy families.
- **Full Day K.** This analysis of the Polis administration's full-day kindergarten proposal will include the opportunity it presents (such as outcomes and health) as well as the challenges (such as funding and workforce) that must be overcome.

FOCUS AREA B

Opioids and Substance Use Disorders: Prevention, Intervention, Treatment and Recovery

CHI plans to continue its work along the continuum of prevention, intervention, treatment, and recovery. Our goal is to provide policymakers at local and state levels with the tools and evidence to stem the tide of misuse and overdose.

- Supervised Injection Sites. Colorado may be the first state to allow supervised injection sites. Our work will explore the evidence and impact. We will use an unbiased, equitable evaluation framework to assess short- and long-term outcomes.
- At the Intersection: Criminal Justice and **Health.** We plan to create a needs assessment for substance use disorder treatment and prevention among justice-involved populations.



Health Equity for All Coloradans

Director: Jeff Bontrager

This year's Health Equity portfolio will build on our work quantifying and qualifying disparities in health coverage, access and outcomes. We will focus on policy levers — both in health and those in adjacent fields such as education and housing — that can effectively address inequities.

The Health Equity portfolio will expand and deepen our reach by developing products in Spanish as well as English and by intentionally incorporating stories of lived experience. We also will apply health equity principles to all relevant analyses, including our annual assessment of school-based care and eligibility for public programs.

Proposed Deliverables:

 Health Equity Fellows. CHI is helping to launch and host the inaugural cohort of Health Equity Fellows during the 2019 legislative session. We will help the fellows develop an "equity note" for legislation. Like a fiscal note, an equity note will provide forecasts of the impact of bills on equity and health.

FOCUS AREA A

Rural Communities

Health inequities are amplified in rural Colorado. The mountains and plains are a tapestry of racial, ethnic, and economic diversity. Access to services that improve health — both clinical and nonclinical — is often difficult and expensive. CHI will continue to work on issues that disproportionately affect rural Coloradans.

Proposed Deliverables:

- The Four Corners of Colorado. This analysis
 will examine the complex inequities in the state's
 rural mountain and plains regions and identify the
 evidence surrounding policy ideas to meet those
 challenges.
- Where Do We Go? This analysis will answer the questions, "Who is traveling across Colorado to get needed services?" "How far are they going?"

FOCUS AREA B

Access and Equity: The Colorado Health Access Survey

Supporters: The Colorado Trust and the Colorado Health Foundation

Since 2009, the Colorado Health Access Survey has served as the state's best source for measuring disparities in health, coverage, and barriers to care. In 2019 for the first time, the CHAS will measure discrimination in the health system and its resulting stress, in addition to issues associated with inequity such as barriers to obtaining adequate food and stable housing.

Proposed Deliverables:

 Who is Treated Unfairly in Colorado's Health Care System? This analysis will look beyond state averages to understand who is most likely to encounter barriers to health resulting from inequities in housing, behavioral health services, and more.

FOCUS AREA C

Equitable Evaluations

Bringing the lens of health equity to our evaluation work is a key objective in 2019. Our evaluations will examine impact and outcomes by race, ethnicity, income, geography, and more. Equitable evaluation is an emerging field, and we will strive to contribute to it in meaningful ways.

- Equitable Evaluation from Theory to Practice.
 Our goal is to develop and apply an equitable evaluation framework to at least one evaluation project in partnership with a client and the community it serves.
- What We Are Learning. We will publish a piece on CHI's experiences and how we've evolved our approach to evaluation.

Cost, Affordability, and Payment Reform

Director: Emily Johnson



From town hall meetings to speeches by the governor, health care costs are a chief concern. We expect that the machinery of state government will move toward solutions that drive down health care prices. CHI will support this work and identify the hidden risks inherent in making changes to the complex health economy.

Our Cost, Affordability, and Payment Reform portfolio will examine how health care does — or doesn't - operate according to traditional marketplace principles of competition and price transparency. It will also investigate the shifting role of nonprofit hospitals in an age of reduced charity care. Finally, our public option model will provide a much-needed objective take on the winners, losers, and complex consequences of a government-run health care plan.

Proposed Deliverables:

- The Story of HTP. This primer on the Hospital Transformation Program (HTP) will explain what this program is, its origin, how it sets the stage for payment reform, and how it interacts with financing mechanisms such as the Hospital Provider Fee.
- The Public Option: An Independent Model. This quantitative analysis will look at the impacts of a government-run health insurance program on the economy, premiums, and health insurance coverage. It will include an exploration of unintended consequences of this program on the larger market.
- Reinsurance: What Does It Buy Us? This will provide a closer look at how reinsurance actually works, how it's funded, and the winners and losers.

PORTFOLIO 5

Regional Health Connectors

Director: Ashlie Brown

Colorado's Regional Health Connectors is a program of the State Innovation Model (SIM). It takes our knowledge of the social determinants of health and puts it into action. In 21 regions that blanket the state, RHCs work every day to forge and strengthen connections among systems that keep people healthy — medical and nonmedical alike. CHI serves as the statewide convener for this cutting-edge work, supplying training, support, and evaluation for this new workforce.



As the SIM program winds down, RHCs seek to continue their efforts to advance the health of all Coloradans through effective system change.

Proposed Deliverables:

 Sustainable Programs. Ongoing support of this program will allow the RHC model the time necessary to demonstrate its value, success, and return on investment in Colorado.



Care In Our Communities

Director: Ann Loeffler

Colorado's effectiveness in expanding health coverage to nearly 94 percent of its residents calls into question the meaning of "safety net." While coverage has expanded, access and outcomes have not followed suit. Our Care In Our Communities portfolio seeks to understand why that's the case. Current findings indicate that we need to build systems and policies that meet Coloradans where they live, work, and play.



School-Based Health Centers

School-Based Health Centers (SBHCs) provide effective and often the only source

of care and health information for students across the state. Yet programs and services offered at these clinics vary widely depending on the district, school, and available resources. Our portfolio seeks to characterize these differences and identify policy choices that can improve access to care.

Proposed Deliverables:

- Schools and Substances. We plan to characterize the role of SBHCs in addressing substance use disorders, including the scope of services provided, case examples of innovative efforts, and patient/parent stories.
- Schools and ACEs. We plan to profile SBHC efforts on the Western Slope to address ACEs and provide trauma-informed care.



FOCUS AREA B

Redefining the Safety Net

Supporters: Telligen Community Initiative

"Safety net" providers range from a clinic that treats individuals regardless of their ability to pay to an independent nurse practitioner representing a county's sole medical provider. All of these providers play a critical role in promoting health. Some communities and populations in Colorado rely extensively on safety net providers. And access to behavioral health and specialty care is increasingly urgent but often out of reach.

Proposed Deliverables:

 Specialty Care Stewardship. We are leading a high-level group of health providers to quantify the unmet demand for speciality care and develop a statewide model to meet that demand.

- Financing FQs. This work will analyze the impact of alternative payment models on service delivery in Federally Qualified Health Centers, including teambased care models, use of health coaches, group visits, remote monitoring, and other "alternative" modalities that improve care and reduce cost.
- **Providers and the Public Option.** This analysis will assess the impact of a public coverage option on safety net providers.

FOCUS AREA C

The Future of Colorado's **Health Workforce**

Fostering a health workforce that meets today's demands and plans for tomorrow's is a chronic policy challenge. While Colorado is one of the nation's leaders in permitted scopes of care, the inadequate supply — in terms of numbers of providers or their distribution throughout the state — is a constant concern. Our portfolio continues to examine ways to improve our supply — from traditional solutions like building clinics and incentivizing providers to innovative uses of telemedicine and e-consults.

Proposed Deliverables:

• Where's the Workforce? This interactive map will assess provider-to-population ratios by neighborhood with an additional analysis of the percentage of nonwhite primary care, psychiatric, and OB/GYN providers.

Equity in Workforce. This work will identify policies and programs that successfully increase the number of providers from under-represented groups and assess their viability in Colorado.

FOCUS AREA D

Advancing Oral Health

While policy advances in recent years have opened access to oral health, the reality for many is much different. A lack of providers willing to take Medicaid, scope of treatment issues in schoolbased clinics, and other policies lead to disparities in access and overall inequities in oral health. Our portfolio continues to surface challenges and solutions to improving oral health for all.

- The Promise of Teledental Health. This work will summarize Colorado's policies that already support oral health innovation, provide case examples of best practices, and recommend next steps needed to spread teledental health.
- **Smiles at Schools.** This work will analyze SBHCs' oral health programming and quantify its current and potential impact on promoting oral health equity.
- **RAEs and Reach.** This work will assess the role of the Medicaid Regional Accountable Entities in promoting oral health.





Hot Issues in Health Conference

Director: Rebecca Silvernale

CHI's annual body of work comes together at Hot Issues in Health, the state's premier health policy conference. The event features rich discussion, opportunities for new connections, and concrete policy ideas to prepare Colorado policymakers and stakeholders for the year ahead.

Local leaders from public health, hospitals, foundations, county leaders, academia, and advocacy gather to learn, discuss, debate, and collaborate. We bring in the nation's leading health policy thinkers from varying political perspectives as keynote speakers, and CHI experts present our latest research on Colorado policy. All of this gives attendees a head start on solving the state's toughest health policy problems.



Proposed Deliverables:

- Two-day conference, December 5-6, 2019.
- Post-conference breakout session webinar series.



PORTFOLIO 8

Legislative Services

Director: Allie Morgan

Supporters: Rose Community Foundation

Policymakers of any political stripe have few places to turn for unbiased evidence and analysis on health and health care. CHI's Legislative Services portfolio supports state legislators and other elected officials. We work to improve health for all Coloradans — a unique and increasingly important role in a time of fast-moving debate, intense partisanship, and complex policy problems.

A new governor, the turnover of a third of the legislature, and a move to unified party control make the need especially high in 2019. We will be strategic, creative, and nimble, structuring CHI's legislative services to be both efficient and effective.

- Forecast and Review. These two annual reports are widely anticipated in the policy community.
 CHI's Legislative Forecast previews the issues to watch during the legislative session. The Legislation in Review report summarizes health policy trends, final status of notable bills, and important budget debates affecting health and health care.
- Briefings and Town Halls. CHI makes itself available to legislators, county commissioners and elected officials. We often offer private briefings on bills and policies and present at town hall meetings throughout the state.





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The Colorado Health Institute is a trusted source of independent and objective health information, data, and analysis for the state's health care leaders. CHI's work is made possible by generous supporters who see the value of independent, evidence-based analysis. Those supporters can be found on our website coloradohealthinstitute.org/about-us