

CHAC
Meeting Notes – 3/2/07

Present: Clint Barter, Kip Boyd, Tony DeMond, Dianne Donovan, Bern Heath, Julie Pickering, Missy Rodey, Eileen Wasserbach

- 1) Maureen Maliszewski, a nurse practitioner, introduced herself as new to CHAC. She and her husband have recently relocated to Durango from Buffalo, NY. She is looking for employment in our area.
- 2) Meeting notes from 2/2007 were approved with the suggestion that *The new clinic to be established will function as an urgent care facility for patients without other payment options* be changed to read without a primary care provider.
- 3) The CHAC contact list was updated with new and corrected information.
- 4) Kip Boyd reported on a meeting held with Rep John Salazar and members of LPC's health care community. Kip reported that a cost-plus reimbursement schedule be requested of Gov Ritter; that Salazar and his staff are supportive of our health care needs and concerns; that Federal health care reform is probably less important to us in the short term than state actions; talking points distributed for attendees were circulated and a request was made to send them out to CHAC members. Missy will request an electronic copy and distribute it if possible.
 - Julie explained that a "rural resort" designation is being sought. HUD uses, but it is not yet applied to health care.
 - A discussion of Stark Regulations indicated that the purpose of these federal laws was to assure that people do not take advantage of Medicare and Medicaid by ratcheting up costs associated with providing care.
 - Kip said self-referral laws are slightly different but do not include specialty surgical hospitals.
 - Anti-kickback laws specify that incentives cannot be given to doctors for taking Medicare patients.
 - Abilities of entities to partner is limited.
 - Non-profits cannot provide benefits to for-profit corporations.
 - MRMC is limited in what it can do; we must demonstrate genuine community need.
- 5) Primary Health Care Community Coalition update: Valley Wide is finishing out its presence in LPC with curtailed services. SWCMHC has contacted Gailly Murphy to offer volunteer front desk staff; that possibility is being pursued. Kip reported that MRMC's "stop gap" clinic will be staffed by two mid-levels and one half-time MD. These professionals have not yet been hired. The clinic will physically be located in the current VW location, with MRMC assuming VW's lease with a \$40,000-\$50,000 credit from VW. Four Corners Nursing Home has hired a new physician; Joe Murphy and Pat Kearney are directors there, but new MD will assume responsibility

for approximately 45 patients. It was reported that Montezuma County has received Rural Health designation and is developing a health center. Their area is short approximately 4 to 5 physicians. The hope is to stem the flow of patients to LPC. Dove Creek also has received special designation.

Bern suggested that the consultant to be hired should look at all models available, scale them to our volume and incorporate our diverse populations. He indicated there exists a potential problem with MRMC's being criticized for not doing enough, even though they are not covering all their costs and, in meeting about 1/8 of our total need, are actually a band-aid provider. Bern suggested CHAC act to ensure the MRMC is not punished and that we strategize how we can best support/protect them. Such support might actually be a path to support our PR efforts around a potential HSD bid. Julie asked if David Bruzzese could provide talking points for this. Perhaps CHAC can increase its visible support of MRMC and the transition plan by holding community meetings.

Eileen suggested it is important that the PHCCC be sensitive to the special needs of outlying areas including Ignacio and Bayfield in working with the consultant, and pointed out that there is not currently a representative from Ignacio or Bayfield on the PHCCC.

- 6) Missy reported on Ellen Robert's HB 1219 designed to make the process of forming a HSD or HAD easier and more appropriate than current special district law. The bill has passed out of the Finance Committee and referred to the Appropriations Committee. Several people indicated concern about health care district formation being limited to November elections, especially if they can be held only on odd-numbered years. Missy will check with Ellen and forward information from her; she had indicated that, despite the language of the bill, elections can be held in any November for the formation of a district, with May elections being possible for board member election.
- 7) The LWV/CHAC health care forum will be held on March 27th from 5:00 pm until 7:30 pm at the Rec Center. The LVW has requested that CHAC help pay for promotional advertising, suggesting it might cost about \$500. Missy reported we currently have \$878 in our account with the Community Foundation, and asked for input regarding this expense. Eileen suggested that we approve an expense not to exceed \$500, indicating that this is a legitimate cost associated with our goal of improving access to health care in our county. She will request \$5000-\$7500 from the Colorado Health Foundation to support the activities of CHAC, and feels we can go back to them after the determination of direction our community will take in resolving its health care crisis for support as needed.
- 8) John Whitney was not present to report on the progress of the Colorado Health Institute Safety Net Study, but Bern indicated the PHCCC understanding is that any data gathered by CHI would be added to the information gathered by a consultant hired to develop a strategy for meeting LPC's health care needs.

Clint said he believes CHAC should begin its fundraising activities soon in order that any activity toward launching a HSD campaign not be constrained by fundraising pressure. This could be tied to Eileen's grant request. Donations would be tax-deductible; if they would be enterprise zone qualifying needs to be determined. It may require that there be a job-training component. This will be further discussed at the next CHAC meeting after some indication of progress toward a health care solution for LPC.

Missy circulated several health care articles:

:

- *Most Support U.S. Guarantee of Health Plans*, The New York Times, March 2, 2007.
- *Special Health care Taxing districts – Association with Population Health Status*, American Journal of Preventive Medicine 2007, 32(2).
- *Faltering Family M.D.s Get Technology Lifeline*, Wall street Journal, February 23,2007.

It was suggested that John Withers or Matt Clark be asked to write an article about our changing health care scenario, with VW leaving and the MRMC stop gap clinic opening April 15th. David Bruzzese can provide information to whoever agrees to write the article. Missy will check with both people.

- 9) While in a “treading water” position, it was decided that CHAC not meet in April, but try to have our next meeting with the consultant. Bern added that we do not want to lose momentum, so a meeting should be held in two months regardless of the availability of the consultant at that time. No one volunteered to lead that meeting. Missy will not be in town, but said a meeting the last week in April would be possible. An announcement of time will be forthcoming and based on availability of the consultant.

Signed,
Missy Rodey