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Physicians' assistant Devin Staniar gives 6-month-old Eli Lewellen a checkup at Sunrise Community Health clinic in Loveland. Its CEO says Sunrise will lose more than two-thirds of hts total federal funding if Congress does not reauthorize it.

Health centers' budget prognosis uncertain

by **Steve Lynn** on September 5, 2014 Published In **Health Care & Insurance**

Anxious clinics await Congress' trust-fund vote

LOVELAND – Community health centers in the Boulder Valley and Northern Colorado will have to cut millions of dollars from their budgets if Congress doesn't renew \$50 million in annual funding for clinics statewide.

Funding from the Health Center Trust Fund will contribute \$3.6 billion to the nation's community health clinics in fiscal 2015 before the program expires in September of next year. The nonprofit health clinics offer primary care to low-income, underinsured patients, charging patients various rates depending on their incomes.

Congress established the Health Center Trust Fund after cuts to other community health clinic funding in 2010 when lawmakers passed the Affordable Care Act. The funding provides clinics with 70 percent of their federal funding on top of \$1.5 billion in annual discretionary funding.

Sunrise Community Health, which operates clinics in Weld and Larimer counties, will lose \$2.2 million of the \$3.2 million in total federal funding if Congress does not reauthorize the funding, chief executive Mitzi Moran said.

Last year, the clinic saw 143,000 visits from patients and served a total of 34,300 people. More than 70 percent of patients at Sunrise had annual income of \$46,100 or less for a family of four. The clinic employs about 300 workers with a budget of \$24 million.

Operating on a tight budget, Sunrise would have to make across-the-board budget cuts, Moran said.

"It will have a big impact on community health," she said. "Because of the need for our services, my hope is that our appropriations will be reinstated."

Similarly, Salud Family Health Centers, which operates nine community health clinics in northeastern Colorado as well as a mobile unit, would lose \$5 million in funding. Salud, which served 70,000 patients last year for a total of 300,000 patient visits, employs about 560 workers with annual budget of \$56 million.

Cutting that much from Salud's budget could mean eliminating positions and ancillary services, such as mental health and patient education, said Jennifer Morse, Salud's vice president for development.

"We operate such a lean system to begin with," she said, "that there's really no excess in our budget to take out."

Salud has responded by seeking letters from local government officials on the importance of its health services.

"We're just hoping to make the case that this in an important funding cliff and we need to do everything to prevent it from happening," she said.

Last year, 42 percent of community health-center patients were insured through Medicaid, and 37 percent were uninsured, according to the Colorado Community Health Center Network, the state association for community health centers.

The number of uninsured patients has risen, however, after many people became eligible for Medicaid Jan. 1, while others became eligible for premium subsidies under the Affordable Care Act.

Despite the increase, the network believes it will continue to serve a large number of uninsured patients.

Polly Anderson, chief operating officer of the health-center network, which represents Colorado's 18 community health centers, said no patient's copay will fund the entire cost of care.

"Health centers are reliant on that federal grant to help make up the difference," she said, "as well as support from state agencies and from private foundations."

The federal grant represents an average 17 percent of a Colorado community health center's funding.

"It's a pretty significant portion for those who come without Medicaid ... or private health insurance coverage," she said.

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