

# Colorado Indigent Care Program and Primary Care Fund

---

*Fiscal Year 2021-22 Annual Report*



**COLORADO**

Department of Health Care  
Policy & Financing

# Contents

- I. EXECUTIVE SUMMARY..... 4**
- II. INTRODUCTION ..... 6**
- III. PROGRAM OVERVIEW ..... 7**
  - A. CICP Communication.....7
- IV. CLIENTS ..... 8**
  - A. Eligibility Requirements .....8
  - B. Clients Served..... 11
- V. PROVIDERS..... 14**
  - A. Provider Eligibility Requirements ..... 14
  - B. Provider Participation ..... 15
- VI. PROGRAM ADMINISTRATION ..... 19**
  - A. Reporting Requirements..... 19
  - B. CICP Provider Compliance Audit ..... 19
  - C. Prevention of Fraud by Applicants ..... 19
  - D. Collection of Third-Party Payments ..... 20
  - E. Incentives for Utilization Control ..... 20
- VII. REIMBURSEMENT..... 21**
  - A. Reimbursement for Clinics and Hospitals ..... 21
  - B. Reimbursement Methodology for Hospitals..... 23
  - C. Reimbursement Methodology for Clinics..... 23
  - D. Children’s Hospital Colorado Clinic Payment..... 23
- VIII. PRIMARY CARE FUND..... 25**
- IX. FEDERAL MATCH RATES..... 27**
- X. DISPROPORTIONATE SHARE HOSPITAL (DSH) PAYMENT..... 29**
  - A. Law and Regulations ..... 29
  - B. Payment Allotment..... 29
  - C. DSH Audit ..... 29
- XI. DEFINITIONS ..... 31**
- XII. CICP FINANCIAL TABLES..... 36**
- XIII. CICP UTILIZATION TABLES ..... 45**



## Tables and Figures

### CLIENTS

Table 1 Annual Income Ranges for Each Federal Poverty Level Percentage Range .....	9
Table 2 Client Copayment Table Effective July 1, 2021 .....	10
Figure 1 Total Unduplicated Client Count by Provider and Age Group .....	11
Table 3 Comparison of Inpatient Days .....	12
Figure 2 Inpatient Admissions by CICP Rating .....	12
Table 4 Comparison of Outpatient Visits .....	13
Figure 3 Outpatient Visits by CICP Rating .....	14

### PROVIDERS

Table 5 FY 2021-22 CICP Clinics and Hospitals by County .....	16
Table 6 FY 2021-22 CICP Participating Providers.....	17

### REIMBURSEMENT

Table 7 FY 2021-22 CICP Payments.....	22
Table 8 Historical CICP Write-Off Costs .....	22
Table 9 FY 2021-22 Percentage of Write-Off Cost Reimbursed .....	23
Table 10 Historical Percentage of Write-Off Cost Reimbursed.....	24

### PRIMARY CARE FUND

Table 11 FY 2021-22 Primary Care Fund Payments .....	26
--	----

### FEDERAL MATCH RATES

Table 12 Colorado's Federal Match Rates.....	28
--	----

### DISPROPORTIONATE SHARE HOSPITAL PAYMENT

Table 13 Colorado DSH Allotment .....	30
Table 14 FFY 2021-22 DSH Payments .....	30



## CICP FINANCIAL TABLES

Table 15 Total Clinic Financial Activity and CICP Payment.....	36
Table 16 Total Hospital Financial Activity .....	37
Table 17 Physician Services Detail .....	39
Table 18 Outpatient Pharmacy Detail .....	39
Table 19 Ambulance Detail.....	40
Table 20 Denver Health Medical Center Detail.....	40
Table 21 Inpatient and Outpatient Charges (Detail).....	41

## CICP UTILIZATION TABLES

Table 22 Admissions and Visits by County.....	45
Table 23 Outpatient Visits and Inpatient Admissions by CICP Rating .....	47
Table 24 Inpatient Admissions and Days by CICP Rating .....	47
Table 25 Outpatient Visits and Charges by Age .....	48
Table 26 Inpatient Admissions and Charges by Age.....	48
Table 27 Utilization by Provider .....	49
Table 28 Unduplicated Inpatient and Outpatient by Age .....	51
Table 29 Unduplicated Total Count by Age .....	54



## I. EXECUTIVE SUMMARY

This annual report is prepared by the Department of Health Care Policy and Financing (the Department) pursuant to Section 25.5-3-107, C.R.S. (2022). The purpose of this annual report is to inform stakeholders and policy makers about the structure, policy, statistics, and payments related to the Colorado Indigent Care Program (CICP). The CICP is not an insurance program, but rather a financial vehicle for providers to recoup some of their costs for providing medical services to low-income Coloradans who are not eligible for Health First Colorado (Colorado's Medicaid Program) or Child Health Plan Plus (CHP+).

In FY 2021-22, the number of persons served by the CICP was 32,597. This represents a 18.3% decrease from the previous year. The CICP remains an important safety net for low-income Coloradans who are not eligible for Health First Colorado or CHP+ and who cannot afford their out-of-pocket health care costs.

In January 2020, the U.S. Department of Health and Human Services (HHS) declared a public health emergency (PHE) in response to the COVID-19 pandemic. Congress passed legislation that ensured anyone enrolled in Health First Colorado (Colorado's Medicaid program) was guaranteed to keep their health coverage during the PHE. This also applies to kids and pregnant people covered by Child Health Plan *Plus* (CHP+). There are reduced numbers throughout this year's report due to the large number of people who have avoided any non-emergency medical care since March 2020 due to the COVID-19 pandemic, as well as the increased number of individuals who continue to be covered under Health First Colorado during the PHE. The CICP saw a large drop not only in the number of clients accessing services, but also in the write off charges from providers across the state as fewer non-emergency services were sought and more Coloradans were covered under Health First Colorado. These reduced numbers do not indicate a lesser need for the CICP to continue, but rather speak to how important the program is to low-income Coloradans who, now more than ever, rely on the program to help with medical bills.

A key component of the CICP is its formal CICP Stakeholder Advisory Council (Advisory Council) as described under 10 CCR 2505-10 Section 8.905.D. The Advisory Council includes representatives of rural and urban hospitals, community health centers, safety-net clinics, consumers, and consumer advocates. The Advisory Council advises the Department on policies for the CICP and makes recommendations to improve program effectiveness. The Department continues to work with its stakeholders to preserve the CICP safety net for its clients by taking opportunities to modernize the CICP and create efficiencies.

In FY 2021-22, there were 18 CICP Clinics and 51 CICP Hospitals. In FY 2021-22, payments to CICP Hospitals were financed with hospital provider fees and federal matching funds under the federal Disproportionate Share Hospital (DSH) allotment as part of the Colorado Healthcare Affordability and Sustainability Enterprise (CHASE). For more information about the CHASE, see the 2023 Colorado Healthcare Affordability & Sustainability Enterprise Annual Report available on the Department's website at [www.colorado.gov/hcpf/department-reports](http://www.colorado.gov/hcpf/department-reports).

As a result of the passage of Senate Bill 21-212, Primary Care Payments Align Federal Funding, which directed the Department to seek federal matching funds for the Primary Care Fund monies, the General Assembly eliminated the funding line for CICP Clinics. Historically, CICP Clinic payments were about \$6M annually, with \$3M of those funds coming from the state general fund, and the other \$3M consisting of federal matching funds. The Primary Care Fund is funded with Tobacco Tax dollars and has had funds equaling about \$25M annually in recent years. The Department obtained approval



from the Centers for Medicare and Medicaid Services (CMS) to draw down the federal match for the Primary Care Fund monies, resulting in a total of about \$50M available to clinics participating in that program. All clinics who participated in CICIP in 2021-22 also participated in the Primary Care Fund in 2021-22. Payments to these clinics through the Primary Care Fund were at least equal to, but in most cases, more than the total funds that the same clinics received from both programs the previous year. The change in funding results in about \$19M more annually for the clinics participating in the Primary Care Fund and CICIP than the programs had combined previously. More information on the Primary Care Fund can be found in the Primary Care Fund section of this report and in Table 11.

Payments to CICIP Hospitals and CICIP Clinics in FY 2021-22 are shown below.

### CICIP Payments

• CICIP Disproportionate Share Hospital Payments	\$226,610,302
• Clinic Based Indigent Care	\$0
• CICIP Clinic Funding from Primary Care Fund	\$28,368,094
• <b>Total Payments</b>	<b>\$254,978,396</b>

## II. INTRODUCTION

The CICP was created in 1983 under the “Reform Act for the Provision of Health Care for the Medically Indigent” and is currently located at 25.5-3-101, C.R.S. At its peak, the CICP reimbursed participating clinics and hospitals for services provided to approximately 225,000 Coloradans in FY 2010-11.

Since it was created, the CICP has undergone updates and changes to comply with legislative directives and to adapt to changes in the health care marketplace.

Effective with FY 2017-18, the Department made changes to the CICP through the rule making process following more than 12 months of work with stakeholders. This resulted in improved administrative efficiencies while maintaining access to care for clients. Changes include enhanced programmatic flexibility by considering income only when determining CICP eligibility and allowing providers to mirror their internal charity care programs if they fit within the CICP’s guidelines, such as using an alternate sliding fee scale if it is equivalent to or lesser than the traditional CICP scale.

As part of the rule change, a formalized Advisory Council was created. The Advisory Council is comprised of 11 members representing the following groups: three consumers eligible for the program or three consumer advocates or a combination of each; a federally qualified health center (FQHC); a rural health clinic or a community health clinic licensed or certified by the Department of Public Health and Environment (DPHE); either Denver Health Medical Center or University of Colorado Hospital; an urban hospital; a rural or critical access hospital; an organization of community health centers as defined in the federal Public Health Service Act, 42 U.S.C. sec. 254(b); an organization of Colorado hospitals; and the Department. Information about current Advisory Council members and topics of discussion can be found at <https://hcpf.colorado.gov/colorado-indigent-care-program-stakeholder-advisory-council>.

Rule changes also allowed flexibility when determining financial resources for CICP applicants and their copayments. Specifically, CICP Clinics that are FQHCs may mirror the income determination process and copayment schedule in line with their federal requirements. CICP Clinics that are not FQHCs follow a similar process. Likewise, rules for the CICP Hospitals were adjusted to allow hospitals to define income determination to best fit their communities. While these rule changes allowed more flexibility, minimum guidelines were retained to ensure that the CICP remains responsive to the needs of low-income Coloradans.

Aside from the recent rule changes, it is important to point out that the implementation of the Affordable Care Act (ACA) and the expansion of Health First Colorado to adults without dependent children in January 2014 has resulted in fewer clients served by the CICP. However, while many former CICP clients are eligible for health coverage following the implementation of the ACA, not all are covered. Citizens and legal immigrants who have been in the United States less than five-years remain eligible for the CICP, so long as they are not eligible for Health First Colorado and have incomes that are at or below 250% of the federal poverty guidelines (FPG). Also, while many low-income Coloradans are eligible for a federal subsidy to purchase health care coverage, there continues to be Coloradans with income under 250% of the FPG who cannot meet their out-of-pocket expenses. Therefore, the Department continues to work with the Advisory Council to ensure the CICP remains administratively effective and efficient while still retaining the underlying safety net for low-income Coloradans.



### III. PROGRAM OVERVIEW

The Colorado General Assembly enacted the “Reform Act for the Provision of Health Care for the Medically Indigent” in 1983. This law made it possible to use State funds to partially reimburse providers for services provided to the State’s medically indigent residents. This article was amended in 2006 and now stands as the enactment of the “Colorado Indigent Care Program.” Part 1 of Article 3 in Title 25.5 is where the program’s enabling legislation resides. The following segment of the legislative declaration at Section 25.5-3-102, C.R.S. (2021) helps illustrate the program’s purpose.

The general assembly hereby determines, finds, and declares that:

(a) The state has insufficient resources to pay for all medical services for persons who are indigent and must therefore allocate available resources in a manner that will provide treatment of those conditions constituting the most serious threats to the health of such medically indigent persons, as well as increase access to primary medical care to prevent deterioration of the health conditions among medically indigent people.

The general assembly also recognizes that the program for the medically indigent is a partial solution to the health care needs of Colorado’s medically indigent citizens. Therefore, medically indigent persons accepting medical services from this program shall be subject to the limitations and requirements imposed in this article.

The CICP offers a partial solution to meet the health care needs of the State’s low-income residents. It is not a comprehensive benefits package nor is it an insurance program. Instead, it is a financial vehicle for providers to recoup some of their costs for providing medical services to low-income Coloradans who are not eligible for Health First Colorado or CHP+. The services offered under this program vary from provider to provider. By statute, providers participating in the CICP are required to prioritize care in the following order:

1. Emergency care for the full year;
2. Additional medical care for those conditions determined to be the most serious threat to the health of indigent persons; and
3. Any other medical care.

The CICP includes these requirements in its agreements with providers to ensure that low-income Coloradans have access to emergency care throughout the year.

#### A. CICP Communication

The Department uses various communication channels to engage its audiences. Specifically, it publishes electronic newsletters that deliver updates on CICP policies and other Department news to CICP providers and stakeholders. In addition, it publishes an annual CICP Provider Manual as well as fact sheets. The CICP Provider Manual details program requirements, including determining an applicant’s eligibility for CICP, and is a comprehensive program resource for providers, while the fact sheets offer CICP clients program eligibility guidelines for the CICP, Health First Colorado, and Connect for Health Colorado. The newsletters, Provider Manual, and fact sheets are available on the Department’s website at <https://hcpf.colorado.gov/cicp>.





## IV. CLIENTS

### A. Eligibility Requirements

Participating hospitals and clinics administer the CICIP client enrollment. Eligibility technicians at the CICIP provider locations assist applicants in completing the client application and determine eligibility for the program using criteria approved by the Department. To be eligible to apply for services discounted under the CICIP, an individual must be aged 18 years or older or be an emancipated minor and meet requirements for lawful presence, Colorado residency, and income. Clients must not be eligible for Health First Colorado or CHP+, and they must have income and liquid assets combined at or below 250% of the FPG. Clients can have other third-party insurance that must be billed prior to applying the CICIP copayment to medical services.

Under regulations concerning lawful presence, all new applicants and clients reapplying for CICIP aged 18 years and older must sign an affidavit indicating their citizenship status and provide acceptable documentation demonstrating that they are either a U.S. citizen or otherwise lawfully residing in the country<sup>1</sup>. Applicants who do not provide a verifiable document may apply for a “Request for Waiver-Restrictions on Public Benefits” from the Department of Revenue. Applicants without acceptable documentation who are U.S. citizens or U.S. nationals may sign a self-declaration statement to satisfy the evidence of lawful presence requirement.

To determine a client’s copayment amount, providers assign a rating to the applicant based on the applicant’s total income and assets (see Table 1). Ratings are based on a snapshot of an applicant’s financial resources as of the date of the rating. See Table 2 for copayment determinations.

Client eligibility ratings are valid for one year. However, initial ratings may change, and a re-rating may occur when:

- Family income has changed significantly;
- Number of dependents has changed;
- Calculation errors are identified;
- Information provided was not accurate; or
- The client goes to a second provider that does not accept the client’s initial rating due to the provider’s income determination process differing from the first provider.

---

<sup>1</sup> Senate Bill 21-199 eliminated the lawful presence requirement for individuals to qualify for state programs, including the CICIP, effective July 1, 2022.



**Table 1 Annual Income Ranges for Each Federal Poverty Guideline Percentage Range Effective April 1, 2021 through March 31, 2022**

Family Size	0% to 40% & Homeless	0 to 40%	41 to 62%	63 to 81%
1	\$0-\$5,152	\$0-\$5,152	\$5,153-\$7,986	\$7,987-\$10,433
2	\$0-\$6,968	\$0-\$6,968	\$6,969-\$10,800	\$10,801-\$14,110
3	\$0-\$8,784	\$0-\$8,784	\$8,785-\$13,615	\$13,616-\$17,788
4	\$0-\$10,600	\$0-\$10,600	\$10,601-\$16,430	\$16,431-\$21,465
5	\$0-\$12,416	\$0-\$12,416	\$12,417-\$19,245	\$19,246-\$25,142
6	\$0-\$14,232	\$0-\$14,232	\$14,233-\$22,060	\$22,061-\$28,820
7	\$0-\$16,048	\$0-\$16,048	\$16,049-\$24,874	\$24,875-\$32,497
8	\$0-\$17,864	\$0-\$17,864	\$17,865-\$27,689	\$27,690-\$36,175

Family Size	82 to 100%	101 to 117%	118 to 133%	134 to 159%
1	\$10,434-\$12,880	\$12,881-\$15,070	\$15,071-\$17,130	\$17,131-\$20,479
2	\$14,111-\$17,420	\$17,421-\$20,381	\$20,382-\$23,169	\$23,170-\$27,698
3	\$17,789-\$21,960	\$21,961-\$25,693	\$25,694-\$29,207	\$29,208-\$34,916
4	\$21,466-\$26,500	\$26,501-\$31,005	\$31,006-\$35,245	\$35,246-\$42,135
5	\$25,143-\$31,040	\$31,041-\$36,317	\$36,318-\$41,283	\$41,284-\$49,354
6	\$28,821-\$35,580	\$35,581-\$41,629	\$41,630-\$47,321	\$47,322-\$56,572
7	\$32,498-\$40,120	\$40,121-\$46,940	\$46,941-\$53,360	\$53,361-\$63,791
8	\$36,176-\$44,660	\$44,661-\$52,252	\$52,253-\$59,398	\$59,399-\$71,009

Family Size	160 to 185%	186 to 200%	201 to 250%
1	\$20,480-\$23,828	\$23,829-\$25,760	\$25,761-\$32,200
2	\$27,699-\$32,227	\$32,228-\$34,840	\$34,841-\$43,550
3	\$34,917-\$40,626	\$40,627-\$43,920	\$43,921-\$54,900
4	\$42,136-\$49,025	\$49,026-\$53,000	\$53,001-\$66,250
5	\$49,355-\$57,424	\$57,425-\$62,080	\$62,081-\$77,600
6	\$56,573-\$65,823	\$65,824-\$71,160	\$71,161-\$88,950
7	\$63,792-\$74,222	\$74,223-\$80,240	\$80,241-\$100,300
8	\$71,010-\$82,621	\$82,622-\$89,320	\$89,321-\$111,650



**Table 2 Client Copayment Table Effective July 1, 2021**

<b>Percent of FPG</b>	<b>0 to 40% and Homeless</b>	<b>0 to 40%</b>	<b>41 to 62%</b>	<b>63 to 81%</b>	<b>82 to 100%</b>	<b>101 to 117%</b>	<b>118 to 133%</b>	<b>134 to 159%</b>	<b>160 to 185%</b>	<b>186 to 200%</b>	<b>201 to 250%</b>
<b>Ambulatory Surgery</b>	\$0	\$15	\$65	\$105	\$155	\$220	\$300	\$390	\$535	\$600	\$630
<b>Inpatient Facility</b>	\$0	\$15	\$65	\$105	\$155	\$220	\$300	\$390	\$535	\$600	\$630
<b>Hospital Physician</b>	\$0	\$7	\$35	\$55	\$80	\$110	\$150	\$195	\$270	\$300	\$315
<b>Emergency Room</b>	\$0	\$15	\$25	\$25	\$30	\$30	\$35	\$35	\$45	\$45	\$50
<b>Emergency Transportation</b>	\$0	\$15	\$25	\$25	\$30	\$30	\$35	\$35	\$45	\$45	\$50
<b>Outpatient Hospital Services</b>	\$0	\$7	\$15	\$15	\$20	\$20	\$25	\$25	\$35	\$35	\$40
<b>Clinic Services</b>	\$0	\$7	\$15	\$15	\$20	\$20	\$25	\$25	\$35	\$35	\$40
<b>Specialty Outpatient</b>	\$0	\$15	\$25	\$25	\$30	\$30	\$35	\$35	\$45	\$45	\$50
<b>Prescription</b>	\$0	\$5	\$10	\$10	\$15	\$15	\$20	\$20	\$30	\$30	\$35
<b>Laboratory</b>	\$0	\$5	\$10	\$10	\$15	\$15	\$20	\$20	\$30	\$30	\$35
<b>Basic Radiology and Imaging</b>	\$0	\$5	\$10	\$10	\$15	\$15	\$20	\$20	\$30	\$30	\$35
<b>High-Level Radiology and Imaging</b>	\$0	\$30	\$90	\$130	\$185	\$250	\$335	\$425	\$580	\$645	\$680

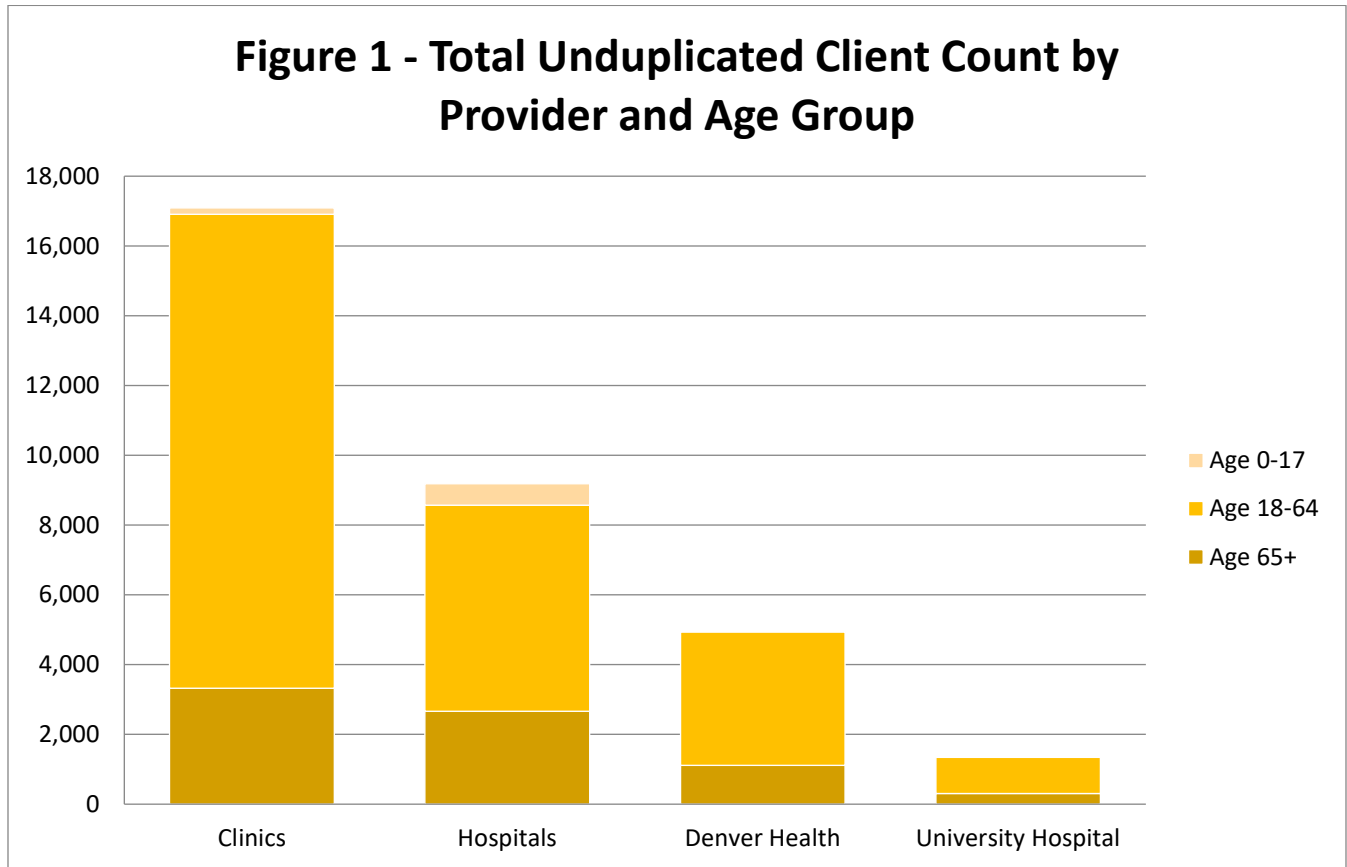
The CICIP client must pay the copayment listed, the copayment stipulated by their third-party insurance, or the actual charges, whichever is lower. Clients are notified of their copayment obligation at or before the time that services are rendered. For all clients with an FPG at or above 41% the annual copayments for CICIP cannot exceed 10% of the family’s income. Annual copayments for clients with an FPG rating of 0 to 40% cannot exceed the lesser of 10% of the family’s income or \$120. Clients with an FPG of 0% to 40% and who are homeless are exempt from a CICIP copayment.



## B. Clients Served

During FY 2021-22, there were 32,597 unduplicated clients who received services through the CICIP. This represents a 18.3% decrease from the 39,872 unduplicated clients assisted in FY 2020-21. Children represented 2.6% of the total unique population receiving services. The total unduplicated count of children receiving care under the CICIP decreased by 13.9% in FY 2021-22 relative to the FY 2020-21 total. Overall, the program provided 1,411 unduplicated clients with inpatient care, while 32,090 received outpatient services in FY 2021-22.<sup>2</sup>

**Figure 1 Total Unduplicated Client Count by Provider and Age Group**



As shown in Table 3, the number of inpatient days decreased from 12,900 in FY 2020-21 to 8,888 in FY 2021-22, representing a decrease of 31.1%. Overall, the total number of inpatient days has decreased by 54.5% since FY 2019-20. Relative to FY 2020-21, Denver Health Medical Center had a decrease in inpatient days in FY 2021-22 of 38.5%, while University of Colorado Hospital had a decrease of 48.9%.

<sup>2</sup> This count is done at the provider level, a client who receives care at multiple CICIP providers is counted multiple times in this figure. These conditions create an unduplicated count that overstates the number of actual clients receiving care under the CICIP.

**Table 3 Comparison of Inpatient Days<sup>3</sup>**

CICP Provider	FY 2019-18 Inpatient Days	Percent Change	FY 2020-21 Inpatient Days	Percent Change	FY 2021-22 Inpatient Days	Percent Change
CICP Hospitals <sup>4</sup>	11,878	-3.1%	8,082	-32.0%	6,231	-22.9%
Denver Health Medical Center	3,514	2.7%	1,879	-46.5%	1,156	-38.5%
University of Colorado Hospital	4,125	2.4%	2,939	-28.8%	1,501	-48.9%
<b>TOTAL</b>	<b>19,517</b>	<b>-1.0%</b>	<b>12,900</b>	<b>-33.9%</b>	<b>8,888</b>	<b>-31.1%</b>

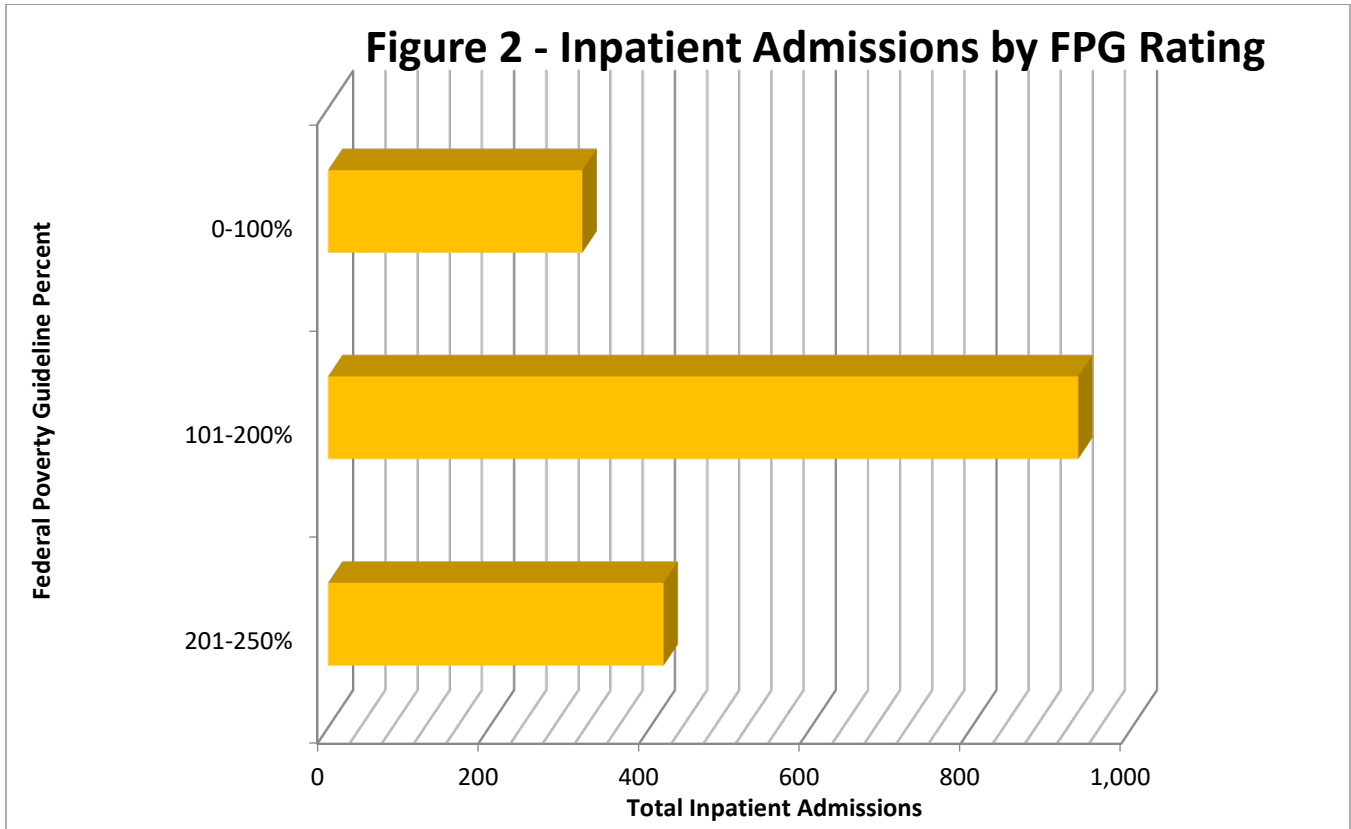
Figure 2 shows the total inpatient admissions by CICP Rating and FPG percentage for FY 2021-22. Of the total inpatient admissions, 18.8% were made for individuals living at or below 100% FPG (former ratings Z, N, A, B, and C), similar to the 20.1% figure seen in FY 2020-21. FPG Ratings between 101% and 200% (former ratings D, E, F, G, and H) accounted for 55.5% of inpatient admissions, while FPG Ratings between 201% and 250% (former rating I) accounted for 24.8% of inpatient admissions.

**Figure 2 Inpatient Admissions by CICP Rating**

<sup>3</sup> Source: Analysis of Data from Previous CICP Annual Reports

<sup>4</sup> Includes CICP Specialty Hospital Providers





As shown in Table 4, there was a 15.1% decrease in total outpatient visits from FY 2020-21 to FY 2021-22. CICIP Clinics experienced a 20.5% decrease in outpatient visits. CICIP Hospitals experienced a 15.5% decrease in outpatient visits while Denver Health Medical Center experienced a 14.7% increase and University of Colorado Hospital experienced a 60.4% decrease.

**Table 4 Comparison of Outpatient Visits<sup>5</sup>**

CICP Provider	FY 2019-20 Outpatient Visits	Percent Change	FY 2020-21 Outpatient Visits	Percent Change	FY 2021-22 Outpatient Visits	Percent Change
CICP Clinics	82,307	-5.6%	72,638	-11.7%	57,735	-20.5%
CICP Hospitals <sup>6</sup>	43,717	14.5%	28,989	-33.7%	24,493	-15.5%
Denver Health Medical Center	38,713	4.8%	24,666	-36.3%	28,304	14.7%
University of Colorado Hospital	11,002	-9.1%	7,351	-33.2%	2,913	-60.4%
<b>TOTAL</b>	<b>175,739</b>	<b>0.7%</b>	<b>133,644</b>	<b>-24.0%</b>	<b>113,445</b>	<b>-15.1%</b>

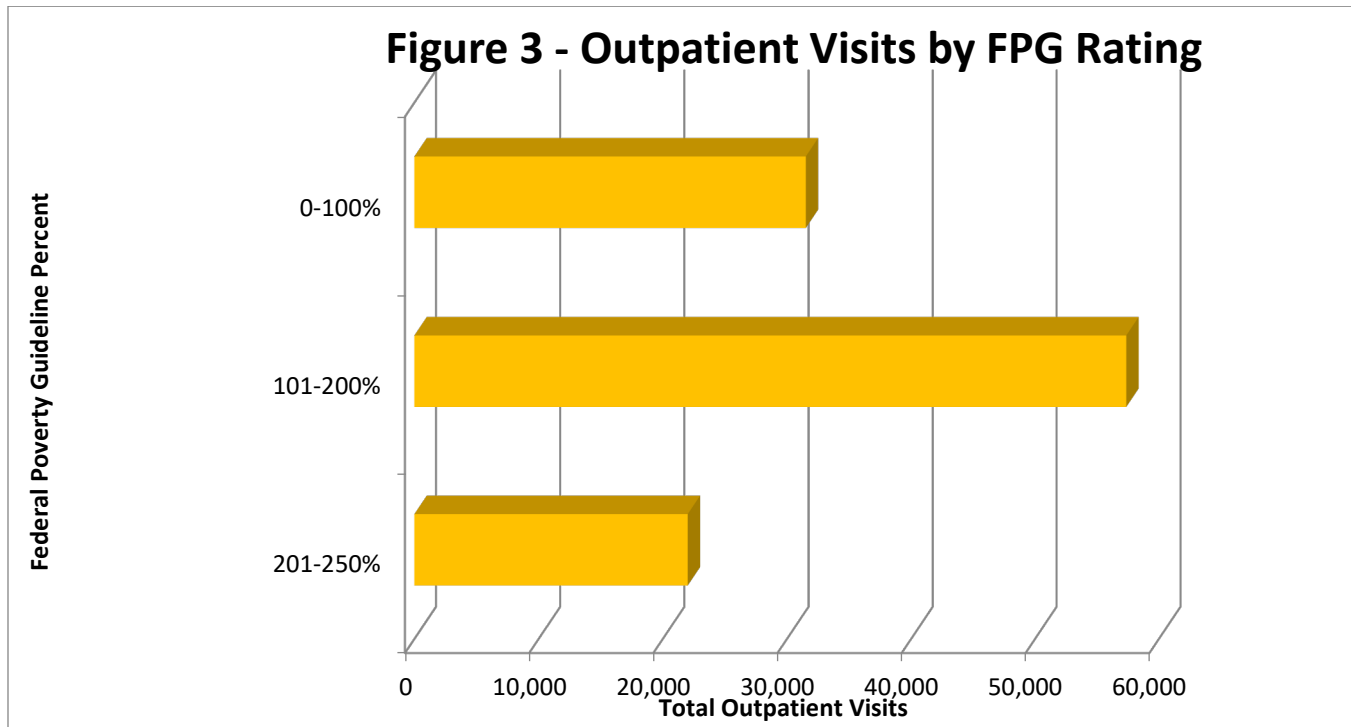
In FY 2021-22, the total number of outpatient visits for CICP clients fell by 15.1%, decreasing from 133,644 in FY 2020-21 to 113,445 in FY 2021-22. Clients with an FPG rating between 0 and 100% made

<sup>5</sup> Source: Analysis of Data from Previous CICP Annual Reports

<sup>6</sup> Includes CICP Specialty Hospital Providers

up 27.8% of the total visits, with clients falling between 101% and 200% making up 50.6% of the total visits, and clients falling between 201% and 250% making up 19.4% of the total visits.

**Figure 3 Outpatient Visits by CICP Rating**



## V. PROVIDERS

### A. Provider Eligibility Requirements

The CICP allows participation from any interested provider that meets the following criteria:

1. Licensed or certified as a general hospital, community health clinic, or maternity hospital (birth center) by the Department of Public Health and Environment (DPHE); or  
 A federally qualified health center, as defined in section 1861 (aa) (4) of the federal “Social Security Act”, 42 U.S.C sec. 1395x (aa) (4); or  
 A rural health clinic, as defined in section 1861 (aa) (2) of the federal “Social Security Act”, 42 U.S.C sec. 1395x (aa) (2).
2. Assure that emergency care is available to all CICP clients throughout the contract year.
3. If the provider is a hospital, the hospital must have at least two obstetricians with staff privileges at the hospital who agree to provide obstetric services to individuals entitled to such services as Health First Colorado members. In the case where a hospital is located in a rural area, the term “obstetrician” includes any physician with staff privileges at the hospital to perform non-emergency obstetric procedures. This obstetrics requirement does not apply to a hospital in which the patients are predominantly under 18 years of age or which does not offer non-emergency obstetric services as of December 21, 1987.

For the purposes of this FY 2021-22 Annual Report, CICP providers are identified in the following categories by funding appropriation:

- CICIP Clinics - clinics located throughout the state.
- CICIP Hospitals - hospitals located throughout the state.
- CICIP Specialty Hospitals - this includes Children’s Hospital Colorado and National Jewish Health. Specialty providers must either offer unique services or serve a unique population. Additionally, at least 50% of the medical care rendered through the CICIP must be provided to individuals who reside outside the City and County of Denver.
- Denver Health Medical Center - Denver Health Medical Center, including neighborhood outpatient clinics.
- University of Colorado Hospital - University of Colorado Hospital and associated specialty clinics.

## **B. Provider Participation**

A total of 69 providers, 51 hospitals and 18 clinics, participated in the CICIP in FY 2021-22. Most of the participating CICIP Clinics and several of the CICIP Hospitals have multiple sites. Any site other than the main facility is considered a satellite facility. There were 197 satellite CICIP facilities throughout the state for FY 2021-22.





**Table 5 FY 2021-22 CICP Clinics and Hospitals Including Satellite Facilities by County**

County	Clinics	Hospitals	Totals
Adams	7	4	11
Alamosa	8	1	9
Arapahoe	8	0	8
Archuleta	0	0	0
Baca	0	1	1
Bent	2	0	2
Boulder	4	3	7
Broomfield	1	0	1
Chaffee	2	2	4
Cheyenne	0	0	0
Clear Creek	0	0	0
Conejos	3	1	4
Costilla	0	0	0
Crowley	0	0	0
Custer	0	0	0
Delta	1	1	2
Denver	19	2	21
Dolores	0	0	0
Douglas	6	1	7
Eagle	6	0	6
El Paso	26	4	30
Elbert	1	0	1
Fremont	3	1	4
Garfield	4	2	6
Gilpin	0	0	0
Grand	5	1	6
Gunnison	5	1	6
Hinsdale	0	0	0
Huerfano	0	1	1
Jackson	1	0	1
Jefferson	10	0	10
Kiowa	0	0	0

County	Clinics	Hospitals	Totals
Kit Carson	1	0	1
La Plata	0	1	1
Lake	0	0	0
Larimer	7	5	12
Las Animas	2	1	3
Lincoln	2	1	3
Logan	1	1	2
Mesa	10	3	13
Mineral	1	0	1
Moffat	1	1	2
Montezuma	6	1	7
Montrose	7	1	8
Morgan	1	2	3
Otero	2	1	3
Ouray	0	0	0
Park	0	0	0
Phillips	1	1	2
Pitkin	1	1	2
Prowers	7	1	8
Pueblo	12	1	13
Rio Blanco	0	0	0
Rio Grande	6	1	7
Routt	1	1	2
Saguache	3	0	3
San Juan	0	0	0
San Miguel	1	0	1
Sedgwick	1	1	2
Summit	0	0	0
Teller	1	1	2
Washington	0	0	0
Weld	13	2	15
Yuma	1	1	2
<b>Totals</b>	<b>211</b>	<b>55</b>	<b>266</b>



Table 6 lists CICP providers by the city in which the main participating provider is located. A list of all current CICP providers, including satellite facilities and the services they offer, can be found on the Department’s website.

**Table 6 FY 2021-22 CICP Participating Providers**

CICP Hospital Providers	City
Arkansas Valley Regional Medical Center	La Junta
Aspen Valley Hospital District	Aspen
Banner Fort Collins Medical Center	Fort Collins
Boulder Community Health	Boulder
Centura Health - Penrose-St. Francis Health Services	Colorado Springs
Centura Health - St. Thomas More Hospital	Canon City
Colorado Canyons Hospital and Medical Center	Fruita
Colorado Plains Medical Center	Fort Morgan
Community Hospital	Grand Junction
Delta County Memorial Hospital	Delta
East Morgan County Hospital	Brush
Estes Park Health	Estes Park
Grand River Hospital and Medical Center	Rifle
Gunnison Valley Hospital	Gunnison
Heart of the Rockies Regional Medical Center	Salida
Lincoln Health	Hugo
Longmont United Hospital	Longmont
McKee Medical Center	Loveland
Melissa Memorial Hospital	Holyoke
Memorial Regional Health	Craig
Mercy Regional Medical Center	Durango
Middle Park Medical Center, Kremmling	Kremmling
Montrose Memorial Hospital	Montrose
Mt San Rafael Hospital	Trinidad
North Colorado Medical Center	Greeley

CICP Hospital Providers	City
Parkview Medical Center	Pueblo
Platte Valley Medical Center	Brighton
Prowers Medical Center	Lamar
Rio Grande Hospital	Del Norte
San Luis Valley Health Conejos County Hospital	La Jara
San Luis Valley Regional Medical Center	Alamosa
Sedgwick County Memorial Hospital	Julesburg
Southeast Colorado Hospital District	Springfield
Southwest Memorial Hospital	Cortez
Spanish Peaks Regional Health Center	Walsenburg
St. Mary's Hospital and Medical Center, Inc.	Grand Junction
Sterling Regional Medical Center	Sterling
UCHealth Greeley Hospital	Greeley
UCHealth Highlands Ranch Hospital	Highlands Ranch
UCHealth Longs Peak Hospital	Longmont
UCHealth Medical Center of the Rockies	Loveland
UCHealth Memorial Hospital	Colorado Springs
UCHealth Pikes Peak Regional Hospital	Woodland Park
UCHealth Poudre Valley Hospital	Fort Collins
UCHealth Yampa Valley Medical Center	Steamboat Springs
Valley View Hospital	Glenwood Springs
Wray Community Hospital District	Wray



**Table 6 FY 2021-22 CICP Participating Providers Continued**

CICP Specialty Hospital Providers	City
Children's Hospital Colorado	Aurora
Denver Health Medical Center	Denver
National Jewish Hospital	Denver
University of Colorado Hospital	Aurora

CICP Clinic Providers	City
Basin Clinic, Inc	Naturita
Clinica Family Health	Lafayette
Denver Indian Health & Family Services, Inc	Denver
High Plains Community Health Center, Inc	Lamar
Inner City Health Center	Denver
MarillacHealth	Grand Junction
Mountain Family Health Centers	Glenwood Springs
Northwest Colorado Health	Steamboat Springs
Peak Vista Community Health Centers	Colorado Springs
Pueblo Community Health Center	Pueblo
River Valley Family Health Centers	Olathe
Salud Family Health, Inc.	Fort Lupton
Stout Street Health Center	Denver
STRIDE Community Health Center	Denver
Sunrise Community Health Center	Evans
Tepeyac Community Health Center	Denver
Uncompahgre Medical Center	Norwood
Valley-Wide Health Systems	Alamosa



## VI. PROGRAM ADMINISTRATION

### A. Reporting Requirements

To meet its fiduciary responsibility, the Department requires CICIP providers to submit an annual report to the Special Financing Division [hcpf\\_cicpcorrespondence@state.co.us](mailto:hcpf_cicpcorrespondence@state.co.us).

This annual report has four parts (Summary Data, Physician, Pharmacy, and Ambulance). In accordance with the CICIP Provider Manual, the Clinic's annual data is due with the Provider Application in May. The Hospital's data is due with the annual data aggregation in June.

### B. CICIP Provider Compliance Audit

In accordance with the CICIP Provider Manual, the Department requires CICIP providers to submit a provider compliance audit statement along with a Corrective Action Plan (CAP), when required.

The Department contracted with the accounting firm Public Consulting Group, Inc (PCG) to conduct comprehensive reviews of providers receiving funding from the CICIP. Going forward, the Department's auditor will audit approximately one third of the participating providers during each contract year and test compliance with both eligibility and billing criteria based on programmatic requirements. As such, providers will be audited by the Department's auditor approximately once every three years instead of completing an audit annually.

During FY 2021-22, PCG audited the remaining facilities who had not yet been audited by PCG, which consisted of 24 hospital providers, on applications completed during FY 2020-21 and billing claims during calendar year 2020. Twenty-three of the 24 providers that were audited required a Corrective Action Plan (CAP). The Department follows up on Providers that were required to file a CAP as a result of their audit. After the Department approves their CAPs, the Provider is required to enforce these changes within 60 days. Based on their corrective plans, the Department is asking for examples of procedures and/or policy changes that have been put in place to ensure these errors will not occur in future audits. PCG audits found the most errors in the Billing Record Review, Calculation of Copayment, and Federal Poverty Limit Determination areas. The two specific elements that had the highest percentage of errors were calculating the CICIP rating correctly and using the correct version of the CICIP Client Application.

### C. Prevention of Fraud by Applicants

At the time of application, each CICIP applicant is notified of their rights prior to completing and signing the CICIP client application. The CICIP client application requires that the applicant attest to the accuracy of the personal and financial information presented to the provider and affirm his or her understanding that false statements could result in prosecution by local authorities.

The CICIP client application also includes a penalty clause, confirmation statement, and authorization for release of information. Part of the statement reads, "I authorize the Provider to use any information contained in the application to verify my eligibility for this program and to obtain records pertaining to eligibility from a financial institution as defined in Section 15-15-201(4), C.R.S., or from any insurance company." The applicant is required to sign this statement. Any applicant reporting false information on a CICIP application should be reported to the local county District Attorney's office or to the local police by the provider.



## **D. Collection of Third-Party Payments**

The CICP guidelines require providers to collect all available payments from third-party resources. Providers are required to seek third-party reimbursement before the account is charged to the CICP.

## **E. Incentives for Utilization Control**

Incentives for efficient utilization of resources are built into the CICP by the very nature of the reimbursement level since providers are contracted to prioritize their services of emergency and urgent care to CICP clients. Many CICP Hospitals have limited services and provide only emergency and urgent care.



## VII. REIMBURSEMENT

### A. Reimbursement for Clinics and Hospitals

In the FY 2021-22 Long Bill, appropriations included the following line items:

Department of Health Care Policy and Financing

Section Five, Indigent Care Program

➤ Safety Net Provider Payments

In the FY 2021-22 Long Bill (Senate Bill 21-205), the Colorado General Assembly appropriated \$257,909,481 through the Safety Net Provider Payments line item to reimburse CICIP Hospitals and other hospital providers for uncompensated care. The SFY 2021-22 appropriation was reduced to \$227,071,084 after House Bill 22-1173, the Department's State Fiscal Year 2021-22 supplemental appropriation bill, was passed. This appropriation is funded through hospital provider fees and matching federal funds. The DSH and Uncompensated Care supplemental payments are made from this line item. For more information on payments to hospitals funded through hospital provider fees, including DSH and Uncompensated Care Payments by hospital, see the 2023 Colorado Healthcare Affordability and Sustainability Enterprise Annual Report available on the Department's website at <https://hcpf.colorado.gov/publications>.

The appropriation allocated to Clinic Based Indigent Care was eliminated by the adoption of Senate Bill 21-212. However, payments were made to all current CICIP Clinics for their dual participation in the Primary Care Fund in 2021-22. The payments from the Primary Care Fund to these clinics were at least equal to, but in most cases more than, the amount the same clinics received from both the CICIP and Primary Care Fund in 2020-21. In total, the amount distributed to the Primary Care Fund clinics in 2021-22 was approximately \$19 million more than the total funds between the two programs in 2020-21.

The State share for the federal match is General Fund matched with federal funds under upper payment limit (UPL) financing.

**Table 7 FY 2021-22 CICP Payments**

	State Funds <sup>7</sup>	Provider Fees <sup>8</sup>	Federal Funds	Payments to Providers <sup>9</sup>
CICP Clinics <sup>10</sup>	\$0	\$0	\$0	\$0
CICP Hospitals and Specialty Hospitals	\$0	\$69,272,148	\$69,272,148	\$138,544,296
Denver Health Medical Center	\$0	\$24,738,426	\$24,738,425	\$49,476,851
University of Colorado Hospital	\$0	\$19,294,577	\$19,294,578	\$38,589,155
<b>Total CICP Payments</b>	<b>\$0</b>	<b>\$113,305,151</b>	<b>\$113,305,151</b>	<b>\$226,610,302</b>

**Table 8 Historical CICP Write-Off Costs<sup>11</sup>**

	FY 2019-20	FY 2020-21	FY 2021-22
CICP Clinics	\$16,339,151	\$12,136,705	\$10,709,602
Percent Change	2.1%	-25.7%	-11.8%
CICP Hospitals	\$76,857,223	\$51,979,347	\$41,480,278
Percent Change	4.4%	-32.4%	-20.2%
Denver Health Medical Center	\$32,317,285	\$21,421,072	\$17,714,976
Percent Change	24.3%	-33.7%	-17.3%
University of Colorado Hospital	\$29,611,255	\$20,157,032	\$10,273,867
Percent Change	7.3%	-32.6%	-49.0%
<b>All CICP Hospitals</b>	<b>\$138,785,763</b>	<b>\$93,557,451</b>	<b>\$69,469,121</b>
Percent Change	9.1%	-32.6%	-25.7%
<b>Total CICP Providers</b>	<b>\$155,124,914</b>	<b>\$105,694,156</b>	<b>\$80,178,723</b>
Percent Change	8.3%	-31.9%	-24.1%

<sup>7</sup> State Funds include State General Fund appropriations

<sup>8</sup> This amount represents the portion of the entire payment received by the provider that is comprised of fees. It does not represent the amount of fees paid by the provider

<sup>9</sup> Payments to Providers represents the actual cash payment and is the sum of State Funds, Provider Fees, and Federal Funds. Clinic payments are stated on a Fiscal Year and hospital provider fees and payments are stated on a Federal Fiscal Year

<sup>10</sup> Funding for the CICP Clinics was eliminated beginning with program year 2021-22 by the General Assembly as a result of Senate Bill 21-212 Primary Care Payments Align Federal Funding.

<sup>11</sup> Source: Analysis of Data from Previous CICP Annual Reports



## B. Reimbursement Methodology for Hospitals

The Colorado Healthcare Affordability and Sustainability Enterprise (CHASE) charges a healthcare affordability and sustainability fee on hospitals which is matched with federal funds. The total funds collected are used to increase hospital reimbursement for services provided to Health First Colorado and CICIP clients, fund hospital quality incentive payments, and finance health coverage expansion in the Health First Colorado and CHP+ programs.

Hospital payments financed with fees are reported on a federal fiscal year (FFY) basis. CHASE hospital payments for FFY 2021-22 totaled more than \$1.60 billion, including \$226 million in DSH payments for CICIP Hospitals.

More information about the CHASE hospital payments, including DSH payments by hospital, are reported in the Colorado Healthcare Affordability and Sustainability Enterprise Annual Report, available on the Department’s website at <https://hcpf.colorado.gov/publications>.

## C. Reimbursement Methodology for Clinics

### Clinic Payments

➤ Clinic Based Indigent Care	\$0
➤ CICIP Clinic Funding from Primary Care Fund	\$28,368,094

## D. Children’s Hospital Colorado Clinic Payment

An agreement was reached with Children’s Hospital Colorado and the Department such that the hospital would administer the Primary Care Fund payments to the clinics. Of the \$42,444,192 paid to Children’s Hospital Colorado, \$42,324,192 was paid to the Primary Care Fund clinics as payment for patients served under the Primary Care Fund. The remaining amount was retained by Children’s Hospital Colorado to administer the payments to the CICIP Clinics.

As mentioned previously in this report, the Clinic Based Indigent Care line was eliminated by the General Assembly with the adoption of Senate Bill 21-212, which directed the Department to seek federal matching funds for the Primary Care Fund. All CICIP Clinics also participated in the Primary Care Fund for FY 2021-22, and the funding through that program with the new federal match resulted in all CICIP Clinics receiving at least as much, but in most cases higher, total funds that they received from both programs the previous program year. Tables 9 and 10 reflect the change in funding through CICIP for the clinics.

Displayed in Table 9 are reimbursement and total write-off costs for Clinic Providers in FY 2021-22.

**Table 9 FY 2021-22 Percentage of Write-Off Cost Reimbursed<sup>12</sup>**

	Payment	Write-Off Costs	Percent Reimbursed
CICIP Clinic Providers	\$0	\$10,709,602	0%

Table 10 shows the average reimbursement as a percentage of costs for CICIP Clinic Providers over the past six fiscal years. The Department believes the higher reimbursement percentage for 2020-21 can be fully attributed to the fewer number of patients seeking routine care during the COVID-19

<sup>12</sup> Source: Table 7, Financial Tables



pandemic. As seen in previous tables, the outpatient visits were all sharply reduced compared to previous years and the total number of CICIP clients served also decreased.

**Table 10 Historical Percentage of Write-Off Cost Reimbursed<sup>13</sup>**

	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21	FY 2021-22
CICIP Clinic Providers	51.92%	46.62%	37.52%	36.6%	49.27%	0%

Write-off costs for all CICIP providers have decreased 86.2% from FY 2012-13 to FY 2021-22, with write-off costs for CICIP Hospitals decreasing 85.3% and write-off costs for CICIP Clinics decreasing 75.4% from FY 2012-13 levels. Write-off costs for the two largest CICIP Hospital providers have decreased significantly since 2012-13, with a decrease of 87.7% for Denver Health Medical Center and a decrease of 90.6% for University of Colorado Hospital. The decrease in write-off costs, as is the case with caseload and other statistics, can be largely attributed to the implementation of the Medicaid expansion pursuant to SB 13-200 and the ACA in January 2014, with more recent decreases attributable to the COVID-19 pandemic.

<sup>13</sup> Source: Analysis of CICIP Annual Reports



## VIII. PRIMARY CARE FUND

In accordance with Section 21 of Article X (Tobacco Taxes for Health-Related Purposes) of the State Constitution, an increase in Colorado's tax on cigarettes and tobacco products became effective January 1, 2005 and created a cash fund that was designated for health-related purposes. HB 05-1262 divided the tobacco tax cash fund into separate funds, assigning 19% of the moneys to establish the Primary Care Fund.

The Primary Care Fund provides an allocation of moneys to health care providers that make basic health care services available in an outpatient setting to residents of Colorado who are considered medically indigent. Awards are allocated based on the number of medically indigent patients who received services from a provider in an amount proportionate to the total number of medically indigent patients served by all health care providers who qualify for an award from this fund. Primary Care Fund providers are required to submit with their application the tiered co-payment sliding fee schedule they use for determining the level of patient financial participation and that guarantees the patient financial participation is below usual and customary charges.

To be a qualified provider, an entity must:

- Accept all patients regardless of their ability to pay, using either a meaningful sliding fee schedule or providing services to the patient at no charge;
- Serve a population that lacks adequate health care services;
- Provide cost-effective care;
- Provide comprehensive primary care for all ages;
- Screen and report eligibility for Health First Colorado, CHP+, and CICP; and,
- Be a federally qualified health center per Section 330 of the federal Public Health Services Act or have a patient base that is at least 50% uninsured, medically indigent, a participant in the CHP+, a participant in Health First Colorado, or any combination thereof.

Senate Bill 21-212, Primary Care Payments Align Federal Funding, was passed during the 2021 legislative session and directed the Department to seek federal matching funds for the Primary Care Fund monies. As a result, the General Assembly eliminated the funding line for CICP Clinics. The Primary Care Fund is funded with Tobacco Tax dollars and has had funds equaling about \$25 million annually in recent years. The Department obtained approval from CMS to draw down the federal match for the Primary Care Fund monies, resulting in a total of about \$50 million in total funds.

The change in funding results in about \$19 million more annually for the clinics participating in the Primary Care Fund and CICP than the programs had combined previously. In FY 2021-22, \$51,527,974 was allocated to 36 Primary Care Fund providers. These providers served 115,011 unique medically indigent clients in the 2020 calendar year.

The Department began auditing the information provided on applications for funding through the Primary Care Fund for accuracy and validity following the General Assembly's appropriation of funds for this purpose beginning in FY 2015-16. Approximately one-third of all Primary Care Fund providers are audited each year. The results from the data validation process have improved the transparency and efficiency of the Primary Care Fund Grant. The role of the contracted auditor is to:

- Verify the number of unique medically indigent clients reported on the application;
- Verify correct copayments were charged;
- Report draft findings after they complete each provider audit; and
- Prepare a final report for the Department.



**Table 11 FY 2021-22 Primary Care Fund Payments**

Primary Care Fund Provider	Total Payments
Axis Health System	\$232,326
Basin Clinic, Inc.	\$48,982
Carin' Clinic	\$32,355
Caritas Clinic at Saint Joseph Hospital	\$510,487
Clinica Colorado	\$1,232,629
Clinica Family Health	\$5,274,287
Denver Health and Hospital Authority	\$8,965,884
Denver Indian Health & Family Services, Inc.	\$175,255
Doctors Care	\$66,507
Every Child Pediatrics	\$620,134
Family Medicine Clinic for Health Equity (FMC-CAHEP)	\$513,633
Fort Collins Family Medicine Residency Program	\$101,939
High Plains Community Health Center, Inc.	\$584,634
Hopelight Medical Clinic	\$344,219
Inner City Health Center	\$756,294
Kids First Health Care	\$166,268
MarillacHealth	\$597,776
Mission Medical Center	\$82,076
Mountain Family Health Centers	\$983,227
Northwest Colorado Health	\$281,757
Open Bible Medical Clinic	\$35,822
Peak Vista Community Health Centers	\$7,556,651
Pueblo Community Health Center	\$931,100
River Valley Family Health Center	\$963,455
Saint Joseph Hospital Sr Joanna Bruner Family Medicine Center	\$745,959
Salud Family Health, Inc.	\$5,106,222
SET Family Medical Clinics	\$89,875
Sheridan Health Services	\$469,145
Stout Street Health Center	\$1,310,371
STRIDE Community Health Center	\$5,031,177
Summit Community Care Clinic	\$767,978
Sunrise Community Health Center	\$4,110,412
Tepeyac Community Health Center	\$618,786
The PIC Place	\$171,660
Uncompahgre Medical Center	\$160,426
Valley-Wide Health Systems	\$1,888,264
<b>Total Providers</b>	<b>\$51,527,974</b>



## IX. FEDERAL MATCH RATES

Payments for medical services covered under Title XIX of the Social Security Act (the Medicaid Program) are matched with federal funds at the state's Federal Medical Assistance Percentage (FMAP) rate. The FMAP rate is the percentage of the total payments that consists of federal funds. For example, if the FMAP is 50%, then for every qualified payment of \$100, \$50 is sourced from federal funds while the remaining \$50 is sourced from General Fund or other state dollars. The FMAP rate is used to determine the federal share of most Medicaid expenditures, but exceptions to the regular FMAP rate have been made for certain states, situations, populations, providers, and services. The FMAP is based on the state's median income level relative to the national average, therefore states with a larger proportion of their population at low-income levels will receive a higher federal match than states with a smaller proportion of low-income individuals. The FMAP rate varies from state to state but is never less than 50%.

Exceptions to the standard FMAP include categories of service that have historically been federally matched at a higher percentage. Breast and Cervical Cancer Program (BCCP) services receive a 65% enhanced FMAP; Family Planning Services receive a 90% FMAP; and Indian Health Services receive a 100% FMAP. Additionally, the Patient Protection and Affordable Care Act (ACA) stipulates that Medicaid expansion populations receive a higher match rate than traditional Medicaid populations. Expansion populations with qualifying income up to 133% of the federal poverty guidelines (FPG) received a 90% FMAP in 2020 and beyond.

For DSH payments, the federal government matches state payments using the FMAP, but the total DSH payments in a state are subject to an annual allotment or cap.

From October 1, 2018 to December 31, 2019, Health First Colorado was assigned the minimum FMAP rate of 50%. Federal funds were specified to offset the state's General Fund and not directed to increase or decrease provider payments when the FMAP changes.

The FMAP rate for the period January 1, 2020 to September 30, 2022 is 56.2%, which includes a temporary 6.2% increase because of the declaration of a public health emergency declared by the Secretary of Health and Human Services (HHS) related to the COVID-19 pandemic. The 6.2% temporary increase will be effective until the last day of the calendar quarter in which HHS declares the termination of the emergency. - H.R.6201, Families First Coronavirus Response Act (FFCRA) (Pub. L. 116-127), Section 6008.



The FMAP rates for Colorado from FFY 2012-13 through FFY 2021-22 are listed in Table 12.

**Table 12 Colorado's Federal Match Rates**

Federal Fiscal Year (October - September)	Match Rate
2012-13	50.00%
2013-14	50.00%
2014-15	51.01%
2015-16	50.72%
2016-17	50.02%
2017-18	50.00%
2018-19	50.00%
2019-20 (Oct. 1, 2019 - Dec. 31, 2019)	50.00%
2019-20 (Jan. 1, 2020 - Sept. 30, 2020)	56.20%
2020-21	56.20%
2021-22	56.20%



## **X. DISPROPORTIONATE SHARE HOSPITAL (DSH) PAYMENT**

### **A. Law and Regulations**

In 1987, Congress amended Title XIX of the Social Security Act (the Medicaid Program), requiring states to make enhanced payments for those safety-net hospitals which provide services to a disproportionate share of Medicaid and low-income patients. DSH payments are intended to offset the uncompensated costs of providing services to uninsured and underinsured patients. The payments assist in securing hospitals' financial viability and preserving access to care for Health First Colorado and uninsured patients, while reducing a shift in costs to private payers. In subsequent legislation, Congress gave states a great deal of flexibility in the design and implementation of their DSH plans.

As states exercised this flexibility to finance the state share of the Medicaid Program, the federal government became alarmed at the corresponding impact on the federal budget. Regulations were put into effect to limit states' discretion in using provider taxes and contributions for this purpose. These regulations placed caps on the amount of DSH payments states can utilize. Since January 1991, Health First Colorado has developed and implemented several measures using DSH payments to finance Health First Colorado program expansions and to cover the escalating costs of ongoing Health First Colorado programs and costs associated with the CICP. Today, DSH payments to CICP Hospitals are financed with the healthcare affordability and sustainability fee and federal matching funds under CHASE.

### **B. Payment Allotment**

Federal law establishes an annual DSH allotment for each state that limits Federal Financial Participation (FFP) for total statewide DSH payments made to hospitals. Federal law also limits FFP for DSH payments through the hospital-specific DSH limit. Under the hospital-specific DSH limit, FFP is not available for DSH payments that are more than the hospital's eligible uncompensated care cost, which is the cost of providing inpatient hospital and outpatient hospital services to Health First Colorado and uninsured patients, minus payments received by the hospital from or on behalf of those patients.

Based on the assumption of declining uninsured and uncompensated care, the ACA prescribed aggregate reductions to the DSH payments beginning in FFY 2013-14 and scheduled through FFY 2019-20. However, several pieces of legislation enacted since 2010 altered the ACA's Medicaid reduction schedule. Most recently, the Consolidated Appropriations Acts for 2021 signed into law on December 27, 2020, delays the aggregate reductions to FFY 2024 and will last through FFY 2027.

### **C. DSH Audit**

Each year, the Department submits an independent audit of DSH Payments (DSH Audit) to the Centers for Medicare and Medicaid Services (CMS) as directed by Title 42 of the Code of Federal Regulations (CFR), Section 447 (Payments for Services, Reporting Requirements) and 42 CFR Section 455 (Subpart D—Independent Certified Audit of State Disproportionate Share Hospital Payment Adjustments). Beginning with the audits for FY 2010-11, those hospitals that exceed their hospital-specific DSH limit must redistribute the overage to those hospitals under their hospital-specific DSH limit as prescribed by the Medicaid State Plan. The most recent DSH Audit was submitted in December 2022 for DSH payments made in FY 2018-19.

More information, including states' Annual DSH Reports, is available on CMS' website at <https://www.medicaid.gov/medicaid/financial-management/medicaid-disproportionate-share-hospital-dsh-payments/index.html>.



**Table 13 Colorado DSH Allotment**

Federal Fiscal Year	Disproportionate Share Hospital Allotments (Federal Funds)
2012-13	\$97,190,657
2013-14	\$98,745,708
2014-15	\$100,325,639
2015-16	\$100,626,616
2016-17	\$101,532,256
2017-18	\$103,969,030
2018-19	\$106,152,379
2019-20	\$108,169,274
2020-21	\$109,791,813
2021-22	\$113,305,151

**Table 14 FFY 2021-22 DSH Payments**

Provider Name	Payment Amount
Aspen Valley Hospital District	\$285,546
Banner Fort Collins Medical Center	\$1,093,968
Children's Hospital Colorado	\$23,044,926
Children's Hospital Colorado, Colorado Springs <sup>14</sup>	\$2,261,983
Community Hospital	\$5,201,366
Denver Health Medical Center	\$49,476,851
Grand River Hospital and Medical Center	\$3,276,717
Longmont United Hospital	\$4,964,194
McKee Medical Center	\$3,054,740
Montrose Memorial Hospital	\$1,971,583
National Jewish Health	\$670,144
North Colorado Medical Center	\$10,322,673
North Suburban Medical Center	\$8,968,687
Platte Valley Medical Center	\$5,935,042
St. Mary's Hospital and Medical Center, Inc.	\$10,549,920
UCHealth Greeley Hospital	\$5,462,030
UCHealth Highlands Ranch	\$13,243
UCHealth Longs Peak	\$3,739,467
UCHealth Medical Center of the Rockies	\$8,909,408
UCHealth Memorial Hospital	\$21,172,586
UCHealth Poudre Valley Hospital	\$9,991,561

<sup>14</sup> Children's Hospital Colorado and Children's Hospital Colorado, Colorado Springs are considered two different entities under the CHASE Fee model, but only one provider under CICP. Data for both hospitals are combined under the Children's Hospital Colorado name in all other tables in this report.

Provider Name	Payment Amount
University of Colorado Hospital	\$38,589,155
Valley View Hospital	\$7,654,512
<b>Total</b>	<b>\$226,610,302</b>

## XI. DEFINITIONS

**Affordable Care Act (ACA)** - The comprehensive federal health care reform law enacted in March 2010. The law was enacted in two parts: The Patient Protection and Affordable Care Act was signed into law on March 23, 2010 and was amended by the Health Care and Education Reconciliation Act on March 30, 2010. The name “Affordable Care Act” is used to refer to the final, amended version of the law.

**American Recovery and Reinvestment Act of 2009 or ARRA** - Economic stimulus bill that was created after the economic recession in 2007 to invest in healthcare initiatives.

**Calendar Year** - The twelve-month period beginning on January 1st and ending on December 30th of the same year.

**Centers for Medicare and Medicaid Services (CMS)** - The federal agency that runs the Medicare, Medicaid, and Children’s Health Insurance Programs, and the federally facilitated health insurance marketplace.

**Child Health Plan Plus (CHP+)** - Colorado’s Children’s Health Insurance Program, which is jointly funded by the state and federal government. CHP+ is low cost health and dental insurance for Colorado’s uninsured children and pregnant women. CHP+ is public health insurance for children and pregnant women who earn too much to qualify for Health First Colorado, but not enough to afford private health insurance.

**Colorado Indigent Care Program (CICP)** - A State program that reimburses participating providers for a portion of the costs incurred in treating eligible individuals. In turn, providers must adhere to State-established limits for amounts charged to eligible individuals. The program promotes access to health care services for low-income individuals by helping to defray the provider costs of furnishing uncompensated care and by limiting the amount that low-income patients must pay. The CICP is not an insurance plan under state law, because it does not provide individuals with a policy that defines a list of benefits to which they are entitled. Colorado statute limits the program’s expenditures to available appropriations and the individual provider’s physical, financial, and staff resources.

**CICP Client** - A lawfully present, Colorado resident whose household income and assets are at or below 250% of the federal poverty level.

**CICP Clinic or Clinic Provider** - A community health clinic licensed by the Department of Public Health and Environment or certified by the U.S. Department of Health and Human Services as a federally qualified health center or rural health clinic and participates in the Colorado Indigent Care Program.

**CICP Hospital or Hospital Provider** - Any General Provider that is a general hospital licensed or certified by the Department of Public Health and Environment pursuant to 25-1.5-103 C.R.S., which operates inpatient facilities and participates in the Colorado Indigent Care Program.

**CICP Rating** - An assigned numeric code that designates a family’s copayment and annual copayment cap and correlates to a specific ability to pay. Income, resources, and the family household size are





used to determine what percentage of the federal poverty level the family meets. The CICIP Federal Poverty Level Percentage Range Scale is divided into 11 sections.

Colorado Healthcare Affordability and Sustainability Enterprise (CHASE) Act of 2017 - Pursuant to Section 25.5-4-402.4, C.R.S., effective July 1, 2017 CHASE is a government-owned business within the Department to collect a healthcare affordability and sustainability fee from hospitals to increase Health First Colorado and CICIP payments to hospitals, to fund hospital quality incentive payments, to expand health care coverage in the Health First Colorado and CHP+ programs, to reduce cost-shifting to private payers, and to provide other business services to hospitals.

Comprehensive Primary Care - Specific to the Primary Care Fund, the basic, entry-level health care provided by health care practitioners or non-physician health care practitioners that is generally provided in an outpatient setting. Comprehensive primary care, at a minimum, includes providing or arranging for the provision of the following services on a year-round basis: Primary health care; maternity care, including prenatal care; preventive, developmental, and diagnostic services for infants and children; adult preventive services, diagnostic laboratory and radiology services; emergency care for minor trauma; pharmaceutical services; and coordination and follow-up for hospital care.” 25.5-3-203 (1), C.R.S.

Connect for Health Colorado - Colorado’s health insurance marketplace for small employers with two to fifty (2 to 50) employees, Coloradans who buy their own health insurance or are uninsured, or do not have access to affordable coverage through an employer. Connect for Health Colorado is a non-profit entity established by a state law, Senate Bill 11-200, that was passed in 2011. The organization, legally known as the Colorado Health Benefit Exchange, is governed by a Board of Directors with additional direction from a committee of state legislators, known as the Legislative Health Benefit Exchange Implementation Review Committee.

Department of Health Care Policy and Financing or Department - A department of the government of the State of Colorado.

Denver Health Medical Center - Under the CICIP, Denver Health Medical Center primarily serves eligible patients who reside in the City and County of Denver. These facilities include Denver Health Medical Center and 10 neighborhood health clinics, 9 of which are located in Denver and 1 of which is located in Winter Park.

Disproportionate Share Hospitals (DSH) - Available DSH funds are distributed to hospitals that participate in the CICIP and to other Colorado Health First Colorado hospitals under two separate DSH payments: the CICIP Disproportionate Share Hospital Payment and the Uninsured Disproportionate Share Hospital Payment. The payments help defray the cost of treating uninsured and low-income patients. DSH payments assist in securing the hospitals’ financial viability, preserving access to care for the Health First Colorado and low-income clients, while reducing cost shifting onto private payers.

Emergency Care - Treatment for conditions of an acute, severe nature which are life, limb, or disability threats requiring immediate attention, where any delay in treatment would, in the judgment of the responsible physician, threaten life or loss of function of a patient or viable fetus, Section 25.5-3-103 (1), C.R.S.

Federal Fiscal Year or FFY - The twelve-month period beginning on October 1st of each Calendar Year and ending on September 30th of the following Calendar Year.



Federal Medical Assistance Percentage (FMAP) or Federal Match Rate - The portion of the eligible medical and administrative payments that consist of federal funds. For example, if the federal match rate is 50%, then for every qualified payment of \$100, \$50 is federal funds while the remaining \$50 is State General Fund or other state dollars.

Federal Poverty Guidelines or FPG - A measure of income issued every year by the United States Department of Health and Human Services (HHS).

Federally Qualified Health Center - Community-based health care providers that receive funds from the Health Resources & Services Administration (HRSA) to provide primary care services in underserved areas as defined in section 1861 (aa)(2) of the Federal Social Security Act, 42 U.S.C. sec. 1395x (aa)(4).

Fiscal Year or FY - The twelve-month period beginning on July 1st of each Calendar Year and ending on June 30th of the following Calendar Year.

General Provider - Licensed or certified as a general hospital, community health clinic, or maternity hospital (birth center) by the Department of Public Health and Environment or certified by the U.S. Department of Health and Human Services as a federally qualified health center or rural health clinic.

Health First Colorado or Colorado's Medicaid Program - Colorado medical assistance program as defined in Article 4 of Title 25.5, C.R.S.

Inpatient Day - Each day in which an individual is admitted into a hospital, whether or not the individual is in a specialized ward and whether or not the individual remains in the hospital for lack of suitable placement elsewhere.

Long Bill - Legislative document that provides for the payment of expenses of the executive, legislative, and judicial departments of the State of Colorado, and of its agencies and institutions, for and during the fiscal year beginning July 1st, unless otherwise noted.

Medically Indigent or Indigent - A person receiving medical services from a Qualified Health Care Provider and:

- Specific to the Primary Care Fund:
  - Whose yearly family income is below 200% of the FPG for the Primary Care Fund;
  - Who is not eligible for Health First Colorado, CHP+, Medicare, or any other governmental reimbursement for health care costs such as through Social Security, the Veterans Administration, Military Dependency (TRICARE or CHAMPUS), or the United States Public Health Service. (Payments received from the CICP are not considered a governmental reimbursement for health care costs related to a specific patient); and
  - There is no Third-Party Payer.
- Specific to the CICP:
  - Whose income and combined assets are at or below 250% of the FPG; and
  - Who is not eligible for Health First Colorado or CHP+.

Medical Services Board - An 11-member board responsible for adopting rules that govern the Department's programs. Of the 11 members, there is at least 1 member from each congressional district and no more than 6 members from the same political party.



Non-Emergency Care - Treatment for any conditions not included in the emergency care definition and any additional medical care for those conditions the Department determines to be the most serious threat to the health of medically indigent persons.

Outpatient visit - Determined by counting only one visit day for each calendar day that a patient visits an outpatient department or multiple outpatient departments.

Primary Care Fund or Primary Care Fund Program - The Primary Care Fund as authorized by state law at part 2 of the article 3 of title 25.5, C.R.S. (2017).

Qualified Health Care Provider - A provider defined by each program as follows:

- Specific to the CICIP:
  - Any General Provider who is approved by the Department to provide and receive funding for discounted health care services under the CICIP.
- Specific to the Primary Care Fund:
  - A provider who is identified by the Department to receive funding from the Primary Care Fund and who:
  - Accepts all patients regardless of their ability to pay and uses a Sliding Fee Schedule for payments or does not charge Medically Indigent Patients for services;
  - Serves a designated Medically Underserved Area or Medically Underserved Population as provided in section 330(b) of the federal “Public Health Services Act”, 42 U.S.C. sec. 254b, or demonstrates to the Department that the entity serves a population or area that lacks adequate health care services for low-income, uninsured persons;
  - Has a demonstrated Track Record of providing Cost-Effect Care;
  - Provides or arranges for the provision of Comprehensive Primary Care to persons of all ages. An entity in a rural area may be exempt from this requirement if they can demonstrate that there are no providers in the community to provide one or more of the Comprehensive Primary Care services;
  - Completes a screening that evaluates eligibility for Health First Colorado, CHP+, and the CICIP and refers patients potentially eligible for one of the Programs to the appropriate agency (e.g., county departments of human/social services) for eligibility determination if they are not qualified to make eligibility determinations; and
  - Is a community health center, as defined in Section 330 of the federal “Public Health Services Act”, 42 U.S.C. Section 254b; or at least 50% of the patients served by the applicant agency are Medically Indigent Patients or patients who are enrolled in Medicaid, CHP+, or any combination thereof.

Residency - The residence of a person is the principal or primary home or place of abode of a person. A principal or primary home or place of abode is that home or place in which a person’s habitation is fixed and to which they, whenever absent, have the present intention of returning after a departure or absence there from, regardless of the duration of such absence, pursuant to Section 1-2-102, C.R.S.

Rural Health Clinic - Clinics that are located in rural areas and that have been certified under Medicare as defined in section 1861(aa)(2) of the Federal Social Security Act, 42 U.S.C. sec. 1395x (aa)(2). Such clinics are either freestanding or hospital affiliated.

Sliding Fee Schedule - Specific to the Primary Care Fund, a tiered co-payment system that determines the level of patient financial participation and guarantees that the patient financial participation is below usual and customary charges. Factors considered in establishing the tiered co-



payment system shall only be financial status and the number of members in the patient's family unit. In the case of Pharmaceutical Services, formal arrangements with pharmaceutical companies to provide prescriptions at a minimal charge or at no fee can replace a Sliding Fee Schedule as long as all classes of prescription medications are covered.

Social Security Act - A legislative act established in 1935 to provide for the general welfare by establishing a system of Federal old-age benefits, and by enabling the several states to make more adequate provision for aged persons, blind persons, dependent and crippled children, maternal and child welfare, public health, and the administration of their unemployment compensation laws; to establish Social Security Board; to raise revenue; and for other purposes.

Third-Party Payment or Third-Party - Any payment for health services including, but not limited to, private health insurance, medical payments under any other private insurance plan, Workers' Compensation, Medicare, CHAMPUS, The Health Care Program for Children with Special Needs, and other insurance coverage responsible for payment of medical expenses incurred by individuals. Responsibility for payment may be established by contract, by statute, or by legal liability. Third-party payment does not include: 1) payment from voluntary sources or 2) payment under the Colorado Crime Victim Compensation Act, Section 24-4.1-100.1, C.R.S.

University of Colorado Hospital - Under the CICIP, University of Colorado Hospital serves primarily the residents of the Denver metropolitan area who are not residents of the City and County of Denver. University of Colorado Hospital also serves as a referral center to provide such complex care that is not available nor contracted for in Denver and the remaining areas of the state.

Upper Payment Limit or UPL - The UPL is the maximum amount Health First Colorado can reimburse a provider and still receive the federal match rate. The UPL is calculated for three (3) distinct service categories: Inpatient Hospital, Outpatient Hospital, and Nursing Facilities. The three (3) unique UPLs are calculated by the Department such that each must be a reasonable estimate of the amount Medicare would reimburse providers for providing Health First Colorado services.



## XII. CICP FINANCIAL TABLES

**Table 15 Total Clinic Financial Activity and CICP Payment**

Providers	Charges	Third Party Liability	Patient Liability	Write-Off Charges	Write-Off Costs	Payment
Basin Clinic, Inc	\$26,830	\$7,759	\$2,485	\$16,586	\$16,586	\$0
Clinica Family Health	\$3,168,184	\$105,705	\$179,354	\$2,883,125	\$2,883,125	\$0
Denver Indian Health & Family Services, Inc <sup>15</sup>	\$1,013	\$0	\$282	\$731	\$731	\$0
High Plains Community Health Center, Inc <sup>14</sup>	\$508,478	\$2,436	\$170,023	\$336,019	\$336,019	\$0
Inner City Health Center	\$7,905	\$0	\$3,621	\$4,284	\$4,284	\$0
MarillacHealth	\$233,031	\$44,198	\$11,855	\$176,978	\$176,978	\$0
Mountain Family Health Centers	\$212,936	\$0	\$31,077	\$181,859	\$181,859	\$0
Northwest Colorado Health	\$31,729	\$5,343	\$6,200	\$20,186	\$20,186	\$0
Peak Vista Community Health Centers <sup>14</sup>	\$2,336,008	\$183,755	\$288,620	\$1,863,633	\$1,863,633	\$0
Pueblo Community Health Center	\$1,285,536	\$284,654	\$106,571	\$894,311	\$894,311	\$0
River Valley Family Health Center	\$555,152	\$153,225	\$45,993	\$355,934	\$355,934	\$0
Salud Family Health, Inc.	\$1,511,084	\$0	\$202,342	\$1,308,742	\$1,308,742	\$0
Stout Street Health Center <sup>14</sup>	\$4,942	\$0	\$0	\$4,942	\$4,942	\$0
STRIDE Community Health Center	\$1,891,240	\$41,189	\$258,154	\$1,591,897	\$1,591,897	\$0
Sunrise Community Health Center	\$983,669	\$0	\$148,493	\$835,176	\$835,176	\$0
Tepeyac Community Health Center	\$9,699	\$0	\$3,370	\$6,329	\$6,329	\$0
Uncompahgre Medical Center	\$24,825	\$2,322	\$2,322	\$20,181	\$20,181	\$0
Valley-Wide Health Systems	\$542,760	\$247,226	\$86,845	\$208,689	\$208,689	\$0
<b>Total CICP Clinic Providers</b>	<b>\$13,335,021</b>	<b>\$1,077,812</b>	<b>\$1,547,607</b>	<b>\$10,709,602</b>	<b>\$10,709,602</b>	<b>\$0</b>

<sup>15</sup> Includes pharmacy charges, third party payments, and patient liability.



**Table 16 Total Hospital Financial Activity**

Providers	Charges	Third Party Liability	Patient Liability	Write-Off Charges	Write-Off Costs
Arkansas Valley Regional Medical Center	\$852,038	\$259,026	\$71,652	\$521,360	\$187,655
Aspen Valley Hospital District	\$1,222,933	\$495,202	\$28,337	\$699,394	\$522,783
Banner Fort Collins Medical Center	\$644,155	\$178,214	\$7,271	\$458,670	\$204,074
Boulder Community Health	\$4,293,642	\$420,969	\$27,475	\$3,845,198	\$709,954
Centura Health - Penrose-St. Francis Health Services <sup>16</sup>	\$37,191,250	\$4,879,774	\$263,967	\$32,047,509	\$5,606,924
Centura Health - St. Elizabeth Hospital	\$1,354,740	\$849,077	\$10,695	\$494,968	\$99,971
Centura Health - St. Thomas More Hospital <sup>16</sup>	\$4,475,715	\$1,114,405	\$75,160	\$3,286,150	\$892,172
Community Hospital	\$1,753,167	\$248,928	\$58,814	\$1,445,425	\$409,342
Delta County Memorial Hospital	\$823,517	\$112,504	\$7,580	\$703,433	\$249,838
East Morgan County Hospital	\$682,199	\$331,239	\$43,791	\$307,169	\$174,390
Estes Park Health <sup>17</sup>	\$577,020	\$141,989	\$10,183	\$424,848	\$218,486
Family Health West Hospital	\$56,790	\$7,967	\$3,435	\$45,388	\$18,898
Grand River Hospital and Medical Center	\$1,310,991	\$266,657	\$66,931	\$977,403	\$565,196
Gunnison Valley Hospital <sup>16,17</sup>	\$357,049	\$64,077	\$11,186	\$281,786	\$118,342
Heart of the Rockies Regional Medical Center	\$982,502	\$202,217	\$207,506	\$572,779	\$248,131
Lincoln Health	\$104,714	\$33,378	\$11,465	\$59,871	\$49,846
Longmont United Hospital <sup>16</sup>	\$5,187,237	\$452,091	\$56,031	\$4,679,115	\$1,099,479
McKee Medical Center	\$3,270,089	\$587,825	\$75,643	\$2,606,621	\$723,722
Melissa Memorial Hospital <sup>16</sup>	\$206,646	\$100,084	\$9,384	\$97,178	\$58,393
Memorial Regional Health	\$182,651	\$59,833	\$4,105	\$118,713	\$61,972
Mercy Regional Medical Center <sup>16</sup>	\$522,211	\$80,722	\$7,055	\$434,434	\$91,826
Middle Park Medical Center, Kremmling	\$303,640	\$0	\$9,308	\$294,332	\$164,396
Montrose Memorial Hospital	\$4,361,859	\$922,252	\$131,019	\$3,308,588	\$1,104,938
Mt San Rafael Hospital	\$982,127	\$191,664	\$47,708	\$742,755	\$266,536
North Colorado Medical Center	\$13,035,934	\$2,858,962	\$344,799	\$9,832,173	\$2,440,752
Parkview Medical Center <sup>16</sup>	\$30,692,867	\$3,244,724	\$356,338	\$27,091,805	\$4,098,621
Platte Valley Medical Center	\$2,987,954	\$502,121	\$56,011	\$2,429,822	\$695,511
Prowers Medical Center <sup>16</sup>	\$1,182,217	\$368,139	\$57,091	\$756,987	\$441,344
Rio Grande Hospital <sup>16</sup>	\$763,143	\$160,330	\$53,059	\$549,754	\$295,396

<sup>16</sup> Includes physician charges, third party payments, and patient liability.

<sup>17</sup> Includes ambulance charges, third party payments, and patient liability.



Providers	Charges	Third Party Liability	Patient Liability	Write-Off Charges	Write-Off Costs
San Luis Valley Health Conejos County Hospital	\$73,954	\$13,374	\$6,605	\$53,975	\$31,959
San Luis Valley Regional Medical Center <sup>18</sup>	\$1,099,078	\$189,885	\$63,137	\$846,056	\$329,419
Sedgwick County Memorial Hospital	\$71,529	\$36,424	\$5,490	\$29,615	\$15,720
Southeast Colorado Hospital District	\$48,054	\$20,805	\$4,596	\$22,653	\$14,319
Southwest Memorial Hospital <sup>19</sup>	\$5,883,008	\$3,782,629	\$293,417	\$1,806,962	\$843,792
Spanish Peaks Regional Health Center	\$471,567	\$109,824	\$21,936	\$339,807	\$220,889
St. Mary's Hospital and Medical Center, Inc. <sup>18</sup>	\$14,203,794	\$292,280	\$191,889	\$13,719,625	\$4,297,559
Sterling Regional Medical Center	\$1,749,319	\$381,423	\$64,151	\$1,303,745	\$510,742
UCHealth Greeley Hospital	\$4,911,102	\$759,232	\$49,754	\$4,102,116	\$1,064,296
UCHealth Highlands Ranch Hospital <sup>18,20</sup>	\$2,500,112	\$472,707	\$22,598	\$2,004,807	\$455,809
UCHealth Longs Peak <sup>20</sup>	\$2,964,271	\$222,944	\$33,287	\$2,708,040	\$670,693
UCHealth Medical Center of the Rockies	\$9,332,409	\$953,558	\$90,446	\$8,288,405	\$1,704,198
UCHealth Memorial Hospital	\$26,047,940	\$3,125,088	\$261,421	\$22,661,431	\$3,946,471
UCHealth Pikes Peak Regional Hospital	\$242,048	\$49,603	\$9,834	\$182,611	\$63,792
UCHealth Poudre Valley Hospital <sup>19</sup>	\$9,736,607	\$1,034,995	\$122,137	\$8,579,475	\$2,198,879
UCHealth Yampa Valley Medical Center	\$1,026,952	\$225,971	\$31,050	\$769,931	\$427,615
Valley View Hospital	\$960,607	\$0	\$78,473	\$882,134	\$335,368
Wray Community District Hospital <sup>18</sup>	\$5,970	\$4,053	\$35	\$1,882	\$1,092
<b>Sub-Total CICIP Hospital Providers</b>	<b>\$201,689,318</b>	<b>\$30,809,165</b>	<b>\$3,463,255</b>	<b>\$167,416,898</b>	<b>\$38,951,500</b>

#### CICIP Specialty Hospital Providers

Providers	Charges	Third Party Liability	Patient Liability	Write-Off Charges	Write-Off Costs
Children's Hospital Colorado <sup>18,20</sup>	\$7,502,913	\$2,042,884	\$110,697	\$5,349,332	\$1,856,282
National Jewish Health <sup>20</sup>	\$1,516,264	\$207,387	\$33,475	\$1,275,402	\$672,496
<b>Sub-Total CICIP Specialty Hospital Providers</b>	<b>\$9,019,177</b>	<b>\$2,250,271</b>	<b>\$144,172</b>	<b>\$6,624,734</b>	<b>\$2,528,778</b>
Denver Health Medical Center <sup>18,19,20</sup>	\$61,014,217	\$3,692,696	\$997,434	\$56,324,087	\$17,714,976
University of Colorado Hospital <sup>18,20</sup>	\$64,201,603	\$3,330,360	\$398,426	\$60,472,817	\$10,273,867
<b>Total CICIP Hospital Providers</b>	<b>\$335,924,315</b>	<b>\$40,082,492</b>	<b>\$5,003,287</b>	<b>\$290,838,536</b>	<b>\$69,469,121</b>

<sup>18</sup> Includes physician charges, third party payments, and patient liability.

<sup>19</sup> Includes ambulance charges, third party payments, and patient liability.

<sup>20</sup> Includes pharmacy charges, third party payments, and patient liability.



**Table 17 Physician Services Detail**

Providers	Charges	Third Party Liability	Patient Liability	Write-Off Charges
Centura Health - Penrose-St. Francis Health Services	\$799,810	\$169,441	\$58,856	\$571,513
Centura Health - St. Thomas More Hospital	\$34,029	\$13,319	\$166	\$20,544
Children's Hospital Colorado	\$827,086	\$88,040	\$15,308	\$723,738
Denver Health Medical Center	\$8,554,805	\$471,838	\$0	\$8,082,967
Gunnison Valley Hospital	\$18,297	\$2,453	\$0	\$15,844
Longmont United Hospital	\$11,420	\$177	\$0	\$11,243
Melissa Memorial Hospital	\$8,412	\$4,891	\$1,075	\$2,446
Mercy Regional Medical Center	\$5,445	\$493	\$236	\$4,716
Parkview Medical Center	\$538,084	\$0	\$191,736	\$346,348
Prowers Medical Center	\$88,098	\$29,901	\$8,103	\$50,094
Rio Grande Hospital	\$100,327	\$0	\$0	\$100,327
San Luis Valley Regional Medical Center	\$81,082	\$5,296	\$4,806	\$70,980
St. Mary's Hospital and Medical Center, Inc.	\$443,192	\$32,062	\$0	\$411,130
UCHealth Highlands Ranch	\$40,749	\$3,087	\$2,946	\$34,716
University of Colorado Hospital	\$6,143,778	\$279,819	\$50,873	\$5,813,086
Wray Community District Hospital	\$870	\$0	\$0	\$870
<b>Total</b>	<b>\$17,695,484</b>	<b>\$1,100,817</b>	<b>\$334,105</b>	<b>\$16,260,562</b>

**Table 18 Outpatient Pharmacy Detail**

Providers	Charges	Third Party Liability	Patient Liability	Write-Off Charges
Children's Hospital Colorado	\$42,745	\$0	\$1,845	\$40,900
Denver Health Medical Center	\$7,545,334	\$119,081	\$189,726	\$7,236,527
Denver Indian Health & Family Services, Inc	\$282	\$0	\$282	\$0
High Plains Community Health Center, Inc	\$332,217	\$0	\$11,777	\$320,440
National Jewish Health	\$145,198	\$0	\$2,639	\$142,559
Peak Vista Community Health Centers	\$295,904	\$0	\$130,015	\$165,889
Stout Street Health Center	\$170	\$0	\$0	\$170
UCHealth Highlands Ranch	\$22	\$0	\$22	\$0
UCHealth Longs Peak	\$325	\$0	\$31	\$294
University of Colorado Hospital	\$617,890	\$227,128	\$17,298	\$373,464
<b>Total</b>	<b>\$8,980,087</b>	<b>\$346,209</b>	<b>\$353,635</b>	<b>\$8,280,243</b>





**Table 19 Ambulance Detail**

Providers	Charges	Third Party Liability	Patient Liability	Write-Off Charges
Denver Health Medical Center	\$52,615	\$0	\$5,865	\$46,750
Estes Park Health	\$29,110	\$3,297	\$45	\$25,768
Gunnison Valley Hospital	\$17,039	\$1,262	\$190	\$15,587
Southwest Memorial Hospital	\$204,698	\$145,782	\$3,525	\$55,391
UCHealth Poudre Valley Hospital	\$186,256	\$15,557	\$2,945	\$167,754
<b>Total</b>	<b>\$489,718</b>	<b>\$165,898</b>	<b>\$12,570</b>	<b>\$311,250</b>

**Table 20 Denver Health Medical Center Detail**

Services	Charges	Third Party Liability	Patient Liability	Write-Off Charges
Inpatient and Outpatient Charges	\$44,861,463	\$3,101,777	\$801,843	\$40,957,843
Physician Services	\$8,554,805	\$471,838	\$0	\$8,082,967
Ambulance Services	\$52,615	\$0	\$5,865	\$46,750
Outpatient Pharmacy	\$7,545,334	\$119,081	\$189,726	\$7,236,527
<b>Total</b>	<b>\$61,014,217</b>	<b>\$3,692,696</b>	<b>\$997,434</b>	<b>\$56,324,087</b>

**Table 21 Inpatient and Outpatient Charges (Detail)<sup>21</sup>**

**CICP Clinic Providers**

	Urgent Outpatient Charges	Non-Urgent Outpatient Charges	Total Outpatient Charges	Urgent Inpatient Charges	Non-Urgent Inpatient Charges	Total Inpatient Charges	Total Charges
Basin Clinic, Inc	\$0	\$26,830	\$26,830	\$0	\$0	\$0	\$26,830
Clinica Family Health	\$0	\$3,168,184	\$3,168,184	\$0	\$0	\$0	\$3,168,184
Denver Indian Health & Family Services, Inc	\$0	\$731	\$731	\$0	\$0	\$0	\$731
High Plains Community Health Center, Inc	\$0	\$176,261	\$176,261	\$0	\$0	\$0	\$176,261
Inner City Health Center	\$0	\$7,905	\$7,905	\$0	\$0	\$0	\$7,905
MarillacHealth	\$233,031	\$0	\$233,031	\$0	\$0	\$0	\$233,031
Mountain Family Health Centers	\$117,114	\$95,822	\$212,936	\$0	\$0	\$0	\$212,936
Northwest Colorado Health	\$0	\$31,729	\$31,729	\$0	\$0	\$0	\$31,729
Peak Vista Community Health Centers	\$4,107	\$2,035,997	\$2,040,104	\$0	\$0	\$0	\$2,040,104
Pueblo Community Health Center	\$0	\$1,285,536	\$1,285,536	\$0	\$0	\$0	\$1,285,536
River Valley Family Health Center	\$0	\$555,152	\$555,152	\$0	\$0	\$0	\$555,152
Salud Family Health, Inc.	\$0	\$1,511,084	\$1,511,084	\$0	\$0	\$0	\$1,511,084
Stout Street Health Center	\$0	\$4,772	\$4,772	\$0	\$0	\$0	\$4,772
STRIDE Community Health Center	\$0	\$1,891,240	\$1,891,240	\$0	\$0	\$0	\$1,891,240
Sunrise Community Health Center	\$0	\$983,669	\$983,669	\$0	\$0	\$0	\$983,669
Tepeyac Community Health Center	\$0	\$9,699	\$9,699	\$0	\$0	\$0	\$9,699
Uncompahgre Medical Center	\$267	\$24,558	\$24,825	\$0	\$0	\$0	\$24,825
Valley-Wide Health Systems	\$0	\$542,760	\$542,760	\$0	\$0	\$0	\$542,760
<b>Total CICP Clinic Providers</b>	<b>\$354,519</b>	<b>\$12,351,929</b>	<b>\$12,706,448</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$12,706,448</b>

<sup>21</sup> Table does not include physician, outpatient pharmacy, or ambulance charges. Total Charges in Table 21 will equal Charges in Table 15 by adding physician charges from Table 17, pharmacy charges from Table 18, and ambulance charges from Table 19.



CICP Hospital Providers

	Urgent Outpatient Charges	Non-Urgent Outpatient Charges	Total Outpatient Charges	Urgent Inpatient Charges	Non-Urgent Inpatient Charges	Total Inpatient Charges	Total Charges
Arkansas Valley Regional Medical Center	\$254,689	\$421,053	\$675,742	\$176,296	\$0	\$176,296	\$852,038
Aspen Valley Hospital District	\$268,050	\$694,295	\$962,345	\$260,588	\$0	\$260,588	\$1,222,933
Banner Fort Collins Medical Center	\$26,315	\$201,691	\$228,006	\$416,149	\$0	\$416,149	\$644,155
Boulder Community Health	\$677,984	\$657,000	\$1,334,984	\$2,220,435	\$738,223	\$2,958,658	\$4,293,642
Centura Health - Penrose-St. Francis Health Services	\$5,256,089	\$10,308,543	\$15,564,632	\$13,885,837	\$6,940,971	\$20,826,808	\$36,391,440
Centura Health - St. Elizabeth Hospital	\$444,817	\$644,068	\$1,088,885	\$197,839	\$68,016	\$265,855	\$1,354,740
Centura Health - St. Thomas More Hospital	\$935,720	\$2,407,243	\$3,342,963	\$756,916	\$341,807	\$1,098,723	\$4,441,686
Community Hospital	\$1,288,115	\$13,493	\$1,301,608	\$451,559	\$0	\$451,559	\$1,753,167
Delta County Memorial Hospital	\$492,276	\$0	\$492,276	\$331,241	\$0	\$331,241	\$823,517
East Morgan County Hospital	\$257,442	\$277,477	\$534,919	\$131,626	\$15,654	\$147,280	\$682,199
Estes Park Health	\$158,989	\$257,995	\$416,984	\$76,858	\$54,068	\$130,926	\$547,910
Family Health West Hospital	\$15,554	\$41,236	\$56,790	\$0	\$0	\$0	\$56,790
Grand River Hospital and Medical Center	\$332,080	\$756,530	\$1,088,610	\$222,381	\$0	\$222,381	\$1,310,991
Gunnison Valley Hospital	\$138,243	\$76,338	\$214,581	\$86,281	\$20,851	\$107,132	\$321,713
Heart of the Rockies Regional Medical Center	\$108,012	\$451,585	\$559,597	\$190,007	\$232,898	\$422,905	\$982,502
Lincoln Health	\$49,198	\$46,996	\$96,194	\$8,520	\$0	\$8,520	\$104,714
Longmont United Hospital	\$891,324	\$1,774,003	\$2,665,327	\$1,914,787	\$595,703	\$2,510,490	\$5,175,817
McKee Medical Center	\$301,242	\$2,197,901	\$2,499,143	\$696,286	\$74,660	\$770,946	\$3,270,089
Melissa Memorial Hospital	\$16,316	\$144,353	\$160,669	\$37,565	\$0	\$37,565	\$198,234
Memorial Regional Health	\$74,200	\$71,731	\$145,931	\$36,720	\$0	\$36,720	\$182,651
Mercy Regional Medical Center	\$79,677	\$264,012	\$343,689	\$173,077	\$0	\$173,077	\$516,766
Middle Park Medical Center, Kremmling	\$251,312	\$0	\$251,312	\$52,328	\$0	\$52,328	\$303,640

	Urgent Outpatient Charges	Non-Urgent Outpatient Charges	Total Outpatient Charges	Urgent Inpatient Charges	Non-Urgent Inpatient Charges	Total Inpatient Charges	Total Charges
Montrose Memorial Hospital	\$1,079,958	\$2,447,787	\$3,527,745	\$653,715	\$180,399	\$834,114	\$4,361,859
Mt San Rafael Hospital	\$387,915	\$488,429	\$876,344	\$0	\$105,783	\$105,783	\$982,127
North Colorado Medical Center	\$1,298,240	\$6,502,436	\$7,800,676	\$4,025,361	\$1,209,897	\$5,235,258	\$13,035,934
Parkview Medical Center	\$5,159,790	\$7,762,010	\$12,921,800	\$14,150,748	\$3,082,235	\$17,232,983	\$30,154,783
Platte Valley Medical Center	\$984,022	\$1,463,463	\$2,447,485	\$531,291	\$9,178	\$540,469	\$2,987,954
Prowers Medical Center	\$279,557	\$696,541	\$976,098	\$0	\$118,021	\$118,021	\$1,094,119
Rio Grande Hospital	\$295,928	\$351,023	\$646,951	\$15,865	\$0	\$15,865	\$662,816
San Luis Valley Health Conejos County Hospital	\$54,690	\$19,264	\$73,954	\$0	\$0	\$0	\$73,954
San Luis Valley Regional Medical Center	\$444,665	\$303,776	\$748,441	\$194,972	\$74,583	\$269,555	\$1,017,996
Sedgwick County Memorial Hospital	\$12,628	\$58,901	\$71,529	\$0	\$0	\$0	\$71,529
Southeast Colorado Hospital District	\$30,833	\$17,221	\$48,054	\$0	\$0	\$0	\$48,054
Southwest Memorial Hospital	\$1,203,435	\$3,131,318	\$4,334,753	\$1,031,665	\$311,892	\$1,343,557	\$5,678,310
Spanish Peaks Regional Health Center	\$290,867	\$165,371	\$456,238	\$15,329	\$0	\$15,329	\$471,567
St. Mary's Hospital and Medical Center, Inc.	\$1,545,258	\$6,425,006	\$7,970,264	\$3,759,919	\$2,030,419	\$5,790,338	\$13,760,602
Sterling Regional Medical Center	\$225,101	\$995,894	\$1,220,995	\$437,641	\$90,683	\$528,324	\$1,749,319
UCHealth Greeley Hospital	\$681,449	\$1,566,277	\$2,247,726	\$2,341,988	\$321,388	\$2,663,376	\$4,911,102
UCHealth Highlands Ranch Hospital	\$293,228	\$366,571	\$659,799	\$1,441,018	\$358,524	\$1,799,542	\$2,459,341
UCHealth Longs Peak	\$864,135	\$510,665	\$1,374,800	\$1,470,713	\$118,433	\$1,589,146	\$2,963,946
UCHealth Medical Center of the Rockies	\$778,909	\$2,489,209	\$3,268,118	\$3,999,993	\$2,064,298	\$6,064,291	\$9,332,409
UCHealth Memorial Hospital	\$4,317,804	\$10,149,317	\$14,467,121	\$8,688,768	\$2,892,051	\$11,580,819	\$26,047,940
UCHealth Pikes Peak Regional Hospital	\$113,661	\$84,245	\$197,906	\$44,142	\$0	\$44,142	\$242,048

	Urgent Outpatient Charges	Non-Urgent Outpatient Charges	Total Outpatient Charges	Urgent Inpatient Charges	Non-Urgent Inpatient Charges	Total Inpatient Charges	Total Charges
UCHealth Poudre Valley Hospital	\$1,527,032	\$4,226,777	\$5,753,809	\$3,374,737	\$421,805	\$3,796,542	\$9,550,351
UCHealth Yampa Valley Medical Center	\$182,090	\$716,067	\$898,157	\$128,795	\$0	\$128,795	\$1,026,952
Valley View Hospital	\$89,346	\$488,928	\$578,274	\$382,333	\$0	\$382,333	\$960,607
Wray Community District Hospital	\$5,100	\$0	\$5,100	\$0	\$0	\$0	\$5,100
<b>Sub-Total CICIP Hospital Providers</b>	<b>\$34,463,285</b>	<b>\$73,134,039</b>	<b>\$107,597,324</b>	<b>\$69,012,289</b>	<b>\$22,472,440</b>	<b>\$91,484,729</b>	<b>\$199,082,053</b>

#### CICIP Specialty Hospital Providers

	Urgent Outpatient Charges	Non-Urgent Outpatient Charges	Total Outpatient Charges	Urgent Inpatient Charges	Non-Urgent Inpatient Charges	Total Inpatient Charges	Total Charges
Children's Hospital Colorado	\$729,524	\$2,428,964	\$3,158,488	\$1,145,951	\$2,328,643	\$3,474,594	\$6,633,082
National Jewish Health	\$485	\$1,370,581	\$1,371,066	\$0	\$0	\$0	\$1,371,066
<b>Sub-Total CICIP Specialty Hospital Providers</b>	<b>\$730,009</b>	<b>\$3,799,545</b>	<b>\$4,529,554</b>	<b>\$1,145,951</b>	<b>\$2,328,643</b>	<b>\$3,474,594</b>	<b>\$8,004,148</b>
Denver Health Medical Center	\$7,256,373	\$23,735,562	\$30,991,935	\$11,098,182	\$2,771,346	\$13,869,528	\$44,861,463
University of Colorado Hospital	\$10,192,045	\$14,245,632	\$24,437,677	\$27,320,745	\$5,681,513	\$33,002,258	\$57,439,935
<b>Total CICIP Hospital Providers</b>	<b>\$52,641,712</b>	<b>\$114,914,778</b>	<b>\$167,556,490</b>	<b>\$108,577,167</b>	<b>\$33,253,942</b>	<b>\$141,831,109</b>	<b>\$309,387,599</b>
<b>Total All CICIP Providers</b>	<b>\$52,996,231</b>	<b>\$127,266,707</b>	<b>\$180,262,938</b>	<b>\$108,577,167</b>	<b>\$33,253,942</b>	<b>\$141,831,109</b>	<b>\$322,094,047</b>



### XIII. CICP UTILIZATION TABLES

**Table 22 Admissions and Visits by County<sup>22</sup>**

County	CICP Clinics	CICP Hospitals <sup>23</sup>	Denver Health Medical Center	University of Colorado Hospital	Total
Adams	11,749	640	2,929	643	15,961
Alamosa	553	293	0	3	849
Arapahoe	5,329	364	3,840	1,196	10,729
Archuleta	0	4	0	4	8
Baca	12	61	0	0	73
Bent	141	53	0	0	194
Boulder	3,803	558	31	26	4,418
Broomfield	418	15	71	1	505
Chaffee	0	130	0	4	134
Cheyenne	12	0	0	0	12
Clear Creek	5	8	0	0	13
Conejos	168	121	0	4	293
Costilla	137	39	0	0	176
Crowley	53	46	0	0	99
Custer	7	39	0	0	46
Delta	938	316	0	1	1,255
Denver	2,202	288	19,440	605	22,535
Dolores	9	17	0	0	26
Douglas	473	71	200	113	857
Eagle	232	79	0	2	313
Elbert	30	10	6	4	50
El Paso	8,120	3,896	7	78	12,101
Fremont	278	832	0	5	1,115
Garfield	565	1,226	2	6	1,799
Gilpin	8	1	1	1	11
Grand	2	32	2	0	36
Gunnison	0	66	0	1	67
Hinsdale	35	9	0	0	44
Huerfano	0	290	0	6	296
Jackson	0	10	0	0	10
Jefferson	1,880	234	1,637	209	3,960
Kiowa	3	26	0	0	29
Kit Carson	24	9	0	0	33
Lake	0	5	1	0	6
La Plata	0	41	0	0	41
Larimer	1,965	1,546	2	10	3,523
Las Animas	47	600	0	2	649
Lincoln	65	63	0	0	128
Logan	98	465	2	0	565

<sup>22</sup> Utilization by County is the sum of admissions and visits by reported patient residency.

<sup>23</sup> Includes CICP Specialty Hospital providers



County	CICP Clinics	CICP Hospitals <sup>23</sup>	Denver Health Medical Center	University of Colorado Hospital	Total
Mesa	965	1,862	0	8	2,835
Mineral	0	3	0	0	3
Moffat	102	64	0	0	166
Montezuma	0	3,502	0	10	3,512
Montrose	1,844	907	0	6	2,757
Morgan	474	669	7	18	1,168
Otero	426	289	0	9	724
Ouray	18	28	0	1	47
Park	26	22	19	0	67
Phillips	63	137	0	12	212
Pitkin	90	244	0	0	334
Prowers	591	565	1	0	1,157
Pueblo	5,051	1,229	1	30	6,311
Rio Blanco	0	13	0	0	13
Rio Grande	569	521	0	10	1,100
Routt	69	153	0	5	227
Saguache	762	166	0	0	928
San Juan	0	0	0	0	0
San Miguel	72	45	0	0	117
Sedgwick	4	127	0	0	131
Summit	0	3	20	2	25
Teller	220	198	0	8	426
Washington	22	36	0	1	59
Weld	6,722	2,183	62	77	9,044
Yuma	61	14	0	1	76
Unknown	223	231	269	4	727
<b>Total</b>	<b>57,735</b>	<b>25,714</b>	<b>28,550</b>	<b>3,126</b>	<b>115,125</b>



**Table 23 Outpatient Visits and Inpatient Admissions by CICIP Rating**

**Outpatient Visits**

CICP Clinics			CICP Hospitals <sup>24</sup>		Denver Health Medical Center		University of Colorado Hospital		All Providers	
CICP Rating	Visits	% of Total	Visits	% of Total	Visits	% of Total	Visits	% of Total	Visits	% of Total
0-100%	14,280	24.7%	3,320	13.6%	13,013	46.0%	915	31.4%	31,528	27.8%
101-200%	30,424	52.7%	14,241	58.1%	11,243	39.7%	1,470	50.5%	57,378	50.6%
201-250%	10,989	19.0%	6,503	26.6%	3,998	14.1%	528	18.1%	22,018	19.4%
Unknown	2,042	3.5%	429	1.8%	50	0.2%	0	0.0%	2,521	2.2%
<b>Total</b>	<b>57,735</b>	<b>100.0%</b>	<b>24,493</b>	<b>100.0%</b>	<b>28,304</b>	<b>100.0%</b>	<b>2,913</b>	<b>100.0%</b>	<b>113,445</b>	<b>100.0%</b>

**Inpatient Admissions**

CICP Clinics			CICP Hospitals <sup>27</sup>		Denver Health Medical Center		University of Colorado Hospital		All Providers	
CICP Rating	Admits	% of Total	Admits	% of Total	Admits	% of Total	Admits	% of Total	Admits	% of Total
0-100%	0	0.0%	168	13.8%	84	34.1%	64	30.0%	316	18.8%
101-200%	0	0.0%	714	58.5%	116	47.2%	103	48.4%	933	55.5%
201-250%	0	0.0%	325	26.6%	46	18.7%	46	21.6%	417	24.8%
Unknown	0	0.0%	14	1.1%	0	0.0%	0	0.0%	14	0.8%
<b>Total</b>	<b>0</b>	<b>0.0%</b>	<b>1,221</b>	<b>100.0%</b>	<b>246</b>	<b>100.0%</b>	<b>213</b>	<b>100.0%</b>	<b>1,680</b>	<b>100.0%</b>

**Table 24 Inpatient Admissions and Days by CICIP Rating**

CICP Hospitals <sup>27</sup>			Denver Health Medical Center		University of Colorado Hospital		All Providers	
CICP Rating	Admits	Days	Admits	Days	Admits	Days	Admits	Days
0-100%	168	930	84	413	64	451	316	1,794
101-200%	714	3,738	116	524	103	594	933	4,856
201-250%	325	1,496	46	219	46	456	417	2,171
Unknown	14	67	0	0	0	0	14	67
<b>Total</b>	<b>1,221</b>	<b>6,231</b>	<b>246</b>	<b>1,156</b>	<b>213</b>	<b>1,501</b>	<b>1,680</b>	<b>8,888</b>

<sup>24</sup> Includes CICP Specialty Hospital providers





**Table 25 Outpatient Visits and Charges by Age**

CICP Clinics			CICP Hospitals <sup>25</sup>		Denver Health Medical Center		University of Colorado Hospital		All Providers	
Age Group	Count	Charges	Count	Charges	Count	Charges	Count	Charges	Count	Charges
0-17	337	\$73,641	637	2,739,017	92	\$123,949	7	\$37,885	1,073	\$2,974,492
18-64	45,203	\$9,787,874	14,980	63,113,327	20,091	\$20,158,529	2,014	\$14,685,707	82,288	\$107,745,437
65+	12,195	\$2,844,933	8,876	46,274,534	8,121	\$10,709,457	892	\$9,714,085	30,084	\$69,543,009
<b>Total</b>	<b>57,735</b>	<b>\$12,706,448</b>	<b>24,493</b>	<b>\$112,126,878</b>	<b>28,304</b>	<b>\$30,991,935</b>	<b>2,913</b>	<b>\$24,437,677</b>	<b>113,445</b>	<b>\$180,262,938</b>

**Table 26 Inpatient Admissions and Charges by Age**

CICP Hospitals <sup>28</sup>			Denver Health Medical Center		University of Colorado Hospital		All Providers	
Age Group	Count	Charges	Count	Charges	Count	Charges	Count	Charges
0-17	60	\$2,639,848	5	\$47,854	3	\$124,856	68	\$2,812,558
18-64	596	\$43,178,318	143	\$7,263,685	137	\$21,357,978	876	\$71,799,981
65+	565	\$49,141,157	98	\$6,557,989	73	\$11,519,424	736	\$67,218,570
<b>Total</b>	<b>1,221</b>	<b>\$94,959,323</b>	<b>246</b>	<b>\$13,869,528</b>	<b>213</b>	<b>\$33,002,258</b>	<b>1,680</b>	<b>\$141,831,109</b>

<sup>25</sup> Includes CICP Specialty Hospital providers



**Table 27 Utilization by Provider**

**CICP Clinic Providers**

Provider Name	Visits	Admissions	Days	ALOS <sup>26</sup>
Basin Clinic, Inc	123	0	0	0
Clinica Family Health	13,955	0	0	0
Denver Indian Health & Family Services, Inc	11	0	0	0
High Plains Community Health Center, Inc	677	0	0	0
Inner City Health Center	73	0	0	0
MarillacHealth	951	0	0	0
Mountain Family Health Centers	884	0	0	0
Northwest Colorado Health	175	0	0	0
Peak Vista Community Health Centers	8,603	0	0	0
Pueblo Community Health Center	5,259	0	0	0
River Valley Family Health Center	2,660	0	0	0
Salud Family Health, Inc.	6,128	0	0	0
Stout Street Health Center	20	0	0	0
STRIDE Community Health Center	9,393	0	0	0
Sunrise Community Health Center	5,711	0	0	0
Tepeyac Community Health Center	84	0	0	0
Uncompahgre Medical Center	116	0	0	0
Valley-Wide Health Systems	2,912	0	0	0
<b>Total CICP Clinic Providers</b>	<b>57,735</b>	<b>0</b>	<b>0</b>	<b>0</b>

**CICP Hospital Providers**

Provider Name	Visits	Admissions	Days	ALOS <sup>29</sup>
Arkansas Valley Regional Medical Center	285	6	25	4.17
Aspen Valley Hospital District	300	7	26	3.71
Banner Fort Collins Medical Center	32	7	40	5.71
Boulder Community Health	236	19	144	7.58
Centura Health - Penrose-St. Francis Health Services	1,236	229	1,198	5.23
Centura Health - St. Elizabeth Hospital	238	8	19	2.38
Centura Health - St. Thomas More Hospital	615	21	95	4.52
Community Hospital	286	11	27	2.45
Delta County Memorial Hospital	95	8	34	4.25
East Morgan County Hospital	296	11	40	3.64
Estes Park Health	130	6	16	2.67
Family Health West Hospital	25	0	0	0.00
Grand River Hospital and Medical Center	925	8	25	3.13
Gunnison Valley Hospital	67	4	17	4.25
Heart of the Rockies Regional Medical Center	149	12	53	4.42
Lincoln Health	57	2	2	1.00
Longmont United Hospital	319	22	108	4.91
McKee Medical Center	444	16	79	4.94
Melissa Memorial Hospital	115	2	6	3.00
Memorial Regional Health	29	1	5	5.00
Mercy Regional Medical Center	39	6	10	1.67
Middle Park Medical Center, Kremmling	35	2	6	3.00

<sup>26</sup> Calculated Average Length of Stay (ALOS). Number of days divided by total admissions



Provider Name	Visits	Admissions	Days	ALOS <sup>29</sup>
Montrose Memorial Hospital	1,034	26	156	6.00
Mt San Rafael Hospital	556	5	19	3.80
North Colorado Medical Center	1,179	79	441	5.58
Parkview Medical Center	1,181	143	827	5.78
Platte Valley Medical Center	401	13	69	5.31
Prowers Medical Center	591	9	39	4.33
Rio Grande Hospital	453	1	5	5.00
San Luis Valley Health Conejos County Hospital	36	0	0	0.00
San Luis Valley Regional Medical Center	541	6	20	3.33
Sedgwick County Memorial Hospital	104	0	0	0.00
Southeast Colorado Hospital District	48	0	0	0.00
Southwest Memorial Hospital	3,384	90	169	1.88
Spanish Peaks Regional Health Center	272	2	5	2.50
St. Mary's Hospital and Medical Center, Inc.	1,625	75	448	5.97
Sterling Regional Medical Center	433	15	71	4.73
UCHealth Greeley Hospital	406	29	179	6.17
UCHealth Highlands Ranch Hospital	70	11	91	8.27
UCHealth Longs Peak	140	19	81	4.26
UCHealth Medical Center of the Rockies	485	53	338	6.38
UCHealth Memorial Hospital	2,496	133	749	5.63
UCHealth Pikes Peak Regional Hospital	104	2	10	5.00
UCHealth Poudre Valley Hospital	962	63	281	4.46
UCHealth Yampa Valley Medical Center	237	4	10	2.50
Valley View Hospital	255	8	24	3.00
Wray Community District Hospital	1	0	0	0.00
<b>Sub-Total CICIP Hospital Providers</b>	<b>22,947</b>	<b>1,194</b>	<b>6,007</b>	<b>5.03</b>

#### CICP Specialty Hospital Providers

Provider Name	Visits	Admissions	Days	ALOS <sup>27</sup>
Children's Hospital Colorado	741	27	224	8.30
National Jewish Health	805	0	0	0.00
<b>Sub-Total CICP Specialty Hospital Providers</b>	<b>1,546</b>	<b>27</b>	<b>224</b>	<b>8.30</b>
Denver Health Medical Center	28,304	246	1,156	4.70
University of Colorado Hospital	2,913	213	1,501	7.05
<b>Total CICP Hospital Providers</b>	<b>55,710</b>	<b>1,680</b>	<b>8,888</b>	<b>5.29</b>
<b>Total All CICP Providers</b>	<b>113,445</b>	<b>1,680</b>	<b>8,888</b>	<b>5.29</b>

<sup>27</sup> Calculated Average Length of Stay (ALOS). Number of days divided by total admissions



**Table 28 Unduplicated Inpatient and Outpatient by Age**

CICP Clinic Providers	Inpatient				Outpatient			
	Age 0 thru 17	Age 18 thru 64	Age 65+	Total	Age 0 thru 17	Age 18 thru 64	Age 65+	Total
Basin Clinic, Inc	0	0	0	0	0	16	13	29
Clinica Family Health	0	0	0	0	80	2,743	343	3,166
Denver Indian Health & Family Services, Inc	0	0	0	0	0	2	1	3
High Plains Community Health Center, Inc	0	0	0	0	15	270	30	315
Inner City Health Center	0	0	0	0	0	18	2	20
MarillacHealth	0	0	0	0	1	92	95	188
Mountain Family Health Centers	0	0	0	0	0	254	51	305
Northwest Colorado Health	0	0	0	0	0	65	12	77
Peak Vista Community Health Centers	0	0	0	0	6	2,146	690	2,842
Pueblo Community Health Center	0	0	0	0	7	966	596	1,569
River Valley Family Health Center	0	0	0	0	9	515	210	734
Salud Family Health, Inc.	0	0	0	0	14	2,034	213	2,261
Stout Street Health Center	0	0	0	0	0	7	3	10
STRIDE Community Health Center	0	0	0	0	3	2,126	596	2,725
Sunrise Community Health Center	0	0	0	0	30	1,598	187	1,815
Tepeyac Community Health Center	0	0	0	0	1	42	5	48
Uncompahgre Medical Center	0	0	0	0	3	57	21	81
Valley-Wide Health Systems	0	0	0	0	16	635	256	907
<b>Total CICP Clinic Providers</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>185</b>	<b>13,586</b>	<b>3,324</b>	<b>17,095</b>



CICP Hospital Providers

Provider Name	Inpatient				Outpatient			
	Age 0 thru 17	Age 18 thru 64	Age 65+	Total	Age 0 thru 17	Age 18 thru 64	Age 65+	Total
Arkansas Valley Regional Medical Center	0	6	0	6	7	109	0	116
Aspen Valley Hospital District	0	3	4	7	2	58	18	78
Banner Fort Collins Medical Center	0	3	4	7	1	15	7	23
Boulder Community Health	0	2	15	17	0	60	25	85
Centura Health - Penrose-St. Francis Health Services	20	106	59	185	4	308	197	509
Centura Health - St. Elizabeth Hospital	0	3	2	5	4	64	41	109
Centura Health - St. Thomas More Hospital	0	12	7	19	0	134	67	201
Community Hospital	0	5	1	6	2	77	19	98
Delta County Memorial Hospital	0	3	5	8	1	36	12	49
East Morgan County Hospital	0	5	4	9	1	66	45	112
Estes Park Health	0	3	1	4	1	17	18	36
Family Health West Hospital	0	0	0	0	0	8	5	13
Grand River Hospital and Medical Center	0	5	1	6	1	109	44	154
Gunnison Valley Hospital	0	2	2	4	4	21	2	27
Heart of the Rockies Regional Medical Center	0	7	2	9	1	34	18	53
Lincoln Health	0	1	1	2	0	1	1	2
Longmont United Hospital	0	9	10	19	0	130	41	171
McKee Medical Center	0	3	12	15	0	60	57	117
Melissa Memorial Hospital	0	1	1	2	0	20	2	22
Memorial Regional Health	0	0	1	1	0	6	2	8
Mercy Regional Medical Center	0	2	4	6	0	5	6	11
Middle Park Medical Center, Kremmling	0	2	0	2	2	30	0	32
Montrose Memorial Hospital	0	11	12	23	13	320	115	448
Mt San Rafael Hospital	0	1	4	5	0	108	76	184
North Colorado Medical Center	4	32	33	69	14	297	134	445
Parkview Medical Center	1	50	76	127	14	565	231	810
Platte Valley Medical Center	0	6	4	10	3	130	34	167
Prowers Medical Center	0	3	3	6	2	92	51	145
Rio Grande Hospital	0	0	1	1	5	114	59	178
San Luis Valley Health Conejos County Hospital	0	0	0	0	1	26	2	29
San Luis Valley Regional Medical Center	0	4	1	5	1	248	7	256
Sedgwick County Memorial Hospital	0	0	0	0	0	5	9	14
Southeast Colorado Hospital District	0	0	0	0	0	12	5	17
Southwest Memorial Hospital	1	15	29	45	20	381	233	634
Spanish Peaks Regional Health Center	0	1	1	2	2	78	39	119



St. Mary's Hospital and Medical Center, Inc.	1	43	16	60	6	297	96	399
Sterling Regional Medical Center	1	5	6	12	2	59	40	101
UCHealth Greeley Hospital	1	16	10	27	3	110	56	169
UCHealth Highlands Ranch Hospital	0	8	3	11	0	26	12	38
UCHealth Longs Peak	0	13	5	18	1	72	24	97
UCHealth Medical Center of the Rockies	0	21	31	52	6	143	58	207
UCHealth Memorial Hospital	6	63	48	117	6	547	225	778
UCHealth Pikes Peak Regional Hospital	0	1	1	2	0	17	18	35
UCHealth Poudre Valley Hospital	1	29	24	54	9	253	94	356
UCHealth Yampa Valley Medical Center	0	2	2	4	6	75	14	95
Valley View Hospital	0	5	3	8	2	62	24	88
Wray Community District Hospital	0	0	0	0	0	1	0	1
<b>Sub-Total CICIP Hospital Providers</b>	<b>36</b>	<b>512</b>	<b>449</b>	<b>997</b>	<b>147</b>	<b>5,406</b>	<b>2,283</b>	<b>7,836</b>

CICP Specialty Hospital Providers Provider Name	Inpatient				Outpatient			
	Age 0 thru 5	Age 6 thru 17	Age 18+	Total	Age 0 thru 5	Age 6 thru 17	Age 18+	Total
Children's Hospital Colorado	24	3	0	27	408	333	0	741
National Jewish Health	0	0	0	0	0	1	212	213
<b>Sub-Total CICP Specialty Hospital Providers</b>	<b>24</b>	<b>3</b>	<b>0</b>	<b>27</b>	<b>408</b>	<b>334</b>	<b>212</b>	<b>954</b>
Denver Health Medical Center	5	132	74	211	30	3,787	1,103	4,920
University of Colorado Hospital	3	111	62	176	5	992	288	1,285
<b>Total CICP Hospital Providers</b>	<b>68</b>	<b>758</b>	<b>585</b>	<b>1,411</b>	<b>590</b>	<b>10,519</b>	<b>3,886</b>	<b>14,995</b>
<b>Total All CICP Providers</b>	<b>68</b>	<b>758</b>	<b>585</b>	<b>1,411</b>	<b>775</b>	<b>24,105</b>	<b>7,210</b>	<b>32,090</b>



**Table 29 Unduplicated Total Count by Age<sup>28</sup>**

**CICP Clinic Providers**

Provider Name	Age 0 thru 17	Age 18 thru 64	Age 65+	Total
Basin Clinic, Inc	0	16	13	29
Clinica Family Health	80	2,743	343	3,166
Denver Indian Health & Family Services, Inc	0	2	1	3
High Plains Community Health Center, Inc	15	270	30	315
Inner City Health Center	0	18	2	20
MarillacHealth	1	92	95	188
Mountain Family Health Centers	0	254	51	305
Northwest Colorado Health	0	65	12	77
Peak Vista Community Health Centers	6	2,146	690	2,842
Pueblo Community Health Center	7	966	596	1,569
River Valley Family Health Center	9	515	210	734
Salud Family Health, Inc.	14	2,034	213	2,261
Stout Street Health Center	0	7	3	10
STRIDE Community Health Center	3	2,126	596	2,725
Sunrise Community Health Center	30	1,598	187	1,815
Tepeyac Community Health Center	1	42	5	48
Uncompahgre Medical Center	3	57	21	81
Valley-Wide Health Systems	16	635	256	907
<b>Total CICP Clinic Providers</b>	<b>185</b>	<b>13,586</b>	<b>3,324</b>	<b>17,095</b>

**CICP Hospital Providers**

Provider Name	Age 0 thru 17	Age 18 thru 64	Age 65+	Total
Arkansas Valley Regional Medical Center	7	112	0	119
Aspen Valley Hospital District	2	61	18	81
Banner Fort Collins Medical Center	1	18	11	30
Boulder Community Health	0	62	40	102
Centura Health - Penrose-St. Francis Health Services	24	368	214	606
Centura Health - St. Elizabeth Hospital	4	67	43	114
Centura Health - St. Thomas More Hospital	0	136	67	203
Community Hospital	2	82	20	104
Delta County Memorial Hospital	1	37	16	54
East Morgan County Hospital	1	66	46	113
Estes Park Health	1	19	19	39
Family Health West Hospital	0	8	5	13
Grand River Hospital and Medical Center	1	110	45	156
Gunnison Valley Hospital	4	22	4	30
Heart of the Rockies Regional Medical Center	1	35	19	55
Lincoln Health	0	1	1	2
Longmont United Hospital	0	135	46	181

<sup>28</sup> Unduplicated client count is a count of unique medically indigent patients by provider. Providers report a unique count for inpatient, outpatient, and total clients served. Since this count is done at the provider level, a client who receives care at multiple CICP providers is counted multiple times in this figure. These conditions create an unduplicated count that overstates the number of actual clients receiving care under the CICP.



Provider Name	Age 0 thru 17	Age 18 thru 64	Age 65+	Total
McKee Medical Center	0	60	60	120
Melissa Memorial Hospital	0	21	3	24
Memorial Regional Health	0	6	2	8
Mercy Regional Medical Center	0	6	8	14
Middle Park Medical Center, Kremmling	2	30	0	32
Montrose Memorial Hospital	13	329	119	461
Mt San Rafael Hospital	2	109	76	187
North Colorado Medical Center	16	310	144	470
Parkview Medical Center	15	595	290	900
Platte Valley Medical Center	3	136	38	177
Prowers Medical Center	2	96	51	149
Rio Grande Hospital	5	114	60	179
San Luis Valley Health Conejos County Hospital	1	26	2	29
San Luis Valley Regional Medical Center	1	252	8	261
Sedgwick County Memorial Hospital	0	5	9	14
Southeast Colorado Hospital District	0	12	5	17
Southwest Memorial Hospital	21	383	234	638
Spanish Peaks Regional Health Center	0	1	1	2
St. Mary's Hospital and Medical Center, Inc.	6	311	100	417
Sterling Regional Medical Center	3	61	41	105
UCHealth Greeley Hospital	3	116	61	180
UCHealth Highlands Ranch Hospital	0	29	14	43
UCHealth Longs Peak	1	78	28	107
UCHealth Medical Center of the Rockies	6	157	78	241
UCHealth Memorial Hospital	12	572	243	827
UCHealth Pikes Peak Regional Hospital	0	18	18	36
UCHealth Poudre Valley Hospital	9	266	102	377
UCHealth Yampa Valley Medical Center	6	75	15	96
Valley View Hospital	2	62	24	88
Wray Community District Hospital	0	1	0	1
<b>Sub-Total CICIP Hospital Providers</b>	<b>178</b>	<b>5,576</b>	<b>2,448</b>	<b>8,202</b>

#### CICIP Specialty Hospital Providers

Provider Name	Age 0 thru 17	Age 18 thru 64	Age 65+	Total
Children's Hospital Colorado	432	336	0	768
National Jewish Health	0	1	212	213
<b>Sub-Total CICIP Specialty Hospital Providers</b>	<b>432</b>	<b>337</b>	<b>212</b>	<b>981</b>
Denver Health Medical Center	32	3,827	1,112	4,971
University of Colorado Hospital	7	1,032	309	1,348
<b>Total CICIP Hospital Providers</b>	<b>649</b>	<b>10,772</b>	<b>4,081</b>	<b>15,502</b>
<b>Total All CICIP Providers</b>	<b>834</b>	<b>24,358</b>	<b>7,405</b>	<b>32,597</b>

