Dear members of the CHASE Board,

My name is Erin Ostlie-Madden and I am a Healthcare Organizing Team Leader at Center for Health Progress. I am also a physician assistant that works at a large hospital in the Denver metro area in emergency medicine. Where I work, a large percentage of the patients I see are insured by Medicaid or uninsured, and have significant challenges accessing the healthcare system as it is intended to work. I write today on behalf of both myself, CHP, and my patients.

First, I'd like to thank HCPF for managing the CHASE board and hospital provider fees, and for taking the time to present the options for a state directed payment program at the 10/22/24 public meeting. I am excited about the prospect of finding ways to bring in additional healthcare money to Colorado to further help my patients who are underserved by our healthcare system - it is desperately needed.

I am submitting a written comment to express my concerns with the proposal as I currently understand it. There are a couple things that I would like you to consider:

- 1.) As a taxpayer, a healthcare provider, as a family member to those who access our healthcare system, and of course, as a patient myself, It is important to me to ensure that these public matching funds are serving all of us. In a profit-driven multi-payer healthcare system, which is what we have as it currently stands, I believe that all interested parties need to have a voice at the table where these decisions are made. Therefore, my first request for your consideration is that the workgroup include patient advocates, healthcare workers, and/or interested members of the patient community to provide alternative perspectives to those of just CHA and HCPF.
- 2.) I see in my job every day how Colorado is unfortunately failing to provide adequate access to care for patients due to cost prohibition. In the emergency room, I frequently take care of patients who come in more sick than they should be because they have delayed seeking care due to cost concerns. According to KFF, 21% of insured adults report putting off healthcare because of cost concerns; this number jumps to 61% for patients who are uninsured (Amin, 2024). Given the loss of Medicaid for ~770,000 Coloradans since March 2023 due to COVID reimbursements running out (Kaiser Family Foundation, 2024), as a provider, this is concerning. I want to provide care to the best of my abilities but I spend my days experiencing the front lines of the strain on our hospital resources as we struggle to keep up with the human costs of these delays in care. Not only is this costly to the patient's health and financial well-being, this is costly to an already financially struggling healthcare system as a whole. This is why it is so important that affordability and access to care remain a top priority of this working group. I do believe the money exchanged and reimbursements provided through CHASE should have accountability mechanisms to ensure that both nonprofit and for-profit hospitals are holding true to their missions of providing exceptional care to all Coloradans, and not placing additional financial and legal burdens on patients seeking care.

We at CHP urge the CHASE Board, the in question working group, HCPF, and all additional stakeholders to consider these concerns. We plan on participating in all public forums where this

will be explored and discussed, and are earnestly willing to devote further time to ensure that changes made benefit both patients and hospitals.

Thank you for your consideration of these above concerns.

Sincerely,

Erin Ostlie-Madden, PA-C

## References

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