

2010 Annual Report

Achieving access to health for all Coloradans



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About Us



VISION: *The Colorado Trust is dedicated to achieving access to health for all Coloradans.*

MISSION:

The Colorado Trust is dedicated to advancing the health and well-being of the people of Colorado.

THE Colorado Trust partners with individuals, organizations, agencies and communities across the state in a shared effort to expand health coverage and to improve the health care system. Through grant support for the development and implementation of policies, programs and services, we strive to realize comprehensive change that will mean:

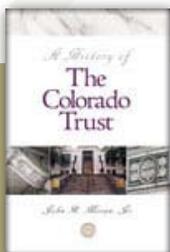
- Every child will have a real opportunity to grow up healthy
- Colorado will have a healthy population that contributes to the prosperity of the state
- Affordable health care coverage will be available to all families and individuals
- Accessible, quality care will be the norm
- The health care system will deliver care that is responsive to the needs of all Coloradans.

» **HISTORY**

When the nonprofit PSL Health Care Corporation was sold to a for-profit organization in 1985, the proceeds of the sale were used to create a foundation dedicated exclusively to the health of the people of Colorado.

Since that time, The Colorado Trust has worked closely with nonprofit organizations in every county across the state to improve health and well-being, ranging from bringing 9-1-1 emergency medical care to 38 Colorado counties to helping foster the development of the state's second largest regional transportation district in the Roaring Fork Valley, and much more.

To build on these efforts and address growing needs to expand health coverage and improve and expand health care within Colorado, The Trust committed to a 10-year goal to achieve access to health for all Coloradans by 2018.



A History of The Colorado Trust, authored by long-time, former Trust President and CEO, John R. Moran, Jr., was published this year. This book provides insights on those who created and helped to shape The Colorado Trust, and details the foundation's many efforts to serve the health and well-being of the people of Colorado.

Message from Leadership



Kathryn A. Paul, Chairwoman | Ned Calonge, MD, President & CEO

Celebrating **25**
YEARS

Connecting Communities
for a Healthy Colorado

2010 was a milestone year for The Colorado Trust, with June marking the 25th year of our foundation. We celebrated by providing grants to strengthen the work of 10 nonprofit organizations working to improve health care for children across Colorado.

We also shared stories from many of our partners about their work over the past quarter-century to improve the health and well-being of Coloradans. These hopeful stories capture successes in bringing evidence-based solutions – such as the Nurse-Family Partnership – to communities to help moms like Shanay, a Pueblo teen who ran away from a challenging home environment filled with substance abuse. With the help of nurse Brenda Oliver, Shanay learned how to be a better mom to her young son, and is working toward a college degree to improve their futures.

Significant improvements also were realized through innovative efforts – as told in the story of nine communities in the Roaring Fork Valley – working together to address problems too complex for individual small towns. The communities in this region that are physically far from each other and economically and socially diverse, have now worked together for more than 20 years to more effectively address affordable housing, transportation, discrimination, access to health care and business development.

The dedicated efforts of our 2,000 partners across all 64 Colorado counties over the past 25 years have helped to provide many people with improved opportunities to enjoy good health and, in turn, a good life.

These efforts continue as we partnered this past year with some 200 grantees to: help families enroll in public health insurance; coordinate the delivery of health care services across multiple providers and health care settings; develop policy recommendations to alleviate health care provider shortages; and help Coloradans to become more aware of, better understand and support efforts to expand health coverage and to improve the health care system. These and other grant strategies are highlighted in this annual report.

Finally, we offer a special note of thanks this year to our many partners, as well as our staff and trustees in seamlessly continuing this work through our leadership transition. And we hold former Colorado Trust President and CEO Irene M. Ibarra in our thoughts and celebrate all that she achieved in helping to advance the health and well-being of Coloradans.

As we move into our second quarter century, our leadership remains firmly committed to ensuring that The Colorado Trust supports evidence-based solutions, innovative ideas and strong collaborations to achieve access to health for all Coloradans.

Sincerely,

Handwritten signature of Kathryn A. Paul in black ink.

Handwritten signature of Ned Calonge, MD, in black ink.

Program Areas



ACHIEVING ACCESS TO HEALTH FOR ALL COLORADANS

The Colorado Trust is committed to work with others to ensure that all Coloradans have health coverage and access to a responsive and comprehensive health care system, including an adequate supply of health care providers who deliver quality, affordable health care services. To achieve this vision, The Trust supports grantees in developing and implementing policies, programs and services that expand health coverage and improve and expand health care.

HEALTH COVERAGE

» EXPAND HEALTH COVERAGE

Health insurance is important to health status, yet it is unaffordable for hundreds of thousands of lower- and middle-income Coloradans. Trust grant strategies to expand health coverage to more Coloradans include:

- Research, develop and implement policies that control costs and increase access
- Strengthen and align diverse voices for health reform, including consumers, providers, and business and policy leaders
- Increase public awareness and build a strong base of support for access to health.

» INCREASE OUTREACH & ENROLLMENT

A confusing and lengthy enrollment process for Medicaid and Children's Health Plan *Plus* (CHP+) results in many Coloradans who are eligible for coverage going without health care. Trust grant strategies to increase outreach and enrollment include:

- Simplify and streamline eligibility and enrollment processes for public insurance programs
- Develop and implement systems and policies to support continuous enrollment
- Strengthen and expand effective community outreach and enrollment programs.

Program Areas

HEALTH CARE

» IMPROVE HEALTH SYSTEMS

A complex, disjointed health care system results in costly waste and duplication of services, making it difficult to navigate and often resulting in poor health outcomes. Trust grant strategies to improve health systems include:

- Provide comprehensive preventive services in a timely manner
- Align coordinated chronic disease care with financial incentives for providers
- Strengthen the ability of health care sites and providers to meet quality standards of care.

» INCREASE AVAILABILITY OF CARE

Economic challenges to the safety-net system, insufficient availability of health care services across Colorado and a shortage of health care providers make it difficult for some Coloradans to receive health care. Trust grant strategies to increase the availability of care include:

- Strengthen the viability of health care delivery sites and providers to serve uninsured, and publicly and privately insured Coloradans
- Ensure adequate points of access across the state for preventive, primary, oral and behavioral care
- Expand education, recruitment and retention programs and policies to increase the number of health care providers available to serve rural Coloradans.

» ADDITIONAL PROGRAMS

The Trust continues to support a number of long-term programs that advance the health and well-being of Coloradans by integrating and coordinating health services, reducing racial and ethnic health disparities, strengthening immigrant integration and more.

» LEADERSHIP AWARD

In honor of John R. Moran, Jr.'s long-time leadership as President and CEO of The Colorado Trust, a special fund was established to acknowledge and encourage leadership within the nonprofit community. Since 2007, one current Trust grantee has been selected annually to receive \$25,000 in recognition of outstanding leadership to advance the health and well-being of the people within the community the grantee serves.

Expand Health Coverage



“

We want to help Coloradans get beyond political rhetoric and really understand what ... work remains to improve health coverage and care.

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NED CALONGE, MD
President and CEO
The Colorado Trust

IN 2010, support from The Colorado Trust helped to foster public dialogue, informed by careful research, to get past misunderstandings and misinformation that often prevent a diverse array of stakeholder groups from agreeing on solutions to improve health coverage and care. In November, a three-year effort to build the public will of Coloradans to help shape health care reform

decisions got underway. Through a mix of communications, advocacy, leadership, media and network-building approaches, the 14 grantee partners' diverse strategies are aimed at the same goal: help Coloradans become more aware of, better understand and support efforts to expand health coverage and to improve the health care system. *(Read the story of one grantee's early work toward this goal, page 6.)*

» COLORADO TRUST-SUPPORTED GRANTEEES WORKING TO EXPAND HEALTH COVERAGE

- Bighorn Leadership Development Program (Colorado State University)
- Building Public Will to Achieve Access to Health
- Colorado Area Health Education Centers (University of Colorado Foundation)
- Colorado Center on Law and Policy - Looking Forward Collaborative
- Colorado Children's Campaign
- Colorado Children's Campaign - Looking Forward Collaborative
- Colorado Coalition for the Medically Underserved – Advocacy for the Medically Underserved
- Colorado Coalition for the Medically Underserved – All Kids Covered Initiative
- Colorado Consumer Health Initiative
- Colorado Rural Health Center
- Colorado Fiscal Policy Institute (Colorado Center on Law and Policy)
- Colorado Health Institute – Colorado Household Survey
- Colorado Multi-ethnic Cultural Consortium
- Colorado Nonprofit Association – Fiscal Education Project
- Colorado Rural Health Center
- Innovation Network
- The Bell Policy Center
- University of Denver – State Fiscal Study

For additional information, please visit www.coloradotrust.org.

Expand Health Coverage

GRANTEE STORY: BUILDING PUBLIC WILL TO ACHIEVE ACCESS TO HEALTH

STAPLETON FOUNDATION & 2040 PARTNERS IN HEALTH



Alisha Brown
Director, Stapleton Foundation,
be well Initiative

IN 2005, the Stapleton Foundation launched its *be well* Health and Wellness Initiative as a direct response to residents' growing concern for health access and resource challenges in the Stapleton, Northeast Park Hill, Greater Park Hill, East Montclair and Northwest Aurora neighborhoods. One year later, the organization collaborated with the University of Colorado and 2040 Partners for Health to complete a research study (the "Taking Neighborhood Health to Heart" study, which has since become an organization) that revealed people in these neighborhoods suffer from many preventable chronic illnesses, such as diabetes, obesity, high cholesterol and hypertension. Today, *be well* works in collaboration with various partners – including 2040 Partners for Health – to develop, implement and evaluate strategies to reduce the spread of chronic illnesses and disease through grassroots community involvement in the advancement of health programs, policies and research projects.

This unique community collaborative has focused its efforts on encouraging people to participate in preventive measures, believing the best way to make connections and share information is through friends, family members and neighbors. "We've learned that people are more receptive to information when it comes from someone they can relate to. It's like going to a person of trust to guide them to the services," said *be well* Director Alisha Brown.

The Stapleton Foundation identifies residents to train as "block captains" those who have an interest in improving awareness and understanding about health and are committed to sharing information with their neighbors through one-on-one communications. The annual

Neighborhood Health Summit, hosted by 2040 Partners for Health, is a valuable opportunity to identify and recruit residents interested in being block captains. *be well* then hosts regular health screenings, and the block captains encourage their friends, family members and neighbors to attend.

"The philosophy is to use a grassroots effort through the neighborhoods we work in," said block captain project manager Frank Lucero. "We've advertised in local newspapers, through people who volunteered before, people at community groups. We've recruited over 40 block captains."

Helen Rigmaiden has been a block captain for three years. She has a background in health care administration and community organizing. When first approached by the Stapleton Foundation, she was excited about the synergy between the *be well* Initiative and her own experience.

continued



Helen Rigmaiden canvasses her neighborhood notifying people of upcoming health screenings.

Expand Health Coverage

GRANTEE STORY *continued*

She said, “I couldn’t believe what a good fit it was.” Helen said she knocks on doors throughout her neighborhood and gives people the flier advertising the upcoming health screening. “I explain what’s on the flier, that it’s a free program, they get the results that day and there will be providers there to assist them,” she said. People can be screened for blood pressure, height, weight, cholesterol, flexibility, strength and body mass index (BMI).

Alisha said the need for services has been so great that it led block captains to be interested in holding additional discussions about health reform and advocacy. “They’ve seen us get people to the screenings and then not be able to treat all of them, or people who just need behavioral counseling on preventive behavior and we have no way to do that. So these block captains want to make sure there are additional resources,” she said.

Block captains also screen residents for health insurance status. If they are found to be uninsured, residents can be referred to the Inner City Health Center where they are screened for eligibility for public health insurance such as Medicare, Medicaid or Children’s Health Plan *Plus*(CHP+). Inner City Health then can provide an ongoing continuum of care with a sliding scale fee for uninsured patients. As new benefits are implemented through the federal health reform law, block captains are receiving training to be able to refer residents to additional resources to potentially gain insurance coverage.

“We have to make it tangible. Even though people know there is something going on with health care and they hear the words ‘federal health care reform’, it doesn’t register until it impacts them directly,” Alisha explained. “So when our community members start to see the barriers that exist to them getting the care they need, they come back to our monthly meetings and start talking about the challenges, and they start asking what they can do to make change. Then we can provide them with tools to help address those challenges. That’s how we mobilize our community, ... and they in turn take the information and spread it back out to their networks, so it really grows.”

As part of The Trust’s public will-building effort, Stapleton Foundation is partnering with 2040 Partners for Health, and working with the 13 other grantee partners, to connect with and activate different networks, advocates and communities.

Alisha added, “There are just so many opportunities to work with others that we didn’t previously know about and it’s allowing us to expand our reach.”

Increase Outreach & Enrollment



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Community-based organizations are helping traditionally hard-to-reach populations enroll in public health insurance.

”

DEIDRE JOHNSON, MPPM
Program Officer
The Colorado Trust

IN 2010, Trust grant support helped to identify barriers and improve the often confusing, cumbersome and lengthy enrollment – and re-enrollment – process for Medicaid and Colorado Health Plan Plus (CHP+). This process results in many Coloradans who are eligible for public health insurance going without health care. A grant to the Colorado Department of Health Care Policy and Financing supported the agency’s efforts to streamline the state’s eligibility determination process, provide standardized training in filling out the new application and more

easily help Coloradans locate enrollment resources. Grant support to community-based or “trusted-hand” organizations that have the confidence of many traditionally hard-to-reach families also is increasing enrollment. These after-school programs, clinics and agencies serving low-income families, homeless families and abused children are now also providing assistance to families in enrolling in public health insurance and accessing health care services.

(Read the story of one grantee’s progress on this front, page 9.)

» COLORADO TRUST-SUPPORTED GRANTEES WORKING TO INCREASE OUTREACH AND ENROLLMENT

- Colorado Department of Health Care Policy and Financing – Outreach Specialist
- County of Boulder – Colorado PEAK
- Expanding Outreach and Enrollment for Children & Youth
- Identifying Outreach and Enrollment Resources & Gaps
- University of Colorado Denver Health Sciences Center, Department of Health and Behavioral Sciences

For additional information, please visit www.coloradotrust.org.

Increase Outreach & Enrollment

GRANTEE STORY: EXPANDING OUTREACH & ENROLLMENT FOR CHILDREN AND YOUTH

COLORADO COALITION FOR THE HOMELESS

DONNA Eurich arrived at Denver Union Station with her husband and two children, both of whom needed to see a doctor.

“When we first got off the train, we had no place to go. We had a friend that was supposed to let us stay there and then it didn’t work out, so we were out roaming the streets,” she said. “We had no place to go and didn’t even know where we were. To just go try to apply for Medicaid to get the help I needed for my children, there was just no way. I couldn’t have done it without Amanda.”

Amanda Wiatr is the Children’s Service Coordinator with the Colorado Coalition for the Homeless. The nonprofit organization is one of the 19 community-based agencies that received multi-year grants from The Colorado Trust to help enroll traditionally hard-to-reach populations of eligible but uninsured children. She recounted that when she met the Eurichs, they were stranded in Denver. The children both urgently needed medical attention, but their birth certificates were needed to enroll them in Medicaid. Donna had official copies of them, but they were in her luggage, which was stuck at the train station. Donna had no way to pick up the luggage, and it was nearing the end of the 30 days that Union Station would hold the bags.

“Something that seems that small to someone who has a vehicle is really a huge obstacle for these families,” Amanda said. “They had no idea how to overcome that situation. But it wasn’t that difficult with the resources we have. We took our van and picked up [Donna], explained the situation to Union Station and they released the bags at no charge. With the



Donna Eurich with her two children at Denver’s Union Station.

birth certificates we got them enrolled in Medicaid.”

These community-based organizations provide eligibility screening and application assistance and help their clients with reenrollment, as well as encouragement and help to parents in utilizing their insurance benefits for well-child visits and recommended health screenings. Between January 2009 and October 2010, approximately 26,000 individuals received outreach services, and more than 16,750 applied for Medicaid or CHP+ with the assistance of these grantees.

“For us, it’s meant working within our organization and with other partners to be more intentional about identifying folks. We now have a process in place to ensure that each family who comes to us for services is asked if they have health insurance. When they don’t have Medicaid, now everyone here knows to refer them to me,” Amanda said.

continued



Amanda Wiatr
*Children’s Service
Coordinator
Colorado Coalition
for the Homeless*

Increase Outreach & Enrollment

GRANTEE STORY *continued*

Amanda said that many families struggle just to obtain copies of their children's birth certificates to apply for CHP+ and Medicaid. "A \$20 charge to get an official copy can be an impossible barrier for them, but with this grant, we can help people order and expedite them so they get the help they need right away, and that's been huge," she said.

Through an additional grant provided by The Colorado Trust, the state's Department of Health Care Policy and Finance (HCPF) community outreach specialist provided training, certification and technical assistance to community-based enrollment assistance sites across the state. Amanda is now trained to determine a family's income and eligibility, and can contact HCPF should a situation arise where she doesn't quite know what to do. She also is certified to verify official documents like birth certificates so that families she works with don't have to go to county offices for verification.

Amanda said other common barriers she sees include people simply forgetting that they have to go through a regular renewal process, or they just moved and don't know where to go, or they have a lack of proper documentation. "So it's helping remove barriers and direct them. It's educating clients about how to use those benefits, how to get a primary care physician and choose a plan so they can use the benefits and then also how to keep their benefits. With redeterminations every year, it's easy to fall off the rolls, especially in populations who may move every year.

"Several of our families are going from shelter to shelter and have no actual address to put on an application," Amanda said. "So I can use our address and then let them know when we get mail for them."

By removing these barriers and providing assistance, the Colorado Coalition for the Homeless and other community-based organizations are helping to enroll children like the Eurichs in publicly-funded health insurance and increase access to care.

"Despite us going from one place another, [Amanda] just had everything sent to her so that we were able to get Medicaid," Donna said. "I was so happy to be able to take my kids to the doctor, I just can't tell you what a relief that was. ...it made all the difference in the world to my family."

Improve Health Systems



“

Somebody really needs to be looking at the whole person to see that they get the best care they can.

”

MARJIE HARBRECHT, MD
Chief Executive Officer,
HealthTeamWorks

IN 2010, The Colorado Trust supported strategies to coordinate the delivery of health care services across multiple providers and health care settings, including primary, specialty, behavioral and oral care; align financial incentives that reward providers for achieving improved health outcomes; and provide children with a usual source of care. We know that children who receive well-child visits or timely acute care are more likely to do well in school and significantly improve their chances of avoiding long-term health problems.

One such example is that of the Colorado Children’s Health Access Program. Through the dedicated efforts of this nonprofit organization, nearly 700 physicians in 32 counties now provide a “medical home” for publicly insured children. This means that 96% of Colorado’s physicians in private pediatric practices now offer such care, resulting in significantly improved access to a usual source of primary care for about 130,000 children in Colorado. *(Read one grantee’s story about improved access to dental care, page 12.)*

» COLORADO TRUST-SUPPORTED GRANTEES WORKING TO IMPROVE HEALTH SYSTEMS

- Cavity Free at Three
- Cavity Free at Three – Evaluation
- Center for Improving Value in Health Care – Colorado All-Payer Claims Database Planning Grant
- Colorado Center for Nursing Excellence – Care and Career Transitions
- Colorado Children’s Healthcare Access Program
- Colorado Children’s Healthcare Access Program – Healthy Mothers Project
- Colorado Department of Health Care Policy and Financing – System Improvements
- HealthTeamWorks – Patient-centered Medical Home Pilot Evaluation
- HealthTeamWorks – Patient-centered Medical Home Pilot
- Office of the Colorado Governor
- Regis University – Curriculum for Doctor of Nursing Practice
- Regis University – Doctor of Nursing Practice Program (DNP)

For additional information, please visit www.coloradotruster.org.

Improve Health Systems

GRANTEE STORY

CAVITY FREE AT THREE



Karen Savoie
*Director of Education
Cavity Free at Three*

MANY children endure serious dental problems simply because their parents don't know to take them to a dentist beginning at age one, and their other health care providers don't typically concern themselves with oral health. Yet dental caries (cavities in the primary teeth of children) is a preventable disease. The Cavity Free at Three program trains primary care providers to conduct infant oral health exams, apply fluoride varnish, educate parents and make the all-important referral to a dentist.

Since its inception in 2006, the program has quickly spread across the state, providing training to more than 600 primary care providers, health educators and public health practitioners. To date, more than 10,000 children have received Cavity Free at Three services, and 13,000 fluoride varnish kits have been distributed.

Karen Savoie, Director of Education with Cavity Free at Three, said the program underscores that children's oral health is a shared responsibility across medical disciplines, and it equips health care providers with the ability to provide total patient care. For example, Denver Health has integrated the Cavity Free at Three training into its eight primary care clinics, which serve 40% of the children in Denver, most of whom have public health insurance. Of Denver Health's 3- to 4-year-old patients, nearly 70% have cavities or pre-carious lesions, highlighting the need for such primary prevention services.

"We have dental providers at Denver Health, but many of our families didn't know that they could or should access a dental provider before their children are 3," said Patty Braun, MD, MPH,

Associate Professor of Pediatrics at Denver Health, who also is the program evaluator. After its initial participation in Cavity Free at Three, Denver Health added policies and procedures that physicians should provide basic dental services, and made childhood caries a quality improvement indicator. "Just doing that helped remind providers and emphasized the importance."

Daniela Tiscareno's 6-year-old son and 3-year-old daughter have received oral exams and fluoride treatment from Dr. Braun, and they now brush their teeth twice a day and go to the dentist regularly. "My mom was one of those parents who didn't know that kids should go [to a dentist]. She thought that cavities would go away when the baby teeth fall out," said Daniela. Through Cavity Free at Three, Daniela knows how important early dental care is to the overall health of her children. "I'm very proud that my son and daughter don't have any cavities."

continued



Associate Professor of Pediatrics, Dr. Patty Braun, talks with Daniela Tiscareno about proper dental practices for her 3-year-old daughter.

Improve Health Systems

GRANTEE STORY *continued*

Dr. Braun said the program also has helped to increase providers' knowledge about and treatment of early childhood dental problems. Now, said Dr. Braun, "we intend to prevent cavities and in doing so, we will save a lot of emergency room visits, pain and costs. The providers have always been aware that our population has a lot of dental disease, but they didn't know what to do about it. Now they do, and I think it's satisfying to them to see they have an impact."

Cavity Free at Three has also been instrumental in helping to change the Colorado Department of Health Care Policy and Financing's rules so that physicians and public health practitioners can bill Medicaid for preventive oral health services in young children. This simple change resulted in a dramatic increase in dental services for children under age 3.

"We are actually establishing processes within the primary care provider network to expand outreach and bring oral health into the protocol for well child visits," Karen said. "Especially in parts of Colorado where there are no dental providers available, [kids] are getting oral health preventive services in the primary health setting. The health system really has a need there. These primary care providers want to do something and now they have the ability to help direct families to make the needed changes for better oral health."

Cavity Free at Three receives joint funding support from The Caring for Colorado Foundation, Colorado Health Foundation, Delta Dental Foundation of Colorado, Rose Community Foundation, Kaiser Permanente and The Colorado Trust.

Increase Availability of Care



“

We have every reason to be optimistic that our collective activities will increase the number of health professionals across our state.

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LOU ANN WILROY
Chief Executive Officer
Colorado Rural Health Center

IN 2010, The Colorado Trust supported efforts to help meet the immediate needs of overwhelmed safety-net clinics called upon to serve increasing numbers of patients.

Other Trust-supported strategies sought to alleviate health care provider shortages and strengthen the health care system through research, the development of policy recommendations and education programs and supports.

Through loan forgiveness programs, faculty education training and new programming, Trust grants place an emphasis on training and retaining health care professionals across all disciplines to provide care in rural areas of the state. For example, the Area Health Education Centers provided 62 graduate-level health professions scholarships, and 81 students have been admitted to the Rural Track Program. *(Read how CU is working to educate health care professionals to serve rural Colorado, page 15)*

» COLORADO TRUST-SUPPORTED GRANTEES WORKING TO INCREASE AVAILABILITY OF CARE

- Build Initiative
- Center for Research Strategies
- ClinicNET
- Colorado Area Health Education Centers (University of Colorado Foundation)
- Colorado Center for Nursing Excellence
- Colorado Department of Public Health and Environment – Colorado Health Service Corps
- Colorado Department of Public Health and Environment, Office of Primary Care – Colorado Health Service Corps Educational Loan Forgiveness
- Colorado Health Institute
- Colorado Health Institute – Primary Care Workforce
- Colorado Health Professions Workforce Policy Collaborative
- Colorado Rural Health Center – Colorado Health Professions Workforce Policy Collaborative
- Colorado Rural Health Center – Colorado Provider Recruitment Program
- Colorado Rural Health Center – Colorado Rural Outreach Program
- Early Childhood Health Integration
- Early Childhood Health Integration – Evaluation
- Expanding Children’s Access to Health Care
- SET of Colorado Springs – SET Family Medical Clinics
- The Rocky Mountain Youth Clinics

For additional information, please visit www.coloradotrust.org.

Increase Availability of Care

GRANTEE STORY

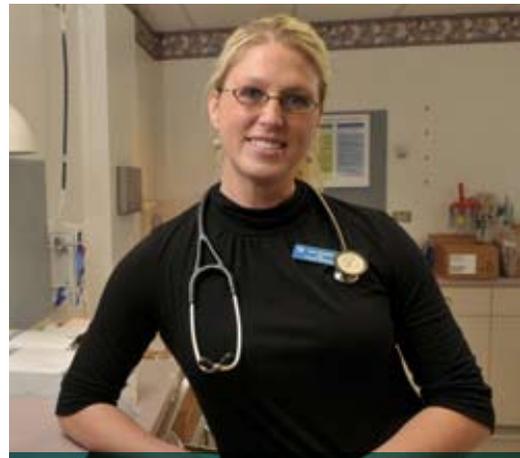
UNIVERSITY OF COLORADO RURAL TRACK

SINCE its inception in 2005, the University of Colorado's Rural Track has expanded its programming beyond the walls of the medical school. Where the program once worked only with medical students, it now consists of students from a variety of disciplines, including pharmacy, physician's assistant, nursing, public health, psychology and dentistry, and offers a variety of programs focused on delivering health care in rural communities.

"We're trying to give students the knowledge and reinforcement that when you're in rural practice, you are responsible for all of people's health care," said Mark Deutchman, MD, Rural Track Director. "The medical home idea is not strange to rural providers – they've been doing it for years: trying to coordinate care, follow up with patients – and so our students experience an emphasis on that."

In between students' first and second years, they now have the opportunity to participate in what Dr. Deutchman calls a week-long "invasion" of a rural town: Rural Immersion Week.

"We place students from four different disciplines into a rural community and break into groups and work through a host of rural health topics," said Jack Westfall, MD, Associate Dean for Rural Health and Colorado AHEC (Area Health Education Center) Director in the Department of Family Medicine. "Because in a rural community, health care interfaces with every other aspect of the community – education, the justice system, behavioral health, acute care – the health care system runs right into and overlaps all those things."



Casey Beardsley is in her final year of the Child Health Associate/Physician Assistant program at the University of Colorado.

Each year the program chooses a different rural location. Casey Beardsley, who is in her final year of the Child Health Associate/Physician Assistant program at the University of Colorado, participated in Rural Immersion Week during summer 2009, when the program just happened to be in her hometown.

"I'm from Sterling, so being from a rural area, I knew what it was like, and I really enjoy rural life. Knowing there is a need for professionals in rural areas, I knew I'd be interested and applied for Rural Immersion Week," she said. "I got to work with students from all the other disciplines, and I learned so much ... I did my rotation for four months in Sterling and through that rotation got a job offer. I am seriously considering going back there for the long term."

continued



Mark Deutchman, MD
Rural Track Director
University of Colorado

Increase Availability of Care

GRANTEE STORY *continued*

University of Colorado School of Nursing Professor Amy Barton, PhD, RN, said the Rural Immersion Week experience has provided students in the nursing program with real life evidence of how interdisciplinary training supports emerging new models of care delivery, like medical homes, accountable care organizations and interdisciplinary primary care.

“The fact of the matter is that, in order to achieve patient care quality, health professionals have to work together as a team,” Dr. Barton said. “That’s why we’ve tried to come up with a viable and professional curriculum that facilitates students working together in both rural and underserved urban areas.” Indeed, the School of Nursing is working to develop its own rural program, modeled after the School of Medicine’s successful Rural Track.

Dr. Deutchman credited the University for promoting interdisciplinary work. Classrooms on the campus are shared between all disciplines. Another way the school brings the various disciplines together is through Rural Grand Rounds. Every month the Rural Track brings together 80-100 interdisciplinary students for a lecture and in-depth discussion.

“It’s really a no brainer for a rural provider—you have to know what people do in all different areas. We’re trying to demystify the idea of what it’s like to live and work in a rural area and show students that they could do that,” he said.

Additional Programs



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*Only a healthy child
has the ability to learn,
to develop and,
ultimately, to achieve
his or her full potential.*

”

NED CALONGE, MD
President and CEO
The Colorado Trust

SINCE 1985, The Colorado Trust has worked closely with nonprofit organizations across the state to advance the health and well-being of the people of Colorado. The Trust continues to support a number of such programs, including:

- Integrated mental health care
- Homelessness prevention
- Immigrant integration
- Healthy aging, and more.

» ADDITIONAL PROGRAMS RECEIVING SUPPORT FROM THE COLORADO TRUST

- Advancing Colorado's Mental Health Care
- Colorado Center for Nursing Excellence – Expanding Advanced Nursing Skills for Leading Quality Initiatives
- Colorado Center for Nursing Excellence – Nurse Workforce
- Colorado Health Institute
- Equality in Health
- Equality in Health – Evaluation
- Healthy Aging
- Homelessness Prevention
- Immigrant Integration
- Immigrant Integration – Evaluation
- John R. Moran, Jr. Health Scholarships
- John R. Moran, Jr. Leadership Award
- Office of Suicide Prevention – Gatekeeper Training Program
- Partnerships for Health
- Partnerships for Health – Evaluation
- Rural Philanthropy Days
- University of Colorado Denver, College of Nursing – Quality and Safety Education for Nurses (QSEN)

For additional information, please visit www.coloradotrust.org.

Additional Programs

JOHN R. MORAN, JR. LEADERSHIP AWARD

ROCKY MOUNTAIN YOUTH CLINICS



Larry Wolk, MD
*Executive Director
Rocky Mountain Youth Clinics*

THE Colorado Trust announced Rocky Mountain Youth Clinics (RMYC) as the recipient of its 2010 John R. Moran, Jr. Grantee Leadership Award. The annual award of \$25,000 is made in recognition of exemplary leadership by a current grantee of The Colorado Trust and was used by RMYC to support its ongoing efforts to bring medical and dental services to Colorado children and adolescents who would otherwise have no access to care.

RMYC began as a single clinic in 1996, providing 2,000 patient visits per year. Today, it has grown into a network of three traditional clinics, two mobile clinics and 40 community- and school-based settings that provide more than 55,000 patient visits per year, making RMYC one of the largest pediatric safety-net providers in the United States. While the majority of the patients are seen at clinics in Denver, Aurora and Thornton, RMYC also operates smaller, satellite clinics through partnerships with other community organizations statewide – from homeless shelters and treatment centers, to schools and community agencies. Over the past two years, RMYC has served more than 24,000 unduplicated patients, totaling 106,200 visits.

Among three of its school-based health centers, the Judy Edberg Kids Clinic at Crawford Elementary School is particularly successful. Since opening its doors two

years ago, it has increased by 35% the number of medical, dental and mental health visits completed. That translates to 2,539 visits for the 2009-2010 school year. Due to growing need in Aurora Public Schools, a second school-based health center opened for three days a week in September 2010 at Laredo Elementary, and had 472 patients in its first six months. RMYC also operates two Ronald McDonald Care Mobiles that allow the agency to bring medical and dental services to nearly 3,300 children and adolescents annually in local communities who would otherwise have no access to care. An additional care mobile provides services to seven Denver Public Schools (DPS) and nine Aurora Public middle and high schools.



Congratulations to the entire staff of Rocky Mountain Youth Clinics for their exemplary leadership in the community.

Celebrating **25**
YEARS

Connecting Communities
for a Healthy Colorado



JUNE 2010 marked the 25th anniversary of when *The Colorado Trust* first opened its doors.

**FROM ITS
INCEPTION,**

*The Colorado Trust has
sought to understand*

**THE STATE'S
MOST PRESSING
HEALTH NEEDS,**

*and to develop grant
strategies that address
many of those needs.*

THE Colorado Trust was established from the proceeds of the sale of the PSL Healthcare Corporation (Presbyterian/Saint Luke's Medical Center) which, at the time, was the region's largest private health care provider. The original \$191 million endowment has translated into nearly \$347 million in grants made to more than 2,000 grantees in support of various efforts to advance the health and well-being of all Coloradans across Colorado's 64 counties. (Please also see "A History of The Colorado Trust," by John R. Moran, Jr., former President and CEO of the foundation.)

From its inception, The Colorado Trust has sought to understand the state's most pressing health needs, and to develop grant strategies that address many of those needs. In 1988, The Trust commissioned its first statewide poll to capture Coloradans' health care experiences, concerns and attitudes. A number of the findings of that poll are remarkably similar to those in a poll we commissioned in 2010. For example, in 1988 and 2010, Coloradans reported cost to be their number one concern with regard to the state's health care system. And in 1988, nearly a quarter of

Coloradans – 570,000 – were not covered by health insurance. In 2010, more Coloradans – an estimated 970,000 – were uninsured, though they represented a slightly smaller percentage (19%) of our overall population.

While much work remains to provide adequate health coverage to all Coloradans and to ensure access to a health care system that delivers quality, affordable care, significant improvements also have been realized. Such successes include the state's ability to better cover children through the public health insurance program (the Child Health Plan Plus, which began in 1997), to the promise of covering 100,000+ uninsured Coloradans as a result of the Colorado Healthcare Affordability Act and, of course, the realization of federal health care reform.

To acknowledge the milestone of its 25th year, The Trust granted \$250,000 to strengthen the work of 10 nonprofit organizations and groups working across Colorado to improve health care for children. In announcing the grant recipients, Colorado Trust President and CEO Ned Calonge, MD, noted, "One of the top priorities within The

Celebrating **25**
YEARS

**25TH ANNIVERSARY
GRANTEES:**

- All Kids Covered 2010
- Bright Futures for Early Childhood and Families
- Colorado Medical Home Initiative
- Denver Health – South High School’s School-based Health Center
- Eagle Care Medical Clinic
- Family Medicine Center
- Northwest Colorado Visiting Nurse Association
- Pueblo City-County Health Department
- Southwest Open School’s School-based Health Center
- Summit Community Care Clinic

Colorado Trust’s commitment to achieve access to health for all Coloradans is seeing that every child in our state has the opportunity to grow up healthy. This is particularly important given the high rate of children living in poverty, and our state’s challenging fiscal situation.”

Throughout the year, we also shared stories of change and accomplishments (shown below) that demonstrate remarkable gains made by dedicated individuals, organizations and communities in improving Coloradan’s health and well-being. While the organizations, locations and specific issues being addressed vary from story to story, the common denominator is collaboration and partnership. From its earliest days, The Colorado Trust has been committed to helping people work together. We know that changing complex systems, policies and practices requires the efforts of many.

We look forward to working with many more dedicated individuals and groups in the years ahead in our shared commitment to making access to health a reality for all Coloradans.

COLORADO HEALTH INSTITUTE



Sheila Bugdanowitz



John R. Moran, Jr.



Chris Wiant

In 2002, the Caring for Colorado Foundation, Rose Community Foundation and The Colorado Trust worked together to create an independent entity to serve as an impartial source of reliable and relevant health related information to policymakers, funding organizations, health planners and providers, the business and nonprofit communities and the media. Based on extensive research, the three foundations collectively provided \$5.7 million in start-up support for the initial five years of the Institute. Today, CHI is a well-established, trusted source of health policy information and a valuable resource to our state.

EARLY CHILDHOOD COUNCIL



Crying, screaming, kicking, fighting or defiance are often the only ways a baby or toddler has to signal that something is wrong or that a social, emotional or physical need is unmet. Such behavior can be trying for parents, caregivers or classroom teachers and have a negative impact on everyone involved. The Early Childhood Council of Larimer County has engaged and united a diverse community of parents and service providers – including child care professionals, educators, social workers, and developmental and mental health specialists – to pursue a common goal: changing the culture and systems to address the mounting social and emotional needs of the region’s children. Similarly, more than two dozen early childhood councils are working diligently to help improve health outcomes for Colorado children with \$5 million in grant support over five years from The Colorado Trust.

HEALTH CARE WORKFORCE



Nurses, doctors and other health professionals are working together with higher education institutions, state health and labor agencies and others to collectively address the long-standing problem of too-few health care providers available to care for Coloradans. With more than 30 members, the Colorado Health Professions Workforce Policy Collaborative develops policy solutions to close the health professions gap. To strengthen and sustain this grassroots effort, The Colorado Trust awarded a \$205,000 grant to the Colorado Rural Health Center (Colorado’s nonprofit state office of rural health) to lead the Collaborative.

HEALTHY COMMUNITIES



The citizen-led Healthy Mountain Communities (HMC) began nearly 20 years ago with seed funding from The Colorado Trust through its first-ever statewide grantmaking initiative, the Colorado Healthy Communities Initiative. HMC was initially established to gather data to help increase awareness and understanding about community needs and challenges, and to forge regional connections to resolve broad health issues and improve the overall quality of life for Roaring Fork Valley residents. Today, citizens from across nine communities in the Roaring Fork Valley (Aspen to Parachute) continue to work together, with the latest example of their combined efforts resulting in the realization of the energy-efficient Third Street Center, home to more than two-dozen nonprofit organizations.

MEDICAL HOME PILOT



The “medical home” model of care is being explored nationwide as a possible means to improve the provision of health care services while containing cost. With assistance from The Colorado Trust, HealthTeamWorks (formerly Colorado Clinical Guidelines Collaborative) has led the Colorado Multi-payer Patient-centered Medical Home pilot involving seven health plans (United, Anthem, Aetna, Humana, CIGNA, Colorado Medicaid and CoverColorado), 16 medical practices, employers, hospitals, primary care societies and many others. As well, this pilot is being evaluated by the Harvard School of Public Health to determine the effect on quality, cost trends and satisfaction for patients and their health care team.

NURSE FAMILY PARTNERSHIP



Dr. David Olds has devoted his career of more than 30 years to carefully researching effective means to ensure that the babies of at-risk mothers are born healthy, and that their caregivers are prepared to successfully parent them. The Trust provided support to Dr. Olds for his Denver-based research and in translated his extensive evidence-base into an effective program, the Nurse-Family Partnership. As well, The Trust supported Invest in Kids in implementing the program in communities across the state, having now reached an estimated 12,000 children and their families. This success help lead to President Obama recommending that the national Nurse-Family Partnership be expanded to serve every low-income first-time mother in the country.

POSITIVE YOUTH DEVELOPMENT



When the funding for Ignacio’s Teen Court was cut in 2005, eighth grader and Teen Court “lawyer” Anthony Porambo turned his disappointment into action. While some in this small southwestern Colorado town doubted his ability to rekindle the peer justice program that gives youth offenders a second chance, others listened and actively encouraged him. Porambo’s determination sprouted from a commitment to youth engagement that was just beginning to take root in La Plata County, partly as a result of The Colorado Trust’s early support of efforts to strengthen families and communities. Between 1996 and 2002, The Colorado Trust, in partnership with Search Institute, initiated the Assets for Colorado Youth (ACY) program to nurture the development and well-being of children and teens.

RURAL SAFETY NET CLINIC



It was almost 20 years ago that a small group of committed people representing various agencies including public health, mental health, hospital, social services, private business and other entities began working together to bring primary health care to all residents of Prowers County. As one of the grantees of The Trust's first statewide grantmaking initiative, Colorado Healthy Communities, the High Plains Community Health Center was created and continues today to serve as a leader in providing health care for the un- and under-insured, migrants and many others in southeastern Colorado.

SCHOOL-BASED HEALTH CENTER



The Northside Child Health Center in Montrose is a strong example of the effectiveness of school-based health centers, offering primary physical, behavioral and dental health care services. During the 2009-2010 school year, 45 centers in Colorado served more than 26,000 youth. The majority of these centers operate in schools where a high percentage of the student population is either uninsured or underinsured. Students are never turned away for an inability to pay for their care and most sites provide enrollment assistance with Medicaid and the Children's Health Plan *Plus* (CHP+). As well, these centers decrease parents' time away from work and students' time away from the classroom, and lower the rates of hospitalizations and inappropriate emergency room use.

YOUTH VIOLENCE PREVENTION



In response to recommendations from the Columbine Commission, The Colorado Trust funded the startup and development of Safe2Tell. This program provides teens, young adults, parents and school employees with a safe, anonymous means to inform the appropriate school and law enforcement authorities about the possibility of violent situations. Since 2004, more than 8,000 calls have come into its Colorado State Patrol-operated call center, resulting in more than 2,565 "tips" from 158 Colorado cities and 56 counties. These calls have alerted local law enforcement and school officials to hundreds of threats or incidents involving everything from bullying and fights, to domestic violence, substance abuse and suicide prevention. As well, Safe2Tell has provided insights and guidance to two dozen other states wanting to replicate this strong program.

Grants



Achieving the vision of access to health for all Coloradans will only be accomplished by the efforts of many. This level of change requires a collaborative effort by individuals, public and private organizations, and government.

*Sign up to be
automatically notified
by email of future
funding opportunities.
www.coloradotrust.org*

THE Colorado Trust's strategic grantmaking supports the development of a coordinated system of policies, programs and services that:

- Expand health coverage, and
- Improve and expand health care.

The Trust issues Requests for Proposals (RFP) and welcomes responses from nonprofit organizations and governmental entities across Colorado. When a competitive funding opportunity is available, a detailed RFP with related instructions and specific application deadlines is posted to our website.

On occasion, The Trust also invites organizations that are focused on strategies specific to achieving access to health to submit individual, non-competitive proposals.

Note: The Colorado Trust does not accept unsolicited requests for funding.

» ELIGIBILITY

In response to an RFP or an individual invitation issued by The Trust, the following types of organizations are eligible to apply for grants:

- Nonprofit organizations that are exempt under Section 501(c)(3) of the Internal Revenue Code and are classified as "not a private foundation" under Section 509(a)
- Independent sponsored projects of a nonprofit 501(c)(3) organization acting as a fiscal agent
- Government and public agencies.

The Colorado Trust does not make grants for the following:

- Political campaigns or voter registration drives
- Capital funding for the purchase, construction or renovation of any facilities or other physical infrastructure
- Operating deficits or retirement of debt
- Indirect allocations (excluding fiscal agent fees)
- Religious purposes.

GRANTEES

*For additional
information about
all grantees of
The Colorado Trust
please visit
www.coloradotrust.org*

» EXPAND HEALTH COVERAGE

- Bighorn Leadership Development Program (Colorado State University)
- Building Public Will to Achieve Access to Health
- Colorado Area Health Education Centers (University of Colorado Foundation)
- Colorado Center on Law and Policy – Looking Forward Collaborative
- Colorado Children’s Campaign
- Colorado Children’s Campaign – Looking Forward Collaborative
- Colorado Coalition for the Medically Underserved – Advocacy for the Medically Underserved
- Colorado Coalition for the Medically Underserved – All Kids Covered Initiative
- Colorado Consumer Health Initiative
- Colorado Rural Health Center
- Colorado Fiscal Policy Institute (Colorado Center on Law and Policy)
- Colorado Health Institute – Colorado Household Survey
- Colorado Multi-ethnic Cultural Consortium
- Colorado Nonprofit Association – Fiscal Education Project
- Colorado Rural Health Center
- Innovation Network
- The Bell Policy Center
- University of Denver – State Fiscal Study

» INCREASE OUTREACH & ENROLLMENT

- Colorado Department of Health Care Policy and Financing – Outreach Specialist
- County of Boulder – Colorado PEAK Expanding Outreach and Enrollment for Children & Youth
- Identifying Outreach and Enrollment Resources & Gaps
- University of Colorado Denver Health Sciences Center, Department of Health and Behavioral Sciences

» IMPROVE HEALTH SYSTEMS

- Cavity Free at Three
- Cavity Free at Three – Evaluation
- Center for Improving Value in Health Care – Colorado All-Payer Claims Database Planning Grant
- Colorado Center for Nursing Excellence – Care and Career Transitions
- Colorado Children’s Healthcare Access Program
- Colorado Children’s Healthcare Access Program – Healthy Mothers Project
- Colorado Department of Health Care Policy and Financing – System Improvements
- HealthTeamWorks – Patient-centered Medical Home Pilot Evaluation
- HealthTeamWorks – Patient-centered Medical Home Pilot
- Office of the Colorado Governor
- Regis University – Curriculum for Doctor of Nursing Practice

» INCREASE AVAILABILITY OF CARE

- Build Initiative
- Center for Research Strategies
- ClinicNET
- Colorado Area Health Education Centers (University of Colorado Foundation)
- Colorado Center for Nursing Excellence
- Colorado Department of Public Health and Environment – Colorado Health Service Corps
- Colorado Department of Public Health and Environment, Office of Primary Care – Colorado Health Service Corps Educational Loan Forgiveness
- Colorado Health Institute
- Colorado Health Institute – Primary Care Workforce
- Colorado Health Professions Workforce Policy Collaborative

continued

GRANTEES *continued*

- Colorado Rural Health Center – Colorado Health Professions Workforce Policy Collaborative
- Colorado Rural Health Center – Colorado Provider Recruitment Program
- Colorado Rural Health Center – Colorado Rural Outreach Program
- Early Childhood Health Integration
- Early Childhood Health Integration – Evaluation
- Expanding Children’s Access to Health Care
- SET of Colorado Springs – SET Family Medical Clinics
- The Rocky Mountain Youth Clinics

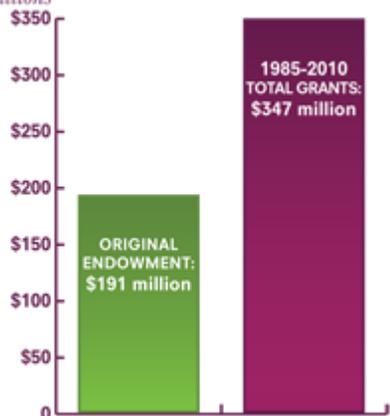
» **ADDITIONAL PROGRAMS**

- Advancing Colorado’s Mental Health Care
- Colorado Center for Nursing Excellence – Expanding Advanced Nursing Skills for Leading Quality Initiatives
- Colorado Center for Nursing Excellence – Nurse Workforce
- Colorado Health Institute
- Equality in Health
- Equality in Health – Evaluation
- Healthy Aging
- Homelessness Prevention
- Immigrant Integration
- Immigrant Integration – Evaluation
- John R. Moran, Jr. Health Scholarships
- John R. Moran, Jr. Leadership Award
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Financials



In millions



The Colorado Trust's original endowment of \$191 million was received from the sale of the PSL Healthcare Corporation in 1985. From its inception through 2010, grants totaling nearly \$347 million have been made to grantees across Colorado.

\$19.8 million in grants were paid in 2010 with support being provided to more than 200.

» **TOTAL ASSETS:**

	2010	2009
	<u>\$410,863,387</u>	<u>\$387,770,144</u>

The Colorado Trust strives to conduct its financial affairs according to the highest ethical standards and to maintain or increase the real value of Trust investments in perpetuity to serve the needs of the people of Colorado today and into the future.

THE COLORADO TRUST STATEMENTS OF FINANCIAL POSITION | DECEMBER 31, 2010 AND 2009

ASSETS:	2010	2009
Cash and cash equivalents	\$303,855	\$141,522
Accounts receivable	319	—
Contributions receivable	1,334,000	—
Interest and real estate distributions receivable	1,191,079	1,011,816
Prepaid expenses	14,792	39,859
Investments	407,246,983	385,846,674
Cash held in custody for others	93,109	124,549
Property and equipment:		
Building improvements	18,872	10,068
Machinery and equipment	585,787	452,595
Furniture and fixtures	<u>351,810</u>	<u>351,810</u>
	956,469	814,473
Accumulated depreciation	(666,975)	(579,250)
Property and equipment, net	289,494	235,223
Investments held under deferred compensation agreements	389,756	370,501
TOTAL ASSETS	<u>\$410,863,387</u>	<u>\$387,770,144</u>

continued

Financials

LIABILITIES & NET ASSETS:	2010	2009
Accounts payable and accrued expenses	\$52,531	\$49,108
Other accrued liabilities	249,412	352,558
Deferred gain on sale-leaseback	4,264,019	4,513,619
Cash held in custody for others	93,109	124,549
Grants payable	14,167,098	20,615,819
Deferred compensation	389,756	370,501
Deferred excise tax payable	388,759	–
Excise tax payable	<u>43,995</u>	<u>91,978</u>
TOTAL LIABILITIES	19,648,679	26,118,132
Net assets:		
Unrestricted	389,880,708	361,652,012
Temporarily restricted	<u>1,334,000</u>	<u>–</u>
TOTAL LIABILITIES & NET ASSETS	<u>\$410,863,387</u>	<u>\$387,770,144</u>

THE COLORADO TRUST STATEMENTS OF ACTIVITIES AND CHANGES IN NET ASSETS | DECEMBER 31, 2010 AND 2009

REVENUES, GAINS & SUPPORT:	2010	2009
Interest and dividend income	\$8,759,325	\$9,548,444
Net realized and unrealized gain on investments	38,912,522	68,689,907
Income from real estate activities	746,225	1,299,607
Other income	57,011	15,107
Investment management fees	(976,868)	(699,198)
Net assets released from restriction	<u>666,000</u>	<u>–</u>
TOTAL UNRESTRICTED REVENUES, GAINS & SUPPORT	<u>\$48,173,215</u>	<u>\$78,853,867</u>

EXPENSES:	2010	2009
Program services:		
Access to Health	\$11,727,168	4,628,755
Accessible and Affordable Health Care Initiatives	421,851	6,458,541
Strengthening Families Initiatives	262,060	573,462
Other grant expenses	3,200,788	3,718,378
Grant administration	<u>2,772,632</u>	<u>2,698,589</u>
TOTAL PROGRAM SERVICES	*\$18,384,499	**\$18,077,725
Management and general	1,080,732	657,571
Excise tax expense	<u>479,288</u>	<u>37,892</u>
TOTAL EXPENSES	<u>\$19,944,519</u>	<u>\$18,773,188</u>

continued

Financials

continued from previous page

Increase in unrestricted net assets	<u>28,228,696</u>	<u>60,080,679</u>
TEMPORARILY RESTRICTED SUPPORT:	2010	2009
Contributions	2,000,000	—
Net assets released from restriction	<u>(666,000)</u>	<u>—</u>
Increase in temporarily restricted net assets	1,334,000	—
Change in Net Assets	29,562,696	60,080,679
Net Assets at Beginning of Year	<u>361,652,012</u>	<u>301,571,333</u>
NET ASSETS AT END OF YEAR	<u>\$391,214,708</u>	<u>\$361,652,012</u>

* Accrual method; actual cash payments for 2010 grants totaled \$19,789,822.
** Accrual method; actual cash payments for 2009 grants totaled \$21,614,060.

» ADDITIONAL FINANCIAL INFORMATION

Please visit www.coloradotrust.org to view The Colorado Trust's Form 990-PF and its 2010 Audited Financial Statements.

Board & Staff



BOARD OF TRUSTEES

(left to right): Reginald L. Washington, MD; Alan Synn, MD; Ned Calonge, MD; Patricia Baca, EdD; William Wright, MD; Rev. R.J. Ross; Gail Schoettler, PhD; Jennifer Paquette; John Hopkins;

Patricia Baca, EdD

*Educational Consultant
Chairwoman, 2011*

Ned Calonge, MD

*President and CEO
The Colorado Trust*

***Stephen B. Clark**

*President
SB Clark, Inc.
Vice Chairman, 2010*

****John Hopkins**

*President and CEO (retired)
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***William N. Maniatis, MD**

*Urologist
Advanced Urology, P.C.*

***Kathryn A. Paul**

*President and CEO
Delta Dental Plan of Colorado
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Jennifer Paquette

*Chief Investment Officer
Public Employees' Retirement
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Rev. R.J. Ross

*Founder/President
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*Vice President, Sales
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Fund, USA*

****Alan Synn, MD**

*President
Vascular Institute of the Rockies*

Reginald L. Washington, MD

*Chief Medical Officer
Rocky Mountain Hospital
for Children
Secretary, 2010
Vice Chairman, 2011*

William Wright, MD

*Executive Medical Director
and President
Colorado Permanente
Medical Group*

GENERAL COUNSEL

*****Jack D. Henderson, Esq.**

* In 2010, Kathryn A. Paul, Stephen B. Clark and William N. Maniatis, MD, each concluded 10 years of service on the board of The Colorado Trust.

** In 2010, The Colorado Trust welcomed three new trustees: John Hopkins, Colleen Schwarz and Alan Synn, MD.

*** In 2010, Jack D. Henderson retired as general counsel to The Colorado Trust, following more than two decades of service in that role.

Board & Staff

STAFF

EXECUTIVE OFFICE



(L. TO R.):
Jenny Lehman, Executive Associate; Ned Calonge, MD, President and CEO

ADMINISTRATIVE SERVICES



(L. TO R.):
Alisa Schreiber, Database Manager & Human Resource Assistant; Jill Johnson, Front Desk Manager; Mary Ann Davis, Administrative Services Director; Heidi Holmberg, Events Coordinator

COMMUNICATIONS & PUBLIC AFFAIRS



(L. TO R.):
Rachel Mondragon, Website Manager; Bridget Monahan, Communications Associate; Christie McElhinney, Vice President of Communications & Public Affairs; Sabrina D'Agosta, Senior Communications Officer; Scott Downes, Senior Project Director

Board & Staff

STAFF

FINANCE



(L. TO R.):

Tara Spahr, IT Manager; Lori Vettrai, Grants Administrator; John L. Samuelson, CPA, Vice President and Chief Financial Officer; Joanne Johnson, CPA, Controller; Richard Stromp, Staff Accountant

PROGRAMS



(L. TO R.):

Chris Armijo, Program Officer; Matt Sundeen, Senior Program Officer for Health Policy; Gay Cook, Vice President of Programs; Michele Chader, Program Associate; Deidre Johnson, MPPM, Program Officer; Laurel Petralia, Program Officer

RESEARCH, EVALUATION & STRATEGIC LEARNING



(L. TO R.):

Betsy Brunner, Intern; Nancy B. Csuti, DrPH, Research, Evaluation & Strategic Learning Director; Phillip Chung, Research, Evaluation & Strategic Learning Assistant Director

With gratitude to the staff members who left The Colorado Trust in 2010:

*Irene M. Ibarra, President and CEO | Tanya Beer, Assistant Director of Research, Evaluation & Strategic Learning
Ginger Harrell, Program Officer | Ed Lucero, Program Officer | Sabine Kortals, Senior Communications Officer*



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COLORADO
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