

WELCOME



ALL PARTNER
MEETING

May 24, 2023

WELCOME



Anna Von Dreele
Columbine Health Systems
Partnership Leadership Team
Co-Chair

PARTNERSHIP UPDATES

Save the Date:
Healthcare in Your
Future Summit –
November 1, 2023 at
The Ranch



LEADERSHIP TEAM



Andrew	Chadwick	Employment Services of Weld County
Betsy	Coldren	Emergency Physicians of the Rockies
Chris	Heuston	Front Range Community College
Evan	Hyatt	Care Synergy
John	McKay	SummitStone Health Partners
Jonas	McKinley	UCHealth
Anjanette	Mosebar	UCHealth
Yvonne	Myers	Fort Collins Area Chamber of Commerce
Dawn	Paepke	Kaiser Permanente
Carol	Salter	Larimer County
Allie	Steiner	North Range Behavioral Health
Cody	Vetter	Banner Health
Anna	VonDreele	Columbine Health Systems
Holly	Werner	Banner Health
Andy	Yost	Employment Services of Weld County

Legislative Update

Joshua Ewing, MPA, CAE

Colorado Hospital Association

Lisa Ward

Frontline Public Affairs



Key Hospital Legislation in the 2023 Legislative Session

Joshua Ewing, MPA, CAE
Vice President of Government Affairs
May 2023





Topline Takeaways from the Election



Blue Wave Comes to Colorado

- All statewide offices now held by Democrats
- Democrats grow legislative majorities
- Progressives grow their ranks in the Democratic caucuses

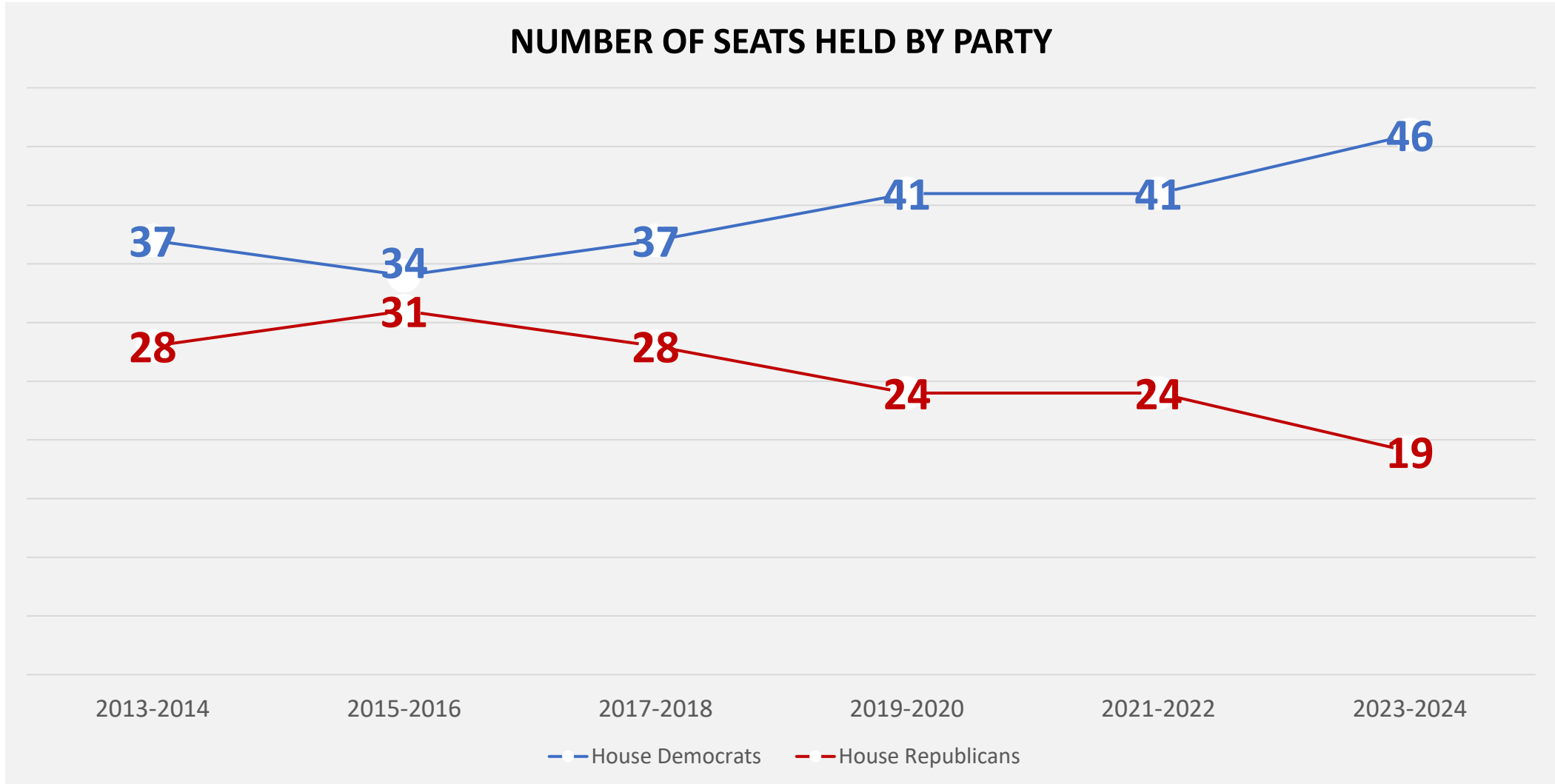
Ballot Measures Exert Budget Pressure

- Income tax cut reduces revenue
- Universal school lunch and affordable housing measures increase spending



Election Results – State House

NUMBER OF SEATS HELD BY PARTY





Election Results – State House



Speaker of the House

- Julie McCluskie (D-Dillon)



Majority Leader

- Monica Duran
(D-Wheat Ridge)



Minority Leader

- Mike Lynch
(R-Wellington)

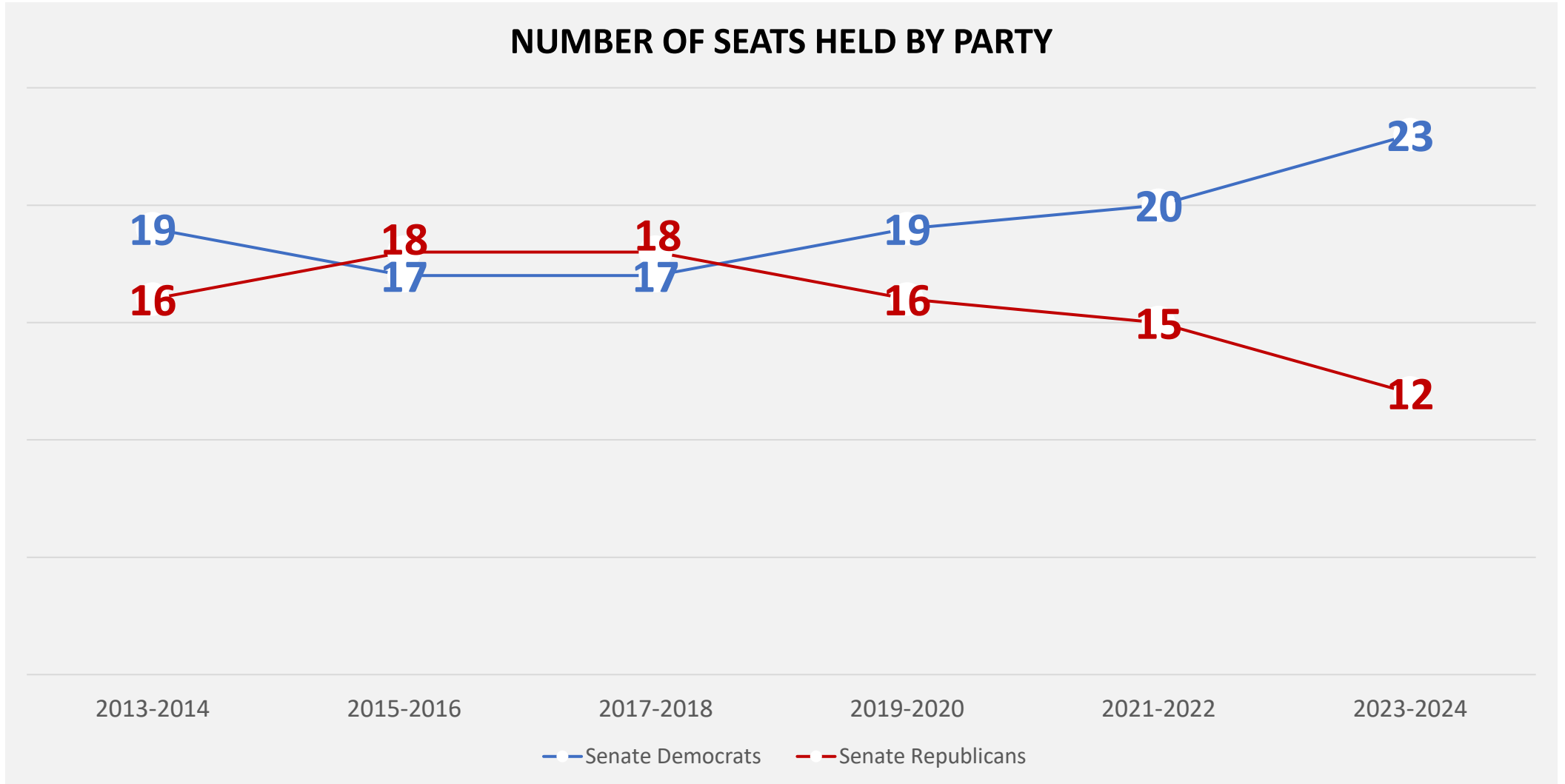
Notes from the House

- Untimely passing of Hugh McKean leaves a leadership vacuum
- Incumbents lose re-election: Larson, Woog, Huffman
- Committee make-up 8:3



Election Results – State Senate

NUMBER OF SEATS HELD BY PARTY





Election Results – State Senate



Senate President

- Steve Fenberg
(D-Boulder)



Majority Leader

- Dominick Moreno
(D-Commerce City)



Minority Leader

- Paul Lundeen
(R-Monument)

Notes from the Senate

- Priola party switch
- Rankin resignation
- Incumbents lose re-election:
Hisey, Woodward
- Committee make-up 6:3



Joint Budget Committee



Chair, Sen. Rachel Zenzinger (D-Arvada)
(only returning member)



Vice Chair, Rep. Shannon Bird (D-Westminster)



Sen. Barbara Kirkmeyer (R- Brighton)



Sen. Jeff Bridges (D-Greenwood Village)



Rep. Rod Bockenfeld (R-Watkins)



Rep. Emily Sirota (D-Denver)

Major Legislation in 2023



Legislative Session by the Numbers

**CHA tracked 75 bills
(67 passed and 8 failed)**

**CHA testified nearly 20
times in committee
hearings**

**CHA secured over 70
substantive and
favorable amendments
on roughly a dozen
bills**

**CHA prevented more
than \$10 billion in
harmful financial
impacts to hospitals**

**CHA helped secure
\$50.5 million increase
in Medicaid provider
payments**



HB 23-1215- Facility Fees

Potential Threat to Colorado Hospitals – Facility Fees

Total prohibition on facility fees



Scaled way back to limited prohibition on certain preventive care services

HCPF broad discretion to impose service-specific limits, including inpatient services



Eliminated

Annual report from state on cost of facility fees



One-time report examining changes to hospital outpatient care over time developed by committee with hospital representation

- Model legislation from a coalition of state and national health care consumer organizations
- Introduced bill would have banned all facility fees — or all non-physician reimbursement for health care services delivered in outpatient hospital settings
- Facility fees are best described as “care-team fees” — they pay for the people (other than doctors) involved in outpatient care and for the clinic itself. For example:
 - Nurses
 - Technicians
 - Environmental services
 - Interpreters
 - Security personnel
 - And many others that help provide care in outpatient clinics
- HB 23-1215 could have cut \$9 billion in reimbursement to Colorado’s hospitals and health systems, risking access to care for Coloradans.



HB 23-1243 Community Benefit

Potential Threat to Colorado Hospitals – Community Benefit

Minimum spending threshold based on value of tax exemption or net patient revenue



Qualified community benefit expenditures exclude all IRS categories of acceptable community benefit spending



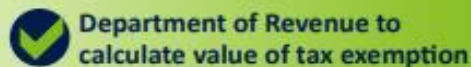
Prohibition on transfer of margins, reserves out of state



Fining authority of HCPF at \$20,000/day



HCPF to calculate value of tax exemption



- In 2021, Colorado hospitals provided over \$1.9 billion of community benefit using the allowable IRS Schedule H definition to support the health and wellbeing of Colorado communities.
- Colorado hospitals exceed national averages for community benefit, now at 11.9% of total expenses compared to US average of 9.7%.
- As introduced, HB 23-1243 would have excluded all community benefit spending required by the Internal Revenue Service (IRS) including care for Medicaid patients, life-saving medical research, and investments to address Colorado’s critical health care workforce shortage.
- New and increasing spending thresholds contemplated in the bill would have doubled the community benefit spending required of nonprofit hospitals and health systems in Colorado — Requiring nearly half a billion in new spending.



HB 23-1226- Financial Transparency

Potential Threat to Colorado Hospitals – Financial Transparency

Removal of three procedural statutory safeguards for development of HCPF reports



Safeguards for HCPF reports remain in place

Submit hospital-specific audited financials (for health systems)



Resolved in final bill

Duplicative reporting of items already available to HCPF



Substantially reduced from earlier version

Public reporting of details of individual compensation for top ten paid individuals, including breakdowns of incentive compensation published in newspapers and on websites



Aligns with IRS Form 990 requirements for nonprofit hospital executives and only aggregated information is reported publicly

\$20,000 per day fines per violation



Penalties limited to maximum of \$20K/\$5K per week based on hospital size and affiliation, and only after notice is given and continued failure to comply with a corrective action plan

- As introduced, HB 23-1226 required significant additional reporting to financial transparency established by HB 19-1001
- Much of the information requested already available through separate reporting to HCPF
- Bill better-aligned with accounting practices



SB 23-252 Price Transparency

Potential Threat to Colorado Hospitals – Price Transparency

Additional “enhancements” above and beyond federal law



All removed except for the addition of Medicare rates to machine readable file

HCPF authority to determine compliance and require corrective action plans



HCPF to conduct performance assessments and publish findings; no corrective action plans or enforcement authority for HCPF; HCPF to provide technical assistance

- As introduced, SB 23-252 re-stated federal hospital price transparency rules into Colorado statute with so-called “enhancements,” such as requiring machine readable files of standards charges to be updated monthly and requiring the machine-readable files to be formatted in a manner prescribed by HCPF.
- Additionally, the legislation gave HCPF significant oversight authority over hospital compliance with the federal rules.
- Final bill aligned through cross-reference to federal regulations rather than creating separate and conflicting state-level requirements.
- Final bill establishes a third penalty mechanism — federal CMS enforcement, state private right of action created by HB 22-1285, and new Attorney General enforcement authority.



HB 23-1295 Medicaid RAC Audits

HB 23-1295 will require a comprehensive audit of Colorado's RAC audit activity, including

- ✓ Previous audit activity and the impact on provider participation and access;
- ✓ Models to make providers whole for underpayments;
- ✓ The payment models used to reimburse the contractor and the impacts on providers;
- ✓ The design and effectiveness of other state programs; and
- ✓ Colorado's aggressive lookback period.



- CHA heard from members about HCPF's Medicaid Recovery Audit Contractor (RAC) process, one of the most aggressive in the country.
- Medicaid RAC audits are a method for ensuring Medicaid payments are appropriately made to health care providers.
- Over the past several years, providers and hospitals have identified significant transparency, accountability, and efficiency failures that have led to considerable administrative burden, unwarranted recoupments, and considerable litigation activity.
- To address this issue, CHA championed legislation – House Bill 23-1295 – to increase transparency, accountability, and efficiency in this program.
- CHA also built a coalition of other Medicaid providers, including the Colorado Medical Society, whose members also face challenges from the aggressive RAC audits.



Other Issues- Hospital Wins

House Bills

HB 1077- Intimate Exams

- Narrowed applicability and removed liability

HB 1192- Antitrust Updates

- Struck Section One lowering the threshold for CPA claims

HB 1218- Patient Notification

- Narrowed applicability to only those patients seeking the impacted services

HB 1224- CO Option

- Changes to inflation rate, Medicare floor

HB 1236- BHA Implementation

- Delays to HB 22-1256 implementation, Clarify transportation hold, mobile crisis fix

Senate Bills

SB 020- Death Certificates

- Move to more efficient process

SB 064- Office of Public Guardian

- Continuation secured and glide path to statewide model established

SB 192 Pesticide Applicators' Act

- Maintained prohibition on local control impacting patient safety

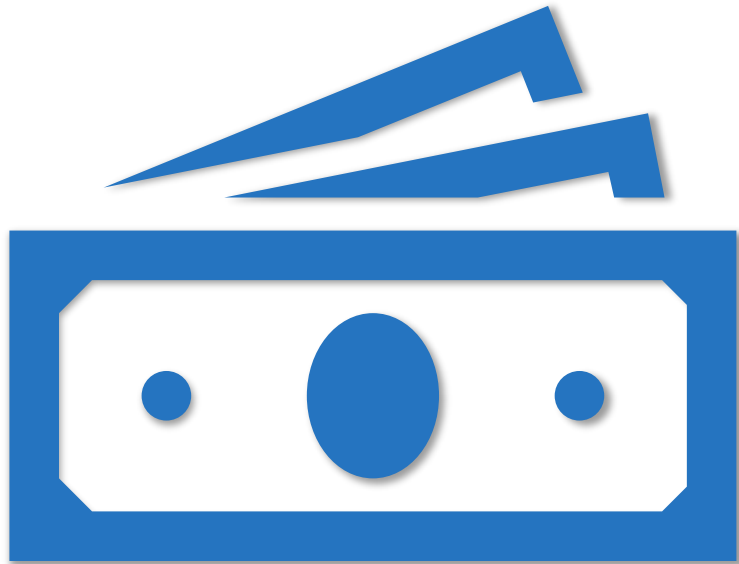
SB 298- COPA

- Allowing for greater economies of scale for county and special district hospitals



Budget Wins

Highlights include:



- 3 % across the board provider rate increase
- \$1 million rural affordability and accountability appropriation from long bill amendments
- An increase of \$14M total funds, including \$7M General Fund, for primary care grants for Federally Qualified Health Centers and other primary care providers where 50% of the patients served are uninsured or medically indigent
- An increase of \$8.7M Total Funds, including \$2.8M General Fund for training and incentives for primary care providers to transition to an Alternative Payment Model
- \$12.9M total funds, including \$3.2M General Fund for eligibility redeterminations associated with the ending of the federal continuous eligibility requirement
- A Request for Information on the Behavioral Health Administration to look at FTE and expenditures



Discussion



2023 Colorado Legislative Session Summary

NOCO HEALTH SECTOR
PARTNERSHIP

MAY 24, 2023

2023 Colorado Legislature Basics

- ▶ 74th General Assembly convened on January 9th, 2023, and adjourned May 8, 2023
- ▶ 617 Total Bills, 486 Passed (79%)
- ▶ **2022:** 657 Total Bills, 513 Passed (78%)
- ▶ Senate: 35 Total Legislators, 23 (D), 12 (R)
- ▶ House: 65 Total Legislators, 46 (D), 19 (R)
- ▶ 50 Women/50 Men
- ▶ 2024 Legislative Session will convene on January 10th, 2024, and adjourn May 9th, 2024



2023 Session: Major Themes & Number of Bills

- ▶ Business & Econ Development: 28
- ▶ Criminal Justice + Courts/Judicial: 90
- ▶ Education & School Finance: 54
- ▶ Fiscal Policy & Taxes & Budget: 80
- ▶ Health Care & Insurance: 49
- ▶ Housing: 24
- ▶ Human Services, including Children & Domestic Matters: 48
- ▶ Labor & Employment: 26
- ▶ Natural Resources/Environment: 31
- ▶ State Government: 82



Total Budget

- ▶ \$41.4B total budget (4.2% increase)
- ▶ \$15.4B General Fund (14% increase)
- ▶ \$2.72B GF Reserve (15%)
- ▶ 5% raises for state employees
- ▶ Inflation costs
- ▶ 84% state budget goes to seven state agencies
- ▶ \$16.7M for SNAP programming



Budget Items of Interest

- ▶ 3% reimbursement rate increase for Medicaid providers, some higher targeted rate increases
- ▶ Remove \$1,500 cap on annual adult Medicaid dental benefits
- ▶ Add \$14M total to the Primary Care Fund, supporting FQHCs and other safety net clinics
- ▶ Eliminate Medicaid and CHP+ copays for services (except ER visits)
- ▶ \$6M to supplement funding to Denver Health and \$1M for rural hospitals





Education, School Health & Safety



SB23-004: Employment of School Mental Health Professionals

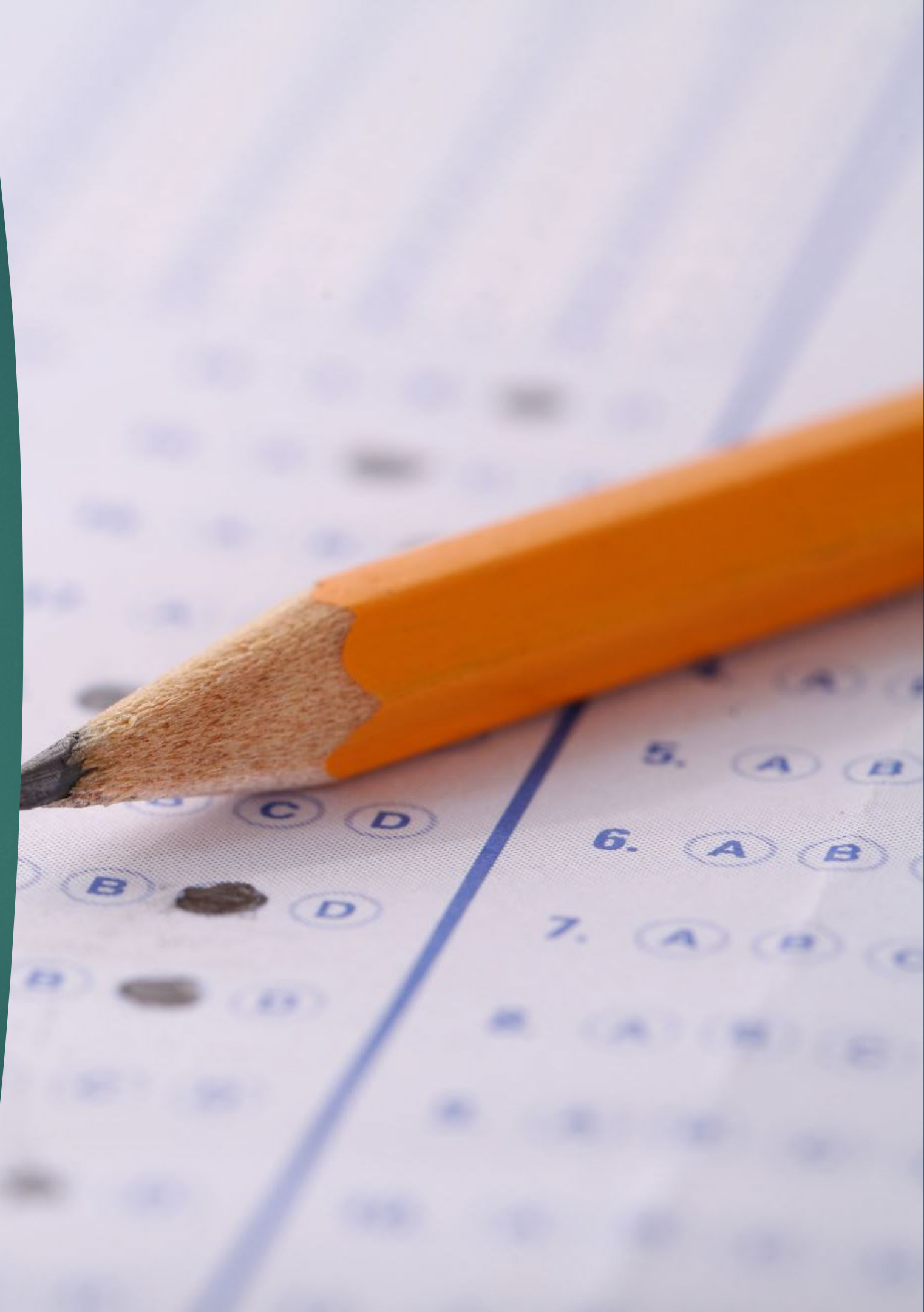
- ▶ Allows school districts to employ mental health professionals who are licensed by DORA but not licensed by the Department of Education as Special Service Providers
- ▶ Mental health professionals licensed by DORA include licensed psychologists, social workers, professional counselors, marriage and family therapists, and addiction counselors
- ▶ Additional providers are intended to supplement not supplant SSP's, who are needed for specific functions
- ▶ New professionals may be supervised by either a licensed SSP or by a school district administrator and must have experience working with children and adolescents
- ▶ <https://leg.colorado.gov/bills/sb23-004>

SB23-174: Access to Certain Behavioral Health Services

- ▶ Requires select mental health services to be covered for Medicaid members under 21 through the managed care system and School Health Services Program
- ▶ The bill lists the following as required services:
 - ▶ Family, individual and group therapy
 - ▶ Services related to prevention, promotion, education, or outreach
 - ▶ Evaluation, intake, case management, and treatment planning
 - ▶ Any other service determined necessary by HCPF based on stakeholder feedback
- ▶ The fiscal note indicates that school districts already provide these services through the School Health Services Program
- ▶ <https://leg.colorado.gov/bills/sb23-174>

HB23-1003: School Mental Health Assessment

- ▶ Permits public schools to participate in a voluntary mental health screening program for sixth through twelfth graders
- ▶ School to notify parents of date and time that mental health screening is scheduled
- ▶ Parents can opt child out, although students over 12 years of age could still decide themselves to participate
- ▶ Students screening for immediate mental health needs will be referred to crisis services and parents will be notified
- ▶ <https://leg.colorado.gov/bills/hb23-1003>



HB23-1009: Secondary School Student Substance Use

- ▶ Creates the Secondary School Student Substance Use Committee in the Colorado Department of Education
- ▶ Develop, identify, or modify practices that identify students in secondary school who need substance use treatment, offer brief interventions, and refer students to substance use treatment resources
- ▶ Committee appointments made by September 1, 2023
- ▶ <https://leg.colorado.gov/bills/hb23-1009>





Health Care Costs, Access & Workforce

HB23-1071: Licensed Psychologist Prescriptive Authority

- ▶ Allows licensed psychologists to obtain certification to prescribe psychotropic medications under the supervision of a licensed physician or advanced practice nurse
- ▶ Licensed psychologists must maintain a collaborative relationship with the patient's health provider and disclose they are not a physician licensed to practice medicine
- ▶ <https://leg.colorado.gov/bills/hb23-1071>

SB23-083: Physician Assistant Collaboration Requirements

<https://leg.colorado.gov/bills/sb23-083>



Removes the requirement that a physician assistant be supervised by a physician replacing it with a requirement that a PA enter into a collaborative agreement with the physician or physician group actively practicing in CO



If PA has fewer than 5,000 practice hours or has changed practice area, agreement must include supervision



For PA's in Level I or II Trauma Center Emergency Department's the collaborative agreement remains a supervisory agreement and continues indefinitely

SB23-167: Regulate Certified Midwives

- ▶ DORA Sunrise recommendation for the Board of Nursing to regulate Certified Midwives beginning July 1, 2024
- ▶ Allows certified midwives to practice alongside certified nurse midwives in CO
- ▶ <https://leg.colorado.gov/bills/sb23-167>



SB23-288: Coverage for Doula Services

- ▶ Requires HCPF to take steps toward covering doula services by July 1, 2024
- ▶ The bill does NOT grant HCPF the authority to provide services upon federal approval
- ▶ Creates a HCPF doula scholarship program to fund attendance at preselected doula training programs based on participant's financial need and providing doula services to Medicaid recipients
- ▶ <https://leg.colorado.gov/bills/sb23-288>

HB23-1246: Support In-Demand Career Workforce

- ▶ Appropriates \$38.6M to the Community College System for the “in-demand short-term credentials program”
- ▶ Funds cover tuition, fees, books and material supplies for students in early childhood, education, law enforcement, firefighting, forestry, construction, and nursing
- ▶ \$5.0M to the Department of Higher Education to establish two new short-term degree nursing programs at community and technical colleges
- ▶ <https://leg.colorado.gov/bills/hb23-1246>



Health Insurance Coverage



HB23-1300: Continuous Eligibility Medical Coverage

- ▶ Requires HCPF to extend continuous eligibility to two populations including children under three years of age and adults recently released from incarceration
- ▶ These populations will NOT be disenrolled from Medicaid or CHP+ until they reach the age of three or have been out of carceral setting for 12 months
- ▶ Requires HCPF to seek Federal approval for these populations by April 2024
- ▶ Requires HCPF to produce a report by January 2026 studying feasibility of extending continuous eligibility to all adults with an emphasis on low income and homeless adults and children under six
- ▶ HCPF also study methods of meeting member health and social needs
- ▶ <https://leg.colorado.gov/bills/hb23-1300>

SB23-222: Medicaid Pharmacy and Outpatient Services Copayment

- ▶ Removes the requirement that Medicaid recipients pay a copayment for pharmacy and outpatient services
- ▶ <https://leg.colorado.gov/bills/sb23-222>
- ▶ Effective April 20, 2023



Behavioral Health

MENTAL HEALTH AND SUBSTANCE USE
DISORDER

HB23-1236:

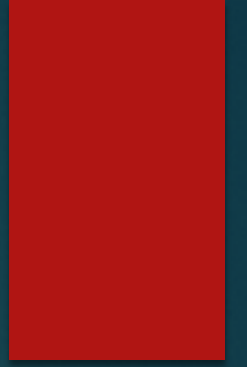
Implementation updates to Behavioral Health Administration

- ▶ Licensing behavioral health entities delayed until January 1, 2024
- ▶ Postpone transfer of licensing from CDPHE to BHA from July 1, 2024 to January 1, 2025
- ▶ Modifies the establishment of Behavioral Health Administration Service Organizations (BHASO's) from July 1, 2024 to July 1, 2025
- ▶ Modifies language around BHASO's as regionally "based" to "informed" behavioral health organizations
- ▶ Adds language for BHA to consult with HCPF to ensure consideration of regional structure that serves Medicaid population
- ▶ <https://leg.colorado.gov/bills/hb23-1236>





Public & Environmental Health



SB23-260: Individual Access to Publicly Funded Vaccines

- ▶ Allows a practitioner to ask a person seeking a publicly funded vaccine for proof of insurance but may not condition receipt of vaccine on condition of documentation
- ▶ Allows a private pharmacy to condition receipt of payment on administration of vaccine but pharmacy must provide alternate resources
- ▶ <https://leg.colorado.gov/bills/sb23-260>



2023 Bills That Did Not Pass

- ▶ Analyze Statewide Publicly Financed Health Care
- ▶ Gig Worker Protections
- ▶ Fair Work Week/Predictive Scheduling
- ▶ Unemployment Insurance Dependent Care Allowance
- ▶ Overdose Prevention Centers
- ▶ Governor's Land Use bill
- ▶ Eliminate prohibition on local rent control policies
- ▶ Assault Weapon Ban
- ▶ Information of Person Reporting Child Abuse
- ▶ Colorado TRAILS Systems Requirements

Lisa Ward

Frontline Public Affairs

Lisa@frontlinepublicaffairs.com

303-619-4460

2023 Grant Updates and Funding Efforts

- Opportunity Now
- Work-Based Learning Incentive Program (WBLIP) Grant
- Building Evidence for Sector Partnerships Grant
- Colorado Health Foundation Grant



Work-Based Learning Incentive Program (WBLIP) Grant

Reimbursements for employers to create a new or enhance an existing work-based learning program

COLORADO'S WORK-BASED LEARNING CONTINUUM

Work-based learning is a continuum of activities that occur, in part or in whole, in the workplace, providing the learner with hands-on, real world experience.

LEARNING ABOUT WORK

Career awareness and exploration helps individuals build awareness of the variety of careers available and provides experiences that help inform career decisions.

- Career Counseling
- Career Planning
- Career Fairs
- Career Presentations
- Industry Speakers
- Informational Interviews
- Mentoring
- Worksite Tours
- Project-based Learning

LEARNING THROUGH WORK

Career preparation supports career readiness and includes extended direct interaction with professionals from industry and the community.

- Clinical Experiences
- Credit-for-work Experiences
- Internships
- Pre-apprenticeship
- Industry-sponsored Project
- Supervised Entrepreneurship

Experience

LEARNING AT WORK

Career training occurs at a work site and prepares individuals for employment.

- Apprenticeship
- On-the-job Training
- Employee Development

What is Work Based Learning?

Education Coordinated



Business Led

Why Does This Matter to You?

Incentive dollars paid to employers as reimbursement for completing work-based learning (WBL).

- Learning **ABOUT** work – Reimbursement \$1,500-\$2,500
- Learning **THROUGH** work – Reimbursement \$4,500-\$6,000
- Learning **AT** work - \$8,000 - \$10,000

Examples of WBL programs

- Develop a WBL program at a business for the first time
- Start a new Incumbent Worker Program
- Restarting a dormant WBL program at a business
- Increasing the complexity and/or employer commitment of an existing program, e.g., move from hosting job fairs to an internship
- Recruiting and placing non-traditional participants in an existing program, e.g., adding a youth component to an adult program
- Developing a more robust WBL program
- Expanding the variety of WBL opportunities




Intent of the Grant?

Assist businesses with the start-up costs associated with starting or enhancing a WBL program.

Businesses must provide documentation of this development or enhancement and associated allowable costs to receive the reimbursement.



Incentive
payments
employers may
receive

- Staffing costs
 - New personnel or increases to existing personnel
 - Salaries and benefits to accomplish the goals of the WBLI Program
 - Start-up management costs for employers to create WBL programs including training for employers to establish and manage a WBL program
 - Training costs including enrollment, registration, and course fees for participation in classroom training and certifications aligned with WBL.
- 

Incentive Payment Add-Ons

- The maximum incentive to a business is \$10,000
- Small (less than 25 employees) OR rural businesses are eligible for an additional \$100 (over the \$10,000)
- Small Rural business are eligible for an additional \$200 (over the \$10,000)





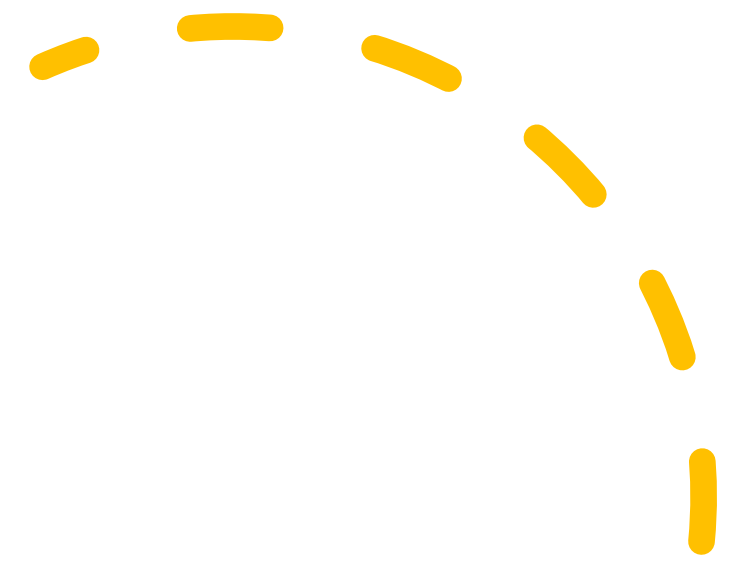
Population Incentive

Includes any household with an income not more than 150% of the federal poverty level as determined by the most current guidelines

- Individuals who are:
 - 50 years or older
 - Are or were incarcerated
 - Veterans
 - Individuals with disabilities
 - Recently immigrated to the US and reside in Colorado
 - English language learners
 - With low levels of literacy
 - Residing primarily in rural areas
 - Experiencing homelessness
 - Youth



How Do I Learn More?



Contact:



Heather Everett



WBLIP Program
Manager



Heverett-wblip@outlook.com



Building Evidence for
Sector Partnerships Grant



Anna Von Dreele
Columbine Health Systems
Partnership Leadership Team Co-Chair

Colorado Health Foundation

Grant Opportunity



Logan Jones

WorkLife Partnership

Colorado Health Foundation Grant Opportunity

Up to \$6,000 covered in first year

Quick implementation

Financial tech and wellness funding available

Includes Health Benefits Navigation

Space is limited



Financial Stability and Employee Retention Through Small Dollar Loans

- WorkLife, the non-profit lender
- \$400-1000, no credit check, no collateral
- Online application 24/7
- personal support and regular reporting

93% more likely to stay with employer

86% still employed

94% of loans in good standing

Workforce Committee

Updates

- Get into the Guts Spring Activities
- K-12 Informational Interview Sessions
- Care Forward Funding Updates
- Nursing Industry-Education Consortium

Thanks to committee members for your contributions!

Presented by: 

NURSE WELL BEING CONFERENCE

February 2, 2023

8:00am-2:00pm

The Ranch Events Complex, Loveland, CO



EVENT SUMMARY

Contact Hours

A total of **5.5** Contact Hours were awarded to attendees who attended 100% of the activity and completed the evaluation form.

TESTIMONIALS FROM ATTENDEES

"I will be graduating in May, and I will use these resources going forward as an RN. Thank you!"

"(As a result of the conference), I will make my wellbeing a priority without guilt as I now understand how and why it will improve my professional practice."

"One of my friends is a nurse...and attended your event today. She loved every piece of the event but her biggest takeaway was the message of the event. She was starting to get that burnout feeling and she walked away feeling completely motivated and reenergized. She is absolutely grateful for the opportunity to attend and wanted to thank all of those who organized it."

Sessions offered

- **Passion in Practice: Resiliency & Passion for Your Work**
 - Kathleen Flarity DNP, PhD, CEN, CFRN, FAEN, FAAN
- **Creating a Ripple Effect: Knowing When to Take Action**
 - Deborah L. Center, PhD, MSN, RN, CNS, CTA-CC
- **Tools for Building Personal Capacity**
 - Shelly A. Fischer, PhD, CNS, CNE
- **Compassionate Community Care**
 - Stephanie Seng, MS, LMFT CTRAC/CFCT Director and Shawn Whitney, MS, LMFT, S-PSB CTRAC/CFCT Assistant Director
- **Bite-sized well-being During Times of Uncertainty**
 - J. Bryan Sexton, PhD Director, Duke Center for Healthcare Safety and Quality Duke University Health System

The goal of the inaugural Conference was to inspire, support and honor nurses.

Attendance

Over **150** nurses, nurse managers, nurse educators, nursing students, CNAs, LPNs, and people in leadership/administrative roles from numerous healthcare entities attended the 2023 conference. Regional Chief Nursing Officers and patients participated by thanking the nurses in attendance.

Survey Results

Over **86%** of attendees Agreed and Strongly Agreed that the interactive teaching strategies enhanced their learning.

THANK YOU NURSE WELL BEING CONFERENCE 2023 SPONSORS

PRESENTING



GOLD



BRONZE



Nurse Well Being Conference Update

- Outcomes
 - Abstract submitted to the National Forum of State Nursing Workforce Centers Annual Conference.
 - Abstract approved! Title – A celebration of Nurses' Work and Resilience.
 - Presentation will be made by Melissa Henry, UNC / Jennifer Higgins, UCH and Carol Salter, Larimer County, NOCO Health Sector Partnership.



Behavioral Health Committee Updates

- Walk the Talk Social Media Campaign
- Career Pathways in Behavioral Health

Thanks to committee members for your contributions!

Outreach & Awareness Committee Updates

- Follow us on Facebook and LinkedIn
- New website!
- 2023-24 Sponsorship Opportunities

THANK YOU



Anna Von Dreele
Columbine Health Systems
Partnership Leadership Team
Co-Chair

Committee Leaders

Workforce

Co-Chairs: Evan Hyatt (ehyatt@caresynergynetwork.org) and Chris Heuston (chris.heuston@frontrange.edu)

Meets the second Tuesday of every month from 2:30PM-4:00PM

Behavioral Health

Chairs: Allie Steiner (allison.steiner@northrange.org)

Meets the second Wednesday of every month from 8:15AM-9:15AM

Outreach and Awareness

Chair: Jonas McKinley (Jonas.mckinley@uchealth.org)

Nursing Education - Industry Consortium

Co-Chairs: Melissa Henry (Melissa.Henry@unco.edu) and Faith Cantrell (faith.cantrell@uchealth.org)

THANK YOU

Thanks to our 2022 Donors and Grantors

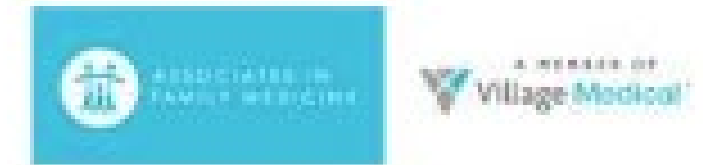
Champions



Leaders



Partners



Supporters



THANK YOU

Upcoming All Partner Meetings

- August 23, 2023

THANK YOU

Stay and network!

Connect with a
Committee Chair