

MARILLAC NEWS

A report to the friends of the Marillac Clinic • Summer 2010



OUR MISSION:

**We will,
in the spirit of
the Sisters of Charity,
reveal God's healing love
by improving the health
of the individuals
and communities we serve,
especially those
who are poor
or vulnerable.**

www.MarillacClinic.org

Local Support Sustains Marillac's Mission...

The economic challenges to our community occurred suddenly and swiftly during 2008 – 2009. Readers of previous newsletters will remember that the State of Colorado reduced the amount of funding allocated to Marillac by nearly \$750,000 last year. This amounted to 10% of our budget.

We appealed to our community, and you responded generously. Thank you for your continued contribution to Marillac. Because of your support, we did not need to reduce clinical services to the uninsured residents of our county who rely upon us for their health care.

THERE IS GOOD NEWS FOR 2010

The Colorado State Legislature identified a way to match state dollars with federal stimulus dollars during the session completed in May. Through a complex formula, \$500,000 was restored to the Clinic for 2010. This unanticipated revenue will occur only one time. Marillac will need to adjust to reduced state funding for 2011.

MARILLAC'S MISSION ENDURES

Our mission statement appears on this page. Note that our mission does not refer to a cycle in the economy or even the insurance status of our patients. It simply commits us to reveal God's healing love by providing health care....especially those who are poor and vulnerable. This mission statement may be recited quickly, but is a profound gift to implement. Our community wants Marillac to stay true to our mission despite any challenge that comes our way. Twenty-two years ago, our community linked with the Sisters of Charity of Leavenworth to create a compassionate vision for those who lacked access to a fundamental need we all possess – comprehensive and quality primary health care. This commitment lives on.

**An important message from the Executive Director
for friends of Marillac Clinic on Page 2**





Access and sustainability will be essential aspects of health care reform in the valley...

Steve Hurd, Ph.D.
Executive Director

Throughout the extended and heated debate on health care reform, several key elements were highlighted while other important aspects of reform received little attention. Having over 40 million people in our country without health insurance is not a statistic that makes us proud. I'd like to devote this part of the newsletter to discuss the health care challenges facing our country and our community.

ACCESS AND COST

Under the reform legislation, more people will become eligible for health insurance. This is good. However, having insurance (whether through public funding, an insurance exchange or an employer-sponsored plan) does not address two fundamental challenges. Will there be a sufficient number of providers to address the increased demand for health care? How will we prevent our costs from increasing at double-digit rates?

There are no simple solutions. The prominent physician and author, Atul Gawande, notes that our classification system contains 16,000 diagnosable health conditions and over 6,000 procedures to address them. The challenge to deliver safe, high quality health care while controlling costs is indeed daunting.

Leaders throughout the country are actively discussing how to re-engineer the way we care for people. Fragmentation of our health care system raises costs. Our country's inclination to treat disease rather than invest in prevention raises costs. Spending an exceptionally high percentage of our resources during the last year of life is being questioned.

Improved information technology has been emphasized as one solution. However, this does not reduce the burden on patients and their families to take time away from work or school to travel to a variety of settings and schedule several appointments to meet their health care needs. We place the burden of navigating an increasingly complex system on patients and their families.

STRENGTHENING PRIMARY CARE AND THE MEDICAL HOME

Historically, Mesa County has benefitted from our high number of primary care providers who coordinate well with specialists. However, Mesa County is now impacted by the same shortage of primary care providers as other areas of the country.

If we aren't able to improve access to primary care, many of our newly insured patients will seek treatment at the emergency room – further accelerating our cost spiral.

The federal legislation will encour-

age a higher percentage of medical school graduates to become primary care providers. However, the large influx of people seeking care will occur before these providers enter the workforce.

Much discussion is occurring about the patient-centered medical home model as a way to address access and cost. In this model, health care providers form teams and address the person from a holistic view. New roles are being identified in the health care team. Care coordinators and patient navigators make outreach contacts to encourage patients to follow through with care plans. Marillac's model of the medical home brings various types of primary care providers under one roof so that medical, mental health, oral health, vision care, eyeglasses and access to low cost medication can be addressed during a single extended visit. In our primary care model, psychosocial factors impacting health conditions are addressed as well as health conditions themselves.

With the full implementation of a health information exchange, smaller-sized private practices have the opportunity to create virtual medical homes that enable patients to receive the access to coordinated and comprehensive primary care.

continued

CURRENT COMMUNITY EFFORTS

Leaders of Mesa County health care organizations are committed to having a health care system that works for all of us. This principle of collaboration is woven into our community's culture. Several health care practices throughout the Valley are currently learning medical home concepts and implementing new processes to improve health outcomes.

Quality Health Network has accomplished much in our community to make health data available to a provider when a patient presents for treatment.

Many communities do not focus on the entire population. In several communities, providers compete to serve patients with financial resources while ignoring those who are poor and vulnerable.

MARILLAC'S ROLE IN THE FUTURE

Our mission directs us to prioritize the poor and the vulnerable people living among us. Historically, the poor and the vulnerable were represented by the uninsured. After the implementation of state and federal legislation, many of our current patients will have access to Medicaid. Staff are working hard with Rocky Mountain Health Plans and the State

of Colorado to start serving the mental health and medical needs of patients with Medicaid.

One challenge to Marillac is that the reimbursement system does not support the model of care in a single extended visit. Medical and mental health providers working simultaneously with patients is not reimbursed; however, while seeing the same patient on different days is reimbursable. Group medical visits, a model popular for many Marillac patients who have the same chronic disease, are not reimbursed within the traditional reimbursement model. Thus, Marillac will need to secure supplemental funding to provide the type of care our patients prefer.

YOUR ROLE IN HEALTH CARE

Current data suggest that our country spends approximately 40% of our health care resources on preventable illnesses. How often do we say to ourselves, "I know I shouldn't be doing/eating this but..."

The University of Wisconsin recently published health statistics for every county in the country. This data is available on an interactive web site:

<http://www.countyhealthrankings.org>.

Evaluation occurred on four factors: Clinical Care, Health Behaviors, Physical Environment and Social and Economic Factors. Mesa County was compared with the other counties in Colorado. We can be proud that our county ranked #1 in Clinical Care. However, Mesa County ranked 41st in Health Behaviors. This means that many of us are making lifestyle decisions that negatively impact our health. The health care debate did include considerable discussion on personal responsibility. Much learning needs to occur regarding ways to encourage wise decision-making for ourselves and our loved ones.

All of us need to understand the important distinction between *access to health* and *access to health care*. The community needs a high level of engagement from employers, education, government and lay citizens to improve community health. When disease does occur, health care leaders need to take responsibility to provide efficient and effective care. As a community, we appreciate the interconnection of our lives, and that all of us are impacted by the health and well-being of each one of us.

**MARILLAC'S 2009 ANNUAL REPORT
IS NOW AVAILABLE ONLINE AT
www.MarillacClinic.org**

*"Always look forward, never look back...
Look forward to the good
that is yet to be done."*

-Mother Xavier Ross



**THERE ARE
GREAT IDEAS
FOR LEGACY
GIVING ON
THE MARILLAC
WEBSITE.
HERE ARE
JUST A FEW...**

How to Make a Lasting Legacy... You can leave a lasting legacy by creating or contributing to an endowment—a fund in which the principal is invested and all or part of the earnings are used to help the programs and goals you want to support. www.MarillacClinic.org

Cashless Ways to Make a Difference... Would you like to make a charitable impact far into the future without giving up cash during your lifetime? These three easy ways can get you started. www.MarillacClinic.org

Plan for Your Loved Ones' Security... Nothing is quite as important as ensuring an up-to-date estate plan to provide for the welfare of your family—especially those under your care. This list will help you make sure your loved ones are well taken care of long after you are gone. www.MarillacClinic.org

**To find out more about creating
your own personal legacy
of giving or to make any
donation, contact:
Claudia Crowell,
Donor Relations
Specialist
at 970.298.2234**

**Our website has pages and pages
of great ideas that can protect the needs of
your family, while at the same time creating
a legacy gift for Marillac's mission ...**

www.MarillacClinic.org



Claudia Crowell can assist you with your giving plans and strategies. Cash, stocks, and real estate can all be gifts which not only benefit the Clinic, but can have tax advantages for the donor. To explore these opportunities, give Claudia a call at 970.298.2234. She'd love to talk with you about how your support of Marillac's mission could also be very beneficial for you and your family.



“Like most professionals, I had a good job, good insurance, and never really stopped to think how quickly things can change. So many of us are just a layoff, or an illness away from being uninsured. Today, my support of the Clinic is very personal. I found out first-hand what it means to need help, and Marillac was there for me. I will never forget it!”

Michael Ervin arrived in Grand Junction back in 1999.

A successful advertising executive with a great career, he was aware of Marillac and supported it, but he never dreamed he would become a patient.

“Like most professionals, I had a good job, good insurance, and never really stopped to think how quickly things can change. So many of us are just a layoff away from being uninsured,” says Michael.

When that happened to Michael, he remembered Marillac. He came to the Clinic for some dental work, but very quickly discovered the medical services that were available to him. “It was a real life-saver!” he says. “I was surprised to find that so many of my fellow-patients had similar stories. Either they had lost their coverage due to layoffs, or they had steady jobs that just didn’t provide health insurance benefits.”

Indeed, Michael’s story is not unusual. Most Marillac patients come from hard-working families. Either their jobs simply can not afford to offer health benefits, or they have lost their coverage due to a layoff. Without Marillac, thousands of Mesa County residents would have nowhere to turn.

Michael now qualifies for Medicare, so he has coverage. But he never forgot his six years as a Marillac patient. “I promised myself that if I were ever in a position to give back to the Clinic, I would!” Today, he’s keeping that promise and is a strong supporter of the Clinic and its mission. Thank you, Michael, for remembering Marillac. It is this kind of partnership between patients and the Clinic that makes our community so strong.

IN FISCAL YEAR
 2009
 MARILLAC PROVIDED
 NEARLY 29,000
 PATIENT VISITS
 TO FAMILIES AND
 INDIVIDUALS RIGHT
 HERE IN MESA
 COUNTY!

MARILLAC'S FUND
 RAISING AND
 ADMINISTRATIVE
 COSTS ONLY
 AMOUNTED TO
 11.22%
 OF EXPENSES
 in 2009.

THAT'S WELL BELOW
 THE NATIONAL
 AVERAGE FOR
 NON-PROFITS AND
 ANOTHER EXAMPLE OF
 THE CLINIC'S
 RESPONSIBLE
 STEWARDSHIP.



Left to right:
 Executive Director
 Steve Hurd Presents
 volunteers Amanda McQuade
 and Duke Cox with
 awards of appreciation.
 Not shown is Joe Wharton
 who also received recognition
 but was not able to attend.

Volunteers honored for 602 Remodel...

Marillac recently celebrated the completion of the remodel of the facility at 602 Bookcliff with an open house gathering to honor the volunteers who made the new facility possible. The building now includes additional offices and a computer training room to implement the new Electronic Medical Records system, which will bring greater efficiencies and savings to the Clinic operations this fall. **The project could not have been completed without the wonderful effort of a team of volunteers who donated most of the labor as well as much of the materials. This was just the most recent example of community support that continues to makes the work of the Clinic possible.**

Marillac receives nomination for the 2010 Achievement Citation from Catholic Health Association

Mesa County's homeless population ranges from 400 to 1,500 depending on economic conditions and the season. In 2008, Marillac Clinic provided 1,226 health care visits—763 medical and 463 mental health—to homeless individuals at the Day Center. **Prior to Marillac's presence at the Day Center, Catholic Outreach sent on average three people per week by taxi to the emergency department of St. Mary's Hospital & Regional Medical Center. Since Marillac began offering primary medical care to the homeless at the Day Center, this number has been reduced to zero.**

When needed, Marillac Clinic serves as the advocate in obtaining specialized care for homeless clients from appropriate medical professionals.

The following message from a homeless person, published in the "You Said It" section of the *Daily Sentinel* best summarizes the importance of Marillac Clinic and Grand Valley Catholic Outreach services to the homeless population:

"To the good people of Grand Junction: Thank you for your generosity to the Homeless and street people. Through your help we are cleaned, fed and warmed at Homeward Bound, the Marillac Clinic, Catholic Outreach and The Day Center. We are truly blessed from your kindness...without you, we surely would suffer. Thank you. We love you for just being you."

Marillac in the News...

Marillac was recently recognized in two publications. *Health Elevations*, a quarterly published by the Colorado Health Foundation, cited Marillac's participation in the Quality Health Network (QHN). QHN is a health information network exchange on the Western Slope that enables providers to obtain medical records electronically for the patients they are treating. Access to real-time data improves quality and saves costs.

The June issue of *Medical Home News*, featured an article by Marillac's Executive Director, Steve Hurd. Steve focused on the benefits of including oral health as an integral aspect of holistic care – something Marillac has been doing since 1991. As a leader in innovative and quality health care, Marillac's inclusion of oral health services in a community health clinic is being replicated throughout the country.

The benefits are undeniable, as patients with untreated dental disease will eventually seek pain relief in hospital emergency rooms. Chronic dental problems impact the overall health status, especially individuals with diabetes and heart conditions. Thanks to your support, Marillac continues to pioneer programs that are recognized nationally for effectively delivering quality, patient-centered care.



A special thanks to the donors who designated Marillac to receive funding from other campaigns...

Our recently published Annual Report inadvertently omitted these donors who donated to Marillac through other campaigns in 2009. We're sorry for the oversight, and recognize them here.

A copy of the 2009 Annual Report is now available on the Marillac website www.MarillacClinic.org



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Kristine Reuss

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**Marillac Clinic
Vision Statement**

**Marillac Clinic
welcomes underserved
people and provides
compassionate,
innovative, and
essential health care.**

**Marillac Clinic takes a
leadership role to
promote access to quality
health care for all.**

If by some chance you have received an extra copy of the newsletter, why not pass one along to a friend who shares your passion for helping a neighbor access quality health care?

DETACH AND RETURN TO MARILLAC

Yes! I want to do my part to help my neighbors!

\$

Please indicate if you have a preference how the Clinic is to use your gift (check one box)

(please make check payable to Marillac Clinic • 2333 N. 6th Street Grand Junction, CO 81501)

- Where needed most (an unrestricted gift allows the Clinic to use its resources in the most effective and responsive way)**
- Medical / Integrated Care Dental Optical
- Memorial / Honorarium Capital Needs owment Fund



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City / State / Zip _____

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YOUR EMAIL HELPS SAVE THE CLINIC MONEY!

*To explore other giving opportunities, contact Claudia Crowell, at 970.298.2234.
To donate online, visit us at www.MarillacClinic.org.*