

Schedule 13

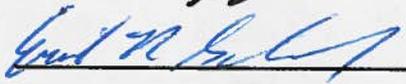
Funding Request for the FY 2015-16 Budget Cycle

Department of Health Care Policy and Financing

PB Request Number R-14

Request Titles

R-14 Primary Care Fund Audit

Dept. Approval By:	Josh Block		<input checked="" type="checkbox"/>	Supplemental FY 2014-15
			<input type="checkbox"/>	Change Request FY 2015-16
			<input type="checkbox"/>	Base Reduction FY 2015-16
OSPB Approval By:			<input type="checkbox"/>	Budget Amendment FY 2015-16

Line Item Information	Fund	FY 2014-15		FY 2015-16		FY 2016-17
		Appropriation	Request	Base Request	FY 2015-16	Continuation
	Total	\$55,334,780	\$0	\$56,205,391	\$0	\$0
	FTE	360.4	-	360.6	-	-
Total of All Line Items	GF	\$9,771,533	\$0	\$10,098,270	\$0	\$0
	CF	\$29,766,609	\$0	\$29,836,581	\$0	\$0
	RF	\$1,885,519	\$0	\$1,920,262	\$0	\$0
	FF	\$13,911,119	\$0	\$14,350,278	\$0	\$0

Line Item Information	Fund	FY 2014-15		FY 2015-16		FY 2016-17
		Appropriation	Request	Base Request	FY 2015-16	Continuation
	Total	\$26,043,374	\$0	\$26,913,985	\$76,056	\$76,056
	CF	\$2,676,189	\$0	\$2,746,161	\$76,056	\$76,056
	FF	\$12,679,416	\$0	\$13,118,575	\$0	\$0
01. Executive Director's Office - Personal Services	FTE	360.4	-	360.6	-	-
	GF	\$8,802,250	\$0	\$9,128,987	\$0	\$0
	RF	\$1,885,519	\$0	\$1,920,262	\$0	\$0

	Total	\$2,463,406	\$0	\$2,463,406	\$50,000	\$50,000
01. Executive Director's Office - Professional Audit Contracts	CF	\$262,420	\$0	\$262,420	\$50,000	\$50,000
	FF	\$1,231,703	\$0	\$1,231,703	\$0	\$0
	GF	\$969,283	\$0	\$969,283	\$0	\$0

	Total	\$26,828,000	\$0	\$26,828,000	(\$126,056)	(\$126,056)
05. Indigent Care Program - Primary Care Fund Program	CF	\$26,828,000	\$0	\$26,828,000	(\$126,056)	(\$126,056)

Letternote Text Revision Required?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	If Yes, describe the Letternote Text Revision:
Cash or Federal Fund Name and CORE Fund Number:					Primary Cash Fund (18L0)
Reappropriated Funds Source, by Department and Line Item Name:					N/A
Approval by OIT?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Not Required: <input checked="" type="checkbox"/>
Schedule 13s from Affected Departments:					N/A
Other Information:					N/A



COLORADO

Department of Health Care
Policy & Financing

Priority: R-14
Primary Care Fund Audits
FY 2015-16 Change Request

Cost and FTE

- \$0 total funds in FY 2015-16 and beyond, and 0.0 FTE, for a budget neutral transfer of \$126,056 cash funds from the Primary Care Fund Program line item, of which \$50,000 would transfer to the Professional Audit Contracts line item and \$76,056 would transfer to Personal Services.

Current Program

- The Primary Care Fund provides an allocation of moneys from Colorado's tax on cigarettes and tobacco products to health care providers that make comprehensive, primary care services available in an outpatient setting to residents of Colorado regardless of their ability to pay.

Problem or Opportunity

- The Department does not audit the information provided on applications for funding through the Primary Care Fund and thus unable to verify the accuracy and validity of the data submitted.
- Provider's eligibility status and the amount of payments they receive may be inaccurately determined.
- Inaccurate allocations to providers could reduce or compromise services to the target populations of uninsured or medically indigent patients in a manner that would adversely affect the health outcomes of these patients.
- Additionally, the portion of the Primary Care Fund retained by the Department for administering the Primary Care Fund does not accurately reflect the amount of funds needed for the Department's allocated workload and operating costs associated with the program.

Consequences of Problem

- The availability and quality of health care services could be reduced or compromised in a manner that would adversely affect the health outcomes of uninsured or medically indigent patients.
- The General Fund would continue to fund a portion of administrative and operating expenses of the Primary Care Fund Program.

Proposed Solution

- Procure a contractor for a compliance audit of the data submitted by Primary Care Fund applicant providers to verify the accuracy and validity of the data.
- Transfer funding from the Primary Care Fund to fund the Department's administrative costs to more accurately reflect the Department's allocated workload and operating costs associated with the program.



COLORADO

Department of Health Care
Policy & Financing

FY 2015-16 Funding Request | November 1, 2014

John W. Hickenlooper
Governor

Susan E. Birch
Executive Director

Department Priority: R-14

Request Detail: Primary Care Fund Audits

Summary of Incremental Funding Change for FY 2015-16	Total Funds	General Fund
Primary Care Fund Audit	\$0	\$0

Problem or Opportunity:

The Department does not audit information provided on the applications for funding through the Primary Care Fund by the applicant providers and is unable to verify the accuracy and validity of the data submitted. This information is used to determine the provider’s eligibility status to receive the funding as a qualified provider and the amount of payments they receive. It is imperative that these payments be accurately allocated to providers serving the target populations of uninsured or medically indigent patients. Otherwise, the availability and quality of these services could be reduced or compromised in a manner that would adversely affect the health outcomes of these patients.

The Primary Care Fund provides an allocation of moneys from Colorado’s tax on cigarettes and tobacco products, as authorized in section 24-22-117 (2) (b), C.R.S. (2014), to health care providers that make comprehensive, primary care services available in an outpatient setting to residents of Colorado regardless of their ability to pay. Qualified providers must serve a medically underserved population and/or area of Colorado. Funds are allocated to each qualified provider based on the number of medically indigent patients served in an amount proportionate to the total number of medically indigent patients served by all health care providers who qualify for moneys from this fund. Essentially, the grant awards are reimbursing providers for their otherwise uncompensated costs and charity care. Funding is used by providers to extend hours of operation, serve more patients, create diabetes management programs, comply with electronic health record regulations, and hire additional staff, etc.

Qualified providers are required to use an independent entity to certify patient counts. Providers who receive \$250,000 or more from the Primary Care Fund are required to use a Certified Public Accountant (CPA) as their independent entity. However, the Department is unable to ensure consistency in sampling methodologies and certification practices across all applicants. Assuring a correct allocation of the Primary Care Fund awards would support the continued availability of these basic health care services and reduce the risks of cost-shifting by the providers to other patients.

Additionally, the portion of the Primary Care Fund retained by the Department for administering the Primary Care Fund does not accurately represent the amount of funds needed for the Department’s allocated workload

and operating costs associated with the program. Currently, the Department is appropriated \$60,039 from the Primary Care Fund to fund 0.5 FTE and \$3,183 for indirect costs recovery. However, the Primary Care Fund should be covering more of the costs of program staff who have a direct responsibilities for the program and staff throughout the Department who have a supporting role in program operations. This includes funding for a portion of time for the program supervisor and management, and for staff who perform centralized functions (i.e. budget, data analysis, accounting, etc.).

Proposed Solution:

The Department requests a budget neutral transfer of \$126,056 cash funds in FY 2015-16 and beyond from its Primary Care Fund Program line item, of which:

- \$50,000 would transfer to the Department's Professional Audit Contracts line item to procure a contractor for a compliance audit of the data submitted by Primary Care Fund applicant providers; and,
- \$76,056 would transfer to the Department's Personal Services line item to more accurately reflect the Department's administrative costs associated with operating the Primary Care Fund.

As authorized in sections 25.5-3-302 (3) C.R.S. (2014), the Department may retain three percent of the total amount of money annually appropriated by the General Assembly for administrative costs of the program. The total FY 2014-15 Primary Care Fund appropriation is \$26,828,000. Of this amount up to \$804,840 could be utilized for administrative costs of the program, but only \$63,222 (0.25% of the total appropriation) can be withheld for administration costs in FY 2014-15. This request would increase funding for administrative costs in FY 2015-16 forward to a total \$189,278 (0.71% of the FY 2014-15 appropriation), well below the statutory limit.

These transfers would reduce the total amount available in the Primary Care Fund that could otherwise be distributed among qualified providers. The proposed compliance audit was strongly supported by stakeholders and current qualified providers at the May 1, 2014, annual stakeholders meeting of the Primary Care Fund. Their support of the audit stemmed from the desired goal for enhanced transparency, and the ability to demonstrate sound stewardship of tax dollars to preserve funding for the Primary Care Fund.

The Department is responsible for fiscal oversight of the Primary Care Fund. A statewide compliance audit by an independent auditor would increase the integrity of the program as well as ensure the accuracy and validity of the data submitted by the applicant. The Department would use the requested funding to procure a contractor to ensure accuracy and consistency in reporting of information across providers in accordance with the Primary Care Fund program requirements.

The Department estimates that \$50,000 would allow for approximately one-third of the providers, or thirteen providers, to be audited each fiscal year from FY 2015-16 forward. Applicants are required to have an outside entity verify their patient-count submissions provided in their application for funding. Along with this independent review, auditing a provider approximately once every three years should provide sufficient frequency of scrutiny that the Department is seeking to assure consistency, accuracy and transparency, while also minimizing the impact on funding available for services.

The Department would use the funding to procure a licensed Certified Public Accountant as a contractor with auditing experience related to Medicaid or similar services or grants for medically indigent patients. At minimum, the auditor would perform the following tasks:

- Develop the audit instrument and document an audit method.
- Conduct exit and entrance conferences.
- Audit providers' annual Primary Care Fund applications and lists of patient records comprised of all patients receiving comprehensive primary care services to assure unduplicated patient counts are reported.
- Of the total unduplicated patient counts, the auditor would review the number of patients reported by category of payment source, including Medicaid, CHP+, or who are medically indigent patients.
- Approximately six Level II reviews would be completed. Level II reviews are more complex secondary reviews performed by a senior auditor of randomly selected provider applications to assure compliance of applicable financial reporting standards and regulatory requirements of Primary Care Fund Program.
- Determine if the data supports that the provider met all requirements to be designated as a qualified provider to receive funding through the Primary Care Fund Program.
- Determine if corrections to the data are necessary that would result in funding adjustments. Provide a written audit report to the Department detailing findings for each provider audit completed.
- Assist the Department in addressing appeals by providers related to changes resulting from the audits.

The Department would make corrections to the allocations of funding to qualified providers as necessary during the annual reconciliation process, if errors in the information reported by providers are discovered through these audits.

As part of this request, the Department is also requesting funding to increase its administrative funding from the Primary Care Fund. The Department is working towards a revised cost allocation plan, which would account for the increased workload corresponding to the compliance audit, allocate costs of centralized department functions, such as budget, data analysis, and accounting, management and supervision as well as allow the Department additional flexibility in its Personal Services budget. The Department's current cost allocation methodology does not include a distribution of costs to the Primary Care Fund associated with centralized functions. In addition, the Department anticipates that there would be additional workload resulting from responsibilities associated with the audit request herein. The Department is not seeking a General Fund reduction as those funds appropriated to the Department were not intended to support the Primary Care Fund and would be utilized for programs and functions requiring General Fund support as intended when appropriated.

Anticipated Outcomes:

Grant awards based on inaccurate data can adversely impact services to patients by qualified providers by reducing their respective share of the Primary Care Fund. A compliance audit would further the Department's sound stewardship of the financial resources appropriated to the Primary Care Fund by ensuring that the grant awards are accurately targeted and thus supporting the continued availability of health care services to the medically indigent and uninsured. If an audit reveals that inaccurate data has been submitted, the affected

providers would be required to resubmit corrected data. This would require reallocation of the available funds to appropriately distribute funds based on accurate information.

Under current protocol, the Department provides a preliminary allocation of funds based on the appropriation of Primary Care Funds in the Long Bill for a fiscal year. The Department revises the allocation in the fourth quarter of the fiscal year to adjust for the actual tobacco tax collections received by the State. The Department anticipates that any adjustments to funding allocations related to audit findings would also occur during the fourth quarter allocation reconciliation process.

Costs for the administrative workload throughout the Department associated with the Primary Care Fund program will be more appropriately charged to the Primary Care Fund and free up General Fund for more appropriate administrative usage.

Assumptions and Calculations:

The detailed calculations for this request can be found in the attached appendix.

Table 2, “Primary Care Fund - Annual Administrative Cost Appropriation History” is provided to show the amount and percentage of appropriated funds for administrative costs compared to the Primary Care Fund appropriation for service provision by fiscal year. The administrative appropriations have been less than one-quarter of a percent of the Primary Care Fund appropriation. This request maintains the appropriation at less than three-quarters of a percent, well below the three percent allowed.

Table 3, “Annual Primary Care Fund Audit Cost Estimate by Audit Component”, contains a summary of the Department’s calculations for this audit request. The estimate of hourly rates and number of hours needed per audit is comparable to recently procured audits by the Department, including Disproportionate Share Hospital (DSH) and Nursing Facility audits.

Table 4, “Primary Care Fund - Administrative Workload Estimate”, shows the Department’s estimate of the administrative workload throughout the Department which includes estimates of the FTE equivalent of workload for program staff, management and supervision, and centralized Department staff functions. Estimates shown in Table 4.2, “Primary Care Fund Additional Administration Costs” calculate the needed funding associated with workload throughout all Department responsibilities associated with the Primary Care Fund Program, including supervision, management and centralized functions. This estimate is based on the mid-range of the salary at the General Professional IV classification level and 35% of the salary to account for related administrative load which includes all health, life, and dental benefits, operating expenses, and commercial leased space. The Department is not requesting an increase in FTE, only a transfer of funding from the Primary Care Fund. Because the funding is primarily for portions of staff time associated with the Primary Care Fund program throughout the Department performing centralized functions or for management and supervision, the funding is primarily needed to more accurately attribute operational costs to the Primary Care Fund.

R-14 Primary Care Fund Audits
Appendix A: Calculations and Assumptions

Table 1.1								
FY 2015-16 Summary by Line Item								
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	Source
A	(1) Executive Director's Office; (A) General Administration, Personal Services	\$76,056	0.0	\$0	\$76,056	\$0	\$0	Table 4.2, Row E
B	(1) Executive Director's Office; (F) Provider Audits and Services, Professional Audit Contracts	\$50,000	0.0	\$0	\$50,000	\$0	\$0	Table 3, Row L
C	(5) Indigent Care Program, Primary Care Fund Program	(\$126,056)	0.0	\$0	(\$126,056)	\$0	\$0	(-1) * (Row A + Row B)
D	Total Request	\$0	0.0	\$0	\$0	\$0	\$0	SUM (Row A + B + C)

Table 1.2								
FY 2016-17 Summary by Line Item								
Row	Line Item	Total Funds	FTE	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	Source
A	(1) Executive Director's Office; (A) General Administration, Personal Services	\$76,056	0.0	\$0	\$76,056	\$0	\$0	Table 4.2, Row E
B	(1) Executive Director's Office; (F) Provider Audits and Services, Professional Audit Contracts	\$50,000	0.0	\$0	\$50,000	\$0	\$0	Table 3, Row L
C	(5) Indigent Care Program, Primary Care Fund Program	(\$126,056)	0.0	\$0	(\$126,056)	\$0	\$0	(-1) * (Row A + Row B)
D	Total Request	\$0	0.0	\$0	\$0	\$0	\$0	SUM (Row A + B + C)

R-14 Primary Care Fund Audits
Appendix A: Calculations and Assumptions

Table 2 - Primary Care Fund - Annual Administrative Cost Appropriation History

Fiscal Year	Primary Care Fund - Long Bill Appropriation	Administrative Costs Appropriation	Audit Funding Request	Administration Cost for Workload Costs Request	Total Administration Cost Appropriation	% of PCF
FY 2011-12	\$28,253,000	\$57,639	-	-	\$57,639	0.20%
FY 2012-13	\$27,968,000	\$58,152	-	-	\$58,152	0.21%
FY 2013-14	\$27,759,000	\$58,305	-	-	\$58,305	0.21%
FY 2014-15	\$26,828,000	\$63,222	-	-	\$63,222	0.24%
FY 2015-16 ¹	\$26,828,000	\$63,222	\$50,000	\$76,056	\$189,278	0.71%

¹The FY 2015-16 PCF appropriation will be set based on the December 2014 revenue forecast by Legislative Council staff of the tobacco tax revenue.

R-14 Primary Care Fund Audits
Appendix A: Calculations and Assumptions

Table 3 - Annual Primary Care Fund Audit Cost Estimate by Audit Component

Row	Audit Method & Reporting Requirements	Number of Provider Audits	Number of Hours Per Provider	Number of Hours Per Auditor Type		Description
				Senior Auditor	Junior Auditor	
A	Auditor Type					
B	Entrance Conference			8	12	Based on information from recently procured audits.
C	Desk Review Audits of Provider Application	13	12 hours	0	156	Number of Provider Audits multiplied by Number of Hours Per Provider
D	Level II Review of Selected Provider Applications	6	10 hours	60	0	Number of Provider Audits multiplied by Number of Hours Per Provider
E	Draft Report of Audit Findings			24	76	Based on information from recently procured audits.
F	Exit Conference			8	12	Based on information from recently procured audits.
G	Final Draft Report (Department's Responses Incorporated)			10	10	Based on information from recently procured audits.
H	Auditor Remains Available for Questions/Appeals			10	36	Based on information from recently procured audits.
I	Total Auditor Hours by Auditor Type			120	302	Sum of rows B through H
J	Hourly Rate by Auditor Type			\$165.00	\$100.00	
K	Subtotal of Audit Cost by Auditor Type			\$19,800	\$30,200	Row I * Row J
L	Total Estimated Audit Cost				\$50,000	Sum of Row K

The number of audit hours required per audit component and Senior and Junior auditor rates are based on various Department audits including the DSH audit and Nursing Facility audit, and the Department's FY 2014-15 Price Agreement List.

R-14 Primary Care Fund Audits
Appendix A: Calculations and Assumptions

Table 4.1 - Primary Care Fund - Administrative Workload Estimate						
Row	Item	Program Staff	Supervisor/ Management	Centralized Functions Staff	Total	Notes
A	Estimated Administrative Workload FTE Equivalent	1.0	0.1	0.2	1.3	Estimated amount of staff time for all administrative functions.
B	PCF FTE Appropriation	0.5	0.0	0.0	0.5	Long Bill Appropriation
C	Difference	0.5	0.1	0.2	0.8	Row A - Row B

R-14 Primary Care Fund Audits
Appendix A: Calculations and Assumptions

Table 4.2 - Primary Care Fund - Additional Administration Costs			
Row	Item	Amount	Notes
A	FTE Equivalent Currently Not Funded by PCF	0.80	Table 4.1, Row C (Total)
B	Annual Salary Cost Basis	\$70,422	General Professional IV salary range midpoint
C	Requested Increase in Personal Services	\$56,338	Row A * Row B
D	Annual Administrative Load ¹	\$19,718	Row A * 35%
E	Total Additional Administrative Costs	\$76,056	Row C + Row D
¹ The 35% Annual Administrative Load includes all health, life, and dental benefits, operating expenses, and commercial leased space.			

R-14 Primary Care Fund Audits
Appendix A: Calculations and Assumptions

Table 5. History of Primary Care Fund Payments by Provider											
Clinic	FY 2005-06	FY 2006-07	FY 2007-08	FY 2008-09	FY 2009-10 ¹	FY 2010-11 ¹	FY 2011-12 ¹	FY 2012-13	FY 2013-14	FY 2014-15 (Estimated)	Total
Basin Clinic	\$0	\$0	\$0	\$60,134	\$0	\$0	\$0	\$0	\$0	\$0	\$60,134
Castle Valley Children's Clinic	\$0	\$28,756	\$33,107	\$0	\$0	\$5,246	\$0	\$0	\$0	\$0	\$67,109
St Anthony Family Med Residency	\$378,324	\$202,573	\$186,882	\$140,213	\$99,044	\$94,523	\$62,828	\$103,370	\$78,361	\$103,892	\$1,450,010
St Mary Corwin Health Foundation	\$457,508	\$289,164	\$232,984	\$215,154	\$163,440	\$176,961	\$80,287	\$168,656	\$170,228	\$149,167	\$2,103,549
Chaffee People's Clinic	\$0	\$0	\$0	\$0	\$0	\$0	\$43,617	\$95,207	\$48,620	\$0	\$187,444
Mission Medical Clinic	\$65,987	\$54,638	\$57,859	\$62,854	\$60,196	\$65,857	\$37,576	\$51,685	\$57,072	\$82,744	\$596,468
Clinica Campesina Family Health	\$2,912,217	\$2,236,300	\$2,776,002	\$2,534,100	\$920,244	\$0	\$0	\$2,119,046	\$2,012,160	\$2,101,823	\$17,611,892
Clinica Colorado	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$378,110	\$416,926	\$528,968	\$1,324,004
Colorado Coalition for the Homeless/ Stout Street Clinic	\$1,640,872	\$1,057,601	\$1,012,999	\$1,026,815	\$392,797	\$0	\$0	\$859,586	\$753,085	\$819,922	\$7,563,677
Commerce City Community Health Services/Kids First	\$92,382	\$162,954	\$112,005	\$85,215	\$96,711	\$103,048	\$61,137	\$106,089	\$109,117	\$85,867	\$1,014,525
Denver Health Hospital Authority	\$10,518,296	\$6,785,906	\$6,333,567	\$6,378,160	\$2,391,260	\$0	\$0	\$5,524,750	\$5,376,485	\$5,040,741	\$48,349,165
Doctors Care	\$70,386	\$134,517	\$143,565	\$124,197	\$114,326	\$115,320	\$71,709	\$155,054	\$159,069	\$145,761	\$1,233,904
Community Health Clinic	\$127,574	\$0	\$36,201	\$69,502	\$36,902	\$0	\$0	\$57,124	\$69,196	\$76,783	\$473,282
Grace Health Clinic	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$204,016	\$152,881	\$133,413	\$490,310
High Plains Community Health Center	\$624,675	\$432,306	\$393,566	\$374,706	\$155,608	\$0	\$0	\$301,943	\$291,329	\$294,928	\$2,869,061
Spanish Peaks Family Clinic	\$0	\$0	\$63,119	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$63,119
Inner City Health Center	\$1,007,399	\$732,652	\$730,201	\$645,763	\$492,537	\$410,973	\$209,690	\$573,964	\$539,764	\$581,624	\$5,924,567
La Clinica Tepeyec, Inc.	\$0	\$0	\$159,345	\$357,179	\$434,673	\$479,078	\$351,718	\$690,934	\$692,286	\$756,196	\$3,921,409
Plains Medical Center	\$87,982	\$34,187	\$70,235	\$82,194	\$44,395	\$0	\$0	\$277,463	\$301,464	\$0	\$897,920
Marillac Clinic Inc.	\$1,143,771	\$863,016	\$872,219	\$919,843	\$681,612	\$460,000	\$315,000	\$677,333	\$628,612	\$589,572	\$7,150,978
Metro Community Provider Network	\$3,770,046	\$3,279,524	\$3,639,558	\$3,262,057	\$1,219,179	\$0	\$0	\$2,333,943	\$2,416,649	\$2,597,154	\$22,518,110
Olathe Medical Clinic	\$0	\$66,140	\$0	\$55,299	\$38,264	\$41,781	\$54,491	\$165,932	\$133,836	\$140,651	\$696,394
Columbine Family Health Centers	\$686,263	\$483,429	\$496,599	\$480,772	\$160,567	\$0	\$0	\$440,676	\$470,410	\$486,248	\$3,704,964
North Colorado Family Medicine	\$131,974	\$138,990	\$151,300	\$92,166	\$56,347	\$0	\$0	\$0	\$0	\$0	\$570,777
Northwest Colorado Visiting Nurses Assoc.	\$0	\$0	\$0	\$86,122	\$107,508	\$100,000	\$15,000	\$187,695	\$165,832	\$358,796	\$1,020,953
Open Bible Medical Clinic	\$0	\$0	\$0	\$0	\$0	\$0	\$36,428	\$97,927	\$118,025	\$126,884	\$379,264
Peak Vista Community Health Center	\$3,708,458	\$2,968,954	\$2,667,400	\$2,936,305	\$1,124,755	\$0	\$0	\$2,646,767	\$2,664,114	\$3,318,294	\$22,035,047
Pediatric Associates of Southern Colorado	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$8,162	\$30,300	\$87,144	\$125,606
People's Clinic Inc.	\$1,165,767	\$787,290	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$1,953,057
Salud Family Health Center	\$7,144,171	\$5,519,339	\$4,976,197	\$4,452,051	\$1,687,696	\$0	\$0	\$3,449,230	\$3,270,923	\$2,763,352	\$33,262,959
Ft. Collins Family Residency Program	\$0	\$105,761	\$224,320	\$245,674	\$221,653	\$182,675	\$117,561	\$209,458	\$212,101	\$199,694	\$1,718,897
Prowers Medical Center Foundation	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$249,617	\$0	\$249,617
Pueblo Community Health Center	\$1,684,863	\$1,326,955	\$1,430,390	\$1,126,535	\$419,445	\$0	\$0	\$761,659	\$953,415	\$905,931	\$8,609,193
Rocky Mountain Primary Care Clinic	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$13,601	\$14,174	\$8,516	\$36,291
Rocky Mountain Youth Medical	\$862,228	\$417,929	\$416,153	\$405,831	\$355,695	\$321,603	\$209,750	\$416,194	\$290,404	\$324,307	\$4,020,094
SET of Colorado Springs	\$0	\$0	\$0	\$155,624	\$252,334	\$312,890	\$244,850	\$383,549	\$353,152	\$287,548	\$1,989,947
Bruner Family Medicine	\$0	\$0	\$119,741	\$191,584	\$163,206	\$165,438	\$105,358	\$217,618	\$253,399	\$281,019	\$1,497,363
Southeast Colorado Hospital	\$0	\$78,601	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$78,601
Summit Community Care Clinic	\$642,272	\$391,089	\$327,972	\$425,775	\$388,126	\$379,590	\$0	\$489,638	\$358,888	\$516,053	\$3,919,403
Sunrise Community Health Center	\$2,960,608	\$1,881,316	\$1,584,475	\$1,680,737	\$679,282	\$0	\$0	\$1,580,443	\$1,560,322	\$1,645,238	\$13,572,421
Uncompahgre Medical Center	\$101,180	\$73,169	\$63,428	\$52,279	\$23,042	\$0	\$0	\$62,566	\$44,632	\$56,062	\$476,358
Sheridan Health Services	\$0	\$0	\$0	\$0	\$0	\$0	\$19,815	\$68,005	\$53,741	\$134,548	\$276,109
The Pediatric Associates	\$0	\$0	\$0	\$0	\$15,050	\$67,075	\$30,327	\$13,601	\$7,887	\$12,774	\$146,714
Eage Care Medical Clinic	\$0	\$0	\$0	\$99,116	\$142,791	\$77,942	\$68,688	\$108,808	\$47,370	\$0	\$544,715
Alamosa Family Medical Clinic	\$2,014,797	\$1,418,975	\$1,629,957	\$1,394,269	\$527,841	\$0	\$0	\$1,202,335	\$1,158,753	\$1,023,164	\$10,370,091
Total Amount	\$44,000,000	\$31,952,031	\$30,941,346	\$30,218,225	\$13,666,526	\$3,560,000	\$2,135,830	\$27,202,137	\$26,684,598	\$26,764,778	\$237,125,471

¹Note: During declared fiscal emergencies, Primary Care Fund appropriations were reduced via special bills during FYs 2009-10 through 2011-12. See SB 09-271, HB 10-1321, HB 10-1378, and SB 11-219.