2014 Annual Report

Honoring Outstanding Contributions that Improve Access to Primary Care
2014 Bi-State Awards

Collaborating with Stakeholders to Increase Public Access to Oral Health Care

Increasing Access to Primary Health Care

Improving Quality of Life

Testifying on Health Care — U.S. Senate Hearing

Leadership Training on Health Care Reform Initiatives — 2014 Primary Care Conference
Our Mission

Promote access to effective and affordable primary care and preventive services for all, with special emphasis on underserved populations in Vermont and New Hampshire

Our Vision

Healthy individuals and communities with quality health care for all

OUR DEDICATED STAFF

Wendy Behling — Accounting Clerk
Kristen Bigelow-Talbert, MSHM — Project Coordinator
Susan Carll, MEd — Recruitment and Retention Coordinator
Dorothy W. Chicaderis — New Hampshire Public Policy Administrative Assistant
Jennifer Ertel — Project Coordinator
Kathleen Fitzpatrick — Vermont Administrative Assistant
Joyce Gallimore, MPH, CPHQ — Director, Community Health Payment Systems
Mandi Gingras — Recruitment and Retention Coordinator
Claire Hodgman — Data and Marketing Coordinator
Tess Stack Kuenning, CNS, MS, RN — President and Chief Executive Officer
Patricia Launer, RN, CPHQ — Community Health Quality Manager
Kimberly Martin — Senior Accountant
Abigail Mercer, MBA — Chief Financial Officer
Melissa Miles, MPH — Project Manager
Susan J. Noon, MBA, APR — Director, Marketing and Development
Stephanie Pagliuca — Director, Bi-State Recruitment Center
Suzanne G. Palmer — Executive Assistant
Lori H. Real, MHA — Executive Vice President and Chief Operating Officer
Kate Simmons, MBA, MPH — Director, Vermont Operations
Heather E. Skeels — Project Manager
Amanda Spreeman — New Hampshire Data Coordinator and Administrative Assistant
Kristine E. Stoddard, Esq. — Director, New Hampshire Public Policy
Marilyn Sullivan, MEd — Project Coordinator
Sharon M. Winn, Esq., MPH — Director, Vermont Public Policy
Adam Woodall — IT and Office Systems Manager
James Zibailo — New Hampshire Community Development and Financial Services Coordinator
Dear Friends,

It is a privilege and a pleasure to work with you and all of our partners to help fulfill the promise of health care for all. In this annual report, we are pleased to share some of our accomplishments with you and invite you to contact us for more information about Bi-State and the many initiatives in which we participate.

Sincerely,

Edward Shanshala II, MSHSA, MSEd — Chair, Board of Directors
Tess Stack Kuenning, CNS, MS, RN — President and Chief Executive Officer

Our Triple Aim in Vermont and New Hampshire

- Improve the Patient Experience
- Improve Population Health
- Reduce Per Capita Costs of Health Care

Improve the Patient’s Experience of Care

Accountable Care and Management Services Organizations

Patient-Centered Medical Homes, a Multi-Disciplinary Team Approach to Care

Integration of Medical, Oral, and Behavioral Health Care and Pharmacy Services

Provide integrated and coordinated quality health care that is affordable and accessible at the right time, in the right location, and by the right health care provider, to improve the patient’s experience of care.

Improve the Health of Populations

- Provide affordable health insurance to all, especially for low–middle income earners.
- Analyze data to determine care patterns and health outcomes, especially for patients with a chronic disease.
- Examine the total cost of care to identify the systemic potential for savings.
- Permanently and adequately fund Community Health Centers to ensure widespread access to integrated primary health care.

Reduce the Per Capita Cost of Health Care

Annual Medical Expenditure per Patient by Provider Type

<table>
<thead>
<tr>
<th>Provider Type</th>
<th>Cost</th>
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</thead>
<tbody>
<tr>
<td>Community Health Center</td>
<td>$3,500</td>
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<tr>
<td>Non-Community Health Center</td>
<td>$4,594</td>
</tr>
</tbody>
</table>

Source: Geiger Gibson/RCHN Community Health Foundation Research Collaborative. Assessment based on econometric analyses of the 2006 Medical Expenditure Panel Survey, Agency for Healthcare Research and Quality.

Board of Directors

OFFICERS

Board Chair
Edward Shanshala II, MSHSA, MSEd
Chief Executive Officer
Ammonoosuc Community Health Services

Board Vice Chair
Kevin Kelley, MS, CMPE
Chief Executive Officer
Community Health Services of Lamoille Valley

Board Immediate Past Chair
Grant Whitmer, MSM, CMPE
Executive Director
Community Health Centers of the Rutland Region

Board Secretary
Gail Auclair, MSM, BSN, RN
Chief Executive Officer
Little Rivers Health Care

Board Treasurer
Marianne Savarese, RN, BSN
Project Director
Health Care for the Homeless Program

DIRECTORS

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Chief Executive Officer
Northeastern Vermont Regional Hospital

Glenn Cordner, MBA
President
Springfield Medical Care Systems

Jack Donnelly, MBA
Chief Executive Officer
Community Health Centers of Burlington

Janet Laatsch, BSN, MBA
Chief Executive Officer
Goodwin Community Health

Pamela Parsons
Executive Director
Northern Tier Center for Health

Richard Silverberg, MSSW, LICSW
Executive Director
HealthFirst Family Care Center

Helen Taft, MPA
Executive Director
Families First Health & Support Center

Adele Woods, MS
Chief Executive Officer
Coos County Family Health Services
Participation in the Development of National and State Initiatives

Long-Term Bipartisan Support
Tess Stack Kuenning, CNS, MS, RN
President and Chief Executive Officer

Our Congressional delegation has championed public policy changes to improve our health care system in support of population health efforts focused on improving quality of care to assure favorable health outcomes, patient engagement, satisfaction with care, integration and access to care, and managing health care cost. With seismic shifts in health care systems redesign and the way health care is financed, we have focused our public policy efforts to ensure communities throughout Vermont and New Hampshire are ready and have the capacity for such changes.

We have enjoyed tremendous bipartisan Congressional support during the 114th Congressional Session. Congressman Welch (D-VT), Congresswomen Kuster (D-NH) and Shea-Porter (D-NH), along with Senators Ayotte (R-NH), Leahy (D-VT), Sanders (I-VT), and Shaheen (D-NH), lent their long-term support to our collective safety-net provider issues to expand and grow the Community Health Centers; National Health Service Corps; Area Health Education Centers; Maternal and Child Health Title V; Title X Family Planning; and the Women, Infants, and Children Nutrition Program. We are grateful for their tireless support.

In recognition of their ongoing support, we presented our Congressional representatives with awards while meeting with them on Capitol Hill.

National
Buying Value, a National Measure Alignment Work Group
Capital Link Board of Directors
George Washington University School of Public Health: Geiger Gibson Distinguished Visitor in Community Health Community Health Center Leadership Advisory Committee National Advisory Council on the National Health Service Corps National Association of Community Health Centers: Board of Directors Representing Region I Rural Health Committee Legislative Committee Health Policy Committee New England Council Health Care Committee Primary Care Association Leadership Committee Primary Care Association and Health Center Controlled Network Advisory Committee

New Hampshire
NH Citizen’s Health Initiative, Accountable Care Project
NH Fiscal Policy Institute Board
NH Medical Care Advisory Committee
NH Legislative Commission on Primary Care Workforce Committee

Vermont
Blueprint Expansion, Design, and Evaluation Committee
Blueprint Mental Health/Substance Abuse Advisory Committee
Governor’s Health Care Workforce Work Group
Green Mountain Care Advisory Board
Medicaid and Exchange Advisory Board
University of VT, Area Health Education Centers Advisory Committee
VT ACO Standards Work Group
VT Dentist Workforce Committee
VT Health Care Innovation Project - Care Models and Care Management Work Group
VT Oral Health Coalition
VT-SBIRT Health Disparities Committee
Identifying the Needs of the Underserved for Vermont Legislators

Sharon M. Winn, Esq., MPH
Director, Vermont Public Policy

During the 2014 session we continued to educate our elected officials on the tremendous value of investing in primary health care. The 2015 session is when Vermont’s ambitious health care reform agenda should start to take shape. Bi-State and the Area Health Education Center worked together to secure $1 million in appropriations for a loan repayment matching grant application to the U.S. Health Resources and Services Administration. In July we learned Vermont received a full award, which will fund 25-50 primary care clinicians over the next four years, assuming the State of Vermont is able to maintain its matching funds.

Bi-State members testified on the administrative burden before the House Health Care Committee, laying important groundwork for the committee’s deliberations next year and beyond. We want to be sure health care reform efforts are thoughtful and well-informed. Clinician burnout is a very real concern for policymakers.

Navigating Vermont Health Connect

Kristen Bigelow-Talbert, MSHM — Project Coordinator

In 2014, Bi-State was selected as a Navigator Organization to assist the State of Vermont with the implementation of Vermont Health Connect. Three of our staff were trained and certified as navigators authorized to educate and help Vermonters, including small business owners, enroll in Vermont Health Connect. During the busiest times, Bi-State staff traveled to Community Health Centers located statewide to help respond to community requests for information and enrollment assistance. Throughout the year, Bi-State provided technical support and regular updates from Vermont Health Connect to more than 400 navigators, insurance brokers, and community partners.

Return on Investment: Healthier Communities, Healthier Workforce

Kristine E. Stoddard, Esq.
Director, New Hampshire Public Policy

During the 2014 New Hampshire legislative session, Bi-State advocated for primary care contract amendments for state fiscal years 2014 and 2015 to support access to primary health care for the uninsured. The amendments were approved by the governor and council in May for $2.75 million, thus increasing access to health care at Community Health Centers.

Working with key stakeholders, Bi-State created an educational campaign to demonstrate the return on investment that would be achieved by expanding access to Medicaid to low-income residents. By the end of the session, legislators had approved the NH Health Protection Program, opening the door to health care for 50,000 Granite Staters.

Bi-State collaborated with a Substance Use Disorder stakeholder group and the NH Department of Health and Human Services to create a Medicaid benefit that would make it possible for New Hampshire residents in need of assistance to access special treatment programs.

Exceeding Enrollment Expectations in New Hampshire

Marilyn Sullivan, MEd — Project Coordinator and Navigator

Bi-State was selected by the Centers for Medicare and Medicaid Services to serve as a Navigator Organization to help New Hampshire residents understand the NH Health Insurance Marketplace, and to coordinate statewide outreach and enrollment events. Before the end of the first year it was reported that nearly 40,000 residents had accessed health care coverage through the NH Marketplace — more than double the official projection. Bi-State and Community Health Center navigators reached 10,000 consumers in-person, and close to one million through statewide media and social media channels.

Primary Health Care Partners

Lori H. Real, MHA
Executive Vice President and Chief Operating Officer

In 2014, Bi-State assisted Federally Qualified Health Centers and the Community Health Access Network in New Hampshire with the formation of Primary Health Care Partners LLC. Working together, we are implementing collaborative efforts to increase access, manage costs, and improve the quality of preventive and primary health care for those we serve.
Bi-State’s Recruitment Center is the only nonprofit organization conducting national marketing and outreach to recruit physicians, dentists, nurse practitioners, and physician assistants for positions in Vermont and New Hampshire. During the past year, the Recruitment Center connected with 900 providers and assisted 57 practices with recruitment. Since 1994, with the assistance of Bi-State’s Recruitment Center, 356 providers have relocated to accept positions at practices in Vermont or New Hampshire.

Appointed to National Committee

Stephanie Pagliuca, Director, Bi-State Recruitment Center, was appointed by the Secretary of Health and Human Services to serve on the National Advisory Council on the National Health Service Corps through January 2017. Ms. Pagliuca was nominated by U.S. Senators Bernie Sanders (I-VT) and Jeanne Shaheen (D-NH). The 15 council members make recommendations to the Secretary and Administrator of the Health Resources and Services Administration with respect to the Public Health Service Act, as it relates to recruiting and retaining providers for underserved areas in the United States. Ms. Pagliuca has spent nearly two decades recruiting primary health care professionals to work in the medically underserved areas of Vermont and New Hampshire.

Nationwide Workforce Recruitment

Better Health, Lower Costs

Joyce Gallimore, MPH, CPHQ
Director, Community Health Payment Systems

CHAC’s mission is to achieve the three-part aim of better care for individuals, better health for populations, and lower growth in expenditures in connection with both public and private payment systems. CHAC monitors the quality of care through data and coordinates care with other providers. Bi-State provides management services that support CHAC’s group of Community Health Centers, hospitals, community mental health providers, and home health agencies.

Through the VT Health Care Innovation Project, CHAC is collaborating with other accountable care organizations and providers to create and model an integrated, cost-effective health care delivery system.

Improving Access to Oral Health

In the spring of 2014, Bi-State convened more than 70 dentists, hygienists, and representatives from Federally Qualified Health Centers, Community Action Programs, public health networks, school-based dental programs, the NH Technical Institute, NH Office of Medicaid Business and Policy, and the NH Oral Health Coalition to strategize on how to best meet the oral and dental health needs of underserved New Hampshire residents.

In her keynote address, Jane Grover, DDS, MPH, American Dental Association, presented Pathways for Progress: Dental Collaboration. Pathways is a strategy for providing alternatives to hospital emergency rooms for dental pain; strengthening the oral health safety net provided by Community Health Centers, private practices, and other health professionals; and putting greater emphasis on oral health education and prevention. The NH Dental Society, Oral Health Coalition, and the Division of Public Health Services outlined initiatives designed to improve access to oral health services. Executive officers from three Health Centers also presented their plans to open dental clinics to better serve their communities in the coming year.

Sponsors: Bi-State Primary Care Association, NH Dental Society, the Oral Health Program of the NH Division of Public Health Services, and supported by funding from DentaQuest Foundation.

Three New Dental Centers Open

In partnership with the State of NH, Department of Health and Human Services Oral Health Program, Bi-State successfully competed for a grant from the U.S. Health Resources and Services Administration to fund the expansion of dental services to underserved areas of the state.

Three Community Health Centers will open new dental centers by the end of December 2014. Ammonoosuc Community Health Services in Littleton, and Mid-State Health Center in Bristol, will locate new dental centers within their existing medical offices to enable primary care providers and dentists to collaborate on the medical and oral health needs of their patients. In Laconia, HealthFirst Family Care Center forged partnerships with dentists in the community, and the local school district, to install dental equipment in a Laconia school and provide services on-site so that children would not need to leave school grounds to access oral health care.
Managing Chronic Disease

Patricia Launer, RN, CPHQ
Community Health Quality Manager

Health care reform in Vermont is a rapidly changing landscape, and ensuring high quality care throughout the turbulence is imperative. Bi-State, in partnership with its members, the State of Vermont, and other stakeholders, is at the forefront of this work helping to shape the future of health care for the communities we serve.

Eight of Vermont’s eleven Federally Qualified Health Centers, in collaboration with Community Health Centers in New Hampshire and Minnesota, are using Uniform Data System data to monitor and improve care for patients with diabetes. Health Center staff are reaching out to patients that have a variety of chronic diseases, including diabetes, to provide support and information about preventive measures that will help them better manage their chronic disease.

With the understanding that some patients may be concerned about who can access their medical records and how the information will be used, the practice staff at Vermont Health Centers take time to educate patients about the safeguards in place to protect their privacy, and answer any questions patients may have. The staff ensures medical terms are translated into common language and clinical summaries and websites are patient-friendly.

Integrating Primary Medical, Oral, and Behavioral Health Care Under One Roof

Community Health Centers practice a provider-team approach that integrates medical, oral, behavioral, and mental health in a patient-centered system of care, often in the same building or complex. The National Committee for Quality Assurance (NCQA) has recognized the majority of Vermont and New Hampshire Health Centers as meeting or exceeding a rigorous set of quality standards and designated them as Patient-Centered Medical Homes.

NCQA Designated Patient-Centered Medical Homes

Vermont
Battenkill Valley Health Center
Community Health Centers of Burlington
Community Health Centers of the Rutland Region
Community Health Services of Lamoille Valley
Gifford Health Care
Little Rivers Health Care
Mountain Health Center
Newport Pediatrics and Adolescent Medicine
Northeastern Vermont Regional Hospital
North Country Hospital
Northern Counties Health Care
Northern Tier Center for Health
Springfield Medical Care Systems
The Health Center

New Hampshire
Ammonoosuc Community Health Services
Charlestown Family Medicine
Coos County Family Health Services
Families First Health and Support Center
Goodwin Community Health
Health Care for the Homeless Program
HealthFirst Family Care Center
Lamprey Health Care
Mid-State Health Center
Fernando is one of several thousand migrant dairy workers in Vermont that face seemingly insurmountable barriers to health care including a lack of transportation, minimal English language skills, and no one to ask for help. When he arrived at the Open Door Clinic, Fernando looked embarrassed; he didn’t want to smile. The dentist sensed he was uncomfortable in this new environment and she asked the interpreter multiple times to “tell him we are very glad he is here, that we know about the hard work he does, and we’re happy he’s taking time to care for his teeth.” The dentist diagnosed serious gum disease and noted that Fernando needed to have nine teeth extracted.

Improving population health is an overarching objective in health care as highlighted by the Vermont Health Care Innovation Project and Bi-State’s investment in Vermont. For the past six years, Bi-State has supported efforts to improve the health of migrant dairy workers. By partnering with the Open Door Clinic, the University of Vermont Extension Migrant Education Program, five university departments, three community coalitions, six Federally Qualified Health Centers, and countless other community partners, Bi-State has supported innovative, multi-faceted community solutions to improve access to medical and oral health care for farmworkers and other underserved populations in Vermont.
Creating a Healthy Economy
NH Legislative and Business Breakfast

Bi-State and the New Hampshire Community Health Centers hosted the NH Legislative and Business Breakfast in February to inform and update legislators, policymakers, and business leaders about the factors impacting access to health care in New Hampshire. High on the list in 2014 was discussing how state budget policies impact the recruitment and retention of our health care workforce. Bi-State also demonstrated the return on investment to the state achieved by increasing access to primary and preventive care, and the cost-effectiveness of expanding health care coverage in New Hampshire.

“As a business owner, I know that a healthy workforce helps to create a healthier economy.” — Sen. Chuck Morse

New Hampshire’s 15 nonprofit Community Health Centers have 39 strategically-placed sites serving communities with a shortage of medical, dental, behavioral, and mental health care services. More than 100,000 Granite Staters utilize New Hampshire Community Health Center services annually.

Reception for Vermont Legislators

“...the Health Centers is the cornerstone of what we need with regard to the Blueprint. This committee has been an enthusiastic supporter of the Health Centers and your work.” — Sen. George Till, Chair

Senior leadership from Bi-State and the Vermont Community Health Centers attended meetings in February with the House Committee on Health Care; Sen. John Campbell, President Pro Tempore of the Senate; and Speaker of the House Shap Smith, to discuss the implementation of health care reform. Bi-State reported that as of November 2013, thanks to grassroots efforts and great perseverance, the Health Centers are now operating in every county in Vermont and provide primary health care to one in three Vermonters, which includes 56% of Medicaid enrollees and 57% of the uninsured. The group reported on and answered questions about workforce recruitment, community partnerships, Vermont’s Health Care Innovation Project, Medicaid, and how we are expanding access to medical, oral, and behavioral health care to more Vermonters through Health Center formed partnerships and the use of telemedicine equipment to extend access to care.

Education and Technical Assistance

Peer-to-Peer Meetings
Chief Executive Officers
Chief Financial Officers
Community Health Accountable Care LLC
FederaLDly Qualified Health Center Medical Directors
Information Technology and Systems Committee
Navigators and Certified Application Counselors
NH and VT Strategic Communications Committees
Primary Health Care Partners LLC
VT Quality Improvement Network

Telehealth Presentations
Cognitive Behavioral Therapy for Insomnia
Joseph Lasek, MD, Howard Center

Integrating Behavioral Health and Primary Care
Jill Rinehart, MD, Hagan, Rinehart & Connolly Pediatricians and Breena Holmes, MD, Maternal and Child Health Branch Director, VT Department of Health

Integrative Chronic Pain Management: One Psychiatrist’s Perspective
Brian Erickson, MD, Fletcher Allen Health Care Center for Pain Medicine

Using a Telepsychiatry Approach to Deliver Psychiatric Care for Vulnerable and Underserved Populations
Terry Rabinowitz, MD, DDS, University of VT College of Medicine and Fletcher Allen Health Care

Publications
Bi-Lines Newsletter
Designing an Integrated Quality Improvement Plan
New Hampshire Primary Care Sourcebook
Vermont’s Open Doors to Health Calendar
Vermont Primary Care Sourcebook

Videos
National Health Center Week, NH Governor’s Proclamation
NH Community Health Centers: A Smart Investment

Seminars
Accountable Care Organizations and Payment Reform
ICD-10 Code Set Training
Maximizing the Impact of Your Dental Program
Meeting New Challenges in Health Center Board Governance
Population Health: Improving Health Outcomes in the Medical Home
Preparing the UDS 2013 Report
The Medical Home Model and Payment Reform

Published media online: www.bistatepca.org
Quality Data Supports Performance Improvement

Kate Simmons, MBA, MPH
Director, Vermont Operations

During fiscal year 2014, Bi-State supported Vermont’s Federally Qualified Health Centers in the objective of identifying and beginning to utilize common population health metrics. With Health Center Controlled Network funding, support from the Department of VT Health Access, and a unique partnership with the University of Colorado, Bi-State worked with Community Health Centers and Medicaid to populate a clinical data repository designed to integrate Health Center clinical data with claims data. This historic database includes claims data from emergency room visits, hospital stays, pharmacy, and other providers, and delivers the potential of a wealth of new information on care patterns and total cost of care for the Health Centers to utilize for performance improvement. Integration occurred in February 2014, and Bi-State staff spent the remainder of the year performing quality assurance on the data to enable analysis and utilization in the coming year.

Bi-State Primary Care Association

Abigail Mercer, MBA - Chief Financial Officer

<table>
<thead>
<tr>
<th>Consolidated Statement of Activities</th>
<th>Consolidated Statement of Financial Position</th>
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</thead>
<tbody>
<tr>
<td>FYE June 30, 2014</td>
<td>FYE June 30, 2014</td>
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<tr>
<td><strong>Revenue</strong></td>
<td><strong>Assets</strong></td>
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<td>Grant Revenue</td>
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<td>Contract Revenue</td>
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<td>Member Dues</td>
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<td>Other Revenue</td>
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<tr>
<td>Investment Revenue</td>
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<tr>
<td><strong>Total Revenue</strong></td>
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<tr>
<td></td>
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<tr>
<td><strong>Expenses</strong></td>
<td><strong>Liabilities and Net Assets</strong></td>
</tr>
<tr>
<td>Salaries and Related Expense</td>
<td>2,085,060</td>
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<tr>
<td>Other Operating Expense</td>
<td>1,563,219</td>
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<tr>
<td>Depreciation Expense</td>
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<td><strong>Total Expenses</strong></td>
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<tr>
<td><strong>Increase/(Decrease) in Net Assets</strong></td>
<td>148,693</td>
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<tr>
<td>Change in unrealized gain on investments</td>
<td>429</td>
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<tr>
<td>Grants received for capital acquisitions</td>
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<tr>
<td><strong>Beginning Net Assets</strong></td>
<td>1,135,789</td>
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<tr>
<td><strong>Ending Net Assets</strong></td>
<td>1,284,911</td>
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Bi-State Primary Care Association continues to have an unqualified A-133 audit with no instances of material weakness, significant deficiencies, or material noncompliance; qualifying as a low-risk auditee. The audit is conducted in accordance with auditing standards generally accepted in the U.S. and the standards applicable to financial audits contained in Government Auditing Standards issued by the Comptroller General of the U.S. The audit includes a report of internal control over financial reporting and tests of its compliance with certain provision of laws, regulations, contracts, grant agreements, and other matters.

The preparation of this document was financed under a Contract with the State of New Hampshire, Department of Health and Human Services, Division of Public Health Services, with funds provided in part or in whole by the State of New Hampshire and the U.S. Health Resources and Services Administration.
New Hampshire

Ammonoosuc Community Health Services  
Franconia, Littleton, Warren, Whitefield, Woodsville

Charlestown Family Medicine  
Charlestown

Community Action Program Belknap/Merrimack Counties  
Concord

Community Health Access Network  
Newmarket

Coods County Family Health Services  
Berlin, Gorham

Families First Health and Support Center  
Portsmouth

Goodwin Community Health  
Somersworth

Harbor Care Health and Wellness Center, a Program of Harbor Homes  
Nashua

Health Care for the Homeless Program  
Manchester

HealthFirst Family Care Center  
Franklin, Laconia

Indian Stream Health Center  
Colebrook, NH; Canann, VT

Lampey Health Care  
Nashua, Newmarket, Raymond

Manchester Community Health Center  
Manchester

Mid-State Health Center  
Bristol, Plymouth

NH Area Health Education Program  
Lebanon

North Country Health Consortium  
Littleton

Planned Parenthood of Northern New England  
Claremont, Derry, Keene, Manchester, W. Lebanon

Weeks Medical Center  
Groveton, Lancaster, No. Stratford, Whitefield

White Mountain Community Health Center  
Conway

Find a Health Center Near You  
www.findahealthcenter.org

Vermont

Battenkill Valley Health Center  
Arlington

Community Health Centers of Burlington  
Burlington, South Hero

Community Health Centers of the Rutland Region  
Brandon, Bromeoseen, Rutland, West Pawlet

Community Health Services of Lamoille Valley  
Morrisville, Stowe, Colchester (pharmacy)

Gifford Health Care  
Bethel, Berlin, Chelsea, Randolph, Rochester, Sharon, White River Junction

Little Rivers Health Care  
Bradford, East Corinth, Wells River

Mountain Health Center  
Bristol

Newport Pediatrics and Adolescent Medicine  
Newport

North Country Hospital  
Barton, Newport, Orleans

Northeastern Vermont Regional Hospital  
Lyndon, St. Johnsbury

Northern Counties Health Care  
Concord, Danville, Hardwick, Island Pond, St. Johnsbury

Northern Tier Center for Health  
Alburg, Enosburg, Richford, St. Albans, Swanton

Planned Parenthood of Northern New England  
Barre, Bennington, Brattleboro, Burlington, Hyde Park, Middlebury, Newport, Rutland, St. Albans, Williston

Springfield Medical Care Systems  
Springfield, Bellows Falls, Chester, Ludlow, VT; Charlestown, NH

The Health Center  
Cabot (school-based), Plainfield

University of VT College of Medicine, Office of Primary Care and Area Health Education Center Program  
Burlington

Vermont Coalition of Clinics for the Uninsured  
Barre, Bennington, Burlington, Middlebury and Vergennes, Putney, Randolph, Springfield, White River Junction, Windsor

THANK YOU FOR SUPPORTING BI-STATE PRIMARY CARE ASSOCIATION

Community Health Access Network  
DentaQuest Foundation  
New Hampshire Charitable Foundation  
New Hampshire Department of Health and Human Services, Division of Public Health  
New Hampshire Department of Health and Human Services, Office of Medicaid and Business Policy  
Vermont Department of Health, Division of Alcohol and Drug Abuse Programs  
Vermont Department of Health, Division of Health Promotion and Disease Prevention  
Vermont Department of Health, Office of Rural Health and Primary Care  
University of Colorado  
U.S. Health Resources and Services Administration, Bureau of Primary Health Care

2014 SPONSORS

American Cancer Society  
Anthem  
AT&T  
Bank of New Hampshire  
BlueCross BlueShield of Vermont  
Clark Insurance  
CommonWealth Purchasing Group  
Dentrix Enterprise  
Greenway  
Harvard Pilgrim Health Care  
Hudson Headwaters Health Network  
Meridian Health Plan  
Minuteman Health  
New Hampshire Healthy Families  
New Hampshire Dental Society  
New Hampshire Medical Society  
Northeast Delta Dental  
Orr & Reno  
Symquest  
The Dupont Group  
Vermont Information Technology Leaders  
Vermont Department of Health, Office of Rural Health & Primary Care  
Well Sense Health Plan