

BI-STATE PRIMARY CARE ASSOCIATION



SERVING VERMONT & NEW HAMPSHIRE

*Improving Access to Primary Health Care Since 1986*

**2024**

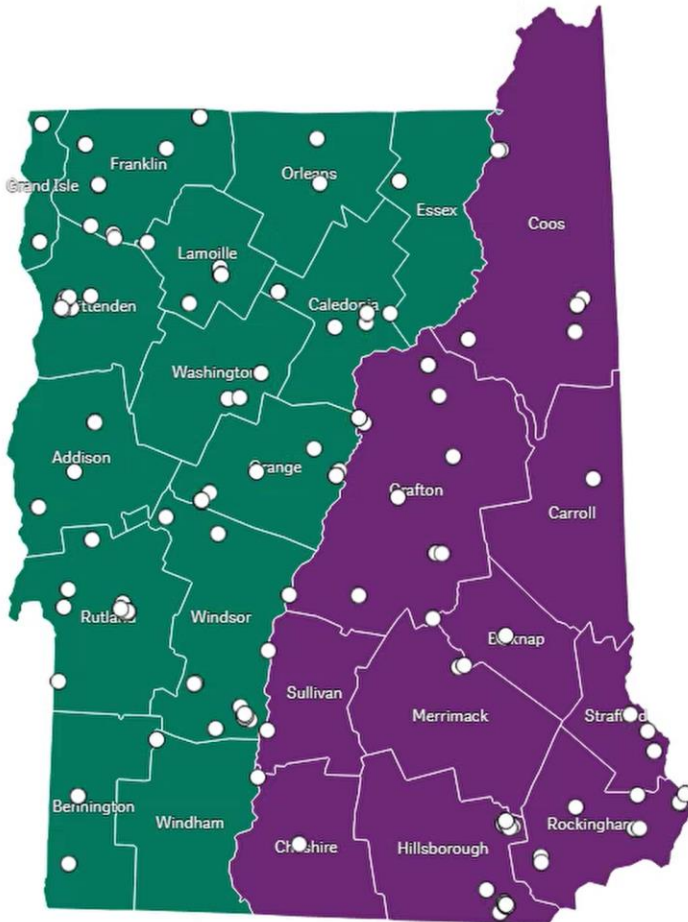
**ANNUAL  
IMPACT  
REPORT**



*Every year, Bi-State Primary Care Association's health center member organizations serve over 312,000 patients across Vermont and New Hampshire!*

## Vermont

- ❖ Battenkill Valley Health Center
- ❖ Community Health Centers
- ❖ Community Health Gifford Health Care
- ❖ Lamoille Health Partners
- ❖ Little Rivers Health Care
- ❖ Mountain Community Health
- ❖ North Star Health
- ❖ Northern Counties Health Care
- ❖ Northern Tier Center for Health
- ❖ Planned Parenthood of Northern New England
- ❖ The Health Center
- ❖ Vermont's Free & Referral Clinics



## New Hampshire

- ❖ Ammonoosuc Community Health Services
- ❖ Amoskeag Health
- ❖ Community Health Access Network
- ❖ Coös County Family Health Services
- ❖ Greater Seacoast Community Health
- ❖ Harbor Care
- ❖ Health Care for the Homeless Program
- ❖ HealthFirst Family Care Center
- ❖ Lamprey Health Care
- ❖ Mid-State Health Center
- ❖ NH Area Health Education Center Program
- ❖ North Country Health Consortium
- ❖ North Star Health
- ❖ Planned Parenthood of Northern New England
- ❖ White Mountain Community Health Center

## FY2024 Board of Directors



### Officers

Chair: Ken Gordon, CEO, Coös County Family Health Services, NH  
 Vice Chair: Michael Costa, CEO, Northern Counties Health Care, VT  
 Treasurer: Dan Bennett, CEO, Gifford Health Care, VT  
 Immediate Past Chair & Secretary: Greg White, co-CEO, Lamprey Health Care, NH

### Directors

Kathy J. Benoit,  
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Northern Tier Center for Health, VT

Kayla Davis,  
Co-Executive Director  
Battenkill Valley Health Center, VT

Robert MacLeod, CEO  
Mid-State Health Center, NH

Stuart May, CEO  
Lamoille Health Partners, VT

Henry Och, President & CEO  
Harbor Care, NH

Anna Thomas,  
Executive Director  
Health Care for the Homeless  
Public Health Director,  
City of Manchester, NH

## *Dear Friends,*

Welcome to Bi-State's FY24 Annual Report. This year has been one of adaptation and unwavering commitment to advancing the health and well-being of our members and the communities we serve.

As we navigate through an ever-evolving health care landscape, our dedication to enhancing the quality of care, promoting innovation, and championing the needs of our members remains steadfast. We are grateful to our members for their passion, expertise, and compassion to ensure the residents of our two states have access to comprehensive preventive and primary care services in their communities.

Key highlights of this year include public policy efforts at the state and federal level. Our leadership in public policy resulted in the establishment of voluntary certification for Community Health Workers in New Hampshire and unprecedented reduced administrative burden in Vermont. On the federal level, we are grateful for the \$400M in increased funding to support Community Health Centers. We are thankful for our Members of Congress, governors, and legislators who worked together to pass vital legislation enabling primary care providers to continue providing the public with necessary medical, dental, mental and behavioral health, and substance use disorder services.

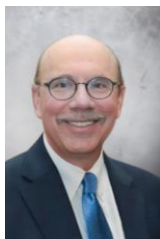
This report also acknowledges the challenges we have encountered, including weather and cyber related emergencies impacting our members and communities. We continue to share emergency preparedness resources, including climate impacts on health, and monitoring incidents like Change Healthcare.

We continued our support of workforce development through the Harvard School of Dental Medicine AEGD Dental Residency Program, the Maple Mountain Teaching Health Center Consortium and White Mountain Medical Education Consortium Family Medicine Residency Program, and the promotion of upskilling tools.

As we look ahead, we are filled with optimism and determination. Bi-State is committed to fostering a collaborative and inclusive environment where all residents continue to have access to the primary care they need. We are grateful to the Community Health Centers' boards of directors, executive leadership, primary care providers, and support staff for their unwavering commitment to the health and success of their patients and communities.

Thank you for your continued support! We look forward to another year of progress, partnership, and positive impact.

Sincerely,



Ken Gordon, Chair  
Board of Directors



Tess Stack Kuenning, CNS, MS, RN  
President and CEO

## National Government Relations

Maintaining and growing services, and the resources needed to perform those services, for the over 300,000 Granite Staters and Vermonters served by our Community Health Centers is the highest priority for our National Government Relations work. The residents of our two states need patient centered access to primary care, mental and behavioral health, substance use disorder, dental, and enabling services delivered within their communities by organizations that understand their needs. Bi-State informs and educates policymakers and stakeholders in support of key federal programs that assist those most in need in our two states, including: Community Health Centers; National Health Service Corps; Teaching Health Centers; Women, Infants, and Children; Supplemental Nutritional Assistance Program; Area Health Education Centers; Family Planning; and Temporary Assistance for Needy Families.

The United States Congress continues to provide primary care, workforce, and prevention resources to ensure residents receive comprehensive primary care services in New Hampshire and Vermont. We appreciate the leadership and steady commitment evidenced by our Members of Congress in support of the residents of our two states. Bi-State also works closely with the United States Health Resources and Services Administration through the bureaus of Primary Health Care and Health Workforce to advance our mutual goal of access to comprehensive, culturally appropriate primary care for the individuals and families in our communities.



*US Representative Becca Balint (VT) with Little Rivers Health Care CEO Andy Barter and Bi-State's Mary Kate Mohlman & Georgia Maheras.*



*US Senator Bernie Sanders (VT) visiting Lamoille Health Partners.*



*US Senators Maggie Hassan & Jeanne Shaheen (NH), US Representatives Ann Kuster & Chris Pappas (NH), Amoskeag Health CEO Kris McCracken, ACHS CEO Ed Shanshala, and Bi-State President & CEO Tess Kuenning.*



*US Senator Peter Welch (VT) with Gifford Health Care CEO Dan Bennett, Lamoille Health Partners CEO Stuart May, and Bi-State's Tess Kuenning.*

## New Hampshire Government Relations:

During the 2024 New Hampshire legislative session, we achieved policy wins on key legislation impacting access to affordable primary care for Granite Staters.

Established voluntary Community Health Worker certification that makes CHWs' services reimbursable by Medicaid and other insurance providers.

Eliminated pharmacy benefit managers' ability to pickpocket health centers' 340B savings.

Expanded the definition of a vaccine to include respiratory syncytial virus biological product, making the RSV immunization available to all children through the NH Vaccine Association.

Secured \$300,000 for the State Loan Repayment Program for those in the nursing profession.



*Bi-State's Kristine Stoddard & Stephanie Pagliuca and members of the NH Workforce Coalition.*



*Deputy Commissioner of New Hampshire Employment Security Richard Lavers speaks at Bi-State's NH Legislative Breakfast.*

## Vermont Government Relations

During the 2024 Vermont legislative session, we played a key role in achieving several policy goals that support access to primary care.

- Made permanent the state's policy on commercial insurance covering telehealth services and achieved parity in payment for audio-only telehealth services.
- Reduced provider administrative burden by waiving for primary care commercial prior authorizations for non-pharmacy care, adding exemptions for step-therapy requirements, and increasing clarity around claims submissions.
- Expanded income eligibility to 145% federal poverty level for the Medicare Savings Program, thereby reducing financial barriers to care for Medicare beneficiaries.
- Worked with the state agencies on bringing FQHC rates in line with their current scope of services.



*NCHC Interim CEO Chris Towne at Bi-State's VT Legislative Event.*



*VT CHC CEOs Kayla Davis, Jeff McKee, and Josh Dufresne testifying before a joint session of the Senate Health and Welfare and House Health Care Committees.*

# Training and Technical Assistance

## Recruiting the Next Generation of Health Professionals to Serve the Underserved

Bi-State plays a crucial role in supporting Community Health Centers in attracting, recruiting, and retaining health professionals who are dedicated to serving rural and underserved communities. Thanks to the efforts of Bi-State's Recruitment Center, 32 new health professionals were recruited to practice in Vermont and New Hampshire this year. The Recruitment Center tracks the staffing needs of local practices and promotes these opportunities to a national audience of doctors, nurse practitioners, physician assistants, dentists, and mental health and substance use disorder professionals. The Recruitment Center gets to know clinicians and connects them with a community and a practice that matches their interests.

## A Story of Success - Connecting Health Professionals with Communities in Need

April P., originally from New Hampshire, left the state to pursue higher education, with the dream of practicing primary care in a small town like her hometown. As graduation approached, she was unsure where to begin her job search until she discovered Bi-State's Recruitment Center. Responding to an ad, April connected with Bi-State who took the time to understand her priorities for both community and practice. We connected April with several practices that aligned with her goals. Among them, one stood out due to its proximity to her family. When that practice offered her a position, April eagerly accepted.



*The NOTCH team, with boxes of healthy produce.*

## Food Access & Health Care

This year, with Bi-State's support, three Vermont Community Health Centers, the Northern Tier Center for Health (NOTCH), Little Rivers Health Care, and Lamoille Health Partners, continued their innovative food access programming. In May, NOTCH hosted the Food Access and Health Care Consortium with a guided tour of the health center in Richford and concluded with a recipe demonstration from the SNAP-Ed curriculum. Building on this, Bi-State established a new food access peer group in June, providing a valuable platform for Community Health Centers to discuss the successes and challenges of food programs across Vermont and New Hampshire.

## Integrating Primary Care and Behavioral Health to Provide Whole-Person Care

Funded by the NH Department of Health and Human Services (Bureau of Drug and Alcohol Services), Bi-State is working with three New Hampshire Community Health Centers to enhance their capacity to deliver comprehensive integrated Medication Assisted Treatment services and supports for pregnant, postpartum, and parenting women with opioid use disorders. In FY24, 48 women received a broad array of critical services to support recovery and improve the quality of life for them and the infants and children affected by their opioid use.



*US Senator Maggie Hassan (NH) with Harbor Care's CEO Henry Och at a ribbon-cutting ceremony.*

# Bi-State Financials, FYE June 30, 2024

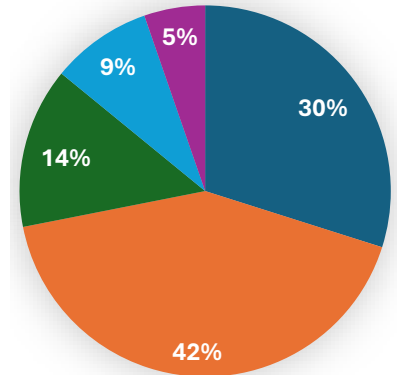
## Consolidated Statement of Activities FYE June 30, 2024

Operating revenue	
Grant revenue	6,411,502
Dues income	466,505
Other revenue	532,501
Interest income	82,130
<b>Total operating revenue</b>	<b>7,492,638</b>
Expenses	
Salaries and wages	2,889,649
Employee benefits	644,351
Subrecipient grant pass-through	2,441,144
Subcontractors for program services	535,328
Professional services	117,552
Occupancy	104,176
Other	487,607
Depreciation	44,140
<b>Total expenses</b>	<b>7,263,947</b>
Excess of revenue over expenses	228,691
Net assets without donor restrictions, beginning of year	3,938,490
Net assets without donor restrictions, end of year	4,167,181

## Consolidated Balance Sheet FYE June 30, 2024

Assets	
Cash and cash equivalents	1,768,700
Grants and other receivables	1,102,382
Prepaid expenses	122,036
<b>Total Current Assets</b>	<b>2,993,118</b>
Investments	1,466,638
Deferred compensation investments	226,082
Operating lease right of use asset	68,248
Property and equipment, net	441,140
<b>Total Assets</b>	<b>5,195,226</b>
Liabilities and Net Assets	
Current liabilities	
Accounts payable and accrued expenses	323,919
Accrued salaries and related expenses	284,029
Deferred revenue	124,369
Current portion of operating lease liability	46,052
<b>Total current liabilities</b>	<b>778,369</b>
Deferred compensation payable	226,082
Operating lease liability, less current portion	23,594
<b>Total Liabilities</b>	<b>1,028,045</b>
Net Assets, Without Donor Restrictions	4,167,181
<b>Total Liabilities and Net Assets</b>	<b>5,195,226</b>

## Bi-State Revenue Sources FY2024



- Federal Grants
- State Grants
- Foundation/Private Grants
- Member Dues
- Other Sources

One-third of Bi-State's revenue was distributed to support innovative programs and direct patient care within our communities.

### Subrecipient grant pass through:

State of NH, COVID Funding (21.027 & 93.268)	919,997.11
State of NH, Community Health Worker (93.391)	588,489.86
State of NH, iMAT Services (93.788)	702,805.11
Harvard University, Dental Residency Program (93.059)	64,957.34
HRSA, Food Access Consortium (93.912)	147,747.75
Pew Charitable Trusts, Dental Therapy Program	17,166.70
	<u>2,441,143.87</u>

Bi-State Primary Care Association continues to have an unqualified A-133 audit with no instances of material weakness, significant deficiencies, or material non-compliance, 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 controls over financial reporting and tests of its compliance with certain provision of laws, regulations, contract, grant agreements, and other matters.

## Bi-State Training and Technical Assistance: A Hive of Activity!



# *With Appreciation to our Funders and Sponsors...*

## Funders

**Community Health Access Network**  
**Harvard University**  
**NH Charitable Foundation**  
**NH Department of Health & Human Services**  
Division of Behavioral Health  
Division of Public Health  
**National Association of Community Health Centers:**  
Delta Center Foundation  
**Northeast Delta Dental**  
**Pew Charitable Trusts**

**VT Department of Health:**  
Division of Health Promotion & Disease Prevention  
Division of Laboratory Sciences & Infectious Diseases  
Office of Health Equity & Integration  
**U.S. Department of Health and Human Services:**  
Health Resources and Services Administration  
**Vermont Information Technology Leaders, Inc**

## Sponsors

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GSK – Glaxosmithkline  
HealthSnap  
Iris Telehealth  
Labcorp  
Maxor

Merck – Vaccine Division  
Mutual of America  
NAMI New Hampshire  
New Futures  
New Hampshire Children's Health Foundation  
New Hampshire Healthy Families  
Northeast Delta Dental  
Novo Nordisk  
Oasis Health Partners  
Pfizer  
Precision Care Solutions  
Sanofi  
Sheehan Phinney  
UNH Institute on Disability  
Vytalize Health  
WellSense

## **Bi-State Primary Care Association**

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61 Elm Street • Montpelier, Vermont 05602

[www.bistatepca.org](http://www.bistatepca.org)

[www.bistaterecruitmentcenter.org](http://www.bistaterecruitmentcenter.org)

