

5/27/11

To: All Hemophilia and Thrombosis Center Community

Dear Patient and Family Members:

We are settling in to our new location at the University Physicians (UPI) Building and are now ready to move to the next transition for 2011. With this letter I am formally introducing a new collaborative relationship between the Hemophilia and Thrombosis Center (HTC) and The Children's Hospital (TCH). Effective this summer the outpatient clinic visit portion of the HTC program will be formally managed and run by TCH for both pediatric and adult patients. This will include your Annual Comprehensive Visit. Under this arrangement, the hemophilia & thrombosis clinics will join the TCH Center for Cancer and Bleeding Disorders (CCBD) network. The following describes in greater detail the scope of this change and how it will impact you. I believe this change will help ensure the existence of the HTC in Colorado for years to come.

1. Why is the clinic structure changing? *To improve care!*

Since 1977 the HTC has been located in space provided by the University of Colorado. Funding for the center's personnel has come from federal grants, state appropriations, research studies, and more recently the center's pharmacy program. Budget cuts from federal and state funding sources have been severe. For over 25 years, patients have been fortunate to receive most clinical services without cost. For an annual comprehensive visit, patients have typically only received a bill for the physician fees through University Physicians, Inc (UPI) and laboratory charges from the University of Colorado Hospital (UCH). All other visits throughout the year were not charged. Of the 140 HTC's nationwide, the Denver HTC has been the last hemophilia center to sustain this model of care.

Additionally, healthcare regulations have changed. Clinics are now required to operate with computerized medical records and standards of care mandated by various regulatory agencies. We can no longer afford to support the overhead that is required in today's healthcare system to adapt to these changes. It has become necessary for us to partner with one of the campus institutions in order to meet these new challenges and maintain a clinic facility that will enhance our mission, provide improvements in patient care, and be sustainable for the future.

2. Why is the HTC aligning with The Children's Hospital and why is this good for the hemophilia community?

The Children's Hospital is proud of our program and they have a history of supporting programs that serve individuals with complex disorders such as hemophilia, thrombophilia and stroke, regardless of patient age. This relationship will allow our clinic program to be accredited by the Joint Commission on Accreditation of Healthcare Organizations and the Colorado Department of Public Health and Environment. Very few hemophilia programs nationwide are located in an educational building, as we have been. We chose to move to a separate facility for the outpatient clinic because neither TCH nor UCH had adequate rooms to meet our needs for the large number of

patients and providers at comprehensive care clinics. In addition, the new facility gives us the opportunity to move thrombosis and stroke clinics to the same coagulation program for better staff coverage, sharing resources and continuity of care.

While the hemophilia program was funded initially by the State of Colorado and the federal government, there is currently no public funding for patient care. The continuous access to physicians, nurses, physical therapists, social workers, program assistants, program coordinators and pharmacists expert in hemophilia, and access to research clinical trials afforded by the hemophilia center is funded in largest measure by the center's hemophilia pharmacy. The pharmacy is designated a federal "340B PHS" pharmacy. That designation applies to organizations who receive federal grants that serve specific patient populations such as hemophilia. The HTC pharmacy has been able to offer patients the highest value for the lowest cost of factor products and seamless coordinated care with the clinic program. Further, any income from the pharmacy is re-invested back into the HTC and the community for maintaining and expanding services and programs. We are proud to offer our clinic to all patients, regardless of their participation in our pharmacy program. In addition to staff, the pharmacy program funds important programs such as camp, PEP, First Steps, outreach clinics, staff continuing education, patient support services and many more patient benefits. However, our pharmacy program cannot also continue to fund the rent, lights, maintenance and upkeep of a physical clinic facility. A liaison with an established health care system such as TCH is ideal because it brings us their expertise, resources and economy of scale. TCH will support the clinic facility and staff for the clinic hours and provide scheduling, insurance prior approvals and billing services. In addition, they will provide their computerized medical record system which will make all labs, radiology and visit reports immediately accessible to your primary care physician as well as the residents and fellows in the emergency rooms and the night call physicians. Finally, patients will be able to receive factor infusions at the other Center for Cancer and Bleeding Disorders sites in Littleton and Colorado Springs without always having to drive to the Anschutz Medical Campus.

3. Why is the adult clinic becoming part of The Children's Hospital?

There are several reasons that make it ideal to have only one clinical relationship. First, it is more efficient for the staff to use one computerized medical record for care. Second, TCH supports other specialty disorder programs which include both pediatrics and adults. The University of Colorado Hospital is not currently able to incorporate the HTC into a similar arrangement. It is possible that they may be able to serve as a parallel system for adults at some point in the future, but in the meantime, we have time to try to develop one seamless system to provide care for bleeding and clotting patients from birth throughout the life course to older age. Finally, the physicians at University Hospital clinics, emergency room, and inpatient services will be able to immediately access and read The Children's Hospital chart.

4. What will stay the same with this new relationship?

This transition affects only the clinic visit portion of the total HTC Program. All other aspects remain under the University of Colorado School of Medicine and will continue as they have for many years without additional costs to you. You will see no change in the following:

- Commitment and compassion of the staff for caring for people with bleeding disorders
- The existing staff, all with decades of experience, will remain the same. In fact, we have already hired an additional part time physical therapist and a nurse and hope to hire an additional social worker to improve patient services.
- The pharmacy program remains the same, providing customized services and the highest value for the lowest cost. You will still be able to use your home factor for a clinic visit.

- Diagnostic services with lab and expert physician opinion
- No scheduling needed for walk-in emergent visits
- Home visits and school in-services
- Patient and family education, home infusion teaching
- Commitment and partnership with the Hemophilia Society of Colorado and Rocky Mountain Hemophilia & Bleeding Disorders Association in Montana to jointly provide programs which enhance the care of persons with bleeding disorders
- Telephone support
- All social worker visits and counseling support, and most physical therapy visits will not be billed as a clinic visit
- Research study participation and visits. The only change will be more and better space in which to conduct those visits.
- Adult patients will continue to receive all other medical services directly from University Hospital. You will merely be registered in both systems.

5. What will change with this new relationship?

Your clinic visit will look slightly different in several ways:

- New front office clinic staff has been added. Jessica Ngo and Dora Marquez, who is fluent in Spanish, will manage the scheduling and insurance verification process.
- To ensure patient safety, a picture will be taken on the first visit, and a wrist band is required for all visits.
- The staff and providers will be recording notes in the computerized medical record during your visit.
- Your insurance co-pay will be collected at the time of the visit, if you have a co-pay with your insurance provider.
- After your visit, your insurance will be billed. Currently, you typically receive two bills, one from University Physicians Inc (UPI) and one from the UCH for any lab charges. Now you will receive a bill from UPI and from TCH. TCH bill will include all visit related charges such as labs run at TCH or UCH, a facility fee, infusion fee and other related charges.
- The portion of the bill that you are responsible for is determined by your insurance plan and its contract with TCH and UPI.
- An unexpected benefit of this affiliation is that emergency room visits will be eliminated for some patients. Previously, if your insurance restricted the HTC Pharmacy from providing factor, patients had to go to the ER for emergency day time infusions. Most of these infusions will now be able to be authorized to be given in the HTC-TCH Clinic.
- Finally, pediatric patients will be able to access all of the other services and programs offered to all patients of TCH.

6. How will this affect patients in Montana and Wyoming and the outreach clinics to western slopes Colorado and Montana?

The physician billing charges for the annual comprehensive visit will apply equally to the outreach clinics in Montana and the western slope of Colorado. Some sites charge their own facility fee.

7. What can I do to make this transition as smooth as possible?

Always provide accurate insurance information and notify the clinic when your insurance plan changes. Insurance information must be provided prior to your annual comprehensive visit. Provide your email address to facilitate communication. Finally, if you receive a bill for services and have financial concerns, contact the Financial Services office at TCH immediately upon receiving the bill in order to discuss payment options or other arrangements.

8. How can I discuss my concerns?

Both the HTC and TCH staff want to hear from you to discuss your concerns. We will offer “Town Hall Meetings” by phone conference to facilitate this dialogue. Representatives of the HTC and TCH will be present to answer your questions. One hour calls are scheduled for the following times:

DATE	TIME	CALL IN CONFERENCE NUMBER
Tuesday, 6/14	10-11 am	720-777-1111 or toll free 1-866-324-1982 (only if calling from outside Denver area) enter Meeting ID # 13579
Wednesday, 6/15	2-3 pm (Spanish speaking representative attending)	
Wednesday, 6/15	7-8 pm	
Thursday, 6/16	7-8 pm	

If the call you wish to join is at full caller capacity, and you are not able to call at other times, please notify Jessica Ngo or Pat Casias and we will schedule additional times.

All of us at the Hemophilia and Thrombosis Treatment Center and The Children’s Hospital remain committed to your best care and satisfaction. Please continue to help us to serve you. We look forward to seeing you in our new clinical space.

Sincerely yours,



Dr. Marilyn Manco-Johnson
Center Director