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Long Term Cost Effective Solutions and Effective Implementation  
Joint Effort with Business, Nonprofits and Government  
Outline of Areas Impacting Seniors

1. Housing
  - 1.1. Remain in home
    - 1.1.1. Property tax relief
    - 1.1.2. Maintenance support
  - 1.2. Downsize
  - 1.3. Senior oriented communities
  - 1.4. Independent living facility
2. Living situation – of choice
  - 2.1. In home care/assistance – paid by individual/family
    - 2.1.1. Employment based
    - 2.1.2. Placement based
    - 2.1.3. In home medical services
  - 2.2. In home care/assistance – family caregiver
  - 2.3. In home care/assistance – provided by nonprofit/churches
    - 2.3.1. Village concept
    - 2.3.2. Other community based organizations
    - 2.3.3. Church associations
  - 2.4. In home care/assistance – provided by government
  - 2.5. Social needs
  - 2.6. Transportation
  - 2.7. Meals
    - 2.7.1. Meals on wheels
    - 2.7.2. Community meals
  - 2.8. Adult day care
3. Living situation – of necessity
  - 3.1. Assisted living
  - 3.2. Nursing home – paid by individual/family
  - 3.3. Nursing home – paid by nonprofit/government
  - 3.4. Family caregiver support
4. Support services
  - 4.1. Case/social workers
  - 4.2. Emotional/mental support services
  - 4.3. Adult protective services
  - 4.4. Legal aid—Colorado Bar Association
  - 4.5. Income tax assistance

5. Medical services
  - 5.1. Cost of providing medical services
    - 5.1.1. Care transitions
  - 5.2. Price of drugs
  - 5.3. Dental/hearing/eye glasses
  - 5.4. Medicare
  - 5.5. Medicaid – Medical costs
  - 5.6. Tort reform
6. Research and Science
  - 6.1. Alzheimer's – the big impact
  - 6.2. Improved quality of life
  - 6.3. Others
7. Technology -- Rapid response to new developments
8. End of Life
  - 8.1. Palliative care –
  - 8.2. Hospice care
  - 8.3. A better way to die
  - 8.4. Death With Dignity – assisted suicide
9. Finances – management for individual
  - 9.1. Long term care insurance
10. Legal
  - 10.1. Elder abuse
11. Workforce possibilities
  - 11.1. Utilizing the resources of seniors
12. Communication of available services to the public
  - 12.1. Web page
  - 12.2. Senior and other newspapers
  - 12.3. Organizations: church/nonprofit/government/profit
  - 12.4. Events
13. Quality control
  - 13.1. Ombudsman –
  - 13.2. Auditors –
14. Minority – special issues
  - 14.1. LGBT
  - 14.2. Poverty
15. Federal programs
  - 15.1. Older Americans Act
  - 15.2. Social Security
  - 15.3. Medicare – financing
  - 15.4. Medicaid – financing
  - 15.5. Department of Labor
    - 15.5.1. Labor regulations for in-home care services
16. Overview
  - 16.1. Building age friendly communities

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Analysis of potential cost benefit in investment in statutory funding for Older Coloradan's Fund

80+ population 2015	167,581				
80+ population 2030	341,755				
Increase in 15 years.	174,174				
		<b>In home cost</b>	<b>Expanded in home cost</b>	<b>State cost Nursing home</b>	<b>State/federal cost nursing home</b>
Straight line average per year 80+		11,612	11,612	11,612	11,612
Assume 14% need services		1,600	1,600	1,600	1,600
Cost per year		\$ 5,000	\$ 12,000	\$ 50,000	\$ 85,000
		\$ 8,000,000	\$ 19,200,000	\$ 80,000,000	\$ 136,000,000

Population numbers per state demographer, November 2014

# BurstIQ accepts challenge, tackles patient data issue

By Tamara Chuang  
*The Denver Post*

BurstIQ, the first company to publicly emerge from February's 10.10.10 digital health event, is moving ahead with plans to create technology to help people better manage and securely share their health data.

CEO Frank Ricotta said Monday that the company received about \$250,000 in seed funding from PV Ventures, a venture-capital firm in Colorado Springs. Engineers have begun to build a platform to use sensors, mobile devices and the cloud and make sense of all the health data a person generates — from doctor visits and hospital stays to wearable devices like Fitbit bracelets or the coming Apple Watch.

“People are realizing there’s a lot of healing power buried in your own medical data,” said Ricotta, who is based in Colorado Springs.

BurstIQ plans to work with employers to create wellness plans for workers. The idea is the data generated by employees could be used to negotiate lower insurance rates and fees. Health data must also be useful and accessible — but stored securely — so if someone has a sudden emergency, the person’s healthcare history is available to doctors.

“It would give you the data to really allow you to construct the right health plan for you,” Ricotta said. “We believe the combination of sensors and mobile will make it personal again.”

A pilot program is the next step and BurstIQ has signed up one company so far. Results could come within six months.

PV Ventures managing director Bill Miller in a statement called BurstIQ’s concept “a game-changer for digital health data access and we believe that the innovative security features that are at the core of the product can extend beyond digital health, providing a foundational capability to protect an individual’s privacy.”

The 10.10.10 event, held February in Denver, brought together 10 entrepreneurs and tasked them with 10 health issues, from living with Alzheimer’s to errors in patient-data matching. The 10-day event challenged the entrepreneurs to approach healthcare differently and find marketable solutions.

Organizer Tom Higley said that the goal wasn’t for the 10 CEOs to fix the wicked

problems. Some are tackling parts of a problem. Some are working together. And some, like Ricotta, are taking advantage of even newer technologies, like Apple's HealthKit, a platform allowing apps to access a user's securely stored health data.

"Really powerful things can happen at that moment when a new platform becomes available," Higley said, pointing to the first iPod, which was a high-priced alternative to the Sony Walkman. "What Apple has done with HealthKit is create the potential for tens of thousands of apps we haven't seen yet. It's now just a question of whether folks are sufficiently imaginative and do a good job of bringing it to market."

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## Business

# Entrepreneurs start 10-day race to solve 10 big health problems

**By Tamara Chuang** *The Denver Post*

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Moderator Mike Biselli, of STRIDE, introduces a wicked problem presenter as the 10.10.10 conference kicks off Monday at the McNichols Building in Denver. Ten CEO-entrepreneurs were selected to participate.

In this age of technology, it's mind-boggling to think that as many as one in five patients are misidentified at hospitals nationwide. Or that antibiotic-resistant infections — many attributed to doctors not washing their hands — cause 23,000 deaths a year.

These were among 10 critical health issues presented Monday to an audience of about 275 people, including 10 strategically picked CEOs and entrepreneurs who must now decide whether they can create a viable company in 10 days.

10.10.10, the first-of-its-kind event, has rallied the city of Denver and health care systems, including Kaiser Permanente and Celebration Health Florida Hospital, to support entrepreneurs.

"Entrepreneurs hold the key to unlocking a huge market opportunity. That is what they do," said Tom Higley, a serial entrepreneur who dreamed up the idea three years ago. "They have a vision. They're able to execute and deliver on that vision. That is a resource that hasn't been explored in a way we'd like it to be."

Kelly Dunkin, vice president of philanthropy at Colorado Health Foundation, pitched the epidemic of childhood obesity by showing how in the past few decades, national rates jumped from a few states with a high of 10 percent to 14 percent obese children to more than half the states having childhood obesity rates above 25 percent.

"If we don't do anything about this, this generation of kids will be the first to live sicker and shorter lives than their parents," she said.

The College of Healthcare Information Management Executives, or CHIME, pointed out the high cost of misidentifying patients or duplicating their records — it can cost \$1,000 to fix a record. CHIME president Russ Branzell mentioned

something even scarier: "If I can't identify you, how can I make sure your information is protected?" he said.

David De Jesus, with Florida Hospital, which will offer experts and data to entrepreneurs, said he flew in to witness the event because he sees Denver as a leader in digital health.

"Denver has progressed far more than other states. We're really looking for opportunities to create an alliance," said De Jesus, the hospital's digital health principal architect. "Overall, all these problems are a national endeavor. Not just local."

The 10 wicked problems presented were:

- Alzheimer's disease
- Childhood obesity
- Patient engagement
- Antibiotic resistance
- End-of-life care
- Pandemic weapons and bioterrorism
- Patient and data matching
- Health guide maps
- Health data
- Patient mobility and independence

The entrepreneurs will work 10 days straight and return Feb. 26 to present their findings and indicate whether they will spend the next nine to 10 months pursuing a startup.

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## Participants

- Frank Ricotta, managing partner of BurstIQ from Denver
- Maurice Herbelin, a Sacramento, Calif., medical doctor who previously served as a UnitedHealth Group medical director
- Joy Randels, CEO of tech-accelerator New Market Partner in Bradenton, Fla.
- Monique Giggy, co-founder of mobile-golf app Swing by Swing Golf, in Palo Alto, Calif.
- Zackary Lewis, Denver founder of radio-streaming company Liquid Compass
- Lizelle van Vuuren, Denver-based CEO of marketing firm Effectively and founder of Women Who Startup
- Craig Misrach, San Diego-based founder of medical device company Freedom Meditech
- Kelly O'Neill Dwight, Denver-based president of KMD Consulting Services
- Cheryl Kellond, co-founder of Boulder's Bia Sport, a sports watch company
- Lincoln Powers, founder and CEO of Rocky Mountain Technology Group in Montana