

2021 Snapshot of Rural Health: Sources & Citations

Page	Section	Heading	Fact	Citation
Table of Contents	Table of Contents	Definition	Definition provided for Critical Access Hospitals (CAHs).	Rural Health Information Hub. (n.d.). Retrieved February 28, 2018. Last Reviewed February 27, 2018 by Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS). Link to Rural Health Information Hub.
Table of Contents	Table of Contents	Definition	Definition provided for Federally Certified Rural Health Clinics (RHCs).	1."Rural Health Clinics Act of 1977 - P.L. 95-210" (PDF). 91 Stat. 1485. (n.d.). Retrieved February 28, 2018. U.S. Government Printing Office. December 13, 1977. 2. Nickerson,G. , Rural Health Clinic CG Chair, (2014, April). National Rural Health Association Policy Brief: Rural Health Clinics. Retrieved February 28, 2018, from. National Rural Health Association (NRHA). Link to Association Policy Brief: Rural Health Clinic.
1	Demographics	Population Numbers and Rural Residents	12% - 718,749 People The estimated Colorado population in 2021 is 5,872,697. The rural population is 718,749 (12.2% of the total state population).	Colorado State Demography Office, & Department of Local Affairs. (n.d.). Population by Single Year of Age - County (Forecasted). Retrieved January 14, 2021. Link to the Colorado State Demography Office.
1	Demographics	An Aging Population	The median projected age in rural Colorado in 2025 is 42, versus 40 in urban counties.	Colorado State Demography Office, & Department of Local Affairs. (n.d.).Projected Median Age - 2025. Retrieved June 24, 2020. Link to Colorado State Demography Office & Local Affairs.
1	Demographics	An Aging Population	The state's top 3 oldest counties represent rural areas and have a median age of over 53. These counties include: Custer, Mineral and Huerfano.	Colorado State Demography Office, & Department of Local Affairs. (n.d.).Projected Median Age - 2021. Retrieved June 24, 2020. Link to Colorado State Demography Office & Local Affairs.
1	Demographics	An Aging Population	20% of the rural population is 65+; 15% of the urban population is 65+	Colorado State Demography Office, & Department of Local Affairs. (n.d.).Projected Median Age - 2025. Retrieved January 14, 2021. Link to Colorado State Demography Office & Local Affairs.
1	Demographics	Colorado is a Rural State	47 of Colorado's 64 counties are rural or frontier (17 urban, 24 rural, 23 frontier).	Colorado: County Designations, 2018 [Map]. Colorado: County Designations, 2018 (p. 1). CO: State Office of Rural Health (SORH). Colorado Rural Health Center. Retrieved June 3, 2019. Link to County Designations Map.
1	Demographics	Colorado is a Rural State	77% of Colorado's landmass (Square Miles) is considered rural or frontier.	National Association of Counties (NACO). (n.d.). Colorado: 64 Counties in Colorado. Retrieved June 19, 2018. Please Note: NACO information for Colorado Counties accessed through "Wikipedia - The Free Encyclopedia". Calculation SqMi Rural-Frontier/Total SqMi. Link to the National Association of Counties (NACO).
1	Demographics	Colorado is a Rural State	Rural Las Animas County is roughly the size of Connecticut, yet has only 1 hospital	1. National Association of Counties (NACO). (n.d.). Colorado: 64 Counties in Colorado. Retrieved June 19, 2018. Search of Las Animas and Search of Connecticut. 2. "Facility directory by city and county". Colorado Department of Public Health and Environment. Retrieved June 19, 2018. Link to National Association of Counties.
1	Demographics	Colorado is a Rural State	"Rural" - A non-metropolitan county containing no cities over 50,000 residents.	Department of Health and Human Services: Federal Office of Rural Health Policy. (2017, January). Defining Rural Population. Retrieved September 19, 2017. Link to Department of Health and Human Services: Defining Rural Populations.
1	Demographics	Colorado is a Rural State	"Frontier" - A county that has a population density of 6 or fewer residents per square mile.	Rural Health Information Hub. (n.d.). Retrieved December 11, 2019. "Health and Healthcare in Frontier Areas". Last Reviewed June 7, 2018 by Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Link to Rural Health Information Hub.

2	Demographics	People: Race and Origin of Coloradans	Race & Origin of Coloradans: 67.7% White (Not Hispanic or Latino) 21.8% Hispanic or Latino 4.6% Black or African American 3.5% Asian 3.1% Two or More Races 1.6% American Indian & Alaska Native 0.2% Native Hawaiian & Other Pacific Islander	U.S. Census Bureau QuickFacts: Colorado v2019 (July 1, 2019). Retrieved January 14, 2021. Link to U.S. Census Bureau Quick Facts: Colorado
2	Demographics	People: Race and Origin of Coloradans	People of color comprise about 26% of the population in rural communities and 31% in urban areas.	Colorado Health Equity Report: Vital Signs Report (Rep.). (n.d.). "The Changing Face of Colorado" Colorado Center on Law & Policy. Retrieved December 11, 2018. Link the Colorado Health Equity Report: Vital Signs Report.
2	Demographics	People: Race and Origin of Coloradans	1 in 4 non-citizens (27.1%) are uninsured, compared with 1 in 20 citizens (5.8%).	Colorado Health Institute, "2019 Colorado Health Access Survey: Health Insurance Coverage". Published February 2020. Retrieved July 14, 2020. Link to Colorado Health Institute.
2	Demographics	People: Race and Origin of Coloradans	10% of Coloradans were born outside the US	Center for Health Progress. "IMMIGRANT HEALTH IN COLORADO POPULATION DEMOGRAPHICS & INSURANCE STATUS". Published February 2018. Retrieved July 17, 2020. Link to Center for Health Progress PDF.
2	Demographics	Highlighted Population: Native Americans in Colorado	The Southern Ute Indian Tribe and the Ute Mountain Ute Tribe are the two federally recognized tribes residing in Colorado.	Colorado Official State Portal - "Tribes". Retrieved July 21, 2019. Link to Colorado Official State Portal - "Tribes" Website.
2	Demographics	Highlighted Population: Native Americans in Colorado	There are about 56,010 American Indian and Alaska Natives in Colorado, which is 1.1 percent of the State's total population.	Colorado Office of Health Equity, Colorado Department of Public Health and Environment, "2015 Health Disparities Fact Sheet - American Indians/Alaska Natives in Colorado". Retrieved July 21, 2019. Link to 2015 Health Disparities Fact Sheet.
2	Demographics	Highlighted Population: Native Americans in Colorado	Diabetes is more prevalent among AI/AN adults compared to the total population. In Colorado, 13.3% of AI/AN individuals have diabetes, compared to the overall state average of 6.5%.	Colorado Office of Health Equity, Colorado Department of Public Health and Environment, "Health Inequity Fact Sheet - American Indians/Alaska Natives in Colorado". Published March 2019. Retrieved July 6, 2020. Link to American Indians/Alaska Natives March 2019 Fact Sheet.
2	Demographics	Highlighted Population: Native Americans in Colorado	21.1% of American Indian/Alaska Native Coloradans are living below the poverty level compared to all Coloradans at 11.5% (a 59% difference).	Colorado Office of Health Equity, Colorado Department of Public Health and Environment, "Health Inequity Fact Sheet - American Indians/Alaska Natives in Colorado". Published March 2019. Retrieved July 6, 2020. Link to American Indians/Alaska Natives March 2019 Fact Sheet.
2	Demographics	Highlighted Population: Native Americans in Colorado	45.7% of American Indian/Alaska Native Coloradans are food insecure compared to all Coloradans at 23.9%.	Colorado Office of Health Equity, Colorado Department of Public Health and Environment, "Health Inequity Fact Sheet - American Indians/Alaska Natives in Colorado". Published March 2019. Retrieved July 6, 2020. Link to American Indians/Alaska Natives March 2019 Fact Sheet.
2	Demographics	Highlighted Population: Native Americans in Colorado	14.9% of American Indian/Alaska Native Coloradans are uninsured compared to all Coloradans at 11.2%.	Colorado Office of Health Equity, Colorado Department of Public Health and Environment, "Health Inequity Fact Sheet - American Indians/Alaska Natives in Colorado". Published March 2019. Retrieved July 6, 2020. Link to American Indians/Alaska Natives March 2019 Fact Sheet.

3	Demographics	Veterans	An estimated 387,618 veterans currently live in Colorado (6.5% of the population).	[Veteran Population by County - Population Projections 2021]. (2017). Published raw data. US Department of Veteran Affairs. Retrieved January 14, 2021 from website "Population Tables">"Demographics">"Counties" (Table 9L: VetPop2016 County-Level Veteran Population by STATE, AGE GROUP, GENDER, 2015-2045). For total population estimates for 2020, projected/forecasted populations were used from the Colorado Department of Local Affairs. Link to Veteran Population Projections - US Department of Veteran Affairs.
3	Demographics	Veterans	Coloradans who have served are more than twice as likely to have a disability that makes it difficult to get around.	Colorado Health Institute (CHI). "Rural Veterans and Suicide Prevention: Leveraging Strengths in Eastern Colorado". Published November 12, 2018. Retrieved October 27, 2020. Link to Colorado Health Institute.
3	Demographics	Veterans	In August 2019, 4.7 million veterans in the US, or 25% of the total, had a service-connected disability.	Bureau of Labor and Statistics. "EMPLOYMENT SITUATION OF VETERANS — 2019". Published March 19, 2020. Retrieved September 1, 2020. Link to Employment Situation of Veterans - 2019.
3	Demographics	Veterans	Covering Veterans' Healthcare Medicare 45% VA System/Tricare West 36% Medicaid 10% Uninsured 3%	Colorado Health Institute (CHI). "Rural Veterans and Suicide Prevention: Leveraging Strengths in Eastern Colorado". Published November 12, 2018. Retrieved October 27, 2020. Link to Colorado Health Institute. Colorado Health Institute (CHI). "Rural Veterans and Suicide Prevention: Leveraging Strengths in Eastern Colorado". Published November 12, 2018. Retrieved October 27, 2020. Link to Colorado Health Institute.
3	Program Spotlight	Together with Veterans	"Suicide among veterans has been steadily increasing, and rural veterans have a 20% increased risk of death by suicide compared to urban veterans. A program called Together With Veterans was formed to help rural communities address and prevent suicides among veterans. The initiative is veteran-led, collaborative, evidence-based, and community-centered. Based in Colorado, Together With Veterans (TWV) Rural Suicide Prevention Program recruits, trains, and organizes veterans and supporting organizations to lead evidence-informed veteran suicide prevention strategies in their communities. TWV was initially developed using a community-based participatory research approach and helps tailor these strategies to individual communities. By emphasizing veteran leadership, TWV maximizes opportunities to prevent suicide and encourage wellbeing among rural veterans. Together With Veterans is making a difference for the veterans and partners who have participated. Every quarter, TWV reaches 1,500 rural veterans through direct contact at meetings, regional events, or local coordinators. To reduce veteran suicide, especially in rural Colorado, it is important to understand and address social, economic, and cultural factors unique to their communities. Veterans have different life experiences than people who have never served in the military, and data show they often are reluctant to seek mental health care." -Together With Veterans Rural Suicide Prevention Program, Rural Health Information Hub	Rural Health Information Hub. (n.d.). Together With Veterans (TWV). Retrieved October 27, 2020. Link to Rural Health Information Hub.
4	Demographics	Education	80% of school districts in Colorado are in rural areas.	Colorado Rural Education Collaborative. Retrieved July 6, 2020. Link to Colorado Rural Education Collaborative (CREC).
4	Demographics	Education	Out of 178 districts, 38 are classified as rural while 110 are classified as small rural.	Colorado Rural Education Collaborative. Retrieved July 6, 2020. Link to Colorado Rural Education Collaborative (CREC).
4	Demographics	Education	Colorado spends on average \$10,202 per student compared to the national average of \$12,612.	The United States Census Bureau. "U.S. School System Spending Per Pupil by Region". Published May 11, 2020. Retrieved October 20, 2020. Link to The United States Census Bureau.
4	Demographics	Education	Nearly 40% of prime working age people in rural counties have a high school education or less, compared to 31% in urban areas.	Colorado Health Equity Report: Vital Signs Report (Rep.). (n.d.). Colorado Center on Law & Policy. Retrieved September 18, 2018. Link to Colorado Health Equity Report.

4	Demographics	Education	86% of rural Colorado students graduate high school, surpassing 83% of urban students in the state.	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. County Health Rankings (2019, April). Colorado County Data: High school graduation. Retrieved July 6, 2020. Link to County Health Rankings.
4	Demographics	Education	60% of rural Coloradans attend some kind of post-secondary education, compared to 73% of urban Coloradans.	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. County Health Rankings (2020, April). Colorado County Data: Some College. Retrieved July 6, 2020. Link to County Health Rankings.
4	Demographics	Education	10% of adult Coloradans lack the most basic literacy skills.	STAND for Children Colorado. The State of Literacy in Colorado. 2017 Report. Retrieved June 19, 2018. Link to STAND for Children Colorado Report.
4	Demographics	Teacher Pay	Colorado teachers are paid far less than the national average when compared to comparable jobs for college graduates.	"Some Colorado teachers could earn more waiting tables. Lawmakers hope to change that." The Colorado Independent. Published January 28, 2020. Retrieved July 6, 2020. Link to The Colorado Independent Article.
4	Demographics	Teacher Pay	"More than a third of Colorado school districts — mostly small, rural ones — have average teacher salaries of less than \$40,000 a year, and 85% of Colorado's districts have average teacher salaries under \$50,000." - The Colorado Independent	"Some Colorado teachers could earn more waiting tables. Lawmakers hope to change that." The Colorado Independent. Published January 28, 2020. Retrieved July 6, 2020. Link to The Colorado Independent Article.
4	Demographics	Teacher Pay	In the 2019-2020 teaching year, the 10 districts with the lowest average teacher salaries resided in rural counties. The average salaries for those 10 districts fell below \$36,000. The state's average salary for this same time period was \$57,745.	Colorado Department of Education. "Interactive Teacher Salary Dashboard" [Raw Data: 2019-2020]. Retrieved July 6, 2020. Link to Colorado Department of Education.
4	Demographics	Teacher Pay	Colorado teacher salaries in almost every rural district (95%) are below the regional cost of living.	Dollars and Data: A Look at K-12 Education Funding in Colorado. Common Sense Institute. "School Finance Funding Summary". Published August 28, 2019. Retrieved July 6, 2020. Link to Dollars and Data Research.
5	Demographics	Income and Poverty	The economic gap between urban and rural areas of Colorado has continued to widen since the Great Recession and the uneven recovery that followed.	Colorado Health Equity Report: Vital Signs Report (Rep.). (n.d.). Colorado Center on Law & Policy. Retrieved September 18, 2018. Link to Colorado Health Equity Report: Vital Signs Report.
5	Demographics	Income and Poverty	15% of all rural foreclosures occurred in Fremont (8.6%) and Garfield (6.9%) counties.	Colorado Department of Local Affairs. [Published Raw Data: Foreclosure Reports and Statistics]. (2019). Retrieved July 6, 2020. Link to Housing Foreclosures by County.
5	Demographics	Income and Poverty	Costilla and Crowley are the rural counties with the highest percentage of people facing food insecurity at 18%. The state rate of food in security is 10%.	Hunger in Colorado. Feeding America "Colorado". Retrieved July 8, 2020. Link to Feeding America - Colorado.
5	Demographics	Income and Poverty	The number of unpaid mortgages in Colorado in July 2020 spiked to near record levels widening a housing divide that existed in Colorado before the pandemic. The demand for housing pushed prices to record levels, increasing the state's homeless population to nearly twice the number from a year earlier.	Chuang, T. The Colorado Sun. "Why Colorado's housing market looks so hot even though coronavirus is ravaging the economy". Published Link to The Colorado Sun.
5	Demographics	Income and Poverty	Colorado ranks 43rd in the nation for access to food stamps with only 60% of those eligible getting the nutritious food they need, falling well below the national average of 73% for enrollment.	Hunger Free Colorado. Food Stamp Impact Reports. Retrieved June 4, 2019, from Hunger Free Colorado 2019. Link to Hunger Free Colorado Impact Reports.
5	Demographics	Income and Poverty	In 48 of Colorado's 64 counties, families are rent burdened, defined as spending 35% or more of household income on rent.	Percent of Renters Spending >30% of Household Income on Housing Costs. (n.d.). Colorado Department of Local Affairs (2014-2018). Retrieved on July 8, 2020. Link to Colorado Department of Local Affairs Map.
5	Demographics	Income and Poverty	50% of rural children enrolled in public schools are eligible for free or reduced lunch compared to 37% of urban children. 71% of children in Huerfano County are eligible for free or reduced lunch (state average is 42%).	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2020, April). Colorado County Data: Children eligible for free or reduced price lunch. Retrieved July 6, 2020. Link to County Health Rankings.

5	Demographics	Income and	In Colorado, 1 in 8 children struggles with hunger.	Hunger in Colorado. Feeding America "Colorado". Retrieved July 8, 2020. Link to Feeding America - Colorado.
5	Demographics	Income and Poverty	20% Rural Kids in Poverty. 20% of rural kids live in poverty (income: \$26,200/family of four) compared to 11% of urban kids. In Huerfano County, 37% of children are living in poverty.	1. Prior HHS Poverty Guidelines and Federal Register References. (n.d.). Retrieved July 6, 2020. Office of the Assistant Secretary for Planning and Evaluation (ASPE). 2. Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2020, April). Colorado County Data: Children in Poverty. Retrieved July 6, 2020. Link to 2020 Poverty Guidelines. Link to County Health Rankings.
6	Demographics	Healthcare Coverage	Rural Colorado has higher rates of public insurance (a 32% difference) when compared to urban Colorado.	Silvernale, R. (2017, April 5). Colorado Health Institute: Analysis of the 2015 American Community Survey, Health Insurance Status by County. Retrieved October 3, 2017. Please Note: Due to Rounding and statistical modeling, numbers/percentages may not total to exactly "100%" of total population. Link to Colorado Health Institute.
6	Demographics	Healthcare Coverage	Rural Payer Mix (Medicaid/Child Health Plan Plus 27.5%, Medicare 17.7%, Private Pay 46.3%, Uninsured 8.5%)	Colorado Health Institute. Colorado Health Access Survey - 2019. Retrieved January 19, 2020. Please Note: Due to Rounding and statistical modeling, numbers/percentages may not total to exactly "100%" of total population. Link to Colorado Health Institute.
6	Demographics	Healthcare Coverage	Urban Payer Mix (Medicaid/Child Health Plan Plus 20.4%, Medicare 14.3%, Private Pay 58.7%, Uninsured 6.7%)	Colorado Health Institute. Colorado Health Access Survey - 2019. Retrieved January 19, 2020. Please Note: Due to Rounding and statistical modeling, numbers/percentages may not total to exactly "100%" of total population. Link to Colorado Health Institute.
6	Demographics	Healthcare Coverage	Insurance premiums in rural communities are often markedly higher than in urban areas of Colorado, sometimes facing premiums that are twice as high as those living in the Denver metro region. The western slope observes the highest insurance rates in the state. Rural premiums average 32% higher than urban parts of Colorado.	Colorado Commission on Affordable Health Care - Final Report, Published June 30, 2017. Retrieved June 20, 2018. Link to Colorado Commission on Affordable Health Care - Final Report.
6	Demographics	Healthcare Coverage	Uninsured Rates, Pre-COVID: "Colorado's uninsured rate remains steady at 6.5 %, or 361,000 Coloradans. Uninsured rate varies across the state, from 2.6 percent in Jefferson County to 14.3% in the I-70 mountain corridor, where insurance premiums are most expensive." -Colorado Health Institute	Colorado Health Institute, "2019 Colorado Health Access Survey: Health Insurance Coverage". Published February 2020. Retrieved July 14, 2020. Link to Colorado Health Institute.
6	Demographics	Healthcare Coverage	4.3% of Coloradans aged 0-18 are uninsured. 9.0% of Coloradans aged 19-29 are uninsured. 10.7% of Coloradans aged 30-49 are uninsured. 7.5% of Coloradans aged 50-64 are uninsured.	Colorado Health Institute, "2019 Colorado Health Access Survey: Health Insurance Coverage". Published February 2020. Retrieved July 14, 2020. Link to Colorado Health Institute.
6	Demographics	Healthcare Coverage	[MAP] Total Medicare and Medicaid Enrollees, Combined October 2020	Centers for Medicare and Medicaid Services. Statistics, Trends, Reports. "Colorado Medicare Enrollment by County". Retrieved October 27, 2020. <i>*Must use iE and Adobe Flash to Link to site.</i> Link to CMS Dashboard. Centers for Medicare and Medicaid Services. Statistics, Trends, Reports. "Colorado Medicaid Enrollment by County". Retrieved October 27, 2020. Link to CMS Dashboard.
6	Demographics	Case Study: Costilla County	Costilla County has the highest combined Medicare/Medicaid rate of all Colorado counties at 87%, while the top 5 counties with the highest Medicaid/Medicare enrollment in the state are rural and frontier.	Centers for Medicare and Medicaid Services. Statistics, Trends, Reports. "Colorado Medicare Enrollment by County". Retrieved October 27, 2020. <i>*Must use iE and Adobe Flash to Link to site.</i> Link to CMS Dashboard. Centers for Medicare and Medicaid Services. Statistics, Trends, Reports. "Colorado Medicaid Enrollment by County". Link to CMS Dashboard.

6	Demographics	Case Study: Costilla County	15% of adults in Costilla County are uninsured (State: 9%)	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2020, April). Colorado County Data: Uninsured Adults. Retrieved October 21, 2020. Link to County Health Rankings.
6	Demographics	Case Study: Costilla County	4.3% of working adults were unemployed in Costilla County pre-COVID (State: 3.3%)	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2020, April). Colorado County Data: Unemployment. Retrieved October 21, 2020. Link to County Health Rankings.
6	Demographics	Case Study: Costilla County	Children in poverty in Costilla County: 37% (State: 12%)	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2020, April). Colorado County Data: Children in Poverty. Retrieved October 21, 2020. Link to County Health Rankings.
6	Demographics	Case Study: Costilla County	Children in single-parent households: 43% (State: 27%)	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2020, April). Colorado County Data: Single Parent Households. Retrieved October 21, 2020. Link to County Health Rankings.
7	The Health of Rural	Access	32 Critical Access Hospitals, 57 Federally Certified Rural Health Clinics, 10 Small Rural PPS Hospitals, 66 Federally Qualified Rural Health Centers, 165 Total Rural Facilities	1. Critical Access Hospital Locations. Flex Monitoring Team: A Performance Monitoring Resource for Critical Access Hospitals, States, and Communities. Retrieved January 20, 2021. Link to Flex Monitoring Team: CAH Designations. 2. Colorado Rural Health Center - State Office of Rural Health (SORH). Designated Facilities: RHC, Rural Facilities. Retrieved January 20, 2021 from CRHC sources and organizational database [CRM]. 3. Colorado Community Health Network (CCHN) - "Community Health Centers Map". Retrieved January 25, 2019. Link to CCHN Community Health Centers Map. <i>*Please Note: The number represented for "Total Rural Health Facilities" is indicative of those facilities with a designation type, and is not a comprehensive number indicating all rural practices/practice locations.</i>
7	The Health of Rural	Access	Definition provided for Critical Access Hospitals (CAHs).	Rural Health Information Hub. (n.d.). Retrieved February 28, 2018. Last Reviewed February 27, 2018 by Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS). Link to Rural Health Information Hub.
7	The Health of Rural	Access	Definition provided for Federally Certified Rural Health Clinics (RHCs).	1. "Rural Health Clinics Act of 1977 - P.L. 95-210" (PDF). 91 Stat. 1485. (n.d.). Retrieved February 28, 2018. U.S. Government Printing Office. December 13, 1977. 2. Nickerson, G., Rural Health Clinic CG Chair, (2014, April). National Rural Health Association Policy Brief: Rural Health Clinics. Retrieved February 28, 2018, from. National Rural Health Association (NRHA). Link to Association Policy Brief: Rural Health Clinic. Link to CMS Update to Rural Health Clinic All-inclusive Rate Payment
7	The Health of Rural	Access	The 57 RHCs across Colorado provide primary and preventative health services to an estimated 130,000 Coloradans annually.	Colorado Rural Health Center (CRHC). State Office of Rural Health (SORH). RHC Counts retrieved from CRHC CRM [Raw Data] 2020. Health Service counts estimated from CRHC Clinics Program 2019. Link to Colorado Rural Health Center.
7	The Health of Rural	Rural Health Information Technology	91.9% of Coloradans have access to wired broadband 25mbps or faster. 96.8% of Coloradans have access to wireline service. 20.0% of Coloradans have access to fiber-optic service. 87.2% of Coloradans have access to cable service. 94.1% of Coloradans have access to DSL service.	BroadbandNow.com, "Internet Service in Colorado". Published February 6, 2020. Retrieved July 17, 2020. Link to Broadband Now: Colorado.

7	The Health of Rural	Rural Health Information Technology	The geography of the Rocky Mountains may be appealing, but it serves as a barrier to accessible and reliable internet access. Despite efforts made by many rural communities to create unique local solutions, much of the state's rural and frontier counties are limited to fixed wireless or satellite connectivity.	Trostle, H. Institute for Local Self-Reliance, "Mapping Colorado's Internet Service Options". Published May 7, 2018. Retrieved July 21, 2019. Link to Mapping Colorado's Internet Service Options Article.
7	The Health of Rural	Rural Health Information	The five counties with the lowest broadband coverage (less than 40%) are all rural or frontier counties. Dolores County comes in last at 12.9%.	BroadbandNow.com, "Internet Service in Colorado". Published February 6, 2020. Retrieved July 17, 2020. Link to Broadband Now: Colorado.
7	The Health of Rural	Rural Health Information Technology	Colorado is struggling to keep up with the rest of the U.S. in broadband affordability. Only a mere 3% of Colorado's residents have access to a standalone internet plan under \$60 per month. Of all 50 states, there are only 3 states that perform worse in this category.	BroadbandNow.com, "Internet Service in Colorado". Published February 6, 2020. Retrieved July 17, 2020. Link to Broadband Now: Colorado.
8	The Health of Rural	Rural Health Information Technology	As of February 2020, broadband expansion has been successful in Colorado with 87% coverage statewide.	The Colorado Sun. "Rural Colorado sees more broadband options coming online. But getting up to speed is taking longer than anticipated in some areas". Published February 24, 2020. Retrieved July 17, 2020. Link to Colorado Sun Article.
8	The Health of Rural	Rural Health Information Technology	Expansion is also in the works for the Western Slope where GigaPop wants to team with local governments to improve broadband in rural Colorado. Proposals are currently looking for funding for the \$2.2 million project.	The Colorado Sun. "Little-known internet network plans Western Colorado expansion to link students, nonprofits to supercomputers". Published May 20, 2020. Retrieved July 17, 2020. Link to Colorado Sun Article.
8	The Health of Rural	Rural Health Information Technology	Definition: "Gigapop is short for gigabit point-of-presence, an access point to Internet2, the network collaboration between universities and partners in industry and government to develop advanced Internet technologies and applications such as telemedicine and digital libraries." - TechTarget	TechTarget. "GigaPop" Definition. Retrieved January 20, 2021. Link to TechTarget Definition.
8	The Health of Rural	Electronic Medical Records (EMR) Costs	It costs \$162,000 for a small clinic to implement an Electronic Medical Record; \$85,000 of the price goes to first-year maintenance costs.	Green, J. "How much EHR costs and how to set your budget?". Published March 7, 2019. Retrieved July 17, 2020. Link to EHR In Practice.
8	The Health of Rural	Electronic Medical Records (EMR) Costs	\$5-20 million to implement a large system EMR	Green, J. "How much EHR costs and how to set your budget?". Published March 7, 2019. Retrieved July 17, 2020. Link to EHR In Practice.
8	The Health of Rural	Electronic Medical Records (EMR) Costs	"The average cost of hospital EHR implementation would be higher given the larger scale. Estimates show that these costs vary widely for community hospital with some organizations paying less than \$5 million and others more than \$20 million to implement an EHR." - EHR In Practice	Green, J. "How much EHR costs and how to set your budget?". Published March 7, 2019. Retrieved July 17, 2020. Link to EHR In Practice.
8	The Health of Rural	Electronic Medical Records (EMR) Costs	"In 2019, 38% of healthcare CIOs listed 'EMR optimization' as their organization's top area of planned capital investment over the next three years." -EHR in Practice	Green, J. "How much EHR costs and how to set your budget?". Published March 7, 2019. Retrieved July 17, 2020. Link to EHR In Practice.
9	The Health of Rural	Telehealth	Colorado's rural healthcare facilities have benefited from expanded telehealth capabilities during the pandemic. To continue this service in their communities, legislative action is VITAL!	Peng, A. & Fong, M. "Executive Summary: Tracking Telehealth Changes State-by-State in Response to COVID-19 - December 2020". Published December 10, 2020. Retrieved January 20, 2021. Link to Article.
9	The Health of Rural	Telehealth	"Perhaps the strongest way to encourage telehealth is to expand the range of services for which public and private insurers will reimburse providers. Colorado is considered progressive among states for making strides in telehealth. One big step was enacting legislation in 2015 mandating that telemedicine services be reimbursed at the same rate as in person services." - Colorado Health Institute "Telemedicine in Colorado" Report	Colorado Health Institute (CHI). "Telemedicine in Colorado The Jetsons, a RAPID Response to COVID-19, and the Big Questions Ahead". Released May 11, 2020. Retrieved August 28, 2020. Link to Telemedicine in Colorado Report.

9	The Health of Rural	Telehealth	"At Pediatric Partners of the Southwest, in Durango, telehealth has been an established part of its healthcare approach for more than five years. Still, the policy changes that came with COVID-19 dramatically changed how the clinic worked. Before March 2020, telehealth was mostly used for conditions that didn't need a physical exam, like pink eye, some rashes, and some mental health visits. By late April, most sick visits were conducted remotely through a mix of phone and video calls. The clinic is still offering some in-person check-ins, including car-side visits." - Colorado Health Institute "Telemedicine in Colorado" Report	Colorado Health Institute (CHI). "Telemedicine in Colorado The Jetsons, a RAPID Response to COVID-19, and the Big Questions Ahead". Released May 11, 2020. Retrieved August 28, 2020. Link to Telemedicine in Colorado Report.
9	The Health of Rural	Telehealth	By April 6, 2020, 73% of adult and pediatric primary care visits at the state's largest safety net hospital (Denver Health) were being conducted remotely. In some healthcare specialties, between 80% and 100% of visits were telehealth visits. - Colorado Health Institute "Telemedicine in Colorado" Report	Colorado Health Institute (CHI). "Telemedicine in Colorado The Jetsons, a RAPID Response to COVID-19, and the Big Questions Ahead". Released May 11, 2020. Retrieved August 28, 2020. Link to Telemedicine in Colorado Report.
10	The Health of Rural	Telehealth	Of patients who like using telehealth services, 65% say it is because telehealth visits are more convenient than in-office appointments, and 63% say it's because they do not have to worry about being exposed to other potentially sick patients. Americans who like using telehealth services also like it because it is easier to schedule an appointment via telehealth than an in-office appointment (44%), and because follow-ups/communications post-appointment are more streamlined (38%).	Hutton, D. Ophthalmology Times. "COVID-19: Survey finds Americans are embracing telehealth services". Published May 26, 2020. Retrieved August 28, 2020. Link to "COVID-19: Survey finds Americans are embracing telehealth services".
10	The Health of Rural	Telehealth	Rural providers across the state are using telehealth for a variety of services, including: Primary care visits (specially for those at high-risk for COVID-19 complications), Oncology, mental health, Stroke assessment, home health, infectious disease control, chronic pain visits, and long-term care.	Colorado Rural Health Center - Colorado's State Office of Rural Health. "Telehealth in the Age of COVID-19". Published May 2020. Retrieved October 27, 2020. Link to "Telehealth in the Age of COVID-19" Article.
10	The Health of Rural	Telehealth	Prior to COVID-19, many Rural Health Clinics (RHCs) and Critical Access Hospitals (CAHs) were working on telemedicine initiatives to achieve lower healthcare costs, drive up efficiency, increase revenue, and provide their patients with better access to healthcare services.	Colorado Rural Health Center - Colorado's State Office of Rural Health. "Telehealth in the Age of COVID-19". Published May 2020. Retrieved October 27, 2020. Link to "Telehealth in the Age of COVID-19" Article.
10	The Health of Rural	Telehealth	Due to restrictive regulations before the pandemic, CAHs and RHCs were essentially launching telehealth programs from scratch.	Colorado Rural Health Center - Colorado's State Office of Rural Health. "Telehealth in the Age of COVID-19". Published May 2020. Retrieved October 27, 2020. Link to "Telehealth in the Age of COVID-19" Article.
10	The Health of Rural	Telehealth	Rural patients are more reluctant to use telehealth services, and those that are willing often face challenges with poor broadband connectivity and little access to computers and cellphones.	Colorado Rural Health Center - Colorado's State Office of Rural Health. "Telehealth in the Age of COVID-19". Published May 2020. Retrieved October 27, 2020. Link to "Telehealth in the Age of COVID-19" Article.
10	The Health of Rural	Telehealth	Providers indicated that while they are seeing the same number of patients, the reimbursement is significantly less for telehealth, effectively punishing providers who prioritize safety over profit.	Colorado Rural Health Center - Colorado's State Office of Rural Health. "Telehealth in the Age of COVID-19". Published May 2020. Retrieved October 27, 2020. Link to "Telehealth in the Age of COVID-19" Article.
10	The Health of Rural	Telehealth	Rural Colorado Telehealth Win: SB20-212: SB20-212 Reimbursement for Telehealth Services was signed into law in July 2020. The bill codifies into state law many of the COVID relaxed regulations for telehealth. The legislation allows RHCs to serve as the originating site for telehealth services and reimburses them at in-person rates, among other provisions. The bill allows rural Colorado healthcare providers to continue delivering safe and timely access to telehealth services across the state. CRHC members have been working diligently to provide these services in their communities as a means of keeping their patients safe and keep their doors open.	Bloomberg Law. "Telehealth Barriers Smoothed Under New Colorado Law". Published July 6, 2020. Retrieved August 28, 2020. Link to "Telehealth Barriers Smoothed Under New Colorado Law".
11	The Health of Rural	Women's and Maternal Health	54% of rural Colorado counties lack OB services.	Johnson, C. Y. (2017, September 6). More than half of rural counties don't have a hospital where women can give birth. Denver Post via the Washington Post. Retrieved September 10, 2018 The Denver Post. Link to the Denver Post Article.
11	The Health of Rural	Women's and Maternal Health	Half of U.S. counties lack a single OB-GYN, and some women's lives are endangered by long treks for much-needed care. By 2020, there will be up to 8,000 fewer OB-GYNs than needed, and the number may rise to 22,000 by mid-century.	Marsa, L. "Labor pains: The OB-GYN shortage". Association of American Medical Colleges (AAMC). Published November 2018. Retrieved October 27, 2020. Link to AAMC Article.

11	The Health of Rural	Women's and Maternal Health	Rural Colorado has a 43% higher teen pregnancy rate than urban parts of the state.	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2020, April). Colorado County Data: Teen Births.Retrieved July 22, 2020 *Utilized percent difference to calculate. Link to County Health Rankings.
11	The Health of Rural	Women's and Maternal Health	Title X is a federal program that provides preventative services, including access to contraception and sexually transmitted infection testing and treatment, to low-income and uninsured individuals. Title X provides about \$3.8 million a year to Colorado.	Leins, C., "Colorado Family Planning Initiative Reduced Teen Pregnancies". US News Report. Published March 22, 2019, retrieved July 7, 2019. Link to "Colorado Family Planning Initiative Reduced Teen Pregnancies" Article.
11	The Health of Rural	Women's and Maternal Health	In a study performed on maternal deaths from suicide and overdose in Colorado between 2004-2012, it was determined that self-harm was the most common cause of pregnancy-associated mortality, with most deaths occurring in the postpartum period. Among the 211 total maternal deaths reviewed, opioids were the drugs identified in 10% of them.	Maternal Deaths From Suicide and Overdose in Colorado, 2004-2012. Pubmed.gov. Released December 2016, retrieved June 30, 2019. Link to Maternal Deaths From Suicide and Overdose in Colorado, 2004-2012.
11	The Health of Rural	Women's and Maternal Health	80% of maternal deaths in Colorado are preventable.	Navarro, N. CPR News. "The Maternal Mortality Rate In The US Is High. Colorado Is Spending To Try To Stop It". Published June 18, 2019. Retrieved June 22, 2020. Link to CPR News Article.
11	The Health of Rural	Women's and Maternal Health	When one Colorado hospital was forced to shut down its labor and delivery department, the next closest hospital was 45 miles away, over mountain passes. Of Colorado's 32 Critical Access Hospitals, just 18 now have obstetrics departments.	Brown, J. The Colorado Sun. "Pregnant women in Moffat County have lost their obstetrics care, the latest victims of the rural health crisis". Published March 11, 2020. Retrieved July 22, 2020. Link to The Colorado Sun.
12	The Health of Rural	Oral Health	Although Colorado ranks in the top 3 states with the greatest percentage of seniors retaining their natural teeth, 18% of Coloradans over age 65 have lost ALL of their natural teeth.	The Impact of Oral Disease on the Health of Coloradans. Page 15. (n.d.). Colorado Department of Public Health and Environment Oral Health Program. Retrieved August 8, 2018. Link to The Impact of Oral Health Disease on the Health of Coloradans.
12	The Health of Rural	Oral Health	Adults in rural areas have almost twice the prevalence of tooth loss vs. urban adults.	Oral health status of rural adults in the United States (American Dental Association).Retrieved March 28, 2018. Link to Oral Health Status of Rural Adults in the United States Research.
12	The Health of Rural	Oral Health	Rural communities lack access to oral health providers due to geographic isolation and workforce shortages.	Rural Health Information Hub (RHI Hub). "Oral Health in Rural Communities". Retrieved July 28, 2020. Link to Rural Health Information Hub.
12	The Health of Rural	Oral Health	By Kindergarten, 40% of children in Colorado already have dental decay and this rate increases for children of low-income communities.	Rural Health Information Hub. (n.d.). "Cavity Free at Three". Retrieved June 30, 2019. Link to "Cavity Free at Three" Rural Health Information Hub.
12	The Health of Rural	Oral Health	Tooth decay is 4 times more common than asthma among adolescents aged 14 to 17 years.	Water, Sanitation & Environmentally-related Hygiene. (2016, September 22). Retrieved September 7, 2018, from the Centers for Disease Control and Prevention. Link to Water, Sanitation & Environmentally-related Hygiene.
12	The Health of Rural	Oral Health	The installation and maintenance of fluoridated water systems in rural areas can be expensive.	Rural Health Information Hub (RHI Hub). "Oral Health in Rural Communities". Retrieved July 28, 2020. Link to Rural Health Information Hub.
12	The Health of Rural	Oral Health	According to the American Dental Association, fluoridation of community water sources can cost between 50 cents per year per person to \$3 per year per person depending on community size.	American Dental Association - Wisconsin Dental Association. Retrieved 10/21/2020. Link to American Dental Association.
12	The Health of Rural	Oral Health	[MAP] Number of Providers Providing Dental Services to Medicaid Patients	Colorado Department of Health. "Cavity Free at 3" Interactive Dashboard. Retrieved January 24, 2021. Link to Cavity Free at Three Interactive Dashboard.
13	The Health of Rural	The Climate Crisis	According to the Colorado Health Institute, a changing climate is creating warmer temperatures, dirtier air, different precipitation patterns, and more intense wildfires in Colorado. These changes directly affect the health of people across the state.	Global Issue, Local Risk. CHI's Health and Climate Index Identifies Colorado's Most Vulnerable Regions. Colorado Health Institute April 2019. Retrieved June 10, 2019. Link to Global Issue, Local Risk Report.

13	The Health of Rural	The Climate Crisis	The past decade has resulted in 29 climate disasters costing over \$136 billion in damages to Colorado and neighboring regions. It is expected that climate disasters are likely to increase as the climate crisis worsens.	Larsen, K. Colorado Politics. "Local action can curb climate change in Colorado". Published June 26, 2020. Retrieved July 29, 2020. Link to Colorado Politics.
13	The Health of Rural	The Climate Crisis	3.5 million Coloradans live in areas where the air is considered unhealthy and which causes negative health outcomes.	Larsen, K. Colorado Politics. "Local action can curb climate change in Colorado". Published June 26, 2020. Retrieved July 29, 2020. Link to Colorado Politics.
13	The Health of Rural	The Climate Crisis	4 of the 5 largest wildfires in recorded Colorado history burned in 2020 ALONE. The 10 largest fires in history have occurred since 2002.	5280: Denver's Mile High Magazine. "The 10 largest fires in Colorado History (Cameron Peak, East Troublesom, Pine Gulch, Hayman)". Retrieved January 20, 2021. Link to 5280 Magazine Article. 9 News. "Mullen Fire in Colorado and Wyoming grows to 175,564 acres, 65 structures destroyed". Retrieved January 20, 2021. Link to 9News Article.
13	The Health of Rural	The Climate Crisis	Air quality can diminish for thousands of miles from the source of a wildfire, adversely affecting the health of residents with respiratory conditions, children and the elderly. Additionally, many reservations are at high risk due to geographic location and economic vulnerability.	The Colorado Trust. "Six Ways Climate Change Is Hurting Coloradans". Retrieved July 29, 2020. Link to the Colorado Trust.
13	The Health of Rural	The Climate Crisis	Southeast Colorado had the state's highest rates of emergency department visits due to heat-related illnesses, as well as 60 extreme heat days in 2017.	Global Issue, Local Risk. CHI's Health and Climate Index Identifies Colorado's Most Vulnerable Regions. Colorado Health Institute April 2019. Retrieved June 10, 2019. Link to Global Issue, Local Risk Report.
13	The Health of Rural	The Climate Crisis	People in Colorado's Eastern Plains are most at risk from potential harmful effects of climate change on human health.	Global Issue, Local Risk. CHI's Health and Climate Index Identifies Colorado's Most Vulnerable Regions. Colorado Health Institute April 2019. Retrieved June 10, 2019. Link to Global Issue, Local Risk Report.
13	The Health of Rural	The Climate Crisis	Southeastern Colorado has many residents that are older, struggle with health issues, and experience poverty. Therefore it was the state's most vulnerable area in terms of sensitive populations.	Global Issue, Local Risk. CHI's Health and Climate Index Identifies Colorado's Most Vulnerable Regions. Colorado Health Institute April 2019. Retrieved June 10, 2019. Link to Global Issue, Local Risk Report.
13	The Health of Rural	The Climate Crisis	Northwestern Colorado has many residents that are younger and living in newer housing stock, therefore it is the state's least vulnerable population.	Global Issue, Local Risk. CHI's Health and Climate Index Identifies Colorado's Most Vulnerable Regions. Colorado Health Institute April 2019. Retrieved June 10, 2019. Link to Global Issue, Local Risk Report.
14	The Health of Rural	Colorado's Crisis Crossroads	Communities are getting hotter: Northwestern Colorado experienced 72 extreme heat days (days with temperatures above 90 degrees) in 2017.	Global Issue, Local Risk. CHI's Health and Climate Index Identifies Colorado's Most Vulnerable Regions. Colorado Health Institute April 2019. Retrieved June 10, 2019. Link to Global Issue, Local Risk Report.
14	The Health of Rural	Colorado's Crisis Crossroads	Trees are disappearing: The loss of tree canopy increases the heat island effect.	Global Issue, Local Risk. CHI's Health and Climate Index Identifies Colorado's Most Vulnerable Regions. Colorado Health Institute April 2019. Retrieved June 10, 2019. Link to Global Issue, Local Risk Report.
14	The Health of Rural	Colorado's Crisis Crossroads	Poor air quality can severely affect those individuals with asthma and even diabetes.	Global Issue, Local Risk. CHI's Health and Climate Index Identifies Colorado's Most Vulnerable Regions. Colorado Health Institute April 2019. Retrieved June 10, 2019. Link to Global Issue, Local Risk Report.
14	The Health of Rural	Colorado's Crisis Crossroads	The Colorado River Basin is extremely sensitive to slight variations in temperature. It is estimated that for each degree average Celsius temperatures rise, flows in the Colorado are likely to decline more than 9%.	Runyon, L. Cronkite News: Sustainability. "Climate change already is diminishing the Colorado River, U.S. researchers find". Published March 12, 2020. Retrieved July 29, 2020. Link to Cronkite News.
14	The Health of Rural	Colorado's Crisis Crossroads	[MAP] Colorado Drought Monitor 2020	United States Drought Monitor. United States Department of Agriculture. Colorado. Retrieved October 29, 2020. Link to United States Drought Monitor.
14	The Health of Rural	Colorado's Crisis Crossroads	Droughts impact the ecosystem, reduce crop production and increase wildfires. Agricultural and recreational economic losses increase as drought levels increase.	United States Drought Monitor. United States Department of Agriculture. Colorado. Retrieved October 29, 2020. Link to United States Drought Monitor.

14	The Health of Rural	Colorado's Crisis Crossroads	In recent years, droughts have deeply affected the Eastern Plains farming communities and they are expected to continue as climate change progresses. Poor crop yield produces financial loss in the farming economy, ultimately impacting individual and community health.	The Colorado Trust. "Six Ways Climate Change Is Hurting Coloradans". Retrieved July 29, 2020. Link to the Colorado Trust.
15	The Health of Rural	Opioid Abuse	In Colorado, the fentanyl-related death rate is more than 4 times higher than what was observed in 2016.	Colorado Health Institute. "More Coloradans Died of a Drug Overdose in 2019; Fentanyl-Related Deaths Spiked". Pulished August 6, 2020. Updated August 7, 2020. Retrieved August 7, 2020. Link to Colorado Health Institute Article.
15	The Health of Rural	Opioid Abuse	Colorado ranks 27th in the nation for opioid related death rate (9.5 per 100,000), compared to the poorest ranking state, West Virginia, at 42.4 per 100,000 (2018).	National Institute on Drug Abuse. (2018, February 28). Opioid Summaries by State. Revised May 2019. Retrieved July 21, 2020. *Ranking is based off those states that met criteria to be ranked (35 total). Link to National Institute on Drug Abuse.
15	The Health of Rural	Opioid Abuse	Opioids kill one person in Colorado every 9.5 Hours	Frank, J. (2017, November 6). Here's how Colorado is combating the prescription opioid and heroin epidemic. Retrieved August 10, 2018 from The Denver Post. Link to the Denver Post Article.
15	The Health of Rural	Opioid Abuse	Heroin emergency department visits increased from 2011 to 2016 (an increase of over 3 times higher). The rate went from 4.4 per 100,000 to 13.7 per 100,000.	Heroin in Colorado. April 2018. Heroin Response Work Group. Retrieved July 21, 2020. Link to Heroin in CO Report.
15	The Health of Rural	Opioid Abuse	Although deaths linked with prescription opioids decreased in 2018, they increased in 2019. Deaths involving methamphetamines are six times greater when compared to 2012.	Colorado Health Institute. "More Coloradans Died of a Drug Overdose in 2019; Fentanyl-Related Deaths Spiked". Pulished August 6, 2020. Updated August 7, 2020. Retrieved August 7, 2020. Link to Colorado Health Institute Article.
15	The Health of Rural	Opioid Abuse	Over 1,000 Coloradans Dead in 2019 from Overdoses. In 2019, 1,062 Coloradans, the highest number since 2017, died of a drug overdose. The drug overdose death rate also reached a record high in 2019 at 17.8 deaths per 100,000 people. Each category, except prescription opioids, saw an increase since 2017.	Colorado Health Institute. "More Coloradans Died of a Drug Overdose in 2019; Fentanyl-Related Deaths Spiked". Pulished August 6, 2020. Updated August 7, 2020. Retrieved August 7, 2020. Link to Colorado Health Institute Article.
15	The Health of Rural	Opioid Abuse	1/5 of all overdose deaths in 2019 were a result of Fentanyl (220 total).	Daley, J. Colorado Public Radio. "Fentanyl And Meth Fuel Record Colorado Overdose Deaths Amid Coronavirus Pandemic". Retrieved August 5, 2020. Link to "Fentanyl And Meth Fuel Record Colorado Overdose Deaths Amid Coronavirus Pandemic" Article.
15	The Health of Rural	Opioid Abuse	In 2019: 433 deaths involved Prescription Opioids 347 deaths involved Methamphetamines 211 deaths involved Heroin 134 deaths involved Cocaine	Colorado Health Institute. "More Coloradans Died of a Drug Overdose in 2019; Fentanyl-Related Deaths Spiked". Pulished August 6, 2020. Updated August 7, 2020. Retrieved August 7, 2020. *Please Note: Deaths do not equal 1,062 as some deaths involved more than one of the drugs listed. Link to Colorado Health Institute Article.
16	The Health of Rural	Opioid Abuse	9 of the 10 Colorado counties with the highest overdose death rates are rural.	Death by Drugs: Colorado at Record High (Report pp. 1-12). (April 2018). Colorado Health Institute: Informing Policy, Advancing Health. Published April 2018, retrieved August 10, 2018. Link to Death By Drugs: Colorado at Record High.
16	The Health of Rural	Opioid Abuse	Pueblo County's heroin-related overdose rate from 2011-2016 was 8.1 deaths per 100,000 residents. This is the highest rate of all Colorado counties and is three times higher than the state rate.	Heroin in Colorado. April 2018. Heroin Response Work Group. Retrieved July 21, 2020. Link to Heroin in CO Report.
16	The Health of Rural	Opioid Abuse	The number of felony drug cases in Alamosa District Court rose from 88 in 2011 to 336 in 2017.	Booth, M. (n.d.). A Rural Crisis: The Opioid Epidemic in the San Luis Valley. Retrieved August 10, 2018, from The Colorado Health Foundation. Link to A Rural Crisis: The Opioid Epidemic in the San Luis Valley.
16	The Health of Rural	Opioid Abuse	Huerfano County: An Opioid Case Study: Huerfano County has the State's highest opioid overdose rate. There are no addiction recovery centers in the county.	Death by Drugs: Colorado at Record High (Report pp. 1-12). (April 2018). Colorado Health Institute: Informing Policy, Advancing Health. Published April 2018, retrieved August 10, 2018. Link to Death By Drugs: Colorado at Record High.

16	The Health of Rural	Opioid Abuse	Costilla County saw enough opioid prescriptions written to amount to 1 for every resident – of all ages – in the county.	Booth, M. (n.d.). A Rural Crisis: The Opioid Epidemic in the San Luis Valley. Retrieved August 10, 2018, from The Colorado Health Foundation. Link to A Rural Crisis: The Opioid Epidemic in the San Luis Valley.
16	The Health of Rural	Neonatal Abstinence Syndrome	In 2016, 290 Neonatal Abstinence Syndrome (NAS) cases (or babies reported experiencing drug withdrawals at birth) were reported in Colorado.	Foster, R. "Hospitals struggle with opioid-dependent newborns in the midst of an epidemic: The birth of a crisis". The Colorado Springs Independent. Published April 3, 2019. Retrieved October 21, 2020. Link to the Colorado Springs Independent Article.
16	The Health of Rural	Neonatal Abstinence Syndrome	From 2011 – 2016, NAS rates have increased by 120%.	Heroin in Colorado. April 2018. Heroin Response Work Group. Retrieved July 21, 2020. Link to Heroin in CO Report.
16	The Health of Rural	Neonatal Abstinence Syndrome	In 2016, 5,212 Colorado children were placed in foster care with 39% of placements (approximately 2,033) noting parental substance use as a factor.	America's Opioid Crisis: The Unseen Impact on Colorado Children. Retrieved September 7, 2018, from the American Academy of Pediatrics (AAP). Link to America's Opioid Crisis: The Unseen Impact on Colorado Children.
16	The Health of Rural	Neonatal Abstinence Syndrome	Medicaid covered care related to some 82% of the nation's NAS-related births in 2014 at a cost of \$462 million.	Official Journal of the American Academy of Pediatrics. "Incidence and Costs of Neonatal Abstinence Syndrome Among Infants With Medicaid: 2004–2014". Retrieved January 24, 2020. Link to the Official Journal of the Academy of American Pediatrics.
16	The Health of Rural	Naloxone	According to the Harm Reduction Coalition, “Naloxone (also known as Narcan®) is a medication called an “opioid antagonist” used to counter the effects of opioid overdose, for example morphine and heroin overdose. Specifically, naloxone is used in opioid overdoses to counteract life-threatening depression of the central nervous system and respiratory system, allowing an overdose victim to breathe normally.”	Harm Reduction Coalition. "Understanding Naloxone." Retrieved December 14, 2019. Link to Harm Reduction Coalition.
16	The Health of Rural	Naloxone	In 2019, 95,000 Coloradans said they needed but did not receive services for Substance Use Disorder Treatment.	Progress in Peril. Colorado Health Institute (CHI). Colorado Health Access Survey Storybook. Published December 2019. Retrieved August 25, 2020. Link to Progress in Peril Report.
16	The Health of Rural	Naloxone	The documented use of Naloxone by emergency medical services (EMS) in Colorado to treat suspected heroin overdoses has increased 240% from 2011-2015.	Heroin in Colorado: April 2017 Preliminary Report (Rep.). (2017). Heroin Response Work Group Steering Committee & Heroin Response Work Group Advisory Committee. Retrieved September 18, 2018. Link to Heroin in Colorado Preliminary Report.
16	The Health of Rural	Naloxone	The median number of overdose experiences (for individuals surveyed and who overdosed) was 3.	Heroin in Colorado: April 2017 Preliminary Report (Rep.). (2017). Heroin Response Work Group Steering Committee & Heroin Response Work Group Advisory Committee. Retrieved September 18, 2018. Link to Heroin in Colorado Preliminary Report.
17	The Health of Rural	Prescription Drugs	In 2019, retail sales for prescription drugs filled at pharmacies in Colorado reached over \$6 Billion dollars.	Ingold, J. The Colorado Sun. "5 numbers that explain why Colorado lawmakers want more insight into prescription drug costs". Published February 12, 2020. Retrieved August 6, 2020. Link to Colorado Sun Article.
17	The Health of Rural	Prescription Drugs	10.8% of Coloradans did not fill a prescription in 2019 because of concerns about cost.	Ingold, J. The Colorado Sun. "5 numbers that explain why Colorado lawmakers want more insight into prescription drug costs". Published February 12, 2020. Retrieved August 6, 2020. Link to Colorado Sun Article.
17	The Health of Rural	Prescription Drugs	Colorado ranks 12th in the nation for opioid prescription rates (45.1 per 100,000), compared to the poorest ranking state, Tennessee, at 81.8 per 100,000 (2018-2019).	National Institute on Drug Abuse. (2018, February 28). Opioid Summaries by State. Revised May 2019. Retrieved June 12, 2019. Link to National Institute on Drug Abuse.

17	The Health of Rural	Prescription Drugs	Colorado ranks 25th nationally in prescription drug spending.	Ingold, J. The Colorado Sun. "5 numbers that explain why Colorado lawmakers want more insight into prescription drug costs". Published February 12, 2020. Retrieved August 6, 2020. Link to Colorado Sun Article.
17	The Health of Rural	Prescription Drugs	Colorado has become the first state to cap insulin prices, which have more than doubled since 2012. The state has capped co-payments for people with diabetes with private insurance at \$100 per month.	Min, S. "Colorado becomes first state to put cap on rising insulin prices". Published May 28, 2019, retrieved June 21, 2019. Link to "Colorado becomes first state to put cap on rising insulin prices".
17	The Health of Rural	Mental and Behavioral Health	2x Rural youth are twice as likely to commit suicide.	National Rural Health Association. "About Rural Health Care". Rural Health Information Hub. (2016). Social Determinants of Health. Retrieved August 7, 2018. Link to National Rural Health Association, "About Rural Health Care".
17	The Health of Rural	Mental and Behavioral Health	Of the 1,246 suicides reported, 190 took place in rural or frontier counties (15.3%). Individuals under the age of 25 accounted for approximately 11% (30) of all rural suicides with 20% (6) of those suicides committed by children ages 10-14 years.	Colorado Violent Death Reporting System (COVDRS). (2018). Retrieved Decemebr 14, 2019, from The Colorado Office of Planning, Partnerships and Improvement & Colorado Center for Health and Environmental Data. <i>* Please Note: In some cases, the population may be too small, indicating that numbers may not be statistically significant and that some county data can be supressed.</i> Link to Colorado Violent Death Reporting System (COVDRS).
17	The Health of Rural	Mental and Behavioral Health	Saguache county has the highest suicide rate in rural Colorado.	Colorado Violent Death Reporting System (COVDRS). (2018). Retrieved Decemebr 14, 2019, from The Colorado Office of Planning, Partnerships and Improvement & Colorado Center for Health and Environmental Data. <i>* Please Note: In some cases, the population may be too small, indicating that numbers may not be statistically significant and that some county data can be supressed.</i> Link to Colorado Violent Death Reporting System (COVDRS).
17	The Health of Rural	Mental and Behavioral Health	The state of Colorado ranks 20th for prevalence of untreated youth with depression (55.6%) and ranked 33rd for youth with severe major depressive episode who received some consistent treatment (25.6%).	Mental Health in America - Access to Care Data: Colorado. (2016, October 17). Retrieved July 27, 2020, from Mental Health America (MHA). Link to Mental Health America (MHA).
18	The Health of Rural	Mental and Behavioral Health	Colorado ranked 6th out of all states for adults with mental illness who did not receive treatment (48.7%).	Mental Health in America - Access to Care Data: Colorado. (2016, October 17). Retrieved July 27, 2020, from Mental Health America (MHA). Link to Mental Health America (MHA).
18	The Health of Rural	Mental and Behavioral Health	Colorado ranks 17th of all states for mental health access. Access in this context refers to more than just clinic or hospital proximity or received services. Access also includes things like available workforce, affordability of and entry	Mental Health in America - Access to Care Data: Colorado. (2016, October 17). Retrieved July 27, 2020, from Mental Health America (MHA). Link to Mental Health America (MHA).
18	The Health of Rural	Mental and Behavioral Health	Colorado ranks 34th for public psych. Beds (534)	Colorado Treatment Advocacy Center. 2016 Colorado. Retrieved July 23 ,2020. Link to Colorado - Treatment Advocacy Center.
18	The Health of Rural	Mental and Behavioral Health	Approximately 31% of motor vehicle crash deaths in rural Colorado involve alcohol.	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2020, April). Colorado County Data: Alcohol Impaired Driving Deaths. Retrieved July 23, 2020. Link to County Health Rankings.
18	The Health of Rural	Mental and Behavioral Health	15% of rural adults report smoking regularly. This has remained steady over the past 5 years.	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2020, April). Colorado County Data: Adult Smoking. Retrieved July 23, 2020. Link to County Health Rankings.
18	The Health of Rural	Mental and Behavioral Health	18% of adult rural Coloradans report drinking excessively. This has remained steady over the past 5 years.	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2020, April). Colorado County Data: Excessive Drinking. Retrieved July 23, 2020. Link to County Health Rankings.
18	The Health of Rural	Mental and Behavioral Health	Smoking-related health care costs Coloradans \$1.89 billion per year. Colorado invests \$5.79 per smoker on their state's quit line (national average \$2.21). The state also has a mandate provision for quitting tobacco under private insurance to promote cessation.	Truth Initiative: Promoting Tobacco Free Lives. "Tobacco use in Colorado 2019". Retrieved August 7, 2020. Link to Truth Initiative: Colorado.
18	The Health of Rural	Mental and Behavioral Health	Among all states, Colorado ranks 45th in alcohol-related deaths.	Villegas, A. Colorado Public Radio. "Colorado Has More Alcohol Deaths Than Nearly Every Other State". Published June 12, 2019. Retrieved August 7, 2020. Link to "Colorado Has More Alcohol Deaths Than Nearly Every Other State" Article.

18	The Health of Rural	Mental and Behavioral Health	Smoking is more common in rural areas than urban areas (27.7% of adults in nonmetro areas vs. 19.9% of adults in large metro areas). Similar trends are observed in smokeless tobacco use (7.3% of adults in nonmetro areas vs. 2.9% of adults in large metro areas). Both methods of tobacco use can cause oral health problems.	Rural Health Information Hub (RHI Hub). "Oral Health in Rural Communities". Retrieved July 28, 2020. Link to Rural Health Information Hub.
18	The Health of Rural	Mental and Behavioral Health	Of Coloradans ages 18 to 25, about half reported binge drinking in the past month (47.5%), compared with 41.4% nationwide.	Villegas, A. Colorado Public Radio. "Colorado Has More Alcohol Deaths Than Nearly Every Other State". Published June 12, 2019. Retrieved August 7, 2020. Link to "Colorado Has More Alcohol Deaths Than Nearly Every Other State" Article.
18	The Health of Rural	Mental and Behavioral Health	Between 2005 and 2017, alcohol deaths in Colorado increased 57%, which is about 20% higher than the observed national growth during those years.	Villegas, A. Colorado Public Radio. "Colorado Has More Alcohol Deaths Than Nearly Every Other State". Published June 12, 2019. Retrieved August 7, 2020. Link to "Colorado Has More Alcohol Deaths Than Nearly Every Other State" Article.
19	The Health of Rural	Chronic Disease	7 of 10 deaths in Colorado can be attributed to 4 chronic diseases: heart disease, stroke, cancer and diabetes.	Chronic disease prevention. (2018). Retrieved June 5, 2019, from the Colorado Department of Public Health and Environment (CDPHE) Link to Chronic Disease Prevention: CDPHE.
19	The Health of Rural	Chronic Disease	Just over 14% of Colorado women will develop breast cancer in their lifetime, which is higher than the national average of less than 13%. About 1 in 3 Coloradans will be diagnosed with cancer at some point in their lives.	Susan G. Komen Colorado. "Learn the Facts". Retrieved 7/28/2020. Link to Susan G. Komen Colorado.
19	The Health of Rural	Chronic Disease	In Colorado, one woman dies every day from breast cancer.	Susan G. Komen Colorado. "Learn the Facts". Retrieved 7/28/2020. Link to Susan G. Komen Colorado.
19	The Health of Rural	Chronic Disease	In terms of cancer screenings, Colorado ranks 49 for "up-to-date mammography, women 45 years and older" and ranks 28 for "Pap/HPV test, women 21 to 65 years"	American Cancer Society. "Cancer Statistics Center". Retrieved August 4, 2020. Link to American Cancer Society.
19	The Health of Rural	Chronic Disease	In Colorado, four communities experience exceptional barriers to receiving breast cancer care. These include Hispanic/Latina women, women who live in the northeast, women who live in mountain and resort communities and women living in Front Range counties that are medically underserved. These communities observe high rates of breast cancer mortality due to these barriers which can result in late detection.	Susan G. Komen Colorado. "Learn the Facts". Retrieved 7/28/2020. Link to Susan G. Komen Colorado.
19	The Health of Rural	Chronic Disease	Despite the fact that Colorado's cancer incidence rates are lower than the national average, cancer continues to be the second-leading cause of death in the state - just behind heart disease.	DenverPost.com. "Cancer rates lower in Colo.". Published July 2020. Retrieved August 7, 2020. Link to "Cancer Rates Lower in Colorado" Article.
19	The Health of Rural	Chronic Disease	It is estimated that 1,830 Coloradans will be diagnosed with melanoma, with 120 dying from melanoma in 2019 alone. The most common cancer type in the U.S. and Colorado is skin cancer.	Special to Denver 7. "Skin cancer is the most common cancer type in Colorado". Published July 17, 2019. Retrieved August 7, 2020. Link to "Skin cancer is the most common cancer type in Colorado" Article.
19	The Health of Rural	Chronic Disease	26% of adult rural Coloradans are considered obese with a distinct difference between the eastern plains (Yuma, CO - 28%) and some mountain areas of the state (Eagle, CO - 13%).	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2020, April). Colorado County Data: Adult Obesity. Retrieved August 4, 2020. Link to County Health Rankings.
19	The Health of Rural	Chronic Disease	28% of children in Colorado are overweight or obese while 55% of children are not physically active for at least 60 minutes per day.	Children's Hospital Colorado. "Combating Obesity with Nutrition and Physical Activity". Retrieved August 4, 2020. Link to Children's Hospital Colorado.
20	The Health of Rural	Chronic Disease	The life expectancy in both rural and urban Colorado is 80.	CDPHE. Life Expectancy (2010-2015). [Raw Data Source]. Retrieved 12/15/2019. Link to CDPHE Data Source.
20	The Health of Rural	Chronic Disease	The percentage of people with diagnosed COPD (Chronic Obstructive Pulmonary Disease) was greater among adults living in rural areas (about 8%) than among adults living in large metropolitan centers (about 5%).	Centers for Disease Control, "Urban-Rural Differences in COPD". Published in 2015 and page last reviewed March 8, 2018, retrieved June 30, 2019. Link to Urban-Rural Differences in COPD.
20	The Health of Rural	Chronic Disease	Death rates from COPD were also greater among people living in rural areas (about 55 per 100,000 people) versus people living in large metropolitan centers (32 per 100,000 people).	Centers for Disease Control, "Urban-Rural Differences in COPD". Published in 2015 and page last reviewed March 8, 2018, retrieved June 30, 2019. Link to Urban-Rural Differences in COPD.

20	The Health of Rural	Chronic Disease	The highest rate of COPD emergency department visit rates when considering rural areas of the state is observed in Huerfano County (106 per 10,000 people) with the lowest rate observed in Eagle County (4 per 10,000 people).	Colorado Department of Public Health and Environment (CDPHE). (2018). Chronic obstructive pulmonary disease (COPD) data. Retrieved August 4, 2020. Link to CDPHE COPD Interactive Data.
20	The Health of Rural	Chronic Disease	The highest statistically significant rate of hospitalizations due to COPD when considering rural areas of the state is observed in Phillips County (103 per 10,000 people) with the lowest rate observed in Routt County (2 per 10,000 people).	Colorado Department of Public Health and Environment (CDPHE). (2018). Chronic obstructive pulmonary disease (COPD) data. Retrieved August 4, 2020. Link to CDPHE COPD Interactive Data.
20	The Health of Rural	Chronic Disease	Healthcare costs are 2.3 times greater for people with diabetes.	American Diabetes Association (ADA). (2017). The Staggering Costs of Diabetes: A Growing Epidemic [Brochure]. Colorado. www.diabetes.org. Retrieved August 8, 2018. Link to American Diabetes Association "Staggering Cost of Diabetes" Brochure
20	The Health of Rural	Chronic Disease	Over 8% of adult rural Coloradans have diabetes.	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2020, April). Colorado County Data: Diabetes. Retrieved August 4, 2020. Link to County Health Rankings.
20	The Health of Rural	Chronic Disease	In 2017, diabetes, undiagnosed diabetes, prediabetes, and gestational diabetes reached an economic burden of almost \$404 billion (an estimated \$1,240 per person), while prediabetes was associated with \$43.4 billion of that total (an estimated \$500 person).	Berg, S. American Medical Association. "How prediabetes exacts a \$43 billion toll on U.S. economy". Published November 2019. Retrieved August 6, 2020. Link to "How prediabetes exacts a \$43 billion toll on U.S. economy".
20	The Health of Rural	Chronic Disease	In terms of U.S. economic burden affiliated with prediabetes and diabetes, for every \$4, \$3 goes to medical costs while \$1 goes to nonmedical costs (things like absenteeism, reduced productivity and being unable to work).	Berg, S. American Medical Association. "How prediabetes exacts a \$43 billion toll on U.S. economy". Published November 2019. Retrieved August 6, 2020. Link to "How prediabetes exacts a \$43 billion toll on U.S. economy".
20	The Health of Rural	Chronic Disease	"Approximately 416,301 people in Colorado, or 9.8% of the adult population, have diabetes. Of these, an estimated 118,000 have diabetes but don't know it, greatly increasing their health risk. In addition, 1,342,000 people in Colorado, 34.8% of the adult population, have prediabetes with blood glucose levels higher than normal but not yet high enough to be diagnosed as diabetes." American Diabetes Association (ADA)	American Diabetes Association (ADA). (2017). "The Burden of Disease in Colorado". (2016). Retrieved August 6, 2020. Link to "The Burden of Disease in Colorado".
20	The Health of Rural	Chronic Disease	In Colorado, cardiovascular disease (such as coronary artery disease, heart attack, heart failure and arrhythmia) is the primary cause of death in women. A woman dies every 76 seconds from heart disease in the U.S.	CBS4 Denver. "Cardiovascular Disease Is The Leading Cause Of Death Among Women In Colorado". Published February 26, 2020. Retrieved August 7, 2020. Link to "Cardiovascular Disease Is The Leading Cause Of Death Among Women In Colorado" Article.
20	The Health of Rural	Chronic Disease	The Mortality Rate Per 100,000 Persons for Heart Disease in rural is 123 compared to urban at 146.	Colorado Department of Public Health and Environment. CDPHE Community Health Equity Map (2013-2017). Last Updated July 16, 2019. Retrieved July 23, 2019. Link to CDPHE Health Equity Map.
20	The Health of Rural	Chronic Disease	On average, one Coloradan dies every hour due to cardiovascular disease.	Colorado Department of Public Health and Environment (CDPHE). Cardiovascular Disease Data. Retrieved August 7, 2020. Link to Colorado Department of Public Health and Environment.
20	The Health of Rural	Chronic Disease	The cost of cardiovascular disease in the U.S. was \$555 billion in 2016. By 2035, the cost will reach an estimated \$1.1 trillion!	American Heart Association (AHA). "Cardiovascular Disease: A Costly Burden for America - Projections through 2035." Retrieved January 21, 2021. Link to CVD Report by AHA.
21	The Health of Rural	COVID-19	COVID-19 in Colorado, as of January 21, 2021: 381,210 - Cases 5,440 - Deaths 3,350 - Outbreaks 21,041 - Hospitalizations	COVID-19 - Colorado. Colorado Department of Public Health and Environment (CDPHE). Retrieved January 21, 2021. Link to CDPHE COVID-19 Dashboard.
21	The Health of Rural	COVID-19	The death rate associated with COVID-19 is strongly influenced by factors such as race, ethnicity, age and sex.	Wu, K. The New York Times. "Study of 17 Million Identifies Crucial Risk Factors for Coronavirus Deaths". Published July 8, 2020. Retrieved July 23, 2020. Link to The New York Times Article.
21	The Health of Rural	COVID-19	Older patients aged 80+ were 20 times more likely to die from COVID-19 when compared to patients in their 50s, and hundreds of times more likely to die compared to patients below the age of 40.	Wu, K. The New York Times. "Study of 17 Million Identifies Crucial Risk Factors for Coronavirus Deaths". Published July 8, 2020. Retrieved July 23, 2020.

21	The Health of Rural	COVID-19	Men were more likely than women of the same age to die from the virus.	Link to The New York Times Article. Wu, K. The New York Times. "Study of 17 Million Identifies Crucial Risk Factors for Coronavirus Deaths". Published July 8, 2020. Retrieved July 23, 2020. Link to The New York Times Article.
21	The Health of Rural	COVID-19	Preexisting or complex medical conditions, compromised immunity, and poor socioeconomic factors were also linked to poor outcomes in patients.	Wu, K. The New York Times. "Study of 17 Million Identifies Crucial Risk Factors for Coronavirus Deaths". Published July 8, 2020. Retrieved July 23, 2020. Link to The New York Times Article.
21	The Health of Rural	COVID-19	COVID-19 patients that were White had lower risks of death when compared to Black and South Asian patients.	Wu, K. The New York Times. "Study of 17 Million Identifies Crucial Risk Factors for Coronavirus Deaths". Published July 8, 2020. Retrieved July 23, 2020. Link to The New York Times Article.
21	The Health of Rural	COVID-19	COVID-19 infection of Latino and African-American residents in the United States was 3 times higher than white residents, and Latino and African-American residents were nearly twice as likely to die from the virus.	Wu, K. The New York Times. "Study of 17 Million Identifies Crucial Risk Factors for Coronavirus Deaths". Published July 8, 2020. Retrieved July 23, 2020. Link to The New York Times Article.
21	The Health of Rural	COVID-19	Self Reported Symptom Tracker: Headache: 66% Cough: 61% Body Aches: 51% Fever: 41% Vomiting, Diarrhea: 26% Chills: 40% Sore Throat: 54% Shortness of Breath: 38%	COVID-19: Symptom Support Data (Self-Reported). Data Collected 1/1/2020 to 9/14 2020 from 4,571 Respondents. CDPHE. Link to Interactive Symptom Support Data.
21	The Health of Rural	COVID-19	[GRAPH] Coronavirus Case Counts: Statewide Incidence	Colorado COVID-19 Incidence. Two-Week Incidence Graph. CDPHE. Retrieved January 21, 2021. Link to Statewide Incidence Graph - CDPHE.
22	The Health of Rural	COVID-19	Due to the dominating presence of the Coronavirus Pandemic, the state of Colorado was forced to strip much needed funding that was budgeted for other critical statewide issues. This included reallocating the following funds to COVID-19: \$26 million from substance-abuse prevention, awareness and treatment \$5 million from rural sober living homes (particularly focused in the northeast and southwest) \$1 million from training doctors and nurses in substance abuse screening and referrals to treatment \$750,000 from Naloxone campaign for public-awareness \$735,000 from continued Substance-Abuse Treatment programs for former inmates after release from jail, without which results in a 120 times higher risk of overdosing \$637,000 from addiction treatment program for pregnant women and new moms	Brown, J. The Colorado Sun. "We're dealing with a pandemic, but remember the opioid crisis? Coronavirus is likely to make it worse.". Published June 22, 2020. Retrieved July 21, 2020. Link to The Colorado Sun Article.
22	The Health of Rural	COVID-19	70,000 more Coloradans received SNAP benefits in April compared to March. State officials expect that number to continue to climb during the coronavirus crisis.	Clark, M. The Colorado Sun. "Food-assistance requests keep soaring in Colorado despite slowing coronavirus unemployment claims". Published May 22, 2020. Retrieved August 25, 2020. Link to The Colorado Sun.
22	The Health of Rural	COVID-19	From May 10th through June 22 (2020), a survey of working parents indicated that 13% were forced to cut back on hours or quit work entirely because of issues with child care.	North, A. Vox. "America's child care problem is an economic problem". Published July 16, 2020. Retrieved July 23, 2020. Link to Vox Article.
22	The Health of Rural	COVID-19	The same survey found that over 41 million workers had kids under 18 and nearly all of them lost child care because of the COVID-19 pandemic.	North, A. Vox. "America's child care problem is an economic problem". Published July 16, 2020. Retrieved July 23, 2020. Link to Vox Article.

22	The Health of Rural	COVID-19	The Pandemic caused over 250,000 childcare workers to lose their jobs.	North, A. Vox. "America's child care problem is an economic problem". Published July 16, 2020. Retrieved July 23, 2020. Link to Vox Article.
22	The Health of Rural	COVID-19	[MAP] Where the ICU Beds are in Colorado - 2019	Kaiser Family Foundation. "ICU Beds By County". Retrieved January 22, 2021. Link to Interactive ICU By County Map.
22	The Health of Rural	COVID-19	There are ICU beds in only 27 of Colorado's 64 counties.	Kaiser Family Foundation. "ICU Beds By County". Retrieved January 22, 2021. Link to Interactive ICU By County Map.
22	The Health of Rural	COVID-19	There are 20 counties with a Hospital, but no ICU beds. This includes Archuleta, Baca, Cheyenne, Conejos, Grand, Gunnison, Huerfano, Kiowa, Kit Carson, Lake, Las Animas, Lincoln, Moffat, Phillips, Prowers, Rio Blanco, Rio Grande, Sedgwick, Teller, and Yuma.	The Colorado Sun & Kaiser Health News. "Millions of older Americans live in counties with no ICU beds as coronavirus spread intensifies". Published March 23, 2020. Retrieved July 22, 2020. Link to The Colorado Sun Article.
23	The Health of Rural	COVID-19	From late March through the beginning of May (2020), a total of 419,547 people in Colorado filed for unemployment, an overwhelming number that is a record high when compared to any other single year in the state.	Rugaber, C. The Denver Post. "33 million have sought U.S. unemployment aid nationwide since coronavirus hit, nearly 420,000 in Colorado". Published May 7, 2020. Retrieved July 22, 2020. Link to Denver Post Article.
23	The Health of Rural	COVID-19	Over 16% of Colorado State's workforce has filed for unemployment since mid-march. Lower wage industries make up the majority of filings.	Governor Jared Polis. "Economic Forecast Shows COVID-19's Significant Impact on Colorado Economy". Published May 12, 2020. Retrieved July 23, 2020 Link to Governor Polis' Economic Forecast Release.
23	The Health of Rural	COVID-19	Due to COVID-19, it is estimated that 43% of Americans lost their jobs or had their wages cut as of April 2020.	North, A. Vox. "America's child care problem is an economic problem". Published July 16, 2020. Retrieved July 23, 2020. Link to Vox Article.
23	The Health of Rural	COVID-19	Change in Labor Force Graph - Colorado Change in Labor Force July 2019 - July 2020	Chuang, T. The Colorado Sun. "Why Colorado's housing market looks so hot even though coronavirus is ravaging the economy". Published August 27, 2020. Retrieved December 15, 2020. Link to The Colorado Sun.
23	The Health of Rural	COVID-19	General fund revenue is expected to fall 14.9% percent during FY19-20 and FY20-21 totaling \$8.9 billion. The decline can be attributed to the pandemic-induced recession and federal tax policy changes to the CARES act. This will result in a loss of over \$400 million of Colorado's business income tax collections through the forecast period through June 30, 2022.	Governor Jared Polis. "Economic Forecast Shows COVID-19's Significant Impact on Colorado Economy". Published May 12, 2020. Retrieved July 23, 2020 Link to Governor Polis' Economic Forecast Release.
23	The Health of Rural	COVID-19	"The state expects to add 500,000 people to its Medicaid rolls due to coronavirus-related job losses, bringing enrollment in the program to more than 1.8 million people. By December 2020, nearly one out of every three Coloradans will be covered by Medicaid" - The Colorado Sun	Ingold, J. The Colorado Sun. "Coronavirus will add 500,000 people to Colorado's Medicaid rolls — with major consequences for the health care system". Published June 25, 2020. Retrieved July 23, 2020. Link to The Colorado Sun Article.
24	The Rural Economy	Incomes and Industries	Colorado businesses have taken a hit due to COVID-19. New business filings in the state dropped 5.6% during the first quarter as the pandemic tanked the economy while applications for trademarks dropped 15.7%. Meanwhile, businesses considered "in good standing" fell 1%, marking a rare decline.	Mulholland, S. "CPR News". "Colorado's Economy On Shaky Feet As Coronavirus Continues To Kick It In The Shins". Retrieved October 22, 2020. Link to CPR News Article.
24	The Rural Economy	Incomes and Industries	Outdoor recreation in Colorado creates nearly four times as many direct jobs (229,000) as the oil and gas industry (39,000) and the mining industry (19,000) combined.	Outdoor Industry Association: Colorado Report. Retrieved June 16, 2019. Link to Outdoor Industry Association Report: Colorado
24	The Rural Economy	Incomes and Industries	April 2020 saw 96% fewer oil and gas permits filed in Colorado — just 21 — compared with April 2019. The number of rigs actively drilling in the state has fallen from 22 at the start of the year to 15 at the end of April resulting in over 300 layoffs in Weld and Adams Counties.	Aguilar, J. "Colorado's oil and gas country — and its people — suffer from twin hits to industry". The Denver Post. Published May 3, 2020. Retrieved August 25, 2020. Link to the Denver Post Article.
24	The Rural Economy	Incomes and Industries	In 2019, Colorado welcomed approximately 86.9 million visitors (39.0 million overnight visitors) who spent more than \$24.2 billion. The tourism industry supports more than 180,000 jobs in Colorado. Tourism saves every Colorado household more than \$707 annually in taxes.	Tourism Pays for Colorado. Retrieved August 25, 2020. Additional Sources: Dean Runyan Associates, The Economic Impact of Travel on Colorado. Link to Tourism Pays for Colorado.

24	The Rural Economy	Incomes and Industries	Agriculture provides 195,000 jobs among 38,500 farms. This contributes \$47 billion dollars for the Colorado Economy,	FY21 Performance Plan: Food & Agriculture. Colorado Department of Agriculture. Retrieved August 18, 2020. Accessed under the link "FY21 Performance Plans" (Google Doc). Link to Colorado Department of Agriculture Performance Management.
24	The Rural Economy	Incomes and Industries	May 2020 forecasts, under certain assumptions, project net farm income to decline by \$3 billion in 2020 and possibly beyond that in 2021.	FY21 Performance Plan: Food & Agriculture. Colorado Department of Agriculture. Retrieved August 18, 2020. Accessed under the link "FY21 Performance Plans" (Google Doc). Link to Colorado Department of Agriculture Performance Management.
24	The Rural Economy	Incomes and Industries	Colorado ranks #10 out of all states overall. #1 for Economy and #8 for Infrastructure, although large economic gaps between urban and rural areas across the state still exist. The state ranks #29 in Fiscal Stability, as well as, Crime and Corrections.	Economy Rankings. U.S.News McKinsey & Company. Retrieved October 20, 2020. Link to Economy Rankings - U.S. News.
24	The Rural Economy	Incomes and Industries	According to the USDA Economic Research Service, the average per capita income for Coloradans in 2018 was \$58,456 although rural per capita income lagged at \$52,841 (approximately \$5,600 less which equates to a 10% difference).	Rural Health Information Hub (RHI Hub). "Colorado". Retrieved July 8, 2020. Link to the Rural Health Information Hub.
24	The Rural Economy	Incomes and Industries	Of Colorado's 64 Counties, 11 have a median household income of less than \$40,000, all of which are rural or frontier.	Median Household Income. (n.d.). Colorado Department of Local Affairs (2014-2018). Retrieved on July 8, 2020. Link to Colorado Department of Local Affairs Map.
25	The Rural Economy	Healthcare	Healthcare Drives the Rural Economy. In rural america, a hospital is often one of the largest employers in the community and can represent up to 20% of the community's employment and income.	National Rural Health Association (NRHA). (n.d.). Rural Hospital Closures Decimating Rural Health Care Delivery [Brochure]. Retrieved August 8, 2018. <i>Please Note: This is a</i> Link to the National Rural Health Association.
25	The Rural Economy	Healthcare	Healthcare is one of the top 3 industries in rural Colorado.	Colorado Center on Law and Policy: Forging Pathways from Poverty. (2016, December). Medicaid Works: Protect Rural Colorado. Retrieved March 9, 2018. Link to Colorado Center on Law and Policy.
25	The Rural Economy	Healthcare	Colorado has over 314,900 health and wellness workers across the state and a \$16.5 billion annual payroll. The industry has a compelling impact.	Colorado Key Industry: Health and Wellness [Pamphlet]. (n.d.). Denver, CO: Colorado Office Of Economic Development and International Trade. A Division of the Colorado Governor's Office - John W. Hickenlooper. Retrieved June 20, 2018. Link to Colorado Key Industry: Health and Wellness.
25	The Rural Economy	Healthcare	"Healthcare is the second fastest growing economic sector in the state, behind education."	Garner, E. (2017). Presentation on Population Trends Growth, Impact, Change [Colorado Overview 2017 - Colorado Demography Office and the Colorado Department of Local Affairs]. Retrieved August 14, 2018. <i>Please note: These statistics were taken from live, in-person conference presentation.</i> Link to Population Trends Growth, Impact, Change Presentation.
25	The Rural Economy	Healthcare	1 rural physician's employment creates approximately 26 additional jobs and nearly \$1.4 million in income from the clinic and hospital.	Rural Health Information Hub. "Community Vitality and Rural Healthcare". Retrieved August 18, 2020. Link to Rural Health Information Hub.
25	The Rural Economy	Healthcare	The Top 5 Healthcare Occupations in rural Colorado: 1. Registered Nurses 2. Personal Care Aides 3. Home Health Aides 4. Nursing Assistants 5. Receptionists/Information Clerks	Colorado Key Industry: Health and Wellness [Pamphlet]. (n.d.). Denver, CO: Colorado Office Of Economic Development and International Trade. A Division of the Colorado Governor's Office - John W. Hickenlooper. Retrieved June 20, 2018. Link to Colorado Key Industry: Health and Wellness.
26	The Rural Economy	Critical Issue: Hospital Financial Sustainability	As of August 2020, (most recent published data from 2018): The average total profit margin of Critical Access Hospitals (CAHs) in Colorado is 2.37. The average operating margin of Critical Access Hospitals (CAHs) in Colorado is -2.56. The average days cash on hand of Critical Access Hospitals (CAHs) in Colorado is 159. The average days revenue in accounts receivable of Critical Access Hospitals (CAHs) in Colorado is 56.	[FLEX Monitoring Program. CAHMPAS Critical Access Hospital (CAH) Data]. (2019). Unpublished raw data for 2018. Retrieved August 2020. <i>Please note that this data is not publically sourced/available.</i> Link to CAHMPAS Website.

26	The Rural Economy	Critical Issue: Hospital Financial Sustainability	From data provided by the CRHC FLEX monitoring team, from 2016 to 2017, Total Margin, Days Cash on Hand and Operating Margin all displayed decreasing values indicating greater financial hardships for Colorado CAHs.	[FLEX Monitoring Program. CAHMPAS Critical Access Hospital (CAH) Data]. (2019). Unpublished raw data for 2018. Retrieved August 2020. <i>Please note that this data is not publically sourced/available.</i> Link to CAHMPAS Website.
26	The Rural Economy	Critical Issue: Hospital Financial Sustainability	Total Margin is the percentage calculated by dividing net income by total revenues. The higher the Total Margin value, the more the hospital retains on each dollar of sales. Operating Margin measures how much profit a hospital makes on a dollar of sale, after paying for variable costs of production. The higher the Operating Margin the more profitable a hospital is. Days Cash on Hand measures the number of days that an organization can continue to pay its operating expenses, given the amount of cash currently available. High Cash on Hand values imply higher liquidity and hence are viewed favorably by creditors (highest rural cash on hand hospital). Days Revenue in Accounts Receivable measures the number of days that it takes an organization to collect its receivables. Low values means that it takes a hospital fewer days to collect its accounts receivable.	[FLEX Monitoring Program. CAHMPAS Critical Access Hospital (CAH) Data]. (2019). Unpublished raw data for 2018. Retrieved August 2020. <i>Please note that this data is not publically sourced/available.</i> Link to CAHMPAS Website.
26	The Rural Economy	Critical Issue: Hospital Financial Sustainability	"Charity Care" refers to health care provided for free or at reduced prices to low income patients. In 2015, rural Colorado Hospitalss bore the effects of the following: \$17,381,930 Charity Care	The Financial Health of Colorado Hospitals Trends 2011-2015 (2011-2015, pp. 1-138, Rep. No. 2015). (n.d.). Colorado Hospital Association (CHA). Retrieved August 14, 2018 on page 22 of report. Link to The Financial Health of Colorado Hospital Trends 2011-2015 Report.
26	The Rural Economy	Critical Issue: Hospital Financial Sustainability	"Bad Debt" is a loss that a company incurs when credit that has been extended to customers becomes worthless, either because the debtor is bankrupt, has financial problems or because it cannot be collected. In 2015, rural Colorado Hospitalss bore the effects of the following: \$46,534,448 Bad Debt	The Financial Health of Colorado Hospitals Trends 2011-2015 (2011-2015, pp. 1-138, Rep. No. 2015). (n.d.). Colorado Hospital Association (CHA). Retrieved August 14, 2018 on page 22 of report. Link to The Financial Health of Colorado Hospital Trends 2011-2015 Report.
26	The Rural Economy	Critical Issue: Hospital Financial Sustainability	In 2015, rural Colorado Hospitals bore the effects of the following: \$45,489,342 of unreimbursed costs for Medicaid.	The Financial Health of Colorado Hospitals Trends 2011-2015 (2011-2015, pp. 1-138, Rep. No. 2015). (n.d.). Colorado Hospital Association (CHA). Retrieved August 14, 2018 on page 22 of report. Link to The Financial Health of Colorado Hospital Trends 2011-2015 Report.
26	The Rural Economy	Hospital Finances During the Pandemic	As of July 2020, Median Operating Margins of Critical Access Hospitals are down 1.6% and 46% are operating at a negative operating margin.	The Chartis Group. "COVID-19: The Rural Health Safety Net Under Pressure". PowerPoint Presentation. Link to The Chartis Group.
26	The Rural Economy	Hospital Finances During the Pandemic	Hospital profits will take a hit with increased Medicaid members, since Medicaid pays less than private insurance, this massive "shift in payer mix," to use the industry term, will result in a lot less money coming in.	Ingold, J. The Colorado Sun. "Coronavirus will add 500,000 people to Colorado's Medicaid rolls — with major consequences for the health care system". Published June 25, 2020. Retrieved July 23, 2020. Link to The Colorado Sun Article.
26	The Rural Economy	Hospital Finances During the Pandemic	45 days without elective procedures would push five additional hospitals below a 4% margin, meaning about two-thirds of Colorado's 81 general and acute hospitals would be considered at-risk financially.	Colorado Helath Institute (CHI). "Medicaid Surge Due To COVID-19: Financial Impacts for Hospitals". Published June 10, 2020. Retrieved July 23, 2020. Link to Colorado Health Institute Report.
26	The Rural Economy	Hospital Finances During the Pandemic	The surge in Medicaid enrollment is expected to reduce Colorado hospital revenue by \$500 million over the next year.	Colorado Helath Institute (CHI). "Medicaid Surge Due To COVID-19: Financial Impacts for Hospitals". Published June 10, 2020. Retrieved July 23, 2020. Link to Colorado Health Institute Report.
26	The Rural Economy	Hospital Finances During the Pandemic	[GRAPH] Colorado Hospitals' Projected Revenue Reduction by Quarter, Fiscal Year 2020-2021	Colorado Helath Institute (CHI). "Medicaid Surge Due To COVID-19: Financial Impacts for Hospitals". Published June 10, 2020. Retrieved July 23, 2020. Link to Colorado Health Institute Report.

27	Rural Health Infrastructure	Case Study: 2017 - 2020 Clinic Profiles Data	Clinic Rural Payer Mix - Insured, Self Pay: 2.02%, Uninsured Self Pay: 6.11%, Medicare: 24.89%, Medicaid: 27.77%, Private Pay: 34.65	Colorado Rural Health Center (CRHC). State Office Of Rural Health. Clini Profile Data 2017 - 2020 [CRM Raw Unpublished Data]. Please Note: Data does not equal 100% because totals by clinic are based on averages across the clinics who submitted a clinic profile and their payer mix percentages are not whole numbers. The clinic profile is a self-reported tool, and some clinics may not submit all of the information requested. Link to Colorado Rural Health Center - Clinics.
27	Rural Health Infrastructure	Case Study: 2017 - 2020 Clinic Profiles Data	94% of Surveyed Clinics Use an Electronic Health Record (EHR)	Colorado Rural Health Center (CRHC). State Office Of Rural Health. Clini Profile Data 2017 - 2020 [CRM Raw Unpublished Data]. Please Note: Data only reflects CRHC affiliated organizations that participate in CRHC services through a membership. Link to Colorado Rural Health Center - Clinics.
27	Rural Health Infrastructure	Case Study: 2017 - 2020 Clinic Profiles Data	Average Total Number of Staff at Each Clinic: 15.76	Colorado Rural Health Center (CRHC). State Office Of Rural Health. Clini Profile Data 2017 - 2020 [CRM Raw Unpublished Data]. Please Note: Data only reflects CRHC affiliated organizations that participate in CRHC services through a membership. Numbers provided are counts and do not reflect FTEs. Link to Colorado Rural Health Center - Clinics.
27	Rural Health Infrastructure	Case Study: 2017 - 2020 Clinic Profiles Data	Average Number of Employee Types at Each Clinic: MD, DO: 2.65, PA: 1.35, FNP: 1.74, RN: 1.78, MA: 3.66, LCSW: 0.36	Colorado Rural Health Center (CRHC). State Office Of Rural Health. Clini Profile Data 2017 - 2020 [CRM Raw Unpublished Data]. Please Note: Data only reflects CRHC affiliated organizations that participate in CRHC services through a membership. Numbers provided are counts and do not reflect FTEs. Link to Colorado Rural Health Center - Clinics.
27	Rural Health Infrastructure	Case Study: 2017 - 2020 Clinic Profiles Data	Clinic Types and Ownership Models of 71 Clinics Surveyed: Rural Health Practice (not certified): 28 (29%), Certified Rural Health Clinics: 42 (59%), Independent Clinic: 24 (34%), Hospital Owned Clinic: 39 (55%)	Colorado Rural Health Center (CRHC). State Office Of Rural Health. Clini Profile Data 2017 - 2020 [CRM Raw Unpublished Data]. Please Note: Data only reflects CRHC affiliated organizations that participate in CRHC services through a membership. 70 Clinics were surveyed and 7 did not respond to these questions, therefore total summed does not equal 70 and percentages do not add up to 100%. Link to Colorado Rural Health Center - Clinics.
29	Rural Health Infrastructure	Emergency Medical Services (EMS)	Emergency Medical Service (EMS) response times are double in Rural vs. Urban areas.	Lindberg, D.M. New England Journal of Medicine (NEJM). "EMS Response Times Are Double in Rural vs. Urban Areas". Retrieved July 29, 2020. Link to New England Journal of Medicine Study.
29	Rural Health Infrastructure	Emergency Medical Services (EMS)	Emergency Labor and Equipment Costs: Rural and mountain emergency medical services are trying everything to keep their ambulances running across Colorado's rugged and remote terrain, even though they are not profitable. Maintaining these routes with these vehicles results in high costs and low reimbursement, and with few job applicants, ambulance services have no choice but to consolidate with fire responders, fill down time with broader tasks, and outsource to bigger metro hospitals. Summit County makes their EMS efforts sustainable, but still only collect about 62% on ambulance charges. Revenue competes with emergency costs that include things like: • New ambulances - \$190,000 with only basic equipment • New engines - \$600,000 • New ladder trucks - \$1.2 million to \$1.5 million	Booth, M. The Colorado Sun. "In rural Colorado, emergency medical services struggle to keep money-losing ambulances rolling". Published July 22, 2019. Retrieved July 29, 2020. Link to The Colorado Sun Article.
29	Rural Health Infrastructure	Emergency Medical Services (EMS)	60% of trauma deaths occur in rural America, even though only 20% of Americans live in rural areas.	National Rural Health Association (NRHA). (n.d.). Rural Hospital Closures Decimating Rural Health Care Delivery [Brochure]. Retrieved August 8, 2018. <i>Please Note: This is a downloadable word document file from the NRHA website. For more information, send inquiries to CRHC.</i> Link to the National Rural Health Association.
29	Rural Health Infrastructure	Emergency Medical Services (EMS)	The median charge of an air ambulance trip was \$39,000 in 2016 (an increase of about 60% just four years earlier at \$24,000).	Thompson, D. "Emergency Air Lift to Hospital Could Cost \$40,000". Retrieved August 7, 2020. Link to "Emergency Air Lift to Hospital Could Cost \$40,000" Article.
29	Rural Health Infrastructure	Emergency Medical Services (EMS)	The median ambulance cost per transport for ground ambulance providers ranges from \$224 to \$2,204	Pricenomics. "The Wild West of Ambulance Charges". Retrieved August 7, 2020.

29	Rural Health Infrastructure	Emergency Medical Services (EMS)	Of reported EMS Responses for rural locations, 3.6% were for cardiac arrest (Urban: 2.4%) and 6.1% (Urban: 5.1%) were for motorvehicle accidents.	Link to "The Wild West of Ambulance Charges" Article. [Colorado EMS Database V2.2 - Colorado Urban / Rural EMS Responses Prepared by the EMTS Branch]. (2017). Unpublished raw data. Retrieved from Colorado Health Facilities and Emergency Medical Services Division December 2017. *Data represents 1/1/2016 through 12/31/2016. Link to Colorado Health Facilities and Emergency Medical Services Division.
30	Rural Health Infrastructure	2020 Census Participation	The census determines funding amounts for crucial public services. Billions of dollars that fund crucial services before, during and after the coronavirus pandemic will be lost. Services include hospitals, Head Start programs, school lunches and summer lunch programs, Medicaid, food stamps and dozens more.	Fisher, A. "Census Undercount In Colorado Could Leave Billions On The Table". Published June 22, 2020. Retrieved August 25, 2020. Link to Census Undercount In Colorado Article.
30	Rural Health Infrastructure	2020 Census Participation	In 2016, Colorado received \$13 Billion through 55 federal spending programs guided by data derived from the 2010 Census.	George Washington University (GWU). GW Institute for Public Policy. "Counting for Dollars 2020 The Role of the Decennial Census in the Geographic Distribution of Federal Funds". Retrieved October 22, 2020. Link to George Washington University Research Paper.
30	Rural Health Infrastructure	2020 Census Participation	Among the full set of census-guided programs, 55 (one in six) are targeted to rural communities. For FY2016, spending across these programs totaled \$30.7 billion.	George Washington University (GWU). GW Institute for Public Policy. "Counting for Dollars 2020 The Role of the Decennial Census in the Geographic Distribution of Federal Funds". Retrieved October 22, 2020. Link to George Washington University Research Paper.
30	Rural Health Infrastructure	2020 Census Participation	Census counts are used in distributing spending that translates to \$2,300 per person per year.	Colorado Department of Education (CDE). "Census 2020 - 101". Retrieved October 22, 2020. Link to Colorado Department of Education PDF.
30	Rural Health Infrastructure	2020 Census Participation	[MAP]: 2000 Census response rates-CO by counties	Census.Gov. "Census Response Rate - 2010 Colorado by County". Retrieved October 22, 2020. Link to Colorado Department of Local Affairs - 2010 Participation Rates.
30	Rural Health Infrastructure	2020 Census Participation	[MAP]: 2020 Census response rates-CO by counties	Census.Gov. "Census Response Rate - 2020 Colorado by County". Retrieved October 22, 2020. Link to Census.gov.
31	Rural Health Infrastructure	Workforce Shortages	Physicians who receive part of their residency training in rural areas stay longer in rural practice. Physicians involved in teaching remain in rural practice longer than those who are not involved.	AAFP. "Rural Practice, Keeping Physicians In (Position Paper)". Retrieved August 4, 2020. Link to AAFP.
31	Rural Health Infrastructure	Workforce Shortages	Less than 40% of rural primary care providers* remain in the same rural community for 5 consecutive years. *Indicates providers placed and surveyed by the CRHC.	[Colorado Rural Health: Colorado Provider Recruitment (CPR) Retention Survey]. (2015). Unpublished raw data. Data retrieved from the CPR retention survey conducted in 2015 by the CRHC through SurveyMonkey.com (updated survey to be Link to Colorado Rural Health Center Website.
31	Rural Health Infrastructure	Workforce Shortages	Recruitment for an advanced practice nurse or physician assistant is 6 months on average.	[Colorado Rural Health: Colorado Provider Recruitment (CPR) Retention Survey]. (2015). Unpublished raw data. Data retrieved from the CPR retention survey conducted in 2015 by the CRHC through SurveyMonkey.com (updated survey to be conducted in 2017). Link to Colorado Rural Health Center Website.
31	Rural Health Infrastructure	Workforce Shortages	Unstable leadership team can affect quality of care and also impact the organization's financial and operational health, and can impact the overall community.	National Rural Health Association (NRHA). (n.d.). Preventing unnecessary CEO turnover in rural and critical access hospitals [Brochure]. Retrieved October 27, 2020. Link to National Rural Health Association, Preventing unnecessary CEO turnover...".
31	Rural Health Infrastructure	Workforce Shortages	In 2020, Colorado observed Chief Executive Officer staff turnover in 11 of 32 Critical Access Hospitals (CAHs). This equates to 34%.	Colorado Rural Health Center: Critical Access Hospital CEO Turnover (2020). Unpublished raw data. Link to Colorado Rural Health Center Website.
31	Rural Health Infrastructure	Workforce Shortages	The complications of unstable leadership can have a significant short- and long-term impact on a hospital, quality of care and the broader community.	National Rural Health Association (NRHA). (n.d.). Preventing unnecessary CEO turnover in rural and critical access hospitals [Brochure]. Retrieved October 27, 2020. Link to National Rural Health Association, Preventing unnecessary CEO turnover...".

31	Rural Health Infrastructure	Workforce Shortages	"When a rural hospital loses a CEO unexpectedly, the cost of recruiting can be significant, and the hospital's strategic plans may come to a grinding halt. When an organization loses momentum, physicians may get very uncomfortable about building a future around their specialty. This negative snowball effect can result in increased turnover throughout the organization..." - Larry Unroe	National Rural Health Association (NRHA). (n.d.). Preventing unnecessary CEO turnover in rural and critical access hospitals [Brochure]. Retrieved October 27, 2020. Link to National Rural Health Association, Preventing unnecessary CEO turnover...".
31	Rural Health Infrastructure	Workforce Shortages	The recruitment time for a new CEO tends to be lengthy — sometimes it takes six, nine, or 12 months to bring someone in. "Not having executive leadership (or interim leadership) during that time can really compound the problem." - John Tolmie	National Rural Health Association (NRHA). (n.d.). Preventing unnecessary CEO turnover in rural and critical access hospitals [Brochure]. Retrieved October 27, 2020. Link to National Rural Health Association, Preventing unnecessary CEO turnover...".
31	Rural Health Infrastructure	Workforce Shortages	Nationally, rural hospital CEO turnover rates average 18 to 20 percent per year, with turnover rates as high as 30 percent in some states, according to a report by the American College of Healthcare Executives.	National Rural Health Association (NRHA). (n.d.). Preventing unnecessary CEO turnover in rural and critical access hospitals [Brochure]. Retrieved October 27, 2020. Link to National Rural Health Association, Preventing unnecessary CEO turnover...".
31	Rural Health Infrastructure	Workforce Shortages	Large-scale disasters are associated with significant increases in mental health disorders among healthcare providers. Similarly, burnout is associated with higher rates of substance abuse, depression, and suicide. In fact, a study following the SARS outbreak found that up to 10% of health care workers had high SARS-related PTSD symptoms 3 years after the outbreak.	Restauri, N. "Burnout and Posttraumatic Stress Disorder in the Coronavirus Disease 2019 (COVID-19) Pandemic: Intersection, Impact, and Interventions". Journal of the American College of Radiology. Retrieved September 1, 2020. Link to Journal Article.
31	Rural Health Infrastructure	Workforce Shortages	Acute traumatic stress resulting from the COVID-19 Pandemic paired with burnout may intensify an already high pressure environment of assisting sick or distressed patients daily, increasing the risk of mental health trauma among health care professionals.	Restauri, N. "Burnout and Posttraumatic Stress Disorder in the Coronavirus Disease 2019 (COVID-19) Pandemic: Intersection, Impact, and Interventions". Journal of the American College of Radiology. Retrieved September 1, 2020. Link to Journal Article.
31	Rural Health Infrastructure	Workforce Shortages	Rural healthcare providers have to consider that they will experience a heavy workload of patients who require more care, that they will be professionally isolated, and have fewer opportunities for continuing education. Additionally, there are considerations with their family such as limited job opportunities for spouses, travel distances to attend school, and availability of afterschool programs and daycare	Rural Health Information Hub (RHI Hub). "Recruitment and Retention for Rural Health Facilities". Retrieved August 4, 2020. Link to Rural Health Information Hub.
32	Rural Health Infrastructure	Workforce Shortages	Of all active, licensed registered practitioners, rural Colorado receives only: 10% of the dentists (18% less than urban) 9% of the physicians (33% less than urban) 5% of the psychologists (67% less than urban)	Silvernale, R. (2017, April 5). Colorado Health Institute: Active Licensed Dentist/Physician/Psychologists. Retrieved October 4, 2017. Colorado Department of Regulatory Agencies (March 2017). <i>Please Note: A "*" symbol indicates a disclaimer to this data. This data is sourced by the Colorado Health Institute in collaboration with the Department of Regulatory Agencies. Limitations exist with this data as dentists, physicians, and other healthcare providers are only counted once even though they may practice in additional, neighboring counties. Counts are solely based on the mailing address in the provider's licensure file and it is unknown whether that address is a home residence or a practice location. Additionally, on occasions where CRHC has been able to</i> Link to Colorado Health Institute.
32	Rural Health Infrastructure	Workforce Shortages	22* rural counties do not have an Active Psychologist (Baca, Cheyenne, Conejos, Costilla, Crowley, Dolores, Hinsdale, Huerfano, Jackson, Kiowa, Kit Carson, Las Animas, Lincoln, Mineral, Moffat, Phillips, Prowers, Rio Blanco, Saguache, San Juan, Sedgwick, Washington)	Silvernale, R. (2017, April 5). Colorado Health Institute: Active Licensed Psychologists. Retrieved October 4, 2017. Colorado Department of Regulatory Agencies (March 2017). <i>Please Note: A "*" symbol indicates a disclaimer to this data. This data is sourced by the Colorado Health Institute in collaboration with the Department of Regulatory Agencies. Limitations exist with this data as dentists, physicians, and other healthcare providers are only counted once even though they may practice in additional, neighboring counties. Counts are solely based on the mailing address in the provider's licensure file and it is unknown whether that address is a home residence or a practice location. Additionally, on occasions where CRHC has been able to verify that a provider is practicing in a county where data indicates otherwise, this has been reflected in the data estimates provided.</i> Link to Colorado Health Institute.
32	Rural Health Infrastructure	Workforce Shortages	22* rural counties do not have a Licensed, Social Worker (Baca, Bent, Cheyenne, Conejos, Costilla, Custer, Dolores, Hinsdale, Huerfano, Jackson, Kiowa, Lincoln, Logan, Mineral, Phillips, Rio Blanco, Rio Grande, Saguache, San Juan, Sedgwick, Washington, Yuma).	Silvernale, R. (2017, April 5). Colorado Health Institute: Active Licensed Social Worker. Retrieved October 4, 2017. Colorado Department of Regulatory Agencies (March 2017). <i>Please Note: A "*" symbol indicates a disclaimer to this data. This data is sourced by the Colorado Health Institute in collaboration with the Department of Regulatory Agencies. Limitations exist with this data as dentists, physicians, and other healthcare providers are only counted once even though they may practice in additional, neighboring counties. Counts are solely based on the mailing address in the provider's licensure file and it is unknown whether that address is a home residence or a practice location. Additionally, on occasions where CRHC has been able to verify that a provider is practicing in a county where data indicates otherwise, this has been reflected in the data estimates provided.</i> Link to Colorado Health Institute.

32	Rural Health Infrastructure	Workforce Shortages	24* rural counties do not have a Licensed, Addiction Counselor (Baca, Bent, Cheyenne, Costilla, Crowley, Custer, Dolores, Hinsdale, Huerfano, Jackson, Kiowa, Lake, Mineral, Moffat, Morgan, Ouray, Phillips, Rio Blanco, Saguache, San Juan, San Miguel, Sedgwick, Washington, Yuma).	Silvernale, R. (2017, April 5). Colorado Health Institute: Active Licensed Addiction Counselor. Retrieved October 4, 2017. Colorado Department of Regulatory Agencies (March 2017). <i>Please Note: A "*" symbol indicates a disclaimer to this data. This data is sourced by the Colorado Health Institute in collaboration with the Department of Regulatory Agencies. Limitations exist with this data as dentists, physicians, and other healthcare providers are only counted once even though they may practice in additional, neighboring counties. Counts are solely based on the mailing address in the provider's licensure file and it is unknown whether that address is a home residence or a practice location. Additionally, on occasions where CRHC has been able to verify that a provider is practicing in a county where data indicates otherwise, this has been reflected in the data estimates provided.</i> Link to Colorado Health Institute.
32	Rural Health Infrastructure	Workforce Shortages	5* rural counties do not have a licensed dentist. (Cheyenne, Crowley, Hinsdale, Kiowa, San Juan).	Silvernale, R. (2017, April 5). Colorado Health Institute: Active Licensed Dentist. Retrieved October 4, 2017. Colorado Department of Regulatory Agencies (March 2017). <i>Please Note: A "*" symbol indicates a disclaimer to this data. This data is sourced by the Colorado Health Institute in collaboration with the Department of Regulatory Agencies. Limitations exist with this data as dentists, physicians, and other healthcare providers are only counted once even though they may practice in additional, neighboring counties. Counts are solely based on the mailing address in the provider's licensure file and it is unknown whether that address is a home residence or a practice location. Additionally, on occasions where CRHC has been able to verify that a provider is practicing in a county where data indicates otherwise, this has been reflected in the data estimates provided.</i> Link to Colorado Health Institute.
32	Rural Health Infrastructure	Workforce Shortages	1* rural county does not have a dentist or a physician (San Juan).	Silvernale, R. (2017, April 5). Colorado Health Institute: Active Licensed Physician & Active Licensed Dentist. Retrieved October 4, 2017. Colorado Department of Regulatory Agencies (March 2017). <i>Please Note: A "*" symbol indicates a disclaimer to this data. This data is sourced by the Colorado Health Institute in collaboration with the Department of Regulatory Agencies. Limitations exist with this data as dentists, physicians, and other healthcare providers are only counted once even though they may practice in additional, neighboring counties. Counts are solely based on the mailing address in the provider's licensure file and it is unknown whether that address is a home residence or a practice location. Additionally, on occasions where CRHC has been able to verify that a provider is practicing in a county where data indicates otherwise, this has been reflected in the data estimates provided.</i> Link to Colorado Health Institute.
32	Rural Health Infrastructure	Workforce Shortages	37 of 47 Rural/Frontier Counties (79% of rural/frontier counties) do not have a Direct Entry Midwife, compared to 6 of 17 Urban Counties (35%).	Silvernale, R. (2017, April 5). Active, Licensed Direct Entry Midwives by County, Colorado, 2011-2017. Retrieved September 1, 2020. Colorado Department of Regulatory Agencies (March 2017). <i>Please Note: A "*" symbol indicates a disclaimer to this data. This data is sourced by the Colorado Health Institute in collaboration with the Department of Regulatory Agencies. Limitations exist with this data as dentists, physicians, and other healthcare providers are only counted once even though they may practice in additional, neighboring counties. Counts are solely based on the mailing address in the provider's licensure file and it is unknown whether that address is a home residence or a practice location. Additionally, on occasions where CRHC has been able to verify that a provider is practicing in a county where data indicates otherwise, this has been reflected in the data estimates provided.</i> Link to Colorado Health Institute.
32	Rural Health Infrastructure	Workforce Shortages	30 of 47 Rural/Frontier Counties (64% of rural/frontier counties) do not have a Licensed Certified Nurse Midwife compared to 1 of 17 Urban Counties (6%).	Silvernale, R. (2017, April 5). Active, Licensed Certified Nurse Midwives by County, Colorado, 2011-2017. Retrieved September 1, 2020. Colorado Department of Regulatory Agencies (March 2017). <i>Please Note: A "*" symbol indicates a disclaimer to this data. This data is sourced by the Colorado Health Institute in collaboration with the Department of Regulatory Agencies. Limitations exist with this data as dentists, physicians, and other healthcare providers are only counted once even though they may practice in additional, neighboring counties. Counts are solely based on the mailing address in the provider's licensure file and it is unknown whether that address is a home residence or a practice location. Additionally, on occasions where CRHC has been able to verify that a provider is practicing in a county where data indicates otherwise, this has been reflected in the data estimates provided.</i> Link to Colorado Health Institute.

32	Rural Health Infrastructure	Workforce Shortages	30 of 47 Rural/Frontier Counties (64% of rural/frontier counties) do not have a Licensed Certified Nurse Midwife compared to 1 of 17 Urban Counties (6%).	Silvernale, R. (2017, April 5). Active, Licensed Certified Nurse Midwives by County, Colorado, 2011-2017. Retrieved September 1, 2020. Colorado Department of Regulatory Agencies (March 2017). <i>Please Note: A "*" symbol indicates a disclaimer to this data. This data is sourced by the Colorado Health Institute in collaboration with the Department of Regulatory Agencies. Limitations exist with this data as dentists, physicians, and other healthcare providers are only counted once even though they may practice in additional, neighboring counties. Counts are solely based on the mailing address in the provider's licensure file and it is unknown whether that address is a home residence or a practice location. Additionally, on occasions where CRHC has been able to verify that a provider is practicing in a county where data indicates otherwise, this has been reflected in the data estimates provided.</i> Link to Colorado Health Institute.
32	Rural Health Infrastructure	Workforce Shortages	9 of 47 Rural/Frontier Counties (19% of rural/frontier counties) do not have a Licensed Physician's Assistant to 0 of 17 Urban Counties (0%). The 9 counties without one include: Bent, Cheyenne, Costilla, Custer, Dolores, Mineral, Saguache, Washington, and Phillips.	Silvernale, R. (2017, April 5). Active, Licensed Physician Assistant by County, Colorado, 2011-2017. Retrieved September 1, 2020. Colorado Department of Regulatory Agencies (March 2017). <i>Please Note: A "*" symbol indicates a disclaimer to this data. This data is sourced by the Colorado Health Institute in collaboration with the Department of Regulatory Agencies. Limitations exist with this data as dentists, physicians, and other healthcare providers are only counted once even though they may practice in additional, neighboring counties. Counts are solely based on the mailing address in the provider's licensure file and it is unknown whether that address is a home residence or a practice location. Additionally, on occasions where CRHC has been able to verify that a provider is practicing in a county where data indicates otherwise, this has been reflected in the data estimates provided.</i> Link to Colorado Health Institute.
32	Rural Health Infrastructure	Workforce Shortages	51%* of all rural counties do not have an active, licensed addiction counselor.	Silvernale, R. (2017, April 5). Colorado Health Institute: Active Licensed Addiction Counselors. Retrieved October 4, 2017. Colorado Department of Regulatory Agencies (March 2017). <i>Please Note: A "*" symbol indicates a disclaimer to this data. This data is sourced by the Colorado Health Institute in collaboration with the Department of Regulatory Agencies. Limitations exist with this data as dentists, physicians, and other healthcare providers are only counted once even though they may practice in additional, neighboring counties. Counts are solely based on the mailing address in the provider's licensure file and it is unknown whether that address is a home residence or a practice location. Additionally, on occasions where CRHC has been able to verify that a provider is practicing in a county where data indicates otherwise, this has been reflected in the data estimates provided.</i> Link to Colorado Health Institute.
32	Rural Health Infrastructure	Workforce Shortages	There is only 1* urban county that does not have an active, licensed addiction counselor (Park).	Silvernale, R. (2017, April 5). Colorado Health Institute: Active Licensed Addiction Counselors. Retrieved October 4, 2017. Colorado Department of Regulatory Agencies (March 2017). <i>Please Note: A "*" symbol indicates a disclaimer to this data. This data is sourced by the Colorado Health Institute in collaboration with the Department of Regulatory Agencies. Limitations exist with this data as dentists, physicians, and other healthcare providers are only counted once even though they may practice in additional, neighboring counties. Counts are solely based on the mailing address in the provider's licensure file and it is unknown whether that address is a home residence or a practice location. Additionally, on occasions where CRHC has been able to verify that a provider is practicing in a county where data indicates otherwise, this has been reflected in the data estimates provided.</i> Link to Colorado Health Institute.
33	Appendix	Maps	Colorado: County Designations, 2021	Metropolitan and Micropolitan - Population Density by Census Tract: 2010. Retrieved October 23, 2018 from the United Census Bureau. Link to Thematic Maps at the United Census Bureau.
33	Appendix	Maps	Rural Colorado: Access to Healthcare, 2021	Rural Health Information Hub. (n.d.). Retrieved February 28, 2018, from Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services. Last Reviewed January 2019. Link to Rural Health Information Hub.
34	Appendix	Maps	Colorado: Rural Health Facilities within County Designations, 2021	1. Critical Access Hospital Locations. Flex Monitoring Team: A Performance Monitoring Resource for Critical Access Hospitals, States, and Communities. Retrieved January 8, 2019. 2. Colorado Rural Health Center - State Office of Rural Health (SORH). Designated Facilities: RHC, Rural Facilities. Retrieved January 8, 2019 from CRHC sources and organizational database [CRM]. Link to Flex Monitoring Team: CAH Designations.

34	Appendix	Maps	Percent of the Population with a Disability, 2014-2018	Percent Disabled - ACS 5-Year 2014-2018. (n.d.). Colorado Department of Local Affairs (2014-2018). Retrieved on August 18, 2020. Link to Percent Disabled Map - Colorado Department of Local Affairs.
35	Appendix	Maps	Regional Accountable Entities (RAE) Regions in ACC Phase II	Colorado Health Institute. "The Ways of the RAEs". October 2018. Retrieved December 23, 2019. Link to Colorado Health Institute.
35	Appendix	Maps	Percentage of Coloradans Reporting Transportation as a Barrier to Healthcare - 2018	"Transportation: A Barrier to Care Across Colorado. Retrieved from the Colorado Health Institute. August 2018. Retrieved December 15, 2019. Link to the Colorado Health Institute.
36	Appendix	Maps	Projected Population Change 2010 - 2040	Projected Total Population Change by County, 2010 to 2040. Colorado Department of Local Affairs (2010-2040). Retrieved on July 21, 2020. Link to Colorado Department of Local Affairs Map.
36	Appendix	Maps	Number of ACA Insurers on the Individual Marketplace 2014 to 2020	Kaiser Family Foundation (KFF). "Insurer Participation on ACA Marketplaces, 2014-2020". Retrieved December 23, 2019. Link to Insurer Participation on ACA Marketplaces, 2014-2020.
37	Appendix	Maps	2019 Median Home Price	National Association of Realtors (NAR). "Median Home Values by County (Q4 2019)". Retrieved August 12, 2020. Link to National Association of Realtors.
37	Appendix	Maps	Percent of Owners Spending >30% of Household Income on Housing, 2014-2018	Percent of Owners Spending >30% of Household Income on Housing Costs. Colorado Department of Local Affairs (2014-2018). Retrieved on July 8, 2020. Link to Colorado Department of Local Affairs Map.
38	Appendix	Maps	Mental Health Facilities by Type (2019)	Colorado Department of Public Health and Environment (CDPHE). "Health Facilities" - Acute Treatment Units; Community Mental Health Centers; Residential Inpatient Treatment Centers. Retrieved December 23, 2019. Link to Health Facilities - CDPHE.
38	Appendix	Maps	Percent of People Who Speak a Language Other than English at Home, 2014-2018	Speak Language other than English at Home (n.d.). Colorado Department of Local Affairs (2014-2018). Retrieved on July 21, 2020. Link to Colorado Department of Local Affairs Map.
39	Appendix	Maps	Colorado Hospital Districts Source: Colorado Department of Local Affairs	Colorado Department of Local Affairs. "Colorado Public Health Structure". Link to CDLA Colorado Public Health Structure.
39	Appendix	Maps	Colorado Air Pollution Particulate Matter Days	County Health Rankings. "Air Pollution - Particulate Matter". Retrieved November 6, 2020. Link to County Health Rankings.
40	Appendix	Maps	Rural Counties List, Frontier Counties List, and Urban Counties List	Metropolitan and Micropolitan - Population Density by Census Tract: 2010. Retrieved October 23, 2018 from the United Census Bureau. Link to Thematic Maps at the United Census Bureau. Link to "Am I Rural?"
41	Appendix	Maps	Unemployment Rates, Not Seasonally Adjusted, October 2020	Colorado Department of Labor and Employment. "Press Release: Colorado Employment Situation - October 2020". Retrieved December 15, 2020. Link to Unemployment Source.
41	Appendix	Maps	Bureau of Labor and Statistics: 2018 Bureau of Labor and Statistics Colorado Salaries	Bureau of Labor and Statistics: 2019 BLS Colorado Salaries - Regional Mean Wages. Retrieved August 2020 and is a point in time review of salaries. Link to Bureau of Labor and Statistics.

42	Appendix	Maps	Colorado Confirmed Coronavirus Cases by County	Google. Coronavirus (COVID-19) statistics data. Data comes from Wikipedia, government health ministries, The New York Times, and other authoritative sources, as attributed. Retrieved December 15, 2020. Link to Colorado Coronavirus (COVID-19) Data.
43	Appendix	Maps	Rural Substance Use Disorder Treatment Facilities, 2020	Behavioral Health Treatment Services Locator. (2020). Retrieved August 18, 2020, from Substance Abuse and Mental Health Services Administration (SAMHSA). Link to Interactive Behavioral Health Treatment Services Locator.
43	Appendix	Maps	Colorado Medicare Enrollment by County	Centers for Medicare and Medicaid Services. Statistics, Trends, Reports. "Colorado Medicare Enrollment by County" (October 2020). Retrieved October 27, 2020. Link to CMS Dashboard.
43	Appendix	Maps	Colorado Medicaid Enrollment by County, People 21 and older	Centers for Medicare and Medicaid Services. Statistics, Trends, Reports. "Colorado Medicaid Enrollment by County - 20 and over" (September 2020). Retrieved October 27, 2020. *Medicaid counts and estimates for Hinsdale, Mineral, and San Juan include only those enrollees aged 20 or under. **Combined Medicaid and Medicare enrollee rates by county are calculated using September 2020 Medicaid counts and October 2020 Medicare counts provided by the Centers for Medicare and Medicaid Services (CMS) and is a point in time depiction of enrollment. Link to CMS Dashboard.
44	Appendix	Maps	Colorado Medicaid Caseload by County, All Ages, ending 9/30/2020	Centers for Medicare and Medicaid Services. Statistics, Trends, Reports. "Colorado Medicaid Enrollment by County - 20 and over". Retrieved October 27, 2020. Link to CMS Dashboard.
44	Appendix	Maps	Colorado Medicare Enrollment by County, ending 10/31/2020	Centers for Medicare and Medicaid Services. Statistics, Trends, Reports. "Colorado Medicare Enrollment by County" (October 2020). Retrieved October 27, 2020. Link to CMS Dashboard.