

**2019 Snapshot of Rural Health: Sources & Citations**

Page	Section	Heading	Fact	Citation
0	Table of Contents	Definitions	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).  <a href="#">Link to Rural Health Information Hub.</a>
0	Table of Contents	Definitions	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). <a href="#">Link to Association Policy Brief: Rural Health Clinic.</a>
1	Demographics	People	The median projected age in rural Colorado in 2020 is 43, versus 40 in urban counties.	Colorado State Demography Office, & Department of Local Affairs. (n.d.). Age and Gender Population Data. Retrieved June 19, 2018. <a href="#">Link to Colorado State Demography Office &amp; Local Affairs.</a>
1	Demographics	People	750,230 Coloradans live in a rural or frontier county.	Silvernale, R. (2017, April 5). Colorado Health Institute: Colorado County Data Workbook. Retrieved September 19, 2017. <i>Please Note: The Colorado County Data Workbook is based on six data sources. These indicators were drawn from a combination of surveillance systems and surveys. These tools are described in detail by the Colorado Health Institute, with a summary of the surveillance system or survey, the metrics included in the workbook and any notes or limitations to keep in mind when analyzing the data.</i> <a href="#">Link to the Colorado Health Institute.</a>
1	Demographics	People	The state's 10 oldest counties represent rural areas and have a median age of at least 50.	Simpson, K. (2017). Colorado Divide: Seismic shifts create rural-urban chasm in the culture, economy, and politics of the state. The Denver Post, 1-12. Published: July 21, 2017 Updated: January 24, 2018. <a href="#">Link to Denver Post Article.</a>
1	Demographics	People	77% of Colorado's landmass is considered rural or frontier (SqMi) 73% of Colorado is considered rural or frontier when considering the counties (47/64).	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. <a href="#">Link to the National Association of Counties (NACO).</a>
1	Demographics	People	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 2018-06-19. <a href="#">Link to Colorado Department of Public Health &amp; Environment: Facility Directory.</a>
1	Demographics	People	47 of Colorado's 64 counties are rural or frontier (24 rural, 23 frontier).	Colorado: County Designations, 2017 [Map]. Colorado: County Designations, 2017 (p. 1). CO: State Office of Rural Health (SORH). Colorado Rural Health Center. Retrieved June 19, 2018. <a href="#">Link to County Designations Map.</a>
1	Demographics	People	"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. <a href="#">Link to Department of Health and Human Services: Defining Rural Populations.</a>
1	Demographics	People	"Frontier" - A county that has a population density of 6 or fewer residents per square mile.	National Rural Health Association (NRHA) & Wilger, S. (Associate Director of Southwest Center for Health Innovation and The National Center for Frontier Communities). (2016). National Rural Health Association Policy Brief: Definition of Frontier. Definition of Frontier, 1-5. Retrieved September 19, 2017. <a href="#">Link to National Rural Health Association Policy Brief.</a>
2	Demographics	People	Race & Origin of Coloradans: 68.3% White (Not Hispanic or Latino) 21.5% Hispanic or Latino: 21.5% 4.5% Black or African American 1.6% American Indian and Alaska Native 3.4% Asian 0.2% Native Hawaiian and Other Pacific Islander 3.0% Two or More Races	U.S. Census Bureau QuickFacts: Colorado. (n.d.). Retrieved August 8, 2018.  <a href="#">Link to U.S. Census Bureau Quick Facts: Colorado</a>

Page	Section	Heading	Fact	Citation
2	Demographics	People	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.). Colorado Center on Law & Policy. Retrieved September 18, 2018. <a href="#">Link the Colorado Health Equity Report: Vital Signs Report.</a>
2	Demographics	People	An estimated 394,145 veterans currently live in Colorado (6.74% of the population).	[Veteran Population by County - Population Projections 2019]. (2017). Unpublished raw data. US Department of Veteran Affairs. Retrieved September 18, 2018 from website under "Population Tables">"Demographics">"Counties" (Table 9L: VetPop2016 County-Level Veteran Population by STATE, AGE GROUP, GENDER, 2015-2045). For total population estimates for 2019, projected/forecasted populations were used from the Colorado Department of Local Affairs. <a href="#">Link to Veteran Population Projections - US Department of Veteran Affairs.</a>
2	Demographics	People	Approximately 11.3% of all Colorado veterans live in rural, while 88.7% live in urban areas of Colorado.	[Veteran Population by County - Population Projections 2019]. (2017). Unpublished raw data. US Department of Veteran Affairs. Retrieved September 18, 2018 from website under "Population Tables">"Demographics">"Counties" (Table 9L: VetPop2016 County-Level Veteran Population by STATE, AGE GROUP, GENDER, 2015-2045). For total population estimates for 2019, projected/forecasted populations were used from the Colorado Department of Local Affairs. <a href="#">Link to Veteran Population Projections - US Department of Veteran Affairs.</a>
2	Demographics	People	Approximately 6.08% of the rural population in Colorado are veterans compared to 6.83% in urban Colorado.	[Veteran Population by County - Population Projections 2019]. (2017). Unpublished raw data. US Department of Veteran Affairs. Retrieved September 18, 2018 from website under "Population Tables">"Demographics">"Counties" (Table 9L: VetPop2016 County-Level Veteran Population by STATE, AGE GROUP, GENDER, 2015-2045). For total population estimates for 2019, projected/forecasted populations were used from the Colorado Department of Local Affairs. <a href="#">Link to Veteran Population Projections - US Department of Veteran Affairs.</a>
2	Demographics	Education	The high school graduation rate in rural Colorado is 80%, compared to the overall state average of 77%. The highest high school graduation rate in rural Colorado is in Pitkin County at 98%, while the lowest rate in rural Colorado is in Sedgwick County at 40%.	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. County Health Rankings (2018, April). Colorado County Data: High school graduation. Retrieved June 19, 2018. <a href="#">Link to County Health Rankings.</a>
2	Demographics	Education	From data released in 2017 and 2018, rural Colorado retained a 3% higher rate of graduates in public schools that graduated from high school in four years, compared to urban counties.	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. County Health Rankings (2018, April). Colorado County Data: High school graduation. Retrieved June 19, 2018. Percent difference of average rates from 2017-2018 between Rural and Urban counties. <a href="#">Link to County Health Rankings.</a>
2	Demographics	Education	10% of adult Coloradans lack the most basic literacy skills. Low literacy costs the U.S. at least \$225 billion every year in non-productivity in the workforce, crime, and loss of tax revenue due to unemployment.	STAND for Children Colorado. The State of Literacy in Colorado. 2017 Report. Retrieved June 19, 2018. <a href="#">Link to STAND for Children Colorado Report.</a>
2	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 (2018, April). Colorado County Data: Some College Retrieved June 19, 2018. <a href="#">Link to County Health Rankings.</a>
2	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. <a href="#">Link to Colorado Health Equity Report.</a>
2	Demographics	Education	52% of rural children enrolled in public schools are eligible for free or reduced lunch compared to 36% of urban children. 86% of kids in Saguache and Costilla Counties are eligible for Free or Reduced lunch.	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2018, April). Colorado County Data: Children eligible for free or reduced price lunch. Retrieved June 19, 2018. <a href="#">Link to County Health Rankings.</a>
3	Demographics	Income & Poverty	It is estimated that approximately 75% of population health is driven by social determinants of health, physical environment, and medical care/access to care, while genes, biology and health behaviors account for only 25%.	Colorado Health Equity Report: Vital Signs Report (Rep.). (n.d.). Colorado Center on Law & Policy. Retrieved September 18, 2018. <a href="#">Link to Colorado Health Equity Report: Vital Signs Report.</a>

Page	Section	Heading	Fact	Citation
3	Demographics	Income & Poverty	10% of rural Coloradans are enrolled in the Supplemental Nutrition Assistance Program (SNAP) compared to 8% of urban.	Hamm, K. (2017, January 10). Food stamps in Colorado: An interactive county-by-county breakdown . Retrieved September 20, 2017, from The Denver Post. <a href="#">Link to Denver Post Article.</a>
3	Demographics	Income & Poverty	Colorado ranks 45th nationally for access to food stamps (SNAP) with only 58% of those eligible enrolled (national average enrollment: 75%).	Food Stamp Impact Reports. (2018, March). Retrieved August 1, 2018. <a href="#">Link to Food Stamp Impact Report.</a>
3	Demographics	Income & Poverty	In 2016, 17% of all foreclosures in Colorado occurred in rural/frontier counties.	[Colorado Information Marketplace (CIM) - Housing Foreclosures by County - Colorado]. (2016).Published raw data. Retrieved September 20, 2018. <a href="#">Link to Housing Foreclosures by County.</a>
3	Demographics	Income & Poverty	17% of all rural foreclosures occurred in Fremont (9%) and Delta (8%) counties.	[Colorado Information Marketplace (CIM) - Housing Foreclosures by County - Colorado]. (2016).Published raw data. Retrieved September 20, 2018. <a href="#">Link to Housing Foreclosures by County.</a>
3	Demographics	Income & Poverty	In 40 of Colorado's 64 counties, more than 40% of families are rent burdened (spending > 30% of household income on rent).	Colorado Health Equity Report: Vital Signs Report (Rep.). (n.d.). Colorado Center on Law & Policy. Retrieved September 18, 2018. <a href="#">Link to Colorado Health Equity Report: Vital Signs Report.</a>
3	Demographics	Income & Poverty	Approximately 28% of families in rural Colorado are single parent households.	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2018, April). Colorado County Data: Children in Single Parent Households. Retrieved June 19, 2018. <a href="#">Link to County Health Rankings.</a>
3	Demographics	Income & Poverty	22% of rural kids live in poverty (income: \$25,100/family of four) compared to 12% of Urban kids. In Costilla County, 43% of children are living in poverty.	1. Prior HHS Poverty Guidelines and Federal Register References. (n.d.). Retrieved June 20, 2018. Federal Register 2014 Vol. 79, No. 14, January 22, 2014, pp. 3593-3594. Office of the Assistant Secretary for Planning and Evaluation (ASPE). 2. Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2018, April). Colorado County Data: Children in Poverty. Retrieved June 19, 2018 <a href="#">Link to County Health Rankings.</a>
3	Demographics	Income & 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. <a href="#">Link to Colorado Health Equity Report: Vital Signs Report.</a>
3	Demographics	Income & Poverty	While the state has one of the best economies in the nation, Colorado has one of the largest economic gaps between urban and rural areas in the country.	Economy Rankings - Last Updated May 14th, 2018. U.S.News McKinsey&Company. Retrieved January 25, 2019. <a href="#">Link to Economy Rankings - U.S. News.</a>
3	Demographics	Income & Poverty	Median household income is 29% lower in rural areas of the state compared to urban areas (about a \$14k difference). Poverty and unemployment rates are higher in rural counties.	Colorado Health Equity Report: Vital Signs Report (Rep.). (n.d.). Colorado Center on Law & Policy. Retrieved September 18, 2018. <a href="#">Link to Colorado Health Equity Report: Vital Signs Report.</a>
3	Demographics	Income & Poverty	40% of children under the age of 18 are living in poverty in Crowley County (state average is 13%). 72% of children in Crowley County are eligible for free or reduced lunch (state average is 42%).	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2018, April). Colorado County Data:Children in Poverty & Free and Reduced Lunch. Retrieved August 8, 2018. <a href="#">Link to County Health Rankings.</a>
3	Demographics	Income & Poverty	Teen Births in Crowley County are more than double the state average at 55 per 1,000* (state average is 24 per 1,000*). "*" Indicates population based off female population, ages 15-19	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2018, April). Colorado County Data: Teen Births. Retrieved August 8, 2018. <a href="#">Link to County Health Rankings.</a>
3	Demographics	Income & Poverty	3.6% of the population ages 16 and older unemployed but seeking work in Crowley County (state average is 3.3%)	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2018, April). Colorado County Data:Unemployment. Retrieved August 8, 2018. <a href="#">Link to County Health Rankings.</a>
4	Demographics	Healthcare Coverage	The percent of rural adult coloradans without insurance decreased over the past 5 years from approximately 23% to 12%, a percent change of -48%.	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2018, April). Colorado County Data: Uninsured (Data releases 2013 and 2018). Retrieved August 6, 2018. <a href="#">Link to County Health Rankings.</a>
4	Demographics	Healthcare Coverage	Insurance premiums in rural communities are often markedly higher than in urban areas of Colorado. For example, the eastern plains, and the San Luis Valley face premiums that are sometimes twice as high as those living in the Denver metro region.	Colorado Commission on Affordable Health Care - Final Report, Published June 30, 2017. Retrieved June 20, 2018. <a href="#">Link to Colorado Commission on Affordable Health Care - Final Report.</a>

Page	Section	Heading	Fact	Citation
4	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. <a href="#">Link to Colorado Health Institute.</a>
4	Demographics	Healthcare Coverage	Rural Payer Mix (Medicaid 26.0%, Medicare 15.7%, Private Pay 46.6%, Uninsured 11.4%)	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. <a href="#">Link to Colorado Health Institute.</a>
4	Demographics	Healthcare Coverage	Urban payer mix (Medicaid 17.6%, Medicare 12.6%, Private Pay 62.7%, Uninsured 6.7%)	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. <a href="#">Link to Colorado Health Institute.</a>
4	Demographics	Healthcare Coverage	Costilla County has the highest combined Medicare/Medicaid rate of all Colorado counties at 78%, while the top 5 counties with the highest Medicaid/Medicare enrollment in the state are rural and frontier.	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. <a href="#">Link to Colorado Health Institute.</a>
5	The Health of Rural	Access	32 Critical Access Hospitals, 49 Federally Certified Rural Health Clinics, 10 Small Rural PPS Hospitals, 57 Federally Qualified Rural Health Centers, 148 Total Rural Facilities	1. Critical Access Hospital Locations. Flex Monitoring Team: A Performance Monitoring Resource for Critical Access Hospitals, States, and Communities. Retrieved January 8, 2019. <a href="#">Link to Flex Monitoring Team: CAH Designations.</a> 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]. 3. Colorado Community Health Network (CCHN) - "Community Health Centers Map". Retrieved January 25, 2019. <a href="#">Link to CCHN Community Health Centers Map.</a>  <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>
5	The Health of Rural	Access	Critical Access Hospitals (CAH) is were created by Congress in 1997 to support the fragile rural healthcare system. CAHS have 25 or fewer inpatient beds are are located in a designated rural area more than 35 miles from another hospital. CAHs receive cost-based reimbursement from Medicare plus 1% . The 32 CAHs across Colorado improve access to care by keeping essential services in rural communities.	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).  <a href="#">Link to Rural Health Information Hub.</a>
5	The Health of Rural	Access	Rural Health Clinics (RHCs) were created by the Rural Health Clinic Services Act of 1977to support and encourage access to primary healthcare services for rural residents. RHCs must be located in a federally-designated provider shortage area. RHCs are paid an all-inclusive rate of \$83.45-\$110.36 per visit furnished by an eligible practitioner. The 49 RHCs across Colorado provide primary and preventative health services to an estimated 130,000 Coloradans annually.	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). 3. CMS Update to Rural Health Clinic (RHC) All-Inclusive Rate (AIR) Payment Limit for Calendar Year (CY) 2019. Retrieved October 2018. <a href="#">Link to Association Policy Brief: Rural Health Clinic.</a> <a href="#">Link to CMS Update to Rural Health Clinic All-inclusive Rate Payment</a>
5	The Health of Rural	Rural Health Information Technology	On April 2nd 2018, Governor John Hickenlooper signed a bill into law to accelerate construction of high-speed broadband internet service in rural Colorado. The bill will take money from a fund that long has subsidized rural telephone service and invest it in broadband construction over a five-year period ending in 2023. It is estimated that more than \$115 million will go to broadband grants between 2019 and 2023.	The Associated Press of the Denver Post. (2018, April 03). Colorado rural high-speed broadband bill becomes law. Retrieved August 10, 2018, from The Denver Post.  <a href="#">Link to the Denver Post Article.</a>
5	The Health of Rural	Rural Health Information	In the first 60 Days of adopting a new EMR (Electronic Medical Record), a practice of 5 providers spends an average \$233,298 on startup, training, software and hardware, and data transfer.	O'Neill Hayes, T. (2015, August 6). Are Electronic Medical Records Worth the Costs of Implementation? Retrieved August 7, 2018 from American Action Forum (AAF). <a href="#">Link to American Action Forum Article.</a>
5	The Health of Rural	Rural Health Information Technology	Roughly 1 in 4 rural households in the state do not have access to broadband today (25 megabits per second download and 3 mbps upload). The Governor's Office of Broadband hopes to close this gap by 2020.	Aguilar, J. (2017, September 8). Colorado Divide: Broadband gaps threaten to leave rural areas in the dust of digital age. Retrieved October 24, 2017, from The Denver Post and The Colorado Broadband Office, Governor's Office of Information Technology.  <a href="#">Link to the Denver Post Article.</a>

Page	Section	Heading	Fact	Citation
5	The Health of Rural	Rural Health Information Technology	Implementing an EMR System costs a single physician approximately \$163,765.	O'Neill Hayes, T. (2015, August 6). Are Electronic Medical Records Worth the Costs of Implementation? Retrieved August 7, 2018 from American Action Forum (AAF). <a href="#">Link to American Action Forum Article.</a>
6	The Health of Rural	Health Outcomes	7 of 10 deaths in Colorado can be attributed to chronic diseases: heart disease, stroke, cancer and diabetes.	Chronic disease prevention. (2018). Retrieved September 5, 2018, from the Colorado Department of Public Health and Environment (CDPHE) <a href="#">Link to Chronic Disease Prevention: CDPHE.</a>
6	The Health of Rural	Health Outcomes	21% of adult rural Coloradans are considered obese with a distinct difference between the eastern plains (Yuma, CO - 26%) and some mountain areas of the state (Eagle, CO - 13%).	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2018, April). Colorado County Data: Adult Obesity. Retrieved August 7, 2018. <a href="#">Link to County Health Rankings.</a>
6	The Health of Rural	Health Outcomes	During 2016, nearly 1 in 4 children (or 22.3%) in Colorado are overweight or obese which equates to about 145,500 children ages 5-14 years.	Colorado.gov. (2017). Childhood Overweight and Obesity in Colorado: Chronic Diseases and Related Risk Factors in Colorado [Brochure]. Colorado. Retrieved August 7, 2018. <a href="#">Link to Childhood Overweight and Obesity in Colorado Fact Sheet.</a>
6	The Health of Rural	Health Outcomes	Over 7% of adult rural Coloradans have diabetes. People with diabetes have health care costs 2.3 times greater than those without diabetes.	1. Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2018, April). Colorado County Data: Diabetes. Retrieved August 7, 2018. 2. American Diabetes Association (ADA). (2017). The Staggering Costs of Diabetes: A Growing Epidemic [Brochure]. Colorado. www.diabetes.org. Retrieved August 8, 2018. <a href="#">Link to County Health Rankings.</a> <a href="#">Link to American Diabetes Association "Staggering Cost of Diabetes" Brochure</a>
6	The Health of Rural	Health Outcomes	Heart disease alone accounted for \$4.4 billion in annual costs in Colorado in 2010.	Colorado Department of Public Health and Environment (CDPHE). (2014). Cardiovascular Disease Burden and Disparities in Colorado: Facts for Action: Chronic Diseases and Related Risk Factors in Colorado [Brochure]. Author. Retrieved August 7, 2018. <a href="#">Link to Cardiovascular Disease Burden and Disparities in Colorado - Fact Sheet.</a>
6	The Health of Rural	Health Outcomes	The total cost of diabetes and prediabetes in the U.S. is \$322 billion.	American Diabetes Association (ADA). (2017). The Staggering Costs of Diabetes: A Growing Epidemic [Brochure]. Colorado. www.diabetes.org. Retrieved August 8, 2018. <a href="#">Link to American Diabetes Association "Staggering Cost of Diabetes" Brochure</a>
6	The Health of Rural	Health Outcomes	Approximately 29% of motor vehicle crash deaths in rural Colorado involve alcohol.	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2018, April). Colorado County Data: Alcohol Impaired Driving Deaths. Retrieved September 22, 2018. <a href="#">Link to County Health Rankings.</a>
6	The Health of Rural	Health Outcomes	18% of adult rural Coloradans report drinking excessively.	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2018, April). Colorado County Data: Excessive Drinking. Retrieved September 22, 2018. <a href="#">Link to County Health Rankings.</a>
6	The Health of Rural	Health Outcomes	15% of rural adults report smoking regularly.	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2018, April). Colorado County Data: Adult Smoking. Retrieved September 22, 2018. <a href="#">Link to County Health Rankings.</a>
6	The Health of Rural	Health Outcomes	The Lung Cancer incidence rate in Colorado is 40.6 per 100,000 with a mortality rate of 27.3 per 100,000.	Cahill, C. (2017, November 08). Lung Cancer in Colorado. Retrieved September 5, 2018, from Colorado Cancer Coalition (CCC). <a href="#">Link to Colorado Cancer Coalition.</a>
6	The Health of Rural	Health Outcomes	In Colorado, rates of Lung Cancer are decreasing.	Cahill, C. (2017, November 08). Lung Cancer in Colorado. Retrieved September 5, 2018, from Colorado Cancer Coalition (CCC). <a href="#">Link to Colorado Cancer Coalition.</a>
6	The Health of Rural	Health Outcomes	Less than 1 in 4 cases of lung cancer are detected early.	Cahill, C. (2017, November 08). Lung Cancer in Colorado. Retrieved September 5, 2018, from Colorado Cancer Coalition (CCC). <a href="#">Link to Colorado Cancer Coalition.</a>
6	The Health of Rural	Health Outcomes	The 5 year survival rate of lung cancer is 18.7%.	Cahill, C. (2017, November 08). Lung Cancer in Colorado. Retrieved September 5, 2018, from Colorado Cancer Coalition (CCC). <a href="#">Link to Colorado Cancer Coalition.</a>
7	The Health of Rural	Health Outcomes	Black infant mortality (10.7 per 1,000) occurs at more than twice the rate of White non-Hispanic infant mortality (4.0 per 1,000) in America. Black infants also experience the highest rate of preterm birth.	Infant Mortality in Colorado: Data Brief (August 2018) [Pamphlet]. (2018). CO: Colorado Department of Public Health and Environment (CDPHE). <a href="#">Link to Infant Mortality in Colorado: Data Brief.</a>
7	The Health of Rural	Health Outcomes	Approximately 10%* of rural children are born at a low birth weight. A*** indicates that some values utilized in calculation may be considered unreliable since they are based on counts of	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2018, April). Colorado County Data: Low Birthweight. Retrieved September 22, 2018. <a href="#">Link to County Health Rankings.</a>

Page	Section	Heading	Fact	Citation
7	The Health of Rural	Health Outcomes	In Colorado, nearly 1 in 9 women who give birth will experience signs and symptoms of depression, making depression the most common complication of pregnancy.	Pregnancy-related Depression. (n.d.). Retrieved September 5, 2018, from the Colorado Department of Public Health and Environment (CDPHE) <a href="#">Link to Pregnancy-related Depression in Colorado.</a>
7	The Health of Rural	Health Outcomes	Rural Colorado has a 38% higher teen pregnancy rate than urban parts of the state.	Robert Wood Johnson Foundation & University of Wisconsin Population Health Institute. (2018, April). Colorado County Data: Teen Births. Retrieved September 22, 2018. <a href="#">Link to County Health Rankings.</a>
7	The Health of Rural	Health Outcomes	(MAP) Strength of Screening Processes for Pregnancy-Related Depression in Rural Colorado (2013)	K.M. Beckwith, MSPH. The State of Pregnancy-Related Depression Efforts in Colorado - March 2014. Colorado Department of Public Health and Environment (CDPHE). *Map recreated by the Colorado Rural Health Center (CRHC). <a href="#">Link to "The State of Pregnancy-Related Depression Efforts in Colorado" Article.</a>
7	The Health of Rural	Health Outcomes	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. <a href="#">Link to the Denver Post Article.</a>
7	The Health of Rural	Health Outcomes	2.4 million women of child-bearing age live in counties without hospitals that deliver babies.	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. <a href="#">Link to the Denver Post Article.</a>
7	The Health of Rural	Health Outcomes	When hospitals are struggling financially, as many rural hospitals are, obstetric services are often first on the chopping board, because of the cost associated with providing this service.	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. <a href="#">Link to the Denver Post Article.</a>
7	The Health of Rural	Health	In the past ten years, infant mortality decreased 25% from 6.3 to 4.7 deaths per 1,000 live births.	America's Health Rankings. (2017). Retrieved January 8, 2019, from the United Health Foundation. <a href="#">Link to America's Health Rankings - Colorado.</a>
7	The Health of Rural	Health Outcomes	The lowest rate is 4.1 deaths per 1,000 births in the Douglas County region and the highest rate is 8.8 in the region formed by counties in the southeast.	Infant Mortality in Colorado: Maternal and Child Health Issue Brief #2. (2013). Retrieved September 5, 2018. Colorado Department of Public Health and Environment (CDPHE). <a href="#">Link to Infant Mortality in Colorado: Maternal and Child Health Issue Brief #2.</a>
8	The Health of Rural	Health Outcomes	22* Rural Colorado counties do not have an active, licensed psychologist.	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 mental health 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.</i> <a href="#">Link to Colorado Health Institute.</a>
8	The Health of Rural	Health Outcomes	11* counties in Colorado have no mental health beds.	Brown, J. (2017, January 5). Colorado must stop using jails for people in mental health crisis, panel says. Retrieved October 24, 2017 from The Denver Post. <a href="#">Link to the Denver Post Article.</a>
8	The Health of Rural	Health Outcomes	51* of all rural counties do not have an active, licensed addiction counselor (27* of 47 counties).	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 mental health 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.</i> <a href="#">Link to Colorado Health Institute.</a>
8	The Health of Rural	Health Outcomes	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 mental health 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.</i> <a href="#">Link to Colorado Health Institute.</a>
8	The Health of Rural	Health Outcomes	Colorado ranked 17 out of all states for adults with mental illness who did not receive treatment.	Mental Health in America - Access to Care Data. (2016, October 17). Retrieved January 9, 2019, from Mental Health America (MHA). <a href="#">Link to Mental Health America (MHA).</a>
8	The Health of Rural	Health Outcomes	The state of Colorado ranks 10th for prevalence of untreated youth with depression (56%) and ranked 10th for youth with severe major depressive episode who received some consistent treatment.	Mental Health in America - Access to Care Data. (2016, October 17). Retrieved January 9, 2019, from Mental Health America (MHA). <a href="#">Link to Mental Health America (MHA).</a>

Page	Section	Heading	Fact	Citation
8	The Health of Rural	Health Outcomes	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. <a href="#">Link to National Rural Health Association, "About Rural Health Care".</a>
8	The Health of Rural	Health Outcomes	In 2017, individuals under the age of 25 accounted for approximately 11% of all rural suicides in Colorado with 11% of those suicides committed by children ages 10-14 years.	Colorado Violent Death Reporting System (COVDRS). (2017). Retrieved January 9, 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 suppressed.</i> <a href="#">Link to Colorado Violent Death Reporting System (COVDRS).</a>
8	The Health of Rural	Health Outcomes	In 2017, the average crude suicide rate of rural Colorado was 30.4 per 100,000 compared to the state crude rate of 20.4 per 100,000 (a difference of 40%).	Colorado Violent Death Reporting System (COVDRS). (2017). Retrieved January 9, 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 suppressed.</i> <a href="#">Link to Colorado Violent Death Reporting System (COVDRS).</a>
8	The Health of Rural	Health Outcomes	Colorado's suicide rates are among the highest in the country. Males in Colorado are four times more likely to die by suicide than females.	Lotus, J. (2018, June 08). As Celebrity Suicides Gain Attention, Colorado Rates Skyrocket. Retrieved September 7, 2018. <a href="#">Link to "As Celebrity Suicides Gain Attention, Colorado Rates Skyrocket" Article.</a>
8	The Health of Rural	Health Outcomes	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. <a href="#">Link to Oral Health Status of Rural Adults in the United States Research.</a>
8	The Health of Rural	Health Outcomes	In Colorado, an estimated 7.8 million hours of school are lost annually due to oral pain and suffering due to untreated diseases which affect children's ability to concentrate and learn.	Promoting Oral Health in Colorado Communities: A Marketing Communications & Advocacy Toolkit [Pamphlet]. (n.d.). Lakewood, CO: Oral Health Colorado: Connecting Colorado's Oral Health Advocates. Retrieved on September 29, 2017. <a href="#">Link to Promoting Oral Health Advocacy Toolkit.</a>
8	The Health of Rural	Health Outcomes	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. <a href="#">Link to The Impact of Oral Health Disease on the Health of Coloradans.</a>
8	The Health of Rural	Health Outcomes	Only 30% of seniors have any type of dental insurance.	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. <a href="#">Link to The Impact of Oral Health Disease on the Health of Coloradans.</a>
8	The Health of Rural	Health Outcomes	Virtually every Medicaid enrollee has a dental benefit, but 1 in 5 does not realize it (19%).	Colorado Health Access Survey (2017 ed., pp. 1-30, Rep. No. 2017). (2017). Denver, CO: Colorado Health Institute. Retrieved July 18, 2018. <a href="#">Link to 2017 Colorado Health Access Survey.</a>
8	The Health of Rural	Health Outcomes	In 2017, 70.3% of Coloradans reported having dental insurance.	Colorado Health Access Survey (2017 ed., pp. 1-30, Rep. No. 2017). (2017). Denver, CO: Colorado Health Institute. Retrieved July 18, 2018. <a href="#">Link to 2017 Colorado Health Access Survey.</a>
8	The Health of Rural	Health Outcomes	22.7% of Children did not have a dental visit in the past year.	Colorado Health Access Survey (2017 ed., pp. 1-30, Rep. No. 2017). (2017). Denver, CO: Colorado Health Institute. Retrieved July 18, 2018. <a href="#">Link to 2017 Colorado Health Access Survey.</a>
8	The Health of Rural	Health Outcomes	Tooth decay, the most prevalent chronic childhood diseases in American today.	Promoting Oral Health in Colorado Communities: A Marketing Communications & Advocacy Toolkit [Pamphlet]. (n.d.). Lakewood, CO: Oral Health Colorado: Connecting Colorado's Oral Health Advocates. Retrieved on September 29, 2017. <a href="#">Link to Promoting Oral Health Advocacy Toolkit.</a>
8	The Health of Rural	Health Outcomes	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. <a href="#">Link to Water, Sanitation &amp; Environmentally-related Hygiene.</a>
8	The Health of Rural	Health Outcomes	One health disparity that exists for under-represented racial and ethnic minority groups, low-income Coloradans, elderly adults, migrant and seasonal farm workers, and those in rural areas is the disproportionate burden of oral disease.	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. <a href="#">Link to The Impact of Oral Health Disease on the Health of Coloradans.</a>
9	The Health of Rural	Critical Opioid Issue	Colorado has set records for drug overdose deaths in 13 of the past 15 years, and the newest data shows the trend continuing.	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. <a href="#">Link to Death By Drugs: Colorado at Record High.</a>
9	The Health of Rural	Critical Opioid Issue	959 Coloradans dead in 2017 from drug poisonings, a figure that includes intentional and unintentional overdoses.	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. <a href="#">Link to Death By Drugs: Colorado at Record High.</a>
9	The Health of Rural	Critical Opioid Issue	The rate of newborns addicted to opiates rose 83% in Colorado from 2010-2015. The problem is even more critical in portions of southern Colorado.	Booth, M. (n.d.). A Rural Crisis: The Opioid Epidemic in the San Luis Valley. Retrieved August 10, 2018, from The Colorado Health Foundation. <a href="#">Link to "A Rural Crisis: Opioid Epidemic in the San Luis Valley."</a>

Page	Section	Heading	Fact	Citation
9	The Health of Rural	Critical Opioid Issue	More than 72,000 drug overdose deaths were estimated in 2017 in the U.S. The sharpest increase occurred among deaths related to fentanyl and fentanyl analogs (synthetic opioids) with nearly 30,000 overdose deaths.	National Institute on Drug Abuse. (2018, August). Overdose Death Rates. Retrieved August 10, 2018, from CDC WONDER. <a href="#">Link to National Institute on Drug Abuse.</a>
9	The Health of Rural	Critical Opioid Issue	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. <a href="#">Link to Heroin in Colorado Preliminary Report.</a>
9	The Health of Rural	Critical Opioid Issue	More than 35% of all U.S. opioid overdose deaths in 2017 involved a prescription opioid, with more than 46 people dying every day from prescription opioid overdoses.	1. Seth P, Scholl L, Rudd RA, Bacon S. Increases and Geographic Variations in Overdose Deaths Involving Opioids, Cocaine, and Psychostimulants with Abuse Potential – United States, 2015-2016. MMWR Morb Mortal Wkly Rep. ePub: 29 March 2018. 2. Seth P, Rudd RA, Noonan RK, Haegerich. Quantifying the Epidemic of Prescription Opioid Overdose Deaths. American Journal of Public Health 108, no. 4 (April 1, 2018): pp. 500-502. <a href="#">Link to CDC Prescription Opioid Data.</a>
9	The Health of Rural	Critical Opioid Issue	Prescription Opioids are the leading cause of drug poisoning deaths in Colorado. Heroin was the second leading cause. Between 2001 and 2016, there was an increased of prescription opioid deaths by approximately 154%.	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. <a href="#">Link to Death By Drugs: Colorado at Record High.</a>
10	The Health of Rural	Critical Opioid Issue	Sixteen rural Eastern Plains counties — Sedgwick, Phillips, Yuma, Logan, Washington, Morgan, Kit Carson, Cheyenne, Lincoln, Kiowa, Powers, Bent, Otero, Crowley, Baca and Las Animas — recorded 93 total deaths between 2014 and 2016, up 158% from 36 in the three-year period between 2002 and 2004.	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. <a href="#">Link to Death By Drugs: Colorado at Record High.</a>
10	The Health of Rural	Critical Opioid Issue	Colorado ranks 19th in the nation for opioid related death rate (9.5 per 100,000 in 2016).	National Institute on Drug Abuse. (2018, February 28). Opioid Summaries by State. Retrieved September 7, 2018. <a href="#">Link to National Institute on Drug Abuse.</a>
10	The Health of Rural	Critical Opioid Issue	Colorado ranks 14th in the nation for opioid prescription rate (64.7 per 100,000 in 2015).	National Institute on Drug Abuse. (2018, February 28). Opioid Summaries by State. Retrieved September 7, 2018. <a href="#">Link to National Institute on Drug Abuse.</a>
10	The Health of Rural	Critical Opioid Issue	Eight counties near the San Luis Valley — Custer, Huerfano, Saguache, Alamosa, Rio Grande, Conejos, Costilla and Mineral — recorded 29 overdose deaths between 2014-2016, more than double the 14 fatalities between 2002-2004.	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. <a href="#">Link to Death By Drugs: Colorado at Record High.</a>
10	The Health of Rural	Critical Opioid Issue	The number of felony drug cases in Alamosa District Court rose from 88 in 2011 to 336 last year.	Booth, M. (n.d.). A Rural Crisis: The Opioid Epidemic in the San Luis Valley. Retrieved August 10, 2018, from The Colorado Health Foundation. <a href="#">Link to A Rural Crisis: The Opioid Epidemic in the San Luis Valley.</a>
10	The Health of Rural	Critical Opioid Issue	Opioids kill one person in Colorado about 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. <a href="#">Link to the Denver Post Article.</a>
10	The Health of Rural	Critical Opioid Issue	Huerfano County: An Opioid Case Study: Huerfano County has the State's highest overdose rate. Huerfano is one of the poorest counties in the state. 6 deaths in 2016 equates to a rate of 152.6 deaths per 100,000 residents. A first for local government, Huerfano County is suing the nation's top pharmaceutical companies and distributors claiming its residents were induced to take opioids for pain management. 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. <a href="#">Link to Death By Drugs: Colorado at Record High.</a>
10	The Health of Rural	Critical Opioid Issue	9 of the 10 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. <a href="#">Link to Death By Drugs: Colorado at Record High.</a>
10	The Health of Rural	Critical Opioid Issue	In 2016, 5,212 Colorado children were placed in foster care with 39% (approximately 2,033) of placements 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). <a href="#">Link to America's Opioid Crisis: The Unseen Impact on Colorado Children.</a>
10	The Health of Rural	Critical Opioid Issue	The documented use of Naloxone by emergency medical services (EMS) in Colorado to treat suspected heroin overdoses has increased 240% from 2011-2015 (2011 – 997 events and 2015 – 3,393 events).	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. <a href="#">Link to Heroin in Colorado Preliminary Report.</a>
10	The Health of Rural	Critical Opioid Issue	In 2017, Denver Health alone dispensed Narcan on 910 occasions.	Roberts, M. (2018, June 21). Nearly Three Heroin/Opioid Overdoses Per Day in Denver During 2017. Retrieved September 18, 2018. <a href="#">Link to Nearly Three Heroin/Opioid Overdoses per Day Article.</a>
10	The Health of Rural	Critical Opioid Issue	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. <a href="#">Link to A Rural Crisis: The Opioid Epidemic in the San Luis Valley.</a>



Page	Section	Heading	Fact	Citation
11	The Health of Rural	The Rural Economy	Colorado's food and agriculture industry ranks among the state's most important economic drivers, generating more than \$50 billion in direct economic activity annually by some estimates and supporting more than 400,000 jobs.	FY19 Performance Plan: Food & Agriculture. Colorado Department of Agriculture. Retrieved August 1, 2018. Accessed under the link "FY2018-2019 Performance Plans" (Google Doc). <a href="#">Link to Colorado Department of Agriculture Performance Management.</a>
11	The Health of Rural	The Rural Economy	The natural gas and oil industry supports 232,900 jobs in Colorado. This accounts for 6.5% of Colorado's employment with workers receiving \$23 billion in wages and \$31.4 billion going back into Colorado's economy.	T. Bentley. (2018, Marc 3). Colorado's oil and gas industry pays its fair share already. Retrieved August 1, 2018 from the Denver Post. <a href="#">Link to the Denver Post Article.</a>
11	The Health of Rural	The Rural Economy	"The mining workforce in Colorado has decreased by 18% since 2008" "The healthcare workforce in Colorado has increased 22% since 2008"	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> <a href="#">Link to Population Trends Growth, Impact, Change Presentation.</a>
11	The Health of Rural	The Rural Economy	Colorado Parks and Wildlife generate \$6.1 billion annually through state park visitors, wildlife viewers, anglers and hunters contributing to both rural and urban economies.	Colorado Parks and Wildlife. (June 20, 2018). 2018 Hunting, Fishing and Parks for Future Generations Act [Pamphlet]. Denver, CO: Colorado.gov. <a href="#">Link to Colorado Parks and Wildlife 2018 Hunting, Fishing and Parks Pamphlet.</a>
11	The Health of Rural	The Rural Economy	Nearly 3 out of 4 Coloradans participate in outdoor recreation each year, generating more than \$28 billion in consumer spending.	Matthews, M. (2018, February 18). The outdoor recreation industry generated \$374 billion in 2016. It's ready to wield that influence in Washington and on Wall Street. Retrieved August 1, 2018 from the Denver Post. <a href="#">Link to the Denver Post Article.</a>
11	The Health of Rural	The Rural Economy	In 2017, Colorado welcomed approximately 84.7 million visitors (37.9 million overnight visitors) who spent more than \$21 billion. The tourism industry supports more than 171,000 jobs in Colorado (2017). Tourism saves every Colorado household more than \$626.82 annually in taxes (this is the number of tax dollars residents would have to pay if not for the more than \$1.28 billion in state and local taxes paid annually by visitors).	Tourism Pays for Colorado. Retrieved January 9, 2019. Additional Sources: Dean Runyan Associates, The Economic Impact of Travel on Colorado. <a href="#">Link to Tourism Pays for Colorado.</a>
12	The Health of Rural	The Rural Economy	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. <a href="#">Link to Colorado Center on Law and Policy.</a>
12	The Health of Rural	The Rural Economy	The average Critical Access Hospital creates 170 jobs and generates \$7.1 Million in salaries, wages, and benefits annually.	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> <a href="#">Link to the National Rural Health Association.</a>
12	The Health of Rural	The Rural Economy	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. <a href="#">Link to Colorado Key Industry: Health and Wellness.</a>
12	The Health of Rural	The Rural Economy	The salaries and benefits in rural Colorado total to \$904,409,165.	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. <a href="#">Link to The Financial Health of Colorado Hospital Trends 2011-2015 Report.</a>
12	The Health of Rural	The Rural Economy	In rural america, the 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 downloadable word document file from the NRHA website. For more information, send inquiries to CRHC.</i> <a href="#">Link to the National Rural Health Association.</a>
12	The Health of Rural	The Rural Economy	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. <a href="#">Link to Colorado Key Industry: Health and Wellness.</a>
12	The Health of Rural	The Rural Economy	There are 9,800 employees on payroll (FTEs) in rural Colorado.	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. <a href="#">Link to The Financial Health of Colorado Hospital Trends 2011-2015 Report.</a>
12	The Health of Rural	The Rural Economy	1 in 16 jobs in Colorado is in the healthcare sector.	Colorado Consumer Health Initiative. (2017, June). What Do Federal Health Care Changes Mean for Colorado's Economy? Colorado Consumer Health Initiative and Families USA [Press release]. Retrieved March 21, 2018. <a href="#">Link to Colorado Consumer Health Initiative.</a>
12	The Health of Rural	The Rural Economy	1 rural physician's employment creates approximately 26 additional jobs and nearly \$1.4 million in income from the clinic and hospital.	Eilrich, F. C., Doeksen, G. A., & St. Clair, C. F. (2016). Estimate the Economic Impact of a Rural Primary Care Physician.Pg.1. National Center for Rural Health Works - October 2016 Research Study, 1-6. Retrieved September 25, 2017 from the Federal Office of Rural Health Policy (FORHP) and Health Resources and Services Administration (HRSA) <a href="#">Link to the "Estimate the Economic Impact of a Rural Primary Care Physician" Article.</a>
12	The Health of Rural	The Rural Economy	"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> <a href="#">Link to Population Trends Growth, Impact, Change Presentation.</a>

Page	Section	Heading	Fact	Citation
13	The Health of Rural	Emergency Medical Services	The average EMS transport time for dispatch calls from scene to hospital arrival time is 34.1 minutes in rural Colorado compared to 23.3 in urban.	[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. <a href="#">Link to Colorado Health Facilities and Emergency Medical Services Division.</a>
13	The Health of Rural	Emergency Medical Services	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> <a href="#">Link to the National Rural Health Association.</a>
13	The Health of Rural	Emergency Medical Services	The average EMS "on scene time" for rural Colorado is 21.8 minutes, compared to 24.9 in urban.	[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. <a href="#">Link to Colorado Health Facilities and Emergency Medical Services Division.</a>
13	The Health of Rural	Emergency Medical Services	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.	[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. <a href="#">Link to Colorado Health Facilities and Emergency Medical Services Division.</a>
13	The Health of Rural	Workforce Shortages	On average, it takes 1-3 years to recruit a Physician in rural Colorado.	[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). <a href="#">Link to Colorado Rural Health Center Website.</a>
13	The Health of Rural	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). <a href="#">Link to Colorado Rural Health Center Website.</a>
13	The Health of Rural	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 conducted in 2017). <a href="#">Link to Colorado Rural Health Center Website.</a>
13	The Health of Rural	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> <a href="#">Link to Colorado Health Institute.</a>
13	The Health of Rural	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> <a href="#">Link to Colorado Health Institute.</a>
13	The Health of Rural	Workforce Shortages	22* rural counties do not have a 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> <a href="#">Link to Colorado Health Institute.</a>
13	The Health of Rural	Workforce Shortages	1* rural counties do not have a physician (San Juan).	Silvernale, R. (2017, April 5). Colorado Health Institute: Active Licensed Physician. 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> <a href="#">Link to Colorado Health Institute.</a>

Page	Section	Heading	Fact	Citation
13	The Health of Rural	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> <a href="#">Link to Colorado Health Institute.</a>
13	The Health of Rural	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 verify that a provider is practicing in a county where data indicates otherwise, this has been reflected in the data estimates provided.</i> <a href="#">Link to Colorado Health Institute.</a>
14	The Health of Rural	Hospital Finances	As of August 2018, the number of nation-wide rural hospital closures has risen rapidly to 87 total closures since 2010.	Selgel, J. (2018, August 8). Rural Hospital Closures Climb Quickly to Eighty-Seven. Retrieved August 10, 2018, from National Rural Health Association (NRHA).  <a href="#">Link to Rural Hospitals Closures Climb Quickly to Eighty-Seven Article.</a>
14	The Health of Rural	Hospital Finances	The closure of a hospital in a rural community has a definite economic impact resulting in reduced per-capita income by \$703 or 4%, an increased the unemployment rate of 1.6%, and increased difficulty to attract industry and employers.	Payne, W., CEO. (2018, June). Rural Hospital Closures - Can Telemedicine Close the Gaps? Retrieved August 10, 2018, from ReferralMD.com.  <a href="#">Link to Rural Hospital Closures Article.</a>
14	The Health of Rural	Hospital Finances	The average total profit margin of Critical Access Hospitals (CAHs) in Colorado is 3.8.	[FLEX Monitoring Program. CAHMPAS Critical Access Hospital (CAH) Data]. (2018). Unpublished raw data. Retrieved September 19, 2018. <i>Please note that this data is not publically sourced.</i> <a href="#">Link to CAHMPAS Website.</a>
14	The Health of Rural	Hospital Finances	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 (highest total margins - Gunnison County, lowest - Huerfano County).	[FLEX Monitoring Program. CAHMPAS Critical Access Hospital (CAH) Data]. (2018). Unpublished raw data. Retrieved September 19, 2018. <i>Please note that this data is not publically sourced.</i> <a href="#">Link to CAHMPAS Website.</a>
14	The Health of Rural	Hospital Finances	The average operating margin of Critical Access Hospitals (CAHs) in Colorado is -1.8.	[FLEX Monitoring Program. CAHMPAS Critical Access Hospital (CAH) Data]. (2018). Unpublished raw data. Retrieved September 19, 2018. <i>Please note that this data is not publically sourced.</i> <a href="#">Link to CAHMPAS Website.</a>
14	The Health of Rural	Hospital Finances	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 (highest operating margins - Gunnison County, lowest - Morgan County).	[FLEX Monitoring Program. CAHMPAS Critical Access Hospital (CAH) Data]. (2018). Unpublished raw data. Retrieved September 19, 2018. <i>Please note that this data is not publically sourced.</i> <a href="#">Link to CAHMPAS Website.</a>
14	The Health of Rural	Hospital Finances	The average days cash on hand of Critical Access Hospitals (CAHs) in Colorado is 159.	[FLEX Monitoring Program. CAHMPAS Critical Access Hospital (CAH) Data]. (2018). Unpublished raw data. Retrieved September 19, 2018. <i>Please note that this data is not publically sourced.</i> <a href="#">Link to CAHMPAS Website.</a>
14	The Health of Rural	Hospital Finances	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 - Rio Grande County, lowest - Morgan County).	[FLEX Monitoring Program. CAHMPAS Critical Access Hospital (CAH) Data]. (2018). Unpublished raw data. Retrieved September 19, 2018. <i>Please note that this data is not publically sourced.</i> <a href="#">Link to CAHMPAS Website.</a>
14	The Health of Rural	Hospital Finances	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]. (2018). Unpublished raw data. Retrieved September 19, 2018. <i>Please note that this data is not publically sourced.</i> <a href="#">Link to CAHMPAS Website.</a>
14	The Health of Rural	Hospital Finances	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 (highest days revenue in accounts receivable - Kiowa County, lowest - Prowers County ).	[FLEX Monitoring Program. CAHMPAS Critical Access Hospital (CAH) Data]. (2018). Unpublished raw data. Retrieved September 19, 2018. <i>Please note that this data is not publically sourced.</i> <a href="#">Link to CAHMPAS Website.</a>
14	The Health of Rural	Hospital Finances	"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. <a href="#">Link to The Financial Health of Colorado Hospital Trends 2011-2015 Report.</a>

Page	Section	Heading	Fact	Citation
14	The Health of Rural	Hospital Finances	"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. <a href="#">Link to The Financial Health of Colorado Hospital Trends 2011-2015 Report.</a>
14	The Health of Rural	Hospital Finances	In 2015, rural Colorado Hospitalss 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. <a href="#">Link to The Financial Health of Colorado Hospital Trends 2011-2015 Report.</a>
15	Appendix	Maps	Colorado: County Designations, 2019	Metropolitan and Micropolitan - Population Density by Census Tract: 2010. Retrieved October 23, 2018 from the United Census Bureau. <a href="#">Link to Thematic Maps at the United Census Bureau.</a>
15	Appendix	Maps	Rural Colorado: Access to Healthcare, 2018	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 February 27, 2018. <a href="#">Link to Rural Health Information Hub.</a>
16	Appendix	Maps	Colorado: Rural Health Facilities within County Designations, 2019	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]. <a href="#">Link to Flex Monitoring Team: CAH Designations.</a>
16	Appendix	Maps	Percent of the Population with a Disability, 2012-2016	Percent Disabled - ACS 5-Year 2012-2016. (n.d.). Colorado Department of Local Affairs (2012-2016). Retrieved on August 14, 2018. <a href="#">Link to Percent Disabled Map - Colorado Department of Local Affairs.</a>
17	Appendix	Maps	Colorado Medicare Enrollment by County, 2011-2015 (State Average: 19%)	1. Colorado Health Institute (2015). Medicare Enrollees. Retrieved on January 14, 2019. 2. Total Population estimates retrieved from Colorado Department of Local Affairs, 2015. Census Estimates. Retrieved January 14, 2019. <i>*Please note: Total population estimates were not available through Colorado Health Institute for 2015.</i> <a href="#">Link to Colorado Health Institute.</a> <a href="#">Link to Colorado Department of Local Affairs.</a>
17	Appendix	Maps	Colorado Medicaid Enrollment by County, 2016 (State Average: 20%)	Colorado Health Institute (2016). Medicaid Caseload (2016). Retrieved on January 14, 2019. <a href="#">Link to Colorado Health Institute.</a>
18	Appendix	Maps	Combined Medicaid (2016) and Medicare (2015) Enrollment by County (State Average: 42%)	1. Colorado Health Institute (2016). Medicaid Caseload (2016). Retrieved on January 14, 2019. 2. Colorado Health Institute (2015). Medicare Enrollees. Retrieved on January 14, 2019. 3. Total Population estimates retrieved from Colorado Department of Local Affairs, 2015. Census Estimates. Retrieved <a href="#">Link to Colorado Health Institute.</a> <a href="#">Link to Colorado Department of Local Affairs.</a>
18	Appendix	Maps	Rural Substance Use Disorder Treatment Facilities, 2018	Behavioral Health Treatment Services Locator. (2018). Retrieved September 18, 2018, from Substance Abuse and Mental Health Services Administration (SAMHSA). <a href="#">Link to Interactive Behavioral Health Treatment Services Locator.</a>
19	Appendix	Maps	Percent of Owners Spending >30% of Household Income on Housing, 2012-2016	Percent of Owners Spending >30% of Household Income on Housing Costs. (n.d.). Colorado Department of Local Affairs (2012-2016). Retrieved on August 14, 2018. <a href="#">Link to Colorado Department of Local Affairs Map.</a>
19	Appendix	Maps	Percent of People Who Speak a Language Other than English at Home, 2012-2016	Speak Language other than English at Home (n.d.). Colorado Department of Local Affairs (2012-2016). Retrieved on August 14, 2018. <a href="#">Link to Colorado Department of Local Affairs Map.</a>
20	Appendix	Maps	Forecast Change in Population 65+, 2010-2020	Forecast Change in Population 65+, 2010-2020 (n.d.). Colorado Department of Local Affairs. Retrieved on August 14, 2018. <a href="#">Link to Colorado Department of Local Affairs Map.</a>
20	Appendix	Maps	Population Change, 2010-2016	Population Change, 2010-2016 (n.d.). Page 4 of Policy Brief. Colorado Department of Local Affairs. Retrieved on August 14, 2018. <a href="#">Link to Colorado Department of Local Affairs Map.</a>

Page	Section	Heading	Fact	Citation
21	Appendix	iCARE Network 2018	iCARE Network 2018 Fact Sheet Page 1	<p>1. iCARE Program Information. State Office of Rural Health (SORH), Colorado Rural Health Center. Retrieved 2018.</p> <p>2. Quality Health Indicators (QHI) Website. [Raw Data] Data retrieved 2018 for communities that submitted data for at least three quarters of the grant year.</p> <p><a href="#">Link to the Quality Health Network.</a></p>
21	Appendix	iCARE Network 2018	iCARE Network 2018 Fact Sheet Page 2	<p>1. iCARE Program Information. State Office of Rural Health (SORH), Colorado Rural Health Center. Retrieved 2018.</p> <p>2. Quality Health Indicators (QHI) Website. [Raw Data] Data retrieved 2018 for communities that submitted data for at least three quarters of the grant year.</p> <p><a href="#">Link to the Quality Health Network.</a></p> <p>3. Robert Wood Johnson Foundation &amp; University of Wisconsin Population Health Institute. County Health Rankings (2018, April). Colorado County Data: Diabetic Monitoring, Diabetes Prevalence*. Retrieved June 19, 2018.</p> <p><a href="#">Link to County Health Rankings.</a></p>