2026–2028 IMPLEMENTATION STRATEGY

Based on findings of the 2025–2027 Community Health Needs Assessment

UCHealth University of Colorado Hospital

uchealth

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INTRODUCTION AND OVERVIEW

Introduction.

UCHealth University of Colorado Hospital (UCH) aims to improve the lives of its patients by providing access to high-quality, comprehensive health care services. UCH has engaged many partners and organizations in the community to promote health and prevent illness in the local community, with a focus on serving the community's most vulnerable populations. These efforts not only focus on providing emergency services and charity care, they also aim to develop and offer programs that promote health, prevent illness and, ultimately, address the social determinants, or drivers, of health. This report summarizes UCH's planned activities to support the identified community health needs.

Our mission.

We improve lives. In big ways through learning, healing and discovery. In small, personal ways through human connection. But in all ways, we improve lives.

Our vision.

From health care to health.

Our values.

Patients first
Integrity
Excellence

UCHealth University of Colorado Hospital overview.

UCH is a not-for-profit hospital located in Aurora, Colorado, and has served the Metro Denver community since 1921. The hospital is an 830-bed, acute-care inpatient facility and a Level I trauma center. As the region's only academic medical center, UCH provides the most advanced and comprehensive services and treatments and has been rated as the number one hospital in Colorado by *U.S. News & World Report* for 13 years in a row. The hospital's physicians are affiliated with the University of Colorado School of Medicine, part of the University of Colorado. UCH is committed to improving the lives of the community's most vulnerable residents and cared for more than 230,000 inpatient admissions and outpatient visits for Medicaid patients during fiscal year 2024. UCH serves more Medicaid patients than any other hospital in Colorado, based on Medicaid-adjusted discharge volumes.

UCH is part of UCHealth, a Colorado-based health system that offers the most advanced care throughout the Rocky Mountain region, extending from Colorado to Wyoming and western Nebraska. As Colorado's only integrated community and academic health system, UCHealth is dedicated to improving lives and providing the highest-quality medical care with an exceptional patient experience. With more than 200 locations throughout the region, UCHealth pushes the boundaries of medicine, providing advanced treatments and clinical trials to ensure excellent care and outcomes for 2.8 million patients each year. UCHealth is also the largest provider of Medicaid services in Colorado, with more than 1.1 million inpatient admissions and outpatient visits for Medicaid patients during fiscal year 2024.

UCHealth's commitment to communities we serve.

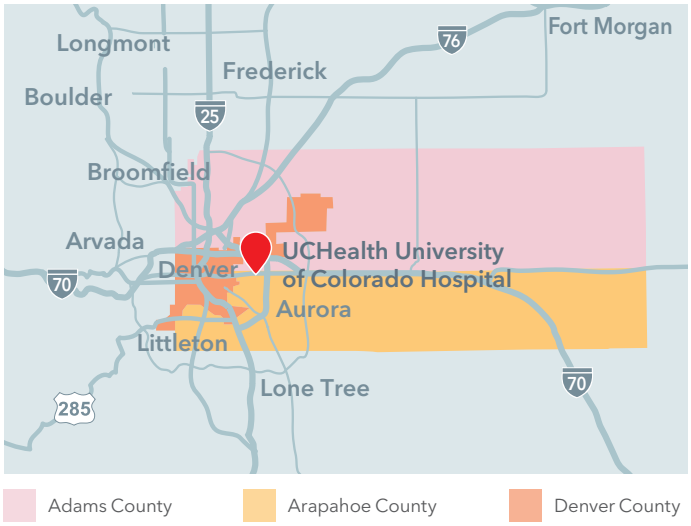
UCHealth is committed to improving lives and is proud to serve communities throughout Colorado and beyond. In fiscal year 2024, UCHealth provided $1.3 billion in total community benefits, more than twice the nonprofit organization's tax benefits. UCHealth's community benefits include $568 million in uncompensated and charity care to support uninsured and underinsured patients. The uncompensated care provided by UCHealth is more than any other health system or provider in Colorado. As part of its commitment to community benefit, UCHealth provided $385 million to the University of Colorado School of Medicine, which is more than 10 times the funding amount provided by the state of Colorado. UCHealth's support for the school and its faculty members is critical to expanding access to needed services in local communities, training

Colorado's future generation of doctors, and helping to support crucial research to provide better care and innovative treatments for patients.

Included as part of UCHealth's community benefit, UCH provided $519 million in community benefits during fiscal year 2024, including $229 million in uncompensated care.

Community served.

For the purposes of this implementation strategy, the UCH community is defined as Adams, Arapahoe and Denver counties. These counties represent the geographic area most proximal to the hospital where the majority of UCH patients reside.



IMPLEMENTATION STRATEGY

Implementation strategy process, development and approval.

The implementation strategy report for UCH is based on the findings and health-issue priorities established through the 2025–2027 UCH Community Health Needs Assessment (CHNA).

Implementation strategy process.

An implementation strategy summarizes a hospital's plans to address identified community health needs and is intended to satisfy the requirements set forth in the Patient Protection and Affordable Care Act, passed in 2010. The implementation strategy process is intended to align the hospital's resources and programs with goals, objectives and metrics for how the hospital plans to address the identified health needs in the local community.

The implementation strategy was developed by the UCH Internal Advisory Group (IAG), a subset of the hospital leadership team, which represents a broad range of departments and services across the organization. The development of the implementation strategy was based on an assessment of available community resources as well as a review of UCH's clinical support services, community health improvement programs, community health improvement sponsorships and contributions to community organizations that aligned with identified health needs within the community.

The activities described in this report also rely on collaboration and partnerships with many of the same organizations and stakeholders that participated in the CHNA process. The listed strategies represent the combined input from key community leaders, public health experts, local health care providers and UCH leadership. A list of the organizations engaged during the CHNA and implementation strategy processes is included in the Appendix.

This report intends to describe hospital-based resources directed toward programs and services that will impact the priority health issues and are also aligned with federal community benefit guidelines for nonprofit hospitals. Given the ever-changing landscape of health care, the initiatives in this implementation strategy may change, and new ones may be added or others eliminated based on the community needs during 2026–2028. Initiatives are monitored for quality, performance and health impact with ongoing improvements made to facilitate success.

Board of directors approval.

During the October 2025 meeting, the UCH Board of Directors was apprised of and approved of this implementation strategy and related activities described within this report.

COMMUNITY HEALTH NEEDS

Identified community health needs.

UCH completed its 2025–2027 CHNA during the time frame of December 2024 – March 2025. The CHNA process provided an opportunity for the hospital to engage public health experts, medical providers and community stakeholders to collectively identify the most critical health needs within the community.

Assessment and prioritization process.

A multi-phased approach was used to identify the top health priorities for future impact. The process included:

- A comprehensive analysis of local population health indicators.
- Solicitation of community input on local health issues through:
  - Distribution of a web-based survey to local community-serving organizations, school districts and government agencies.
  - A web-based survey distributed to health care providers at UCH to gather input on community health needs.
- A review of the most recent community health assessments (CHAs) by local public health departments, including:
  - 2022 Community Health Assessment performed by the Tri-County Health Department.
  - 2024 Arapahoe County Community Health Assessment performed by Arapahoe County Public Health.
  - 2020 Community Health Assessment for the City and County of Denver, completed by Denver Public Health & Environment and the Public Health Institute at Denver Health.
- Participation in meetings with local health alliances and public health departments to gain insights on community needs.

The comprehensive list of opportunities was presented to UCH's IAG for consideration and was prioritized based on the following criteria:

- Scope and severity of the health need.
- Economic feasibility to address the health need.
- Potential for UCH to impact the health need.
- Alignment with UCHealth system strategies and local, state and national objectives.

Prioritized health issues.

The prioritized health issues identified for impact within the community served by UCH are access to care, behavioral health and chronic disease.

Tables addressing prioritized health needs.

The following tables outline strategies, initiatives, anticipated impact, potential collaborations, partners and resources the hospital will commit to address the prioritized health needs.

2026–2028 IMPLEMENTATION STRATEGY

Priority health issue: Access to care.

Goal: Improve access to comprehensive, quality health care services.

Research shows that access to primary care is associated with positive health outcomes. Individuals with an established primary care physician are more likely to receive recommended preventive services such as flu shots, blood pressure screenings and cancer screenings. Disparities in access to primary health care include language-related barriers, physical disabilities, the inability to take time off work to attend appointments and transportation-related barriers.

In 2023, across all three counties, the United States Census Bureau reported a higher percentage of community members under 65 without health insurance compared to the state average of 7.9%. Adams County reported 11.4%, Arapahoe County reported 9.8% and Denver County 8.5%. Additionally, the 2024 County Health Rankings highlighted Adams County as having an unfavorable ratio of population to primary care providers, being 1,927:1 compared to Colorado's 1,207:1 overall.

Programs and initiatives	Activities	Anticipated impact	Existing or planned collaborations	Resources
UCHealth Medical Group and University of Colorado School of Medicine (CU SOM) recruitment of new physicians.	Evaluate opportunities to recruit additional physicians to the community.	Increased access to providers by those seeking care in the community.	UCHealth Medical Group, CU SOM	Staff time to support the implementation of the programs and initiatives. In-kind expenses and financial support associated with the ongoing operations of the programs. In-kind expenses associated with collaborations with community organizations.
Facilitate education and training of medical professionals.	Provide resources to promote and support the education and training of medical professionals.	Increased number of qualified health care professionals available to the community.	CU SOM; University of Colorado Schools of Nursing, Pharmacy and Dental; University of Colorado School of Public Health	
Hispanic Transplant Program.	Provide counseling and support to Spanish-speaking transplant patients and their families.	Enhanced education about the transplant process. Improved quality of care and experience for Spanish-speaking transplant patients and their families.	UCHealth Transplant Center, Vuela for Health, CO Connect for Health, CU School of Public Health, CU Cancer Center, The National Kidney Foundation (NKF)	
Virtual primary care and specialty care appointments.	Provide virtual primary care and specialty care services.	Increased access to providers by those seeking care in the community.	UCHealth Virtual Health Center	
Forensic nurse examiner program.	Provide medical examinations using compassionate and evidence-based methods for individuals who have experienced sexual or violent assault.	Improved medical care and access to resources.	Local law enforcement agencies, victims' assistance agencies, EMS agencies; The Crisis Center; Sexual Assault Response Teams (SART) across all counties; At-Risk Intervention and Mentoring (AIM); CU Vulnerable Elder Services, Protection, and Advocacy (VESPA)	

Access to care, continued on next page.

Access to care, continued.

Programs and initiatives	Activities	Anticipated impact	Existing or planned collaborations	Resources
Stepping On program.	Offer evidence-based intervention to educate and train the older adult population on techniques and practices to reduce falls.	Decreased trauma due to falls for aging residents. Improved activity and mobility for aging residents.	UCHealth Trauma Center	Staff time to support the implementation of the programs and initiatives. In-kind expenses and financial support associated with the ongoing operations of the programs. In-kind expenses associated with collaborations with community organizations.
UCHealth Prescription Club.	Provide uninsured and underinsured patients with discounted prescriptions.	Increased number of community members who are able to fill their prescriptions.	UCH Pharmacy Department	
Stop the Bleed program.	Offer community-based education classes on bleeding control and life-saving techniques.	Improved participation in life-saving education programs. Increased community knowledge and preparedness for bleeding-related incidents.	UCH Trauma Center, local law enforcement, local public schools, Colorado Trauma Network, community churches, local businesses, Colorado Department of Public Health and Environment (CDPHE)	
Metro Denver Partnership for Health (MDPH) participation.	Collaborate with county health departments and other health systems to address community health issues.	Increased access to health and social services.	Boulder, Broomfield, Denver and Tri-County Health departments; AdventHealth; CommonSpirit Health; Intermountain Health; Children's Hospital Colorado	
Aurora Health Alliance collaboration.	Provide financial support for implementation of community-based initiatives developed to identify and assist individuals with access to primary care.	Improved access to care for low-income and uninsured residents in Aurora.	Aurora Health Alliance	
Dedicated to Aurora's Wellness and Needs (DAWN) Clinic support.	Provide technical support for Epic platform. Perform processing of lab specimens for DAWN patients. Provider financial support of translation line for DAWN staff and patients.	Improved access to care for uninsured residents in Aurora.	DAWN Clinic; UCH Laboratory, IT and Translation Services	

Access to care, continued on next page.

Access to care, continued.

Programs and initiatives	Activities	Anticipated impact	Existing or planned collaborations	Resources
Community cancer prevention and screening events.	Provide evidence-based information and literature to educate the community about cancer prevention and early detection. Partner with CU Cancer Center Office of Community Outreach and Engagement to distribute FIT kits and radon testing resources. Host community-based outreach and screening events at local sites.	Increased early detection and intervention to reduce cancer-related complications.	CU Cancer Center Office of Community Outreach and Engagement, Crawford Elementary School, Centro de los Trabajadores	Staff time to support the implementation of the programs and initiatives. In-kind expenses and financial support associated with the ongoing operations of the programs. In-kind expenses associated with collaborations with community organizations.

Priority health issue: Behavioral health.
Goal: Improve identification, treatment or resource referral for individuals with behavioral health needs.

According to the U.S. Centers for Disease Control and Prevention (CDC), mental health conditions are among the most common health issues in the United States, and the resulting disease burden is among the highest of all diseases.

As reported in the 2024 County Health Rankings & Roadmaps (CHR&R), 14.9% of adults in Adams County and 14.7% of adults in Denver County reported experiencing poor mental health for 14 or more days over the past month, compared to the Colorado statewide average of 14.6%. Additionally, the rates of mental health diagnosis hospitalizations in all three counties were significantly higher than the state average. In Denver County specifically, there were 3,513.1 hospitalizations per 100,000 residents, far exceeding the state average of 2,854.1. Availability of mental health providers is more limited in Adams County, where the ratio of population to mental health providers was 250:1 compared to the state average of 219:1.

The effects of substance use disorders are cumulative, significantly contributing to costly social, physical, mental and public health problems. Survey results within the 2024 CHR&R report show that in Denver County, 24.9% of adults reported binge drinking (age-adjusted) during the past month, higher than the state average of 21.4%. The 2024 CHR&R report also listed the percentage of driving deaths with alcohol involvement as 39.4% in Arapahoe County, also higher than the state average of 34.7%.

Programs and initiatives	Activities	Anticipated impact	Existing or planned collaborations	Resources
Integrate behavioral health services within primary care clinics.	Embed teams of licensed clinical social workers, licensed professional counselors and psychologists into primary and specialty care practices.	Improved access to behavioral health services and resources.	UCHealth Medical Group, CU SOM	Staff time to support the implementation of the programs and initiatives. In-kind expenses and financial support associated with the ongoing operations of the programs. In-kind expenses associated with collaboration with community organizations.
Burn and trauma education program.	Provide community outreach including lectures, training and screenings on topics related to burn, trauma, stroke, post-traumatic stress and acute stress disorders.	Increased education and awareness of risk factors related to burn and trauma. Increased awareness of treatment options and resources available to the community.	UCH Trauma, Burn and Stroke Centers	
Screening, Brief Intervention and Referral to Treatment (SBIRT).	Implement program in UCH emergency department whereby patients under the influence of alcohol are assessed for substance use, depression, anxiety and related behavioral health issues.	Improved identification and referral of patients with substance use and/or behavioral health issues.	UCH emergency department, Aurora Mental Health, East Metro Detox, STRIDE Community Health Center, Community Reach, Denver Springs, Centennial Peaks, Highlands Behavioral Health, Behavioral Health Group (BHG)	
Virtual behavioral health consultation services.	Provide virtual behavioral health consultations through the UCHealth Virtual Behavioral Health Center.	Improved access to behavioral health consultations.	UCHealth Virtual Health Center	

Behavioral health, continued on next page.

Behavioral health, continued.

Programs and initiatives	Activities	Anticipated impact	Existing or planned collaborations	Resources
Zero Suicide program implementation.	Implement Zero Suicide evidence-based practices and improve collaboration with mental health providers.	Increased awareness of behavioral health resources. Improved coordination and access to behavioral health care.	State of Colorado Office of Suicide Prevention, CU Medicine Hospital Follow-up Program	Staff time to support the implementation of the programs and initiatives. In-kind expenses and financial support associated with the ongoing operations of the programs. In-kind expenses associated with collaboration with community organizations.
Expand behavioral health treatment services.	Increase capacity of inpatient behavioral health unit.	Expanded access to behavioral health treatment services.	CU SOM	
Metro Denver Partnership for Health (MDPH) participation.	Collaborate with county health departments and other health systems to address mental health and substance use issues.	Increased access to health and social services. Improved quality of care for mental health and substance use patients. Increased mental health disorder awareness.	Boulder, Broomfield, Denver and Tri-County Health departments; AdventHealth; CommonSpirit Health; Intermountain Healthcare; Children's Hospital Colorado	
Prevent Alcohol and Risk-Related Trauma in Youth (P.A.R.T.Y) program.	Conduct injury awareness and prevention education for high school-aged youth.	Increased awareness among youth of effects of alcohol-impaired, drugged and distracted driving. Increased adoption of reduced-risk behaviors.	UCH Trauma Center, Aurora Public Schools	
UCH Center for Dependency, Addiction and Rehabilitation (CeDAR) recovery meetings.	Facilitate open and no-cost recovery meetings and connect attendees to additional behavioral health resources and community-based support when needed.	Increased peer and family support for individuals in recovery. Reduced barriers to maintaining sobriety and engaging in long-term recovery. Improved connections to behavioral health resources and community programs.	UCH CeDAR, Alcoholics Anonymous (AA), Narcotics Anonymous (NA), SMART Recovery, Recovery Dharma, Al-Anon	

Priority health issue: Chronic disease.
Goal: Reduce the incidence, burden and associated risk factors related to chronic conditions.

According to the CDC, chronic diseases and conditions are one of the leading causes of death and disability in the United States. Chronic conditions – including some cancers, cerebrovascular disease, heart disease, obesity, diabetes and lung disease – share risk factors such as tobacco use, excessive alcohol use, unhealthy diet, physical inactivity and lack of access to preventive care.

The population of Adams, Arapahoe and Denver counties experience these risk factors at higher rates than the overall population of Colorado. Referencing the 2024 County Health Rankings & Roadmaps (CHR&R) report, the percentage of adults aged 20 and older with diabetes consistently exceeds the state average of 6.5%, with Adams, Arapahoe and Denver counties being 8.5%, 7.4% and 7.5% respectively. Furthermore, the Colorado Health Indicators 2018-2020 dataset shows a higher incidence of all cancer sites combined (age-adjusted per 100,000) with Adams County reporting 390.7 and Arapahoe County reporting 389.1 compared to 387.5 for Colorado as a whole.

Programs and initiatives	Activities	Anticipated impact	Existing or planned collaborations	Resources
Community cancer prevention and screening events.	Provide evidence-based information and literature to educate the community about cancer prevention and early detection. Partner with CU Cancer Center Office of Community Outreach and Engagement to distribute FIT kits and radon testing resources. Host community-based outreach and screening events at local sites.	Increased compliance with screening and prevention and improved outcomes. Increased early detection and intervention to reduce cancer-related complications.	CU Cancer Center Office of Community Outreach and Engagement, Crawford Elementary School, Centro de los Trabajadores	Staff time to support the implementation of the programs and initiatives. In-kind expenses and financial support associated with the ongoing operations of the programs. In-kind expenses associated with collaborations with community organizations.
Hispanic education nights.	Host events for the Hispanic community focused on transplant-related issues, chronic kidney disease (CKD) and broader chronic disease topics including diabetes, hypertension and diet.	Increased awareness and education about transplant processes, CKD and chronic disease prevention. Improved health literacy and engagement among Spanish-speaking patients and families.	CU School of Public Health, dialysis centers in the Denver Metro area, Hispanic community organizations	
Community health fairs.	Participate in local health fairs to promote transplant programs with emphasis on the Hispanic Program, High-BMI Program, and Living Donor awareness. Use interactive tools to educate attendees about comorbidities linked to organ failure. Distribute prevention and screening information.	Increased early detection of chronic diseases through education and outreach. Expanded awareness about transplant options and related programs.	Local nonprofit organizations, CU School of Public Health, UCHealth Transplant Program partners	

Chronic disease, continued on next page.

Chronic disease, continued.

Programs and initiatives	Activities	Anticipated impact	Existing or planned collaborations	Resources
Community health education and services.	Provide free wellness screenings, blood pressure checks, diabetes prevention classes and smoking cessation support at community sites. Deliver tailored education on chronic disease prevention, healthy lifestyle habits, and transplant-related resources. Connect participants with UCHealth services, specialists and community programs. Promote living donor awareness and highlight transplant programs at local fairs and events.	Increased awareness of chronic disease risks and prevention strategies. Earlier detection and improved management of chronic conditions. Increased access to preventive care and health resources, especially in underserved communities.	CU School of Public Health, UCHealth Transplant Center, community-based organizations, local nonprofits and clinics	Staff time to support the implementation of the programs and initiatives. In-kind expenses and financial support associated with the ongoing operations of the programs. In-kind expenses associated with collaborations with community organizations.
Stroke program.	Lead prevention campaigns and provide community education on stroke recognition and response. Deliver evidence-based treatment and rehabilitation resources. Partner with local organizations to increase stroke awareness and improve outcomes.	Reduced disability and mortality associated with strokes. Increased community knowledge on stroke signs and rapid response.	UCHealth Stroke Program, local rehabilitation centers, community health partners	
Hispanic Transplant Program.	Provide counseling and support to Spanish-speaking transplant patients and their families.	Increased awareness about the transplant process. Improved quality of care and experience for Spanish-speaking transplant patients and their families.	UCHealth Transplant Center, Vuela for Health, CO Connect for Health, CU School of Public Health, CU Cancer Center, The National Kidney Foundation (NKF)	
Nicotine cessation program.	Offer nicotine cessation education and support for community members.	Increased awareness of types of cancers related to nicotine use, sustained nicotine cessation behaviors.	UCHealth Pharmacy, UCHealth Respiratory Therapy	

CONCLUSION

UCH's implementation strategy for 2026–2028 will serve as one of the numerous ways that UCH and UCHealth support the local community.

This report summarizes our plan to impact our patients and the communities we serve through a focus on the prioritized areas of need identified within the CHNA.

UCH will regularly identify ways to refine its implementation strategy over the next three years, including collaboration with leaders from across UCHealth to explore policies, practices and programs that might be implemented within the UCH community. UCH will continue to focus its efforts in the community to promote health improvement and, ultimately, achieve the mission of improving the lives of those we serve.

APPENDIX

Community organizations and partners:

- Adams County Health Department
- Arapahoe County Public Health Department
- Aurora Chamber of Commerce
- Aurora Economic Opportunity Coalition
- Aurora Health Alliance and Affiliate Organizations
- Aurora Mental Health & Recovery
- Aurora Public Schools
- Boulder County
- Center for Work Education & Employment
- Cherry Creek Public Schools
- City of Aurora
- City and County of Denver – Denver Department of Public Health & Environment (DDPHE)
- Colorado Access
- Colorado Black Health Collaborative (CBHC)
- Colorado Health Foundation
- Colorado Health Institute Metro Denver Partnership for Health (MDPH)
- Community College of Aurora
- Dedicated to Aurora's Wellness and Needs (DAWN) Clinic
- Denver Metro Chamber of Commerce
- Denver Public Schools
- Denver Regional Council of Governments (DRCOG)
- Food Bank of the Rockies
- Metro Denver Partnership for Health
- Salud Family Health Centers
- STRIDE Community Health Center
- The Gathering Place
- Village Exchange Center