



# 2025-2027 COMMUNITY HEALTH NEEDS ASSESSMENT

Joint Report for UCHealth Poudre Valley Hospital and  
UCHealth Medical Center of the Rockies

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# INTRODUCTION

The following report contains the 2025–2027 community health needs assessment (CHNA) for UCHealth Poudre Valley Hospital (PVH) and UCHealth Medical Center of the Rockies (MCR). The CHNA was conducted to identify significant community health needs and to help inform the development of an implementation strategy to address the identified needs.

In compliance with federal and state regulations, non-profit hospitals conduct CHNAs once every three years in collaboration with other health care providers, public health departments and community organizations. CHNAs also help guide our investments in community health programs and partnerships that extend UCHealth’s not-for-profit mission beyond the walls of our hospitals, improving the lives of those we serve.

## **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 Poudre Valley Hospital and UCHealth Medical Center of the Rockies overview.**

PVH and MCR are both located in Larimer County, Colorado along with a broader network of UCHealth primary care and specialty care clinics. PVH is a 256-bed hospital that specializes in orthopedic surgery, neurosciences, cancer, bariatric weight-loss surgery and women’s and family services. MCR is a 191-bed, Level 1 trauma center with a full spectrum of services, specializing in heart and trauma care. MCR also provides women’s services, critical care and general and robotic-assisted surgery and is home to LifeLine, UCHealth’s emergency medical and critical care ground and air transport program. PVH and MCR are committed to improving the lives of the community’s most vulnerable residents and cared for more than 207,000 inpatient admissions and outpatient visits for Medicaid patients during fiscal year 2024.

PVH and MCR are 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 the 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.

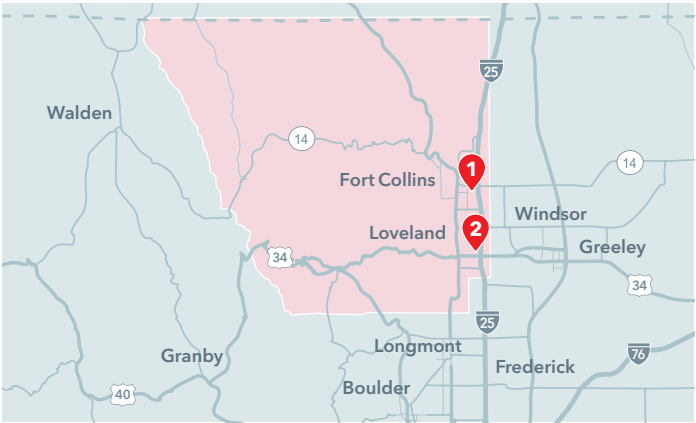
Included as part of UCHealth’s community benefit, PVH provided \$131 million in community benefits, including \$59 million in uncompensated care, during fiscal year 2024. Similarly, MCR provided \$125 million in community benefits and \$55 million in uncompensated care during the same period.

Community served.

For the purposes of this CHNA, the PVH and MCR community is defined as Larimer County. This county represents the geographic area most proximal to the hospitals where many PVH and MCR patients reside.

Demographic characteristics of the community served.<sup>1</sup>

Demographic characteristics of the population residing within each county, in comparison with the state overall, are shown in the tables below.



1 UCHealth Poudre Valley Hospital      2 UCHealth Medical Center of the Rockies

Population:

	Colorado	Larimer County
Population	5,839,926	366,778

Age:

	Colorado	Larimer County
Percentage younger than 18 years of age	20.8%	18.1%
Percentage 65 years of age and older	15.7%	17.5%

Race and ethnicity:

	Colorado	Larimer County
Percentage Non-Hispanic Black	4.1%	1.1%
Percentage American Indian and Alaskan Native	1.7%	1.2%
Percentage Asian	3.8%	2.5%
Percentage Native Hawaiian/Other Pacific Islander	0.2%	0.1%
Percentage Hispanic	22.5%	12.7%
Percentage Non-Hispanic White	66.5%	80.9%
Percentage not proficient in English	2.5%	1.0%
Percentage female	49.2%	49.9%
Percentage rural	14.0%	10.2%

Economic stability and poverty:

Values highlighted in red in the tables below indicate values that are less favorable for the indicated county than the overall state value.

	Colorado	Larimer County
Unemployment rate <sup>2</sup>	3.0%	2.7%
Median household income	\$89,096	\$88,338
Percentage of adults aged 25-44 with some post-secondary education	73.8%	82.1%
Percentage of people under age 18 living in poverty	11.1%	9.0%
Percentage of children eligible for free or reduced-price school lunch	38.3%	27.3%
Percentage of households that spend 50% or more of their household income on housing (severe housing cost burden)	13.3%	14.6%
Percentage of population who lack adequate access to food (food insecure)	9.2%	9.0%

Preventable hospitalizations:

Hospitalization data for ambulatory care sensitive (ACS) conditions can be used as an indicator of residents’ ability to access primary care resources. Hospitalizations for ACS conditions are those that could have been prevented, at least in part, if adequate primary care resources were available and accessible to those patients.

	Colorado	Larimer County
Number of hospital stays for ambulatory care sensitive conditions per 100,000 Medicare enrollees	1,606	1,293

Footnotes and sources:  
1. Source for all values unless otherwise noted: 2024 County Health Rankings & Roadmaps  
2. Source: 2018-2023 Colorado Health Indicators

# COMMUNITY HEALTH NEEDS ASSESSMENT

Between December 2024 and March 2025, PVH and MCR conducted the CHNA, which provided an opportunity for the hospitals to engage public health experts, medical providers and community stakeholders in a formal process to ensure that community benefit programs and resources are focused on significant health needs identified within the community the hospitals serve.

## Methods used to conduct the community health needs assessment.

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 PVH and MCR to gather input on community health needs.
- Review of the most recent community health improvement plan for Larimer County as produced by Larimer County Department of Health and Environment.
- Participation in meetings with Larimer County Department of Health and Environment and other local organizations to gain insight into community needs.

After collecting data and soliciting input from the community and health care providers, the Internal Advisory Group (IAG) for PVH and MCR, a subset of the hospitals' leadership teams, reviewed all information obtained from the activities described above and identified recommended health needs areas of focus for the 2025-2027 CHNA. As described later in this report, recommendations for priority areas of focus were presented to the PVH and MCR Boards of Directors for review and approval.

The following illustrates the CHNA process components and participants.

### Identify community health needs.

#### Secondary data analysis:

- Population characteristics.
- Social and economic factors.
- Health data.

#### Community and health care provider input:

- Review of community health issues.
- Ranking of the community's most significant issues.

### Prioritize significant community health needs.

#### Consolidation and synthesis of information:

- In-depth secondary data analysis.
- Community and provider input.
- IAG recommendations.

#### Prioritization of issues:

- Scope and severity.
- Hospital's ability to impact the issue.
- Availability of evidence-based strategies to address the need.
- Alignment with goals of UCHealth, local community and Colorado overall.

## Written comments on previously conducted community health needs assessment.

The 2022-2024 PVH and MCR CHNA and corresponding implementation strategy report have been available to the public on the UCHealth public website since 2022. In 2023 and 2024, PVH and MCR conducted community benefit public meetings to solicit input from local public health and community organizations, other health care providers and the public. No comments requiring a response were received specific to the CHNA, CHNA process or implementation strategy.



# FINDINGS

## Secondary data review and analysis.

The initial step of the secondary data review included an assessment of local population health indicators obtained through the County Health Rankings & Roadmap (2024 report year), the Colorado Health Indicators database (2018–2023) and the 2023 Healthy Kids Colorado Survey. Indicator values were assessed at the county and state levels.

Summary tables of the key health indicators in the PVH and MCR communities were developed to illustrate the overall health of the community (see Appendix 1 for the data tables and related sources).

Key health needs were determined based on the indicator values and trends, current priorities of the local county health department, the potential to impact the issues using evidence-based practices and alignment with the priorities of PVH and MCR.

Categories evaluated include:

- Demographics, education and socioeconomic status.
- Health care access and services.
- Health behaviors (including unintentional injury).
- Maternal and child health.
- Mental health (including attempted-suicide hospitalizations and mortality).
- Nutrition, physical activity and body-mass index.
- Substance use disorders.
- Specific health conditions (including hospitalization, morbidity and mortality rates).

From this review, the most significant issues identified were:

- Access to care.
- Behavioral health.
- Cancer.
- Cardiovascular risks.
- Chronic disease.
- Injury.
- Maternal health.
- Preventative care.

## Information gaps impacting ability to assess needs.

Within the review of the secondary data, gaps were identified related to the health status of minority populations as well as individuals who are medically underserved due to lack of adequate insurance or who encounter barriers to receiving timely and comprehensive health care services.

To gather additional insights, PVH and MCR regularly participate in meetings facilitated by the county public health departments and other partner agencies that focus on identifying and implementing best practices for reducing these barriers.

## Community engagement synopsis.

To gather input on the most significant health issues, during January 2025, PVH and MCR provided a web-based survey to health care providers and key community stakeholders throughout Larimer County (see Appendix 2 for a listing of organizations that were invited to participate in the survey). Agencies serving members of medically underserved low-income and minority populations were included in the survey distribution. Respondents were asked to rank each of the significant issues identified above, as well as describe other health issues for consideration. Results from these surveys are shown below.

In addition, findings were reviewed from the Larimer County 2024–2029 Community Health Improvement Plan (CHIP). To assess community needs, the Larimer County Department of Health and Environment gathered community partners, community leaders and community members for strategy sessions. Together, the group identified nine themes that were later narrowed to two main priorities. The priority health areas identified for Larimer County through its CHIP process are:

1. Social environment and community.
2. Mental health.

These activities were conducted in addition to participating in other meetings with Larimer County Department of Health and Environment, as well as other local organizations to gain insight into community needs.

### Footnotes and sources:

1. Larimer County “Community Health Improvement Plan (CHIP) 2024–2029” (2024) ([Larimer County Community Health Improvement Plan 2024–2029 | Larimer County](#))

## Provider and community survey results.

The survey asked respondents to rank a set of community health needs in order of importance to the community. Results are provided in the table below. The score represents the aggregate points for each health need based on the ranking and prioritization from the respondents.

Health need	Community Survey (n=88)		Provider survey (n=117)	
	Score	Rank	Score	Rank
Access to care	612	1	746	2
Behavioral health <sup>1</sup>	555	2	757	1
Preventative care	475	3	541	4
Chronic disease <sup>2</sup>	393	4	592	3
Cancer	322	5	447	6
Cardiovascular risks	319	6	451	5
Maternal health	311	7	388	7
Injury	181	8	290	8

Survey respondents also identified community agencies addressing these issues and with whom PVH and MCR could potentially partner or help support. This input will be used during the development of the CHNA implementation strategy later this year.

### Footnotes and sources:

1. Described as “behavioral health, including mental health and substance use disorders”
2. Described as “chronic disease, such as diabetes and obesity”

## Community-wide health care resources available to address needs.

Recognizing the current scope of services available to meet the health care needs of community members is a vital component of a CHNA. The PVH and MCR communities are served by several acute-care hospitals, community-based health centers and a network of medical and mental health providers. In addition, PVH and MCR offer a wide array of virtual health options. Though services might be available, the CHNA findings reveal that the ability to receive care in a timely and coordinated manner remains a challenge for many vulnerable residents.



## Summary of actions taken by hospital since the last community health needs assessment.

To understand the effectiveness and scope of actions taken by PVH and MCR since completion of its most recent CHNA, a review of community benefit activities was completed. The 2022-2024 CHNA identified behavioral health, access to care and chronic conditions. A few examples of programs and initiatives currently in process to address the prior findings are listed below.

### Behavioral health:

- Collaboration with community partners on community initiatives related to mental health and suicide prevention, including suicide prevention awareness education.
- Partnership with Larimer County Behavioral Health Services to improve access to behavioral health services.
- Provide community-based, evidence-informed behavioral health education and programs to improve mental health and reduce the prevalence of substance dependency.
- Provide an evidence-based, relationship-centered program that facilitates structured conversations through a unique curriculum to foster new meaningful connections for older adults and decrease social isolation and loneliness.
- Implementation of Alternatives to Opioids (ALTO) program as well as opioid awareness campaign to reduce the risk and prevalence of substance dependency.
- Pain-management support groups to improve coping skills and reduce the risk of substance dependency among people experiencing long-term pain.
- Medication-assisted addiction treatment services to increase the odds of success for those seeking long-term recovery from substance dependency.
- Reduction of alcohol and risk-related trauma among high school students through education in the P.A.R.T.Y. program.
- Integration of behavioral health care providers within primary care clinics to improve access to mental health and substance use treatment.
- Expansion of behavioral health care services to a virtual platform to reduce access barriers.

### Access to care:

- Community-based health and fully integrated medical care coordination for at-risk newborns, high-risk youth and Medicaid clients with complex health issues.
- Postpartum nurse home visits for Medicaid clients to improve rates of successful breastfeeding and empower new moms within the comfort of their homes.
- Family Medicine Center Postpartum Support Group provides social connection for new moms, access to lactation specialists, social workers and nurses along with food pantry distribution and baby supplies.
- Support for UCHHealth Family Medicine Center Food Pantry to provide free, nutritious food to community members in need.
- Offering services like fresh food and health checks in partnership with Housing Catalyst, an organization that provides safe housing for people experiencing homelessness.
- Hospital-to-home transitional care coordination services to help individuals successfully return to their normal activities and avoid hospital readmission.
- Ongoing support for the sexual assault forensic nurse examiner program (SANE/SAFE) to provide compassionate, specialized care for survivors of sexual assault.
- Medicare benefits counseling, education and enrollment assistance to ensure seniors remain covered and retain access to care.
- Provide increased access to timely and convenient care through the expansion of our telehealth and virtual care options.

### Chronic conditions:

- Provide community-based health promotion, disease prevention and self-management education and programs to reduce the prevalence and severity of chronic disease.
- Provide school-based, on-site heart disease prevention education and no-cost individual risk-factor screening.
- Provide education to promote stroke prevention and awareness. Provide community support groups and activities for those impacted by stroke.
- Facilitate evidence-based National Diabetes Prevention Program (NDPP) to reduce the risk and prevalence of diabetes among community members.
- Provide no-cost screening and lifestyle education program to families identified with high risk for developing heart disease for prevention and early intervention.
- Provide equitable access to preventative health screenings, healthful foods and community-resource connections to address social determinants of health for those who were formerly unhoused but who now have permanent supportive housing.
- Provide breast cancer screening, prevention and education and help alleviate transportation barriers for Family Medicine Center patients.

# PRIORITIZATION AND BOARD OF DIRECTORS APPROVAL

## Internal Advisory Group recommendations.

The PVH and MCR Internal Advisory Group (IAG) reviewed all findings obtained from the activities described previously. The PVH and MCR IAG conducted a meeting specifically to identify health need priorities for the CHNA and considered the following criteria during the decision-making process:

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

The PVH and MCR IAG identified the following health needs as priorities for the 2025-2027 CHNA:

- Access to care.
- Behavioral health.
- Chronic disease.

A synopsis of key CHNA findings specific to these issues is provided in the following sections of this report.

## Access to care.

According to the County Health Rankings & Roadmaps 2024 report, residents of Larimer County have reduced access to primary care advanced practice providers as compared to the state average, with one provider for every 710 residents as compared to 1 provider for every 650 Coloradans. Larimer County experiences a similar rate of uninsured persons to the state overall, with 7.2% of residents lacking health insurance as compared to 7.9% of Coloradans.

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, inability to take time off work to attend appointments and transportation-related barriers.

Health Factors	Colorado	Larimer County
Percentage of population under age 65 without health insurance	7.9%	7.2%
Ratio of population to primary care physicians	1,207:1	1,204:1
Ratio of population to other primary care providers	650:1	<b>710:1</b>

## Behavioral health.

According to the U.S. Centers for Disease Control and Prevention (CDC), mental health disorders are among the most common causes of disability in the U.S. The resulting disease burden of mental illness is among the highest of all diseases.

As shown in the table below, Larimer County adults reported experiencing poor mental health over the past two weeks at a higher rate than Coloradoans overall. Similarly, high schoolers in Larimer County reported suicidal ideation at a slightly higher rate than Colorado high schoolers overall, with 11.9% of Larimer County high schools reporting thoughts of seriously contemplating suicide as compared to 11.1% across the state.

The effects of substance-use disorders are cumulative, significantly contributing to costly social, physical, mental and public health problems. The Centers for Disease Control and Prevention reports that binge drinking is the most common, costly and deadly pattern of excessive alcohol use in the U.S. Binge drinking is defined as a pattern of drinking that brings a person's blood alcohol concentration to 0.08 g/dl or above. This typically happens when men consume five or more drinks or women consume four or more drinks in about two hours. In Larimer County, 23.3% of adults report binge drinking, higher than the state average of 21.4%. Elevated substance use is also reflected among high school students, with 14.9% of Larimer County high schoolers reporting binge drinking in the past 30 days as compared to 12.1% of Colorado high schoolers overall.

In addition to alcohol use, tobacco use is slightly more prevalent in Larimer County than across Colorado for both adults and youth, as seen in the table below.

Health Factors	Colorado	Larimer County
Percentage of adults reporting that their mental health was not good for 14+ days during the past 30 days	14.6%	<b>15.3%</b>
Percentage of of high school students who felt sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities during the past 12 months	25.7%	25.2%
Percentage of of high school students who seriously considered attempting suicide during the past 12 months	11.1%	<b>11.9%</b>
Percentage of of adults who are current smokers	12.1%	<b>12.5%</b>
Percentage of of middle and high school students who smoked cigarettes on one or more of the past 30 days	3.1%	<b>3.8%</b>
Percentage of middle and high school students who binge drank (4+ drinks for females, 5+ drinks for males, within a couple of hours) on one or more of the past 30 days	12.1%	<b>14.9%</b>
Percentage of adults reporting binge or heavy drinking (age-adjusted)	21.4%	<b>23.3%</b>
Percentage of driving deaths with alcohol involvement	34.7%	32.1%
Ratio of population to mental health providers	219:1	203:1

See the Appendix for additional supporting information and relevant data sources. Values highlighted in red indicate measures that are less favorable when compared to the state values.

## Chronic disease.

Chronic diseases are the leading cause of illness, disability and death in America. According to the CDC, most chronic diseases are caused by lifestyle choices such as smoking, poor nutrition, physical inactivity and excessive alcohol use. Adhering to recommended screening guidelines is effective at early detection of many types of chronic disease, particularly cancer.

Larimer County experiences a higher rate of chronic disease across a variety of conditions, as seen in the table below. Overall rates of cancer are higher in Larimer County than across Colorado.

Health Factors	Colorado	Larimer County
Percentage of adults aged 20 and older with diagnosed diabetes	6.5%	<b>6.7%</b>
All cancer sites combined (age-adjusted incidence rate per 100,00 population)	387.5	<b>411.3</b>
Breast cancer (late-stage, females, rate per 100,000)	41.1	<b>44.4</b>
Alzheimer's disease (age-adjusted mortality rate per 100,000)	30.1	<b>34.9</b>
Cerebrovascular diseases (age-adjusted mortality rate per 100,000)	33.7	<b>36.4</b>

*See the Appendix for additional supporting information and relevant data sources. Values highlighted in red indicate measures that are less favorable when compared to the state values.*

## Board of directors review and approval.

During the May 2025 meetings, the PVH and MCR boards of directors, which include representatives from the surrounding communities, reviewed, discussed and approved the information contained within this report.

## Acknowledgments, recommendations and next steps.

We thank our partnering agencies, medical providers and community members who provided insight and expertise that helped complete this report.

In the following months, implementation strategies designed to address the identified health needs within Larimer County will be prepared and presented to the PVH and MCR boards of directors for approval.

The PVH and MCR CHNA report will be made available to the public for viewing or download on the [UCHealth website](#), as well as in hard copy located in the PVH and MCR administrative offices.

# APPENDICES

## Appendix 1–Data tables and sources

Demographics	Year/ Source	Colorado	Larimer County
<b>Population</b>	2024 CHR	5,839,926	366,778
Percentage below 18 years of age	2024 CHR	20.8%	18.1%
Percentage 65 and older	2024 CHR	15.7%	17.5%
Percentage Non-Hispanic Black	2024 CHR	4.1%	1.1%
Percentage American Indian and Alaskan Native	2024 CHR	1.7%	1.2%
Percentage Asian	2024 CHR	3.8%	2.5%
Percentage Native Hawaiian/Other Pacific Islander	2024 CHR	0.2%	0.1%
Percentage Hispanic	2024 CHR	22.5%	12.7%
Percentage Non-Hispanic White	2024 CHR	66.5%	80.9%
Percentage not proficient in English	2024 CHR	2.5%	1.0%
Percentage female	2024 CHR	49.2%	49.9%
Percentage rural	2024 CHR	14.0%	10.2%

Health Outcomes	Year/ Source	Colorado	Larimer County
<b>Quality of Life</b>			
Percentage of adults reporting poor or fair health (age-adjusted)	2024 CHR	12.8%	10.9%
<b>Maternal and Child Health</b>			
Percentage of births with low birthweight (<2500g)	2024 CHR	9.4%	9.2%
Number of infant deaths (within 1 year) per 1,000 live births	2024 CHR	5	4
<b>Mental Health</b>			
Percentage of adults reporting that their mental health was not good for 14+ days during the past 30 days	2024 CHR	14.6%	<b>15.6%</b>
Percentage of high school students who felt sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities during the past 12 months	2023 HKCS	25.7%	25.2%
Percentage of high school students who seriously considered attempting suicide during the past 12 months	2023 HKCS	11.1%	<b>11.9%</b>

Health Factors	Year/ Source	Colorado	Larimer County
<b>Tobacco Use</b>			
Percentage of adults who are current smokers	2024 CHR	12.1%	<b>12.5%</b>
Percentage of middle and high school students who have ever used an electronic vapor product	2023 HKCS	30.0%	29.9%
Percentage of middle and high school students who smoked cigarettes on one or more of the past 30 days	2023 HKCS	3.1%	<b>3.8%</b>
<b>Weight Status and Physical Activity</b>			
Percentage of adults (18+) who were obese (Body Mass Index $\geq 30$ )	2024 CHR	25.1%	24.8%
Percentage of middle and high school students who were physically active for a total of at least 60 minutes per day on 5 or more of the past 7 days	2023 HKCS	49.9%	<b>49.7%</b>
Percentage of adults age 20 and over reporting no leisure-time physical activity	2024 CHR	16.5%	14.9%
<b>Alcohol and Drug Use</b>			
Percentage of middle and high school students who binge drank (4+ drinks for females, 5+ drinks for males, within a couple of hours) on one or more of the past 30 days	2023 HKCS	12.1%	<b>14.9%</b>
Percentage of adults reporting binge or heaving drinking (age-adjusted)	2024 CHR	21.4%	<b>23.3%</b>
Percentage of driving deaths with alcohol involvement	2024 CHR	34.7%	32.1%
Number of drug poisoning deaths per 100,000 population	2024 CHR	26	17
<b>Sexual Activity</b>			
Number of newly diagnosed chlamydia cases per 100,000 population	2024 CHR	460	327
Number of births per 1,000 female population ages 15-21	2024 CHR	14	7
<b>Clinical Care—Access to Care</b>			
Percentage of population under age 65 without health insurance	2023 CEN	7.9%	7.2%
Ratio of population to primary care physicians	2024 CHR	1,207:1	1,204:1
Ratio of population to dentists	2024 CHR	1,161:1	<b>1,179:1</b>
Ratio of population to mental health providers	2024 CHR	219:1	203:1
Ratio of population to other primary care providers	2024 CHR	650:1	<b>710:1</b>
<b>Clinical Care—Quality of Care</b>			
Number of hospital stays for ambulatory care sensitive conditions per 100,000 Medicare enrollees	2024 CHR	1,606	1,293

Specific Health Conditions - Self-Reported	Year/ Source	Colorado	Larimer County
Percentage of high school students who had ever been told by a doctor or nurse that they had asthma	2023 HKCS	17.5%	16.6%
Percentage of adults aged 20 and older with diagnosed diabetes	2024 CHR	6.5%	<b>6.7%</b>
Number of people aged 13 years and older living with a diagnosis of HIV per 100,000 population	2024 CHR	272	100



Social and Economic Factors	Year/ Source	Colorado	Larimer County
<b>Education</b>			
High school graduation rate	2024 CHR	81.7%	83.8%
Percentage of teens and young adults aged 16-24 who are neither working nor in school (disconnected youth)	2024 CHR	6.5%	4.2%
Percentage of adults aged 25-44 with some post-secondary education	2024 CHR	73.8%	82.1%
<b>Employment</b>			
Unemployment rate	2022 COHI	3.0%	<b>2.7%</b>
<b>Income</b>			
Median Household Income	2024 CHR	\$89,096	<b>\$88,338</b>
Percentage of children under age 18 in poverty	2024 CHR	11.1%	9.0%
Percentage of children eligible for free/reduced-cost school lunch	2024 CHR	38.3%	27.3%
Percentage of households that spend 50% or more of their household income on housing (severe housing cost burden)	2024 CHR	13.3%	<b>14.6%</b>
Percentage of population who lack adequate access to food (food insecure)	2024 CHR	9.2%	9.0%
<b>Community Safety</b>			
Number of motor vehicle crash deaths per 100,000 population	2024 CHR	11	10
Number of deaths due to injury per 100,000 population	2024 CHR	89	72
Number of deaths due to homicide per 100,000 population	2024 CHR	5	2
Number of deaths due to firearms per 100,000 population	2024 CHR	16	12

Age-adjusted Incidence Rates of Cancer Per 100,000 Population	Year/ Source	Colorado	Larimer County
All cancer sites combined	2018-2020 COHI	387.5	<b>411.3</b>
Lung and bronchus	2018-2020 COHI	37.0	33.1
Breast cancer (late-stage, females)	2018-2020 COHI	41.1	<b>44.4</b>
Colorectal cancer (aged 50+)	2018-2020 COHI	85.1	76.9
Colorectal cancer (aged 0-49)	2018-2020 COHI	7.4	6.6
Cervical cancer (late-stage, females)	2018-2020 COHI	N/A	N/A

Age-adjusted Rate of Hospitalization Per 100,000 Population	Year/ Source	Colorado	Larimer County
Heart disease	2020-2022 COHI	1,961.4	1,690.0
Mental health diagnosed hospitalizations	2020-2022 COHI	2,854.1	2,738.1
Suicide-attempt hospitalizations	2020-2022 COHI	61.2	53.7
Stroke	2020-2022 COHI	317.6	289.3
Acute myocardial infarction	2020-2022 COHI	195.3	152.2
Congestive heart failure	2020-2022 COHI	802.7	720.0
Influenza (aged 65+)	2020-2022 COHI	118.1	86.4

Age-adjusted Mortality Rates Per 100,000 Population	Year/ Source	Colorado	Larimer County
All causes	2021-2023 COHI	727.1	636.4
Malignant neoplasms	2021-2023 COHI	122.3	115.0
Unintentional injuries	2021-2023 COHI	68.8	50.0
Heart disease	2021-2023 COHI	126.6	116.9
Alzheimer's disease	2021-2023 COHI	30.1	34.9
Cerebrovascular diseases	2021-2023 COHI	33.7	36.4
Chronic lower respiratory diseases	2021-2023 COHI	36.1	27.6
COVID-19	2021-2023 COHI	41.4	29.3
Diabetes mellitus	2021-2023 COHI	17.5	16.2
Suicide	2021-2023 COHI	21.6	18.8
Chronic liver disease and cirrhosis	2021-2023 COHI	18.7	14.2

**Footnotes and sources:**

- N/A: Data is not available or is suppressed due to small sample size.
- CHR: County Health Rankings & Roadmaps; 2024 report year; measures collected from various sources and years ([County Health Rankings - Larimer County](#)).
- COHI: Colorado Health Indicators dataset 2018-2023 (provides access to state and local-level data compiled by Colorado Department of Public Health and Environment) ([Colorado Health Information Dataset](#)).
- HKCS: Healthy Kids Colorado Survey; 2023 ([Healthy Kids Colorado Survey](#)).
- 2023 CEN: United States Census Bureau; 2023 ([U.S. Census Bureau Quick Facts—Larimer County](#)).

## Appendix 2–Community organizations invited to participate in the community survey

- 60+ Ride | United Way Weld County
- AARP Colorado
- Adoption Dreams Come True
- Aging Clinic of the Rockies
- Aims Community College
- Alliance for Suicide Prevention of Larimer County
- Alternatives To Violence
- Alzheimer’s Association– Colorado Chapter
- Alzheimer’s Association– Larimer County
- Alzheimer’s Association– Weld County
- American Cancer Society
- American Lung Association
- American Red Cross of Northern Colorado
- Assistance League of Greeley
- BBB Serving Northern Colorado and Wyoming Foundation
- Berthoud Fire Protection District
- Bike Fort Collins
- Bohemian Foundation
- Book Trust
- Boys & Girls Clubs of Larimer County
- Boys & Girls Clubs of Weld County
- CASA of Larimer County
- Catholic Charities
- Centennial Area Health Education Center
- Center for Family Outreach
- Changing the Narrative
- Children’s Speech and Reading Center
- ChildSafe Colorado, Inc.
- Chilson Senior Center
- City of Evans
- City of Fort Collins
- City of Greeley
- City of Loveland
- Colorado Center For Nursing Excellence
- Colorado Health Network
- Colorado School of Public Health
- Colorado State Patrol– District Three
- Colorado State University
- Colorado State University Police Department
- Colorado Youth Detention Continuum
- Columbine Health Systems
- Columbine Health Systems Center for Healthy Aging
- Community Foundation of Northern Colorado
- Community Grief Center
- Crawford Child Advocacy Center
- Crossroads Safehouse
- CSU Weld County Extension
- Dementia Together
- Disabled Resource Services
- Division of Youth Services
- Early Childhood Council of Larimer County
- Eastern Colorado Community Fund
- Eighth Judicial District Attorney’s Office
- Elderhaus Adult Day Program, Inc.
- Estes Park Health
- Estes Park Police Department
- Estes Park School District R-3
- Estes Valley Fire Department
- Family Housing Network
- Finally Home
- FoCo Café
- Food Bank for Larimer County
- Foothills Gateway, Inc.
- Foothills Rotary Club of Fort Collins
- Foothills Service League
- Fort Collins Area Chamber of Commerce
- Fort Collins Breakfast Rotary Charitable Foundation
- Fort Collins City Council
- Fort Collins Habitat for Humanity
- Fort Collins Police Services
- Fort Collins Senior Advisory Board
- Fort Collins Senior Center
- Friends of A Woman’s Place
- Front Range Community College Foundation
- Greeley Active Adult Center
- Greeley Area Habitat for Humanity
- Greeley Chamber of Commerce
- Greeley Family House
- Greeley Fire Department
- Greeley Police Services
- Harmony Foundation, Inc.
- Health District of Northern Larimer County
- High Plains Honor Flight
- Homeward Alliance
- House of Neighborly Services
- Housing Catalyst
- Immigrant and Refugee Center of Northern Colorado
- Institute for the Built Environment
- Interfaith Counsel
- Juvenile Gun Safety Coalition of Larimer County
- Kids at Heart
- KidsPak–Loveland Rotary Club
- Larimer County Behavioral Health
- Larimer County Board of Commissioners
- Larimer County Board of Health
- Larimer County Department of Health and Environment
- Larimer County Department of Human Services
- Larimer County Office of Emergency Management
- Larimer County Office on Aging
- Larimer County Sheriff’s Office

## Appendix 2—Community organizations invited to participate in the community survey, continued

- Larimer Health Connect
- League of Women Voters of Greeley–Weld Co.
- League of Women Voters of Larimer County
- Leap Coalition of Larimer County
- Life Stories
- Loveland Area Chamber of Commerce
- Loveland City Council
- Loveland Community Health Center/Sunrise Clinic
- Loveland Fire Rescue Authority
- Loveland Housing Authority
- Loveland Library
- Loveland Police Department
- Loveland Rotary Club
- Loveland Senior Advisory Board
- Loveland Senior Advisory Board
- Loveland's Community Kitchen
- Lutheran Family Services Refugee & Asylee Program
- Meals on Wheels of Fort Collins
- Meals on Wheels of Loveland and Berthoud
- Multidisciplinary Center on Aging
- Murphy Center for Hope
- National Council on Aging
- Neighbor to Neighbor
- Next Fifty Initiative
- North Colorado Health Alliance
- North Front Range Metropolitan Planning Organization
- North Range Behavioral Health
- Northern Colorado Health Sector Partnership
- Outreach Fort Collins
- Partners Mentoring Youth
- Partnership for Age-Friendly Communities
- Pathways
- PFLAG
- Poudre Fire Authority
- Poudre Learning Center
- Poudre School District
- Poudre School District Foundation
- Project Self-Sufficiency
- RamStrength Lubick Foundation
- Reach Out and Read Colorado
- Realities For Children
- Respite Care
- Rocky Mountain Crisis Partners
- Rocky Mountain Health Plans, A UnitedHealthcare Company
- RSVP of Weld County
- Safe Kids
- Salud Family Health Centers
- SAVA Center
- Self-Management Resource Center
- Serve 6.8
- Sidney Regional Medical Center
- Special Supplemental Nutrition Program for Women, Infants & Children
- Specialized Alternatives for Family and Youth
- Sprouts Market
- State of Colorado Office of Suicide Prevention
- Stroke Alliance of Colorado
- Suicide Prevention: Suicide Prevention Coalition of Colorado
- SummitStone Health Partners
- Sunrise Community Health
- Telligen
- The Arc of Weld County
- The Center for Family Outreach
- The Colorado Health Foundation
- The Colorado Hospital Association
- The Crawford Child Advocacy Center
- The Family Center/La Familia
- The Greeley Dream Team
- The Grief Center
- The Lighthouse
- The Matthews House
- The Nappie Project
- The Weld Trust
- The Women's Fund of Weld County, Inc.
- Thompson Teens United
- Thompson Valley EMS
- Thriving Weld
- Turning Point
- UCHealth Medical Group
- United Way of Larimer County
- United Way of Weld County
- University of Northern Colorado
- Village Medical
- Volunteers of America Colorado
- Weld Community Foundation
- Weld County
- Weld County Department of Human Services
- Weld County Department of Public Health and Environment
- Weld County Emergency Management Services
- Weld County Government
- Weld County school districts and municipalities
- Weld County Sheriff's Office
- Weld Food Bank
- Women to Women, Inc.
- Youth Clinic of Northern Colorado

## Appendix 3—Resources available to address community needs

The following list was generated through survey feedback. It is not intended to be a comprehensive list of all community resources. For additional resources refer to Colorado 2-1-1 at [www.211colorado.org/](http://www.211colorado.org/).

Organization	Summary of resources	Link
<b>Access to care</b>		
Salud Family Health Centers	Offers primary care, pediatric care, pharmacy services, behavioral health and dental care at an affordable cost with sliding scale fees.	<a href="#">Health care   Salud Family Health Centers   Colorado</a>
St. Matthews Medical Clinic	Offers free preventative care services, treatment and management of acute and chronic diseases.	<a href="#">Welcome</a>
SummitStone Health Partners	Offers behavioral health care services for Medicaid clients. Services include withdrawal management (detox), telehealth, group therapy and crisis services.	<a href="#">SummitStone Health Partners   Behavioral Health Service Provider</a>
Sunrise Community Health	Offers affordable, comprehensive outpatient care services including wellness/preventative care, sick care, dental care, behavioral health, vision, family planning, pharmacy, lab, imaging and pediatrics. Services provided without regard for insurance coverage or ability to pay.	<a href="#">ABOUT   Sunrise</a>
Weld Project Connect	Provides health screenings, medical services and immunizations among other services during a one-day event for adults and families in need.	<a href="#">Weld Project Connect - United Way of Weld County</a>
<b>Behavioral health</b>		
Catholic Charities	Offers social services including counseling and emergency services at more than 75 locations in Colorado.	<a href="#">Catholic Charities of Denver</a>
Food Bank for Larimer County	Provides access to food at no cost for families and individuals experiencing food insecurity.	<a href="#">Food Bank for Larimer County</a>
Harmony Recovery	Offers treatment for addiction in both residential and outpatient settings.	<a href="#">Colorado Alcohol and Drug Rehab and Detox Near Denver</a>
Polaris Partners Counseling	Offers in-person and virtual mental health counseling services treating a variety of conditions and concerns, including addiction, depression and mood disorders.	<a href="#">Polaris Counseling   Mental Health Services in Northern Colorado</a>
The Family Center/ La Familia	Offers mental health classes and workshops.	<a href="#">The Family Center / La Familia</a>
The SAVA Center	Offers counseling and other services for those impacted by sexual violence.	<a href="#">The SAVA Center</a>
The Vegetable Connection	Provides access to nutritious food and vegetables to families with limited financial resources.	<a href="#">The Vegetable Connection - Local, Sustainable Veggies for All!</a>
Turning Point: Fort Collins Behavioral Health	Offers mental health and substance abuse treatment for youth, behavior coaching and individual and family therapy services in in-home, community and outpatient settings.	<a href="#">Fort Collins Behavioral Health - Turning Point</a>
<b>Chronic disease</b>		
Salud Family Health Centers	Offers primary care, pediatric care, pharmacy services, behavioral health and dental care at an affordable cost with sliding scale fees.	<a href="#">Health care   Salud Family Health Centers   Colorado</a>
St. Matthews Medical Clinic	Offers free preventative care services, treatment and management of acute and chronic diseases.	<a href="#">Welcome</a>
Sunrise Community Health	Offers affordable, comprehensive outpatient care services including wellness/preventative care, sick care, dental care, behavioral health, vision, family planning, pharmacy, lab, imaging and pediatrics. Services provided without regard for insurance coverage or ability to pay.	<a href="#">ABOUT   Sunrise</a>
Weld Project Connect	Provides health screenings, medical services and immunizations among other services during a one-day event for adults and families in need.	<a href="#">Weld Project Connect - United Way of Weld County</a>