

Health Programs Administered by the Colorado Department of Public Health and Environment

The following list of programs corresponds with the health program areas reviewed by the Washington State Institute for Public Policy and are included in the Results First model. This list does not reflect all programs administered by the Colorado Department of Public Health and Environment. Program areas included are as follows:

- Emergency Department Visits
- Hospital Readmissions
- Maternal Health
- Obesity
- Patient-Centered Medical Homes
- Type 2 Diabetes

For evidence-based and evidence-informed/promising programs, the "Source(s) of Evidence" column lists where program research can be accessed (i.e. Washington State Institute for Public Policy or What Works for Health). The Washington State Institute for Public Policy's website address is: <http://www.wsipp.wa.gov/BenefitCost>. The What Works for Health website address is: <http://www.countyhealthrankings.org/take-action-to-improve-health/what-works-for-health/policies>.

Projected benefits reflect an estimate of the monetary benefits that may accrue as a result of one person participating in the program. These projections are included to provide a general estimate of how beneficial an evidence-based program may be to the participant, taxpayer, and society, overall. Program benefits are monetized over the lifetime of the participant, starting at the age the participant receives the program. For example, if a participant begins a program at age 16, benefits of the program are estimated from age 16 onward (till end of life). Benefits of health programs may include future health care cost avoidance, benefits associated with a participant earning higher wages over their lifetime, and benefits associated with reduced mortality rates. *This is true for most programs, however, some programs do not generate lifetime benefits. In these cases, benefits will appear low because research demonstrates that the program does not have lasting impacts beyond a certain age. These programs are still evidence-based and effective.*

For additional information regarding this program inventory, please refer to the Research and Evidence-Based Policy Initiatives team's Colorado Results First Health Findings report, which can be accessed at the following link: <https://sites.google.com/state.co.us/rfpfs/colorado-results-first/reports>.

Program Name	Description	Population(s) Served	Frequency/ Duration	Level of Research	Source(s) of Evidence	Evidence of program favorably impacting outcome(s)?	Evidence of program having neutral or no impact on outcome(s)?	Evidence of program unfavorably impacting outcome(s)?	Projected Benefits	How Program Is Funded	Provider(s)
Maternal and Infant Health Programs											
African American Infant Mortality Reduction	Various strategies are being supported to reduce infant mortality among the African American population. Most relevantly, these strategies include: publishing Colorado-specific preterm birth prevention recommendations; increasing public awareness of preterm birth recommendation; increase business-sector implementations of policies shown to improve perinatal outcomes by 10 percent; engage in strategic communications with partners engaged in African American infant mortality reduction efforts in Colorado. Recommendations have been broadly disseminated and are available to all providers in Colorado.	Pregnant African American Women	Quarterly meeting presentations and email alerts are used to spread awareness. Online continuous education available.	Research-Informed/ Needs Additional Research						CDPHE reserved about \$35,000 in Maternal and Child Health Services block grant funds to pay for staff time to support the initiative and provides about \$240,000 in grants to two local health agencies - Tri-County and Denver Public Health.	Local health agencies and local healthcare providers in the following counties: Adams, Arapahoe, Denver, and Douglas.
Baby & Me, Tobacco Free	Baby & Me, Tobacco Free is an evidence-based, multi-pronged intervention that includes cessation counseling, biomarker feedback and an incentive program (in the form of diaper vouchers) to facilitate prenatal and post-partum smoking cessation and relapse prevention. After childbirth, Baby & Me, Tobacco Free clients return to their local program site for monthly carbon monoxide monitoring. If the client test validates smoke-free status, they receive a \$25 monthly voucher for diapers for up to 6-12 months post-partum.	Pregnant and post-partum women of low socioeconomic status who use tobacco and their partners or other family members.	The program offers up to four prenatal and 12 monthly postpartum counseling sessions.	Evidence-Based	Washington State Institute for Public Policy Search For: Smoking Cessation Programs for Pregnant Women: Contingency Management Please note that this program incorporates several evidence-based practices, including nicotine replacement treatment, incentives, and postpartum relapse prevention.	Yes Primary Participant (Mother) Outcomes: -Decreases Low Birthweight Births -Decreases Preterm Birth (<37 weeks) -Decreases Regular Smoking -Decreases Smoking During Late Pregnancy Secondary Participant (Infant) Outcomes: -Decreases Low Birthweight Births -Decreases Preterm Birth (<37 weeks)	Yes Secondary Participant (Infant) Outcomes: -Neonatal Intensive Care Unit Admission	No	\$9,727	Program is funded by A35 tobacco tax dollars.	The Rocky Mountain Health Plan Foundation functions as the contractor to provide oversight, training, technical assistance and subcontracts to health partners across Colorado who provide program direct services. For a list of program sites, please see: http://www.babyandmetobaccofree.org/find-a-location/colorado/
Colorado Baby-Friendly Hospital Collaborative	The Collaborative helps Colorado improve breastfeeding rates and practices by helping maternity hospitals achieve Baby-Friendly designation. The Collaborative support participating hospitals by providing training, resources and opportunities to improve policies and processes that impact breastfeeding outcomes. More information can be found at: www.babyfriendlyusa.org . Please see page 13 of the 2018 Colorado Results First Health Findings report for additional information as to why this program is listed as both "evidence-based" and "evidence-informed".	Hospitals with maternity care services	Program is on-going as hospitals designate (average 5 year process) and hospitals agree to continue with the collaborative for at least one year post-designation to share experiences and lessons learned with other hospitals new to the pathway.	Evidence-Based	What Works for Health Search For: Breastfeeding Promotion Programs Designation: Scientifically Supported	Some Evidence Expected Outcomes: -Increased Breastfeeding Rates -Improved Health Outcomes			N/A This program is not in the Results First model.	Participating hospitals receive incentive funding up to \$6,000 to support training, fees, or with developing systems of support between hospital and community. Program is funded through two federal grants, a Centers for Disease Control and Prevention grant and a Title V Maternal and Child Health Services block grant.	Twelve hospitals are currently certified Baby-Friendly and an additional twelve hospitals participate in the collaborative. Facilities in the Collaborative are located throughout Colorado, both in urban and rural areas, and include the largest birthing facility, St. Joseph's Hospital, and one of the smallest, Estes Park Medical Center, in the state. For a list of Baby-Friendly Hospitals, please see: https://www.babyfriendlyusa.org/find-facilities/designated-facilities-by-state .
Colorado QuitLine: Pregnancy/ Post-Partum Program	The program is an intensive, evidence-based, telephonic tobacco cessation program offering proactive, client-centered coaching and FDA-approved cessation medications to women prior to and post-delivery. The program provides each participant with a dedicated Quit Coach, a post-partum program to support relapse prevention, coordinated text messaging and email programs, nicotine patches (for participants 18 years old and older), and incentives. Participants in the program earn rewards for completion of cessation coaching calls while pregnant and post-partum. Callers receive a \$5 rewards card for each call completed during pregnancy (up to \$25) and a \$10 rewards call for each call completed after childbirth (up to \$40).	Pregnant and post-partum women over the age of 15 who use tobacco	The standard protocol consists of 5 prenatal and 4 post-partum calls. Participants are also encouraged to access the QuitLine as needed for additional support between scheduled calls.	Evidence-Based	Washington State Institute for Public Policy Search For: Smoking Cessation Programs for Pregnant Women: Nicotine Replacement Treatment Please note that this program incorporates several evidence-based practices, including nicotine replacement treatment, incentives, and postpartum relapse prevention.	Yes Primary Participant (Mother) Outcomes: -Decreases Smoking During Late Pregnancy	Yes Secondary Participant (Infant) Outcomes: -Low Birthweight Births -Preterm Birth (<37 weeks) -Low Birthweight Births -Neonatal Intensive Care Unit Admission -Preterm Birth (<37 weeks)	No	\$3,344	Program is funded with A35 tobacco tax dollars.	National Jewish Health provides this direct service under the Colorado QuitLine service delivery contract. The service is available statewide.

Maternal and Infant Health Programs Continued											
<p>Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)</p>	<p>WIC is a nutrition program that provides nutritious groceries, nutrition education, breastfeeding support and other services free of charge to Colorado families who qualify. WIC's goal is to help keep pregnant and breastfeeding women and children under age 5 healthy.</p> <p>There are two WIC programs operational in Colorado, one is operated by CDPHE, the other is provided by the Ute Mountain Ute Tribe.</p> <p>Please see page 13 of the 2018 Colorado Results First Health Findings report for additional information for additional information as to why this program is listed as both "evidence-based" and "evidence-informed."</p>	<p>Low-income, nutritionally-at-risk individuals, including women who are pregnant, breastfeeding, or post-partum, as well as non-breastfeeding women, infants, and children up to age 5</p>	<p>Participants receive monthly benefits issued for healthy foods to supplement their family's diet.</p> <p>Additionally, participants visit WIC clinics at least every 3 months (a total of 2-4 visits), during which they receive personalized nutrition consultations.</p>	<p>Evidence-Based</p>	<p>What Works for Health</p> <p><u>Search For:</u> Breastfeeding Promotion Programs</p> <p><u>Designation:</u> Scientifically Supported</p>	<p>Some Evidence Expected Outcomes:</p> <ul style="list-style-type: none"> -Increased Breastfeeding Rates -Improved Health Outcomes 			<p>N/A This program is not in the Results First model.</p>	<p>Colorado WIC receives a grant from the USDA Food and Nutrition Service (federally funded program).</p>	<p>WIC offices are located throughout the state. Locations can be found here: https://goo.gl/3Qv8MH</p>
Obesity Prevention and Intervention Programs											
<p>Breastfeeding Information</p>	<p>CDPHE promotes breastfeeding-friendly practices in child care facilities by making information about breastfeeding widely accessible. (Reduced obesity in children is an outcome of breastfeeding.) Information is disseminated via online resources and newsletters. Additionally, technical and financial assistance is provided to workplaces, child care programs, healthcare providers and public spaces in the incorporation of lactation policies and breastfeeding-friendly practices.</p> <p>This program is part of the department's Early Childhood Obesity Prevention Initiative.</p> <p><i>Breastfeeding is an evidence-based practice and favorably impacts several health outcomes. As mentioned above, CDPHE promotes breastfeeding to reduce obesity, and it is included in this program inventory because obesity is an area of interest in the Results First "health" policy area. Since causal evidence that demonstrates the impact of breastfeeding on obesity has not been identified, the program is categorized as "evidence-informed."</i></p>	<p>New mothers and infants</p>	<p>Varies; informational materials are available online.</p>	<p>Evidence-Informed/Promising Practice</p>	<p>What Works for Health</p> <p><u>Search For:</u> Breastfeeding Promotion Programs</p> <p><u>Designation:</u> Scientifically Supported</p>	<p>Some Evidence Expected Outcomes:</p> <ul style="list-style-type: none"> -Increased Breastfeeding Rates 			<p>This program is funded by the Maternal and Child Health Services block grant.</p>	<p>The Colorado Breastfeeding in Childcare Toolkit and the Mom Guide to Starting a Breastfed Baby are distributed in child care settings, through local coalitions, local public health agencies, WIC local agencies, Early Childhood Councils, child care health consultants, hospitals, community groups and others.</p>	
<p>Colorado Baby-Friendly Hospital Collaborative</p>	<p>The Collaborative helps Colorado improve breastfeeding rates and practices by helping maternity hospitals achieve Baby-Friendly designation. The Collaborative supports participating hospitals by providing training, resources and opportunities to improve policies and processes that impact breastfeeding outcomes. More information can be found at: www.babyfriendlyusa.org.</p> <p>Breastfeeding is part of the department's Early Childhood Obesity Prevention Initiative.</p> <p><i>Breastfeeding is an evidence-based practice and favorably impacts several health outcomes. CDPHE promotes breastfeeding to reduce obesity, and the Colorado Baby-Friendly Hospital Collaborative is included in this section of the health program inventory because obesity is an area of interest in the Results First "health" policy area. Since causal evidence that demonstrates the impact of breastfeeding on obesity has not been identified, the program is categorized as "evidence-informed."</i></p>	<p>Hospitals with maternity care services</p>	<p>Program is on-going as hospitals designate (average 5 year process) and hospitals agree to continue with the collaborative for at least one year post-designation to share experiences and lessons learned with other hospitals new to the pathway.</p>	<p>Evidence-Informed/Promising Practice</p>	<p>What Works for Health</p> <p><u>Search For:</u> Breastfeeding Promotion Programs</p> <p><u>Designation:</u> Scientifically Supported</p>	<p>Some Evidence Expected Outcomes:</p> <ul style="list-style-type: none"> -Increased Breastfeeding Rates 			<p>Participating hospitals receive incentive funding up to \$6,000 to support training, fees, or with developing systems of support between hospital and community. Program is funded through two federal grants, a Centers for Disease Control and Prevention grant and a Title V Maternal and Child Health Services block grant.</p>	<p>Twelve hospitals are currently certified Baby-Friendly and an additional twelve hospitals participate in the collaborative. Facilities in the Collaborative are located throughout Colorado, both in urban and rural areas, and include the largest birthing facility, St. Joseph's Hospital, and one of the smallest, Estes Park Medical Center, in the state.</p> <p>For a list of Baby-Friendly Hospitals, please see: https://www.babyfriendlyusa.org/find-facilities/designated-facilities-by-state.</p>	
<p>Cooking up Healthy Options with Plants (CHOP)</p>	<p>CHOP is a program for childcare providers to increase the consumption of seasonal fruits and vegetables and/or on-site garden produce by children in care. Child care centers and homes who are subgrantees of CHOP receive funds to build and/or improve on-site gardens. The subgrantees implement a nutrition education curriculum for children involving gardening and preparing and tasting the garden produce. Subgrantees of CHOP are required to hold at least one event where the child care home provider or center offers tours of the garden and shares the Grow it, Try it, Like it curriculum with families and community members.</p> <p>This program is part of the department's Early Childhood Obesity Prevention Initiative and the department's Child and Adult Care Food Program.</p>	<p>Children, youth and families in addition to the general public</p>	<p>Monthly webinars for participant staff/providers. Staff also receive culinary training, on site garden support, and instructional materials to pass on to clients throughout the program which lasts three years.</p>	<p>Evidence-Informed/Promising Practice</p>	<p>What Works for Health</p> <p><u>Search For:</u> School Fruit & Vegetable Gardens</p> <p><u>Designation:</u> Scientifically Supported</p>	<p>Some Evidence Expected Outcomes:</p> <ul style="list-style-type: none"> -Increased Willingness To Try Fruits & Vegetables -Increased Fruit & Vegetable Consumption 			<p>Cooking up Healthy Options with Plants is funded by the USDA Team Nutrition Training grant (federal grant).</p>	<p>CDPHE's Child and Adult Care Food Program provides training and education to child care providers.</p> <p>Providers include: Auraria Early Learning Center (Denver), Bright Beginnings (Greenwood Village), Childcare Fun for Kids! (Thornton), Connections Early Learning and Development, LLC (Lakewood), Creative Learning Center (Aurora), Discovery Grove, LLC (Evans), East Side Child Care Center (Pueblo), Florence Crittenton (Denver), Highlands Heart Home Preschool/Childcare (Northglenn), Lee Family Child Care Program (Colorado Springs), Little Angels Daycare (Aurora), Little Giants Learning Center (Commerce City), Pikes Peak Community College (Colorado Springs), Spanish Peaks Child Care Center (Silverton).</p>	

Obesity Prevention and Intervention Programs Continued											
Nine Ways to Grow Healthy Colorado Kids	<p>This is a campaign to increase public awareness of evidence-informed risk and protective factors to achieving a healthy weight. This statewide initiative aims to reduce early childhood obesity through consistent messaging.</p> <p>This program is part of the department's Early Childhood Obesity Prevention Initiative.</p>	General public; especially children, youth and families	Monthly newsletters and social media outreach.	Research-Informed/ Needs Additional Research	<p>What Works for Health</p> <p><u>Search For:</u> Mass Media Campaigns for Physical Activity</p> <p><u>Designation:</u> Insufficient Evidence</p>						<p>This program is funded by the Maternal and Child Health Services block grant.</p> <p>Public Health Agencies, Libraries, Non-Profits: Food Banks, United Way, Childcare Centers, Home Visitation Providers, Head Start/Early Head Start, Early Childhood Councils, Mental Health Providers, Family Resource Centers, Community Health Centers, Child and Adult Care Food Program, Schools, Life Skills Service Providers, Health Care Clinics, Primary Care Settings, Family Centers, Hospitals, Recreation Centers, Physical Therapy Providers, and Environmental Health Inspectors.</p>
Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	<p>WIC is a nutrition program that provides nutritious groceries, nutrition education, breastfeeding support and other services free of charge to Colorado families who qualify. WIC's goal is to help keep pregnant and breastfeeding women and children under age 5 healthy.</p> <p>There are two WIC programs operational in Colorado. One is operated by CDPHE and the other is provided by the Ute Mountain Ute Tribe.</p> <p>This program is part of the department's Early Childhood Obesity Prevention Initiative.</p> <p><i>WIC is an evidence-based program and favorably impacts several health outcomes. As mentioned, CDPHE promotes WIC to reduce obesity (among other health outcomes, including reducing preterm birth) and it is included in this program inventory because obesity is an area of interest in the Results First "health" policy area. Since causal evidence that demonstrates the impact of WIC on obesity has not been identified, the program is categorized here as "evidence-informed."</i></p>	Low-income, nutritionally-at-risk individuals, including women who are pregnant, breastfeeding, or post-partum, as well as non-breastfeeding women, infants, and children up to age 5	Participants receive monthly benefits issued for healthy foods to supplement their family's diet. Additionally, participants visit WIC clinics at least every 3 months (a total of 2-4 visits), during which they receive personalized nutrition consultations.	Evidence-Informed/ Promising Practice	<p>What Works for Health</p> <p><u>Search For:</u> Breastfeeding Promotion Programs</p> <p><u>Designation:</u> Scientific Support</p>	<p>Some Evidence</p> <p><u>Expected Outcomes:</u> -Increased Breastfeeding Rates</p>				<p>Colorado WIC receives a grant from the USDA Food and Nutrition Service (federally funded program).</p> <p>WIC offices are located throughout the state. Locations can be found here: https://goo.gl/3QwBMH</p>	
Structured (Teacher-Led) Physical Activity in Early Care and Education Settings	<p>The program provides training to teachers to promote physical activity in early care and education or child care settings. Specific curricula include: I Am Moving, I Am Learning, Wellness Champion, and Moving Into Wellness. In these programs, children learn and develop gross and fine motor skills through teacher-led movement as well as help their brains develop through mind/body connections. These skills help children develop confidence and exhibit signs of school readiness.</p> <p>This program is part of the department's Early Childhood Obesity Prevention Initiative.</p>	Preschool aged children	Providers receive an average of 18 structured physical activity trainings and at least 8 technical assistance sessions per year.	Evidence-Based	<p>Washington State Institute for Public Policy</p> <p><u>Search For:</u> Preschool Programs to Create a Healthy Food Environment and Increase Physical Activity</p>	<p>Yes Outcome: -Decreases Obesity</p>	No	No	\$2	<p>The project is funded with federal Maternal and Child Health Services block grant and Centers for Disease Control and Prevention grants.</p> <p>Healthy Child Care Colorado (Qualistar) and local public health agencies include: Boulder County Public Health, El Paso County Public Health, Jefferson County Public Health, Mesa County Public Health, Pueblo City-County Health Department, and Weld County Department of Public Health and Environment.</p>	
Type 2 Diabetes Prevention and Intervention Programs											
National Diabetes Prevention Program	<p>The program is an evidence-based lifestyle change program that reduces the risk of developing type 2 diabetes. By increasing physical activity to 150 minutes per week and losing 5-7 percent of body weight, participants can reduce their risk of developing type 2 diabetes by 58 percent.</p>	Adults age 18 years and older with a BMI of 24 or higher (22 or higher if Asian), with prediabetes, or at high risk for type 2 diabetes	A minimum of 22 sessions over the year-long program are provided; includes a minimum of 16 weekly sessions in the first 6 months followed by a minimum of 6 monthly sessions in the second 6 months.	Evidence-Based	<p>Washington State Institute for Public Policy</p> <p><u>Search For:</u> Lifestyle Interventions to Prevent Diabetes: Shorter-term Programs with Group-Based Counseling</p>	<p>Yes Outcomes: -Decreases Fasting Glucose -Decreases Weight Change</p>	No	No	\$13,684	<p><u>CDPHE Grant Programs:</u> -The Cancer, Cardiovascular Disease, and Pulmonary Disease (CCPD) grant -Health Disparities Grant Program (HDGP)</p> <p>Both grants are funded through Colorado's Amendment 35 tobacco tax fund.</p> <p>Denver Health Managed Care, Penrose St.-Francis Health Center, Mesa County Health Department, Chaffee County Public Health, Tri-County Health Department, American Diabetes Association, YMCA of Metro Denver, Denver Health, and CREAndo Bienestar.</p>	
San Juan Basin Health Department Promotor Health Education Program	<p>The program employs bilingual health educators and advocates that work to prevent and detect chronic diseases. Services include health screenings for cholesterol, glucose, and blood pressure. Underserved individuals have the ability to schedule personalized health education appointments, which can include weight loss strategies, healthy eating tips, diabetes education, and blood pressure screening. This program primarily works to prevent and detect cardiovascular disease; however, diabetes prevention is an aspect of the program.</p>	Aging, LGBT, disabled, Latino/Hispanic and/or low socioeconomic status populations in La Plata and Archuleta counties	Clients participate for various times depending on their need and interest. The goal is to rescreen at least 50% of clients 3-12 months after initial screening. The average duration of program participation is about 6 months but varies significantly per person.	Evidence-Informed/ Promising Practice	<p>What Works for Health</p> <p><u>Search For:</u> Culturally Adapted Health Care</p> <p><u>Designation:</u> Scientific Support</p>	<p>Some Evidence</p> <p><u>Expected Outcomes:</u> -Improved Health Outcomes -Improved Health-Related Knowledge -Improved Chronic Disease Management</p>				<p><u>CDPHE Grant Program:</u> -Health Disparities Grant Program (HDGP)</p> <p>The grant is funded through Colorado's Amendment 35 tobacco tax fund.</p> <p>Community Health Workers/Promotoras in conjunction with San Juan Basin Public Health.</p>	