



The Colorado

# Health Report Card



The Colorado Health Foundation™

# Together, we can make Colorado the healthiest state in the nation.

*Let's admit it — we Coloradans think ours is a really healthy state. And why wouldn't we? Whenever a national survey is released, we always rank among the best — from our low obesity and smoking rates, to the large number of Coloradans who exercise regularly.*

So we should expect an outstanding grade on the first Colorado Health Report Card, right? Wrong. That is unless you consider an overall C+ an acceptable grade — and we don't. Nor do we think a C is the best we can do for our children.

The Colorado Health Report Card measures just how healthy Coloradans really are and will track our progress in making Colorado the healthiest state in the nation. In conjunction with the Colorado Health Institute (a nonprofit organization that is a comprehensive source of health information and analysis), we identified 10 pairs of important health indicators and determined a grade for each. The grades are based on Colorado's rank among the states, whether the indicator has improved or worsened over recent years, and how close Colorado comes to goals set by the federal government in its *Healthy People 2010* health promotion and disease prevention initiative.

Each pair includes a health indicator and an outcome. For example, health care experts know that expectant moms who receive inadequate prenatal care are more likely to deliver a low birth weight baby. The Colorado Health Report Card grades the availability of prenatal care in the state as a C. So it's no surprise that Colorado has a significant number of low birth weight babies as well and therefore earns only a C+. By using these

paired indicators, Coloradans can see what needs to be done to improve the state's health.

## **The results aren't good.**

- Our children received a C with a Grade Point Average (GPA) of 2.4
- Colorado adults scored a B+ with a 3.6 GPA
- Overall, Colorado's grade is a C+ with a 2.9 GPA

These grades got our attention, and we hope they get yours. The good news is that we can improve them. Policy makers can ensure Coloradans have access to quality health care by finding ways to extend health insurance coverage to a greater number of people. The medical community, nonprofits and community organizations can develop and expand programs to improve health and health care in the state. We can encourage people to take charge of their health by empowering parents to make good health care decisions for their families — and set healthy lifestyle examples for their children. Adults can watch their weight and keep an eye on cholesterol.

The Colorado Health Foundation is committed to working with nonprofit organizations, community groups, policy makers and medical professionals to improve these grades. We must raise the bar dramatically — particularly for our children. We'll issue an updated Colorado Health Report Card annually to measure the state's progress.

Please join us as we work to improve the Colorado Health Report Card grades. Together, we can make Colorado the healthiest state in the nation and lift that C+ to a solid A.

## **GRADING SCALE**

A(4.0) - Excellent

B(3.0) - Good

C(2.0) - Average

D(1.0) - Poor

F(0.0) - Unacceptable

# Grades

**C0**  
**06**

Health Indicator	Rank	Score	Target*	Grade
<b>Mothers who receive inadequate prenatal care</b>	44	19%	10%	C
OUTCOME: Babies with low birth weight	40	9%	5%	C+
<b>Combined vaccination rate for children (19-35 months)</b>	44	77%	90%	C
OUTCOME: Children (1-9 yrs) with pertussis (whooping cough)	N/A	38/100,000	N/A	C-
<b>Children (5-14 yrs) who are not physically active at least 5+ hours per week</b>	35	27%	N/A	C-
OUTCOME: Children (2-14 yrs) who are overweight	3	15%	5%	B+
<b>Children (0-17 yrs) without health insurance</b>	44	14%	0%	D
OUTCOME: Children (0-17 yrs) without a specific source of ongoing primary care	22	13%	3%	C
<b>Teen pregnancies that are unintended</b>	N/A	73%	N/A	C-
OUTCOME: Teenage girls (15-17 yrs) who give birth	32	3%	4%	B
<b>Adolescents (15-17 yrs) who reported evidence of depression</b>	N/A	25%	N/A	C-
OUTCOME: Adolescents (grades 9-12) who attempted suicide	N/A	7%	1%	C-
<b>Adults (18-64 yrs) without health insurance</b>	38	20%	0%	C
OUTCOME: Adults (18-64 yrs) without a specific source of ongoing primary care	21	27%	4%	B-
<b>Adults (20 yrs and older) who are obese</b>	1	16%	15%	B+
OUTCOME: Adults with diabetes	2	5%	3%	A-
<b>Adults not screened for cholesterol</b>	19	28%	20%	B
OUTCOME: Deaths caused by heart disease	2	130/100,000	166/100,000	A+
<b>Coloradans who smoke</b>	16	20%	12%	B+
OUTCOME: Deaths from lung, trachea, and bronchus cancer	5	32/100,000	45/100,000	A-

\*Targets are based on the Centers for Disease Control's Healthy People 2010 initiative.

**COLORADO GPA** C+

Child GPA	2.4
Adult GPA	3.6

# Health Indicators

CO

06

## Mothers who receive inadequate prenatal care

**OUTCOME:** Babies with low birth weight

Colorado ranks near the bottom of the states (44th) on the number of pregnant women who receive inadequate prenatal care. There is a direct correlation between good prenatal care and healthy-weight births. Both of these indicators have remained unchanged over the last 10 years and neither meet the target, which is why both received C grades. Improving access to prenatal care will improve infant health in Colorado.

## Combined vaccination rate for children (19-35 months)

**OUTCOME:** Children (1-9 yrs) with pertussis (whooping cough)

While Colorado has seen a moderate increase in the childhood vaccination rate in the last few years, we still are behind other states, ranking 44th. Colorado received a C for childhood vaccinations. Colorado's low vaccination rate contributes to the troublingly high incidence of vaccine-preventable diseases like pertussis. Getting doctors to see children who are on Medicaid would improve this grade.

## Children (5-14 yrs) who are not physically active at least 5+ hours per week

**OUTCOME:** Children (2-14 yrs) who are overweight

Long known as one of the fittest states in the nation, Colorado might lose that reputation as our children become adults. The activity level of Colorado's children ranks 35th among the states and earns a C-. Although our youngsters have the third lowest obesity rate in the nation, with 15% overweight, we don't meet the 5% target, which is why Colorado received a B+.

## Children (0-17 yrs) without health insurance

**OUTCOME:** Children (0-17 yrs) without a specific source of ongoing primary care

The relatively high proportion of children without health insurance — which has remained unchanged since 1999 — means Colorado ranks 44th in the nation and receives a D. Children without health insurance seldom have ongoing primary care, so it's no surprise that Colorado gets a C on that indicator. To improve children's health, we have to enroll all children who are eligible into public programs and make sure that children who aren't eligible can get affordable, meaningful coverage in the private market.

## Teen pregnancies that are unintended

**OUTCOME:** Teenage girls (15-17 yrs) who give birth

The unintended teen pregnancy rate has not improved for the last seven years, which is why Colorado received a C-. Colorado receives a B for teenage birth rate. This number has remained fairly constant for the last four years. Colorado can do a better job empowering teenagers to make responsible decisions about sex.

## Adolescents (15-17 yrs) who reported evidence of depression

**OUTCOME:** Adolescents (grades 9-12) who attempted suicide

Although Colorado's rate cannot be compared to other states and there is no federally-established target, Colorado receives a C- because the number of adolescents who report evidence of depression has grown since 2001. Colorado receives a C- in the percent of adolescents who have attempted suicide because we exceed the federal target. Increased access to mental health care is critical for Colorado's adolescents.

## Adults (18-64 yrs) without health insurance

**OUTCOME:** Adults (18-64 yrs) without a specific source of ongoing primary care

Colorado receives a C due to the significant percentage of adults who do not have health insurance — and because the number of uninsured is growing. Colorado ranks 38th among the states in this category and has a long way to go to meet the federal target of all adults having health insurance. Uninsured adults are less likely to have a specific source of primary care which explains the grade of B-. Access to affordable health insurance is a prerequisite to improve Coloradans' health.

## Adults (20 yrs and older) who are obese

**OUTCOME:** Adults with diabetes

Although Colorado has the lowest obesity rate in the nation, we receive a B+ because obesity is increasing as is the number of adults with diabetes. Because of the high rate of complications associated with diabetes, it's critical that adults exercise, eat well and proactively manage the disease if they get it.

## Adults not screened for cholesterol

**OUTCOME:** Deaths caused by heart disease

Cholesterol screening receives a B because although there has been a slight increase in screening over the past 10 years, Colorado misses the federal target of 80%. However, the death rate for heart disease is declining and Colorado has surpassed the target to earn an A+. To keep this A+ our state's aging baby boomers must exercise, eat well, and learn to access health care appropriately.

## Coloradans who smoke

**OUTCOME:** Deaths from lung, trachea, and bronchus cancer

While the number of Colorado adults who smoke has declined slightly in the past 10 years, it still is above the target of 12%, which is why Colorado receives a B+. Colorado's mortality rate from lung, trachea and bronchus cancer is 5th lowest in the nation and surpasses the federal target, giving Colorado an A-.

### More Information — Sources:

Values for most report card indicators come from data sets maintained by the Health Statistics Section of the Colorado Department of Public Health and Environment. For descriptions of these data sources and access to queryable databases go to: <http://www.cdphe.state.co.us/hs/hsshom.asp>. Estimates for health insurance coverage are from the U.S. Census Bureau's Current Population Survey (CPS). For more information on the CPS go to: <http://www.bls.census.gov/cps/cpsmain.htm>. Estimates of vaccination coverage come from the National Immunization Survey which is sponsored by the National Immunization Program (NIP) and conducted jointly by NIP and the National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention. For more information go to: <http://www.cdc.gov/nis/>. Pertussis cases are from the Colorado Reportable Disease Statistics. For more information: <http://www.cdphe.state.co.us/dc/CODiseaseStatistics/index.html>. Many of the indicators are compared to *Healthy People 2010* targets. For more information on *Healthy People 2010* go to: <http://www.healthypeople.gov/>.



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