



Children's Hospital
Colorado
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2025–2028

Community Health Implementation Strategies

Children's Hospital Colorado, Colorado Springs

Introduction

Founded in 1908, Children’s Hospital Colorado has been a leader in providing the best healthcare outcomes for children for more than 100 years. Our mission is to improve the health of children by providing high-quality coordinated programs of patient care, education, research and advocacy.

In response to our 2024 Community Health Needs Assessment, Children’s Colorado proudly presents our 2025-2028 Community Health Implementation Strategies. Here, we outline the key initiatives for the next three years in partnership with community organizations, schools, governmental agencies and more. We look forward to implementing this work — expanding, evolving and adapting our efforts to improve child health — and incorporating feedback from our community over these three years.

Defining our community

For the purposes of the Colorado Springs implementation strategies, Children’s Colorado has defined community as all children and young adults 0 to 25 years of age living in El Paso County. Within El Paso County, Children’s Colorado has a licensed hospital facility at Colorado Springs Hospital (115 licensed beds).

To understand the geographic area served by the Colorado Springs Hospital facility, we reviewed our patient population data and found that most emergency department/urgent care (ED/UC), inpatient admissions and outpatient visits are from children who live in El Paso County. In 2023, our Colorado Springs Hospital provided care to 26,326 unique patients from El Paso County aged 0 to 25 across ED/UC, inpatient/observation and outpatient settings, representing 85.4% of all patients and 86.5% of all visits that year. Across these settings, 81.3% of all Medicaid patients seen in 2023 at our Colorado Springs Hospital were from El Paso County.

Community health needs assessment and prioritization

In 2024, Children’s Colorado completed a community health needs assessment that included a review of population-level data and an extensive community outreach process to assess the interests and concerns of community members across neighborhoods and counties. Through partner and caregiver surveys, interviews and community meetings, we gathered input from hundreds of people. Children’s Colorado was deliberate in ensuring representation from organizations, individuals and caregivers with knowledge, information or expertise relevant to the health needs of that community, as well as members of medically underserved, low-income and minority populations in the communities served by the hospital system. This approach allowed us to rank top health and social needs across different sources of input.

COMMUNITY HEALTH IMPLEMENTATION STRATEGIES

Top health needs by data source

Caregiver survey	Key informant survey	Community meetings	Health indicators (secondary data)*
Mental health	Mental health	Mental health	Mental health
Bullying	Preventive care	Preventive care	Mother and infant health
Issues with weight	Mother and infant health	Child abuse and neglect	Child abuse and neglect
Violence	Child abuse and neglect	Bullying	Violence
Child abuse and neglect	Issues with weight	Mother and infant health	Issues with weight
			Asthma and respiratory health
			Unintentional injury

*Secondary data column is not ranked but instead highlights which indicators share overlap with the other data sources

Top social needs by data source

Caregiver survey	Key informant survey	Community meetings	Health indicators (secondary data)*
Food insecurity	Access to care	Access to care	Access to care
Housing	Housing	Food insecurity	Food insecurity
Access to or cost of childcare	Food insecurity	Housing	Housing
Access to care	Transportation		
Access to benefits	Access to or cost of childcare		

*Secondary data column is not ranked but instead highlights which indicators share overlap with the other data sources

Prioritization criteria

Once data collection and community engagement were completed, Children's Colorado underwent an internal prioritization process to identify which community health needs would be included in the implementation strategies. We used the following criteria to guide prioritization: impact, community importance, viability, Children's Colorado's role, sustainability and scale.



Significant health and social needs to be addressed

Ultimately, Children’s Colorado prioritized mental health, injury and preventive care as our health priorities, and access to care, nutrition security and housing as our social priorities.

Health priorities



Mental health



Injury



Preventive care

Social drivers of health



Access to care



Nutrition security



Housing

To see the full 2024 assessment, visit the [Colorado Springs Community Health Needs Assessment](#).

Resources to address priority health needs

Community benefit

In 2023, Children’s Colorado provided a federally defined community benefit worth more than \$459 million. Community benefit activities respond to needs identified by the community in concrete ways that improve health and access to health care. Our annual community benefit contributions demonstrate our dedication and accountability to the communities we serve. Community benefit activities also inform broader strategic decisions, including assessing our ability to serve the community and addressing the health needs prioritized in our Community Health Needs Assessment and Implementation Strategies.

Partnerships

We are only one part of a rich ecosystem working to improve the health of children and families in Colorado. We rely on partnerships to accomplish this important work. We will use the strategies within this plan to assess current community partners and the need for new ones to ensure we meaningfully contribute to collective impact in alignment with others.

Grants and contracts

Children’s Colorado partners with local, state and federal organizations and agencies to leverage existing resources to maximize community impact.

Foundation and philanthropy

The Children’s Hospital Colorado Foundation partners with donors who want to invest in child health and forge a path for better and more equitable health outcomes and opportunities for all children and families. These resources are not a substitute for public investment in child health but can complement and strengthen public systems.

Integrated strategies across health priorities

While specific activities to address the identified priority areas are covered further in this document, the following fundamental strategies were identified as cross-functional and will foster iterative implementation of the programs outlined in this plan.

Meeting children and families where they are

Central to our work is the belief that we can most effectively improve the health of children and families if we provide services and resources in places where children already spend much of their time. Consequently, we have designed cross-cutting strategies and programs to address the top six health and social priorities across multiple settings: home, school, primary care and community. We aim to support collaborations across community-serving organizations to reduce barriers and improve health outcomes.

Community engagement

Community engagement principles and practices are core values in our work and are incorporated throughout this plan. Since many factors which influence health fall outside our hospital walls, engaging with the communities we serve is critical to improving the health and well-being of all children and youth in Colorado. Our community engagement goal will focus on developing a new Community Health Advisory Council (CHAC) to provide consultation, support and feedback to the strategies within this Community Health Implementation Strategy and to other programs within the Division of Community Health and Advocacy.

Health outcomes

Not all populations have the same opportunities to achieve optimal health and well-being due to various challenges, and therefore, we are adding a health outcomes-focused approach to our work. This means we are committed to understanding which populations are at risk for health disparities and, in turn, redesigning how we meet their community needs. Every patient and family is unique, and we are intent on improving health and quality of life for all. This means putting patients and families first, and keeping in mind factors that could affect their care, such as their language, culture, religion, identity and more. For example, we will work to help populations who may experience difficulty finding inclusive care, those who face discrimination when seeking care, and those who may have additional barriers to healthcare — such as youth who are currently unhoused or families who speak languages other than English.

Advocacy

Child health advocacy is a core part of our hospital's mission to improve kids' health. This is why our Government Affairs team advocates for laws and policies that can help keep kids out of the hospital. We work with local, state, regional and federal elected officials and staff, community partners, families and community members to ensure kids grow up healthy and strong. Kids don't vote, but they do deserve a voice when decisions are being made that impact them. That is why we have a responsibility to advocate on behalf of our patients and families, our community and all kids, not only because it's an investment in our nation's future, but because it's the right thing to do. Our advocacy goal is to drive systemic policy change across each of the priorities in the Community Health Needs Assessment. We will foster collaborative efforts across sectors to influence public policy outcomes that can improve child health.

COMMUNITY HEALTH IMPLEMENTATION STRATEGIES

These cross-functional strategies are intended to influence all prioritized health and social needs:

Community engagement

Goal: Promote community voices and engagement to inform, advise and shape community health programs

Objective	Activity
1. Provide a defined avenue for community members to advocate, engage, and educate Children's Colorado on how to better improve health outcomes for children and youth through community-based programs and outreach	1.1. Develop and facilitate a Community Health Advisory Council (CHAC) to ensure community health initiatives and services are aligned with the triennial Community Health Needs Assessment prioritized health needs
	1.2. Develop and direct a new community micro-grant giving strategy to financially support community nonprofit organizations whose work aligns with our current Community Health Needs Assessment prioritized health needs

Advocacy and policy

Goal : Advocate for public policy changes that benefit the health of children

Objective	Activity
1. Support local, state and federal policy advocacy efforts aimed at improving child health through the identified health and social priorities	1.1. Directly support (or oppose) proposed public policies that will positively (or negatively) impact child health through advocacy with policymakers and regulatory staff at all levels of government
	1.2. Build capacity through the cultivation of a statewide network of advocates and coalition work
	1.3. Utilize traditional media outlets and social media to educate members of the community, inform opinion leaders throughout Colorado, and ultimately build public support for key child health policies and initiatives
	1.4. Train and mobilize youth, healthcare providers and caregivers to advocate

Prioritized health needs



Mental health

Suicide remains the leading cause of death among Colorado children.¹ Unmet mental health needs continue to be prioritized by all community key informants. Aside from clinical services, Children's Colorado's community-based work on this health priority will include educating and supporting primary care providers to manage low-acuity mental health needs within their practice; educating caregivers, school personnel and the general public on youth mental health; leading coalitions to influence systems-level improvements and supports; developing new programs to address mental health needs in early childhood; promoting youth voices and engagement to inform, advise, and shape priorities and our system of care; and advocating for policy solutions that improve access to high quality mental and behavioral healthcare for children and youth.

Anticipated impact

- Increased awareness of mental health conditions and access to resources, trainings and treatments
- A more coordinated and integrated system of child and youth mental health in Colorado
- Improved access to and expertise in mental health services and support in primary care, schools and community
- Strengthened cross-collaboration in the community to improve mental health for children and youth



COMMUNITY HEALTH IMPLEMENTATION STRATEGIES

Goal: Improve youth mental health

Objective	Activity
1. Increase access to mental health care by providing evidence-based interventions to children and youth in school settings	1.1. Collaborate with school staff to identify children with unmet mental health needs
	1.2. Conduct clinical evaluation for identified students
	1.3. Provide clinical mental health treatment to identified students in a school setting
2. Educate and support primary care providers (PCP) in managing low-acuity mental health needs within their practice	2.1. Partner with PCP practices to deliver the Pathways to Suicide Prevention education and training program
	2.2. Annually, offer the “Behavioral Health in Pediatric Primary Care: Approaches for Supporting and Treating Children and Families Today” two-day conference
3. Educate and train caregivers, school personnel and the public on youth mental health topics	3.1. Conduct educational events geared toward the general public and/or caregivers; both virtual and in-person events will be offered
	3.2. Conduct educational events geared toward school-based staff. Topics may be driven by school needs and/or include Applied Suicide Intervention Skills Training (ASIST)
4. Lead coalitions to influence systems-level improvements to support youth mental health	4.1. Serve as the backbone organization for the Children, Youth and Families Mental Health Coalition
	4.2. Serve as the backbone organization for the Colorado Alliance for School Health
5. Provide support for transitions of care	5.1. Provide patient families access to family peer support specialists for help in transitions from clinical care to home and community
	5.2. Collaborate with other health systems to improve the transition from pediatric to adult mental health providers for ongoing care
6. Develop new program(s) to address mental health needs in early childhood	6.1. Develop a strategic plan for community-based early childhood prevention and education program
7. Promote youth voices and engagement to inform, advise and shape mental health priorities and systems of care	7.1. Lead the Youth Council for Mental Health (YCMH) and its subcommittees to work on identified projects
	7.2. Recruit youth from each Colorado Medicaid Regional Accountable Entity (RAE) region
	7.3. Partner with Government Affairs to build mental health advocacy capacity by including youth perspectives in the public policy process
	7.4. Partner with Children’s Colorado teams, departments and clinics to improve patient experience
	7.5. Engage local and state communities to educate, raise awareness and advocate about/for youth mental health at events and conferences
Hospital resources: Children’s Colorado direct and in-kind contributions, philanthropy, grant funding	
Pediatric Mental Health Institute collaborations: University of Colorado School of Medicine, University of Colorado Department of Psychology and Psychiatry, local schools, Colorado Alliance for School Health Members, Children, Youth & Families Mental Health Coalition, Colorado Mental Health Consortium, Intermountain Healthcare	
Government affairs collaborations: Healthier Colorado, Gary Community Ventures, Mental Health Colorado, Bell Policy Center and Colorado Children’s Campaign	



Injury

Injury remains a leading cause of morbidity and mortality for children. Both motor vehicle and child maltreatment injuries are in the top five leading causes of death for children under 18 years in Colorado. Children’s Colorado’s work on the health priority of injury will include efforts to address both motor vehicle injury and child abuse. For motor vehicle crashes, Children’s Colorado will provide education and resources to caregivers on proper car seat use, support policy and advocacy efforts, expand community access to trained child passenger safety specialists and work with partners on collaborative solutions. To address child abuse, Children’s Colorado will develop and deliver education on mandatory reporting, screen patients for child abuse in the emergency department of our Colorado Springs Hospital and collaborate with community-based organizations.

Anticipated impact

- Improved health outcomes by increasing access to injury prevention education and resources
- Increased awareness and education about mandatory reporting
- Strengthened cross-collaboration in the community to improve health outcomes for children

Goal: Reduce child injury from motor vehicle crashes

Objective	Activity
1. Provide education and resources to caregivers on proper car seat use	1.1. Provide one-on-one car seat installation appointments for the community
	1.2. Provide car seats at subsidized cost to families in need
	1.3. Provide car seat education to caregivers in small group settings
2. Expand community access to child passenger safety technicians by providing training and resources to partners	2.1. Lead courses to certify partners as child passenger safety technicians (CPSTs)
	2.2. Lead courses to train existing CPSTs in adaptive car seats for children with special health care needs
	2.3. Conduct car seat fitter trainings for clinical staff
3. Partner with the community on existing programs, supports and services	3.1. Serve as the backbone organization for the Safe Kids Colorado Springs Coalition
	3.2. Participate with DriveSmart Colorado
Hospital resources: Children’s Colorado direct and in-kind contributions, grant funding	
Injury Prevention/Trauma Services collaborations: Safe Kids Colorado Springs, DriveSmart Colorado	

COMMUNITY HEALTH IMPLEMENTATION STRATEGIES

Goal: Increase awareness and education on child abuse

Objective	Activity
1. Collaborate with community-based organizations on education programs and campaigns	1.1. Participate in local and state child abuse coalitions (e.g., Safe Passage, El Paso County Child Fatality Review Team, Colorado Child Fatality Prevention System State Review Team, Colorado Department of Human Services Child Fatality Review Team, Colorado Department of Human Services Institutional Abuse Review Team, Safe Families Network, etc.)
	1.2. Provide consultation to the Colorado Department of Early Childhood via Healthy Child Care Colorado on education and resources related to child abuse
	1.3. Administer the Kempe CARE (Child Abuse Response and Evaluation) Network and provide training and mentorship to behavioral and medical providers on the assessment of child maltreatment
2. Educate about mandatory reporting	2.1. Design and implement a systemwide mandatory reporter training for select Children’s Colorado team members
	2.2. Provide consultation to the Colorado Department of Early Childhood to develop a new web-based mandatory reporter training for childcare providers
3. Screen for child abuse	3.1. Universally screen children under the age of 6 for child abuse and neglect in the Emergency Department. Conduct evaluations when indicated
Hospital resources: Children’s Colorado direct and in-kind contributions, grant funding, philanthropy	
Planned collaborations: Community Partnership for Childhood Development (Head Start), Nurse-Family Partnership, Catholic Charities, El Paso County health department, University of Colorado Health, Common Spirit Health, Kids on Bikes, YMCA of the Pikes Peak Region, Healthy Child Care Colorado, Colorado Department of Early Childhood, Colorado Department of Education, Colorado Department of Public Health and Environment Child Fatality Review Team	





Preventive care

Preventive care is a challenge for many Coloradans and primarily denotes the difficulty families experience when finding a primary care provider for their children, particularly a provider who accepts public health insurance (Medicaid, Tri-Care, etc.). Among Coloradans who participated in the 2023 Colorado Health Access Survey, nearly one in five respondents (19.8%) reported that they did not fill a prescription, get doctor care or get specialty care when they needed to due to cost.² This priority also speaks to the need for increased access to primary prevention programs intended to prevent disease and improve health outcomes broadly. Children’s Colorado’s work on this priority will include supporting community-based providers with their emerging needs and partnering with community-based organizations and coalitions that work to promote health and wellness for children and youth.

Anticipated impact

- Increased engagement and collaboration with primary care providers
- Strengthened cross-collaboration in the community to improve health outcomes for children and youth

Goal: Improve access to prevention services and programs for children

Objective	Activity
1. Increase engagement and collaboration with community providers to strengthen the medical home	1.1. Lead the Community Provider Advisory Council (CPAC)
	1.2. Identify opportunities to support primary care providers in delivering preventive medicine and managing their patients outside of specialty/hospital care (e.g., e-Consults, OneCall, etc.)
2. Partner with the community on existing supports and services that impact preventive care	2.1. Participate and support local and state collaboratives working to prevent disease and illness (e.g., El Paso County Tobacco Free Coalition, Youth Suicide Coalition, El Paso County Healthy Communities Collaborative, Colorado Mental Health Consortium, Pikes Peak Rising)
	2.2. Serve as the backbone organization for the Colorado Springs Safe Kids Coalition (preventable injury)
	2.3. Provide medical direction to school-based youth advisory councils on tobacco prevention initiatives
Hospital resources: Children’s Colorado direct and in-kind contributions, philanthropy	
Planned collaborations: Physicians Relations team, Pediatric Care Network, El Paso County Public Health, Colorado Mental Health Consortium, Pikes Peak Rising, Academy School District 20, Fountain-Fort Carson School District 8	



Prioritized social drivers of health



Access to care

Children need access to health insurance and the ability to effectively use those benefits based on factors like the availability of healthcare providers, geographic location of services and cost. Colorado is one of only eight states where the Medicaid/CHIP enrollment has remained lower than pre-pandemic levels.³ Children's Colorado's work on this priority area will include screening for health insurance needs, referrals to primary and specialty care, increasing capacity and reach of school-based care, advocacy for increased medical insurance coverage and working with community-based practices and organizations to support increased health care insurance coverage and access to care for children.

Anticipated impact

- Improved healthcare and health outcomes by reducing barriers to social support and increasing access to health insurance
- Strengthened cross-collaboration in the community to improve health outcomes for children



COMMUNITY HEALTH IMPLEMENTATION STRATEGIES

Goal: Improve systems of care and access to healthcare services for children

Objective	Activity
1. Expand access to public health coverage through screenings and referrals to resources	1.1. Screen patients for health insurance needs in inpatient settings
	1.2. Support families in navigating systems and connect them to community resources for health insurance coverage and other social needs
2. Expand school-based health services to increase access to healthcare	2.1. Develop new individualized care plan templates for emerging conditions seen in school settings and make the templates available on the Children's Colorado website for other school health programs to use
	2.2. Provide professional development opportunities for school nurses across Colorado and the region (e.g., training sessions for school nurses on pediatric health conditions, hosting the annual Community and School Health Conference, etc.)
3. Work to stabilize statewide Medicaid and private insurance coverage for children through policy and advocacy	3.1. Participate and support local and state collaboratives working on Medicaid coverage (e.g., the Colorado Health Policy Coalition)
	3.2. Engage with policy efforts that promote increases in Medicaid and private insurance coverage for children
	3.3. Support and advocate for legislation that impacts children's Medicaid or private insurance coverage
	3.4. Partner to ensure adequate Medicaid or private insurance coverage for children with medical complexity through family engagement and advocacy with policymakers
4. Advocate for community primary care and behavioral health providers that serve large Medicaid populations	4.1. Participate and support local and state collaboratives working on provider support (e.g., Save Our Safety Net)
	4.2. Engage with policy efforts that increase support for community healthcare providers
	4.3. Support and advocate for legislation that impacts children's Medicaid coverage
Hospital resources: Children's Colorado direct and in-kind contributions, grant funding, philanthropy	
School health collaborations: Colorado Department of Education, various school districts (Public, private, charter, childcare), Colorado Association of School Nurses, Healthy Child Care Colorado, local public health agencies, Colorado Department of Public Health and Environment, Colorado Department of Early Childhood	
Medicaid strategy collaborations: Family Voices, the Colorado Center on Law and Policy, Colorado Cross-Disability Coalition, Disability Law Colorado	
Government Affairs collaborations: Colorado Children's Campaign, Colorado Hospital Association, Colorado Chapter of the American Academy of Pediatrics, Colorado Department of Health Care Policy and Financing, Colorado Division of Insurance, Healthier Colorado	



Nutrition security

Food and nutrition security is essential for preventing and treating disease. In Colorado, child food insecurity rates have increased from 10.5% in 2021 to 14.2% in 2022.⁴ Access to healthy and affordable food is consistently prioritized by our community as a top need. Children’s Colorado’s work on this priority will include screening for nutrition needs, conducting nutrition education, providing nutritious food to families in need, capacity building with community partners and advocacy efforts to increase nutrition security in the community.

Anticipated impact

- Improved healthcare and health outcomes by reducing barriers to social support and increasing access to nutritious food
- Strengthened cross-collaboration in the community to improve health outcomes for children

Goal: Strengthen support for families to increase nutrition security

Objective	Activity
1. Expand access to nutrition security through screenings and referrals to resources	1.1. Screen patients for food needs in inpatient and outpatient settings
	1.2. Support families in navigating systems and connect them to community resources for nutrition security and other social needs
2. Partner with the community on existing supports and services	2.1. Provide technical assistance and consultation to Care and Share as they consider integrating Food as Medicine principles and practices
	2.2. Pilot hosting quarterly mobile markets, in partnership with Care and Share, at Briargate Outpatient Care.
	2.3. Develop and test a toolkit for community partners that outlines the steps/actions that food pantries can implement to work toward a Food as Medicine model
3. Reinstate the Children’s Colorado Nutrition Security Workgroup to address nutrition insecurity throughout the system of care	3.1. Develop workgroup charter and initiate meetings
	3.2. Develop a work plan for nutrition security efforts across the Children’s Colorado system of care
Hospital resources: Children’s Colorado direct and in-kind contributions, grant funding, philanthropy	
Health Navigation collaborations: Hunger Free Colorado, Food Bank of the Rockies	
Food as Medicine collaborations: Care and Share, Hunger Free Colorado	



Housing

The lack of available and affordable housing across Colorado continues to strain families. Colorado ranks as the eighth least affordable state when comparing median income to median home prices.⁵ Children’s Colorado’s work on this priority will include providing support to keep families in their current housing situation, collaborating with partners to increase access to affordable housing and supporting policy and advocacy efforts.

Anticipated impact

- Improved healthcare and health outcomes by reducing barriers to social support and increasing access to housing resources
- Strengthened cross-collaboration in the community to improve health outcomes for children

Goal: Strengthen supports for families experiencing housing insecurity

Objective	Activity
1. Provide access to housing assistance through screenings and referrals to resources	1.1. Screen patients for housing insecurity in inpatient and outpatient primary care settings
	1.2. Support families in navigating systems and connect them to community resources for housing assistance and other social needs
2. Improve environmental living conditions for children with asthma	2.1. Conduct virtual home visits to patients with high-risk asthma, including environmental assessments and recommendations for remediation, to improve asthma outcomes and sustain existing housing
Hospital resources: Children’s Colorado direct and in-kind contributions, grant funding, philanthropy	
Planned collaborations: Medicaid Regional Accountable Entities, Social Health Information Exchange, Colorado Department of Public Health and Environment	



Other significant health needs not identified as priorities within the Implementation Strategy

Children’s Colorado recognizes that the public health needs of the community are extensive, and many needs are not explicitly addressed through our priorities and goals. Children’s Colorado knows that our ability to address those needs is limited, leading to our need to prioritize the needs listed above. The identified strategies will be the focus of our community efforts for the next several years. However, we will continue to listen to the community and identify new opportunities to address emerging community concerns. Many of the specific issues the community raised through the needs assessment will continue to be addressed through the Division of Community Health and Advocacy and other Departments at Children’s Colorado.

Conclusion

Community-driven strategies are critical to meet the populations we serve where they are and to get children and youth the help they need, whether that is through raising awareness, screening, conducting trainings, increasing access, advocacy or promoting community voices. Through our collaborations in schools, primary care, community organizations and more, we are better equipped to improve the health of children and youth in and with our communities. We will continue to look to our community to help evolve and improve our approach to best meet the health needs of kids in Colorado.

We welcome continued feedback on the content of these strategies for addressing community health needs. Comments, questions and suggestions can be sent to communitybenefit@childrenscolorado.org.

Citations

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