The 2019 State Health Assessment demonstrates that there is much work to be done to address health inequities in our communities. The Connecticut Department of Public Health (CT DPH) and the Connecticut State Health Improvement Coalition recognize that no one organization, or community, can address these issues alone. Throughout the implementation phase of Healthy Connecticut 2020: State Health Improvement Plan (SHIP), coalition partners have continually identified existing assets to contribute to the collaborative efforts.

This document is a companion document to the State Health Assessment and features a comprehensive database of assets and resources from across the state that can be employed to improve the health of our community. As new assets are identified, this database will be updated.

This database includes assets and resources identified in four categories:

- Existing Infrastructure Internal to CT DPH
- Partnerships and Collaborations
- Data and Information
- Funding Sources
Existing Infrastructure
Partnerships and Collaborations
FEDERAL INSTITUTIONS
Centers for Disease Control and Prevention
National Center for Chronic Disease Prevention and Health Promotion
National Cancer Institute
National Heart, Lung, and Blood Institute
Health Resources and Services Administration
Occupational Safety and Health Administration
Office of Minority Health at the U.S. Department of Health and Human Services

CT Department of Transportation
CT Dept of Energy & Environmental Protection
CT Department of Correction
CT Office of Early Childhood
CT Department of Mental Health and Addiction Services
CT Department of Children and Families
CT Department of Consumer Protection
CT Office of the Chief State’s Attorney
State Building Department
Office of Chief Medical Examiner
Access Health CT
CT Office of Health Strategy
CT Regional Councils of Governments
GHHI/CT Greenbank

STATE INSTITUTIONS/INFRASTRUCTURE
CT Department of Education
CT Department of Education
CT Department of Housing
CT Department of Social Services
### PUBLIC HEALTH INFRASTRUCTURE

| Nat'I Association of County & City Health Officials |
| Association of State & Territorial Dental Directors |
| National Association of Chronic Disease Directors |
| HUD & Public Housing Authorities |
| CT Department of Public Health |
| Tribal Health Departments |
| Local Health Departments |

### ASSOCIATIONS/ SOCIETIES/ BOARDS

| American Diabetes Association |
| American Association of Diabetes Educators |
| American Heart Association |
| American Stroke Association American Lung Association |
| National Cancer Registrars Association North American Association of Central Cancer Registries |
| Sickle Cell Disease Association of America |
| American Lung Association New England Association of Asthma Educators |
| Society for Healthcare Epidemiology of America American Cancer Society Infectious Diseases Society of America National Radon Safety Board |
| Tumor Registries Association of Connecticut |
| Connecticut Association of School-Based Health Centers Sickle Cell Disease Association of Southern Connecticut |
| CT Association for Healthcare at Home Community Health Center Association of Connecticut Association of Local Boards of Health CT State Dental Association Community Health Center Association of CT CT Dental Hygiene Association CT Business and Industry Association CT Environmental Health Association |

### TASK FORCES/ ADVISORIES/ ROUND TABLES/ COUNCILS

| CDC and US Preventative Services Task Force |

### FOUNDATIONS

| Connecticut Health Foundation Universal Health Care Foundation The Donaghue Foundation |

### INITIATIVES

| Million Hearts National Initiative Global Initiative for Asthma Connecticut Asthma Initiative CT Medical Home Initiative CT Medical Home Initiative for Children & Youth with Special Health Care Needs CT Medical Home Initiative at FAVOR, Inc. |
PUBLIC HEALTH INFRASTRUCTURE

Nat’l Association of County & City Health Officials
Association of State & Territorial Dental Directors
National Association of Chronic Disease Directors
HUD & Public Housing Authorities
CT Department of Public Health
Tribal Health Departments
Local Health Departments
CT Association of Directors of Health
Central Connecticut Health District
Stratford Health Department
Monroe Health Department
Ledge Light Health District
Hartford, Health and Human Services
CT Office of Rural Health

COOPERATIVE ENTITIES

Initiatives

Million Hearts National Initiative
Global Initiative for Asthma
Connecticut Asthma Initiative
CT Medical Home Initiative
CT Medical Home Initiative for Children & Youth with Special Health Care Needs
CT Medical Home Initiative at FAVOR, Inc.
CT Oral Health Initiative

Task Forces/Advisories/Roundtables/Councils

CDC and US Preventative Services Task Force
US Preventive Services Task Force
Community Preventive Services Task Force
Advisory Committee on Immunization Practices
Healthcare Infection Control Practices Advisory Committee
National Colorectal Cancer Roundtable
CT Diabetes Advisory Council
CT Food Policy Council
CT Childhood Obesity Council
Early Childhood Education Nutrition and Physical Activity State Advisory Group
Wellness committees and Councils
Council of Genomics
Medical Home Advisory Council
OEC Home Visiting Advisory Group
Statewide Hoarding Advisory Group
CT Water Fluoridation Work Group
SEAL CT! Connecticut Dental Sealant Advisory Committee
Maternal Mortality Review Committee

Networks/Partnerships/Coalitions/Collaboratives
Allergy and Asthma Network
CT Cancer Partnership
CT Statewide Asthma Partnership
CT Dental Health Partnership
CT Dental Health Partnership
Radon Program Partnerships
Mobilizing Against Tobacco for Connecticut’s Health Coalition
State and local nutrition Coalitions
Maternal, Infant and Child Health Coalition
CT Breastfeeding Coalition
CT Autism Action Coalition
Housatonic Valley Coalition Against Substance Abuse
CT Coalition Against Domestic Violence
Connecticut Coalition Against Domestic Violence
CT Farm to School Collaborative
CT Source Water Collaborative
Every Woman CT Collaborative
National Alliance on Mental Illness
CT Alliance to End Sexual Violence
Brain Injury Alliance of Connecticut

Associations/Societies/Boards
American Diabetes Association
American Association of Diabetes Educators
American Heart Association
American Stroke Association
American Lung Association
National Cancer Registrars Association
North American Association of Central Cancer Registries
Sickle Cell Disease Association of America
American Lung Association, New England Association of Asthma Educators
Society for Healthcare Epidemiology of America
American Cancer Society
Infectious Diseases Society of America
National Radon Safety Board
Tumor Registrars Association of Connecticut
Connecticut Association of School-Based Health Centers
Sickle Cell Disease Association of Southern Connecticut
CT Association for Healthcare at Home
Community Health Center Association of Connecticut
Association of Local Boards of Health
CT State Dental Association
Community Health Center Association of CT
CT Dental Hygiene Association
CT Business and Industry Association
CT Environmental Health Association
CT Public Health Association
CHD - CT Hospital Association
CT Association of School-Based Health Centers
CT American Waterworks Association
CT Association of Local Boards of Health
CT Physical Therapy Association
Tobacco and Health Trust Fund Board of Trustees
Connecticut Emergency Medical Advisory Board
State Medical Society
CT Chapter - American Academy of Pediatrics
Connecticut Academy of Nutrition & Dietetics

Foundations
Connecticut Health Foundation
Universal Health Care Foundation of Connecticut
The Donaghue Foundation
COMMUNITY SERVICE PROVIDERS

Senior Centers and Local YMCAs
Homeless Shelters
Inpatient Treatment Centers
March of Dimes
Community Action Agencies
Carey Consulting
Foodshare
AIDS Connecticut
The North Central Area Agency on Aging
Child Health and Development Institute of Connecticut
Qualidigm

ECOLOGICAL HEALTH ORGANIZATION, INC.
Health Equity Solutions
DataHaven
Eversource
Ecological Health Organization, Inc.
Global Health Systems Consultants, LLC
AFT Connecticut
CT Food Bank

HEALTHCARE PROVIDERS

Medical Providers
CT Hospital Systems
Yale-New Haven Health
Hartford HealthCare
Hartford HealthCare Central Region
Connecticut Children’s Medical Center
Griffin Health
Wheeler Clinic
CT RI Public Health Training Center
Yale University
Yale University School of Public Health
Center for Interdisciplinary Research on Aids

AFT Connecticut
CT Food Bank
Yale-New Haven Health Hartford HealthCare
Hartford HealthCare Central Region Connecticut Children’s Medical Center Griffin Health
Wheeler Clinic
Local Mental Health Authorities Community Health Centers
Southwest Community Health Center, Inc School-Based Health Centers
CT Poison Control Center Regional/Lead Treatment Center

ACADEMIC INSTITUTIONS
American Association of Medical Colleges State Universities / Medical Schools UCONN Health
South Central Region Council of Government CT-RI Public Health Training Center
Yale University
Yale University School of Public Health Center for Interdisciplinary Research on Aids
PROGRAMS

AirNow Flag Program
Nat’l Asthma Education & Prevention Program CDC Targeted Assessment for Prevention of HAIs National
Radon Proficiency Program
Green and Healthy Homes Initiative HUD Funded Programs
Lead & Healthy Homes
Cancer Surveillance, Epidemiology, and End Results Program
Diabetes self-management education Program Easy Breathing Program
Bike Walk Connecticut Connecticut Asthma Initiative Putting on AIRS Program
CT QuitLine and Tobacco Cessation Services
Dental Outreach to Connecticut Communities Program
Racial & Ethnic Approaches to Community Health
CT Screening, Brief Intervention, and Referral to Treatment Program
CT Mobil Crisis Intervention Services: 211 United Way Child Development Infoline Family
Wellness and Healthy Start
CTSDE Nutrition Standards
Data and Information
The DMHAS Center for Prevention Evaluation and Statistics (CPES) at UConn Health was established to support the Prevention and Health Promotion (PHP) Unit of the Department of Mental Health and Addiction Services (DMHAS) in its efforts through the identification, collection, analysis, interpretation and dissemination of data pertaining to substance abuse prevention, mental health, and health disparities.

STATE EPIDEMIOLOGY OUTCOMES WORKGROUP

The SEOW Data Portal is an interactive repository for behavioral health and related data. The goal of the SEOW Data Portal is to increase accessibility and utility of Connecticut's epidemiological data in support of a comprehensive public health approach to substance abuse prevention and health promotion. The SEOW Prevention Data Portal is developed with support from the Department of Mental Health and Addiction Services (DMHAS), and is a collaborative effort of the DMHAS Center for Prevention Evaluation and Statistics (CPES) at UConn Health, the State Epidemiological Outcomes Workgroup (SEOW), and the Connecticut Data Collaborative.
UNITED WAY

UW Categories

- FOOD
- MENTAL HEALTH
- HEALTH CARE
- HOUSING
- SUBSTANCE ABUSE
- YOUTH
- TRANSPORTATION
- UTILITY ASSISTANCE
- INCOME
- CHILDREN & FAMILIES
- CRISIS
- BASIC NEEDS
- LEGAL ASSISTANCE
- RE-ENTRY
- OLDER ADULTS

UW Programs

- CONNECTICUT CARE 4 KIDS
- EARNED INCOME TAX CREDIT
- FOOD STAMPS/SNAP/WIC
- HOUSING
- HEALTHY START
- HUSKY
- MEDICARE
- OPERATION FUEL
- PROPERTY TAX CREDIT AND RENT REBATE
- SAGA CASH
- SCHOOL BREAKFAST & LUNCH PROGRAM
- SOCIAL SECURITY DISABILITY - SSD
- SUPPLEMENTAL SECURITY INCOME - SSI
- TEMPORARY FAMILY ASSISTANCE - TFA
- UTILITY ASSISTANCE - CEAP

UW Specialized Directories

- BRIDGEPORT REENTRY GUIDE
- CAN NAVIGATOR
- CONNECTICUT ASSET BUILDING DIRECTORY
- GREATER HARTFORD REENTRY SERVICES
- HEALTH CARE RESOURCE GUIDE
- HIV/AIDS PREVENTION AND CARE GUIDE
- RESOURCE DIRECTORY FOR CONNECTICUT VETERANS
- ACTIVE DUTY, NATIONAL GUARD AND RESERVES
- WHERE TO TURN IN CONNECTICUT WHEN YOU BECOME
- UNEMPLOYED
- WATERBURY REENTRY SERVICES
- WINDHAM COUNTY REENTRY SERVICES
The Connecticut Department of Public Health Environmental Public Health Tracking (EPHT) Program is a part of a National Environmental Public Health Tracking Network with the goal of providing information to our communities to support their prevention and control of environmentally related health illness.

The program involves the ongoing collection, integration, and analysis of data about environmental hazards, exposure to environmental hazards, and health effects potentially related to contact to those hazards.

Users can explore information and view tables and charts about health and the environment in the state of Connecticut.
DATA AND INFORMATION

Quick Profiles: Connecticut

Choose a Different State:
State: Connecticut

Demographics  Screening & Risk Factors  Incidence  Prevalence  Mortality

Age-Adjusted Incidence Rates by Cancer Site, All Stages (2012-2016)

<table>
<thead>
<tr>
<th>Cancer Site</th>
<th>Connecticut Rate</th>
<th>USA Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Cancer Sites</td>
<td>472.4</td>
<td>448.0</td>
</tr>
</tbody>
</table>

CANCER IN CONNECTICUT
A Report on the Burden of Cancer in the State

Connecticut School-based Asthma Surveillance Report 2019

Oral Health Improvement Plan for Connecticut
2019-2024

School Calendar Years:
2012 - 2014
Connecticut Electronic Disease Surveillance System (CTEDSS)

CT Department of Public Health

Connecticut Pregnancy Risk Assessment Monitoring System (PRAMS)
Working to make Connecticut babies and mothers healthier

Incidence of Confirmed Infections by Year

It’s Your Best Shot! Connecticut Immunization Information System
Air Quality Index

The U.S. Environmental Protection Agency (EPA) has provided a scale called the Air Quality Index (AQI) for rating air quality. This scale is based on the National Ambient Air Quality Standards (NAAQS). The AQI is not routinely updated on weekends and during holiday periods. On those days, please call the Air Quality Index Hotline at (800) 249-1234 or (800) 638-4177 or visit the EPA AirNow website for the most current air quality information.

<table>
<thead>
<tr>
<th>Air Quality Index</th>
<th>Good</th>
<th>Moderate</th>
<th>Unhealthy for Sensitive Groups</th>
<th>Unhealthy</th>
<th>Very Unhealthy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Forecasts</td>
<td>Good</td>
<td>Moderate</td>
<td>Unhealthy for Sensitive Groups</td>
<td>Unhealthy</td>
<td>Very Unhealthy</td>
</tr>
<tr>
<td>Wednesday, March 04, 2020</td>
<td>Good</td>
<td>Moderate</td>
<td>Unhealthy for Sensitive Groups</td>
<td>Unhealthy</td>
<td>Very Unhealthy</td>
</tr>
<tr>
<td>Thursday, March 05, 2020</td>
<td>Good</td>
<td>Moderate</td>
<td>Unhealthy for Sensitive Groups</td>
<td>Unhealthy</td>
<td>Very Unhealthy</td>
</tr>
</tbody>
</table>

DEPARTMENT OF PUBLIC HEALTH
Drinking Water Section

Introduction to the Drinking Water Section
The Performance Dashboard is based on the *Results Based Accountability™* framework and specifically displays:

a. **Population Indicators** – identify the health status of Connecticut residents for which DPH, other state and local agencies, and community partners all share responsibility.

b. **Performance Measures** – tell whether DPH interventions that affect population indicators are achieving objectives, and if our agency's actions are helping to improve health.

c. **Strategies** – are those that DPH and its partners are using to improve health to meet targets for improvement.

d. **Current Year Priority Strategies and Actions** – are detailed for strategies selected by the SHIP Action Teams to receive attention in the current year and that are more fully developed in the form of Action Agendas.
THE HEALTH OF MEDICAID AND MEDICARE RECIPIENTS IN CONNECTICUT

Results of the 2013-2016 Behavioral Risk Factor Surveillance Survey

March 2019

Connecticut Behavioral Risk Factor Survey
Prevalence Estimates for Risk Factors and Health Indicators

Selected Summary Tables 2018

CONNECTICUT YOUTH TOBACCO SURVEY RESULTS
2017 Surveillance Report

Analysis of Health Indicators for Connecticut Health Districts and Departments

Results from the Connecticut Behavioral Risk Factor Surveillance Survey

The Health of Connecticut Workers
An Analysis of Health Indicators from the 2014-2016 Connecticut Behavioral Risk Factor Surveillance Survey by Industry and Occupation

March 2019

Selected Health Indicators Among Adult Men in Connecticut: Results of the Connecticut Behavioral Risk Factor Surveillance System (CT BRFSS)

Results of a Pilot Post-BRFSS (Behavioral Risk Factor Surveillance System) Survey in the City of Hartford, Connecticut

Carol L. Stone,¹ Randal ZuWallack,² Tung Nguyen,³ using anonymous responses from randomly selected adult volunteers in Hartford, Connecticut
The CT Kids Report Card is a Results-Based Accountability (RBA) tool developed and maintained by the legislature's Committee on Children in accordance with Public Act 11-109.

The report card, presented utilizing Results Scorecard software from Results Leadership Group (RLG), currently contains trend data on indicators that have been selected to measure progress towards the achievement of The CT Kid’s Report Card Results Statement: “All Connecticut children grow up in a stable living environment, safe, healthy, and prepared to lead successful lives”.

DATA AND INFORMATION

State Vital Records Office
Connecticut Registration Report

Births, Deaths, and Marriages

CT Violent Death Reporting System

Violent Deaths: Connecticut Data
2015 to 2018
# DATA AND INFORMATION

## CT SCHOOL HEALTH SURVEY

Connecticut School Health Survey  
Youth Behavior Component  
Student Questionnaire

## Connecticut Youth Tobacco Survey

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**CONNECTICUT DEPARTMENT OF PUBLIC HEALTH**  
STATE WIC PROGRAM  
2017 Monthly WIC Participation  
by Participant Category

<table>
<thead>
<tr>
<th>STATEWIDE TOTALS</th>
<th>QUARTER 1</th>
<th>QUARTER 2</th>
<th>QUARTER 3</th>
<th>QUARTER 4</th>
<th>MONTHLY AVERAGE</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>JAN</td>
<td>FEB</td>
<td>MAR</td>
<td>APR</td>
<td>MAY</td>
<td>JUN</td>
</tr>
<tr>
<td>WOMEN</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Pregnant</td>
<td>5,437</td>
<td>5,282</td>
<td>5,336</td>
<td>5,382</td>
<td>5,622</td>
<td>5,588</td>
</tr>
<tr>
<td>- Breastfeeding</td>
<td>2,943</td>
<td>2,924</td>
<td>2,962</td>
<td>2,983</td>
<td>2,973</td>
<td>2,937</td>
</tr>
<tr>
<td>- Fully breastfed</td>
<td>909</td>
<td>897</td>
<td>882</td>
<td>892</td>
<td>886</td>
<td>882</td>
</tr>
<tr>
<td>- Partially breastfed</td>
<td>2,054</td>
<td>2,027</td>
<td>2,063</td>
<td>2,091</td>
<td>2,067</td>
<td>2,075</td>
</tr>
<tr>
<td>- Postpartum</td>
<td>2,404</td>
<td>2,374</td>
<td>2,296</td>
<td>2,275</td>
<td>2,327</td>
<td>2,345</td>
</tr>
<tr>
<td>INFANTS</td>
<td>12,846</td>
<td>12,596</td>
<td>12,778</td>
<td>12,810</td>
<td>12,819</td>
<td>12,836</td>
</tr>
<tr>
<td>- Breastfed</td>
<td>4,526</td>
<td>4,396</td>
<td>4,471</td>
<td>4,514</td>
<td>4,499</td>
<td>4,506</td>
</tr>
<tr>
<td>- Fully breastfed</td>
<td>1,071</td>
<td>1,052</td>
<td>1,080</td>
<td>1,094</td>
<td>1,110</td>
<td>1,083</td>
</tr>
<tr>
<td>- Partially breastfed</td>
<td>3,455</td>
<td>3,344</td>
<td>3,411</td>
<td>3,420</td>
<td>3,380</td>
<td>3,423</td>
</tr>
<tr>
<td>- Formula Fed</td>
<td>8,320</td>
<td>8,200</td>
<td>8,307</td>
<td>8,296</td>
<td>8,320</td>
<td>8,330</td>
</tr>
<tr>
<td>CHILDREN</td>
<td>24,362</td>
<td>23,080</td>
<td>23,702</td>
<td>23,698</td>
<td>24,147</td>
<td>24,119</td>
</tr>
<tr>
<td>- Age 1</td>
<td>7,662</td>
<td>7,429</td>
<td>7,399</td>
<td>7,355</td>
<td>7,540</td>
<td>7,580</td>
</tr>
<tr>
<td>- Age 2</td>
<td>6,311</td>
<td>6,154</td>
<td>6,221</td>
<td>6,085</td>
<td>6,365</td>
<td>6,365</td>
</tr>
<tr>
<td>- Age 3</td>
<td>5,537</td>
<td>5,360</td>
<td>5,328</td>
<td>5,347</td>
<td>5,435</td>
<td>5,434</td>
</tr>
<tr>
<td>- Age 4</td>
<td>4,852</td>
<td>4,737</td>
<td>4,754</td>
<td>4,711</td>
<td>4,798</td>
<td>4,754</td>
</tr>
</tbody>
</table>

| GRAND TOTALS     | 47,992 | 46,856 | 47,074 | 47,148 | 47,886 | 47,859 | 47,610 | 48,424 | 48,254 | 48,641 | 48,106 | 47,433 | 47,771 | 100.0% |
DATAHAVEN REPORTS

2017 Connecticut City Neighborhood Profiles
Neighborhood demographic and health data for the largest cities in Connecticut

2016 Connecticut State Legislative District Profiles
Maps and PDFs of the latest Census and DataHaven Survey data for legislative districts throughout CT

500 Cities Project: Connecticut 2017 Edition
View neighborhood data for all CT towns included in the 2017 RWJF and CDC 500 Cities dataset (2015 data)

Waterbury 2016 Zip Code Profiles
View and explore data for Waterbury zip codes

DataHaven Connecticut Wellbeing Data Mapper
Explore social, health, and well-being data on all Connecticut neighborhoods

500 Cities Project: Connecticut 2016 Edition
View neighborhood data for all CT towns included in the 2016 RWJF and CDC 500 Cities dataset (2014 data)
CT HOSPITAL INFORMATION MANAGEMENT EXCHANGE

**ChimeData** offers data analyses and information products and services to help hospitals gauge their performance in quality improvement and patient safety, assess their financial health, track and trend the utilization of key hospital services, and meet regulatory requirements.

Through its comprehensive analyses, **ChimeData** supports CHA advocacy by determining the impact of proposed and new policy issues on Connecticut hospitals, and provides meaningful information to help the public make informed healthcare decisions and choices.
2017 Commercial Results Summary

Number of CT healthcare quality measures rated:
- Above Average: 5
- Average: 11
- Below Average: 5
- Not Rated: 4

2017 Summary Results for Care Delivered to Patients with Commercial Health Plans

Number of healthcare organizations rated:
- Connecticut Average: 4.4%
- Above Average: 2
- Average: 7
- Below Average: 9
- Not Rated: 1

Arthroscopic Knee

<table>
<thead>
<tr>
<th>Facility</th>
<th>Typical Cost</th>
<th>Cost Breakdown</th>
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</thead>
<tbody>
<tr>
<td>Center For Advanced Orthopedic</td>
<td>$4,380</td>
<td></td>
</tr>
<tr>
<td>Surgical Center</td>
<td>$4,389</td>
<td></td>
</tr>
<tr>
<td>Roic Associates Surgery Center</td>
<td>$4,437</td>
<td></td>
</tr>
<tr>
<td>Center of Connecticut</td>
<td>$4,495</td>
<td></td>
</tr>
<tr>
<td>Surgery Center</td>
<td>$4,839</td>
<td></td>
</tr>
<tr>
<td>Surgery Center</td>
<td>$4,984</td>
<td></td>
</tr>
<tr>
<td>Street Ambulatory Surgery Center</td>
<td>$5,328</td>
<td></td>
</tr>
<tr>
<td>Ivy Ambulatory Surgery Center</td>
<td>$5,497</td>
<td></td>
</tr>
<tr>
<td>Hospital</td>
<td>$5,589</td>
<td></td>
</tr>
<tr>
<td>Provider</td>
<td>Above Average</td>
<td>Average</td>
</tr>
<tr>
<td>----------------------------------------</td>
<td>---------------</td>
<td>---------</td>
</tr>
<tr>
<td>Alliance Medical Group / Waterbury</td>
<td>5</td>
<td>11</td>
</tr>
<tr>
<td>Community Medical Group</td>
<td>9</td>
<td>10</td>
</tr>
<tr>
<td>Day Kimball Healthcare</td>
<td>5</td>
<td>3</td>
</tr>
<tr>
<td>Eastern Connecticut Health Network</td>
<td>3</td>
<td>12</td>
</tr>
<tr>
<td>Griffin Health</td>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td>Integrated Care Partners / Hartford</td>
<td>4</td>
<td>8</td>
</tr>
<tr>
<td>Middlesex Hospital</td>
<td>8</td>
<td>6</td>
</tr>
<tr>
<td>Northeast Medical Group</td>
<td>5</td>
<td>19</td>
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<tr>
<td>Other Healthcare Providers</td>
<td></td>
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<tr>
<td>ProHealth Physicians</td>
<td>11</td>
<td>11</td>
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<tr>
<td>Saint Francis Hospital and Medical</td>
<td>10</td>
<td>12</td>
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<tr>
<td>Saint Mary's Hospital</td>
<td></td>
<td>9</td>
</tr>
<tr>
<td>Soundview Medical Associates</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>St. Vincent's Medical Center</td>
<td>5</td>
<td>8</td>
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<tr>
<td>Stamford Health</td>
<td>9</td>
<td>10</td>
</tr>
<tr>
<td>Starling Physicians</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>Western Connecticut Health Network</td>
<td>7</td>
<td>13</td>
</tr>
<tr>
<td>Westmed Medical Group</td>
<td>4</td>
<td>4</td>
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<tr>
<td>Yale Medicine</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Funding Sources
STATE PUBLIC FUNDS

General Fund:
The Connecticut General Fund accounts for all receipts and disbursements not explicitly included in other funds, including jointly financed State-Federal programs and individual restricted accounts. The General Fund finances the state’s general operations under a budget authorized by the General Assembly in its annual Appropriations Act. A fund is defined as a financial and accounting entity with a self-balancing set of accounts recording cash and other financial resources together with liabilities and residual equities or balances.

Insurance Fund:
The Connecticut Insurance Fund supports the operation of the Department of Insurance and the Office of the Healthcare Advocate, and specific programs under the Department of Public Health. The Department assesses domestic insurance companies and entities to cover the cost of these agencies. The assessment is around the total amount of premium taxes paid to the Department of Revenue Services by domestic insurance companies and entities for the preceding year.

The Insurance Fund pays for six DPH accounts. One, the Immunization Services account, is funded under a Health and Welfare Fee. The assessment is calculated based on the number of insured/enrolled lives in Connecticut for which health insurance was provided during the previous year by each entity, multiplied by a factor necessary to recoup the entirety of the Immunization Services account's appropriation. The Public Health Fee funds the rest: (1) Needle and Syringe Exchange, (2) AIDS Services, (3) Breast and Cervical Cancer Detection, (4) X-ray Screening and Tuberculosis Care, and (5) Venereal Disease Control. The Public Health Fee is imposed on domestic health insurance entities, except third-party administrators and exempt insurers, to fully fund the appropriations of the accounts listed above. The fee is calculated based on the number of insured/enrolled lives in Connecticut for which health insurance was provided during the previous year by each entity, multiplied by a factor necessary to recoup the entirety of the appropriations.

The Insurance Fund also supports the Children's Health Initiatives account supports a variety of programs and staff working to improve children’s health in the state:
1. Local health departments for lead poisoning prevention and control - Formula grants are paid to local health departments and districts per CGS 19a-111j to help finance lead poisoning prevention and control activities. The basis for grants allocations is the local health departments'/districts' confirmed childhood lead poisoning cases in the prior calendar year.
2. Regional Childhood Lead Treatment Centers - Hospital-based regional treatment centers in New Haven and Hartford provide lead screening, clinical case management, and medical follow-up for lead-poisoned children who are underinsured statewide.
3. Child Sexual Abuse Clinics - Hospital-based clinics provide medical evaluations, interviews, referrals, and other support services for children suspected of being victims of sexual abuse and their families.
4. Case Management to Pregnant and Parenting Women - Serves women at risk for the use of illegal drugs or alcohol, domestic violence (including coercion or intimate partner violence), and child welfare system involvement or history.

5. Asthma Programs – A program provides community-based support to children, families, and physicians in the management of childhood asthma. Other program trains internal medicine residents in evidenced-based as well as systems-based medicine.

6. Treatment of Newborns - Grants for regional and sickle cell disease treatment centers for newborns.

7. Children with Special Health Care Needs - Supports regional medical homes that provide coordinated health care services for children with special health care needs and their families, as well as respite care.

**Tobacco Tax Revenue:**

Effective July 1, 1989, a tax was imposed on all tobacco products held in this state by distributors. The rate of tax is 20% of the wholesale sales price. The wholesale sales price means the price at which the tobacco product is purchased or acquired. Connecticut received $500.8 million (estimated) in revenue from tobacco settlement payments and taxes ($22.3 Million) in the fiscal year 2019. Of this, the state allocated $0 in state funds to tobacco prevention in the fiscal year 2019, 0% of the Centers for Disease Control and Prevention’s annual spending target. Smoking-related health care costs: $2.03 billion per year. Smoking-related losses in productivity: $1.25 billion per year.

**Master Tobacco Settlement Agreement (MSA):**

It creates a tobacco prevention foundation and disbands tobacco-industry initiatives. The MSA created the American Legacy Foundation (The Truth Initiative), a research and educational organization that focuses its efforts on preventing teen smoking and encouraging smokers to quit. While the MSA states that its primary purpose is to decrease youth smoking and promote public health, it does not contain any provisions requiring states to allocate settlement revenues to tobacco prevention and cessation. As a result of decisions by state legislatures, less than one percent of over $126 billion in settlement payments and billions in tobacco tax revenue has been earmarked for tobacco control and prevention.
ENVIRONMENTAL REMEDIATION FUNDS

Brownfield Municipal Grant Program:
The Brownfield Municipal Grant Program is a competitive program for municipalities and municipal entities, designed to assist with brownfield redevelopment projects in their communities that will make a significant economic impact. Only municipalities and municipal entities are eligible to apply.

Brownfield Loans:
The Targeted Brownfield Development Loan Program provides loan financing to eligible entities for costs associated with the investigation, assessment, remediation, and development of a brownfield.

Brownfield Planning Grants:
The goal of this program is to help eligible applicants develop a comprehensive implementation plan for the remediation and redevelopment of neighborhoods, districts, corridors, downtowns, waterfront zones, or other areas burdened with multiple brownfields.

Liability Relief Programs:
Explore opportunities for developers to be afforded liability relief from the responsibility to investigate and remediate off-site contamination, to streamline the redevelopment of brownfield properties, and to provide municipalities with aid to facilitate redevelopment and cleanup of such brownfield properties.

Brownfield Tax Increment Financing:
DECD and Connecticut Innovations work with developers and municipalities to structure Tax Increment Financing (TIF) mechanisms to facilitate Brownfield redevelopment projects funding through future property taxes.

Brownfield Land Bank Program:
Brownfield Land Banks are nonstock corporations that advance the remediation and redevelopment of brownfield sites by providing specialized assistance to municipalities. Land Banks acquire, retain, remediate and sell brownfields in the state for the benefit of municipalities, educating government officials, community leaders, economic development agencies, and nonprofit organizations on best practices for redeveloping brownfields.
AFFORDABLE HOUSING AND HOME IMPROVEMENTS

Rehabilitation Mortgage Loan:
This program of the quasi-public Connecticut Housing Finance Authority's (CHFA) is available to low- and moderate-income first-time homebuyers using a CHFA mortgage and for refinancing when repairs are necessary.

Energy Conservation, Lead Abatement, and Home Repairs Loans
The Department of Economic and Community Development (DECD) offers financial support for home improvements. The Department also administers a federal program run through municipalities, which may have additional funding for home repairs.

Small Cities Community Development Block Grant Program (CDBG)
The DECD also administers a federally-funded program that gives annual grants to towns for affordable housing and community revitalization.

Connecticut Weatherization Assistance Partnership
The DSS administers this program with utility companies and local Community Action Agencies. The program assists low- with incomes up to 200% of the federal poverty guidelines to reduce their energy bills by making their homes more energy-efficient.

Energy Assistance Program
The Department of Social Services (DSS) provides low-income homeowners to help to make improvements in their home's energy efficiency.

Rebates for Installing Solar Photovoltaic Systems
The Connecticut Clean Energy Fund (CCEF) offers solar panels or cells to Connecticut residents to use in their homes. The incentives are available only through participating installers that have been designated by CCEF.
**FEDERAL FUNDS**

**Mortgage Insurance Programs:**
The Department of Housing and Urban Development (HUD) administers the mortgage insurance program for homes that need rehabilitation. It also funds loan and grant programs, which the state or local governments administer, that may be used for home repairs.

**Loans and grants for home repairs:**
The U.S. Department of Agriculture (USDA) and the Department of Veterans Affairs also offer loans and grants for home repairs, respectively, based on the town of residence and veteran's disability.

**Chronic Diseases and their Risk Factors:**
CDC's National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP) supports a variety of activities that improve the nation's health by preventing chronic diseases and their risk factors. Specifically, the NCCDPHP finds out how chronic diseases affect populations in the United States, studies interventions to find out what works best to prevent and control chronic diseases, and funds and guides states, territories, cities, and tribes to use interventions that work.

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**Preventive Health and Health Services (PHHS) Block Grant Program**
The PHHS Block Grant provides federal funding for all fifty states and other U.S. territories, giving recipients the ability to address prioritized public health needs in their jurisdictions in collaboration with local and tribal public health agencies and organizations. Recipients set their own goals and program objectives and implement local strategies to address national health priorities. The PHHS Block Grant Program allows states to address emerging health issues and gaps such as decreasing premature death and disabilities, working to achieve health equity and eliminate health disparities and support local programs to achieve healthy communities. The program also establishes data and surveillance systems to monitor the health status of targeted populations.
Health Systems Access and Quality Improvement

The Health Resources and Services Administration (HRSA), within the U.S. Department of Health and Human Services, is the primary federal agency responsible for improving access to health care and enhancing health systems of care for people who are geographically isolated and/or economically or medically vulnerable. HRSA programs help those in need of high-quality primary health care, support the training of health professionals, and guides the deployment of providers to areas of high need.

Improve access to quality health services: 1) Increase and improve the capacity of health care services, systems, and infrastructure. 2) Improve the quality and effectiveness of health care services and systems. 3) Connect HRSA patient populations to primary care and preventive services.

Foster a health care workforce able to address current and emerging needs: 1) Advance the competencies of the health workforce. 2) Improve the distribution and diversity of the health care workforce.

Achieve health equity and enhance population health: 1) Leverage community partnerships and stakeholder collaboration to achieve health equity and enhance population health. 2) Promote health and disease prevention across populations, providers, and communities.
**Ryan White HIV/AIDS** $2.4 billion to support cities, states, and local community-based organizations to provide care and treatment, medication, and support services to people living with HIV. HRSA has taken up the charge of further stopping the spread of the disease through a comprehensive system of HIV care. The Strategy has four primary goals 1) to reduce new HIV infections, 2) to increase access to care and optimize health outcomes, to reduce HIV-related health disparities and health inequities, and to achieve a more coordinated national response to the HIV epidemic.

**Maternal & Child Health** As one of the largest federal block grant programs ($1.3 billion), Title V is a key source of support for promoting and improving the health and well-being of the nation's mothers, children, including children with special needs, and their families.

**Rural Health Policy** $318 million to promote better health care service in rural America. **Healthcare Systems** $134 million to provide oversight to the national: 1) organ and tissue donation and transplantation systems; 2) poison control centers; 3) Hansen's disease program; 4) drug discount program; and, 5) injury compensation programs.

**Primary Health Care** $5.6 billion for affordable, accessible, quality, and cost-effective primary health care services.

**Health Workforce** $1.6 billion to educate, train, and connect health care professionals to communities in need.

**FNS Nutrition Programs**
The Food and Nutrition Service (FNS) works to end hunger and obesity through the administration of the following federal nutrition assistance programs. In partnership with state and tribal governments, FNS programs serve one in four Americans every year. Working with our public, private, and nonprofit partners, the FNS increases food security and reduces hunger by providing low-income children and adults access to food, a healthful diet, and nutrition education.
Special Supplemental Nutrition Program for Women, Infants, and Children

- Summer Food Service Program
- National School Lunch Program
- Special Milk Program
- School Breakfast Program
- Team Nutrition
- Fresh Fruit and Vegetable Program

Food Distribution Programs/USDA Foods

- Farmers Market Nutrition Program
- Senior Farmers’ Market Nutrition Program
- Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)

Child Nutrition and Supplemental Assistance Programs

- Food Distribution Program on Indian Reservations
- Commodity Supplemental Food Program
- The Emergency Food Assistance Program
- USDA Foods in Schools

Affordable Housing, Energy, and Development.

HUD awards discretionary funding to initiatives such as Affordable Housing Development and Preservation, Community and Economic Development, Environment and Energy, Fair Housing, Homelessness, Homeownership, Rental Assistance, and Supportive Housing and Services.

Environmental Protections

Nearly half of the federal Environmental Protection Agency (EPA) goes into grants to state environmental programs, nonprofits, educational institutions, and others. They use the money for a wide variety of projects, from scientific studies that help make decisions to community cleanups. Research funding supports the study of environmental issues, sponsor partnerships, and teach the public about how to protect the environment. The following areas receive funding from EPA:
Air: EPA supports research and education projects that address air quality and the impact of pollution on human health. That includes concerns with indoor air quality due to asbestos, mold, radon, and wood burning. Funding goes to projects that support the development of criteria to diminish air pollutants, greenhouse emissions, and other hazardous particles.

Chemicals and Toxics: EPA funds science to develop ways to produce safer chemicals and regulate harmful substances. That includes information about specific chemicals, how to handle spills, and radiation protection.

Greener Living: Grants are issued to develop further understanding of issues that hurt the planet and help reduce the environmental footprint. That includes projects for sustainable living like smart growth, reduction of water use, and improved use of green spaces. EPA also funds better transportation options that increase fuel efficiency and reduce emissions. Projects that limit the amount of waste and improve recycling at home and business are also part of greener living priorities.

Health: EPA provides information on the environmental hazards such as the effects, risk, and exposure to common pollutants (bed bugs, lead, mold, pesticides, and radon) and how they threaten health.

Land, Waste, and Cleanup: EPA regulates and reduces wastes and helps clean up when wastes or harmful substances pollute the land we live on, such as landfills, hazardous waste, and plastic.

Science: EPA funds enhance scientific methods, modeling, data, and tools for environmental research as a critical foundation for environmental policies.

Water: EPA research supports efforts under the Clean Water Act and Safe Drinking Water to protect drinking water quality, watersheds, and rivers, wastewater treatment, stormwater, and runoff infrastructure.
**CONNECTICUT PHILANTHROPY FUNDS**

*Connecticut Council for Philanthropy*

The Connecticut Council for Philanthropy (CCP) is an association of grantmakers committed to promoting and supporting effective philanthropy for the public good. CCP’s members listed below are foundations (private, corporate, community), business and corporate giving programs, bank trusts, donor-advised funds, individual philanthropists, and those serving the philanthropic sector. CCP members annually grant more than $1.2 billion from assets of more than $8.2 billion.

### Foundations

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### Public Charities

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<td>Foundation for Community Health</td>
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### Corporate Foundations

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### Community Foundations

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