



Delta Dental of Colorado Foundation Grant Guidelines: Summer 2026

At Delta Dental of Colorado Foundation (DDCOF), we know oral health is essential to overall health and well-being. Yet many Coloradans face barriers to care based on who they are, where they live, or what they earn. That's why we're committed to advancing oral health equity across the state.

Together with our community partners, we're working towards a Colorado where everyone has the opportunity for a healthy mouth and a healthy life. Join us in shaping a healthier, more equitable Colorado — one smile at a time.

How we define oral health equity

We align with Colorado Department of Public Health & Environment Office of Health Equity's definition:

“Health equity is when everyone, regardless of background, has the opportunity to thrive. It requires removing barriers like poverty and improving access to education, healthcare, transportation, and employment.”

What the data shows us

At Delta Dental of Colorado Foundation, we use data to inform our funding strategies and to ensure our resources are directed toward communities most impacted by oral health inequities. In Colorado, oral health outcomes continue to reflect broader health inequities — shaped by race, ethnicity, income, geography, language, and age. These disparities are especially pronounced among young children and older adults, the two populations at the center of our prevention efforts. By grounding our work in data, we aim to advance oral health equity and create lasting change across Colorado.

Telling your story

We know that data tells a story — and your community's story is an essential part of the broader picture. To support your efforts, we invite you to explore our [Oral Health Equity Dashboard](#). This tool provides valuable, localized data to help you better understand the needs of your community, identify disparities, and strengthen your grant proposals with evidence-based insights. By combining your on-the-ground knowledge with data-driven context, we can work together to advance health equity across Colorado.

Our funding priorities and approach

As a small but committed oral health equity foundation, we recognize that our funding capacity differs from that of large national funders. Over the course of our 2025-2029 strategic plan, we anticipate awarding \$1.7 million annually to programs in Colorado. Grants will be offered for one-year or multiyear grants of up to three years per award. These annual funding opportunities will continue through 2029, and we expect to issue multiple requests for proposals (RFPs) during this period. While funding levels may shift in response to evolving needs and opportunities, we anticipate distributing a cumulative total of up to \$18 million by the end of 2029.

We share this information to help applicants plan thoughtfully and to promote transparency in our grantmaking process. Please note that the full \$18 million is not available through this 2026 RFP cycle.

To support a diverse range of partners and initiatives, we offer both one-year and multiyear grant options. We encourage organizations that are new to Delta Dental of Colorado Foundation, or those proposing pilot programs that are still developing a strong evidence-base or emerging as promising practices, to apply for a one-year grant. These applicants are welcome to reapply in future cycles and may become eligible for multiyear funding in subsequent years if strong outcomes are demonstrated.

Organizations with an established history of partnership with Delta Dental of Colorado Foundation may choose to apply for multiyear grants. However, all funding decisions are based on alignment with our mission, potential for impact, and available resources. As such, a request for multiyear funding does not guarantee a multiyear award. In some cases, even long-standing partners may receive one-year grants.

Grant guidelines

This grant opportunity prioritizes the following focus areas from our strategic framework:

Access
Goal: Increase access to oral health services by expanding Colorado’s oral health workforce through investment in Oral Health Career Pathways: Moving Participants to the Next Stage.
Prevention
Goal: Ensure that children (ages 0-10) preventive oral health services that lead to completed care and ongoing connection to a dental home, particularly for those facing the greatest barriers. We prioritize efforts that deliver services in trusted community settings, strengthen follow through navigation and care coordination, and integrate oral health into broader health and early childhood systems.

Applications from organizations and institutions whose proposals strongly align to the defined funding priorities, occur in-state and benefit Coloradans will be considered. Applications will be accepted for only one focus area. We encourage grant applications to highlight diverse approaches that align with our funding priorities and aim to improve oral health outcomes across Colorado communities. Proposals should demonstrate impact toward our strategic focus areas of Access and Prevention.

Eligible nonprofits may request a maximum of \$75,000 per year through:

- Access funding: one-year grants only, or
- Prevention funding: one- to three-year grants.

Eligible organizations include:

- Those classified as tax-exempt under section 501(c)(3) or 501(c)(4).
- Tax-supported Colorado organizations, including state or local governments or schools.
- New or emerging organizations without 501(c)(3) status that apply through a tax-exempt organization acting as a fiscal sponsor. These organizations must provide written documentation of the relationship with the fiscal sponsor.



What We Will Not Fund Under the Grant Opportunity

- Grants to individuals
- Operating deficits or retirement of debt
- Building endowments or reserve funds
- Capital campaigns, building construction, renovations, or other capital expenditures*
- Significant medical or dental equipment costs (\$15,000 or greater)*
- Membership or annual fund campaigns
- Grants for medical, scientific, or academic research
- Lobbying activities, including supporting political candidates or voter registration drives
- Legal services
- Scholarships to individuals applying for a grant on their own
- Patient assistance funds that cover an individual's medical, dental, mental health, or pharmaceutical costs
- For-profit entities
- Fundraising campaigns or events
- Water filling stations
- Public policy work**
- Transportation vehicles or significant transportation services, such as vans or buses
- Organizations that require program participants to engage in religious activities or that use grant funds to proselytize or advance a specific religious doctrine

*If you seek funding for capital costs and expenditure, please explore our [mission-related investment opportunities](#).

**While public policy plays an important role in advancing oral health, this funding opportunity does not support policy-focused work. Organizations with policy ideas are encouraged to reach out separately.

When applying, keep in mind

- Applications that do not clearly align to the two focus areas, Access and Prevention, will not be considered.
- The application must include specific oral health-related goals/priorities, activities and expected impact within the grant period.
- Applicants may request support for one year or up to three years (multiyear request).
- Requests typically should not be more than 20 percent of the organization's total fiscal year budget. This helps ensure the project is financially sustainable and appropriately scaled.
- In general, only one application per organization will be accepted during this grant cycle.
- We expect a high volume of strong proposals and have limited funding available. Not all qualified applications will be funded. We encourage applicants to be thoughtful, concise, and strategic in their submissions.
- To ensure the best possible alignment with our focus areas and funding criteria, all applicants must connect with a senior program officer before submitting a proposal. This conversation can help clarify fit, strengthen your application, and ensure your project is positioned for success in this highly competitive grant cycle.
- Please see our [FAQs](#) for clarification on common questions.



Our grants management system, Benevity, is a link-based platform — no login is required. You can start your application, save your progress, and return to it anytime by using the same link (our tip is to “favorite” this link so that you can return to it easily). For more information about our grants management platform and interface, please reference our webinar.

Next steps

- Begin by reviewing the grant guidelines, [FAQs](#), [Benevity Application Task Aid](#), and [recorded webinar](#).
- Apply by clicking [here](#).
- **Applications are due by 11:59 PM on Tuesday, September 8, 2026.** Late or incomplete applications will not be considered.

Key dates

- **August 6–September 8:** RFP process is open.
- **September 8–October 14:** Program officers conduct follow-up calls, site visits, and email outreach for additional information, as needed.
- **Early December:** Award notices are emailed to funded applicants.
- **January 1, 2027:** Grant period for funded projects begins.

Access

Oral Health Career Pathways: Moving Participants to the Next Stage

Goal: Increase access to oral health services by expanding Colorado’s oral health workforce.

In Colorado, the oral health workforce does not reflect the diversity of the communities most impacted by oral health disparities. These disparities disproportionately affect people from underserved communities, including people of color, rural residents, low-income individuals, and first-generation students. While increasing awareness of oral health careers remains important, experience shows that awareness alone is not sufficient to move individuals into training and ultimately into the workforce.

DDCOF seeks to fund programs that go beyond awareness by helping individuals make meaningful progress along oral health career pathways. This includes supporting individuals at different entry points, from preparing to enter training programs to persisting in training, building additional skills, or transitioning into the workforce, while reducing barriers along the way.

This is a one-year funding opportunity designed to support participant progression to the next stage of the pathway. Competitive proposals will clearly describe how participants will be supported within a defined stage and how they will be connected to subsequent opportunities (for example, preparation, training, or employment), based on where they enter. Applicants should include realistic plans for tracking participant engagement and documenting progress toward the next steps. Demonstrated partnerships or coordination with other organizations to facilitate participant transitions are strongly encouraged. Programs focused solely on awareness, without intentional pathways or clear connections to next steps, are unlikely to be competitive.



Access to Care

Oral Health Career Pathways: Moving Participants to the Next Stage

Oral Health Career Pathway Stages and Examples of Fundable Activities

We invite proposals that strengthen oral health career pathways and support a workforce that reflects the diversity of Colorado's communities. Eligible applicants may be school districts, high schools, career and college readiness programs, community-based organizations, higher education institutions, and workforce development partners. Programs should focus on helping individuals from historically underrepresented communities move forward along oral health career pathways, from entry into training through finishing training and/or into employment, while reducing barriers along the way. Participants may include high school students, adult learners, and individuals transitioning from other careers. Programs should be designed to meet participants where they are and support advancement based on their starting point.

Because this is a one-year funding opportunity, proposals should focus on helping people take the next step at key transition points, for example, getting into training, staying on track, building new skills, or preparing for a job, rather than early awareness activities. Funding may support a range of efforts that contribute to this goal.

Examples of eligible programs and activities may include, but are not limited to:

- **Awareness to Preparation for Training: Introducing oral health careers and supporting initial steps towards training**
 - Career exploration workshops, presentations, or exposure activities (for example, panels, site visits, shadowing) for high school students, adult learners, and individuals exploring career transitions.
 - Individual advising or career navigation to assess interest, prior experience, and readiness.
 - Support with pathway planning, including identifying training programs aligned with participants' goals and backgrounds.
 - Application support, including completing applications, personal statement, and financial aid forms.
 - Referrals or "warm handoffs" to organizations providing pre-requisite coursework, bridge programs, or training preparation.
- **Preparation for Training to Entry into Training Program: Helping participants successfully access and enroll into training programs**
 - Pre-requisite coursework support (for example, tutoring), including support tailored to adult learners returning to education.
 - Bridge or refresher programming for individuals re-entering education or transitioning from another field.
 - Application completion and enrollment support.
 - Test preparation (if applicable).
 - Financial navigation (for example, FAFSA and financial aid file completion, scholarship applications, and employer-sponsored education opportunities).
 - Coordination with training programs to support successful admissions and program start.
- **Training to Completion: Supporting participants to persist in and complete training programs**
 - Academic support and tutoring.
 - Case management, coaching, or mentoring tailored to diverse participants needs.
 - Financial assistance (for example, emergency support, stipends, and resource navigation).
 - Wraparound services to reduce barriers (for example, transportation, childcare, and scheduling flexibility).
 - Peer support or cohort-based programs.

Access to Care

Oral Health Career Pathways: Moving Participants to the Next Stage

- **Completion to Workforce Entry: Supporting Transition into employment in the Colorado oral health field**
 - Job readiness and career coaching (for example, resume development and interview preparation).
 - Job placement support or connections to employers.
 - Assistance with licensure or certification processes (if applicable).
 - Networking opportunities with employers, especially in underserved or rural communities.
 - Guidance on evaluating job offers.

These examples are intended to help applicants understand the types of programs that align with our focus. We encourage practical, community-informed proposals that support people at key transition points and help build a more diverse oral health workforce and improve access to care across Colorado.

Applicants are not expected to address all stages of the pathway, however, competitive proposals will clearly define their role within a specific stage and demonstrate how participants will be supported in progressing to the next stage through intentional design, partnerships, and coordinated referrals.

Indicators of progress:

Proposals funded under this initiative should help individuals make meaningful progress along oral health career pathways, tailored to where they are in their career journey. This may include supporting participants as they prepare for training, enroll in or complete programs, enter the workforce, or advance within their careers. We do not expect any single organization to cover the full pathway, rather, programs may concentrate on a particular stage while contributing to clearer, more connected transitions to the next. These investments contribute to a broader effort to expand and strengthen smooth, end to end pathways across the field.

1. Stronger connections between programs and partners

Stronger relationships between schools, training programs, community organizations, and employers that make it easier for participants to move from one step to the next, especially in underserved and rural communities.

2. More people taking the next step

Participants advancing along the pathway based on their starting point. This may include moving from career exploration to training preparation, from preparation into training, from training to completion, from completion into employment, or advancing within the workforce.

3. More people staying in and finishing training

Participants remain enrolled, stay on track, and successfully complete training programs, including those facing financial, academic, or life challenges.

4. More people entering and advancing in oral health careers

Participants transition into oral health roles or advance within the field. This includes career changers entering the profession and incumbent workers gaining additional skills, certifications, or credentials (for example, advancement to expanded roles).

5. Better understanding of what works and where people get stuck

Programs track participant engagement and progression to identify where participants advance or experience challenges. This information is used to strengthen program design, address barriers, and improve outcomes over time.



Prevention of Tooth Decay

Children (ages 0–10)

We prioritize efforts that deliver preventive services in early childhood and child-serving systems where families already receive care and support, including settings such as universal preschool, child care, schools, home visiting, and community-based programs. These “front door” systems are critical for reaching children early and equitably, particularly those in underserved communities.

Competitive proposals will demonstrate the ability to move beyond one-time services by strengthening follow-through to completed care. This includes establishing clear workflows for oral health screening, referral, and follow-up (for example, ensuring referrals are scheduled before a family leaves the site or creating closed-loop referral systems with partner dental providers); incorporating oral health navigation or care coordination supports for families (such as helping families schedule appointments, addressing transportation or insurance barriers, or providing reminder and follow-up support); and building strong, reliable connections to dental providers (for example, through formal partnerships, designated appointment slots, or shared care coordination protocols). Programs should show how they will ensure that children who are identified through preventive services are successfully connected to and receive needed treatment, rather than only increasing the number of children reached.

We value approaches that are embedded within existing systems and leverage established infrastructure, partnerships, and standards (for example, through early childhood councils, school districts, child care networks, home visiting programs, or community-based organizations to integrate oral health into existing workflows and services). Priority will be given to implementation-ready models that can operate at scale, align with existing early childhood or school-based systems, and are designed to reduce disparities in access and outcomes across communities.

Funded organizations will be expected to participate in a shared evaluation approach, with defined measures focused on reach, follow-through, and completed care. This will include tracking the progression from prevention and screening to referral, scheduled appointments, and completed visits, as well as identifying where drop-off occurs and how it is addressed. For example, applicants may use data such as completed screening and preventive service codes (such as cleanings and fluoride varnish) and follow-up treatment codes in claims or partner provider records to demonstrate that children not only received initial services, but established ongoing care with a dental provider. Funded organizations will also be expected to establish or strengthen data-sharing systems and agreements with partners (such as dental providers, schools, or health systems) to support this level of tracking and ensure continuity of care.

Prevention of Tooth Decay

Children (ages 0–10)

Examples of eligible programs and activities may include, but are not limited to:

- **Place-based prevention in early childhood and child-serving systems**
Programs that deliver preventive services in settings such as universal preschool, child care, schools, home visiting, and other community-based environments where families already receive care and support.
- **Navigation and care coordination within child-serving systems**
Efforts that provide structured follow-up and support to help children and families move from oral health screening and prevention to completed treatment and ongoing care, including referral management and connection to dental providers.
- **Dental home connection and continuity models**
Programs that establish and maintain ongoing relationships with dental providers, with clear systems to ensure follow-up, continuity, and completed care over time.
- **Integration into existing early childhood and school-based systems**
Initiatives that embed oral health into established systems (for example, UPK, school-based health centers, etc.), leveraging existing infrastructure, standards, and partnerships to reach children at scale.
- **Replication or expansion of proven approaches**
Expansion of models with demonstrated effectiveness in improving follow-through and outcomes, rather than early-stage pilot programs.

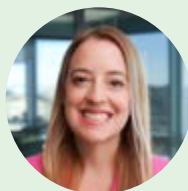
Speak to a grantmaking team member

All applicants must connect with a senior program officer to ensure alignment with our funding priorities.



Access to care:

Carla Castillo
Senior Program Officer
ccastillo@ddpco.com
[Book a meeting](#)



Prevention:

Mara Holiday
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[Book a meeting](#)

If you'd like to receive emails updates about funding opportunities, [join our email list](#).



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