

2022

COMMUNITY HEALTH NEEDS ASSESSMENT

Lewistown, Montana

*Assessment conducted by **Central Montana Medical Center**
in cooperation with the Montana Office of Rural Health*



MONTANA
STATE UNIVERSITY

Office of Rural Health
Area Health
Education Center

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INTRODUCTION

Introduction

Central Montana Medical Center (CMMC) is a 25-bed Critical Access Hospital (CAH) based in Lewistown, Montana. CMMC is the only hospital in Fergus County and provides medical services to the Lewistown community and surrounding areas comprised of well over 8,000 square miles. CMMC's primary service area includes the communities of Lewistown, Denton, Grass Range, Moore, Winifred and Roy; with most of the County's populated communities located along US 87 or US 191. Fergus County has a low population density and is considered a Frontier (six or less people per square mile) by the US Department of Health and Human Services. For further demographic, socioeconomic and other related county and state data, please see Appendix C to review the Secondary Data Analysis.



Central Montana Medical Center provides a full range of services from 24-hour emergency room, ambulance, full range rehabilitation services, obstetrics, home health and hospice care, in/out-patient surgery, radiology, laboratory, infusion services, and a community fitness center. CMMC has 23 providers on staff comprised of Family Medicine, Podiatry, Emergency Medicine, Nurse Practitioners, Obstetrics, General Surgery and Anesthesiology. Additionally, 24 consulting/visiting specialist see patients at CMMC on a regular weekly and/or monthly basis.

Mission: To be the leader in assuring community-based quality healthcare.

Values:

Compassion- We will be aware and respectful of the life situation of others and treat them with compassion and consideration.

Accountability- With integrity, knowledge, action, and trust.

Respect- For dignity, care, and concern for all.

Excellence- As a team in all we do.

Vision:

- Be a healthcare provider for our region;
- Dedicate ourselves to innovative excellence in care;
- Collaborate care for economical services with other agencies;
- Be the leader in providing health education, prevention, and wellness services to promote individual responsibility for health outcomes;
- Provide financial stewardship for economic healthcare;
- Create an environment in which all participants feel valued and respected;
- Embrace change while exploring tomorrow's needs today.

Central Montana Medical Center participated in the Community Health Services Development (CHSD) Project administrated by the Montana Office of Rural Health (MORH) and funded in part through the Montana Health Research and Education Foundation (MHREF) Flex Grant. Community involvement in steering committee meetings and key informant interviews enhance community engagement in the assessment process.

Between January and February 2022, CMMC's service area was surveyed about its healthcare system. This report shows the results of the survey in both narrative and chart formats. A copy of the survey instrument is included at the end of this report (Appendix E). Readers are invited to familiarize themselves with the survey instrument and the subsequent findings. The narrative report touches on the highlights while the charts present data for virtually every question asked.

Health Assessment Process

A steering committee was convened to assist Central Montana Medical Center in conducting CHSD. A diverse group of community members representing various organizations and populations within the community (ex. public health, elderly, uninsured) came together in December 2021. For a list of all steering committee members and their affiliations, see Appendix A. The Steering Committee met twice during the CHSD process; first to discuss health concerns in the community and offer their perspective in designing the survey instrument, and again to review results of the CHNA and to assist in the prioritization of health needs.



Survey Methodology

Survey Instrument

In January 2022, surveys were mailed out to the residents in Fergus County, Montana. Survey respondents had the ability to complete the survey mailed to them, or via an online survey hosted at Montana State University's HELPS Lab web portal. The survey was based on a design that has been used extensively in the states of Washington, Wyoming, Alaska, Montana, and Idaho. The survey was designed to provide each facility with information from local residents regarding:

- Demographics of respondents
- Hospitals, primary care providers and specialists used, plus reasons for selection
- Local healthcare provider usage
- Services preferred locally
- Perception and satisfaction of local healthcare

Sampling

Central Montana Medical Center provided a list of aggregated outpatient and inpatient admissions. Those zip codes with the greatest number of admissions were selected to be included in the survey. A random list of 800 residents was then selected with the assistance of the MSU HELPS lab. Residence was stratified in the initial sample selection so that each area would be represented in proportion to the overall served population and the proportion of past admissions. (Note: although the survey samples were proportionately selected, actual surveys returned from each population area varied, which may result in slightly less proportional results).

Zip Code	Population ¹	Community Name	Total Distribution	# Male	# Female
59457	5885	Lewistown	572	286	286
59464	181	Moore	38	19	19
59032	120	Grass Range	36	18	18
59452	234	Hobson	34	17	17
59489	111	Winifred	24	12	12
59471	138	Roy	22	11	11
59087	198	Winnett	18	9	9
59479	347	Stanford	16	8	8
59430	296	Denton	16	8	8
59451	218	Hilger	12	6	6
59453	80	Judith Gap	6	3	3
59462	129	Moccasin	6	3	3
Total	7937		800	400	400

¹ US Census Bureau - American Community Survey (2019)

Key informant interviews and focus groups were conducted to identify important local healthcare issues, how to improve the health of the community, and gaps in health services. It was intended that this research would help determine the awareness of local programs and services, as well as the level of satisfaction with local services, providers, and facilities.

Information Gaps- Data

It is a difficult task to define the health of rural and frontier communities in Montana due to the large geographic size, economic and environmental diversity, and low population density. Obtaining reliable, localized health status indicators for rural communities continues to be a challenge in Montana.

There are many standard health indices used to rank and monitor health in an urban setting that do not translate as accurately in rural and frontier areas. In the absence of sufficient health indices for

rural and frontier communities in Montana, utilizing what is available is done with an understanding of access to care in rural and frontier Montana communities and barriers of disease surveillance in this setting.

The low population density of rural and frontier communities often requires regional reporting of many major health indices, including chronic disease burden and behavior health indices. The Montana BRFSS (Behavioral Risk Factor Surveillance System), through a cooperative agreement with the Center for Disease Control and Prevention (CDC), is used to identify regional trends in health-related behaviors. The fact that many health indices for rural and frontier counties are reported regionally makes it impossible to set the target population aside from the five more-developed Montana counties.

Limitations in Survey & Key Informant Methodology

A common approach to survey research is the mailed survey. However, this approach is not without limitations. There is always the concern of non-response as it may affect the representativeness of the sample. Thus, a mixture of different data collection methodologies is recommended.



Conducting key informant interviews and focus groups in addition to the random sample survey allows for a more robust sample, and ultimately, these efforts help to increase the community response rate. Partnering with local community organizations such as public health, community health centers, and senior centers, just to name a few, assists in reaching segments of the population that might not otherwise respond to a survey.

While key informant interview and focus group data can offer invaluable insight into the perception of a community or group of individuals, qualitative data can be difficult to analyze. For this reason, interview and focus group data are grouped into common themes based on our interpretation of the transcript. To better understand these themes, please review the full transcript in Appendix k. MORH staff facilitated key informant interviews for CMMC to ensure impartiality. Personal identifiers are not included in the transcripts.

Survey Implementation

In January 2022, a survey, cover letter on Central Montana Medical Center's letterhead with the chief executive officer's signature, and postage paid envelopes were mailed to 800 randomly selected residents in the hospital's service area. A news release was sent to the local newspaper as well as social media postings prior to the survey distribution announcing that Central Montana Medical Center would be conducting a community health services survey throughout the region in cooperation with the Montana Office of Rural Health.

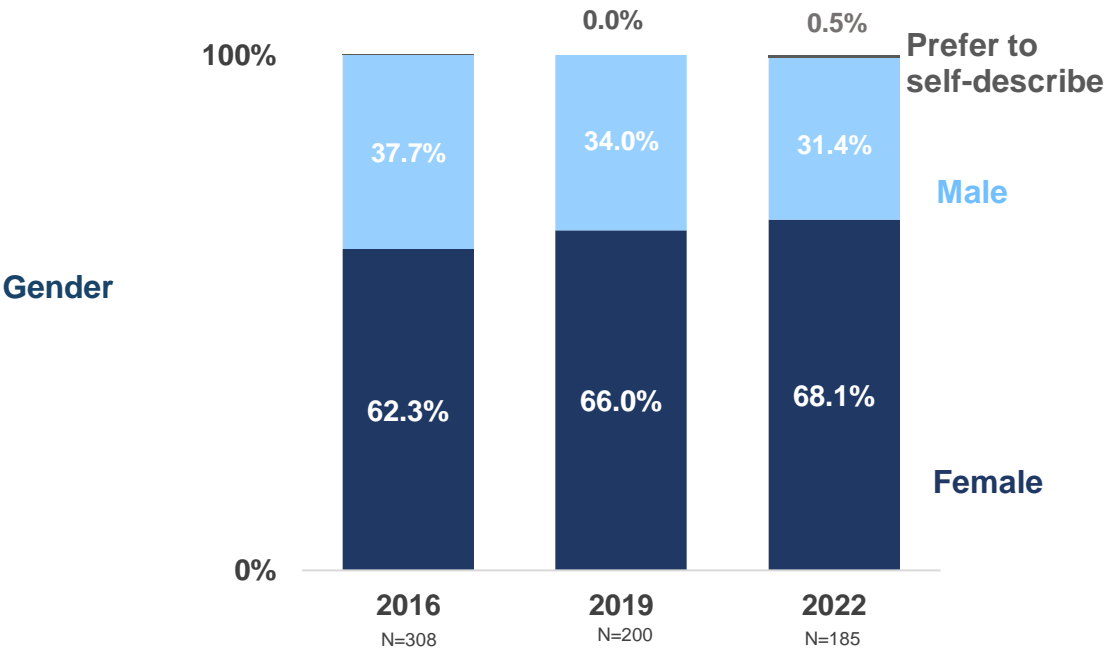
Of those 800 surveys, 69 surveys were returned undeliverable for a 25.6% response rate. From this point on, the total number of surveys will be out of 731. Based upon the sample size, we can be 95% confident that the responses to the survey questions are representative of the service area population, plus or minus 7.08%.

Survey Respondent Demographics

A total of 731 surveys were distributed amongst Central Montana Medical Center's service area. One-hundred eighty-six were completed for a 25.6% response rate. The following tables indicate the demographic characteristics of the survey respondents. Information on location, gender, age, and employment is included. Percentages indicated on the tables and graphs are based upon the total number of responses for each individual question, as some respondents did not answer all questions.

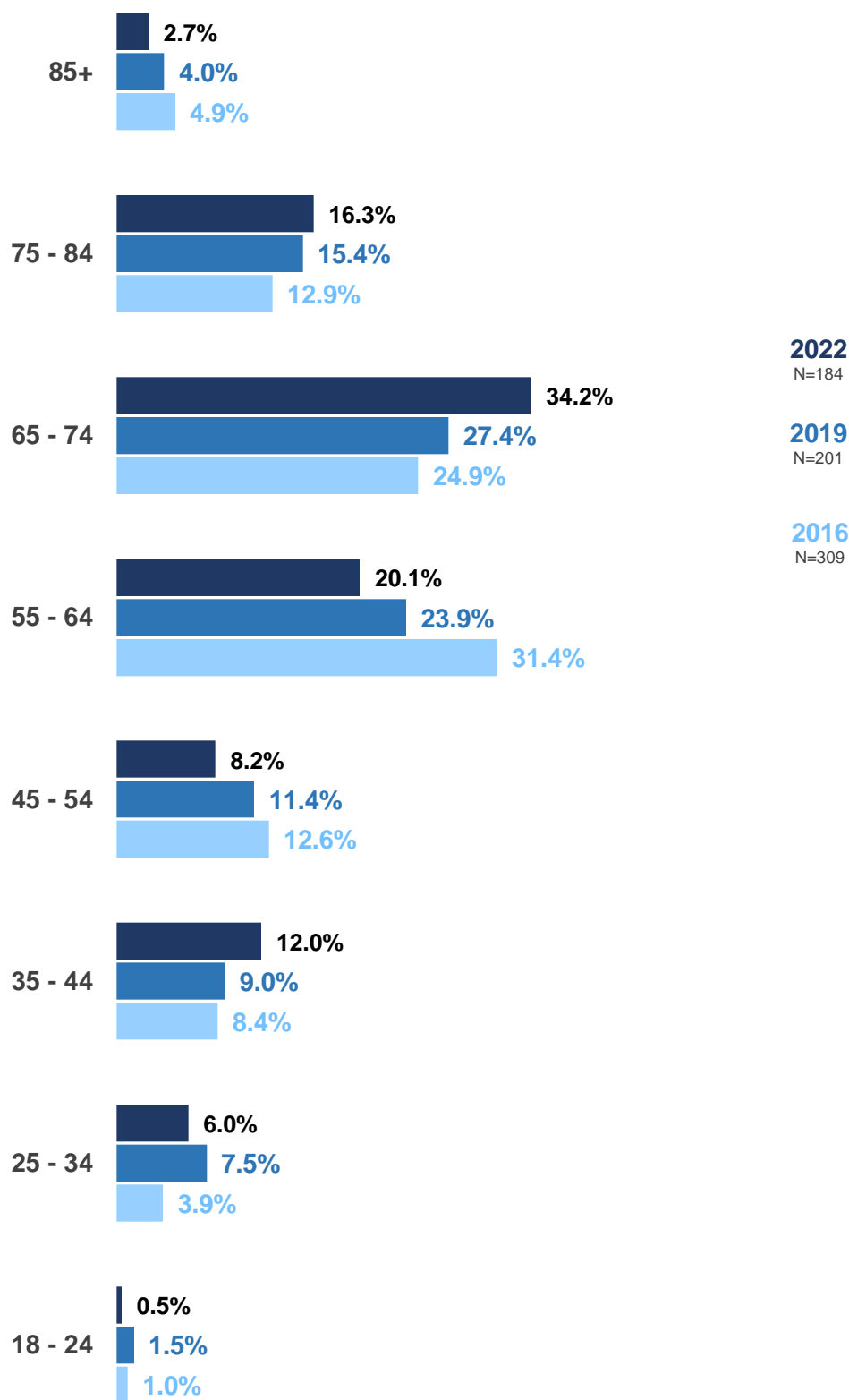
Place of Residence	2016 % (n)	2019 % (n)	2022 % (n)
Number of respondents	309	202	186
59457 Lewistown	80.9% (250)	76.7% (155)	74.7% (139)
59032 Grass Range	2.9% (9)	2.0% (4)	4.3% (8)
59464 Moore	1.9% (6)	4.0% (8)	3.8% (7)
59479 Stanford	1.3% (4)	4.0% (8)	3.2% (6)
59489 Winifred	2.6% (8)	2.0% (4)	3.2% (6)
59430 Denton	2.6% (8)	2.5% (5)	2.2% (4)
59087 Winnett	1.6% (5)	1.5% (3)	2.2% (4)
59451 Hilger	1.3% (4)	1.0% (2)	1.6% (3)
59452 Hobson	2.3% (7)	3.5% (7)	1.1% (2)
59453 Judith Gap	0.6% (2)	0.0% (0)	1.1% (2)
59462 Moccasin	0.3% (1)	1.5% (3)	1.1% (2)
59471 Roy	1.6% (5)	1.0% (2)	1.1% (2)
Other		0.5% (1)	0.5% (1)
TOTAL	100% (309)	100% (202)	100% (186)

Statistical significance was not measured as reporting differed between 2022 and the two previous years. A larger number of missing values in 2022 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Grayed out cells indicate the question was not asked that year.



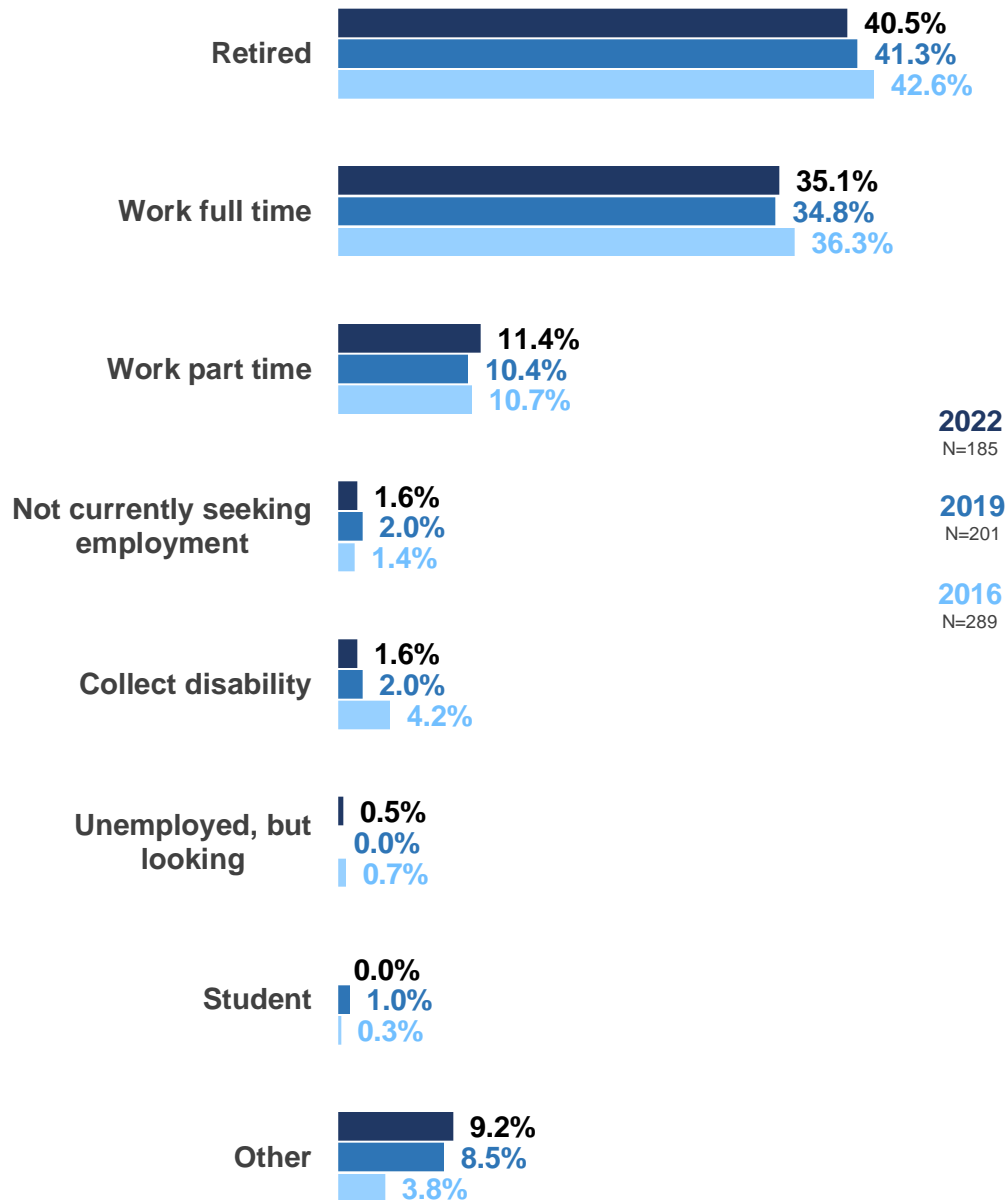
Women are frequently the healthcare decision makers for their families and more likely to respond to a health-related survey.

Age of respondents for all years of the survey



The increasing percentage of aging rural residents is a statewide trend and will likely have a significant impact on demand for future healthcare services.

The majority of 2022 respondents are retired or work full time.



* Respondents (N=8) who selected over the allotted amount were moved to "Other."

"Other" comments included: "Self-employed (4)" and "Farmer/Rancher (3)."



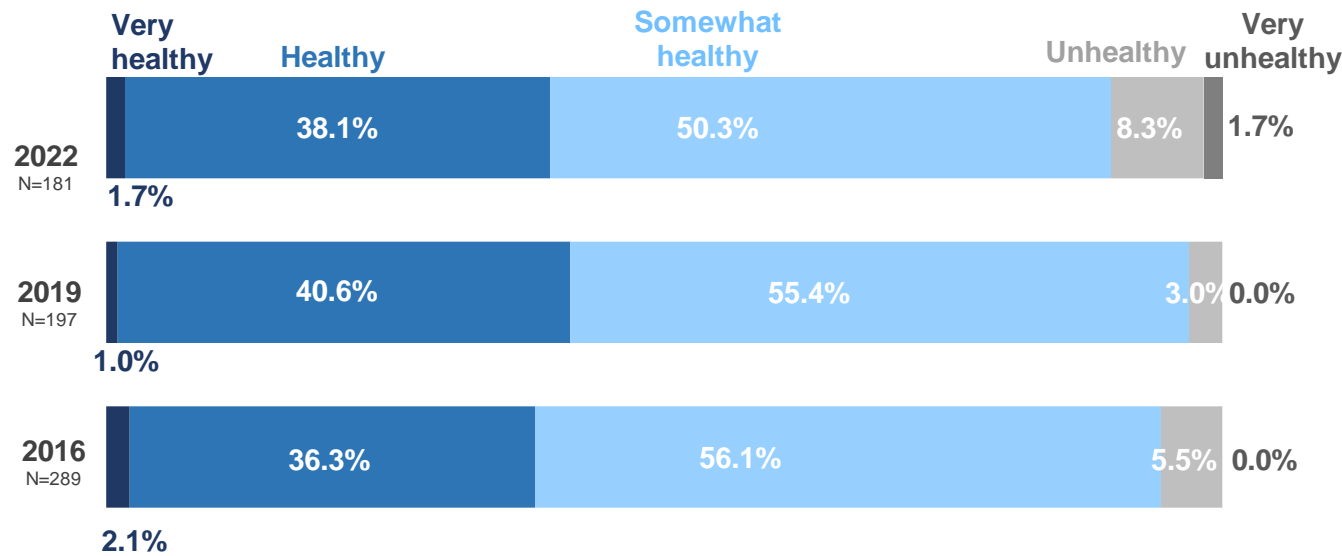
SURVEY RESULTS

Survey Results

Rating of Healthy Community (Question 1)

Respondents were asked to indicate how they would rate the general health of their community. Fifty point three percent of respondents (n=91) rated their community as “Somewhat healthy,” and 38.1% of respondents (n=69) felt their community was “Healthy.” Eight point three percent (n=15) of respondents indicated they felt their community was “Unhealthy.”

Half of 2022 respondents rate their community as **somewhat healthy**



The Majority of survey respondents feel their community is **Somewhat healthy or Healthy.**

Health Concerns for Community (Question 2)

Respondents were asked what they felt the three most serious health concerns were in their community. The top identified health concern was “Alcohol/substance abuse” at 53.5% (n=99). “Cancer” was also a high priority at 42.2% (n=78), followed closely by “Overweight/obesity” at 35.7% (n=66).

Health Concern	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	311	204	185	
Alcohol/substance abuse	64.0% (199)	58.8% (120)	53.5% (99)	<input type="checkbox"/>
Cancer	42.4% (132)	30.4% (62)	42.2% (78)	<input checked="" type="checkbox"/>
Overweight/obesity	38.9% (121)	27.9% (57)	35.7% (66)	<input checked="" type="checkbox"/>
Depression/anxiety	12.2% (38)	17.6% (36)	20.0% (37)	<input type="checkbox"/>
Heart disease	18.3% (57)	15.7% (32)	17.8% (33)	<input type="checkbox"/>
Mental health issues	18.6% (58)	14.7% (30)	15.1% (28)	<input type="checkbox"/>
Tobacco use (cigarettes, vaping, smokeless etc.)	18.3% (57)	23.5% (48)	14.6% (27)	<input type="checkbox"/>
Alzheimer's/dementia		8.8% (18)	11.9% (22)	<input type="checkbox"/>
Lack of exercise	13.2% (41)	7.8% (16)	11.9% (22)	<input type="checkbox"/>
Diabetes		9.8% (20)	11.4% (21)	<input type="checkbox"/>
Lack of access to healthcare	13.8% (43)	20.1% (41)	10.8% (20)	<input checked="" type="checkbox"/>
Work/farm/ranch related accidents/injuries	8.7% (27)	9.3% (19)	9.2% (17)	<input type="checkbox"/>
Social isolation/loneliness		8.3% (17)	8.6% (16)	<input type="checkbox"/>
Chronic respiratory issues/illness			3.8% (7)	<input type="checkbox"/>
Child abuse/neglect	6.4% (20)	8.8% (18)	2.2% (4)	<input checked="" type="checkbox"/>
Lack of dental care	3.2% (10)	3.9% (8)	2.2% (4)	<input type="checkbox"/>
Domestic violence	3.2% (10)	2.0% (4)	1.6% (3)	<input type="checkbox"/>
Hunger		1.5% (3)	1.6% (3)	<input type="checkbox"/>
Motor vehicle accidents	10.6% (33)	2.9% (6)	1.6% (3)	<input checked="" type="checkbox"/>
Suicide	5.8% (18)	2.9% (6)	1.6% (3)	<input checked="" type="checkbox"/>
Recreation related accidents/injuries	5.5% (17)	2.9% (6)	0.5% (1)	<input checked="" type="checkbox"/>
Stroke		1.0% (2)	0.0% (0)	<input type="checkbox"/>
Other*	5.5% (17)	4.9% (10)	7.6% (14)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to pick their top three serious health concerns, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. *Respondents (N=5) who selected over the allotted amount were moved to “Other.”

Components of a Healthy Community (Question 3)

Respondents were asked to identify the three most important things for a healthy community. Fifty-two point two percent of respondents (n=97) indicated that “Access to healthcare and other services” is important for a healthy community, followed closely by “Good jobs and a healthy economy” at 46.8% (n=87), and “Affordable housing” at 30.1% (n=56).

Components of a Healthy Community	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	311	204	186	
Access to healthcare and other services	65.6% (204)	52.9% (108)	52.2% (97)	■
Good jobs and a healthy economy	53.4% (166)	49.5% (101)	46.8% (87)	□
Affordable housing	18.6% (58)	16.7% (34)	30.1% (56)	■
Good schools	29.6% (92)	26.5% (54)	27.4% (51)	□
Strong family life	32.8% (102)	26.0% (53)	26.9% (50)	□
Healthy behaviors and lifestyles	34.1% (106)	28.4% (58)	24.7% (46)	□
Religious or spiritual values	19.9% (62)	18.6% (38)	17.2% (32)	□
Access to childcare/after school programs		15.2% (31)	16.1% (30)	□
Low crime/safe neighborhoods	14.1% (44)	14.7% (30)	14.0% (26)	□
Access to healthy foods			13.4% (25)	□
Tolerance for diversity		3.9% (8)	7.5% (14)	□
Job advancement and training opportunities	10.0% (31)	5.9% (12)	5.9% (11)	□
Transportation services		5.4% (11)	4.3% (8)	□
Clean environment	14.5% (45)	9.3% (19)	3.2% (6)	■
Community involvement	5.1% (16)	10.3% (21)	2.7% (5)	■
Low death and disease rates	3.9% (12)	2.5% (5)	1.6% (3)	□
Parks and recreation	7.7% (24)	2.0% (4)	1.6% (3)	■
Arts and cultural events	1.6% (5)	0.5% (1)	1.1% (2)	□
Low level of domestic violence	3.2% (10)	3.9% (8)	0.5% (1)	□
Other*		2.9% (6)	1.1% (2)	□

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to pick their top three components of a healthy community, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. *Respondents (N=0) who selected over the allotted amount were moved to “Other.”

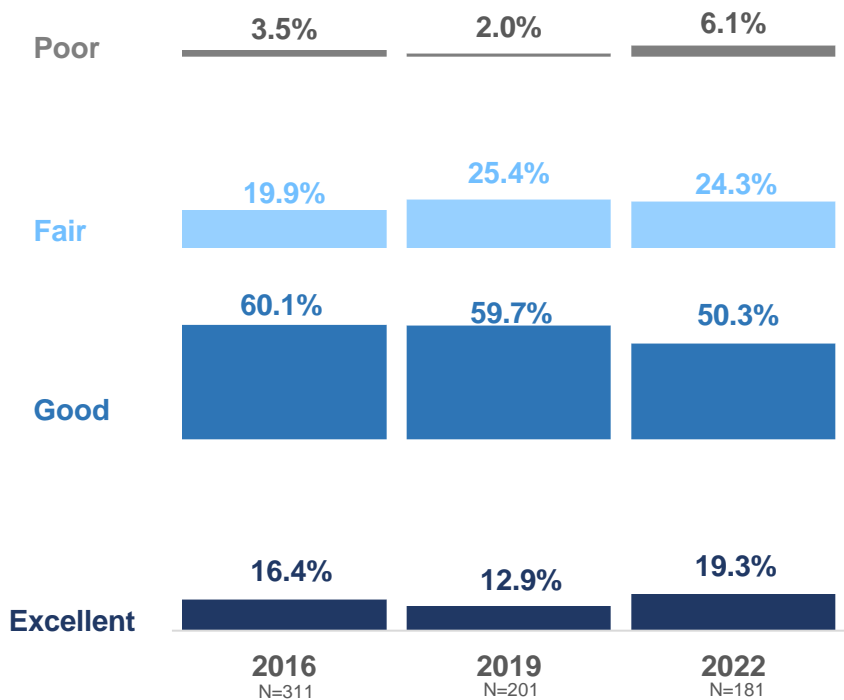
“Other” comments included: “Services for the disadvantaged” and “Mental health support by experience local providers.”

(View all comments in Appendix G)

Knowledge of Health Services (Question 4)

Respondents were asked to rate their knowledge of the health services available through Central Montana Medical Center. Fifty point three percent (n=91) of respondents rated their knowledge of health services as “Good.” “Fair” was selected by 24.3% percent (n=44), and “Excellent” was chosen by 19.3% of respondents (n=35).

Half of 2022 respondents rated their knowledge of services as **good**



Respondents Learn of Health Services (Question 5)

The most frequently indicated method of learning about available services was “Friends/family” at 56.5% (n=105). “Healthcare provider” was also frequently used to learn about health services at 54.3% (n=101), followed by “Word of mouth/reputation” at 47.3% (n=88).

How Respondents Learn about Community Health Services	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	311	204	186	
Friends/family		53.4% (109)	56.5% (105)	<input type="checkbox"/>
Healthcare provider	59.5% (185)	51.0% (104)	54.3% (101)	<input type="checkbox"/>
Word of mouth/reputation	67.8% (211)	51.5% (105)	47.3% (88)	<input checked="" type="checkbox"/>
News Argus	50.5% (157)	32.8% (67)	40.9% (76)	<input checked="" type="checkbox"/>
Fergus County Nurse’s Office	17.0% (53)	19.6% (40)	34.4% (64)	<input checked="" type="checkbox"/>
Social media	8.0% (25)	14.2% (29)	18.8% (35)	<input checked="" type="checkbox"/>
Radio (KXLO/KLCM)	26.0% (81)	21.6% (44)	18.3% (34)	<input type="checkbox"/>
Central MT Council on Aging	13.5% (42)	15.7% (32)	16.7% (31)	<input type="checkbox"/>
Central MT Health District (public health)	6.1% (19)	3.9% (8)	15.6% (29)	<input checked="" type="checkbox"/>
Mailings/newsletter		15.2% (31)	15.1% (28)	<input type="checkbox"/>
One Health – Lewistown	16.7% (52)	34.3% (70)	14.5% (27)	<input checked="" type="checkbox"/>
Website/internet	10.6% (33)	7.8% (16)	14.5% (27)	<input type="checkbox"/>
“The Roundup” newsletter	20.9% (65)	18.1% (37)	12.9% (24)	<input type="checkbox"/>
VA Clinic		10.3% (21)	8.1% (15)	<input type="checkbox"/>
Central MT Family Planning	2.3% (7)	4.4% (9)	3.8% (7)	<input type="checkbox"/>
Health fair	26.7% (83)	11.3% (23)	3.8% (7)	<input checked="" type="checkbox"/>
District 6 HRDC		4.4% (9)	2.7% (5)	<input type="checkbox"/>
Presentations		2.0% (4)	2.7% (5)	<input type="checkbox"/>
Other	3.2% (10)	4.4% (9)	5.4% (10)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to indicate all methods of receiving information, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

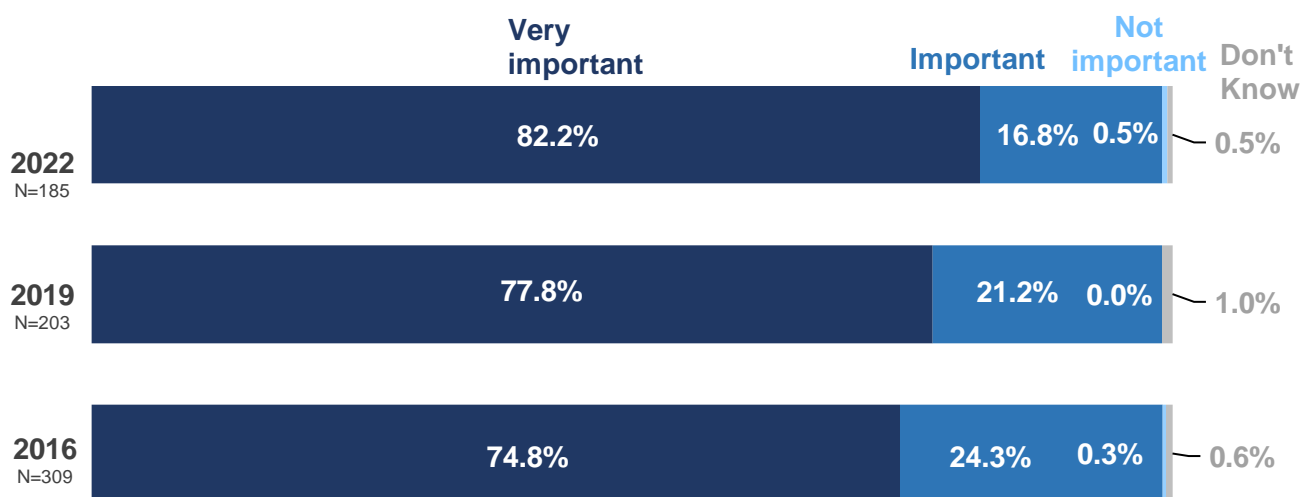
“Other” comments included: “CMMC” and “Ask at clinic.”

View a cross tabulation of how respondents learn with how they rate their knowledge on p. 82

Local Healthcare Providers and Services (Question 6)

Respondents were asked how important local healthcare providers and services are to the economic well-being of the area. “Very important” was the most frequently chosen option by respondents at 82.2% (n=152) while, “Important” was chosen by 16.8% (n=31) of respondents.

The majority of 2022 respondents rate local providers and services as **Very important to the economic well-being of the area**



Utilized Community Health Resources (Question 7)

Respondents were asked which community health resources, other than the hospital or clinic, they had used in the last three years. “Pharmacy” was the most frequently utilized community health resource cited by respondents at 84.9% (n=157). The “Dentist” was utilized by 74.6% (n=138) of respondents, followed by “Optometrist (eyes)” at 65.4% (n=121).

Use of Community Health Resources	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	311	204	185	
Pharmacy	76.5% (238)	78.4% (160)	84.9% (157)	<input type="checkbox"/>
Dentist	78.1% (243)	71.1% (145)	74.6% (138)	<input type="checkbox"/>
Optometrist (eyes)	68.8% (214)	64.7% (132)	65.4% (121)	<input type="checkbox"/>
Fergus County Nurse’s office	32.5% (101)	33.3% (68)	57.8% (107)	<input checked="" type="checkbox"/>

Table continued on next page

Fitness center		15.7% (32)	20.5% (38)	<input type="checkbox"/>
One Health - Lewistown	18.6% (58)	21.1% (43)	17.3% (32)	<input type="checkbox"/>
Central MT Health District	2.9% (9)	0.5% (1)	13.0% (24)	<input checked="" type="checkbox"/>
Audiologist (ears)	13.8% (43)	16.2% (33)	11.9% (22)	<input type="checkbox"/>
Veteran's services	11.3% (35)	10.3% (21)	9.7% (18)	<input type="checkbox"/>
Wellness fair screenings	23.2% (72)	12.7% (26)	9.2% (17)	<input checked="" type="checkbox"/>
Council on Aging (foot clinic)	5.1% (16)	12.3% (25)	5.9% (11)	<input checked="" type="checkbox"/>
Food banks		2.0% (4)	4.9% (9)	<input type="checkbox"/>
Senior Center		5.9% (12)	4.9% (9)	<input type="checkbox"/>
Home care services		7.4% (15)	4.3% (8)	<input type="checkbox"/>
Mental Health	5.5% (17)	5.4% (11)	4.3% (8)	<input type="checkbox"/>
Central MT Family Planning	1.3% (4)	2.0% (4)	2.7% (5)	<input type="checkbox"/>
Long-term care/nursing home	3.5% (11)	4.9% (10)	2.7% (5)	<input type="checkbox"/>
Assisted living	2.6% (8)	4.4% (9)	1.6% (3)	<input type="checkbox"/>
WIC (Women/Infant/Children)		2.0% (4)	1.6% (3)	<input type="checkbox"/>
Substance abuse services		0.5% (1)	0.0% (0)	<input type="checkbox"/>
Other	3.2% (10)	4.4% (9)	9.7% (18)	<input checked="" type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to select all other community health resources used, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: “Physical Therapy” “Chiropractor” and “None (4).”

Improve Community's Access to Healthcare (Question 8)

Respondents were asked to indicate what they felt would improve their community's access to healthcare. The majority of respondents (58.1%, n=104) reported that, "Walk-in clinic" would make the greatest improvement. Forty-eight percent of respondents (n=86) indicated "More specialists" followed closely by "More primary care providers" at 43.0% (n=77) would improve access.

"Walk-in clinic" would make the greatest improvement

What Would Improve Community Access to Healthcare	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	311	204	179	
Walk-in clinic	44.1% (137)	58.8% (120)	58.1% (104)	■
More specialists	40.8% (127)	40.7% (83)	48.0% (86)	□
More primary care providers	52.4% (163)	56.9% (116)	43.0% (77)	■
Improved quality of care	24.8% (77)	23.5% (48)	34.1% (61)	■
More information about available services	14.8% (46)	30.9% (63)	28.5% (51)	■
Outpatient services expanded hours	29.6% (92)	27.0% (55)	27.4% (49)	□
Greater health education services	12.9% (40)	10.8% (22)	15.1% (27)	□
Telemedicine		6.4% (13)	15.1% (27)	■
Transportation assistance (to/from appointments)	5.8% (18)	8.8% (18)	12.8% (23)	■
Cultural sensitivity	4.2% (13)	1.0% (2)	2.2% (4)	□
Interpreter services		1.0% (2)	0.0% (0)	□
Other	6.4% (20)	9.3% (19)	11.2% (20)	□

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to select any items that would improve community access to healthcare, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

"Other" comments included: "Mental Health Crisis Services other than MHS," "Affordable care," and "More qualified providers."

Interest in Educational Classes/Programs (Question 9)

Respondents were asked if they would be interested in any educational classes/programs made available to the community. The most frequently selected class/program was “Weight loss” at 34.4% (n=55). Thirty-three point eight percent of respondents (n=53) were Interested in “Women’s health,” while 32.5% of respondents (n=52) were interested in “Fitness.”

Interest in Classes or Programs	2016 % (n)	2019 % (n)	2022 % (n)
Number of respondents	311	204	160
Weight loss	31.5% (98)	26.0% (53)	34.4% (55)
Women’s health		18.1% (37)	33.8% (54)
Fitness		24.0% (49)	32.5% (52)
Health and wellness		17.2% (35)	28.1% (45)
Health insurance education (Medicare/Medicaid/Private)	25.4% (79)	24.5% (50)	27.5% (44)
Nutrition		13.2% (27)	27.5% (44)
Health fair		15.2% (31)	18.8% (30)
Living will	25.1% (78)	18.1% (37)	17.5% (28)
First aid/CPR	17.4% (54)	17.6% (36)	16.9% (27)
Mental health	9.3% (29)	6.4% (13)	14.4% (23)
Men’s health		8.3% (17)	13.8% (22)
Cancer	15.1% (47)	10.8% (22)	10.0% (16)
Diabetes		9.8% (20)	9.4% (15)
Financial planning/counseling		8.8% (18)	9.4% (15)
Heart disease	12.5% (39)	6.4% (13)	9.4% (15)
Parenting	6.4% (20)	7.8% (16)	8.8% (14)
Grief counseling	10.3% (32)	5.4% (11)	8.1% (13)
Alzheimer’s	13.2% (41)	5.9% (12)	7.5% (12)
Smoking/tobacco cessation	5.8% (18)	3.4% (7)	7.5% (12)
Support groups		4.9% (10)	6.9% (11)
Alcohol/substance abuse	6.1% (19)	2.5% (5)	5.0% (8)

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Adult day care services	8.0% (25)	3.4% (7)	4.4% (7)
Lactation/breastfeeding support			4.4% (7)
Prenatal		2.0% (4)	4.4% (7)
Other	2.3% (7)	4.9% (10)	2.5% (4)

Statistical significance was not measured as reporting differed between 2022 and the two previous years. A larger number of missing values in 2022 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Respondents were asked to pick all classes or programs that are of interest, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: “Services for disabled adults.”

Utilization of Preventive Services (Question 10)

Respondents were asked if they had utilized any of the preventive services listed in the past year. “Flu shot/immunizations” was selected by 68.3% of respondents (n=125), followed closely by “Routine health checkup” at 67.8% (n=124). Sixty-four point five percent of respondents (n=118) indicated they had a “Dental exam” and 63.9% of respondents (n=117) had “Routine blood work.” Survey respondents could select all services that applied.

Use of Preventive Services	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	311	204	183	
Flu shot/immunizations	65.6% (204)	60.3% (123)	68.3% (125)	<input type="checkbox"/>
Routine health checkup	67.5% (210)	62.7% (128)	67.8% (124)	<input type="checkbox"/>
Dental exam		68.1% (139)	64.5% (118)	<input type="checkbox"/>
Routine blood work			63.9% (117)	<input type="checkbox"/>
Vision check		63.7% (130)	57.9% (106)	<input type="checkbox"/>
Routine blood pressure check	56.6% (176)	53.9% (110)	51.4% (94)	<input type="checkbox"/>
Mammography	37.0% (115)	32.4% (66)	40.4% (74)	<input type="checkbox"/>
Pap test/pelvic exam	18.0% (56)	17.2% (35)	14.8% (27)	<input type="checkbox"/>
Prostate (PSA)	17.7% (55)	17.6% (36)	10.9% (20)	<input type="checkbox"/>
Colonoscopy	17.0% (53)	19.6% (40)	10.4% (19)	<input checked="" type="checkbox"/>
Hearing check		16.2% (33)	9.8% (18)	<input type="checkbox"/>
Children’s checkup/Well baby	6.1% (19)	9.3% (19)	8.7% (16)	<input type="checkbox"/>

Table continued on next page

Mental health counseling		4.9% (10)	5.5% (10)	<input type="checkbox"/>
None	6.8% (21)	2.0% (4)	5.5% (10)	<input checked="" type="checkbox"/>
Afterhours Call-a-Nurse		2.5% (5)	3.3% (6)	<input type="checkbox"/>
Other	2.9% (9)	4.4% (9)	1.1% (2)	<input type="checkbox"/>

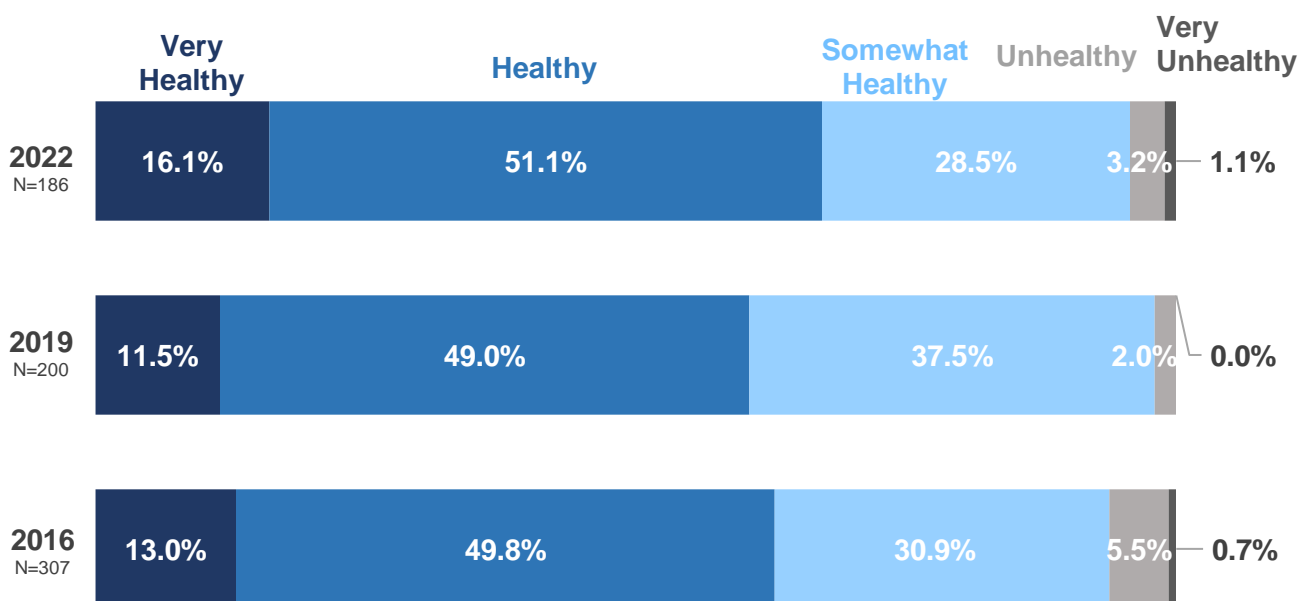
A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents could select any of the preventative services listed, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: “Covid vaccines.”

Rating of Personal Health (Question 11)

Survey respondents were asked to rate their own personal health, 16.1% (n=30) said they were “Very healthy.” Fifty-one point one percent (n=95) felt they were “Healthy” and 28.5% (n=53) of respondents felt they were “Somewhat healthy.”

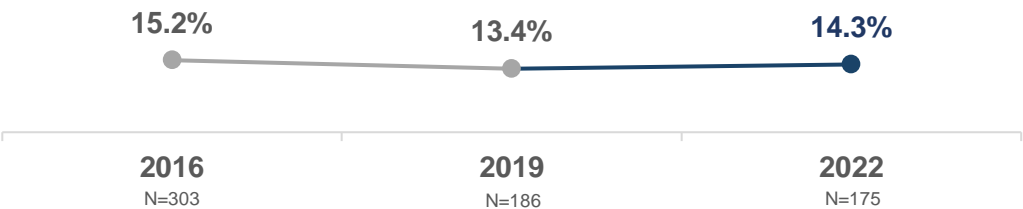
Rating of Personal Health



Felt Depressed (Question 12)

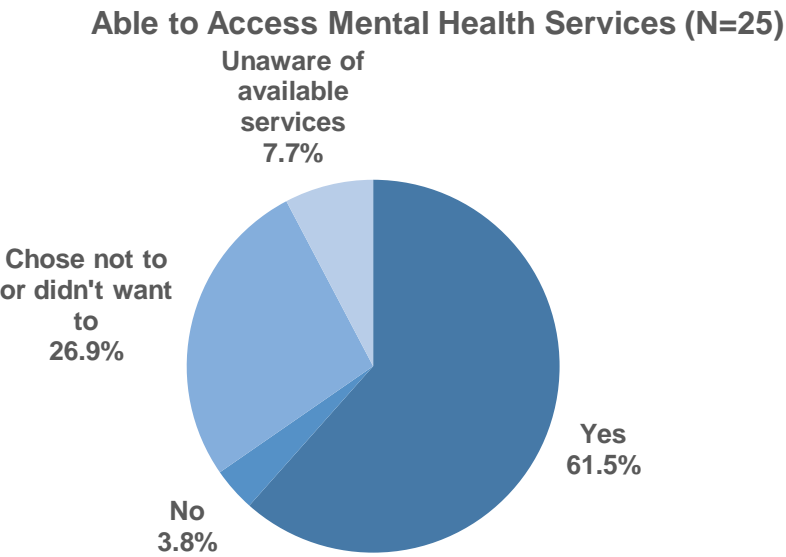
Survey respondents were asked if in the past three years, had there been periods of at least three consecutive months where they felt depressed on most days. Fourteen point three percent (n=25) said “Yes” they had felt depressed, while 85.7% (n=150) said “No” they did not feel depressed.

Felt Depressed on Most Days for 3 Consecutive Months



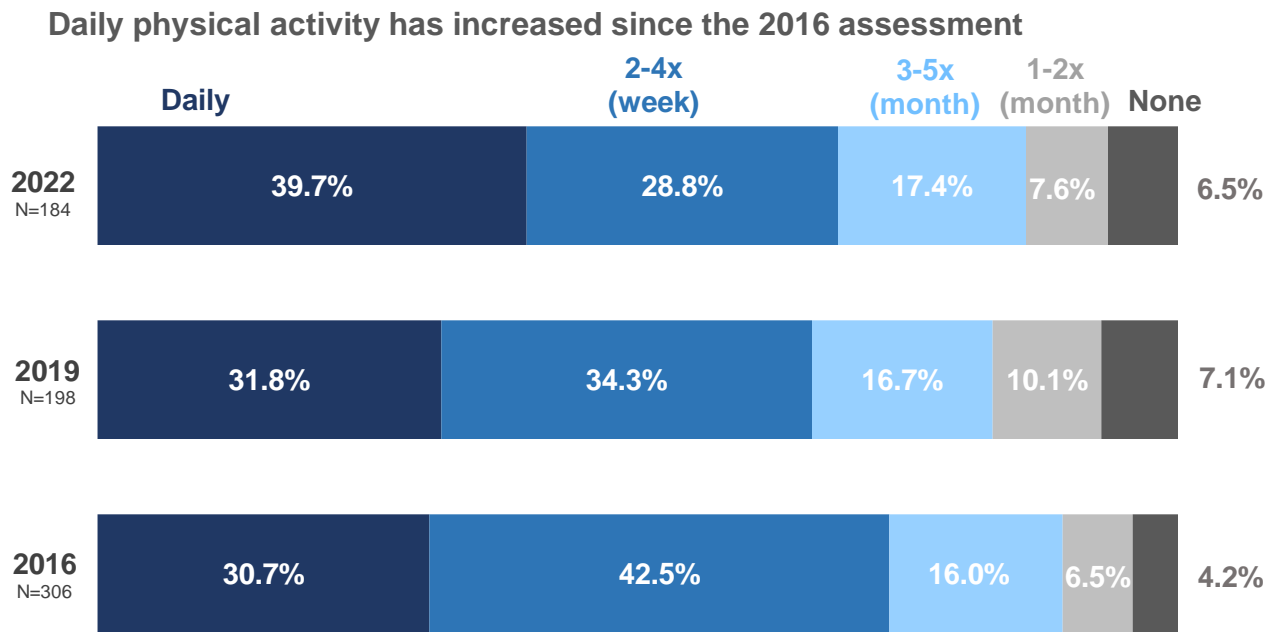
Able to Access Mental Health Services (Question 13)

Of the 25 respondents who said “Yes” to the previous question, 61.5% (n=16) said “Yes” they were able to get help from a mental health professional or primary care provider. Twenty-six point nine (n=7) said they “Chose not to or didn’t want to,” while 7.7% (n=2) said they were “Unaware of available services.”



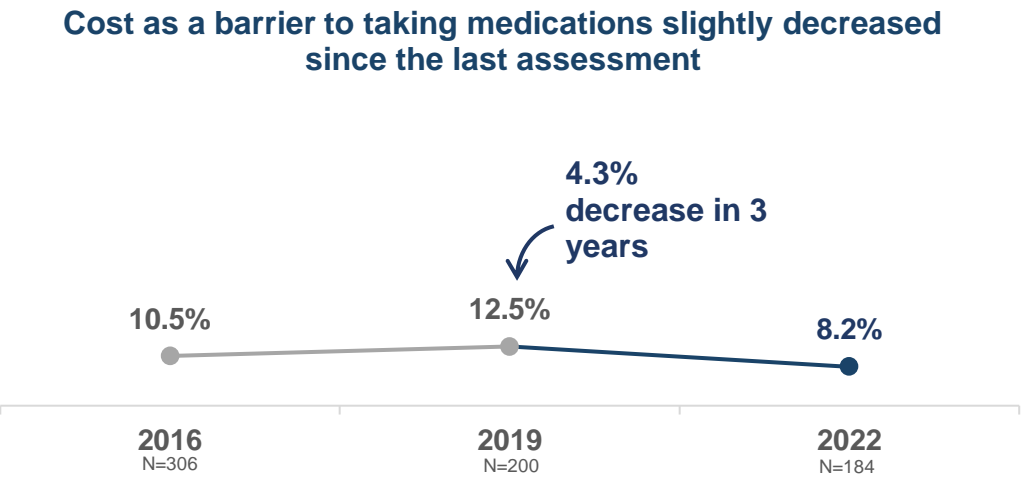
Physical Activity (Question 14)

Respondents were asked to indicate how frequently they had physical activity for at least twenty minutes over the past month. Thirty-nine point seven percent of respondents (n=73) indicated they had physical activity “daily,” and 28.8% (n=53) indicated they had physical activity of at least twenty minutes “2-4 times per week.” Six point five percent of respondents (n=12) indicated they had “No physical activity.”



Prescription Costs as Barrier (Question 15)

Respondents were asked to indicate if during the last year, medication costs had prohibited them from getting a prescription or taking their medication regularly. Eight point two percent of respondents (n=15) indicated that in the last year, cost had prohibited them from getting a prescription or taking their medication regularly. Seventy-eight point three percent of respondents (n=144) indicated that cost had not prohibited them. Thirteen point six percent of respondents (n=25) said this question was not applicable.



Food Insecurity (Question 16)

Respondents were asked to indicate if during the last year, they had worried that they would not have enough food to eat. Six point six percent of respondents (n= 12) indicated that in the last year, they did worry about having enough food.

The majority of respondents did not worry about having enough food



Injury Prevention Measures (Question 17)

Respondents were asked to indicate which, if any, injury prevention measures they engage in. Eighty-seven point eight percent of respondents (n=158) indicated they use a seat belt. Seventy-two point two percent (n=130) reported they are tobacco free and 56.1% (n=101) reported they regularly exercise.

Which of the following prevention measures do you use regularly?	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	204	180	
Seat belt	86.8% (177)	87.8% (158)	<input type="checkbox"/>
Tobacco free	63.7% (130)	72.2% (130)	<input type="checkbox"/>
Regular exercise	46.1% (94)	56.1% (101)	<input checked="" type="checkbox"/>

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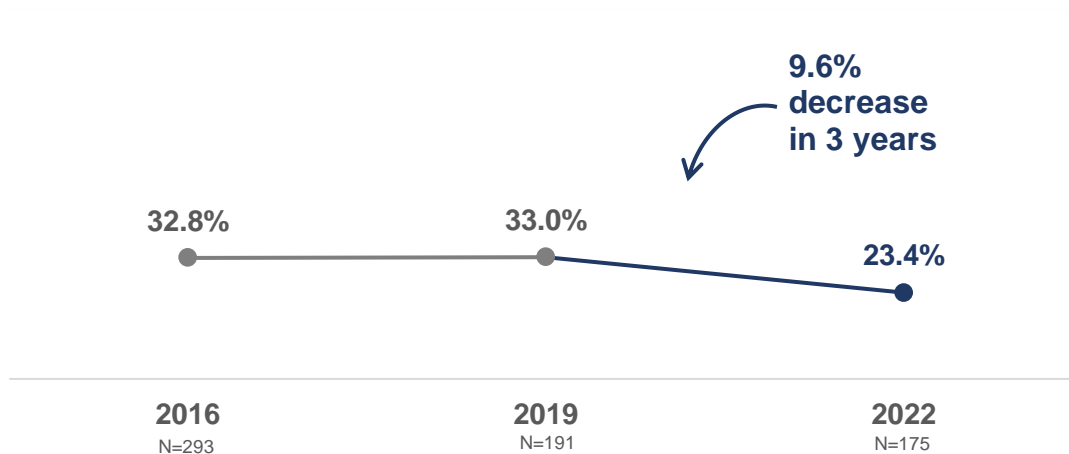
Sunscreen	46.6% (95)	50.0% (90)	<input type="checkbox"/>
Moderate alcohol use	46.1% (94)	41.7% (75)	<input type="checkbox"/>
Water safety (life vests)	18.1% (37)	18.9% (34)	<input type="checkbox"/>
Helmet	5.4% (11)	15.6% (28)	<input checked="" type="checkbox"/>
Child car seat/booster	15.2% (31)	15.0% (27)	<input type="checkbox"/>
CPR/First Aid training	10.3% (21)	13.9% (25)	<input type="checkbox"/>
Designated driver	11.3% (23)	10.0% (18)	<input type="checkbox"/>
None	2.5% (5)	4.4% (8)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to select all of the prevention measures that they use regularly, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

Needed/Delayed Hospital Care (Question 18)

Twenty-three point four percent of respondents (n=41) reported that they or a member of their household thought they needed healthcare services but did not get them or had to delay getting them in the past three years. Seventy-six point six percent of respondents (n=134) felt they were able to get the healthcare services they needed without delay.

Less than a third of respondents delayed or did not receive needed services



View a cross tabulation of where respondents live and 'delay of healthcare services' on p. 83

Reasons for Delayed Hospital Care (Question 19)

For those who indicated they were unable to receive or had to delay services (n=41), the reasons most cited were: “Preferred provider unavailable” (22.0%, n=9), a reason “Other” than those listed (26.8%, n=11), and “Too long to wait for an appointment” (19.5%, n=8).

Reasons for Delay in Receiving Needed Healthcare	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	96	63	41	
Preferred provider unavailable		12.7% (8)	22.0% (9)	<input type="checkbox"/>
Too long to wait for an appointment	25.0% (24)	20.6% (13)	19.5% (8)	<input type="checkbox"/>
It cost too much	42.7% (41)	33.3% (21)	17.1% (7)	<input checked="" type="checkbox"/>
Could not get an appointment	17.7% (17)	22.2% (14)	12.2% (5)	<input type="checkbox"/>
Don't like doctors or other providers	12.5% (12)	6.3% (4)	12.2% (5)	<input type="checkbox"/>
My insurance didn't cover it	27.1% (26)	14.3% (9)	12.2% (5)	<input type="checkbox"/>
No insurance	12.5% (12)	11.1% (7)	12.2% (5)	<input type="checkbox"/>
Service not available locally	37.5% (36)	19.0% (12)	12.2% (5)	<input checked="" type="checkbox"/>
Transportation problems	6.3% (6)	0.0% (0)	9.8% (4)	<input type="checkbox"/>
It was too far to go	7.3% (7)	9.5% (6)	7.3% (3)	<input type="checkbox"/>
Office wasn't open when I could go	18.8% (18)	7.9% (5)	7.3% (3)	<input type="checkbox"/>
Could not get off work	5.2% (5)	3.2% (2)	2.4% (1)	<input type="checkbox"/>
Didn't know where to go	4.2% (4)	6.3% (4)	2.4% (1)	<input type="checkbox"/>
Too nervous or afraid	6.3% (6)	0.0% (0)	2.4% (1)	<input type="checkbox"/>
COVID-19 concerns/barriers			0.0% (0)	<input type="checkbox"/>
Had no childcare	1.0% (1)	1.6% (1)	0.0% (0)	<input type="checkbox"/>
Language barrier		0.0% (0)	0.0% (0)	<input type="checkbox"/>
Not treated with respect	12.5% (12)	6.3% (4)	0.0% (0)	<input checked="" type="checkbox"/>
Privacy issues		1.6% (1)	0.0% (0)	<input type="checkbox"/>
Unsure if services were available	9.4% (9)	3.2% (2)	0.0% (0)	<input type="checkbox"/>
Other	8.3% (8)	28.6% (18)	26.8% (11)	<input checked="" type="checkbox"/>

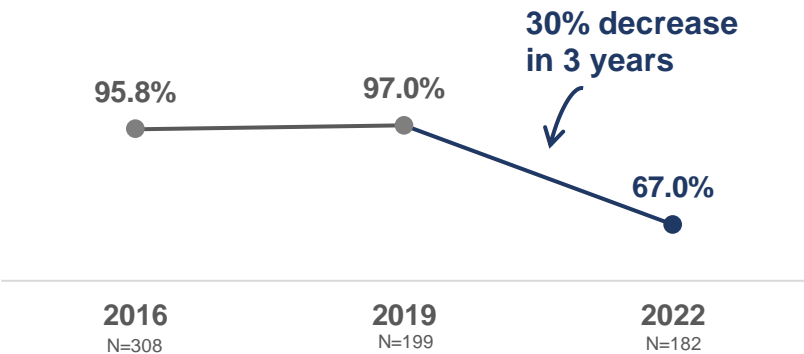
A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to indicate the top three reasons for delay in seeking healthcare, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments include: “Lack of confidence” and “Poor care.”

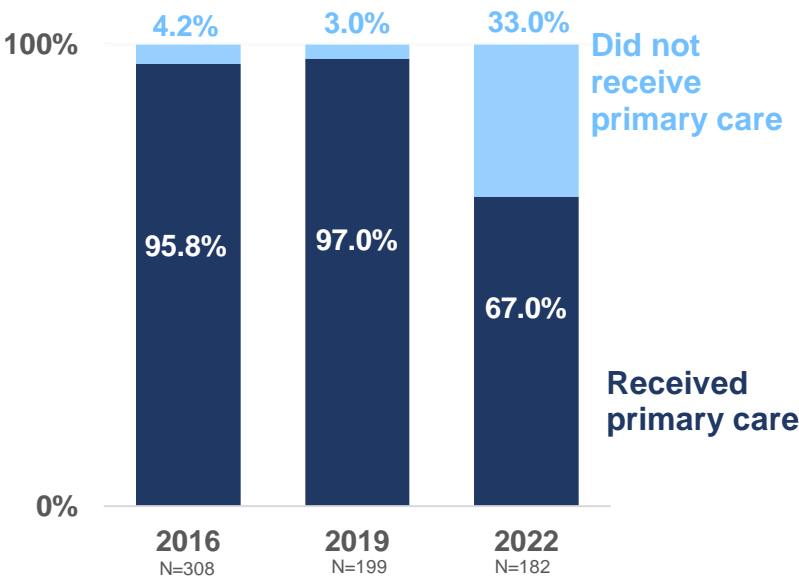
Primary Care Utilization (Question 20)

Respondents were asked if they or someone in their household had received primary care in the last three years. Primary care was classified as a family physician, physician assistant, or nurse practitioner. Sixty-seven percent of respondents (n=122) reported that they or a member of their family had received hospital care during the previous three years and 33.0% (n=60) had not.

Primary care utilization has decreased since the 2016 assessment



Primary care utilization has decreased by 30% since the 2019 assessment



Location of Primary Care Provider (Question 21)

Of the 122 respondents who indicated receiving primary care in the previous three years, 50.4% (n=61) reported receiving care at Central Montana Medical Center. Nineteen point eight percent of respondents (n=24) received services at a location other than those listed and 11.6% of respondents (n=14) reported utilizing services from One Health - Lewistown. One respondent chose not to answer.

Location of Primary Care Provider	2016 % (n)	2019 % (n)	2022 % (n)
Number of respondents	274	191	121
Central Montana Medical Center	75.2% (206)	60.7% (116)	50.4% (61)
One Health – Lewistown	11.7% (32)	12.0% (23)	11.6% (14)
St. Vincent Healthcare		2.6% (5)	8.3% (10)
Billings Clinic	6.9% (19)	3.1% (6)	5.0% (6)
Benefis	2.2% (6)	3.1% (6)	4.1% (5)
Veterans Hospital		1.6% (3)	0.8% (1)
Central Montana Family Planning		1.0% (2)	0.0% (0)
Other*	4.0% (11)	15.7% (30)	19.8% (24)
TOTAL	100.0% (274)	99.8% (191)	100.0% (121)

Statistical significance was not measured as reporting differed between 2022 and the two previous years. A larger number of missing values in 2022 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Grayed out cells indicate the question was not asked that year. *Respondents (N=20) who selected over the allotted amount were moved to "Other."

"Other" comments included: "Great Falls Clinic" and "Total Family Care (3)."

View a cross tabulation of where respondents live with where they utilize primary care services on p. 84

Reasons for Selecting Primary Care Provider (Question 22)

Of the 122 respondents who indicated receiving primary care in the previous three years, the primary reason given was “Prior experience with clinic” at 38.0% (n=46). “Clinic/provider’s reputation for quality” was selected by 31.4% of the respondents (n=38), and 27.3% (n=33) selected “Closest to home.” Note that respondents were asked to select all answers which influenced their choices, so the percentages do not equal 100%.

Reasons for Selecting Primary Care Provider	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	295	187	121	
Prior experience with clinic	36.9% (109)	38.0% (71)	38.0% (46)	<input type="checkbox"/>
Clinic/provider’s reputation for quality	14.9% (44)	24.6% (46)	31.4% (38)	<input checked="" type="checkbox"/>
Closest to home	43.4% (128)	46.0% (86)	27.3% (33)	<input checked="" type="checkbox"/>
Recommended by family or friends	15.6% (46)	17.6% (33)	24.0% (29)	<input type="checkbox"/>
Referred by physician or other provider	20.3% (60)	17.1% (32)	20.7% (25)	<input type="checkbox"/>
Appointment availability	27.5% (81)	27.8% (52)	19.0% (23)	<input type="checkbox"/>
Cost of care	5.4% (16)	5.3% (10)	5.8% (7)	<input type="checkbox"/>
Length of waiting room time	1.7% (5)	2.1% (4)	5.8% (7)	<input type="checkbox"/>
VA/Military requirement	3.7% (11)	4.8% (9)	5.8% (7)	<input type="checkbox"/>
Required by insurance plan	2.0% (6)	4.8% (9)	5.0% (6)	<input type="checkbox"/>
Privacy/confidentiality		2.7% (5)	4.1% (5)	<input type="checkbox"/>
Indian Health Services	0.7% (2)	0.0% (0)	0.0% (0)	<input type="checkbox"/>
Other	12.9% (38)	13.4% (25)	12.4% (15)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to pick the reasons for selection of their primary care provider, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

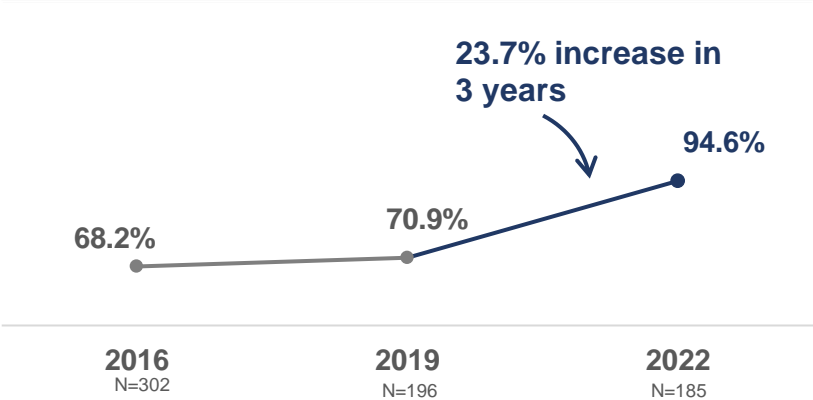
“Other” comments included: “Provider’s knowledge” and “Female provider.”

View a cross tabulation of where respondents utilize primary care services with their reasons for selecting their provider on p. 85

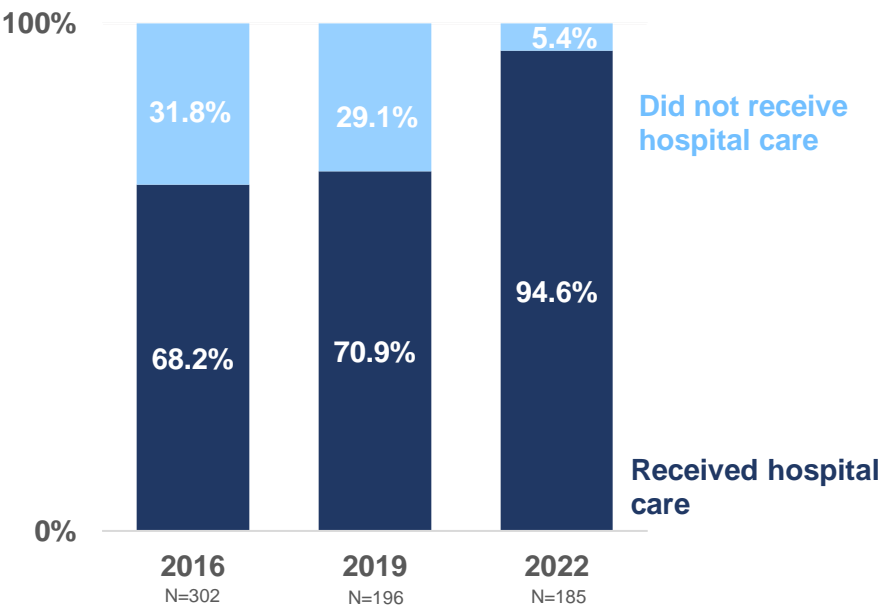
Hospital Care Utilization (Question 23)

Respondents were asked if they or someone in their household had received hospital care in the last three years. Hospitalization was quantified as hospitalized overnight, day surgery, obstetrical care, rehabilitation, radiology, or emergency care. Ninety-four point six percent of respondents (n=175) reported that they or a member of their family had received hospital care during the previous three years and 5.4% (n=10) had not.

The majority of respondents report utilization of hospital services



Hospital utilization increased by 23.7% since the 2019 assessment



Location of Hospital Care (Question 24)

Of the 175 respondents who indicated receiving hospital care in the previous three years, 121 provided a response about the location of the hospital they used most often. Forty-six point three percent (n=56) reported receiving care at Central Montana Medical Center. Eighteen point two percent of respondents (n=22) received services at St. Vincent Healthcare and 14.9% of respondents (n=18) reported utilizing services from Billings Clinic.

Hospital Used Most Often	2016 % (n)	2019 % (n)	2022 % (n)
Number of respondents	186	139	121
Central Montana Medical Center	59.7% (111)	54.7% (76)	46.3% (56)
St. Vincent Healthcare	19.4% (36)	11.5% (16)	18.2% (22)
Billings Clinic	8.6% (16)	10.1% (14)	14.9% (18)
Benefis	6.5% (12)	5.0% (7)	7.4% (9)
Veterans Hospital	1.6% (3)	0.0% (0)	0.8% (1)
Other*	4.3% (8)	18.7% (26)	12.4% (15)
TOTAL	100.1% (186)	100.0% (139)	100.0% (121)

Statistical significance was not measured as reporting differed between 2022 and the two previous years. A larger number of missing values in 2022 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. *Respondents (n=9) who selected over the allotted amount were moved to "Other."

"Other" comments included: "Great Falls Clinic (4)" and "Yellowstone Surgical Center (2)."

View a cross tabulation of where respondents live with where they utilize hospital services on p. 86

Reasons for Selecting Hospital (Question 25)

Of the 122 respondents who provided a response for a personal or family experience at a hospital within the past three years, the primary reason given for selecting the facility used most often was “Closest to home” at 48.4% (n=59). “Prior experience with hospital” was selected by 46.7% of the respondents (n=57), and 39.3% (n=48) selected “Referred by physician or other provider.” Note that respondents were asked to select the top three answers which influenced their choices, so the percentages do not equal 100%.

Reasons for Selecting Hospital	2016 % (n)	2019 % (n)	2022 % (n)
Number of respondents	206	137	122
Closest to home	52.9% (109)	58.4% (80)	48.4% (59)
Prior experience with hospital	34.5% (71)	43.1% (59)	46.7% (57)
Referred by physician or other provider	43.2% (89)	50.4% (69)	39.3% (48)
Hospital’s reputation for quality	24.8% (51)	22.6% (31)	34.4% (42)
Emergency, no choice	35.9% (74)	32.8% (45)	24.6% (30)
Recommended by family or friends	5.3% (11)	10.2% (14)	12.3% (15)
Required by insurance plan	2.9% (6)	1.5% (2)	4.9% (6)
Closest to work	4.9% (10)	3.6% (5)	4.1% (5)
VA/Military requirement	4.4% (9)	2.9% (4)	3.3% (4)
Privacy/confidentiality			2.5% (3)
Cost of care	5.8% (12)	2.2% (3)	1.6% (2)
Financial assistance programs		2.2% (3)	1.6% (2)
Other*	4.9% (10)	9.5% (13)	9.0% (11)

Statistical significance was not measured as reporting differed between 2022 and the two previous years. A larger number of missing values in 2022 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Respondents were asked to pick their top three reasons for selecting a hospital, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. *Respondents (n=2) who selected over the allotted amount were moved to “Other.”

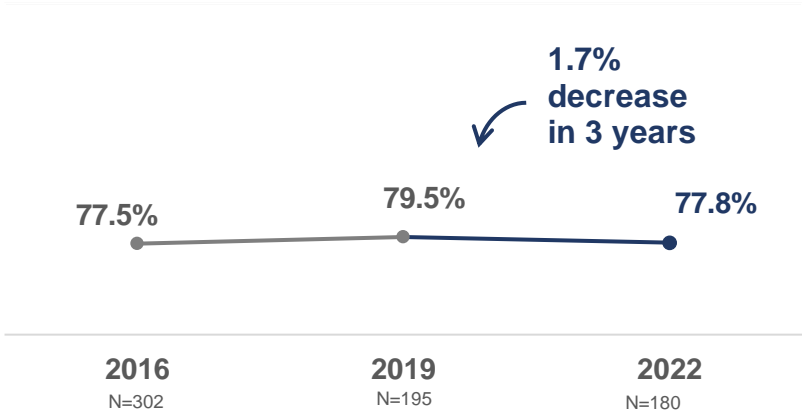
“Other” comments included: “Surgery unavailable at CMMC”

View a cross tabulation of where respondents utilize hospital services with their reasons for selecting that facility p. 88

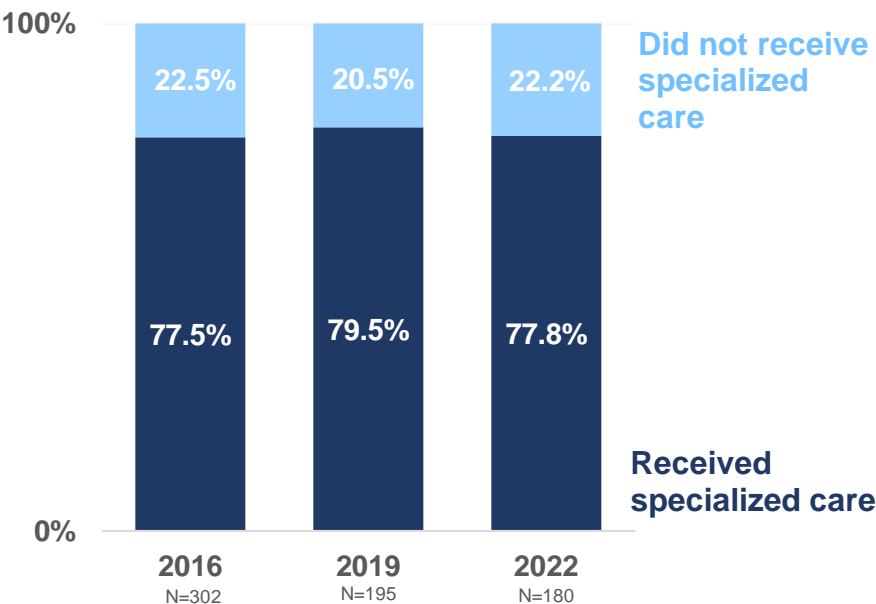
Healthcare Specialist Utilization (Question 26)

Respondents were asked if they or someone in their household had seen a healthcare specialist in the past three years. Seventy-seven point eight percent of the respondents (n=140) indicated they or a household member had seen a healthcare specialist during the past three years; 22.2% (n=40) indicated they had not.

Specialty care utilization slightly decreased since the last assessment



Majority of the 2022 respondents saw a specialist in the past 3 years



Location of Healthcare Specialist (Question 27)

Of the 140 respondents who indicated they saw a healthcare specialist in the past three years, 42.1% (n=59) saw one at Central Montana Medical Center. Billings Clinic was utilized by 37.9% of respondents (n=53) while, twenty-five point seven percent of respondents (n=36) saw a specialist at St. Vincent Healthcare. Respondents could select more than one location, so percentages do not equal 100%.

Location of Specialist	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	234	155	140	
Central Montana Medical Center	44.9% (105)	43.2% (67)	42.1% (59)	<input type="checkbox"/>
Billings Clinic	34.2% (80)	32.9% (51)	37.9% (53)	<input type="checkbox"/>
St. Vincent Healthcare	35.0% (82)	30.3% (47)	25.7% (36)	<input type="checkbox"/>
Benefis	15.4% (36)	20.0% (31)	20.7% (29)	<input type="checkbox"/>
One Health – Lewistown		3.9% (6)	4.3% (6)	<input type="checkbox"/>
Veterans Hospital	6.0% (14)	3.2% (5)	2.9% (4)	<input type="checkbox"/>
Other	17.1% (40)	32.9% (51)	19.3% (27)	<input checked="" type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to indicate the location of any specialist seen in the past three years, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: “Great Falls Clinic (3),” “Yellowstone Surgical Center,” and “Orthopedic Montana Billings (2).”

Type of Healthcare Specialist (Question 28)

The respondents (n=140) saw a wide array of healthcare specialists in the past three years. The most frequently indicated specialist was a “Dentist” with 28.8% of respondents (n=40) having utilized their services. “Orthopedic surgeon” was the second most utilized specialist at 26.6% (n=37) and “Dermatologist” was third at 25.9% (n=36). Respondents were asked to choose all that apply, so percentages do not equal 100%. One respondent chose not to answer.

Type of Specialists Seen	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	234	155	139	
Dentist	26.9% (63)	31.6% (49)	28.8% (40)	<input type="checkbox"/>
Orthopedic surgeon	31.2% (73)	32.9% (51)	26.6% (37)	<input type="checkbox"/>
Dermatologist	20.5% (48)	21.3% (33)	25.9% (36)	<input type="checkbox"/>
Cardiologist	23.9% (56)	21.9% (34)	24.5% (34)	<input type="checkbox"/>
Physical therapist	19.2% (45)	20.6% (32)	20.1% (28)	<input type="checkbox"/>
Optometrist		18.1% (28)	19.4% (27)	<input type="checkbox"/>
General surgeon	12.8% (30)	20.6% (32)	18.0% (25)	<input type="checkbox"/>
Radiologist	12.4% (29)	22.6% (35)	17.3% (24)	<input checked="" type="checkbox"/>
Oncologist	7.7% (18)	8.4% (13)	15.1% (21)	<input type="checkbox"/>
Urologist	10.3% (24)	12.9% (20)	15.1% (21)	<input type="checkbox"/>
Chiropractor	15.0% (35)	20.6% (32)	14.4% (20)	<input type="checkbox"/>
OB/GYN	12.4% (29)	9.7% (15)	13.7% (19)	<input type="checkbox"/>
Neurologist	10.7% (25)	14.2% (22)	11.5% (16)	<input type="checkbox"/>
ENT (ear/nose/throat)	12.0% (28)	11.6% (18)	10.1% (14)	<input type="checkbox"/>
Audiologist		10.3% (16)	7.2% (10)	<input type="checkbox"/>
Gastroenterologist	8.5% (20)	9.0% (14)	7.2% (10)	<input type="checkbox"/>
Ophthalmologist		11.6% (18)	7.2% (10)	<input type="checkbox"/>
Pulmonologist	3.8% (9)	7.1% (11)	7.2% (10)	<input type="checkbox"/>
Endocrinologist		5.8% (9)	6.5% (9)	<input type="checkbox"/>
Pain management		3.9% (6)	5.8% (8)	<input type="checkbox"/>
Rheumatologist	6.4% (15)	6.5% (10)	5.8% (8)	<input type="checkbox"/>

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Mental health counselor		3.2% (5)	5.0% (7)	<input type="checkbox"/>
Occupational therapist	4.7% (11)	3.9% (6)	5.0% (7)	<input type="checkbox"/>
Podiatrist	8.5% (20)	8.4% (13)	5.0% (7)	<input type="checkbox"/>
Neurosurgeon		1.9% (3)	4.3% (6)	<input type="checkbox"/>
Allergist	3.4% (8)	3.2% (5)	3.6% (5)	<input type="checkbox"/>
Pediatrician	1.7% (4)	3.2% (5)	3.6% (5)	<input type="checkbox"/>
Social worker		0.6% (1)	2.9% (4)	<input type="checkbox"/>
Psychiatrist (M.D.)	2.1% (5)	2.6% (4)	2.2% (3)	<input type="checkbox"/>
Speech therapist	1.7% (4)	2.6% (4)	2.2% (3)	<input type="checkbox"/>
Psychologist	1.7% (4)	0.0% (0)	1.4% (2)	<input type="checkbox"/>
Geriatrician		0.6% (1)	0.0% (0)	<input type="checkbox"/>
Substance abuse counselor	0.9% (2)	0.6% (1)	0.0% (0)	<input type="checkbox"/>
Other	9.8% (23)	9.7% (15)	7.2% (10)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to indicate each type of specialist seen, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: “Plastic Surgery (3)” and “Nephrologist (5).”

Desired Specialty Healthcare Services (Question 29)

Respondents were asked to indicate which additional specialty healthcare services they would utilize if available locally. Respondents indicated the most interest in having “Expanded cancer care services” at 33.9% (n=39), followed by “Expanded women’s health services” at 31.3% (n=36), and “Expanded pain management services” at 29.6% (n=34). Respondents were asked to select all that apply, so percentages do not equal 100%.

Desired Local Healthcare Services	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	127	115	
Expanded cancer care services	21.3% (27)	33.9% (39)	■
Expanded women’s health services	28.3% (36)	31.3% (36)	<input type="checkbox"/>
Expanded pain management services	23.6% (30)	29.6% (34)	<input type="checkbox"/>
Expanded telemedicine services	18.1% (23)	24.3% (28)	<input type="checkbox"/>
Expanded mental health services	15.0% (19)	19.1% (22)	<input type="checkbox"/>

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Expanded transportation services	11.8% (15)	16.5% (19)	<input type="checkbox"/>
Orthodontics	14.2% (18)	14.8% (17)	<input type="checkbox"/>
Other	15.7% (20)	14.8% (17)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to pick all desired local healthcare services that are of interest, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: “Dermatology” and “Dialysis clinic.”

Rating of Care at Central Montana Medical Center (Question 30)

Respondents were asked to rate a variety of aspects of the overall care provided at Central Montana Medical Center using the scale of 4=Excellent, 3=Good, 2=Fair, 1=Poor, and Don't Know. The sums of the average scores were then calculated with “Physical Therapy” receiving the top average score of 3.5 out of 4.0. “Radiology/imaging,” “Home care (home health/hospice),” and “Infusion services” all received a score of 3.4 out of 4.0. The total average score 3.1, indicates the overall services of the hospital as “Good.”

Quality of Care Rating at Central Montana Medical Center - Lewistown	2016 Average (n)	2019 Average (n)	2022 Average (n)	SIGNIFICANT CHANGE
4 Point Scale: Poor = 1, Fair = 2, Good = 3, Excellent = 4				
Total number of respondents	284	185	170	
Physical therapy		3.4 (83)	3.5 (69)	<input type="checkbox"/>
Radiology/imaging	3.1 (188)	3.2 (108)	3.4 (115)	<input checked="" type="checkbox"/>
Home care (home health/hospice)	3.5 (68)	3.5 (34)	3.4 (30)	<input type="checkbox"/>
Infusion services	3.4 (77)	3.3 (28)	3.4 (29)	<input type="checkbox"/>
General surgery	3.3 (79)	3.4 (53)	3.3 (57)	<input type="checkbox"/>
Ambulance services	3.4 (100)	3.5 (57)	3.3 (42)	<input type="checkbox"/>
Cardiac rehabilitation		3.3 (22)	3.3 (25)	<input type="checkbox"/>
Laboratory	3.3 (238)	3.2 (152)	3.2 (133)	<input type="checkbox"/>
Clinic/primary care services		3.1 (139)	3.2 (122)	<input type="checkbox"/>
Wound care		3.2 (37)	3.2 (27)	<input type="checkbox"/>
OB/Birthing services	2.9 (36)	3.2 (25)	3.2 (22)	<input type="checkbox"/>
Admissions/check-in	3.2 (268)	3.2 (174)	3.1 (157)	<input type="checkbox"/>

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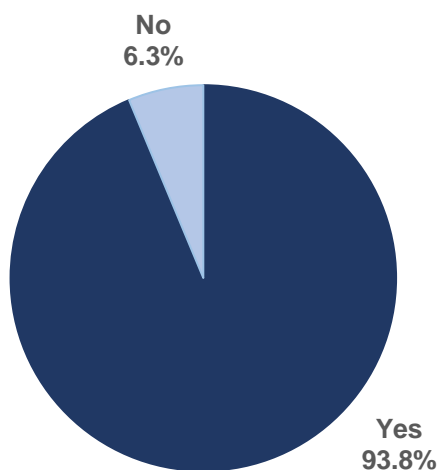
Emergency department	3.3 (175)	3.2 (120)	3.1 (108)	<input type="checkbox"/>
In-patient/hospital care		3.2 (77)	3.1 (60)	<input type="checkbox"/>
Orthopedic services/surgery	3.0 (69)	3.3 (38)	3.1 (38)	<input type="checkbox"/>
Occupational therapy		3.2 (29)	3.1 (19)	<input type="checkbox"/>
Home medical equipment/home oxygen	3.2 (72)	3.1 (34)	3.0 (40)	<input type="checkbox"/>
Sleep study		3.0 (30)	3.0 (33)	<input type="checkbox"/>
Pulmonary rehabilitation	3.4 (111)	3.1 (14)	2.9 (17)	<input checked="" type="checkbox"/>
Telemedicine services		2.6 (7)	2.9 (17)	<input type="checkbox"/>
Care Coordination department		3.0 (32)	2.8 (26)	<input type="checkbox"/>
Speech therapy		3.1 (9)	2.7 (9)	<input type="checkbox"/>
Business office/insurance and billing	3.1 (190)	2.7 (157)	2.6 (126)	<input checked="" type="checkbox"/>
Dietician/diabetes services	3.2 (69)	3.2 (31)	2.6 (28)	<input checked="" type="checkbox"/>
Overall average	3.2(284)	3.2 (185)	3.1 (170)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Grayed out cells indicate the question was not asked that year.

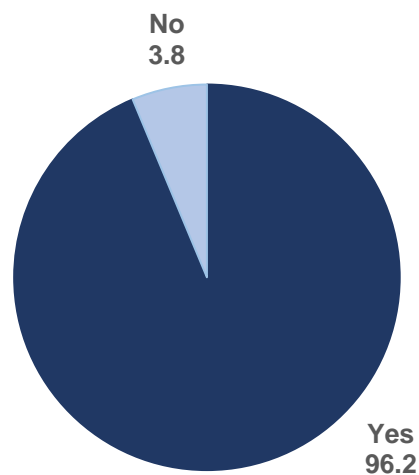
Insurance Coverage (Question 31)

Respondents were asked to indicate if they have health insurance. Ninety-six point two percent (n=175) reported they did have health coverage, while 3.8% (n=7) did not.

Health Insurance Coverage 2019



Health Insurance Coverage 2022



Type of Health Insurance (Question 32)

Respondents were asked to indicate what type of medical insurance covers the majority of their medical expenses. Thirty-three percent (n=59) indicated they have “Medicare” coverage. Twenty-two point three percent (n=40) indicated they have “Employer sponsored” and 17.3% (n=31) indicated they have a coverage other than those listed.

Type of Health Insurance	2016 % (n)	2019 % (n)	2022 % (n)
Number of respondents	252	187	179
Medicare	31.0% (78)	25.1% (47)	33.0% (59)
Employer sponsored	36.9% (93)	27.8% (52)	22.3% (40)
Health Insurance Marketplace	5.6% (14)	4.8% (9)	7.3% (13)
Medicaid	4.0% (10)	2.7% (5)	5.0% (9)
Private insurance/private plan	9.9% (25)	7.5% (14)	5.0% (9)
None/pay out of pocket	4.0% (10)	7.0% (13)	3.9% (7)
VA/military	6.0% (15)	2.7% (5)	3.4% (6)
Health Savings Account	0.4% (1)	1.1% (2)	1.7% (3)
Healthy MT Kids	1.2% (3)	2.1% (4)	1.1% (2)
Indian Health	0.0% (0)	0.0% (0)	0.0% (0)
Other*	1.2% (3)	19.3% (36)	17.3% (31)
TOTAL	100.2% (252)	100.1% (187)	100.0% (179)

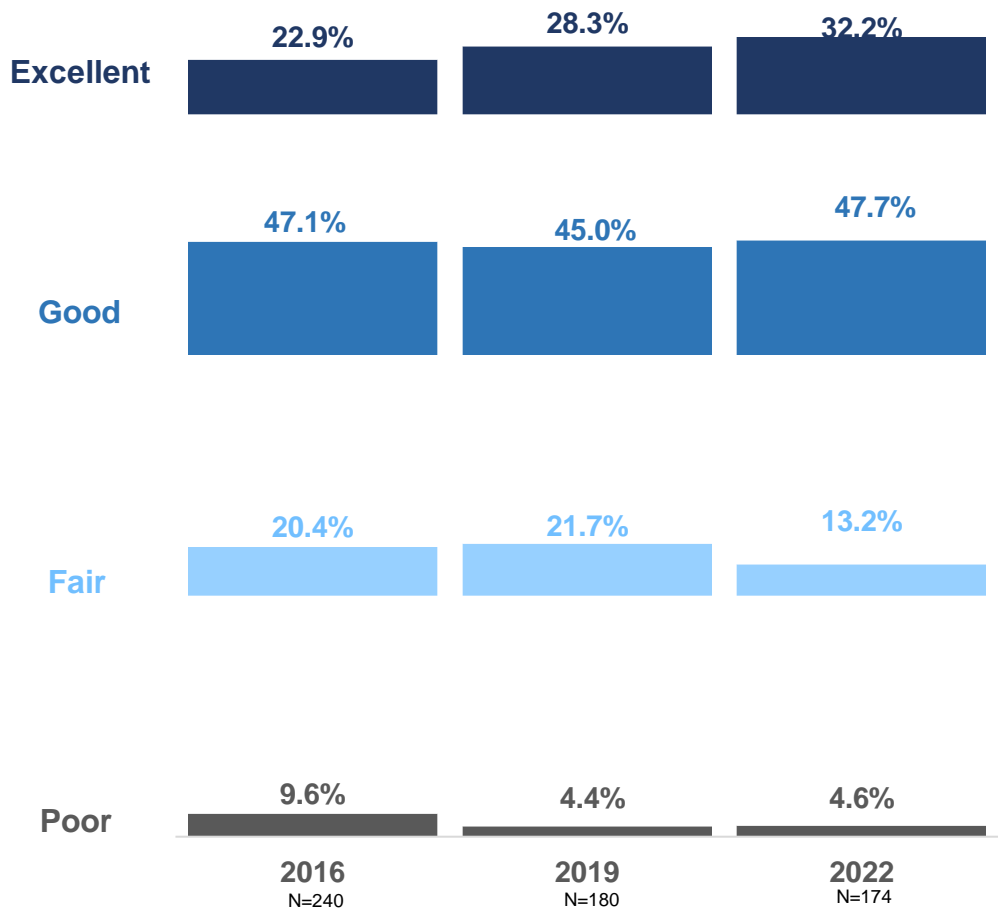
Statistical significance was not measured as reporting differed between 2022 and the two previous years. A larger number of missing values in 2022 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Respondents who answered “No” to the previous question were moved to the “None/pay out of pocket” response option for the above table. Grayed out cells indicate the question was not asked that year.

*Respondents (n=27) who selected over the allotted amount were moved to “Other.”

Insurance and Healthcare Costs (Question 33)

Respondents were asked to indicate how well they felt their health insurance covers their healthcare costs. Forty-seven point seven percent of respondents (n=83) indicated they felt their insurance covers a “Good” amount of their healthcare costs. Thirty-two point two percent of respondents (n=56) indicated they felt their insurance covered an “Excellent” amount of costs and 13.2% of respondents (n=23) indicated they felt their insurance covered a “Fair” amount of their healthcare costs.

Most people feel that their health insurance offers **excellent** or **good** coverage



Barriers to Health Insurance (Question 34)

For those who indicated they did not have insurance (n=6), the top reason selected for not having insurance was “Can’t afford to pay for health insurance.” Respondents could select all that apply.

Reasons for No Health Insurance	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	10	13	6	
Can’t afford to pay for health insurance	90.0% (9)	69.2% (9)	83.3% (5)	<input type="checkbox"/>
Employer does not offer insurance	20.0% (2)	46.2% (6)	16.7% (1)	<input type="checkbox"/>
Choose not to have health insurance	10.0% (1)	15.4% (2)	16.7% (1)	<input type="checkbox"/>
Too confusing/don’t know how to apply			0.0% (0)	<input type="checkbox"/>
Other	10.0% (1)	7.7% (1)	33.3% (2)	<input type="checkbox"/>

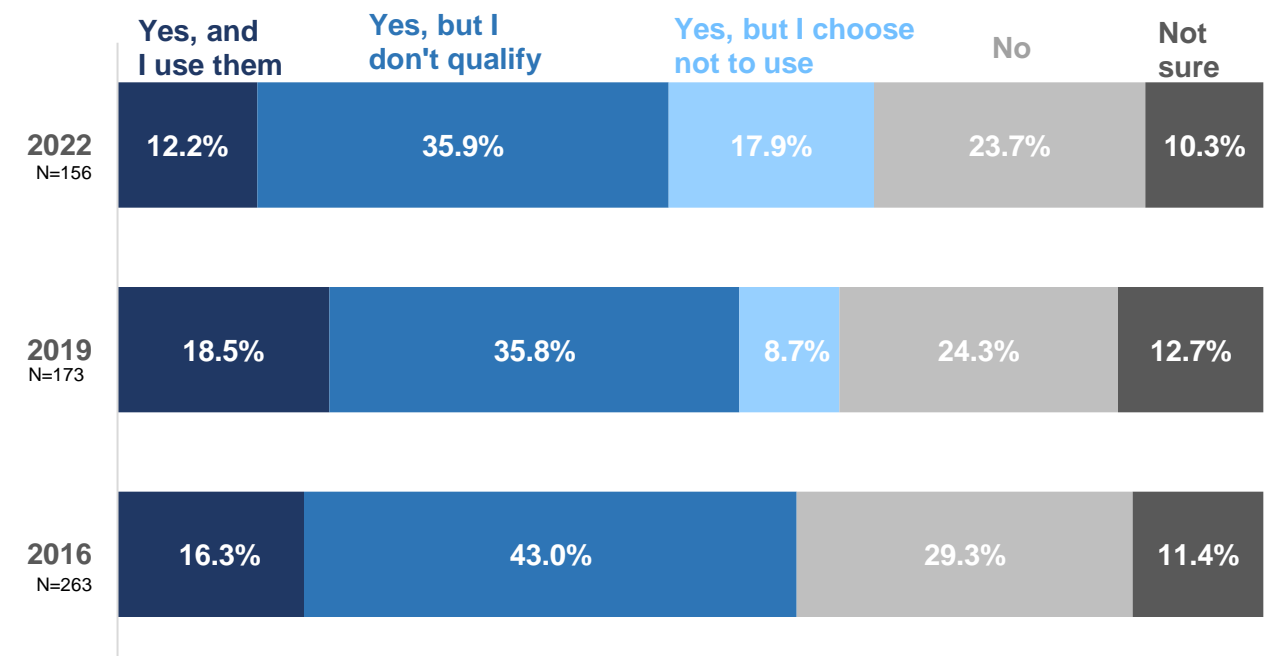
A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to indicate each type of specialist seen, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: “Self-employed and can’t afford”

Awareness of Healthcare Assistance Programs (Question 35)

Respondents were asked to indicate their awareness of programs that help people pay for healthcare bills. Thirty-five point nine percent of respondents (n=56) indicated they were aware of these types of programs but did not qualify to utilize them. Twenty-three point seven percent (n=37) indicated that they were not aware of these programs and 12.2% of respondents (n=19) indicated they are aware of the programs and utilize them.

Nearly a quarter of 2022 respondents are not aware of programs that help people pay for healthcare expenses





KEY INFORMANT RESULTS

Key Informant Interview Methodology

Three key informant interviews were conducted in March 2022. Participants were identified as people living in Central Montana Medical Center's service area.

Due to limitations associated with COVID-19, the three interviews were conducted over the telephone. The meetings lasted up to 15 minutes in length and followed the same line of questioning. Interview transcripts can be found in Appendix I. Interviews were facilitated by Montana Office of Rural Health staff.



Key Informant Interview Themes

The following key findings, themes, and health needs emerged from the responses which participants gave to the line of questioning found in Appendix H.

Mental Health



Mental health services and resources were frequently discussed as a need in the community. Specifically, more mental health providers and mental telehealth services. It was noted that people often don't know where or how to access mental health resources and that can be a challenge as well. One participant stated, "I see that mental health is the number one issue around the community and COVID has really exacerbated things in general." Another participant mentioned, "We have a demographic that doesn't often ask for help, there are negative connotations that come with seeking mental health services in a smaller community." Participants also identified One Health as being quite beneficial overall, but mentioned they do exceptionally well with mental health services.

Nutrition and Active Living Opportunities



Across all interviews, health education, nutrition, and fitness were identified as areas of focus for the community. Several participants mentioned that the colder winter months are especially difficult when it comes to exercising and finding affordable healthy food options. One participant noted, “We have a really nice farmers market during the warmer months but I think it would be good to have access to nutritious and affordable foods year round.” Another participant noted that they would like to see more preventive health measures adopted, “...employers that offer fitness passes or more incentives for healthy behaviors, we need to be encouraging people to move.”

Community members also highlighted the need for education, on top of expanded resources and services. One interviewee stated, “The community could benefit from more regular education on healthy lifestyles, particularly some tips for staying healthy and active in the winter months.” Additional education within schools and for younger adults related to healthy eating habits was recognized as a potential preventive measure.

SERVICES NEEDED IN THE COMMUNITY

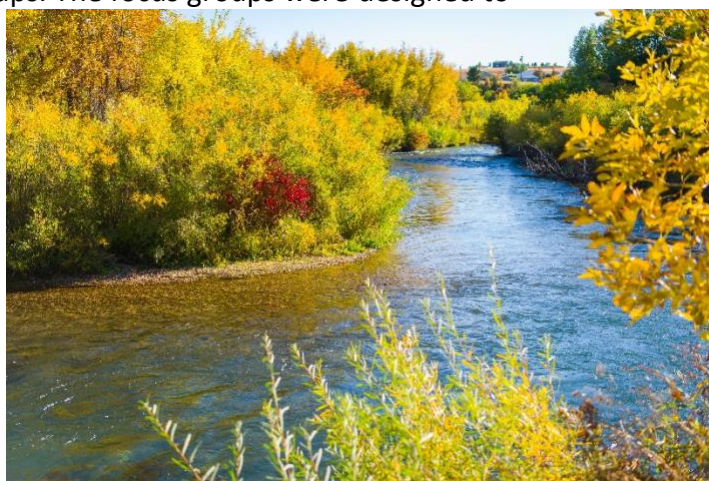


- Nutrition and healthy lifestyle education
- More local providers
- Winter health and wellness activities and programs
- Cancer care and support
- More outreach and awareness of local services
- Mental and behavioral health resources
- Naturopathic services
- Substance abuse services
- Affordable senior housing options
- Increased workforce for at home care

Focus Group Interview Methodology

Two focus groups were conducted in February of 2022. Participants were identified as people living in Central Montana Medical Center's (CMMC) service area.

Forty-four people participated in the focus groups. The focus groups were designed to represent various consumer groups of healthcare including senior citizens, local community members, and community leaders. The focus groups were held at the Council on Aging and CMMC. The meetings lasted from 30 to 90 minutes in length and followed the same line of questioning, although some questions were omitted due to time constraints. Focus group transcripts can be found in Appendix G. Focus groups were facilitated by Sara Jestrab and Josh Hunsaker with the Montana Office of Rural Health.



Focus Group Themes

The following key findings, themes, and health needs emerged from the responses which participants gave to the line of questioning found in Appendix G.

Senior Services



Additional and improved senior services were discussed as a need in the community. Specifically, adult daycare, transitional assistance, Alzheimer's care, and improved veteran services were stated as areas of improvement. Community members stated, "We would like to see the VA keep people here for things like x-rays and colonoscopies, rather than sending them to Helena, Great Falls, or Billings." Participants also mentioned that the Senior Center has extensive services and does a great job, but they would like to see more home health services to relieve the burden on healthcare workers.

Focus group participants stated that community members often have to travel long distances for many of their chronic illnesses. An attempt to improve or expand telehealth services for more minor visits was highly encouraged by community members. Focus group participants also mentioned, "There is a need for services that help people transition from their homes into senior

care centers.” Similarly, participants noted that the Council on Aging has a good home health program, but often runs into issues related to staffing.

MENTAL HEALTH

Community members highlighted concerns with mental health services, support, and availability. Several members identified mental health as being a real challenge in the community, across all age demographics. One participant stated, “The Mental Health Center has barely been a blip on our radar over the past few years. We do have some counseling services but there really is no community wide engagement.”



Individuals often have to travel out of town to seek access to mental health providers; in part due to stigma associated with seeking help among peers in the community and a lack of mental health providers locally. It was noted that improved mental health education and awareness would be beneficial to the community as a whole. Another participant also mentioned, “It would be great to see more mental health support for teens and youth, counselors and providers are often full for that age group. It may also be related to the drinking culture in the community.”

Focus group members recognized that a community approach to mental health might be the most effective route for addressing such an issue. Involving One Health, the police force, CMMC, and other local services provides a more widespread and encompassing care network.

HEALTH EDUCATION, FITNESS, AND NUTRITION

The focus group participants identified several chronic diseases and unhealthy habits as it relates to physical activity and nutrition. Cardiovascular disease, diabetes, health education, and lack of healthy food options were all recognized as challenges within the community. There was an expressed need to educate and create more awareness about healthy lifestyle choices, especially within schools. Individuals mentioned expanding after school programs as well, “We have a lot of kids but not very many coaches.”



SERVICES NEEDED IN THE COMMUNITY



- More mental health resources
- Home health services
- Additional counseling services for youth
- Payment assistance programs
- Increased dissemination of hospital resources
- Increased health outreach and fitness opportunities
- Access to healthy foods
- Improved senior housing options
- Additional senior services
- Prevention programs among youth
- More encompassing VA services
- Childcare and pediatricians



EXECUTIVE SUMMARY

Executive Summary

The table below shows a summary of results from Central Montana Medical Center's Community Health Needs Assessment. Areas of opportunity were determined after consideration of various criteria, including a comparison to data from local, state, and federal sources (Secondary data); survey results; those issues of greatest concern identified by the community stakeholders through key informant interviews; and the potential impact of a given issue.

Areas of Opportunity	Secondary Data	Survey	Interviews
Access to Healthcare Services			
<i>More primary care providers</i>	⊗	✓	☑
<i>Specialty services (i.e., urgent care, pediatrics, and women's health)</i>	⊗	✓	☑
<i>Awareness and rating of available services (i.e., hospital and community)</i>		✓	☑
<i>Affordability and insurance</i>	⊗	✓	☑
<i>Decline in access to care due to COVID-19</i>		✓	☑
<i>Home health</i>		✓	☑
Chronic Disease Prevention			
<i>Nutrition: Access to affordable produce and education</i>		✓	☑
<i>Overweight/obesity/physical inactivity</i>		✓	☑
<i>Health education- weight loss, fitness, health & wellness, nutrition</i>		✓	☑
Mental and Behavioral Health			
<i>More mental health services/resources</i>	⊗	✓	☑
<i>Alcohol/substance abuse</i>	⊗	✓	☑
<i>Stress management</i>		✓	
Health Measures			
<i>Cancer</i>	⊗	✓	☑
<i>Vaccination [i.e., HPV up-to-date (UTD), vaccine preventable diseases]</i>	⊗		



NEXT STEPS & RESOURCES

Prioritization of Health Needs

The community steering committee, comprised of staff leaders from Central Montana Medical Center (CMMC) and community members from Fergus County, convened to begin an implementation planning process to systematically and thoughtfully respond to all issues and opportunities identified through the Community Health Services Development (CHSD) Process.

The community steering committee determined the most important health needs to be addressed by reviewing the CHNA, secondary data, community demographics, and input from representatives representing the broad interest of the community, including those with public health expertise (see Appendix B for additional information regarding input received from community representatives). The prioritized health needs as determined through the assessment process and which the collaborators will be addressing over the next three years relates to the following healthcare issues:

- Mental and behavioral health
- Access to healthcare services

Central Montana Medical Center will determine which needs or opportunities could be addressed considering CMMC's parameters of resources and limitations. The committee will prioritize the needs/opportunities using the additional parameters of the organizational vision, mission, and/or values, as well as existing and potential community partners.

The participants will create goals to achieve through strategies and activities, as well as the general approach to meeting the stated goal (i.e., staff member responsibilities, timeline, potential community partners, anticipated impact(s), and performance/evaluation measures). This plan will be documented and posted along with the CHSD assessment report.

Available Community Resources

In prioritizing the health needs of the community, the following list of potential community partners and resources in which to assist in addressing the needs identified in this report were identified. As the steering committee continues to meet, more resources will continue to be identified, therefore, this list is not exhaustive.

- Fergus County Council on Aging
- Central Montana Community Health Center
- Central Montana Family Planning
- Central Montana Foundation
- Lewistown Public School District
- Montana Office of Rural Health
- City of Lewistown
- Veteran Services
- Central Montana Health District
- Lewistown News Argus
- KXLO/KLCM Radio
- Fergus County Port Authority
- Lewistown Job Service
- HRDC
- Medical Center Foundation
- “Roundup” Newsletter
- Montana Hospital Association
- Fergus County Sexual Assault Nurse Examiner Program

Evaluation of Previous CHNA & Implementation Plan

Central Montana Medical Center provided the Montana Office of Rural Health with an update on their Implementation Plan activities from their previous CHNA process. The CMMC Board of Directors approved its previous implementation plan in December 2019. The plan prioritized the following health issues:

- Access to Behavioral Health Services
- Access to Healthcare Services
- Healthcare Billing, Insurance, and Financial Navigation
- Population Health

The following tables include completed activities, accomplishments and impacts/outcomes within the facility's proposed goals. To view CMMC's full Implementation Plan visit: cmmc.health.

Goal 1: Expand access to behavioral health services at Central Montana Medical Center.

	Activities	Accomplishments	Community Impact/Outcomes
Strategy 1.1: Develop a workforce and processes to support CMMC's behavioral health activities.	Explore feasibility of additional staff positions (social worker, licensed addiction counselor, other).	Hired Psych Nurse Practitioner in Dec. 2020 Contract with Billings Clinic and Frontier Psych groups to bring addiction counselor and tele-psych capabilities.	All ages have access to psychological services without having to travel, either through in person visits or telehealth.
	Expand number of M.A.T. trained providers in clinic and ED.	3 providers were trained, more providers planned to receive training, covid disrupted action item.	Not accomplished due to COVID-19 complications and disruption.
Strategy 1.2: Support local community efforts that address behavioral health needs in the CMMC service area	Continue to participate in the Lewistown Dementia Friendly Community workgroup.	Lewistown Dementia Friendly Group disbanded during covid	Not accomplished due to COVID-19 complications and disruption.
	Continue to assist local support groups (dementia support, care givers support, cancer, etc.).	We continue to provide a monthly support group to Dementia caregivers, Men & Women Surviving Cancer	All 3 support groups are well attended. Covid did disrupt meetings over the last 2 years, and for safety reasons group was not meeting. All three groups are meeting again.
	Explore opportunities to expand health educational offerings in the CMMC area (at CMMC or with community partners).	In April of 2020, community wide health orgs had a Health Fair planned but was cancelled due to Covid, New Health and Family Resource fair to take place in April 2022.	Not accomplished due to COVID-19 complications and disruption.

Strategy 1.3: Ensure sustainability of collaborative care efforts at CMMC which help screen and provide resources for behavioral health needs	Explore feasibility of expanding behavioral health telemedicine services at CMMC.	Telemed offered by CMMC staff to outlying communities and here with a psych NP and Doctor.	Telemed continues to be less popular than in person appointments but ability for patients to get psych appointments has expanded.
	Explore best practices/models to address behavioral health needs/population health metrics: implementation of suicide screenings in clinic and ED; domestic violence; OUD/SUD resources.	PQH & Social Determinant screenings done at all clinic appointments including suicide screening in student physicals and ER visits through Columbia Risk screen at intake.	Improved identification of poor mental health factors and suicide related behaviors within ER and student physical visits.

Goal 2: Increase access to healthcare services at Central Montana Medical Center.

	Activities	Accomplishments	Community Impact/Outcomes
Strategy 2.1: Increase access to primary care services at CMMC.	Conduct feasibility study of expanded clinic hours, urgent care, or walk-in clinic models.	Clinic provides “after hours” same day appointments until 7pm on Tues, Wed & Thursdays. Offer early morning Psych appointments.	While it is not a walk in clinic, CMMC is able to see patients on same day service is requested 3 days a week.
	Expand primary care workforce at CMMC (hire new providers).	Added new Internal Medicine provider to clinic.	Able to see more patients in our community demographics and provide them with additional provider choice.
	Explore feasibility of offering outreach clinic services in CMMC service areas.	Now offering surgical, podiatry and sleep study outreach in communities including Harlowton, Stanford and Malta.	Outreach clinics are well received in communities offered.
	Develop educational/marketing materials for community related to capabilities and skills to promote role of NP/PA as a part of the primary care team and services.	Did not accomplish	Not accomplished due to COVID-19 complications and disruption.
	Explore hosting a facility open house to introduce community to CMMC NP providers.	Covid disrupted action item	Not accomplished due to COVID-19 complications and disruption.
Strategy 2.2: Increase access to specialty care services at CMMC	Create community education and outreach on available CMMC specialty services, schedule, and how to make an Appointment.	Did not accomplish.	Not accomplished due to COVID-19 complications and disruption.
	Explore feasibility of specialty care service expansion (ortho, cardiology, radiology).	Hired new Radiologist, added 3D mammography services, added 3 24/7 orthopedic surgeons, and	Provide community with access to services and cutting edge technology without leaving town.

		provider with cardiology experience.	
	Create community education and outreach on telemedicine (technology/uses).	We did some training around telehealth as it became a hot topic during covid.	Telehealth continues to be a tool for the community but still not as popular or well received as in person, will continue to educate community.
	Explore hosting a telemedicine open house to introduce community to CMMC telemedicine services.	N/A due to Covid restrictions	Not accomplished due to COVID-19 complications and disruption.

Goal 3: Enhance patient understanding of healthcare billing, insurance, and navigation of patient financial programs.

	Activities	Accomplishments	Community Impact/Outcomes
Strategy 3.1: Improve CMMC education and outreach efforts related to billing, insurance and financial health.	Create outreach to assist community in understanding changes in patient billing and transition to Cerner.	Currently in transition on billing, was not accomplished.	Not accomplished due to COVID-19 complications and disruption.
	Explore development of a “How to Interpret My Bill” tab/resource on CMMC website.	Was unable to accomplish during this CHNA cycle but may explore in the future.	Not accomplished due to COVID-19 complications and disruption.
	Create education and marketing on how to access new website resource for CMMC community and staff.	Created a pamphlet on patient portal and have website tab with instructions.	Providers and nurses help patients by providing literature.
	Convene community partners (insurance, Council on Aging, etc.) to develop and support community financial education (topics may include health insurance education, personal finance, estate planning, financial assistance programs, etc.).	N/A due to Covid	Not accomplished due to COVID-19 complications and disruption.

Goal 4: Enhance population health education and outreach in the CMMC service area.

	Activities	Accomplishments	Community Impact/Outcomes
Strategy 4.1: Continue population health related outreach through CMMC.	Assess and promote current CMMC classes and programs that promote health and wellness.	Annual Diabetes Prevention Program is up and running	Class fills up each session
	Explore offering health additional education classes and programs that promote prevention, health, and chronic disease management (diabetes management, COPD, parenting, financial education, stress management, cancer support, etc.).	Currently only have DPP – covid stalled further outreach will explore more opportunities	Not accomplished due to COVID-19 complications and disruption.
	Continue to support physical health and healthy behaviors in the CMMC service area (community fun runs, sponsoring various events, etc.).	CMMC sponsored several organizations and events within the community that fall into the line of healthy behaviors such as Relay for Life.	Helps CMMC gain recognition in the community as a leader in health care and healthy habits.
Strategy 4.2: Develop community resource to increase knowledge of available health and wellness opportunities.	Convene community partners to assess and catalogue available resources.	Currently in process	Outcomes are still to be seen as CMMC is still in the process of cataloguing community resources.
	Collaborate with community partners to develop and promote health and wellness resource.	Currently in process	The impact of this resource development may be seen in the next CHNA cycle as it is still in progress.



APPENDICES

Appendix A- Steering Committee

Steering Committee Member	Organization Affiliation
Cody Langehn	CEO – Central Montana Medical Center (CMMC)
Stephanie Prater	Community Relations Manager – CMMC
Sue Woods	Public Health Director – Central Montana Health District (CMHD)
Thom Peck	Superintendent – Lewistown Public Schools
Heather Thom	Nursing Director – Fergus County
Heather Etheridge	Director – One Health – Lewistown
Sue Irvin	Director & Health Educator – Central Montana Family Planning
Diadama Paden	Care Coordination Manager – CMMC
Abby Wichman	Director of Compliance & Risk Management – CMMC
Carl Seilstad	Fergus County Commissioner – District 3
Dale Pfau	Director, Fergus County Council on Aging (FCCOA)
Courtney Moline	Infection Preventionist - CMMC
Mckenzie Morgan	Fergus County Prevention Specialist
Kristy Heller	Quality Improvement Manager – CMMC



Appendix B- Public Health & Populations Consultation

Public Health & Populations Consultation - a leader or representative of populations such as medically underserved, low-income, minority and/or populations with chronic disease.

Name/Organization

Cody Langehn, CEO – Central Montana Medical Center (CMMC)
 Stephanie Prater, Community Relations Manager – CMMC
 Sue Woods, Public Health Director – Central Montana Health District (CMHD)
 Thom Peck, Superintendent – Lewistown Public Schools
 Heather Thom, Nursing Director – Fergus County
 Heather Etheridge, Director – One Health – Lewistown
 Sue Irvin, Director & Health Educator – Central Montana Family Planning
 Diadama Paden, Care Coordination Manager – CMMC
 Abby Wichman, Director of Compliance & Risk Management – CMMC
 Carl Seilstad, Fergus County Commissioner – District 3
 Dale Pfau, Director, Fergus County Council on Aging (FCCOA)
 Courtney Moline, CMMC
 Mckenzie Morgan – Fergus County Prevention Specialist
 Kristy Heller - Quality Improvement Manager (CMMC)

Type of Consultation (Interview, Steering Committee, Focus Group, etc.)

First Steering Committee	12/15/2021
Focus Groups	02/07/2022
Second Steering Committee	04/26/2022

Public and Community Health

- The behavioral health statistics from the census are representative of what we are seeing in the community.
- We recently added mammography to our prevention and screening so it would be interesting to see how that number changes within the next few years.
- Last year with covid we did go to the schools to administer immunizations, often massive amounts of kids were gone due to quarantine measures.

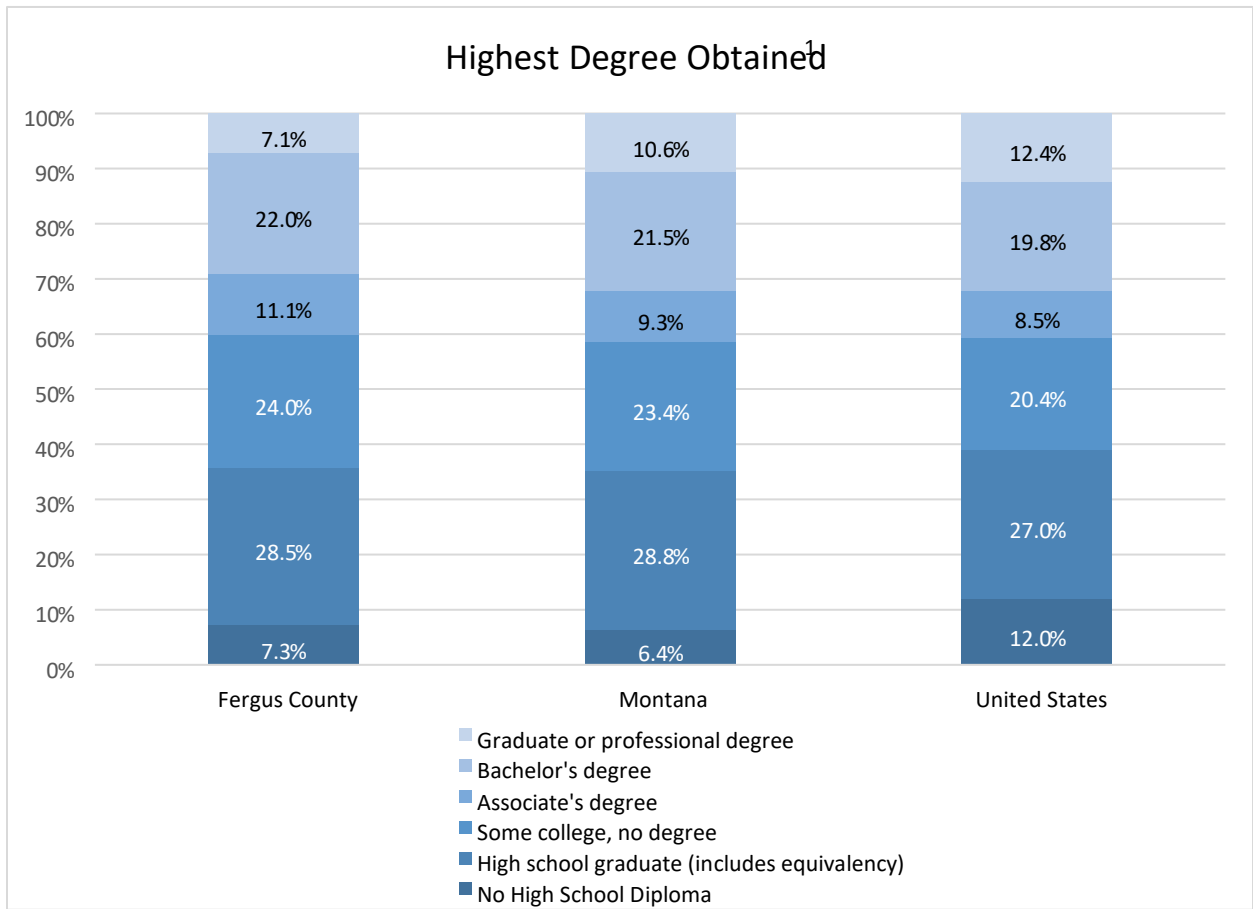
- Women are often confused about screening protocols, especially when we tell them that their pap smear is not due this year. They often don't follow-up for a health/wellness checkup.
- Please define ACES in more detail so that community members have an idea of what that condition would actually entail. The statement as is, is very broad and could be confusing for most members of the community.
- We actually see some redundancy with other options like child abuse and neglect as it relates to ACES, so we would like to remove it.
- We should add chronic respiratory illness because as it currently stands, people may specifically associate that with covid.
- My personal preference would be to not include covid in Q2 as it is something that we already know is a major issue. We would like to use this opportunity to explore other issues within the community that we might not be as aware of.
- Even if it was an option we don't think it would change what we are already trying to accomplish, in terms of addressing covid barriers/concerns.
- Our community health center is now called "One Health" (Q5, Q7, Q21).
- The health fair was canceled last year due to covid, so we can remove that option from Q10.
- We would like to remove cholesterol check and add routine blood work as it is more encompassing and community members know what that means.
- We are unsure what non-binary means, would prefer to just use "prefer to self-describe" as it covers all available options.

Population: Youth

- I find it alarming that children in poverty is that high, it is almost up to 1 in 4.
- Many children in Fergus County live with their grandparents, we see lots of grandparents shouldering the responsibility of raising their grandkids.
- We see a large portion of kids in the county living with grandparents and they often come through the foster care program, which may contribute to that children in poverty rate as well.

Appendix C- Fergus Co. Secondary Data

Demographic Measure (%)		County			Montana			Nation		
Population ¹		11,221			1,050,649			324,697,795		
Population Density ¹		2.6			7.1			85.5		
Veteran Status ¹		9.3%			10.4%			7.3%		
Disability Status ¹		13.2%			13.6%			12.6%		
Age ¹		<5	18-64	65+	<5	18-64	65+	<5	18-64	65+
		6.3%	55.9%	23.2%	5.8%	60.1%	18.2%	6.1%	61.7%	15.6%
Gender ¹		Male		Female	Male		Female	Male		Female
		51.2%		48.8%	50.3%		49.7%	49.2%		50.8%
Race/Ethnic Distribution ¹	White	95.3%			91.4%			75.3%		
	American Indian or Alaska Native	2.4%			8.3%			1.7%		
	Other [†]	3.4%			3.7%			26.5%		

¹ US Census Bureau - American Community Survey (2019)[†] Black, Asian/Pacific Islanders, Hispanic & Non-Hispanic Ancestry

Socioeconomic Measures (%)	County	Montana	Nation
Median Income ¹	\$50,540	\$54,970	\$62,843
Unemployment Rate ¹	3.1%	4.0%	5.3%
Persons Below Poverty Level ¹	15.8%	13.1%	13.4%
Children in Poverty ¹	23.2%	15.8%	18.5%
Internet at Home ²	79.7%	81.5%	-
Households with Population Age 65+ Living Alone ²	871	52,166	-
Households Without a Vehicle ²	255	21,284	-
Households Receiving SNAP ²	433	56,724	-
Eligible Recipients of Free or Reduced Price Lunch ³ 2019/2020 school year	44.3%	42.9%	-
Enrolled in Medicaid ^{4, 1}	7.5%	9.7%	19.8%
Uninsured Adults ^{5, 6} Age <65	14.0%	12.0%	12.1%
Uninsured Children ^{5, 6} Age <18	10.0%	6.0%	5.1%

¹ US Census Bureau - American Community Survey (2019), ² US Census Bureau - COVID-19 Impact Planning Report (2021), ³ Kids Count Data Center, Annie E. Casey Foundation (2020), ⁴ Medicaid Expansion Dashboard, MT-DPHHS (2020), ⁵ County Health Ranking, Robert Wood Johnson Foundation (2020), ⁶ Health Insurance Coverage, Centers for Disease Control and Prevention (CDC) (2019)

Maternal Child Health	County	Montana	Nation
General Fertility Rate* ⁷ Per 1,000 Women 15-44 years of age (2017-2019)	67.0	59.3	-
Preterm Births ⁷ Born less than 37 weeks (2017-2019)	8.5%	9.4%	-
Adolescent Birth Rate ⁷ Per 1,000 years females 15-19 years of age (2017-2019)	NA	18.3	-
Smoking during pregnancy ^{3, 8}	13.9%	16.5%	7.2%
Kotelchuck Prenatal Care** ⁷ Adequate or Adequate-Plus (2017-2019)	78.5%	75.7%	-
Low and very low birth weight infants ⁷ Less than 2500 grams (2017-2019)	6.5%	7.6%	-
Childhood Immunization Up-To-Date (UTD) ^{§ 9}	78.7%	64.8%	-

⁷ IBIS Birth Data Query, MT-DPPHS (2020), ³ Kids Count Data Center, Annie E. Casey Foundation (2020), ⁸ National Center for Health Statistics (NCHS), CDC (2016), ⁹ Clinic Immunization Results, MT-DPPHS (2020)

* General fertility rate is the number of live births per 1,000 females of childbearing age between the ages of 15-44 years.

**The Kotelchuck Index, also called the Adequacy of Prenatal Care Utilization (APNCU) Index, uses two crucial elements obtained from birth certificate data-when prenatal care began (initiation) and the number of prenatal visits from when prenatal care began until delivery (received services). The Kotelchuck index classifies the adequacy of initiation as follows: pregnancy months 1 and 2; months 3 and 4; months 5 and 6; and

months 7 to 9. A ratio of observed to expected visits is calculated and grouped into four categories: Inadequate (received less than 50% of expected visits); Intermediate (50%-79%); Adequate (80%-109%); Adequate Plus (110% or more). § UTD = 4 DTaP, 3 Polio, 1 MMR, 3/4 Hib, 3 Hep B, 1 Var, 4 PCV by 24 – 35-month-old children.

Behavioral Health	County	Montana	Nation
Adult Smoking ⁵	20.0%	19.0%	16.0%
Excessive Drinking ⁵	22.0%	22.0%	15.0%
Adult Obesity ⁵	33.0%	27.0%	26.0%
Poor Mental Health Days ⁵ (Past 30 days)	4.0	3.9	3.8
Physical Inactivity ⁵	27.0%	22.0%	19.0%
Do NOT wear seatbelts ¹⁰ State Age-Adjusted Prevalence (2018) Nation Crude Prevalence (2018)	-	10.3%	6.3%
Drink and Drive ¹⁰ State Age-Adjusted Prevalence (2018) Nation Crude Prevalence (2018)	-	3.7%	3.1%

⁵ County Health Ranking, Robert Wood Johnson Foundation (2020), ¹⁰ Behavioral Risk Factor Surveillance System, CDC (2019)

Cancer prevention & screening	County	Montana	Nation
Human Papillomavirus (HPV) vaccination UTD †† ¹¹ , ¹² Adolescents 13-17 years of age (2020)	40.7%	54.4%	58.6%
Cervical cancer screening in past 3 years ^{13, 10} Age adjusted (county/state) and crude (nation) prevalence among adult women aged 21–65 years (2018)	84.4%	76.8%	80.1%
Mammography in past 2 years ^{13, 10} Age adjusted (county/state) and crude (nation) prevalence among women 50-74 years (2018)	70.4%	73.4%	78.3%
Colorectal Cancer Screening ^{13, 10} Age adjusted (county) and crude (state/nation) prevalence among adults age 50-75 years (2018)	58.6%	64.5%	69.7%

¹¹ Adolescent Immunization Coverage by County, MT-DPHHS (2020), ¹² National Center for Immunization and Respiratory Diseases, CDC (2021), ¹³ PLACES Project, CDC (2020), ¹⁰ Behavioral Risk Factor Surveillance System, CDC (2019)

†† An up-to-date HPV vaccination measure assesses the completion of the HPV vaccine series (2 doses separated by 5 months [minus 4 days] for immunocompetent adolescents initiating the HPV vaccine series before their 15th birthday, and 3 doses for all others).

Infectious Disease Incidence Rates ¹⁴ Per 100,000 people (2015-2017)	County	Montana
Enteric Diseases *	131.4	80.1
Hepatitis C virus	99.5	93.4

Sexually Transmitted Diseases (STD) †	216.0	551.6
Vaccine Preventable Diseases (VPD) §	93.4	91.5

¹⁴ IBIS Community Snapshot, MT-DPPHS

* Foodborne illness † STD analyses include chlamydia, gonorrhea, and primary/secondary syphilis

§ VPD analyses include: Chickenpox, *Haemophilus influenzae*, Meningococcal disease, Mumps, Pertussis, *Streptococcus pneumoniae*, Tetanus

Chronic Conditions¹⁰	County	Montana	Nation
Cardiovascular Disease (CVD) prevalence <i>Adults aged 18 years and older (2014-2016)</i>	**	7.9	8.6
Chronic Obstructive Pulmonary Disease (COPD) prevalence <i>Adults aged 18 years and older (2014-2016)</i>	**	6.6	6.4
Diabetes Prevalence <i>Adults aged 18 years and older (2014-2016)</i>	**	8.3	10.6
Breast Cancer Incidence Rate <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	89.0	125.0	124.1
Cervical Cancer Incidence Rate <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	7.9	7.4
Colon and Rectum Cancer (CRC) Incidence Rate <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	36.2	37.1	38.9
Lung Cancer Incidence Rate <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	44.7	52.2	60.0
Melanoma Cancer Incidence Rate <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	26.3	21.0
Prostate Cancer Incidence Rate <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	125.4	109.6	103.0

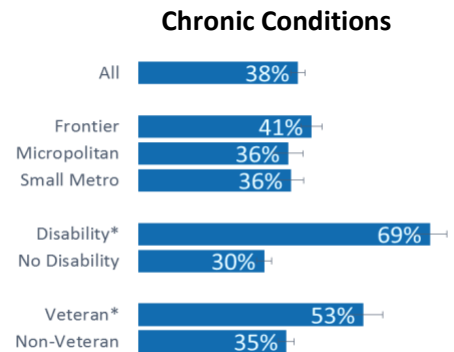
¹⁴ IBIS Community Snapshot, MT-DPPHS **

Data were suppressed to protect privacy

Montana Adults with Self-Reported Chronic Condition ¹¹	
1. Arthritis	29.0%
2. Depression	24.1%
3. Asthma	10.0%
4. Diabetes	7.6%
5. COPD	6.8%
6. Cardiovascular disease	3.9%
7. Kidney disease	2.4%

¹⁰ Behavioral Risk Factor Surveillance System, CDC (2019)

Percent of Montana Adults with Two or More Chronic Conditions



Mortality	County	Montana	Nation
Suicide Rate¹⁵ <i>Per 100,000 population (2009-2018)</i>	17.7	23.9	-
Veteran Suicide Rate¹⁵ <i>Per 100,000 population (2009-2018)</i>	-	65.7	38.4
Alzheimer's Disease Mortality Rate¹⁶ <i>Age-Adjusted per 100,000 population (2017-2019)</i>	-	21.7	-
Pneumonia/Influenza Mortality Rate¹⁷ <i>Age-Adjusted per 100,000</i>	-	10.5	12.3
Leading Causes of Death^{16, 18}	-	1. Heart Disease 2. Cancer 3. Chronic Lower Respiratory Disease (CLRD)	1. Heart Disease 2. Cancer 3. Unintentional injuries

¹⁵ Suicide in Montana, MT-DPHHS (2021), ¹⁶ IBIS Mortality Query, MT- DPHHS (2019), ¹⁷ Kaiser State Health Facts, National Pneumonia Death Rate (2019), ¹⁸ National Vital Statistics, CDC (2019) ** Data were suppressed to protect privacy.

Montana Health Disparities ¹⁰	White, non-Hispanic	American Indian/Alaska Native	Low Income*
14+ Days when physical health status was NOT good <i>Crude prevalence (2019)</i>	13.0%	17.9%	28.9%
14+ Days when mental health status was NOT good <i>Crude prevalence (2019)</i>	13.2%	19.2%	30.0%
Current smoker <i>Crude prevalence (2019)</i>	14.5%	41.5%	32.9%
Routine checkup in the past year <i>Crude prevalence (2019)</i>	72.8%	74.1%	81.1%
No personal doctor or health care provider <i>Crude prevalence (2019)</i>	26.5%	28.8%	23.8%
No dental visit in the last year for any reason <i>Crude prevalence (2020)</i>	34.9%	41.6%	48.1%
Consumed fruit less than one time per day <i>Crude prevalence (2019)</i>	40.5%	46.8%	49.5%
Consumed vegetables less than one time per day <i>Crude prevalence (2019)</i>	16.7%	18.0%	22.0%
Does not always wear a seat belt <i>Crude prevalence (2020)</i>	10.8%	15.9%	16.0%

¹⁰ Behavioral Risk Factor Surveillance System, CDC (2019)

*Annual household income < \$15,000

Youth Risk Behavior ¹⁹	Montana		Nation
	White, non-Hispanic	American Indian/Alaska Native	
Felt Sad or Hopeless <i>Almost every day for two weeks or more in a row, during the past 12 months</i>	35.3%	39.6%	36.7%
Attempted Suicide <i>During the past 12 months</i>	8.7%	15.4%	8.9%
Lifetime Cigarette Use <i>Students that have ever tried smoking</i>	28.3%	48.9%	24.1%
Currently Drink Alcohol <i>Students that have had at least one drink of alcohol on at least one day during the past 30 days</i>	34.3%	25.3%	29.2%
Lifetime Marijuana Use <i>Students that have used marijuana one or more times during their life</i>	36.9%	58.9%	36.8%
Texting and Driving <i>Among students who drove a car in the past 30 days</i>	55.2%	39.6%	39.0%

Carried a Weapon on School Property
In the last 30 days

7.2%

3.2%

2.8%

¹⁹ Montana Youth Risk Behavior Survey (2019)

Health Professional Shortage Area & Medically Underserved Areas/Populations

The uneven geographic distribution of health system resources has long been a problem in the United States. As a result, many individuals do not have adequate access to health services in their community. State and Federal programs have been put in place to attempt to ameliorate this problem and reduce the barriers to access healthcare. The Health Professional Shortage Area (HPSA) program and the Medically Underserved Areas/Populations (MUA/P) are among the tools used to increase the supply, capacity, and distribution of health professionals to areas of greatest need. HPSA designations indicate shortages of healthcare professionals who provide primary care, dental, and mental health services. Designation may help communities attract new healthcare workforce and it may increase Medicare and Medicaid reimbursement to already existing healthcare providers.

Health Professional Shortage Area Designation ¹ - Fergus County, Montana		
Discipline	HPSA Score	HPSA
Primary Care	15	✓ Low income population
Dental Health	16	✓ Low income population
Mental Health	17	✓ Geographic
HPSA Scores range from 0 to 25 (primary care and mental health) and 0 to 26 (dental health) where the higher the score, the greater the priority		

¹ Health Resources and Services Administration (2021)

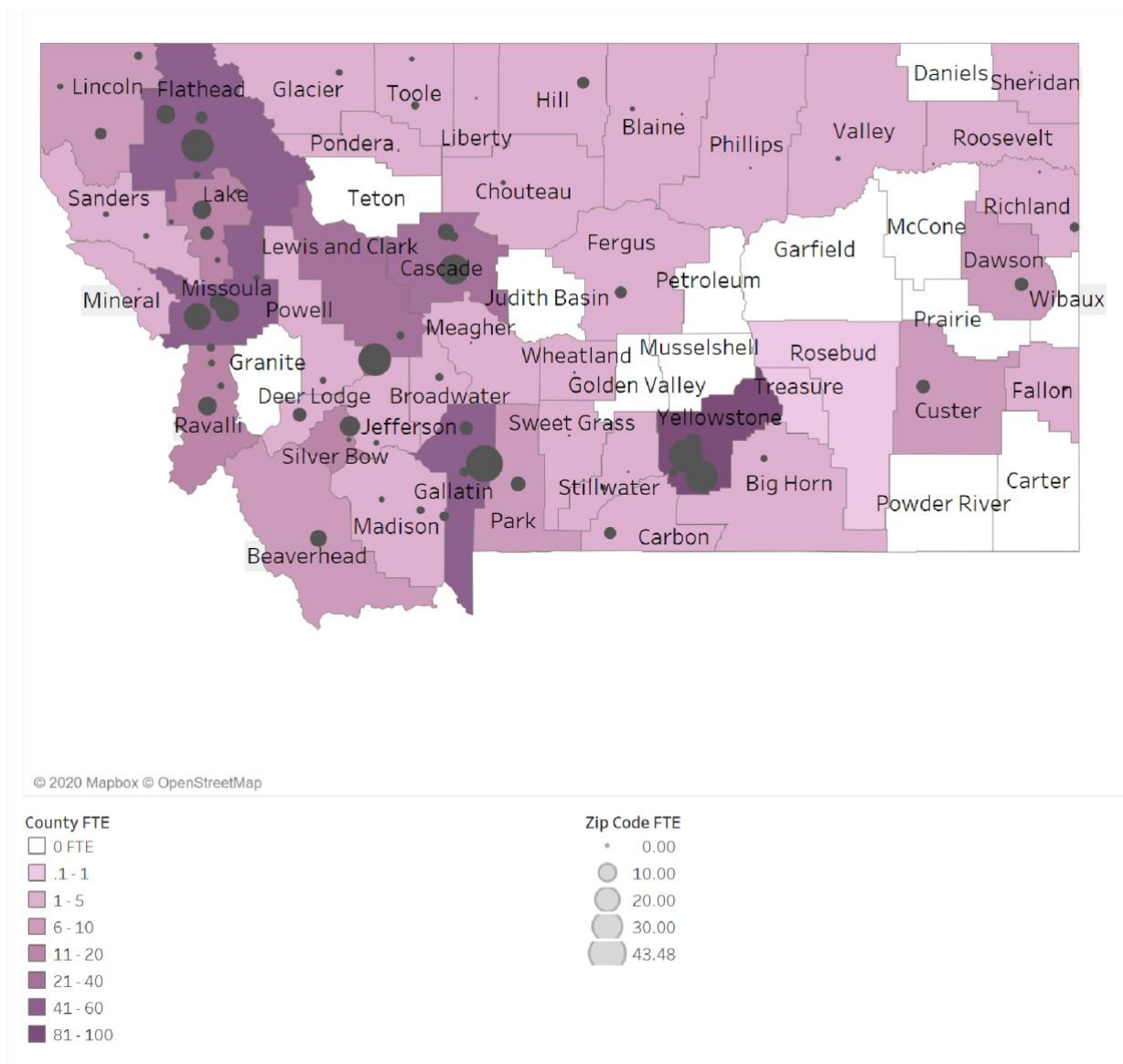
Provider Supply and Access to Care ²				
Measure	Description	Fergus Co. (N = 1) **	Montana (N = 49) **	National (N = 1347) **
Primary care physicians	Ratio of population to primary care physicians	1268:1	1349:1	1050:1
Other primary care providers	Ratio of population to other primary care providers including nurse practitioners, physician assistants, and clinical nurse specialists	1882:1	878:1	726:1
Dentists	Ratio of population to dentists	1026:1	1388:1	1260:1
Mental health providers	Ratio of population to mental health providers	418:1	356:1	310:1

Healthcare workforce Distribution Maps

WIM Tracking is a Montana-based health workforce research company. WIM Tracking proactively monitors the movement of healthcare professionals in Wyoming, Idaho and Montana and maintains the data within a relational database.

- Counts only include actively practicing providers.
- Counts do not include providers at limited access facilities (VA, Malmstrom AFB, Indian Health Services, Montana State Prison, Montana State Hospital, therapeutic boarding schools) • Counts only include primary practice locations. Locum Tenens providers are not included.
- Primary Care specialties include Family Medicine, Internal Medicine and Pediatrics. Primary Care

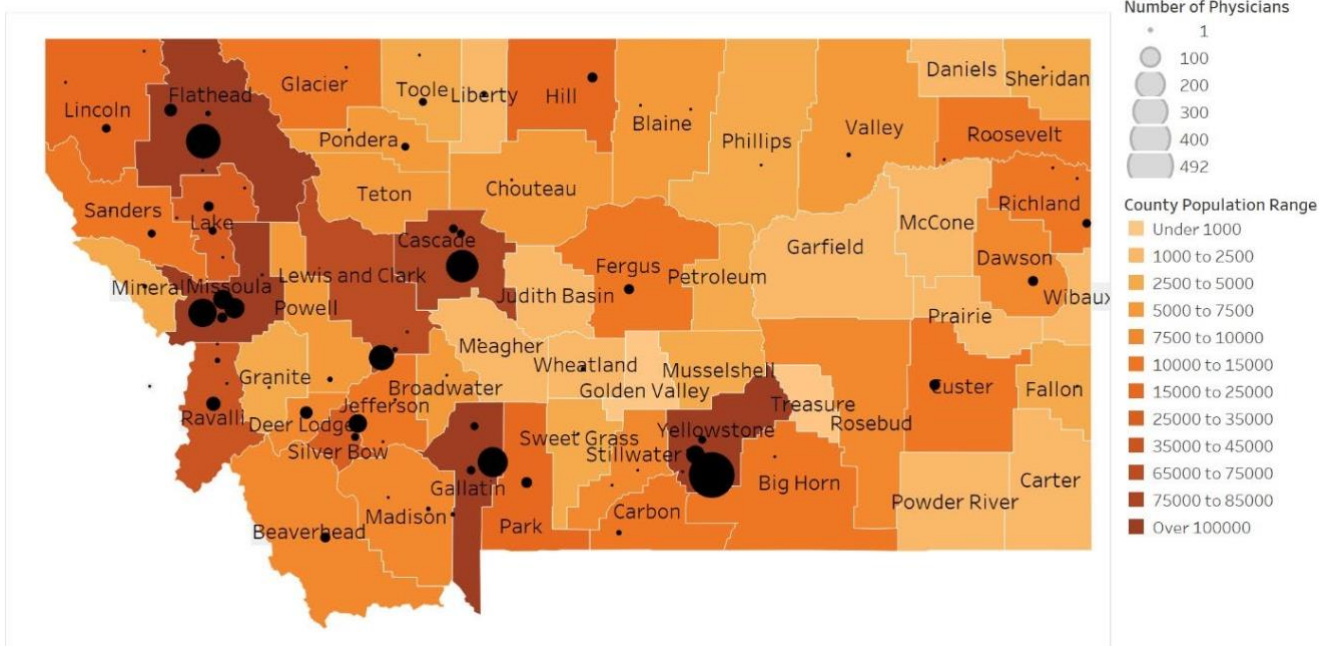
Physician FTE: Practice Locations Plotted by Zip Code



Data Source: Montana Primary Care Office data (2020) compiled and analyzed by WIM Tracking (Sept. 2020)

*Note: Does not include IHS or Tribal Health physicians.

Physicians (All Specialties) by County Population Range



Data Source: Montana Primary Care Office data (2020) and WIM Tracking (Sept. 2020) *Note: Does not include IHS or Tribal Health physicians.

Appendix D- Survey Cover Letter



January 28, 2022

Dear [LASTNAME] household:

Participate in our Community Health Needs Assessment survey for a chance to **WIN one \$100 Visa Gift Card!**

Central Montana Medical Center (CMMC) is partnering with the Montana Office of Rural Health (MORH) to administer a community health needs assessment survey. The purpose of the survey is to obtain information from a wide range of participants to assist in planning our programs, services, and facilities to best serve our community. Your help is critical in determining health priorities and planning for future needs.

Your name has been randomly selected as a resident who lives in the CMMC service area. The survey covers topics such as: use of health care services, awareness of services, community health, health insurance and demographics. We know your time is valuable, so we have made an effort to keep the survey to about 15 minutes. Participating in this survey is completely voluntary and your identity and answers will remain confidential.

1. Due date to complete survey: March 4, 2022
2. Complete the enclosed survey and return it in the envelope provided - no stamp needed.
3. You can also access the survey at <http://helpslab.montana.edu/survey.html>. Select "Central Montana Medical Center Survey." Your access code is [CODED]
4. The winner of the gift card will be contacted the week of March 14th.

All survey responses will go to HELPS Lab at Montana State University in Bozeman, Montana, the organization that is assisting MORH with this project. If you have any questions about the survey or need assistance, please call MORH at 406-994-6986. We believe, with your help, we can continue to improve health care services in our region.

Thank you for your assistance. We appreciate your time.

Sincerely,

Cody Langbehn, CEO

*Access the survey on your smart
phone: Use your camera to scan
the QR code*

Appendix E- Survey Instrument

Community Health Needs Assessment Survey Lewistown, Montana

INSTRUCTIONS: Please complete this survey by marking the appropriate boxes and then return it in the enclosed postage-paid envelope. If you need assistance, please contact the Montana Office of Rural Health at 406-994-6986. Participation is voluntary, and your responses will remain confidential. You can choose not to answer any question and can stop at any time.

1. How would you rate the general health of your community?

- ☐ Very healthy ☐ Healthy ☐ Somewhat healthy ☐ Unhealthy ☐ Very unhealthy

2. In the following list, what do you think are the **three most serious** health concerns in your community? (**Select ONLY 3**)

- | | | |
|---|--|---|
| <input type="checkbox"/> Alcohol/substance abuse | <input type="checkbox"/> Hunger | <input type="checkbox"/> Social isolation/loneliness |
| <input type="checkbox"/> Alzheimer's/dementia | <input type="checkbox"/> Lack of access to healthcare | <input type="checkbox"/> Stroke |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Lack of dental care | <input type="checkbox"/> Suicide |
| <input type="checkbox"/> Child abuse/neglect | <input type="checkbox"/> Lack of exercise | <input type="checkbox"/> Tobacco use |
| <input type="checkbox"/> Chronic respiratory issues/illness | <input type="checkbox"/> Mental health issues | <input type="checkbox"/> (cigarettes, vaping, smokeless etc.) |
| <input type="checkbox"/> Depression/anxiety | <input type="checkbox"/> Motor vehicle accidents | <input type="checkbox"/> Work/farm/ranch related accidents/injuries |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Overweight/obesity | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Domestic violence | <input type="checkbox"/> Recreation related accidents/injuries | |
| <input type="checkbox"/> Heart disease | | |

3. Select the **three** items below that you believe are **most important** for a healthy community (**Select ONLY 3**):

- | | | |
|--|---|--|
| <input type="checkbox"/> Access to childcare/after school programs | <input type="checkbox"/> Good jobs and a healthy economy | <input type="checkbox"/> Parks and recreation |
| <input type="checkbox"/> Access to healthcare and other services | <input type="checkbox"/> Good schools | <input type="checkbox"/> Religious or spiritual values |
| <input type="checkbox"/> Access to healthy foods | <input type="checkbox"/> Healthy behaviors and lifestyles | <input type="checkbox"/> Strong family life |
| <input type="checkbox"/> Affordable housing | <input type="checkbox"/> Job advancement and training opportunities | <input type="checkbox"/> Tolerance for diversity |
| <input type="checkbox"/> Arts and cultural events | <input type="checkbox"/> Low crime/safe neighborhoods | <input type="checkbox"/> Transportation services |
| <input type="checkbox"/> Clean environment | <input type="checkbox"/> Low death and disease rates | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Community involvement | <input type="checkbox"/> Low level of domestic violence | |

4. How do you rate your knowledge of the health services that are available through Central Montana Medical Center (CMMC)?

- ☐ Excellent ☐ Good ☐ Fair ☐ Poor

5. How do you learn about the health services available in your community? (**Select ALL that apply**)

- | | | |
|---|---|---|
| <input type="checkbox"/> Central MT Council on Aging | <input type="checkbox"/> Healthcare provider | <input type="checkbox"/> Radio (KXLO/KLCM) |
| <input type="checkbox"/> Central MT Family Planning | <input type="checkbox"/> Health fair | <input type="checkbox"/> Social media |
| <input type="checkbox"/> Central MT Health District (public health) | <input type="checkbox"/> Mailings/newsletter | <input type="checkbox"/> VA Clinic |
| <input type="checkbox"/> District 6 HRDC | <input type="checkbox"/> News Argus | <input type="checkbox"/> Website/internet |
| <input type="checkbox"/> Fergus County Nurse's Office | <input type="checkbox"/> "The Roundup" newsletter | <input type="checkbox"/> Word of mouth/reputation |
| <input type="checkbox"/> Friends/family | <input type="checkbox"/> One Health - Lewistown | <input type="checkbox"/> Other: _____ |
| | <input type="checkbox"/> Presentations | |

6. How important are local healthcare providers and services (i.e.: hospitals, clinics, nursing homes, assisted living, etc.) to the economic well-being of the area?

- ☐ Very important ☐ Important ☐ Not important ☐ Don't know

7. Which community health resources, other than CMMC, have you used in the last three years?

(Select ALL that apply)

- | | | |
|---|--|--|
| <input type="checkbox"/> Assisted Living | <input type="checkbox"/> Fitness center | <input type="checkbox"/> Pharmacy |
| <input type="checkbox"/> Audiologist (ears) | <input type="checkbox"/> Food banks | <input type="checkbox"/> Senior center |
| <input type="checkbox"/> Central MT Family Planning | <input type="checkbox"/> Home care services | <input type="checkbox"/> Substance abuse services |
| <input type="checkbox"/> Central MT Health District | <input type="checkbox"/> Long term care/nursing home | <input type="checkbox"/> Veteran's services |
| <input type="checkbox"/> Council on Aging (foot clinic) | <input type="checkbox"/> Mental health | <input type="checkbox"/> Wellness fair screenings |
| <input type="checkbox"/> Dentist | <input type="checkbox"/> One Health - Lewistown | <input type="checkbox"/> WIC (Women/Infant/Children) |
| <input type="checkbox"/> Fergus County Nurse's office | <input type="checkbox"/> Optometrist (eyes) | <input type="checkbox"/> Other: _____ |

8. In your opinion, what would improve your community's access to healthcare? **(Select ALL that apply)**

- | | |
|--|---|
| <input type="checkbox"/> Cultural sensitivity | <input type="checkbox"/> More specialists |
| <input type="checkbox"/> Greater health education services | <input type="checkbox"/> Outpatient services expanded hours |
| <input type="checkbox"/> Improved quality of care | <input type="checkbox"/> Telemedicine |
| <input type="checkbox"/> Interpreter services | <input type="checkbox"/> Transportation assistance |
| <input type="checkbox"/> More information about available services | <input type="checkbox"/> Walk-in clinic |
| <input type="checkbox"/> More primary care providers | <input type="checkbox"/> Other: _____ |

9. If any of the following classes/programs were made available to the community, which would you be most interested in attending? **(Select ALL that apply)**

- | | | |
|--|--|--|
| <input type="checkbox"/> Adult day care services | <input type="checkbox"/> Health fair | <input type="checkbox"/> Nutrition |
| <input type="checkbox"/> Alcohol/substance abuse | <input type="checkbox"/> Health insurance education
(Medicare/Medicaid/Private) | <input type="checkbox"/> Parenting |
| <input type="checkbox"/> Alzheimer's | <input type="checkbox"/> Health and wellness | <input type="checkbox"/> Prenatal |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Heart disease | <input type="checkbox"/> Smoking/tobacco cessation |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Lactation/breastfeeding support | <input type="checkbox"/> Support groups |
| <input type="checkbox"/> First aid/CPR | <input type="checkbox"/> Living will | <input type="checkbox"/> Weight loss |
| <input type="checkbox"/> Financial planning/counseling | <input type="checkbox"/> Men's health | <input type="checkbox"/> Women's health |
| <input type="checkbox"/> Fitness | <input type="checkbox"/> Mental health | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Grief counseling | | |

10. Which of the following local preventive services have you used in the past year? **(Select ALL that apply)**

- | | | |
|---|---|---|
| <input type="checkbox"/> Afterhours Call-a-Nurse | <input type="checkbox"/> Mammography | <input type="checkbox"/> Routine health checkup |
| <input type="checkbox"/> Children's checkup/Well baby | <input type="checkbox"/> Mental health counseling | <input type="checkbox"/> Vision check |
| <input type="checkbox"/> Colonoscopy | <input type="checkbox"/> Pap test/pelvic exam | <input type="checkbox"/> None |
| <input type="checkbox"/> Dental exam | <input type="checkbox"/> Prostate (PSA) | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Flu shot/immunizations | <input type="checkbox"/> Routine blood pressure check | |
| <input type="checkbox"/> Hearing check | <input type="checkbox"/> Routine blood work | |

11. How would you rate your own personal health?

- ☐ Very healthy ☐ Healthy ☐ Somewhat healthy ☐ Unhealthy ☐ Very unhealthy

12. In the past three years, have there been periods of at least three consecutive months where you felt depressed on most days? **(If no, skip to question 14)**
- ☐ Yes ☐ No
13. If yes, were you able to see a mental health professional or primary care provider to address your needs?
- ☐ Yes ☐ No ☐ Chose not to/Didn't want to ☐ Unaware of available services
14. Over the past month, how often have you had physical activity for at least 20 minutes?
- ☐ Daily ☐ 3-5 times per month ☐ No physical activity
☐ 2-4 times per week ☐ 1-2 times per month
15. Has cost prohibited you from getting a prescription or taking your medication regularly?
- ☐ Yes ☐ No ☐ Not applicable
16. In the past year, did you worry that you would not have enough food?
- ☐ Yes ☐ No
17. Which of the following prevention measures do you use regularly? **(Select ALL that apply)**
- ☐ Child car seat/booster ☐ Moderate alcohol use ☐ Tobacco free
☐ CPR/First Aid training ☐ Regular exercise ☐ Water safety (life vests)
☐ Designated driver ☐ Seat belt ☐ None
☐ Helmet ☐ Sunscreen
18. In the past three years, was there a time when you or a member of your household thought you needed healthcare services but did NOT get or delayed getting medical services?
- ☐ Yes ☐ No **(If no, skip to question 20)**
19. If yes, what were the **three** most important reasons why you did not receive healthcare services? **(Select ONLY 3):**
- ☐ Could not get an appointment ☐ It was too far to go ☐ Preferred provider unavailable
☐ Could not get off work ☐ Language barrier ☐ Service not available locally
☐ COVID-19 concerns/barriers ☐ My insurance didn't cover it ☐ Too long to wait for an appointment
☐ Didn't know where to go ☐ No insurance ☐ Too nervous or afraid
☐ Don't like doctors or other providers ☐ Not treated with respect ☐ Transportation problems
☐ Had no childcare ☐ Office wasn't open when I could go ☐ Unsure if services were available
☐ It cost too much ☐ Privacy issues ☐ Other: _____
20. In the past three years, have you or a household member seen a primary healthcare provider such as a family physician, physician assistant or nurse practitioner for healthcare services?
- ☐ Yes ☐ No **(If no, skip to question 23)**
21. Where was that primary healthcare provider located? **(Select ONLY 1)**
- ☐ Benefis ☐ One Health - Lewistown ☐ Veterans Hospital
☐ Billings Clinic ☐ Central Montana Medical Center ☐ Other: _____
☐ Central Montana Family Planning ☐ St. Vincent Healthcare
22. Why did you select the primary care provider you are currently seeing? **(Select ALL that apply)**

- | | | |
|---|---|--|
| <input type="checkbox"/> Appointment availability | <input type="checkbox"/> Length of waiting room time | <input type="checkbox"/> Referred by physician or other provider |
| <input type="checkbox"/> Clinic/provider's reputation for quality | <input type="checkbox"/> Prior experience with clinic | <input type="checkbox"/> Required by insurance plan |
| <input type="checkbox"/> Closest to home | <input type="checkbox"/> Privacy/confidentiality | <input type="checkbox"/> VA/Military requirement |
| <input type="checkbox"/> Cost of care | <input type="checkbox"/> Recommended by family or friends | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Indian Health Services | | |

23. In the past three years, has anyone in your household received care in a hospital? (i.e. hospitalized overnight, day surgery, obstetrical care, rehabilitation, radiology or emergency care)

- ☐ Yes ☐ No (If no, skip to question 26)

24. If yes, which hospital does your household use **MOST** for hospital care? (Select ONLY 1)

- | | | |
|--|---|--|
| <input type="checkbox"/> Benefis | <input type="checkbox"/> Central Montana Medical Center | <input type="checkbox"/> Veterans Hospital |
| <input type="checkbox"/> Billings Clinic | <input type="checkbox"/> St. Vincent Healthcare | <input type="checkbox"/> Other: _____ |

25. Thinking about the hospital you were at most frequently, what were the **three** most important reasons for selecting that hospital? (Select ONLY 3)

- | | | |
|--|--|--|
| <input type="checkbox"/> Closest to home | <input type="checkbox"/> Hospital's reputation for quality | <input type="checkbox"/> Referred by physician or other provider |
| <input type="checkbox"/> Closest to work | <input type="checkbox"/> Prior experience with hospital | <input type="checkbox"/> Required by insurance plan |
| <input type="checkbox"/> Cost of care | <input type="checkbox"/> Privacy/confidentiality | <input type="checkbox"/> VA/Military requirement |
| <input type="checkbox"/> Emergency, no choice | <input type="checkbox"/> Recommended by family or friends | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Financial assistance programs | | |

26. In the past three years, have you or a household member seen a healthcare specialist (other than your primary care provider/family doctor) for healthcare services?

- ☐ Yes ☐ No (If no, skip to question 29)

27. Where was the healthcare specialist seen? (Select ALL that apply)

- | | | |
|---|---|---------------------------------------|
| <input type="checkbox"/> Benefis | <input type="checkbox"/> One Health - Lewistown | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Billings Clinic | <input type="checkbox"/> St. Vincent Healthcare | |
| <input type="checkbox"/> Central Montana Medical Center | <input type="checkbox"/> Veterans Hospital | |

28. What type of healthcare specialist was seen? (Select ALL that apply)

- | | | |
|--|---|--|
| <input type="checkbox"/> Allergist | <input type="checkbox"/> Neurologist | <input type="checkbox"/> Psychiatrist (M.D.) |
| <input type="checkbox"/> Audiologist | <input type="checkbox"/> Neurosurgeon | <input type="checkbox"/> Psychologist |
| <input type="checkbox"/> Cardiologist | <input type="checkbox"/> OB/GYN | <input type="checkbox"/> Pulmonologist |
| <input type="checkbox"/> Chiropractor | <input type="checkbox"/> Occupational therapist | <input type="checkbox"/> Radiologist |
| <input type="checkbox"/> Dentist | <input type="checkbox"/> Oncologist | <input type="checkbox"/> Rheumatologist |
| <input type="checkbox"/> Dermatologist | <input type="checkbox"/> Ophthalmologist | <input type="checkbox"/> Social worker |
| <input type="checkbox"/> Endocrinologist | <input type="checkbox"/> Optometrist | <input type="checkbox"/> Speech therapist |
| <input type="checkbox"/> ENT (ear/nose/throat) | <input type="checkbox"/> Orthopedic surgeon | <input type="checkbox"/> Substance abuse counselor |
| <input type="checkbox"/> Gastroenterologist | <input type="checkbox"/> Pain management | <input type="checkbox"/> Urologist |
| <input type="checkbox"/> General surgeon | <input type="checkbox"/> Pediatrician | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Geriatrician | <input type="checkbox"/> Physical therapist | |
| <input type="checkbox"/> Mental health counselor | <input type="checkbox"/> Podiatrist | |

29. What additional specialty healthcare services would you use if available locally? (Select ALL that apply)

- ☐ Expanded cancer care services ☐ Expanded telemedicine services ☐ Orthodontics
☐ Expanded mental health services ☐ Expanded transportation services ☐ Other: _____
☐ Expanded pain management services ☐ Expanded women's health services

30. The following services are available through Central Montana Medical Center. Please rate the overall quality for each service by circling your answer. **(Please circle N/A if you have not used the service)**

	Excellent	Good	Fair	Poor	Haven't Used	Don't Know
Admissions/check-in	4	3	2	1	N/A	DK
Ambulance services	4	3	2	1	N/A	DK
Business office/insurance and billing	4	3	2	1	N/A	DK
Cardiac rehabilitation	4	3	2	1	N/A	DK
Care Coordination department	4	3	2	1	N/A	DK
Clinic/primary care services	4	3	2	1	N/A	DK
Dietician/diabetes services	4	3	2	1	N/A	DK
Emergency department	4	3	2	1	N/A	DK
General surgery	4	3	2	1	N/A	DK
Home care (home health/hospice)	4	3	2	1	N/A	DK
Home medical equipment/home oxygen	4	3	2	1	N/A	DK
Infusion services	4	3	2	1	N/A	DK
In-patient/hospital care	4	3	2	1	N/A	DK
Laboratory	4	3	2	1	N/A	DK
OB/Birthing services	4	3	2	1	N/A	DK
Occupational therapy	4	3	2	1	N/A	DK
Orthopedic services/surgery	4	3	2	1	N/A	DK
Physical therapy	4	3	2	1	N/A	DK
Pulmonary rehabilitation	4	3	2	1	N/A	DK
Radiology/imaging	4	3	2	1	N/A	DK
Sleep study	4	3	2	1	N/A	DK
Speech therapy	4	3	2	1	N/A	DK
Telemedicine services	4	3	2	1	N/A	DK
Wound care	4	3	2	1	N/A	DK

31. Do you have health insurance?

- ☐ Yes ☐ No **(If no, skip to question 34)**

32. What type of health insurance covers the **majority** of your household's medical expenses? **(Select ONLY 1)**

- ☐ Employer sponsored ☐ Indian Health Services ☐ VA/military
☐ Health Insurance Marketplace ☐ Medicaid ☐ None/pay out of pocket
☐ Health Savings Account ☐ Medicare ☐ Other: _____
☐ Healthy MT Kids ☐ Private insurance/private plan

33. How well do you feel your health insurance covers your healthcare costs?

- ☐ Excellent ☐ Good ☐ Fair ☐ Poor ☐ Don't know/Not sure

34. If you **do NOT have health insurance, why? (Select ALL that apply)**

- ☐ Can't afford to pay for health insurance ☐ Too confusing/don't know how to apply
☐ Employer does not offer insurance ☐ Other: _____
☐ Choose not to have health insurance

35. Are you aware of programs that help people pay for healthcare expenses?

- ☐ Yes, and I use them ☐ Yes, but I do not qualify ☐ Yes, but choose not to use ☐ No ☐ Not sure

Demographics

All information is kept confidential and your identity is not associated with any answers.

36. Where do you currently live, by zip code?

- | | | |
|--|--|---|
| <input type="checkbox"/> 59430 Denton | <input type="checkbox"/> 59457 Lewistown | <input type="checkbox"/> 59489 Winifred |
| <input type="checkbox"/> 59032 Grass Range | <input type="checkbox"/> 59462 Moccasin | <input type="checkbox"/> 59087 Winnett |
| <input type="checkbox"/> 59451 Hilger | <input type="checkbox"/> 59464 Moore | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> 59452 Hobson | <input type="checkbox"/> 59471 Roy | |
| <input type="checkbox"/> 59453 Judith Gap | <input type="checkbox"/> 59479 Stanford | |

37. What is your gender?

- ☐ Male ☐ Female ☐ Prefer to self-describe: _____

38. What age range represents you?

- | | | |
|--------------------------------|--------------------------------|--------------------------------|
| <input type="checkbox"/> 18-24 | <input type="checkbox"/> 45-54 | <input type="checkbox"/> 75-84 |
| <input type="checkbox"/> 25-34 | <input type="checkbox"/> 55-64 | <input type="checkbox"/> 85+ |
| <input type="checkbox"/> 35-44 | <input type="checkbox"/> 65-74 | |

39. What is your employment status?

- | | | |
|---|--|---|
| <input type="checkbox"/> Work full time | <input type="checkbox"/> Student | <input type="checkbox"/> Not currently seeking employment |
| <input type="checkbox"/> Work part time | <input type="checkbox"/> Collect disability | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Retired | <input type="checkbox"/> Unemployed, but looking | |

[CODED]

Please return in the postage-paid envelope enclosed with this survey or mail to:

HELPS Lab
Montana State University
PO Box 172245
Bozeman, MT 59717

THANK YOU VERY MUCH FOR YOUR TIME
Please note that all information will remain confidential

Appendix F- Cross Tabulation Analysis

Knowledge Rating of Central Montana Medical Center's Services by How Respondents Learn about Healthcare Services

	Excellent	Good	Fair	Poor	Total
Friends/family	17.6% (18)	47.1% (48)	29.4% (30)	5.9% (6)	102
Healthcare provider	23.2% (23)	59.6% (59)	16.2% (16)	1.0% (1)	99
Word of mouth/reputation	16.3% (14)	54.7% (47)	23.3% (20)	5.8% (5)	86
News Argus	19.2% (14)	56.2% (41)	20.5% (15)	4.1% (3)	73
Fergus County Nurse's Office	23.0% (14)	49.2% (30)	21.3% (13)	6.6% (4)	61
Radio (KXLO/KLCM)	24.2% (8)	45.5% (15)	18.2% (6)	12.1% (4)	33
Social media	18.2% (6)	48.5% (16)	27.3% (9)	6.1% (2)	33
Central MT Council on Aging	23.3% (7)	53.3% (16)	16.7% (5)	6.7% (2)	30
Central MT Health District (public health)	32.1% (9)	39.3% (11)	21.4% (6)	7.1% (2)	28
One Health - Lewistown	33.3% (9)	40.7% (11)	22.2% (6)	3.7% (1)	27
Mailings/newsletter	15.4% (4)	57.7% (15)	23.1% (6)	3.8% (1)	26
Website/internet	20.0% (5)	36.0% (9)	32.0% (8)	12.0% (3)	25
"The Roundup" newsletter	30.4% (7)	56.5% (13)	13.0% (3)	-	23
VA Clinic	23.1% (3)	46.2% (6)	30.8% (4)	-	13
Central MT Family Planning	14.3% (1)	42.9% (3)	28.6% (2)	14.3% (1)	7
Health fair	28.6% (2)	57.1% (4)	14.3% (1)	-	7
District 6 HRDC	40.0% (2)	40.0% (2)	20.0% (1)	-	5
Presentations	20.0% (1)	80.0% (4)	-	-	5
Other	30.0% (3)	40.0% (4)	20.0% (2)	10.0% (1)	10

Delay or Did Not Get Need Healthcare Services by Residence

	Yes	No	Total
59457 Lewistown	25.2% (33)	74.8% (98)	131
59032 Grass Range	42.9% (3)	57.1% (4)	7
59464 Moore	16.7% (1)	83.3% (5)	6
59489 Winifred	-	100.0% (6)	6
59479 Stanford	-	100.0% (5)	5
59430 Denton	25.0% (1)	75.0% (3)	4
59087 Winnett	-	100.0% (4)	4
59451 Hilger	33.3% (1)	66.7% (2)	3
59453 Judith Gap	50.0% (1)	50.0% (1)	2
59462 Moccasin	50.0% (1)	50.0% (1)	2
59471 Roy	-	100.0% (2)	2
59452 Hobson	-	100.0% (1)	1
Other	-	100.0% (1)	1
TOTAL	23.6% (41)	76.4% (133)	100% (174)

Location of primary care clinic most utilized by residence

	Benefis	Billings Clinic	One Health – Lewistown	Central Montana Medical Center	St. Vincent Healthcare	VA	Other	TOTAL
59457 Lewistown	1.1% (1)	4.2% (4)	11.6% (11)	53.7% (51)	8.4% (8)	1.1% (1)	20.0% (19)	95
59032 Grass Range	-	25.0% (1)	25.0% (1)	-	25.0% (1)	-	25.0% (1)	4
59489 Winifred	-	-	20.0% (1)	40.0% (2)	20.0% (1)	-	20.0% (1)	5
59430 Denton	50.0% (1)	-	-	50.0% (1)	-	-	-	2
59451 Hilger	-	-	-	100.0% (1)	-	-	-	1
59452 Hobson	50.0% (1)	-	-	-	-	-	50.0% (1)	2
59453 Judith Gap	-	-	-	100.0% (1)	-	-	-	1
59464 Moore	-	-	25.0% (1)	50.0% (2)	-	-	25.0% (1)	4
59471 Roy	-	-	-	100.0% (2)	-	-	-	2
59479 Stanford	100.0% (2)	-	-	-	-	-	-	2
59087 Winnett	-	50.0% (1)	-	-	-	-	50.0% (1)	2
TOTAL	4.2% (5)	5.0% (6)	11.7% (14)	50.0% (60)	8.3% (10)	0.8% (1)	20.0% (24)	100% (120)

* Central Montana Family Planning removed from primary care clinic location (top row) due to non-response.

** 59462 Moccasin and Other removed from residence (first column) due to non-response.

Location of primary care provider most utilized by reasons for clinic/provider selection

	Benefis	Billings Clinic	One Health – Lewistown	Central Montana Medical Center	St. Vincent Healthcare	VA	Other	TOTAL
Prior experience with clinic	-	8.9% (4)	15.6% (7)	48.9% (22)	11.1% (5)	-	15.6% (7)	45
Clinic/provider's reputation for quality	-	2.7% (1)	10.8% (4)	56.8% (21)	5.4% (2)	-	24.3% (9)	37
Closest to home	-	-	9.1% (3)	57.6% (19)	6.1% (2)	-	27.3% (9)	33
Recommended by family or friends	3.6% (1)	-	7.1% (2)	60.7% (17)	7.1% (2)	-	21.4% (6)	28
Referred by physician or other provider	4.2% (1)	4.2% (1)	4.2% (1)	66.7% (16)	-	-	20.8% (5)	24
Appointment availability	-	-	30.4% (7)	43.5% (10)	13.0% (3)	-	13.0% (3)	23
Cost of care	-	-	57.1% (4)	-	-	-	42.9% (3)	7
Length of waiting room time	-	-	28.6% (2)	28.6% (2)	28.6% (2)	-	14.3% (1)	7
VA/Military requirement	14.3% (1)	-	14.3% (1)	28.6% (2)	-	14.3% (1)	28.6% (2)	7

Required by insurance plan	16.7% (1)	33.3% (2)	-	16.7% (1)	16.7% (1)	-	16.7% (1)	6
Privacy/confidentiality	-	-	-	50.0% (2)	-	-	50.0% (2)	4
Other	6.7% (1)	-	20.0% (3)	46.7% (7)	13.3% (2)	-	13.3% (2)	15

*** Central Montana Family Planning removed from primary care clinic location (top row) due to non-response.**

Central Montana Family Planning removed from reason for clinic/provider selection (first column) due to non-response.

Location of most utilized hospital by residence

	Benefis Health System	Billings Clinic	Central Montana Medical Center	St. Vincent Healthcare	VA	Other	Total
59457 Lewistown	5.3% (5)	13.7% (13)	48.4% (46)	20.0% (19)	1.1% (1)	11.6% (11)	95
59489 Winifred	-	-	80.0% (4)	20.0% (1)	-	-	5
59032 Grass Range	-	50.0% (2)	25.0% (1)	25.0% (1)	-	-	4
59464 Moore	25.0% (1)	-	50.0% (2)	-	-	25.0% (1)	4
59430 Denton	-	-	50.0% (1)	-	-	50.0% (1)	2

59452 Hobson	50.0% (1)	-	-	-	-	50.0% (1)	2
59471 Roy	-	50.0% (1)	-	50.0% (1)	-	-	2
59479 Stanford	100.0% (2)	-	-	-	-	-	2
59087 Winnett	-	100.0% (2)	-	-	-	-	2
59451 Hilger	-	-	100.0% (1)	-	-	-	1
59453 Judith Gap	-	-	-	-	-	100.0% (1)	1
TOTAL	7.5% (9)	15.0% (18)	45.8% (55)	18.3% (22)	0.8% (1)	12.5% (15)	100% (120)

**** 59642 Moccasin and Other removed from residence (first column) due to non-response.**

Location of most recent hospitalization by reasons for hospital selection

	Benefis Health System	Billings Clinic	Central Montana Medical Center	St. Vincent	VA	Other	Total
Closest to home	5.1% (3)	3.4% (2)	81.4% (48)	1.7% (1)	-	8.5% (5)	59
Prior experience with hospital	5.4% (3)	14.3% (8)	46.4% (26)	26.8% (15)	-	7.1% (4)	56
Referred by physician or other provider	10.6% (5)	14.9% (7)	40.4% (19)	14.9% (7)	2.1% (1)	17.0% (8)	47
Hospital's reputation for quality	9.5% (4)	26.2% (11)	23.8% (10)	28.6% (12)	2.4% (1)	9.5% (4)	42
Emergency, no choice	13.3% (4)	13.3% (4)	56.7% (17)	3.3% (1)	-	13.3% (4)	30
Recommended by family or friends	-	26.7% (4)	13.3% (2)	46.7% (7)	-	13.3% (2)	15
Required by insurance plan	-	50.0% (3)	16.7% (1)	16.7% (1)	-	16.7% (1)	6
Closest to work	-	-	100.0% (5)	-	-	-	5
VA/Military requirement	-	-	25.0% (1)	25.0% (1)	25.0% (1)	25.0% (1)	4
Privacy/confidentiality	-	-	33.3% (1)	66.7% (2)	-	-	3
Cost of care	-	-	50.0% (1)	-	-	50.0% (1)	2
Financial assistance programs	-	-	-	100.0% (2)	-	-	2
Other	9.1% (1)	18.2% (2)	27.3% (3)	18.2% (2)	-	27.3% (3)	11

Appendix G- Responses to Other & Comments

2. In the following list, what do you think are the **three most serious** health concerns in your community? (Select ONLY 3)

- Disinformation
- Drug abuse & sales
- COVID - Non-vaccination %
- Sense of loss/despair regarding natural disasters and loss of rural economy
- COVID 19
- Honestly don't know
- Individuals that refuse to get vaccinated against COVID!
- I have no idea

*Responses when more than 3 were selected (5 participants):

- Alcohol/substance abuse (4)
- Alzheimer's/dementia (1)
- Cancer (2)
- Chronic respiratory issues/illness (2)
- Depression/anxiety (1)
- Heart disease (1)
- Lack of dental care (1)
- Lack of exercise (1)
- Overweight/obesity (3)
- Tobacco use (cigarettes, vaping, smokeless etc.) (3)
- Work/farm/ranch related accidents/injuries (1)

3. Select the **three** items that you believe are **most important** for a healthy community (select ONLY 3):

- Services for the disadvantaged
- Mental health support by experienced providers (Locally)

5. How do you learn about the health services available in your community?

- Former employees
- work at CMMC
- go to Great Falls
- Asking at clinic
- Work at clinic
- Physical injuries and disease
- Don't know
- Used to work at CMMC

- Employed by CMMC

7. Which community health resources, other than CMMC, have you used in the last three years?

- Non-CMMC Providers
- CMCHC clinic One Health
- SCL Health Chiropractor - Physical therapy
- COA - Shuttle
- Fergus county nurses office; hospice
- Physical Therapy (2)
- Great Falls for all other
- Physical Therapy
- Billings Clinic, Yellowstone Surgery Center
- S + N's
- St. Vincent's!
- None (4)
- Ear Dr.
- Chiropractor

8. In your opinion, what would improve your community's access to healthcare?

- Mental Health Crisis Services other than MHS
- Actually being able to meet with our provider, instead of someone else whom we don't have a relationship with.
- Pharmacy-Need another
- Dialysis clinic
- Improve CMMC cleanliness and staffing services
- Quality healthcare providers
- Mental health (psychiatrists) on site
- faith in God
- Knowing pricing before SVCS as in recall mammograms are NOT covered by insurance
- Better doctors
- Social workers
- I believe it meets needs
- I don't know
- Better qualified physicians
- Quality employment that offers health insurance
- More affordable for us on Social Security
- More eye doctors
- Affordable care/insurance
- Women providers

9. If any of the following classes/programs were made available to the community, which would you be most interested in attending?

- Services for disabled adults
- None
- Weight Watchers
- Seniors and animals

10. Which of the following preventative services have you used in the past year?

- All else in Great Falls
- Covid vaccines

19. If yes, what were the **three** most important reasons why you did not receive healthcare services? (Select ONLY 3)

- Lack of confidence. Issue resolved by online research.
- Incompetent provider
- Poor care (blood work caused a surgery to be moved!)
- Weather
- I went to appointments and had test and scans and then nothing was there.
- CMMC Clinic does not answer their phones
- Have given up on life

*Responses when more than 3 were selected (7 participants):

- Could not get an appointment (3)
- Could not get off work (2)
- COVID-19 concerns/barriers (2)
- Didn't know where to go (1)
- Don't like doctors or other providers (3)
- It cost too much (1)
- It was too far to go (1)
- Language barrier (1)
- My insurance didn't cover it (1)
- Not treated with respect (2)
- Preferred provider unavailable (3)
- Service not available locally (4)
- Too long to wait for an appointment (4)
- Too nervous or afraid (1)
- Unsure if services were available (1)

21. Where was that primary healthcare provider located? (Select ONLY 1)

- SCL Lewistown
- SCL Health- Lewistown
- Stillwater Billings Clinic
- Total Family Care

- Great Falls Clinic
- Total Family Care
- VA Clinic, Clinic in Philipsburg
- Total Family Healthcare
- SCL Clinic
- Bozeman Deaconess

*Responses when more than 1 was selected (28 participants):

- Benefis (5)
- Billings Clinic (8)
- Central Montana Family Planning (2)
- One Health – Lewistown (6)
- Central Montana Medical Center (25)
- St. Vincent Healthcare (10)
- Veterans Hospital (4)

22. Why did you select the primary care provider you are currently seeing?

- Prior Experience with Provider
- she still genuinely cares and hasn't shown signs of being burnt out by patients
- Service! I speak to a person, and get answers right away, very personal excellent service
- Needed Internal Medicine doctor
- Experience in cardiology
- provider's knowledge
- very good doctor
- Mine retired
- Been with for years
- I love him- he's the best!
- Met her while my PCP was unavailable and had connection.
- Specialize in internal medicine.
- Switched dr.
- Quality care
- She understands our needs
- Wanted younger female PCP 15 years ago
- My former Dr. at CMMC told me to get another provider
- Female provider

24. If yes, which hospital does your household use MOST for hospital care? (Select ONLY 1)

- Great Falls Clinic
- Great Falls Clinic Hospital
- Great Falls Clinic Wheatland
- Great Falls Clinic
- Durango Colorado
- Yellowstone Surgery Center

- Yellowstone Surgical Center

*Responses when more than 1 was selected (9 participants):

- Benefis (4)
- Billings Clinic (2)
- Central Montana Medical Center (7)
- St. Vincent Healthcare (4)

25. Thinking about the hospital you were at most frequently, what were the **three** most important reasons for selecting that hospital? (Select ONLY 3)

- Oncologist Practices in the Benefis System
- religious
- Orthopedic & kidney surgeons there
- Location of Dr.
- Going to specialists and the DRs did surgeries at BC
- Dr's Association
- Quality doctors
- Surgery was not available here

*Responses when more than 3 were selected (2 participants):

- Closest to home (1)
- Hospital's reputation for quality (2)
- Prior experience with hospital (2)
- Recommended by family or friends (1)
- Referred by physician or other provider (2)

27. Where was the healthcare specialist seen?

- Bighorn Physical Therapy
- Frontier Cancer
- Yellowstone plastic surgery
- Dentist in Lewistown
- Bozeman
- Sletten in Great Falls
- Dermatologist-Billings Chiropractor-Lewistown
- Great Falls Clinic (3)
- Dr. Klepps with Ortho Montana Billings
- St. Pete's
- St. Vincent Healthcare, Private
- Audiologist-Lewistown
- Sletten Cancer Institute
- Local Dentist Office, Local Ophthalmologist office
- Yellowstone Surgery Center
- Rocky Mountain Eye Center Helena & Missoula

- CT MT Audiologist, and in Lewistown
- Yellowstone Clinic
- Private practice
- Eye Care
- Logan Health Kalispell MT
- Rehder Balance and Hearing Clinic
- Billings Yellowstone Clinic Dr. Terry
- Ortho Montana Billings, Great Falls Dermatology
- Intermountain Valley Utah Hospital
- OB/GYN

28. What type of healthcare specialist was seen?

- Plastic surgery (3)
- Nephrologist, weight loss
- Nephrologist (2)
- Respiratory specialist
- Dialysis- Kidney
- Internal medicine
- Kidney doctor from Billings used to come to CMMC now comes to One Health

29. What additional specialty healthcare services would you use if available locally?

- Orthopedic
- Dialysis clinic
- electrocardiophysiology
- OBGYN
- Not Applicable
- Spiritual Wellness
- CMMC mailed directory of providers
- Dialysis (2)
- Neurologist
- bodyologist
- None - need a quality physician
- Pulmonary
- Dermatology
- Heart-cardiologist
- None unless needed

32. What type of health insurance covers the **majority of your household's medical expenses?**
(Select ONLY 1)

- Medicare supplement
- Medicare Advantage
- BlueCross

- Tricare
- Medicare Advantage Plan
- Humana
- United Healthcare

*Responses when more than 1 was selected (27 participants):

- Employer sponsored (4)
- Health Insurance Marketplace (3)
- Health Savings Account (1)
- Medicaid (10)
- Medicare (20)
- Private insurance/private plan (9)
- VA/Military (7)

34. If you **do NOT have medical insurance, why?**

- my husband cannot afford insurance & doesn't qualify for free state insurance
- Husband is self-employed, cannot afford insurance
- Have Medicare & Medicaid
- Heal thyself
- VA

36. Where do you currently live, by zip code?

- 59441 - Forest Grove

39. What is your employment status?

- unemployed
- Farmer-Rancher
- Homemaker
- Self-employed (2)
- I work just to keep in shape and pray to God for good health
- Self
- Farmer
- Farm/Ranch
- Self-employed rancher

*Responses when more than 1 was selected (8 participants):

- Work full time (2)
- Work part time (3)
- Retired (7)
- Student (1)
- Collect disability (2)
- Unemployed, but looking
- Not currently seeking employment (1)

General comments

- (Q2)
 - Selected “Social isolation/loneliness” and wrote “elderly”
- (Q10)
 - When you say “local” are you talking about just Lewistown or Great Falls too?
My answers reflect Great Falls!
- (Q17)
 - Did not make any selections and wrote in “none of your business”
- (Q21)
 - Wrote in “Great Falls Clinic” for the “Other” choice and also wrote “This should be listed on your survey!”
- (Q24)
 - Selected “No” for Q23 so answer to this question was not recorded but for “Other” wrote in “Again – Great Falls Clinic Hospital should be included”
- (Q30)
 - Did not rate any services and wrote “Many times when folks go to CMMC they are transferred to Great Falls because of lack of services, specialists, and equipment. If a major problem exists people head straight to Great Falls. They don’t need added ambulance costs or air-flight!”
- General comments
 - “Cost wise – CMMC charges more for some procedures, i.e. lab work than Great Falls. The Hospital Price Transparency Rule can’t be easily found on CMMC’s website.”
 - “There is a general lack of confidence in Lewistown Hospital. People in Stanford and surrounding communities – 45 miles to Lewistown – 65 miles to Great Falls.”
 - “Word of mouth is huge in Lewistown especially if you have a huge family. Your quality of care and knowledge that your doctor’s have at CMMC is a major concern. If an accident happens and is not serious, we will go out of town before we visit the ER in Lewistown.”
 - “Have no smart phone!”

Appendix H- Key Informant Interview - Questions

Key Informant Interview Questions

Purpose: The purpose of key informant interviews is to identify motives of local residents when selecting healthcare providers and why people may leave the community to seek health services. This market research will help determine the awareness of local programs and services, as well as satisfaction or dissatisfaction with local services, providers, and facilities.

1. How do you feel about the general health of your community?
2. What are your views/opinions about these local services:
 - Hospital/clinic
 - EMS Services (ER/Ambulance)
 - Public/County Health Department
 - Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
 - Services for Low-Income Individuals/Families
3. What do you think are the most important local healthcare issues?
4. What other healthcare services are needed in the community?
5. What would make your community a healthier place to live?

Appendix I- Key Informant Interviews - Transcript

Key Informant Interview #1

Wednesday March 2, 2022- Anonymous–Via phone interview

1. How do you feel about the general health of your community?

- I think we're a healthy community in general.
- We have walking trails and places to be active.
- I do think that COVID has exacerbated mental health in this area like it has across the nation.

2. What are your views/opinions about these local services:

Hospital/clinic:

- Admittedly, I have a bit different perspective than others in the community.
- I truly think we're lucky to have the facilities and quality of care that we do locally.

EMS Services (ER/Ambulance)

- I've had experience with the emergency room and I received great care. The entire staff was attentive and concerned about my situation. I felt like I was in good hands.

Public/County Health Department

- I have such a great respect for this team.
- There is a lot of transition happening throughout our local health systems, I'm sure partially due to COVID impacts, but they do a very good job for our area!

Senior Services (Nursing homes, assisted living, home health, senior center, etc.)

- I don't know that much about nursing home, but I've heard they are short staffed. I have to imagine that makes it hard to deliver the quality and standard of care that they would like to.
- I will say that the Council on Aging is such an asset to this area.

Services for Low-Income Individuals/Families

- We have a very giving community!
- The community food bank is consistently, well stocked.
- We have a local non-profit called "Your Neighbor Cares" that helps fulfill needs, such as furniture needs, rental assistance, etc.
- We also have a local Community Health Center that provides health services regardless of income or insurance status.
- We also have Love Inc., which helps churches work together to help those in need. And we also have a Salvation Army locally.

3. What do you think are the most important local healthcare issues?

- I just see that mental health is the number one issue around here.
- One of our largest industries is agriculture and it is in a rough place considering cattle and wheat grass prices. It's just so hard.
- While it's not just those in agriculture impacted, COVID has really exacerbated the mental health issue.
- Also, with everything going on in the world, there's lot of unrest everywhere.
- Aside from mental health, I always hear that we have drug problem and always have known we have a bit of alcohol abuse, but it's hard to know if it's that bad of a problem here. But both of these areas can go back to mental health!

4. What other healthcare services are needed in the community?

- I think we have some satellite clinics available through SCL or St. Vincent's, but I'm not certain.
- So with that, I think we have enough doctors considering the population. But we really need more mental health providers.
- The local community health center has a department for mental health. I think they have about 2-3 providers, which is great!
- Outside of the community health center, I think there are about 4-5 other mental health providers and also tele-mental health care available.
- CMMC recently hired Psychiatric Registered Nurse (RN) which has improved access to services since they are able to write prescriptions and patients don't have to wait to get into their doctor.
- We have a very neat group called the "Port Authority." It's an interdisciplinary group that's been established to stay connected and tackle local challenges as a need arises. I think it's been very important to have the hospital be involved in this group.
- There's also a very dynamic person who directs the Fergus County Prevention. She works with youth and substance abuse.
- With COVID, children were just so isolated. I don't think they know they impacted masks, so mental health is something to address for this area.

5. What would make your community a healthier place to live?

- I would like to see more regular education on healthy lifestyles, particularly some tips for staying healthy and active in the winter months.
- Perhaps some education on healthy eating would also be good for the community.
- But again, these both have a relationship with mental health.

Key Informant Interview #2

Monday, March 7, 2022- Anonymous–Via phone interview

1. How do you feel about the general health of your community?

- I would probably say that I typically take a Polyanna approach with questions like this because overall, I would say the health of our community is good.
- But we do have significant portion of older adults in this area which inherently comes with additional health needs.

2. What are your views/opinions about these local services:

Hospital/clinic:

- I have a generally favorable view of CMMC, but I also don't spend a lot of time there. All of my individual interactions with the hospital have been good.
- Like any small town though, there is a rumor mill and you hear stories which are usually on negative side because folks tend to share those rather than when they have good experiences.

EMS Services (ER/Ambulance)

- I don't have a lot of personal experience with either of these services. But I really appreciate that we have these available if a need arises.
- I think this area (Central Montana), goes above and beyond for what the services could be for a rural area such as this.

Public/County Health Department

- I don't have whole lot of experience with public health so I am neutral on this one.

Senior Services (Nursing homes, assisted living, home health, senior center, etc.)

- I have limited experience in this area. But I do know that the workforce shortage is felt within the local senior services.

Services for Low-Income Individuals/Families

- I feel like Central Montana has really stepped up services for low income individuals recently.
- One Health has allowed us to have a diversity of health services offerings available locally which has really helped those in need.

3. What do you think are the most important local healthcare issues?

- I'm concerned about this locally, but I know it also goes well beyond just Central Montana. I'd like to see more preventive health measures adopted, such as

employers offering fitness passes or more incentives for healthy behaviors. I think we need to be encouraging people to move.

- But a health concern that I have specific to Central Montana is mental health. We have a demographic that doesn't ask for help well. There are negative connotation with asking for help for mental health. I'm not sure what the answer is, but I think mental health is something that needs to be addressed.

4. What other healthcare services are needed in the community?

- I think we need to have more well-rounded primary care offerings. I would like to see more naturopathic and western medicine cross over rather than jumping to be referred to yet another specialist.

5. What would make your community a healthier place to live?

- To make this area a healthier place to live, I think we need individuals to take ownership over their health. There isn't a silver bullet to fix health issues, but instead I think it needs to be viewed as cumulative.

Key Informant Interview #3

Thursday, March 10, 2022- Anonymous–Via phone interview

1. How do you feel about the general health of your community?

- Overall I would say it's pretty good.
- We're down in COVID cases, which is great!
- We also have a new city-county health board, so more of our public health will be local decisions.
- But we are an older community and with that, there's inherent health concerns and illness.

2. What are your views/opinions about these local services:

Hospital/clinic:

- I think they do great at Central Montana Medical Center. We're lucky to have the services we do available locally.
- One Health also does well with mental health.

EMS Services (ER/Ambulance)

- The Emergency Room does pretty well with patient care.
- But I don't have any experience with ambulance, so I can't speak to that.

Public/County Health Department

- The public health department is in its forming stage since separating from the Central Montana Health District.
- I think the new Head of the Health Department does really well! I'm excited to see where they go!

Senior Services (Nursing homes, assisted living, home health, senior center, etc.)

- I don't know a whole lot about these services, but I know that the Council on Aging does really well with providing meals for seniors.
- Given our generally older population, I'm sure senior services could be a focus for future work and improvements.

Services for Low-Income Individuals/Families

- I think that they're probably pretty good, but I can't definitively say.

3. What do you think are the most important local healthcare issues?

- Right now, I think just making sure the new public health board is thriving and doing well should be a top priority. Their new structure seems good!

- Other than that, I think elder care should be another focus – so making sure they are getting care they need and not just getting pushed to side, but rather being a valued member of the community.
- 4. What other healthcare services are needed in the community?**
- I think the new cancer center is going to be really good for a lot of people in this area.
 - I think they're also working on mental health in this area. I think there's a new psychiatrist at CMMC which is great.
 - But as for specialty services, I think there's a need for dermatology locally.
- 5. What would make your community a healthier place to live?**
- We have a gym and a really good farmers market in the warmer months.
 - But outside of that, I think it would be good to have access to nutritious and affordable foods year round. It's pretty challenging to find produce locally that isn't on its last leg.

Appendix J- Focus Group - Questions

Focus Group Questions

Purpose: The purpose of focus groups is to identify motives of local residents when selecting healthcare providers and why people may leave the community to seek health services. This market research will help determine the awareness of local programs and services, as well as satisfaction or dissatisfaction with local services, providers, and facilities.

1. What do you think are the most serious health issues or concerns in your community?
2. We are now going to ask you for your views about the hospital. What do you think of the hospital in terms of:
 - Availability
 - Quality of Care
 - Number of Services
 - EMS Services (ER/Ambulance)
 - Financial Health of the Hospital
3. What do you think about these local services:
 - Public/County Health Department
 - Healthcare Services for Low-Income Individuals/Families
 - Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
 - Pharmacy
 - EMS Services (ER/Ambulance)
4. Why might people leave the community for healthcare? – Not Asked
5. What would make this community a healthier place to live? (What additional services would you like to see in the community?)
6. Any additional comments you'd like to provide, or things you would like to praise/see continued?

Appendix K- Focus Groups - Transcripts

Focus Group #1

Monday, Feb. 7, 2022 – 9:30-10:30 p.m.– Central Montana Medical Center (Community Business Group)– Lewistown, MT
15 participants (5 males, 10 females)

1. What do you think are the most serious health issues or concerns in your community?
 - Urgent care walk-in and same day service, pediatrician, dialysis center, cancer center.
 - Better communication between Billings Clinic, often there isn't shared records between hospitals, or the records are very delayed. This has been an issue within the past year and a half.
 - Difficult to get any type of care outside emergency services on Fridays.
 - One Health and CMMC do not have a seamless record system.
 - We have a real challenge with mental health in the community, mental health center has been barely a blip on our radar over the last ten years. We do have some individuals that do counseling, but there really is no community wide engagement. It is also noticeable across all age groups, not just the youth.
 - It would be great to see more mental health support for teens and youth, often counselors and providers are full for appointments for that age group. It could also be related to the drinking culture in the community.
 - Working closer with the VA, there are a lot of veterans within the community, and they often have different needs that require them to leave the community.
 - More of veterans being treated locally would be very beneficial as it relates to transportation and tax dollars.
 - Colonoscopies should be done here through the VA, but they currently are done in Helena or Billings.
 - More educational programs being offered, diabetes, health education, teenage parenting program.
 - Cardiovascular disease incidence is quite high in this community.
 - No designated Alzheimer's memory care facility here.

2. We are now going to ask you for your views about the hospital. What do you think of the hospital in terms of: Availability, Quality of Care, Number of Services, and Financial Health of the Hospital?

Availability

- I think the hospital does a good job of bringing people and professionals in.
- It is difficult to balance things in the ER, but it also doesn't make sense to have multiple doctors just waiting around in the ER.
- Would like to see a drop in payment system, often you have to wait 20-30 minutes for clerk.
- Can be very difficult to get an appointment on Mondays, if a kid is sick over the weekend.
- Utilized several of the specialists that have come up from Billings and it has been great, sometimes difficult in the winter with travel though.
- I think the hospital has done a great job and multiple services that I have used, I have had great experiences

Quality of Care

- The quality of care has been great for myself as well as my family

Number of Services

- Invite those specialists more often, dermatologists are booked months in advance.
- I think for the size of our community and service area, the services are very comprehensive.
- Advertising what services are available here could be extremely helpful.
- Would appreciate if VA would keep people here for thinks like x-ray rather than sending people to Great Falls or Billings.

3. What are your views/opinions about these local services:

Public/County Health Department

- The county nurses are great and I have only had positive experiences.
- More willingness between health department and CMMC to work together and collaborate when those opportunities arise.
- They have a ton of great programs, but I don't think they advertise as much as they could.

Healthcare Services for Low-Income Individuals/Families

- They advertise locally about those services and I believe different departments within the hospital work with those individuals on payment.

- Application to get financial aid from the hospital was massive, worse than getting a bank loan. The process should be simplified as it is very overwhelming.

Senior Services (Nursing homes, assisted living, home health, senior center, etc.)

- No appropriate place for Alzheimer patients within Lewistown.
- Senior center does a great job and has extensive services.
- Council on aging has a good home health program but cannot find individuals to employ. Possible improved advertising would help.
- There is a need for when people transition from their homes into senior services.
- Adult daycare to shoulder some of the burden from healthcare workers.

Pharmacy

- Not Asked

EMS Services (ER/Ambulance)

- They are very knowledgeable and flexible in terms of response.
- CMMC has offered increased support in terms of training and getting those volunteers med-certified.
- CMMC ER has very low wait times and the patient experience has improved drastically in the last few years.
- One day the ER will have 30 patients and the next day they will have 4, it can be very difficult to balance staffing.
- High school EMS training class, 10-12 students each year and has been very well received.
- Majority of EMS training can be taken online which is very beneficial living in a rural community.
- Emergency room staff is very professional and much more private.

4. Why might people leave the community for healthcare?

- Not Asked

5. What would make this community a healthier place to live? (What additional services would you like to see in the community?)

- Childcare and pediatricians, there is also a lack of daycare services and after school programs.
- More volunteers (4h and sporting activities of all kinds), we have a lot of kids but not very many coaches.
- Affordable housing is very necessary to attract good quality workers not just at the hospital but across community businesses.

- I would like to see a community approach to mental health (one health, police force, CMMC, etc.)
- Conducting a health and resource fair for the community would improve advertising for all services.
- Quality training and communication skills for those front-line employees within the hospital (reception). One poor experience in that area often resounds across the community more so than the positive experiences.

6. Any additional comments you'd like to provide, or things you would like to praise/see continued?

- Large billboard that CMMC has utilized by ACE Hardware has been very effective in information dissemination.
- I like the electronic newsletters that the hospital produces.
- Maybe a radio update with new hospital services/providers/activities.
- Market other services and providers at CMMC to patients while they are here at the hospital.
- The lab at the hospital is great and they are very quick and efficient.

Focus Group #2

Monday, Feb. 7, 2022 – 12 – 1 p.m. – Council on Aging – Lewistown, MT

29 participants (10 male, 19 female)

1. What do you think are the most serious health issues or concerns in your community?
 - Diabetes
 - Arthritis
 - Seizures
 - Having Asthma and having to wear a mask is really challenging!
 - Stroke
 - Cancer and accessing care
 - Heart disease
2. We are now going to ask you for your views about the hospital. What do you think of the hospital in terms of:

Availability

- A hospital, in general, is the last place I want to go.
- Whenever I've been into the hospital, it's a little slow, but the nurses and doctors have been awesome. And I've really appreciated that!
- With the newer hospital ER, it seems to take longer to get in.

Quality of Care

- Excellent
- Great!
- I would like to see them be more generous to guests by offering a meal! Unfortunately, they are pretty strict about the policy.

Number of Services

- There is no kidney dialysis locally which means you must travel over 100 miles one way every other day.
- There's still no coronary care locally, which is unfortunate!

EMS Services (ER/Ambulance)

- Very long response time – over an hour.
- It's sometimes quicker to drive ourselves to Billings in emergency care situations.
- They have an excellent transport service to Billings – it really saved my life.
- I think the EMT's are really helpful and responsive. They are quick when I call and have simple needs like help lifting my spouse.
- Because most rural EMS services are primarily staffed with a limited amount of volunteers, they are often put in challenging situations where there are multiple victims, such as a car accident. I know they really do the best they can to help,

but it has to be hard for them to triage when they are short on volunteers and resources.

3. What do you think about these local services:

Public/County Health Department

- I think they're doing great in general – they are a very community-oriented office.

Healthcare Services for Low-Income Individuals/Families

- It's hard because Medicaid and Medicare aren't accepted everywhere around here.

Senior Services (Nursing homes, assisted living, home health, senior center, etc.)

- Good!
- Very good services locally – better than Havre!

Pharmacy

- Not Asked

4. What would make this community a healthier place to live? (What additional services would you like to see in the community?)

- The price of medications needs to come down. It's really getting expensive.
- Get some of our closed doors on businesses to open up!
- There's been a lot of work as a country, but in this area there is still a lot of animosity towards Native Americans. I would like to see that improve locally.
- More specialists locally would be helpful. Even if they could come to Lewistown every now and then. For example, if someone needs to seek care for something like muscular dystrophy, they have to coordinate travel to Billings. That can be hard if they don't have reliable transportation or need someone to take them. Also, more health education among local providers on the different specialties would be helpful to improve continuity of care for those with chronic illnesses.
- I wish they would restart the event where DNP students from MSU would come up on Thursday's after lunch and do health screenings.

5. Any additional comments you'd like to provide, or things you would like to praise/see continued?

- No additional comments

Appendix L- Request for Comments

Written comments on this 2022 Community Health Needs Assessment Report can be submitted to the Community Relations Manager at CMMC:

CMMC Community Relations
Central Montana Medical Center
408 Wendell Avenue
Lewistown, MT 59457

Contact Central Montana Medical Center's Community Relations Manager at 406-535-1444 or sprater@cmmccares.com with questions.