

IMPLEMENTATION PLAN

Addressing Community Health Needs



CENTRAL MONTANA
MEDICAL CENTER

Lewistown, Montana

2025-2028

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Disclaimer: The Montana Office of Rural Health and the National Rural Health Resource Center strongly encourage an accounting professional's review of this document before submission to the IRS. As of this publishing, this document should be reviewed by a qualified tax professional. Recommendations on its adequacy in fulfillment of IRS reporting requirements are forthcoming.

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The Implementation Planning Process

The implementation planning committee – comprised of Central Montana Medical Center (CMMC) leadership team– participated in an implementation planning process to systematically and thoughtfully respond to all issues and opportunities identified through their community health needs assessment (CHNA) process.

The Community Health Services Development (CHSD), community health needs assessment was performed in the spring of 2025 to determine the most important health needs and opportunities for Fergus County, Montana. The CHSD project is administrated by the Montana Office of Rural Health (MORH) and funded in part through the Montana Health Research and Education Foundation (MHREF) Flex Grant. “Needs” were identified as the top issues or opportunities rated by respondents during the CHSD survey process or during focus groups (see page 11 for a list of “Needs Identified and Prioritized”). For more information regarding the needs identified, as well as the assessment process/approach/methodology, please refer to the facility’s assessment report, which is posted on the facility’s website (cmmc.health/resources/reports).

The community steering and implementation planning committees identified the most important health needs to be addressed by reviewing the CHNA, secondary data, community demographics, and input from representatives of the broad interest of the community, including those with public health expertise (see page 9 for additional information regarding input received from community representatives).

The implementation planning committee reviewed the priority recommendations provided by the community steering committee and determined which needs or opportunities could be addressed considering CMMC’s parameters of resources and limitations. The committee then prioritized the needs/opportunities using the additional parameters of the organizational vision, mission, and values, as well as existing and potential community partners. Participants then created a goal 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).

The prioritized health needs as determined through the assessment process and which the facility will be addressing relates to the following healthcare issues:

- **Mental and behavioral health**
- **Access to healthcare services**
- **Health and wellness**

In addressing the aforementioned issues, Central Montana Medical Center seeks to:

- a) Improve access to healthcare services
- b) Enhance the health of the community
- c) Advance medical or health knowledge

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

Values:

Integrity – Demonstrates honest, trustworthiness, and a commitment to doing what is right even when faced with difficult choices or challenges.

Compassion – The ability to show empathy, understanding, and kindness towards others.

Accountability – Responsible for one's actions and decisions. Takes ownership of one's tasks, acknowledges mistakes, and rectifies them. Meets deadlines, fulfills commitments, and is answerable for one's performance and impact on the organization's goals.

Respect – Treats others with dignity. Demonstrates politeness, tolerance, and an inclusive attitude towards colleagues and patients.

Excellence – Consistently achieves outstanding results and maintains high standards in one's work.

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.

Implementation Planning Committee Members:

- Rob Hicks – Chief Nursing Officer
- Joanie Slaybaugh – Director of Human Resources
- Abbey Wichman – Director of Compliance/Risk

- Perry Howell – Chief Financial Officer
- Chad Williams – Chief of Clinic Operations
- Rick Ross – Chief Operating Officer
- Stephanie Prater – Community Relations
- Cody Langbehn – CEO

Prioritizing the Community Health Needs

The steering and implementation planning committees completed the following to prioritize the community health needs:

1. Reviewed the facility's presence in the community (i.e., activities already being done to address community need)
2. Considered organizations outside of the facility which may serve as collaborators in executing the facility's implementation plan
3. Assessed the health indicators of the community through available secondary data
4. Evaluated the feedback received from consultations with those representing the community's interests, including public health

1. Central Montana Medical Center's Existing Presence in the Community

- Central Montana Medical Center (CMMC) provides a range of specialty physician services to the community, including chemotherapy (infusion services), various rehabilitation services, occupational health services and sleep studies.
- CMMC offers discounted screenings and health education to community members.
- The facility offers a cardiovascular disease and diabetes prevention program, as well as a diabetes education program, to community members who are at risk for cardiovascular disease and/or diabetes or who are currently suffering from diabetes.
- The CMMC Fitness Center offers community members the space and equipment to meet their fitness/conditioning needs.
- CMMC staff performs discounted sports physicals for community members on a quarterly basis.
- The facility sponsors/hosts a booth at the high school's "Career Day" in order to encourage local students to pursue a career in health care.

- CMMC is a Medical Student and Medical Resident teaching site.
- The facility hosts a Research and Explore Awesome Careers in Healthcare (REACH) camp on an annual basis in order to encourage students to pursue a career in health care.
- CMMC is an active partner of the Providence Nursing program and hosts nursing students in the facility.
- CMMC joined forces with Love, Hope & Strength Foundation offering Central Montanans to become potential bone marrow donors.
- CMMC's Safe Sitter class has a big influence in the community –teaching young sitters CPR, Business of Babysitting, First Aid and much more.
- Occupational Health provides preventative and lifestyle enhancement services to our business community.
- CMMC EMS partners with rural ambulances through lift assist program.
- CMMC Foundation grants funds to non-profits in the community surrounding communities.
- CMMC and Medical Center Foundation collaborate to offer high school and rural areas EMT credited course.
- CMMC offers a CNA class at the local high school.
- CMMC has specialty visiting physicians.
- Telemedicine
- Up to date and innovative testing, therapies, imaging equipment, etc.

2. List of Available Community Partnerships and Facility Resources to Address Needs

- 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
- TORCH

3. Fergus County Indicators

Population Demographics

- 94.9% of Fergus County’s population is white, and 1.8% identifies as American Indian or Alaska Native.
- 14.4% of Fergus County’s population has disability status.
- 25.2% of Fergus County’s population is 65 years and older.
- 12.2% of Fergus County’s population has Veteran status.
- 4.1% of Fergus County’s population has “No High School Diploma” as their highest degree attained; 33.5% are a “High school graduate (includes equivalency)”.

Size of County and Remoteness

- 11,862 people in Fergus County.
- 2.6 people per square mile.

Socioeconomic Measures

- 15.0% of children live in poverty.
- 14.8% of persons are below the federal poverty level.
- 11.0% of adults (age<65) are uninsured; 10.0% of children (age<18) are uninsured.
- 7.5% of the population is enrolled in Medicaid.

Select Health Measures

- 32.0% of adults are considered obese.
- 22.0% of the adult population report physical inactivity.
- 41.0% of adults living in frontier Montana report two or more chronic conditions.
- Montana’s veteran suicide rate (per 100,000 population) is 65.7 compared to 38.4 for the U.S.

Nearest Major Hospitals

- Benefis Health System & Great Falls Clinic, Great Falls, MT – 103 miles from Central Montana Medical Center
- St. Vincent’s Health Care & Billings Clinic, Billings, MT – 145 miles from Central Montana Medical Center

4. Public Health and Underserved Populations Consultation Summaries

Name/Organization

Cody Langbehn, CEO – Central Montana Medical Center (CMMC)
 Leana Fisk – Central Montana Health District
 Kristy Heller – RN, CMMC
 Amy Howell – LPN, CMMC
 Stephanie Prater – Community Relations, CMMC
 Jennifer Saunders – Fergus County Commissioner
 Heather Thom – Fergus County Health Department
 Brenna Walker – Care Coordinator, CMMC
 Abbey Wichman – CMMC
 Susan Woods – Central Montana Health District

11/13/2024

Public and Community Health

- Households without vehicles is high
- Not a lot of public transit here
- High STD rates
- Smoking during pregnancy is high
- HPV vaccination is low
- Flu shot rates used to be higher, now low
- CMS not tracking flu vaccine rates this year
- Schools don't have to report vaccination levels; public health isn't allowed in to give vaccination clinics either
- Adult obesity rate is high
- Preventative care screenings are lower except for cervical cancer
- Mammography seems so available, and we have programs to help people pay for it here and in surrounding counties (we do have 3D mammo here)
- Screenings do correlate with people getting physicals every year
- Enteric diseases is high because of the agriculture here
- Prostate cancer rates are higher here; this correlates with older population who don't go to the doctor as much

- Financial insecurities are a big factor here; there is a need for transparent pricing
- Housing, utilities, food insecurities are big issues
- Affordable housing is a huge issue; wait list for housing is so long, but availability is low

Population: Youth

- Uninsured children is high
- Childhood vaccination rates have been worse after covid
- More exemptions in schools, more people not staying up to date
- Seeing pertussis and varicella outbreaks in rural areas

Population: Seniors

- Older folks might have more problems with transportation
- Not as many regularly see a doctor, maybe

Population: Low Income, Underinsured

- Young mothers are probably in need of more resources/support
- Inflation is affecting how people get and choose care
- How many people lost Medicaid here?

Needs Identified and Prioritized

Prioritized Needs to Address

1. Top health concerns among survey respondents included “Alcohol abuse/substance abuse” (47.4%), “Cancer” (39.0%), “Overweight/obesity” (28.6%), “Mental health issues (Depression, anxiety, PTSD, etc.)” (22.7%), and “Lack of access to healthcare” (18.2%).
2. Top components of a healthy community were “Access to healthcare and other services” (48.7%), “Good jobs and a healthy economy” (46.8%), “Affordable housing” (36.1%), and “Healthy behaviors and lifestyles” (26.6%).
3. 50.0% of respondents said their knowledge of CMMC services was “Good,” and 25.3% said theirs was “Fair.” Most respondents learned of CMMC services through “Friends/family” (61.9%), CMMC itself (56.9%), or their “Healthcare provider”/“Word of mouth/reputation” (51.9% each).
4. Community use of Council on Aging increased since last survey to 14.6%, as did use of mental health resources (11.3%).
5. Access to healthcare would be improved through “More primary care providers” (52.6%), “More specialists” (50.0%), and “More information about available services” (34.9%). 27.6% of respondents said “Payment assistance programs” would be helpful in improving access.
6. Interest in educational classes/programs was highest for “Health and wellness” (52.5%), “Fitness” (42.6%), and “Women’s health” (38.5%). 13.9% of respondents were interested in more education around “Cancer.”
7. The top desired specialty services were “Women’s health services” (42.7%), “Pain management services” (31.8%), and “Cancer care services”/“Mental health services” (23.6% each).
8. The most frequently utilized preventive services were “Dental check” (72.9%) and “Health checkup” (69.0%).
9. 36.6% of respondents indicated that they delayed receiving care; top reasons were “Too long to wait for an appointment” (41.8%), “Could not get an appointment” (36.4%), and “It cost too much” (32.7%).
10. 73.2% of respondents had seen a primary care provider in the last three years; 50.0% of them saw that provider at CMMC. “Clinic/provider’s reputation for quality” was the top reason for provider selection (44.2%).
11. 99.4% of respondents had received hospital care in the last three years; 57.0% of them went to CMMC and 14.9% went to Billings Clinic. Top reasons were “Closest to home” (54.4%) and “Prior experience with hospital” (42.1%).

12. 83.4% of respondents had received specialty care in the last three years; 47.3% saw specialists at Billings Clinic and 45.8% saw them at CMMC. The most common specialists were “Orthopedic surgeon” (28.2%), “Dermatologist” (24.4%), “General surgeon” (22.9%), and “Cardiologist” (22.1%).
13. 17.3% of respondents reported feeling depressed in the last three years. 46.1% reported feeling lonely or isolated for some period of time in the last year. 59.5% of respondents said their stress level was “Moderate” or “High,” and 18.0% of respondents said their mental health was either “Fair” or “Poor.”
14. 42.3% of respondents said that their lives were negatively impacted by substance use.
15. 26.9% of respondents reported getting physical activity 3-5 times per month or less.
16. For 8.3% of respondents, cost prevented them from getting medications/prescriptions.
17. 25.5% of respondents said their insurance covered a “Fair” or “Poor” amount of their healthcare costs. The top barrier to having health insurance was “Can’t afford to pay for health insurance.”
18. 40.6% of respondents were unaware or unsure if they were aware of healthcare cost assistance programs.
19. Mental health services were identified as a need through the focus group. More counselors, psychiatrists, and case managers are desired, as well as more crisis services.
20. Focus group participants expressed the need for more providers at CMMC to ensure better access to care.

Needs Unable to Address

(See page 28 for additional information)

1. Affordable housing: 36.1% of respondents said affordable housing was a top component of a healthy community. 63.1% of respondents said they did not think there was adequate and affordable housing in the community.
2. Women’s health: Interest in education around women’s health was desired by 38.5% of respondents. Women’s health services were the top desired specialty service.

Executive Summary

The following summary briefly represents the goals and corresponding strategies and activities which the facility will execute to address the prioritized health needs (from page 11). For more details regarding the approach and performance measures for each goal, please refer to the Implementation Plan Grid section, which begins on page 16.

Goal 1: Expand access to mental and behavioral health services available through Central Montana Medical Center.a

Strategy 1.1: Continue to develop and support CMMC’s mental and behavioral health activities and resources.

- 1.1.1. Partner with Billings Mental Health Center to implement PACT program for central Montana.
- 1.1.2. Explore the feasibility of adding Esketamine therapy to CMMC’s behavioral health service line.
- 1.1.3. Continue to grow practice for newly onboarded LCPC. Begin offering group therapy sessions with LCPC.
- 1.1.4. Explore partnering with Senior Life Solutions for Medicare beneficiaries to increase access to mental health services.
- 1.1.5. Continue to assess the need for more mental health providers in the community.
- 1.1.6. Attempt to rejuvenate the community-wide law enforcement taskforce aimed at addressing behavioral health concerns.

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

Strategy 2.1: Increase access to primary care services available through CMMC.

- 2.1.1. Evaluate current access to primary care, including appointment availability and wait times. Continue to assess the impact that new local urgent care clinic will have on primary care needs and access.
- 2.1.2. Onboard and build the practice of two new family practice physicians to increase the community’s access to primary care.
Recruit an additional Nurse Practitioner to join the clinic’s primary care team.
- 2.1.3. Continue to monitor the need for additional primary care practitioners and act accordingly.

- 2.1.4. Evaluate current access to primary care, including appointment availability and wait times. Continue to assess the impact that new local urgent care clinic will have on primary care needs and access.

Strategy 2.2: Increase access to specialty care services available through CMMC.

- 2.2.1. Continue to hone and improve services offered through the new cancer center.
- Continue to receive feedback from the community regarding the cancer center.
 - Grow cancer center services as needed by the community.
 - Add PET scan capabilities to the services offered.
 - Evaluate the feasibility of doing clinical trials and experimental treatments in the cancer center.
- 2.2.2. Work with new urgent care provider in Lewistown to coordinate specialty care services brought into central Montana.
- 2.2.3. Explore possibility of coordinated outreach of CMMC's specialty services to communities around Lewistown.
- 2.2.4. Explore best methods to enhance new providers' presence and visibility in Lewistown and surrounding communities.
- 2.2.5. Continue to assess pain management services and explore growing them to fit community feedback and needs.
- 2.2.6. Add CT diagnostic capabilities for cardiac and pulmonary screenings in-house.
- 2.2.7. Explore feasibility of offering dialysis care services in the community in response to needs and feedback.
- 2.2.8. Increase DEXA scan capabilities regarding BMI calculations to provide more health information to patients.
- 2.2.9. Continue improving ortho needs coverage in response to community needs and feedback.
- 2.2.10. Improve sepsis screening capabilities.

Strategy 2.3: Enhance workforce and education opportunities to increase access to specialty care.

- 2.3.1. Continue to offer educational opportunities for RTs, CNAs, dieticians, EMS, nursing, radiology, therapies, etc. to increase the community's access to care.

Strategy 2.4: Focus on affordability of services offered through CMMC.

- 2.4.1. Evaluate CMMC charges and assess where and if reductions are needed and possible.
- 2.4.2. Continue to offer financial assistance programs and evaluate how to best promote these programs to patients.

Goal 3: Improve the health and wellness of Central Montana.

Strategy 3.1: Enhance health and wellness education and outreach through CMMC.

- 3.1.1.** Continue to coordinate and collaborate on health education classes and programs that promote prevention, health, and chronic disease management (i.e., immunizations available, medication management, food insecurity, community welfare services, COPD, parenting, financial education, stress management, etc.).
- 3.1.2.** Continue to support physical health and healthy behaviors in the CMMC service area (i.e., community fun runs, community outreach, sponsoring various events, etc.).
- 3.1.3.** Continue to assist local support groups (i.e., stroke support, caregivers support, cancer, etc.).
- 3.1.4.** Continue to offer healthy meal choices in the CMMC cafeteria.
- 3.1.5.** Continue to pursue the latest healthcare technology upgrades to enhance community and patient engagement with their health.

Implementation Plan Grid

Goal 1: Expand access to mental and behavioral health services available through Central Montana Medical Center.

Strategy 1.1: Continue to develop and support CMMC’s mental and behavioral health activities and resources.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Partner with Billings Mental Health Center to implement PACT program for central Montana.	CEO	Ongoing	Executive Team	Billings Mental Health Center; One Health	Workforce limitations
Explore the feasibility of adding Esketamine therapy to CMMC’s behavioral health service line.	Behavioral Health/Clinic Leadership	End FY 26	Executive Team/Med Staff	NA	Clinic space/storage
Continue to grow practice for newly onboarded LCPC. Begin offering group therapy sessions with LCPC.	Clinic Leadership	FY 26-27	Executive Team	Media outlets/other referring providers	NA
Explore partnering with Senior Life Solutions for Medicare beneficiaries to increase access to mental health services.	CEO	FY 26	Executive Team	Senior Life Solutions	NA
Continue to assess the need for more mental health providers in the community.	Clinic Leadership	Ongoing	Executive Team/ Board of Directors	Other Community providers	Financial Limitations/workforce limitations
Attempt to rejuvenate the community-wide law enforcement taskforce aimed at addressing behavioral health concerns.	CEO & Director of Compliance	Ongoing	Executive Team	Law enforcement, PACT, Judicial, city, county, other mental health providers	Scheduling Conflicts/ Resource limitations

Needs Being Addressed by this Strategy:

- 1. Top health concerns among survey respondents included “Alcohol abuse/substance abuse” (47.4%), “Cancer” (39.0%), “Overweight/obesity” (28.6%), “Mental health issues (Depression, anxiety, PTSD, etc.)” (22.7%), and “Lack of access to healthcare” (18.2%).
- 2. Top components of a healthy community were “Access to healthcare and other services” (48.7%), “Good jobs and a healthy economy” (46.8%), “Affordable housing” (36.1%), and “Healthy behaviors and lifestyles” (26.6%).
- 4. Community use of Council on Aging increased since last survey to 14.6%, as did use of mental health resources (11.3%).
- 7. The top desired specialty services were “Women’s health services” (42.7%), “Pain management services” (31.8%), and “Cancer care services”/“Mental health services” (23.6% each).
- 13. 17.3% of respondents reported feeling depressed in the last three years. 46.1% reported feeling lonely or isolated for some period of time in the last year. 59.5% of respondents said their stress level was “Moderate” or “High,” and 18.0% of respondents said their mental health was either “Fair” or “Poor.”
- 14. 42.3% of respondents said that their lives were negatively impacted by substance use.
- 19. Mental health services were identified as a need through the focus group. More counselors, psychiatrists, and case managers are desired, as well as more crisis services.

Anticipated Impact(s) of these Activities:

- Increase access to mental health services
- Service, policy, and resource development
- Decrease societal stigma associated with mental illness and substance use disorders
- Strengthen community partnerships
- Build community capacity

Plan to Evaluate Anticipated Impact(s) of these Activities:

- Track progress on PACT program implementation
- Track progress on Esketamine therapy addition
- Track patients seen by and group therapy sessions provided by LCPC
- Track progress on law enforcement task force rejuvenation

Measure of Success: CMMC expands mental and behavioral health services and resources available in Fergus County.

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

Strategy 2.1: Increase access to primary care services available through CMMC.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Evaluate current access to primary care, including appointment availability and wait times. Continue to assess the impact that new local urgent care clinic will have on primary care needs and access.	Clinic Leadership	Ongoing	Executive Team	Community health organizations, groups and facilities	Workforce limitations
Onboard and build the practice of two new family practice physicians to increase the community’s access to primary care.	Clinic Leadership	Ongoing	Executive Team	Media outlets/community	NA
Recruit an additional Nurse Practitioner to join the clinic’s primary care team.	Clinic Leadership	FY 26	Executive Team	NA	Workforce limitations
Continue to monitor the need for additional primary care practitioners and act accordingly.	Clinic Leadership	Ongoing	Executive Team	Community health organizations, groups and facilities	Workforce limitations

Needs Being Addressed by this Strategy:

- 1. Top health concerns among survey respondents included “Alcohol abuse/substance abuse” (47.4%), “Cancer” (39.0%), “Overweight/obesity” (28.6%), “Mental health issues (Depression, anxiety, PTSD, etc.)” (22.7%), and “Lack of access to healthcare” (18.2%).
- 2. Top components of a healthy community were “Access to healthcare and other services” (48.7%), “Good jobs and a healthy economy” (46.8%), “Affordable housing” (36.1%), and “Healthy behaviors and lifestyles” (26.6%).
- 3. 50.0% of respondents said their knowledge of CMMC services was “Good,” and 25.3% said theirs was “Fair.” Most respondents learned of CMMC services through “Friends/family” (61.9%), CMMC itself (56.9%), or their “Healthcare provider”/“Word of mouth/reputation” (51.9% each).
- 5. Access to healthcare would be improved through “More primary care providers” (52.6%), “More specialists” (50.0%), and “More information about available services” (34.9%). 27.6% of respondents said “Payment assistance programs” would be helpful in improving access.
- 8. The most frequently utilized preventive services were “Dental check” (72.9%) and “Health checkup” (69.0%).
- 9. 36.6% of respondents indicated that they delayed receiving care; top reasons were “Too long to wait for an appointment” (41.8%), “Could not get an appointment” (36.4%), and “It cost too much” (32.7%).
- 10. 73.2% of respondents had seen a primary care provider in the last three years; 50.0% of them saw that provider at CMMC. “Clinic/provider’s reputation for quality” was the top reason for provider selection (44.2%).
- 20. Focus group participants expressed the need for more providers at CMMC to ensure better access to care.

Anticipated Impact(s) of these Activities:

- Increase access to primary care services
- Increased community knowledge of services
- Improved health outcomes
- Service, policy, and resources development
- Improve access to high quality, coordinated care
- Enhance community’s knowledge of health and wellness resources
- Reduce disease burden
- Empower community to make healthful lifestyle choices

Plan to Evaluate Anticipated Impact(s) of these Activities:

- Evaluate current appointment availability and wait times for primary care
- Assess impacts of new local urgent care clinic
- Track patients seen by two new family practice physicians
- Track progress on recruiting new NP
- Monitor community feedback about primary care access and availability

Measure of Success: CMMC providing increased access to primary care & increasing number of patients served.

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

Strategy 2.2: Increase access to specialty care services available through CMMC.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Continue to hone and improve services offered through the new cancer center. <ul style="list-style-type: none"> • Continue to receive feedback from the community regarding the cancer center. • Grow cancer center services as needed by the community. • Add PET scan capabilities to the services offered. • Evaluate the feasibility of doing clinical trials and experimental treatments in the cancer center. 	Executive Team	Ongoing	Executive Team	SharedMed	Financial limitations, Volume, workforce limitations, regulations

Work with new urgent care provider in Lewistown to coordinate specialty care services brought into central Montana.	CEO	Ongoing	Executive Team	Benefis	Workforce limitations, resource limitations
Explore possibility of coordinated outreach of CMMC's specialty services to communities around Lewistown.	Clinic Leadership	Ongoing	Executive Team	Community hospitals/providers	Workforce limitations, resource limitations
Explore best methods to enhance new providers' presence and visibility in Lewistown and surrounding communities.	Clinic Leadership/Marketing	Ongoing	Executive Team	Local media outlets	Workforce limitations, resource limitations
Continue to assess pain management services and explore growing them to fit community feedback and needs.	CNO	Ongoing	Executive Team	T.A.P., pain providers	Workforce limitations
Add CT diagnostic capabilities for cardiac and pulmonary screenings in-house.	COO	Ongoing	Executive Team	Billings Clinic/Siemens	Financial Limitations
Explore feasibility of offering dialysis care services in the community in response to needs and feedback.	CNO	October 2025	Executive Team	Outset Medical	Liability, Workforce limitations, Financial Limitations
Increase DEXA scan capabilities regarding BMI calculations to provide more health information to patients.	COO	Ongoing	Executive Team	Marketing/local media outlets	Community engagement

Continue improving ortho needs coverage in response to community needs and feedback.	CEO/CNO	Ongoing	Executive Team	Billings Clinic/Synergy	Workforce recruitment
Improve sepsis screening capabilities.	CNO	Ongoing	Executive Team/Med Staff	NA	Technology adoption

Needs Being Addressed by this Strategy:

- 1. Top health concerns among survey respondents included “Alcohol abuse/substance abuse” (47.4%), “Cancer” (39.0%), “Overweight/obesity” (28.6%), “Mental health issues (Depression, anxiety, PTSD, etc.)” (22.7%), and “Lack of access to healthcare” (18.2%).
- 2. Top components of a healthy community were “Access to healthcare and other services” (48.7%), “Good jobs and a healthy economy” (46.8%), “Affordable housing” (36.1%), and “Healthy behaviors and lifestyles” (26.6%).
- 3. 50.0% of respondents said their knowledge of CMMC services was “Good,” and 25.3% said theirs was “Fair.” Most respondents learned of CMMC services through “Friends/family” (61.9%), CMMC itself (56.9%), or their “Healthcare provider”/“Word of mouth/reputation” (51.9% each).
- 5. Access to healthcare would be improved through “More primary care providers” (52.6%), “More specialists” (50.0%), and “More information about available services” (34.9%). 27.6% of respondents said “Payment assistance programs” would be helpful in improving access.
- 6. Interest in educational classes/programs was highest for “Health and wellness” (52.5%), “Fitness” (42.6%), and “Women’s health” (38.5%). 13.9% of respondents were interested in more education around “Cancer.”
- 7. The top desired specialty services were “Women’s health services” (42.7%), “Pain management services” (31.8%), and “Cancer care services”/“Mental health services” (23.6% each).
- 12. 83.4% of respondents had received specialty care in the last three years; 47.3% saw specialists at Billings Clinic and 45.8% saw them at CMMC. The most common specialists were “Orthopedic surgeon” (28.2%), “Dermatologist” (24.4%), “General surgeon” (22.9%), and “Cardiologist” (22.1%).

Anticipated Impact(s) of these Activities:

- Increase access to specialty care services
- Increased community knowledge of services
- Improved health outcomes

Plan to Evaluate Anticipated Impact(s) of these Activities:

- Continue to receive and evaluate feedback regarding new cancer center
- Track efforts regarding clinical trials and experimental treatments
- Track coordination with urgent care provider
- Track efforts to enhance provider visibility in CMMC’s service area
- Evaluate community desire for pain management services, dialysis care, and ortho needs
- Track sepsis screening improvements
- Track patients utilizing DEXA scan BMI calculations

Measure of Success: CMMC offers expanded specialty services.

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

Strategy 2.3: Enhance workforce and education opportunities to increase access to specialty care.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Continue to offer educational opportunities for RTs, CNAs, dieticians, EMS, nursing, radiology, therapies, etc. to increase the community’s access to care.	Executive Team	Ongoing	Executive Team	Billings Clinic, Local schools, Higher education, Providence	resource limitations, workforce limitations, retention

Needs Being Addressed by this Strategy:

- 1. Top health concerns among survey respondents included “Alcohol abuse/substance abuse” (47.4%), “Cancer” (39.0%), “Overweight/obesity” (28.6%), “Mental health issues (Depression, anxiety, PTSD, etc.)” (22.7%), and “Lack of access to healthcare” (18.2%).
- 2. Top components of a healthy community were “Access to healthcare and other services” (48.7%), “Good jobs and a healthy economy” (46.8%), “Affordable housing” (36.1%), and “Healthy behaviors and lifestyles” (26.6%).
- 3. 50.0% of respondents said their knowledge of CMMC services was “Good,” and 25.3% said theirs was “Fair.” Most respondents learned of CMMC services through “Friends/family” (61.9%), CMMC itself (56.9%), or their “Healthcare provider”/“Word of mouth/reputation” (51.9% each).
- 5. Access to healthcare would be improved through “More primary care providers” (52.6%), “More specialists” (50.0%), and “More information about available services” (34.9%). 27.6% of respondents said “Payment assistance programs” would be helpful in improving access.
- 20. Focus group participants expressed the need for more providers at CMMC to ensure better access to care.

Anticipated Impact(s) of these Activities:

- Increase access to specialty care services
- Increased community knowledge of services
- Improved health outcomes
- Service, policy, and resources development
- Improve access to high quality, coordinated care
- Reduce disease burden

Plan to Evaluate Anticipated Impact(s) of these Activities:

- Track utilization of workforce and educational opportunities at CMMC
- Track tuition reimbursement & foundation education funding.
- Track workforce HR dashboard.

Measure of Success: CMMC expands workforce & educational opportunities

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

Strategy 2.4: Focus on affordability of services offered through CMMC.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Evaluate CMMC charges and assess where and if reductions are needed and possible.	CFO	Ongoing	Executive Team	NA	Access to information, Financial impacts
Continue to offer financial assistance programs and evaluate how to best promote these programs to patients.	CFO/ Marketing	Ongoing	Executive Team	Local Media outlets	Financial limitations

Needs Being Addressed by this Strategy:

- 1. Top health concerns among survey respondents included “Alcohol abuse/substance abuse” (47.4%), “Cancer” (39.0%), “Overweight/obesity” (28.6%), “Mental health issues (Depression, anxiety, PTSD, etc.)” (22.7%), and “Lack of access to healthcare” (18.2%).
- 2. Top components of a healthy community were “Access to healthcare and other services” (48.7%), “Good jobs and a healthy economy” (46.8%), “Affordable housing” (36.1%), and “Healthy behaviors and lifestyles” (26.6%).
- 5. Access to healthcare would be improved through “More primary care providers” (52.6%), “More specialists” (50.0%), and “More information about available services” (34.9%). 27.6% of respondents said “Payment assistance programs” would be helpful in improving access.
- 9. 36.6% of respondents indicated that they delayed receiving care; top reasons were “Too long to wait for an appointment” (41.8%), “Could not get an appointment” (36.4%), and “It cost too much” (32.7%).
- 16. For 8.3% of respondents, cost prevented them from getting medications/prescriptions.
- 17. 25.5% of respondents said their insurance covered a “Fair” or “Poor” amount of their healthcare costs. The top barrier to having health insurance was “Can’t afford to pay for health insurance.”
- 18. 40.6% of respondents were unaware or unsure if they were aware of healthcare cost assistance programs.

Anticipated Impact(s) of these Activities:

- Increase access to care
- Improved health outcomes
- Reduced financial burden

Plan to Evaluate Anticipated Impact(s) of these Activities:

- Track efforts to evaluate CMMC charges
- Track utilization of financial assistance programs
- Track efforts to promote financial assistance programs

Measure of Success: Improved usage of CMMC financial programs.

Goal 3: Improve the health and wellness of Central Montana.

Strategy 3.1: Enhance health and wellness education and outreach through CMMC.

Activities	Responsibility	Timeline	Final Approval	Partners	Potential Barriers
Continue to coordinate and collaborate on health education classes and programs that promote prevention, health, and chronic disease management (i.e., immunizations available, medication management, breast feeding, women’s health/OB, mammography, pelvic floor therapy, food insecurity, community welfare services, COPD, parenting, financial education, stress management, etc.).	Executive Team	Ongoing	Executive Team	Community health organizations, groups and facilities, county health	Financial limitations, resource limitations, community patient engagement

Continue to support physical health and healthy behaviors in the CMMC service area (i.e., community fun runs, community outreach, sponsoring various events, etc.).	CEO	Ongoing	Executive Team	Community	Financial limitations, resource limitations, Scheduling
Continue to assist local support groups (i.e., stroke support, caregivers support, cancer, etc.).	CNO/Clinic Leadership	Ongoing	Executive Team	Community/local media outlets	Scheduling conflicts, resource limitations
Continue to offer healthy meal choices in the CMMC cafeteria.	COO	Ongoing	Executive Team	Food supply chain, community	Financial limitations, patient engagement
Continue to pursue the latest healthcare technology upgrades to enhance community and patient engagement with their health.	Executive Team	Ongoing	Executive Team	Billings Clinic	Financial limitations, resource limitations, community patient engagement & adoption in technology

Needs Being Addressed by this Strategy:

- 1. Top health concerns among survey respondents included “Alcohol abuse/substance abuse” (47.4%), “Cancer” (39.0%), “Overweight/obesity” (28.6%), “Mental health issues (Depression, anxiety, PTSD, etc.)” (22.7%), and “Lack of access to healthcare” (18.2%).
- 2. Top components of a healthy community were “Access to healthcare and other services” (48.7%), “Good jobs and a healthy economy” (46.8%), “Affordable housing” (36.1%), and “Healthy behaviors and lifestyles” (26.6%).
- 6. Interest in educational classes/programs was highest for “Health and wellness” (52.5%), “Fitness” (42.6%), and “Women’s health” (38.5%). 13.9% of respondents were interested in more education around “Cancer.”

- 8. The most frequently utilized preventive services were “Dental check” (72.9%) and “Health checkup” (69.0%).
- 15. 26.9% of respondents reported getting physical activity 3-5 times per month or less.

Anticipated Impact(s) of these Activities:

- Strengthen community partnerships
- Increased community knowledge of resources
- Enhance community’s knowledge of health and wellness resources
- Reduce disease burden
- Empower community to make healthful lifestyle choices

Plan to Evaluate Anticipated Impact(s) of these Activities:

- Track health education classes and programs
- Track community outreach and support efforts
- Track progress on healthcare technology implementation

Measure of Success: Increase offerings and attendance of health and wellness opportunities at CMMC.

Needs Not Addressed and Justification

Identified health needs unable to address by Central Montana Medical Center	Rationale
<p>1. Affordable housing: 36.1% of respondents said affordable housing was a top component of a healthy community. 63.1% of respondents said they did not think there was adequate and affordable housing in the community.</p>	<p>Housing affordability is a challenging issue to tackle alone. As time allows in the future, Central Montana Medical Center would be open to engaging with community partners in discussions related to housing affordability and accessibility.</p>

Dissemination of Needs Assessment

Central Montana Medical Center “CMMC” disseminated the community health needs assessment and implementation plan by posting both documents conspicuously on their website (cmmc.health/resources/reports) as well as having copies available at the facility should community members request to view the community health needs assessment or the implementation planning documents.

The Steering Committee, which was formed specifically as a result of the CHSD (Community Health Services Development) process to introduce the community to the assessment process, will be informed of the implementation plan to see the value of their input and time in the CHSD process as well as how CMMC is utilizing their input. The Steering Committee, as well as the Board of Directors, will be encouraged to act as advocates in Fergus County as the facility seeks to address the healthcare needs of their community.

Furthermore, the board members of CMMC will be directed to the hospital’s website to view the complete assessment results and the implementation plan. CMMC board members approved and adopted the plan on **September 2, 2025**. Board members are encouraged to familiarize themselves with the needs assessment report and implementation plan, so they can publicly promote the facility’s plan to influence the community in a beneficial manner.

Written comments on this 2025-2028 Central Montana Medical Center Community Benefit Strategic Plan 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.