

# Newman Memorial Hospital Community Health Needs Assessment Summary and Implementation Strategy

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Oklahoma Office of Rural Health

OSU Center for Rural Health

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## Introduction

New requirements for nonprofit, 501 (c)(3), hospitals were enacted under the Patient Protection and Affordable Care Act (ACA), passed on March 23, 2010. One of the most significant of the new requirements is the Community Health Needs Assessment (CHNA) that must be conducted during taxable years after March 23, 2012 and submitted with IRS form 990. A CHNA must then be completed every three years following.

While the requirements are fairly new, the IRS has made strides in defining hospitals that must complete the CHNA as well as details of what is expected in the CHNA report to be submitted. At this time the only entities that must complete the CHNA are hospital organizations defined as:

- An organization that operates a State-licensed hospital facility
- Any other organization that the Secretary determines has the provision of hospital care as its principal function or purpose constituting the basis for its exemption under section 501 (c)(3).

The general goal behind the requirement is to gather community input that leads to recommendations on how the local hospital can better meet and serve residents' needs. The community input is typically derived from a community survey and a series of open meetings. Local health data are presented. Community members then identify and prioritize their top health needs.

After listening to community input, the hospital defines an implementation strategy for their specific facility. The implementation strategy is a written plan that addresses each of the health needs identified in the community meetings. To meet Treasury and IRS guidelines an implementation strategy must:

- Describe how the hospital facility plans to meet the health need, or
- Identify the health need as one the hospital facility does not intend to meet and explain why the hospital facility does not intend to meet the health need<sup>1</sup>

After the needs are identified that the hospital can address, the implementation strategy must take into account specific programs, resources, and priorities for that particular facility. This can include existing programs, new programs, or intended collaboration with governmental, nonprofit, or other health care entities within the community.<sup>2</sup>

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<sup>1</sup> Internal Revenue Service. 2011. Notice and Requests for Comments Regarding the Community Health Needs Assessment Requirements for Tax-Exempt Hospitals. Internal Revenue Bulletin: 2011-30.

<sup>2</sup> Ibid

The facility must make the recommendations and implementation strategy widely available to community members. The facility must adopt the implementation strategy in that same taxable year.

### **Oklahoma Office of Rural Health Partnership**

The Oklahoma Office of Rural Health makes this program available to all rural facilities in Oklahoma free of charge. The Oklahoma Office of Rural Health works closely with the hospital and community members to develop an economic impact of the local health sector, develop and analyze a local health services survey, and gather and analyze local health data. The community meetings are facilitated by a resource team that includes Corie Kasier and Lara Brooks of the Oklahoma Office of Rural Health.

After the meetings conclude, the resource team assists the hospital in developing their implementation strategy. After implementation, the resource team will assist in evaluation of the strategies implemented and provide continued assistance with data and resources.

This document discusses the steps taken to conduct a CHNA for Newman Memorial Hospital in 2016. It begins with a description of the hospital's medical service area, including a demographic analysis, and then summarizes each meeting that took place during the CHNA process. The report concludes by listing the recommendations that came out of the process and presenting the hospital's implementation strategy and marketing plan.

### **Previous Community Health Needs Assessment- Priorities, Implementation, and Evaluation**

Newman Memorial Hospital worked with the Oklahoma Office of Rural Health and Oklahoma Cooperative Extension Service to complete a CHNA during 2013. The following identifies each priority, implementation taken, and an evaluation or impact of the implementation.

Priority: Traffic accidents and fatalities

Service Implemented/Partnerships: Car Seat Safety

WIC is offered as a public health service through the hospital. Upon completion of a client's health and nutrition assessments, referrals are made to entities that provide proper car seat safety. Unfortunately, no data are returned on those who accept and go to the referrals.

Priority: Teenage drinking

Service Implemented/Partnerships: Health Education

The hospital makes referrals to outside providers for general health education for patients who need such referrals.

Priority: Mental health

Service Implemented/Partnerships: Tele-mental health

Tele-mental health services were available until May 2016. Two providers covered this service with 6-9 patient visits per day. Visit days were 1-4 times per year. Overall, this service had a significant impact on the community as there are no providers in the county.

Priority: Increasing share of uninsured children

Service Implemented/Partnerships: VFC (Vaccination for Children) Program

As previously mentioned, Ellis County does not have a county health department. Therefore, the hospital fills many of the public health roles for the county. This includes vaccinations. The data show an increase in the number of children seen in the Shattuck area.

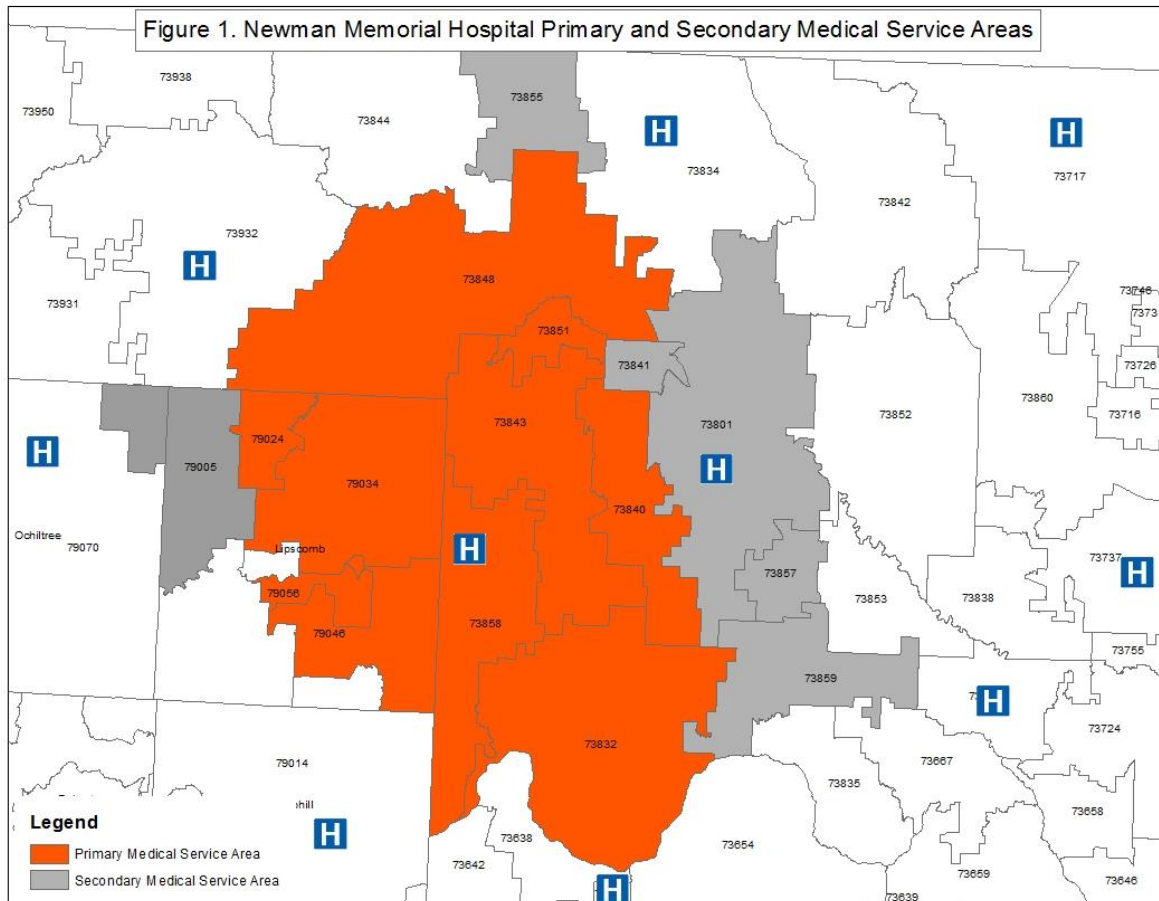
Priority: Pain Management

Service Implemented/Partnerships: Pain Management Evaluations

Patients in the medical service area are referred to partnering physicians for a pain evaluation to determine their pain management needs. If the patient is found to have a short term pain management need, the service is managed locally. Chronic or longer-term pain management patients are further referred to providers in Oklahoma City for advanced care. Data are not available on the number of patients who are treated locally as this is covered by hospital physicians and partnering physicians in the community.

## Newman Memorial Hospital Medical Services Area Demographics

Figure 1 displays the Newman Memorial Hospital medical services area. Newman Memorial Hospital and all area hospitals are delineated in the figure. The surrounding hospitals are identified in the table below by county along with their respective bed count.



**Figure 1. Newman Memorial Hospital Medical Service Areas**

City	County	Hospital	No. of Beds
Beaver	Beaver	Beaver County Memorial Hospital	24
Seiling	Dewey	Seiling Community Hospital	18
Shattuck	Ellis	Newman Memorial Hospital	25
Fairview	Major	Fairview Regional Medical Center	25
Cheyenne	Roger Mills	Roger Mills Memorial Hospital	15
Woodward	Woodward	AllianceHealth Woodward	87
Alva	Woods	Share Memorial Hospital	25
Canadian	Hemphill, TX	Hemphill County Hospital	26
Perryton	Ochiltree, TX	Ochiltree General Hospital	n/a

As delineated in Figure 1, the primary medical service area of Newman Memorial Hospital includes the zip code areas of Shattuck, May, Fargo, Gage, Arnett, Laverne, Follett, TX, Higgins, TX, Lipscomb, TX, Darrouzett, TX. The primary medical service area experienced a population increase of 7.5 percent from the 2000 Census to the 2010 Census (Table 1). This same service area experienced another increase in population of 0.8 percent from the 2010 Census to the latest available, 2010-2014, American Community Survey.

The secondary medical services area is comprised of the zip code areas Rosston, Fort Supply, Vici, Sharon, Woodward, and Booker, TX. The secondary medical service area experienced an increase in population of 9.7 percent from 2000 to 2010 followed by another population increase of 0.3 percent from 2010 to the 2010-2014 American Community Survey.



**Table 1. Population of Newman Memorial Hospital Medical Service Areas**

	2000	2010	2010-2014	% Change 2000- 2010	% Change 2010-2014
Population by Zip Code	Population	Population	Population		
<i>Primary Medical Service Area</i>					
73858 Shattuck	1,618	1,666	1,572	3.0%	-5.6%
73851 May	78	80	101	2.6%	26.3%
73840 Fargo	670	691	801	3.1%	15.9%
73843 Gage	906	883	971	-2.5%	10.0%
73832 Arnett	998	929	886	-6.9%	-4.6%
73848 Laverne	1,616	2,156	2,004	33.4%	-7.1%
79034 Follett, TX	577	637	712	10.4%	11.8%
79046 Higgins, TX	580	489	526	-15.7%	7.6%
79056 Lipscomb, TX	46	63	62	37.0%	-1.6%
79024 Darrouzett, TX	349	405	426	16.0%	5.2%
<b>Total</b>	<b>7,438</b>	<b>7,999</b>	<b>8,061</b>	<b>7.5%</b>	<b>0.8%</b>
<i>Secondary Medical Service Area</i>					
73855 Rosston	186	106	80	-43.0%	-24.5%
73841 Fort Supply	967	1,482	1,436	53.3%	-3.1%
73859 Vici	1,295	1,459	1,646	12.7%	12.8%
73857 Sharon	503	623	672	23.9%	7.9%
73801 Woodward	14,327	15,228	15,181	6.3%	-0.3%
79005 Booker, TX	1,528	1,735	1,686	13.5%	-2.8%
<b>Total</b>	<b>18,806</b>	<b>20,633</b>	<b>20,701</b>	<b>9.7%</b>	<b>0.3%</b>

SOURCE: Population data from the U.S. Bureau of Census, Decennial Census 2000, 2010 and American Community Survey 2010-2014(September 2016)

Table 2 displays the current existing medical services in the primary service area of the Newman Memorial Hospital medical services area. Most of these services would be expected in a service area of Shattuck's size: two physician offices and clinics, one dental office, one optometry office, one pharmacy, one nursing home, one EMS provider, and one physical therapy provider. The hospital provides swing bed, physical therapy, laboratory, radiology (CT and MRI), telemedicine services, and 24 hour hospitalist coverage. A complete list of hospital services and community involvement activities can be found in Appendix A.

**Table 2. Existing Medical Services in Newman Memorial Hospital Medical Services Area**

<b>Count</b>	<b>Service</b>
1	Hospital: Newman Memorial Hospital
2	Physician offices
1	Dental office
1	Optometry office
1	Nursing home
1	Physical therapy provider
1	EMS provider
1	Pharmacy

In addition to examining the total population trends of the medical service areas, it is important to understand the demographics of those populations. Table 3 displays trends in age groups for the primary and secondary medical service areas as well as Ellis County in comparison to the state of Oklahoma. Overall, the over 65 age group accounts for a larger share of the population for both medical service areas and Ellis County according to the latest, 2010-2014 American Community Survey. This cohort accounted for 14 percent of the total population at the state level. In terms of the medical service areas, this age group accounted for 18.4 percent of the primary medical service area, 13.3 percent of the secondary medical service area, and 20.2 percent of the population of Ellis County. The 45-64 age group accounts for the largest share of the population in the primary (27.6%) service area and Ellis County (28.9%). This population group accounts for 24.8 percent of the 45-64 year range in the secondary medical service area (following the age group of 25-44 with 27.2% of the population). This is compared to the state share of 25.4 percent of the total population.

**Table 3. Percent of Total Population by Age Group for the Newman Memorial Hospital Medical Service Areas, Ellis County and Oklahoma**

Age Groups	Primary Medical Service Area	Secondary Medical Service Area	Ellis County	Oklahoma
<b>2010 Census</b>				
0-14	20.4%	20.9%	20.5%	20.7%
15-19	6.2%	6.1%	6.1%	7.1%
20-24	3.6%	6.4%	3.3%	7.2%
25-44	22.0%	27.3%	21.9%	25.8%
45-64	28.9%	25.3%	29.1%	25.7%
65+	<u>18.8%</u>	<u>13.9%</u>	<u>19.1%</u>	<u>13.5%</u>
Totals	100.0%	100.0%	100.0%	100.0%
Total Population	7,999	20,633	4,151	3,751,351
<b>10-14 ACS</b>				
0-14	20.7%	21.3%	19.8%	20.6%
15-19	6.6%	6.9%	6.0%	6.8%
20-24	4.3%	6.5%	4.5%	7.4%
25-44	22.4%	27.2%	20.7%	25.8%
45-64	27.6%	24.8%	28.9%	25.4%
65+	<u>18.4%</u>	<u>13.3%</u>	<u>20.2%</u>	<u>14.0%</u>
Totals	100.0%	100.0%	100.0%	100.0%
Total Population	8,061	20,701	4,113	3,818,851

SOURCE: U.S. Census Bureau, Decennial Census data for 2010 and American Community Survey data for 2010-2014 (www.census.gov [October 2016]).

Changes in racial and ethnic groups can impact the delivery of healthcare services, largely due to language barriers and dramatically different prevalence rates for specific diseases, such as diabetes. A noticeable trend in Oklahoma is the growth in the Hispanic origin population. In 2010, those of Hispanic origin accounted for 8.9 percent of the total state population. The latest American Community Survey data of 2010-2014 suggest that this population group has experienced an increase to 9.4 percent of the total population. This trend is

evident in Ellis County and both medical service areas. The share of the population identified as of Hispanic Origin accounted for 9.9 percent of the primary medical service area's population in 2010-2014 and 14.2 percent of the secondary medical service area during the same time period. The Hispanic Origin population accounted for 7.0 percent of the total population from 2010-2014 in Ellis County.

**Table 4. Percent of Total Population by Race and Ethnicity for Newman Memorial  
Hospital Medical Service Areas, Ellis County and Oklahoma**

Race/Ethnic Groups	Primary Medical Service Area	Secondary Medical Service Area	Ellis County	Oklahoma
<b>2010 Census</b>				
White	91.7%	85.9%	94.4%	72.2%
Black	0.2%	1.6%	0.3%	7.4%
Native American <sup>1</sup>	1.3%	2.6%	1.6%	8.6%
Other <sup>2</sup>	4.8%	7.0%	2.0%	5.9%
Two or more Races <sup>3</sup>	1.9%	2.8%	1.6%	5.9%
Hispanic Origin <sup>4</sup>	10.0%	14.2%	6.0%	8.9%
Total Population	7,999	20,633	4,151	3,751,351
<b>10-14 ACS</b>				
White	93.2%	89.7%	94.2%	73.3%
Black	0.2%	1.1%	0.2%	7.3%
Native American <sup>1</sup>	0.8%	2.0%	0.7%	7.2%
Other <sup>2</sup>	1.6%	2.7%	0.9%	4.5%
Two or more Races <sup>3</sup>	4.2%	4.5%	4.0%	7.8%
Hispanic Origin <sup>4</sup>	9.9%	14.2%	7.0%	9.4%
Total Population	8,061	20,701	4,113	3,818,851

SOURCE: U.S. Census Bureau, Decennial Census data for 2010 and American Community Survey data for 2010-2014 ([www.census.gov](http://www.census.gov) [October 2016]).

<sup>1</sup> Native American includes American Indians and Alaska Natives.

<sup>2</sup> Other is defined as Asian Americans, Native Hawaiians, Pacific Islanders and all others.

<sup>3</sup> Two or more races indicate a person is included in more than one race group.

<sup>4</sup> Hispanic population is not a race group but rather a description of ethnic origin; Hispanics are included in the five race groups.

## **Summary of Community Meetings**

Newman Memorial Hospital hosted four community meetings between October 12, 2016 and November 16, 2016. The Oklahoma Office of Rural Health facilitated these meetings. Summaries of the information presented at each meeting are included below in chronological order.

Community members in attendance at these meetings included:

- Newman Memorial Hospital representatives
- Local dental office
- Local health coalition
- Retired community members
- Local domestic violence representative
- Local EMS

Average attendance at the community meetings was 15-20 community members. Community members were invited and encouraged to attend the local meetings through ads in the Northwest Oklahoman Newspaper and the Ellis County Capital Newspaper. There were postings on the hospital's website, the Chamber of Commerce's website, personal invitations at the Shattuck Senior Center, Arnett Senior Center, Arnett Chamber of Commerce, Shattuck Chamber of Commerce, Ellis County Health Coalition Board Meeting, Newman Healthcare Associates, Newman Physicians Group, Dr. Burris Dentist Office, Dr. Jones Optometry Office, Medic Pharmacy, and a phone message was left with Ellis County EMS. Flyers with flu shots and immunizations were distributed. Flyers were also posted at Venture (a local grocery store) and El Tipi (a local convenience store). Reminder emails were sent to employees and Ellis County Health Coalition members as well as the social worker and school counselor. These efforts were made to make certain a large representation of the community was reached. A significant effort was placed on reaching out to those who work with or represent racially diverse and low income populations. Ellis County does not have a local health department. Therefore, the Ellis County Health Coalition includes representation of law enforcement, OSU Extension, a member working in the area of mental health, a local social worker, and a domestic violence advocate were all included because of the diverse clientele they serve.

## **Economic Impact and Community Health Needs Assessment Overview, October 12, 2016**

A meeting was held to discuss the economic impact of the health sector and explain the process and need for the Community Health Needs Assessment. The economic impact of the health sector was reviewed at this meeting (and is summarized below).

Table 5 below summarizes the overall economic impact of the health sector on the Ellis County, Oklahoma economy. Local providers were asked to share their employment levels and of those employees how many were physicians/optometrists/dentists/pharmacists/etc. When available, payroll information was also collected from the establishments. When payroll

information was not available, payroll was estimated using state level averages from the Bureau of Labor Statistics.

The health sector in the Newman Memorial Hospital medical service area employs 59 FTE individuals. After applying a county-specific employment multiplier to each respective sector, there is a total employment impact of 76 FTE employees. The same methodology is applied to income. The local health sector has a direct income impact of over \$8.4 million. When the appropriate income multiplier is applied, the total income impact is over \$9.8 million. The last two columns examine the impact this has on the retail sector of the local community. Recent data suggest that just 30.7% of personal income in Oklahoma will be spent on taxable goods and services locally. Therefore, if we just examine the impact made on retail from those employed in the health sector, this would account for over \$3 million spent locally, generating \$30,174 on a 1% tax. A copy of the meeting materials that were distributed can be found in Appendix C.

At the conclusion of the meeting, community members were asked to identify their top health concerns based on the demographic information presented and their local expertise. The following concerns were identified:

- Diabetes education, nutrition education
  - Youth, healthy eating, adults how to manage chronic conditions
- OB care
- Psychiatric care-geropsych, counseling for youth
- Need for pain management- long distance to travel for clinics to get prescriptions filled

**Table 5. Newman Memorial Hospital Medical Service Area Health Sector Impact on Employment and Income, and Retail Sales and Sales Tax**

Health Sectors	Employment			Income			Retail	1 Cent
	Direct	Multiplier	Impact	Direct	Multiplier	Impact	Sales	Sales Tax
Hospitals	59	1.28	76	\$2,902,828	1.17	\$3,401,487	\$1,044,257	\$10,443
Physicians, Dentists, & Other Medical Professionals & Pharmacies	39	1.40	54	\$2,319,957	1.18	\$2,739,439	\$841,008	\$8,410
Nursing Homes & Other Medical and Health Services	70	1.30	91	\$3,182,931	1.16	\$3,687,674	\$1,132,116	\$11,321
<b>Total</b>	<b>168</b>		<b>221</b>	<b>\$8,405,716</b>		<b>\$9,828,600</b>	<b>\$3,017,380</b>	<b>\$30,174</b>

SOURCE: 2014 IMPLAN database, Minnesota IMPLAN Group, Inc.; Local data for employment, employee compensation and proprietor's income; income estimated based on state average incomes if local data not available

\* Based on the ratio between Oklahoma taxable sales and income (30.7%) – from 2014 Sales Tax Data and 2014 Personal Income Estimates from the Bureau of Economic Analysis.



## **Health Data, October 26, 2016**

A community meeting was held October 26, 2016, to examine various sources of local health data. Various sources of health data were examined including data from the County Health Rankings and Roadmaps Program through the University of Wisconsin Population Health Institute, and the Robert Wood Johnson Foundation and the 2014 Oklahoma State of the State's Health Report compiled by the Oklahoma State Department of Health. The County Health Rankings program evaluates and ranks counties based on two distinct areas: Health Factors and Health Outcomes. Along with these two areas counties receive an overall rank within their state; therefore 1=best and 77=worst.

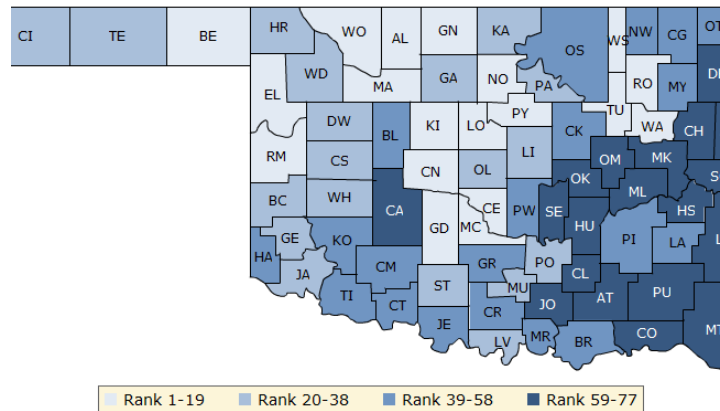
Health factors, considered tomorrow's health, are comprised of health behaviors (rank: 21), clinical care (rank: 2), social and economic factors (rank: 11), and physical environment (rank: 36). Ellis County's overall health factors rank is 10. Areas of concern include Ellis County's smoking rate, adult obesity rate, the food environment index, and the rate of physical inactivity. All health factors variables are presented in Table 6 along with Ellis County specific data, the top U.S. performers, and the state average. The bold italicized categories are the areas identified by the County Health Rankings and Roadmaps as areas to explore (generally where Ellis County ranks very poorly compared to the national benchmark).

**Table 6. Health Factors (Overall Rank 10)**

Category (Rank)	Ellis County	Error Margin	Top U.S. Performers	Oklahoma
<b>Health Behaviors (21)</b>				
<i>Adult Smoking</i>	<i>19%</i>	<i>18-19%</i>	<i>14%</i>	<i>20%</i>
<i>Adult Obesity</i>	<i>32%</i>	<i>24-39%</i>	<i>25%</i>	<i>32%</i>
<i>Food Environment Index</i>	<i>4.7</i>		<i>8.3</i>	<i>6.6</i>
<i>Physical Inactivity</i>	<i>37%</i>	<i>29-46%</i>	<i>20%</i>	<i>31%</i>
Access to Exercise Opportunities	37%		91%	69%
Excessive Drinking	12%	12-13%	12%	13%
Alcohol-Impaired Driving Deaths	25%	12-39%	14%	31%
Sexually Transmitted Infections			134	479
Teen Birth Rate	43	30-59	19	52
<b>Clinical Care (2)</b>				
Uninsured	17%	15-19%	11%	21%
Primary Care Physicians	830:1		1,040:1	1,560:1
Dentists	1,380:1		1,340:1	1,760:1
Mental Health Providers			370:1	270:1
Preventable Hospital Stays	57	39-75	38	63
Diabetic Screening	80%	61-100%	90%	78%
Mammography Screening	55%	36-73%	71%	55%
<b>Social &amp; Economic Factors (11)</b>				
High School Graduation			93%	85%
Some College	60%	50-69%	72%	59%
Unemployment	3.0%		3.5%	4.5%
Children in Poverty	17%	12-22%	13%	22%
Income Inequality	5.3	4.2-6.4	3.7	4.6
Children in Single-Parent Household	23%	14-33%	21%	34%
Social Associations	26.4		22.1	11.7
Violent Crime Rate	177		59	468
<i>Injury Deaths</i>	<i>121</i>	<i>79-179</i>	<i>51</i>	<i>88</i>
<b>Physical Environment (36)</b>				
Air-Pollution- Particulate Matter	10.2		9.5	10.3
Drinking Water Violations	Yes		No	
Severe Housing Problems	9%	6-12%	9%	14%
Driving Alone to Work	83%	79-87%	71%	82%
Long Commute- Driving Alone	32%	26-38%	15%	25%

Source: County Health Rankings & Roadmaps; University of Wisconsin Population Health Institute; Robert Wood Johnson Foundation

The following figure depicts each county's rank by shade. Ellis County's health is more favorable than Woodward, Harper, and Dewey Counties. The ranking is comparable to Ellis County.



In terms of health outcomes, considered, today's health, Ellis County's ranking is 7th in the state. Health outcomes are comprised of two areas: length of life and quality of life. The variables for each of these sections are presented in Table 7.

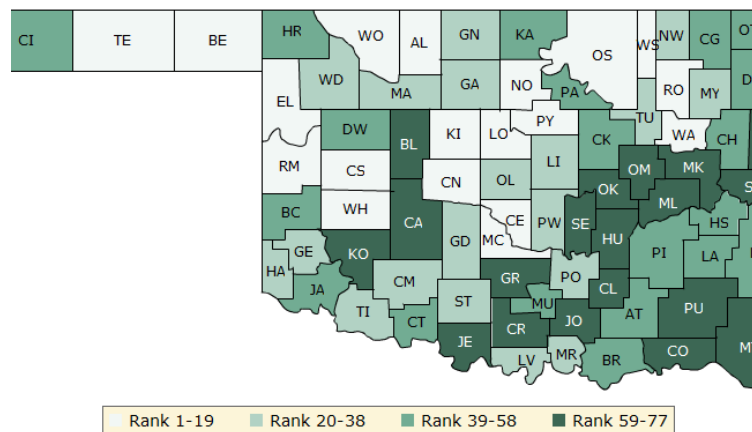
**Table 7. Health Outcomes (Overall Rank 7)**

Category (Rank)	Ellis County	Error Margin	Top U.S. Performers	Oklahoma
<b>Length of Life (18)</b>				
Premature Death	8,600	6,700-10,900	5,200	9,200
<b>Quality of Life (2)</b>				
Poor or Fair Health	18%	17-18%	12%	19%
Poor Physical Health Days	4.1	3.9-4.3	2.9	4.3
Poor Mental Health Days	4.2	4.0-4.3	2.8	4.2
Low Birth Weight	5%		6%	8%

Source: County Health Rankings & Roadmaps; University of Wisconsin Population Health Institute; Robert Wood Johnson Foundation

The following figure shows county health outcomes rankings by shades. In terms of health outcomes, Ellis County is comparable to Roger Mills County and is more favorable than

the other surrounding counties. All meeting materials distributed at this meeting can be found in Appendix D.



At the conclusion of the meeting, community members were once asked to identify what health concerns stand out in the data the presented and their local expertise. The health concerns identified include:

- Heart disease
  - Cardiac CTA is available, Echo, EKG, stress test, holter monitors
  - 2 cardiologists come one per month each
  - Dietician available once per month that can do education
- Cancer screenings
  - Mammography- will be offering again later this calendar year
  - Colonoscopies available
  - EGDs are available
  - Dermatology is available once per month
- Need for local reading of sleep apnea results\
- Respite care for caregivers
- Alzheimer's and dementia patients- did previously contact Alzheimer's Association about community outreach
- Not many Alzheimer's units available, Booker, TX is the closest
- Access to activities and physical fitness opportunities for adults

### **Community Survey Methodology and Results, October 12, 2016- November 9, 2016**

A survey was designed to gauge hospital usage, satisfaction, and community health needs. The survey was available in both paper and web format. The survey link was posted in the newspaper, hospital's website, Facebook page, Chamber of Commerce Website, and emailed and provided by phone to the Newman Physicians' Group. Hard copies were provided at registration and distributed with flu shots and immunizations. A representative from the hospital

went to local businesses and health provider offices to invite community members. That individual also distributed surveys along with the personal invitations.

Surveys were also distributed at the first community meeting on October 12, 2016. Community members in attendance also received a follow-up email with a PDF copy of the survey and the electronic survey link. A copy of the survey form and results can be found in Appendix E. Community members were asked to return their completed surveys to Newman Memorial Hospital.

The survey ran from October 12, 2016 to October 26, 2016. A total of 148 surveys from the Newman Memorial Hospital medical service area were completed. Of the surveys returned, 102 were electronic responses, and 46 were hard copy surveys. The survey results were presented at the November 9, 2016, community meeting.

Table 8 below shows the survey respondent representation by zip code. The largest share of respondents was from the Shattuck (73858) zip code with 88 responses or 59.5 percent of the total. Gage followed with 22 responses, and Fargo had 8 responses

**Table 8. Zip Code of Residence**

Response Category	No.	%
73858- Shattuck	88	59.5%
73843- Gage	22	14.9%
73840- Fargo	8	5.4%
73832- Arnett	7	4.7%
73848- Laverne	7	4.7%
73801- Woodward	4	2.7%
79046- Higgins, TX	2	1.4%
79034- Follett, TX	2	1.4%
73034- Edmond	2	1.4%
79054- Lefors, TX	2	1.4%
73835- Camargo	1	0.7%
73005- Anadarko	1	0.7%
No response	2	1.4%
Total	148	100.0%

The survey focused on several health topics of interest to the community. Highlights of the results include:

### ***Primary Care Physician Visits***

- 77.0% of respondents had used a primary care physician in the Shattuck service area during the past 24 months
- 88.5% of those responded being satisfied
- Only 13 respondents or 8.8% believe there are enough primary care physicians practicing in Shattuck
- 74.3% of the respondents would consider seeing a midlevel provider for their healthcare needs
- 62.8% responded they were able to get an appointment, within 48 hours, with their primary care physician when they needed one

### ***Specialist Visits***

Summary highlights include:

- 58.1% of all respondents report some specialist visit in past 24 months
- Most common specialty visited are displayed in Table 9
- Only 7.5% of specialist visits occurred in Shattuck

**Table 9. Type of Specialist Visits**

Type of Specialist	No.	Percent
<b><i>Top 5 Responses</i></b>		
Cardiologist (5 visits in Shattuck)	25	21.6%
Orthopedist/Orthopedic Surg. (0 visits in Shattuck)	15	12.9%
Urologist (1 visit in Shattuck)	8	6.9%
Dermatologist (3 visits in Shattuck)	7	6.0%
OB/GYN (0 visits in Shattuck)	7	6.0%
All others (2 visits in Shattuck)	<u>54</u>	<u>46.6%</u>
<b>Total</b>	<u>146</u>	<u>100.0%</u>

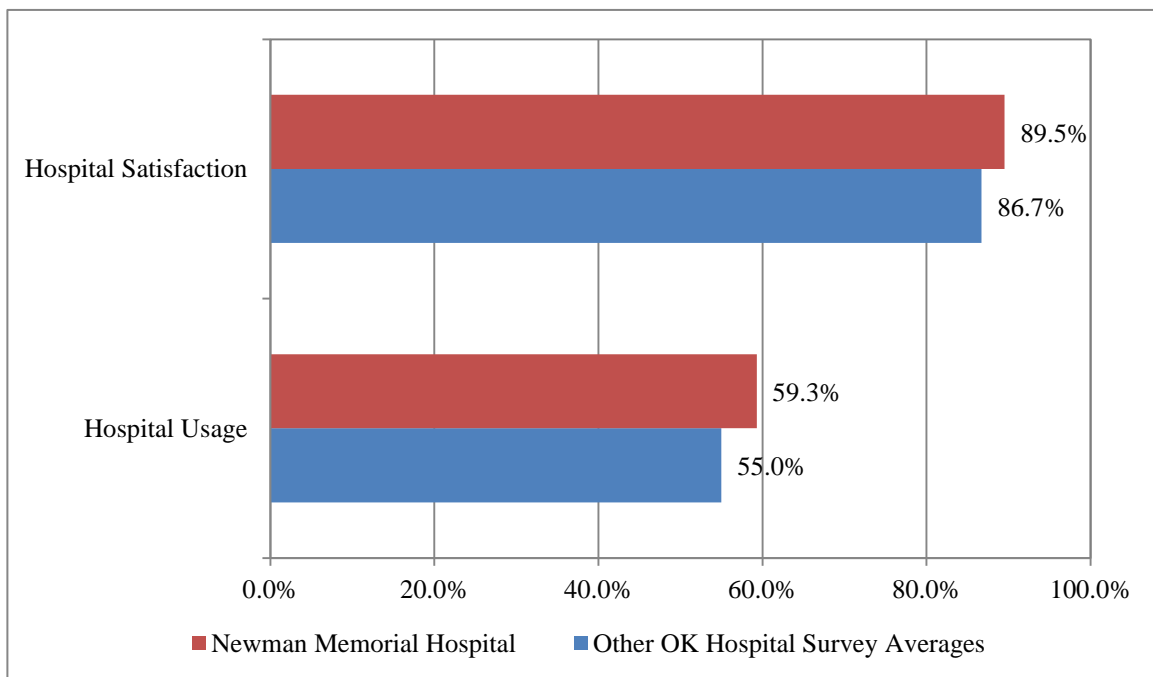
Some respondents answered more than once.

### ***Hospital Usage and Satisfaction***

Survey highlights include:

- 59.3% of survey respondents that have used hospital services in the past 24 months used services at Newman Memorial Hospital
  - AllianceHealth Woodward (11.7%) and Bass Baptist Health Center, Enid (3.7%) followed
  - The most common response for using a hospital other than Newman Memorial Hospital was availability of specialty care (including surgery, labor and delivery) (48.7%) followed by physician referral (19.7%)
  - The usage rate of 59.3% was higher than the state average of 55.0% for usage of other rural Oklahoma hospitals surveyed
- 89.5% of survey respondents were satisfied with the services received at Newman Memorial Hospital
  - This is above the state average for other hospitals (86.7%)
- Most common services used at Newman Memorial Hospital:
  - Laboratory (24.8%)
  - Physician services (22.3%)
  - Diagnostic imaging (19.0%)

**Figure 2. Summary of Hospital Usage and Satisfaction Rates**



### ***Local Healthcare Concerns and Additional Services***

Survey respondents were asked what concerns them most about healthcare in their community. The most common response was Lack of physicians/Difficult to see provider/Keeping providers (28.4%) followed by Losing the hospital/Financial situation of hospital/Losing health services (11.5%). Table 10 displays all responses and the frequencies.

**Table 10. Top Healthcare Concerns in the Shattuck Area**

	No.	%
Lack of physicians/Difficult to see provider/Keeping providers	52	28.4%
Losing the hospital/Financial situation of hospital/Losing health services	21	11.5%
Limited services/Not enough services	15	8.2%
Quality of care/Compassion for patient/Maintaining quality of care	14	7.7%
Lack of specialists	11	6.0%
Lack of surgery	9	4.9%
Lack of OB and labor and delivery	9	4.9%
Emergency care/Urgent care services	3	1.6%
No Concerns/ Receive good care/Don't Know	3	1.6%
Community members leaving Shattuck for care/Attracting community members back	2	1.1%
More male physicians for male population	2	1.1%
Confidentiality	2	1.1%
Patient volume for services	2	1.1%
EMS needs for ground transfers	2	1.1%
More nurses	2	1.1%
Cost of care	1	0.5%
Lack of services for uninsured	1	0.5%
Hospital management	1	0.5%
Physician needs of the elderly population	1	0.5%
Public image of hospital	1	0.5%
No response	29	15.8%
Total	183	100.0%

Survey respondents also had the opportunity to identify what additional services they would like to see offered at Newman Memorial Hospital. The most common response was collectively specialists with 68 responses or 30.4 percent of the total. Surgery followed with 25 responses. Table 11 displays the full listing of responses.



**Table 11. Additional Services Community Members Would Like to See Offered at Newman Memorial Hospital**

Response Category	No.	%
Specialists: OB/GYN (26); Specialists in general (11); Orthopedist (6); Cardiologist (4); Pain Management (4); Dermatologist (3); Otolaryngologist (2); Pediatrician (3); Oncologist (2); Infectious Disease (1); Endocrinologist (1); Neurologist (1); Psychiatry (1); Immunology (1); Rheumatologist (1)	68	30.4%
Surgery	25	11.2%
Mammography	15	6.7%
More services/Reestablish services/All hospital services	12	5.4%
No additional services/Satisfied with what is available/Don't know	12	5.4%
Labor and delivery/Pregnancy services	11	4.9%
Urgent care	10	4.5%
More doctors	7	3.1%
Emergency services	4	1.8%
Physicians that accept: SoonerCare (2); Insure OK (1)	3	1.3%
Mental health	2	0.9%
Diabetic services	2	0.9%
Echo testing	1	0.4%
Bone density	1	0.4%
Home health	1	0.4%
ICU	1	0.4%
Respiratory services	1	0.4%
VA affiliation	1	0.4%
Teaching hospital	1	0.4%
Colonoscopy	1	0.4%
Geriatric services	1	0.4%
Male physicians	1	0.4%
Quality of care	1	0.4%
Children's vascular medicine	1	0.4%
Lunch and Learns	1	0.4%
Pharmacy	1	0.4%
Lab available to the public	1	0.4%
No response	38	17.0%
Total	224	100.0%

### Primary Care Physician Demand Analysis, November 9, 2016

A demand analysis of primary care physicians was completed for the zip codes that comprise the Shattuck primary and secondary medical services areas. This analysis examined average primary care physician visit rates by gender and by age groups. Once age- and gender-specific coefficients were applied, total primary care physician visit numbers were calculated by service area. Table 12 displays potential primary care physician rates by shares of service area.

For example, if 90% of residents in the primary medical services area and 10% of residents in the secondary medical services area utilize services of primary care physicians in the Shattuck medical services area, a total of 15,941 annual visits would occur. This would suggest that the Shattuck medical services area would need 3.8 FTE primary care physicians to meet the needs of their existing population. Table 12 displays the estimated number of visits by share of medical services area.

**Table 12. Primary Care Physician Office Visits Given Usage by Local Residents in the Shattuck, Oklahoma Medical Service Area**

		Usage by Residents of Primary Service Area						
		70%	75%	80%	85%	90%	95%	100%
Usage by Residents of Secondary Service Area	5%	11,482	12,184	12,886	13,588	14,291	14,993	15,695
	10%	13,132	13,835	14,537	15,239	<b>15,941</b>	16,643	17,346
	15%	14,783	15,485	16,187	16,890	<b>17,592</b>	18,294	18,996
	20%	16,434	17,136	17,838	18,540	19,242	19,945	20,647
	25%	18,084	18,786	19,489	20,191	20,893	21,595	22,297
	30%	19,735	20,437	21,139	21,841	22,544	23,246	23,948
	35%	21,385	22,088	22,790	23,492	24,194	24,897	25,599
	40%	23,036	23,738	24,440	25,143	25,845	26,547	27,249
	45%	24,687	25,389	26,091	26,793	27,496	28,198	28,900
	50%	26,337	27,039	27,742	28,444	29,146	29,848	30,551

If 90% primary medical service area and 10 to 15% secondary medical service area, then the usage would be: 15,941 to 17,592 total primary care physician office visits in the Shattuck area for an estimated 3.8 to 4.2 Total Primary Care Physicians.

(Based on 83.7 average weekly primary care physician visits with a 50 week year)

At the conclusion of the meeting, community members were once again asked what stood out to them from the survey results and physician demand analysis as health concerns.

- Mental health: The hospital is looking and working to add detox beds
- Services for uninsured populations

## Community Health Needs Implementation Strategy

During the November 16, 2016, meeting, hospital representatives and community members discussed how these concerns can be addressed. The following lists the concerns along with steps the hospital and community plan to take to remedy the situation.

- Increased health education and outreach- At the conclusion of the first three community meetings community members discussed the needs they see in their respective areas. It was also noted one way to address and alleviate some of the identified health concerns was through increased education.
  - The hospital currently provides educational pieces in the form of public service announcements in the newspaper of prevalent health conditions along with where to go to receive services. Some of these informational topics include diabetic educational pieces, breast cancer awareness, and heart healthy topics. Local nursing staff and the dietician provide input and expertise in these articles. There are plans to continue and grow these pieces. The hospital is planning to create informational articles for Healthy Weight Week (January 16-20, 2017) and heart health for the month of February. Further, heart disease, the importance of cancer screenings, oral health education, aging services and healthy eating were all topics discussed at previous community meetings.
  - The hospital also provides “hands on” training at the local school on handwashing. The local EMS provider leads CPR education at the high school. It was discussed the opportunity to partner with the EMS provider to provide this education and possibly discuss other health-related topics with these individuals.
  - The hospital is partnering with the local health coalition to host the inaugural health careers expo at the hospital. This event is open to 11<sup>th</sup> and 12<sup>th</sup> graders in Ellis County and surrounding communities. The goal of the expo is to introduce students to career opportunities in the field of health care. This will also serve as a great outreach opportunity to provide additional information about existing resources and health information.
  - The hospital is also working to hold a community-wide health expo. This event will have booths with testing (and reading) of results where community members can come in and have their health assessed. This will be a great opportunity for the hospital to provide preventative testing and information for community members who are uninsured, those who do not have time during the workday to visit a physician, and those seeking more information and assistance of managing their health.
  - The resource team will reach out to the Alzheimer’s Association to seek more information and resources available to local residents. The resource team will also reach out to the Oklahoma State Department of Health to see about regional diabetic education instructors.
  - The increased outreach and education will also include marketing of existing services (and new services) provided by the hospital to alleviate travel burdens on local residents. The hospital marketing and community

outreach specialist has plans to make timely announcements of new and re-opened services as they become available.

### **Community Health Needs Assessment Marketing Plan**

The hospital will make the Community Health Needs Assessment Summary and Implementation Strategy Plan available upon request at Newman Memorial Hospital, and a copy will be available to be downloaded from the hospital's website ([www.newmanmemorialhospital.org](http://www.newmanmemorialhospital.org)) and the hospital's Facebook page. This document will also be available on the OSU Center for Rural Health blog site: (<http://osururalhealth.blogspot.com/p/chna.html>).

## Appendix A- Hospital Services/Community Benefits

### Newman Memorial Hospital Hospital Services and Community Benefits



#### **Inpatient Services:**

Acute inpatient observation  
Swing Bed  
Physical therapy  
Laboratory  
Radiology  
    CT  
    MRI  
EKG  
Pharmacy  
Dietary  
Chaplain service  
Telemedicine program  
24 hour hospitalist coverage

#### **Outpatient Services:**

Laboratory  
Surgery  
    Colonoscopy  
    Endoscopy  
Radiology  
    64 slice CT  
    MRI  
    Accredited mammography  
(anticipated this month)  
WIC/Immunization clinic  
Physical therapy  
Emergency services (24 hour availability)  
Cardiopulmonary  
    Ventricular support  
    EKG  
    Stress testing  
    Holter monitoring  
Telemedicine  
Nutrition/Diabetic counseling  
Meals on Wheels

#### **Clinics:**

Dermatology clinic  
Cardiology clinic  
Urology clinic

#### **Community Activities:**

Christmas parade  
Pink Week (Benefiting cancer research)  
    Provided educational material on a variety of different types of cancer  
Samaritan's Purse/Shoebox Ministries  
County wide sports physicals  
Blood drives (3/year)  
4 flu shot clinics (3 at Senior Citizen Centers, 1 in facility)  
Breast Cancer awareness month activities (press releases, educational posters)  
Monthly physician schedule posted around the facility

Facebook posts:

- Breast cancer facts
- Heart disease facts
- Hand washing facts
- Organ donation
- Nutrition facts
- Advertising various specialty clinics
- Advertising mammograms specials
- Announcing various hospital achievements and milestones
- Cold and flu season tips
- Winterize your skin tips

National Wear Red Day- heart disease prevention

National Doctors Day

Hospital Week

Volunteer Appreciation Week

Kiwanis membership (Arnett)

Shattuck Chamber of Commerce membership

Rotary membership (Gage)

Community Coffees- attended weekly by a hospital liaison

Host Community Coffees- 2/year

**Internal Hospital Activities:**

Hospital website/social media

High Plains Technology Practical Nursing student rotations

Medical Student rural rotation preceptorship program

Christmas luncheon

Thanksgiving employee and family luncheon

Volunteer appreciation luncheon

Volunteer Christmas luncheon

Hospital week picnic

Advertisement:

- Phonebooks- Fiest/Yellow book, Pioneer Telephone

- Newspaper ads

- Radio ads- various departments, games of the week sponsorship

- Flyers- blood drives, flu shots, etc.

Governance- Board of Directors, Authority Board, Strategic Planning Committee, Managers' weekly Monday Morning Meetings

## **Appendix B Community Meeting Attendees**

### **Shattuck Community Health Needs Assessment Meeting 1: CHNA Process Overview and Economic Impact Presentation**

**12-Oct-16**

<b>First Name</b>	<b>Last Name</b>	<b>Title</b>	<b>Organization</b>
Angela	Shuman	RN	Newman Memorial Hospital
Megan	Morland	RN	Newman Memorial Hospital
Van	Hurst		Ellis County Health Coalition
Donna	Poppe	HIM File Clerk	Newman Memorial Hospital
Christina	Franks	Business Office	Newman Memorial Hospital
Joey	Burgtorf	Marketing	Newman Memorial Hospital
LR	Burgtorf	IT	Newman Memorial Hospital
Elizabeth	Speligene	RCM	Newman Memorial Hospital
Shane	Clem	Facilities Manager	Newman Memorial Hospital
Jenson	Pemaflor	MT	Newman Memorial Hospital
Marcie	Bozath	HIM-ROI	Newman Memorial Hospital
Mayra	Estrada	Quality Control	Newman Memorial Hospital
Jean	Bartow	RN	Newman Memorial Hospital
Deandra	Jones	LPN	Newman Memorial Hospital
Dianne	Coleman	LPN	Newman Memorial Hospital
Mike	Wray	Laboratory Operations Manager	Newman Memorial Hospital
Lynda	Allen	Accounting	Newman Memorial Hospital
Jessica	Kellen		Community Member
Emily	Moore		Community Member
Brad	Bunch	RN	Newman Memorial Hospital

## Shattuck Community Health Needs Assessment Meeting 2: Health Indicators and Outcomes Presentation

26-Oct-16

First Name	Last Name	Title	Organization
Sarah	Tapia	Infection Control Nurse	Newman Memorial Hospital
Donna	Poppe	HIM File Clerk	Newman Memorial Hospital
Glenda	Blosser	CPS	NCBH RPC
Rhonda	Hayes	EA	Newman Memorial Hospital
Jean	Bartow	RN	Newman Memorial Hospital
Elizabeth	Holt	RCM, HIM	Newman Memorial Hospital
LR	Burgtorf	IT	Newman Memorial Hospital
Lynda	Allen	Accounting	Newman Memorial Hospital
Joey	Burgtorf	Marketing	Newman Memorial Hospital
Robert	Neal	IT	Newman Memorial Hospital
Margaret	Wiederstein		Community Member
Shane	Clem	Facilities Manager	Newman Memorial Hospital
Toni	Mengus	Materials	Newman Memorial Hospital
Mayra	Estrada	Quality Control	Newman Memorial Hospital
Van	Hurst		Ellis County Health Coalition
Garrett	Olive	Dentist	Kristen Burris DDS
Leaha	Nels	Dentist	Kristen Burris DDS



## **Shattuck Community Health Needs Assessment Meeting 3: Survey Results and Primary Care Physician Demand Analysis Presentation**

**2-Nov-16**

<b>First Name</b>	<b>Last Name</b>	<b>Title</b>	<b>Organization</b>
Dr. Kylene	Rehder	Professor, LCSW	NWOSU
Rhonda	Hayes	EA	Newman Memorial Hospital
Brad	Bunch	RN, Surgery Manager	Newman Memorial Hospital
Jean	Bartow	RN	Newman Memorial Hospital
LR	Burgtorf	IT	Newman Memorial Hospital
Joey	Burgtorf	Marketing	Newman Memorial Hospital
Glenna	Catoe	Advocate	NWDCS
Mayra	Estrada	Quality Control	Newman Memorial Hospital
Elizabeth	Holt	RCM, HIM	Newman Memorial Hospital
Rikki	Stills	BO	Newman Memorial Hospital
Sarah	Tapia	Infection Control Nurse	Newman Memorial Hospital
Shane	Clem	Facilities Manager	Newman Memorial Hospital
Toni	Mengus	Materials	Newman Memorial Hospital
Lynda	Allen	Accounting	Newman Memorial Hospital
Margaret	Wiederstein		Community Member
Jenson	Pemaflor	MT	Newman Memorial Hospital
Rhonda	Wayland	District #2 Secretary-EMT	Ellis County Commissioners-EMS

## **Shattuck Community Health Needs Assessment Meeting 4: Health Concern Prioritization and Discussion of Implementation**

**16-Nov-16**

<b>First Name</b>	<b>Last Name</b>	<b>Title</b>	<b>Organization</b>
Rhonda	Hayes	EA	Newman Memorial Hospital
Jean	Bartow	RN	Newman Memorial Hospital
LR	Burgtorf	IT	Newman Memorial Hospital
Joey	Burgtorf	Marketing	Newman Memorial Hospital
Mayra	Estrada	Quality Control	Newman Memorial Hospital
Sarah	Tapia	Infection Control Nurse	Newman Memorial Hospital
Shane	Clem	Facilities Manager	Newman Memorial Hospital
Margaret	Wiederstein		Community Member
Toni	Mengus	Materials	Newman Memorial Hospital
Elizabeth	Holt	RCM, HIM	Newman Memorial Hospital
Paula	Wilkerson	Clinic Manager	Newman Healthcare
Van	Hurst	Chairman	Ellis County Health Coalition
Catherine	Ewing	RN DON	Newman Memorial Hospital
Donna	Poppe	HIM	Newman Memorial Hospital
Robert	Neal	IT	Newman Memorial Hospital

## Appendix C- Meeting 1 Materials, October 12, 2016

### The Economic and Demographic Analysis of the Newman Memorial Hospital Medical Service Area

#### *As part of the Community Health Needs Assessment*

#### Economic Data

2014 Per Capita Income <sup>1</sup>	\$68,053 (1st highest in state)
Employment (August 2016, preliminary) <sup>2</sup>	2,193 (-6.0% from 2015)
Unemployment (August 2016, preliminary) <sup>2</sup>	85 (-9.6% from 2015)
Unemployment rate (August 2016, preliminary) <sup>2</sup>	3.7% (10th lowest in state)
2014 Poverty rate <sup>3</sup>	12.0% (9th lowest in state)
2014 Child poverty rate <sup>3</sup>	16.6% (12th lowest in state)
2014 Transfer Payments <sup>1</sup>	\$26,245,000 (9.3% of total personal income, 1st lowest in state)
2014 Medical Benefits as a share of Transfer Payments <sup>1</sup>	35.4% (2nd lowest in state)

<sup>1</sup>Bureau of Economic Analysis, Regional Data, 2014, <sup>2</sup>Bureau of Labor Statistics 2014-2015, <sup>3</sup>U.S. Census Bureau, Small Area Income and Poverty, 2014

#### Education Data

At Least High School Diploma <sup>1</sup>	89.5% (9th highest in state)
Some College <sup>1</sup>	53.8% (16th highest in state)
At Least Bachelor's Degree <sup>1</sup>	24.9% (11th highest in state)
2013-2014 Free and Reduced Lunch Eligible <sup>2</sup>	50.3% (8th lowest in state)

<sup>1</sup>U.S. Census Bureau, American Community Survey, 2010-2014, <sup>2</sup>National Center for Education Statistics, 2013-2014 (Data available for only 70 counties in OK).

#### Payer Source Data

2014 Uninsured Rate (under 65) <sup>1</sup>	14.0% (3rd lowest in state)
2014 Uninsured Rate (under 19) <sup>1</sup>	10.1% (27th lowest in state)
2013 Medicare share of total population <sup>2</sup>	20.4% (49th lowest in state)
2015 Medicaid share of total population <sup>3</sup>	16.0% (4th lowest in state)

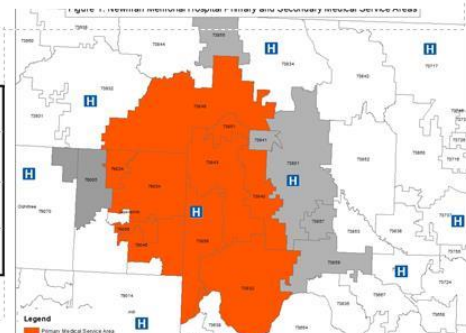
<sup>1</sup> U.S. Census Bureau, Small Area Health Insurance Estimates, 2014, <sup>2</sup> Centers for Medicare & Medicaid Services, Medicare Aged and Disabled by State and County, 2013

<sup>3</sup> Oklahoma Health Care Authority, Total Enrollment by County, 2015

#### Population (2010-2014)

Ellis County	4,113 (-0.9% from 2010)
Primary Medical Service Area	8,061 (0.8% from 2010)
Secondary Medical Service Area	20,701 (0.3% from 2010)
Oklahoma	3,818,851 (1.8% from 2010)

U.S. Census Bureau, 2010-2014 American Community Survey 2010 Decennial Census



**Percent of Total Population by Age Group for Newman Memorial Hospital Medical Service Areas, Ellis County and Oklahoma**

Age Groups	Primary Medical Service Area	Secondary Medical Service Area	Ellis County	Oklahoma
<b>10-14 ACS</b>				
0-14	20.7%	21.3%	19.8%	20.6%
15-19	6.6%	6.9%	6.0%	6.8%
20-24	4.3%	6.5%	4.5%	7.4%
25-44	22.4%	27.2%	20.7%	25.8%
45-64	27.6%	24.8%	28.9%	25.4%
65+	18.4%	13.3%	20.2%	14.0%
Totals	100.0%	100.0%	100.0%	100.0%
Total Population	8,061	20,701	4,113	3,818,851

SOURCE: U.S. Census Bureau, 2010-2014 American Community Survey

**Percent of Total Population by Race and Ethnicity for Newman Memorial Hospital Medical Service Areas, Ellis County and Oklahoma**

Race/Ethnic Groups	Primary Medical Service Area	Secondary Medical Service Area	Ellis County	Oklahoma
<b>10-14 ACS</b>				
White	93.2%	89.7%	94.2%	73.3%
Black	0.2%	1.1%	0.2%	7.3%
Native American <sup>1</sup>	0.8%	2.0%	0.7%	7.2%
Other <sup>2</sup>	1.6%	2.7%	0.9%	4.5%
Two or more Races <sup>3</sup>	4.2%	4.5%	4.0%	7.8%
Hispanic Origin <sup>4</sup>	9.9%	14.2%	7.0%	9.4%
Total Population	8,061	20,701	4,113	3,818,851

SOURCE: U.S. Census Bureau, 2010-2014 American Community Survey

For additional information, please contact:  
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 Oklahoma Office of Rural Health  
 Phone: 405.840.6500

*This project is/was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number H54RH00058 and title: Medicare Rural Hospital Flexibility Grant Program for \$565,040, 0% financed with nongovernmental sources. This information of content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.*





# Newman Memorial Hospital Economic Impact



**Healthcare, especially a hospital, plays a vital role in local economies.**

Newman Memorial Hospital **directly** employs 59 people with an annual payroll of over **\$2.9 million** including benefits

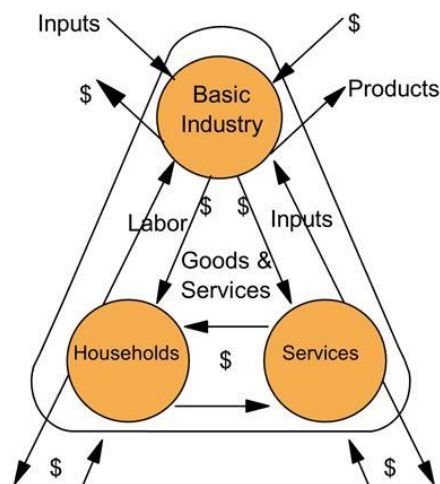
- These employees and income create an additional 17 jobs and nearly \$500,000 in income as they interact with other sectors of the local economy
- **Total impacts= 76 jobs and nearly \$3.4 million**
- Other segments of the healthcare sector (Doctors, Nursing Homes, Pharmacies, EMS, etc.) provide another **109 jobs** and an additional **\$5.5 million** in wages
- Their interactions and transactions within the local economy including the hospital's impact create:
- **Total health sector impacts= 221 jobs and \$9.8 million**
- Over **\$3 million** in retail sales generated from income received by healthcare sector employees

## Healthcare and Your Local Economy:

- Attracts retirees and families
- Appeals to businesses looking to establish and/or relocate
- High-quality healthcare services and infrastructure foster community development
- Positive impact on retail sales of local economy

## Consider what could be lost without the hospital:

- Pharmacies
- Physicians/Specialists
- Potential Retail Sales



Source: Doeksen, G.A., T. Johnson, and C. Willoughby. 1997. Measuring the Economic Importance of the Health Sector on a Local Economy: A Brief Literature Review and Procedures to Measure Local Impacts

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Phone: 405.840.6500



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## Appendix D- Meeting 2 Materials, October 26, 2016

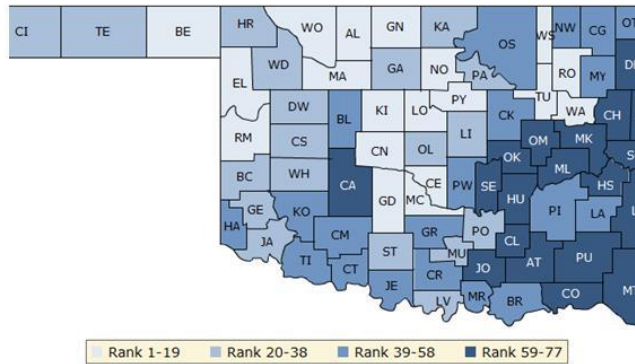
### Health Indicators and Outcomes for Ellis County

*As part of the Community Health Needs Assessment*

**Table 1. Health Factors (Overall Rank 10)**

Category (Rank)	Ellis County	Error Margin	Top U.S. Performers	Oklahoma
<b>Health Behaviors (21)</b>				
<i>Adult Smoking</i>	19%	18-19%	14%	20%
<i>Adult Obesity</i>	32%	24-39%	25%	32%
<i>Food Environment Index</i>	4.7		8.3	6.6
<i>Physical Inactivity</i>	37%	29-46%	20%	31%
Access to Exercise Opportunities	37%		91%	69%
Excessive Drinking	12%	12-13%	12%	13%
Alcohol-Impaired Driving Deaths	25%	12-39%	14%	31%
Sexually Transmitted Infections			134	479
Teen Birth Rate	43	30-59	19	52
<b>Clinical Care (2)</b>				
Uninsured	17%	15-19%	11%	21%
Primary Care Physicians	830:1		1,040:1	1,560:1
Dentists	1,380:1		1,340:1	1,760:1
Mental Health Providers			370:1	270:1
Preventable Hospital Stays	57	39-75	38	63
Diabetic Screening	80%	61-100%	90%	78%
Mammography Screening	55%	36-73%	71%	55%
<b>Social &amp; Economic Factors (11)</b>				
High School Graduation			93%	85%
Some College	60%	50-69%	72%	59%
Unemployment	3.0%		3.5%	4.5%
Children in Poverty	17%	12-22%	13%	22%
Income Inequality	5.3	4.2-6.4	3.7	4.6
Children in Single-Parent Household	23%	14-33%	21%	34%
Social Associations	26.4		22.1	11.7
Violent Crime Rate	177		59	468
<i>Injury Deaths</i>	121	79-179	51	88
<b>Physical Environment (36)</b>				
Air-Pollution- Particulate Matter	10.2		9.5	10.3
Drinking Water Violations	Yes		No	
Severe Housing Problems	9%	6-12%	9%	14%
Driving Alone to Work	83%	79-87%	71%	82%
Long Commute- Driving Alone	32%	26-38%	15%	25%

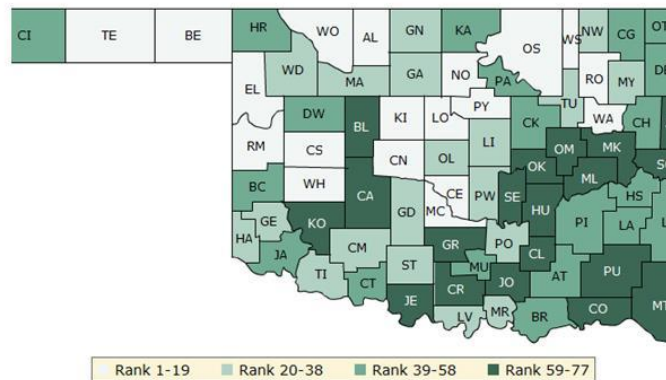
Source: County Health Rankings & Roadmaps; University of Wisconsin Population Health Institute; Robert Wood Johnson Foundation



**Table 2. Health Outcomes (Overall Rank 7)**

Category (Rank)	Ellis County	Error Margin	Top U.S. Performers	Oklahoma
<b>Length of Life (18)</b>				
Premature Death	8,600	6,700-10,900	5,200	9,200
<b>Quality of Life (2)</b>				
Poor or Fair Health	18%	17-18%	12%	19%
Poor Physical Health Days	4.1	3.9-4.3	2.9	4.3
Poor Mental Health Days	4.2	4.0-4.3	2.8	4.2
Low Birth Weight	5%		6%	8%

Source: County Health Rankings & Roadmaps; University of Wisconsin Population Health Institute; Robert Wood Johnson Foundation



For additional information, please contact  
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 Oklahoma Office of Rural Health  
 Phone: 405.840.6500



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## ELLIS COUNTY

### Mortality and Leading Causes of Death

- Ellis County ranked 27<sup>th</sup> in the state for total mortality (age-adjusted) with a rate that was 18% higher than the national rate.
- The leading causes of death in Ellis County were cancer, heart disease, and unintentional injury.
- Ellis County had the 3<sup>rd</sup> lowest rate of deaths due to heart disease in the state.
- Ellis County had the 2<sup>nd</sup> worst rate of deaths due to stroke in the state, which was 70% higher than the national rate.

### Disease Rates

- Ellis County ranked 40<sup>th</sup> in the state for diabetes prevalence, which was 26% higher than the national average.

### Risk Factors, Behaviors and Socioeconomic Factors

- Approximately 4 of 5 adults (83%) had a usual health care provider ranking Ellis County as 4<sup>th</sup> in the state.
- Ellis County had the 3<sup>rd</sup> worst percentage of children under 3 years of age that had completed their primary immunization series.
- 1 in 8 people in Ellis County lived in poverty (13%).
- 1 in 6 adults reported 3+ days with limited activity in the past month (17%).
- Nearly 1 in 4 adults reported 4+ days of poor physical health (24%) and approximately 1 in 5 reported 4+ days of poor mental health (22%) in the previous month.

### Changes from Previous Year

- The rate of deaths due to cancer worsened by 36% from the previous year.
- The percentage of uninsured adults improved by 21%.

	PREVIOUS	CURRENT	GRADE
<b>MORTALITY</b>			
INFANT (RATE PER 1,000)	*	*	
TOTAL (RATE PER 100,000)	850.3	879.7	F
<b>LEADING CAUSES OF DEATH</b> (RATE PER 100,000)			
HEART DISEASE	210.2	170.1	C
MALIGNANT NEOPLASM (CANCER)	152.8	207.2	F
CEREBROVASCULAR DISEASE (STROKE)	41.2	65.4	F
CHRONIC LOWER RESPIRATORY DISEASE	105.5	50.7	D
UNINTENTIONAL INJURY	92.2	99.1	F
DIABETES	42.0	*	
INFLUENZA/PNEUMONIA	*	*	
ALZHEIMER'S DISEASE	*	29.8	D
NEPHRITIS (KIDNEY DISEASE)	*	*	
SUICIDES	*	*	
<b>DISEASE RATES</b>			
DIABETES PREVALENCE	11.8	12.2%	F
CURRENT ASTHMA PREVALENCE	8.2	8.7%	C
CANCER INCIDENCE (RATE PER 100,000)	435.9	493.2	D
<b>RISK FACTORS &amp; BEHAVIORS</b>			
MINIMAL FRUIT CONSUMPTION	NA	50.1%	F
MINIMAL VEGETABLE CONSUMPTION	NA	25.7%	D
NO PHYSICAL ACTIVITY	33.2	30.2%	F
CURRENT SMOKING PREVALENCE	24.3	21.4%	C
OBESITY	31.0	32.0%	D
IMMUNIZATIONS < 3 YEARS	60.9	60.3%	F
SENIORS INFLUENZA VACCINATION	64.6	70.2%	A
SENIORS PNEUMONIA VACCINATION	75.3	77.7%	A
LIMITED ACTIVITY DAYS	15.8	17.1%	C
POOR MENTAL HEALTH DAYS	23.1	21.6%	B
POOR PHYSICAL HEALTH DAYS	23.6	24.2%	D
GOOD OR BETTER HEALTH RATING	77.7	79.0%	D
TEEN FERTILITY (RATE PER 1,000)	20.2	*	
FIRST TRIMESTER PRENATAL CARE	60.3	61.1%	F
LOW BIRTH WEIGHT	5.4	*	
ADULT DENTAL VISITS	56.5	58.3%	F
USUAL SOURCE OF CARE	82.2	82.6%	B
OCCUPATIONAL FATALITIES (RATE PER 100,000 WORKERS)	*	*	
PREVENTABLE HOSPITALIZATIONS (RATE PER 100,000)	2161.4	2287.9	F
<b>SOCIOECONOMIC FACTORS</b>			
NO INSURANCE COVERAGE	17.0	13.5%	B
POVERTY	12.4	12.8%	B

\* Denotes <5 events in mortality fields and <5 or <50 in the sample population for BRFSS data, which result in unstable rates.



## Appendix E- Survey Form and Meeting 3 Materials, November 2, 2016

### Newman Memorial Hospital Local Health Services Survey

Please return completed survey by October 26, 2016



The zip code of my residence is: \_\_\_\_\_

What is your current age: \_\_\_\_\_ What is your gender: \_\_\_\_\_

1. Has your household used the services of a hospital in the past 24 months?  
☐ Yes (*Go to Q2*)      ☐ No (*Skip to Q7*)      ☐ Don't know (*Skip to Q7*)
2. At which hospital(s) were services received? (*please check/list all that apply*)  
☐ Newman Memorial Hospital (*Skip to Q4*)      ☐ Other (*Please specify Hospital and City, then go to Q3*)

If you responded in Q2 that your household received care at a hospital other than Newman Memorial Hospital,

3. why did you or your family member choose that hospital? (*Please answer then skip to Q7*)  
☐ Physician referral      ☐ Quality of care/Lack of confidence  
☐ Closer, more convenient location      ☐ Availability of specialty care  
☐ Insurance reasons      ☐ Other (*Please list below*)

If you responded in Q2 that your household received care at Newman Memorial Hospital, what hospital

4. service(s) were used?  
☐ Diagnostic imaging (X-ray, CT, Ultrasound)      ☐ Hospital Inpatient  
☐ Laboratory      ☐ Skilled nursing (swing bed)  
☐ Outpatient infusion/Shots      ☐ Emergency room (ER)  
☐ Physician services      ☐ Urgent care  
☐ Physical or speech therapy      ☐ Other (*Please list below*)

5. How satisfied was your household with the services you received at Newman Memorial Hospital?  
☐ Satisfied      ☐ Dissatisfied      ☐ Don't know

6. Why were you satisfied/dissatisfied with services received at Newman Memorial Hospital?

7. Has your household been to a specialist in the past 24 months?  
☐ Yes      ☐ No (*Skip to Q11*)      ☐ Don't know (*Skip to Q11*)

What type of specialist has your household been to in the past 24 months and in which city were they located?

Type of Specialist	City

9. Did the specialist request further testing, laboratory work and/or x-rays?  
☐ Yes      ☐ No      ☐ Don't know

10. If yes, in which city were the tests or laboratory work performed?

*Continue on reverse side...*

11. Do you use a primary care (family doctor) for most of your routine health care?  
☐ Yes *(Skip to Q13)*      ☐ No *(Go to Q12)*      ☐ Don't know *(Skip to Q13)*
12. If no, then what kind of medical provider do you use for routine care?  
☐ Tribal Health Center      ☐ Emergency Room/Hospital  
☐ Income Based Health Center      ☐ Specialist  
☐ Mid-Level Clinic (Nurse Practitioner or PA)      ☐ Urgent care  
☐ Health Department      ☐ Other *(Please list below)*
- 

13. Has your household been to a primary care (family) doctor in the Shattuck area?  
☐ Yes *(Go to Q14)*      ☐ No *(Skip to Q16)*      ☐ Don't know *(Skip to Q16)*
14. How satisfied was your household with the quality of care received in the Shattuck area?  
☐ Satisfied      ☐ Dissatisfied      ☐ Don't know
15. Why were you satisfied/dissatisfied with the care received in the Shattuck area?
- 

16. Do you think there are enough primary care (family) doctors practicing in the Shattuck area?  
☐ Yes      ☐ No      ☐ Don't know
17. Would you consider seeing a midlevel provider (nurse practitioner or PA) for your routine healthcare needs?  
☐ Yes      ☐ No      ☐ Don't know
- Are you able to get an appointment, within 48 hours, with your primary care (family) doctor when you need
18. one?  
☐ Yes      ☐ No      ☐ Don't know
19. What concerns you most about health care in the Shattuck area?
- 

20. What other services would you like to see offered at Newman Memorial Hospital?
- 

- Over the past 12 months, has your household received immunizations, WIC, or any public health related
21. services through Newman Memorial Hospital?  
☐ Yes      ☐ No      ☐ Don't know

- Would you consider utilizing telemedicine services, live face to face visit with a physician through a secure
22. internet connection, for your healthcare needs?  
☐ Yes      ☐ No      ☐ Don't know

23. How are you currently informed of community events? *(Please check all that apply with the outlet)*

- | <u>Outlet</u>  | <u>Source</u> |
|--|---------------|
| <input type="checkbox"/> Newspaper                           | _____         |
| <input type="checkbox"/> Radio                               | _____         |
| <input type="checkbox"/> Email                               | _____         |
| <input type="checkbox"/> Website                             | _____         |
| <input type="checkbox"/> Social Media (Facebook and Twitter) | _____         |
| <input type="checkbox"/> Other                               | _____         |

24. How would you prefer to be notified of community events?  
*(Please rank your choices with 1=most preferred and 5=least preferred)*
- |                 |               |                    |
|-----------------|---------------|--------------------|
| _____ Newspaper | _____ Email   | _____ Social Media |
| _____ Radio     | _____ Website |                    |

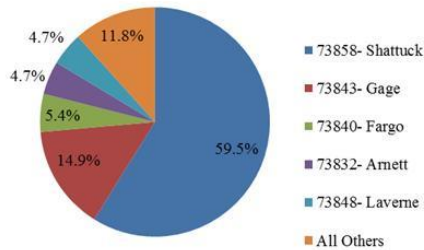
*Please mail completed survey to:*  
Newman Memorial Hospital  
905 S Main St.  
Shattuck, OK 73858

*Or, return to hospital  
administration*

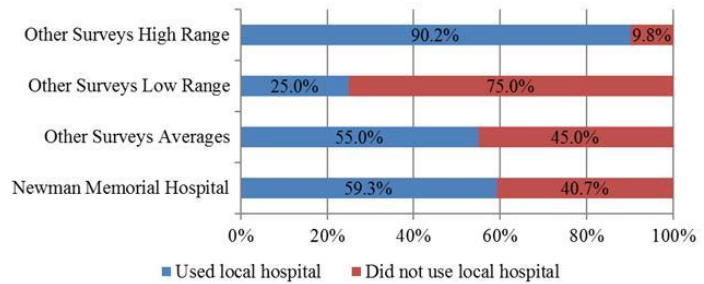
# Newman Memorial Hospital Community Survey Results

## *As part of the Community Health Needs Assessment*

### Zip Code of Residence, Top 5 Responses



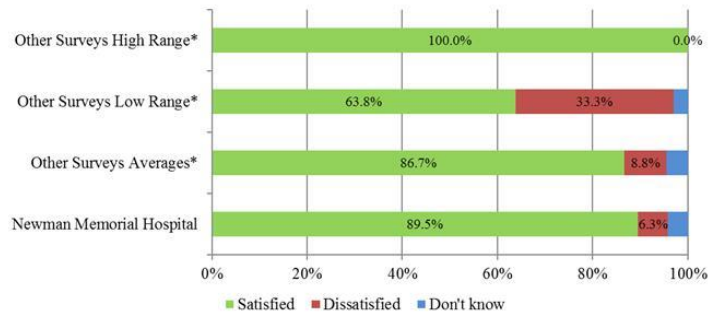
### Hospital Utilization Comparison



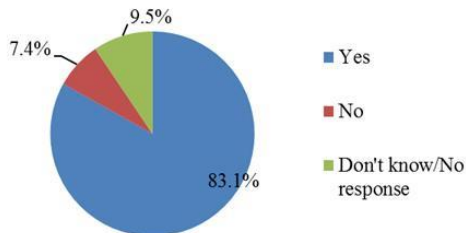
### Type of Specialist Visits

Specialist	No.	Percent
<b>Top 5 Responses</b>		
Cardiologist (5 visits in Shattuck)	25	21.6%
Orthopedist/Orthopedic Surg. (0 visits in Shattuck)	15	12.9%
Urologist (1 visit in Shattuck)	8	6.9%
Dermatologist (3 visits in Shattuck)	7	6.0%
OB/GYN (0 visits in Shattuck)	7	6.0%
All others (2 visits in Shattuck)	54	46.6%
Total	146	100.0%

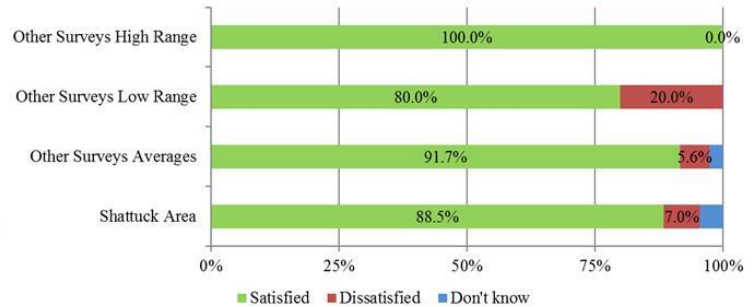
### Satisfaction with Newman Memorial Hospital



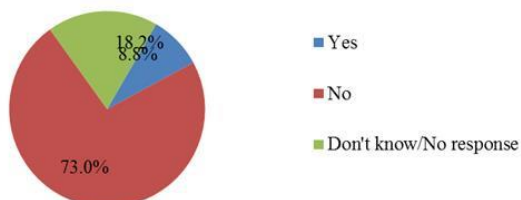
### Use Family Doctor for Routine Health Care



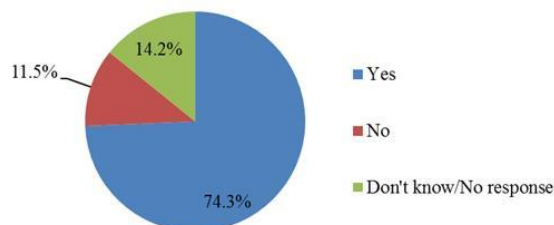
### Satisfaction with Shattuck Area Primary Care Doctor



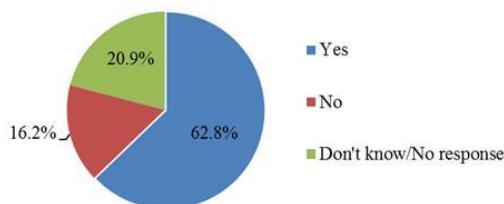
Do you think there are enough primary care doctors practicing in the Shattuck area?



Would you see a midlevel provider for routine healthcare needs?



Are you able to get an appointment, within 48 hours, with your primary care doctor when needed?



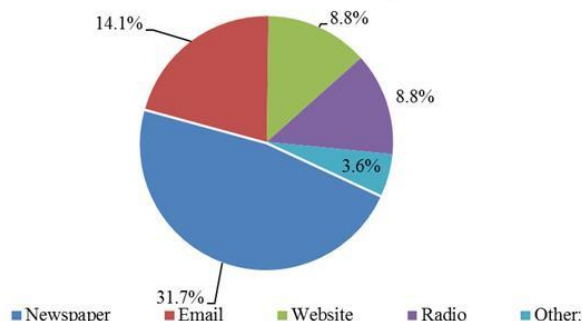
#### Healthcare concerns- Top 3 Responses

Concern	No.	Percent
Lack of physicians/Difficult to see provider/Keeping providers	52	28.4%
Losing the hospital/Financial situation of hospital/Losing health services	21	11.5%
Limited services/Not enough services	15	8.2%
All others	95	51.9
Total	183	100.0%

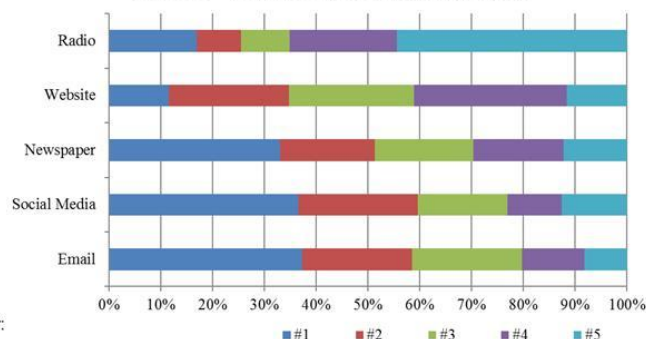
#### Additional Services to Offer- Top 3 Responses

Services	No.	Percent
Specialists: OB/GYN (26); Specialists in general (11); Orthopedist (6); Cardiologist (4); Pain Management (4); Dermatologist (3); Otolaryngologist (2); Pediatrician (3); Oncologist (2); Infectious Disease (1); Endocrinologist (1); Neurologist (1); Psychiatry (1); Immunology (1); Rheumatologist (1)	68	30.4%
Surgery	25	11.2%
Mammography	15	6.7%
All others	108	51.8%
Total	224	100.0%

#### Outlets Used for Information about Community Events



#### Preference of Notification of Community Events



For additional information, please contact  
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 Corie Kaiser, Director, [corie.kaiser@okstate.edu](mailto:corie.kaiser@okstate.edu)  
 Oklahoma Office of Rural Health  
 Phone: 405.945.8609

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## Primary Care Physician Demand Analysis for the Shattuck Medical Service Area

*As part of the Community Health Needs Assessment*

**Table 1. Newman Memorial Hospital Medical Service Areas**

Zip Code	City	2010-2014 ACS Population
<i>Primary Medical Service Area</i>		
73858	Shattuck	1,572
73851	May	101
73840	Fargo	801
73843	Gage	971
73832	Arnett	886
73848	Laverne	2,004
79034	Follett, TX	712
79046	Higgins, TX	526
79056	Lipscomb, TX	62
79024	Darrouzett, TX	426
<b>Totals</b>		<b>8,061</b>
<i>Secondary Medical Service Area</i>		
73855	Rosston	80
73841	Fort Supply	1,436
73859	Vici	1,646
73857	Sharon	672
73801	Woodward	15,181
79005	Booker, TX	1,686
<b>Totals</b>		<b>20,701</b>

SOURCE: Population data from the U.S. Bureau of Census, 2010-2014 American Community Survey

**Table 2a. Annual Primary Care Physician Office Visits Generated in the Shattuck, Oklahoma, Medical Service Areas**

PRIMARY MEDICAL SERVICE AREA							
	Male			Female			
	10-14	Visit		10-14	Visit		Total
Age	Population	Rate <sup>[3]</sup>	Visits	Population	Rate <sup>[3]</sup>	Visits	Visits
Under 15	883	2.5	2,208	784	2.3	1,803	4,011
15-24	477	1.2	572	402	2.1	844	1,417
25-44	959	1.5	1,439	847	3.1	2,626	4,064
45-64	1,125	2.9	3,263	1,102	3.7	4,077	7,340
65-74	378	5.1	1,928	413	5.6	2,313	4,241
75+	299	6.9	2,063	392	6.6	2,587	4,650
Total	4,121		11,472	3,940		14,251	25,722

*Primary Medical Service Area - Local Primary Care Physician office visits per year: 14,044*

**Table 2b. Annual Primary Care Physician Office Visits Generated in the Shattuck, Oklahoma, Medical Service Areas**

SECONDARY MEDICAL SERVICE AREA							
	Male			Female			
	10-14	Visit		10-14	Visit		Total
Age	Population	Rate <sup>[3]</sup>	Visits	Population	Rate <sup>[3]</sup>	Visits	Visits
Under 15	2,253	2.5	5,633	2,154	2.3	4,954	10,587
15-24	1,630	1.2	1,956	1,153	2.1	2,421	4,377
25-44	3,218	1.5	4,827	2,409	3.1	7,468	12,295
45-64	2,741	2.9	7,949	2,390	3.7	8,843	16,792
65-74	733	5.1	3,738	798	5.6	4,469	8,207
75+	464	6.9	3,202	758	6.6	5,003	8,204
Total	11,039		27,304	9,662		33,158	60,462

*Secondary Medical Service Area - Local Primary Care Physician office visits per year: 33,012*

Source: U. S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center of Health Statistics, "National Ambulatory Medical Care Survey: 2012 Summary.

**Table 3. Primary Care Physician Office Visits Given Usage by Local Residents in the Shattuck, Oklahoma Medical Service Area**

Usage by Residents of Primary Service Area								
Usage by Residents of Secondary Service Area		70%	75%	80%	85%	90%	95%	100%
	5%	11,482	12,184	12,886	13,588	14,291	14,993	15,695
	10%	13,132	13,835	14,537	15,239	<b>15,941</b>	16,643	17,346
	15%	14,783	15,485	16,187	16,890	<b>17,592</b>	18,294	18,996
	20%	16,434	17,136	17,838	18,540	19,242	19,945	20,647
	25%	18,084	18,786	19,489	20,191	20,893	21,595	22,297
	30%	19,735	20,437	21,139	21,841	22,544	23,246	23,948
	35%	21,385	22,088	22,790	23,492	24,194	24,897	25,599
	40%	23,036	23,738	24,440	25,143	25,845	26,547	27,249
	45%	24,687	25,389	26,091	26,793	27,496	28,198	28,900
	50%	26,337	27,039	27,742	28,444	29,146	29,848	30,551

If 90% primary medical service area and 10 to 15% secondary medical service area, then the usage would be: 15,941 to 17,592 total primary care physician office visits in the Shattuck area for an estimated 3.8 to 4.2 Total Primary Care Physicians.

(Based on 83.7 average weekly primary care physician visits with a 50 week year)

For additional information, please contact  
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Corie Kaiser, Director, corie.kaiser@okstate.edu  
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