



# 2022

## COMMUNITY HEALTH NEEDS ASSESSMENT

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**White Sulphur Springs, Montana**

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



**Mountainview  
Medical Center**



**MONTANA**  
STATE UNIVERSITY

Office of Rural Health  
Area Health  
Education Center

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# INTRODUCTION

# Introduction

Mountainview Medical Center is a 25-bed nonprofit Critical Access Hospital (CAH) and rural health clinic based in White Sulphur Springs, Montana. Mountainview Medical Center serves Meagher County which is 2,395 square miles and provides medical services to a population of approximately 1,850 people. Mountainview Medical Center is the only hospital in Meagher County and houses both clinic and hospital services in the same facility. Mountainview Medical Center's primary service area includes the communities of White Sulphur Springs, Martinsdale, Checkerboard, Lennep, and Ringling; with most of the County's populated communities located along US 89 or US 12. Meagher County has a low population density and is considered a Frontier (six or less people per square mile) by the US Department of Health and Human Services. For further demographic, socioeconomic, and other related county and state data, please see Appendix C to review the Secondary Data Analysis.



In addition to their clinic appointments, Mountainview Medical Center offers: 24/7 emergency room services, acute and long-term care, swing bed services, telemedicine, and a foot and eye clinic.



**Mountainview  
Medical Center**

**Mission:** To provide quality healthcare to our community.

**Vision:** To be the best Critical Access Hospital facility in Montana while being the cornerstone of our community.

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

In January 2022, Mountainview Medical Center's service area was surveyed about its healthcare system. This report shows the results of the survey in both narrative and chart formats. A copy of the survey instrument is included at the end of this report (Appendix E). Readers are invited to familiarize themselves with the survey instrument and the subsequent findings. The narrative report touches on the highlights while the charts present data for virtually every question asked. Please note we are able to compare some of the 2022 survey data with data from previous surveys conducted in partnership



with the Montana Office of Rural Health in 2016 and 2019. If any statistical significance exists, it will be reported. The significance level was set at 0.05.

## Health Assessment Process

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

## Survey Methodology

### Survey Instrument

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

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



### Sampling

Mountainview Medical Center provided a list of aggregated outpatient and inpatient admissions. Those zip codes with the greatest number of admissions were selected to be included in the survey. A random list of 600 residents was then selected with the assistance of the MSU HELPS lab. Residence was stratified in the initial sample selection so that each area would be represented in proportion to the overall served population and the proportion of past admissions. Note: although the survey

samples were proportionately selected, actual surveys returned from each population area varied, which may result in slightly less proportional results.).

Zip Code	Population <sup>1</sup>	Community Name	Total Distribution	# Male	# Female
59645	1012	White Sulphur Springs	550	275	275
59642	35	Ringling	13	6	6
59053	27	Martinsdale/Lennep	38	19	19
<b>Total</b>	1074		600	300	300

<sup>1</sup> US Census Bureau - American Community Survey (2019)

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

## Information Gaps- Data

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

There are many standard health indices used to rank and monitor health in an urban setting that do not translate as accurately in rural and frontier areas. In the absence of sufficient health indices for rural and frontier communities in Montana, utilizing what is available is done with an understanding of access to care in rural and frontier Montana communities and barriers of disease surveillance in this setting.

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

## Limitations in Survey & Key Informant Interview Methodology

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

Conducting key informant interviews in addition to the random sample survey allows for a more robust sample, and ultimately, these efforts help to increase the community response rate. Partnering with

local community organizations such as public health, community health centers, and senior centers, just to name a few, assists in reaching segments of the population that might not otherwise respond to a survey.

While key informant interview data can offer invaluable insight into the perception of a community or group of individuals, qualitative data can be difficult to analyze. For this reason, key informant interview data are grouped into common themes based on our interpretation of the transcript. To better understand these themes, please review the full transcripts in Appendix I. MORH staff facilitated the key informant interviews for MMC to ensure impartiality. However, given the small size of the community, key informant interview participants may still be hesitant to express their opinions freely. Personal identifiers are not included in the transcripts.



## Survey Implementation

In January 2022, a survey, cover letter on Mountainview Medical Center's letterhead with the Chief Executive Officer's signature, and a postage paid envelope were mailed to 600 randomly selected residents in the hospital's service area. A news release was sent to the local newspaper as well as social media postings prior to the survey distribution announcing that Mountainview Medical Center would be conducting a community health services survey throughout the region in cooperation with the Montana Office of Rural Health.

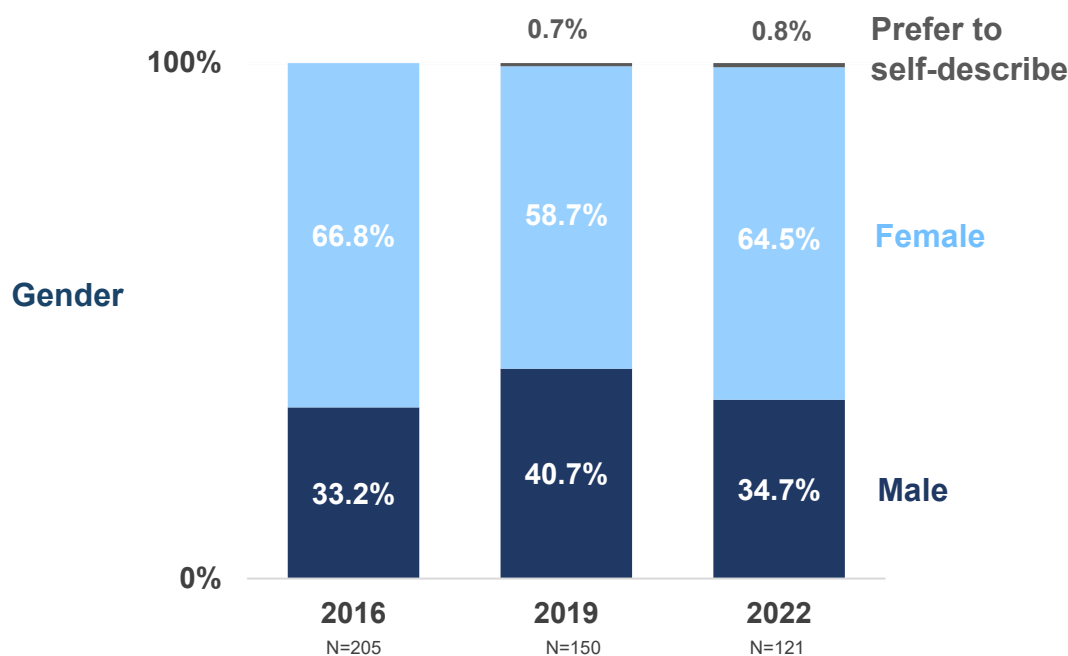
One hundred twenty-five surveys were returned out of 600. Of those 600 surveys, 68 surveys were returned undeliverable for a 23.5% response rate. From this point on, the total number of surveys will be out of 532. Based upon the sample size, we can be 95% confident that the responses to the survey questions are representative of the service area population, plus or minus 8.2%.

## Survey Respondent Demographics

A total of 532 surveys were distributed amongst Mountainview Medical Center's service area. One-hundred twenty-five were completed for a 23.5% response rate. The following table and graphs indicate the demographic characteristics of the survey respondents. Information on location, gender, age, and employment is included. Percentages indicated on the tables and graphs are based upon the total number of responses for each individual question, as some respondents did not answer all questions.

Place of Residence	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	205	149	125	
59645 White Sulphur Springs	87.3% (179)	92.6% (138)	90.4% (113)	<input type="checkbox"/>
59053 Martinsdale/Lennep	7.3% (15)	2.0% (3)	6.4% (8)	<input type="checkbox"/>
59642 Ringling	5.4% (11)	2.7% (4)	1.6% (2)	<input type="checkbox"/>
Other*	0.0% (0)	2.7% (4)	1.6% (2)	<input type="checkbox"/>
<b>TOTAL</b>	<b>100% (205)</b>	<b>100.0% (149)</b>	<b>100.0% (125)</b>	

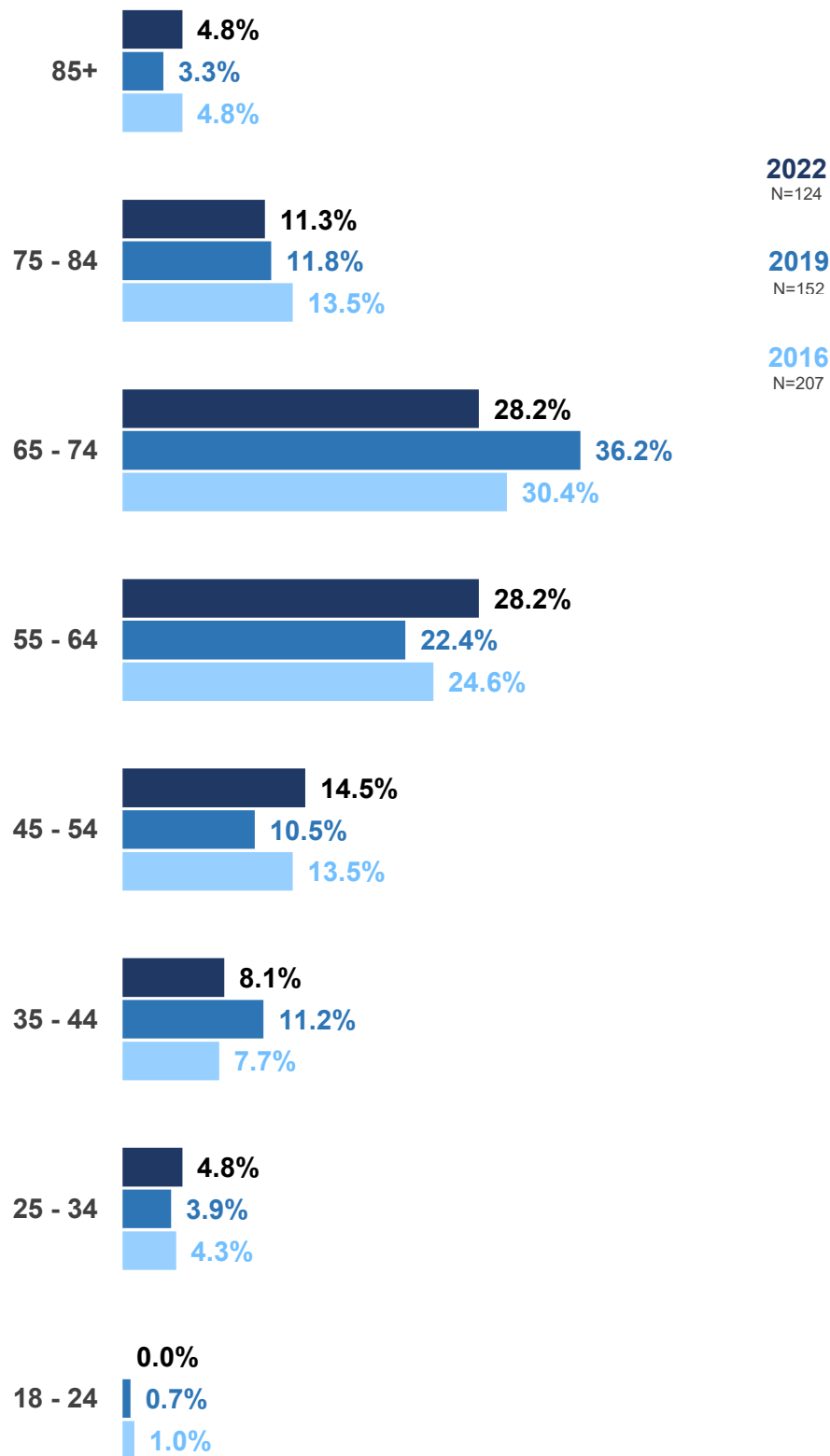
A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Grayed out cells indicate the question was not asked that year. \*Respondents (N=1) who selected over the allotted amount were moved to "Other."



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

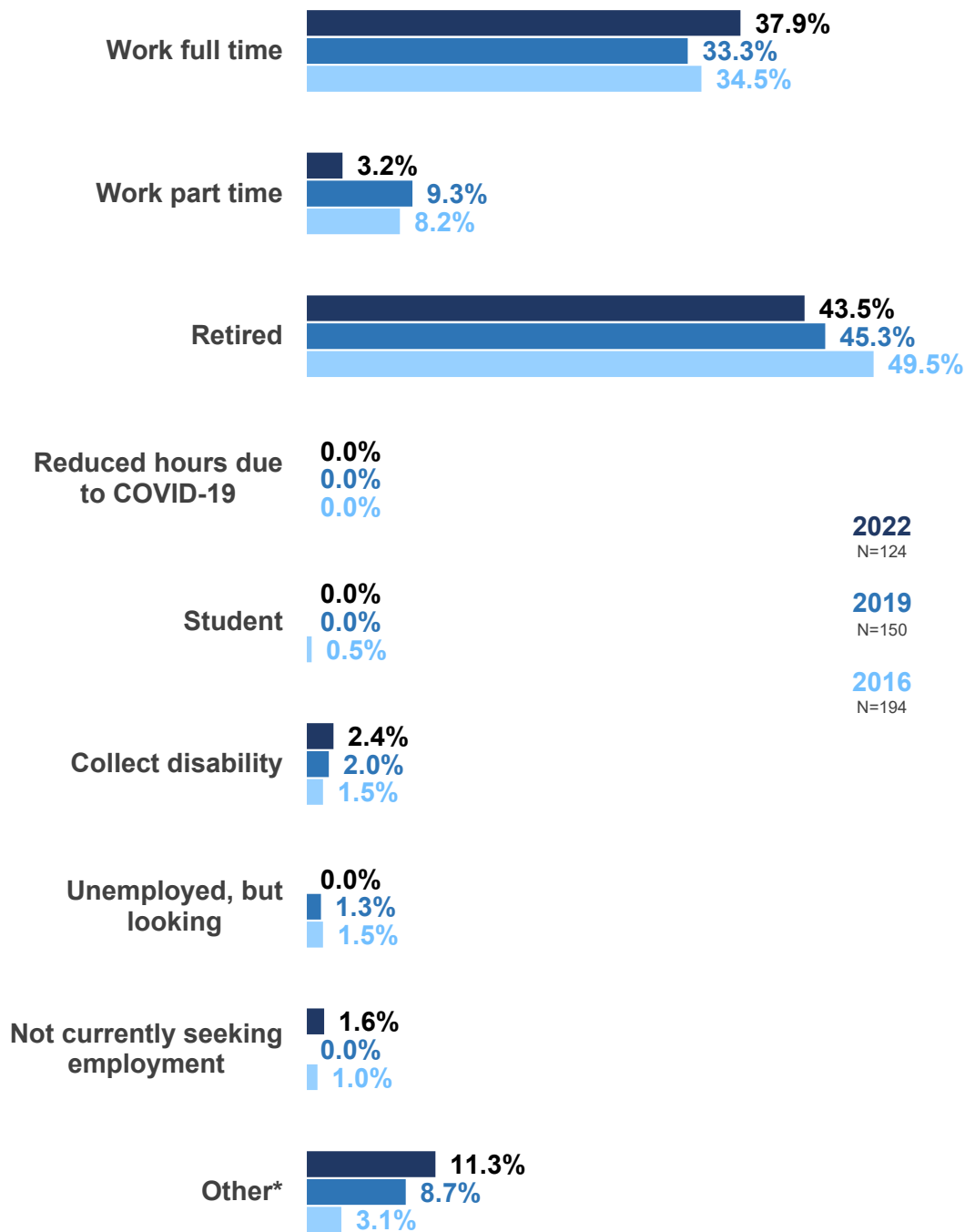


## Age of respondents for all years of the survey



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

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



\*Respondents (N=5) who selected over the allotted amount were moved to "Other."

"Other" comments included: Self-employed (3), Ranching (2), and Seasonal



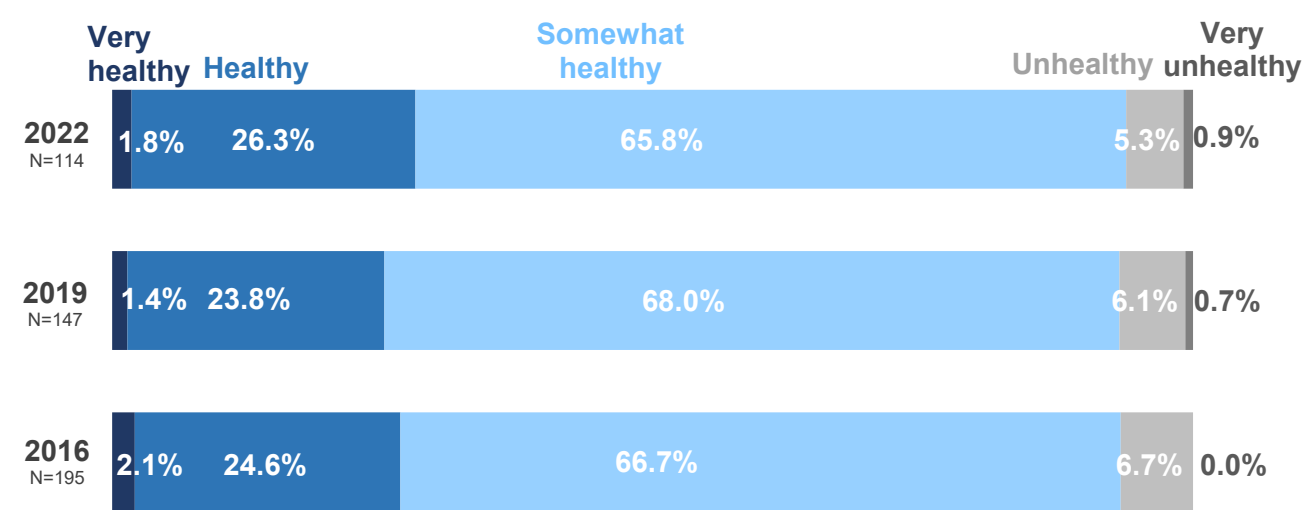
# **SURVEY RESULTS**

# Survey Results

## Rating of Healthy Community (Question 1)

Respondents were asked to indicate how they would rate the general health of their community. Sixty-five point eight percent of respondents (n=75) rated their community as “Somewhat healthy,” and 26.3% of respondents (n=30) felt their community was “Healthy.” Five point three percent of respondents (n=6) indicated they felt their community was “Unhealthy,” 1.8% of respondents (n=2) rated their community as “Very healthy,” and 0.9% of respondents (n=1) felt it was “Very unhealthy.”

More 2022 respondents rate their community as **healthy** or **somewhat healthy** compared to 2019 and 2016.



Over half of survey respondents feel their community is **somewhat healthy**.



## Health Concerns for Community (Question 2)

Respondents were asked what they felt the three most serious health concerns were in their community. The top identified health concern was “Alcohol/substance abuse” at 36.1% (n=43). “Cancer” was also a high priority at 34.5% (n=41), followed closely by “Lack of dental care” at 27.7% (n=33).

“Other” comments included: Cost, Kidney dialysis, and “Lack of in-home care.”

*(View all comments in Appendix G)*

Health Concern	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	208	154	119	
Alcohol/substance abuse	45.2% (94)	35.1% (54)	36.1% (43)	<input type="checkbox"/>
Cancer	40.9% (85)	40.3% (62)	34.5% (41)	<input type="checkbox"/>
Lack of dental care	28.4% (59)	26.0% (40)	27.7% (33)	<input type="checkbox"/>
COVID-19			23.5% (28)	<input type="checkbox"/>
Depression/anxiety	14.9% (31)	8.4% (13)	18.5% (22)	<input checked="" type="checkbox"/>
Overweight/obesity	33.2% (69)	21.4% (33)	17.6% (21)	<input checked="" type="checkbox"/>
Work/economic stress			14.3% (17)	<input type="checkbox"/>
Tobacco use (vaping, cigarettes, smokeless)	17.3% (36)	20.1% (31)	12.6% (15)	<input type="checkbox"/>
Heart disease	26.0% (54)	26.0% (40)	11.8% (14)	<input checked="" type="checkbox"/>
Lack of exercise	19.7% (41)	14.9% (23)	10.9% (13)	<input type="checkbox"/>
Mental health issues	9.1% (19)	13.6% (21)	10.9% (13)	<input type="checkbox"/>
Lack of transportation	9.6% (20)	9.7% (15)	9.2% (11)	<input type="checkbox"/>
Alzheimer's/dementia		11.7% (18)	8.4% (10)	<input type="checkbox"/>
Lack of access to healthcare	5.3% (11)	11.7% (18)	8.4% (10)	<input type="checkbox"/>
Social isolation/loneliness		11.7% (18)	8.4% (10)	<input type="checkbox"/>
Diabetes	24.5% (51)	15.6% (24)	6.7% (8)	<input checked="" type="checkbox"/>
Child abuse/neglect	4.3% (9)	5.8% (9)	4.2% (5)	<input type="checkbox"/>
Stroke	4.3% (9)	1.3% (2)	3.4% (4)	<input type="checkbox"/>
Work related accidents/injuries	3.4% (7)	1.3% (2)	2.5% (3)	<input type="checkbox"/>
Domestic violence	1.0% (2)	0.0% (0)	1.7% (2)	<input type="checkbox"/>
Hunger		0.6% (1)	1.7% (2)	<input type="checkbox"/>
Suicide		3.2% (5)	1.7% (2)	<input type="checkbox"/>

*Table continued on the next page.*

Motor vehicle accidents	2.4% (5)	1.9% (3)	0.8% (1)	<input type="checkbox"/>
Sexual assault		0.6% (1)	0.8% (1)	<input type="checkbox"/>
Recreation related accidents/injuries	4.3% (9)	1.9% (3)	0.0% (0)	<input checked="" type="checkbox"/>
Other*	4.3% (9)	4.5% (7)	8.4% (10)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Respondents were asked to pick their top three serious health concerns, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. \*Respondents (N=3) who selected over the allotted amount were moved to "Other."

## Components of a Healthy Community (Question 3)

Respondents were asked to identify the three most important things for a healthy community. Fifty-three point three percent of respondents (n=64) indicated that "Access to healthcare and other services" is important for a healthy community, followed by "Affordable housing" at 42.5% (n=51), and "Good jobs and a healthy economy" at 37.5% (n=45).

Components of a Healthy Community	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	208	154	120	
Access to healthcare and other services	72.6% (151)	51.9% (80)	53.3% (64)	<input checked="" type="checkbox"/>
Affordable housing	19.2% (40)	26.6% (41)	42.5% (51)	<input checked="" type="checkbox"/>
Good jobs and a healthy economy	56.7% (118)	51.9% (80)	37.5% (45)	<input checked="" type="checkbox"/>
Healthy behaviors and lifestyles	37.5% (78)	32.5% (50)	28.3% (34)	<input type="checkbox"/>
Senior services		28.6% (44)	21.7% (26)	<input type="checkbox"/>
Good schools	21.2% (44)	20.8% (32)	16.7% (20)	<input type="checkbox"/>
Strong family life	26.0% (54)	23.4% (36)	16.7% (20)	<input type="checkbox"/>
Access to childcare/after school programs		3.9% (6)	14.2% (17)	<input checked="" type="checkbox"/>
Access to healthy foods			9.2% (11)	<input type="checkbox"/>
Low crime/safe neighborhoods	15.9% (33)	7.1% (11)	9.2% (11)	<input checked="" type="checkbox"/>
Religious or spiritual values	14.9% (31)	13.6% (21)	9.2% (11)	<input type="checkbox"/>
Clean environment	16.3% (34)	11.0% (17)	6.7% (8)	<input checked="" type="checkbox"/>
Community involvement	12.5% (26)	5.8% (9)	6.7% (8)	<input type="checkbox"/>
Transportation services		7.8% (12)	5.0% (6)	<input type="checkbox"/>
Parks and recreation	2.9% (6)	1.9% (3)	4.2% (5)	<input type="checkbox"/>

Table continued on the next page.

Low level of domestic violence	1.4% (3)	1.3% (2)	2.5% (3)	<input type="checkbox"/>
Low death and disease rates	4.3% (9)	1.3% (2)	1.7% (2)	<input type="checkbox"/>
Tolerance for diversity	2.4% (5)	0.0% (0)	0.8% (1)	<input type="checkbox"/>
Arts and cultural events	0.5% (1)	1.3% (2)	0.0% (0)	<input type="checkbox"/>
Other*	2.4% (5)	3.9% (6)	1.7% (2)	<input type="checkbox"/>

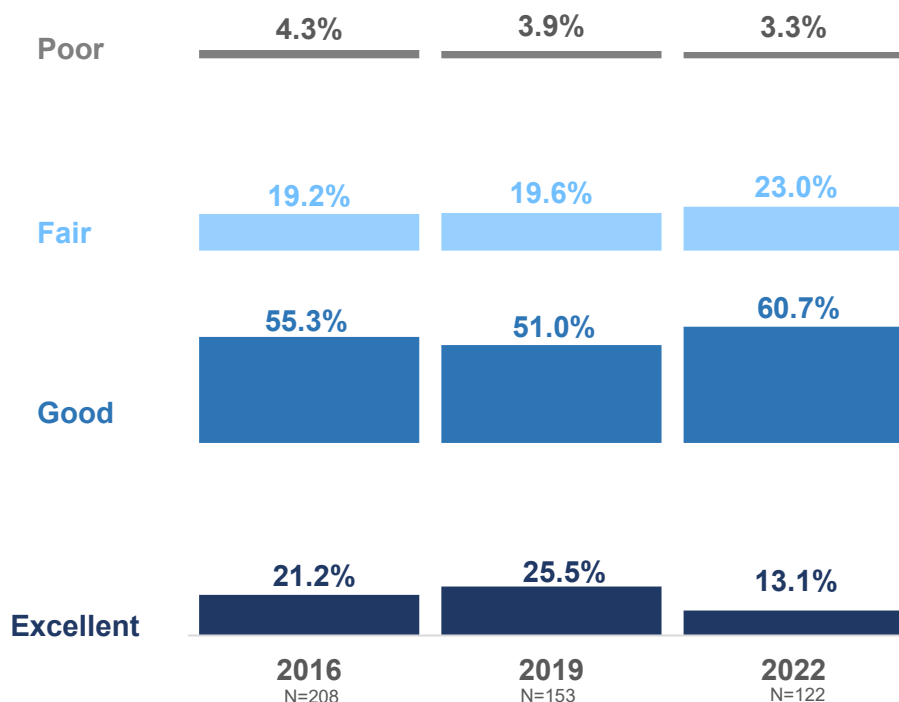
A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Respondents were asked to pick their top three components of a healthy community, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. \*Respondents (N=1) who selected over the allotted amount were moved to "Other."

**"Other"** comments included: "Access to help when needed."

## Knowledge of Health Services (Question 4)

Respondents were asked to rate their knowledge of the health services available through Mountainview Medical Center. Sixty point seven percent of respondents (n=74) rated their knowledge of health services as "Good." "Fair" was selected by 23.0% percent (n=28), "Excellent" was chosen by 13.1% of respondents (n=16), and "Poor" was selected by 3.3% (n=4).

**Fewer 2022 respondents rated their knowledge of services as poor compared to 2016 and 2019.**



## How Respondents Learn of Health Services (Question 5)

The most frequently indicated method of learning about available services was “Word of mouth/reputation” at 61.3% (n=76). “Friends/family” was also frequently used to learn about health services at 49.2% (n=61), followed by “Healthcare provider” at 37.1% (n=46).

How Respondents Learn about Community Health Services	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	208	154	124	
Word of mouth/reputation	72.6% (151)	61.7% (95)	61.3% (76)	■
Friends/family	65.9% (137)	59.1% (91)	49.2% (61)	■
Healthcare provider	44.7% (93)	46.8% (72)	37.1% (46)	□
Community Senior Center	26.9% (56)	37.0% (57)	33.9% (42)	□
Public health nurse	6.3% (13)	11.0% (17)	32.3% (40)	■
Social media		10.4% (16)	21.8% (27)	■
Newspaper	22.1% (46)	20.1% (31)	20.2% (25)	□
Community health fair		38.3% (59)	18.5% (23)	■
Mailings/newsletter	17.8% (37)	18.2% (28)	15.3% (19)	□
Website/internet	6.7% (14)	5.8% (9)	12.1% (15)	□
Community fliers		20.1% (31)	10.5% (13)	■
PBS	0.5% (1)	6.5% (10)	2.4% (3)	■
Presentations	0.5% (1)	3.2% (5)	0.0% (0)	■
Radio	0.5% (1)	0.0% (0)	0.0% (0)	□
Other	5.8% (12)	6.5% (10)	6.5% (8)	□

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

“Other” comments included: Council on Aging, “Call the Mountainview Medical Center (MMC),” and Emergency scenes/Fire Department.

**View a cross tabulation of how respondents learn with how they rate their knowledge on p. 79**



## Utilized Community Health Resources (Question 6)

Respondents were asked which community health resources, other than the hospital or clinic, they had used in the last three years. “Pharmacy” was the most frequently utilized community health resource cited by respondents at 82.1% (n=96). The “Public/County health” was utilized by 45.3% (n=53) of respondents which experienced a significant increase since the 2019 assessment, followed by “Chiropractor” at 44.4% (n=52).

Use of Community Health Resources	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	206	154	117	
Pharmacy	78.4% (163)	78.6% (121)	82.1% (96)	<input type="checkbox"/>
Public/County health	14.9% (31)	23.4% (36)	45.3% (53)	<input checked="" type="checkbox"/>
Chiropractor		33.8% (52)	44.4% (52)	<input type="checkbox"/>
Senior Center	32.2% (67)	40.9% (63)	38.5% (45)	<input type="checkbox"/>
Community health fair		35.1% (54)	16.2% (19)	<input checked="" type="checkbox"/>
Adult mental health services		7.1% (11)	7.7% (9)	<input type="checkbox"/>
Children’s Mental Health	1.0% (2)	0.0% (0)	1.7% (2)	<input type="checkbox"/>
Other	5.3% (11)	4.5% (7)	7.7% (9)	<input type="checkbox"/>

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

“Other” comments included: Massage, Dental, Eye Care, Physical therapy (2), “Nurse – COVID vaccination,” Drug Store, and Nursing Home.

## Improve Community's Access to Healthcare (Question 7)

Respondents were asked to indicate what they felt would improve their community's access to healthcare. The majority of respondents (48.7%, n=55) reported that "More specialists" would make the greatest improvement, which was a significant increase compared to the previous assessments. Forty point seven percent of respondents (n=46) indicated "More information about available services" followed by "More primary care providers" at 36.3% (n=41) would improve access.

**More specialists  
would make the  
greatest  
improvement**

What Would Improve Community Access to Healthcare	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	208	154	113	
More specialists	26.0% (54)	28.6% (44)	48.7% (55)	■
More information about available services		42.9% (66)	40.7% (46)	□
More primary care providers	22.6% (47)	18.8% (29)	36.3% (41)	■
Transportation assistance	31.3% (65)	35.1% (54)	31.9% (36)	□
Improved quality of care	21.2% (44)	16.9% (26)	23.0% (26)	□
Telemedicine	14.4% (30)	10.4% (16)	22.1% (25)	■
Outpatient services expanded hours	16.8% (35)	14.3% (22)	15.9% (18)	□
Greater health education services	26.0% (54)	20.8% (32)	12.4% (14)	■
Cultural sensitivity	2.4% (5)	1.9% (3)	1.8% (2)	□
Interpreter services	1.0% (2)	0.6% (1)	0.0% (0)	□
Other	8.7% (18)	15.6% (24)	13.3% (15)	□

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

**"Other"** comments included: Affordable Health Care, "Portable mobile MRI equipment," and "Dental and eye doctor."

## Interest in Educational Classes/Programs (Question 8)

Respondents were asked if they would be interested in any educational classes/programs made available to the community. The most frequently selected class/program was “Health and wellness” at 42.9% (n=39), which has experienced a significant increase compared to the previous assessments. Interest in “First aid/CPR” followed with 34.1% (n=31), while 30.8% of respondents (n=28) were interested in “Estate planning,” which experienced a significant change over the last three assessments.

Interest in Classes or Programs	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	208	154	91	
Health and wellness	36.1% (75)	26.0% (40)	42.9% (39)	■
First aid/CPR	24.0% (50)	25.3% (39)	34.1% (31)	□
Estate planning	17.3% (36)	26.0% (40)	30.8% (28)	■
Fitness	34.1% (71)	39.0% (60)	28.6% (26)	□
Weight loss	28.4% (59)	33.8% (52)	27.5% (25)	□
Insurance education		18.8% (29)	26.4% (24)	□
Nutrition	19.7% (41)	17.5% (27)	26.4% (24)	□
Women’s health	26.9% (56)	27.9% (43)	23.1% (21)	□
Advance healthcare directives		11.7% (18)	16.5% (15)	□
Alzheimer’s/dementia	17.3% (36)	21.4% (33)	14.3% (13)	□
Mental health	10.1% (21)	9.7% (15)	12.1% (11)	□
Cancer	11.5% (24)	13.0% (20)	11.0% (10)	□
Support groups	8.2% (17)	7.8% (12)	9.9% (9)	□
Alcohol/substance abuse	3.4% (7)	1.9% (3)	8.8% (8)	■
Diabetes	14.9% (31)	14.3% (22)	8.8% (8)	□
Grief counseling	4.8% (10)	5.8% (9)	8.8% (8)	□
Men’s health	9.1% (19)	13.6% (21)	8.8% (8)	□
Quitting smoking/chew tobacco	4.8% (10)	8.4% (13)	8.8% (8)	□
Heart disease	10.1% (21)	14.3% (22)	7.7% (7)	□
Parenting	7.7% (16)	5.8% (9)	7.7% (7)	□

*Table continued on the next page.*

Anger management		3.9% (6)	3.3% (3)	<input type="checkbox"/>
Prenatal	2.4% (5)	3.2% (5)	1.1% (1)	<input type="checkbox"/>
Other	3.4% (7)	2.6% (4)	7.7% (7)	<input type="checkbox"/>

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

“Other” comments included: VA support, “Medicare plans yearly for seniors,” Cooking classes, “Type 2 Diabetes diet management.”

## Utilization of Preventive Services (Question 9)

Respondents were asked if they had utilized any of the preventive services listed in the past year. “Flu shot/immunizations” was selected by 60.5% of respondents (n=72), followed by “Vision check” at 49.6% (n=59). Forty-eight point seven percent of respondents (n=58) indicated they had a “Dental check.” Survey respondents could select all services that applied.

Use of Preventive Services	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	208	154	119	
Flu shot/immunizations	50.0% (104)	57.1% (88)	60.5% (72)	<input type="checkbox"/>
Vision check		43.5% (67)	49.6% (59)	<input type="checkbox"/>
Dental check		47.4% (73)	48.7% (58)	<input type="checkbox"/>
Routine health checkup	48.1% (100)	49.4% (76)	42.0% (50)	<input type="checkbox"/>
Routine blood pressure check	42.3% (88)	54.5% (84)	39.5% (47)	<input checked="" type="checkbox"/>
Cholesterol check	29.8% (62)	44.8% (69)	36.1% (43)	<input checked="" type="checkbox"/>
Mammography		25.3% (39)	27.7% (33)	<input type="checkbox"/>
Colonoscopy		22.1% (34)	13.4% (16)	<input type="checkbox"/>
Hearing check		14.3% (22)	12.6% (15)	<input type="checkbox"/>
Pap test	11.5% (24)	9.7% (15)	12.6% (15)	<input type="checkbox"/>
Prostate (PSA)	11.1% (23)	16.9% (26)	10.9% (13)	<input type="checkbox"/>
Community health fair		26.0% (40)	7.6% (9)	<input checked="" type="checkbox"/>
Children’s checkup/Well baby	5.3% (11)	11.0% (17)	6.7% (8)	<input type="checkbox"/>
None	18.8% (39)	4.5% (7)	5.0% (6)	<input checked="" type="checkbox"/>

Table continued on the next page.



Mental health counseling		2.6% (4)	4.2% (5)	<input type="checkbox"/>
Other	7.7% (16)	7.8% (12)	8.4% (10)	<input type="checkbox"/>

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

“Other” comments included: COVID-19 vaccination (3), Dermatologist yearly check, Physical Therapy, COVID tests, and Blood sugar testing.

## Desired Local Health Services (Question 10)

Respondents were asked to indicate which additional services they would utilize if available locally. Respondents indicated the most interest in “Dental services” at 74.3% (n=81). Fifty-eight point seven percent (n=64) respondents were interested in an “Eye doctor,” while 33.9% (n=37) desire “Hearing check” available locally.

Desired Local Healthcare Services	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	208	154	109	
Dental services	68.3% (142)	63.6% (98)	74.3% (81)	<input type="checkbox"/>
Eye doctor		52.6% (81)	58.7% (64)	<input type="checkbox"/>
Hearing check		27.9% (43)	33.9% (37)	<input type="checkbox"/>
Mammography	24.0% (50)	17.5% (27)	27.5% (30)	<input type="checkbox"/>
Colonoscopy		22.1% (34)	21.1% (23)	<input type="checkbox"/>
MRI		15.6% (24)	18.3% (20)	<input type="checkbox"/>
Assisted living	12.5% (26)	14.9% (23)	17.4% (19)	<input type="checkbox"/>
Home health		11.7% (18)	15.6% (17)	<input type="checkbox"/>
Hospice	8.7% (18)	7.1% (11)	6.4% (7)	<input type="checkbox"/>
Mental health	8.2% (17)	11.0% (17)	6.4% (7)	<input type="checkbox"/>
Diabetic counseling	8.7% (18)	7.8% (12)	5.5% (6)	<input type="checkbox"/>
Orthodontics	6.7% (14)	6.5% (10)	4.6% (5)	<input type="checkbox"/>
Pediatric services	7.7% (16)	7.8% (12)	4.6% (5)	<input type="checkbox"/>
Prenatal services	3.8% (8)	3.9% (6)	2.8% (3)	<input type="checkbox"/>
Other	6.3% (13)	5.8% (9)	2.8% (3)	<input type="checkbox"/>

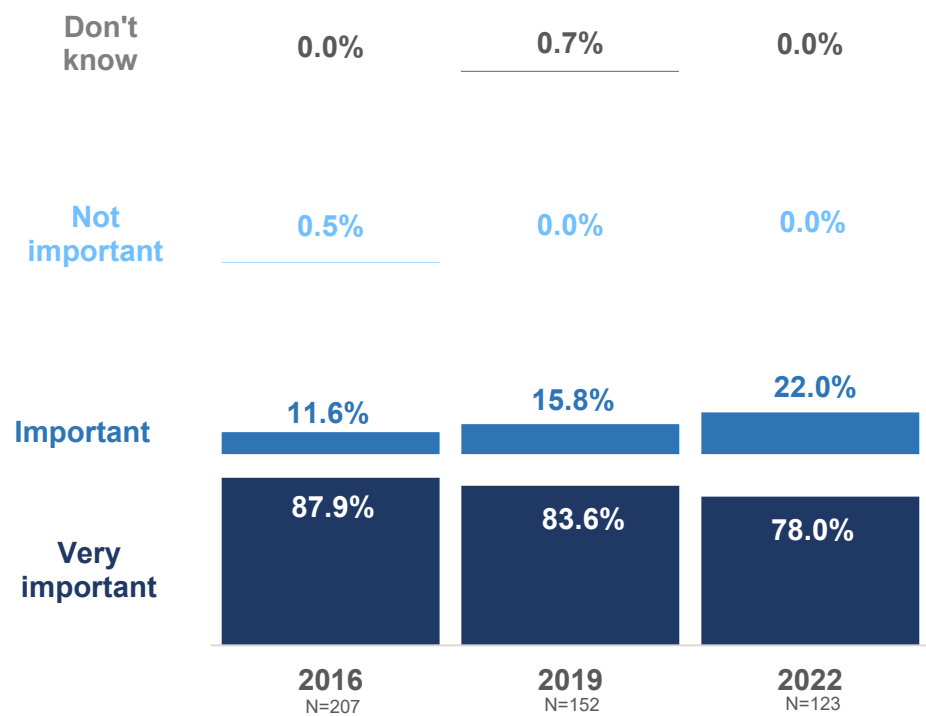
A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Respondents were asked to pick all desired local healthcare services that are of interest, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: Yearly check-up and Local general practitioner.

### Economic Importance of Healthcare (Question 11)

The majority of respondents (78.0%, n=96) indicated that local healthcare providers and services (i.e., hospitals, clinics, nursing homes, assisted living, etc.) are “Very important” to the economic well-being of the area. Twenty-two percent of respondents (n=27) indicated they are “Important,” and no respondents felt they are not important or didn’t know.

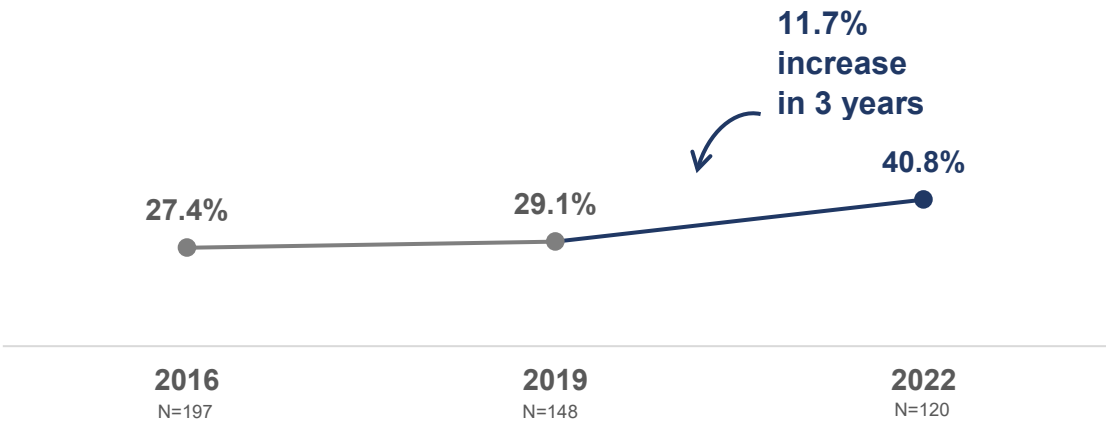
All 2022 respondents thought local healthcare providers and services were **Very important** or **Important** to the economic well-being of the area.



## Delay of Services (Question 12)

Forty point eight percent of respondents (n=49) reported that they or a member of their household thought they needed healthcare services but did not get them or had to delay getting them. Fifty-nine point two percent of respondents (n=71) felt they were able to get the healthcare services they needed without delay.

**More 2022 respondents delayed or did not receive needed services compared to previous assessments**



**View a cross tabulation of where respondents live and 'delay of healthcare services' on p. 80**

## Reason for Not Receiving/Delaying Needed Services (Question 13)

Forty-eight of the 49 survey respondents who indicated they were unable to receive or had to delay services, shared their top three reasons for not receiving or delaying needed services. The reason most cited was that “COVID-19 barriers/concerns” (33.6%, n=16). “It cost too much” was selected by 22.9% (n=11), while 16.7% of respondents (n=8, each) indicated “Don’t like doctors/providers,” and “My insurance didn’t cover it.”

Reasons for Delay in Receiving Needed Healthcare	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	54	43	48	
COVID-19 barriers/concerns			33.3% (16)	<input type="checkbox"/>
It cost too much	59.3% (32)	48.8% (21)	22.9% (11)	<input checked="" type="checkbox"/>
Don’t like doctors/providers	18.5% (10)	11.6% (5)	16.7% (8)	<input type="checkbox"/>
My insurance didn’t cover it	22.2% (12)	44.2% (19)	16.7% (8)	<input checked="" type="checkbox"/>
Could not get an appointment	7.4% (4)	18.6% (8)	12.5% (6)	<input type="checkbox"/>
It was too far to go	5.6% (3)	9.3% (4)	12.5% (6)	<input type="checkbox"/>
Too long to wait for an appointment	14.8% (8)	20.9% (9)	8.3% (4)	<input type="checkbox"/>
Transportation problems	1.9% (1)	0.0% (0)	8.3% (4)	<input type="checkbox"/>
Don’t understand healthcare system			6.3% (3)	<input type="checkbox"/>
No insurance	14.8% (8)	9.3% (4)	6.3% (3)	<input type="checkbox"/>
Could not get off work	1.9% (1)	9.3% (4)	4.2% (2)	<input type="checkbox"/>
Didn’t know where to go	1.9% (1)	9.3% (4)	4.2% (2)	<input type="checkbox"/>
Not treated with respect	9.3% (5)	4.7% (2)	4.2% (2)	<input type="checkbox"/>
Office wasn’t open when I could go	7.4% (4)	4.7% (2)	4.2% (2)	<input type="checkbox"/>
Unsure if services were available	13.0% (7)	4.7% (2)	4.2% (2)	<input type="checkbox"/>
Had no one to care for the children	3.7% (2)	4.7% (2)	2.1% (1)	<input type="checkbox"/>
Too nervous or afraid	11.1% (6)	7.0% (3)	2.1% (1)	<input type="checkbox"/>
Language barrier	0.0% (0)	0.0% (0)	0.0% (0)	<input type="checkbox"/>
Other*	33.3% (18)	14.0% (6)	35.4% (17)	<input checked="" type="checkbox"/>

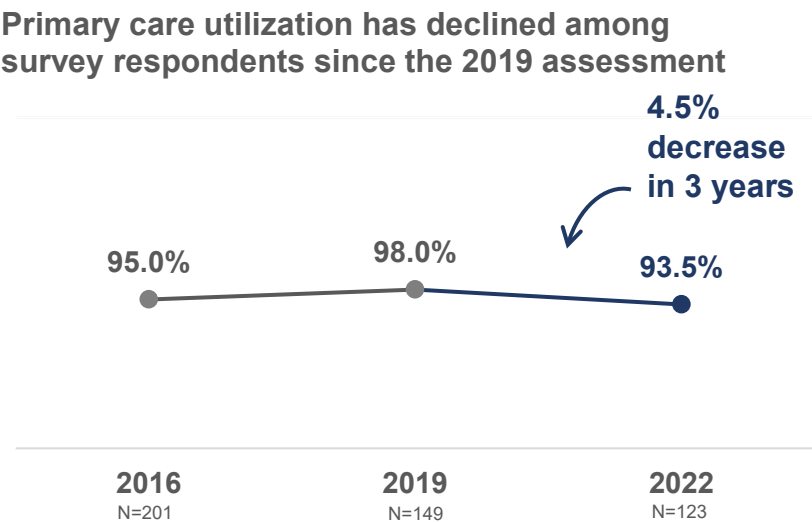
A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Respondents were asked to indicate the top three reasons for a delay in seeking healthcare, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. \*Respondents (N=4) who selected over the allotted amount were moved to “Other.”

“Other” comments included: Weekend, Weather conditions, and “Waited to see if the problem was solved.”



## Primary Care Services (Question 14)

Ninety-three point five percent of respondents (n=115) indicated they or someone in their household had been seen by a primary care provider (such as a family physician, physician assistant, or nurse practitioner) for healthcare services in the past three years. Six point five percent of respondents (n=8) indicated they had not received primary care.



## Location of Primary Care Services (Question 15)

Of the 115 respondents who indicated receiving primary care services in the previous three years, 39.1% (n=45) reported receiving care at Mountainview Medical Center, and 7.8% of respondents (n=9) went to Bozeman Health. Twenty-three respondents were moved to “other” due to selecting more than one primary care provider location.

Location of Primary Care Provider	2016 % (n)	2019 % (n)	2022 % (n)
Number of respondents	170	135	115
Mountainview Medical Center	66.5% (113)	51.1% (69)	39.1% (45)
Bozeman Health	5.9% (10)	6.7% (9)	7.8% (9)
Benefis Health System	0.6% (1)	2.2% (3)	5.2% (6)
Livingston HealthCare	4.1% (7)	5.2% (7)	5.2% (6)
St. Peter’s Hospital	6.5% (11)	4.4% (6)	4.3% (5)
VA		3.0% (4)	2.6% (3)
Billings Clinic	1.8% (3)	1.5% (2)	1.7% (2)
Broadwater Health Center	0.6% (1)	1.5% (2)	1.7% (2)
St. Vincent Healthcare	1.2% (2)	0.0% (0)	1.7% (2)
Wheatland Memorial Healthcare	1.8% (3)	0.0% (0)	0.9% (1)
Other*	11.2% (19)	24.4% (33)	29.6% (34)
<b>TOTAL</b>	<b>100.0% (170)</b>	<b>100.0% (135)</b>	<b>100.0% (115)</b>

Statistical significance was not measured as reporting differed between 2022 and the two previous years. A larger number of missing values in 2022 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Grayed out cells indicate the question was not asked that year. \*Respondents (N=23) who selected over the allotted amount were moved to “Other.”

“Other” comments included: Telehealth, Providence Missoula, Great Falls, Pioneer Medical Center in Big Timber, Out of state, Community Health Partners – Livingston, and Kalispell.

**View a cross tabulation of where respondents live with where they utilize primary care services on p. 81**

## Reasons for Primary Care Provider Selection (Question 16)

Those respondents who indicated they or someone in their household had been seen by a primary care provider within the past three years were asked to indicate why they chose that primary care provider. “Prior experience with clinic” was the most frequently selected reason at 43.0% (n=49), followed by “Closest to home” at 40.4% (n=46), and “Clinic/provider’s reputation for quality” at 28.9% (n=33).

Reasons for Selecting Primary Care Provider	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	191	146	114	
Prior experience with clinic	55.5% (106)	50.0% (73)	43.0% (49)	<input type="checkbox"/>
Closest to home	57.6% (110)	56.2% (82)	40.4% (46)	<input checked="" type="checkbox"/>
Clinic/provider’s reputation for quality	26.2% (50)	32.9% (48)	28.9% (33)	<input type="checkbox"/>
Appointment availability	32.5% (62)	30.1% (44)	23.7% (27)	<input type="checkbox"/>
Referred by physician or other provider	9.9% (19)	8.9% (13)	19.3% (22)	<input checked="" type="checkbox"/>
Privacy/confidentiality			14.0% (16)	<input type="checkbox"/>
Recommended by family or friends	13.1% (25)	17.1% (25)	13.2% (15)	<input type="checkbox"/>
Length of waiting room time	7.3% (14)	8.2% (12)	5.3% (6)	<input type="checkbox"/>
VA/Military requirement	5.2% (10)	7.5% (11)	5.3% (6)	<input type="checkbox"/>
Required by insurance plan	1.0% (2)	6.2% (9)	4.4% (5)	<input checked="" type="checkbox"/>
Cost of care	2.6% (5)	6.2% (9)	2.6% (3)	<input type="checkbox"/>
Indian Health Services	0.5% (1)	0.0% (0)	0.0% (0)	<input type="checkbox"/>
Other	7.3% (14)	11.0% (16)	14.0% (16)	<input type="checkbox"/>

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

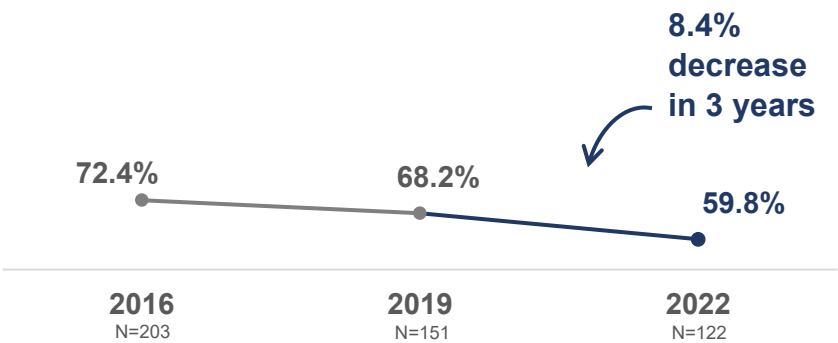
“Other” comments included: Available locally, “Local does not accept our plan,” and Obstetrician/Gynecologist (OB/GYN).

**View a cross tabulation of where respondents utilize primary care services with their reasons for selecting their provider on p. 82**

## Hospital Care Services (Question 17)

Respondents were asked if they or someone in their household had received hospital care in the last three years. Hospitalization was quantified as hospitalized overnight, day surgery, obstetrical care, rehabilitation, radiology, or emergency care. Fifty-nine point eight percent of respondents (n=73) reported that they or a member of their family had received hospital care during the previous three years, and 40.2% (n=49) had not received hospital services.

**Utilization of hospital services has consistently declined since the 2016 assessment**



## Location of Hospital Services (Question 18)

Seventy-two of the 73 respondents who indicated receiving hospital care in the last three years, shared the location of the hospital. Thirty-one point nine percent of respondents (n=23) reported receiving care at Mountainview Medical Center. Fifteen point three percent of respondents (n=11) received services at Bozeman Health, and 11.1% of respondents (n=8) reported utilizing services through the Benefis Health System.

Hospital Used Most Often	2016 % (n)	2019 % (n)	2022 % (n)
Number of respondents	121	98	72
Mountainview Medical Center	42.1% (51)	26.5% (26)	31.9% (23)
Bozeman Health	13.2% (16)	15.3% (15)	15.3% (11)
Benefis Health System	9.1% (11)	13.3% (13)	11.1% (8)
St. Peter's Hospital	12.4% (15)	14.3% (14)	8.3% (6)
Billings Clinic	5.0% (6)	6.1% (6)	5.6% (4)
Livingston HealthCare	4.1% (5)	3.1% (3)	4.2% (3)
St. Vincent Healthcare	5.0% (6)	2.0% (2)	4.2% (3)
VA		3.1% (3)	1.4% (1)
Broadwater Health Center	0.0% (0)	1.0% (1)	0.0% (0)
Wheatland Memorial Healthcare	0.8% (1)	0.0% (0)	0.0% (0)
Other*	8.3% (10)	15.3% (15)	18.1% (13)
<b>TOTAL</b>	<b>100.0% (121)</b>	<b>100.0% (98)</b>	<b>100.0% (72)</b>

Statistical significance was not measured as reporting differed between 2022 and the two previous years. A larger number of missing values in 2022 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Grayed out cells indicate the question was not asked that year. \*Respondents (N=8) who selected over the allotted amount were moved to "Other."

"Other" comments included: Great Falls Clinic (2), St. Patrick Missoula, Yellowstone Surgery Center, and Bridger Orthopedic.

**View a cross tabulation of where respondents live with where they utilize hospital services on p. 83**

## Reasons for Hospital Selection (Question 19)

Of the 72 respondents who had a personal or family experience at a hospital within the past three years, the primary reason given for selecting the facility used most often was “Closest to home” at 45.8% (n=33). “Emergency, no choice” was selected by 26.4% of the respondents (n=19), and 9.7% (n=7) chose “Recommended by family or friends.”

Reasons for Selecting Hospital	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	147	103	72	
Closest to home	49.7% (73)	44.7% (46)	45.8% (33)	<input type="checkbox"/>
Emergency, no choice	26.5% (39)	28.2% (29)	26.4% (19)	<input type="checkbox"/>
Recommended by family or friends	14.3% (21)	18.4% (19)	9.7% (7)	<input type="checkbox"/>
Closest to work	4.8% (7)	2.9% (3)	4.2% (3)	<input type="checkbox"/>
Cost of care	4.1% (6)	4.9% (5)	4.2% (3)	<input type="checkbox"/>
Privacy/confidentiality			4.2% (3)	<input type="checkbox"/>
Financial assistance programs		3.9% (4)	2.8% (2)	<input type="checkbox"/>
Hospital's reputation for quality	36.7% (54)	36.9% (38)	2.8% (2)	<input checked="" type="checkbox"/>
Referred by physician or other provider	40.1% (59)	40.8% (42)	2.8% (2)	<input checked="" type="checkbox"/>
Required by insurance plan	2.7% (4)	6.8% (7)	2.8% (2)	<input type="checkbox"/>
VA/Military requirement	5.4% (8)	8.7% (9)	2.8% (2)	<input type="checkbox"/>
Prior experience with hospital	44.2% (65)	42.7% (44)	2.7% (1)	<input checked="" type="checkbox"/>
Other*	5.4% (8)	7.8% (8)	11.1% (8)	<input type="checkbox"/>

A solid blue square indicates a statistically significant change between years ( $p \leq 0.05$ ). Respondents were asked to pick their top three reasons for selecting a hospital, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. \*Respondents (N=2) who selected over the allotted amount were moved to “Other.”

“Other” comments included: Surgeon's Reputation, Great staff, Only place in town, Cancer care experience, and “That's where the doctor did his procedures.”

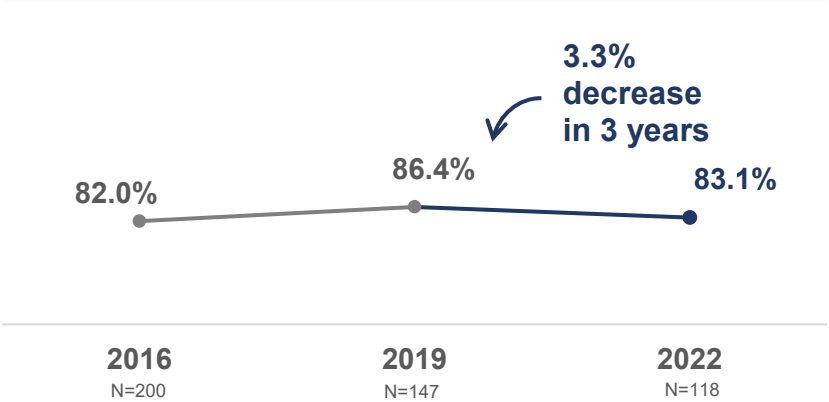
**View a cross tabulation of where respondents utilize hospital services with their reasons for selecting that facility p. 84**



## Specialty Care Services (Question 20)

Respondents were asked if they or someone in their household had seen a healthcare specialist in the last three years. Specialty care was quantified as a health provider other than their primary care provider or family doctor. Eighty-three point one percent of the respondents (n=98) indicated they or a household member had seen a healthcare specialist during the past three years, while 16.9% (n=20) indicated they had not.

Specialty care utilization slightly decreased since the last assessment



## Location of Healthcare Specialist(s) (Question 21)

Ninety-seven of the 98 respondents who indicated they saw a healthcare specialist in the past three years shared where they sought such services. Twenty-seven point eight percent of respondents (n=27) sought care at Bozeman Health and Mountainview Medical Center. Twenty-four point seven percent of respondents (n=24) utilized specialty services at St. Peter’s Hospital. Respondents could select more than one location, so percentages do not equal 100%.

Location of Specialist	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	164	127	97	
Bozeman Health	24.4% (40)	34.6% (44)	27.8% (27)	<input type="checkbox"/>
Mountainview Medical Center	9.1% (15)	19.7% (25)	27.8% (27)	<input checked="" type="checkbox"/>
St. Peter’s Hospital	23.2% (38)	27.6% (35)	24.7% (24)	<input type="checkbox"/>
Bridger Orthopedic		22.0% (28)	22.7% (22)	<input type="checkbox"/>

Table continued on the next page.

Benefis Health System	20.1% (33)	18.9% (24)	21.6% (21)	<input type="checkbox"/>
Livingston HealthCare	11.0% (18)	11.8% (15)	16.5% (16)	<input type="checkbox"/>
Billings Clinic	10.4% (17)	11.0% (14)	14.4% (14)	<input type="checkbox"/>
St. Vincent Healthcare	11.0% (18)	7.1% (9)	10.3% (10)	<input type="checkbox"/>
VA		10.2% (13)	8.2% (8)	<input type="checkbox"/>
St. Patrick Hospital and Health Sciences Center		3.1% (4)	5.2% (5)	<input type="checkbox"/>
Broadwater Health Center	0.0% (0)	3.1% (4)	2.1% (2)	<input type="checkbox"/>
Community Medical Center		0.0% (0)	0.0% (0)	<input type="checkbox"/>
Wheatland Memorial Healthcare	3.7% (6)	0.0% (0)	0.0% (0)	<input checked="" type="checkbox"/>
Other	26.2% (43)	28.3% (36)	28.9% (28)	<input type="checkbox"/>

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

**“Other”** comments included: Helena (2), University of Utah (2), Out of state (2), Telehealth, and Heart Institute Missoula.

## Type of Healthcare Specialist Seen (Question 22)

The respondents (n=97) saw a wide array of healthcare specialists in the past three years. The most frequently utilized specialist was the “Dentist” at 40.2% (n=39), which also experienced a significant change across the last three community health needs assessments. A “Dermatologist” was seen by 27.8% of respondents (n=27) followed closely by the “Orthopedic surgeon” at 26.8% (n=26). Respondents were asked to choose all that apply, so percentages do not equal 100%.

Type of Specialists Seen	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	164	127	97	
Dentist	28.7% (47)	43.3% (55)	40.2% (39)	■
Dermatologist	23.8% (39)	29.9% (38)	27.8% (27)	□
Orthopedic surgeon	25.6% (42)	22.0% (28)	26.8% (26)	□
Optometrist		25.2% (32)	24.7% (24)	□
Cardiologist	25.0% (41)	36.2% (46)	23.7% (23)	□
Chiropractor	14.0% (23)	15.0% (19)	22.7% (22)	□
Gastroenterologist	14.0% (23)	18.1% (23)	21.6% (21)	□
Physical therapist	12.2% (20)	15.0% (19)	21.6% (21)	□
Radiologist	14.0% (23)	12.6% (16)	20.6% (20)	□
Urologist	10.4% (17)	11.0% (14)	18.6% (18)	□
Ophthalmologist	14.6% (24)	15.0% (19)	15.5% (15)	□
OB/GYN	16.5% (27)	16.5% (21)	13.4% (13)	□
Oncologist	10.4% (17)	13.4% (17)	13.4% (13)	□
General surgeon	20.1% (33)	10.2% (13)	12.4% (12)	■
Audiologist		7.9% (10)	9.3% (9)	□
Mental health counselor	1.8% (3)	3.9% (5)	9.3% (9)	■
Podiatrist	3.7% (6)	5.5% (7)	9.3% (9)	□
Pulmonologist	5.5% (9)	9.4% (12)	9.3% (9)	□
ENT (ear/nose/throat)	11.0% (18)	13.4% (17)	8.2% (8)	□
Neurologist	8.5% (14)	9.4% (12)	8.2% (8)	□
Rheumatologist	5.5% (9)	7.1% (9)	8.2% (8)	□

Table continued on the next page.

Endocrinologist	2.4% (4)	11.0% (14)	6.2% (6)	■
Neurosurgeon	2.4% (4)	3.9% (5)	5.2% (5)	□
Allergist	3.7% (6)	1.6% (2)	4.1% (4)	□
Pediatrician	4.9% (8)	4.7% (6)	4.1% (4)	□
Psychiatrist (M.D.)	1.8% (3)	2.4% (3)	3.1% (3)	□
Oral surgeon		4.7% (6)	2.1% (2)	□
Occupational therapist	1.8% (3)	2.4% (3)	1.0% (1)	□
Denturist		2.4% (3)	0.0% (0)	□
Geriatrician	0.0% (0)	0.0% (0)	0.0% (0)	□
Psychologist	1.2% (2)	0.8% (1)	0.0% (0)	□
Social worker	1.8% (3)	0.0% (0)	0.0% (0)	□
Speech therapist	0.0% (0)	0.8% (1)	0.0% (0)	□
Substance abuse counselor	0.0% (0)	0.0% (0)	0.0% (0)	□
Other	7.3% (12)	9.4% (12)	12.4% (12)	□

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

“Other” comments included: Pain Specialist, “Diabetic, leg injury,” Nephrologist, Naturopathic doctor, Infection control, and Plastic Surgeon.

## Mode of Transportation to Medical Appointments (Question 23)

Respondents were asked to indicate how they get to and from the hospital, clinic, or the majority of their medical appointments. The top mode of transportation to and from medical appointments was “Single Occupancy Vehicle (Car, truck, tractor)” (92.6%, n=113). Respondents were asked to choose all that apply, so percentages do not equal 100%.

Modes of Transportation to Medical Appointments	2016 % (n)	2019 % (n)	2022 % (n)
Number of respondents	0	0	122
Single Occupancy Vehicle (Car, truck, tractor)			92.6% (113)
Ride with a Family Member or Friend			23.0% (28)
Walk			4.9% (6)

Table continued on the next page.

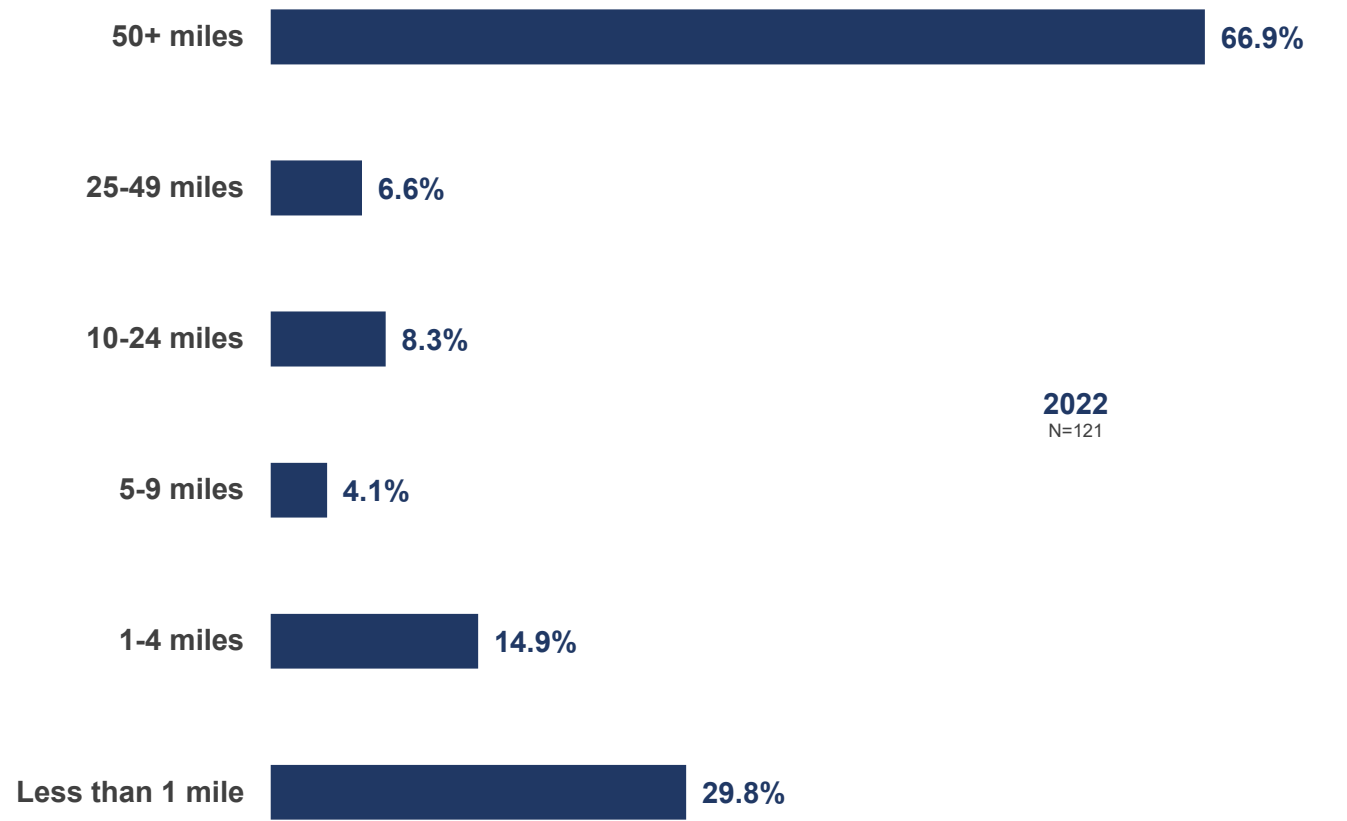
Bike		0.8% (1)
Dial-A-Ride Program (senior volunteer program)		0.0% (0)
VA bus		0.0% (0)
Other		4.1% (5)

Respondents were asked to indicate all modes of transportation they've used to get to medical appointments, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: Digitally, Ambulance, Drove, “Air Med, helicopter,” and Military transport.

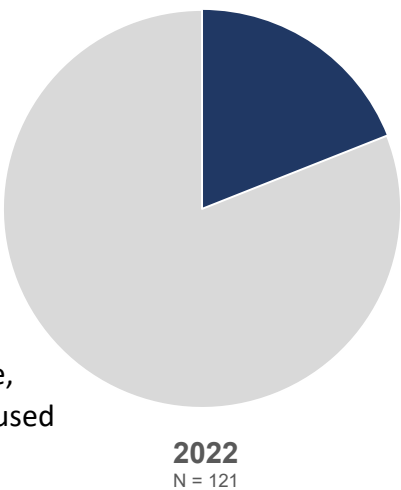
### Distance to Medical Care (Question 24)

Respondents were asked to indicate what distance they typically have to travel for medical care. Sixty-six point nine percent of respondents (n=81) shared that they travel 50 miles or more to medical care and 29.8% (n=36) stated that they travel less than a mile to care. Respondents were asked to choose all that apply, so percentages do not equal 100%.



### Missed Appointment due to Transportation Issue (Question 25)

Respondents were asked if they have ever missed a medical appointment due to a transportation issue. Nineteen percent of respondents (n=23) indicated they had missed a medical appointment due to a transportation issue, while 81.0% (n=98) said transportation had not caused them to miss a medical appointment.



**19.0%**  
have missed a medical appointment due to a transportation issue at least once

### Reasons for Missing Medical Care Due to Transportation Issue (Question 26)

Of the respondents (n=23) who indicated they have missed a medical appointment due to a transportation issue, the top reason cited was “Weather conditions” (87.0%, n=20). Thirty-four point eight percent of respondents (n=8) indicated “Unsafe roads/sidewalks for walking or biking” caused them to be late or miss a medical appointment, while 30.4% of respondents (n=7) stated a “Lack of transportation (no car, broke down)” made them late or miss a medical appointment.

Reasons for Being Late or Missing Medical Appointment	2016 % (n)	2019 % (n)	2022 % (n)
Number of respondents	0	0	23
Weather conditions			87.0% (20)
Unsafe roads/sidewalks for walking or biking			34.8% (8)
Lack of transportation (no car, broke down)			30.4% (7)
Too far to travel			13.0% (3)
Time of appointment			8.7% (2)
Unreliable/No transit service			4.3% (1)
Other			4.3% (1)

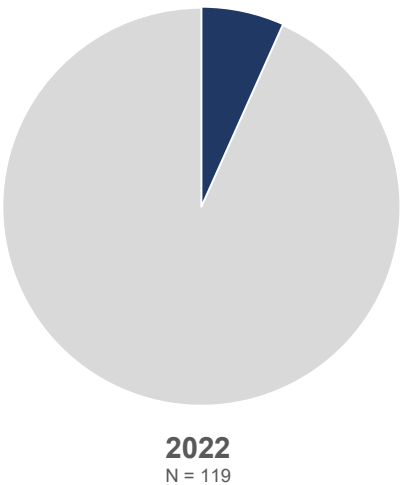
Respondents were asked to indicate the reasons that caused them to either be late or miss medical care, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

“Other” comments included: COVID-19



### Provider Assessment of Transportation (Question 27)

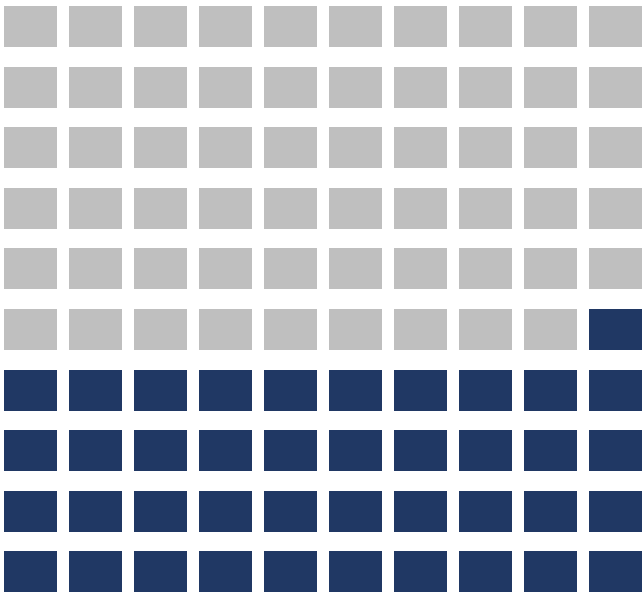
Respondents were asked if a medical provider has ever asked them how they would get to a medical appointment. Ninety-three point three percent of respondents (n=111) stated that a medical provider has not asked them how they will get to a medical appointment. However, 6.7% of respondents (n=8) indicated a medical provider has asked them how they will get to an appointment.



**6.7%**  
report that a medical provider has asked how they will get to a medical appointment

### Use of Transportation Service (Question 28)

Respondents were asked if they would utilize a service that provided transportation to and from medical appointments in White Sulphur Springs as well as to further communities like Helena, Bozeman, or Billings. Forty-one point one percent of respondents (n=46) stated they would utilize a transportation service for medical appointments, while 58.9% of respondents (n=66) said they would not.



2022  
N = 112

**41.1%**  
of respondents indicated they would utilize a transportation service to and from medical appointments

## Overall Quality of Care through Mountainview Medical Center (Question 29)

Respondents were asked to rate various services available through Mountainview Medical Center using the scale of 4= Excellent, 3= Good, 2= Fair, 1=Poor, and Haven't Used. The services that received the highest score were the Ambulance services and Physical therapy (3.7 out of 4.0, each). Overall, the average rating on quality and availability of the health services listed was 3.3 out of 4.0.

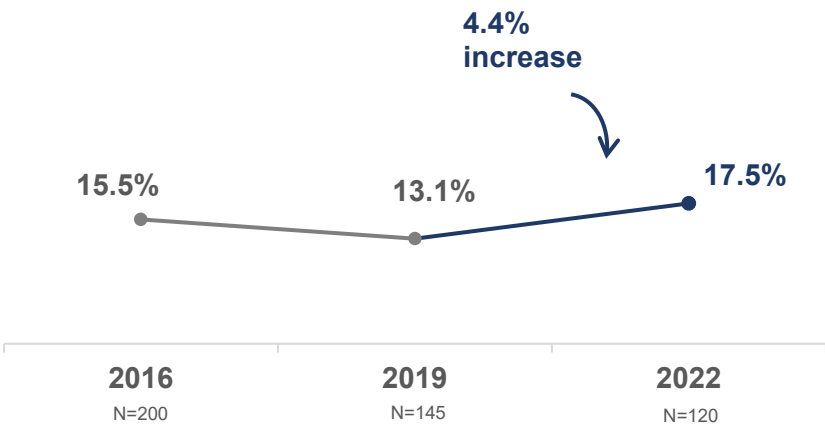
Quality of Care Rating for Mountainview Medical Center	2016 Average (n)	2019 Average (n)	2022 Average (n)	SIGNIFICANT CHANGE
4 Point Scale: Poor = 1, Fair = 2, Good = 3, Excellent = 4				
Total number of respondents	194	144	118	
Ambulance services	3.7 (99)	3.7 (69)	3.7 (62)	<input type="checkbox"/>
Physical therapy	3.6 (136)	3.6 (82)	3.7 (62)	<input type="checkbox"/>
Radiology/X-ray/CT Scan		3.5 (100)	3.5 (82)	<input type="checkbox"/>
Chiropractor		3.4 (23)	3.5 (34)	<input type="checkbox"/>
Laboratory	3.4 (168)	3.4 (124)	3.4 (95)	<input type="checkbox"/>
Emergency room	3.4 (148)	3.5 (96)	3.4 (81)	<input type="checkbox"/>
Clinic	3.4 (181)	3.5 (133)	3.3 (106)	<input type="checkbox"/>
Podiatry			3.3 (12)	<input type="checkbox"/>
Hospital services	3.3 (114)	3.3 (74)	3.2 (53)	<input type="checkbox"/>
Mental health counseling			3.2 (16)	<input type="checkbox"/>
Pharmacy		3.5 (67)	3.1 (57)	<input checked="" type="checkbox"/>
Ophthalmologist			3.0 (9)	<input type="checkbox"/>
Pain clinic			2.9 (10)	<input type="checkbox"/>
Billing services		2.7 (119)	2.7 (101)	<input type="checkbox"/>
<b>Overall average</b>	<b>3.4 (194)</b>	<b>3.4 (144)</b>	<b>3.3 (118)</b>	<input type="checkbox"/>

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

## Prevalence of Depression (Question 30)

Respondents were asked to indicate if there were periods of at least three consecutive months in the past three years where they felt depressed on most days. Seventeen point five percent of respondents (n=21) indicated they had experienced periods of depression, and 82.5% of respondents (n=99) indicated they had not.

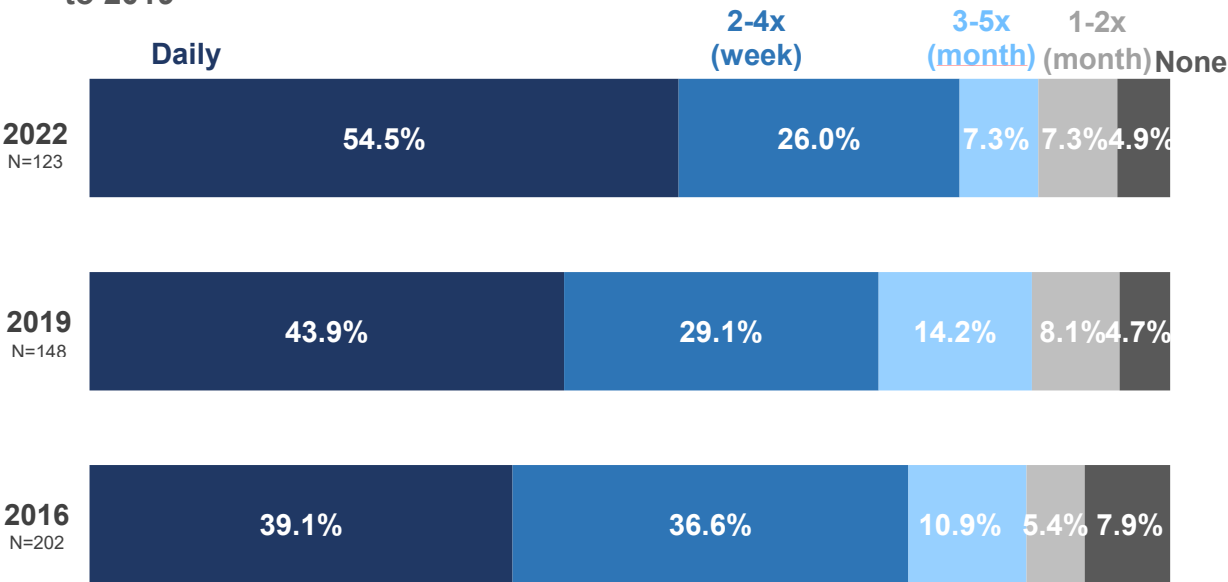
**More respondents report experiencing periods of depression since the last assessment**



## Physical Activity (Question 31)

Respondents were asked to indicate how frequently they had physical activity for at least twenty minutes over the past month. Fifty-four point five percent of respondents (n=67) indicated they had physical activity “daily,” and 26.0% (n=32) indicated they had physical activity of at least twenty minutes “2-4 times per week.” Seven point three percent of respondents (n=9, each) indicated they had physical activity “3-5 times per month” and “1-2 times per month,” while 4.9% (n=6) indicated they had “No physical activity.”

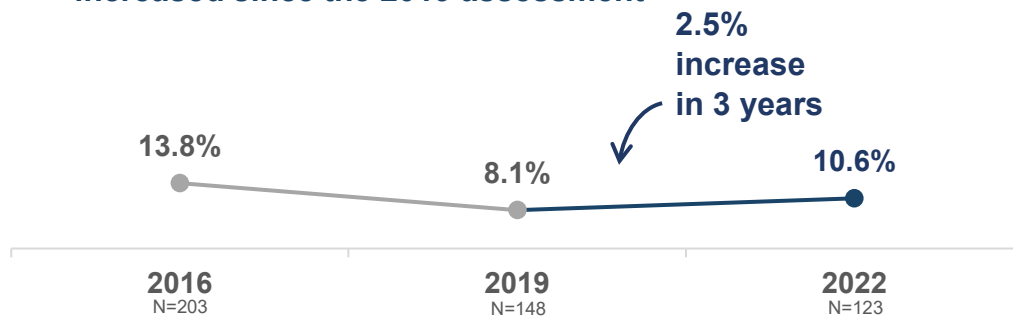
**Respondents report being more physically active in 2022 compared to 2019**



## Difficulty Getting Prescriptions (Question 32)

Respondents were asked to indicate if, during the last year, medication costs had prohibited them from getting a prescription or taking their medication regularly. Ten point six percent of respondents (n=13) indicated that they had difficulty getting a prescription or taking their medication regularly in the last year. Eighty one point three percent of respondents (n=100) indicated that they did not have trouble getting or taking prescriptions, while 8.1% of respondents (n=10) stated it was not a pertinent question for them.

**Cost as a barrier to taking medications has slightly increased since the 2019 assessment**



## Food Insecurity (Question 33)

Respondents were asked to indicate if, during the last year, they had worried that they would not have enough food to eat. The majority, 96.7% (n=118), were not worried, but 3.3% (n=4) were concerned about not having enough to eat.

**The majority of respondents did not worry about having enough food**



## Injury Prevention Measures (Question 34)

Respondents were asked to indicate which injury prevention measures they use regularly. The majority, 84.2% (n=101) indicated that they use “Seat belt,” but 10.0% (n=12) indicate they use none of the listed injury prevention measures regularly. Survey respondents could select all prevention devices they use regularly, so percentages do not equal 100%.

Prevention devices	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	0	154	120	
Seat belt		88.3% (136)	84.2% (101)	<input type="checkbox"/>
Regular exercise		51.9% (80)	55.0% (66)	<input type="checkbox"/>
Ear/hearing protection		26.0% (40)	30.0% (36)	<input type="checkbox"/>
Helmet		13.6% (21)	12.5% (15)	<input type="checkbox"/>
Designated driver		14.3% (22)	8.3% (10)	<input type="checkbox"/>
Child car seat/booster		15.6% (24)	7.5% (9)	<input checked="" type="checkbox"/>
None		3.9% (6)	10.0% (12)	<input checked="" type="checkbox"/>

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

## Health Insurance Type (Question 35)

Respondents were asked to indicate what type of health insurance covers the majority of their medical expenses. Twenty-eight point two percent (n=35) indicated they have “Medicare” coverage. Twenty-four point two percent (n=30) indicated they have “Employer sponsored” coverage. Twenty-four respondents were moved to “Other” for selecting over the allotted one medical insurance type.

Type of Health Insurance	2016 % (n)	2019 % (n)	2022 % (n)
Number of respondents	165	137	124
Medicare	35.8% (59)	29.2% (40)	28.2% (35)
Employer sponsored	23.6% (39)	22.6% (31)	24.2% (30)
Private insurance/private plan	9.1% (15)	5.8% (8)	6.5% (8)
Health Insurance Marketplace	10.9% (18)	5.8% (8)	5.6% (7)
None/pay out of pocket	4.2% (7)	6.6% (9)	4.8% (6)
Medicaid	3.6% (6)	5.1% (7)	3.2% (4)
VA/military	6.7% (11)	4.4% (6)	3.2% (4)
Healthy MT Kids	1.2% (2)	1.5% (2)	2.4% (3)
Health Savings Account	0.6% (1)	2.9% (4)	0.0% (0)
Indian Health	0.6% (1)	0.0% (0)	0.0% (0)
Agricultural Corp. Paid	0.6% (1)		
State/Other	1.2% (2)		
Other*	1.8% (3)	16.1% (22)	21.8% (27)
<b>TOTAL</b>	<b>100.0% (165)</b>	<b>100.0% (137)</b>	<b>100.0% (124)</b>

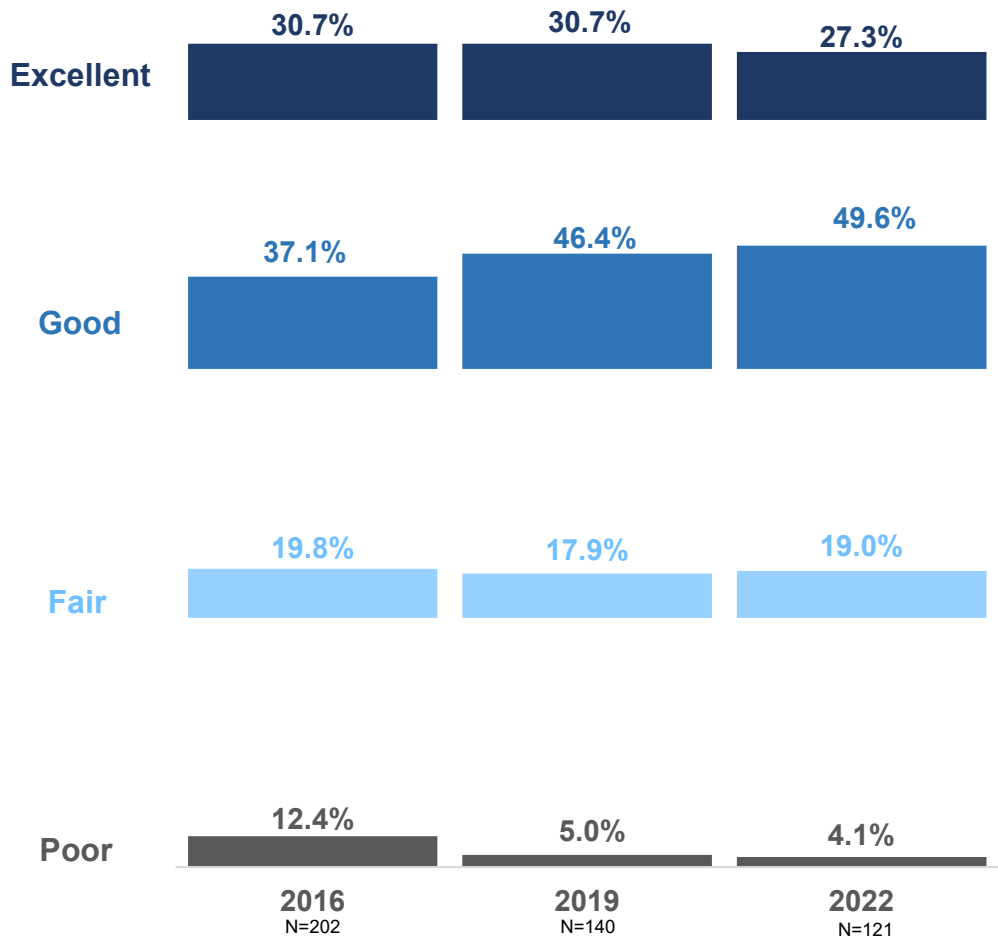
Statistical significance was not measured as reporting differed between 2022 and the two previous years. A larger number of missing values in 2022 compared to previous years would result in a skewed test for significance, indicating a meaningful change when one may not exist. Grayed out cells indicate the question was not asked that year. \*Respondents (N=24) who selected over the allotted amount were moved to “Other.”

“Other” comments included: “One of us has Medicaid and the other has market place insurance;” “Supplemental Insurance,” “AARP insurance,” and “Not Sure.”

## Insurance and Healthcare Costs (Question 36)

Respondents were asked to indicate how well they felt their health insurance covers their healthcare costs. Forty-nine point six percent of respondents (n=60) indicated they felt their insurance covers a “Good” amount of their healthcare costs. Twenty-seven point three percent of respondents (n=33) indicated they felt their insurance covered an “Excellent” amount, 19.0% of respondents (n=23) felt their insurance covered a “Fair” amount, and 4.1% of respondents (n=5) stated their insurance covered a “Poor” amount of their health costs.

Over half of respondents feel that their health insurance offers excellent or good coverage





## Barriers to Having Insurance (Question 37)

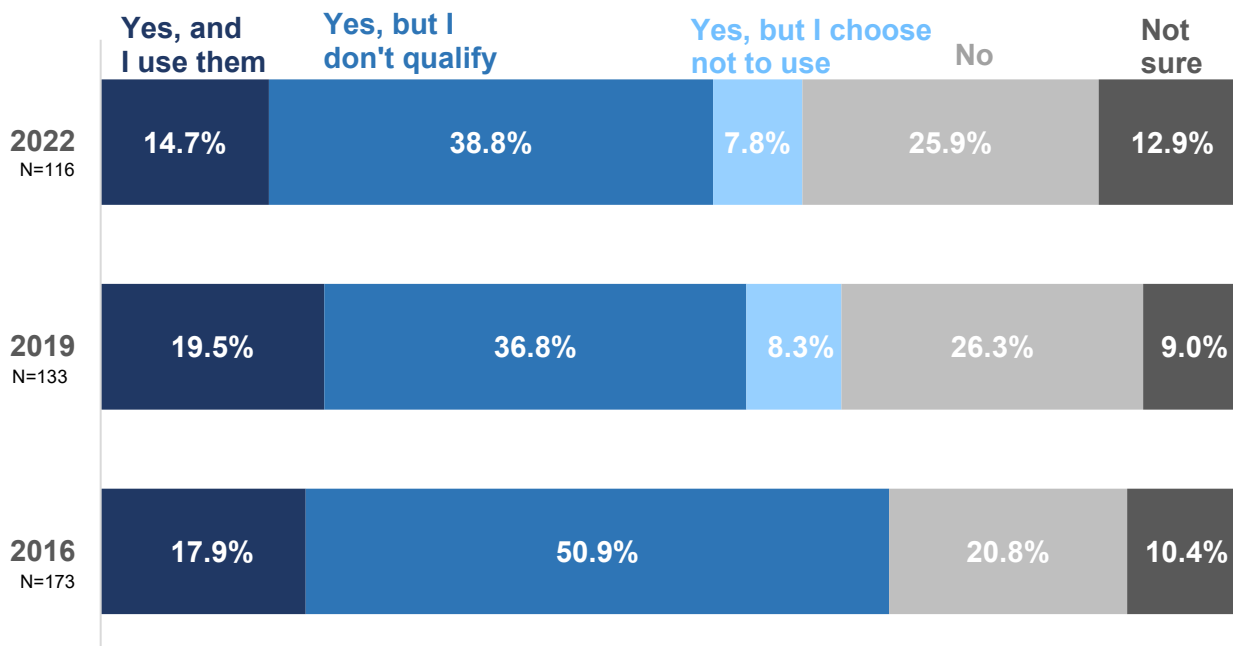
For those who indicated they did not have insurance (n=6), the top reason selected for not having insurance was “Can’t afford to pay for medical insurance.” Respondents could select all that apply.

Reasons for No Health Insurance	2016 % (n)	2019 % (n)	2022 % (n)	SIGNIFICANT CHANGE
Number of respondents	7	9	5	
Can’t afford to pay for health insurance	57.1% (4)	66.7% (6)	60.0% (3)	<input type="checkbox"/>
Choose not to have medical insurance	14.3% (1)	33.3% (3)	40.0% (2)	<input type="checkbox"/>
Employer does not offer insurance	28.6% (2)	11.1% (1)	20.0% (1)	<input type="checkbox"/>
Too confusing/don’t know how to apply		11.1% (1)	0.0% (0)	<input type="checkbox"/>
Other	0.0% (0)	33.3% (3)	0.0% (0)	<input type="checkbox"/>

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

## Awareness of Health Cost Assistance Programs (Question 38)

Respondents were asked to indicate their awareness of programs that help people pay for healthcare bills. Thirty-eight point eight percent of respondents (n=45) indicated they were aware of these programs but did not qualify to utilize them, and 25.9% (n=30) indicated that they were not aware of health cost assistance programs.





# **KEY INFORMANT INTERVIEW RESULTS**

## Key Informant Interview Methodology

Eight key informant interviews were conducted in March and April 2022. Participants were identified as people living in Mountainview Medical Center's service area.

The eight interviews were conducted over the telephone. The meetings lasted up to 15 minutes in length and followed the same line of questioning. Interview transcripts can be found in Appendix I. Interviews were facilitated by Montana Office of Rural Health staff.

### Key Informant Interview Themes

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



#### AGING IN PLACE

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The most common theme of the key informant interviews was a concern for the area's aging population. There were several participants that expressed concerns with accessing adequate senior services locally as they take on a patchwork approach. The biggest subthemes among those interviewed fell under the topics of transportation, housing affordability and safety.

In terms of transportation, one participant poignantly noted that while White Sulphur Springs is surrounded by many of Montana's populated areas, it's still geographically isolated. Many participants described similar grassroots solutions in which elderly community members coordinate and arrange to drive their peers to appointments out of the White Sulphur Springs area. While this is a generous solution of neighbors and friends taking care of one another, key informant interview participants were concerned about the sustainability and safety of all parties using this option.

Furthermore, another participant described challenges, particularly among the elderly that may not have family nearby. The community member said that "if they're taken by ambulance or helicopter for a medical emergency, there's frequently no one to bring them back." "A common solution, although it's not ideal, is for elders that can still drive to pick up other elders and

transport them,” they continued. Another community member added that “In order to fix our local transportation challenges, we need to secure funding to support workforce that would consistently coordinate dispatching.”

Another topic that the majority of community members discussed was housing affordability and safety. Currently, much of Montana is experiencing housing affordability challenges, and the White Sulphur Springs area is no different. Many key informant interview participants expressed the importance in seniors being able to age within the community. But this has been particularly challenging for area seniors as many of the homes are older, have staircases, and may be in the need of repairs and/or upgrades. One community member said, “It makes staying home longer particularly challenging and dangerous for our aging population.” They continued, “And unfortunately, there’s not a lot of options for single level homes that are affordable or the appropriate size for one or two people.”

A few community members described situations in which there are elderly living alone who can no longer adequately care for themselves. One shared that “Adult Protective Services (APS) frequently has to step in if they aren’t able to access needed food or care for themselves.”

## MENTAL HEALTH

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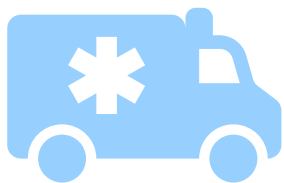


Access to mental health resources and services was another top theme among interview participants. Community members seemed to think this was a challenge across the lifespan and not isolated in one particular pocket of the population.

Community members were appreciative for the resources available through the local schools to address mental health issues, but were concerned that there’s still stigma associated with accessing the support. One person thought that, “additional education is needed to reduce the stigma for mental health support.” Alternatively, another community member stated, “one thing we don’t have, that might help some of our community members are support groups.” They continued with, “these may help people from feeling isolated and talking about their mental health challenges.”

## AMBULANCE WORKFORCE RECRUITMENT & RETENTION

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Another through line of the interviews was a deep appreciation for the local ambulance service and particularly the volunteers. There was a consensus when describing the ambulance team as a friendly and compassionate group.

The biggest concern among community members is that the local ambulance service is primarily volunteer-based and the current team seems to be stretched thin. Many suggested that this service faces workforce challenges particularly with recruitment and retention.

## SERVICES NEEDED IN THE COMMUNITY

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- Dental care
- Home health and hospice
- Healthcare workforce recruitment and retention
- More telehealth opportunities for specialty care
- Childcare
- Women's health provider
- Lactation specialist
- Low-cost labs
- Dermatologist
- Diabetes education
- Insurance education and navigation
- More advertising and awareness of local services
- Mental and behavioral health resources
- Trails away from busy highways and streets
- Better access to enrollment in resources like Medicaid and Supplemental Nutrition Assistance Program (SNAP) benefits
- Preventive health education (healthy eating, active living, smoking cessation, weight management, etc.)
- Dialysis
- Oncology infusion services





# **EXECUTIVE SUMMARY**

## Executive Summary

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

Areas of Opportunity	Secondary Data	Survey	Interviews
<b>Access to Healthcare Services</b>			
<b>Barriers to access</b>			
<i>More primary care providers</i>	⊗	✓	☑
<i>Specialty services (i.e., dental, pediatrics and women's health)</i>	⊗	✓	☑
<i>Awareness of available services</i>		✓	☑
<i>50+ miles traveled to access medical care</i>		✓	☑
<i>Decline in access to care due to COVID-19</i>		✓	☑
<b>Cost of services</b>			
<i>Affordability and insurance coverage</i>	⊗	✓	☑
<i>Healthcare navigator (i.e., Assistance signing up for/navigating insurance, Medicare, or Medicaid)</i>		✓	☑
<b>Senior Services</b>			
<i>High percentage of population 65+</i>	⊗	✓	☑
<i>Transportation</i>		✓	☑
<i>Home health and hospice</i>		✓	☑
<b>Chronic Disease Prevention</b>			
<i>Cancer</i>	⊗	✓	☑
<i>Physical activity</i>	⊗	✓	☑
<i>Health education (health and wellness, fitness, nutrition, etc.)</i>		✓	☑

*Summary continued on the next page.*



### Mental and Behavioral Health

<i>More mental and behavioral health services/resources</i>	⊗	✓	☑
<i>Alcohol/substance use</i>	⊗	✓	☑

### Socioeconomic Measures

<i>Housing accessibility and affordability</i>		✓	☑
<i>Access to programs such as Medicaid and Supplemental Nutrition Assistance Program (SNAP) benefits</i>	⊗	✓	☑
<i>Internet availability at home</i>	⊗		
<i>Percentage of uninsured children and children in poverty</i>	⊗		



# **NEXT STEPS & RESOURCES**

## Prioritization of Health Needs

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

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

- Access to healthcare services
- Transportation

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

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

## Available Community Resources

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

- The Meagher County Office of Public Assistance provides information and/or referral services to applicants/recipients of public assistance programs.
- The Meagher County Health Department offers a variety of services to the community, including child/adult immunizations, disease surveillance, public health emergency preparedness, and referrals for care or resources.
- The Meagher County Community Center houses the Senior Center, which provides meals, wellness services, and activities to seniors in the area. The Senior Center also runs the Loan Closet, which provides donated durable medical equipment for short term individual use.
- Meagher County Schools
- Meals on Wheels prepares and delivers nutritious meals to seniors in the community.
- The Castle Mountain Apartments will provide subsidized senior housing for seniors in need in the community
- Montana Health Network is a collaborative effort to provide services to all residents of Montana
- Montana Hospital Association
- Montana Office of Rural Health (MORH) provides technical assistance to rural health systems and organizations

# Evaluation of Previous CHNA & Implementation Plan

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

- Transportation
- Women's Health
- Dental Services
- Community Engagement

The following tables include completed activities, accomplishments and impacts/outcomes within the facility's proposed goals. To view MMC's full Implementation Plan visit: [mvmc.org](https://mvmc.org).

## ***Goal 1: Enhance transportation services and knowledge of available senior services in Meagher County.***

	Activities	Accomplishments	Community Impact/Outcomes
<b>Strategy 1.1:</b> Continue to partner with Meagher County Transportation Committee to address area transportation needs	Work with community partners to seek external funding to assist in community transportation development and sustainability plan	MMC had weekly transport to Great Falls/Bozeman/Helena pre-COVID-19 pandemic.	This was an underutilized service.
	Provide hospital bus in support of transportation program development	The bus is still available for use as needed.	This was an underutilized service.
	Develop a community outreach campaign to educate community on new transportation resource	Worked with the Senior Center for community Education.	Outreach was well received.
	Explore potential models and programs to enhance transportation availability beyond Meagher County (for specialty consults, etc.)	We had weekly transport to Great Falls/Bozeman/Helena pre-COVID-19 pandemic.	This was an underutilized service.
	Explore alternative home care delivery models to reduce transportation burden for homebound patients	MMC continues to try to get home health to provide this service for our community.	Some home health services have been delivered in our community, but it's not adequate.
	Determine feasibility of expanding senior care services (such as respite care, home		

	health) to reduce travel burden		
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***Goal 2: Expand women's health services at Mountainview Medical Center.***

	Activities	Accomplishments	Community Impact/Outcomes
<b>Strategy 2.1:</b> Enhance access and outreach related to women's services at MMC	Explore feasibility of expanding women's health services to include visiting mammography, DEXA Scan, ED/Clinic behavioral health screenings, etc.	Continue to search for partners to deliver services for our community.	This activity is still in progress, however it's intended that this expansion of women's health services will improve health outcomes.
	Develop an MMC Women's and Children's health services brochure	Work on this activity halted during the COVID-19 pandemic.	Although this activity has been delayed, it's intended that it will improve awareness of local women's and children's health services.
	Convene partner group to explore sponsoring a local women's health (breast cancer awareness, etc.) community walk/event	COVID-19 impacted participation in community events, however MMC continues to sponsor local events.	Participation hampered through the COVID-19 pandemic.

***Goal 3: Expand access to dental services in Meagher County.***

	Activities	Accomplishments	Community Impact/Outcomes
<b>Strategy 3.1:</b> Develop dental services at Mountainview Medical Center	Recruit and retain dentist	Still in progress.	This activity is still in progress, however it's intended that this recruitment of a dentist will improve oral health outcomes.
	Expand dental screening and prevention programs for area residents (develop LTC resident dental screening program/protocol, determine feasibility of partnering with local schools to provide free dental screenings, explore opportunities to host dental screenings for low income individuals/families and those who have no insurance or are under insured)	MMC has a new dental hygienist that comes to the facility.	Improved oral health for our residents.

	Create dental service outreach and marketing	Still in progress	This activity is still in progress, however it's intended that this activity will improve awareness of local dental services.
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***Goal 4: Continue to foster relationships and enhance Community Engagement.***

	Activities	Accomplishments	Community Impact/Outcomes
<b>Strategy 4.1:</b> Enhance community engagement	Explore opportunities to enhance community educational offerings through presentations, media, brochures, etc. (fitness, weight loss, women's health, etc.)	Improved website. Held open meetings and created and posted videos, printed mail box flyers.	Improved engagement and pandemic awareness.
	Develop a patient advocate position at MMC to assist community in navigating the healthcare system	Care Coordinator has been established.	Improved navigation through the healthcare system.





# APPENDICES



## Appendix A- Steering Committee

<i>Steering Committee Member</i>	<i>Organization Affiliation</i>
<i>Rob Brandt</i>	CEO - Mountainview Medical Center (MMC)
<i>Jennifer Stidham</i>	Executive Assistant - MMC
<i>Priscilla Cates</i>	Director of Nursing (DON) - MMC
<i>Kay Lowe</i>	Clinic Manager - MMC
<i>Beth Hunt</i>	Senior Center
<i>Eva Kerr</i>	Meagher County Health
<i>Burt Hurwitz</i>	County Attorney- Meagher County



**Mountainview  
Medical Center**



## Appendix B- Public Health & Populations Consultation

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

### Name/Organization

Rob Brandt, CEO - Mountainview Medical Center (MMC)  
Jennifer Stidham, Executive Assistant - MMC  
Kay Lowe, Clinic Manager - MMC  
Beth Hunt, Senior Center  
Eva Kerr, Public Health Nurse - Meagher County Health  
Burt Hurwitz, County Attorney - Meagher County

### Type of Consultation (Steering Committee, Key Informant Interviews, etc.)

First Steering Committee Meeting	Dec. 3, 2021
Key Informant Interviews	March and April 2022
Second Steering Committee Meeting	May 16, 2022

### Public and Community Health

- We want to make sure county health department is included in the CHNA process so that they can use and leverage the data.
- I really think the questions on this survey do a great job obtaining a lot of information for the community regarding needs in public health.
- There were a few concerns on the data regarding vaccination numbers, unfortunately with the Hutterite Colonies vaccinating less and less it really drops our vaccine numbers in kids, including HPV.
- Also, the enteric illness I do not think are that high, as I have to investigate them all and really haven't had a crazy amount of them in the past several years.
- We think it's fine to keep work and economic stress variables on question 2 of the survey.
- I think it would be good to add COVID-19 to the survey. It is an ongoing issue that is not going away, so I think it's valuable to add.
- We should add a response to question 3 about the community's access to healthy foods.
- White Sulphur Springs has new fitness center but MMC as a facility does not have a fitness program. It would be good to keep fitness and weight loss as response

options in case there are potential partnerships or collaborations for active living initiatives.

- We better remove lactation/breastfeeding support from question 8 as it would be hard to implement within Meagher County. Babies are born out of the county and hopefully follow-up care is done by other providers.
- I think it's appropriate to add "don't understand healthcare system" to question 13. There's still a lot of confusion around payments, costs, and the health care system overall.
- We should add podiatry, pain clinic, ophthalmologist, and mental health counseling to question 23 which rates MMC's services.
- Should we ask about mask wearing with the injury prevention question?
- No, I don't think we should ask about mask wearing since the community is very vocal about their opinions.
- I don't think we need to include "non-binary" in the demographics if we already have "prefer to self-describe."
- At this point in the pandemic, I don't think we need to include "unemployed due to COVID-19" since everywhere is hiring and our unemployment is less than 1%. But we could include "reduced hours due to COVID-19."
- Since transportation has been an issue in previous CHNA's, I think we should add in the questions about transportation as it relates to healthcare.
- When asking about modes of transportation to appointments, we should remove "transit" and "taxi, rideshare" as there are no applicable options. We don't have a senior bus system in place either. It would be good to add "VA bus" as new response, though.

### Population: Low-Income, Underinsured

- Unemployment must not be a community concern considering we have less than 1% unemployment rate.
- Since MMC has a payment assistance program we can remove it as an option from question 7.

### Population: Seniors

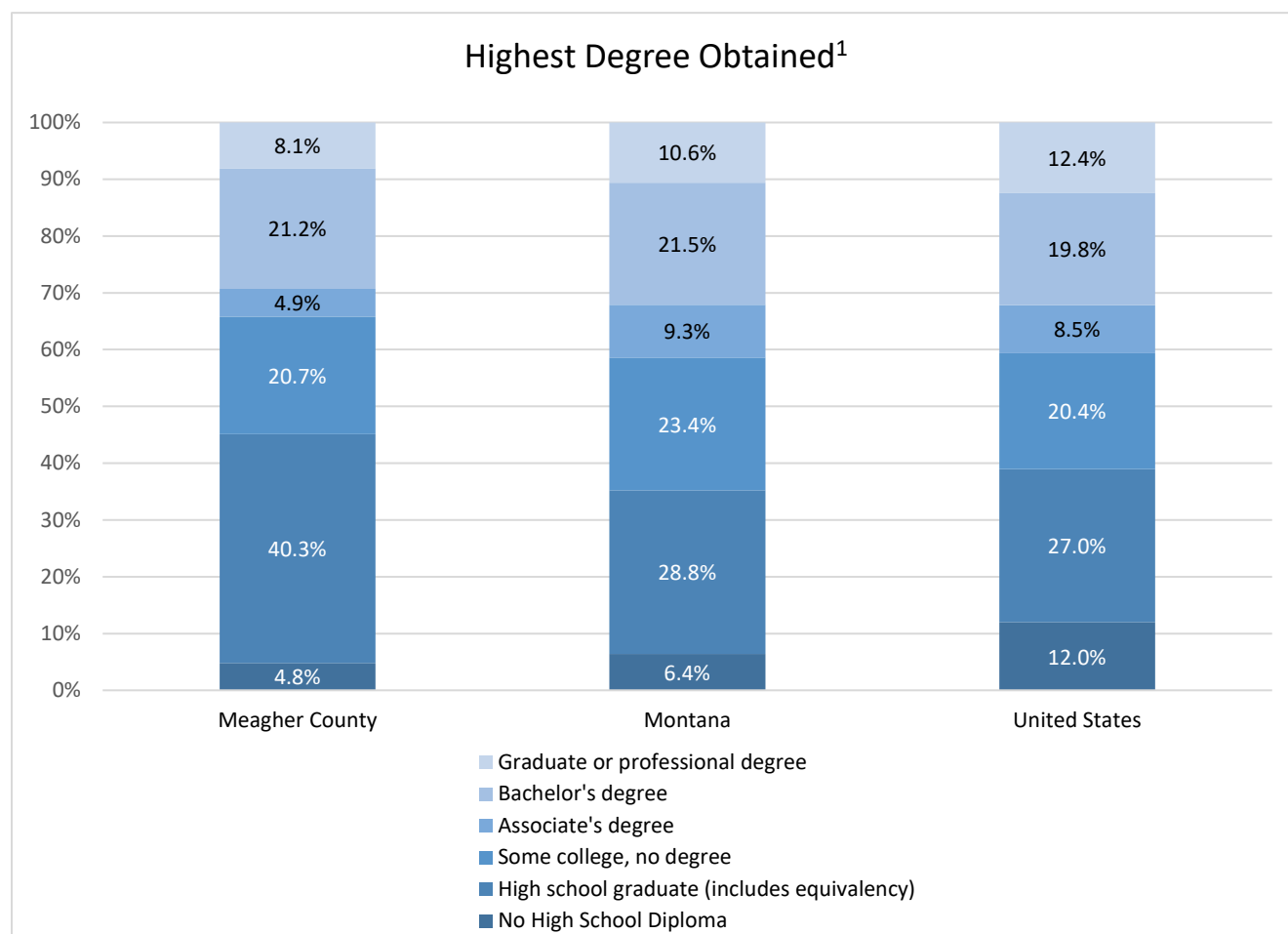
- There is a high demand for transportation to out of town appointments for seniors in the community. We should include some transportation specific questions in the survey.

## Appendix C- Meagher Co. Secondary Data

Demographic Measure (%)		County			Montana			Nation		
Population <sup>1</sup>		1,888			1,050,649			324,697,795		
Population Density <sup>1</sup>		0.8			7.1			85.5		
Veteran Status <sup>1</sup>		8.1%			10.4%			7.3%		
Disability Status <sup>1</sup>		14.5%			13.6%			12.6%		
Age <sup>1</sup>		<5	18-64	65+	<5	18-64	65+	<5	18-64	65+
		8.1%	56.8%	24.0%	5.8%	60.1%	18.2%	6.1%	61.7%	15.6%
Gender <sup>1</sup>		Male		Female	Male		Female	Male		Female
		51.6%		48.4%	50.3%		49.7%	49.2%		50.8%
Race/Ethnic Distribution <sup>1</sup>	White	93.8%			91.4%			75.3%		
	American Indian or Alaska Native	2.5%			8.3%			1.7%		
	Other <sup>†</sup>	5.0%			3.7%			26.5%		

<sup>1</sup> US Census Bureau - American Community Survey (2019)

<sup>†</sup> Black, Asian/Pacific Islanders, Hispanic & Non-Hispanic Ancestry



<sup>1</sup> US Census Bureau - American Community Survey (2019)

Socioeconomic Measures (%)	County	Montana	Nation
Median Income <sup>1</sup>	\$46,607	\$54,970	\$62,843
Unemployment Rate <sup>1</sup>	0.9%	4.0%	5.3%
Persons Below Poverty Level <sup>1</sup>	11.9%	13.1%	13.4%
Children in Poverty <sup>1</sup>	17.9%	15.8%	18.5%
Internet at Home <sup>2</sup>	63.7%	81.5%	-
Households with Population Age 65+ Living Alone <sup>2</sup>	118	52,166	-
Households Without a Vehicle <sup>2</sup>	17	21,284	-
Households Receiving SNAP <sup>2</sup>	83	56,724	-
Eligible Recipients of Free or Reduced Price Lunch <sup>3</sup> 2019/2020 school year	62.3%	42.9%	-
Enrolled in Medicaid <sup>4, 1</sup>	13.1%	9.7%	19.8%
Uninsured Adults <sup>5, 6</sup> Age <65	11.0%	12.0%	12.1%
Uninsured Children <sup>5, 6</sup> Age <18	8.0%	6.0%	5.1%

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

Maternal Child Health	County	Montana	Nation
General Fertility Rate* <sup>7</sup> Per 1,000 Women 15-44 years of age (2017-2019)	66.7	59.3	-
Preterm Births <sup>7</sup> Born less than 37 weeks (2017-2019)	NA	9.4%	-
Adolescent Birth Rate <sup>7</sup> Per 1,000 years females 15-19 years of age (2017-2019)	NA	18.3	-
Smoking during pregnancy <sup>3, 8</sup>	NA	16.5%	7.2%
Kotelchuck Prenatal Care** <sup>7</sup> Adequate or Adequate-Plus (2017-2019)	73.5%	75.7%	-
Low and very low birth weight infants <sup>7</sup> Less than 2500 grams (2017-2019)	NA	7.6%	-
Childhood Immunization Up-To-Date (UTD) <sup>§ 9</sup>	40.0%	64.8%	-

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

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

\*\*The Kotelchuck Index, also called the Adequacy of Prenatal Care Utilization (APNCU) Index, uses two crucial elements obtained from birth certificate data-when prenatal care began (initiation) and the number of prenatal visits from when prenatal care began until delivery (received services). The Kotelchuck index classifies the adequacy of initiation as follows: pregnancy months 1 and 2; months 3 and 4; months 5 and 6; and months 7 to 9. A ratio of observed to expected visits is calculated and grouped into four categories: Inadequate (received less than 50% of expected visits); Intermediate (50%-79%); Adequate (80%-109%); Adequate Plus (110% or more).

§ UTD = 4 DTaP, 3 Polio, 1 MMR, 3/4 Hib, 3 Hep B, 1 Var, 4 PCV by 24 – 35-month-old children.

Behavioral Health	County	Montana	Nation
Adult Smoking <sup>5</sup>	21.0%	19.0%	16.0%
Excessive Drinking <sup>5</sup>	21.0%	22.0%	15.0%
Adult Obesity <sup>5</sup>	29.0%	27.0%	26.0%
Poor Mental Health Days <sup>5</sup> (Past 30 days)	4.3	3.9	3.8
Physical Inactivity <sup>5</sup>	23.0%	22.0%	19.0%
Do NOT wear seatbelts <sup>10</sup> State Age-Adjusted Prevalence (2018) Nation Crude Prevalence (2018)	-	10.3%	6.3%
Drink and Drive <sup>10</sup> State Age-Adjusted Prevalence (2018) Nation Crude Prevalence (2018)	-	3.7%	3.1%

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

Cancer prevention & screening	County	Montana	Nation
Human Papillomavirus (HPV) vaccination UTD <sup>†† 11, 12</sup> Adolescents 13-17 years of age (2020)	30.8%	54.4%	58.6%
Cervical cancer screening in past 3 years <sup>13, 10</sup> Age adjusted (county/state) and crude (nation) prevalence among adult women aged 21–65 years (2018)	83.8%	76.8%	80.1%
Mammography in past 2 years <sup>13, 10</sup> Age adjusted (county/state) and crude (nation) prevalence among women 50-74 years (2018)	67.2%	73.4%	78.3%
Colorectal Cancer Screening <sup>13, 10</sup> Age adjusted (county) and crude (state/nation) prevalence among adults age 50-75 years (2018)	58.2%	64.5%	69.7%

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

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

Infectious Disease Incidence Rates <sup>14</sup> Per 100,000 people (2015-2017)	County	Montana
Enteric Diseases *	218.8	80.1
Hepatitis C virus	0.0	93.4
Sexually Transmitted Diseases (STD) †	127.6	551.6
Vaccine Preventable Diseases (VPD) §	145.9	91.5

<sup>14</sup> IBIS Community Snapshot, MT-DPPHS

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

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

Chronic Conditions <sup>10</sup>	County	Montana	Nation
<b>Cardiovascular Disease (CVD) prevalence</b> <i>Adults aged 18 years and older (2014-2016)</i>	**	7.9	8.6
<b>Chronic Obstructive Pulmonary Disease (COPD) prevalence</b> <i>Adults aged 18 years and older (2014-2016)</i>	**	6.6	6.4
<b>Diabetes Prevalence</b> <i>Adults aged 18 years and older (2014-2016)</i>	**	8.3	10.6
<b>Breast Cancer Incidence Rate</b> <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	125.0	124.1
<b>Cervical Cancer Incidence Rate</b> <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	7.9	7.4
<b>Colon and Rectum Cancer (CRC) Incidence Rate</b> <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	37.1	38.9
<b>Lung Cancer Incidence Rate</b> <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	52.2	60.0
<b>Melanoma Cancer Incidence Rate</b> <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	26.3	21.0
<b>Prostate Cancer Incidence Rate</b> <i>Age-Adjusted Per 100,000 population (2014-2016)</i>	**	109.6	103.0

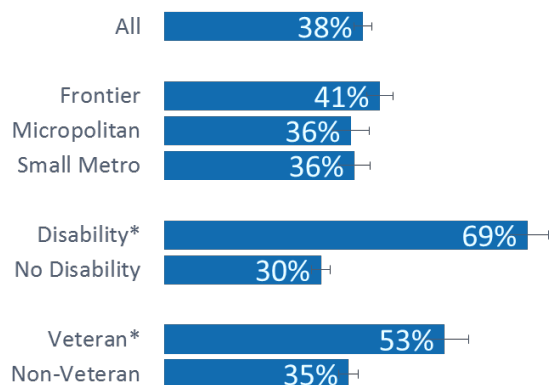
<sup>14</sup> IBIS Community Snapshot, MT-DPPHS

\*\* Data were suppressed to protect privacy.

Montana Adults with Self-Reported Chronic Condition <sup>10</sup>	
1. Arthritis	29.0%
2. Depression	24.1%
3. Asthma	10.0%
4. Diabetes	7.6%
5. COPD	6.8%
6. Cardiovascular disease	3.9%
7. Kidney disease	2.4%

<sup>10</sup> Behavioral Risk Factor Surveillance System, CDC (2019)

### Percent of Montana Adults with Two or More Chronic Conditions



Mortality	County	Montana	Nation
<b>Suicide Rate<sup>15</sup></b> <i>Per 100,000 population (2009-2018)</i>	**	23.9	-
<b>Veteran Suicide Rate<sup>15</sup></b> <i>Per 100,000 population (2009-2018)</i>	-	65.7	38.4
<b>Alzheimer's Disease Mortality Rate<sup>16</sup></b> <i>Age-Adjusted per 100,000 population (2017- 2019)</i>	-	21.7	-
<b>Pneumonia/Influenza Mortality Rate<sup>17</sup></b> <i>Age-Adjusted per 100,000</i>	-	10.5	12.3
<b>Leading Causes of Death<sup>16, 18</sup></b>	-	1. Heart Disease 2. Cancer 3. Chronic Lower Respiratory Disease (CLRD)	1. Heart Disease 2. Cancer 3. Unintentional injuries

<sup>15</sup> Suicide in Montana, MT-DPHHS (2021), <sup>16</sup> IBIS Mortality Query, MT- DPPHS (2019), <sup>17</sup> Kaiser State Health Facts, National Pneumonia Death Rate (2019), <sup>18</sup> National Vital Statistics, CDC (2019)

\*\* Data were suppressed to protect privacy.

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

<sup>10</sup> Behavioral Risk Factor Surveillance System, CDC (2019)

\*Annual household income < \$15,000



Youth Risk Behavior <sup>19</sup>	Montana		Nation
	White, non-Hispanic	American Indian/Alaska Native	
<b>Felt Sad or Hopeless</b> <i>Almost every day for two weeks or more in a row, during the past 12 months</i>	35.3%	39.6%	36.7%
<b>Attempted Suicide</b> <i>During the past 12 months</i>	8.7%	15.4%	8.9%
<b>Lifetime Cigarette Use</b> <i>Students that have ever tried smoking</i>	28.3%	48.9%	24.1%
<b>Currently Drink Alcohol</b> <i>Students that have had at least one drink of alcohol on at least one day during the past 30 days</i>	34.3%	25.3%	29.2%
<b>Lifetime Marijuana Use</b> <i>Students that have used marijuana one or more times during their life</i>	36.9%	58.9%	36.8%
<b>Texting and Driving</b> <i>Among students who drove a car in the past 30 days</i>	55.2%	39.6%	39.0%
<b>Carried a Weapon on School Property</b> <i>In the last 30 days</i>	7.2%	3.2%	2.8%

<sup>19</sup> Montana Youth Risk Behavior Survey (2019)

## Secondary Data – Healthcare Workforce Data 2021

### Health Professional Shortage Area & Medically Underserved Areas/Populations

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

Health Professional Shortage Area Designation <sup>1</sup> - Meagher County, Montana		
Discipline	HPSA Score	HPSA
Primary Care	7	✓ Low income population
Dental Health	7	✓ Geographic
Mental Health	12	✓ High needs geographic population
HPSA Scores range from 0 to 25 (primary care and mental health) and 0 to 26 (dental health) where the higher the score, the greater the priority		

<sup>1</sup> Health Resources and Services Administration (2021)

Provider Supply and Access to Care <sup>2</sup>				
Measure	Description	Meagher Co. (N = 1) **	Montana (N = 49) **	National (N = 1347) **
Primary care physicians	Ratio of population to primary care physicians	914:1	1349:1	1050:1
Other primary care providers	Ratio of population to other primary care providers including nurse practitioners, physician assistants, and clinical nurse specialists	1851:1	878:1	726:1
Dentists	Ratio of population to dentists	1:0	1388:1	1260:1
Mental health providers	Ratio of population to mental health providers	1851:1	356:1	310:1

<sup>2</sup> Critical Access Hospital Measurement and Performance Assessment System (CAHMPAS) - FLEX Monitoring (2019)

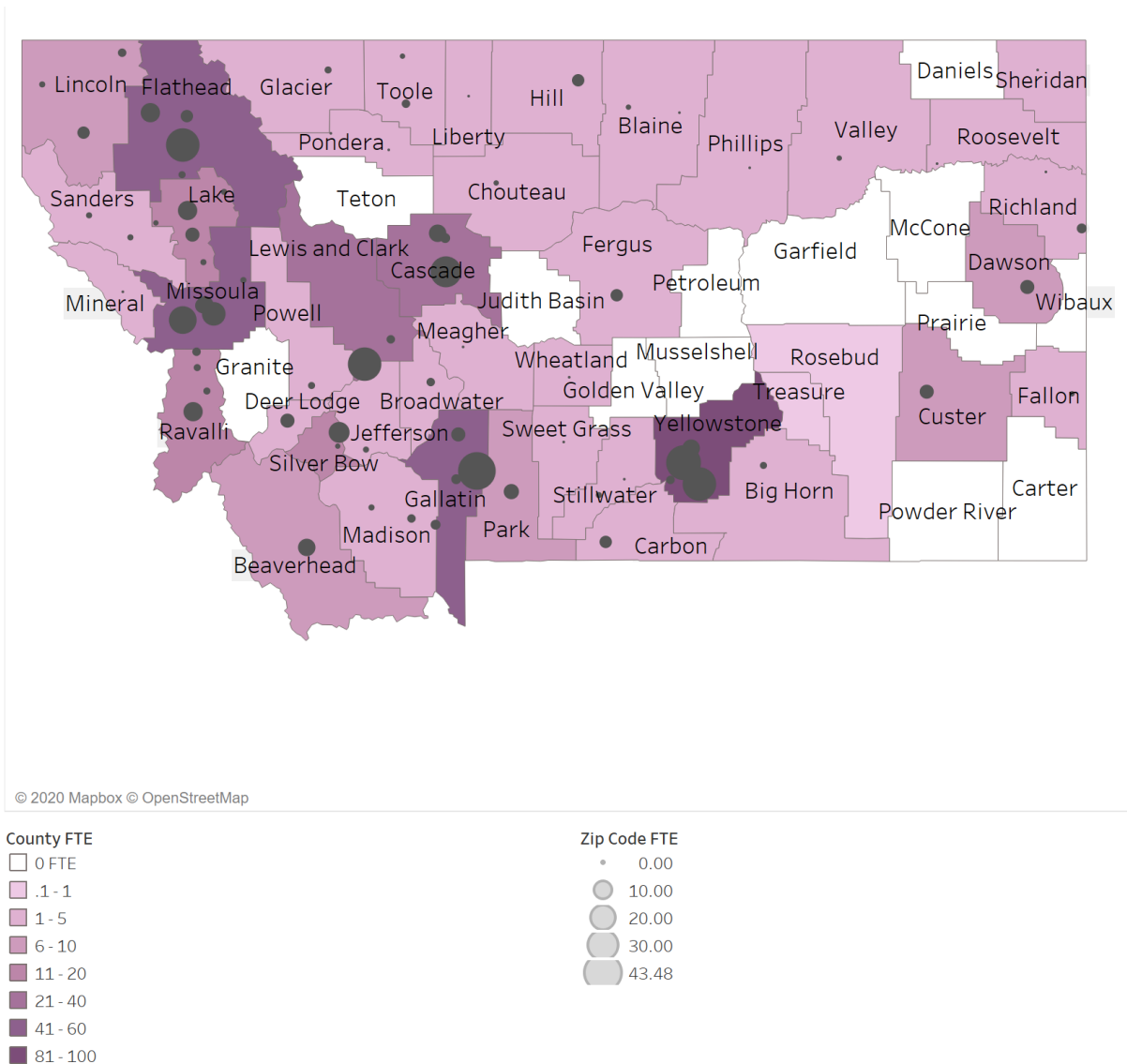
\*\* Total number of CAHs in region

## Healthcare workforce Distribution Maps

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

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

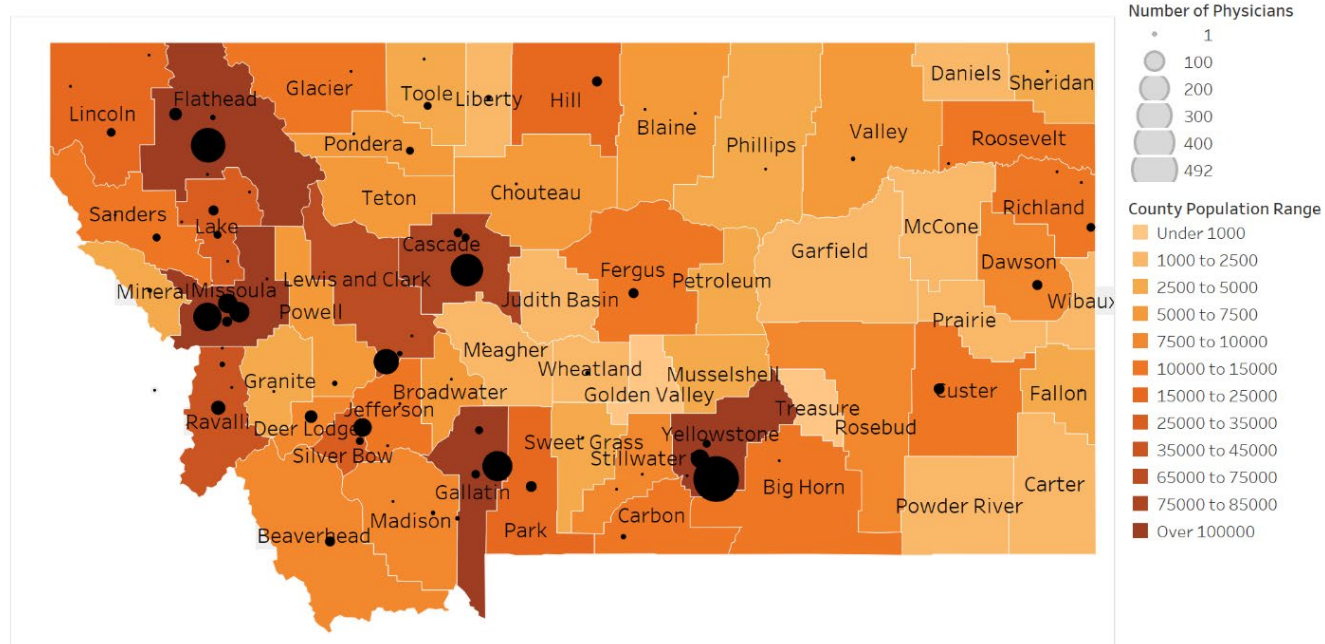
## Primary Care Physician FTE: Practice Locations Plotted by Zip Code



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

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

## Physicians (All Specialties) by County Population Range



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

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

## Appendix D- Survey Cover Letter

January 21, 2022

Dear [LASTNAME] household:



**Mountainview  
Medical Center**

Participate in our Community Health Needs Assessment survey for a chance to **WIN one \$200 Mastercard gift card!**

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

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

1. Due date to complete survey: February 25, 2022
2. Complete the enclosed survey and return it in the envelope provided - no stamp needed.
3. You can also access the survey at <http://helpslab.montana.edu/survey.html>. Select "Mountainview Medical Center Survey." Your access code is [CODED]
4. The winner of the Mastercard gift card will be contacted the week of March 7<sup>th</sup>.

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

Thank you for your assistance. We appreciate your time.

Sincerely,

Rob Brandt, CEO

# Appendix E- Survey Instrument

## Community Health Needs Assessment Survey White Sulphur Springs, Montana

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

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

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

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

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Alcohol abuse/substance abuse | <input type="checkbox"/> Hunger                                | <input type="checkbox"/> Sexual assault                                |
| <input type="checkbox"/> Alzheimer's/dementia          | <input type="checkbox"/> Lack of access to healthcare          | <input type="checkbox"/> Social isolation/loneliness                   |
| <input type="checkbox"/> Cancer                        | <input type="checkbox"/> Lack of dental care                   | <input type="checkbox"/> Stroke  |
| <input type="checkbox"/> Child abuse/neglect           | <input type="checkbox"/> Lack of exercise                      | <input type="checkbox"/> Suicide                                       |
| <input type="checkbox"/> COVID-19                      | <input type="checkbox"/> Lack of transportation                | <input type="checkbox"/> Tobacco use (vaping, e-cigarettes, smokeless) |
| <input type="checkbox"/> Depression/anxiety            | <input type="checkbox"/> Mental health issues                  | <input type="checkbox"/> Work/economic stress                          |
| <input type="checkbox"/> Diabetes                      | <input type="checkbox"/> Motor vehicle accidents               | <input type="checkbox"/> Work related accidents/injuries               |
| <input type="checkbox"/> Domestic violence             | <input type="checkbox"/> Overweight/obesity                    | <input type="checkbox"/> Other: _____                                  |
| <input type="checkbox"/> Heart disease                 | <input type="checkbox"/> Recreation related accidents/injuries |  |

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

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

4. How do you rate your knowledge of the health services that are available through Mountainview Medical Center?

- ☐ Excellent      ☐ Good      ☐ Fair      ☐ Poor

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

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Community fliers        | <input type="checkbox"/> Mailings/newsletter | <input type="checkbox"/> Radio                    |
| <input type="checkbox"/> Community health fair   | <input type="checkbox"/> Newspaper           | <input type="checkbox"/> Social media             |
| <input type="checkbox"/> Community Senior Center | <input type="checkbox"/> PBS                 | <input type="checkbox"/> Website/internet         |
| <input type="checkbox"/> Friends/family          | <input type="checkbox"/> Presentations       | <input type="checkbox"/> Word of mouth/reputation |
| <input type="checkbox"/> Healthcare provider     | <input type="checkbox"/> Public health nurse | <input type="checkbox"/> Other: _____             |

6. Which community health resources, other than the hospital or clinic, have you or your family members used in the last three years? **(Select ALL that apply)**
- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Adult mental health services | <input type="checkbox"/> Community health fair | <input type="checkbox"/> Senior Center |
| <input type="checkbox"/> Children's Mental Health     | <input type="checkbox"/> Pharmacy              | <input type="checkbox"/> Other: _____  |
| <input type="checkbox"/> Chiropractor                 | <input type="checkbox"/> Public/County health  |  |
7. In your opinion, what would improve our community's access to healthcare? **(Select ALL that apply)**
- |  |   |
|--|---|
| <input type="checkbox"/> Cultural sensitivity                      | <input type="checkbox"/> More specialists                   |
| <input type="checkbox"/> Greater health education services         | <input type="checkbox"/> Outpatient services expanded hours |
| <input type="checkbox"/> Improved quality of care                  | <input type="checkbox"/> Telemedicine                       |
| <input type="checkbox"/> Interpreter services                      | <input type="checkbox"/> Transportation assistance          |
| <input type="checkbox"/> More information about available services | <input type="checkbox"/> Other: _____                       |
| <input type="checkbox"/> More primary care providers               |   |
8. If any of the following classes/programs were made available to the community, which would you or your family be most interested in attending? **(Select ALL that apply)**
- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Advance healthcare directives | <input type="checkbox"/> Fitness             | <input type="checkbox"/> Parenting                     |
| <input type="checkbox"/> Alcohol/substance abuse       | <input type="checkbox"/> Grief counseling    | <input type="checkbox"/> Prenatal                      |
| <input type="checkbox"/> Alzheimer's/dementia          | <input type="checkbox"/> Health and wellness | <input type="checkbox"/> Quitting smoking/chew tobacco |
| <input type="checkbox"/> Anger management              | <input type="checkbox"/> Heart disease       | <input type="checkbox"/> Support groups                |
| <input type="checkbox"/> Cancer                        | <input type="checkbox"/> Insurance education | <input type="checkbox"/> Weight loss                   |
| <input type="checkbox"/> Diabetes                      | <input type="checkbox"/> Men's health        | <input type="checkbox"/> Women's health                |
| <input type="checkbox"/> Estate planning               | <input type="checkbox"/> Mental health       | <input type="checkbox"/> Other: _____                  |
| <input type="checkbox"/> First aid/CPR                 | <input type="checkbox"/> Nutrition           |  |
9. Which of the following preventive services have you used in the past year? **(Select ALL that apply)**
- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Children's checkup/Well baby | <input type="checkbox"/> Hearing check                | <input type="checkbox"/> Routine health checkup |
| <input type="checkbox"/> Cholesterol check            | <input type="checkbox"/> Mammography                  | <input type="checkbox"/> Vision check           |
| <input type="checkbox"/> Colonoscopy                  | <input type="checkbox"/> Mental health counseling     | <input type="checkbox"/> None                   |
| <input type="checkbox"/> Community health fair        | <input type="checkbox"/> Pap test                     | <input type="checkbox"/> Other: _____           |
| <input type="checkbox"/> Dental check                 | <input type="checkbox"/> Prostate (PSA)               |   |
| <input type="checkbox"/> Flu shot/immunizations       | <input type="checkbox"/> Routine blood pressure check |   |
10. What additional healthcare services would you use if available locally? **(Select ALL that apply)**
- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Assisted living     | <input type="checkbox"/> Hearing check | <input type="checkbox"/> MRI                |
| <input type="checkbox"/> Colonoscopy         | <input type="checkbox"/> Home health   | <input type="checkbox"/> Orthodontics       |
| <input type="checkbox"/> Dental services     | <input type="checkbox"/> Hospice       | <input type="checkbox"/> Pediatric services |
| <input type="checkbox"/> Diabetic counseling | <input type="checkbox"/> Mammography   | <input type="checkbox"/> Prenatal services  |
| <input type="checkbox"/> Eye doctor          | <input type="checkbox"/> Mental health | <input type="checkbox"/> Other: _____       |
11. How important are local healthcare providers and services (i.e.: hospitals, clinics, long term care, etc.) to the economic well-being of the area?
- |   |                                    |  |                                     |
|---|------------------------------------|--|-------------------------------------|
| <input type="checkbox"/> Very important | <input type="checkbox"/> Important | <input type="checkbox"/> Not important | <input type="checkbox"/> Don't know |
|---|------------------------------------|--|-------------------------------------|
12. In the past three years, was there a time when you or a member of your household thought you needed healthcare services but did NOT get or delayed getting medical services?
- ☐ Yes      ☐ No **(If no, skip to question 14)**

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

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Could not get an appointment       | <input type="checkbox"/> Had no one to care for the children | <input type="checkbox"/> Office wasn't open when I could go  |
| <input type="checkbox"/> Could not get off work             | <input type="checkbox"/> It cost too much                    | <input type="checkbox"/> Too long to wait for an appointment |
| <input type="checkbox"/> COVID-19 barriers/concerns         | <input type="checkbox"/> It was too far to go                | <input type="checkbox"/> Too nervous or afraid               |
| <input type="checkbox"/> Didn't know where to go            | <input type="checkbox"/> Language barrier                    | <input type="checkbox"/> Transportation problems             |
| <input type="checkbox"/> Don't like doctors/providers       | <input type="checkbox"/> My insurance didn't cover it        | <input type="checkbox"/> Unsure if services were available   |
| <input type="checkbox"/> Don't understand healthcare system | <input type="checkbox"/> No insurance                        | <input type="checkbox"/> Other: _____                        |
|   | <input type="checkbox"/> Not treated with respect            |  |

**14. In the past three years, have you or a household member seen a primary healthcare provider such as a family physician, physician assistant or nurse practitioner for healthcare services?**

- ☐ Yes ☐ No (If no, skip to question 17)

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

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Benefis Health System    | <input type="checkbox"/> Livingston HealthCare       | <input type="checkbox"/> VA                            |
| <input type="checkbox"/> Billings Clinic          | <input type="checkbox"/> Mountainview Medical Center | <input type="checkbox"/> Wheatland Memorial Healthcare |
| <input type="checkbox"/> Bozeman Health           | <input type="checkbox"/> St. Peter's Hospital        | <input type="checkbox"/> Other: _____                  |
| <input type="checkbox"/> Broadwater Health Center | <input type="checkbox"/> St. Vincent Healthcare      |  |

**16. Why did you select the primary care provider you are currently seeing? (Select ALL that apply)**

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

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

- ☐ Yes ☐ No (If no, skip to question 20)

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

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Benefis Health System    | <input type="checkbox"/> Livingston HealthCare       | <input type="checkbox"/> VA                            |
| <input type="checkbox"/> Billings Clinic          | <input type="checkbox"/> Mountainview Medical Center | <input type="checkbox"/> Wheatland Memorial Healthcare |
| <input type="checkbox"/> Bozeman Health           | <input type="checkbox"/> St. Peter's Hospital        | <input type="checkbox"/> Other: _____                  |
| <input type="checkbox"/> Broadwater Health Center | <input type="checkbox"/> St. Vincent Healthcare      |  |

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

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



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

- ☐ Yes      ☐ No (If no, skip to question 23)

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

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Benefis Health System    | <input type="checkbox"/> Community Medical Center                        | <input type="checkbox"/> St. Peter's Hospital          |
| <input type="checkbox"/> Billings Clinic          | <input type="checkbox"/> Livingston HealthCare                           | <input type="checkbox"/> St. Vincent Healthcare        |
| <input type="checkbox"/> Bozeman Health           | <input type="checkbox"/> Mountainview Medical Center                     | <input type="checkbox"/> VA                            |
| <input type="checkbox"/> Bridger Orthopedic       | <input type="checkbox"/> St. Patrick Hospital and Health Sciences Center | <input type="checkbox"/> Wheatland Memorial Healthcare |
| <input type="checkbox"/> Broadwater Health Center |  | <input type="checkbox"/> Other: _____                  |

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

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

**23.** How do you get to and from the hospital, clinic, or the majority of other medical appointments? (Select ALL that apply)

- |   |   |                                       |
|---|---|---------------------------------------|
| <input type="checkbox"/> Single Occupancy Vehicle (Car, truck, tractor) | <input type="checkbox"/> Dial-A-Ride Program (senior volunteer program) | <input type="checkbox"/> Walk         |
| <input type="checkbox"/> Ride with a Family Member or Friend            | <input type="checkbox"/> Bike   | <input type="checkbox"/> VA bus       |
|   |   | <input type="checkbox"/> Other: _____ |

**24.** What distance do you typically have to travel for medical care? (Select ALL that apply)

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Less than 1 mile | <input type="checkbox"/> 5 – 9 Miles   | <input type="checkbox"/> 25 – 49 Miles |
| <input type="checkbox"/> 1 – 4 Miles      | <input type="checkbox"/> 10 – 24 Miles | <input type="checkbox"/> 50 + Miles    |

**25.** Have you ever missed a medical appointment due to a transportation issue?

- ☐ Yes      ☐ No (if no, skip to question 27)

**26.** What issue(s) caused you to either be late or miss medical care? (Select ALL that apply)

- |   |  |
|---|--|
| <input type="checkbox"/> Lack of transportation (no car, broke down)  | <input type="checkbox"/> Weather conditions  |
| <input type="checkbox"/> Unreliable/No transit service                | <input type="checkbox"/> Time of appointment |
| <input type="checkbox"/> Unsafe roads/sidewalks for walking or biking | <input type="checkbox"/> Other: _____        |
| <input type="checkbox"/> Too far to travel                            |  |

**27.** Has your medical provider ever asked you about how you are going to get to a medical appointment?

- ☐ Yes      ☐ No

Turn to BACK of page to continue

28. If there was a service that provided transportation to and from medical appointments in White Sulphur Springs as well as to further communities like Helena, Bozeman, or Billings, would you utilize the service?

☐ Yes ☐ No

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

	Excellent	Good	Fair	Poor	Haven't Used	Don't Know
Ambulance services	4	3	2	1	N/A	DK
Billing services	4	3	2	1	N/A	DK
Clinic	4	3	2	1	N/A	DK
Chiropractor	4	3	2	1	N/A	DK
Emergency room	4	3	2	1	N/A	DK
Hospital services	4	3	2	1	N/A	DK
Laboratory	4	3	2	1	N/A	DK
Mental health counseling	4	3	2	1	N/A	DK
Ophthalmologist (eye care)	4	3	2	1	N/A	DK
Pain clinic	4	3	2	1	N/A	DK
Pharmacy	4	3	2	1	N/A	DK
Podiatry	4	3	2	1	N/A	DK
Physical therapy	4	3	2	1	N/A	DK
Radiology/X-ray/CT Scan	4	3	2	1	N/A	DK

30. In the past three years, have there been periods of at least three consecutive months where you felt depressed on most days?

☐ Yes ☐ No

31. Over the past month, how often have you had physical activity for at least 20 minutes?

☐ Daily ☐ 3-5 times per month ☐ No physical activity  
☐ 2-4 times per week ☐ 1-2 times per month

32. Has cost prohibited you from getting a prescription or taking your medication regularly?

☐ Yes ☐ No ☐ Not applicable

33. In the past year, did you worry that you would not have enough food?

☐ Yes ☐ No

34. Which of the following injury prevention measures do you use regularly? **(Select ALL that apply)**

☐ Child car seat/booster ☐ Helmet ☐ None  
☐ Designated driver ☐ Regular exercise  
☐ Ear/hearing protection ☐ Seat belt

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

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Employer sponsored           | <input type="checkbox"/> Indian Health                  | <input type="checkbox"/> VA/military            |
| <input type="checkbox"/> Health Insurance Marketplace | <input type="checkbox"/> Medicaid                       | <input type="checkbox"/> None/pay out of pocket |
| <input type="checkbox"/> Health Savings Account       | <input type="checkbox"/> Medicare                       | <input type="checkbox"/> Other: _____           |
| <input type="checkbox"/> Healthy MT Kids              | <input type="checkbox"/> Private insurance/private plan |   |

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

- ☐ Excellent                      ☐ Good                      ☐ Fair                      ☐ Poor

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

- |  |  |
|--|--|
| <input type="checkbox"/> Can't afford to pay for medical insurance | <input type="checkbox"/> Too confusing/don't know how to apply |
| <input type="checkbox"/> Employer does not offer insurance         | <input type="checkbox"/> Other: _____                          |
| <input type="checkbox"/> Choose not to have medical insurance      |  |

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

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

### **Demographics**

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

**39. Where do you currently live, by zip code?**

- |  |   |
|--|---|
| <input type="checkbox"/> 59645 White Sulphur Springs | <input type="checkbox"/> 59053 Martinsdale/Lennep |
| <input type="checkbox"/> 59642 Ringling              | <input type="checkbox"/> Other: _____             |

**40. What is your gender?**

- ☐ Male                      ☐ Female                      ☐ Prefer to self-describe \_\_\_\_\_

**41. What age range represents you?**

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

**42. What is your employment status?**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Work full time | <input type="checkbox"/> Reduced hours due to COVID-19 | <input type="checkbox"/> Unemployed, but looking          |
| <input type="checkbox"/> Work part time | <input type="checkbox"/> Student                       | <input type="checkbox"/> Not currently seeking employment |
| <input type="checkbox"/> Retired        | <input type="checkbox"/> Collect disability            | <input type="checkbox"/> Other: _____                     |

**[CODED]**

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

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

**THANK YOU VERY MUCH FOR YOUR TIME**

**Please note that all information will remain confidential**

## Appendix F- Cross Tabulation Analysis

### Knowledge Rating of Mountainview Medical Center Services by How Respondents Learn About Healthcare Services

	<b>Excellent</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>	<b>Total</b>
<b>Word of mouth/reputation</b>	9.2% (7)	63.2% (48)	25.0% (19)	2.6% (2)	<b>76</b>
<b>Friends/family</b>	11.7% (7)	65.0% (39)	21.7% (13)	1.7% (1)	<b>60</b>
<b>Healthcare provider</b>	19.6% (9)	65.2% (30)	10.9% (5)	4.3% (2)	<b>46</b>
<b>Community Senior Center</b>	7.1% (3)	69.0% (29)	21.4% (9)	2.4% (1)	<b>42</b>
<b>Public health nurse</b>	12.8% (5)	76.9% (30)	10.3% (4)	-	<b>39</b>
<b>Social media</b>	15.4% (4)	65.4% (17)	19.2% (5)	-	<b>26</b>
<b>Newspaper</b>	-	70.8% (17)	20.8% (5)	8.3% (2)	<b>24</b>
<b>Community health fair</b>	8.7% (2)	78.3% (18)	13.0% (3)	-	<b>23</b>
<b>Mailings/newsletter</b>	22.2% (4)	55.6% (10)	16.7% (3)	5.6% (1)	<b>18</b>
<b>Website/internet</b>	13.3% (2)	53.3% (8)	26.7% (4)	6.7% (1)	<b>15</b>
<b>Community fliers</b>	7.7% (1)	69.2% (9)	15.4% (2)	7.7% (1)	<b>13</b>
<b>PBS</b>	-	66.7% (2)	33.3% (1)	-	<b>3</b>
<b>Other</b>	42.9% (3)	14.3% (1)	28.6% (2)	14.3% (1)	<b>7</b>

Presentations and Radio removed from method of learning about services (first column) due to non-response.

## Delay or Did Not Get Need Healthcare Services by Residence

	<b>Yes</b>	<b>No</b>	<b>Total</b>
<b>59645 White Sulphur Springs</b>	42.2% (46)	57.8% (63)	<b>109</b>
<b>59053 Martinsdale/ Lennep</b>	14.3% (1)	85.7% (6)	<b>7</b>
<b>59642 Ringling</b>	50.0% (1)	50.0% (1)	<b>2</b>
<b>Other</b>	50.0% (1)	50.0% (1)	<b>2</b>
<b>TOTAL</b>	<b>40.8% (49)</b>	<b>59.2% (71)</b>	<b>100.0% (120)</b>

## Location of primary care clinic most utilized by residence

	Benefis Health System	Billings Clinic	Bozeman Health	Broadwater Health Center	Livingston HealthCare	Mountainview Medical Center	St. Peters Hospital	St. Vincent Healthcare	VA	Wheatland Memorial Healthcare	Other	TOTAL
<b>59645 White Sulphur Springs</b>	5.8% (6)	1.0% (1)	7.7% (8)	1.0% (1)	5.8% (6)	40.4% (42)	3.8% (4)	1.9% (2)	2.9% (3)	-	29.8% (31)	<b>104</b>
<b>59053 Martinsdale / Lennep</b>	-	12.5% (1)	12.5% (1)	12.5% (1)	-	25.0% (2)	-	-	-	12.5% (1)	25.0% (2)	<b>8</b>
<b>59642 Ringling</b>	-	-	-	-	-	-	50.0% (1)	-	-	-	50.0% (1)	<b>2</b>
<b>Other</b>	-	-	-	-	-	100.0% (1)	-	-	-	-	-	<b>1</b>
<b>TOTAL</b>	<b>5.2% (6)</b>	<b>1.7% (2)</b>	<b>7.8% (9)</b>	<b>1.7% (2)</b>	<b>5.2% (6)</b>	<b>39.1% (45)</b>	<b>4.3% (5)</b>	<b>1.7% (2)</b>	<b>2.6% (3)</b>	<b>0.9% (1)</b>	<b>29.6% (34)</b>	<b>100.0% (115)</b>

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

	Benefis Health System	Billings Clinic	Bozeman Health	Broadwater Health Center	Livingston HealthCare	Mountainview Medical Center	St. Peters Hospital	St. Vincent Healthcare	VA	Wheatland Memorial Healthcare	Other	TOTAL
<b>Prior experience with clinic</b>	-	4.1% (2)	6.1% (3)	2.0% (1)	8.2% (4)	40.8% (20)	6.1% (3)	2.0% (1)	-	2.0% (1)	28.6% (14)	<b>49</b>
<b>Closest to home</b>	2.2% (1)	-	2.2% (1)	-	-	65.2% (30)	2.2% (1)	-	2.2% (1)	2.2% (1)	23.9% (11)	<b>46</b>
<b>Clinic/provider's reputation for quality</b>	-	3.0% (1)	12.1% (4)	3.0% (1)	6.1% (2)	42.4% (14)	3.0% (1)	3.0% (1)	-	-	27.3% (9)	<b>33</b>
<b>Appointment availability</b>	3.7% (1)	-	3.7% (1)	3.7% (1)	-	55.6% (15)	-	-	-	3.7% (1)	29.6% (8)	<b>27</b>
<b>Referred by physician or other provider</b>	13.6% (3)	4.5% (1)	27.3% (6)	-	-	4.5% (1)	9.1% (2)	9.1% (2)	4.5% (1)	-	27.3% (6)	<b>22</b>
<b>Privacy/confidentiality</b>	-	-	25.0% (4)	6.3% (1)	12.5% (2)	25.0% (4)	-	6.3% (1)	-	-	25.0% (4)	<b>16</b>
<b>Recommended by family or friends</b>	-	-	6.7% (1)	13.3% (2)	-	26.7% (4)	6.7% (1)	6.7% (1)	-	6.7% (1)	33.3% (5)	<b>15</b>
<b>Length of waiting room time</b>	-	-	16.7% (1)	-	-	66.7% (4)	-	-	-	-	16.7% (1)	<b>6</b>
<b>VA/Military requirement</b>	-	-	-	-	-	-	-	-	50.0% (3)	-	50.0% (3)	<b>6</b>
<b>Required by insurance plan</b>	20.0% (1)	-	-	-	-	80.0% (4)	-	-	-	-	-	<b>5</b>
<b>Cost of care</b>	33.3% (1)	-	-	-	33.3% (1)	-	-	-	-	-	33.3% (1)	<b>3</b>
<b>Other</b>	-	-	12.5% (2)	-	12.5% (2)	31.3% (5)	-	-	-	-	43.8% (7)	<b>16</b>

Indian Health Services removed from reason for primary clinic selection (first column) due to non-response.



## Location of most utilized hospital by residence

	Benefis Health System	Billings Clinic	Bozeman Health	Livingston HealthCare	Mountainview Medical Center	St. Peters Hospital	St. Vincent Healthcare	VA	Other	Total
<b>59645 White Sulphur Springs</b>	12.1% (8)	6.1% (4)	13.6% (9)	4.5% (3)	31.8% (21)	9.1% (6)	3.0% (2)	1.5% (1)	18.2% (12)	<b>66</b>
<b>59053 Martinsdale/Lennep</b>	-	-	40.0% (2)	-	20.0% (1)	-	20.0% (1)	-	20.0% (1)	<b>5</b>
<b>Other</b>	-	-	-	-	100.0% (1)	-	-	-	-	<b>1</b>
<b>TOTAL</b>	<b>11.1% (8)</b>	<b>5.6% (4)</b>	<b>15.3% (11)</b>	<b>4.2% (3)</b>	<b>31.9% (23)</b>	<b>8.3% (6)</b>	<b>4.2% (3)</b>	<b>1.4% (1)</b>	<b>18.1% (13)</b>	<b>100.0% (72)</b>

Broadwater Health Center and Wheatland Memorial Healthcare removed from hospital location (top row) due to non-response. 59642 Ringling removed from residence (first column) due to non-response.

## Location of most recent hospitalization by reasons for hospital selection

	Benefis Health System	Billings Clinic	Bozeman Health	Livingston HealthCare	Mountainview Medical Center	St. Peters Hospital	St. Vincent Healthcare	VA	Other	Total
<b>Closest to home</b>	6.1% (2)	-	6.1% (2)	6.1% (2)	57.6% (19)	9.1% (3)	-	-	15.2% (5)	<b>33</b>
<b>Emergency, no choice</b>	5.3% (1)	5.3% (1)	5.3% (1)	-	57.9% (11)	5.3% (1)	5.3% (1)	-	15.8% (3)	<b>19</b>
<b>Recommended by family or friends</b>	28.6% (2)	-	14.3% (1)	14.3% (1)	14.3% (1)	-	-	-	28.6% (2)	<b>7</b>
<b>Closest to work</b>	-	-	33.3% (1)	-	33.3% (1)	-	-	-	33.3% (1)	<b>3</b>
<b>Cost of care</b>	33.3% (1)	-	-	33.3% (1)	-	-	-	-	33.3% (1)	<b>3</b>
<b>Privacy/confidentiality</b>	-	-	-	-	33.3% (1)	33.3% (1)	33.3% (1)	-	-	<b>3</b>
<b>Financial assistance programs</b>	-	-	-	-	-	-	100.0% (2)	-	-	<b>2</b>
<b>Hospital's reputation for quality</b>	-	-	-	-	-	-	100.0% (2)	-	-	<b>2</b>
<b>Referred by physician or other provider</b>	-	-	-	-	-	-	100.0% (2)	-	-	<b>2</b>
<b>Required by insurance plan</b>	50.0% (1)	-	-	-	50.0% (1)	-	-	-	-	<b>2</b>
<b>VA/Military requirement</b>	-	-	-	-	50.0% (1)	-	-	50.0% (1)	-	<b>2</b>
<b>Prior experience with hospital</b>	-	100.0% (1)	-	-	-	-	-	-	-	<b>1</b>
<b>Other</b>	-	-	37.5% (3)	-	37.5% (3)	12.5% (1)	-	-	12.5% (1)	<b>8</b>

Broadwater Health Center and Wheatland Memorial Healthcare removed from hospital location (top row) due to non-response.

## Appendix G- Responses to Other & Comments

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

- Kidney dialysis
- Unknown
- Limited healthcare
- Lack of in-home care.
- Being [expletive] scared of COVID.
- Not sure
- Cost

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

- Alcohol abuse/substance abuse (3)
- Cancer (1)
- COVID-19
- Heart disease (1)
- Lack of dental care (1)
- Lack of exercise (3)
- Lack of transportation (1)
- Motor vehicle accidents (1)
- Overweight/obesity (3)
- Social isolation/loneliness (1)
- Stroke (1)
- Suicide (1)
- Tobacco use (vaping, e-cigarettes, smokeless) (2)
- Work related accidents/injuries (1)

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

- Access to help when needed.

\*Responses when more than 3 were selected (1 participant):

- Affordable housing (1)
- Community involvement (1)
- Religious or spiritual values (1)
- Senior care (1)

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

- Council on Aging
- On Board for <20 years

- Call the Mountainview Medical Center (MMC)
- Main street
- Emergency scenes/Fire Department
- We had to call 911 once and found out how good they are.
- Mom

**6.** Which community health resources, other than the hospital or clinic, have you or your family members used in the last three years?

- Massage
- Dental, Eye Care
- Physical therapy (2)
- Nurse – COVID vaccination
- Drug Store
- Nursing Home
- M.V.M.C. C.D.L. Physical

**7.** In your opinion, what would improve our community's access to healthcare?

- Financial Aid
- I have no idea.
- Lower cost
- Affordability
- Affordable Health Care
- A monthly phone call from MMC to check on them.
- Cost transparency!
- Dental care
- The community does well with the services the providers are able to give and they refer when necessary.
- Quit scaring people with COVID standards.
- To be seen for all needs.
- Dental and eye doctor
- Not sure
- Less cost
- Portable mobile MRI equipment

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

- VA support
- Medicare plans yearly for seniors
- None
- Not sure
- Cooking classes
- Not sure

- Type 2 Diabetes diet management

**9. Which of the following preventive services have you used in the past year?**

- COVID-19 vaccination (3)
- Dermatologist yearly check
- DTAP+COVID Shots+Booster
- Physical Therapy
- Used Mountainview Medical Center and other providers
- COVID tests
- Only cholesterol at MMC
- Blood sugar testing

**10. What additional healthcare services would you use if available locally?**

- Yearly check-up
- Not sure
- Local general practitioner

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

- Weekend
- Weather conditions
- Waited to see if the problem was solved.
- Waiting for call back for refill on medicine.
- Got sent to someone else at another hospital or doctor's office out of town.
- Primary doctor no longer here!
- The physicians assistant (PA) told us when we had COVID we were not wanted and couldn't go there. Told to eat blueberries.
- Should go and did go are two different things.
- They didn't want to treat us because our care started elsewhere.
- We didn't know which county would take us.
- I have kidney failure and they told me to go somewhere else- they did not have anyone trained to work on me.
- Unable to reach on the phone.
- Clinic does not accept VA health care.
- Not happy with the privatization of facility.

**\*Responses when more than 3 were selected (4 participants):**

- COVID-19 barriers/concerns (2)
- Didn't know where to go (1)
- Don't like doctors/providers (1)
- It cost too much (3)
- It was too far to go (3)
- My insurance didn't cover it (2)

- Transportation problems (1)
- Unsure if services were available (2)

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

- Telehealth
- Providence Missoula
- Count, Health Services
- Great Falls
- Skin Care MT in Bozeman
- Pioneer Medical Center in Big Timber
- KRHC
- Out of state
- Internet/Skype
- Community Health Partners - Livingston
- Kalispell

**\*Responses when more than 1 was selected (23 participants):**

- Benefis Health System (6)
- Billings Clinic (4)
- Bozeman Health (7)
- Broadwater Health Center (1)
- Livingston HealthCare (11)
- Mountainview Medical Center (20)
- St. Peter's Hospital (9)
- St. Vincent Healthcare (1)
- VA (3)

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

- My doctor here in WSS was let go.
- Specialist
- Didn't like doctors available.
- Available locally
- Onsite for long term care patients
- Reputation of doctor
- Local does not accept our plan
- Obstetrician/Gynecologist (OB/GYN)
- Very good at what they do.
- I don't have a primary care provider.
- Great clinic! Good receptionist, nurses, and physician assistants and doctors.
- Mizner will actually work with me and understands me.
- Who was available where we went to the ER.
- We are from Livingston.
- It's where they took me.

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

- St. Patrick Missoula
- Great Falls Clinic (2)
- Yellowstone Surgery Center
- Bridger Orthopedic

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

- Benefis Health System (3)
- Bozeman Health (2)
- Livingston HealthCare (1)
- Mountainview Medical Center (7)
- St. Peter's Hospital (2)
- St. Vincent Healthcare (1)
- VA (1)

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

- Surgeon's Reputation.
- No answer at Wheatland Healthcare - Holiday weekend!
- Didn't have good experience with other family members at Benefis Health System.
- Great staff
- Only place in town.
- Cancer care experience
- That's where the doctor did his procedures.

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

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

**21.** Where was the healthcare specialist seen?

- Telehealth
- Helena (2)
- MT Eye Care
- Vance Thomas Eye Care
- Helena Dermatology
- Great Falls
- Ortho Montana
- Great Falls Clinic, Put off in Great Falls
- Heart Institute Missoula
- Medical Eye Specialist

- University of Utah (2)
- Taylor Wellness Chiropractor
- Out of state (2)
- Townsend - Chiropractor
- Kalispell
- MT Skin Care
- Missoula Heart
- Helena ENT
- Advanced Eyecare Assoc.
- Dentist
- Shodair
- Independent
- Townsend Dental
- Private practice

**22. What type of healthcare specialist was seen?**

- Psychiatrist
- Pain Specialist
- Diabetic, leg injury
- Nephrologist
- General practitioner
- COVID Test
- Naturopathic doctor
- Kidney doctor
- Infection control
- Plastic Surgeon
- Pain management specialist

**23. How do you get to and from the hospital, clinic, or the majority of other medical appointments?**

- Digitally
- Ambulance
- Drove
- Air Med, helicopter
- Military transport

**26. What issue(s) caused you to either be late or miss medical care?**

- COVID-19

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

- One of us has Medicaid and the other has market place insurance.



- Supplemental Insurance
- AARP insurance
- Not Sure
- Montana Help Plan (Medicaid Expansion)
- Federal Blue Cross Blue Shield (BCBS)
- Supplemental United Healthcare (UHC)

\*Responses when more than 1 was selected (24 participants):

- Employer sponsored (6)
- Health Insurance Marketplace (4)
- Health Savings Account (3)
- Healthy MT Kids (3)
- Indian Health
- Medicaid (8)
- Medicare (17)
- Private insurance/private plan (4)
- VA/Military (5)

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

- Not Sure
- N/A

**39. Where do you currently live, by zip code?**

- Bozeman, MT
- And 59085 we have 2 ranches

\*Responses when more than 1 was selected (1 participant):

- 59053 Martinsdale/Lennep

**40. What is your gender?**

- Both, filled out with spouse

**42. What is your employment status?**

- Self-employed (3)
- Full time, self employed
- Seasonal
- Ranching (2)
- Self-employed ranching
- 40% Disabled

\*Responses when more than 1 was selected (5 participants):

- Work full time (6)
- Work part time (6)
- Retired (3)
- Reduced hours due to COVID-19 (1)

- Student
- Collect disability
- Unemployed, but looking
- Not currently seeking employment

### General comments

- (Q1)
  - Did not make a selection and wrote “I would not be qualified to make that assessment. The county health nurse would.”
- (Q2)
  - Did not make a selection and wrote “Again – how would I know this? The clinic should know.”
- (Q3)
  - Selected “Senior care” and wrote “affordable”
- (Q5)
  - Selected “Word of mouth/reputation” and wrote “PT and Chiro only”
- (Q6)
  - Selected “Public/County health” and wrote “COVID”
- (Q8)
  - Selected “Support groups” and wrote “for caregivers”
- (Q12)
  - Selected “No” and wrote “No fault of the clinic.”
- (Q15)
  - Selected “St. Peter’s Hospital” and crossed off “Hospital” and wrote “Clinic”
- (Q28)
  - Selected “No” and wrote “Not at this time but others probably would”
- (Q29)
  - For “Pharmacy” selected “N/A” and wrote “Local pharmacy is good”
  - For “Billing services” selected “2” and wrote “several months late”
  - For “Clinic” selected “2” and wrote “unhappy with doctor”
  - For “Ophthalmologist (eye care)” selected “N/A” and wrote “Do we have one?”
  - For “Pain clinic” selected “N/A and DK” and wrote “huh?”
  - For “Pharmacy” selected “3” and wrote “sometimes call and not filled”
- (Q36)
  - Selected “Fair” and wrote “large deductible”
- (Q41)
  - Selected “65-74” and wrote “We have multiple ages in household age 8 to 75.”
- General comments
  - “We are not familiar enough with White Sulphur Springs”
  - “I think WSS is perfect for first aid station! We do not need new hospital. It is also a great place to live out final days!”

# Appendix H- Key Informant Interview - Questions

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

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

# Appendix I- Key Informant Interview - Transcripts

## **Key Informant Interview #1**

Monday, March 14, 2022

Anonymous – Via phone interview

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

- Most of my concerns are more related to the aging population since about 37% of our community is 65 and older. We're just getting older by the day.
- The biggest issue I see is a lack transportation for elders, primarily those without family close by. For example, if they're taken by ambulance or helicopter for a medical emergency, there's frequently no one to bring them back. A common solution, although it's not ideal is for elders that can still drive to pick up other elders and transport them.
- I just learned the other day that we have an eye doctor. I think it needs better advertisement!
- Housing is huge issue in this area. A lot of our houses are older and have staircases. It makes staying home longer particularly challenging and dangerous for our aging population. And unfortunately, there's not a lot of options for single level homes that are affordable or the appropriate size for one or two people.
- There are many people that should not be living alone. Adult Protective Services (APS) frequently has to step in if they aren't able to access needed food or care for themselves.
- As for the youth, we have the Stevens Youth Center which provides summer and after school programs.

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

- Hospital/clinic
  - It is a blessing to have Mountainview Medical Center locally.
- EMS Services (ER/Ambulance)
  - These services are very good. They have a compassionate team. They know people in this area very well and are always looking out for them.
- Transportation (in general and for healthcare services)
  - We have two 6 passenger busses – one is owned by the church and the other by the American Legion. These are nice, but honestly, they are a little big for what we frequently need. Something like a minivan would be more appropriate and easier.
  - In order to fix our local transportation challenges, we need to secure funding to support workforce that would consistently coordinate dispatching.

- Public/County Health Department
  - They do a great job and cover everything well!
  - I think they advertise very well on Facebook. During COVID, they were transparent in sharing our case numbers and ensuring the community was informed of the current CDC recommendations.
  - They even share about programs and resources available locally such as the Backpack program in the schools.
- Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
  - We could use more funding and more importantly, workforce to sustain a home health program. Even if it was a company or organization that came to the area once a week, it would be filling such a need in this area and allow elderly to stay home longer.
  - The nursing home does great job. The residents seem happy and there's a lot of visitations. There is a strong support system within community for our elders.
- Services for Low-Income Individuals/Families
  - Food bank is a private non-profit and does phenomenal job for this community. In addition to providing food to those in need, they have items like cleaning products too. They even have a program that provides a credit card that can be used at the local pharmacy for things like over the counter (OTC) medicine and creams. They are great collaborators and support for area. And finally, the Food Bank provides funding to the senior center to provide about five free meals per day that helps cover those who cannot pay.

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

- In addition to our aging population, I think mental health is also a concern across the lifespan.
- There are some resources available through school to address mental health issues, but there's still a stigma associated with accessing support. I think additional education is needed to reduce the stigma for mental health support.
- One thing we don't have, that might help some of our community members are support groups. These may help people from feeling isolated and talking about their mental health challenges.

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

- We could use a dermatologist. Although there's a larger need among the elderly, it could also be good for all ages.
- Hearing is another concern. Costco advertises at the Annual Health Fair that's hosted by the Lions Club.

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

- This is a tough question! With about 37% of our population over the age of 65, I would like to see us become more of an age-friendly community.
- I know the senior center recently got some exercise equipment, so perhaps restarting some of the Strong Women classes would be good for the area.

### **Key Informant Interview #2**

Friday, March 25, 2022

Anonymous–Via phone interview

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

- Historically, we have a high percentage of our population that is closer to the poverty level compared to the state of Montana. These disparities inherently impact health outcomes in this area.
- The wealthier individuals and families in town seem to typically doctor out of town.
- Meagher County is a bit of an anomaly in that it's geographically located between some of the larger population centers for the state of Montana, yet we're still isolated.

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

- Hospital/clinic:
  - Generally speaking, Mountainview Medical Center (MMC) has a good reputation.
  - When you hear from community members, they are most concerned about the cost of care. There's a bit of sticker shock since MMC is out of network for some of the insurance offerings. And I'm not sure how much of it MMC can control, but I know it's a concern.
  - I've heard a lot of positive things about swing bed care. We even have physical therapy available through clinic and great end of life care locally.
  - I have heard concerns from some community members about the new hospital building. Some have been concerned about the location – being that it'll be located further from the main highways, and how that might impact traffic in town, but also what that'll mean for the current MMC building and lot. It may be worth some education to the community on the changes that are happening and create the space for an open dialog.
- EMS Services (ER/Ambulance)
  - The ambulance services does such a great job, but they are really stretched to max. I know that patient transfers, particularly with COVID put a strain on the system.
  - Workforce is challenging for the ambulance services. There are a lot of longstanding volunteers and I know there is some friction as it's the same volunteers over and over again.
  - Despite workforce challenges though, the response time is great!

- Transportation (in general and for healthcare services)
  - Transportation is tough for Meagher County. As I mentioned earlier, we're in the middle of nowhere yet also surrounded by populous areas.
  - The more services we can offer locally, the better it would be to alleviate transportation challenges associated with accessing necessary care. Perhaps even if you do specialty care elsewhere, but are able to do your weekly visits/care locally.
- Public/County Health Department
  - I think she does a great job for the area – she is tireless!
- Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
  - It's always challenging to find adequate services for seniors locally since it's a patchwork approach. There's no comprehensive system.
  - There is a good activities coordinator, but we're limited due to our population size and we're limited in cultural events.
  - We have limited senior housing options. I believe there is some work currently underway with the Human Resource Development Council (HRDC) office in Bozeman.
  - I've only heard great things about the local home health services and Meals on Wheels.
  - And finally, we don't currently have an adult protective services (APS) worker. Unfortunately, I'm not sure when they are returning or going to be able to place someone.
- Services for Low-Income Individuals/Families
  - Like I mentioned with the senior services, these too operate with a patchwork framework.
  - There are challenges around housing affordability and access.
  - We used to have VA bus to take veterans to appointments, but COVID stifled the resource.

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

- People's homes are potentially the biggest health hazards. There are many that need repairs, upgrades, and ADA compliance.
- I can't think of anything outside of what has already been mentioned.

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

- I can't think of anything specifically. Generally speaking, community members would utilize what is brought in and right sized for the community.

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

- A river trail system along Smith River would be great! Essentially, it would be nice to have a trail away from busy highways and streets.
- Aside from that, the new gym has been positive for the area. There's been a lot of utilization.

### **Key Informant Interview #3**

Friday, March 25, 2022

Anonymous–Via phone interview

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

- I would say overall, we have a pretty healthy community, but we do have a large population that is aging. With that comes more illnesses and challenges.

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

- Hospital/clinic:
  - Overall, I think Mountainview Medical Center is good. I feel like it meets needs for a rural area.
- EMS Services (ER/Ambulance)
  - I feel like the ambulance service has challenges with workforce due to it being primarily volunteer-based.
- Transportation (in general and for healthcare services)
  - The area is so small and there's just not enough of a need to sustain these services.
- Public/County Health Department
  - Overall, I think the county health department does good work. They do a great job communicating with the public.
- Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
  - I can't speak to these services.
- Services for Low-Income Individuals/Families
  - I can't speak to these services either.

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

- Housing availability is very challenging for this area and one of the top issues I'm seeing. A lot of rentals have converted to AirBnBs, which has made it challenging to find affordable homes for locals to rent.

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

- Eye care and dental are not available locally. These would be nice to have since they are something recommended regularly.

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

- Gosh, we already have fresh air and a lot of space, so this is a hard question.
- It would be nice to have a park with a walkway!



### **Key Informant Interview #4**

Monday, March 28, 2022

Anonymous–Via phone interview

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

- Generally speaking, I would say the health of our area is probably poorer. But with the addition of a gym locally, has inspired some to get active!

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

- Hospital/clinic:
  - The hospital and clinic are a necessary service for our community given our geographical location.
  - With that, I would say Mountainview Medical Center (MMC) is well utilized, but there are still some that choose to get healthcare elsewhere for various reasons – be it political reasons, historical reasons, etc.
- EMS Services (ER/Ambulance)
  - The ambulance service is run by Meagher County. I think community members are grateful to have this service available locally. From what I've heard, they do a great job considering the limited staffing available. They face workforce challenges since they are all volunteer-based.
  - As for the emergency room, I think it is adequately sized and has very competent staff. Moreover, I think they understand their role which is to triage, transfer, etc.
- Transportation (in general and for healthcare services)
  - I'm not aware that we really have any transportation services except for an unofficial, buddy system where elderly are driving their elderly friends around town and to appointments.
  - Transportation always seems to be a need though as it prevents some from accessing needed healthcare services. I think there are challenges particularly in the long term care settings when residents don't have family locally and there's not always the workforce to provide this support.
- Public/County Health Department
  - I think is also such a great resource for Meagher County. We have been fortunate to have Eva, especially throughout COVID. Many counties don't even have a local public health nurse!
- Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
  - I believe the only services for seniors that we have locally are a community center/senior center that is very well received. It serves as a great service for meals, socialization, and insurance navigation.
  - The coordinator for the Senior Center is active in the community and participates in local coalitions to keep them in the loop.
  - I've heard Meals on Wheels is also a very well utilized service in the area.

- Services for Low-Income Individuals/Families
  - You know the local health department is basically a free service available for the uninsured.
  - We also have a great library that provides a lot of services for free.
  - The Stevens Youth Center is a free program supporting area youth with a safe place to gather.
  - And finally, we have a local food bank that is very active and has lots of local support through donations.

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

- We don't have dental which is challenging for the community. But we do have someone traveling in for eye care periodically.
- Specialty care is hard to sustain in a rural area like this, so exploring/offering telehealth options might open doors for us.
- Transportation is an issue, mainly among aging populations. But it's likely also a challenge for low income families.
- There's no daycare services locally. I think there were some in town providing these services, but I'm not sure there is anyone currently offering childcare services. That makes it challenging on working families.

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

- It would be nice to have oncology infusion services available locally since it's a big travel and time commitment placed on the patient and their caregiver(s).
- The pain clinic seems to have been very well received in the area!
- Other than that, it might be helpful to the community to consider more telehealth options for accessing specialty care services.

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

- This is a cultural thing – we have a lot of farming and ranching, and typically folks don't have a lot of extra time to go to the gym. We also have an aging population that might not necessarily go to a gym to work out.
- Considering that, a simple walking track in town might be a good addition to foster healthy behaviors and lifestyles. We might need a champion to spearhead something like this and motivate folks to make a sustainable change.

**Key Informant Interview #5**

Monday, March 28, 2022

Anonymous–Via phone interview

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

- I think the health of our community is somewhere in the middle of the road. We definitely have some proactive community members, but there's about half that

don't engage in healthful behaviors for various reasons or are older and more susceptible to illness/ailments.

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

- Hospital/clinic:
  - Overall I think services through Mountainview Medical Center are pretty good!
- EMS Services (ER/Ambulance)
  - Like MMC, I think our ambulance services are pretty good too.
- Transportation (in general and for healthcare services)
  - In town, community members are able to rely on good Samaritans to lend a hand. But out of town transportation is hard. There was some work happening on transportation committees, but COVID stopped the progress. I can't recall exactly which organizations were involved in this work, but I think HRDC out of Bozeman, the local senior center, and MMC may have all be at the table.
- Public/County Health Department
  - *Not asked.*
- Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
  - I think we do as good as we can with the nursing home and senior center.
  - I think we need home health and hospice though. Helena holds the license for us, but I don't think they provide the service in our community.
  - It is nice that MMC has a hospice room set up in long-term care facility.
- Services for Low-Income Individuals/Families
  - Like senior services, I don't think we have enough local services for low income individuals and families. A lot of these needs get referred out of the area.
  - We don't have any welfare services offices in Meagher County.
  - The Senior Center often helps folks sign up for Medicare and even Medicaid.

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

- That's a tough one. I would say the biggest issue locally is even just the wellness piece, like preventive care.

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

- I would first like to acknowledge that bringing in specialty care and providers is hard due to equipment maintenance, space, etc.
- We had a baby boom this year so a local lactation specialist would be helpful!
- The pain clinic seems to be helping the community.
- Dentistry is a big need for the area. Even though it's recommended to see a dentist every six months, oral health is often neglected around here.
- We're going on about 8 months without women health's provider, which is unfortunate.

- In terms of mental healthcare options locally, we seem to be sitting better now that we have a Licensed Clinical Professional Counselor (LCPC) locally.

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

- I'll start with what we already have. A lot of employers offer memberships to the local gyms which is great. And I think the health fair is coming back this year.
- Those aside, I would like to see more health educational offerings, such as blood pressure management, nutrition, gentle activity, etc. It would also be nice to see more outdoor community activities like community softball games, etc.
- The final note I would like to make is that housing affordability and availability is challenging in this area right now.

**Key Informant Interview #6**

Friday, April 1, 2022

Anonymous–Via phone interview

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

- Overall, I think the people are pretty healthy around here. But we lack a women's health provider.

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

- Hospital/clinic:
  - I think Mountainview Medical Center provides a much needed service in our community and area.
- EMS Services (ER/Ambulance)
  - I also consider the volunteer ambulance services extremely necessary and appreciated in the area.
- Transportation (in general and for healthcare services)
  - We lack transportation services, but it's a need for the area.
- Public/County Health Department
  - The local health department is really good considering the hand they were dealt with COVID. Eva does a great job.
- Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
  - Long term care is available though MMC, but we could use assisted living.
- Services for Low-Income Individuals/Families
  - I'm not familiar enough with these services to provide an opinion.

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

- We don't have dentist locally, so that's an issue.
- We used to have people come over and help sign community members up for Medicaid and Supplemental Nutrition Assistance Program (SNAP) benefits, but now we have to drive to Livingston. That can be challenging to do for some of the individuals and families in need of these services.

- A lot of people around here are on a high deductible plan through Humana. MMC is considered out of network through these plans. Because of that, I think insurance education and navigation is a need for the area.

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

- As I mentioned earlier, I think we need a women's health provider and dentist available locally.
- I think the community could benefit from insurance education opportunities.

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

- I would like to see a lot more outreach for diabetes education.
- There used to be an opportunity offered to the community that provided low cost labs and then a provider would go over the results with them. It wasn't part of the health fair, but I think it would be nice to bring this opportunity back.
- And finally, I think it would be beneficial for the providers to be more visible in the community.

**Key Informant Interview #7**

Friday, April 1, 2022

Anonymous—Via phone interview

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

- The young people seem to be healthy, but we live in community that has a lot of elderly and with age comes more health challenges.

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

- Hospital/clinic:
  - I think that the local clinic has probably outgrown its space and the hospital rooms seem outdated. I think both the hospital and clinic are used by most of community.
  - Aside from physical space, however, Mountainview Medical Center has some great doctors and physicians' assistants (PA's).
- EMS Services (ER/Ambulance)
  - Presumably, the ambulance services are used a lot in this area.
  - I believe it's all volunteer-based, so I'm sure the ones that are working have a lot to do.
- Transportation (in general and for healthcare services)
  - We're lacking in transportation services. I think there's a bunch of people in town that will give rides, but I'm not sure it's an actual, organized service.
- Public/County Health Department
  - I think she does a ton for the area and is a huge service for our community!
  - I think the space she's in is too small. Visitors have to wait outside.

- Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
  - They've tried to update rooms in the local nursing home, including giving people private rooms, but that impacts how many people they can serve.
  - We have a lot of elderly still living at home that so I think there's probably a need for assisted living and home health services.
- Services for Low-Income Individuals/Families
  - County health nurse spends a lot of time taking care of low income individuals and families. There was a local family that had COVID recently, and the public health nurse was concerned about them having enough food. She took them Gatorade and items that they needed while they were sick.
  - Our community has a lot in the low income bracket. Local health services for them are pretty limited outside of the clinic.

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

- I feel like our community is growing and there's services available like physical therapy and a traveling podiatrist. It takes some time to get an appointment and access these services.
- We don't have dentist in town. I think dental is super important to overall health.
- I feel like there's probably a need for assisted living and home health services locally, but I'm not quite sure.
- It might be nice to have access to more specialty services such as a gastrointestinal (GI) doctor.
- We have a pain doctor now, but it's still limited in space and equipment.

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

- I know that they're working on bringing chemotherapy to town. But I'm sure that infringes on space.
- Dialysis would be nice. I know there are people driving to Helena every day! That's an hour and a half trip each direction.

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

- I think we could use more health education services on topics like smoking cessation, weight management, diabetes information, etc.

**Key Informant Interview #8**

Thursday, April 7, 2022

Anonymous—Via phone interview

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

- I think we are healthy to a degree in this area of the state.
- We seem to have lots of cancer though, which is a bit concerning.
- I think we need more mental health options even though we have access to some telehealth options.

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

- Hospital/clinic:
  - I believe it's a necessary tool for a rural area like this. I will say that sometimes it feels lacking in what they can provide.
- EMS Services (ER/Ambulance)
  - The local EMS are phenomenal. They have a great response time!
  - I think they have a tough time recruiting volunteers, though.
- Transportation (in general and for healthcare services)
  - I don't believe that there aren't any formal services in this area.
  - Unless elderly have family living locally to help out with rides, we have a lot of local elderly individuals driving them and their friends to and from appointments.
- Public/County Health Department
  - Eva is just amazing- she is so informative and helpful.
  - She really goes above and beyond. I'm so glad that they've been able to retain the secondary help for the health department that was brought in during COVID.
- Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
  - I believe that what we have and what we can provide is all of good quality.
  - We don't have an assisted living facility, but I think it would really help to bridge the gap between those living at home and the nursing home.
  - We do have a homemaker program that seems to retain clients and does really well.
  - And I believe we have a strong Meals on Wheels program locally.
  - I think we need more mental health supports for those that are isolated, particularly that don't have family locally. Not only would socialization be good, but also mental health providers.
- Services for Low-Income Individuals/Families
  - I believe that these services are available. Entities like the County Health Department and Mountainview Medical Center seem to do a really good job at stepping in when help is needed.
  - Someone from Women, Infants, and Children (WIC) used to come up once a month, but it's only available virtually now.
  - If community members need support with utilities, the Senior Center can help out with filling out the Low Income Energy Assistance Program (LIEAP) applications.
  - I think there's a lot of awareness around these available programs generated through the newspaper and word of mouth.

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

- I think senior care is a big issue locally.
- We could also use more women's health care options. Women can't do their annual mammogram locally.
- We have some pediatric care locally, but I think we could be a bit better.

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

- We desperately need dental care locally.
- It might also be nice to have access to an ear, nose, throat (ENT) specialist, too.
- Anyone that needs cancer care or dialysis also has to go out of town.

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

- We are primarily a recreational-based, service industry community so inherently there is a lot of alcohol use – I would like to see less of the alcohol use.
- We're also an aging community so that makes it hard to determine what might make us healthier.
- But other than that, I think we're already healthy!



## Appendix J- Request for Comments

Written comments on this 2022 Community Health Needs Assessment Report can be submitted to Rob Brandt, CEO at Mountainview Medical Center:

Administration  
Mountainview Medical Center  
16 W Main Street  
White Sulphur Springs, Montana 59645

Contact Mountainview Medical Center's CEO at 406-547-3321 or [rbrandt@mvmc.org](mailto:rbrandt@mvmc.org) with questions.

