

Ohio County Hospital

Hartford, Kentucky

Community Health Needs
Implementation Strategy

Adopted by Board Resolution October, 2016



Dear Community Member:

At Ohio County Hospital, we have spent 60 years providing high-quality compassionate healthcare to the greater Hartford community. The “2016 Community Health Needs Implementation Strategy,” in conjunction with the Ohio County Hospital Strategic Plan and Green River Community Health Improvement Plan, identifies local health and medical needs and provides a plan of how Ohio County Hospital (OCH) will respond to such needs. This document suggests areas where other local organizations and agencies might work with us to achieve desired improvements and illustrates one way we are meeting our obligations to efficiently deliver medical services.

In compliance with the Affordable Care Act, all not-for-profit hospitals are now required to develop a report on the medical and health needs of the communities they serve. We welcome you to review this document not just as part of our compliance with federal law, but of our continuing efforts to meet your health and medical needs.

OCH will conduct this effort at least once every three years. The report produced three years ago is also available for your review and comment. As you review this plan, please see if, in your opinion, we have identified the primary needs of the community and if you think our intended response will lead to needed improvements.

We do not have adequate resources to solve all the problems identified. Some issues are beyond the mission of the hospital and action is best suited for a response by others. Some improvements will require personal actions by individuals rather than the response of an organization. We view this as a plan for how we, along with other area organizations and agencies, can collaborate to bring the best each has to offer to support change and to address the most pressing identified needs.

The report is a response to a federal requirement of not-for-profit hospitals to identify the community benefit they provide in responding to documented community need. Footnotes are provided to answer specific tax form questions; for most purposes, they may be ignored. Most importantly, this report is intended to guide our actions and the efforts of others to make needed health and medical improvements in our area.

I invite your response to this report. As you read, please think about how to help us improve health and medical services in our area. We all live in, work in, and enjoy this wonderful community together. Together, we can make our community healthier for every one of us.

Thank You,

Blaine Pieper
Chief Executive Officer
Ohio County Hospital

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EXECUTIVE SUMMARY

EXECUTIVE SUMMARY

Ohio County Hospital ("OCH" or the "Hospital") has performed a Community Health Needs Assessment in conjunction with the Green River District Health Department to determine the health needs of the local community, develop an implementation plan to outline and organize how to meet those needs, and fulfill federal requirements.

The Assessment portion of this report (Green River Community Health Improvement Plan), including data analysis and local expert responses, can be found separately at <https://grrhc.wildapricot.org/>. This report focuses on the efforts OCH is taking or will take to meet the significant health needs identified through the data and local expert opinions.

The Significant Health Needs for Ohio County are:

1. Obesity/Nutrition/Physical Activity (lifestyle factors)
2. Tobacco/Substance Abuse
3. Access to Care
4. Teen Issues
5. Mental Health
6. Dental Health

The Hospital has developed implementation strategies for four of the six needs including activities to continue/pursue, community partners to work alongside, and leading and lagging indicators to track.

CONCLUSIONS FROM PRIOR CHNA IMPLEMENTATION ACTIVITIES

Worksheet 4 of Form 990 h can be used to report the net cost of community health improvement services and community benefit operations.

“Community health improvement services” means activities or programs, subsidized by the health care organization, carried out or supported for the express purpose of improving community health. Such services do not generate inpatient or outpatient revenue, although there may be a nominal patient fee or sliding scale fee for these services.

“Community benefit operations” means:

- *activities associated with community health needs assessments, administration, and*
- *the organization's activities associated with fundraising or grant-writing for community benefit programs.*

Activities or programs cannot be reported if they are provided primarily for marketing purposes or if they are more beneficial to the organization than to the community. For example, the activity or program may not be reported if it is designed primarily to increase referrals of patients with third-party coverage, required for licensure or accreditation, or restricted to individuals affiliated with the organization (employees and physicians of the organization).

To be reported, community need for the activity or program must be established. Community need can be demonstrated through the following:

- A CHNA conducted or accessed by the organization.
- Documentation that demonstrated community need or a request from a public health agency or community group was the basis for initiating or continuing the activity or program.
- The involvement of unrelated, collaborative tax-exempt or government organizations as partners in the activity or program carried out for the express purpose of improving community health.

Community benefit activities or programs also seek to achieve a community benefit objective, including improving access to health services, enhancing public health, advancing increased general knowledge, and relief of a government burden to improve health. This includes activities or programs that do the following:

- Are available broadly to the public and serve low-income consumers.
- Reduce geographic, financial, or cultural barriers to accessing health services, and if they ceased would result in access problems (for example, longer wait times or increased travel distances).
- Address federal, state, or local public health priorities such as eliminating disparities in access to healthcare services or disparities in health status among different populations.
- Leverage or enhance public health department activities such as childhood immunization efforts.
- Otherwise would become the responsibility of government or another tax-exempt organization.
- Advance increased general knowledge through education or research that benefits the public.
- Activities reported by the Hospital in its implementation efforts and/or prior tax year reporting included :

\$35,971.42

We used the priority ranking of area health needs by the Local Expert Advisors to organize the search for locally available resources as well as the response to the needs by Ohio County Hospital. The following list:

- Identifies OCH current efforts responding to the need
- Establishes the Implementation Strategy programs and resources OCH will devote to attempt to achieve improvements
- Documents the Leading Indicators OCH will use to measure progress
- Presents the Lagging Indicators OCH believes the Leading Indicators will influence in a positive fashion
- Presents the locally available resources noted during the development of this report as believed to be currently available to respond to this need.

In general, OCH is the major hospital in the service area. OCH is a 25-bed, critical access hospital located in Hartford, Kentucky. The next closest facilities are outside the service area and include:

- Owensboro Health Regional Hospital, Owensboro, KY (27.3 miles)
- Owensboro Health Muhlenberg Community Hospital, Greenville, KY (37.4)
- Twin Lakes Regional Hospital, Leitchfield, KY (39.6)
- Greenview Regional Hospital, Bowling Green, KY (47.9 miles)

All data items analyzed to determine significant needs are “Lagging Indicators,” measures presenting results after a period of time, characterizing historical performance. Lagging Indicators tell you nothing about how the outcomes were achieved. In contrast, the OCH Implementation Strategy uses “Leading Indicators.” Leading Indicators anticipate change in the Lagging Indicator. Leading Indicators focus on short-term performance, and if accurately selected, anticipate the broader achievement of desired change in the Lagging Indicator. In the Quorum application, Leading Indicators also must be within the ability of the hospital to influence and measure.

Kentucky Community Benefit Requirements

Significant Needs

1. OBESITY/NUTRITION/PHYSICAL ACTIVITY – IMPROVE COMMUNITY LIFESTYLE CHOICES

OCH services, programs, and resources available to respond to this need include:²

- Community Walking Club – a platform to engage people in physical activity in a group setting to promote accountability to an exercise program. Participants receive a free t-shirt that will serve as a walking reminder throughout the community of the access to a free physical fitness activity. Food and Activity trackers will be distributed, along with healthy food sampling demonstrations, in an effort to educate members on importance of healthy nutritional choices to lower obesity rate. Each participant will have a beginning and ending Body Mass Index measurement; also includes quarterly education sessions/lunch ‘n’ learns with physician speakers. This program provided in partnership with Ohio County Health Coalition.
- Sponsor Summer Sizzle 5K – fundraiser for hospice services; bring in local industries and community members to form teams to compete in 3.1 mile walk or run. Work in conjunction with the Ohio County Family Wellness Center to sponsor a community-wide, free “Coach to 5K” walk/run program eight weeks prior to race date to increase community fitness level and encourage race participation.
- Industrial Wellness Health Fairs – Biometric screenings which include a reading of lipids, blood pressure, and body weight are performed. Employees receive same day results along with suggested care plan based on their individual risk factors. Employers receive an aggregate report to show progress and encourage health and wellness in organization.
- Coordinates and Sponsors Longest Day of Play – activity for modeling healthy physical activities for families that can be replicated in home environments; 30+ physical fitness stations and healthy picnic dinner (particularly serves low-income and minority families); extensive volunteer participation from hospital staff and Ohio County Health Coalition members. Ohio County Hospital is one of the community partners that provides sustaining sponsorship for this event.
- Assists in planning and provide funding for Celebrate the Child – a community wide event which fosters developmental assets for youth with an emphasis on improving health and safety behavioral choices. OCH has extensive volunteer participation from hospital staff and provides sustaining sponsorship for event.
- Coordinates and provides funding for Kids Farmer’s Market – a community wide event held at the Beaver Dam Community Farmers market where families are provided an opportunity to sample fresh produce, receive health and nutritional education material, and participate in several physical fitness activities
- Continue to support the efforts of the Green River Regional Health Council and Ohio County Health Coalition by providing leadership, coordination of coalition activities, and funding to both organizations.

² This section in each need for which the hospital plans an implementation strategy responds to Schedule h (Form 990) Part V Section B 3 c

Additionally, OCH plans to take the following steps to address this need:

- Explore establishing a community-wide health fair
- Continue above programs

OCH evaluation of impact of actions taken since the immediately preceding CHNA:

- Offered community-wide health challenge on substituting unhealthy behaviors with healthy lifestyle changes

Anticipated results from OCH Implementation Strategy

Community Benefit Attribute Element	Yes, Implementation Strategy Addresses	Implementation Strategy Does Not Address
1. Available to public and serves low income consumers	X	
2. Reduces barriers to access services (or, if ceased, would result in access problems)	X	
3. Addresses disparities in health status among different populations	X	
4. Enhances public health activities	X	
5. Improves ability to withstand public health emergency		X
6. Otherwise would become responsibility of government or another tax-exempt organization	X	
7. Increases knowledge; then benefits the public	X	

The strategy to evaluate OCH intended actions is to monitor change in the following Leading Indicator:

- Number of participants to register for Summer Sizzle 5K race = 154 in 2016

The change in the Leading Indicator anticipates appropriate change in the following Lagging Indicator:

- Prevalence of Overweight (Percentage of adults) in Ohio County = 61% in 2016 as reported in Kentucky Healthfacts with data from BRFSS.

OCH anticipates collaborating with the following other facilities and organizations to address this Significant Need:

Organization	Contact Name	Contact Information
Ohio County School System	Yvonne Smith, RN	(270) 298-3249 http://www.ohio.k12.ky.us/
University of Kentucky Cooperative Extension Services	Tiffany Calvert, Ohio County Family & Consumer Science Agent	(270) 298-7441 tiffany.calvert@uky.edu
Together We Care	Shelia Barnard, Director	(270) 504-0037 http://www.octwc.com/

Ohio Co. Family Wellness Center	Brandy Daugherty, Director	(270) 298-4500 http://www.ohiocountyfamilywellness.com/
Ohio County Health Coalition	Improving Healthy Lifestyle Choices Sub-Committee	https://grrhc.wildapricot.org/
Green River District Health Department	Debbie Fillman, CEO	(270) 686-7747 www.healthdepartment.org

Other local resources identified during the CHNA process that are believed available to respond to this need:³

Organization	Contact Name	Contact Information
4H Programs		https://ohio.ca.uky.edu/4HYouthDevelopment
Ohio County Food Pantry		http://www.foodpantries.org/ci/ky-hartford
Green River Regional Health Council	Brooke Fogle, Director	(270) 686-7747 www.healthdepartment.org

³ This section in each need for which the hospital plans an implementation strategy responds to Schedule h (form 990) Part V Section B 3 c and Schedule h (Form 990) Part V Section B 11

2. Tobacco/Substance Abuse

OCH services, programs, and resources available to respond to this need include:

- OCH will look to further expand and enforce its status as a smoke-free facility for patients, family, and staff.
- Hospital sponsors a free smoking cessation program to the community
- Provides widespread community education on dangers of smoking
- OCH will work in conjunction with community partners to seek implementation of smoke free public environments throughout the community. This will include facilitating dialogue with local and state level officials regarding the health benefits of adopting a community-wide smoke free ordinance.
- Sponsor 'Truth or Consequences' event – 300 middle school students attend day-long event with an adult mentor to be educate on the negative effects of drinking, smoking, and drug abuse
- Work conjunctly with the Ohio County Health Coalition – Access to Care sub-committee to prepare and execute an United Way grant application where funds were awarded to provide on-site smoking cessation program to local industries
- Provide expert clinical speakers for Wet/Dry forums to educate on substance abuse issues as cities within our community vote for the right to sell alcoholic beverages
- OCH and associated provider offices will continue to follow a controlled substance prescription policy, which includes routine drug testing to ensure proper utilization of narcotic substances.
- OCH will continue to develop an improved referral system for chronic pain patients, and will explore the development of additional treatment options for those with substance abuse/misuse issues.
- OCH will fully utilize the state KASPER report system to assist in monitoring controlled substance prescription drug use by patients.
- OCH staff will provide instructions regarding prescribed medications and their proper use for all patients upon discharge from the hospital.
- Ohio County Hospital will also continue to support the Ohio County Health Coalition's efforts in this area, specifically in regards to prescription abuse/misuse by providing funds, volunteers and directional leadership

Additionally, OCH plans to take the following steps to address this need:

- Continue above activities

OCH evaluation of impact of actions taken since the immediately preceding CHNA:

- Recruited full-time, board certified Pain Management Physician to address issue of prescription drug/narcotics use in the area; also an available resource for providing addiction therapy
- Sponsored event and provided physician speakers for Adverse Childhood Experience (ACE) forum for social workers, school system employees and healthcare professional. Studies indicate that children that experience two or more ACE events are have an increased level of substance abuse issues as an adult. Session included education on ACE and intervention coping mechanisms for students.

Anticipated results from OCH Implementation Strategy

Community Benefit Attribute Element	Yes, Implementation Strategy Addresses	Implementation Strategy Does Not Address
1. Available to public and serves low income consumers	X	
2. Reduces barriers to access services (or, if ceased, would result in access problems)	X	
3. Addresses disparities in health status among different populations	X	
4. Enhances public health activities	X	
5. Improves ability to withstand public health emergency		X
6. Otherwise would become responsibility of government or another tax-exempt organization	X	
7. Increases knowledge; then benefits the public	X	

The strategy to evaluate OCH intended actions is to monitor change in the following Leading Indicator:

- Number of participants in smoking cessation program = 12 in 2016

The change in the Leading Indicator anticipates appropriate change in the following Lagging Indicator:

- Decrease the prevalence of smoking (percentage adults) = 21% in 2016 as reported in Kentucky Healthfacts with data from BRFSS.

OCH anticipates collaborating with the following other facilities and organizations to address this Significant Need:

Organization	Contact Name	Contact Information
Ohio County School System	Yvonne Smith, RN, Director School Nurses	(270) 298-3249 http://www.ohio.k12.ky.us/
University of Kentucky Cooperative Extension Services	Tiffany Calvert, Ohio County Family & Consumer Science Agent	(270) 298-7441 tiffany.calvert@uky.edu
Together We Care	Shelia Barnard, Director	(270) 504-0037 http://www.octwc.com/
Kentucky Cancer Program – Green River	Jaime Rafferty, Cancer Control Specialist	(270) 683-2560 http://www.kycancerprogram.org/
Ohio County Health Coalition – Substance Abuse Sub-Committee	Rebecca Horn, Prevention Coordinator with Green River District Health Department	https://grrhc.wildapricot.org/

Other local resources identified during the CHNA process that are believed available to respond to this need:

Organization	Contact Name	Contact Information
Celebrate Recovery		http://www.celebraterecovery.com/
AA Program		http://www.aa.org/
Green River Regional Health Council	Brooke Fogle, Director	(270) 686-7747 www.healthdepartment.org

3. ACCESS TO CARE

OCH services, programs, and resources available to respond to this need include:

- Partner with Quorum Health Resources (consulting firm) to recruit needed providers – priority focus on recruitment of full-time general surgeon
- Employment of primary care and specialty providers
- Expansion from part-time to full-time Orthopedic Specialty coverage
- Expanded walk-in clinic services offered seven days per week with longer hours and additional staffing of family medicine provider
- Operate a 24-hour emergency room which provides access to physician care for patients regardless of ability to pay
- Expanded Me-Visit services which provides patients of the Ohio County Family Care availability to access an on-line patient care visit with a primary care provider
- Email campaigns/reminders to patients who are due for annual preventive health screenings (mammograms, well visits, colonoscopies, etc.)
- Explore 24-Hour Nurse Hotline service as part of ACO
- Partner with the Ohio County Health Coalition to coordinate, sponsor and provide leadership direction for the Access to Care sub-committee for oversight of the Pink County Grant Funds. Purpose of grant is to distribute health education literature on breast and cervical cancers, as well as, to provide patient navigation volunteers to schedule preventive screenings at various community events with an emphasis on targeting the following vulnerable populations: low-income; ethnically diverse; and/or under-insured.
- Create comprehensive community resource guide for all healthcare and community services and distribute through ER and partner websites; Hospital collects and audits data each month, then distributes up to date copies
- Continue to expand the Bring the Best Back home recruitment program which provides mentorship, internships, preceptorships and clinical rotation sites for students from the Ohio County area to help meet the long-term recruitment needs of OCH
- Financial Access Policy made available to patients upon request and on hospital web-site
- Continue to support the efforts of the Green River Regional Health Council and Ohio County Health Coalition by providing leadership, coordination of coalition activities, and funding to both organizations.

Additionally, OCH plans to take the following steps to address this need:

- Partner with the Ohio County Health Coalition – Access to Care sub-committee to explore ways to work with local dental community to improve access, specifically for pediatric Medicaid demographic
- Explore affiliation arrangements with other healthcare systems for telemedicine services to increase access to sub-specialty services

OCH evaluation of impact of actions taken since the immediately preceding CHNA:

- Recruitment of new internal medicine provider starting in August 2016; opened practices for two family medicine physicians in 2015; pain management specialist started in September 2015; expanded coverage for general surgery and orthopedics
- Brought in digital mammography
- Provided 3-month trial for MeVisits – online access with provider for minor issues and ailments to avoid making an appointment and/or requiring transportation to a provider’s office (\$35 per visit after trial expired; no registration or subscription services)
- Established Ohio County Pain Care to treat patients with chronic pain issues
- Affiliated and leased space in the Ohio County Family Care – Beaver Dam office to Estes Behavioral Health to increase access to mental health services within the community
- Opened Butler County Family Care, a rural health clinic, in neighboring county (HESPA/medically underserved area) to reach people at farther edges of Ohio County
- Addition of Chronic Care/Case Manager for Medicare patients as part of ACO

Anticipated results from OCH Implementation Strategy

Community Benefit Attribute Element	Yes, Implementation Strategy Addresses	Implementation Strategy Does Not Address
1. Available to public and serves low income consumers	X	
2. Reduces barriers to access services (or, if ceased, would result in access problems)	X	
3. Addresses disparities in health status among different populations	X	
4. Enhances public health activities	X	
5. Improves ability to withstand public health emergency	X	
6. Otherwise would become responsibility of government or another tax-exempt organization	X	
7. Increases knowledge; then benefits the public		X

The strategy to evaluate OCH intended actions is to monitor change in the following Leading Indicator:

- Number of visits to emergency department = 14,122 in 2015

The change in the Leading Indicator anticipates appropriate change in the following Lagging Indicator:

- Increase in percentage of adults reporting that there was one person they think of as their personal doctor or healthcare provider = 75% in 2016 according to Kentucky Healthfacts with data from BRFSS

OCH anticipates collaborating with the following other facilities and organizations to address this Significant Need:

Organization	Contact Name	Contact Information
Ohio County Health Coalition	Access to Care Sub-Committee	https://grrhc.wildapricot.org/
Green River District Health Department	Debbie Fillman, CEO	(270) 686-7747 www.healthdepartment.org
Ohio County School System	Guidance Office Staff	(270) 298-3249 http://www.ohio.k12.ky.us/
Kentucky Cancer Program – Green River	Jaime Rafferty, Cancer Control Specialist	(270) 683-2560 http://www.kycancerprogram.org/
Green River Area Development District (GRADD)	Michelle Drake, CWPT, Kentucky Career Center	(270) 686-2542 http://www.gradd.com/
Estes Behavioral Health	Jessica Estes, APRN	(270) 927-6003
Quorum Health Resources		www.QHR.com

Other local resources identified during the CHNA process that are believed available to respond to this need:

Organization	Contact Name	Contact Information
Bluegrass Regional Healthcare	Susan Matthews, APRN	(270) 274-9222
Norsworthy Medical Associates	Eric Norsworthy, MD	(270) 274-1800
Multi-Care of Ohio County	Darby Cole, MD	(270) 274-4771

4. TEEN ISSUES

OCH does not intend to develop an implementation strategy for this Significant Need

- We are choosing not to respond to this need at this time. We feel we can have a greater impact by putting attention and resources toward other significant needs for which we are better qualified to serve.

Federal classification of reasons why a hospital may cite for not developing an Implementation Strategy for a defined Significant Need	
1. Resource Constraints	X
2. Relative lack of expertise or competency to effectively address the need	
3. A relatively low priority assigned to the need	
4. A lack of identified effective interventions to address the need	X
5. Need is addressed by other facilities or organizations in the community	X
6. Other	

Other local resources identified during the CHNA process that are believed available to respond to this need:

Organization	Contact Name	Contact Information
Ohio County Health Coalition – Substance Abuse Sub-Committee	Rebecca Horn, Prevention Coordinator with Green River District Health Department	https://grrhc.wildapricot.org/
Together We Care	Shelia Barnard, Director	(270) 504-0037 http://www.octwc.com/
Ohio County School System		(270) 298-3249 http://www.ohio.k12.ky.us/

5. MENTAL HEALTH

OCH services, programs, and resources available to respond to this need include:

- Expand affiliation with Estes Behavioral Health to include additional providers to increase access to mental health services within the community; continue to lease space in primary care setting
- Explore affiliation arrangements with other healthcare systems to provide telemedicine services to increase access to mental health services
- Create mental health care provider section on community resource guide; research and include all mental health service providers who provide services on a local level; OCH will audit guide on quarterly basis and make available through ER and community partner websites

Community Benefit Attribute Element	Yes, Implementation Strategy Addresses	Implementation Strategy Does Not Address
8. Available to public and serves low income consumers	X	
9. Reduces barriers to access services (or, if ceased, would result in access problems)	X	
10. Addresses disparities in health status among different populations	X	
11. Enhances public health activities	X	
12. Improves ability to withstand public health emergency		X
13. Otherwise would become responsibility of government or another tax-exempt organization	X	
14. Increases knowledge; then benefits the public	x	

The strategy to evaluate OCH intended actions is to monitor change in the following Leading Indicator:

Increase # of clinical mid-level mental health care providers available to treat patients in Ohio County = 1 in 2016

The change in the Leading Indicator anticipates appropriate change in the following Lagging Indicator:

Reduce the # of mentally unhealthy days (per month) for Ohio County citizens = 7 in 2016 according to Kentucky Healthfacts with data from BRFSS

Other local resources identified during the CHNA process that are believed available to respond to this need:

Organization	Contact Name	Contact Information
Ohio County Health Coalition	Access to Care Sub-Committee	https://grrhc.wildapricot.org/
Estes Behavioral Health	Jessica Estes, APRN	(270) 927-6003

6. DENTAL HEALTH

OCH does not intend to develop an implementation strategy for this Significant Need

- We are choosing not to respond to this need at this time. We feel we can have a greater impact by putting attention and resources toward other significant needs for which we are better qualified to serve.

Federal classification of reasons why a hospital may cite for not developing an Implementation Strategy for a defined Significant Need	
1. Resource Constraints	X
2. Relative lack of expertise or competency to effectively address the need	X
3. A relatively low priority assigned to the need	
4. A lack of identified effective interventions to address the need	X
5. Need is addressed by other facilities or organizations in the community	X
6. Other	Addressed in part under 'Access to Care.'

Other local resources identified during the CHNA process that are believed available to respond to this need:

Organization	Contact Name	Contact Information
Ohio County Health Coalition	Access to Care Sub-Committee	https://grrhc.wildapricot.org/

APPENDIX

Appendix A – Illustrative Schedule h (Form 990) Part V B

Illustrative IRS Schedule h Part V Section B (Form 990)⁴

Community Health Need Assessment Illustrative Answers

1. **Was the hospital facility first licensed, registered, or similarly recognized by a State as a hospital facility in the current tax year or the immediately preceding tax year?**

No

2. **Was the hospital facility acquired or placed into service as a tax-exempt hospital in the current tax year or the immediately preceding tax year? If “Yes,” provide details of the acquisition in Section C**

No

3. **During the tax year or either of the two immediately preceding tax years, did the hospital facility conduct a community health needs assessment (CHNA)? If “No,” skip to line 12. If “Yes,” indicate what the CHNA report describes (check all that apply)**

- a. **A definition of the community served by the hospital facility**

Ohio County is a rural community located in Western Kentucky with a primary service area that includes a population estimated at 21,488. Ohio County Hospital delivers comprehensive healthcare to the residents of Beaver Dam, Centertown, Cromwell, Dundee, Fordsville, Hartford, Horse Branch, McHenry, Olaton, Rockport, and Rosine. It is the fifth largest of the 120 counties in Kentucky covering 596.73 square miles. Ohio County has been designated as a Health Professional Shortage Area (HPSA) and a Medically Underserved Area/Population (MUA/P).

- b. **Demographics of the community**

Green River Community Health Improvement Plan; p.62

- Existing health care facilities and resources within the community that are available to respond to the health needs of the community**

Green River Community Health Improvement Plan 2015-2018; p.14, 25

- c. **How data was obtained**

Green River Community Health Improvement Plan 2015-2018; p.5-7

- d. **The significant health needs of the community**

Green River Community Health Improvement Plan 2015-2018; p.8-11, 25-26

- e. **Primary and chronic disease needs and other health issues of uninsured persons, low-income persons, and minority groups**

Green River Community Health Improvement Plan Addendum: Identified Vulnerable Communities

- f. **The process for identifying and prioritizing community health needs and services to meet the**

⁴ Questions are drawn from 2014 Federal 990 schedule h.pdf and may change when the hospital is to make its 990 h filing

community health needs

Green River Community Health Improvement Plan 2015-2018; p.5-9

g. The process for consulting with persons representing the community's interests

Green River Community Health Improvement Plan 2015-2018; p.5-7

h. Information gaps that limit the hospital facility's ability to assess the community's health needs

N/A

i. Other (describe in Section C)

N/A

4. Indicate the tax year the hospital facility last conducted a CHNA: 2013

5. In conducting its most recent CHNA, did the hospital facility take into account input from persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge of or expertise in public health? If "Yes," describe in Section C how the hospital facility took into account input from persons who represent the community, and identify the persons the hospital facility consulted

Green River Community Health Improvement Plan 2015-2018; p.5-7

6. a. Was the hospital facility's CHNA conducted with one or more other hospital facilities? If "Yes," list the other hospital facilities in Section C

No

b. Was the hospital facility's CHNA conducted with one or more organizations other than hospital facilities? If "Yes," list the other organizations in Section C

Yes; Green River Community District Health Department (Daviness, Hancock, Henderson, McLean, Ohio, Union, and Webster Counties)

7. Did the hospital facility make its CHNA report widely available to the public?

Yes

If "Yes," indicate how the CHNA report was made widely available (check all that apply):

a. Hospital facility's website (list URL)

<http://www.ohiocountyhospital.com/>

b. Other website (list URL)

N/A

c. Made a paper copy available for public inspection without charge at the hospital facility

Yes

d. Other (describe in Section C)

N/A

8. **Did the hospital facility adopt an implementation strategy to meet the significant community health needs identified through its most recently conducted CHNA? If “No,” skip to line 11**

Yes; this report, p.7-17

9. **Indicate the tax year the hospital facility last adopted an implementation strategy:**

2013

10. **Is the hospital facility's most recently adopted implementation strategy posted on a website?**

- a. **If “Yes,” (list url):**

Yes; www.ohiocountyhospital.com

- b. **If “No,” is the hospital facility's most recently adopted implementation strategy attached to this return?**

11. **Describe in Section C how the hospital facility is addressing the significant needs identified in its most recently conducted CHNA and any such needs that are not being addressed together with the reasons why such needs are not being addressed**

This report, p.7-17

12. a. **Did the organization incur an excise tax under section 4959 for the hospital facility's failure to conduct a CHNA as required by section 501(r) (3)?**

NO

- b. **If “Yes” to line 12a, did the organization file Form 4720 to report the section 4959 excise tax?**

N/A

- c. **If “Yes” to line 12b, what is the total amount of section 4959 excise tax the organization reported on Form4720 for all of its hospital facilities?**

N/A