

Central Montana Health Assessment

Fergus, Judith Basin, Wheatland, Golden Valley, Musselshell, Petroleum Counties

2015-2017

Central Montana Health District and Central Montana Community Health Center Lewistown, Montana

<u>Acknowledgements</u>

Central Montana Health District and Central Montana Community Health Center partnered to prepare the Central Montana Health Assessment. Many community-based organizations participated to contribute valuable information and input throughout the process. Community members were an integral part of data collecting by taking the time to complete our community health needs assessment survey.

Special thanks to the community stakeholders who contributed their time, ideas and commitment to the Community Health Assessment:

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Executive Summary

Central Montana Health District's Mission Statement:

Improving the health of our communities through education, health promotion and disease and injury prevention.

Central Montana Community Health Center Mission:

Providing Central Montana access to Quality, Affordable, Preventative and Primary Health Care.

A Community Health Assessment (CHA) is the systematic process of identifying the strengths and weaknesses of a community to better understand key health needs. The purpose of a CHA is to provide data or indicators of areas that could benefit the health of the community. This document is a glimpse of time and is meant for information purposes to move forward to identify directions for future planning. As our communities change over time re-evaluation will be needed. Periodic CHA's allow us to examine where we have been, recognize improvements made, and determine where we are heading.

A committee was developed to lead the CHA, which brought together various groups throughout the communities to gather input and opinions. Groups included local hospitals, disaster and emergency services, Council on Aging, public health, HRDC, WIC and Head Start to name a few. By having a diverse group of stakeholders, the committee provided valuable information to develop a survey for primary data collection, as well as resources of secondary data collection for the communities. The goal was to ensure all populations within the communities were being accounted for and represented in the data collection.



Methodology

A community health survey was designed based on other community health survey models and previous surveys completed in Central Montana, in hopes of obtaining comparable data. Voter registration lists were obtained from each county to compile a mailing list. Population of each county was taken into consideration and the number of surveys per county were correlated to percentage of the total Health District population. A 95% confidence interval was used for a total sample size of 1476 surveys. The goal was to obtain 25% return rate on surveys, 26% was actually obtained. Data from the US Census Bureau was used to identify population data for each county. Fergus county made up 54% of the population, 797 surveys were mailed out and 203 returned. Musselshell County holds 21% of the population, 310 surveys were mailed and 79 returned. Wheatland and Judith Basin counties each are 10% of the Health District's population; 147 and 148 surveys were sent out respectively with a return of 38 in Wheatland and 43 in Judith Basin. Golden Valley and Petroleum are the smallest counties in the Health District. Golden Valley makes up 3% of the population; 44 surveys were distributed and 13 returned. Petroleum county is 2%; 30 surveys were mailed and 13 responded. In all 388 surveys were returned for data collection. To increase response rate a raffle for a \$50 gift card per county was utilized as an incentive.

(United States Census Bureau Quick Facts, 2016)

Limitations

The Central Montana Health District Survey did have limitations to the study. First being potential selection bias, to be included in the randomized mailing the participant had to be a registered voter. Second, the data is based on self reporting and may reflect the respondents' likelihood of reporting a behavior. Next, of the respondents the majority were 65 years old and older at 39% and 66% were female, though according to demographic data the 65+ age range composes approximately 22% and females just under 50% of the population. The data may be skewed due to the disproportionate age and gender of respondents to actual population numbers. Furthermore, data was gathered on household income levels, though neglected to obtain household size resulting in incomplete data.





Central Montana Health District incorporates six frontier counties:

frontier counties:
Fergus
Golden Valley
Judith Basin
Musselshell
Petroleum
Wheatland





Community Healthcare Services Available

- Central Montana Medical **Center** in Lewistown (Fergus County) is a 25-bed critical access hospital. Providing a range of services from rehab**,** home health/hospice, in/outpatient surgical services to obstetrics, emergency, intensive care and high tech radiology services accompanied with a complete staff of specialty physicians. Provider staff include 14 physicians and 4 nurse practitioners, plus a number of visiting providers/consultants in various specialties. Central Montana Physicians Clinic is on site as well providing outpatient clinic services.
- Central Montana Health **District**, based in Lewistown, provides environmental health and public health services. Environmental health services include food safety, school inspections, license and inspection of public accommodations, septic system permits and subdivision review. Public health services include communicable disease surveillance and prevention, bioterrorism and emergency preparedness, school and community immunization clinics, maternal and child health, comprehensive cancer control program in coordination with Montana Cancer Control Program.
- Fergus County Nurses Office is located in the Fergus County Courthouse is Lewistown. The nurses office provides the area with immunizations, resource for travel vaccines, lead and hematocrit testing for Head Start, reviews immunization records for schools and daycares, offers nursing services to the jail, drug and alcohol screen for court systems, blood pressure checks, strep throat testing, head lice education resource and the local registrar.

- Central Montana Family Planning has clinics in both Lewistown and Roundup that provide clients with reproductive healthcare, STD/HIV testing and treatment, HPV vaccinations, birth control options, pregnancy testing, health education, cancer screenings. Family planning offers services on a sliding fee scale according to income and family size.
- Central Montana Community **Health Center** is a non-profit Federally Qualified Health Center that provides behavioral/mental health services and primary care to all residents regardless of income or ability to pay. Services include: routine visits, annual physicals, well child visits, immunizations, health education, care for chronic illnesses, access to behavioral health screening, dental care services, laboratory testing, assistance applying for insurance and prescription drug assistance. Provider staff includes one physician and two nurse practitioners
- Private offices in Lewistown providing family practice services
 - Cathy Holmes, DO
 - William Holmes, DO
 - Kimberlee Decker, FNP
- The Montana Mental Health Nursing Care Center is a licensed residential facility for the long term care and treatment of persons who have mental disorder and who require a level of care not available in the community, but who cannot benefit from the intensive psychiatric treatment available at Montana State Hospital.

Community Healthcare Services Available cont.

- Roundup Memorial Healthcare in Roundup (Musselshell County) is a 25 bed Critical Access Hospital providing acute care, intermediate long term care, emergency services, clinical laboratory and radiology services. Outpatient services include wound care, physical therapy, blood transfusions, IV treatment. Roundup Hospital Clinic is a multi-service rural health outpatient clinic. Providers include one physician, one family nurse practitioner and two certified physician assistants. Hospice services are provided through Rocky Mountain Hospice.
- Wheatland Memorial Healthcare in Harlowton is a 25bed acute care/swing bed facility providing acute care and nursing home care to the community. Outpatient services are provided at the Bair Memorial Clinic located on the hospital campus. Provider staff includes one Internal Medicine/Cardiology physician, one Family Nurse Practitioner and two Physician Assistants. Clinical laboratory, radiology and physician therapy services are also provided.
- Women, Infant and Child (WIC) is based in Lewistown, though provides services to Fergus, Wheatland and Judith Basin Counties with clinics in Lewistown and Harlowton. Musselshell County also has WIC access through River Stone Health in Billings. WIC programs are available to low to moderate income pregnant women**,** recently delivered women, breastfeeding women, infants and children up to age 5. WIC programs assist families by providing nutritional assistance.

- District 6 HRDC is a communitybased, nonprofit organization that partners with government, private entities and other nonprofit organizations to provide comprehensive services needed to help low-income individuals and families become self-sustaining and productive members of our community.
 - State Displaced Homemaker
 - Workforce Investment Act
 - Employment-Related Referrals
 - Women, Infants, & Children
 - Section 8 Rental Assistance
 - Emergency Assistance
 - Low Income Energy Assistance
 - Low Income Weatherization
 - Energy Share
- Snowy Mountain Development Corporation is a non-profit organization located in Lewistown, though serving six counties. The mission is to improve economic and social conditions through conservation, utilization, expansion and development of all accessible resources in the area. SMDC's focus is community & economic development including feasibility studies, planning grants, infrastructure projects, job creation, job retention, workforce training, business technical assistance (including business start-up, business plans, gap financing) and more.
- Job Service

All six counties are designated Primary
Care Health Professional Shortage
Areas as determined by the U.S.
Department of Health and Human
Services, Health Resources and Services
Administration.

Demographic Information^a

	CMHD	Montana
Population, Census, April 1, 2010	21,742	989,415
Population estimates, July 1, 2014	21,461	1,023,579
Population, percent change April 1, 2010–July 1, 2014	-	3.5%
Persons under 5 years, July 1, 2013	5.0%	6.0%
Persons under 18 years, July 1, 2013	20.4%	22.1%
Persons 65 years and over, July 1, 2013	22.2%	16.2%
Female persons, July 1, 2013	49.6%	49.8%
White alone, July 1, 2013	96.2%	89.5%
Black or African American alone, July 1, 2013	-	0.6%
American Indian and Alaska Native alone, July 1, 2013	1.3%	6.5%
Asian alone, July 1, 2013	0.3%	0.8%
Native Hawaiian and Other Pacific Islander alone, July 1, 2013	-	0.1%
Two or more races, July 1, 2013	1.8%	2.5%
Hispanic or Latino, July 1, 2013	2.3%	3.3%
White alone, not Hispanic or Latino, July 1, 2013	94.3%	87.0%
Foreign born persons, 2009–2013	1.2%	2.0%
Language other than English spoken at home, percent of persons age 5 years+, 2009–2013	5.1%	4.4%

^{*}Z Value greater than zero but less than half unit of measure shown.

Data from http://quickfacts.census.gov/

Demographic Information^a

	CMHD	Montana
High school graduate or higher, percent of persons age 25 years+, 2009–2013	90.5%	92.1%
Bachelor's degree or higher, percent of persons age 25 years+, 2009–2013	22.4%	28.7%
Veterans, 2009–2013	2,499	94,404
With a disability, under age 65 years, 2009–2013	8.2%	9.0%
Mean travel time to work (minutes), workers age 16 years+, 2009–2013	19.85 minutes	18 minutes
Median gross rent, 2009–2013	\$585	\$682
Owner-occupied housing units, 2009–2013	75.3%	68.3%
Persons per household, 2009–2013	-	2.39
Median household income, 2009–2013	\$39,428	\$46,230
Persons without health insurance, under age 65 years	23.2%	19.5%
Persons in poverty	15.7%	16.5%
Population per square mile, 2010	1.8	6.8

^{*}Z Value greater than zero but less than half unit of measure shown.

Data from http://quickfacts.census.gov/



Communicable Disease

Table 1. Number and rate of selected communicable diseases — Montana, 2011-2013.

CMHD			Medium C	Montana	
		Rate per 100,000 ²	Number per	Rate per 100,000ª	Rate per 100,000ª
Health Indicator	Number	(95% CI)	County	(95% CI)	(95% CI)
Chlamydia	87	133.9	3,344	485.0	366.2
		(107.5, 164.7)	2,2	(468.9, 501.7)	(359.5, 373.1)
Hepatitis C	55	84.6	1,185	171.9	123.0
Hepatitis C	33	(63.8, 110.2)	1,165	(162.4, 181.9)	(119.1, 127.0)
Pertussis	25	38.5	253	36.7	44.6
renussis	23	(25.0, 57.2)	233	(32.4, 41.5)	(42.3, 47.0)
Campylobacteriosis	26	40.0	169	24.5	22.2
Campylobacteriosis	20	(26.0, 58.7)	109	(21.1, 28.5)	(20.6, 24.0)

^aDepartment of Corrections population included in county rate where applicable.

Data provided by the Communicable Disease Epidemiology Section.

Table 2. Up-to-date (UTD) on childhood vaccinations for 24–35 month old children as of March 1st of the year of assessment based on imMTrax data reviewed during Vaccines for Children Program Clinic Reviews conducted every other year — Montana, 2011 and 2014.^a

Health Indicator	Fergus County	Musselshell County	CMHD	Medium County Data	Montana
Number assessed 2011 ^b	96	-	-	731	2,249
Number UTD 2011	70	-	-	471	1,305
Percent UTD 2011°	72.9	-	-	64.4	58.7
Number assessed 2014 ^d	-	28	-	1,536	4,042
Number UTD 2014	-	15	-	987	2,651
Percent UTD 2014	-	53.6		64.3	65.6
(95% CI)	-	(33.9, 72.5)	-	(61.8, 66.7)	(64.1, 67.1)

[&]quot;UTD = 4 DTaP, 3 Polio, 1 MMR, 3/4 HIB, 3 Hep B, 1 Var, 4 PCV by 24 months.

Data provided by the Immunization Section of the Communicable Disease Bureau.

^bIn 2011, chart reviews occurred. Clinics with fewer 50 chart, the review included all available charts. Clinics with more than 50 charts, a sample of charts were reviewed and validated.

Confidence interval cannot be calculated because the total number of records reviewed is unknown.

In 2014, all immunization records were reviewed electronically in the Montana Immunization Information System (imMTrax). The precision of each estimate was quantified using 95% confidence intervals.

Chronic Disease

Table 3. Inpatient admissions for selected chronic conditions — Montana, 2011-2013.

	CMHD		Medium County Data		Montana
		Rate per 100,000 ^a	Average Number per	Rate per 100,000 ^a	Rate per 100,000 ^a
Health Indicator	Number	(95% CI)	County	(95% CI)	(95% CI)
Asthma	30	33.6 (21.9, 51.5)	26.6	52.0 (46.7, 57.9)	47.7 (45.2, 50.3)
Chronic Obstructive Pulmonary Disease (COPD) ^b	714	664.2 (615.0, 718.1)	536.2	819.0 (800.0, 838.3)	716.8 (708.1, 725.6)
Cardiovascular Disease	810	751.5 (698.8, 809.0)	518.6	807.9 (788.8, 827.4)	746.7 (737.7, 755.8)
Diabetes (types 1 and 2)	759	781.0 (722.4, 844.6)	608.0	1,000.7 (978.5, 1023.4)	822.5 (812.8, 832.3)

[&]quot;Rates are age standardized to the 2000 Projected US Population using Distribution #1 as described in Klein and Schoenborn 2001 and given per 100,000 person years.

Inpatient admission and ED visit data provided courtesy of participating MHA members, collected through the Montana Hospital Discharge Data System (MHDDS).

Table 4. Inpatient admissions for injury by type and mechanism of injury — Montana, 2011–2013.

	CMHD		Medium County Data		Montana
		Rate per 100,000 ^a	Average Number per	Rate per 100,000ª	Rate per 100,000ª
Health Indicator	Number	(95% CI)	County	(95% CI)	(95% CI)
All Unintentional	463	548.6	369.7	671.1	538.6
Injury		(494.5, 608.2)	565.7	(652.1, 690.7)	(530.6, 546.8)
Falls	257	256.4	189.5	312.1	268.7
rans	231	(223.7, 249.4)	109.3	(299.9, 324.7)	(263.2, 274.3)
Struck by/against	13	‡	12.4	24.6	18.0
Siruck by/against	15	‡	12.4	(20.9, 28.9)	(16.5, 19.6)
Motor Vehicle	43	72.2	42.2	93.6	60.6
Wolor vehicle	7.7	(51.0, 100.2)	72.2	(86.0, 101.8)	(57.8, 63.6)
Poisoning	6	‡	19.6	36.8	36.3
Folsoling		‡	19.0	(32.3, 41.8)	(34.2, 38.5)
Intentional	28	56.5	42.4	100.1	106.5
Self-Harm	20	(36.9, 83.2)	72.7	(92.0, 108.8)	(102.6, 110.5)
Traumatic Brain	matic Brain 68 95.6 59.1		59.1	117.5	91.3
Injury	00	(72.2, 125.4)	39.1	(109.2, 126.2)	(87.9, 94.8)

^{*}Rates are age standardized to the 2000 Projected US Population using Distribution #1 as described in Klein and Schoenborn 2001 and given per 100,000 person years.

Inpatient admission and ED visit data provided courtesy of participating MHA members, collected through the Montana Hospital Discharge Data System (MHDDS).

bChronic obstructive pulmonary disease (COPD), includes chronic bronchitis, emphysema, bronchiectasis, and chronic airway obstruction.

[‡]Does not meet standards of reliability or precision.

[‡]Does not meet standards of reliability or precision.

Table 5. Emergency Department visits for selected chronic conditions — Montana, 2011–2013.

	CMHD			County Data	Montana
		Rate per 100,000a	Average Number per	Rate per 100,000 ^a	Rate per 100,000a
Health Indicator	Number	(95% CI)	County	(95% CI)	(95% CI)
Asthma	135	231.7 (191.8, 278.1)	138.3	305.8 (292.0, 320.2)	260.0 (254.0, 266.2)
Chronic Obstructive Pulmonary Disease (COPD) ^b	999	1,075.6 (1003.6, 1152.9)	700.7	1,204.0 (1179.2, 1229.3)	804.9 (795.2, 814.8)
Cardiovascular Disease	478	453.5 (411.8, 500.2)	349.1	563.3 (547.1, 580.1)	372.7 (366.2, 379.3)
Diabetes (types 1 and 2)	980	1,060.7 (989.2, 1,137.4)	952.3	1,688.5 (1658.3, 1719.2)	1,235.6 (1223.3, 1248.0)

^{*}Rates are age standardized to the 2000 Projected US Population using Distribution #1 as described in Klein and Schoenborn 2001 and given per 100,000 person years.

Inpatient admission and ED visit data provided courtesy of participating MHA members, collected through the Montana Hospital Discharge Data System (MHDDS).

Table 6. Emergency department visits for injury by type and mechanism of injury — Montana, 2011–2013.

	CMHD		Medium County Data		Montana
		Rate per 100,000 ^a		Rate per 100,000ª	Rate per 100,000a
Health Indicator	Number	(95% CI)	Number per County	(95% CI)	(95% CI)
All Unintentional	3,815	6,163.6	3,487.3	7,504.0	5,901.8
Injury	3,013	(5954.8, 6378.2)	5,107.5	(7435.4, 7573.1)	(5873.1, 5930.4)
Falls	1,407	1,966.9	1,236.1	2,495.5	2,020.0
1 ans	1,407	(1855.5, 2084.2)	1,230.1	(2457.0, 2534.5)	(2003.7, 2036.5)
Stands by/against	489	877.6	470.5	1,057.0	820.2
Struck by/against	409	(789.2, 963.5)	470.3	(1031.2, 1083.5)	(809.4, 831.1)
Motor Vehicle	182	308.1	262.4	589.3	520.0
Wolor vehicle	162	(261.8, 361.1)	202.4	(569.9, 609.3)	(511.5, 528.6)
Doisoning	37	63.4	56.4	119.8	95.4
Poisoning	3/	(43.6, 90.1)	30.4	(111.3, 128.8)	(91.8, 99.1)
Intentional	21	43.9	62.3	148.1	104.5
Self-Harm	21	(27.0, 68.2)	02.3	(138.2, 158.5)	(100.6, 108.4)
Traumatic Brain	267	447.0	320.4	690.4	649.9
Injury	267	(391.6, 508.9)	320.4	(669.7, 711.5)	(640.5, 659.5)

^{*}Rates are age standardized to the 2000 Projected US Population using Distribution #1 as described in Klein and Schoenborn 2001 and given per 100,000 person years.

Inpatient admission and ED visit data provided courtesy of participating MHA members, collected through the Montana Hospital Discharge Data System (MHDDS).

bChronic obstructive pulmonary disease (COPD), includes chronic bronchitis, emphysema, bronchiectasis, and chronic airway obstruction.

[†]Does not meet standards of reliability or precision.

[‡]Does not meet standards of reliability or precision.

Table 7. Cancer incidence — Montana, 2011–2013.

	C	MHD	Medium	County Data	Montana
		Rate per 100,000	Average Number per	Rate per 100,000	Rate per 100,000
Health Indicator	Number	(95% CI)	County	(95% CI)	(95% CI)
All Cancer	459	440.2	290.1	442.1	439.8
All Calicel	409	(398.6, 486.8)	290.1	(428.1, 456.6)	(432.9, 446.8)
Desetate (males)	58	104.7	36.4	103.0	112.8
Prostate (males)	38	(78.8, 141.1)	30.4	(94.0, 113.0)	(108.1, 117.8)
Donat (famala)	67	126.6	38.0	113.9	115.7
Breast (female)	07	(96.0, 168.0)	36.0	(104.0, 124.8)	(110.8, 120.9)
Lung and	71	64.4	38.2	56.7	56.4
Bronchus	/1	(50.0, 84.1)	36.2	(51.9, 62.0)	(54.0, 58.9)
Colon and	40	37.9	25.2	37.9	36.9
Rectum	40	(26.6, 54.9)	23.2	(33.9, 42.4)	(35.0, 39.0)
Corpus Uteri	17	‡	10.4	29.8	25.4
(female)	17	‡	10.4	(25.0, 35.7)	(23.2, 27.9)
Melanoma	24	26.3	14.6	23.4	24.9
ivicianoma	∠ 4	(15.9, 42.9)	14.0	(20.1, 27.1)	(23.2, 26.7)

‡Does not meet standards of reliability or precision.

Cancer incidence data are from the Montana Central Tumor Registry.

Figure 1: Age-adjusted cancer incidence rates by cancer site — Montana, 2011–2013.

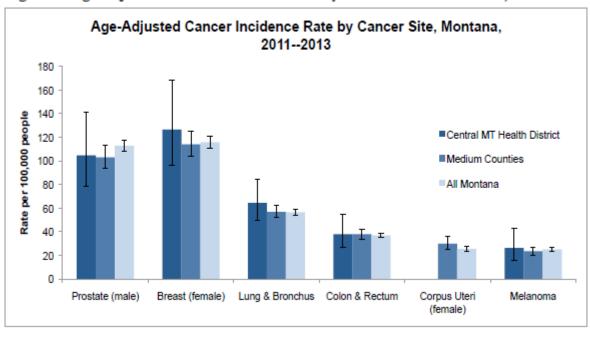


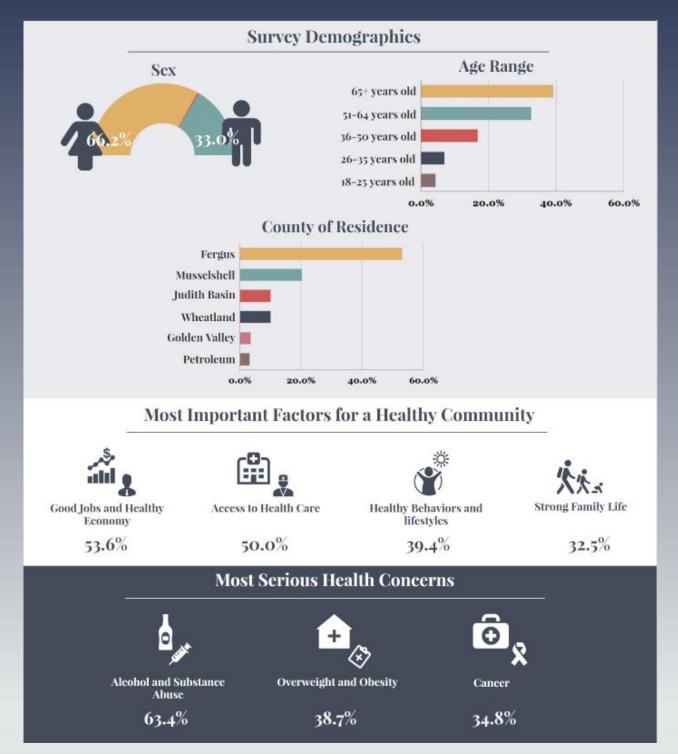
Table 8. Tobacco retailers by county, Montana 2013.

Health Indicator	Fergus County	Golden Valley County	Judith Basin County	Musselshell County	Petroleum County	Wheatland County
Retailer Number	13	1	3	5	3	4
Retailers per 1,000 population	1.10	1.14	1.46	1.10	5.94	1.85

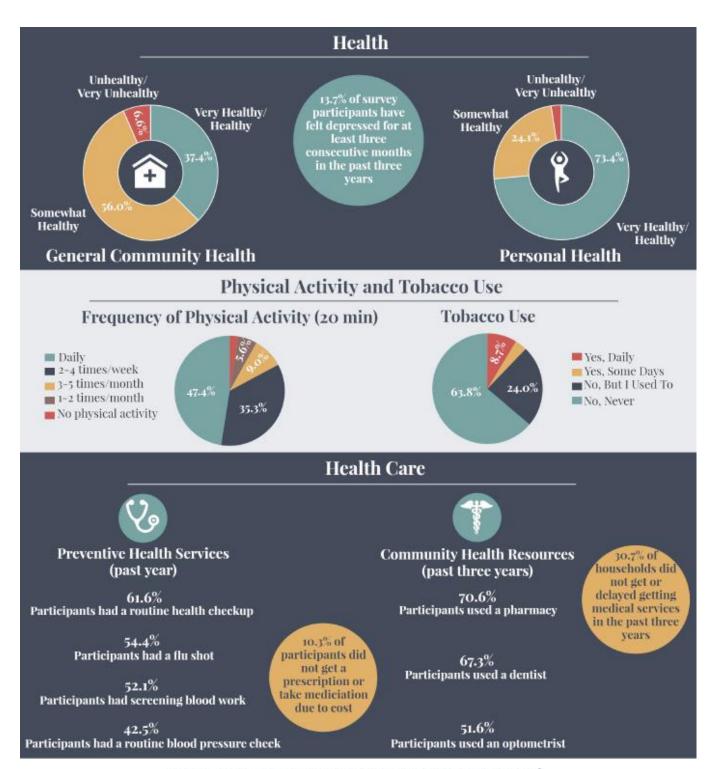
Data from: http://dphhs.mt.gov/Portals/85/Documents/MTUPPapp/index.html

The Central Montana health needs assessment survey was sent out in June 2016 to Fergus, Musselshell, Judith Basin, Wheatland, Golden Valley and Petroleum Counties.

A summary of the results are below and on the next page.



Of note the majority of respondents were females over the age of 65, which does not coincide with the actual demographics of the region. Adults age 65 and older make up approximately 22% of population and females compose 49.6% of population, according to the US Census Bureau in 2013. Due to the difference the results maybe skewed due to type of respondents.



What Would Improve Access to Health Care?



In evaluating our primary and secondary data the group of community stakeholders were able to identify areas of need within our communities. The top three being: alcohol and substance abuse, overweight and obesity, and cancer. The stakeholder group also made note that mental health is an issue that was evaluated and may contribute to the top three categories.

Community Health Needs Assessment Survey Results

- Perception of general health of community – 56% responded somewhat healthy
- Perception of most serious health concerns – Alcohol abuse, Overweight/obesity and cancer
- Perception of most important factors for a healthy community – good jobs and healthy economy, access to health care, healthy behaviors and lifestyles, strong family life
- Personal knowledge of health services available in community – good 57% and fair 28%
- Sources to learn out health services

 word of mouth/reputation, health
 care provider, newspaper
- Community health resources utilized in the last 3 years (other than hospital or clinic) – pharmacy, dentist and optometrist
- What would improve the community's access to health care

 more primary care providers, more specialist, improved quality of care and improved wait time to access care
- How important are local health care providers and services to the economic well-being of an area – 66% rated as very important
- Classes interested in attending if offered – weight loss/nutrition, women's health, first aid/CPR
- Have you or a family member delayed seeking medical services in the last 3 years – 30% yes
 - > 45% due to cost too much
 - > 30% could not obtain appointment
 - > 24% too long of wait for appointment

(reasons were choose all that apply)

- Preventative service used in last year (select all that apply) – 62% routine health checkup, 54% flu shot, 52% screening blood work, 43% routine blood pressure check
- In the past 3 years have you or a family member seen a primary care provider – 96% Yes
 - Location of provider 57%
 Lewistown, 32% Billings
- In the past 3 years have you or a family member seen a specialist – 83%Yes
 - Type Dentist, Chiropractor, Dermatologist, Orthopedic surgeon
- Perception of personal health 62% reported Healthy
- In the past 3 years, have there been at least 3 consecutive months when you felt depressed – 14% Yes
- In the past month, how often have you had physical activity for at least 20 minute – 47% Daily, 35% 2-4 times per week
- Do you use tobacco products 9%
 Yes daily, 4% Yes some days
- Aware of assistance for tobacco cessation – 84% Yes, 16% No
- Has cost prohibited you from obtaining a prescription or taking medication – 10% Yes, 90% No
- Type of health insurance
 - ➤ Medicare 35%
 - ➤ Employer Sponsored 30%
 - ➤ Private Insurance 23%
- How well do you feel your insurance covers healthcare costs – 22% excellent, 50% good, 23% fair, 5% poor
- Are you aware of programs to help pay for healthcare expenses – 11% yes and use them, 53% yes but do not qualify, 23% no, 13% not sure

References

United States Census Bureau Quick Facts. (2016, May 18). Retrieved from United States Census Bureau:

https://www.census.gov/quickfacts/table/PST045215/30107,30069,30037,30045,30027,30065

Community Health Profile 2015 – Central Montana Health District

Central Montana Health District Survey Assessment

