

2012 Community Health Needs Assessment

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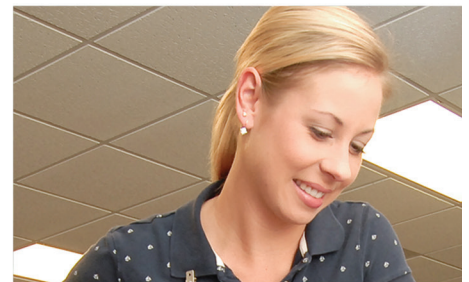


Table of Contents

Executive Summary	4
Acknowledgements and Data Limitations	8
CoxHealth Service Area Definitions and Demographics	10
22-County Service Area	11
Economic Conditions of the 22-County Service Area	13
Payer growth in the 22-County Market	16
Service Area Household Income and Poverty Guidelines	18
Medically Underserved, Health Professional Shortage Areas, and Rural Health	19
Existing Health Care Facilities and Resources Within the Service Area	19
CoxHealth Public Health Survey of Area Healthcare Needs	20
Summary of the Public Health Survey	21
Board of Director’s Survey	24
Survey of Area Heads of Households	24
Facebook/Twitter Survey	25
Health Behaviors and Outcomes	26
2012 County Health Rankings	32
Strategic Planning	35
Appendices	37
County-by-county demographics	38
County-by-county payer mix	53
County-by-county unemployment rates	54
Existing Health Care Facilities and Resources Within The Community	56
Public Health Survey	81

Community Health Needs Assessment Executive Summary

On March 23, 2010, the Patient Protection and Affordable Care Act was signed into law. With the signage of this legislation, reform was no longer optional for health care leaders to consider. Federal law as enforced by the Internal Revenue Service (IRS) now requires tax exempt health care organization to perform a community health needs assessment (CHNA), prioritize the findings, and implement a strategy that will improve the health of the community based on the CHNA results.

CoxHealth has shown leadership in assessing the health of the communities served in the 22-County service area. The CHNA requirement mandated by the PPACA is a systematically deployed key resource in the CoxHealth Strategic Planning Process. Assessment of the CoxHealth service area has been performed annually through the publication of the Environmental Scan since 2006. The presentation of this assessment conforms to the IRS 2010 990 form, Schedule H.

This Community Health Needs Assessment addresses the following:

1. A definition of the community served by CoxHealth
2. Community Demographics
3. 22-County Service Area Unemployment and Employment
4. Uninsured and Medicaid Inpatient in the 22-County Service Area
5. Service Area Household Income and Poverty Guidelines
6. Medically Underserved, Health Professional Shortage Area, and Rural Health
7. Existing health care facilities and resources within the service area
8. An explanation of how the data was gathered
9. The health needs of the community
10. Primary and chronic disease needs and other health issues of uninsured persons, low income persons, and minority groups
11. The process of identifying and prioritizing community health needs and services
12. The process used to consult persons representing the community's interests
13. Any information gap limitations

SERVICE AREA AND DEMOGRAPHICS

- **22-County Service Area:** The service area used in this assessment is the 22-County service area that surrounds CoxHealth head quartered in Springfield, MO that comprise CoxHealth—Springfield's service area. This document shows an 8-county primary and 14-county secondary service area that make up the total 22 counties. Approximately 80% of inpatient discharges comprises CoxHealth's primary service area; the 14 counties making up the next approximate 15% of discharges comprise the secondary service area.
- **20 Competitor Hospitals:** There are twenty hospitals in the defined service area. St. John Regional Medical Center's (Joplin) current capabilities are diminished after the destruction of its physical plant in May 2011. A temporary structure is facilitating limited operations in Joplin. Ground was broke January 2012 for a replacement hospital.
- **The Community's Population Is Growing:** The community's population is projected to grow at a rate of 4.82% between 2011 and 2016, and as of 2011 exceeds the one million person mark. The number of households is project to climb 5.0% to 424,265 in 2016.
- **Slowing Growth in Females 15-44 Will Cause That Segment To Decline in the Community:** The segment of the service area that is female and between the ages of 15 and 44 is expected to grow in volume by 2.12%, but because the growth is slow the segment will decline as a percentage of the total population.
- **The Senior Population is Growing and Causing the Segment to Increase in the Community:** The population over the age of 65 is projected to grow by 13.3% between 2011 and 2016. By 2016 this segment of

the population is expected to make up 17.4% of the population. Adults over the age of 65 made up 21.1% of all adults over the age of 18, and that number is expected to increase to 22.8% by 2016.

- **Average Household Incomes are Projected to Continue to Increase:** The estimated average household income in 2011 was \$48,766, and is projected to grow 2.91% to \$50,185 by 2016 in the service area. Estimated per capita income is \$19,889 in 2011 and is expected to grow 3.00% to \$20,486 by 2016.
- **Fewer than half of the Community Over 25 Have Any College Education:** 15.3% of the service area's population over the age of 25 has not graduated from high school. 36.3% has at least a high school diploma.
- **Racial Diversity in the Service Area is Nearly Nonexistent**

ECONOMIC CONDITIONS

- **Published unemployment rates in 2011 have been slightly lower than monthly rates in 2010.** As of November 2011, the 22-County unemployment rate had fallen to 7.15%, and in November 2010 the rate was 8.77%. The trend line for the unemployment rate in the 22-County service area is in decline.
- **Home foreclosures have declined in 2011.** The number of foreclosures in the community grew through 2009 and 2010, but declined dramatically through 2011 in the primary service area. There was much less foreclosure activity in the secondary service area.
- **Almost 32% of all service area households are near or below the poverty level for a four-person household.** In 2011, there were an estimated 404,065 households in the service area. 128,910 households were at or below the \$24,999 annual household income level. According to the Department of Health and Human Services, the poverty level for a four-person household in 2011 was \$22,350. Wright, Texas, Hickory, Howell, Douglas and Dallas Counties were the poorest counties in the service area.
- **Inpatient Uninsured and Medicare payer volumes are up and Inpatient Commercial and Medicaid payer volumes are down in the service area.** The number of inpatient uninsured has grown 22.3% between 2008 and 2011. However, the number of Medicaid patients in the service area has declined 1.1% in the same period. The inpatient Medicare population has grown 2.3% between 2008 and 2011 as commercial payer patients have declined 7.9% in that period. Medicare and Medicaid are the two largest payers of inpatient care in the service area.

COMMUNITY RESOURCES AND SHORTAGES

- **The service area is medically underserved with the exception of Taney and Boone Counties according to the Department of Health and Senior Services.** Population density and physician availability is considered for MUA or MUP (medically underserved area or population).
- **Only Baxter County in Arkansas is not considered a Health Provider Shortage Area.** This designation is based on geographic areas, population groups, and facilities.
- **All counties except Christian, Greene, some of Webster, Dallas, and Jasper Counties have a rural health status.** This is important for grant eligibility.
- **A summary of health care organizations represented in each county of the service area is listed and a comprehensive listing is located in the appendix.**

SOURCE OF IDENTIFIED HEALTHCARE NEEDS

- Primary and Secondary Data were collected by surveys of public health administrators and nurses, local community agencies, regional services clinics, and public schools, household health care decision

makers, the community board of directors of CoxHealth, Facebook and Twitter users and reports from the Missouri Hospital Association and County Health Rankings & Roadmaps.

2012 CoxHealth Public Health Survey

The top ten priorities by number of responses:

- Access to Primary Care
- Medically uninsured and underinsured
- Obesity
- Healthy Diet/Nutrition
- Mental Health Services
- Immunizations
- Physical Inactivity
- Wellness Program
- Diabetes
- Asthma

Greatest weaknesses or challenges to improving to improving health care

- Education
 - ◇ Basic understanding
 - ◇ Parental responsibility
 - ◇ Apathy
- Finances: People / Population
 - ◇ Poverty/Low income
- Insurance / Cost
 - ◇ Uninsured or underinsured
 - ◇ Cost of care

Top noticeable changes in health status

- Increase in chronic conditions
- Changes in Insurance or payer
- Increase in obesity
- Changes to income, poverty level, economic conditions, and the unemployment rate
- Demographic changes—aging population
- Decline in exercise and good nutrition
- Increase in mental health conditions and increased access problems
- Transient population

Survey of Service Area Heads of Households

The question was asked as to what medical or health services are needed and the majority of responses for the fourth consecutive year was “more specialists.” The next top responses were: Specialized treatments; more doctors; more for children, teenagers; hospital/clinic closer by; urgent care facilities; and more affordable care.

Facebook and Twitter

The same question about needed health services was asked in the social media forum. There were few responses, but some were “inexpensive healthcare”, “better ways to communicate with specialists”, and “takes too long to get in to see specialists.”

Health Behaviors and Outcomes

The 2010 Behaviors and Outcome reports by the Missouri Hospital Association identified specific issues that are growing concerns in the service area. Most are consistent with those identified by the public health survey and the public perception study:

- Obesity
- Inactivity
- Diabetes
- High blood pressure
- High cholesterol
- Poor health perception/status
- Low birth weight
- Smoking
- Teen birth rate
- Primary care provider rate

County Health Rankings

The County Health Rankings did not give new data or contradict the MHA Health Behaviors and Outcomes report, but it did show which counties have more problems with specific measures. The majority health outcomes and health factors need work for most of the 22-service area. The primary service area tended to perform better than the secondary service area counties. Overall, Missouri tended to have better outcome and health factor rates than Arkansas. Adult obesity, physical inactivity, teen births, availability of primary care physicians, and mammography screenings were areas that show room for improvement. Adult smoking continues to be a problem in the service area.

CoxHealth Strategic Planning Meetings

On March 27, 2012, a strategic planning meeting was called and well over 30 CoxHealth Executives met to discuss the strategic plan. One of the topics covered was community needs, and the priorities identified in the Community Health Needs Assessment. After some discussion the top priorities as recognized by public health officials, community agency leaders, regional services clinics, public school officials, and others, the executive present voted as to which were the top priorities for CoxHealth. Some of the priorities were so closely related that work related to one would most likely impact other issues, and those were grouped together. The top five priorities were identified as 1) Obesity/Healthy Diet and Nutrition/Physical Inactivity/Wellness Program/Diabetes, 2) Access to Primary Care/Medically uninsured and underinsured/Immunizations, 3) Mental Health, 4) Asthma, and 5) Smoking/Tobacco Use.

After further discussion, the CoxHealth enterprise chose a single issue as the top priority to address as it impacted many other health issues. Obesity was selected as the single community health priority on July 10, 2012.

Acknowledgements and Data Limitations

Special Thanks

CoxHealth would like to thank the area's public health departments, local community agencies, regional services clinics, public school representatives, mental health facilities, heads of households, friends and families, the CoxHealth Board of Directors, and all CoxHealth participants who helped gather the data presented in this report.

Data Sources, Gathering Methods, and Limitations for this Report

This community health needs assessment is a compilation of primary and secondary data gathered for the specific goal of assessing the needs of the community so that CoxHealth can "improve the health of the communities we serve through quality health care, education, and research."

Demographic data has been collected using the Nielsen product iXPRESS. Along with the demographic data, the maps included were produced using the MapInfo component of iXPRESS. The demographic data is currently 2011 estimates and 2016 projections.

Unemployment rates and foreclosure data was collected from the internet. Unemployment rates were available from the Missouri Economic Research and Information Center using the following Website: <http://www.missourieconomy.org/indicators/laus/default.aspx?sa=1>. Home foreclosure data was gathered from www.realtytrac.com.

Inpatient and payer data was gathered through HIDI Online. The Missouri Hospital Association maintains the HIDI Online Website. The data comes from directly from hospitals and is accessed through the HIDI Online tool. The latest complete fiscal year is 2011 at the time of the publication of this report. FY2011 ended September 30, 2011. As with most collected data, the limitation is the speed with which the data becomes available.

Behavior and outcomes data was collected from a 2010 report from the Missouri Hospital Association (MHA). Again, most of the data presented in this report was three years old when it was published in 2010. Although the age of the data is a limitation, the behaviors presented generally do not change rapidly on their own. The MHA reports can be downloaded from the following website: <http://web.mhanet.com/asp/articles.aspx?navid=4&pnavid=&articleid=613>

Health outcomes and health factors were ranked by county for all states in the US by a joint effort of the Robert Wood Johnson Foundation and the University of Wisconsin. Data for each county in the service area was listed for both Missouri and Arkansas counties. The 2012 rankings were available for this publication, but as with other behaviors and outcomes reports the data can be several years old. The website lists strengths and weaknesses of each measure. The website can be accessed at the following URL: www.countyhealthrankings.org

The health priorities listed were a result of the CoxHealth public health survey. This survey was developed by CoxHealth for the assessment of our community and has been used for the last three consecutive years. The survey is a hard copy, paper survey that has been sent to public health departments, local community agencies, regional services physician clinics, other psychological services, and public schools for responses.

Additional health needs information has been collected through a perception study phone survey of 876 households in the CoxHealth 22-county service area. The survey was for the primary healthcare decision maker in the household. The study is completed annually. The information presented in this assessment is from the perception study completed January 2012. The 2012 study has results from the expanded total Cox service area.

The local CoxHealth Board of Directors was also surveyed in 2012 in an effort to determine community health needs and priorities. Board members identified specific service needs for the area with some focus on the rural areas of the service area.

An electronic survey was posted on CoxHealth's Facebook and Twitter pages in January 2012. Responses from various age groups from across the service area were collected and reported. The limitations of this data is that the respondents are come mostly from Greene County.

Finally, the existing health care facilities and resources within the community found in the appendix were collected from hospital WebPages, phone books, phone calls, and Google search results. The limitations of this particular information is the completeness of collected data. Identifying resources located in a community through internet search can result in missed resources (not located on the internet or too new to be found on the internet) or outdated information (moved or out of business).

Only a continuous process of evaluation can identify community needs and priorities. It has been the goal of CoxHealth to maintain the strategic planning process and include community need in that process, so that CoxHealth can plan to be "the best for those who need us."

CoxHealth Service Area Definition and Demographics

CoxHealth is an integrated health care system in southwest Missouri serving a 22-county region that spans southern Missouri and two counties in northern Arkansas. CoxHealth’s hospitals are located in Springfield and Monett, Missouri; CoxHealth’s other services are offered throughout the service area.

The CoxHealth service area is defined by the origin of its inpatients. The Primary Service Area (PSA) consists of eight counties that are the origin of 80% of CoxHealth’s inpatients (shown as yellow on the map on the following page). In those eight counties are nine hospitals. Those counties and hospitals are listed below:

PRIMARY SERVICE AREA

<p>Barry County, MO</p> <ul style="list-style-type: none"> • Cox Monett • Mercy Hospital, Cassville <p>Christian County, MO</p> <ul style="list-style-type: none"> • Mercy’s Ozark Orthopedic Hospital is under construction <p>Greene County, MO</p> <ul style="list-style-type: none"> • CoxHealth, Springfield • Lakeland Behavioral Health System • Mercy Hospital, Springfield • Ozarks Community Hospital 	<p>Lawrence County, MO</p> <ul style="list-style-type: none"> • Mercy Hospital, Aurora • Missouri Rehabilitation Center, Mt Vernon <p>Stone County, MO</p> <p>Taney County, MO</p> <ul style="list-style-type: none"> • Skaggs Regional Medical Center, Branson <p>Webster County, MO</p> <p>Wright County, MO</p>
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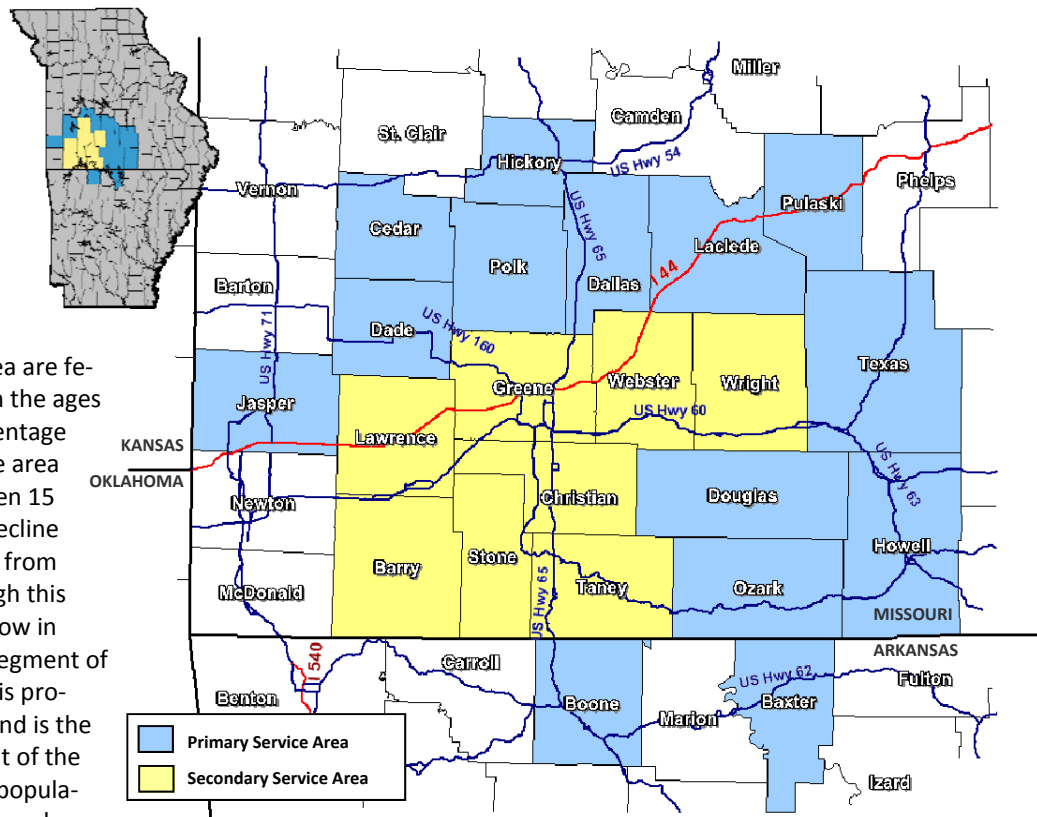
The Secondary Service Area (SSA) is made up of fourteen counties that is the origin of the next 15% of CoxHealth’s inpatients (illustrated as blue in the map on the following page). Eleven hospitals currently operate in the SSA. The SSA temporarily lost one hospital with the May 22, tornado in Joplin. Those counties and hospitals are listed below:

SECONDARY SERVICE AREA

<p>Baxter County, AR</p> <ul style="list-style-type: none"> • Baxter Regional Med. Center, Mountain Home <p>Boone County, AR</p> <ul style="list-style-type: none"> • North Arkansas Regional Med. Center, Harrison <p>Cedar County, MO</p> <ul style="list-style-type: none"> • Cedar County Memorial Hospital, Eldorado Springs <p>Dade County, MO</p> <p>Dallas County, MO</p> <p>Douglas County, MO</p> <p>Hickory County, MO</p> <p>Howell County, MO</p> <ul style="list-style-type: none"> • Ozarks Medical Center, West Plains • Mercy St. Francis Hospital, Mountain View 	<p>Jasper County, MO</p> <ul style="list-style-type: none"> • Freeman Health System, Joplin (Newton line) • St. John’s Regional Medical Center, Joplin (destroyed May 2011—currently functioning in a temporary facility in Joplin) • McCune-Brooks Regional Hospital, Carthage <p>Laclede County, MO</p> <ul style="list-style-type: none"> • Mercy Hospital, Lebanon <p>Ozark County, MO</p> <p>Polk County, MO</p> <ul style="list-style-type: none"> • Citizens Memorial Hospital, Bolivar <p>Pulaski County, MO</p> <ul style="list-style-type: none"> • General Leonard Wood Army Community Hospital, Fort Leonard Wood <p>Texas County, MO</p> <ul style="list-style-type: none"> • Texas County Memorial Hospital, Houston
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22-COUNTY SERVICE AREA

Between 2011 and 2016, the CoxHealth 22-county service area is projected to grow 4.8%. The service area has exceeded the one million person mark and approximately 55.8% of the 22-county population resides in the eight county primary service area (shown in yellow on the map). 51% of the 22-county service area are females, while 19.3% of the service area are females who are between the ages of 15 and 44. The percentage of the 22-county service area who are women between 15 and 44 is expected to decline over the next five years from 19.3% to 18.8%, although this group is projected to grow in number by 2.1%. The segment of the population over 65 is projected to grow 13.3%, and is the fastest growing segment of the 22-county service area population. Children (0-17) are only expected to see a change of 5.41%, and adults (18-64) are projected to grow by 2.33% between 2011 and 2016.



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22-County Service Area Population Characteristics	2011		2016		2011-2016 % Change
	Estimate	%	Projection	%	
Total Population (pop)	1,008,256	--	1,056,900	--	4.8%
Total Pop Average Age	38.76	--	39.17	--	1.1%
Male	494,460	49.0%	518,675	49.1%	4.9%
Female	513,796	51.0%	538,225	50.9%	4.8%
Women Age 15-44	194,115	19.3%	198,233	18.8%	2.1%
Age 65+	162,125	16.1%	183,683	17.4%	13.3%
Households	404,065	--	424,265	--	5.0%
Average Household Income	\$48,766	--	\$50,185	--	2.9%
Per Capita Income	\$19,889	--	\$20,486	--	3.0%

For more demographic details for the primary, secondary, and 22-county service areas, see the table on the next page and the county-by-county demographic data in the appendix of this report.

Population 25+ by Educational Attainment - 2011		
Age 25+ population	659,932	
Less than 9th grade	32,219	4.9%
Some High School, no diploma	68,962	10.4%
High School Graduate (or GED)	239,351	36.3%
Some College, no degree	154,664	23.4%
Associates Degree	40,316	6.1%
Bachelor's Degree	82,532	12.5%
Master's Degree	29,920	4.5%
Professional School Degree	7,857	1.2%
Doctorate Degree	4,111	0.6%

The Nielsen data suggests that in 2011 the 22-county population was less educated than other parts of the state. In comparing educational attainment, the population being assessed are those within the specified population over the age of 25. In 2011, Nielsen estimates that nearly 84.7% of the 22-county population, 86.2% of Missouri's population, and 84.9% of the U.S. population received at least a GED or high school diploma. The percent of the 22-county, Missouri, and U.S. populations that have at least some college education in 2011 are 48.4%, 53.7%, and 56.0%, respectively. Of the three population groups, the 22-county service area has the highest percent of the population without a diploma or GED. The 22-county, Missouri and U.S. populations without a diploma were 15.3%, 13.8%, and 15.1%, respectively.

2012 CoxHealth Community Health Needs Assessment

	PSA			SSA			22-County		
	2011	2016	% Change	2011	2016	% Change	2011	2016	% Change
Total Population	562,196	595,372	5.90%	446,060	461,528	3.47%	1,008,256	1,056,900	4.82%
White Alone	524,206	550,655	5.05%	412,166	422,986	2.63%	936,372	973,641	3.98%
Black or African American Alone	10,516	12,691	20.68%	9,348	10,355	10.77%	19,864	23,046	16.02%
American Indian and Alaska Native Alone	3,958	4,238	7.07%	4,183	4,391	4.97%	8,141	8,629	5.99%
Asian Alone	4,974	5,772	16.04%	3,520	4,069	15.60%	8,494	9,841	15.86%
Hispanic or Latino	19,059	23,658	24.13%	16,534	20,376	23.24%	35,593	44,034	23.72%
Not Hispanic or Latino	543,137	571,714	5.26%	429,526	441,152	2.71%	972,663	1,012,866	4.13%
Age 0 to 4	38,325	41,511	8.31%	30,705	32,626	6.26%	69,030	74,137	7.40%
Male	19,662	21,256	8.11%	15,774	16,777	6.36%	35,436	38,033	7.33%
Female	18,663	20,255	8.53%	14,931	15,849	6.15%	33,594	36,104	7.47%
Age 5 to 9	36,332	39,599	8.99%	28,993	30,591	5.51%	65,325	70,190	7.45%
Male	18,702	20,319	8.65%	14,846	15,637	5.33%	33,548	35,956	7.18%
Female	17,630	19,280	9.36%	14,147	14,954	5.70%	31,777	34,234	7.73%
Age 10 to 14	35,696	37,721	5.67%	28,580	29,336	2.65%	64,276	67,057	4.33%
Male	18,427	19,439	5.49%	14,715	15,053	2.30%	33,142	34,492	4.07%
Female	17,269	18,282	5.87%	13,865	14,283	3.01%	31,134	32,565	4.60%
Age 15 to 17	22,147	22,472	1.47%	18,346	18,197	-0.81%	40,493	40,669	0.43%
Male	11,390	11,632	2.12%	9,680	9,578	-1.05%	21,070	21,210	0.66%
Female	10,757	10,840	0.77%	8,666	8,619	-0.54%	19,423	19,459	0.19%
Age 18 to 20	27,231	27,432	0.74%	20,991	21,876	4.22%	48,222	49,308	2.25%
Male	13,444	13,672	1.70%	11,848	12,407	4.72%	25,292	26,079	3.11%
Female	13,787	13,760	-0.20%	9,143	9,469	3.57%	22,930	23,229	1.30%
Age 21 to 24	37,299	36,523	-2.08%	23,679	25,189	6.38%	60,978	61,712	1.20%
Male	18,766	18,548	-1.16%	12,772	13,736	7.55%	31,538	32,284	2.37%
Female	18,533	17,975	-3.01%	10,907	11,453	5.01%	29,440	29,428	-0.04%
Age 25 to 34	70,621	77,931	10.35%	54,679	55,175	0.91%	125,300	133,106	6.23%
Male	35,057	39,021	11.31%	27,155	27,831	2.49%	62,212	66,852	7.46%
Female	35,564	38,910	9.41%	27,524	27,344	-0.65%	63,088	66,254	5.02%
Age 35 to 44	67,031	67,116	0.13%	51,302	51,717	0.81%	118,333	118,833	0.42%
Male	33,639	33,402	-0.70%	25,460	25,568	0.42%	59,099	58,970	-0.22%
Female	33,392	33,714	0.96%	25,842	26,149	1.19%	59,234	59,863	1.06%
Age 45 to 54	75,831	73,433	-3.16%	58,127	54,244	-6.68%	133,958	127,677	-4.69%
Male	37,225	36,330	-2.40%	28,387	26,585	-6.35%	65,612	62,915	-4.11%
Female	38,606	37,103	-3.89%	29,740	27,659	-7.00%	68,346	64,762	-5.24%
Age 55 to 64	66,445	73,420	10.50%	53,771	57,108	6.21%	120,216	130,528	8.58%
Male	31,787	35,073	10.34%	25,613	27,181	6.12%	57,400	62,254	8.46%
Female	34,658	38,347	10.64%	28,158	29,927	6.28%	62,816	68,274	8.69%
Age 65 to 74	47,384	56,131	18.46%	41,736	47,741	14.39%	89,120	103,872	16.55%
Male	21,897	26,002	18.75%	19,495	22,325	14.52%	41,392	48,327	16.75%
Female	25,487	30,129	18.21%	22,241	25,416	14.28%	47,728	55,545	16.38%
Age 75 to 84	26,764	29,191	9.07%	24,651	25,929	5.18%	51,415	55,120	7.21%
Male	11,231	12,237	8.96%	10,635	11,112	4.49%	21,866	23,349	6.78%
Female	15,533	16,954	9.15%	14,016	14,817	5.71%	29,549	31,771	7.52%
Age 85 and over	11,090	12,892	16.25%	10,500	11,799	12.37%	21,590	24,691	14.36%
Male	3,495	4,118	17.83%	3,358	3,836	14.23%	6,853	7,954	16.07%
Female	7,595	8,774	15.52%	7,142	7,963	11.50%	14,737	16,737	13.57%
Age 17 and under (children)	132,500	141,303	6.64%	106,624	110,750	3.87%	239,124	252,053	5.41%
Male	68,181	72,646	6.55%	55,015	57,045	3.69%	123,196	129,691	5.27%
Female	64,319	68,657	6.74%	51,609	53,705	4.06%	115,928	122,362	5.55%
Age 18 and over (adults)	429,696	454,069	5.67%	339,436	350,778	3.34%	769,132	804,847	4.64%
Male	206,541	218,403	5.74%	164,723	170,581	3.56%	371,264	388,984	4.77%
Female	223,155	235,666	5.61%	174,713	180,197	3.14%	397,868	415,863	4.52%
Age 65 and over (seniors)	85,238	98,214	15.22%	76,887	85,469	11.16%	162,125	183,683	13.30%
Male	36,623	42,357	15.66%	33,488	37,273	11.30%	70,111	79,630	13.58%
Female	48,615	55,857	14.90%	43,399	48,196	11.05%	92,014	104,053	13.08%
Total Male	274,722	291,049	5.94%	219,738	227,626	3.59%	494,460	518,675	4.90%
Total Female	287,474	304,323	5.86%	226,322	233,902	3.35%	513,796	538,225	4.75%
Females age 15-44	112,033	115,199	2.83%	82,082	83,034	1.16%	194,115	198,233	2.12%
Average Age	38.33	38.80	1.23%	39.31	39.64	0.84%	38.76	39.17	1.06%
Average Male Age	37.08	37.49	1.11%	37.81	38.05	0.63%	37.40	37.74	0.91%
Average Female Age	39.53	40.07	1.37%	40.77	41.18	1.01%	40.08	40.55	1.17%

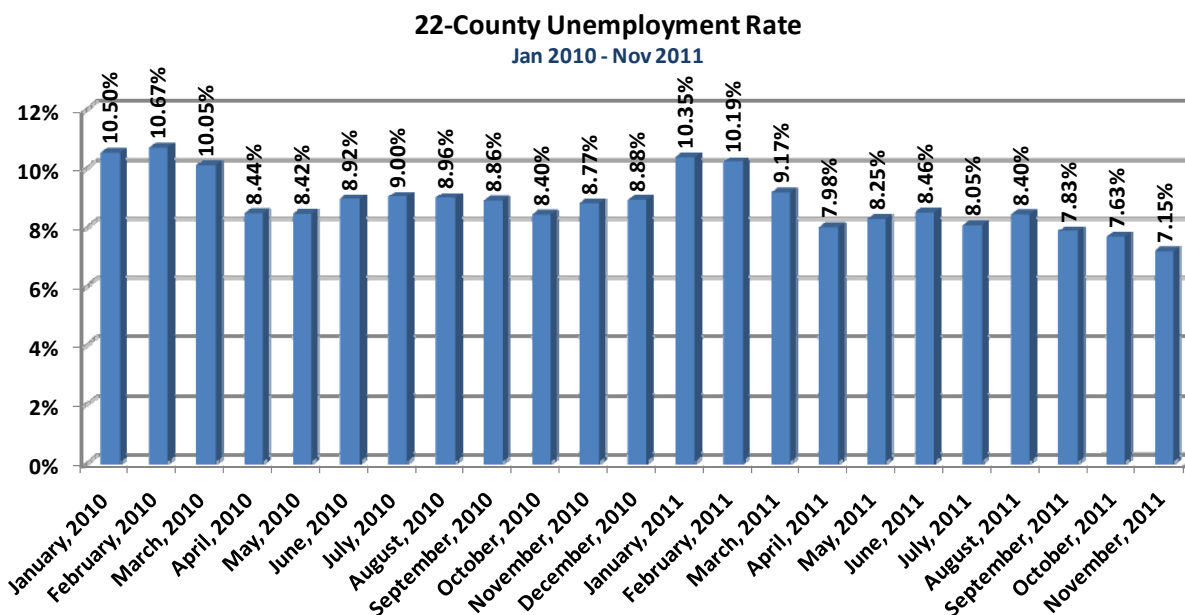
Racial diversity is nearly nonexistent in the 22-county market currently, and in the next five years the percent of the population that is “white alone” is projected to decline only 0.8%. The state of Missouri’s White, Black and Asian population in 2011 was estimated to be 83.2%, 11.4% and 1.5% respectively. The Hispanic population in Missouri was estimated to be only 3.5% of the total population. For more demographic data see the appendix.

Economic Condition of the 22-County Service Area: Income, Employment Trends, Foreclosures, Healthcare Insurance Data

	PSA			SSA			22- County		
	2011	2016	% Change	2011	2016	% Change	2011	2016	% Change
Households	227,980	242,484	6.36%	176,085	181,781	3.23%	404,065	424,265	5.00%
Households by Household Income			--			--			--
Less than \$15,000	34,133	35,202	3.13%	33,244	33,417	0.52%	67,377	68,619	1.84%
\$15,000 to \$24, 999	33,106	34,186	3.26%	28,427	28,666	0.84%	61,533	62,852	2.14%
\$25,000 to \$34,999	33,366	34,774	4.22%	28,372	28,676	1.07%	61,738	63,450	2.77%
\$35,000 to \$49,999	42,721	45,102	5.57%	32,703	33,773	3.27%	75,424	78,875	4.58%
\$50,000 to \$74,999	42,351	45,545	7.54%	30,221	31,767	5.12%	72,572	77,312	6.53%
\$75,000 to \$99,999	19,943	21,972	10.17%	11,826	12,792	8.17%	31,769	34,764	9.43%
\$100,000 to \$124,999	10,290	11,658	13.29%	5,381	6,010	11.69%	15,671	17,668	12.74%
\$125,000 to \$149,999	4,502	5,376	19.41%	2,334	2,691	15.30%	6,836	8,067	18.01%
\$150,000 to \$199,999	3,259	3,789	16.26%	1,509	1,728	14.51%	4,768	5,517	15.71%
\$200,000 to \$499,999	3,614	4,051	12.09%	1,750	1,892	8.11%	5,364	5,943	10.79%
\$500,000 or more	695	829	19.28%	318	369	16.04%	1,013	1,198	18.26%
Estimated Average Household Income	\$52,113	\$53,607	2.87%	\$44,434	\$45,620	2.67%	\$48,766	\$50,185	2.91%
Estimated Per Capita Income	\$21,435	\$22,120	3.20%	\$17,940	\$18,379	2.45%	\$19,889	\$20,486	3.00%

The number of households is projected to climb 5.0%, and average household income is expected to increase 2.91% to \$50,185 by 2016. Currently, the average household income is estimated to be \$48,766 in the 22-County service area and \$58,796 for the state of Missouri. For more household income data see the “Service Area Household Income and Poverty Guidelines” tables.

Unemployment has been in decline this year. The unemployment rate started 2010 at 10.5% and dropped throughout the service area to the low point of 8.4% in October, 2010. 2011 has revealed a similar pattern as 2010, but rates are slightly lower. As of November, 2011, the unemployment rate in the 22-CO service area rested at 7.15% compared to 7.6% for Missouri and 8.2% for the U.S.



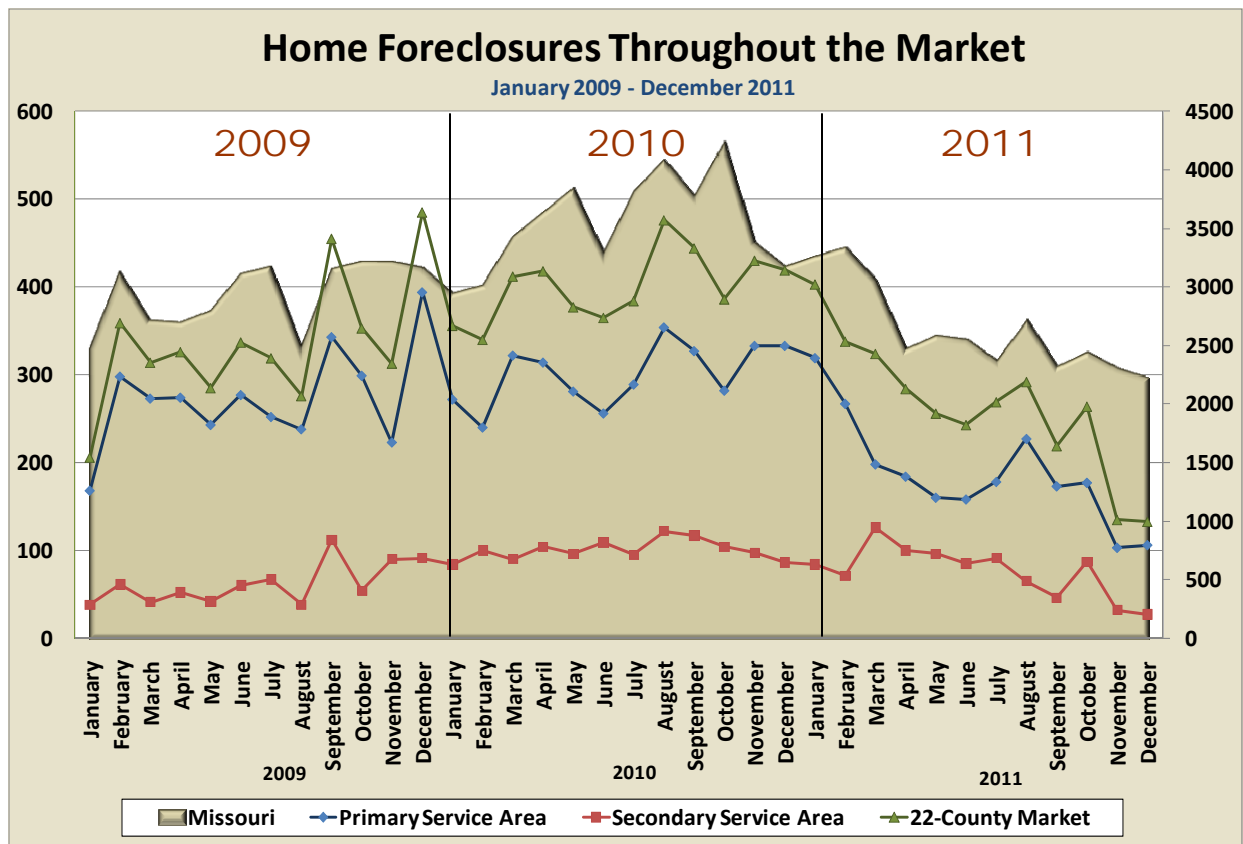
2012 CoxHealth Community Health Needs Assessment

Demographic Snapshot: Employment 2011	PSA (8 Counties)		SSA (14 Counties)		22-County SA	
2011 Estimated Employed Population Age 16 and Over by Class of Worker	274,474		189,695		464,169	
For-Profit Private Workers	181,339	66.07%	123,312	65.01%	304,651	65.63%
Non-Profit Private Workers	32,009	11.66%	16,817	8.87%	48,826	10.52%
Local Government Workers	15,643	5.70%	12,012	6.33%	27,655	5.96%
State Government Workers	9,988	3.64%	9,175	4.84%	19,163	4.13%
Federal Government Workers	3,631	1.32%	6,036	3.18%	9,667	2.08%
Self-Employed Workers	31,548	11.49%	21,759	11.47%	53,307	11.48%
Unpaid Family Workers	316	0.12%	584	0.31%	900	0.19%
2011 Estimated Employed Population Age 16 and Over by Occupation	274,474		189,695		464,169	
Management , Including Farmers and Farm Managers	23,763	8.66%	15,507	8.17%	39,270	8.46%
Business and Financial Operations	9,811	3.57%	4,443	2.34%	14,254	3.07%
Computer and Mathematical	4,123	1.50%	1,821	0.96%	5,944	1.28%
Architecture and Engineering	2,800	1.02%	1,710	0.90%	4,510	0.97%
Life, Physical, and Social Science	1,551	0.57%	885	0.47%	2,436	0.52%
Community and Social Services	4,875	1.78%	3,238	1.71%	8,113	1.75%
Legal	1,901	0.69%	1,047	0.55%	2,948	0.64%
Education, Training, and Library	14,475	5.27%	9,101	4.80%	23,576	5.08%
Arts, Design, Entertainment, Sports, and Media	4,593	1.67%	1,831	0.97%	6,424	1.38%
Healthcare Practitioners and Technical	15,783	5.75%	9,868	5.20%	25,651	5.53%
Healthcare Support	6,561	2.39%	5,903	3.11%	12,464	2.69%
Protective Service	4,190	1.53%	3,440	1.81%	7,630	1.64%
Food Preparation and Serving Related	17,911	6.53%	12,074	6.36%	29,985	6.46%
Building and Grounds Cleaning, and Maintenance	11,107	4.05%	7,181	3.79%	18,288	3.94%
Service : Personal Care and Service	8,667	3.16%	5,698	3.00%	14,365	3.09%
Sales and Related Occupations	34,919	12.72%	20,128	10.61%	55,047	11.86%
Office and Administrative Support	40,455	14.74%	25,848	13.63%	66,303	14.28%
Farming, Fishing, and Forestry	1,139	0.41%	2,582	1.36%	3,721	0.80%
Construction and Extraction	18,076	6.59%	10,775	5.68%	28,851	6.22%
Installation, Maintenance, and Repair	10,374	3.78%	9,073	4.78%	19,447	4.19%
Production	18,238	6.64%	19,733	10.40%	37,971	8.18%
Transportation and Material Moving	19,162	6.98%	17,809	9.39%	36,971	7.96%
2011 Estimated Employed Population Age 16 and Over by Occupation Classification	274,474		189,695		464,169	
Blue Collar	65,850	23.99%	57,390	30.25%	123,240	26.55%
White Collar	159,049	57.95%	95,427	50.31%	254,476	54.82%
Service & Farm	49,575	18.06%	36,878	19.44%	86,453	18.63%
2011 Estimated Workers Age 16 and Over by Transportation To Work	270,267		196,829		467,096	
Drove Alone	220,043	81.42%	151,181	76.81%	371,224	79.47%
Car Pooled	28,739	10.63%	22,419	11.39%	51,158	10.95%
Public Transportation	1,031	0.38%	449	0.23%	1,480	0.32%
Walked	5,984	2.21%	5,178	2.63%	11,162	2.39%
Bicycle	776	0.29%	379	0.19%	1,155	0.25%
Other Means	2,192	0.81%	2,087	1.06%	4,279	0.92%
Worked at Home	11,502	4.26%	15,136	7.69%	26,638	5.70%
2011 Estimated Workers Age 16 and Over by Travel Time to Work	259,035		188,635		447,670	
Less than 15 minutes	83,645	32.29%	76,606	40.61%	160,251	35.80%
15 to 29 Minutes	108,870	42.03%	66,364	35.18%	175,234	39.14%
30 to 44 Minutes	43,373	16.74%	26,634	14.12%	70,007	15.64%
45 to 59 Minutes	12,668	4.89%	8,937	4.74%	21,605	4.83%
60 or more Minutes	10,479	4.05%	10,094	5.35%	20,573	4.60%
2011 Estimated Average Travel Time to Work in Minutes	23.57		22.69		23.2	

The population over the age of 16 and employed (working population) in the 22-county market is nearing a half a million people, as shown in the Demographic Snapshot: Employment table. The data is from Nielson Claritas' iX-PRESS 5.1 for MapInfo.

- About 59% of the 22-county market workforce is employed in Barry, Christian, Greene, Lawrence, Stone, Taney, Webster, and Wright Counties (the PSA).
- The majority of 22-County workforce is in the private, for-profit setting (65.6%). Private not-for-profit organizations are the source of employment for 10.5% of the working population in the total market.
- The largest sector of the working population is in "office and administrative support" (14.3%) in the 22-county market. "Sales and related occupations" was the next largest segment of the working population (11.9%). "Healthcare practitioners and technical" was listed as being the employment of 25,651 or 5.5%. "Healthcare support" was the employment of 12,464 or 2.7% in the 22-county market. The PSA contains slightly higher percent of workforce that are employed as "Healthcare Practitioners and Technical".
- Over half of the jobs in the 22-county market are white collar, and less than 20% are service & farm. The PSA contains more white collar jobs than the SSA by almost 8%.

The "Home Foreclosure Throughout the Market" chart below shows home foreclosures in the state, 22-County Market, Primary Service Area, and the Secondary Service Area. The chart starts in January 2009 and continues through December 2011. The number of foreclosures has fluctuated over the past three years in each of the four areas, but the monthly volumes for each area have reached volumes that are lower than the first data points in January, 2009. Between 2009 and 2011 the peak of home foreclosures in Missouri came in October 2010. The turning point in the 22-County market came a little earlier in July 2010. The housing market continues to correct itself, but foreclosures have continued to decline through 2011. Although home foreclosures are not something that is not directly related to community healthcare, but it is an influencing factor in the decision as to when and where the community seeks care. As the housing market employment, and the economy in general become more stable, access to care may become less of a problem. Many time "access to care" is related to the individuals ability to pay for all or their portion of care.



Payer Growth in the 22-County Market

Inpatient discharge volumes are down compared to previous years. One event that could possibly contribute to the decline of inpatient volume may be the May 22 tornado in Joplin, MO. In Jasper County, volumes associated with each type of payer declined considerably and only the uninsured increased moderately. This could indicate relocation of the population or decrease in access to care. Both would be conceivable after an EF-5 tornado destroyed a large portion of Joplin, Missouri, including St. John’s Regional Medical Center.

The uninsured population in the 22-county inpatient market continues to grow. By FY2011 the growth over the last four years will have exceeded 22%. Although there are counties with greater percent increases in uninsured inpatients, Christian, Greene, Taney, and Webster Counties have shown increases in uninsured inpatient population of higher volumes. Those four counties represented over half (50.2%) of the 22-county service area’s uninsured inpatient volume in FY11.

Lawrence, Baxter, Boone, Cedar, Dade, and Dallas Counties all experienced declines in the uninsured inpatient volume between FY08 and FY11. Cedar County’s uninsured inpatient volume has dropped 52.1% over the last four years.

For sudden, short term variances the change between FY11 and FY10 were examined. Howell County’s uninsured inpatient volume fell 18.7% or 98 discharges between FY10 and FY11, but in that same time Greene and Jasper County’s uninsured inpatient volume rose by 119 and 154 discharges respectively. The uninsured netted 221 discharges over FY10 and increased by 2.6% in the 22-county market.

The 22-county service area volume of Medicaid inpatients has decreased 1.1%, which represents a decrease of 304 inpatients between FY08 and FY11. Christian (97) and Greene (340) were the counties with the greatest growth of Medicaid inpatients in the 22-county service area, while Polk (-166), Lawrence (-168), Webster (-116) and Jasper (-388) counties experienced the most Medicaid inpatient volume declines.

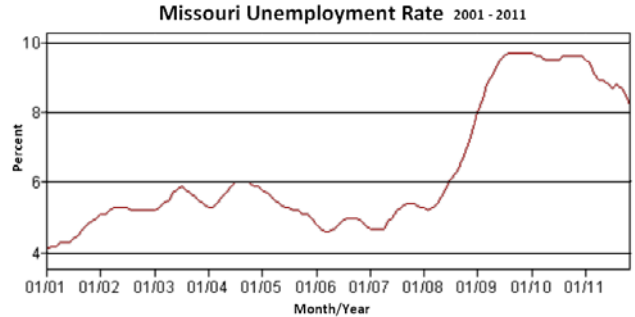
Inpatient Uninsured Discharges by County of Origin					
	FY 2008	FY 2009	FY 2010	FY 2011	FY08-FY11 % Change
Barry, MO	306	282	296	321	4.9%
Christian, MO	371	377	464	496	33.7%
Greene, MO	2,163	2,224	2,698	2,817	30.2%
Lawrence, MO	326	257	320	307	-5.8%
Stone, MO	239	244	283	286	19.7%
Taney, MO	642	555	799	843	31.3%
Webster, MO	233	234	299	285	22.3%
Wright, MO	164	137	177	206	25.6%
Baxter, AR	31	22	17	18	-41.9%
Boone, AR	83	103	72	71	-14.5%
Cedar, MO	142	88	101	68	-52.1%
Dade, MO	53	44	49	50	-5.7%
Dallas, MO	143	128	134	138	-3.5%
Douglas, MO	71	45	71	75	5.6%
Hickory, MO	41	49	68	77	87.8%
Howell, MO	359	358	523	425	18.4%
Jasper, MO	989	1,047	1,157	1,311	32.6%
Laclede, MO	270	250	296	286	5.9%
Ozark, MO	68	66	99	79	16.2%
Polk, MO	192	184	200	208	8.3%
Pulaski, MO	210	249	303	280	33.3%
Texas, MO	131	123	191	191	45.8%
22-CO	7,227	7,066	8,617	8,838	22.3%

Inpatient Medicaid Discharges by County of Origin					
	FY 2008	FY 2009	FY 2010	FY 2011	FY08-FY11 % Change
Barry, MO	1,187	1,178	1,177	1,119	-5.7%
Christian, MO	1,383	1,526	1,558	1,480	7.0%
Greene, MO	7,754	8,020	8,074	8,094	4.4%
Lawrence, MO	1,133	1,136	1,007	965	-14.8%
Stone, MO	780	710	792	744	-4.6%
Taney, MO	1,768	1,733	1,891	1,770	0.1%
Webster, MO	928	932	862	812	-12.5%
Wright, MO	774	804	810	836	8.0%
Baxter, AR	25	34	24	23	-8.0%
Boone, AR	97	67	50	37	-61.9%
Cedar, MO	465	386	443	421	-9.5%
Dade, MO	175	183	170	237	35.4%
Dallas, MO	511	564	518	570	11.5%
Douglas, MO	357	372	317	383	7.3%
Hickory, MO	202	260	209	235	16.3%
Howell, MO	1,711	1,811	1,634	1,760	2.9%
Jasper, MO	5,212	5,658	5,389	4,824	-7.4%
Laclede, MO	1,175	1,166	1,132	1,165	-0.9%
Ozark, MO	221	271	252	218	-1.4%
Polk, MO	967	762	771	801	-17.2%
Pulaski, MO	959	1,066	995	918	-4.3%
Texas, MO	716	751	735	784	9.5%
22-CO	28,500	29,390	28,810	28,196	-1.1%

The November Missouri unemployment rate in 2008, 2009, 2010, and 2011 was, 7.2%, 9.7%, 9.6%, and 8.2%. The increase in the uninsured could be explained by the loss of employer based health insurance. The

table below is from <http://data.bls.gov/timeseries/LASST29000003>

Inpatient Medicare Discharges by County of Origin					
	FY 2008	FY 2009	FY 2010	FY 2011	FY08-FY11 % Change
Barry, MO	1,843	1,804	1,813	1,885	2.3%
Christian, MO	2,485	2,752	2,870	2,817	13.4%
Greene, MO	12,549	13,059	13,086	13,229	5.4%
Lawrence, MO	1,932	1,924	1,932	1,883	-2.5%
Stone, MO	1,917	1,991	2,034	2,044	6.6%
Taney, MO	3,188	3,284	3,360	3,523	10.5%
Webster, MO	1,436	1,503	1,632	1,633	13.7%
Wright, MO	1,046	1,076	1,166	1,173	12.1%
Baxter, AR	208	242	184	213	2.4%
Boone, AR	474	473	510	533	12.4%
Cedar, MO	1,035	951	1,025	1,003	-3.1%
Dade, MO	520	454	515	453	-12.9%
Dallas, MO	869	887	919	820	-5.6%
Douglas, MO	620	675	644	699	12.7%
Hickory, MO	745	787	685	627	-15.8%
Howell, MO	2,553	2,354	2,469	2,459	-3.7%
Jasper, MO	7,661	7,586	7,393	7,252	-5.3%
Laclede, MO	1,954	2,059	1,905	1,946	-0.4%
Ozark, MO	589	507	538	607	3.1%
Polk, MO	1,552	1,727	1,608	1,544	-0.5%
Pulaski, MO	1,753	1,658	1,740	1,621	-7.5%
Texas, MO	1,515	1,383	1,475	1,575	4.0%
22-CO	48,444	49,136	49,503	49,539	2.3%



The volume of Medicare inpatient discharges have increased in the 22-county service area by 2.3% between FY08 and FY11. The majority of the growth in the Medicare population came from Christian, Greene, Stone, Taney, Webster, and Wright counties. Other counties that have experienced some growth in the Medicare population between FY08 and FY11 are Barry (2.3%), Baxter (2.4%), Boone (12.4%), Douglas (12.7%), Ozark (3.1%) and Texas (4.0%).

Inpatient Commercial Discharges by County of Origin					
	FY 2008	FY 2009	FY 2010	FY 2011	FY08-FY11 % Change
Barry, MO	1,170	1,098	1,010	980	-16.2%
Christian, MO	3,162	3,062	2,830	2,761	-12.7%
Greene, MO	10,108	9,963	9,723	9,458	-6.4%
Lawrence, MO	1,280	1,289	1,201	1,079	-15.7%
Stone, MO	908	761	710	621	-31.6%
Taney, MO	1,352	1,246	1,239	1,194	-11.7%
Webster, MO	1,323	1,273	1,167	1,007	-23.9%
Wright, MO	531	469	461	477	-10.2%
Baxter, AR	100	85	82	94	-6.0%
Boone, AR	207	200	152	164	-20.8%
Cedar, MO	341	413	384	398	16.7%
Dade, MO	195	229	227	223	14.4%
Dallas, MO	493	451	451	393	-20.3%
Douglas, MO	309	321	252	248	-19.7%
Hickory, MO	192	196	193	224	16.7%
Howell, MO	1,379	1,333	1,218	1,140	-17.3%
Jasper, MO	4,858	5,277	5,080	4,627	-4.8%
Laclede, MO	983	1,067	975	1,017	3.5%
Ozark, MO	273	356	202	184	-32.6%
Polk, MO	895	1,108	1,119	1,146	28.0%
Pulaski, MO	797	882	892	879	10.3%
Texas, MO	479	568	567	537	12.1%
22-CO	31,335	31,647	30,135	28,851	-7.9%

Counties where Medicare inpatients volume has decreased from FY08 to FY11 were Cedar (-3.1%), Dade (-12.9%), Dallas (-5.6%), Hickory (-8.1%), Howell (-3.7%), Jasper (-5.3%), Laclede (-0.4%), Polk (-0.5), and Pulaski (-7.5%). The greatest volume declines have come from Jasper, Pulaski, Howell, and Hickory Counties.

The 22-county service area volume of commercial payer inpatients has decreased 7.9%, which represents a decline of 2,484 inpatients between FY08 and FY10. Only seven counties showed any increase in commercially paid inpatients and they were Cedar (57), Dade (28), Hickory (32), Laclede (34), Polk (251), Pulaski (82), and Texas (58).

The decrease in commercially insured inpatients could be explained by the loss of jobs in those communities. This number is expected to increase as some employers may choose to drop their employer based health coverage

and opt for the penalty/fine as required by the PPACA. See the appendix for a county-by-county payer mix table for 2011 showing relative payer strength.

Service Area Household Income and Poverty Guidelines

2011 Estimate	PSA	SSA	22-CO	Barry	Christian	Greene	Lawrence	Stone	Taney	Webster	Wright
Households by Household Income	227,980	176,085	404,065	14,063	30,920	115,061	14,435	12,970	20,150	13,343	7,038
Less than \$15,000	34,133	33,244	67,377	2,474	3,171	17,221	2,510	1,893	3,011	1,958	1,895
\$15,000 to \$24,999	33,106	28,427	61,533	2,366	3,596	16,806	2,314	1,775	3,060	1,885	1,304
\$25,000 to \$34,999	33,366	28,372	61,738	2,248	4,010	16,372	2,116	1,892	3,455	2,183	1,090
\$35,000 to \$49,999	42,721	32,703	75,424	2,744	5,665	21,119	2,815	2,730	3,879	2,501	1,268
\$50,000 to \$74,999	42,351	30,221	72,572	2,478	6,770	20,913	2,672	2,456	3,513	2,696	853
\$75,000 to \$99,999	19,943	11,826	31,769	892	3,713	10,194	1,064	1,039	1,650	1,100	291
\$100,000 to \$124,999	10,290	5,381	15,671	383	2,103	5,342	502	548	763	513	136
\$125,000 to \$149,999	4,502	2,334	6,836	159	768	2,562	166	207	316	257	67
\$150,000 to \$199,999	3,259	1,509	4,768	119	502	1,908	108	197	223	120	82
\$200,000 to \$499,999	3,614	1,750	5,364	171	528	2,174	147	201	232	113	48
\$500,000 or more	695	318	1,013	29	94	450	21	32	48	17	4
Average Household Income	\$52,113	\$44,434	\$48,766	\$44,930	\$59,501	\$53,967	\$45,566	\$51,322	\$48,338	\$48,187	\$36,824
Median Household Income	\$39,700	\$34,295	\$37,264	\$34,749	\$47,400	\$40,065	\$36,479	\$40,082	\$37,123	\$38,871	\$27,936
Per Capita Income	\$21,435	\$17,940	\$19,889	\$17,925	\$23,024	\$23,135	\$17,636	\$21,231	\$20,144	\$17,647	\$15,043

2011 Estimate	Baxter	Boone	Cedar	Dade	Dallas	Douglas	Hickory	Howell	Jasper	Laclede	Ozark
Households by Household Income	19,408	15,584	5,533	2,881	6,358	5,517	3,859	15,621	46,973	14,099	3,858
Less than \$15,000	3,380	3,093	1,253	537	1,333	1,285	879	3,311	8,176	2,668	900
\$15,000 to \$24,999	3,418	2,410	834	491	1,077	921	753	2,947	7,253	2,248	690
\$25,000 to \$34,999	3,356	2,327	957	475	970	1,049	798	2,430	7,293	2,232	603
\$35,000 to \$49,999	3,771	3,058	1,010	612	1,046	965	614	2,794	8,760	2,479	723
\$50,000 to \$74,999	3,133	2,599	865	483	1,144	814	512	2,308	8,459	2,439	622
\$75,000 to \$99,999	1,097	1,024	365	161	434	218	155	945	3,621	967	149
\$100,000 to \$124,999	572	448	115	60	150	113	79	428	1,680	513	67
\$125,000 to \$149,999	253	184	56	17	47	41	35	157	756	213	33
\$150,000 to \$199,999	181	176	35	18	70	40	16	105	382	119	26
\$200,000 to \$499,999	214	224	37	24	73	58	16	156	503	188	38
\$500,000 or more	33	41	6	3	14	13	2	40	90	33	7
Average Household Income	\$44,042	\$45,825	\$40,288	\$41,142	\$43,640	\$39,448	\$35,850	\$41,910	\$46,682	\$46,285	\$39,314
Median Household Income	\$33,659	\$34,837	\$32,100	\$33,684	\$32,928	\$30,267	\$28,728	\$31,389	\$36,309	\$34,559	\$30,622
Per Capita Income	\$20,137	\$19,276	\$16,879	\$16,844	\$16,872	\$16,106	\$15,806	\$17,025	\$18,457	\$18,448	\$16,520

2011 Estimate	Polk	Pulaski	Texas
Households by Household Income	11,418	15,286	9,690
Less than \$15,000	2,173	1,838	2,418
\$15,000 to \$24,999	1,820	1,736	1,829
\$25,000 to \$34,999	1,692	2,573	1,617
\$35,000 to \$49,999	2,166	3,204	1,501
\$50,000 to \$74,999	2,154	3,378	1,311
\$75,000 to \$99,999	721	1,458	511
\$100,000 to \$124,999	342	592	222
\$125,000 to \$149,999	171	269	102
\$150,000 to \$199,999	117	142	82
\$200,000 to \$499,999	57	80	82
\$500,000 or more	5	16	15
Average Household Income	\$43,091	\$49,621	\$39,018
Median Household Income	\$35,166	\$42,004	\$28,698
Per Capita Income	\$16,310	\$17,825	\$16,478

2011 HHS Poverty Guidelines

Persons in Family	48 Contiguous States and D.C.	Alaska	Hawaii
1	\$10,890	\$13,600	\$12,540
2	14,710	18,380	16,930
3	18,530	23,160	21,320
4	22,350	27,940	25,710
5	26,170	32,720	30,100
6	29,990	37,500	34,490
7	33,810	42,280	38,880
8	37,630	47,060	43,270
For each additional person, add	3,820	4,780	4,390

SOURCE: Federal Register, Vol. 76, No. 13, January 20, 2011, pp. 3637-3638

For the purposes of this report, the income level for a family of four in the 48 contiguous states and D.C. was used as the poverty level. The income level that corresponds to the poverty level was \$22,350. Nielsen Claritas breaks the income levels into the groups shown in the tables. \$22,350 falls within the category, \$15,000 to 24,999, so any household income under \$24,999 was estimated to be “at or below the poverty level.”

Nearly 32% of the service area is near or below the poverty level for a four-person household. In 2011, there were an estimated 404,065 households in the service area. 128,910 households were at or below the \$24,999 annual household income level. Wright, Texas, Hickory, Howell, Douglas and Dallas Counties were the poorest counties in the service area.

Medically Underserved, Health Professional Shortage Areas, and Rural Health

The Health Resources and Services Administration (HRSA) of U.S. Department of Health and Human Services (DHSS) has developed guidelines for designating Medically Underserved Areas (MUA) / Populations (MUP) and Health Professional Shortage Area (HPSA) for primary medical care, dental care, and mental health. Overviews and guidelines can be accessed at <http://muafind.hrsa.gov/index.aspx>.

Medically Underserved Area/Population

According to the U.S. DHSS every county in the 22-county service area is considered a MUA, with the exception of Taney and Boone, Arkansas. Taney County’s low income population is designated a MUP. There are no MUA in Boone County, Arkansas.

Health Professional Shortage Area

There are three different types of HPSA designation: geographic area, population groups, and facilities. For the purpose of an example, the table below is for the CoxHealth primary service area and was generated at <http://hpsafind.hrsa.gov/HPSASearch.aspx>.

Again as an example, Barry County has all three types of HPSA. White Oak Medical, Inc.—Cassville was a rural health clinic and was listed as a HPSA facility. The low income population of Barry County was listed as a HPSA population, and Barry County was designated a HPSA geographic area. With the exception of Baxter County, Arkansas, every county in the 22-county service area is considered a HPSA.

Rural Health Status

Rural Health Status is determined by the HRSA, and also incentivizes improvement, operation or expansion of health care services in rural areas. According to the HRSA, the majority of the CoxHealth 22-county service area is eligible for rural health grant status. The areas that are not eligible for rural health grants are Christian, and Greene and some parts of Webster, Dallas, and Jasper Counties. Rural health status is determined on an address by address basis and can be found at the following Website: <http://datawarehouse.hrsa.gov/RuralAdvisor/ruralhealthadvisor.aspx?ruralByAddr=1>.

Health Professional Shortage Area

HPSA Name	Type
009 - Barry County	
White Oak Medical, Inc. - Cassville	Rural Health Clinic
Low Income - Barry	Population Group
Barry	Single County
043 - Christian County	
Low Income - Christian	Population Group
Christian	Single County
077 - Greene County	
Advocates for a Healthy Community	Comprehensive Health Center
Medical Center for Federal Prisons - Springfield	Correctional Facility
Low Income - Greene County	Population Group
Greene	Single County
109 - Lawrence County	
Low Income - Lawrence County	Population Group
Lawrence	Single County
167 - Polk County	
Low Income - Polk County	Population Group
Polk	Single County
209 - Stone County	
Stone	Single County
White Oak Medical Clinic Inc. Crane	Rural Health Clinic
213 - Taney County	
Low Income - Taney	Population Group
Taney	Single County
225 - Webster County	
Webster	Single County
Fordland Clinic Inc.	Federally Qualified Health Center Look A Like

Existing Health Care Facilities and Resources Within the Service Area

Included in Appendix 4 of this document is a listing healthcare facilities by county in the CoxHealth 22-County service area. The listing includes the facility’s name, a brief description of the services or specialty, address, affiliation if known, and county the facility is located.

Health care resources in this listing are limited to hospitals, clinics, public health departments and some community agencies, but may not represent every possible resource available to the population of the 22-county service area. Not all independent physician offices or clinics, physician imaging centers, long term care facilities, pharmacies, nursing homes, county mental health departments, nursing schools, or health plans were captured in this list. Based upon the input of the public health survey a thorough study of area mental health facilities should be considered.

CoxHealth Public Health Survey of Area Healthcare Needs

Each of the past three years CoxHealth has conducted a public health survey in an effort to gauge the needs of the residents of CoxHealth 22-county service area. This year’s survey sample was larger and more diverse. The survey was sent to public health departments, local community agencies and CoxHealth Regional Services clinics, other psychological services, and public schools. The responses have been tabulated and summarized, and the consolidated survey report is included in the appendix. There were 156 surveys returned., and the table below shows how many surveys each group returned.

The first question was, “What are your health priorities for the population you serve over the next year?” The responses were grouped into eight different categories: risk factors, lifestyle choices, and prevention; chronic and other disease; access to care; needed services; medical insurance; injuries, abuse, or violence; economics, poverty, employment, or business; and education. The highest response was in the access to care category and accounted for over half of the category’s responses: access to primary care. Risk factors, lifestyle choices, and prevention

elicited the greatest number of responses. Obesity, healthy diet / nutrition, and Immunizations were the top three responses related to this category. Diabetes and Asthma topped the Chronic and other Diseases category. The highest ranked “needed service” was mental health services, although urgent care / after hours care and emergency response were also noted.

CoxHealth Community Health Needs Survey

Phone: 417-269-8161 Fax: 417-269-3059

Health Priorities

1. What are your health priorities for the population you serve over the next year? Please select the top five priorities.

- Access to Primary Care
- Access to Specialty Care
specify: _____
- Access to Home Care
- Diabetes
- Heart Disease
- COPD
- Asthma
- Cancer (*type:* _____)
- Prenatal Care
- Teen Pregnancies
- Low Birth Weights
- Obesity
- Physical Inactivity
- Wellness Program
- Healthy Diet/Nutrition
- Decreasing Communicable Disease
- Immunizations
- Tobacco Use
- Alcohol Abuse
- Drug Abuse
- Elder Abuse
- Child Abuse
- Decreasing Unintentional Injuries in Children
- Medically Uninsured and Underinsured
- Medicaid Registration Process
- Mental Health Services
- Urgent Care/After Hours Care
- Emergency Response
- Repetitive Use Injuries
- Reduce Sick Days
- Following Prescribed Drug Use
- HIV/AIDS
- STDs (*type:* _____)
- Medical Homes
- ADHD

Additional Priorities (please list additional priorities in the space below)

Weakness/Challenges

2. List any weaknesses/challenges to improving health care of the population you serve.

Changes to the Population or Area

3. List any noticeable changes over the last five years in the health status of the population you serve.

Partnership/Assistance

4. How can CoxHealth assist in addressing the needs of the population you serve?

Other Comments

5. Please list any other comments regarding CoxHealth, your community's health, and/or opportunities for improvement.

Population Description

6. Please describe the population you serve. (Example: State, County, City, Employees, Residents)

Name and title: _____ Phone Number: _____

Facility or Organization: _____ E-mail: _____

**If you would like to be notified when the results of this survey are published and how to access the report please provide your e-mail address.*

Surveyed Groups	Surveys Returned
Public Health Departments	13
Local Community Agencies	35
Regional Services Clinics	43
Other Psychological Services	2
Public Schools	63
Total Surveyed	156

Summary of the Public Health Survey

The full report can be found in the appendix.

Item 1: "What are your health priorities for the population you serve over the next year?"

The top ten responses to this question are the following:

- Access to Primary Care
- Medically uninsured and underinsured
- Obesity
- Healthy Diet / Nutrition
- Mental Health Services
- Immunizations
- Physical Inactivity
- Wellness Program
- Diabetes
- Asthma

Also receiving higher response rates were tobacco use, ADHD, child abuse, heart disease, and drug abuse. Access to primary care and medically uninsured and underinsured can be related. Transportation needs and cost have been identified as concerns for the population. Obesity, healthy diet / nutrition, physical inactivity, wellness program and diabetes can all be related. If inactivity and diet and nutrition were improved other factors could be impacted positively.

Item 2: "List any weakness/challenges to improving health care of the population you serve."

The response to challenges have been grouped into similar topics and subtopics. The top three topics and top three subtopics for each topic is listed below:

- Education
 - ◇ Basic understanding
 - ◇ Parental responsibility
 - ◇ Apathy about health
- Finances: People / Population
 - ◇ Poverty / Low Income
 - ◇ Other
- Insurance / Cost
 - ◇ Uninsured or underinsured
 - ◇ Cost
 - ◇ Other

Some form of education was mentioned as a weakness or challenge in our service area more than other challenges. Based on the responses, what seems to be lacking is a basic understanding of the importance of lifestyle choices to overall health and longevity. Unfortunately, this lack of understanding affects children in the community who rely on parents for their healthcare needs. Basic understanding and parental responsibility could both be related to apathy, which is the third subtopic in this group. Of course, resources are also a problem for educators in our service area, and is mentioned throughout the survey.

The next highest ranked challenge was related to the finances of the population. There really was one topic, and it was the poverty or income level of the population. Poverty, low income, ability to pay, unemployment, working poor, and poor living conditions were some of the issues mentioned **related** to this challenge.

Finally, Insurance or cost was the third highest ranked challenge. Most of the responses related to this topic were associated with lack of insurance or adequate insurance coverage. Cost was also considered to be a problem that could be a factor related to the education challenge. Cost of prevention and cost of healthy lifestyle choices were specifically mentioned. How to make inexpensive lifestyle changes could impact at least two different challenges identified in this survey.

The responses linked to challenges were diverse, but much of the root problems were related to cost and the ability to pay. The other topics were organizational finances, available services and resources, transportation, nutrition/exercise/weight, and other various subtopics.

Item 3: “List any noticeable changes over the last five years in the health status of the population you serve.”

- Chronic Conditions
- Insurance / Payer
- Obesity
- Service Needs
- Income / Poverty / Economy / Unemployment
- Demographics
- Exercise / Nutrition
- Mental Health
- Transient Population
- Various “others”

Diabetes was listed as the most common chronic condition that has changed in the last five years in the 22-county population. The increase in diabetes has affected both child and adult and is also a complicating condition for other diseases and diagnoses. Respiratory conditions or asthma was another highly ranked change in the population. The schools seem to be seeing more students with more acute cases of asthma. Diagnosed Alzheimer’s Disease is also increasing as well as other dementias in adults. These conditions could be also tied to another topic identified in this survey and according to demographic data for this area: the population is growing older.

The next highest mentioned change in the population is related to insurance and payers. This topic was rated as one the highest priorities as well. The root problem with being uninsured or underinsured, high out of pocket expenses, and the increase in Medicaid is access to the appropriate care when it is needed to prevent conditions from becoming chronic or worsening. The problem of insurance and payer has the potential to worsen as funding for Medicare and Medicaid is under scrutiny and the legality of components of the Patient Protection and Affordable Care Act is currently being debated.

Not only is obesity a top priority in the 22-county population, but it has worsened according to Item 3. The increase in obesity is across the board. Adults and children are getting heavier throughout the 22-counties. Lack of exercise and poor nutrition were also identified as deteriorating characteristics of the population.

Again, income, poverty, the economy, and unemployment have all worsened over the last five years for this area. These issues are not isolated to the 22-county population, but it is a growing problem to be considered.

Another issue that is beginning to become a problem in the 22-county population is mental health. According to the survey the prevalence of mental health conditions is increasing. Improved access to mental health services is needed for the population, and that includes both adult and child psychiatric services.

Item 4. “How can CoxHealth assist in addressing the needs of the population you serve?”

The response to suggestions ways CoxHealth can assist have been grouped into similar topics and subtopics. The top three topics and top three subtopics for each topic is listed below:

- Access to Care
 - ◇ Mental Health
 - ◇ Specific Service Needs
 - ◇ Primary and Specialty Care
- Education
 - ◇ Community Education
 - ◇ Communicating Available Resources
 - ◇ Partnership or Collaboration in Education
- Chronic Care, Wellness, Immunizations, or Screenings
- Partnership or Collaboration

Increasing access to care was the number one identified way CoxHealth could assist in addressing the needs of the community. Both primary and specialty care were recognized as needed services, but mental health was specifically mentioned more often than either primary or specialty care. There were specific services or facility needs singled out for certain areas related to care in the city of Branson, Barry and Stone Counties, city of Licking, and the St. Roberts areas. Cox North and the mental health care provided were mentioned in this item.

Outreach in the form of presentations, resources, and educational materials about lifestyle choices is seen as another way CoxHealth can help improve the health of the community according to those who participated in the CoxHealth public health survey. Many of the schools are requesting presentation by health care professionals on topics related to school-age children.

Communication of available resources was also identified as a way to help other professionals in the area improve health. A resource or program directory of services that CoxHealth as well as other organization provides were specifically mentioned. Partnerships in developing and delivering education for and to the community were also suggested. Wellness screenings like the event held in August by Cox Monett were specifically mentioned as something that is very appreciated, and would be helpful if it could happen more frequently though the year. A wellness Email was also requested. Many of the suggestions given in this item are very much related. Outreach, educational resources and collaboration have potential to improve the 22-county population’s health.

There were other topics identified for assisting the community, such as workforce or employment, funding, cost of care or payer, transportation, and other subtopics. Again, much of these suggestions are related to a financial need.

Item 5: “Please list any other comments regarding CoxHealth, your community’s health, and/or opportunities for improvement?”

The responses to this item were categorized into eight groups and are listed below:

- Specific Comments—Community Involvement
- Education
- Funding or Resources
- Specific Partnership or Collaborative Needs
- Specific Needs or Suggestions
- Uninsured and/or poor
- Miscellaneous (uncategorized)
- No Additional Comments / No Response / Unknown

These were mainly individual comments that may not be applicable to the population in general, but should be noted in evaluating the needs of the community. CoxHealth’s current involvement in the community was recognized by many of those surveyed in a positive manner. The comments related to education reiterated the educational needs identified earlier. Funding and resources illustrated the limited funding available for public health and individuals in the community. Again, financial resources are scarce and that scarcity could become much worse if the economy does not improve. There are multiple opportunities for partnerships or collaborative efforts, but funding continues to be an issue. Many of those surveyed had ideas as to what CoxHealth should be doing in their communities and suggested those specific initiatives, like opening the fitness centers to low income families, building another hospital, urgent care and free standing emergency center, and improving access to mental health.

Board of Directors Survey

Fifteen members of the Board responded to a survey distributed by CoxHealth’s Chief Executive Officer, Steve Edwards. One of the questions was “Are there any health-related services that are either not available or inadequately available in our area?” For the primary service area counties, most responses indicated “no” or “not aware of” in response to this question. Some of the individual responses suggested specific issues to consider: additional dermatology services; infertility / IVF services; Christian County clinic expansion; insurance coverage of lap band surgery; obesity management clinic; pain management clinic to include oral and topical pain medications; neurologist-hospitalists to manage CVA patients, Cox’s orthopedic surgery capacity; dental x-ray capability. When responding to the question about needed health-related services in the secondary service area, the majority of responses did not indicate specific needs. However, three responses were given related to rural health needs: urgent care or walk-in clinics; recruitment of physicians to rural area; and additional rural clinics.

Survey of Area Heads of Households

In January 2012, Critical Insights, a national survey company based in Maine, conducted 876 phone interviews on behalf of CoxHealth to determine community perceptions on a number of topics. Individuals from the entire service area were polled. The following are some of the findings from the report.

Do you have a primary care of family physician?

Yes: 84% No/Don’t know: 16%

Think back over the past year. For any reason, have you delayed receiving medical treatment, not filled a prescription, or not taken medication that had been prescribed to you?

Yes: 20% No/Don’t know: 80%

Of the 20% yes: Why is that?

Financial reasons	37%	Negative reaction to drugs	8%
Don’t need	20%	Absent minded / Forget /don’t bother	6%
No Insurance / didn’t cover	18%	Don’t know	5%


Do you know of any medical or health services needed in your area which are currently not available or are not available at a level you feel is satisfactory?

Yes: 32% No: 59% Don't know: 9%

Of the 32% yes: What services are needed?

More specialists	36%	More for children/teenagers	6%
Specialized treatment (cancer, HIV)	13%	Mental health care	5%
Hospital/clinic close-by	12%	Urgent care facilities	5%
More doctors	9%	Care for people with no insurance	5%

The following slide shows the trend in “yes” response for 2012 vs. responses in the three preceding years. “More specialists” has been the top rated need for the last four surveys and is by far the most frequent response of all age groups. “Specialized treatments” was second in terms of frequency overall and had the highest percentage was from the age group 25-34. The age group 35-64 felt that a hospital/clinic close-by was more of a concern than specialized treatments.



Trends in Perception of Needed Services [^]

Q30a. What services are needed? *	2009	2010	2011	2012
More specialists	34%	36%	22%	37%
Specialized treatments (cancer, HIV, etc.)	2	17	17	15
More doctors	9	6	4	10
More for children, teenagers	2	14	17	6
Hospital/clinic closer by	15	3	10	6
Urgent care facilities	6	3	--	5
More affordable care	9	10	10	4
More senior services	6	5	4	3
Walk-in clinics	8	4	--	3
Dental care	5	4	3	3
VA closer by	3	3	1	1

[^] Year-over-year trending based on aggregated findings from the following counties: Greene, Christian, Webster, Barry, Lawrence, Taney, and Stone.
 * Multiple responses accepted. The remaining responses can be found in the Detailed Tabulations.

CRITICAL INSIGHTS
RESEARCH FOR PRECISE PRAGMATIC DIRECTION

February 2012

120 Exchange Street
Portland • Maine
www.criticalinsights.com

46

Draft

Facebook/Twitter Survey

Also conducted in January 2012 was a CoxHealth survey on Facebook and Twitter; 86 individuals responded. 80% of the responses came from residents of Greene, Christian, and Webster Counties in Missouri, but there were responses from Barry, Dade, Hickory, Howell, Laclede, Lawrence, Polk, Stone, Taney, Webster, Boone—AR, Newton, and two other counties (not identified). The age group of the responders were from under 17 to senior, but predominantly between 35 and 64. The majority of the respondents identified themselves as female. Some of the findings follow.

Do you have a primary care or family physician? Yes: 84% No: 11%

Have you seen your physician in the last year? Yes: 77% No: 6%

Do you know of any medical or health services that are needed in your area which are currently not available or are not available at a level you feel is satisfactory? Individual comments follow:

- “Inexpensive healthcare for temporarily unemployed people with no health insurance.”
- “Better ways to communicate with specialists I see. Every question requires a visit, so I wait until a visit - sometimes several months. Any chance of a secure server that the nurse can at least forward?”
- “Takes TOO long to get in to see specialists...dermatologist, rhumatologist, allergist...”
- No

Health Behaviors and Outcomes

The Missouri Hospital Association published two reports, “Assessing the Health of Our Communities.” The first regarded preventable hospitalizations and the second assessed health behaviors and outcomes in the state by region. The following pages contain findings from the state’s assessment published in 2010. The data has been presented in chart format by county beginning on page 28.

Obesity and Adult Obesity

Every county in the CoxHealth service area has an adult obesity rate that is at or higher than the Missouri state average, and as an example Lawrence County has higher than average total obesity and adult obesity rates. In comparing primary and secondary service areas, the secondary service area tends to be more obese than the primary service area. Howell County’s obesity rate exceeds all other counties’ in the service area. Pulaski County has the highest rate of adult obesity in the entire service area. Education may be helpful, but the ingredients in the foods fed to children and purchased by adults for lunch should also be a consideration if obesity trends are to be reversed.

Physical Inactivity

While suspect all counties except Christian, Greene and Webster report higher than the state average activity rates. Inactivity is actually the measure reported, and may lead to some confusion in the measure’s response. This information along with the increased obesity rates may indicate a lack of understanding of appropriate physical activity for improved health outcomes. It is reasonable to believe that if physical activity is better than average in the majority of the 22-County service area counties that other biomarkers like blood pressure, cholesterol, and the presence of diabetes should also be improved. An education campaign related to walking or other physical activity may improve health outcomes.

Diabetic Prevalence and Diabetic Screenings

Diabetes is a problem in Missouri as is obesity. The secondary service area counties show a higher prevalence of the disease and a lower rate of screening. Diabetic screening rates are generally higher with diabetes prevalence lower in the primary service area counties.

High Blood Pressure

In the 22-County service area, only six counties have high blood pressure rates less than the average for the state of Missouri. High blood pressure, obesity, physical inactivity and high cholesterol can be related. If one factor like physical inactivity can be improved, other factors like high blood pressure may improve as a result.

High Cholesterol

No county within the CoxHealth service area has a high cholesterol rate below the state average. If not corrected, these high rates will lead to other chronic conditions.

Poor or Fair Health and Poor Physical Health Days

The population in the service area generally rates their health as poor. Only four counties had rates of poor or fair health lower than the state average. This is consistent with the poor physical health days measure as well.

Low Birth Weight and Teen Birth Rate

The rate of low birth weights are higher than the state average in only Barry and Wright Counties. Both counties have much higher rates of teen births. Teen birth rates are higher throughout the secondary service area and only Polk and Pulaski's rates are below the state average.

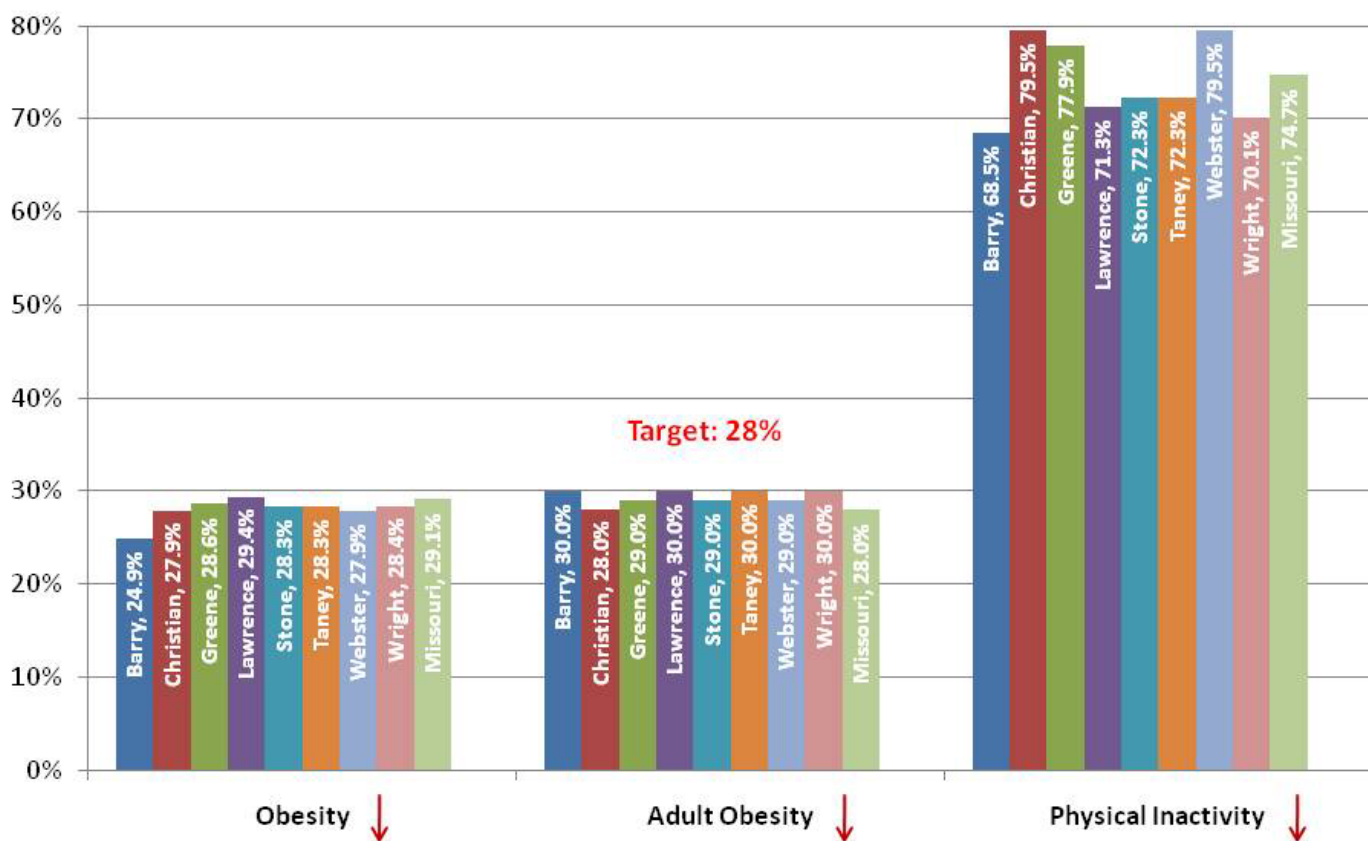
Adult Smoking

Three counties did not report this measure: Dade, Howell, and Texas. Of those counties that reported rates for this measure only six were below the state average: Christian, Stone, Taney, Wright, Ozark, and Polk Counties. Since this data was collected the City of Springfield has enacted a law that bans smoking in public areas. CoxHealth has banned the use of tobacco products on any of its campuses since September 1, 2006. Additionally, smoking cessation classes, sponsored national public speaker on smoking problems, and support for the city-wide ban on smoking illustrates CoxHealth's dedication to reducing tobacco use.

Primary Care Provider Rate

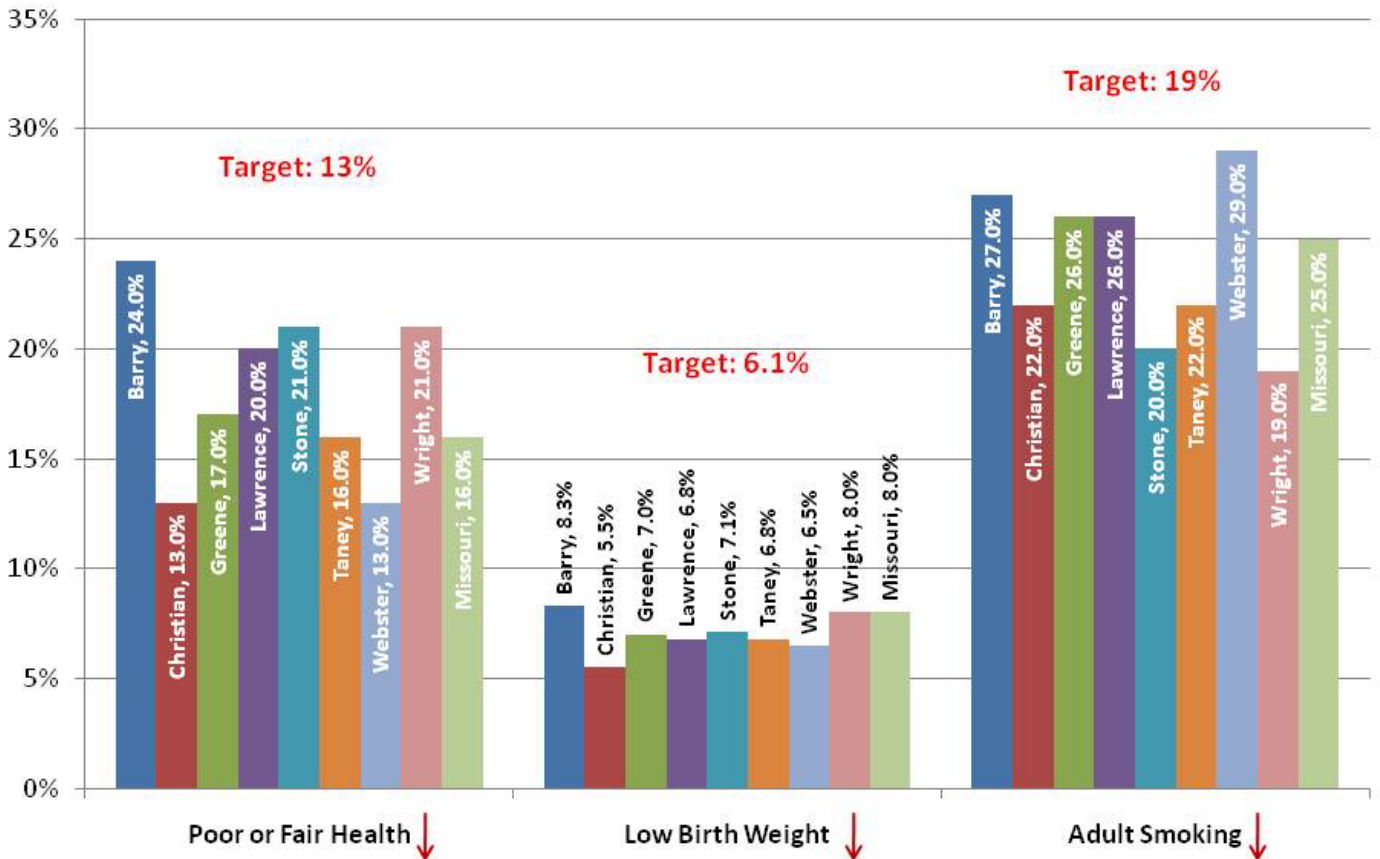
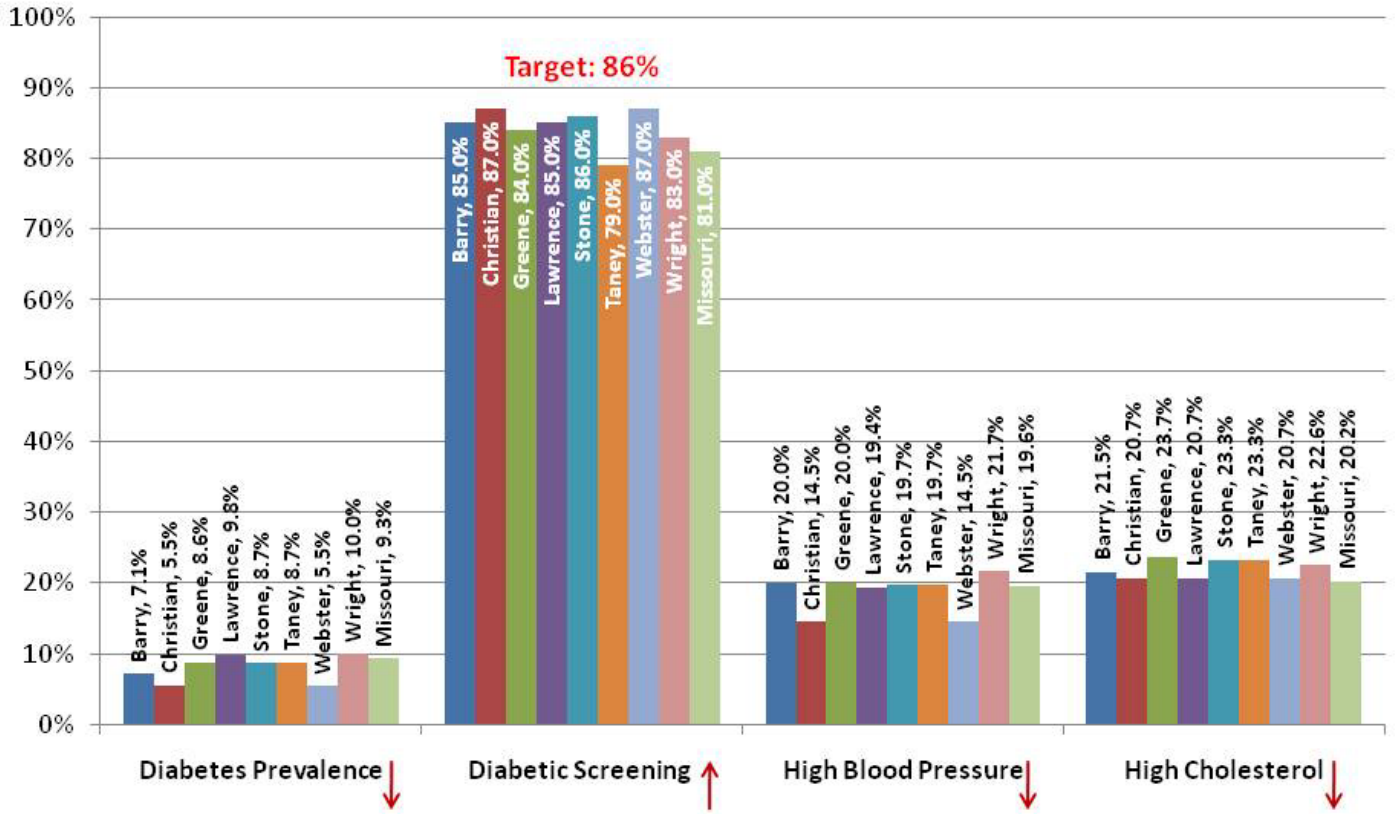
According to the Missouri Hospital Association's report, only three counties in the CoxHealth service area have adequate levels of primary care physicians: Barry, Greene, and Polk. However, Howell County is greater than the state average and Taney County is slightly lower than the state average for primary care providers per 100,000.

Health Behaviors and Outcomes of Southwest Missouri



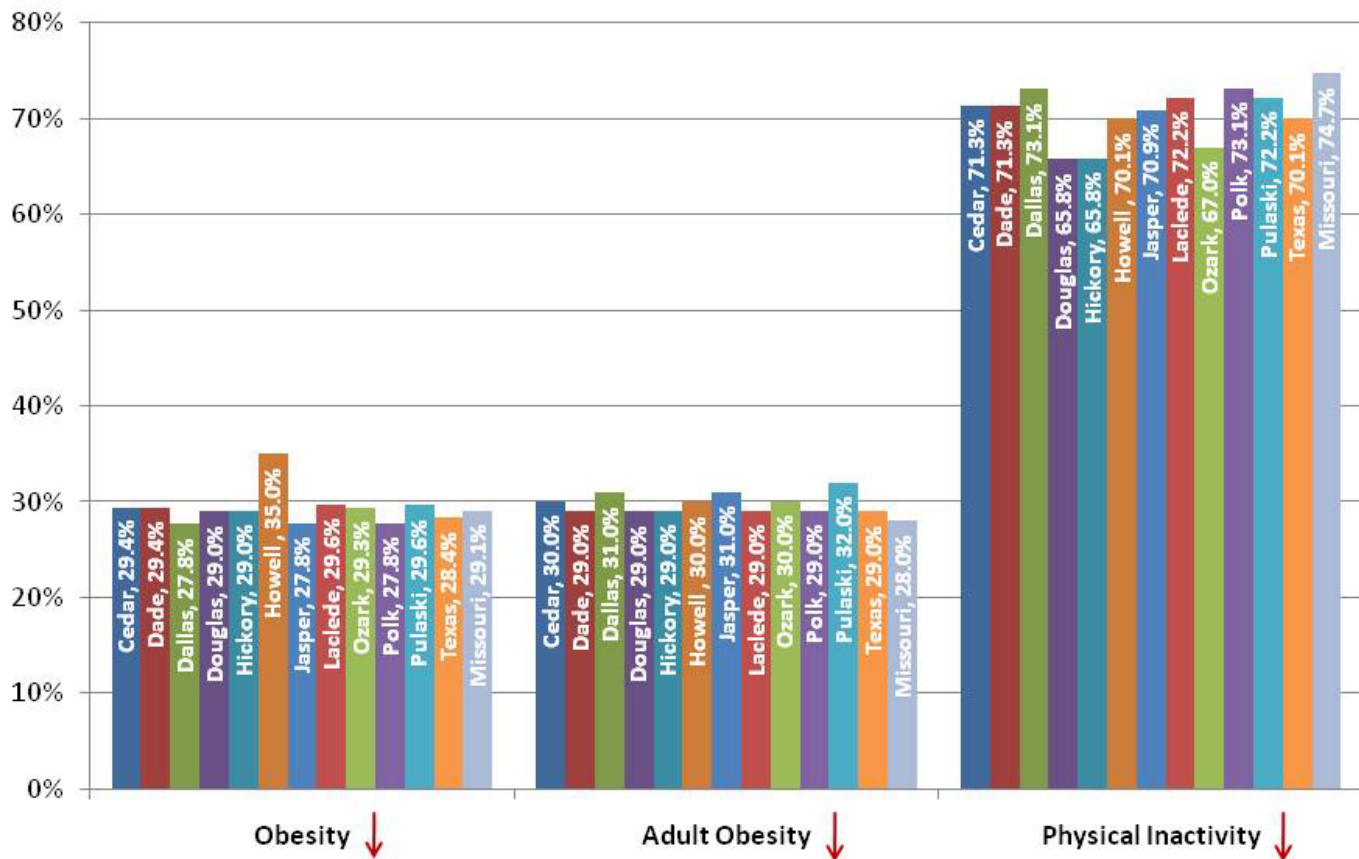
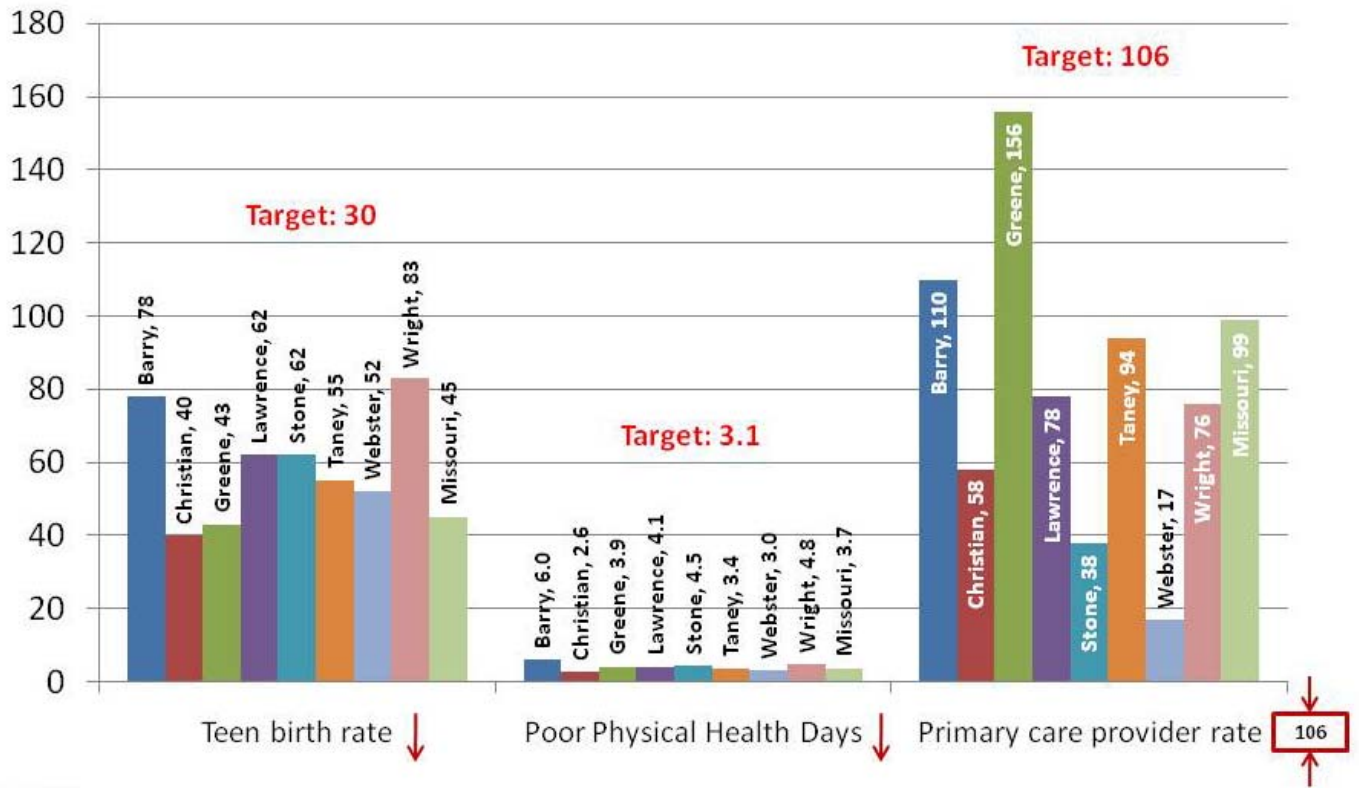
RED ARROW = Improvement Direction

Health Behaviors and Outcomes of Southwest Missouri (continued)



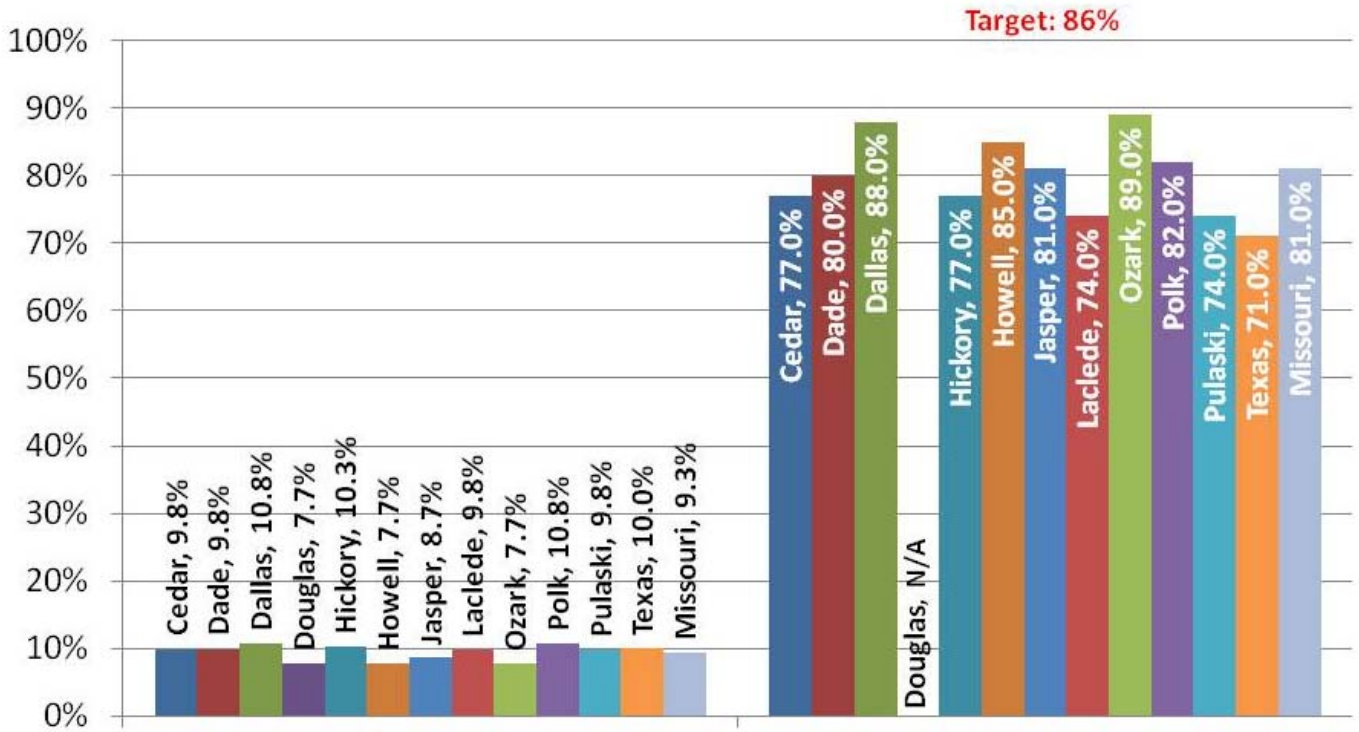
RED ARROW = Improvement Direction

Health Behaviors and Outcomes of Southwest Missouri (continued)



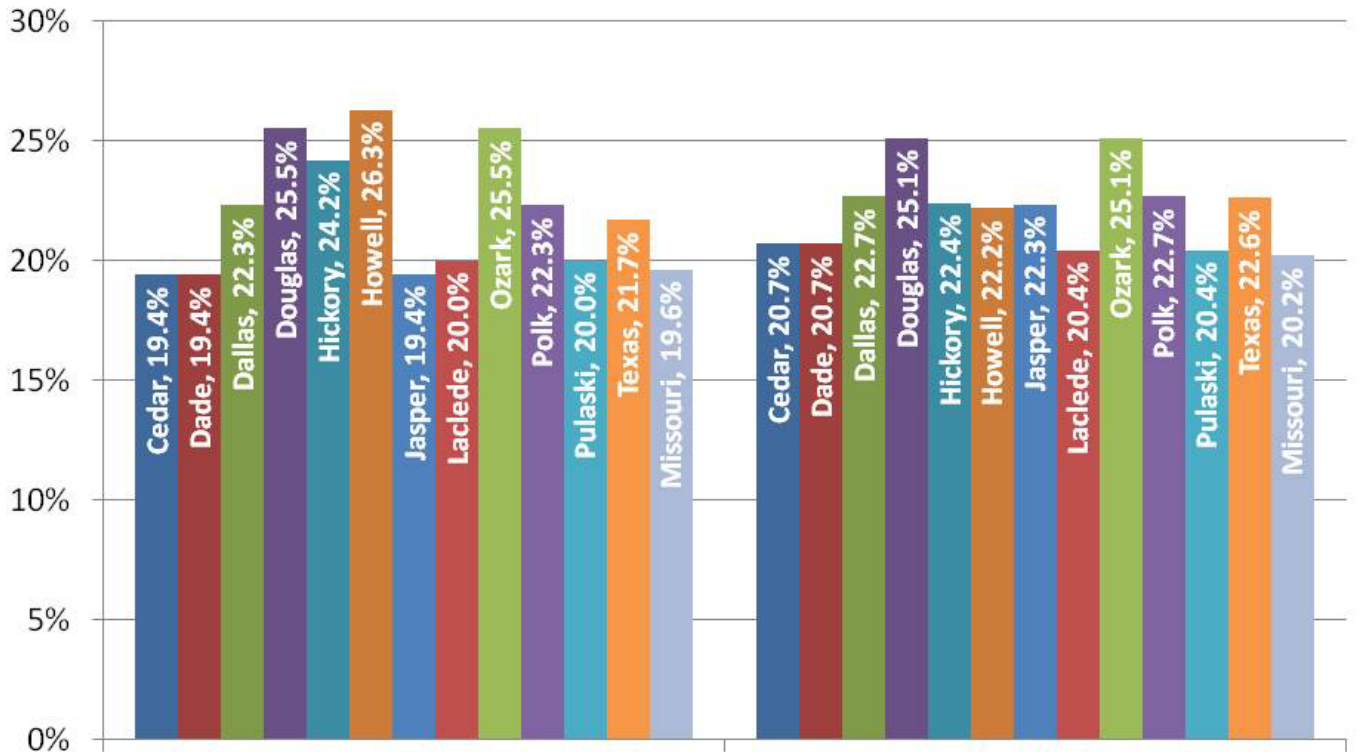
RED ARROW = Improvement Direction

Health Behaviors and Outcomes of Southwest Missouri (continued)



Diabetes Prevalence ↓

Diabetic Screening ↑

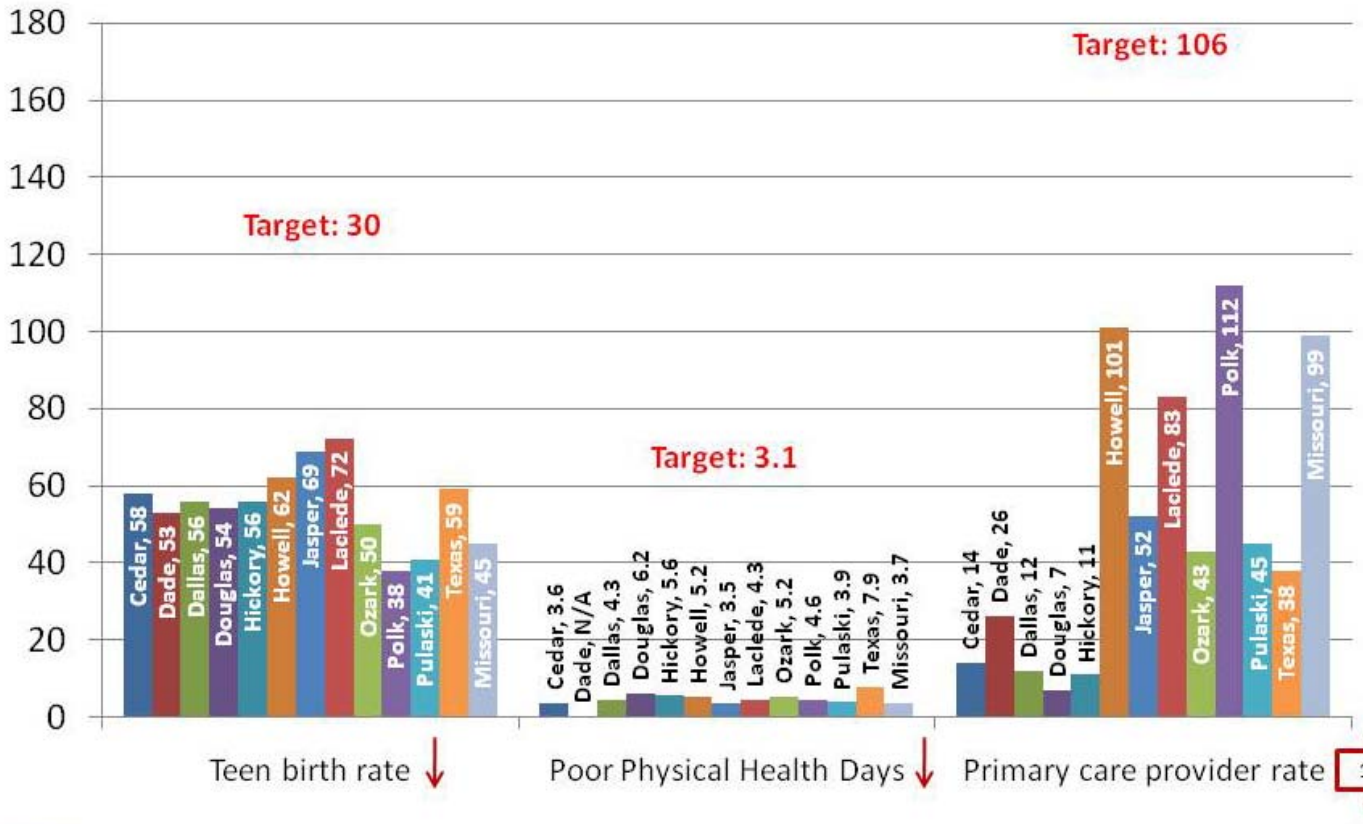


High Blood Pressure ↓

High Cholesterol ↓

RED ARROW = Improvement Direction

Health Behaviors and Outcomes of Southwest Missouri (continued)



RED ARROW = Improvement Direction

2012 County Health Rankings

<http://www.countyhealthrankings.org>

The county health rankings ranks counties throughout the country based on health factors and health outcomes. The rankings by county are shown in the table and in map format on the following two pages. The data and ranking is by state, so the Arkansas counties are ranked based on other Arkansas counties and the same for Missouri counties.

The health factors illustrates some of the influencing factors to the health in the county and use the following ranking criteria:

- Health Behaviors—Includes alcohol and tobacco use, sexual activity, and diet and exercise]
- Social and Economic Factors—includes education, community safety, employment, income and family and social support
- Clinical Care—includes quality of care and access to care
- Physical Environment—includes environmental quality and built environment

The health outcomes indicates the health of the county, and uses the following ranking criteria:

- Mortality—includes premature deaths or deaths before the age 75
- Morbidity—includes health-related quality of life and birth outcomes

The CoxHealth's service area counties have health outcome rankings between 3 and 99. Christian County has the best health outcome ranking in the service area at 3, while Texas County has the worst health outcome ranking at 99. Morbidity data was not available for Dade County. The primary service area had better overall health outcomes and health factors than the secondary service area and Missouri generally had better health factor and outcomes than Arkansas.

Health factor ranking in the 22-county service area ranged from 5 to 104. Again, Christian County was the best and Texas County was the worst overall in the service area.

Health outcomes in the 22 counties are generally worse than the state values and the US benchmark. Christian and Greene had better mortality outcomes, but still did not reach the 90th percentile in the US. Cedar and Christian counties had better morbidity outcomes than the rest of the service area and state, while Cedar County was ranked number 1 for it's morbidity outcomes.

In general , the 22-county service area needs improvement in all health factors listed, but adult obesity, physical inactivity, teen births, and primary care physicians, mammography screenings stand out. No county in the service area is at or better than the benchmark for adult smoking, but there are some counties that perform better than the state on this measure: Christian , Greene, Stone, Ozark, Polk, and Boone [AR]. Even those counties that were better than the state average did not reach the US benchmark although Ozark County was close.

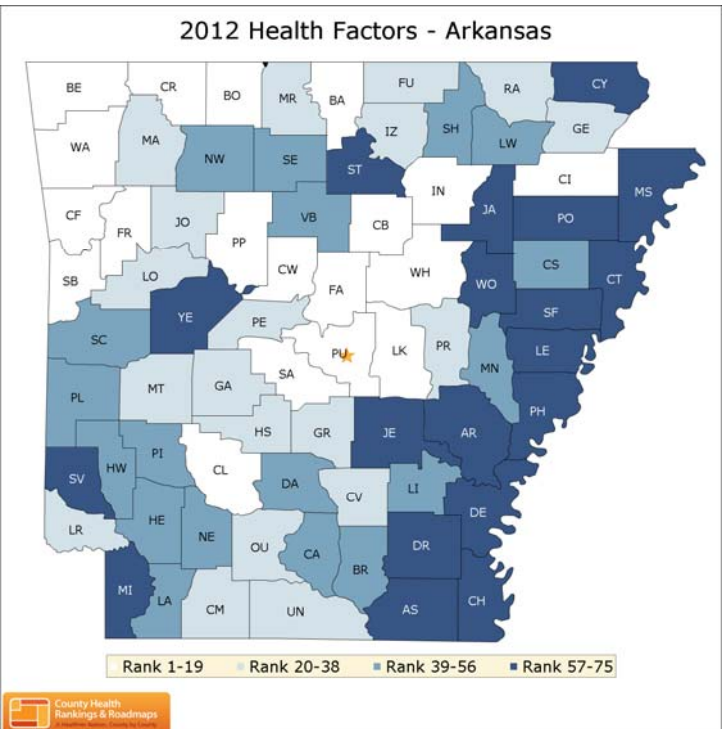
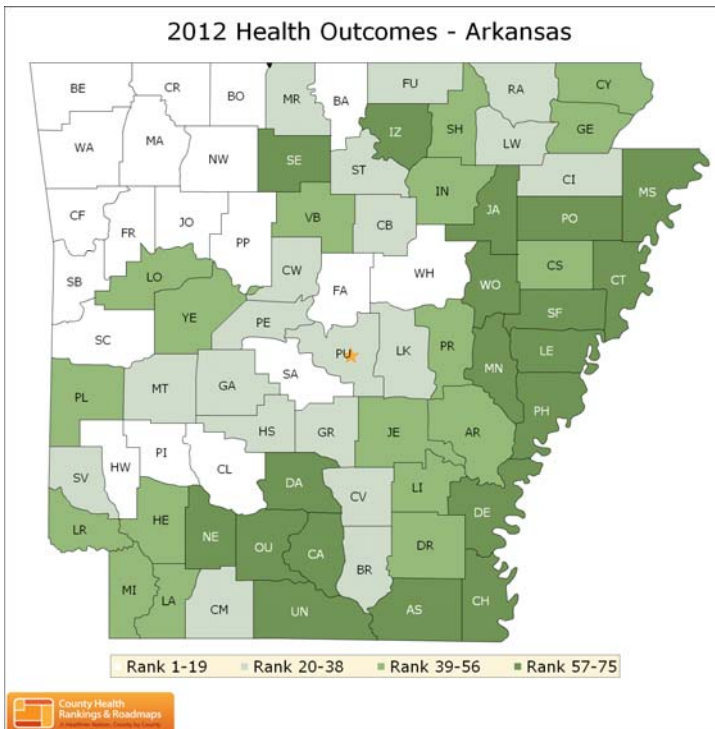
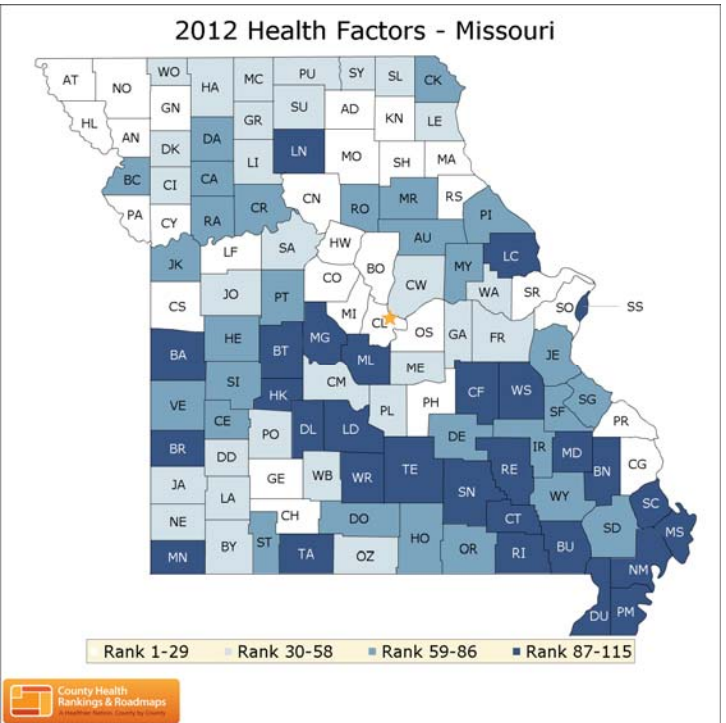
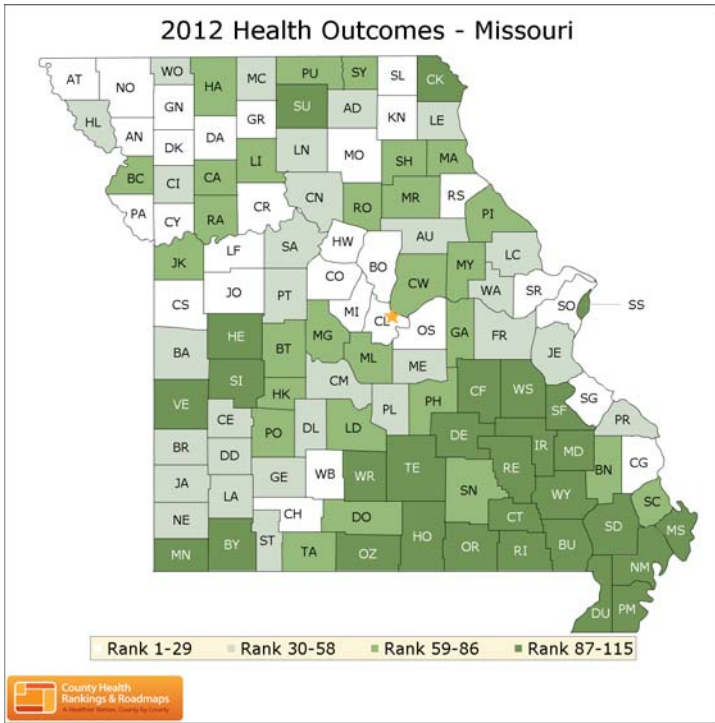
See the table on the next page more data.

2012 CoxHealth Community Health Needs Assessment

2012 County Health Rankings
<http://www.countyhealthrankings.org>

US Benchmark	Missouri	Barry	Christian	Greene	Lawrence	Stone	Taney	Webster	Wright	Cedar	Dade	Dallas	Douglas	Hickory	Howell	Jasper	Laclede	Ozark	Polk	Pulaski	Texas	Arkansas	Baxter	Boone
Health Outcomes																								
Mortality	96 th %ile	87	7	34	53	39	49	44	91	92	74	47	82	54	99	57	63	100	75	41	89	31	31	24
<u>Premature death</u>	5,466	7,981	6,322	7,824	8,350	8,061	8,305	8,140	10,214	10,434	8,892	8,251	9,577	8,369	10,898	8,499	8,673	10,960	8,899	8,100	10,029	9,580	9,887	9,494
Morbidity																								
<u>Poor or fair health</u>	10%	16%	20%	11%	17%	20%	16%	15%	19%	12%	30	19%	18%	21%	14%	22%	18%	20%	23%	30%	19%	14%	15%	4
<u>Poor physical health days</u>	2.6	3.6	5.2	2.3	4.1	4.2	4.3	4	3	4.3	2.6	3.6	6.2	5.7	5	3.7	4.4	6	4	3.7	6.6	4	3.2	3.5
<u>Poor mental health days</u>	2.3	3.7	5.2	2.9	3.7	3.8	3.9	5.7	3.6	4.5	2.1	2.7	4.1	7.5	5.2	3.7	4	4.9	3.6	2.9	4	3.7	3.3	2.9
<u>Low birthweight</u>	6.00%	8.10%	8.00%	6.20%	6.90%	7.00%	7.30%	7.50%	6.40%	8.30%	5.90%	6.40%	7.50%	4.70%	7.10%	6.70%	7.20%	5.80%	6.30%	7.40%	7.60%	9.00%	6.90%	7.70%
Health Factors																								
Health Behaviors																								
<u>Adult smoking</u>	14%	24%	27%	20%	23%	22%	26%	23%	24%	24%	47	32%	32%	32%	27%	24%	30%	16%	19%	25%	31%	23%	26%	19%
<u>Adult obesity</u>	25%	31%	30%	27%	30%	30%	32%	32%	33%	31%	29%	32%	30%	30%	30%	33%	32%	28%	33%	33%	35%	32%	28%	29%
<u>Physical inactivity</u>	21%	28%	33%	26%	28%	30%	31%	26%	36%	30%	29%	30%	30%	30%	31%	27%	35%	32%	28%	27%	33%	31%	33%	32%
<u>Excessive drinking</u>	8%	17%	15%	14%	13%	10%	11%	13%	2%	2%	5%	12%	15%	5%	12%	15%	8%	15%	13%	21%	11%	12%	14%	7%
<u>Motor vehicle crash death rate</u>	12	19	39	18	16	31	26	22	45	27	57	42	35	33	37	22	26	41	37	23	35	25	33	28
<u>Sexually transmitted infections</u>	84	438	179	147	296	212	111	238	170	266	132	121	119	82	133	228	430	251	181	1,030	167	503	162	203
<u>Teen birth rate</u>	22	44	72	38	44	58	54	58	48	81	58	51	55	62	68	68	72	47	41	38	60	61	50	58
Clinical Care																								
<u>Uninsured</u>	11%	15%	19%	15%	17%	19%	22%	19%	21%	19%	18%	20%	19%	19%	20%	18%	19%	22%	20%	17%	21%	20%	20%	20%
<u>Primary care physicians</u>	631:01:00	1,015:1	1,006:1	1,845:1	727:01:00	1,176:1	2,100:1	909:01:00	2,803:1	1,826:1	3,733:1	13,584:1	8,992:1	974:01:00	1,100:1	1,014:1	4,693:1	919:01:00	2,131:1	2,041:1	867:01:00	723:01:00	768:01:00	
<u>Preventable hospital stays</u>	49	75	56	42	54	55	49	52	51	66	69	45	43	76	62	74	74	46	50	93	65	81	77	97
<u>Diabetic screening</u>	89%	84%	85%	89%	88%	86%	84%	83%	87%	83%	88%	87%	87%	79%	85%	83%	86%	84%	80%	81%	84%	81%	85%	83%
<u>Mammography screening</u>	74%	65%	63%	64%	64%	64%	67%	59%	57%	58%	64%	50%	50%	59%	57%	66%	60%	67%	65%	46%	55%	62%	71%	59%
Social & Economic Factors																								
<u>High school graduation</u>	N/A	86%	89%	91%	86%	85%	91%	91%	88%	96%	92%	85%	96%	91%	84%	84%	84%	94%	91%	91%	89%	74%	75%	76%
<u>Some college</u>	68%	61%	39%	70%	65%	45%	38%	57%	46%	39%	37%	31%	42%	41%	46%	52%	45%	38%	48%	61%	40%	52%	52%	48%
<u>Unemployment</u>	5.40%	9.60%	8.70%	8.40%	8.40%	12.40%	12.60%	10.00%	10.60%	8.60%	8.90%	11.70%	10.30%	12.50%	9.20%	8.40%	11.80%	9.20%	9.90%	7.90%	9.50%	7.90%	8.90%	7.30%
<u>Children in poverty</u>	13%	21%	29%	17%	24%	26%	31%	31%	29%	35%	34%	31%	38%	41%	33%	23%	29%	40%	30%	17%	33%	27%	27%	26%
<u>Inadequate social support</u>	14%	19%	15%	17%	17%	14%	17%	20%	17%	20%	28%	26%	23%	30%	21%	20%	16%	20%	19%	19%	19%	21%	23%	16%
<u>Children in single-parent households</u>	20%	32%	26%	20%	32%	38%	33%	30%	34%	28%	28%	26%	23%	30%	29%	35%	30%	32%	25%	24%	31%	35%	29%	27%
<u>Violent crime rate</u>	73	518	270	277	509	311	415	628	177	306	191	133	248	424	347	438	330	306	442	447	149	523	118	322
Physical Environment																								
<u>Air pollution-particulate matter days</u>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<u>Air pollution-ozone days</u>	0	7	0	2	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0
<u>Access to recreational facilities</u>	16	10	11	13	11	5	6	12	11	7	0	0	0	15	11	8	11	8	0	7	6	4	7	9
<u>Limited access to healthy foods</u>	0%	8%	0%	19%	9%	1%	0%	1%	28%	6%	3%	4%	36%	12%	4%	5%	19%	7%	27%	0%	10%	12%	1%	5%
<u>Fast food restaurants</u>	25%	47%	32%	49%	52%	40%	27%	38%	45%	50%	42%	56%	29%	9%	49%	49%	40%	40%	48%	37%	35%	50%	41%	52%

The following four maps show the Missouri and Arkansas counties with regard to health outcomes and health factors. The eastern counties in the 22-county service area tended to have poorer outcomes and health factors. The two counties in the 22-county service area from Arkansas are two of the top ranking counties for outcomes and health factors in Arkansas. As with Missouri the eastern side of the state showed higher ranked outcomes and health factors. These same maps can be viewed on the website for each health factor or health outcome measure. <http://www.countyhealthrankings.org>



Strategic Planning

As part of the enterprise-wide strategic planning cycle, CoxHealth leaders from throughout the system met on March 27, 2012 for a routine strategy meeting. Findings from the Community Health Needs Assessment were summarized and presented. The top ten priorities from the Community Health Needs Assessment were discussed with the goal of establishing the top community health priorities for CoxHealth.

Some issues were grouped together because work related to one could positively impact the results of the other. As grouping took place, physician leaders discussed the importance of access to primary care as it related to every other priority. The discussion regarded the idea that improving access to primary care would improve all other conditions. The results of the discussion ended with five key priorities: 1) Obesity, 2) Access to primary care, 3) Mental Health, 4) Asthma, and 5) Tobacco use.

Obesity was the highest priority. Grouped with obesity was healthy diet and nutrition, physical inactivity, and wellness program. Concern for ingredients in foods purchased in restaurants and in grocery stores were also part of this discussion.

Access to primary care, was the second highest priority identified by votes. Primary care access is a major concern to CoxHealth and its improvement was identified as a top priority before the Community Health Needs Assessment was performed. Grouped with access to primary care were medically uninsured and underinsured and immunizations. The main issue with medically uninsured and underinsured is access to primary care. With improved access to primary care, immunization rates as well as most other problems would be addressed by the primary care physician.

Mental health is another issue related to access. Concerns about patients having to leave the area to find access to a mental health provider was discussed. Part of the problem with patient migrating out of the area is the stigma of mental health conditions, but other areas are lacking in mental health services, especially outpatient care.

Asthma was a top priority identified by the Community Health Needs Assessment and it did not fit well with other priorities. It received the tenth highest number of responses in the public health survey and is a concern in the 22-County service area.

Finally, tobacco use was discussed in the strategic planning meeting. The concern was related to the idea that it had fallen out of the top ten priorities identified by the public. Reasons for this could have been recent legislation that made smoking in public illegal in the city of Springfield. Public schools representatives, which primarily include nurses and a few administrators, did identify smoking as a problem with school children. The legality of the Springfield ordinance is being questioned currently, and if overturned tobacco use would most likely rise to the top as a concern by the public. CoxHealth leadership decided to maintain tobacco use as a top priority.

Further discussions and prioritization took place within the July 10, 2012 planning oversight committee meeting. CoxHealth Leaders who represent all areas of the CoxHealth enterprise were again presented the grouped and prioritized issues from the March 27 meeting. Although CoxHealth continues to address other priorities, additional discussion led to obesity being identified as a root of many other community problems and chosen as the single priority.

The next step in this process is the development of strategy that addresses healthy living, and more specifically obesity. The implementation plan would be part of the CoxHealth strategic planning process that would require action, feedback, and monitoring of results.

APPENDICES

- 1. COUNTY-BY-COUNTY DEMOGRAPHICS**
- 2. COUNTY-BY-COUNTY PAYER MIX**
- 3. COUNTY-BY-COUNTY UNEMPLOYMENT RATES**
- 4. EXISTING HEALTH CARE FACILITIES AND RESOURCES WITHIN THE COMMUNITY**
- 5. PUBLIC HEALTH SURVEY**

2012 CoxHealth Community Health Needs Assessment

APPENDIX 1. County-by-County Demographics

	Barry			Christian			Greene		
	2011	2016	% Change	2011	2016	% Change	2011	2016	% Change
Total Population	35,736	36,186	1.26%	80,461	91,469	13.68%	272,919	286,585	5.01%
White Alone	32,028	31,718	-0.97%	76,907	86,731	12.77%	251,133	261,783	4.24%
Black or African American Alone	165	223	35.15%	916	1,393	52.07%	7,767	8,901	14.60%
American Indian and Alaska Native Alone	314	321	2.23%	417	458	9.83%	1,844	1,958	6.18%
Asian Alone	382	515	34.82%	376	500	32.98%	3,484	3,840	10.22%
Hispanic or Latino	3,418	4,183	22.38%	2,076	2,874	38.44%	7,592	9,158	20.63%
Not Hispanic or Latino	32,318	32,003	-0.97%	78,385	88,595	13.03%	265,327	277,427	4.56%
Age 0 to 4	2,629	2,759	4.94%	5,893	6,775	14.97%	17,991	19,207	6.76%
Male	1,339	1,413	5.53%	3,058	3,470	13.47%	9,221	9,835	6.66%
Female	1,290	1,346	4.34%	2,835	3,305	16.58%	8,770	9,372	6.86%
Age 5 to 9	2,479	2,585	4.28%	5,807	6,461	11.26%	16,465	18,494	12.32%
Male	1,298	1,316	1.39%	3,023	3,352	10.88%	8,499	9,481	11.55%
Female	1,181	1,269	7.45%	2,784	3,109	11.67%	7,966	9,013	13.14%
Age 10 to 14	2,529	2,443	-3.40%	6,061	6,384	5.33%	15,428	17,010	10.25%
Male	1,313	1,279	-2.59%	3,119	3,324	6.57%	7,987	8,791	10.07%
Female	1,216	1,164	-4.28%	2,942	3,060	4.01%	7,441	8,219	10.46%
Age 15 to 17	1,602	1,524	-4.87%	3,571	4,191	17.36%	9,711	9,312	-4.11%
Male	802	779	-2.87%	1,798	2,148	19.47%	4,987	4,850	-2.75%
Female	800	745	-6.88%	1,773	2,043	15.23%	4,724	4,462	-5.55%
Age 18 to 20	1,331	1,369	2.85%	2,735	3,350	22.49%	16,677	15,712	-5.79%
Male	704	733	4.12%	1,399	1,723	23.16%	7,994	7,591	-5.04%
Female	627	636	1.44%	1,336	1,627	21.78%	8,683	8,121	-6.47%
Age 21 to 24	1,650	1,964	19.03%	3,680	4,782	29.95%	23,998	20,337	-15.26%
Male	841	987	17.36%	1,829	2,418	32.20%	12,030	10,293	-14.44%
Female	809	977	20.77%	1,851	2,364	27.71%	11,968	10,044	-16.08%
Age 25 to 34	3,795	3,913	3.11%	11,252	10,838	-3.68%	36,339	43,328	19.23%
Male	1,995	2,042	2.36%	5,498	5,350	-2.69%	17,786	21,415	20.40%
Female	1,800	1,871	3.94%	5,754	5,488	-4.62%	18,553	21,913	18.11%
Age 35 to 44	4,185	3,801	-9.18%	11,602	12,918	11.34%	30,976	30,978	0.01%
Male	2,091	1,922	-8.08%	5,694	6,291	10.48%	15,777	15,545	-1.47%
Female	2,094	1,879	-10.27%	5,908	6,627	12.17%	15,199	15,433	1.54%
Age 45 to 54	5,045	4,593	-8.96%	11,396	12,459	9.33%	35,438	33,883	-4.39%
Male	2,548	2,320	-8.95%	5,525	6,041	9.34%	17,449	16,905	-3.12%
Female	2,497	2,273	-8.97%	5,871	6,418	9.32%	17,989	16,978	-5.62%
Age 55 to 64	4,524	4,599	1.66%	8,774	10,850	23.66%	30,775	34,007	10.50%
Male	2,203	2,249	2.09%	4,229	5,206	23.10%	14,701	16,222	10.35%
Female	2,321	2,350	1.25%	4,545	5,644	24.18%	16,074	17,785	10.64%
Age 65 to 74	3,498	3,946	12.81%	5,836	7,374	26.35%	20,162	24,017	19.12%
Male	1,615	1,828	13.19%	2,744	3,458	26.02%	9,101	10,961	20.44%
Female	1,883	2,118	12.48%	3,092	3,916	26.65%	11,061	13,056	18.04%
Age 75 to 84	1,778	1,915	7.71%	2,913	3,801	30.48%	12,977	13,543	4.36%
Male	776	819	5.54%	1,253	1,624	29.61%	5,181	5,414	4.50%
Female	1,002	1,096	9.38%	1,660	2,177	31.14%	7,796	8,129	4.27%
Age 85 and over	691	775	12.16%	941	1,286	36.66%	5,982	6,757	12.96%
Male	228	262	14.91%	294	417	41.84%	1,806	2,074	14.84%
Female	463	513	10.80%	647	869	34.31%	4,176	4,683	12.14%
Age 17 and under (children ≤ 17)	9,239	9,311	0.78%	21,332	23,811	11.62%	59,595	64,023	7.43%
Male	4,752	4,787	0.74%	10,998	12,294	11.78%	30,694	32,957	7.37%
Female	4,487	4,524	0.82%	10,334	11,517	11.45%	28,901	31,066	7.49%
Age 18-64 (adults ≤ 64)	20,530	20,239	-1.42%	49,439	55,197	11.65%	174,203	178,245	2.32%
Male	10,382	10,253	-1.24%	24,174	27,029	11.81%	85,737	87,971	2.61%
Female	10,148	9,986	-1.60%	25,265	28,168	11.49%	88,466	90,274	2.04%
Age 65+ (seniors ≥ 65)	5,967	6,636	11.21%	9,690	12,461	28.60%	39,121	44,317	13.28%
Male	2,619	2,909	11.07%	4,291	5,499	28.15%	16,088	18,449	14.68%
Female	3,348	3,727	11.32%	5,399	6,962	28.95%	23,033	25,868	12.31%
Total Male	17,753	17,949	1.10%	39,463	44,822	13.58%	132,519	139,377	5.18%
Total Female	17,983	18,237	1.41%	40,998	46,647	13.78%	140,400	147,208	4.85%
Females age 15-44	6,130	6,108	-0.36%	16,622	18,149	9.19%	59,127	59,973	1.43%
Average Age	39.13	39.39	0.66%	36.65	37.56	2.48%	37.75	38.22	1.25%
Average Male Age	37.91	38.11	0.53%	35.65	36.44	2.22%	36.36	36.80	1.21%
Average Female Age	40.34	40.65	0.77%	37.62	38.64	2.71%	39.05	39.56	1.31%

APPENDIX 1. County-by-County Demographics

	Barry			Christian			Greene		
	2011	2016	% Change	2011	2016	% Change	2011	2016	% Change
Households	14,063	14,237	1.24%	30,920	35,142	13.65%	115,061	121,807	5.86%
Households by Household Income	--			--			--		
Less than \$15,000	2,474	2,435	-1.58%	3,171	3,483	9.84%	17,221	17,813	3.44%
\$15,000 to \$24, 999	2,366	2,328	-1.61%	3,596	3,938	9.51%	16,806	17,374	3.38%
\$25,000 to \$34,999	2,248	2,238	-0.44%	4,010	4,401	9.75%	16,372	17,075	4.29%
\$35,000 to \$49,999	2,744	2,758	0.51%	5,665	6,375	12.53%	21,119	22,186	5.05%
\$50,000 to \$74,999	2,478	2,565	3.51%	6,770	7,631	12.72%	20,913	22,345	6.85%
\$75,000 to \$99,999	892	958	7.40%	3,713	4,337	16.81%	10,194	11,047	8.37%
\$100,000 to \$124,999	383	427	11.49%	2,103	2,517	19.69%	5,342	5,931	11.03%
\$125,000 to \$149,999	159	183	15.09%	768	1,046	36.20%	2,562	2,936	14.60%
\$150,000 to \$199,999	119	132	10.92%	502	647	28.88%	1,908	2,172	13.84%
\$200,000 to \$499,999	171	178	4.09%	528	641	21.40%	2,174	2,404	10.58%
\$500,000 or more	29	35	20.69%	94	126	34.04%	450	524	16.44%
Estimated Average Household Income	\$44,930	\$46,228	2.89%	\$59,501	\$61,468	3.31%	\$53,967	\$55,225	2.33%
Estimated Per Capita Income	\$17,925	\$18,428	2.81%	\$23,024	\$23,757	3.18%	\$23,135	\$23,838	3.04%

COUNTY SUMMARIES

Barry County

- Diversity: 89.6% white alone and 9.6% Hispanic or Latino in 2011
- Children (0-17) are expected to increase by 0.8% between 2011 and 2016, and are 25.9% of the total population in 2011.
- Seniors (65+) are expected to increase by 11.2% between 2011 and 2016, and are 16.7% of the total population in 2011.
- Females of childbearing years (15-44) are expected to decrease by 0.4% between 2011 and 2016, and are 17.2% of the total population in 2011.
- 34.4% of household incomes are below or nearly below the poverty level in 2011*
- Average household income was \$44,930 in 2011.

Christian County

- Diversity: 95.6% white alone and 2.6% Hispanic or Latino in 2011
- Children (0-17) are expected to increase by 11.6% between 2011 and 2016, and are 26.5% of the total population in 2011.
- Seniors (65+) are expected to increase by 28.6% between 2011 and 2016, and are 12.0% of the total population in 2011.
- Females of childbearing years (15-44) are expected to increase by 9.2% between 2011 and 2016, and are 20.7% of the total population in 2011.
- 21.9% of household incomes are below or nearly below the poverty level in 2011*
- Average household income was \$59,501 in 2011.

Greene County

- Diversity: 92.0% white alone and 2.8% Hispanic or Latino in 2011
- Children (0-17) are expected to increase by 7.4% between 2011 and 2016, and are 21.8% of the total population in 2011.
- Seniors (65+) are expected to increase by 13.3% between 2011 and 2016, and are 14.3% of the total population in 2011.
- Females of childbearing years (15-44) are expected to increase by 1.4% between 2011 and 2016, and are 21.7% of the total population in 2011.
- 29.6% of household incomes are below or nearly below the poverty level in 2011*
- Average household income was \$53,967 in 2011.

* Poverty level amount used is \$22,350—(2011 HHS Poverty Guidelines for four-person family)

2012 CoxHealth Community Health Needs Assessment

APPENDIX 1. County-by-County Demographics

	Lawrence			Stone			Taney		
	2011	2016	% Change	2011	2016	% Change	2011	2016	% Change
Total Population	37,689	38,560	2.31%	31,475	32,424	3.02%	49,228	53,406	8.49%
White Alone	35,097	35,472	1.07%	30,376	31,130	2.48%	46,319	49,748	7.40%
Black or African American Alone	262	342	30.53%	206	296	43.69%	579	822	41.97%
American Indian and Alaska Native Alone	326	351	7.67%	233	258	10.73%	433	472	9.01%
Asian Alone	135	161	19.26%	72	81	12.50%	358	479	33.80%
Hispanic or Latino	2,293	2,804	22.29%	579	711	22.80%	2,054	2,642	28.63%
Not Hispanic or Latino	35,396	35,756	1.02%	30,896	31,713	2.64%	47,174	50,764	7.61%
Age 0 to 4	2,666	2,828	6.08%	1,537	1,652	7.48%	3,358	3,748	11.61%
Male	1,362	1,447	6.24%	796	846	6.28%	1,722	1,919	11.44%
Female	1,304	1,381	5.90%	741	806	8.77%	1,636	1,829	11.80%
Age 5 to 9	2,667	2,656	-0.41%	1,615	1,582	-2.04%	3,249	3,566	9.76%
Male	1,370	1,357	-0.95%	828	819	-1.09%	1,633	1,828	11.94%
Female	1,297	1,299	0.15%	787	763	-3.05%	1,616	1,738	7.55%
Age 10 to 14	2,795	2,669	-4.51%	1,812	1,671	-7.78%	3,027	3,485	15.13%
Male	1,480	1,374	-7.16%	922	859	-6.83%	1,525	1,755	15.08%
Female	1,315	1,295	-1.52%	890	812	-8.76%	1,502	1,730	15.18%
Age 15 to 17	1,760	1,742	-1.02%	1,179	1,171	-0.68%	1,865	2,045	9.65%
Male	954	942	-1.26%	606	601	-0.83%	987	1,044	5.78%
Female	806	800	-0.74%	573	570	-0.52%	878	1,001	14.01%
Age 18 to 20	1,392	1,508	8.33%	994	1,073	7.95%	2,050	2,183	6.49%
Male	757	826	9.11%	522	565	8.24%	969	1,025	5.78%
Female	635	682	7.40%	472	508	7.63%	1,081	1,158	7.12%
Age 21 to 24	1,741	2,118	21.65%	1,179	1,415	20.02%	2,566	2,810	9.51%
Male	881	1,082	22.81%	609	697	14.45%	1,326	1,479	11.54%
Female	860	1,036	20.47%	570	718	25.96%	1,240	1,331	7.34%
Age 25 to 34	4,159	4,256	2.33%	2,751	3,045	10.69%	5,835	6,081	4.22%
Male	2,112	2,205	4.40%	1,423	1,610	13.14%	2,869	3,027	5.51%
Female	2,047	2,051	0.20%	1,328	1,435	8.06%	2,966	3,054	2.97%
Age 35 to 44	4,664	4,297	-7.87%	3,267	2,921	-10.59%	5,633	5,867	4.15%
Male	2,331	2,136	-8.37%	1,581	1,423	-9.99%	2,780	2,880	3.60%
Female	2,333	2,161	-7.37%	1,686	1,498	-11.15%	2,853	2,987	4.70%
Age 45 to 54	5,245	4,976	-5.13%	4,511	3,919	-13.12%	6,440	6,343	-1.51%
Male	2,568	2,487	-3.15%	2,153	1,887	-12.35%	3,121	3,087	-1.09%
Female	2,677	2,489	-7.02%	2,358	2,032	-13.83%	3,319	3,256	-1.90%
Age 55 to 64	4,444	4,743	6.73%	5,319	5,651	6.24%	6,284	6,613	5.24%
Male	2,171	2,283	5.16%	2,501	2,631	5.20%	2,934	3,129	6.65%
Female	2,273	2,460	8.23%	2,818	3,020	7.17%	3,350	3,484	4.00%
Age 65 to 74	3,276	3,653	11.51%	4,716	5,447	15.50%	5,339	6,544	22.57%
Male	1,539	1,724	12.02%	2,251	2,593	15.19%	2,483	3,011	21.26%
Female	1,737	1,929	11.05%	2,465	2,854	15.78%	2,856	3,533	23.70%
Age 75 to 84	1,960	2,094	6.84%	1,982	2,128	7.37%	2,617	2,924	11.73%
Male	812	875	7.76%	986	1,045	5.98%	1,160	1,276	10.00%
Female	1,148	1,219	6.18%	996	1,083	8.73%	1,457	1,648	13.11%
Age 85 and over	920	1,020	10.87%	613	749	22.19%	965	1,197	24.04%
Male	273	311	13.92%	208	255	22.60%	375	441	17.60%
Female	647	709	9.58%	405	494	21.98%	590	756	28.14%
Age 17 and under (children ≤ 17)	9,888	9,895	0.07%	6,143	6,076	-1.09%	11,499	12,844	11.70%
Male	5,166	5,120	-0.89%	3,152	3,125	-0.86%	5,867	6,546	11.57%
Female	4,722	4,775	1.12%	2,991	2,951	-1.34%	5,632	6,298	11.83%
Age 18-64 (adults ≤ 64)	21,645	21,898	1.17%	18,021	18,024	0.02%	28,808	29,897	3.78%
Male	10,820	11,019	1.84%	8,789	8,813	0.27%	13,999	14,627	4.49%
Female	10,825	10,879	0.50%	9,232	9,211	-0.23%	14,809	15,270	3.11%
Age 65+ (seniors ≥ 65)	6,156	6,767	9.93%	7,311	8,324	13.86%	8,921	10,665	19.55%
Male	2,624	2,910	10.90%	3,445	3,893	13.00%	4,018	4,728	17.67%
Female	3,532	3,857	9.20%	3,866	4,431	14.61%	4,903	5,937	21.09%
Total Male	18,610	19,049	2.36%	15,386	15,831	2.89%	23,884	25,901	8.44%
Total Female	19,079	19,511	2.26%	16,089	16,593	3.13%	25,344	27,505	8.53%
Females age 15-44	6,681	6,730	0.73%	4,629	4,729	2.16%	9,018	9,531	5.69%
Average Age	38.84	39.23	1.00%	44.64	45.37	1.64%	39.93	40.22	0.73%
Average Male Age	37.28	37.68	1.07%	43.67	44.27	1.37%	38.89	39.01	0.31%
Average Female Age	40.37	40.75	0.94%	45.56	46.42	1.89%	40.90	41.36	1.12%

APPENDIX 1. County-by-County Demographics

	Lawrence			Stone			Taney		
	2011	2016	% Change	2011	2016	% Change	2011	2016	% Change
Households	14,435	14,749	2.18%	12,970	13,364	3.04%	20,150	21,890	8.64%
Households by Household Income	--			--			--		
Less than \$15,000	2,510	2,505	-0.20%	1,893	1,895	0.11%	3,011	3,179	5.58%
\$15,000 to \$24, 999	2,314	2,312	-0.09%	1,775	1,774	-0.06%	3,060	3,227	5.46%
\$25,000 to \$34,999	2,116	2,135	0.90%	1,892	1,891	-0.05%	3,455	3,679	6.48%
\$35,000 to \$49,999	2,815	2,850	1.24%	2,730	2,790	2.20%	3,879	4,202	8.33%
\$50,000 to \$74,999	2,672	2,772	3.74%	2,456	2,566	4.48%	3,513	3,888	10.67%
\$75,000 to \$99,999	1,064	1,127	5.92%	1,039	1,123	8.08%	1,650	1,838	11.39%
\$100,000 to \$124,999	502	547	8.96%	548	601	9.67%	763	897	17.56%
\$125,000 to \$149,999	166	200	20.48%	207	250	20.77%	316	389	23.10%
\$150,000 to \$199,999	108	121	12.04%	197	214	8.63%	223	266	19.28%
\$200,000 to \$499,999	147	155	5.44%	201	223	10.95%	232	268	15.52%
\$500,000 or more	21	25	19.05%	32	37	15.63%	48	57	18.75%
Estimated Average Household Income	\$45,566	\$46,664	2.41%	\$51,322	\$52,874	3.02%	\$48,338	\$49,662	2.74%
Estimated Per Capita Income	\$17,636	\$18,039	2.29%	\$21,231	\$21,873	3.02%	\$20,144	\$20,688	2.70%

COUNTY SUMMARIES

Lawrence County

- Diversity: 93.1% white alone and 6.1% Hispanic or Latino in 2011
- Children (0-17) are expected to increase by 0.1% between 2011 and 2016, and are 26.2% of the total population in 2011.
- Seniors (65+) are expected to increase by 9.9% between 2011 and 2016, and are 16.3% of the total population in 2011.
- Females of childbearing years (15-44) are expected to increase by 0.7% between 2011 and 2016, and are 17.7% of the total population in 2011.
- 33.4% of household incomes are below or nearly below the poverty level in 2011*
- Average household income was \$45,566 in 2011.

Stone County

- Diversity: 96.5% white alone and 1.8% Hispanic or Latino in 2011
- Children (0-17) are expected to decrease by 1.1% between 2011 and 2016, and are 19.5% of the total population in 2011.
- Seniors (65+) are expected to increase by 13.9% between 2011 and 2016, and are 23.2% of the total population in 2011.
- Females of childbearing years (15-44) are expected to increase by 2.2% between 2011 and 2016, and are 14.7% of the total population in 2011.
- 28.3% of household incomes are below or nearly below the poverty level in 2011*
- Average household income was \$51,322 in 2011.

Taney County

- Diversity: 94.1% white alone and 4.2% Hispanic or Latino in 2011
- Children (0-17) are expected to increase by 11.7% between 2011 and 2016, and are 23.4% of the total population in 2011.
- Seniors (65+) are expected to increase by 19.6% between 2011 and 2016, and are 18.1% of the total population in 2011.
- Females of childbearing years (15-44) are expected to increase by 5.7% between 2011 and 2016, and are 18.3% of the total population in 2011.
- 30.1% of household incomes are below or nearly below the poverty level in 2011*
- Average household income was \$48,338 in 2011.

* Poverty level amount used is \$22,350—(2011 HHS Poverty Guidelines for four-person family)

APPENDIX 1. County-by-County Demographics

	Webster			Wright			Baxter, AR		
	2011	2016	% Change	2011	2016	% Change	2011	2016	% Change
Total Population	37,001	39,318	6.26%	17,687	17,424	-1.49%	42,774	44,345	3.67%
White Alone	35,327	37,413	5.90%	17,019	16,660	-2.11%	41,423	42,753	3.21%
Black or African American Alone	498	562	12.85%	123	152	23.58%	314	450	43.31%
American Indian and Alaska Native Alone	251	271	7.97%	140	149	6.43%	243	260	7.00%
Asian Alone	138	166	20.29%	29	30	3.45%	143	145	1.40%
Hispanic or Latino	750	925	23.33%	297	361	21.55%	648	770	18.83%
Not Hispanic or Latino	36,251	38,393	5.91%	17,390	17,063	-1.88%	42,126	43,575	3.44%
Age 0 to 4	2,912	3,163	8.62%	1,339	1,379	2.99%	2,113	2,253	6.63%
Male	1,480	1,620	9.46%	684	706	3.22%	1,087	1,154	6.16%
Female	1,432	1,543	7.75%	655	673	2.75%	1,026	1,099	7.12%
Age 5 to 9	2,765	2,975	7.59%	1,285	1,280	-0.39%	2,120	2,187	3.16%
Male	1,408	1,512	7.39%	643	654	1.71%	1,096	1,123	2.46%
Female	1,357	1,463	7.81%	642	626	-2.49%	1,024	1,064	3.91%
Age 10 to 14	2,808	2,828	0.71%	1,236	1,231	-0.40%	2,166	2,205	1.80%
Male	1,448	1,440	-0.55%	633	617	-2.53%	1,135	1,141	0.53%
Female	1,360	1,388	2.06%	603	614	1.82%	1,031	1,064	3.20%
Age 15 to 17	1,687	1,750	3.73%	772	737	-4.53%	1,400	1,404	0.29%
Male	864	895	3.59%	392	373	-4.85%	737	750	1.76%
Female	823	855	3.89%	380	364	-4.21%	663	654	-1.36%
Age 18 to 20	1,414	1,580	11.74%	638	657	2.98%	1,200	1,241	3.42%
Male	755	861	14.04%	344	348	1.16%	591	626	5.92%
Female	659	719	9.10%	294	309	5.10%	609	615	0.99%
Age 21 to 24	1,712	2,216	29.44%	773	881	13.97%	1,576	1,778	12.82%
Male	866	1,140	31.64%	384	452	17.71%	813	917	12.79%
Female	846	1,076	27.19%	389	429	10.28%	763	861	12.84%
Age 25 to 34	4,627	4,608	-0.41%	1,863	1,862	-0.05%	3,797	4,077	7.37%
Male	2,425	2,412	-0.54%	949	960	1.16%	1,875	2,037	8.64%
Female	2,202	2,196	-0.27%	914	902	-1.31%	1,922	2,040	6.14%
Age 35 to 44	4,826	4,646	-3.73%	1,878	1,688	-10.12%	4,127	3,920	-5.02%
Male	2,464	2,387	-3.13%	921	818	-11.18%	2,020	1,947	-3.61%
Female	2,362	2,259	-4.36%	957	870	-9.09%	2,107	1,973	-6.36%
Age 45 to 54	5,286	5,171	-2.18%	2,470	2,089	-15.43%	5,512	4,890	-11.28%
Male	2,671	2,595	-2.85%	1,190	1,008	-15.29%	2,625	2,327	-11.35%
Female	2,615	2,576	-1.49%	1,280	1,081	-15.55%	2,887	2,563	-11.22%
Age 55 to 64	4,142	4,737	14.37%	2,183	2,220	1.69%	6,814	6,996	2.67%
Male	1,997	2,282	14.27%	1,051	1,071	1.90%	3,110	3,186	2.44%
Female	2,145	2,455	14.45%	1,132	1,149	1.50%	3,704	3,810	2.86%
Age 65 to 74	2,781	3,247	16.76%	1,776	1,903	7.15%	6,615	7,665	15.87%
Male	1,338	1,542	15.25%	826	885	7.14%	3,089	3,572	15.64%
Female	1,443	1,705	18.16%	950	1,018	7.16%	3,526	4,093	16.08%
Age 75 to 84	1,489	1,746	17.26%	1,048	1,040	-0.76%	3,810	4,045	6.17%
Male	622	747	20.10%	441	437	-0.91%	1,835	1,942	5.83%
Female	867	999	15.22%	607	603	-0.66%	1,975	2,103	6.48%
Age 85 and over	552	651	17.93%	426	457	7.28%	1,524	1,684	10.50%
Male	179	216	20.67%	132	142	7.58%	587	645	9.88%
Female	373	435	16.62%	294	315	7.14%	937	1,039	10.89%
Age 17 and under (children ≤ 17)	10,172	10,716	5.35%	4,632	4,627	-0.11%	7,799	8,049	3.21%
Male	5,200	5,467	5.13%	2,352	2,350	-0.09%	4,055	4,168	2.79%
Female	4,972	5,249	5.57%	2,280	2,277	-0.13%	3,744	3,881	3.66%
Age 18 -64 (adults ≤ 64)	22,007	22,958	4.32%	9,805	9,397	-4.16%	23,026	22,902	-0.54%
Male	11,178	11,677	4.46%	4,839	4,657	-3.76%	11,034	11,040	0.05%
Female	10,829	11,281	4.17%	4,966	4,740	-4.55%	11,992	11,862	-1.08%
Age 65+ (seniors ≥ 65)	4,822	5,644	17.05%	3,250	3,400	4.62%	11,949	13,394	12.09%
Male	2,139	2,505	17.11%	1,399	1,464	4.65%	5,511	6,159	11.76%
Female	2,683	3,139	17.00%	1,851	1,936	4.59%	6,438	7,235	12.38%
Total Male	18,517	19,649	6.11%	8,590	8,471	-1.39%	20,600	21,367	3.72%
Total Female	18,484	19,669	6.41%	9,097	8,953	-1.58%	22,174	22,978	3.63%
Females age 15-44	6,892	7,105	3.09%	2,934	2,874	-2.04%	6,064	6,143	1.30%
Average Age	36.84	37.28	1.19%	39.71	39.67	-0.10%	46.70	47.16	0.99%
Average Male Age	35.86	36.20	0.95%	38.28	38.16	-0.31%	45.51	45.87	0.79%
Average Female Age	37.83	38.36	1.40%	41.06	41.10	0.10%	47.80	48.35	1.15%

APPENDIX 1. County-by-County Demographics

	Webster			Wright			Baxter, AR		
	2011	2016	% Change	2011	2016	% Change	2011	2016	% Change
Households	13,343	14,342	7.49%	7,038	6,953	-1.21%	19,408	20,247	4.32%
Households by Household Income	--			--			--		
Less than \$15,000	1,958	2,050	4.70%	1,895	1,842	-2.80%	3,380	3,442	1.83%
\$15,000 to \$24, 999	1,885	1,957	3.82%	1,304	1,276	-2.15%	3,418	3,490	2.11%
\$25,000 to \$34,999	2,183	2,285	4.67%	1,090	1,070	-1.83%	3,356	3,447	2.71%
\$35,000 to \$49,999	2,501	2,682	7.24%	1,268	1,259	-0.71%	3,771	3,941	4.51%
\$50,000 to \$74,999	2,696	2,921	8.35%	853	857	0.47%	3,133	3,334	6.42%
\$75,000 to \$99,999	1,100	1,242	12.91%	291	300	3.09%	1,097	1,203	9.66%
\$100,000 to \$124,999	513	597	16.37%	136	141	3.68%	572	625	9.27%
\$125,000 to \$149,999	257	301	17.12%	67	71	5.97%	253	290	14.62%
\$150,000 to \$199,999	120	155	29.17%	82	82	0.00%	181	203	12.15%
\$200,000 to \$499,999	113	132	16.81%	48	50	4.17%	214	233	8.88%
\$500,000 or more	17	20	17.65%	4	5	25.00%	33	39	18.18%
Estimated Average Household Income	\$48,187	\$49,582	2.89%	\$36,824	\$37,479	1.78%	\$44,042	\$45,044	2.28%
Estimated Per Capita Income	\$17,647	\$18,338	3.92%	\$15,043	\$15,352	2.05%	\$20,137	\$20,715	2.87%

COUNTY SUMMARIES

Webster County

- Diversity: 95.5% white alone and 2.0% Hispanic or Latino in 2011
- Children (0-17) are expected to increase by 5.4% between 2011 and 2016, and are 27.5% of the total population in 2011.
- Seniors (65+) are expected to increase by 17.1% between 2011 and 2016, and are 13.0% of the total population in 2011.
- Females of childbearing years (15-44) are expected to increase by 3.1% between 2011 and 2016, and are 18.6% of the total population in 2011.
- 28.8% of household incomes are below or nearly below the poverty level in 2011*
- Average household income was \$48,187 in 2011.

Wright County

- Diversity: 96.2% white alone and 1.7% Hispanic or Latino in 2011
- Children (0-17) are expected to decrease by 0.1% between 2011 and 2016, and are 26.2% of the total population in 2011.
- Seniors (65+) are expected to increase by 4.6% between 2011 and 2016, and are 18.4% of the total population in 2011.
- Females of childbearing years (15-44) are expected to decrease by 1.4% between 2011 and 2016, and are 16.6% of the total population in 2011.
- 45.5% of household incomes are below or nearly below the poverty level in 2011*
- Average household income was \$36,824 in 2011.

Baxter County, AR

- Diversity: 96.8% white alone and 1.5% Hispanic or Latino in 2011
- Children (0-17) are expected to increase by 3.2% between 2011 and 2016, and are 18.2% of the total population in 2011.
- Seniors (65+) are expected to increase by 12.1% between 2011 and 2016, and are 27.9% of the total population in 2011.
- Females of childbearing years (15-44) are expected to increase by 1.3% between 2011 and 2016, and are 14.2% of the total population in 2011.
- 35.0% of household incomes are below or nearly below the poverty level in 2011*
- Average household income was \$44,042 in 2011.

* Poverty level amount used is \$22,350—(2011 HHS Poverty Guidelines for four-person family)

APPENDIX 1. County-by-County Demographics

	Boone, AR			Cedar			Dade		
	2011	2016	% Change	2011	2016	% Change	2011	2016	% Change
Total Population	37,236	38,308	2.88%	13,346	13,063	-2.12%	7,148	6,765	-5.36%
White Alone	35,748	36,508	2.13%	12,703	12,354	-2.75%	6,872	6,465	-5.92%
Black or African American Alone	365	522	43.01%	76	88	15.79%	52	63	21.15%
American Indian and Alaska Native Alone	313	344	9.90%	107	113	5.61%	59	60	1.69%
Asian Alone	145	163	12.41%	89	100	12.36%	14	14	0.00%
Hispanic or Latino	607	720	18.62%	237	269	13.50%	123	142	15.45%
Not Hispanic or Latino	36,629	37,588	2.62%	13,109	12,794	-2.40%	7,025	6,623	-5.72%
Age 0 to 4	2,295	2,442	6.41%	829	840	1.33%	423	418	-1.18%
Male	1,161	1,253	7.92%	423	430	1.65%	228	214	-6.14%
Female	1,134	1,189	4.85%	406	410	0.99%	195	204	4.62%
Age 5 to 9	2,327	2,333	0.26%	780	799	2.44%	410	396	-3.41%
Male	1,182	1,175	-0.59%	418	407	-2.63%	232	213	-8.19%
Female	1,145	1,158	1.14%	362	392	8.29%	178	183	2.81%
Age 10 to 14	2,449	2,377	-2.94%	831	752	-9.51%	442	383	-13.35%
Male	1,264	1,215	-3.88%	437	403	-7.78%	229	217	-5.24%
Female	1,185	1,162	-1.94%	394	349	-11.42%	213	166	-22.07%
Age 15 to 17	1,489	1,498	0.60%	680	606	-10.88%	286	250	-12.59%
Male	763	772	1.18%	391	362	-7.42%	145	127	-12.41%
Female	726	726	0.00%	289	244	-15.57%	141	123	-12.77%
Age 18 to 20	1,265	1,392	10.04%	487	486	-0.21%	232	229	-1.29%
Male	662	743	12.24%	277	281	1.44%	125	118	-5.60%
Female	603	649	7.63%	210	205	-2.38%	107	111	3.74%
Age 21 to 24	1,663	1,883	13.23%	550	652	18.55%	284	342	20.42%
Male	813	932	14.64%	273	324	18.68%	156	182	16.67%
Female	850	951	11.88%	277	328	18.41%	128	160	25.00%
Age 25 to 34	4,278	4,304	0.61%	1,256	1,315	4.70%	627	613	-2.23%
Male	2,138	2,149	0.51%	649	687	5.86%	328	330	0.61%
Female	2,140	2,155	0.70%	607	628	3.46%	299	283	-5.35%
Age 35 to 44	4,488	4,284	-4.55%	1,384	1,202	-13.15%	772	641	-16.97%
Male	2,236	2,125	-4.96%	673	592	-12.04%	384	327	-14.84%
Female	2,252	2,159	-4.13%	711	610	-14.21%	388	314	-19.07%
Age 45 to 54	5,063	4,886	-3.50%	1,768	1,511	-14.54%	1,086	854	-21.36%
Male	2,446	2,412	-1.39%	851	715	-15.98%	523	409	-21.80%
Female	2,617	2,474	-5.46%	917	796	-13.20%	563	445	-20.96%
Age 55 to 64	4,758	4,848	1.89%	1,806	1,733	-4.04%	1,055	1,045	-0.95%
Male	2,257	2,293	1.60%	843	813	-3.56%	536	522	-2.61%
Female	2,501	2,555	2.16%	963	920	-4.47%	519	523	0.77%
Age 65 to 74	3,990	4,661	16.82%	1,638	1,808	10.38%	790	861	8.99%
Male	1,875	2,172	15.84%	781	859	9.99%	376	410	9.04%
Female	2,115	2,489	17.68%	857	949	10.74%	414	451	8.94%
Age 75 to 84	2,178	2,291	5.19%	969	965	-0.41%	513	497	-3.12%
Male	945	993	5.08%	421	418	-0.71%	237	229	-3.38%
Female	1,233	1,298	5.27%	548	547	-0.18%	276	268	-2.90%
Age 85 and over	993	1,109	11.68%	368	394	7.07%	228	236	3.51%
Male	329	372	13.07%	97	108	11.34%	63	67	6.35%
Female	664	737	10.99%	271	286	5.54%	165	169	2.42%
Age 17 and under (children ≤ 17)	8,560	8,650	1.05%	3,120	2,997	-3.94%	1,561	1,447	-7.30%
Male	4,370	4,415	1.03%	1,669	1,602	-4.01%	834	771	-7.55%
Female	4,190	4,235	1.07%	1,451	1,395	-3.86%	727	676	-7.02%
Age 18-64 (adults ≤ 64)	21,515	21,597	0.38%	7,251	6,899	-4.85%	4,056	3,724	-8.19%
Male	10,552	10,654	0.97%	3,566	3,412	-4.32%	2,052	1,888	-7.99%
Female	10,963	10,943	-0.18%	3,685	3,487	-5.37%	2,004	1,836	-8.38%
Age 65+ (seniors ≥ 65)	7,161	8,061	12.57%	2,975	3,167	6.45%	1,531	1,594	4.11%
Male	3,149	3,537	12.32%	1,299	1,385	6.62%	676	706	4.44%
Female	4,012	4,524	12.76%	1,676	1,782	6.32%	855	888	3.86%
Total Male	18,071	18,606	2.96%	6,534	6,399	-2.07%	3,562	3,365	-5.53%
Total Female	19,165	19,702	2.80%	6,812	6,664	-2.17%	3,586	3,400	-5.19%
Females age 15-44	6,571	6,640	1.05%	2,094	2,015	-3.77%	1,063	991	-6.77%
Average Age	41.03	41.53	1.22%	42.42	42.68	0.61%	43.23	43.69	1.06%
Average Male Age	39.73	40.16	1.08%	40.40	40.60	0.50%	41.46	41.90	1.06%
Average Female Age	42.25	42.82	1.35%	44.36	44.68	0.72%	44.98	45.45	1.04%

APPENDIX 1. County-by-County Demographics

	Boone, AR			Cedar			Dade		
	2011	2016	% Change	2011	2016	% Change	2011	2016	% Change
Households	15,584	16,159	3.69%	5,533	5,420	-2.04%	2,881	2,724	-5.45%
Households by Household Income			--			--			--
Less than \$15,000	3,093	3,140	1.52%	1,253	1,199	-4.31%	537	497	-7.45%
\$15,000 to \$24, 999	2,410	2,446	1.49%	834	799	-4.20%	491	455	-7.33%
\$25,000 to \$34,999	2,327	2,368	1.76%	957	912	-4.70%	475	441	-7.16%
\$35,000 to \$49,999	3,058	3,173	3.76%	1,010	996	-1.39%	612	580	-5.23%
\$50,000 to \$74,999	2,599	2,730	5.04%	865	869	0.46%	483	464	-3.93%
\$75,000 to \$99,999	1,024	1,109	8.30%	365	369	1.10%	161	161	0.00%
\$100,000 to \$124,999	448	501	11.83%	115	133	15.65%	60	63	5.00%
\$125,000 to \$149,999	184	213	15.76%	56	60	7.14%	17	19	11.76%
\$150,000 to \$199,999	176	191	8.52%	35	38	8.57%	18	18	0.00%
\$200,000 to \$499,999	224	240	7.14%	37	38	2.70%	24	23	-4.17%
\$500,000 or more	41	48	17.07%	6	7	16.67%	3	3	0.00%
Estimated Average Household Income	\$45,825	\$46,917	2.38%	\$40,288	\$41,413	2.79%	\$41,142	\$41,988	2.06%
Estimated Per Capita Income	\$19,276	\$19,886	3.16%	\$16,879	\$17,364	2.87%	\$16,844	\$17,181	2.00%

COUNTY SUMMARIES

Boone County, AR

- Diversity: 96.0% white alone and 1.6% Hispanic or Latino in 2011
- Children (0-17) are expected to increase by 1.1% between 2011 and 2016, and are 23.0% of the total population in 2011.
- Seniors (65+) are expected to increase by 12.6% between 2011 and 2016, and are 19.2% of the total population in 2011.
- Females of childbearing years (15-44) are expected to increase by 1.1% between 2011 and 2016, and are 17.6% of the total population in 2011.
- 33.5% of household incomes are below or nearly below the poverty level in 2011*
- Average household income was \$45,825 in 2011.

Cedar County

- Diversity: 95.2% white alone and 1.8% Hispanic or Latino in 2011
- Children (0-17) are expected to decrease by 3.9% between 2011 and 2016, and are 23.4% of the total population in 2011.
- Seniors (65+) are expected to increase by 6.5% between 2011 and 2016, and are 22.3% of the total population in 2011.
- Females of childbearing years (15-44) are expected to decrease by 3.8% between 2011 and 2016, and are 15.7% of the total population in 2011.
- 37.7% of household incomes are below or nearly below the poverty level in 2011*
- Average household income was \$40,288 in 2011.

Dade County

- Diversity: 96.1% white alone and 1.7% Hispanic or Latino in 2011
- Children (0-17) are expected to decrease by 7.3% between 2011 and 2016, and are 21.8% of the total population in 2011.
- Seniors (65+) are expected to increase by 4.1% between 2011 and 2016, and are 21.4% of the total population in 2011.
- Females of childbearing years (15-44) are expected to decrease by 6.8% between 2011 and 2016, and are 14.9% of the total population in 2011.
- 35.7% of household incomes are below or nearly below the poverty level in 2011*
- Average household income was \$41,142 in 2011.

* Poverty level amount used is \$22,350—(2011 HHS Poverty Guidelines for four-person family)

2012 CoxHealth Community Health Needs Assessment

APPENDIX 1. County-by-County Demographics

	Dallas			Douglas			Hickory		
	2011	2016	% Change	2011	2016	% Change	2011	2016	% Change
Total Population	16,581	16,835	1.53%	13,630	13,850	1.61%	8,798	8,671	-1.44%
White Alone	15,900	16,027	0.80%	13,078	13,233	1.19%	8,534	8,392	-1.66%
Black or African American Alone	113	157	38.94%	50	68	36.00%	7	7	0.00%
American Indian and Alaska Native Alone	136	143	5.15%	134	139	3.73%	67	70	4.48%
Asian Alone	64	90	40.63%	28	27	-3.57%	10	10	0.00%
Hispanic or Latino	323	403	24.77%	172	199	15.70%	100	113	13.00%
Not Hispanic or Latino	16,258	16,432	1.07%	13,458	13,651	1.43%	8,698	8,558	-1.61%
Age 0 to 4	1,164	1,222	4.98%	827	874	5.68%	384	390	1.56%
Male	601	626	4.16%	433	447	3.23%	185	200	8.11%
Female	563	596	5.86%	394	427	8.38%	199	190	-4.52%
Age 5 to 9	1,104	1,154	4.53%	773	831	7.50%	380	380	0.00%
Male	577	596	3.29%	412	435	5.58%	184	183	-0.54%
Female	527	558	5.88%	361	396	9.70%	196	197	0.51%
Age 10 to 14	1,127	1,094	-2.93%	887	778	-12.29%	405	377	-6.91%
Male	580	572	-1.38%	468	414	-11.54%	206	182	-11.65%
Female	547	522	-4.57%	419	364	-13.13%	199	195	-2.01%
Age 15 to 17	771	721	-6.49%	606	557	-8.09%	314	256	-18.47%
Male	401	371	-7.48%	305	280	-8.20%	165	130	-21.21%
Female	370	350	-5.41%	301	277	-7.97%	149	126	-15.44%
Age 18 to 20	583	598	2.57%	493	504	2.23%	271	268	-1.11%
Male	299	304	1.67%	272	281	3.31%	145	139	-4.14%
Female	284	294	3.52%	221	223	0.90%	126	129	2.38%
Age 21 to 24	808	884	9.41%	620	719	15.97%	299	329	10.03%
Male	421	466	10.69%	315	376	19.37%	159	173	8.81%
Female	387	418	8.01%	305	343	12.46%	140	156	11.43%
Age 25 to 34	1,838	1,942	5.66%	1,448	1,558	7.60%	655	756	15.42%
Male	951	1,005	5.68%	755	803	6.36%	354	412	16.38%
Female	887	937	5.64%	693	755	8.95%	301	344	14.29%
Age 35 to 44	1,910	1,773	-7.17%	1,474	1,386	-5.97%	747	618	-17.27%
Male	949	895	-5.69%	724	706	-2.49%	350	299	-14.57%
Female	961	878	-8.64%	750	680	-9.33%	397	319	-19.65%
Age 45 to 54	2,472	2,140	-13.43%	1,946	1,701	-12.59%	1,149	951	-17.23%
Male	1,235	1,061	-14.09%	959	828	-13.66%	538	445	-17.29%
Female	1,237	1,079	-12.77%	987	873	-11.55%	611	506	-17.18%
Age 55 to 64	2,173	2,331	7.27%	1,975	2,028	2.68%	1,645	1,616	-1.76%
Male	1,041	1,124	7.97%	951	975	2.52%	776	758	-2.32%
Female	1,132	1,207	6.63%	1,024	1,053	2.83%	869	858	-1.27%
Age 65 to 74	1,542	1,772	14.92%	1,495	1,750	17.06%	1,455	1,602	10.10%
Male	754	861	14.19%	730	850	16.44%	680	747	9.85%
Female	788	911	15.61%	765	900	17.65%	775	855	10.32%
Age 75 to 84	813	875	7.63%	785	827	5.35%	823	836	1.58%
Male	349	363	4.01%	341	354	3.81%	388	393	1.29%
Female	464	512	10.34%	444	473	6.53%	435	443	1.84%
Age 85 and over	276	329	19.20%	301	337	11.96%	271	292	7.75%
Male	96	118	22.92%	92	108	17.39%	106	113	6.60%
Female	180	211	17.22%	209	229	9.57%	165	179	8.48%
Age 17 and under (children ≤ 17)	4,166	4,191	0.60%	3,093	3,040	-1.71%	1,483	1,403	-5.39%
Male	2,159	2,165	0.28%	1,618	1,576	-2.60%	740	695	-6.08%
Female	2,007	2,026	0.95%	1,475	1,464	-0.75%	743	708	-4.71%
Age 18 -64 (adults ≤ 64)	9,784	9,668	-1.19%	7,956	7,896	-0.75%	4,766	4,538	-4.78%
Male	4,896	4,855	-0.84%	3,976	3,969	-0.18%	2,322	2,226	-4.13%
Female	4,888	4,813	-1.53%	3,980	3,927	-1.33%	2,444	2,312	-5.40%
Age 65+ (seniors ≥ 65)	2,631	2,976	13.11%	2,581	2,914	12.90%	2,549	2,730	7.10%
Male	1,199	1,342	11.93%	1,163	1,312	12.81%	1,174	1,253	6.73%
Female	1,432	1,634	14.11%	1,418	1,602	12.98%	1,375	1,477	7.42%
Total Male	8,254	8,362	1.31%	6,757	6,857	1.48%	4,236	4,174	-1.46%
Total Female	8,327	8,473	1.75%	6,873	6,993	1.75%	4,562	4,497	-1.42%
Females age 15-44	2,889	2,877	-0.42%	2,270	2,278	0.35%	1,113	1,074	-3.50%
Average Age	39.21	39.65	1.12%	41.39	41.91	1.26%	48.14	48.73	1.23%
Average Male Age	38.13	38.45	0.84%	39.99	40.48	1.23%	47.14	47.64	1.06%
Average Female Age	40.28	40.82	1.34%	42.76	43.31	1.29%	49.07	49.75	1.39%

APPENDIX 1. County-by-County Demographics

	Dallas			Douglas			Hickory		
	2011	2016	% Change	2011	2016	% Change	2011	2016	% Change
Households	6,358	6,470	1.76%	5,517	5,643	2.28%	3,859	3,801	-1.50%
Households by Household Income			--			--			--
Less than \$15,000	1,333	1,321	-0.90%	1,285	1,286	0.08%	879	850	-3.30%
\$15,000 to \$24, 999	1,077	1,071	-0.56%	921	922	0.11%	753	725	-3.72%
\$25,000 to \$34,999	970	962	-0.82%	1,049	1,041	-0.76%	798	771	-3.38%
\$35,000 to \$49,999	1,046	1,071	2.39%	965	1,013	4.97%	614	625	1.79%
\$50,000 to \$74,999	1,144	1,184	3.50%	814	851	4.55%	512	515	0.59%
\$75,000 to \$99,999	434	460	5.99%	218	240	10.09%	155	160	3.23%
\$100,000 to \$124,999	150	176	17.33%	113	123	8.85%	79	82	3.80%
\$125,000 to \$149,999	47	58	23.40%	41	49	19.51%	35	37	5.71%
\$150,000 to \$199,999	70	72	2.86%	40	43	7.50%	16	18	12.50%
\$200,000 to \$499,999	73	80	9.59%	58	60	3.45%	16	16	0.00%
\$500,000 or more	14	15	7.14%	13	15	15.38%	2	2	0.00%
Estimated Average Household Income	\$43,640	\$44,865	2.81%	\$39,448	\$40,432	2.49%	\$35,850	\$36,527	1.89%
Estimated Per Capita Income	\$16,872	\$17,379	3.00%	\$16,106	\$16,610	3.13%	\$15,806	\$16,095	1.83%

COUNTY SUMMARIES

Dallas County

- Diversity: 95.9% white alone and 1.9% Hispanic or Latino in 2011
- Children (0-17) are expected to increase by 0.6% between 2011 and 2016, and are 25.1% of the total population in 2011.
- Seniors (65+) are expected to increase by 13.1% between 2011 and 2016, and are 15.9% of the total population in 2011.
- Females of childbearing years (15-44) are expected to decrease by 0.4% between 2011 and 2016, and are 17.4% of the total population in 2011.
- 37.9% of household incomes are below or nearly below the poverty level in 2011*
- Average household income was \$43,640 in 2011.

Douglas County

- Diversity: 96.0% white alone and 1.3% Hispanic or Latino in 2011
- Children (0-17) are expected to decrease by 1.7% between 2011 and 2016, and are 22.7% of the total population in 2011.
- Seniors (65+) are expected to increase by 12.9% between 2011 and 2016, and are 18.9% of the total population in 2011.
- Females of childbearing years (15-44) are expected to increase by 0.4% between 2011 and 2016, and are 16.7% of the total population in 2011.
- 40.0% of household incomes are below or nearly below the poverty level in 2011*
- Average household income was \$39,448 in 2011.

Hickory County

- Diversity: 97.0% white alone and 1.1% Hispanic or Latino in 2011
- Children (0-17) are expected to decrease by 5.4% between 2011 and 2016, and are 16.9% of the total population in 2011.
- Seniors (65+) are expected to increase by 7.1% between 2011 and 2016, and are 29.0% of the total population in 2011.
- Females of childbearing years (15-44) are expected to decrease by 3.5% between 2011 and 2016, and are 12.7% of the total population in 2011.
- 42.3% of household incomes are below or nearly below the poverty level in 2011*
- Average household income was \$35,850 in 2011.

* Poverty level amount used is \$22,350—(2011 HHS Poverty Guidelines for four-person family)

2012 CoxHealth Community Health Needs Assessment

APPENDIX 1. County-by-County Demographics

	Howell			Jasper			Laclede		
	2011	2016	% Change	2011	2016	% Change	2011	2016	% Change
Total Population	38,968	39,632	1.70%	119,888	126,427	5.45%	35,556	36,671	3.14%
White Alone	37,255	37,749	1.33%	107,923	112,381	4.13%	34,102	34,988	2.60%
Black or African American Alone	231	286	23.81%	2,072	2,322	12.07%	345	444	28.70%
American Indian and Alaska Native Alone	410	430	4.88%	1,470	1,495	1.70%	185	196	5.95%
Asian Alone	148	153	3.38%	1,272	1,546	21.54%	150	175	16.67%
Hispanic or Latino	662	758	14.50%	7,903	10,089	27.66%	641	754	17.63%
Not Hispanic or Latino	38,306	38,874	1.48%	111,985	116,338	3.89%	34,915	35,917	2.87%
Age 0 to 4	2,757	2,900	5.19%	9,621	10,324	7.31%	2,557	2,737	7.04%
Male	1,404	1,484	5.70%	4,907	5,288	7.76%	1,322	1,402	6.05%
Female	1,353	1,416	4.66%	4,714	5,036	6.83%	1,235	1,335	8.10%
Age 5 to 9	2,640	2,736	3.64%	8,874	9,761	10.00%	2,392	2,568	7.36%
Male	1,329	1,393	4.82%	4,503	4,976	10.50%	1,228	1,327	8.06%
Female	1,311	1,343	2.44%	4,371	4,785	9.47%	1,164	1,241	6.62%
Age 10 to 14	2,608	2,621	0.50%	8,033	9,047	12.62%	2,413	2,406	-0.29%
Male	1,356	1,321	-2.58%	4,121	4,594	11.48%	1,220	1,235	1.23%
Female	1,252	1,300	3.83%	3,912	4,453	13.83%	1,193	1,171	-1.84%
Age 15 to 17	1,614	1,596	-1.12%	4,581	4,757	3.84%	1,555	1,469	-5.53%
Male	860	847	-1.51%	2,420	2,484	2.64%	791	744	-5.94%
Female	754	749	-0.66%	2,161	2,273	5.18%	764	725	-5.10%
Age 18 to 20	1,448	1,492	3.04%	5,290	5,428	2.61%	1,331	1,377	3.46%
Male	755	774	2.52%	2,637	2,725	3.34%	693	694	0.14%
Female	693	718	3.61%	2,653	2,703	1.88%	638	683	7.05%
Age 21 to 24	1,788	1,945	8.78%	6,333	6,239	-1.48%	1,661	1,927	16.01%
Male	928	1,015	9.38%	3,218	3,279	1.90%	874	992	13.50%
Female	860	930	8.14%	3,115	2,960	-4.98%	787	935	18.81%
Age 25 to 34	4,436	4,586	3.38%	17,798	17,067	-4.11%	4,256	4,283	0.63%
Male	2,164	2,322	7.30%	8,726	8,413	-3.59%	2,133	2,206	3.42%
Female	2,272	2,264	-0.35%	9,072	8,654	-4.61%	2,123	2,077	-2.17%
Age 35 to 44	4,439	4,229	-4.73%	14,948	16,498	10.37%	4,273	4,200	-1.71%
Male	2,146	2,023	-5.73%	7,487	8,167	9.08%	2,161	2,090	-3.29%
Female	2,293	2,206	-3.79%	7,461	8,331	11.66%	2,112	2,110	-0.09%
Age 45 to 54	5,196	4,727	-9.03%	15,390	14,972	-2.72%	5,009	4,637	-7.43%
Male	2,508	2,293	-8.57%	7,572	7,474	-1.29%	2,464	2,314	-6.09%
Female	2,688	2,434	-9.45%	7,818	7,498	-4.09%	2,545	2,323	-8.72%
Age 55 to 64	4,828	4,934	2.20%	12,808	14,311	11.73%	4,237	4,565	7.74%
Male	2,315	2,341	1.12%	6,124	6,808	11.17%	2,032	2,203	8.42%
Female	2,513	2,593	3.18%	6,684	7,503	12.25%	2,205	2,362	7.12%
Age 65 to 74	3,901	4,369	12.00%	8,457	9,773	15.56%	3,346	3,735	11.63%
Male	1,810	2,037	12.54%	3,822	4,477	17.14%	1,585	1,754	10.66%
Female	2,091	2,332	11.53%	4,635	5,296	14.26%	1,761	1,981	12.49%
Age 75 to 84	2,309	2,377	2.94%	5,371	5,593	4.13%	1,855	1,963	5.82%
Male	992	1,018	2.62%	2,137	2,232	4.45%	791	827	4.55%
Female	1,317	1,359	3.19%	3,234	3,361	3.93%	1,064	1,136	6.77%
Age 85 and over	1,004	1,120	11.55%	2,384	2,657	11.45%	671	804	19.82%
Male	285	331	16.14%	722	816	13.02%	224	275	22.77%
Female	719	789	9.74%	1,662	1,841	10.77%	447	529	18.34%
Age 17 and under (children ≤ 17)	9,619	9,853	2.43%	31,109	33,889	8.94%	8,917	9,180	2.95%
Male	4,949	5,045	1.94%	15,951	17,342	8.72%	4,561	4,708	3.22%
Female	4,670	4,808	2.96%	15,158	16,547	9.16%	4,356	4,472	2.66%
Age 18 -64 (adults ≤ 64)	22,135	21,913	-1.00%	72,567	74,515	2.68%	20,767	20,989	1.07%
Male	10,816	10,768	-0.44%	35,764	36,866	3.08%	10,357	10,499	1.37%
Female	11,319	11,145	-1.54%	36,803	37,649	2.30%	10,410	10,490	0.77%
Age 65+ (seniors ≥ 65)	7,214	7,866	9.04%	16,212	18,023	11.17%	5,872	6,502	10.73%
Male	3,087	3,386	9.69%	6,681	7,525	12.63%	2,600	2,856	9.85%
Female	4,127	4,480	8.55%	9,531	10,498	10.15%	3,272	3,646	11.43%
Total Male	18,852	19,199	1.84%	58,396	61,733	5.71%	17,518	18,063	3.11%
Total Female	20,116	20,433	1.58%	61,492	64,694	5.21%	18,038	18,608	3.16%
Females age 15-44	6,872	6,867	-0.07%	24,462	24,921	1.88%	6,424	6,530	1.65%
Average Age	40.04	40.24	0.50%	36.79	37.03	0.65%	39.05	39.35	0.77%
Average Male Age	38.50	38.63	0.34%	35.42	35.63	0.59%	37.85	38.08	0.61%
Average Female Age	41.48	41.76	0.68%	38.09	38.36	0.71%	40.21	40.58	0.92%

APPENDIX 1. County-by-County Demographics

	Howell			Jasper			Laclede		
	2011	2016	% Change	2011	2016	% Change	2011	2016	% Change
Households	15,621	15,956	2.14%	46,973	48,683	3.64%	14,099	14,603	3.57%
Households by Household Income			--			--			--
Less than \$15,000	3,311	3,276	-1.06%	8,176	8,288	1.37%	2,668	2,701	1.24%
\$15,000 to \$24, 999	2,947	2,940	-0.24%	7,253	7,366	1.56%	2,248	2,277	1.29%
\$25,000 to \$34,999	2,430	2,455	1.03%	7,293	7,425	1.81%	2,232	2,271	1.75%
\$35,000 to \$49,999	2,794	2,855	2.18%	8,760	9,057	3.39%	2,479	2,542	2.54%
\$50,000 to \$74,999	2,308	2,416	4.68%	8,459	8,858	4.72%	2,439	2,595	6.40%
\$75,000 to \$99,999	945	1,012	7.09%	3,621	3,885	7.29%	967	1,034	6.93%
\$100,000 to \$124,999	428	479	11.92%	1,680	1,854	10.36%	513	558	8.77%
\$125,000 to \$149,999	157	192	22.29%	756	855	13.10%	213	247	15.96%
\$150,000 to \$199,999	105	120	14.29%	382	452	18.32%	119	139	16.81%
\$200,000 to \$499,999	156	167	7.05%	503	539	7.16%	188	199	5.85%
\$500,000 or more	40	44	10.00%	90	104	15.56%	33	40	21.21%
Estimated Average Household Income	\$41,910	\$43,176	3.02%	\$46,682	\$47,732	2.25%	\$46,285	\$47,442	2.50%
Estimated Per Capita Income	\$17,025	\$17,605	3.41%	\$18,457	\$18,539	0.44%	\$18,448	\$18,984	2.91%

COUNTY SUMMARIES

Howell County

- Diversity: 95.6% white alone and 1.7% Hispanic or Latino in 2011
- Children (0-17) are expected to increase by 2.4% between 2011 and 2016, and are 24.7% of the total population in 2011.
- Seniors (65+) are expected to increase by 9.0% between 2011 and 2016, and are 18.5% of the total population in 2011.
- Females of childbearing years (15-44) is expected to decline 0.1% between 2011 and 2016, and are 17.6% of the total population in 2011.
- 40.1% of household incomes are below or nearly below the poverty level in 2011*
- Average household income was \$41,910 in 2011.

Jasper County

- Diversity: 90.0% white alone and 6.6% Hispanic or Latino in 2011
- Children (0-17) are expected to increase by 8.9% between 2011 and 2016, and are 25.9% of the total population in 2011.
- Seniors (65+) are expected to increase by 11.2% between 2011 and 2016, and are 13.5% of the total population in 2011.
- Females of childbearing years (15-44) are expected to increase by 1.9% between 2011 and 2016, and are 20.4% of the total population in 2011.
- 32.8% of household incomes are below or nearly below the poverty level in 2011*
- Average household income was \$46,682 in 2011.

Laclede County

- Diversity: 95.9% white alone and 1.8% Hispanic or Latino in 2011
- Children (0-17) are expected to increase by 3.0% between 2011 and 2016, and are 25.1% of the total population in 2011.
- Seniors (65+) are expected to increase by 10.7% between 2011 and 2016, and are 16.5% of the total population in 2011.
- Females of childbearing years (15-44) are expected to increase by 1.6% between 2011 and 2016, and are 18.1% of the total population in 2011.
- 34.9% of household incomes are below or nearly below the poverty level in 2011*
- Average household income was \$46,285 in 2011.

* Poverty level amount used is \$22,350—(2011 HHS Poverty Guidelines for four-person family)

2012 CoxHealth Community Health Needs Assessment

APPENDIX 1. County-by-County Demographics

	Ozark			Polk			Pulaski		
	2011	2016	% Change	2011	2016	% Change	2011	2016	% Change
Total Population	9,229	9,071	-1.71%	30,955	32,535	5.10%	47,419	50,350	6.18%
White Alone	8,923	8,733	-2.13%	29,656	30,960	4.40%	37,228	39,563	6.27%
Black or African American Alone	40	52	30.00%	310	405	30.65%	4,616	4,402	-4.64%
American Indian and Alaska Native Alone	70	73	4.29%	238	265	11.34%	491	527	7.33%
Asian Alone	8	7	-12.50%	166	223	34.34%	1,187	1,312	10.53%
Hispanic or Latino	118	129	9.32%	582	696	19.59%	4,012	4,842	20.69%
Not Hispanic or Latino	9,111	8,942	-1.85%	30,373	31,839	4.83%	43,407	45,508	4.84%
Age 0 to 4	504	513	1.79%	2,125	2,333	9.79%	3,692	3,892	5.42%
Male	264	263	-0.38%	1,099	1,194	8.64%	1,928	2,060	6.85%
Female	240	250	4.17%	1,026	1,139	11.01%	1,764	1,832	3.85%
Age 5 to 9	495	492	-0.61%	2,071	2,179	5.21%	3,248	3,362	3.51%
Male	261	258	-1.15%	1,080	1,127	4.35%	1,643	1,693	3.04%
Female	234	234	0.00%	991	1,052	6.16%	1,605	1,669	3.99%
Age 10 to 14	526	485	-7.79%	2,138	2,152	0.65%	3,119	3,263	4.62%
Male	275	256	-6.91%	1,109	1,133	2.16%	1,587	1,653	4.16%
Female	251	229	-8.76%	1,029	1,019	-0.97%	1,532	1,610	5.09%
Age 15 to 17	351	319	-9.12%	1,315	1,457	10.80%	2,365	2,347	-0.76%
Male	180	169	-6.11%	683	759	11.13%	1,276	1,251	-1.96%
Female	171	150	-12.28%	632	698	10.44%	1,089	1,096	0.64%
Age 18 to 20	271	284	4.80%	1,684	1,756	4.28%	5,609	5,991	6.81%
Male	132	137	3.79%	785	827	5.35%	4,025	4,329	7.55%
Female	139	147	5.76%	899	929	3.34%	1,584	1,662	4.92%
Age 21 to 24	367	411	11.99%	1,657	1,771	6.88%	4,991	5,145	3.09%
Male	193	217	12.44%	858	920	7.23%	3,137	3,352	6.85%
Female	174	194	11.49%	799	851	6.51%	1,854	1,793	-3.29%
Age 25 to 34	825	857	3.88%	4,169	4,045	-2.97%	6,456	6,938	7.47%
Male	409	429	4.89%	2,021	1,994	-1.34%	3,053	3,437	12.58%
Female	416	428	2.88%	2,148	2,051	-4.52%	3,403	3,501	2.88%
Age 35 to 44	918	807	-12.09%	3,561	3,939	10.61%	5,471	5,469	-0.04%
Male	446	399	-10.54%	1,762	1,944	10.33%	2,629	2,518	-4.22%
Female	472	408	-13.56%	1,799	1,995	10.89%	2,842	2,951	3.84%
Age 45 to 54	1,347	1,061	-21.23%	3,879	3,765	-2.94%	4,911	5,063	3.10%
Male	672	519	-22.77%	1,898	1,829	-3.64%	2,371	2,397	1.10%
Female	675	542	-19.70%	1,981	1,936	-2.27%	2,540	2,666	4.96%
Age 55 to 64	1,512	1,558	3.04%	3,357	3,625	7.98%	3,723	4,287	15.15%
Male	705	734	4.11%	1,605	1,739	8.35%	1,796	2,089	16.31%
Female	807	824	2.11%	1,752	1,886	7.65%	1,927	2,198	14.06%
Age 65 to 74	1,286	1,421	10.50%	2,514	2,809	11.73%	2,264	2,719	20.10%
Male	621	684	10.14%	1,188	1,321	11.20%	1,041	1,263	21.33%
Female	665	737	10.83%	1,326	1,488	12.22%	1,223	1,456	19.05%
Age 75 to 84	612	623	1.80%	1,732	1,854	7.04%	1,151	1,358	17.98%
Male	292	293	0.34%	741	786	6.07%	492	559	13.62%
Female	320	330	3.13%	991	1,068	7.77%	659	799	21.24%
Age 85 and over	215	240	11.63%	753	850	12.88%	419	516	23.15%
Male	86	94	9.30%	256	288	12.50%	118	161	36.44%
Female	129	146	13.18%	497	562	13.08%	301	355	17.94%
Age 17 and under (children ≤ 17)	1,876	1,809	-3.57%	7,649	8,121	6.17%	12,424	12,864	3.54%
Male	980	946	-3.47%	3,971	4,213	6.09%	6,434	6,657	3.47%
Female	896	863	-3.68%	3,678	3,908	6.25%	5,990	6,207	3.62%
Age 18 -64 (adults ≤ 64)	5,240	4,978	-5.00%	18,307	18,901	3.24%	31,161	32,893	5.56%
Male	2,557	2,435	-4.77%	8,929	9,253	3.63%	17,011	18,122	6.53%
Female	2,683	2,543	-5.22%	9,378	9,648	2.88%	14,150	14,771	4.39%
Age 65+ (seniors ≥ 65)	2,113	2,284	8.09%	4,999	5,513	10.28%	3,834	4,593	19.80%
Male	999	1,071	7.21%	2,185	2,395	9.61%	1,651	1,983	20.11%
Female	1,114	1,213	8.89%	2,814	3,118	10.80%	2,183	2,610	19.56%
Total Male	4,536	4,452	-1.85%	15,085	15,861	5.14%	25,096	26,762	6.64%
Total Female	4,693	4,619	-1.58%	15,870	16,674	5.07%	22,323	23,588	5.67%
Females age 15-44	1,372	1,327	-3.28%	6,277	6,524	3.94%	10,772	11,003	2.14%
Average Age	44.24	44.77	1.20%	38.20	38.48	0.73%	31.64	32.31	2.12%
Average Male Age	43.27	43.69	0.97%	36.94	37.13	0.51%	29.97	30.42	1.50%
Average Female Age	45.17	45.80	1.39%	39.39	39.77	0.96%	33.52	34.44	2.74%

APPENDIX 1. County-by-County Demographics

	Ozark			Polk			Pulaski		
	2011	2016	% Change	2011	2016	% Change	2011	2016	% Change
Households	3,858	3,806	-1.35%	11,418	12,058	5.61%	15,286	16,315	6.73%
Households by Household Income			--			--			--
Less than \$15,000	900	866	-3.78%	2,173	2,236	2.90%	1,838	1,902	3.48%
\$15,000 to \$24, 999	690	670	-2.90%	1,820	1,877	3.13%	1,736	1,794	3.34%
\$25,000 to \$34,999	603	586	-2.82%	1,692	1,767	4.43%	2,573	2,605	1.24%
\$35,000 to \$49,999	723	716	-0.97%	2,166	2,259	4.29%	3,204	3,390	5.81%
\$50,000 to \$74,999	622	621	-0.16%	2,154	2,306	7.06%	3,378	3,658	8.29%
\$75,000 to \$99,999	149	166	11.41%	721	815	13.04%	1,458	1,632	11.93%
\$100,000 to \$124,999	67	71	5.97%	342	388	13.45%	592	711	20.10%
\$125,000 to \$149,999	33	35	6.06%	171	197	15.20%	269	324	20.45%
\$150,000 to \$199,999	26	28	7.69%	117	136	16.24%	142	181	27.46%
\$200,000 to \$499,999	38	39	2.63%	57	70	22.81%	80	100	25.00%
\$500,000 or more	7	8	14.29%	5	7	40.00%	16	18	12.50%
Estimated Average Household Income	\$39,314	\$40,371	2.69%	\$43,091	\$44,348	2.92%	\$49,621	\$51,253	3.29%
Estimated Per Capita Income	\$16,520	\$17,026	3.06%	\$16,310	\$16,834	3.21%	\$17,825	\$18,502	3.80%

COUNTY SUMMARIES

Ozark County

- Diversity: 96.7% white alone and 1.3% Hispanic or Latino in 2011
- Children (0-17) are expected to decrease by 3.6% between 2011 and 2016, and are 20.3% of the total population in 2011.
- Seniors (65+) are expected to increase by 8.1% between 2011 and 2016, and are 22.9% of the total population in 2011.
- Females of childbearing years (15-44) are expected to decrease by 3.3% between 2011 and 2016, and are 14.9% of the total population in 2011.
- 41.2% of household incomes are below or nearly below the poverty level in 2011*
- Average household income was \$39,314 in 2011.

Polk County

- Diversity: 95.8% white alone and 1.9% Hispanic or Latino in 2011
- Children (0-17) are expected to increase by 6.2% between 2011 and 2016, and are 24.7% of the total population in 2011.
- Seniors (65+) are expected to increase by 10.3% between 2011 and 2016, and are 16.1% of the total population in 2011.
- Females of childbearing years (15-44) are expected to increase by 3.9% between 2011 and 2016, and are 20.3% of the total population in 2011.
- 35.0% of household incomes are below or nearly below the poverty level in 2011*
- Average household income was \$43,091 in 2011.

Pulaski County

- Diversity: 78.5% white alone and 8.5% Hispanic or Latino in 2011
- Children (0-17) are expected to increase by 3.5% between 2011 and 2016, and are 26.2% of the total population in 2011.
- Seniors (65+) are expected to increase by 19.8% between 2011 and 2016, and are 8.1% of the total population in 2011.
- Females of childbearing years (15-44) are expected to increase by 2.1% between 2011 and 2016, and are 22.7% of the total population in 2011.
- 23.4% of household incomes are below or nearly below the poverty level in 2011*
- Average household income was \$49,621 in 2011.

* Poverty level amount used is \$22,350—(2011 HHS Poverty Guidelines for four-person family)

APPENDIX 1. County-by-County Demographics

	Texas		
	2011	2016	% Change
Total Population	24,532	25,005	1.93%
White Alone	22,821	22,880	0.26%
Black or African American Alone	757	1,089	43.86%
American Indian and Alaska Native Alone	260	276	6.15%
Asian Alone	96	104	8.33%
Hispanic or Latino	406	492	21.18%
Not Hispanic or Latino	24,126	24,513	1.60%
Age 0 to 4	1,414	1,488	5.23%
Male	732	762	4.10%
Female	682	726	6.45%
Age 5 to 9	1,379	1,413	2.47%
Male	701	731	4.28%
Female	678	682	0.59%
Age 10 to 14	1,436	1,396	-2.79%
Male	728	717	-1.51%
Female	708	679	-4.10%
Age 15 to 17	1,019	960	-5.79%
Male	563	532	-5.51%
Female	456	428	-6.14%
Age 18 to 20	827	830	0.36%
Male	450	429	-4.67%
Female	377	401	6.37%
Age 21 to 24	1,082	1,164	7.58%
Male	614	591	-3.75%
Female	468	573	22.44%
Age 25 to 34	2,840	2,834	-0.21%
Male	1,599	1,607	0.50%
Female	1,241	1,227	-1.13%
Age 35 to 44	2,790	2,751	-1.40%
Male	1,493	1,536	2.88%
Female	1,297	1,215	-6.32%
Age 45 to 54	3,399	3,086	-9.21%
Male	1,725	1,562	-9.45%
Female	1,674	1,524	-8.96%
Age 55 to 64	3,080	3,231	4.90%
Male	1,522	1,596	4.86%
Female	1,558	1,635	4.94%
Age 65 to 74	2,443	2,796	14.45%
Male	1,143	1,318	15.31%
Female	1,300	1,478	13.69%
Age 75 to 84	1,730	1,825	5.49%
Male	674	705	4.60%
Female	1,056	1,120	6.06%
Age 85 and over	1,093	1,231	12.63%
Male	297	340	14.48%
Female	796	891	11.93%
Age 17 and under (children)	5,248	5,257	0.17%
Male	2,724	2,742	0.66%
Female	2,524	2,515	-0.36%
Age 18 and over (adults)	14,018	13,896	-0.87%
Male	7,403	7,321	-1.11%
Female	6,615	6,575	-0.60%
Age 65 and over (seniors)	5,266	5,852	11.13%
Male	2,114	2,363	11.78%
Female	3,152	3,489	10.69%
Total Male	12,241	12,426	1.51%
Total Female	12,291	12,579	2.34%
Females age 15-44	3,839	3,844	0.13%
Average Age	42.67	43.39	1.69%
Average Male Age	40.30	40.98	1.69%
Average Female Age	45.04	45.77	1.62%

	Texas		
	2011	2016	% Change
Households	9,690	9,896	2.13%
Households by Household Income			--
Less than \$15,000	2,418	2,413	-0.21%
\$15,000 to \$24,999	1,829	1,834	0.27%
\$25,000 to \$34,999	1,617	1,625	0.49%
\$35,000 to \$49,999	1,501	1,555	3.60%
\$50,000 to \$74,999	1,311	1,366	4.20%
\$75,000 to \$99,999	511	546	6.85%
\$100,000 to \$124,999	222	246	10.81%
\$125,000 to \$149,999	102	115	12.75%
\$150,000 to \$199,999	82	89	8.54%
\$200,000 to \$499,999	82	88	7.32%
\$500,000 or more	15	19	26.67%
Estimated Average Household Income	\$39,018	\$40,072	2.70%
Estimated Per Capita Income	\$16,478	\$17,011	3.23%

COUNTY SUMMARY

Texas County

- Diversity: 93.0% white alone and 1.7% Hispanic or Latino in 2011
- Children (0-17) are expected to increase by 0.2% between 2011 and 2016, and are 21.4% of the total population in 2011.
- Seniors (65+) are expected to increase by 11.1% between 2011 and 2016, and are 21.5% of the total population in 2011.
- Females of childbearing years (15-44) are expected to increase by 0.1% between 2011 and 2016, and are 15.6% of the total population in 2011.
- 43.8% of household incomes are below or nearly below the poverty level in 2011*
- Average household income was \$39,018 in 2011.

* Poverty level amount used is \$22,350—(2011 HHS Poverty Guidelines for four-person family)

APPENDIX 2. County-by-County Payer Mix

County	FY2011 Payer Mix by County of Patient Origin					FY2011 Discharges by Patient Origin				
	Total	Medicare % of total	Medicaid % of total	Commercial % of total	Uninsured % of total	Other % of total				
Barry, MO	4,487	1,885 42.0%	1,119 24.9%	980 21.8%	321 7.2%	182 4.1%				
Christian, MO	7,694	2,817 36.6%	1,480 19.2%	2,761 35.9%	496 6.4%	140 1.8%				
Greene, MO	34,210	13,229 38.7%	8,094 23.7%	9,458 27.6%	2,817 8.2%	612 1.8%				
Lawrence, MO	4,323	1,883 43.6%	965 22.3%	1,079 25.0%	307 7.1%	89 2.1%				
Stone, MO	3,769	2,044 54.2%	744 19.7%	621 16.5%	286 7.6%	74 2.0%				
Taney, MO	7,404	3,523 47.6%	1,770 23.9%	1,194 16.1%	843 11.4%	74 1.0%				
Webster, MO	3,815	1,633 42.8%	812 21.3%	1,007 26.4%	285 7.5%	78 2.0%				
Wright, MO	2,759	1,173 42.5%	836 30.3%	477 17.3%	206 7.5%	67 2.4%				
Baxter, AR	357	213 59.7%	23 6.4%	94 26.3%	18 5.0%	9 2.5%				
Boone, AR	813	533 65.6%	37 4.6%	164 20.2%	71 8.7%	8 1.0%				
Cedar, MO	1,923	1,003 52.2%	421 21.9%	398 20.7%	68 3.5%	33 1.7%				
Dade, MO	995	453 45.5%	237 23.8%	223 22.4%	50 5.0%	32 3.2%				
Dallas, MO	1,965	820 41.7%	570 29.0%	393 20.0%	138 7.0%	44 2.2%				
Douglas, MO	1,434	699 48.7%	383 26.7%	248 17.3%	75 5.2%	29 2.0%				
Hickory, MO	1,177	627 53.3%	235 20.0%	224 19.0%	77 6.5%	14 1.2%				
Howell, MO	6,180	2,459 39.8%	1,760 28.5%	1,140 18.4%	425 6.9%	396 6.4%				
Jasper, MO	18,228	7,252 39.8%	4,824 26.5%	4,627 25.4%	1,311 7.2%	214 1.2%				
Laclede, MO	4,548	1,946 42.8%	1,165 25.6%	1,017 22.4%	286 6.3%	134 2.9%				
Ozark, MO	1,217	607 49.9%	218 17.9%	184 15.1%	79 6.5%	129 10.6%				
Polk, MO	3,763	1,544 41.0%	801 21.3%	1,146 30.5%	208 5.5%	64 1.7%				
Pulaski, MO	4,491	1,621 36.1%	918 20.4%	879 19.6%	280 6.2%	793 17.7%				
Texas, MO	3,204	1,575 49.2%	784 24.5%	537 16.8%	191 6.0%	117 3.7%				
22-CO	118,756	49,539 41.7%	28,196 23.7%	28,851 24.3%	8,838 7.4%	3,332 2.8%				

Source: HIDI Online Data

APPENDIX 3. County-by-County Unemployment Rates

2010 Unemployment Rates
by County and Service Area<http://www.missourieconomy.org/indicators/laus/default.aspx>

	Barry	Christian	Greene	Lawrence	Polk	Stone	Taney	Webster	PSA
January	9.59%	9.57%	8.86%	9.67%	10.17%	20.05%	21.40%	10.95%	10.99%
February	9.43%	9.77%	8.91%	9.40%	9.96%	21.50%	22.38%	11.33%	11.15%
March	9.00%	9.28%	9.18%	9.18%	9.94%	15.30%	16.89%	10.77%	10.35%
April	7.72%	7.72%	7.81%	7.66%	8.27%	11.58%	12.30%	9.38%	8.51%
May	8.05%	7.66%	7.98%	7.75%	8.57%	10.31%	10.96%	9.30%	8.43%
June	8.64%	8.21%	8.35%	8.43%	10.56%	9.59%	10.52%	10.00%	8.83%
July	8.60%	8.24%	8.50%	8.52%	10.97%	9.56%	9.57%	10.32%	8.86%
August	8.54%	8.11%	8.62%	8.53%	11.11%	9.53%	9.56%	9.94%	8.88%
September	8.32%	7.93%	8.28%	8.00%	10.20%	10.07%	9.37%	9.90%	8.61%
October	8.32%	7.86%	8.07%	7.80%	9.26%	10.22%	9.28%	9.15%	8.39%
November	8.87%	8.20%	8.25%	8.10%	9.73%	10.65%	9.60%	9.41%	8.67%
December	8.76%	8.39%	8.19%	8.13%	9.48%	11.50%	10.89%	9.67%	8.83%

	Baxter, AR	Boone, AR	Cedar	Dade	Dallas	Douglas	Hickory	Howell	Jasper	Laclede	Ozark	Pulaski	Texas	Wright	SSA	22-CO
January	10.64%	9.32%	8.79%	9.32%	13.67%	10.40%	13.69%	9.80%	8.56%	12.42%	10.40%	8.04%	10.14%	11.20%	9.79%	10.50%
February	10.71%	9.39%	8.72%	9.25%	13.76%	11.09%	13.70%	10.36%	8.71%	12.76%	10.17%	7.73%	10.73%	11.97%	9.98%	10.67%
March	9.62%	8.27%	8.52%	9.00%	12.56%	10.35%	13.20%	10.09%	8.83%	12.51%	9.02%	7.97%	10.18%	11.26%	9.62%	10.05%
April	8.54%	6.88%	7.29%	7.30%	11.78%	8.77%	11.04%	8.99%	7.61%	11.00%	7.90%	6.54%	8.66%	10.23%	8.34%	8.44%
May	8.43%	6.97%	7.78%	7.65%	10.56%	9.11%	11.01%	8.95%	7.82%	10.79%	8.13%	7.04%	8.70%	9.69%	8.39%	8.42%
June	8.49%	6.88%	8.68%	8.40%	11.80%	9.88%	12.10%	9.26%	8.56%	11.39%	8.21%	8.61%	9.46%	10.21%	9.04%	8.92%
July	9.00%	7.24%	9.11%	9.41%	11.75%	9.59%	11.53%	9.00%	8.78%	11.39%	8.88%	8.75%	9.40%	10.47%	9.21%	9.00%
August	8.47%	6.89%	9.30%	9.75%	11.34%	9.59%	12.68%	8.87%	8.62%	11.30%	9.28%	8.44%	9.57%	10.56%	9.07%	8.96%
September	8.27%	6.63%	8.54%	9.15%	10.48%	18.52%	12.60%	8.79%	8.34%	12.49%	10.57%	7.86%	9.20%	11.75%	9.23%	8.86%
October	7.65%	6.30%	8.61%	8.71%	10.45%	8.75%	12.43%	8.42%	8.09%	10.82%	8.33%	7.62%	8.95%	9.44%	8.42%	8.40%
November	8.10%	6.46%	9.19%	9.51%	10.92%	9.00%	12.96%	8.68%	8.44%	12.54%	9.04%	7.96%	9.37%	10.11%	8.91%	8.77%
December	8.55%	6.78%	9.10%	9.62%	11.13%	9.05%	13.30%	8.72%	8.09%	12.64%	10.00%	8.18%	9.35%	10.16%	8.94%	8.88%

APPENDIX 3. County-by-County Unemployment Rates

**2011 Unemployment Rates
by County and Service Area**

<http://www.missourieconomy.org/indicators/laus/default.aspx>

	Barry	Christian	Greene	Lawrence	Stone	Taney	Webster	Wright	PSA							
January	9.53%	9.69%	8.67%	8.85%	20.22%	22.36%	10.04%	10.64%	10.93%							
February	9.44%	9.39%	8.41%	8.87%	20.51%	22.82%	9.85%	10.66%	10.73%							
March	8.42%	8.29%	8.21%	8.44%	13.89%	16.57%	9.04%	9.40%	9.43%							
April	7.45%	7.27%	7.45%	7.31%	9.86%	11.37%	8.08%	8.45%	8.00%							
May	8.08%	7.50%	7.96%	7.62%	9.32%	10.67%	8.33%	8.62%	8.25%							
June	8.31%	7.50%	7.92%	7.82%	8.52%	9.36%	8.80%	8.94%	8.21%							
July	8.12%	7.23%	7.50%	7.54%	7.90%	8.42%	8.37%	8.84%	7.78%							
August	8.45%	7.56%	8.01%	8.04%	8.75%	8.63%	8.75%	9.21%	8.15%							
September	7.92%	6.89%	7.30%	7.27%	8.74%	8.41%	7.93%	8.60%	7.54%							
October	7.62%	6.65%	7.18%	7.02%	8.78%	8.23%	7.50%	8.52%	7.37%							
November	6.93%	6.38%	6.50%	6.40%	9.13%	7.87%	7.07%	8.08%	6.86%							
December																
	Baxter, AR Boone, AR Cedar Dade Dallas Douglas Hickory Howell Jasper Laclede Ozark Polk Pulaski Texas SSA 22-CO															
January	9.88%	8.86%	9.07%	10.12%	11.47%	9.33%	13.32%	8.94%	8.33%	12.44%	10.80%	10.55%	9.29%	9.95%	9.52%	10.35%
February	9.74%	8.63%	8.99%	9.91%	11.01%	9.84%	13.26%	8.98%	8.32%	12.32%	10.73%	10.32%	8.78%	9.74%	9.41%	10.19%
March	8.74%	7.69%	8.32%	9.19%	10.50%	8.60%	12.27%	8.60%	8.04%	11.41%	9.59%	9.41%	8.40%	9.09%	8.79%	9.17%
April	8.18%	7.01%	7.38%	8.35%	9.95%	8.72%	10.87%	7.70%	7.17%	10.71%	7.84%	8.28%	7.52%	7.88%	7.95%	7.98%
May	8.39%	6.97%	7.70%	8.51%	9.99%	8.07%	11.41%	8.05%	7.62%	10.82%	8.16%	8.28%	7.95%	8.59%	8.25%	8.25%
June	8.82%	7.20%	8.41%	9.14%	9.68%	8.52%	12.24%	8.17%	8.89%	10.86%	8.14%	10.16%	8.65%	8.55%	8.83%	8.46%
July	8.84%	7.25%	8.21%	9.04%	9.14%	8.19%	11.80%	7.81%	8.25%	10.55%	8.49%	9.79%	8.00%	7.98%	8.44%	8.05%
August	8.63%	6.89%	9.08%	9.34%	10.07%	8.73%	12.70%	8.14%	8.34%	11.05%	8.74%	9.97%	8.19%	8.53%	8.73%	8.40%
September	8.22%	7.22%	7.86%	8.25%	10.72%	8.36%	11.21%	7.71%	7.59%	11.81%	7.92%	8.16%	7.61%	8.20%	8.24%	7.83%
October	7.73%	7.01%	7.71%	8.54%	10.39%	8.18%	11.47%	7.55%	7.19%	11.38%	7.93%	7.83%	7.65%	8.04%	7.98%	7.63%
November	7.49%	6.77%	7.10%	8.37%	10.10%	7.92%	10.90%	7.34%	6.46%	11.15%	7.92%	7.65%	7.11%	7.61%	7.55%	7.15%
December																

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
CoxHealth Center-Cassville	CoxHealth Internal and Family Medicine	75 Smithson Dr #A	Cassville	MO	65625	CoxHealth	Barry
St. John's Hospital-Cassville	St. John's Critical Access Hospital	94 Main Street	Cassville	MO	65625	St. John's	Barry
St. John's Clinic-Cassville	St. John's Family Medicine, and General and Trauma Surgery	90 Gravel Street	Cassville	MO	65625	St. John's	Barry
Barry County Health Department Main Offices	Birth & Death Certificates, Immunizations, Lab Work, WIC services and Vouchers, Restaurant, retail and lodging inspections	65 Main Street	Cassville	MO	65625	County	Barry
Access Family Care - Cassville	Obstetrics/gynecology, Prenatal, Pediatrics, Family Practice, Internal Medicine, Geriatrics, Family dental care, Spanish interpretations, 340B pharmacy discounts, Prescription Assistance Program, and Show Me Healthy Women	1101 Main Street	Cassville	MO	65625	Access Family Care	Barry
Heritage Medical Clinic	Family Medicine	101 Main St. #1	Cassville	MO	65625	NA	Barry
Cox Family Medicine of Monett	CoxHealth Family Medicine	307 W. Benton	Monett	MO	65708	CoxHealth	Barry
Family Practice & Obstetrics of Monett	CoxHealth Family Medicine	815 N Lincoln	Monett	MO	65708	CoxHealth	Barry
Monett Surgical Associates	CoxHealth General Surgery	815 N Lincoln	Monett	MO	65708	CoxHealth	Barry
Cox Monett	CoxHealth Critical Access Hospital	801 Lincoln Ave.	Monett	MO	65708	CoxHealth	Barry
St. John's Clinic-Monett	St. John's Family Medicine and Urgent Care	315 E. Cleveland	Monett	MO	65708	St. John's	Barry
Barry County Health Department Satellite Offices	Birth & Death Certificates, Immunizations, Lab Work, WIC services and Vouchers, Restaurant, retail and lodging inspections	1000 S. Lincoln, Highway 375	Monett	MO	65708	County	Barry
Access Family Care - Camp Barnabus	unclear - new facility	901 Teas Trail 2060	Purdy	MO	65734	Access Family Care	Barry
CoxHealth Center Shell Knob	CoxHealth Family Medicine	25376 State Hwy 39	Shell Knob	MO	65747	CoxHealth	Barry
CoxHealth Center Nixa	Pediatrics and Family Medicine	411 N McCroskey	Nixa	MO	65714	CoxHealth	Christian
St. John's Clinic-Nixa	Family Medicine, Internal Medicine	940 W. Mt. Vernon St.	Nixa	MO	65714	St. John's	Christian
OCH Christian County Clinic (Nixa)	Family Practice, Pediatrics, Podiatry, Neurology, Ophthalmology, and Psychology Ozarks Area Autism Clinic Physical Therapy Clinic Urgent Care Diagnostic Imaging Services Laboratory	105 S. Ridgecrest Ave.	Nixa	MO	65714	OCH	Christian
Family Medical Walk-In Clinics - Nixa	Alcohol testing, drug Screening, eye injury and screening exams, flu shots and information, hearing tests, laboratory testing, non-surgical orthopedics, physical exams, prescriptions, primary care, pulmonary function testing, treatment for work-related illness or injury, urgent care, and x-rays	103 Old Wilderness Road	Nixa	MO	65714	Family Medical Walk-In Clinics	Christian
CoxHealth Center Ozark	Family Medicine	1741 S. 15th St.	Ozark	MO	65721	CoxHealth	Christian

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
The Clinic at Wal-Mart operated by CoxHealth - Ozark	Minor illness	2004 W. Marler Ln	Ozark	MO	65721	CoxHealth	Christian
St. John's Clinic-Ozark	Family Medicine	1106 W. Jackson	Ozark	MO	65721	St. John's	Christian
Christian County Health Department Offices	Adult Health, Child Health, WIC, Communicable Disease, Vital Records, Food Inspections, Environmental, Bioterrorism, and Health Status Alert System	301 E. Brick	Ozark	MO	65721	County	Christian
Bridges Medical Services - Sparta	Family Practice	155 Village Dr	Sparta	MO	65753	NA	Christian
CMH - Ash Grove Family Medical Center	Family Practice, Psychology/Psychiatry, x-ray, Laboratory services, and Minor emergencies	500 North Medical Drive	Ash Grove	MO	65604	CMH	Greene
Pleasant Hope Family Medical Center	Family Practice	209 South Main	Pleasant Hope	MO	65725	CMH	Greene
The Clinic at Wal-Mart operated by CoxHealth - Republic	Minor illness	1150 US Hwy 60 East	Republic	MO	65738	CoxHealth	Greene
CoxHealth Center Republic	Family Medicine	820 Illinois	Republic	MO	65738	CoxHealth	Greene
St. John's Clinic-Republic	Internal Medicine	322 South Main	Republic	MO	65738	St. John's	Greene
St. John's Clinic-Republic	Family Medicine	332 South Main	Republic	MO	65738	St. John's	Greene
Family Medical Walk-In Clinics - Republic - Plaza Southwest Center	http://www.fmwic.com/family-medical-walk-in-clinics-services.html	281 US Highway 60 W	Republic	MO	65738	Family Medical Walk-In Clinic	Greene
CoxHealth Newborn Medicine Specialists	Neonatology	1000 E. Primrose	Springfield	MO	65807	CoxHealth	Greene
Pediatric Neurology of the Ozarks	Pediatrics - Neurology	1000 E. Primrose	Springfield	MO	65807	CoxHealth	Greene
Regional Perinatal Center	Maternal & Fetal Medicine	1000 E. Primrose	Springfield	MO	65807	CoxHealth	Greene
Ferrell-Duncan Clinic OB/GYN - The Turner Center	Obstetrics and Gynecology	1000 E. Primrose	Springfield	MO	65807	CoxHealth	Greene
Springfield Inpatient Physicians CWL	Hospitalists - Adults	1000 E. Walnut Lawn	Springfield	MO	65807	CoxHealth	Greene
Cox Walnut Lawn	Orthopedic Hospital (extension of Cox South)	1000 E. Walnut Lawn	Springfield	MO	65807	CoxHealth	Greene
Ferrell-Duncan Clinic - E Primrose	Allergy, Colorectal Surgery, Dermatology, Family Medicine, Gastroenterology, General Surgery, Gynecologic Oncology, Internal Medicine, Nephrology, Neurology, Pulmonology, and Urology	1001 E. Primrose	Springfield	MO	65807	CoxHealth	Greene
CoxHealth Inpatient Psychiatry	Psychiatry	1423 N Jefferson	Springfield	MO	65802	CoxHealth	Greene
Family Medical Care Center	Obstetrics & Gynecology, Family, and Internal Medicine	1423 N Jefferson	Springfield	MO	65802	CoxHealth	Greene
Pediatric Hospital Affiliates	Pediatrics - Critical Care	1423 N Jefferson	Springfield	MO	65802	CoxHealth	Greene
Cox Senior Health Center	Geriatric Medicine	1423 N. Jefferson	Springfield	MO	65802	CoxHealth	Greene
Cox North	Acute Care Hospital	1423 N. Jefferson	Springfield	MO	65802	CoxHealth	Greene
Elfindale Family Medicine	Family Medicine	1429 W. Sunshine	Springfield	MO	65807	CoxHealth	Greene
Cox Family Physicians	Family Medicine	1443 N Robberson	Springfield	MO	65802	CoxHealth	Greene
Northside Pediatrics & Adolescents	Pediatrics	1443 N Robberson	Springfield	MO	65802	CoxHealth	Greene

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
Steeplechase Family Physicians	Family Medicine	1530 E. Republic Rd	Springfield	MO	65804	CoxHealth	Greene
Chesterfield Family Clinic	Family Medicine	1925 Chesterfield Blvd	Springfield	MO	65807	CoxHealth	Greene
The Clinic at Wal-Mart operated by CoxHealth - Spfld - Independence	Minor illness	2021 E Independence	Springfield	MO	65804	CoxHealth	Greene
Southern Hills Family Medicine	Family Medicine	2702 E. Sunshine	Springfield	MO	65804	CoxHealth	Greene
CoxHealth Center Campbell	Family Medicine	2750 S. Campbell	Springfield	MO	65807	CoxHealth	Greene
The Clinic at Wal-Mart operated by CoxHealth - Spfld - Kansas Expwy	Minor illness	2825 N. Kansas Expwy	Springfield	MO	65803	CoxHealth	Greene
Springfield Neurological and Spine Institute, LLC	Neurology and Neurosurgery	2900 S. National Ave.	Springfield	MO	65804	CoxHealth	Greene
The Clinic at Wal-Mart operated by CoxHealth - Spfld-Campbell	Minor illness	3315 S. Campbell	Springfield	MO	65807	CoxHealth	Greene
Pediatric Center	Pediatrics and Pediatrics - Critical Care	3443 S. National	Springfield	MO	65807	CoxHealth	Greene
Pediatric Specialty Clinic	Pediatrics - Critical Care, and Pediatrics	3443 S. National	Springfield	MO	65807	CoxHealth	Greene
Thomas J Legg, DO	Family Medicine	3525 S National	Springfield	MO	65807	CoxHealth	Greene
CoxHealth Pediatrics	Pediatrics	3525 S. National	Springfield	MO	65807	CoxHealth	Greene
Cox Senior Health Center South	Geriatric Medicine	3525 S. National Ave	Springfield	MO	65807	CoxHealth	Greene
Cox Hyperbaric Medicine and Wound Care Center	Hyperbaric Medicine/Wound Care	3525 S. National Ave #101	Springfield	MO	65807	CoxHealth	Greene
Cox C.A.R.E. Mobile	Family Medicine	3525 S. National Ave #105	Springfield	MO	65807	CoxHealth	Greene
Southwest Spine & Sports Medicine	Physical Medicine & Rehabilitation	3555 S. National	Springfield	MO	65807	CoxHealth	Greene
Ferrell-Duncan Bone and Joint Center	Orthopaedic Surgery, Rheumatology, and Plastic Surgery	3555 S. National	Springfield	MO	65807	CoxHealth	Greene
Milne-Scanlon Urology Clinic	Urology	3800 S. National	Springfield	MO	65807	CoxHealth	Greene
Diagnostic Clinic	Internal Medicine	3800 S. National	Springfield	MO	65807	CoxHealth	Greene
Sun River Orthopaedics	Orthopedic Surgery	3800 S. National	Springfield	MO	65807	CoxHealth	Greene
Ferrell-Duncan Cardiology - The Wheeler Heart and Vascular Center	Cardiology, Electrophysiology, Vascular Surgery, and Cardiothoracic Surgery	3800 S. National	Springfield	MO	65807	CoxHealth	Greene
CoxHealth Psychological Services	Behavioral Health	3800 S. National #770	Springfield	MO	65807	CoxHealth	Greene
CoxHealth Infectious Disease Specialty Clinic	Infectious Disease	3800 S. National Ave	Springfield	MO	65807	CoxHealth	Greene
Springfield Inpatient Physicians	Hospitalists - Adults and Pediatrics	3801 S. National	Springfield	MO	65807	CoxHealth	Greene
Cox South	Acute Care Hospital	3801 S. National	Springfield	MO	65807	CoxHealth	Greene
Cox Family Medicine Associates	Family Medicine	3850 S. National	Springfield	MO	65807	CoxHealth	Greene
CoxHealth Internal Medicine for Women	Internal Medicine	3850 S. National	Springfield	MO	65807	CoxHealth	Greene
Physicians for Women	Obstetrics & Gynecology	3850 S. National	Springfield	MO	65807	CoxHealth	Greene
Adult Medicine & Endocrinology Specialists	Internal Medicine and Endocrinology	960 E Walnut Lawn #201	Springfield	MO	65807	CoxHealth	Greene
Ferrell-Duncan ENT, Cox Surgery Center	Audiology and Otolaryngology	960 E. Walnut Lawn	Springfield	MO	65807	CoxHealth	Greene

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
St. John's Breast Center	Mammography	2055 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Children's Specialty Clinic	Pediatric Neurology	1965 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Behavioral Health-Lark	Psychology/Behavioral Health	1312 E. Lark Street	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Paul Mueller	Family Medicine	2600 W. Phelps	Springfield	MO	65802	St. John's	Greene
St. John's Clinic-Springfield	Allergy and Asthma	3231 S. National	Springfield	MO	65807	St. John's	Greene
St. John's Clinic-Springfield	Anesthesiology	1235 E. Cherokee	Springfield	MO	65807	St. John's	Greene
St. John's Clinic-Springfield	Cancer and Hematology	2055 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Cancer and Hematology	1235 E. Cherokee	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Cardiology	2113 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Cardiovascular Thoracic Surgery	1900 S. National	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Cardiovascular Thoracic Surgery	2005 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Cardiovascular Thoracic Surgery	2115 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Colon and Rectal Surgery	1965 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Dermatology	3231 S. National	Springfield	MO	65807	St. John's	Greene
St. John's Clinic-Springfield	Ear, Nose & Throat (Otolaryngology)	1229 E. Seminole	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Ear, Nose & Throat (Otolaryngology)	2005 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Emergency Medicine	1235 E. Cherokee	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Emergency Medicine	3231 S. National	Springfield	MO	65807	St. John's	Greene
St. John's Clinic-Springfield	Endocrinology	3231 S. National	Springfield	MO	65807	St. John's	Greene
St. John's Clinic-Springfield	Family Medicine	1640 E. Kearney	Springfield	MO	65803	St. John's	Greene
St. John's Clinic-Springfield	Family Medicine	2711 S. Meadowbrook	Springfield	MO	65807	St. John's	Greene
St. John's Clinic-Springfield	Family Medicine	2212 W. Kearney	Springfield	MO	65803	St. John's	Greene
St. John's Clinic-Springfield	Family Medicine	3231 S. National	Springfield	MO	65807	St. John's	Greene
St. John's Clinic-Springfield	Family Medicine	2754 W. Republic Road	Springfield	MO	65807	St. John's	Greene
St. John's Clinic-Springfield	Gastroenterology	2115 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	General and Trauma Surgery	1965 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Geriatric Medicine	1965 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Geriatric Medicine	3231 S. National	Springfield	MO	65807	St. John's	Greene
St. John's Clinic-Springfield	Gynecologic Oncology	2055 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Hospitalists	1235 E. Cherokee	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Infectious Diseases	2115 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Internal Medicine	1235 E. Cherokee	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Internal Medicine	2115 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Internal Medicine	1965 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Internal Medicine	2754 W. Republic Road	Springfield	MO	65807	St. John's	Greene
St. John's Clinic-Springfield	Maternal-Fetal Medicine	1965 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Medical Research	3231 S. National	Springfield	MO	65807	St. John's	Greene
St. John's Clinic-Springfield	Nuclear Medicine	3231 S. National	Springfield	MO	65807	St. John's	Greene
St. John's Clinic-Springfield	Neurology	2115 S. Fremont	Springfield	MO	65804	St. John's	Greene

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
St. John's Clinic-Springfield	Neurosurgery	1229 E. Seminole	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Obstetrics and Gynecology	1965 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Obstetrics and Gynecology	3231 S. National	Springfield	MO	65807	St. John's	Greene
St. John's Clinic-Springfield	Occupational Medicine/Worker Comp	3231 S. National	Springfield	MO	65807	St. John's	Greene
St. John's Clinic-Springfield	Occupational Medicine/Worker Comp	2120 W. Kearney	Springfield	MO	65803	St. John's	Greene
St. John's Clinic-Springfield	Oral and Maxillofacial Surgery	1965 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Orthopedics	1229 E. Seminole	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Orthopedics	2135 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Pain Management	1229 E. Seminole	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Pathology	1235 E. Cherokee	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Pediatric Neurosurgery	1229 E. Seminole	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Pediatric Psychiatry	1965 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Pediatrics	1965 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Pediatrics	2115 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Pediatrics	3231 S. National	Springfield	MO	65807	St. John's	Greene
St. John's Clinic-Springfield	Physical Medicine and Rehab	1235 E. Cherokee	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Physical Medicine and Rehab	1229 E. Seminole	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Plastic and Reconstructive Surgery	1965 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Plastic and Reconstructive Surgery	1229 E. Seminole	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Podiatry	3231 S. National	Springfield	MO	65807	St. John's	Greene
St. John's Clinic-Springfield	Psychiatry	1965 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Psychology/Behavioral Health	2030 S. National	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Pulmonology	3231 S. National	Springfield	MO	65807	St. John's	Greene
St. John's Clinic-Springfield	Radiation Oncology	2055 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Radiology	1235 E. Cherokee	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Rheumatology	3231 S. National	Springfield	MO	65807	St. John's	Greene
St. John's Clinic-Springfield	Sleep Disorders	1235 E. Cherokee	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Sports Medicine	1229 E. Seminole	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Sports Medicine	2135 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Sports Medicine	3231 S. National	Springfield	MO	65807	St. John's	Greene
St. John's Clinic-Springfield	Sports Medicine	4331 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Urgent Care	3231 S. National Ave.	Springfield	MO	65807	St. John's	Greene
St. John's Clinic-Springfield	Urology	1965 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Vascular Surgery	1900 S. National	Springfield	MO	65804	St. John's	Greene
St. John's Clinic-Springfield	Vascular Surgery	2115 S. Fremont	Springfield	MO	65804	St. John's	Greene
St. John's Hospital-Springfield	Hospital	1235 E. Cherokee	Springfield	MO	65804	St. John's	Greene
W. Steven Hughes, MD	Plastic Surgery	1235 East Cherokee	Springfield	MO	65804	Freeman	Greene
James B. Rice, MD, Ferrell Duncan Clinic	Cardiology	3800 S. National Ave	Springfield	MO	65807	TCMH	Greene
Missouri Eye Institute	Ophthalmology	1531 East Bradford Park	Springfield	MO	65804	TCMH	Greene

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
Chest and Sleep Institute of Springfield	Pulmonology	1370 E. Primrose St.	Springfield	MO	65804	TCMH	Greene
Ozarks Community Hospital	Acute Care Hospital	2828 North National	Springfield	MO	65803	OCH	Greene
OCH Primrose Clinic	nephrology, family practice, and COPD clinic	1370 E. Primrose	Springfield	MO	65804	OCH	Greene
Advantage Therapy	Physical and Occupational Therapy	3045 S. National Ave.	Springfield	MO	65804	OCH	Greene
OCH North Pediatrics	Pediatrics	2105 West Kearney	Springfield	MO	65803	OCH	Greene
Springfield Greene County Health Department - Harold K. Bengsch Building	Water Testing, HIV/AIDS and STD Testing, Pregnancy Testing, and Tuberculosis Testing	227 East Chestnut Expre:	Springfield	MO	65802	County	Greene
Springfield Greene County Health Department - Air Quality	N/A	300 East Tampa Street	Springfield	MO	65802	County	Greene
Springfield Greene County Health Department - Environmental Health Services Center	Environmental and restaurant complaints, food permits, food safety info, pit bull registration info, environmental compliance issues	320 East Central Street	Springfield	MO	65802	County	Greene
Springfield Greene County Health Department - Women, Infants, Children (WIC)	breastfeeding support, health screening, medical and dental referrals, yoga and childbirth classes, nutrition education classes	440 East Tampa Street	Springfield	MO	65806	County	Greene
Springfield Greene County Health Department - Springfield Animal Shelter	lost dog or cat, register pit bull	4002 North Farmer Aven	Springfield	MO	65803	County	Greene
Springfield Greene County Health Department - Westside Public Health Center	adult and child immunizations, childcare provider training, blood lead testing	660 South Scenic Avenue	Springfield	MO	65802	County	Greene
The Kitchen, Inc. - Medical and Dental Clinic and Admin Offices	NA	1630 N. Jefferson	Springfield	MO	65803	Independent	Greene
The Kitchen, Inc. - Rare Breed Youth Outreach Center	free and confidential service center for youth ages 13 through 20 years old Housing for homeless individuals and families,	215 S. Campbell	Springfield	MO	65806	Independent	Greene
The Kitchen, Inc. - Missouri Hotel	Transitional housing, meals, case management, basic life skills training	420 E. Commercial	Springfield	MO	65803	Independent	Greene
The Kitchen, Inc. - Bill's Place	assists the homeless mentally ill	424 E. Commercial	Springfield	MO	65803	Independent	Greene
The Kitchen, Inc. - Kitchen Annex Food Warehouse	Receiving site for all donated food.	421 E. Blaine	Springfield	MO	65803	Independent	Greene
The Kitchen, Inc. - Franciscan Villa	NA	620 W. Scott	Springfield	MO	65802	Independent	Greene
The Kitchen, Inc. - Fresh Start Donation Center	the receiving and distributing location for all non-food donations gently used men's, women's, and children's clothing, furniture, household items and nick-knacks	428 E. Blaine	Springfield	MO	65803	Independent	Greene
The Kitchen, Inc. - Maggie's Boutique		450 E. Commercial	Springfield	MO	65803	Independent	Greene
The Kitchen, Inc. - K.I.N.D. Place	Helps those in homeless situations to get the help they need to take their GED	N. Jefferson	Springfield	MO	65803	Independent	Greene

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
The Kitchen, Inc. - Family Nurturing Center - Children's Services	The Kitchen's Children's Services offers not only free child care, but also family and child counseling, parenting classes, youth activities, field trips, holiday events and much more.	N. Jefferson	Springfield	MO	65803	Independent	Greene
The Kitchen, Inc. - Sigma House Appartments	NA	804 South Park Avenue	Springfield	MO	65802	Independent	Greene
The Kitchen, Inc. - Lorraine's	furniture and vintage merchandise	450 E. Commercial St.	Springfield	MO	65803	Independent	Greene
Ozark Area Community Action Corporation (OACAC) Central Office	Family Planning, Foster Grandparents, Head Start, Housing, LIHEAP, Neighborhood Centers, Weatherization	215 S. Barnes Ave.	Springfield	MO	65802	NA	Greene
Jordan Valley Community Health Center - Tampa Street (Medical Vision, Behavioral Health, and Pharmacy)	Medical: Family Medicine, Pediatric Care, Internal Medicine, Geriatric Care, Primary & Preventive Health, Immunizations, Chronic Disease Management, Gynecology/Women's Health (including Show Me Healthy Women), Prenatal Care, In-patient Services & Newborn, Nursery Care, Outpatient Procedures (Circumcisions, Colposcopy, Spirometry, Endometrial Biopsy, EKG & Stress Testing, Implanon, Vasectomy, Minor Skin Procedures, Joint Injections), Diabetes Education, Dietary Counseling, Weight Management Support, In-school Primary Care, Lab Services, X-Ray WIC Mobile Services	440 E. Tampa	Springfield	MO	65806	Independent	Greene
Jordan Valley Community Health Center - Benton Avenue (Dental)	Dental	618 N. Benton Ave	Springfield	MO	65806	Independent	Greene
Family Medical Walk-In Clinics - North Springfield - Town & Country Shopping Center	Alcohol testing, drug Screening, eye injury and screening exams, flu shots and information, hearing tests, laboratory testing, non-surgical orthopedics, physical exams, prescriptions, primary care, pulmonary function testing, treatment for work-related illness or injury, urgent care, and x-rays http://www.fmwic.com/family-medical-walk-in-clinics-services.html	2619 N. Kansas Expressway	Springfield	MO	65803	Family Medical Walk-In Clinic	Greene
Family Medical Walk-In Clinics - South Springfield	http://www.fmwic.com/family-medical-walk-in-clinics-services.html	4049 S. Campbell	Springfield	MO	65807	Family Medical Walk-In Clinic	Greene
KT Health Clinic - Springfield	Paternity test, DNA test, drug test, alcohol testing, safety program, Medical Review Officer, Substance Abuse Program, physicals, walk-in clinic, employee screening	2032 East Kearney, suite 108	Springfield	MO	65803	Independent	Greene

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
Concentra - Springfield	http://www.concentra.com/patients/what-we-treat/	1308 N. Glenstone Ave	Springfield	MO	65802	Independent	Greene
Chest & Sleep Institute of Springfield	Pulmonary Medicine	1370 E. Primrose St.	Springfield	MO	65804	NA	Greene
Headache Care Center	Medical, Nursing, Psychology, Biofeedback, and Physical Therapy	3805 S. Kansas Expressway	Springfield	MO	65807	Independent	Greene
Horizon Medical Clinic	Family Medicine, High Blood Pressure, Food Allergy Testing, Diabetes testing, Physical Exams, Laboratory Testing, Prescriptions, Minor Injuries, Bio-Identical Hormone Therapy, Chelation Therapy, D.A.N.	725 W. Battlefield	Springfield	MO	65807	NA	Greene
Ozark Medical Surgical Associates, LTD	Surgical group	3800 S. Fremont Ave	Springfield	MO	65804	NA	Greene
Fresenius Medical Care	Dialysis Facility	1675 East Seminole Suite A	Springfield	MO	65804	NA	Greene
Woman's Clinic	Gynecology and Infertility	1135 E. Lakewood, Suite 112	Springfield	MO	65810	Independent	Greene
Dr. Andy Wright, MD	Obstetrics & Gynecology	1911 S. National Ave.	Springfield	MO	65804	NA	Greene
The Foot Doctors	Podiatry	929 E. Montclair St.	Springfield	MO	65807	NA	Greene
McShane Foot & Ankle Clinic	Podiatry	3259 E. Sunshine St.	Springfield	MO	65804	NA	Greene
Dr. Gill's Immediate Care & Occupational Health Center	Independent Walk-In Clinic/Occ. Med - 24 hr coverage - Acute Care for work-related injuries, Lab & X-rays, DOT & Non-DOT Physicals, Drug Screens, Eliu.Shots..TB.Testing	3000 E. Division	Springfield	MO	65802	Independent	Greene
St. John's Clinic-Strafford	Family Medicine, Internal Medicine	363 E. Route 66	Strafford	MO	65757	St. John's	Greene
CoxHealth Center Willard	Family Medicine	304 E. Jackson, PO Box 186	Willard	MO	65781	CoxHealth	Greene
St. John's Clinic-Willard	Family Medicine	403 E. Walnut Lane	Willard	MO	65781	St. John's	Greene
CoxHealth Center Aurora	Family Medicine	106 Commerce Drive, PO Box 71	Aurora	MO	65605	CoxHealth	Lawrence
St. John's Clinic-Aurora	Family Medicine, Internal Medicine, Obstetrics, Pediatrics, General Surgery	550 Hudson Avenue	Aurora	MO	65605	St. John's	Lawrence
St. John's Hospital-Aurora	Critical Access Hospital	500 S. Porter	Aurora	MO	65605	St. John's	Lawrence
Medical Partners of Aurora - Benjamin G. Leavitt, MD	Family Practice	203 Washington St.	Aurora	MO	65605	NA	Lawrence
CoxHealth Family & Occupational Medicine of Monett	Family Medicine and Occupational Medicine	2200 E. Cleveland Ave	Monett	MO	65708	CoxHealth	Lawrence
CoxHealth Center Mt. Vernon	Obstetrics & Gynecology and Family Medicine	10763 Hwy 39	Mount Vernon	MO	65712	CoxHealth	Lawrence
St. John's Clinic-Mt. Vernon	Internal Medicine, Family Medicine, Urgent Care	1319 S. Landrum	Mount Vernon	MO	65712	St. John's	Lawrence
OCH Lawrence County Clinic	Psychiatry, Psychology, and Family Practice	108 S. Hickory	Mount Vernon	MO	65712	OCH	Lawrence
Gene Taylor VA Community Based Clinic	Outpatient Clinic	600 N. Main	Mount Vernon	MO	65712	VA	Lawrence
Mount Vernon Clinic	Family Medicine	1011 S. East St.	Mount Vernon	MO	65712	Independent	Lawrence

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
Lawrence County Health Department	Health Education, Children's Health, Women's Health, Community Health, Testing/Screenings, Environmental Services, Birth and Death Certificates	105 W. North St.	Mt. Vernon	MO	65712	County	Lawrence
Citizens Memorial Hospital	Acute Care Hospital	1500 North Oakland Ave.	Bolivar	MO	65613	CMH	Polk
CMH Bolivar Family Care Center	Family Practice	1240 North Butterfield	Bolivar	MO	65613	CMH	Polk
CMH Bolivar Medical Center	Family Practice	1100 S. Springfield, Ave	Bolivar	MO	65613	CMH	Polk
CMH Bolivar Medical Center	Psychiatry	1100 S. Springfield, Ave	Bolivar	MO	65613	CMH	Polk
CMH Bolivar OB/GYN	Obstetrics and Gynecology	1165 N. Butterfield	Bolivar	MO	65613	CMH	Polk
CMH Bolivar Surgical Clinic	General Surgery	1300 N. Oakland	Bolivar	MO	65613	CMH	Polk
CMH Butterfield Park Medical Center	Family Practice	1125 North Butterfield	Bolivar	MO	65613	CMH	Polk
CMH Butterfield Park Pediatrics	Pediatrics	1165 N. Butterfield	Bolivar	MO	65613	CMH	Polk
CMH Carrie J. Babb Cancer Center	Oncology	1501 North Oakland	Bolivar	MO	65613	CMH	Polk
CMH Endocrinology Clinic	Endocrinology	1245 N. Butterfield	Bolivar	MO	65613	CMH	Polk
CMH ENT - Facial Plastics & Reconstructive Surgery Clinic	Facial Plastics & Reconstructive Surgery	1155 W. Parkview St.,	Bolivar	MO	65613	CMH	Polk
CMH ENT and Allergy Clinic	Ears, Nose, Throat & Allergy	1245 N. Butterfield	Bolivar	MO	65613	CMH	Polk
CMH Heart Institute	Cardiology	1500 N Oakland Ave	Bolivar	MO	65613	CMH	Polk
CMH Neurology Clinic	Neurology	1245 N. Butterfield	Bolivar	MO	65613	CMH	Polk
CMH Pulmonology Clinic	Pulmonology	1245 N. Butterfield	Bolivar	MO	65613	CMH	Polk
CMH Rheumatology Clinic	Rheumatology	1245 N. Butterfield	Bolivar	MO	65613	CMH	Polk
CMH Sports and Occupational Medicine Clinic	Sports and Occupational Medicine	2230 Springfield Avenue	Bolivar	MO	65613	CMH	Polk
CMH Sports Medicine Center	Sports Medicine	1600 University Avenue	Bolivar	MO	65613	CMH	Polk
CMH Surgical Services	General Surgery	1300 N. Oakland	Bolivar	MO	65613	CMH	Polk
CMH Urology Clinic	Urology	1155 W. Parkview St.	Bolivar	MO	65613	CMH	Polk
CMH Walk-In Clinic	Urgent Care	2230 Springfield Ave.	Bolivar	MO	65613	CMH	Polk
CMH Humansville Family Medical Center	Family Practice	201 South Arthur	Humansville	MO	65674	CMH	Polk
CMH Institute for Pain Management	Pain Management	1155 W. Parkview St.	Bolivar	MO	65613	CMH	Polk
CMH Missouri Sleep Institute	Sleep Disorders	1500 N. Oakland	Bolivar	MO	65613	CMH	Polk
CMH Parkview Orthopaedic Clinic	Orthopaedics	1155 W. Parkview St.	Bolivar	MO	65613	CMH	Polk
CMH Pomme De Terre Wellness Clinic	Psychology/Psychiatry	714 N. Pomme De Terre Rd.	Bolivar	MO	65613	CMH	Polk
CMH Regional Foot and Ankle Clinic	Podiatry	785 E. Drake	Bolivar	MO	65613	CMH	Polk
OCH Polk County Clinic (Bolivar)	Family Practice	910 E. San Martin	Bolivar	MO	65613	OCH	Polk

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
Polk County Health Center	Family Health, Immunizations, Lab Services, WIC, Birth and Death Certificates, Free Clinic, Environmental Health, Emergency Service, and Health Education	1317 W Broadway	Bolivar	MO	65613	County	Polk
Bolivar Eye Specialty Center	Independent ophthalmology	1630 S. Killingsworth Road	Bolivar	MO	65613	Independent	Polk
Fresenius Medical Care	Dialysis Facility	1145 North Butterfield RD	Bolivar	MO	65613	NA	Polk
Woman's Clinic	Gynecology and Infertility	1317 W. Broadway	Bolivar	MO	65613	NA	Polk
Stone County Public Health Department - South Office	Administrative Services, Clinical Services, Community Health, Emergency Response, Environmental Services, Health Education, Vital Records, WIC	16914 State Hwy 13	Branson West	MO	65737	County	Stone
Branson West Clinic	Family Medicine	18598 State Hwy. 13 North	Branson West	MO	65737	Skaggs	Stone
Branson West Medical Care	Family Medicine	18452 State Hwy. 13	Branson West	MO	65637	Skaggs	Stone
The Foot Doctors	Podiatry	18598 State Hwy. 13	Branson West	MO	65737	Skaggs	Stone
St. John's Clinic-Branson West	Family Medicine, Urgent Care	18598 Business 13	Branson West	MO	65737	St. John's	Stone
Crane Medical Care	Family Medicine	102 Cortney Ln	Crane	MO	65633	CoxHealth	Stone
Stone County Public Health Department - North Office	Administrative Services, Clinical Services, Community Health, Emergency Response, Environmental Services, Health Education, Vital Records, WIC	109 E. 4th St.	Galena	MO	65656	County	Stone
Skaggs Medical West	Family Practice Specialist	11863 State Hwy 13	Kimberling City	MO	65686	Skaggs	Stone
Skaggs Medical West	Urgent Care	11863 State Hwy 13	Kimberling City	MO	65686	Skaggs	Stone
St. John's Clinic-Shell Knob	Family Medicine	Highway 39 & Reding Road	Shell Knob	MO	65747	St. John's	Stone
CoxHealth Center Branson	Family Medicine	890 Hwy 248	Branson	MO	65616	CoxHealth	Taney
St. John's Clinic-Branson	Family Medicine	1065 State Hwy 248	Branson	MO	65616	St. John's	Taney
St. John's Clinic-Branson	Family Medicine	260 Terrace Road	Branson	MO	65616	St. John's	Taney
St. John's Clinic-Branson	Cancer and Hematology, General and Trauma Surgery, Internal Medicine, Urgent Care, and Urology	1065 State Highway 248	Branson	MO	65616	St. John's	Taney
St. John's Clinic-Branson	Dermatology	511 Bee Creek Road	Branson	MO	65616	St. John's	Taney
St. John's Clinic-Branson	Orthopedics	512 Bee Creek Road	Branson	MO	65616	St. John's	Taney
St. John's Clinic-Hollister	Family Medicine	290 Clift Ct.	Hollister	MO	65672	St. John's	Taney
Mary's Well House	Ambulatory Medicine	5136 Hwy 265	Branson	MO	65616	Skaggs	Taney
Tri-Lakes pathology	Anatomic Pathology	251 Skaggs Road	Branson	MO	65616	Skaggs	Taney
White River Anesthesia Associates	Anesthesiology	P.O. Box 1308	Branson	MO	65616	Skaggs	Taney
Branson Heart Center	Cardiology	1150 State Hwy 248	Branson	MO	65616	Skaggs	Taney
Center for Self Control	Clinical Psychology	2460 S. Business 65	Hollister	MO	65672	Skaggs	Taney
Skaggs Pulmonology Associates	Critical Care Medicine	545 Branson Landing Blvd.	Branson	MO	65616	Skaggs	Taney

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
Branson Dermatology	Dermatology	110 Business Park Drive	Branson	MO	65616	Skaggs	Taney
Skaggs Diabetes & Endocrinology Care	Diabetes	1150 State Hwy 248	Branson	MO	65616	Skaggs	Taney
Skaggs Radiology Department	Diagnostic Radiology	251 Skaggs Road	Branson	MO	65616	Skaggs	Taney
Branson Neurology & Pain Center	Electromyography	121 Cahill Road	Branson	MO	65616	Skaggs	Taney
Skaggs Emergency Department	Emergency Medicine	251 Skaggs Road	Branson	MO	65616	Skaggs	Taney
Lakes Area Medical Clinic	Emergency Medicine	11016 E. State Highway 76	Branson	MO	65616	Skaggs	Taney
Skaggs Diabetes & Endocrinology Care	Endocrinology	1150 State Highway 248	Branson	MO	65616	Skaggs	Taney
Branson Clinic	Family Medicine	110 Business Park Drive	Branson	MO	65616	Skaggs	Taney
Bridges Walk-In Clinic	Family Medicine	256 State Hwy. Y	Forsyth	MO	65653	Skaggs	Taney
Hollister Medical Clinic	Family Medicine	115 Birch	Hollister	MO	65672	Skaggs	Taney
Skaggs Urgent Care	Family Medicine	545 Branson Landing Blvd.	Branson	MO	65616	Skaggs	Taney
Skaggs Southside Family Clinic	Family Medicine	590 Birch Street	Hollister	MO	65672	Skaggs	Taney
Branson Medical Clinic	Family Medicine	260 Terrace Road	Branson	MO	65616	Skaggs	Taney
Forsyth Medical Care	Family Medicine	13852 W. U.S. Highway 160	Forsyth	MO	65653	Skaggs	Taney
James Lukavsky, MD	Family Medicine	1756 Bee Creek Road	Branson	MO	65616	Skaggs	Taney
Premier Family Medicine South Pointe	Family Medicine	2461 State Highway	Branson	MO	65616	Skaggs	Taney
Good Shepherd Family Clinic	Family Medicine	112 Business Park Drive	Branson	MO	65616	Skaggs	Taney
Premier Family Medicine	Family Medicine	895 State Hwy. 248	Branson	MO	65616	Skaggs	Taney
Premier Family Medicine	Family Medicine	895 State Hwy. 248	Branson	MO	65616	Skaggs	Taney
Skaggs Emergency Department	Family Medicine	251 Skaggs Road	Branson	MO	65616	Skaggs	Taney
Lakes Area Medical Clinic	Family Practice Specialist	11016 E. State Highway 76	Branson	MO	65616	Skaggs	Taney
James J. Cesar, DO	General Practice	101 Skaggs Road	Branson	MO	65616	Skaggs	Taney
Surgical Partners of the Ozarks	General Surgery	800 State Hwy. 248	Branson	MO	65616	Skaggs	Taney
Rotton Surgical Group, LLC	General Surgery	650 Branson landing Blvd.	Branson	MO	65616	Skaggs	Taney
Skaggs Surgical Specialists	General Surgery	545 Branson Landing Blvd.	Branson	MO	65616	Skaggs	Taney
Surgical Associates, MD, PC	General Surgery	547 Branson Landing Blvd.	Branson	MO	65616	Skaggs	Taney
Lakes Area Medical Clinic	General Surgery	11016 E. State Highway 76	Branson	MO	65616	Skaggs	Taney
Skaggs Family Health Clinic	Gynecology	545 N. Branson Landing Blvd.	Branson	MO	65616	Skaggs	Taney
Cancer & Hematology Center	Hematology	1065 State Hwy. 248	Branson	MO	65616	Skaggs	Taney

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
Hospitalists	Hospitalist	221 Skaggs Road, Suite	Branson	MO	65616	Skaggs	Taney
Skaggs Wound Care	Hyperbaric Medicine	101 Skaggs Road	Branson	MO	65616	Skaggs	Taney
Skaggs Occupational Health Services	Industrial Medicine	121 Cahill Road	Branson	MO	65616	Skaggs	Taney
Branson Infectious Disease	Infectious Disease	545 Branson Landing Blvd	Branson	MO	65616	Skaggs	Taney
Branson Internal Medicine	Infectious Disease	1065 State Hwy. 248	Branson	MO	65616	Skaggs	Taney
Brian D. Dieterie, MD	Internal Medicine	2460 South Business 65	Hollister	MO	65672	Skaggs	Taney
Partners in Health Care	Internal Medicine	576 State Hwy. 248	Branson	MO	65616	Skaggs	Taney
Branson Infectious Disease	Internal Medicine	545 Branson Landing Blvd.	Branson	MO	65616	Skaggs	Taney
Hospitalists	Internal Medicine	221 Skaggs Road	Branson	MO	65616	Skaggs	Taney
Branson Internal Medicine	Internal Medicine	1065 State Hwy. 248	Branson	MO	65616	Skaggs	Taney
Agape Primary Care	Internal Medicine	2231 South Hwy. 65	Hollister	MO	65672	Skaggs	Taney
Branson Nephrology	Nephrology	101 Skaggs Road	Branson	MO	65616	Skaggs	Taney
Neurological & Spine Institute of the Ozarks	Neurology	121 Cahill Road	Branson	MO	65616	Skaggs	Taney
Skaggs Family Health Clinic	Obstetrics	545 N. Branson Landing Blvd.	Branson	MO	65616	Skaggs	Taney
Branson Clinic	Obstetrics & Gynecology	110 Business Park Drive	Branson	MO	65616	Skaggs	Taney
Institute for Beauty & Women's Health	Obstetrics & Gynecology	590 West Pacific	Branson	MO	65616	Skaggs	Taney
Skaggs Occupational Health Services	Occupational Medicine	121 Cahill Road	Branson	MO	65616	Skaggs	Taney
Skaggs Oncology Group	Oncology	545 Branson Landing Boulevard	Branson	MO	65616	Skaggs	Taney
Cancer & Hematology Center	Oncology	1065 State Hwy. 248	Branson	MO	65616	Skaggs	Taney
Missouri Eye Institute - Branson	Ophthalmology	1000 James Epps Road	Branson	MO	65616	Skaggs	Taney
Tri-Lakes Eye Center	Ophthalmology	915 State Hwy. 248	Branson	MO	65616	Skaggs	Taney
Oral & Maxillofacial Surgery Group	Oral & Maxillofacial Surgery	1440 State Hwy. 248	Branson	MO	65616	Skaggs	Taney
Skaggs Orthopedic Associates	Orthopaedic Surgery	121 Cahill Road	Branson	MO	65616	Skaggs	Taney
Branson Orthopedic	Orthopaedic Surgery	511 Bee Creek Road	Branson	MO	65616	Skaggs	Taney
Ozark Mountain ENT	Otolaryn & Facial Plastic Surgery	545 Branson Landing Blvd.	Branson	MO	65616	Skaggs	Taney
Branson Neurology & Pain Center	Pain Management	121 Cahill Road	Branson	MO	65616	Skaggs	Taney
Tri-Lakes pathology	Pathology - Anatomic & Clinical	251 Skaggs Road	Branson	MO	65616	Skaggs	Taney
All About Children's health	Pediatric Specialist	115 Business Park Drive	Branson	MO	65616	Skaggs	Taney
Skaggs Family Health Clinic	Pediatric Specialist	545 N. Branson Landing Blvd.	Branson	MO	65616	Skaggs	Taney
Christoffer Weber, MD	Physical Medicine & Rehabilitation	574 State Hwy. 248	Branson	MO	65616	Skaggs	Taney

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
John O. Roller	Podiatry	1691 Business Hwy. 65	Hollister	MO	65673	Skaggs	Taney
Center for Self Control	Psychotherapy	2460 S. Business 65	Hollister	MO	65672	Skaggs	Taney
Skaggs Occupational Health Services	Public Health & General Preventive Medicine	121 Cahill Road	Branson	MO	65616	Skaggs	Taney
Skaggs Pulmonology Associates	Pulmonology	545 Branson Landing Blvd.	Branson	MO	65616	Skaggs	Taney
Skaggs Oncology Group	Radiation Oncology	545 Branson Landing Blvd.	Branson	MO	65616	Skaggs	Taney
Skaggs Radiology Department	Radiology	251 Skaggs Road	Branson	MO	65616	Skaggs	Taney
Skaggs Rheumatology	Rheumatology	121 Cahill Road, Suite 205	Branson	MO	65616	Skaggs	Taney
Skaggs Regional Medical Center	Acute Care Hospital	1150 Missouri 248	Branson	MO	65616	Skaggs	Taney
Skaggs Pulmonology Associates	Sleep Disorders	545 Branson Landing Blvd.	Branson	MO	65616	Skaggs	Taney
Branson Pulmonology & Sleep Medicine	Sleep Disorders	875 E. Hwy 76	Branson	MO	65616	Skaggs	Taney
Surgical Partners of the Ozarks	Surgery - Breast	800 State Hwy. 248	Branson	MO	65616	Skaggs	Taney
Ozark Mountain ENT	Surgery - Ear, Nose & Throat	545 Branson Landing Blvd.	Branson	MO	65616	Skaggs	Taney
Surgical Partners of the Ozarks	Surgery - General	800 State Hwy. 248	Branson	MO	65616	Skaggs	Taney
Rotton Surgical Group, LLC	Surgery - General	650 Branson landing Blvd.	Branson	MO	65616	Skaggs	Taney
Skaggs Orthopedic Associates	Surgery - Orthopedic	121 Cahill Road	Branson	MO	65616	Skaggs	Taney
Skaggs Urgent Care	Urgent Care	545 Branson Landing Blvd.	Branson	MO	65616	Skaggs	Taney
Skaggs Southside Family Clinic	Urgent Care	590 Birch Street	Hollister	MO	65672	Skaggs	Taney
Tri-Lakes Urology Consultants	Urology	545 N. Branson Landing Blvd.	Branson	MO	65616	Skaggs	Taney
Taney County Health Department - East Office	Adult Health, Child Health, Immunizations, Dental, WIC, Birth & Death Certificates, Environmental Health, Emergency Preparedness, Community Health, Restaurant Inspections, Community Resources	15479 State Highway 160	Forsyth	MO	65653	County	Taney
Taney County Health Department - West Office	Adult Health, Child Health, Immunizations, Dental, WIC, Birth & Death Certificates, Environmental Health, Emergency Preparedness, Community Health, Restaurant Inspections, Community Resources	320 Rinehart Road	Branson	MO	65616	County	Taney
Free Medical Clinic of the Ozarks	to provide free quality health care and treatment to individuals who have no medical insurance and no access to quality health care. Care is offered to those with no Medicare, Medicaid or other insurance plans. The patient's income must not exceed 200% of the 2008 HHS federal poverty guidelines.	118 N. Third St. Suite C	Branson	MO	65616	NA	Taney

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
Faith Community Health	FCH provides a whole-person health model for patients, which includes medical, optometry, dental and pharmacy services. Additionally, through a partnership with the YMCA, patients get the opportunity to participate in the Healthy Lifestyles Program. This program includes classes which focus on nutrition, exercise, faith, emotions, relationships, and stress management.	610 South 6th St.	Branson	MO	65616	NA	Taney
Agape Primary Care	Primary Care	2331 S. Business Hwy 65	Hollister	MO	65672	NA	Taney
Branson Walk-In Clinic	office procedures and minor emergencies, stitches, slings, splints, EKG, Labs	1440 State Hwy 248, Suite J	Branson	MO	65616	NA	Taney
Bridges Medical Services	NA	256 State Hwy Y	Forsyth	MO	65653	Skaggs	Taney
Gene Taylor VA Community Based Clinic	Outpatient Clinic	5571 N. Gretna Road	Branson	MO	65616	VA	Taney
Partners in Health Care	NA	1232 Branson Hills Parkway	Branson	MO	65616	NA	Taney
Woman's Clinic	Gynecology and Infertility	590 Birch Road, Suite 2B	Hollister	MO	65672	NA	Taney
Options Pregnancy Clinic-Branson	Pregnancy Clinic	192 Expressway Lane	Branson	MO	65616	NA	Taney
CoxHealth Center Marshfield	Family Medicine	941 E. Hubble, PO Box 589	Marshfield	MO	65706	CoxHealth	Webster
CoxHealth Center Rogersville	Family Medicine	151 Johnstown Dr.	Rogersville	MO	65742	CoxHealth	Webster
Seymour Family Health Care	Family Medicine	202 N Commercial, PO Box 427	Seymour	MO	65746	CoxHealth	Webster
St. John's Clinic-Marshfield	Family Medicine	1040 W. Washington	Marshfield	MO	65706	St. John's	Webster
St. John's Clinic-Seymour	Family Medicine, Geriatric Medicine	418 W. Steel	Seymour	MO	65746	St. John's	Webster
St. John's Clinic-Rogersville	Family Medicine	199 Johnstown Drive	Rogersville	MO	65742	St. John's	Webster
OCH Webster County Clinic (Rogersville)	Family Practice, Geriatrics, and Rheumatology	101 S. Main	Rogersville	MO	65742	OCH	Webster
Webster County Health Unit	Community Health, Family Health, Women's Services, Emergency Preparedness, Environmental Services, Nursing Services, WIC	233 East Washington	Marshfield	MO	65706	County	Webster

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
Jordan Valley Community Health Center - Marshfield	Medical, Dental, and Laboratory Medical: Family Medicine, Pediatric Care, Internal Medicine, Geriatric Care, Primary & Preventive Health, Immunizations, Chronic Disease Management, Gynecology/Women's Health (including Show Me Healthy Women), Prenatal Care, In-patient Services & Newborn, Nursery Care, Outpatient Procedures (Circumcisions, Colposcopy, Spirometry, Endometrial Biopsy, EKG & Stress Testing, Implanon, Vasectomy, Minor Skin Procedures, Joint Injections), Diabetes Education, Dietary Counseling, Weight Management Support, In-school Primary Care, Lab Services, X-Ray WIC Mobile Services	1166 Banning St.	Marshfield	MO	65706	JVCHC	Webster
Fordland Clinic, Inc.	Medical and Dental Services	1059 Barton Dr.	Fordland	MO	65652	Fordland Clinic	Webster
Wellpointe Family Medical Clinic - Marshfield	NA	543 W. Hubble Dr.	Marshfield	MO	65706	Wellpointe Family Medical Clinic	Webster
Baxter Regional Ash Flat Clinic	NA	49 Highway 62/412	Ash Flat	AR	72513	BRMC	Baxter, AR
Baxter Regional Medical Center	Acute Care Hospital	624 Hospital Drive	Mountain Home	AR	72653	BRMC	Baxter, AR
Baxter Regional Bone and Joint Associates - Medical Arts Building, Suite E	NA	628 Hospital Drive	Mountain Home	AR	72653	BRMC	Baxter, AR
Baxter Regional Heart Clinic	NA	555 West 6th Street	Mountain Home	AR	72653	BRMC	Baxter, AR
Baxter Regional Pediatric Clinic	NA	230 Highway 5 N, Suite 200	Mountain Home	AR	72653	BRMC	Baxter, AR
Baxter Regional Pulmonary Clinic - Medical Arts Building, Suite 3A	NA	628 Hospital Drive	Mountain Home	AR	72653	BRMC	Baxter, AR
Baxter Regional Rheumatology Clinic	NA	310 Buttercup Drive, Suite C	Mountain Home	AR	72653	BRMC	Baxter, AR
Baxter Regional Urology Clinic - Medical Arts Building, Suite 3A	NA	628 Hospital Drive	Mountain Home	AR	72653	BRMC	Baxter, AR
Baxter Regional Wound Healing Center	NA	970 Burnett Drive	Mountain Home	AR	72653	BRMC	Baxter, AR
The Clinic at Wal-Mart operated by Baxter Regional Medical Center	NA	65 Walmart Drive	Mountain Home	AR	72653	BRMC	Baxter, AR
The Mruk Family Center on Aging	"Journey to Healthy Aging" programs; AARP safe driver courses; Education and support groups; Resource library; Family caregiver workshops; "Strong Women" exercise program; Medicare drug plan assistance; and "Lunch and Learn" programs	624 Hospital Drive	Mountain Home	AR	72653	BRMC	Baxter, AR

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
Speech Therapy	Swallowing difficulties; difficulties understanding and/or expressing spoken or written language; children with developmental delays; oral and facial muscle deficits due to trauma, surgery, or neurological disease; disorders of articulation, voice, and fluency	21 Medical Plaza	Mountain Home	AR	72653	BRMC	Baxter, AR
Hospice of the Ozarks	Nursing with emphasis on pain and symptom control; Personal care; Social services and counseling; Medications, medical supplies and equipment; Spiritual support; Bereavement assistance; Transportation; Referral to community resources; Staff on call 24 hours a day, 7 days a week	701 Burnett Drive	Mountain Home	AR	72653	BRMC	Baxter, AR
Baxter Regional Medical Center Home Health	Home Health	701 Burnett Drive	Mountain Home	AR	72653	BRMC	Baxter, AR
Baxter County Health Unit	Community Services, Environmental Health, Family Planning, HIV/STD, Immunizations, In-Home Services, Maternity, Public Health Preparedness, TB Program, Vital Records, WIC, Women's Health	206 Bucher	Mountain Home	AR	72653	County	Baxter, AR
Mountain Home Christian Clinic	Medical Care, Dental Care, Eye Care, Pharmacy Services, and Personal Services	421 W. Wade Ave	Mountain Home	AR	72653	Mountain Home Christian Clinic	Baxter, AR
Boone County Health Unit	Immunizations, WIC, Family Planning, Breat Care Program, Maternity Program, STD Screening, Communicable Disease, Tuberculosis Screening & Treatment, Vital Records, Voter Registration, Environmental Health, In-Home Services	1622 Campus Drive	Harrison	AR	72601	County	Boone, AR
North Arkansas Regional Medical Center	Acute Care Hospital	620 North Main	Harrison	AR	72601	NARMC	Boone, AR
Bill Mears, M.D. Ronald Revard, M.D.	Cardiology	702 N. Spring St.	Harrison	AR	72602	NARMC	Boone, AR
Stacy Armstrong, D.O. Victor Armstrong, D.O.	Family Practice	602 N. Pine	Harrison	AR	72601	NARMC	Boone, AR
Shannon Brownfield, M.D. Jose Padilla, M.D. Ali Abdelaal, M.D. MaxAnn Ferguson, M.D. Scott Ferguson, M.D. R. Marcus Causey, M.D.	Family Practice General Surgery Oncology, Hematology Urology Urology	715 W. Sherman	Harrison	AR	72601	NARMC	Boone, AR
Victor Chu, M.D. Kevin Jackson, M.D. Rebecca Simon, M.D.	Family Practice, Obstetrics	1420 Hwy 62-65 N	Harrison	AR	72601	NARMC	Boone, AR

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
Cathy Clary, M.D.	Family Practice						
Kenneth Collins, M.D.	Family Practice	520 N. Spring	Harrison	AR	72601	NARMC	Boone, AR
Tom Langston, M.D.	Family Practice						
Philip Milam, D.D.S.	Oral Surgery						
Geoffrey Dunaway, M.D.	Family Practice, Obstetrics	406 N. Willow	Harrison	AR	72601	NARMC	Boone, AR
James Hawk, M.D.	Family Practice	303 W. Newman Ave.	Harrison	AR	72601	NARMC	Boone, AR
Corey Jackson, M.D.	Family Practice	1417 Gladden Street	Harrison	AR	72601	NARMC	Boone, AR
John Leslie, M.D.	Family Practice, Obstetrics	306 N. Chestnut	Harrison	AR	72601	NARMC	Boone, AR
Thomas Leslie, M.D.	Pediatrics						
Sharon Leslie, M.D.	Family Medicine, Sports Medicine	724 N. Spring Street	Harrison	AR	72602	NARMC	Boone, AR
Brian Linn, M.D.							
Ronald Reese, M.D.	Family Practice, Obstetrics	114 E. Crandall, Box 458	Harrison	AR	72601	NARMC	Boone, AR
Sam Scroggins, M.D.	Family Practice	1002 N. Spring St.	Harrison	AR	72601	NARMC	Boone, AR
Lynette Johnson, M.D.	General Surgery	604 N. Spring St.	Harrison	AR	72601	NARMC	Boone, AR
James Langston, M.D.							
Christopher Taylor, M.D.	OB/GYN	1425 Rock Springs Road	Harrison	AR	72601	NARMC	Boone, AR
Dawn Phelps, M.D.	OB/GYN						
Steven Shrum, M.D.	Family Practice, Pediatrics	825 N. Main	Harrison	AR	72601	NARMC	Boone, AR
R. Blake Chitsey, M.D.	Internal Medicine	707 N. Main	Harrison	AR	72601	NARMC	Boone, AR
Charles R. Klepper, M.D.							
Tarik Sidani, D.O.	Orthopedics	224 W. Erie	Harrison	AR	72601	NARMC	Boone, AR
Patricia Bell, M.D.	Otolaryngology	106 E. Crandall	Harrison	AR	72601	NARMC	Boone, AR
Robert Miller, M.D.	Pathology	620 N. Main	Harrison	AR	72601	NARMC	Boone, AR
Asish Ghosh, M.D.	Pediatrics	1418 McCoy Dr.	Harrison	AR	72601	NARMC	Boone, AR
Claude Parrish Radiation Therapy Institute Craig Olson, M.D.	NA	620 N. Main	Harrison	AR	72601	NARMC	Boone, AR
NARMC Radiology Chris Bennett, M.D. Robert Brand, M.D.	Radiology	620 N. Main	Harrison	AR	72601	NARMC	Boone, AR
Ronald Rubio, M.D.	Internal Medicine, Rheumatology	123 Claude Parrish Ave.	Harrison	AR	72601	NARMC	Boone, AR
The Medical Clinic Mission of Harrison, AR	The Medical Clinic Mission is a faith based all volunteer ministry to patients who have no insurance of any kind and are at 150% poverty level.	1400 South Pine	Harrison	AR	72601	The Medical Clinic Mission	Boone, AR
Gene Taylor VA Community Based Clinic	Outpatient Clinic	707 North Main St.	Harrison	AR	72601	VA	Boone, AR
Cedar County Memorial Hospital	Critical Access Hospital	1401 South Park	El Dorado Springs	MO	64744	Cedar County Memorial Hospital	Cedar

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
Cedar County Health Department	Women's Clinic, Show Me Healthy Women, Maternal and Child Care, WIC, Child Care Nursing Consultation, and Birth and Death Certificates	1317 S. Highway 32	El Dorado Springs	MO	64744	County	Cedar
St. John's Clinic-El Dorado Springs	Family Medicine	309 E. Hospital Road	El Dorado Springs	MO	64744	St. John's	Cedar
Cedar County Medical Mall	Cardiac Rehab, Home Health, Family Medicine, and Obstetrics Medical Mall Clinic Cardiac Rehabilitation Center Cedar County Home Health Services	1317 S. Highway 32	Eldorado Springs	MO	64744	Cedar County Memorial Hospital	Cedar
Cedar County Memorial Hospital	Freeman Health System Cardiology	1401 S. Park Street	Eldorado Springs	MO	64744	Freeman	Cedar
Stockton Health Complex	Stockton Family Clinic Stockton Exercise Center	807 Owen Mill Road	Stockton	MO	65785	Cedar County Memorial Hospital	Cedar
Stockton Family Medical Center	Cedar County Health Agency - Stockton Family Practice	810 South Street	Stockton	MO	65785	CMH	Cedar
Stockton Lake Walk In Clinic	NA	913 South Street	Stockton	MO	65785	Dr. David E. Smock, M.D.	Cedar
Dade County Family Medical Center	Family Practice	105 N. Grand	Greenfield	MO	65661	CMH	Dade
Dade County Health Department	Adult and children's immunizations, Advance Health Care Directives, Bike Helmets, Birth Control, Birth and Death Certificates, Bureau of Special Health Care Needs Service Coordination, Car Seats and Installation, Environmental Services, Flu Shot Clinics, GED Classes, Health Education, Nursing Services, Pregnancy Testing, Temporary Medicaid, WIC Program/Nutrition Education and Women's Clinic	413 W Water Street	Greenfield	MO	65662	County	Dade
Lockwood Clinic	NA	723 South Main Street	Lockwood	MO	65682	NA	Dade
Greenfield Medical Center	Family Practice	123 N Wetzel Street	Greenfield	MO	65661	Dr. Michael K. Bennett, M.D.	Dade
St. John's Clinic-Lockwood	Family Practice	1307 South Main Street	Lockwood	MO	65682	St. John's	Dade
Associates in Medicine	Family Practice	630 E. Buffalo St.	Buffalo	MO	65613	CMH	Dallas
Dallas County Family Medical Center	Family Practice	201 S. Ash	Buffalo	MO	65622	CMH	Dallas
Dallas County Health Department	Birth/Death Certificates, Bright Smiles - Preventative Oral Health, Chronic Disease Primary Prevention, Communicable Disease Surveillance, Emergency Management, Environmental Services, Health Education, Immunizations, Laboratory Services, Maternal and Child Health, Nursing Services, Prenatal Case Management, Safe Crib Program, WIC, Women's Health	1011 W. Main	Buffalo	MO	65622	County	Dallas
CoxHealth Center Buffalo	Family Medicine	119 N. Ash St	Buffalo	MO	65622	CoxHealth	Dallas

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
St. John's Clinic-Buffalo	Family Medicine	118 W. Dallas	Buffalo	MO	65622	St. John's	Dallas
Urbana Medical Clinic	Family Practice	311 West Broadway	Urbana	MO	65767	CMH	Dallas
Douglas County Health Department	Tobacco, Early Childhood Asthma Initiative, Diabetes, Pre-natal Case Management, Child Care Health Consultation, Unintentional Injury Prevention, WIC, Health Education, Health Screenings, Vital Records, Emergency Planning, Environmental Health, and Immunizations	603 N.W. 12th Ave	Ava	MO	65608	County	Douglas
CoxHealth Center Ava	Family Medicine	806 SW 13th Ave, PO Box 1105	Ava	MO	65608	CoxHealth	Douglas
Missouri Ozarks Community Health	Medical, Dental, Mental Health, and Pharmacy Services	504 NW 10th Ave.	Ava	MO	65608	MO Ozarks Community Health	Douglas
Chern Medical Clinic	Family Practice	1301 S. Jefferson St	Ava	MO	65608	NA	Douglas
Chern Medical Clinic	Family Practice	1623 Lakeview Dr	Ava	MO	65608	NA	Douglas
Option Pregnancy Clinic-Ava	Pregnancy Clinic	201 Jefferson Street	Ava	MO	65608	NA	Douglas
St. John's Clinic-Ava	Family Medicine	1312 North Hwy 5	Ava	MO	65608	St. John's	Douglas
Hermitage Family Medical Center	Family Practice	Hwy 254 & Dallas	Hermitage	MO	65668	CMH	Hickory
Hickory County Health Department	Healthy & Active Communities, Family Planning, Women's Health, WIC, Immunizations, STDs, Cancer Control, Vital Records, and Environmental Health	201 Cedar Street	Hermitage	MO	65668	County	Hickory
Thomas Medical Center		101 Oak Street	Hermitage	MO	65668	NA	Hickory
Lake Area Primary Care		Highway 54	Wheatland	MO	65779	NA	Hickory
Good Samaritan Care Clinic	medical needs of the uninsured	409 E. US Hwy 60	Mountain View	MO	65548	NA	Howell
McVicker Family Healthcare	Family Medicine	220 N. Elm Street	Mountain View	MO	65548	OMC	Howell
St. John's Hospital-St. Francis	Critical Access Hospital	100 West Highway 60	Mountain View	MO	65548	St. John's	Howell
Howell County Health Department	Food sanitation & protection and inspection, Sewage Treatment Complaint/Inspection, Solid Waste Disposal, Daycare Licensing Inspection, Lodging Sanitation, Institutional Sanitation, Community Environmental Sanitation, Water Supply Evaluation, General Vector Control, Occupational Health, Consumer Product Safety, Fire Safety, Risk Assessment, Recreational Waters, Building Related Illnesses, and Epidemiological Investigation	180 S. Kentucky Street	West Plains	MO	65775	County	Howell

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
Southern Missouri Community Health Center	Medical and Dental Clinic Internal Medicine (x2) Pediatrics Family Medicine wwith Obstetrics ABRN	1137 Independence Dr.	West Plains	MO	65775	NA	Howell
West Plains Christian Clinic	basic medical care, psychological and spiritual counseling, vision care, and physical therapy	1115 Alaska Street, Suite 212	West Plains	AR	65775	NA	Howell
Burton Creek Rural Clinic	obstetrics, orthopedics, general surgery, nephrology, social work, and pharmacy	805 N. Kentucky Ave #1	West Plains	MO	65775	NA	Howell
VA West Plains CBOC	NA	1211 Missouri Ave	West Plains	MO	65775	NA	Howell
Behavioral Healthcare Primary Care	Behavioral Health	909 Kentucky	West Plains	MO	65775	OMC	Howell
Heart Care Services	Cardiology	1115 Alaska Avenue	West Plains	MO	65775	OMC	Howell
Neurosciences Center	Neuroscience	1100 Kentucky Ave.	West Plains	MO	65775	OMC	Howell
OMC Internal Medicine Clinic	Internal Medicine	1115 Alaska Avenue	West Plains	MO	65775	OMC	Howell
Ozark Works	Occupational Medicine	181 N. Kentucky	West Plains	MO	65775	OMC	Howell
Rheumatology Clinic	Rheumatology	2900 Independence Square	West Plains	MO	65775	OMC	Howell
Urgent Care Clinic	Urgent Care	181 Kentucky Avenue	West Plains	MO	65775	OMC	Howell
Orthopaedic Clinic	Orthopaedics	1609 Porter Wagoner Blvd	West Plains	MO	65775	OMC	Howell
Women's Health Care Clinic	Obstetrics and Gynecology	1727 Gibson Street	West Plains	MO	65775	OMC	Howell
Nephrology Clinic	Nephrology	3000 Independence Square	West Plains	MO	65775	OMC	Howell
Pain Management	Pain Management	3000 Independence Square	West Plains	MO	65775	OMC	Howell
Surgical Specialists Clinic	General and Laparoscopic surgery and Neurosurgery	2600 Independence Square	West Plains	MO	65775	OMC	Howell
Ozarks Medical Center Cancer Treatment Center	Oncology	1111 Kentucky Avenue	West Plains	MO	65775	OMC	Howell
OMC Imaging Center	Imaging	3102 Independence Square	West Plains	MO	65775	OMC	Howell
Shaw Medical Building - Breast Care Center	Breast Care	1111 Kentucky Ave.	West Plains	MO	65775	OMC	Howell
Ozarks Medical Center	Acute Care Hospital	1100 Kentucky Ave.	West Plains	MO	65775	Ozarks Medical Center (OMC)	Howell
Jones Eye Surgery Clinic	Ophthalmology and Surgery	1405 Doctors Drive	West Plains	MO	65775	TCMH	Howell
Medical Clinic of Willow Springs	Family Medicine	816 E. Main	Willow Springs	MO	65793	CoxHealth	Howell
Westwood Rural Clinic	NA	2646 State Route 76	Willow Springs	MO	65793	NA	Howell
Valley Medical Center	NA	308 South Harris Street	Willow Springs	MO	65793	NA	Howell
St. John's Clinic-Willow Springs	Family Medicine	1202 East Main	Willow Springs	MO	65793	St. John's	Howell

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
Access Family Care - Carthage	NA	800 Grant St.	Carthage	MO	64836	ACCESS Family Care	Jasper
Jasper County Health Department	Immunizations, Pregnancy tests / Temporary Medicaid, HIV testing and counseling, STD checks, Lead Screenings, Communicable disease, follow-up, Assist with MO Health Net, Breast / Cervical Cancer Screening, High risk prenatal case-management, health education	105 Lincoln St.	Carthage	MO	64836	County	Jasper
Carthage Family Medical Center on Hazel	Internal Medicine	1615 Hazel St.	Carthage	MO	64836	Freeman	Jasper
Carthage Specialty Clinic	Social worker, Clinical Hypnotherapist	1500 Case Street	Carthage	MO	64836	Freeman	Jasper
Dr. Thomas (Brad) Coy	General Surgery, Vascular Surgery	3125 Dr. Russell Smith Way	Carthage	MO	64836	Freeman	Jasper
Christopher Andrew, MD	Neurology	3125 Dr. Russell Smith Way	Carthage	MO	64836	Freeman	Jasper
McCune-Brooks Regional Hospital	Critical Access Hospital	3125 Dr. Russell Smith W	Carthage	MO	64836	MBRH	Jasper
John Haffner, M.D.	Family Practice, Community Medicine	3116 Medical Park Drive	Carthage	MO	64836	MBRH	Jasper
Elizabeth Barlet, M.D.	Gynecology/Obstetrics, Gynecology						
Lydia Keisler, M.D.	Gynecology/Obstetrics, Gynecology						
Maritza Manrique-Kiniry, M.D.	Gynecology/Obstetrics, Gynecology	1515 Hazel	Carthage	MO	64836	MBRH	Jasper
Barbara Chilton D.O.	Pediatrics						
Joselyn Mawo, M.D.	Pediatrics						
St. John's Clinic-Carthage	Family Medicine	1615 Hazel Ave.	Carthage	MO	64836	St. John's, Jop	Jasper
Access Family Care - Joplin	Obstetrics/gynecology, Prenatal, Pediatrics, Well-child visits, Vaccines for Children, Adolescent health, Family Practice, Internal Medicine, Geriatrics Family dental care, Chronic illness treatment through the Chronic Care Model which includes:Diabetes care, Chronic Obstructive Pulmonary Disease (COPD), Cardio-vascular disease,Laboratory Services, Referral for Mental Health Services, Nutrition Care, Pregnancy testing, Social services, Cancer screenings, Spanish interpretations, 340B pharmacy discounts, Prescription Assistance Program, and Show Me Healthy Women	530 S. Maiden Lane	Joplin	MO	64801	ACCESS Family Care	Jasper
Pediatric Clinic	Pediatrics	702 East 34th Street	Joplin	MO	64804	Freeman	Jasper
Pediatric Clinic	Pediatrics	336 South Jefferson	Joplin	MO	64804	Freeman	Jasper
Pediatric Clinic	Pediatrics	1030 McIntosh Circle Drive	Joplin	MO	64804	Freeman	Jasper
Pediatric Clinic	Pediatrics	3333 McIntosh Circle Drive	Joplin	MO	64804	Freeman	Jasper

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
Freeman Ear, Nose, & Throat	Otolaryngology	1331 West 32nd Street	Joplin	MO	64804	Freeman	Jasper
Freeman Hospital West	Emergency Medicine	1102 West 32nd Street	Joplin	MO	64804	Freeman	Jasper
<i>Emergency Clinic</i>	Emergency Medicine	4321 West 26th Place	Joplin	MO	64804	Freeman	Jasper
Freeman Urgent Care	Emergency Medicine	1130 E. 32nd St.	Joplin	MO	64804	Freeman	Jasper
David Straub, MD	Allergy & Immunology, Pediatrics	706 West 26th Street	Joplin	MO	64804	Freeman	Jasper
Ozark Center	Behavioral Health	1105 E. 32nd Street	Joplin	MO	64804	Freeman	Jasper
Dr. Bruce Akuna	Family Practice	3202 McIntosh Circle	Joplin	MO	64804	Freeman	Jasper
Freeman Cancer Institute	Oncology/Hematology	3415 McIntosh Circle Drive	Joplin	MO	64804	Freeman	Jasper
Freeman Midwest Orthopaedics	Orthopaedic Surgery, Sports Medicine	3105 McClelland Boulevard	Joplin	MO	64804	Freeman	Jasper
Pinkerton Pain Therapy	Pain Management	3126 Wisconsin Avenue	Joplin	MO	64804	Freeman	Jasper
Center for Geriatric Medicine	Hospitalist, Geriatric Medicine, Emergency Medicine, and Family Practice	931 East 32nd Street	Joplin	MO	64804	Freeman	Jasper
M&T Dermatology Services, LLC	Dermatology	2829 South Jackson Avenue	Joplin	MO	64804	Freeman	Jasper
Dr. Iftikhar Ali	Internal Medicine	2216 East 32nd Street	Joplin	MO	64804	Freeman	Jasper
Samuel Carter, MD	Internal Medicine	2024 Maiden Lane	Joplin	MO	64804	Freeman	Jasper
Midwest Surgery Inc.	General Surgery	1710 West 26th Street	Joplin	MO	64804	Freeman	Jasper
The Juno Group	Obstetrics & Gynecology	3103 McClelland Boulevard	Joplin	MO	64804	Freeman	Jasper
ACCESS Family Care	Obstetrics & Gynecology	530 South Maiden Lane	Joplin	MO	64801	Freeman	Jasper
Community Clinic of Joplin	medical and dental care for the uninsured	701 S. Joplin Ave	Joplin	MO	64801	NA	Jasper
St. John's Clinic-Joplin	Anesthesiology	2727 McClelland Blvd.	Joplin	MO	64804	St. John's, Jop	Jasper
St. John's Clinic-Joplin	Cardiology	2817 McClelland Blvd.	Joplin	MO	64804	St. John's, Jop	Jasper
St. John's Clinic-Joplin	Colon and Rectal Surgery	2817 McClelland Blvd.	Joplin	MO	64804	St. John's, Jop	Jasper
St. John's Clinic-Joplin	Ear, Nose & Throat (Otolaryngology)	2817 McClelland Blvd.	Joplin	MO	64804	St. John's, Jop	Jasper
St. John's Clinic-Joplin	Emergency Medicine	2727 McClelland Blvd.	Joplin	MO	64804	St. John's, Jop	Jasper
St. John's Clinic-Joplin	Endocrinology	2817 McClelland Blvd.	Joplin	MO	64804	St. John's, Jop	Jasper
St. John's Clinic-Joplin	Family Medicine	2817 McClelland Blvd.	Joplin	MO	64804	St. John's, Jop	Jasper

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
St. John's Clinic-Joplin	Family Medicine	1313 S. Rangeline	Joplin	MO	64801	St. John's, Jop	Jasper
St. John's Clinic-Joplin	General and Trauma Surgery	2817 McClelland Blvd.	Joplin	MO	64804	St. John's, Jop	Jasper
St. John's Clinic-Joplin	Infectious Diseases	2817 McClelland Blvd.	Joplin	MO	64804	St. John's, Jop	Jasper
St. John's Clinic-Joplin	Internal Medicine	3126 Jackson Ave.	Joplin	MO	65804	St. John's, Jop	Jasper
St. John's Clinic-Joplin	Mammography	2817 McClelland Blvd.	Joplin	MO	64804	St. John's, Jop	Jasper
St. John's Clinic-Joplin	Neurology	2817 McClelland Blvd.	Joplin	MO	64804	St. John's, Jop	Jasper
St. John's Clinic-Joplin	Obstetrics and Gynecology	2817 McClelland Blvd.	Joplin	MO	64804	St. John's, Jop	Jasper
St. John's Clinic-Joplin	Physical Medicine and Rehab	2931 McClelland Blvd.	Joplin	MO	64804	St. John's, Jop	Jasper
St. John's Clinic-Joplin	Pulmonology	2817 McClelland Blvd.	Joplin	MO	64804	St. John's, Jop	Jasper
St. John's Clinic-Joplin	Radiology	2817 McClelland Blvd.	Joplin	MO	64804	St. John's, Jop	Jasper
St. John's Clinic-Joplin	Radiology	2727 McClelland Blvd.	Joplin	MO	64804	St. John's, Jop	Jasper
St. John's Clinic-Joplin	Surgical Oncology	2817 McClelland Blvd.	Joplin	MO	64804	St. John's, Jop	Jasper
St. John's Clinic-Joplin	Urgent Care	1313 S. Rangeline	Joplin	MO	64801	St. John's, Jop	Jasper
St. John's Clinic-Joplin	Wound Care	2817 McClelland Blvd.	Joplin	MO	64804	St. John's, Jop	Jasper
St. John's Hospital-Joplin	Acute Care Hospital	2727 McClelland Boulevard	Joplin	MO	64804	St. John's, Jop	Jasper
Dr. Tracy Godfrey	Family Practice	3126 South Jackson Ave	Joplin	MO	64804	Freeman	Jasper
Michael Joseph, MD	Allergy and Immunology, Rheumatology	1010 South Madison	Webb City	MO	64870	Freeman	Jasper
Michael Joseph, MD	Allergy & Immunology, Rheumatology	1010 South Madison, suite H	Webb City	MO	64870	Freeman	Jasper
Freeman Urgent Care	Emergency Medicine - Urgent Care	1010 S. Madison	Webb City	MO	64870	Freeman	Jasper
OCH Jasper County Clinic (Webb City)	Family Practice and Pain Management	112 N. Webb	Webb City	MO	64870	OCH	Jasper
St. John's Clinic-Webb City	Family Medicine	1715 South Madison	Webb City	MO	64870	St. John's, Jop	Jasper
Laclede County Health Department	Immunizations, Blood Pressure Screening, Blood Sugar Testing, Hemoglobin Testing, Pregnancy Testing/Counseling/Referral, Women's Health Clinic, Physician's Clinic, Communicable Disease, Lead Testing, MCH, Diabetic Foot/Nail Care, Land & Aquatic Exercise Classes, Influenza Clinics, School Screenings, DNA Cheek Swabs, Vital Records, Referrals, Community Speaking & Health Education, WIC, Environmental sanitation	405 Harwood Avenue	Lebanon	MO	65536	County	Laclede

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
CoxHealth Center Lebanon	Family Medicine	510 E Hwy 32	Lebanon	MO	65536	CoxHealth	Laclede
Family Health Associates	Family Medicine	341 Hospital Drive	Lebanon	MO	65536	Independent	Laclede
St. John's Clinic-Lebanon	Cancer and Hematology, Hospitalists, Plastic and Reconstructive Surgery, and Radiology	100 Hospital Dr.	Lebanon	MO	65536	St. John's	Laclede
St. John's Clinic-Lebanon	Ear, Nose & Throat (Otolaryngology), Family Medicine, General and Trauma Surgery, Internal Medicine, Orthopedics, Pediatrics	120 Hospital Dr.	Lebanon	MO	65536	St. John's	Laclede
St. John's Hospital-Lebanon	Acute Care Hospital	100 Hospital Drive	Lebanon	MO	65536	St. John's	Laclede
St. John's Clinic-Lebanon	Obstetrics and Gynecology, Family Medicine	331 Hospital Dr.	Lebanon	MO	65536	St. John's	Laclede
Gainesville Medical Center	NA	404 W. Highway 160	Gainesville	MO	65655	NA	Ozark
Ozark County Health Department	Immunizations, Asthma, Child Care Consultation, Chronic Disease, Community Resource, Communicable Disease, Environmental Sanitation, Flu Vaccine, Health Education, Homemaker Chores, HPV vaccine, Lead Testing, Personal Care, Public Speaking, Ready in 3, RN Meds, Shingles Vaccine, Supporting Parents, Traveling Vaccines, Vital Statistics, WIC, Tetanus Booster, STD Screening, Swine Flu	304 Third Street	Gainesville	MO	65655	County	Ozark
Missouri Ozarks Community Health	medical dental, and mental health services	201 S. Elm Street	Gainesville	MO	65655	NA	Ozark
Pulaski County Health Department	Immunizations, Women's Wellness, Family Planning, STD Planning, STD Testing, Pregnancy Testing, Exercise Classes, Smoking Cessation Classes, WIC, Communicable Disease Program, Chronic Disease Self-Management	101 12th Street	Crocker	MO	65452	County	Pulaski
Crocker Medical Center	NA	101 North Commericia	Crocker	MO	65452	NA	Pulaski
Colyer Medical Center	possible - osteopathic physician's office	100 East 5th Street	Dixon	MO	65459	NA	Pulaski
Central Ozarks Medical Center	X-Ray, ultrasound, telemedicine, Lab testing, pediatrics, mental health, OB/GYN, Geriatrics, ECG, Family Medicine, Dental	304 West Washington	Richland	MO	65556	NA	Pulaski
St. John's Clinic-Richland	Family Medicine	904 South Pine	Richland	MO	65556	St. John's	Pulaski
St. John's Clinic-St. Roberts	Family Medicine, General and Trauma Surgery, Geriatric Medicine, Internal Medicine	608 City Route 66	St. Robert	MO	65584	St. John's	Pulaski

APPENDIX 4. Existing Health Care Facilities and Resources Within the Community

Facility	Specialty/Services	Address	City	State	Zip	Affiliation	County
Pulaski Medical Clinic	Family Medicine, Internal Medicine, General Surgery, Orthopedic Surgery, Podiatry, Nephrology, Physical Medicine and Rehabilitation, Obstetrics and Gynecology, Pediatrics, and Pediatric Dentistry	107 Ichord Road	Waynesville	MO	65583	PCRMC	Pulaski
Texas County Health Department - Cabool	NA	519 Main Street	Cabool	MO	65689	County	Texas
TCMH Cabool Medical Clinic	family practice	500 Main Street	Cabool	MO	65689	TCMH	Texas
Texas County Health Department - Houston	NA	950 N. Hwy 63	Houston	MO	65483	County	Texas
Texas County Memorial Hospital	Acute Care Hospital	333 S. Sam Houston Blvd	Houston	MO	65483	TCMH	Texas
TCMH Medical Complex, Houston	general surgery, internal medicine, family medicine, family practice with obstetrics,	1337 S. Sam Houston Blvd	Houston	MO	65483	TCMH	Texas
Patricia A. Benoist, MD, St. John's Clinic	Family Medicine	1422 S. Sam Houston Blvd.	Houston	MO	65483	TCMH	Texas
Texas County Health Department - Licking	NA	NA	Licking	MO	65542	County	Texas
TCMH Family Clinic, Licking	family practice	233 S. Main Street	Licking	MO	65542	TCMH	Texas
Texas County Health Department - Summersville	NA	NA	Summersville	MO	65571	County	Texas
St. John's Clinic - Summersville	No personnel	149 Rogers Ave.	Summersville	MO	65571	St. John's	Texas
Summersville Community Clinic	family practice	805 Second Street	Summersville	MO	65571	TCMH	Texas
Wright County Health Department - Main	B/P screening, Car seat/bike helmets & education, child care consultation, child care sanitation, cpr training, family planning, head start screening, health education, immunization, prenatal case management, show me healthy women, STD screening & treatment, WIC	300 South Main, Suite C	Hartsville	MO	65667	County	Wright
Hartville Medical Center	Family Medicine	275 S. School Avenue	Hartville	MO	65667	Independent	Wright
Missouri Ozarks Community Health - Mansfield	medical dental, and mental health services	804 N. Highway 5	Mansfield	MO	65704	NA	Wright
Wright County Health Department - Secondary	B/P screening, Car seat/bike helmets & education, child care consultation, child care sanitation, cpr training, family planning, head start screening, health education, immunization, prenatal case management, show me healthy women, STD screening & treatment, WIC	602 E. State, Suite A	Mountain Grove	MO	65711	County	Wright
Mountain Grove Medical Complex	NA	1604 N. Main St.	Mountain Grove	MO	65711	OMC	Wright
St. John's Clinic-Mountain Grove	Family Medicine	120 W 16th Street	Mountain Grove	MO	65711	St. John's	Wright
TCMH Mountain Grove Clinic	family practice	1905 West 19th Street	Mountain Grove	MO	65711	TCMH	Wright
Cox Family Medicine of Mountain Grove	Family Medicine	1602-A N. Main	Mtn. Grove	MO	65711	CoxHealth	Wright

Appendix 5: Public Health Survey

CoxHealth Public Health Survey

January 2012

CoxHealth Marketing and Planning Department

Appendix 5: Public Health Survey

In January 2012, CoxHealth sent the Public Health Survey to the following:

Public Health Departments

Dallas County Health Department
 Cedar County Health Department
 Dade County Health Department
 Lawrence County Health Department
 Hickory County Health Department
 Polk County Health Center
 Howell County Health Department
 Laclede County Health Department
 Christian County Health Department
 Springfield-Greene County Health Department
 Taney County Health Department
 Barry County Health Department
 Stone County Public Health Department
 Webster County Health Unit
 Baxter County Health Unit
 Boone County Health Unit
 Douglas County Health Department
 Jasper County Health Department
 Ozark County Health Department
 Pulaski County Health Department
 Texas County Health Department
 Wright County Health Department

Local Community Agencies

MS Society - Mid- America Chapter
 CASA of Southwest Missouri
 The Kitchen Inc
 Springfield Area Chamber of Commerce
 Camp Barnabas

Foundation for Springfield Public Schools
 Care To Learn
 Springfield Sheltered Workshop Inc
 Harmony House
 Make A Wish Foundation of MO - Southern MO office
 NAMI of Southwest MO
 Developmental Center of the Ozarks (DCO)
 Ozark s Area Community Action Corporation - OACAC
 Ozarks area Community Action Corporation-OACAC Head Start
 The Arc of the Ozarks
 The Arc Foundation
 Breast Cancer Foundation of the Ozarks
 ALS Association - Keith
 Worthington Chapter
 Gyn Cancers Alliance (GYNCA)
 Urban Districts Alliance
 Lost and Found Grief Center
 Southwest Missouri Office on Aging
 Alzheimer's Association, SWMO
 Community Alliance for Compassionate Care at the End of Life
 Big Brothers Big Sisters of the Ozarks
 Hand In Hand Multicultural Center
 March of Dimes - Ozark Division
 Doula Foundation of Mid-America, Inc.
 American Diabetes Association
 Juvenile Diabetes Research Foundation of the Ozarks
 American Red Cross Greater Ozarks Chapter
 The Child Advocacy Center, Inc.
 AIDS Project of the Ozarks
 Council of Churches (a.k.a. Long-Term Care Ombudsman Operating Agency)
 The Victim Center
 Down Syndrome Group of the Ozarks
 American Cancer Society

American Heart Association - Midwest Affiliate
 Pregnancy Care Center
 Community Blood Center of the Ozarks

Regional Services Clinics

Adult Medicine & Endocrinology Specialists
 Cassville Medical Care Associates
 Cox C.A.R.E. Mobile
 Cox Family Medicine Associates
 Cox Family Medicine of Monett
 Cox Family Medicine of Mountain Grove
 Cox Hyperbaric Medicine and Wound Care
 Cox Senior Health Center - North
 Cox Senior Health Center - South
 CoxHealth Center Aurora
 CoxHealth Center Ava
 CoxHealth Center Branson
 CoxHealth Center Buffalo
 CoxHealth Center Campbell
 CoxHealth Center Chesterfield
 CoxHealth Center Lebanon
 CoxHealth Center Marshfield
 CoxHealth Center Mt. Vernon
 CoxHealth Center Nixa
 CoxHealth Center Ozark
 CoxHealth Center Republic
 CoxHealth Center Rogersville
 CoxHealth Center Shell Knob
 CoxHealth Center Willard
 CoxHealth Infectious Diseases Specialty Clinic
 CoxHealth Inpatient Psychiatry
 CoxHealth Internal Medicine for Women
 CoxHealth Newborn Medicine Specialists
 CoxHealth Pediatrics
 CoxHealth Psychological Services
 Crane Medical Care
 Diagnostic Clinic
 Elfindale Family Medicine

Appendix 5: Public Health Survey

Family & Occupational Medicine of Monett	Clark Community Mental Health Center	Hermitage High
Family Medical Care Center (FMCC)	Ozark Center	Mtn View-Birch Tree Elementary
Family Practice & Obstetrics of Monett	Pathways Community Behavioral Healthcare	West Plains-South Fork Elementary
Medical Clinic of Willow Springs	Pathways Community Behavioral Healthcare	Fairview Elementary
Milne-Scanlon Urology Clinic	Family Counseling Center	Avilla Elementary
CoxHealth Gynecology of Monett	Preferred Family Healthcare	Jasper Co. Elementary
Monett Surgical Associates	Public Schools	Carthage-Fairview Elementary
Northside Pediatrics & Adolescents	Wheaton R-III High (Barry)	Webb City-Carterville Elementary
Pediatric Center	Purdy R-II High (Barry)	Joplin High
Pediatric Hospital Affiliates	Monett R-I High (Barry)	Joplin-East Middle
Pediatric Neurology of the Ozarks	Billings Sr. High (Christian)	Joplin-Eastmorland Elementary
Pediatric Specialty Clinic	Walnut Grove Elementary (Greene)	Laclede Co-Conway High
Physicians for Women	Logan-Rogersville High	Lebanon Sr. High
Regional Perinatal Center	Spfd-Central High	Lebanon-Joe D Esther Elementary
Seymour Family Health Care	Miller High	Lebanon-Maplecrest Elementary
Southern Hills Family Medicine	Pierce City Elementary	Laclede Co C-5 - Joel E Barber Emenetary
Southwest Spine & Sports Medicine	Mt. Vernon High	Bakersfield High
Springfield Inpatient Physicians	Aurora High	Dora High
Springfield Inpatient Physicians CWL	Verona High	Lutie High
Steeplechase Family Physicians	Galena High	Lutie Elementary
Sun River Orthopaedics	Forsyth High	Fair Play Elementary
The Clinic at Wal-Mart - Ozark	Hollister High	Halfway Secondary
The Clinic at Wal-Mart - Republic	Seymour High	Humansville High
The Clinic at Wal-Mart - Campbell	Harrison-Woodland Heights Elem School	Pleasant Hope High
The Clinic at Wal-Mart - Independence	Harrison Jr. High School	Laquey R-V High
The Clinic at Wal-Mart - Kansas Expwy	Valley Springs Elementary School	Laquey R-V Middle
Other Psychological Services	Mountain Home Kidergarten	Waynesville-Partridge Elementary
Burrell Behavioral Health	Mountain Home-Hackler Intermediate	Crocker Elementary
Kansas City Community Center	Lockwood High	Success Elementary
Kansas City Community Center	Dadeville Elementary	Houston High
	Greenfield High	Summersville High
	Buffalo-Long Lane Elementary	Summersville Elementary
	Skyline Elementary-Douglas Co	Licking High
	Skyline High	Cabool High
	Weaubleau Elementary	[Cabool] Pre K - 12 School

Surveyed Groups	Surveys Returned
Public Health Departments	13
Local Community Agencies	35
Regional Services Clinics	43
Other Psychological Services	2
Public Schools	63
Total Surveyed	156

There were 156 surveys returned. When possible, the survey was sent to clinical staff or leaders at the organizations being surveyed (public health department nurses, public school nurses). Other responses were from administrators, staff, and even some physicians. Some submitted one response for multiple entities (i.e. high school, middle school, and elementary school). In any case, one response equaled

one response. The following pages are the consolidated responses of the 2012 CoxHealth Public Health Survey.

Appendix 5: Public Health Survey

CoxHealth Public Health Survey

Survey Item 1

“What are your health priorities for the population you serve over the next year?”

Item 1 responses can be categorized by the following topics and ranked in order of response volume:

1. Risk Factors, Lifestyle Choices, and Prevention
 2. Chronic and Other Diseases
 3. Access to Care
 4. Needed Services
 5. Medical Insurance
 6. Injuries, Abuse, or Violence
 7. Economics, Poverty, Employment, or Business
 8. Education
-
1. Risk Factors, Lifestyle Choices, and Prevention (316 responses)
 - Obesity (51)
 - Healthy Diet / Nutrition (47)
 - Immunizations (43)
 - Physical Inactivity (37)
 - Wellness Program (37)
 - Tobacco Use (29)
 - Drug Abuse (20)
 - Teen Pregnancies (17)
 - Alcohol Abuse (16)
 - Prenatal Care (11)
 - Low Birth Weights (7)
 - Recreation and Rehabilitation (1)
 2. Chronic and Other Diseases (169 responses)
 - Diabetes (37)
 - Asthma (32)
 - ADHD (26)
 - Heart Disease (21)
 - Decreasing communicable disease (18)
 - COPD (12)
 - Cancer (11)
 - Cancer (not specific) (7)
 - Breast Cancer (2)
 - Childhood Leukemia (1)
 - Gynecologic Cancers (1)
 - Autism (3)
 - STDs: Gonorrhea & Chlamydia (2)
 - HIV/AIDS (2)
 - Chronic physical and cognitive disabilities secondary to brain injury, secondary to injury or illness (1)
 - Alzheimer's disease & related dementias (1)
 - Any life-threatening medical condition affecting children between ages 2 1/2 - 18 yrs old (1)
 - Dual Diagnosis (1)
 - Medically fragile disability (1)
 3. Access to Care (102 responses)
 - Access to Primary Care (54)

Appendix 5: Public Health Survey

- Access to Primary Care: Medicare patients (65+) (2)
 - Access To Specialty Care (17)
 - Access to Specialty Care: Dermatology (3)
 - Access to Specialty Care: Neurology (3)
 - Access to Specialty Care: Psychiatry / Psychological Services (3)
 - Access to Specialty Care: General Surgery (2)
 - Access to Specialty Care: Oncology related services (2)
 - Access to Specialty Care: Pediatric specialties (2)
 - Access to Specialty Care: OB/GYN (2)
 - Access to Specialty Care: Birth & postpartum doulas (1)
 - Access to Specialty Care: Cardiology (1)
 - Access to Specialty Care: Child abuse evaluations (1)
 - Access to Specialty Care: Endo (1)
 - Access to Specialty Care: ENT (1)
 - Access to Specialty Care: GI (1)
 - Access to Specialty Care: individuals with disability (1)
 - Access to Specialty Care: Medicare and Medicaid (1)
 - Access to Specialty Care: NICU (1)
 - Access to Specialty Care: Pain Management (1)
 - Access to Specialty Care: Ophthalmology (1)
 - Access to Specialty Care: Rheumatology (1)
 - Access to Specialty Care: Urology (1)
4. Needed Services (87 responses)
- Mental Health Services (45)
 - Urgent Care / After Hours Care (12)
 - Emergency Response (9)
 - Dental (5)
 - Medical Homes (4)
 - Access to home care (3)
 - Respite (2)
 - Provide whole health care management for individuals with mental health and physical health concerns (1)
 - Children's behavioral issues (1)
 - Skilled and residential nursing home care (1)
 - Access to palliative care for those who are not yet hospice appropriate (1)
 - Bilingual information & services (1)
 - Increase in screening rates (Colon, Breast) (1)
 - Screening capability: Mammograms (1)
5. Medical Insurance (62 response)
- Medically uninsured and under insured (53)
 - Medicaid Registration Process (8)
 - Keeping Medicare intact (1)
6. Injury, Abuse, or Violence (43 responses)
- Child Abuse (23)
 - Decreasing unintentional injuries in children (11)
 - Elder Abuse (3)
 - Repetitive Use Injuries (2)
 - Decreasing injury to family members (1)

Appendix 5: Public Health Survey

- Domestic Violence (1)
 - Violent Crimes (1)
 - Sexual Assault/rape (1)
7. Economics, Poverty, Employment, or Business (23 responses)
- Reduce Sick Days (18)
 - Regional economic sustainability (1)
 - Poverty, diversity, and inclusion (1)
 - Affordable healthcare Member connectivity (1)
 - Affordable Prescription Drugs (1)
8. Education (17 responses)
- Following prescribed drug use (13)
 - Education regarding normal progression of recovery (1)
 - Increased awareness of lifestyle factors that contribute to cognitive and overall health decline (1)
 - Parenting Classes (low cost) for low income families (1)
 - Prevention education & priorities (1)

Survey Item 2

“List any weaknesses/challenges to improving health care of the population you serve.”

Item 2 responses can be categorized by the following topics and ranked in order of response volume:

1. Education
 2. Finances: People / Population
 3. Insurance / Cost
 4. Finances: Organizations
 5. Available Services / Resources
 6. Transportation
 7. Diet /Nutrition/Exercise/Wellness/Fitness/Weight
 8. Other Challenges
1. Education (57 responses)
- Basic Understanding (19)
 - Education - Community education - Lack of or limited (6)
 - Knowledge (2)
 - Health Literacy (2)
 - Overall failure of population to recognize how lifestyle choices impact their overall health (1)
 - Finding new ways to educate our population (site sources, attendance, interesting material) (1)
 - Challenge is getting people to realize the seriousness of cardiovascular disease (1)
 - Willingness to change bad habits - poor health habits or lifestyles (1)
 - Getting patients to realize the importance of their health and follow recommendations (1)
 - Getting the word out to people in a way they will understand and be receptive to it (1)
 - Some people don't feel that their health/wellness is important (1)
 - Getting communication to population in a form they will pay attention to & will impact their health habits! (1)
 - General Population in this area lives for the moment and does not consider the long-term health problems. (1)
 - Parental Responsibility (19)
 - Parent support / involvement / supervision and motivation / compliance (7)
 - The individual/parent buying into making healthy lifestyle choices (2)
 - Parent education (2)

Appendix 5: Public Health Survey

- Convincing parents of the importance of healthy diets in children to reduce childhood obesity (1)
- lack of cooperation by parents (1)
- Inattentive parents/guardians (1)
- Getting parents to seek medical treatment when children are sick (1)
- Parents do not take their children for recommended care (1)
- Parents giving medications as ordered (1)
- Additional education of programs available (for community awareness) to maintain the health of children (1)
- It is completely up to the parents to make sure their children's healthcare needs are being met (1)
- Education for the non-English speaking patients regarding their child's immunization needs (1)
- Apathy (12)
 - Patients that are non-compliant (5)
 - Citizen, patient, or parent apathy (4)
 - Patient buy in (2)
 - No show appointments (1)
- Children (5)
 - The environment is somewhat resistant to sex education programs (1)
 - Many times junior high students don't believe that medical or addiction problems can happen to them. (1)
 - Peer pressure (1)
 - Poor coping skills (1)
 - Tobacco uses - It's a parental trait passed down that is harming our students. (1)
- Services (4)
 - Getting the word out about services that are available but not well known - Educating the community on the services CoxHealth provides (2)
 - Being a nurse in a school setting I would like to have in-services done by Cox to give some knowledge to teachers & staff about obesity of children & adults and diabetes. (1)
 - Change in availability of services (1)
- Payer (3)
 - Education regarding Medicare IPPE and AWW visits (2)
 - Being in the hospital for "observation" when beneficiary thinks they have been admitted under Medicare (1)
- Prevention (3)
 - Accessing preventative care to avoid emergency room (1)
 - Getting patients to do preventive care and maintenance (1)
 - Promoting prevention (1)
- Individual (3)
 - Self-reporting of issues (1)
 - Self-diagnosing from internet research (1)
 - Patients are becoming more skeptical of pharmaceuticals (1)
- Job (1)
 - Job training (1)
- 2. Finances: People / Population (34)
 - Poverty/Low Income (31)
 - Poverty (11)
 - Low income(7)
 - Patients' ability to pay (4)
 - Unemployment (3)
 - Working poor (1)
 - Poor living conditions (1)

Appendix 5: Public Health Survey

- Socioeconomic issues (1)
 - Many patients are self pay and do not have the funds for preventative care. (1)
 - Focus is often on survival issues, such as obtaining employment and necessities, so that health care is often seen as a luxury. (1)
 - Many of the tests are covered by applying only to the deductible; consequently many do not have them done. (1)
 - Other (3)
 - Homeless (1)
 - Funding for individuals with disabilities (1)
 - Dental care for individuals with disabilities (1)
3. Insurance / Cost (31)
- Uninsured or underinsured (20)
 - Uninsured or underinsured - access to care (11)
 - Lack of insurance and high cost of care (7)
 - Access to affordable healthcare coverage (1)
 - 24% of population (35,000) do not have health insurance [Stone County] (1)
 - Cost (4)
 - Cost of care (2)
 - Cost of prevention (1)
 - Patients are requesting to be seen for ill visits, but less for preventative due to higher out of pocket cost for the patients. (1)
 - Other (7)
 - Health insurance benefit limitations (2)
 - Local specialists accepting specific payer (2)
 - Continuity of care for uninsured from mamm orders through diagnosis process (1)
 - Insurance companies - uninsured and Medicaid (1)
 - Medicaid - We have high poverty & parents lack the organizational skills to keep medications filled w/ Medicaid regulations, then their Dr's are unable to get them in for a month or two. Meanwhile the students are out of Rx and fall behind in school. (1)
4. Finances: Organizations (27)
- Funding (26)
 - Lack of funding - funding cuts - funding - money - financial limitations (20)
 - Resources (3)
 - Budget constraints (2)
 - Understaffed (1)
 - Other (1)
 - Payer mix (1)
5. Available Services / Resources (53)
- Access (27)
 - Access to care (5)
 - Access to specialties (5)
 - Access to care in rural areas (3)
 - Access to primary care (2)
 - Distance to emergency and specialty services (2)
 - Primary physician(1)
 - I find they have difficulty getting an appointment at the local Cox Clinic. I have had them call on Monday AM and can't be seen until Friday. I refer them to Urgent Care (1)
 - Providing GYN care (1)
 - Medical care is a distance from the community (1)

Appendix 5: Public Health Survey

- Availability of laboratory service to rural locations (1)
- Limited access to specialists (1)
- Access to Specialists: pediatric neurologist (1)
- Need another general surgeon (1)
- Need an Urgent Care open all day and on the weekends (1)
- Services/screenings (1)
- Mental Health (7)
 - Access to mental health care (2)
 - Lack of mental health providers (2)
 - Psychiatric care (1)
 - Access to inpatient mental health services (1)
 - Lack of outpatient mental health services (1)
- Clinical Limitation (6)
 - Limited pediatric outpatient services (1)
 - Easier access to endos. Really need more pediatric endos. (1)
 - Limited number of health care providers providing care to abused children (1)
 - Lack of qualified health care provider [in the school] (1)
 - Not enough experienced physicians in this area [Down Syndrome] (1)
 - Need partnerships in serving developmentally disabled & dually diagnosed (1)
- Post Acute Care (4)
 - Need social workers (1)
 - Need in-home respite care program (1)
 - Physicians following patients when discharged to nursing homes (1)
 - Staffing in nursing homes and care of the younger population in residential care homes (1)
- Needed Services (3)
 - Gaps in services (1)
 - Lack of Medical Services for down town loft residents [Springfield] (1)
 - Limited healthcare services - no hospital - no CCC - no 24/hr services (1)
- Other (6)
 - Providing RX to our patients (2)
 - Available hours and staff (1)
 - Limited resources - both financial & health care access (1)
 - Our weakness is having only "one" doctor at our clinic in Hermitage on a limited number of days. The other days we have Nurse Practitioners which is fine but would like a "doctors" opinion on issues too. (1)
 - Lack of dental providers that accept Medicaid (1)
- 6. Transportation (17)
 - Lack of transportation (to health care appointments) - reliable transportation (15)
 - Gas money (2)
- 7. Nutrition / Exercise / Weight (14)
 - Nutrition (8)
 - Lack of affordable fresh fruits and Vegetables - healthy food (4)
 - Access to proper nutrition (1)
 - Poor diet (1)
 - Eating Health / Nutrition (1)
 - Providing healthy foods for home to make sure they have something to eat in the evening. (1)
 - Exercise (4)
 - Lack of physical activity (3)
 - Unable to access parks and walking trails (1)

Appendix 5: Public Health Survey

- Weight (2)
 - Self Image (Can't see own or children's weight problems) (1)
 - Obesity (1)

- 8. Other Challenges (29)
 - Referrals (3)
 - Need for physician referrals for Medicaid population (1)
 - Referral by healthcare community to appropriate services (1)
 - Referrals with Medicaid/Medicare (1)
 - Stigma (3)
 - Stigma of disease (2)
 - Sensitivity regarding violence and abuse (1)
 - Communication between professionals (3)
 - Handoff between inpatient mental health services and outpatient services (1)
 - Better communication between ER/UC and clinics (1)
 - Getting information to referral sources of services provided. (1)
 - Family Issues (4)
 - Extreme burden placed on caregiver (1)
 - Preventing head lice in school (1)
 - Family values and standards (1)
 - Child and parent relations (1)
 - Miscellaneous (19)
 - Time (3)
 - Language barriers (3)
 - Mobile [transient] - delays in continuation of services (2)
 - Drug, alcohol, and mental health issues (2)
 - Over prescription of narcotic medications (2)
 - Quick intervention when needed (1)
 - Low self-esteem (1)
 - Excuses get in the way (1)
 - Poor communication skills (1)
 - Limited availability of free resources for schools (1)
 - Regulatory policy (1)
 - Continuous computer issues (1)

Survey Item 3

“List any noticeable changes over the last five years in the health status of the population you serve.”

Item 3 responses can be categorized by the following topics and ranked in order of response volume:

1. Chronic Conditions
2. Insurance /Payer
3. Obesity
4. Service Needs
5. Income/Poverty/Economy/Unemployment
6. Demographics
7. Exercise/Nutrition
8. Mental Health
9. Transient Population
10. Other

Appendix 5: Public Health Survey

1. Chronic Conditions (30)
 - General health status - poor (8)
 - Increase in chronic medical conditions as our clinic population ages. (2)
 - Living longer with chronic conditions. (1)
 - Poor health (1)
 - Most noticeable change is that health status has not improved. Positive change is greater awareness of preventative services (1)
 - Increase in staff sick days. (1)
 - Significant increase in acuity of patient symptoms. (1)
 - Many are not coming in for preventive services unless they have coverage that pays for all of these services. (1)
 - Respiratory conditions/Asthma (8)
 - Still have high numbers of children with asthma (2)
 - increase in asthma (2)
 - Increase in breathing problems (asthma & other respiratory illnesses) (1)
 - Increase in numbers of students with chronic health conditions especially asthma and diabetes (1)
 - more control of asthma symptoms - fewer asthma attacks (1)
 - increase in student w/ allergies requiring epi pens (1)
 - Diabetes (11)
 - Expanding - Rise in people w/ Diabetes (4)
 - Increase of pts with non-treated diabetic problems (ie. Eyes, feet, medication) (1)
 - diabetic type patients doing decreased eye exams, office visit evaluations for their condition, not taking medications as directed to make it last longer. (1)
 - 4 HS Students with insulin dependents diabetes. (1)
 - increase in diabetes in the population in general & young children (1)
 - We have had 2 students diagnosed with Type 1 Diabetes. (1)
 - In my job I have seen increase #'s of high blood, & diabetes related to high wt and low exercise (1)
 - We are seeing HIV infected adults coming into care at a younger age and those newly diagnosed who are already have advanced illness. We are also seeing older adults who have been infected for a while dealing with co-morbidities such as diabetes and heart disease due to their medication regimens. (1)
 - Alzheimer's Disease (3)
 - Seems to be an increase in Alzheimer's disease and related dementias (1)
 - We are seeing a dramatic increase in the number of diagnosis. [Alzheimer's Disease] (1)
 - Many individuals with Down Syndrome are living longer & so there is an increased rate of Alzheimers in the over 40 population. (1)
2. Insurance /Payer (24)
 - Uninsured (8)
 - Fewer people with insurance so people not taking prescription medication because they cannot afford office visit fee
 - Increased number of patients without insurance or with insurance that have such a high deductible that they cannot use it.
 - More uninsured or underinsured, more Medicare patient population
 - They [the population] are the uninsured, & underinsured
 - More uninsured beginning in 2008.
 - Less insured patients due to poor economy also.
 - Less insured patients.

Appendix 5: Public Health Survey

- Out of Pocket Expenses (6)
 - More and more individuals have little to no insurance which is leading to longer delays in people seeking treatment.
 - People holding off on seeing a doctor because a lack of insurance coverage.
 - No insurance so people do not seek medical care when needed.
 - They still have no insurance and have a hard time finding resources on their own.
 - Uninsured and under insured patients struggling to meet their portions of their out of pocket expenses.
 - Limited access to health care, due both to lack of transportation in outlying community, as well as lack of insurance or other resources to pay for health care.
- Medicare / Medicaid (10)
 - Increased in Medicaid (2)
 - Overall, the number of low income pregnant women on Medicaid has increased to 55%. (1)
 - More Medicaid & Uninsured (1)
 - Noted increase in Medicaid/Medicare population. (1)
 - Clinics limiting the % of Medicare patients they accept into the practice. (1)
 - Noted abuse of Medicaid. Appointments made that are not necessary but because they have Medicaid with little or no cost to patient, the abuse is quite ridiculous. (1)
 - Children on and off MO Health Net. Parents struggling to get required paper work turned in on time. (1)
 - Less assistance for Medicaid and very low income patients. (1)
 - More people on government assistance or not qualifying due to income (the outside public in our area) (1)
- 3. Obesity (24)
 - Increased Obesity (12)
 - Increase in Childhood obesity (7)
 - Increase in overweight children (2)
 - Increase of population being overweight - special concern with children less than 5 yrs. Being overweight or at risk of becoming overweight. (1)
 - Increase in obesity in children and adults. (1)
 - Weight gain (1)
- 4. Service Needs (18)
 - Increase in # of dual diagnosis (1)
 - An increasing number of agencies providing specialized services (1)
 - As awareness to gynecologic cancers (particularly ovarian and cervical) grows, more women are seeking regular yearly exams. (1)
 - The physicians are seeing less OB patients (1)
 - Because there has been an increased recognition of brain injuries in recent years, I have seen a trend toward referrals for sequelae of brain injuries that would have previously been considered inconsequential. (1)
 - Increase in the need for residential services (1)
 - We are seeing an increase in pain management patients. (1)
 - Limited access to specialists (1)
 - The number of patients we see has definitely grown since we opened 3 yrs ago. (1)
 - More individuals are utilizing ER services for primary care. (1)
 - Lack of treatment for common illness. (1)
 - Lack of participation when free services are offered. (1)
 - A huge number of Gallbladder surgeries. (1)
 - Many student injuries, repetitive injuries. (1)
 - Increase in county S.T.D. rates (1)

Appendix 5: Public Health Survey

- Increased amount of students with ADHD (1)
 - increase in autism spectrum disorders (1)
 - ALS patients are living slightly longer lives with good symptom management. (1)
5. Income / Poverty / Economy / Unemployment (15)
- Poverty / Low Income (12)
 - The poverty level is low (1)
 - Greater incidence of and degree of poverty (1)
 - Lower income in our clients (1)
 - Poorer students (1)
 - Poorer economical status (1)
 - Increase in numbers of students who are living in poverty or that are homeless which results in lack of appropriate access to care (1)
 - Former career people with part-time rather than full-time work & high unemployment rates in general as contributors. (1)
 - Patients unable to afford Healthcare. (1)
 - Poverty impacting accessibility & transportation (1)
 - Cost of transportation (1)
 - Lower economic status causing a rise in patient no-shows. Can't afford to come to doctor. Can't afford gas. (1)
 - Socioeconomic status (1)
 - Poor Economy / Unemployment (3)
 - Bad economy & how it affects patient's ability to obtain health insurance, medical care, prescriptions, etc (1)
 - Greater uncertainty about healthcare with new legislation and higher unemployment. (1)
 - Unstable employment (1)
6. Demographics (12)
- Growing Population (2)
 - The population has continued growth. (1)
 - 16% increase in county population (1)
 - Aging Population (8)
 - increase in 60-65 age group without health care insurance. (1)
 - Baby boomers turning 65 and over taxing the clinics that do take Medicare patients. (1)
 - We have a high volume of Medicare Advantage patients. We are seeing a slight increase in younger families establishing care but we continue to be a retirement community that is growing. [Branson] (1)
 - Many more retirees moving into the area. Some with multiple health problems. [Buffalo] (1)
 - aging population (2)
 - Population in area is getting older so health concerns are different. (1)
 - We live in a retirement community and have seen a lot of these older people becoming caretakers of their young Grandchildren which has put quite a increase of health and stress levels as a issue. (1)
 - Growing Families (2)
 - We are seeing younger families moving into the community. [Rogersville] (1)
 - We have more families who have additional families moving into the home. (1)
7. Exercise/Nutrition (10)
- Nutrition (5)
 - People are in poor health more so than in previous years. Lack of exercise and a healthy diet attributes to their poor health. (1)
 - Poor diet (1)

Appendix 5: Public Health Survey

- Eating habits continue to decline. (1)
- Parents use their money for easy quick things instead of nutritious meals which may take more time and money (1)
- Education regarding food choices is lacking. (1)
- Exercise (5)
 - Decreased activity among students and their families. (1)
 - Decrease in physical activity (1)
 - They are more inactive. (1)
 - Decrease in their physical activity (1)
 - Not just at this school but others as well, students are so engrossed in video games and computers instead of playing outside. Many kids do not know how to play together even at recess because they never play at home. Video games, computer, and T.V. have becoming a baby-sitter instead of taking the time to play with children and giving them attention. (1)
- 8. Mental Health (9)
 - The increasing prevalence of mental health conditions which lead to high risk behaviors. (1)
 - Many mental health issues. (1)
 - Increase in mental illness visits to our clinic. (1)
 - Once Cox North closed the entire Cox South patient population changed. Along with state Medicaid & economic issues our patient population is sicker, stressed, and suffering (1)
 - Increase in numbers of students with emotional/mental health issues; More Mental Health Issues (1)
 - Increase in mental health disease without appropriate resource available to implement combination plan of care with psychotherapy, medications, and PCP appts. (1)
 - Continued limited access to care for children in need of psychiatric services (1)
 - Growing number of individuals who are becoming more informed about mental health issues and addressing them on a personal basis. (1)
- 9. Transient Population (4)
 - The community is very transitional with people moving in and out due to high unemployment and economic issues. (1)
 - Many changes, they are very transient, change contact information often and it is difficult to locate them to keep track of their progress with regard to health & wellness. (1)
 - Increase in mobility rates of students (1)
 - With down swing in economy, we see a more mobile & transient population. (1)
- 10. Other (69)
 - Mother and Child (4)
 - The preterm birthrate has dropped from 12.3% in 2008 to 12.1% in 2010. We are making progress yet remain above the healthy people 2020 goals.(1)
 - Single mothers make up 40% of total births and prematurity remains high at 11.5%. (1)
 - Less pregnancies (1)
 - Breastfeeding rates have increased. (1)
 - Over utilization (3)
 - More absences with Dr. excuse (1)
 - Go to the doctor for everything (1)
 - Parents continue to enable student absences, Court rarely much help (1)
 - Poor Lifestyle Choices (8)
 - There seems to be a rise in prescription drug abuse, which contributes to other health issues. (3)
 - More parents using drugs. (1)
 - Methamphetamines, bath salts and other OTC mind-altering substances are negatively impacting mental and physical health, as well as causing significant family disruption. (1)

Appendix 5: Public Health Survey

- Number of patient seeking narcotics and time spent (1)
- Multiple sexual partners in teenagers (1)
- They are more willing to take risks (1)
- Abuse, Neglect, and Disabilities (7)
 - Greene County continues to have some of the highest child abuse rates in the State of Missouri. (1)
 - Increase in child abuse (1)
 - Neglect (1)
 - Children tending to their own need more. (1)
 - Increased stress on families to provide necessities, resulting in deteriorating parenting skills (1)
 - We are seeing more children with social/emotional/behavioral concerns. (1)
 - More children with disabilities & special needs are being mainstreamed. (1)
- Miscellaneous (12)
 - Increased Pride in health improvement accomplishments. Decreased Smoking Rates Dental care capacity has increased significantly. Our wish potential has increased With the creation of the Health Commission, we have seen better coordination within the healthcare community. Education workshops and community awareness. Especially in Latinos appears to be influencing decisions about treatment & prevention. cultrue Change has made a difference in some homes. The loss of St. John's A lot more population without access locally to thealth care. Some are working on healthy habits others seem to have no impact. less urgency to get recommended follow-up Patients are very frail that are living in nursing homes and this increases hospitalizations.
- No Change (8)
- Not available or nor response (27)

Survey Item 4

“How can CoxHealth assist in addressing the needs of the population you serve?”

Item 4 responses can be categorized by the following topics and ranked in order of response volume:

1. Access to Care
 2. Education
 3. Chronic Care, Wellness, Immunizations, or Screenings
 4. Partnership or Collaboration
 5. Workforce or Employment
 6. Funding
 7. Cost of Care or Payer
 8. Transportation
 9. Miscellaneous
 10. No way to assist, no response, or don't know
-
1. Access to Care (60)
 - Primary Care (9)
 - Full time LOCAL physician that would help with our free clinic once a month (1)
 - Primary Physician(1)
 - Provide more primary care options. (1)
 - Provide Primary Care at a reasonable price. (1)
 - Continue to offer programs that support primary care physicians with chronic disease management such as diabetes center. (1)
 - Being more available for office appointments. When a student has a dr. note that is excused, some might miss 10-20 days per semester our hands are tied because most have Medicaid just so to get the excuse typing app. Up for those that need to be seen. (1)

Appendix 5: Public Health Survey

- Access to medical professionals regarding prevention of communicable disease in school population. (1)
- Open a clinic here! - I feel if we had adequate medical attention here in the area people may use the ER less for simple things like earaches and such minor issues. For some, transportation is a issue for both young and old. (1)
- CoxHealth is not in our community - is in neighboring communities. (1)
- Specialty Care (7)
 - Provide timely access to specialists and encourage the specialists to accept Medicaid patients. (1)
 - Improve access to specialty services regardless of payer. (1)
 - Support efforts in developing outreach clinic to take care of the patients. (1)
 - If we had specialties that are willing to come to the clinic once a week or once per month to keep our patients from needing to find transportation. (1)
 - Out-reach to surrounding, small communities. (1)
 - Having access to more specialist here in our town (1)
 - Add locations near us & have traveling specialists (1)
- Service Needs (11)
 - I have said since I started here in Branson that if Cox would build a small hospital and/or urg care, people will come. (1)
 - Folks in this area [Branson]are tired of Skaggs & the instability that their providers have given them over the years. In this area, you either like Skaggs or don't, there isn't an in between. The possibility of Cox joining with Skaggs has been the talk of the town recently & alot of folks believe it would be a great fit! (1)
 - 5. As clinic population expands, continue to consider needed outpatient services in our area. (1)
 - We could benefit from maybe a physical therapist, counselor someone that could actually be in the clinic one or two days per week to see our patients. (1)
 - Look at building an emergency room or small hospital in St. Robert (1)
 - Again, an Urgent Care [Monett]. (1)
 - Extend walk-in clinic hours @ BW [Branson West] office. (1)
 - Urgent care clinic in Barry County (1)
 - We need hospital! Limited access for our residents [Pulaski CO] (1)
 - Cost effective after hours care [Licking, MO]. (1)
 - Support for the mentally ill patient population has been very good at Cox. Currently, the physical environment is in need of upgrade to the level proposed 5-6 years ago in the plan for **Cox North** services in general including mental health care. Reinstating that plan would be of significant benefit toward improving the services for the mentally ill in the Springfield/Greene County area. (1)
- Mental Health (12)
 - More access for mental health patients especially for pediatric. (1)
 - Better access to Mental Health. (1)
 - Increase mental health care for indigent. (1)
 - Off site counseling with psychiatrist. (1)
 - Psychiatric care is not available for my patients (1)
 - Look into adding outpatient psychiatric care for children to services provided by CoxHealth. (1)
 - Need assistance with mental health issues for students, either through provision of site-based clinicians or funding to hire them; (1)
 - Assistance with behavioral and mental health for low income - underinsured children in the home. (1)
 - Increase access to pediatric psychiatrists and psychologists as well as family practice physician practices that are willing and able to medically students with ADHD and/or complex mental health issues. Increase numbers of providers that will accept children on Medicaid; (1)
 - Find a way to serve difficult patients--patients who have complicated needs or legitimate narcotic/mental health needs. We don't have any mental health referral system that is workable

Appendix 5: Public Health Survey

- and Center for Addictions does not take Medicaid patients, a population frequently plagued by addiction, particularly to narcotic medications. We really do not have options, or good ones, for our difficult patient population--addiction/mental health issues. (2)
- Possibly lobby for increased funding for treatment of mental illness. Not being able to afford medications is a big problem for our patients with mental illness, and leads to repeated hospitalizations and sometimes involvement with the legal system. (1)
- Pain Center (5)
 - A Pain Center that will monitor and prescribe pain medications and/or help these patients decrease their dependency on prescription meds. (2)
 - Development and support of multi-disciplinary Pain Clinic. (1)
 - My physicians would like to see a pain clinic that monitors and treats pain related patients. (2)
 - Care at reduced cost / Sliding Scale / Free (4)
 - Increase number of provider that will see uninsured families at reduced cost. (1)
 - Provide more free services to children. (1)
 - Low income - 0 insurance clinic close to area. (1)
 - Maybe there could help by having a facility closer to this area and have a sliding fee? (1)
 - Medicare or Medicaid (5)
 - Suggestion -Include the Medicare IPPE and AWV visits in the scope of services provided by the Nurse Practitioners at the Wal-Mart clinics. (2)
 - Patients without a primary care physician that are admitted under a Hospitalist need to be followed up by a clinic that will keep the Medicare patient long term. Now some patients are being seen once for the follow up from the hospital visit then are told they need to find another primary care clinic that will take Medicare for future appointments. Medicare patients need a different call box of clinics that will accept them as patients or be sent directly to Senior Health Center North or South that will always accept Medicare patients. These are high risk patients to be readmitted due to poor follow through and no relationship to physician. (1)
 - Enable our Medicaid patients to be seen by a specialist in a more timely fashion. (1)
 - Having a Medicaid clinic that is serviced by rotating physicians (PCP, Specialist & Hospitalist) only once or twice a month. (1)
 - Miscellaneous (7)
 - Increase dental care which if left untreated, causes many health issues. (1)
 - 1. Consider if a convenient care pharmacy is a viable option for our area. [Lebanon] (1)
 - 3. Continue support for meaningful use of EMR including retrievable data that can be used for payment processes. (1)
 - Improve access to services with grants/funding. (1)
 - Better access to social workers that can assist patients with transportation, medication, and financial assistance. Help patients get through with the MCD process and insurance issues. (1)
 - Cox Care Mobile - require less paperwork for parents to access caremobiles' service. (1)
 - If care could be provided in the school work place, for minor things such as pink eye, strep, and sinus infections so that employee did not have to go to an additional facility to have a diagnosis, that would be helpful. Routine care for employee's children in the work place would be an innovative and time saving benefit. (1)
2. Education (44)
- Communicating Available Resources (8)
 - Provide resource directory of services available & any preventive services. (1)
 - Help with awareness of services we provide. (1)
 - Inform us on clinics/booster beat/child safety trainings that we can pass on to our families. Any opportunities for our case managers to learn about resources to offer our families on nutrition & healthy lifestyles. (1)

Appendix 5: Public Health Survey

- Ensure all cancer patients have access to the free programs & services the ACS has to offer (1)
- We find education is the key for our clients & resources packets for our mentors that meet w. them. If we know and are educated on exactly what resources cox has for at risk, under insured young people we can point them in the right direction. (1)
- Promote our resources & programs to patients. Partner on events & programs (1)
- Make patients more aware of financial assistance for meds. (1)
- Better marketing (1)
- Partnership or Collaboration in Education (2)
 - Partner with public health for education services. (1)
 - Have a dietician come help with lunch menus, ordering food, and applying to grants for healthy options at lunch. (1)
- Community Education (28)
 - Community education –outreach (1)
 - Encourage early diagnosis. (1)
 - Community education support for our bilingual & minority ethnic population. (1)
 - CoxHealth can continue and expand prenatal care services and smoking cessation programs (1)
 - Provide more training in caring for residents in skilled and residential care, especially mental health training for Alzheimer’s, dementia and mental health issues associated with the younger, institutionalized population. (1)
 - Helping get the word out to the community. By two experts standing shoulder to shoulder helps the community hear the message and make a change (1)
 - Adolescent obesity education/clinic/specialist (1)
 - Possibly office more that 1 "Heart Healthy" type of fair per year. I know that every Feb @ Cox Monett, they are swamped with the community taking the opportunity to get cheaper screenings for the lipids, FBS, BMI, etc. Very nice service: widely used by patients (1)
 - More availability to Asthma/resp education in schools. (1)
 - Education of children in schools. (1)
 - Meetings in which demonstrations are given. (1)
 - Education to the public regarding food and activity choices. (1)
 - More interaction with schools to help educate students and parents on ways to prevent infections provide incentives to being fit. healthier lifestyle (1)
 - Offer more free programs for students on weight loss, smoking, diet (1)
 - We are open to any education/services for staff and students. Printed info to inform students would be good tool (1)
 - Any materials and or speakers for health information would be appreciated such as B/P - diabetes - stress management, etc (1)
 - Educational programs on asthma, hygiene, nutrition, etc. (1)
 - Educators willing to come in & present to students. -Drinking & driving, smoking & alcohol, etc (1)
 - Provide instructions on how to communicate "one's own needs" to the medical community. (1)
 - Continue to educate (1)
 - Offer speakers/presentations (1)
 - Do you have any children program about any health issues that can be done in the classroom? Ozark (1)
 - information/programs (1)
 - ?? Maybe with education for the community? (1)
 - Offering free programs to community on raising children - what is necessary to maintain their health to succeed in school. Keeping immunizations, vision & hearing screenings up to date. (1)
 - Provide in-services (at no cost) about nutrition, exercise... (1)
 - Dealing with the tobacco issue, I feel that parents have just become too lenient in disciplining their children and letting them participate in these activities that are not legal anyway. (1)
 - Providing free literature for faculty, staff, parents, and students about checked priorities. (1)

Appendix 5: Public Health Survey

- Provide printed information _____ print to handout to employees & students. (1)
- Clinician Education (2)
 - Improve education of physicians for adults with DS. (1)
 - Increased # of Pediatricians with training in Down syndrome health issues. (1)
- Miscellaneous (4)
 - Health Navigators currently helping with patients to better their health through education and knowledge of resources available to them in the area(1)
 - Start from within. Cafeteria, catered lunches (to include outside vendors) need to present, healthy, low calorie/fat etc meals. Food & proper choices should be the tone throughout the system & into the community. (1)
 - Information on the weaknesses listed above. (1)
 - We need (always) outside referral sites to benefit children and their needs (1)
- 3. Chronic Care, Wellness, Immunizations, or Screenings (12)
 - outreach wellness programs beyond Monett area (1)
 - Cox Monett Wellness is so great to do Health Risk Appraisals for our staff every August. We appreciate it. Would it be possible to have monthly health tips e-mailed to me (by attachment) so these could be downloaded to our school staff website? (1)
 - Providing broader range of wellness services that prevent deterioration (especially for chronic conditions), such as reduced and/or very minimal fee per class or for membership at the fitness centers if there is a chronic condition that could benefit from exercise (and almost everything can!). (1)
 - Collaborate with health department in addressing prevention of chronic diseases (1)
 - Ideas for wellness programs or health contests. Something fun to complete in. (1)
 - Programs for the classroom setting in areas of concern could be potentially helpful. (1)
 - Provide free screenings for uninsured. (1)
 - Vaccinations as you already do but focus on locations where bilingual groups meet. Free and reduced services for immunizations, physicals, and ill visits. (1)
 - Continue to assist us with flu vaccines in order to provide vaccines on school site; (1)
 - Flu shot clinic or a dental mobile or check-up service (mobile) (1)
 - More free screenings, etc. to the area (1)
- 4. Partnership or Collaboration (12)
 - Take an active role in the development of a local ALS clinic in conjunction with the ALS association-Keith Worthington Chapter. (1)
 - Partner in autism workshops & seminars (1)
 - March of Dimes is interested in coordinating initiatives w/ Cox Health to minimize birth before 39 weeks. (1)
 - There are many ways that CoxHealth can join us in our efforts. We can partner on projects, Cox can sponsor events, and Cox can invite us to join in spreading awareness in their facilities (1)
 - Partnership with the Doula Foundation: welcoming doulas in labor and delivery, ongoing education for staff and physicians regarding the benefits of birth and postpartum doula support and the services offered by the Doula Foundation, physician referrals, networking with the Women's Center to provide educational materials to disperse to Doula Foundation clients, free use of CoxHealth meeting rooms for event. (1)
 - Continued partnership. (1)
 - CoxHealth does a terrific job and is a true community partner to BCFO. Women's links fund serves a critical role in continuum of care. (1)
 - Cox North was a tremendous help to us in sheltering the victims of the Missouri Hotel fire. Keep up the good work. (1)

Appendix 5: Public Health Survey

- Continued open dialogue and collaboration between the CoxHealth Emergency Department (ED) and the Child Advocacy Center to provide services for children and adolescents who present to the ED for care related to child maltreatment (sexual abuse, physical abuse, and/or neglect). (1)
 - Work collaboratively with Jordan Valley Community Health to expand access to specialty practice provider care where the students are; (1)
 - Partnership for a respite care grant program. (1)
 - Partnering on Care Transition models to better follow care at home following hospital stays. (1)
5. Workforce or Employment (10)
- The Chamber works with CoxHealth to attract & maintain new workforce talent to the area. (1)
 - 4. Continue recruitment for physician. (1)
 - Recruiting those specialists so needed by Cox. I.e. Neurology (1)
 - Recruiting those specialists so needed by Cox. I.e. Peds Neurology (1)
 - Recruiting those specialists so needed by Cox. I.e. Dermatology (1)
 - Recruiting those specialists so needed by Cox. I.e. Psych Services. (1)
 - Having another General Surgeon here in Monett (1)
 - Also, more Family Practice Providers for our area might also help. (1)
 - Hire more pediatricians, so peds pt can have a pediatric doctor. A lot of our patients go to urgent care or family practice doctor. (1)
 - By not cutting staff anymore so we can assist patients with rebates, coupons, patient assistance programs, free mammograms, etc. You have to have time to network and know what is available for patients that need it. When staff has been cut, we no longer have that time. (1)
6. Funding (6)
- Continue current partnership & funding (1)
 - Continue to help w/ funding, education & support (1)
 - We would love to see a partnership between cox and the Springfield Workshop as we work towards our goal of developing our own in-house cafeteria that will allow us to provide hot, nutritious lunches to our nearly 250 disabled employees. (1)
 - Sponsorship to assist in advocacy, education & mission (1)
 - Providing financial resources for our outreach programs. (1)
 - 2. I appreciate the work on the grant/pcmh process. (1)
7. Cost of Care or Payer (6)
- More affordable health care. A family of 4 who makes less than \$20,000 a year or less must make choices to eat, buy insurance or buy medication. (1)
 - Many of the families we serve are financially drained from medical expenses and camp is simply a luxury they cannot afford. We know this week is so important to our campers and their families so support of the scholarship fund is much appreciated. (1)
 - Better self pay-prompt pay discount. (1)
 - Concentrated assistance to patients to explore possible insurance options which may be available to them. (1)
 - Offering some form of Cox insurance to pay for limited amount of services per year. (1)
 - Is there any way possible to make health insurance more affordable? I think that would help tremendously. Also, maybe making some incentives for being healthy? (1)
8. Transportation (5)
- Provide transportation (1)
 - The patients we serve need help with transportation (gas cards) to get to/from multiple treatments when they are in outlying counties, i.e. Howell, Hickory, McDonald, Newton, Jasper, Etc. American Cancer Society provides ONE! Gas card ... kills me! GYNCA provides up to \$500/month to some patients driving 150+ miles/day roundtrip, 5 days a week for 5 weeks in a

Appendix 5: Public Health Survey

- row. Otherwise, as your patients/ our clients have shared, they would not be able to get to their radiation or chemo treatments. (1)
 - o Increased transportation through Cox SR. Advantage for those seeking cancer treatments and multiple physician apptms. (1)
 - o Providing access (e.g., transportation, case workers to ease the set-up and attending appointments) and facilitation of specialty clinic visits (e.g., decreasing wait time) would go a long way toward meeting the needs of the population I serve. (1)
 - o Assistance programs for those with low income, transportation need. (1)
9. Miscellaneous (18)
- o Continue to be active and visible in the community to promote the services CoxHealth provides. (1)
 - o A further recognition that crisis, depression, psychosis just don't occur in the in the psychiatric center of the hospital, but can occur in a private, semi private room on a regular floor and training for nursing can be ... (incomplete, response to email inquiry...) My apologies for the incomplete responses. The comments were based on discussion with mental health consumers and family members who feel they have been misunderstood when being in a regular hospital environment. (1)
 - o Continued support of peer services and recognition of these as evidenced based programs that aide in the recovery process for those with mental illness who make contact with hospital services. (1)
 - o Involvement in our special events. (1)
 - o Continue supporting the services of public health. (1)
 - o Collaborating with local community coalitions to help facilitate behavior change in the population. (1)
 - o We appreciate the relationship we have with CoxHealth and it's that relationship is the key to addressing needs in the future. (1)
 - o Continued outreach and sensitivity to issues surrounding violence and abuse. Provide necessary resources (1)
 - o Open communication between systems to provide continuity of care. Less emphasis on procedure and more emphasis on patient care. (1)
 - o Good question, but any assistance would be appreciated! (1)
 - o Would probably seek that help locally (1)
 - o Please send discharge instruction "attention to RN" at school - Increase communication between hospital/school (1)
 - o Asthma Actions plans from doctors, follow up on students that have been seen at CoxHealth (1)
 - o Finding grant monies to assist with cost of district nurse and additional costs. (1)
 - o Awareness and partnerships between physicians, parents and the school in regards to ADHD diagnosis. (1)
 - o Speakers on above topics and concerns. (1)
 - o By providing any available resources as situations/problems may arise, as well as, offering support if necessary. (1)
10. No way to assist, no response, or don't know (26)
- o None (1)
 - o No Response / Don't know (25)

Appendix 5: Public Health Survey

Survey Item 5

“Please list any other comments regarding CoxHealth, your community’s health, and/or opportunities for improvement?”

Item 5 responses can be categorized by the following topics and ranked in order of response volume:

1. Specific Comments – Community Involvement
 2. Education
 3. Funding or Resources
 4. Specific Partnership or Collaborative Needs
 5. Specific Needs or Suggestions
 6. Uninsured and/or Poor
 7. Miscellaneous
 8. No Additional Comments / No Response / Unknown
-
1. Specific Comments – Community Involvement (20)
 - o Since Dr. Eric Davis left no full time Cox physician available, Cox Buffalo clinic not involved in local events (1)
 - o We have tried using the Mobile unit with limited success. We have a full-time LPN on staff. (1)
 - o We have maintained a positive working relationship with your Willow Springs Clinic. (1)
 - o Cox Health has been and is very proactive with respect to the S.A.N.E. initiative for sexual assault victims; Cox is a valuable community partner! (1)
 - o appreciate all that you do for our community(1)
 - o Cox Monett has been a tremendous help to our school system. We are participating in their Asthma program, and also CARDIAC kids. This is a great service. (1)
 - o The Cox Asthma Program has been a great success and help to the students and family. (1)
 - o The Care Mobile has been a huge plus for our community(1)
 - o CoxHealth has always been a supporter of Make-A-Wish and we look forward to future projects with you. (1)
 - o Patient advocates do a terrific job. Laura Bowles, Breast navigator is amazing! (1)
 - o We appreciate the working relationship with CoxHealth through Oxford Home Care and the Cox Wheeler Health Institute allows us to utilize the community room for ALS support group meetings and also a partner for the Walk to Defeat ALS. (1)
 - o We appreciate CoxHealth's support of our programs & would love to reach Cox employees about volunteer opportunities to be mentors. (1)
 - o Cox support financially for our community events have enabled us to reach more families and provide a very professional event with nice comfortable, equipment - tents, sound, promotion. Thank you. (1)
 - o We appreciate the support from our community partners in serving children who may have been abused or neglected. (1)
 - o We have had a great partnership with CoxHealth and Cox has always been very helpful to our patient population and their health care needs. (1)
 - o We appreciate the support and services that Cox Health provides to the community! They are a valuable asset to the Ozarks! (1)
 - o Would love to see Cox Health get the contract for the schools ins. They are currently Mercy and have been as long as I can remember. (1)
 - o I think Cox has many great offerings, sometimes the patients are either none accepting due to pride or they tend to be non compliant. (1)
 - o Cox CARE Mobile has been a WONDERFUL resource for our families and kids here in Billings. We greatly appreciate this service and the staff that runs it. (1)
 - o I think that CoxHealth is a good health system that is trying to provide the best care possible to the community. (1)

Appendix 5: Public Health Survey

2. Education (9)
 - Some simple lifestyle tips would be great!!
 - Tools for tobacco cessation programs are needed.
 - Provide more opportunities for administrative and staff training for the issues listed above.
 - MOD [March of Dimes] is able to provide educational materials regarding healthy pregnancies for care givers and recipients
 - Educating the community about JDRF and the difference between Type 1 & Type 2 diabetes
 - Offer educational opportunities locally for patient with Diabetes, Heart disease, etc.
 - Education for the county residents in areas of concern could potentially be helpful.
 - Interested in programs that may come to the school or mobile health units.
 - Programs, programs, programs related to the student population.
3. Funding or Resources (2)
 - We were recently notified that public health could see a \$2 million reduction in state funding this year. If so we would have to end current programs & lay-off staff. (We received information that the governor is recommending a \$2 million reduction in our core functions contract. This recommendation has went to the legislatures for their recommendation and vote. Even if they would go with a smaller amount, I anticipate a significant cut.) (1)
 - With over 55% of Springfield students living in poverty, resources must be allocated to meet their health-care needs. (1)
4. Specific Partnership or Collaborative Needs (9)
 - A key contact person within each Cox Hospital who is dedicated to providing and accessing information for other agency staff
 - Networking among key staff would help with patient coordination.
 - Free classes on preventive maybe to partner with the YMCA.
 - Many of our members go to St. John's for ped. ophthalmology services and genetic counseling. These areas could be expanded @ Cox.
 - We appreciate our partnerships with CoxHealth, Ferrell Duncan Clinic, et al. Financial assistance with our events and outreach programs helps GYNCA get YOUR PATIENTS to treatment. Anything we can do to better facilitate getting all of
 - Need continued collaboration and communication between medical providers and school nurses. Providers should have regularly have parents sign permission for release of information so that we can create a more seamless system of care from provider's office to home to school. Another benefit for the students is for the school nurse to know that a student went to emergency room, for example, the child has a breathing emergency the night before and goes to ER, so that she can manage care more effectively at school.
 - A partnership with Cox could entail assistance in meal planning, development of shopping and food preparation classes for the developmentally disabled and financial assistance in making this dream a reality.
 - ENCOURAGE YOU TO UTILIZE THE SERVICES OF ORGANIZATION WHO HAVE CERTIFIED INSTRUCTOR IN MENTAL HEALTH FIRST AIDE AND SUICIDE PREVENTION COURSE.
 - We also have a terrible problem with both child abuse and methamphetamine addiction in this area. Possibly we could offer a resource center or a hotline for persons who need help. Rather than just taking a public stand against these issues, offer resources to help people out of a bad situation.
5. Specific Needs or Suggestions (19)
 - Access to Care(8)
 - Continue to support primary care endeavors to manage chronic disease. (1)
 - Recruitment of pediatric subspecialists (1)
 - Access to specialities such as Dermatology & Neurology would be helpful. (2)

Appendix 5: Public Health Survey

- It is extremely difficult to find a Psychiatrist and/or Psychologist that will see Medicaid patients. Burrell has a very long wait time and they now require a patient to see one of their Psychologists before they will schedule with a Psychiatrist, even if they do not need or have already seen a Psychologist. (1)
- Due to changes in future Medicare payments Cox needs to have a strong Geriatric and Palliative Care system to ensure resources are being used in the most effective manner for the benefit of patients and CoxHealth. There are very dedicated and passionate physicians and staff willing to take on this challenge if tasked with this issue. (1)
- 1) Provide more follow up care for those with mental illness. (1)
- 2) Provide dental care for those covered by Medicaid. (1)
- Fitness Centers (4)
 - Open your fitness center to low income families struggling with obesity, with a physician's referral (1)
 - People see the fitness centers as more exclusive and less "friendly" because so many classes require fees. (1)
 - The community would benefit from a branch of the Meyer Center. [Rogersville] (1)
 - Possible special arrangements for DD at Meyer Wellness Ctr (1)
- Hospital, Emergency Room, or Urgent Care (3)
 - I would feel the city of St Robert would assist in getting a emergency room or small hospital. (1)
 - Texas County needs an urgent care/after hours care for minor issues ie earaches, sore throats, rather than going to the ER. (1)
 - There are several empty buildings around the area we could utilize for the Urgent Care without have to build a building or try to squeeze someone in somewhere. [Monett] (1)
- Miscellaneous (4)
 - Since CoxHealth is not the major healthcare organization in this community, it is challenging to meet the assumption of patients that we do not have the services that they need. Patients who choose (or whose insurance plans choose) our system have to travel farther for services. This means the quality of our services, and our customer service needs to be exemplary in order to keep their business. (1)
 - Transition to ONE electronic medical record would be helpful in saving a chunk of my time in preparing patient reports. Searching both PowerChart and Centricity eats up time that could be better spent in many other ways serving the patients. (1)
 - Awareness - vision - implement - re-evaluate. Truly setting out to do something not just talking about it. (1)
 - Provide more space for childcare for employees. (1)
- 6. Uninsured and/or Poor (2)
 - We have many students that fall through the holes. They do not qualify for medicaid but do not make enough money to afford insurance and/or the deductible. This is a daily challenge for us. (1)
 - Many of our students come from low income families & receive no or little medical preventative care. (1)
- 7. Miscellaneous (9)
 - Since CoxHealth is a nonprofit organization this is another way to give back. If possible bill charges under hospital & reimburse physician like a trauma call. (1)
 - How is CoxHealth assisting in addressing the suggestions that have been made in question #4 will this be included in the results? (1)
 - Research indicates that a majority of patient visits to their PCP involves mental health issues, which manifest with somatic complaints. In other areas of the country, PCP offices have a psychologist placed in their clinics to which patients are referred. Since the psychologist is just down the hall, it removes the stigma commonly associated with mental health. Compliance is greatly improved and needless visits to the PCPs are reduced. (1)

Appendix 5: Public Health Survey

- It's so important that children have time to bond with their peers who are facing similar challenges. It is life-changing. (1)
 - The doctors and nurses are sometimes the first to see victim of domestic violence - their first response is central. (1)
 - Inexpensive healthy foods (1)
 - We have started having Jordan Valley on site with a PA so students can be seen. (1)
 - It would be nice to have our children seen on the days they are sick not days from then. We have a 30 mile drive if seen after hours at a urgent care and like I said sometimes transportation is a big issue. (1)
 - Work to reduce the co-pay on prescriptions. (1)
8. No Additional Comments / No Response / Unknown (91)

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