2025

COMMUNITY HEALTH NEEDS ASSESSMENT

Philipsburg, Montana

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

Granite County Medical Center

MONTANA STATE UNIVERSITY | Office of Rural Health | Area Health Education Center

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INTRODUCTION

Introduction

City of Philipsburg – Robert Stephenson

Granite County, located in western Montana, was founded in 1893 and named for a mountain which contains the Granite silver mine (*The Origin of Certain Place Names in the United States,* 1905). Granite County is surrounded by the Rocky Mountains in a remote part of the United States, isolated by distance and geography. Granite County has a low population density and is considered "Frontier" (six or less people per square mile) by the US Department of Health and Human Services. Granite County Medical Center (GCMC) is the only hospital which provides medical services to the Granite County population of approximately 3,000 people spread out over 1,727 square miles. GCMC is a 25-bed Critical Access Hospital with two outpatient clinics and provides medical services including: emergency services, acute care, a swing bed program, physical therapy, laboratory services, radiology, and long-term care. The facility is governed under a hospital district with a publicly elected board.

Economically, Granite County is relatively poor, with major industries such as timber and mining in abeyance and significant numbers of underserved and uninsured. Recently, there has been an influx of early retirees/second homes, drawn to the area's scenic amenities. For further demographic, socioeconomic and other related county and state data, please see Appendix B to review the Secondary Data Analysis.

Granite County Medical Center

Mission: Our mission is to deliver optimal care through commitment to excellence, quality, safety, and fiscal responsibility.

Granite County Medical Center participated in the Community Health Services Development (CHSD) Project administrated by the Montana Office of Rural Health (MORH). Community involvement in steering committee meetings and key informant interviews enhance community engagement in the assessment process.

Over the spring of 2025, Granite County Medical Center's service area was surveyed about its healthcare system. This report shows the results of the survey in both narrative and chart formats. A copy of the survey instrument is included at the end of this report (Appendix D). Readers are invited to familiarize themselves with the survey instrument and the subsequent findings. The narrative report touches on the highlights while the charts present data for virtually every question asked. Please note we are able to compare some of the 2025 survey data with data from previous surveys conducted in

partnership with the Montana Office of Rural Health in 2022 and 2019. If any statistical significance exists, it will be reported. The significance level was set at 0.05.

Health Assessment Process

A steering committee was convened to assist Granite County Medical Center in conducting CHSD. A diverse group of community members representing various organizations and populations within the community (ex. public health, elderly, uninsured) came together in December 2024. For a list of all steering committee members and their affiliations, see Appendix A. The Steering Committee met twice during the CHSD process; first to discuss health concerns in the community and offer their perspective in designing the survey instrument, and again to review results of the CHNA and to assist in the prioritization of health needs.

Survey Methodology

Survey Instrument

In February 2025, surveys were mailed out to the residents in Granite County Medical Center's service area. Survey respondents had the ability to complete the survey mailed to them, or via an online survey hosted at Montana State University's Social Data Collection and Analysis Services' (Social Data) web portal (Social Data was previously known as the HELPS Lab). The survey was based on a design that has been used extensively in the states of Washington, Wyoming, Alaska, Montana, and Idaho. The survey was designed to provide each facility with information from local residents regarding:

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

Sampling

Granite County Medical Center provided a list of aggregated outpatient and inpatient admissions. Those zip codes with the greatest number of admissions were selected to be included in the survey. A random list of 800 residents was then selected with the assistance of MSU Social Data. Residence was stratified in the initial sample selection so that each area would be represented in proportion to the overall served population and the proportion of past admissions. Note: although the survey samples were proportionately selected, actual surveys returned from each population area varied, which may result in slightly less proportional results. See table below for the survey distribution.

Zip Code	Population[1]	Community Name	Total Distribution	# Male	# Female
59858	1679	Philipsburg	396	198	198
59832	764	Drummond	180	90	90
59837	400	Hall	96	48	48
59711-H0	128	Anaconda (Georgetown Lake)	128	64	64
Total	1666		800	479	479

1 US Census Bureau - American Community Survey (2023)

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

Information Gaps – Data

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

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

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

Limitations in Survey and Focus Group Methodology

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

Conducting focus groups in addition to the random sample survey allows for a more robust sample, and ultimately, these efforts help to increase the community response rate. Partnering with local community organizations such as public health, community health centers, and senior centers, just to

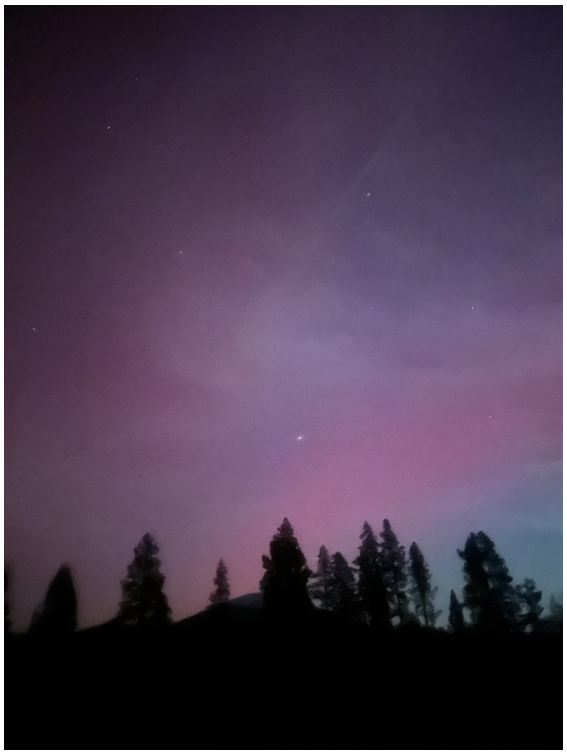
name a few, assists in reaching segments of the population that might not otherwise respond to a survey.

Focus group data can offer invaluable insight into the perception of a community or group of individuals. Focus group data are grouped into common themes based on the notes taken during the meetings. To better understand these themes, please review the focus group notes in Appendix H. MORH staff facilitated the focus groups for GCMC to ensure impartiality. However, given the small size of the community, focus group participants may still be hesitant to express their opinions freely. Personal identifiers are not included in the transcripts.

Survey Implementation

In February 2025, a survey, cover letter on Granite County Medical Center's letterhead with a postage paid envelope were mailed to 800 randomly selected residents in the hospital's service area. A news release was sent to the local newspaper as well as social media postings prior to the survey distribution announcing that Granite County Medical Center would be conducting a community health services survey throughout the region in cooperation with the Montana Office of Rural Health.

140 surveys were completed and returned out of 800. Of those 800 surveys, 57 surveys were returned undeliverable for a 18.84% response rate. From this point on, the total number of surveys will be out of 743. Based upon the sample size, we can be 95% confident that the responses to the survey questions are representative of the service area population, plus or minus 7.93%



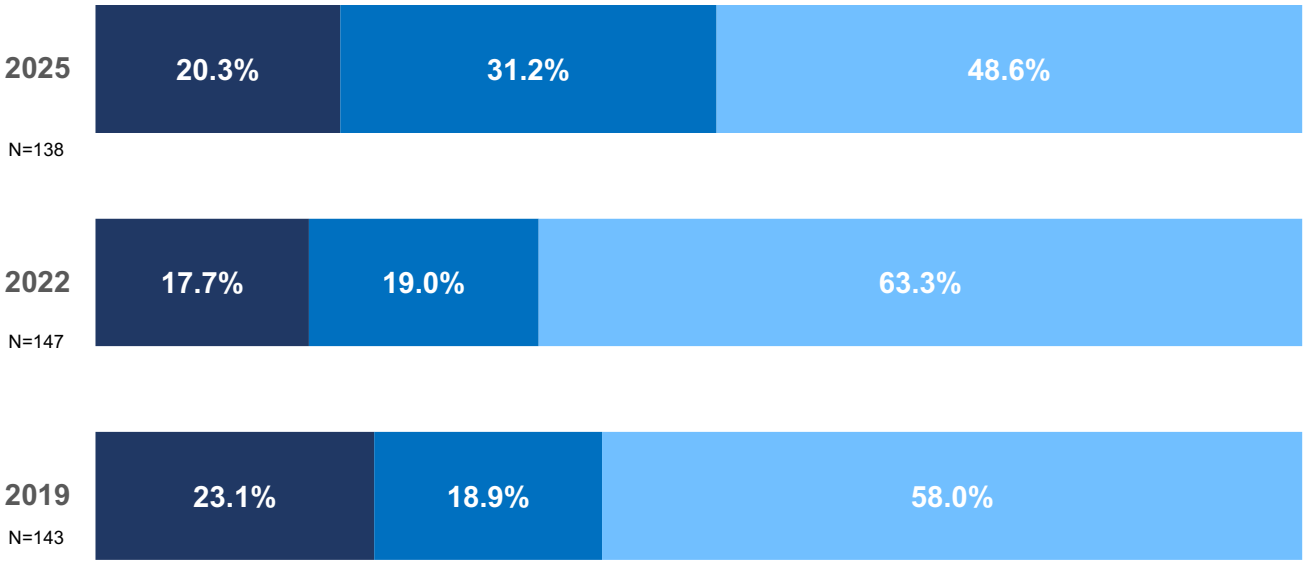
Survey Respondent Demographics

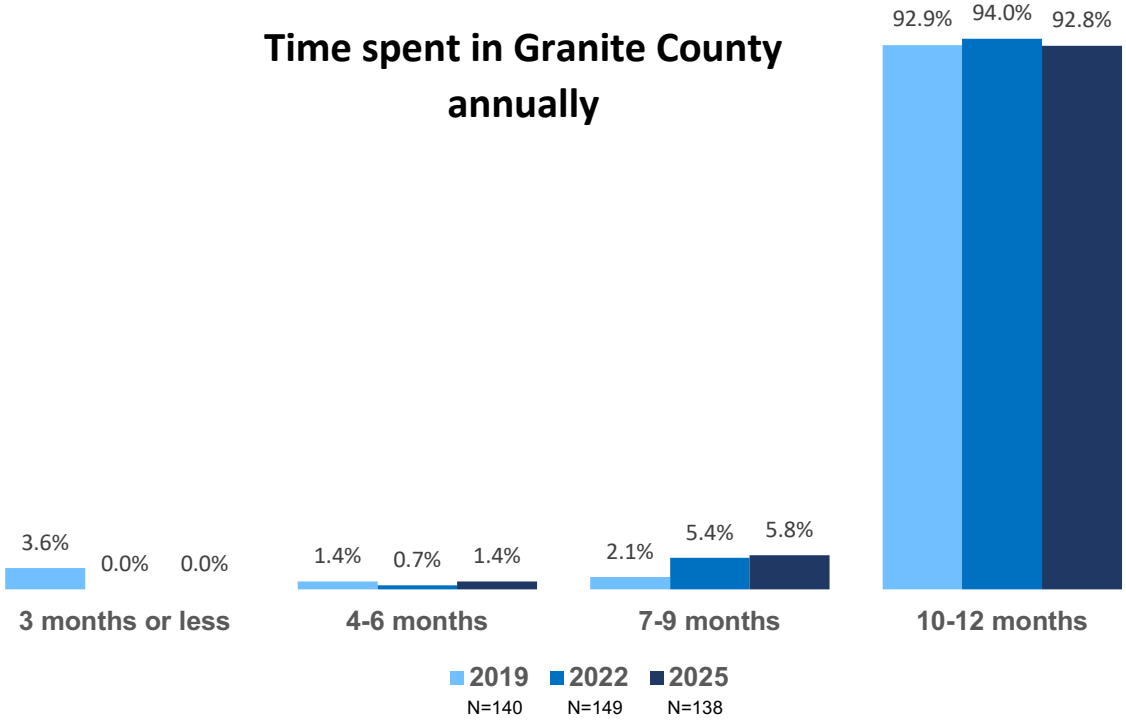
A total of 743 surveys were distributed amongst Granite County Medical Center's service area. 140 fifty surveys were completed for a 18.8% response rate. The following table and graphs indicate the demographic characteristics of the survey respondents. Information on location, gender, age, and employment is included. Percentages indicated on the tables and graphs are based upon the total number of responses for each individual question, as some respondents did not answer all questions.

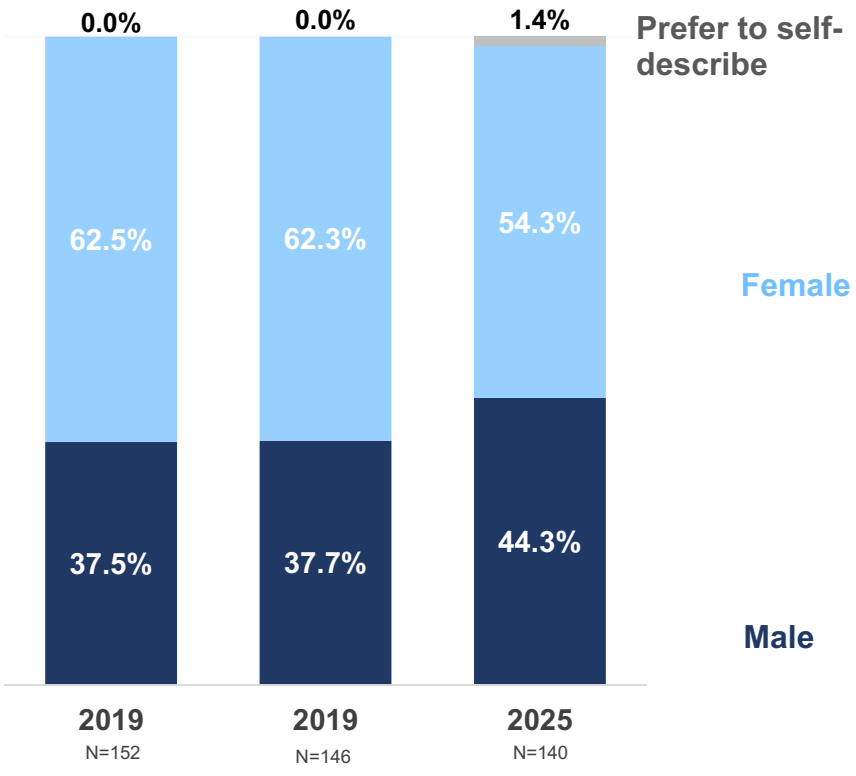
Place of Residence	2019 % (n)	2022 % (n)	2025 % (n)
Number of respondents	153	148	139
59858 Philipsburg	60.8% (93)	71.6% (106)	64.7% (90)
59832 Drummond	11.1% (17)	15.5% (23)	18.0% (25)
59837 Hall	13.1% (20)	11.5% (17)	13.7% (19)
59711 Anaconda	15.0% (23)	0.7% (1)	3.6% (5)
Other	0.0% (0)	0.7% (1)	0.0% (0)

Note that options that were asked in prior years but removed for the current survey are not included in the table, which means the individual counts, n, may not add up to the total number of respondents.

Length of Residency in Granite County

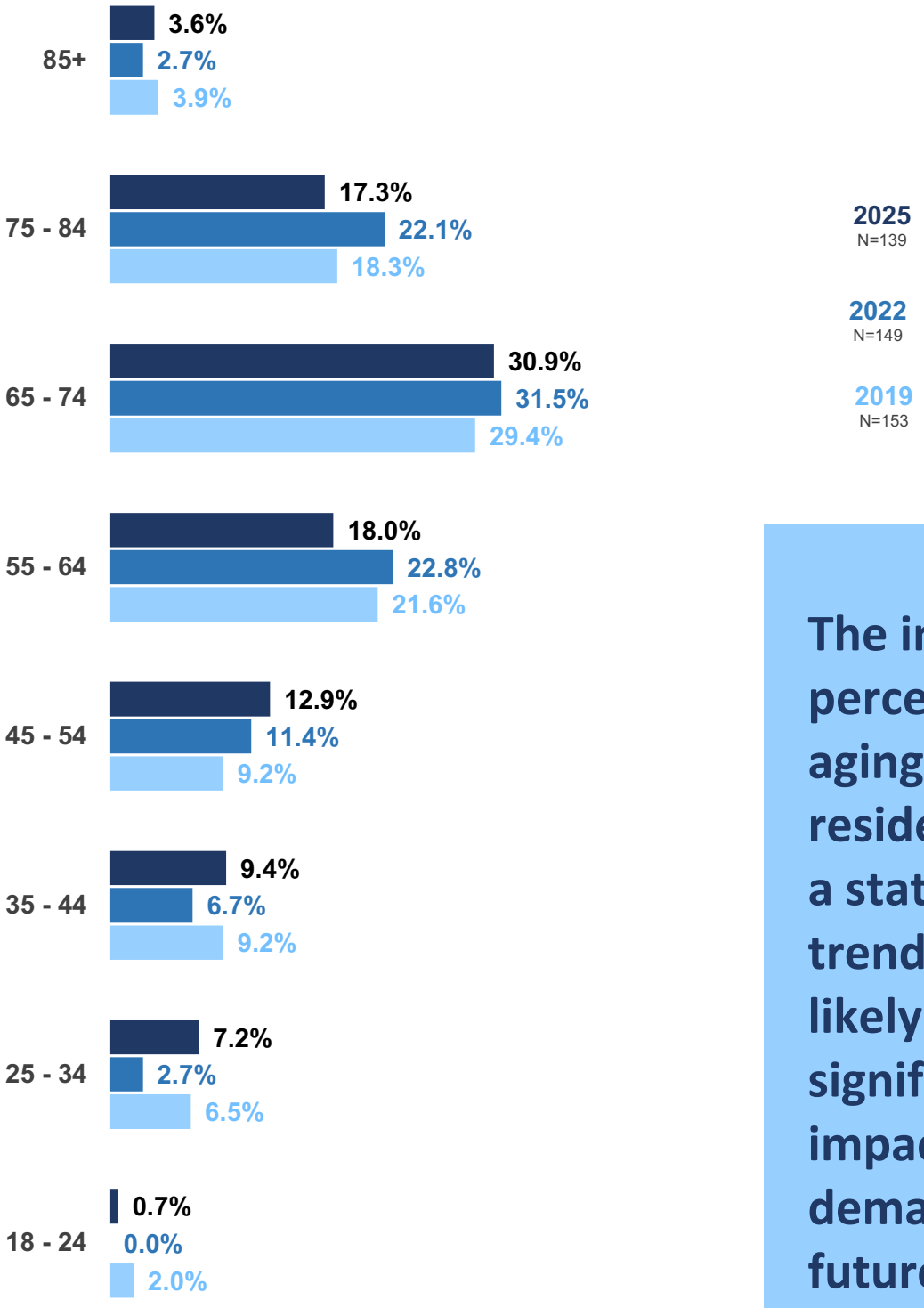






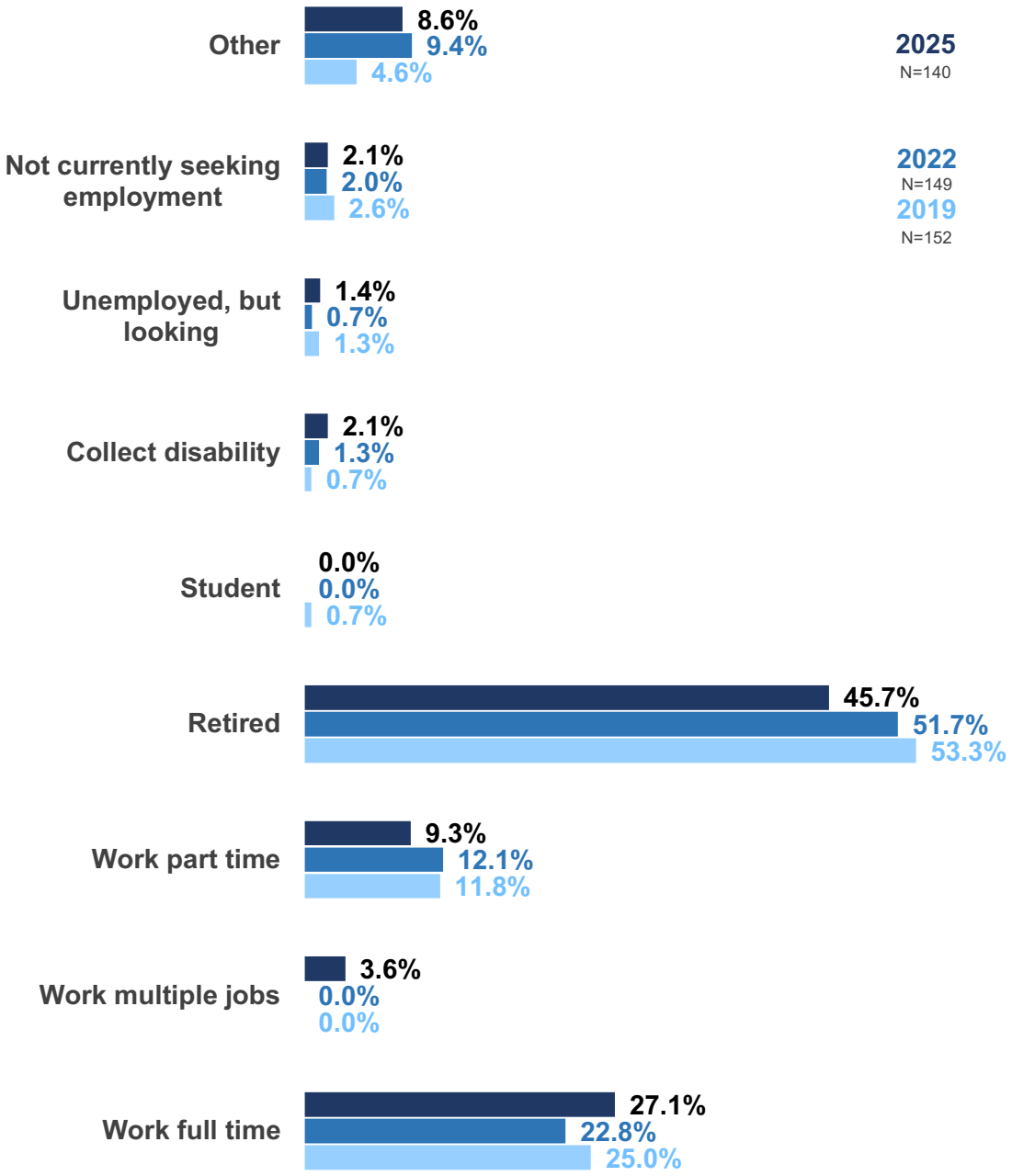
Women are frequently the healthcare decision makers for their families and more likely to respond to a health-related survey.

Age



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

Employment Status



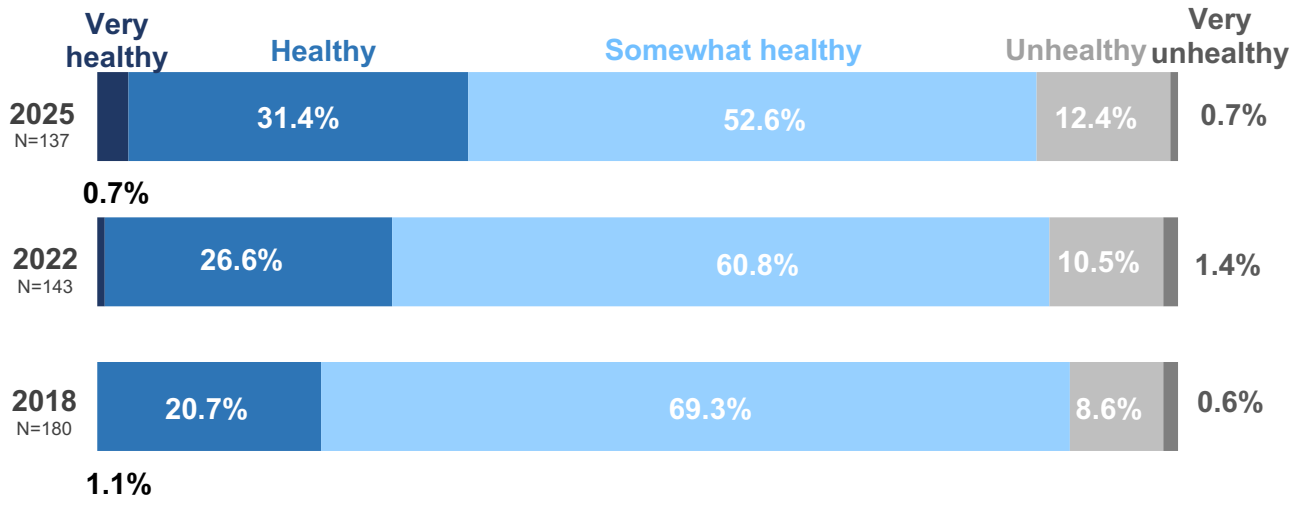
*Respondents (N=8) who selected over the allotted amount were moved to "Other."

SURVEY RESULTS

Survey Results

Rating of Healthy Community (Question 1)

Respondents were asked to indicate how they would rate the general health of their community. 52.6% of respondents (n=72) rated their community as “Somewhat healthy,” and 31.4% (n=43) felt their community was “Healthy.” Only 1 respondent rated their community as “Very unhealthy.”



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

Health Concerns for Community (Question 2)

Respondents were asked what they felt the three most serious health concerns were in their community. The top identified health concern was "Alcohol abuse/substance abuse" at 62.8% (n=86). "Mental health issues" was also a high priority at 46.7% (n=64), followed by "Overweight/obesity" at 29.9% (n=41), which has seen significant increase since 2022. Concerns about "Cancer screening" have decreased significantly since 2022.

Health Concern	2019 % (n)	2022 % (n)	2025 % (n)	SIGNIFCANT CHANGE
Number of respondents	156	145	137	
Alcohol abuse/substance use	59.0% (92)	59.3% (86)	62.8% (86)	☐
Mental health issues (depression, anxiety, stress, PTSD, etc.)			46.7% (64)	☐
Overweight/obesity	16.7% (26)	17.9% (26)	29.9% (41)	■
Lack of access to healthcare	15.4% (24)	22.1% (32)	19.0% (26)	☐
Housing/homelessness			16.8% (23)	☐
Heart disease & stroke			16.8% (23)	☐
Vaccine hesitancy			13.1% (18)	☐
Tobacco use	19.2% (30)	15.2% (22)	11.7% (16)	☐
Transportation			11.7% (16)	☐
Alzheimer's/dementia	14.1% (22)	9.7% (14)	10.2% (14)	☐
Cancer screening	32.7% (51)	20.0% (29)	9.5% (13)	■
COPD/asthma/respiratory disorders			7.3% (10)	☐
Diabetes	10.3% (16)	7.6% (11)	7.3% (10)	☐
Access to water/food			5.8% (8)	☐
Recreation and work related accidents/issues			5.1% (7)	☐
Domestic violence	2.6% (4)	0.7% (1)	3.6% (5)	☐
Other	1.9% (3)	7.6% (11)	8.8% (12)	■

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

"**Other**" comments included: "Lack of help for the elderly," "Home health care," "Service continuity"

(View all comments in Appendix F)

Components of a Healthy Community (Question 3)

Respondents were asked to identify the three most important things for a healthy community. 46.8% of respondents (n=65) indicated that "Good jobs and a healthy economy" is most important, followed by "Access to healthcare services" (44.6%, n=62) and "Affordable housing" at 42.4% (n=59).

Components of a Healthy Community	2019 % (n)	2022 % (n)	2025 % (n)	SIGNIFICANT CHANGE
Number of respondents	156	149	139	
Good jobs and a healthy economy	48.1% (75)	48.3% (72)	46.8% (65)	☐
Access to healthcare services	57.7% (90)	55.0% (82)	44.6% (62)	☐
Affordable housing	35.9% (56)	43.0% (64)	42.4% (59)	☐
Good schools	17.9% (28)	17.4% (26)	28.1% (39)	■
Healthy behaviors and lifestyles	28.2% (44)	20.1% (30)	26.6% (37)	☐
Low crime/safe neighborhoods	5.1% (8)	9.4% (14)	20.9% (29)	■
Strong family life	19.2% (30)	16.8% (25)	17.3% (24)	☐
Access to healthy foods		12.8% (19)	13.7% (19)	☐
Emergency medication services			12.9% (18)	☐
Access to childcare/after school programs	12.2% (19)	12.1% (18)	10.8% (15)	☐
Lack of health insurance coverage			8.6% (12)	☐
Clean environment	17.3% (27)	5.4% (8)	7.2% (10)	■
Access to addiction counseling			4.3% (6)	☐
Transportation services	6.4% (10)	6.0% (9)	2.9% (4)	☐
Parks and recreation	1.9% (3)	3.4% (5)	2.2% (3)	☐
Low death and disease rates	4.5% (7)	0.7% (1)	1.4% (2)	☐
Other	1.3% (2)	2.7% (4)	2.9% (4)	☐

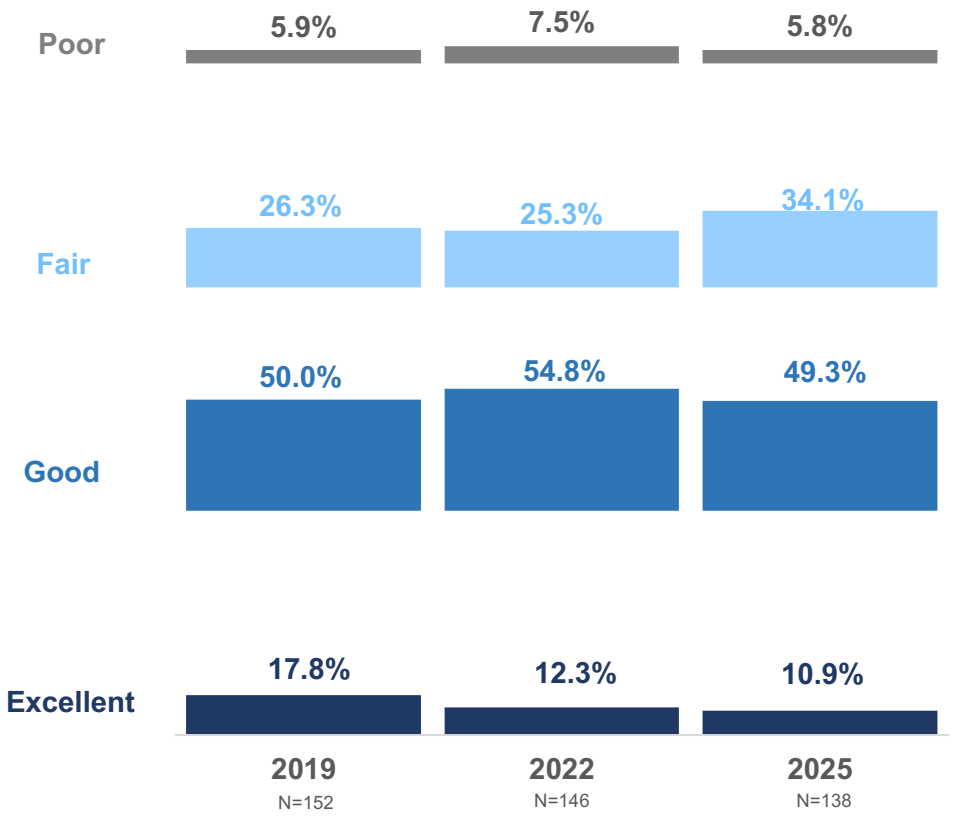
A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to pick their top three components of a healthy community, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

"**Other**" comments included: "Access to emergency/ambulance services," "Exercise"

(View all comments in Appendix F)

Knowledge of Health Services (Question 4)

Respondents were asked to rate their knowledge of the health services available through Granite County Medical Center. 49.3% of respondents (n=68) rated their knowledge of health services as "Good," 34.1% (n=47) rated theirs as "Fair," and 10.9% (n=8) said "Poor."



How Respondents Learn of Health Services (Question 5)

When asked how survey respondents learn about health services available in the community, the most frequently indicated method of learning was “Friends/family” at 64.5% (n=89). “Word of mouth/reputation” was also frequently used to learn about health services at 63.0% (n=87), followed by “Healthcare provider” at 35.5% (n=49). “Social media” and “Website/internet” saw significant increases since 2022.

How Respondents Learn about Community Health Services	2019 % (n)	2022 % (n)	2025 % (n)	SIGNIFICANT CHANGE
Number of respondents	156	148	138	
Friends/family	64.7% (101)	69.6% (103)	64.5% (89)	☐
Word of mouth/reputation	63.5% (99)	61.5% (91)	63.0% (87)	☐
Healthcare provider	41.0% (64)	36.5% (54)	35.5% (49)	☐
Newspaper	36.5% (57)	31.8% (47)	27.5% (38)	☐
Social media	17.3% (27)	10.8% (16)	21.7% (30)	■
Mailings/newsletter	12.2% (19)	16.9% (25)	20.3% (28)	☐
Website/internet	9.6% (15)	14.2% (21)	20.3% (28)	■
Billboards/posters			10.1% (14)	☐
Public health nurse	14.1% (22)	16.9% (25)	10.1% (14)	☐
Presentations	6.4% (10)	2.0% (3)	4.3% (6)	☐
Radio	0.6% (1)	2.0% (3)	0.7% (1)	☐
Other	3.2% (5)	4.1% (6)	5.8% (8)	☐

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

“**Other**” comments included: “Work,” “Flyers,” “Personal experience,” “Emergency room”

(View all comments in Appendix F)

View a cross tabulation of how respondents learn with how they rate their knowledge on p. 75

Utilized Community Health Resources (Question 6)

Respondents were asked which community health resources, other than Granite County Medical Center, they had used in the last three years. The "Pharmacy" was the most frequently utilized community health resource cited by respondents at 73.6% (n=95). "Dentist" was utilized by 55.0% (n=71) of respondents followed by "Public library" at 51.2% (n=66).

Use of Community Health Resources	2019 % (n)	2022 % (n)	2025 % (n)	SIGNIFICANT CHANGE
Number of respondents	156	142	129	
Pharmacy	62.8% (98)	73.9% (105)	73.6% (95)	☐
Dentist	43.6% (68)	31.0% (44)	55.0% (71)	■
Public library		43.7% (62)	51.2% (66)	☐
Fitness center	12.8% (20)	4.2% (6)	19.4% (25)	■
Public health	7.1% (11)	11.3% (16)	17.8% (23)	■
Senior center	12.8% (20)	16.9% (24)	15.5% (20)	☐
Healthy Granite County Network		18.3% (26)	12.4% (16)	☐
Mental health	6.4% (10)	3.5% (5)	8.5% (11)	☐
Blood donation			7.8% (10)	☐
Veteran services/resources		1.4% (2)	7.0% (9)	■
Food Banks	1.3% (2)	4.2% (6)	5.4% (7)	☐
Home care services	7.1% (11)	2.1% (3)	3.9% (5)	☐
Meals on Wheels	4.5% (7)	3.5% (5)	3.9% (5)	☐
Area V Agency on Aging		4.2% (6)	2.3% (3)	☐
Hospice services			2.3% (3)	☐
Substance abuse services	1.3% (2)	1.4% (2)	2.3% (3)	☐
Other	9.6% (15)	7.0% (10)	7.0% (9)	☐

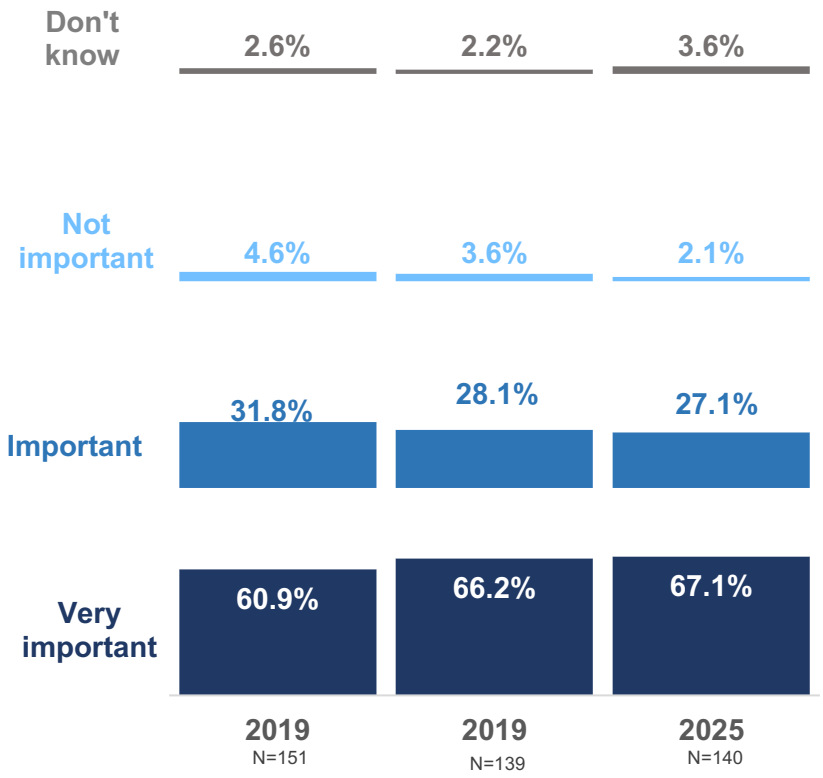
A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to select all other community health resources used, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

"**Other**" comments included: "None in Granite County," "Goathouse Gym," "Brewery"

(View all comments in Appendix F)

Economic Importance of Healthcare (Question 7)

The majority of respondents (67.1%, n=94) indicated that local healthcare providers and services (i.e., hospitals, clinics, nursing homes, assisted living, etc.) are “Very important” to the economic well-being of the area. 27.1% of respondents (n=38) indicated they are “Important,” and 2.1% (n=3) respondents felt they are “Not important.”



Improve Community's Access to Healthcare (Question 8)

Respondents were asked to indicate what they felt would improve their community's access to healthcare. The majority of respondents (46.2%, n=60) reported that "More information about available services" would make the greatest improvement. 42.3% of respondents (n=55) indicated "More specialists," followed by "Improved quality of care" at 36.9% (n=48).

What Would Improve Community Access to Healthcare	2019 % (n)	2022 % (n)	2025 % (n)	SIGNIFICANT CHANGE
Number of respondents	156	139	130	
More information about available services	36.5% (57)	43.2% (60)	46.2% (60)	☐
More specialists	25.0% (39)	26.6% (37)	42.3% (55)	■
Improved quality of care	36.5% (57)	41.7% (58)	36.9% (48)	☐
Payment assistance programs (healthcare expenses)		23.0% (32)	27.7% (36)	☐
Expanded clinic hours			26.2% (34)	☐
Health Navigator (i.e. assistance signing up for insurance, Medicare, or Medicaid)			23.8% (31)	☐
Telemedicine/telehealth	14.7% (23)	12.9% (18)	22.3% (29)	☐
Transportation assistance	26.3% (41)	28.8% (40)	21.5% (28)	☐
Outpatient services expanded hours	27.6% (43)	33.8% (47)	18.5% (24)	■
Greater health education services	20.5% (32)	20.9% (29)	14.6% (19)	☐
Interpreter services (including sign language)/cultural sensitivity			3.8% (5)	☐
Other	7.1% (11)	5.8% (8)	15.4% (20)	■

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

"**Other**" comments included: "Wider scope of treatment at GCMC," "Affordable cost," "Better administrators," "Dependable ambulance service," "Provider stability"

(View all comments in Appendix F)

Interest in Educational Classes/Programs (Question 9)

Respondents were asked if they would be interested in any educational classes/programs made available to the community. The most frequently selected class/program was "Fitness" at 40.7% (n=46). Interest in "Health and wellness" followed with 38.9% (n=44), and 33.6% of respondents (n=38, each) were interested in "First aid/CPR Stop the Bleed" and "Women's health."

Interest in Classes or Programs	2019 % (n)	2022 % (n)	2025 % (n)	SIGNIFICANT CHANGE
Number of respondents	156	121	113	
Fitness	30.1% (47)	34.7% (42)	40.7% (46)	☐
Health and wellness	30.8% (48)	39.7% (48)	38.9% (44)	☐
First aid/CPR Stop the Bleed	25.0% (39)	27.3% (33)	33.6% (38)	☐
Women's health	27.6% (43)	35.5% (43)	33.6% (38)	☐
Weight loss	18.6% (29)	22.3% (27)	32.7% (37)	■
Nutrition	16.0% (25)	15.7% (19)	26.5% (30)	☐
Meditation/yoga			23.9% (27)	☐
Mental health	10.9% (17)	15.7% (19)	23.9% (27)	■
Living will/advance directives	21.2% (33)	21.5% (26)	20.4% (23)	☐
Men's health	10.9% (17)	11.6% (14)	19.5% (22)	☐
Alzheimer's/dementia	11.5% (18)	16.5% (20)	15.9% (18)	☐
Cancer	10.9% (17)	10.7% (13)	14.2% (16)	☐
Diabetes/diabetes prevention	10.3% (16)	9.1% (11)	12.4% (14)	☐
Heart disease	9.6% (15)	5.8% (7)	10.6% (12)	☐
Chronic illness			9.7% (11)	☐
Grief counseling	9.6% (15)	9.9% (12)	9.7% (11)	☐
Alcohol/substance use	6.4% (10)	5.8% (7)	8.8% (10)	☐
Parenting	3.8% (6)	2.5% (3)	7.1% (8)	☐
Smoking/tobacco cessation	5.1% (8)	3.3% (4)	5.3% (6)	☐

Table continued on the next page.

Lactation/breastfeeding support		0.8% (1)	4.4% (5)	☐
Prenatal	1.9% (3)	0.0% (0)	1.8% (2)	☐
Other	5.1% (8)	5.8% (7)	8.8% (10)	☐

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

"**Other**" comments included: "EMT," "Hormone Replacement therapy," "Hospice," "Palliative care"

(View all comments in Appendix F)

Desired Local Services (Question 10)

Respondents were asked to indicate which additional services they or a family member would utilize if available locally. Respondents indicated the most interest in "Physical therapy" at 36.9% (n=45). 36.1% of respondents (n=44) were interested in a "Chiropractor," while 26.2% (n=32) said "Audiology (ear)."

Desired Health Services	2019 % (n)	2022 % (n)	2025 % (n)	SIGNIFICANT CHANGE
Number of respondents	156	105	122	
Physical therapy			36.9% (45)	☐
Chiropractor			36.1% (44)	☐
Audiology (ear)	16.0% (25)	27.6% (29)	26.2% (32)	■
Mammography	14.1% (22)	21.9% (23)	23.8% (29)	☐
MRI	11.5% (18)	10.5% (11)	23.8% (29)	■
Home health/senior services		30.5% (32)	21.3% (26)	☐
Ophthalmologist (eye)	25.0% (39)	31.4% (33)	21.3% (26)	☐
Pain management	8.3% (13)	22.9% (24)	19.7% (24)	■
Naturopathy	7.7% (12)	16.2% (17)	16.4% (20)	■
Mental/behavioral health/counseling	9.0% (14)	12.4% (13)	14.8% (18)	☐
Urology	8.3% (13)	17.1% (18)	12.3% (15)	☐
Cardiac ECHOs			11.5% (14)	☐

Table continued on the next page.

Medication management	6.4% (10)	5.7% (6)	11.5% (14)	☐
Occupational therapy			11.5% (14)	☐
Pediatrician	5.8% (9)	8.6% (9)	11.5% (14)	☐
Cardiac rehabilitation			8.2% (10)	☐
Diabetic dietary counseling			8.2% (10)	☐
Psychiatrist	6.4% (10)	8.6% (9)	8.2% (10)	☐
Cancer care	7.1% (11)	7.6% (8)	7.4% (9)	☐
Podiatry			7.4% (9)	☐
Pre-employment testing (e.g., drug testing, physicals, etc.)			6.6% (8)	☐
Reproductive health services			5.7% (7)	☐
Speech therapy			4.9% (6)	☐
Mental function tests			4.1% (5)	☐
Addiction counseling			3.3% (4)	☐
Pulmonology			3.3% (4)	☐
Family planning		4.8% (5)	2.5% (3)	☐
Coagulation therapy monitoring			1.6% (2)	☐
STD testing			1.6% (2)	☐
Other	12.2% (19)	12.4% (13)	9.0% (11)	☐

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

"**Other**" comments included: "Psych meds management," "Optometry," "Orthopedic," "Skin cancer screening," "Dermatologist"

(View all comments in Appendix F)

Utilization of Preventive Services (Question 11)

Respondents were asked if they had utilized any of the preventive services listed in the past year. "Blood panel" and "Blood pressure check" were each selected by 69.6% of respondents (n=94, each), followed by "Dental check" at 57.0% (n=77). Survey respondents could select all services that applied.

Use of Preventive Services	2019 % (n)	2022 % (n)	2025 % (n)	SIGNIFICANT CHANGE
Number of respondents	156	141	135	
Blood panel	47.4% (74)	57.4% (81)	69.6% (94)	■
Blood pressure check	38.5% (60)	44.7% (63)	69.6% (94)	■
Dental check	48.7% (76)	55.3% (78)	57.0% (77)	☐
Cholesterol check	34.6% (54)	48.2% (68)	54.1% (73)	■
Flu shot/immunizations	48.1% (75)	54.6% (77)	48.1% (65)	☐
Health checkup	42.9% (67)	53.2% (75)	48.1% (65)	☐
Vision check	36.5% (57)	45.4% (64)	45.2% (61)	☐
Blood sugar checks			40.0% (54)	☐
Mammography	16.0% (25)	27.7% (39)	26.7% (36)	■
Breast cancer screenings			23.7% (32)	☐
Colonoscopy	13.5% (21)	19.1% (27)	23.7% (32)	☐
Skin cancer screenings	17.3% (27)	20.6% (29)	23.0% (31)	☐
Weight/BMI check			20.0% (27)	☐
Prostate (PSA)	15.4% (24)	14.2% (20)	18.5% (25)	☐
Pap test	10.9% (17)	13.5% (19)	17.0% (23)	☐
Hearing check	9.6% (15)	8.5% (12)	16.3% (22)	☐
Diabetes screenings			14.1% (19)	☐
Cardiovascular disease screenings			11.1% (15)	☐
Cervical cancer screenings			11.1% (15)	☐
Children's checkup/well baby	7.7% (12)	2.1% (3)	8.9% (12)	■

Table continued on the next page.

Health fair			8.1% (11)	☐
None	8.3% (13)	5.0% (7)	3.7% (5)	☐
COPD screenings			2.2% (3)	☐
STD Testing			1.5% (2)	☐
Lung cancer screenings			0.7% (1)	☐
Other	8.3% (13)	8.5% (12)	3.0% (4)	☐

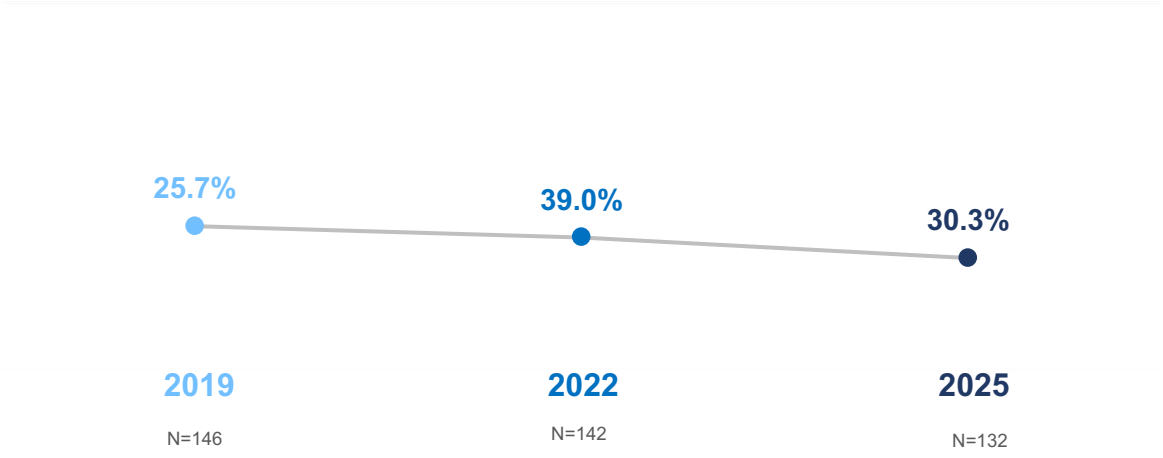
A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents could select any of the preventative services listed, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

"**Other**" comments included: "Allergy testing"

(View all comments in Appendix F)

Delay of Services (Question 12)

30.3% of respondents (n=40) reported that they or a member of their household thought they needed healthcare services but did not get them or had to delay getting them. 69.7% of respondents (n=92) felt they were able to get the healthcare services they needed without delay.



View a cross tabulation of where respondents live and 'delay of healthcare services' on p. 76

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

Forty survey respondents indicated they were unable to receive or had to delay services, and they all shared their top three reasons for not receiving or delaying needed services. The reasons most cited were "It was too far to go" and "Too long to wait for an appointment" (each at 25.0%, n=10). "Qualified provider not available" followed at 22.5% (n=9), and then "My insurance didn't cover it" at 20.0% (n=8). "It was too far to go" increased significantly as a reason for delaying care since the last assessment.

Reasons for Delay in Receiving Needed Healthcare	2019 % (n)	2022 % (n)	2025 % (n)	SIGNIFICANT CHANGE
Number of respondents	57	51	40	
It was too far to go	15.8% (9)	5.9% (3)	25.0% (10)	■
Too long to wait for an appointment	26.3% (15)	27.5% (14)	25.0% (10)	☐
Qualified provider not available			22.5% (9)	☐
My insurance didn't cover it	10.5% (6)	13.7% (7)	20.0% (8)	☐
It cost too much	24.6% (14)	9.8% (5)	15.0% (6)	☐
Could not get an appointment	14.0% (8)	21.6% (11)	10.0% (4)	☐
Didn't know where to go	7.0% (4)	3.9% (2)	10.0% (4)	☐
No insurance	15.8% (9)	2.0% (1)	7.5% (3)	■
Requested provider not available			7.5% (3)	☐
Don't like doctors/PAs/NPs	19.3% (11)	21.6% (11)	5.0% (2)	☐
Had no childcare	3.5% (2)	2.0% (1)	5.0% (2)	☐
Office wasn't open when I could go	5.3% (3)	7.8% (4)	5.0% (2)	☐
Too nervous or afraid	5.3% (3)	0.0% (0)	5.0% (2)	☐
Transportation problems	10.5% (6)	9.8% (5)	5.0% (2)	☐
Unsure if services were available	8.8% (5)	13.7% (7)	5.0% (2)	☐
Don't understand healthcare system			2.5% (1)	☐
Not treated with respect	8.8% (5)	7.8% (4)	2.5% (1)	☐
Could not get off work	1.8% (1)	2.0% (1)	0.0% (0)	☐
Language barrier			0.0% (0)	☐
Privacy/confidentiality			0.0% (0)	☐

Other	14.0% (8)	31.4% (16)	27.5% (11)	☐

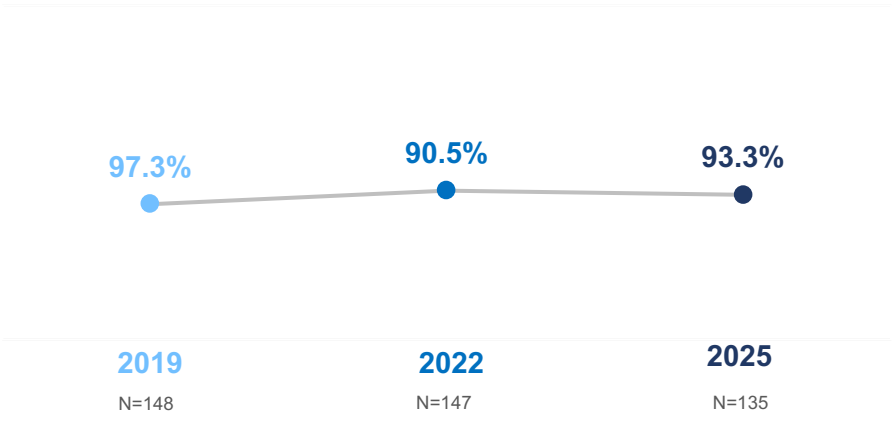
A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to indicate the top three reasons for delay in seeking healthcare, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. *Respondents (N=6) who selected over the allotted amount were moved to "Other."

"**Other**" comments included: "Go elsewhere due to lack of faith in local services," "Referral was never forwarded by specialist," "Minimized situation"

(View all comments in Appendix F)

Primary Care Services (Question 14)

93.3% of respondents (n=126) indicated they or someone in their household had been seen by a primary care provider (such as a family physician, physician assistant, or nurse practitioner) for healthcare services in the past three years. 6.7% of respondents (n=9) indicated they had not received primary care.



Location of Primary Care Services (Question 15)

All respondents who indicated receiving primary care services in the previous three years (n=126) also shared the location where they received services. 27.0% of respondents (n=34) reported receiving care in Missoula, 22.2% of respondents (n=28) received care at Granite County Medical Center, and 19.0% (n=24) traveled to Anaconda. 24 respondents were moved to "other" due to selecting more than one primary care provider location.

Location of Primary Care Provider	2019 % (n)	2022 % (n)	2025 % (n)
Number of respondents	130	139	126
Missoula	34.6% (45)	22.3% (31)	27.0% (34)
Granite County Medical Center - Philipsburg	25.4% (33)	25.9% (36)	22.2% (28)
Anaconda	21.5% (28)	21.6% (30)	19.0% (24)
Deer Lodge	5.4% (7)	5.0% (7)	4.0% (5)
Granite County Medical Center - Drummond	3.8% (5)	0.7% (1)	3.2% (4)
Butte	3.8% (5)	2.9% (4)	2.4% (3)
Bozeman			1.6% (2)
Helena			0.8% (1)
Telehealth			0.8% (1)
VA Facility	2.3% (3)	0.7% (1)	0.0% (0)
Other	3.1% (4)	20.9% (29)	19.0% (24)

Grayed out cells indicate the question was not asked that year. Note that options that were asked in prior years but removed for the current survey are not included in the table, which means the individual counts, n, may not add up to the total number of respondents.*Respondents (N=24) who selected over the allotted amount were moved to "Other."

"**Other**" comments included: Minnesota, Salt Lake City, Kalispell (2)

(View all comments in Appendix F)

View a cross tabulation of where respondents live with where they utilize primary care services on p. 77

Reasons for Primary Care Provider Selection (Question 16)

Of the respondents who indicated they or someone in their household had been seen by a primary care provider within the past three years (n=126) all shared why they chose that primary care provider. "Closest to home" was the most frequently selected reason at 42.1% (n=53), followed by "Appointment availability" at 34.9% (n=44), and "Clinic/provider's reputation for quality" at 32.5% (n=41).

Reasons for Selecting Primary Care Provider	2019 % (n)	2022 % (n)	2025 % (n)	SIGNIFICANT CHANGE
Number of respondents	134	139	126	
Closest to home	35.1% (47)	27.3% (38)	42.1% (53)	■
Appointment availability	23.1% (31)	30.2% (42)	34.9% (44)	☐
Clinic/provider's reputation for quality	32.1% (43)	36.7% (51)	32.5% (41)	☐
Prior experience with clinic	41.8% (56)	36.0% (50)	31.0% (39)	☐
Recommended by family or friends	19.4% (26)	20.9% (29)	23.0% (29)	☐
Referred by physician or other provider	19.4% (26)	20.9% (29)	13.5% (17)	☐
Required by insurance plan	5.2% (7)	7.9% (11)	6.3% (8)	☐
Length of waiting room time	6.7% (9)	5.0% (7)	5.6% (7)	☐
Cost of care	6.7% (9)	4.3% (6)	4.8% (6)	☐
Privacy/confidentiality		9.4% (13)	4.8% (6)	☐
VA/Military requirement	3.7% (5)	3.6% (5)	4.8% (6)	☐
Indian Health Services	0.7% (1)	0.0% (0)	0.0% (0)	☐
Other	9.7% (13)	15.1% (21)	11.9% (15)	☐

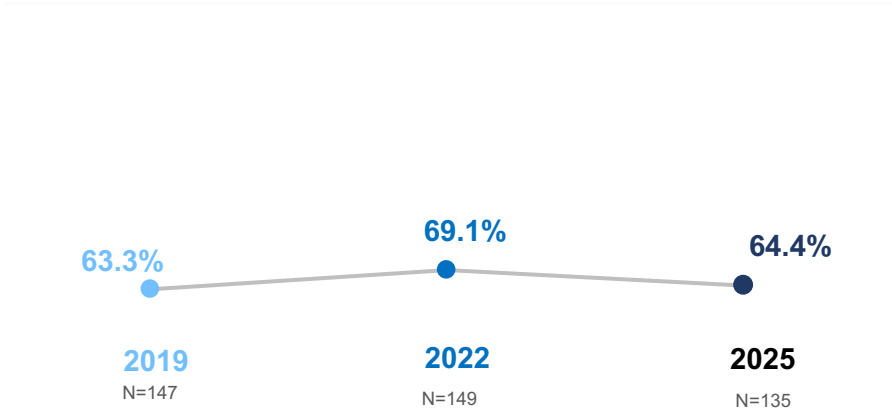
A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to pick the reasons for selection of their primary care provider, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year.

"**Other**" comments included: Length of time seeing specific doctor (4), "Lack of faith in local services," "Don't have one" (2), "No trust in Philipsburg hospital at all"
(View all comments in Appendix F)

View a cross tabulation of where respondents utilize primary care services with their reasons for selecting their provider on p. 78

Hospital Care Services (Question 17)

Respondents were asked if they or someone in their household had received hospital care in the last three years. Hospitalization was quantified as hospitalized overnight, day surgery, obstetrical care, rehabilitation, radiology, or emergency care. 64.4% percent of respondents (n=87) reported that they or a member of their family had received hospital care during the previous three years, and 35.6% (n=48) had not received hospital services.



Location of Hospital Services (Question 18)

For those who had visited a hospital, they were asked where the hospital they most frequently visited was located. 37.9% of respondents (n=33) reported receiving care at St. Patrick Hospital - Missoula and 14.9% of respondents (n=13) received services at Community Hospital of Anaconda. 20 respondents were moved to the "Other" category for selecting more than one hospital location.

Hospital Used Most Often	2019 % (n)	2022 % (n)	2025 % (n)
Number of respondents	87	102	87
St. Patrick Hospital - Missoula	43.7% (38)	37.3% (38)	37.9% (33)
Community Hospital of Anaconda	29.9% (26)	20.6% (21)	14.9% (13)
Granite County Medical Center - Philipsburg	10.3% (9)	9.8% (10)	9.2% (8)
Community Medical Center - Missoula	8.0% (7)	10.8% (11)	8.0% (7)
St. James Healthcare - Butte	2.3% (2)	1.0% (1)	2.3% (2)
Bozeman Health			1.1% (1)
Deer Lodge Medical Center	1.1% (1)	3.9% (4)	1.1% (1)
St. Peter's Hospital - Helena			0.0% (0)
VA Facility	1.1% (1)	1.0% (1)	0.0% (0)
Other	3.4% (3)	15.7% (16)	25.3% (22)

Grayed out cells indicate the question was not asked that year. Note that options that were asked in prior years but removed for the current survey are not included in the table, which means the individual counts, n, may not add up to the total number of respondents. *Respondents (N=20) who selected over the allotted amount were moved to "Other."

"**Other**" comments included: Missoula Bone and Joint (3), Reno, University of Utah, Dartmouth

(View all comments in Appendix F)

View a cross tabulation of where respondents live with where they utilize hospital services on p. 79

Reasons for Hospital Selection (Question 19)

All respondents who had a personal or family experience at a hospital within the past three years shared their top three reasons for selecting the facility used most often. The top reason was "Hospital's reputation for quality" (37.9%, n=33). "Prior experience with hospital" was next at 33.3% (n=29), followed by "Referred by provider" at 32.2% (n=28).

Reasons for Selecting Hospital	2019 % (n)	2022 % (n)	2025 % (n)	SIGNIFICANT CHANGE
Number of respondents	93	102	87	
Hospital's reputation for quality	50.5% (47)	60.8% (62)	37.9% (33)	■
Prior experience with hospital	53.8% (50)	64.7% (66)	33.3% (29)	■
Referred by provider	35.5% (33)	25.5% (26)	32.2% (28)	□
Emergency, no choice	33.3% (31)	24.5% (25)	31.0% (27)	□
Closest to home	26.9% (25)	34.3% (35)	29.9% (26)	□
Recommended by family or friends	10.8% (10)	1.0% (1)	12.6% (11)	■
Required by insurance plan	5.4% (5)	2.0% (2)	3.4% (3)	□
Closest to work	2.2% (2)	1.0% (1)	2.3% (2)	□
Financial assistance programs	2.2% (2)	3.9% (4)	2.3% (2)	□
Privacy/confidentiality		7.8% (8)	2.3% (2)	□
VA/Military requirement	2.2% (2)	0.0% (0)	2.3% (2)	□
Cost of care	3.2% (3)	3.9% (4)	1.1% (1)	□
Other	5.4% (5)	2.9% (3)	16.1% (14)	■

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to pick their top three reasons for selecting a hospital, so percentages do not equal 100%. Grayed out cells indicate the question was not asked that year. *Respondents (N=8) who selected over the allotted amount were moved to "Other."

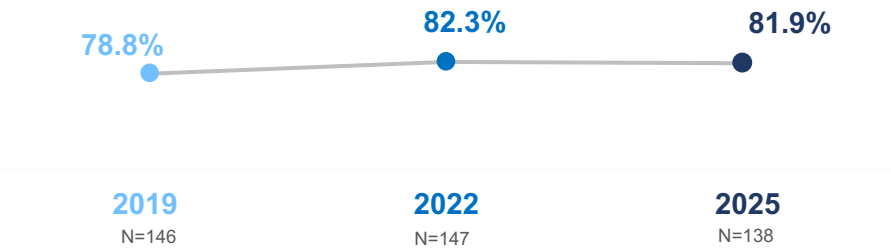
"**Other**" comments included: Needed specialty care (3), "Was unsure closer options could do anything," "I trust the healthcare providers"

(View all comments in Appendix F)

View a cross tabulation of where respondents utilize hospital services with their reasons for selecting that facility p. 80

Specialty Care Services (Question 20)

Respondents were asked if they or someone in their household had seen a healthcare specialist in the last three years. Specialty care was quantified as a health provider other than their primary care provider or family doctor. 81.9% of the respondents (n=113) indicated they or a household member had seen a healthcare specialist during the past three years; 18.1% (n=25) indicated they had not.



Location of Healthcare Specialists (Question 21)

The respondents who indicated they saw a healthcare specialist in the past three years (n=112) shared where they sought services. The most (40.2%, n=45) sought specialty care at St. Patrick Hospital – Missoula, followed by Community Hospital of Anaconda (29.5%, n=33). Respondents could select more than one location, so percentages do not equal 100%.

Location of Specialist	2019 % (n)	2022 % (n)	2025 % (n)	SIGNIFICANT CHANGE
Number of respondents	115	121	112	
St. Patrick Hospital - Missoula	38.3% (44)	43.8% (53)	40.2% (45)	☐
Community Hospital of Anaconda	29.6% (34)	31.4% (38)	29.5% (33)	☐
Community Medical Center - Missoula	19.1% (22)	25.6% (31)	25.9% (29)	☐
Granite County Medical Center - Philipsburg	10.4% (12)	13.2% (16)	21.4% (24)	☐
St. James Healthcare - Butte	7.8% (9)	6.6% (8)	6.3% (7)	☐
Deer Lodge Medical Center	2.6% (3)	9.9% (12)	4.5% (5)	■
St. Peter's Hospital - Helena			4.5% (5)	☐
Telehealth			4.5% (5)	☐

Bozeman Health			3.6% (4)	☐
VA Facility	4.3% (5)	3.3% (4)	1.8% (2)	☐
Other	27.8% (32)	32.2% (39)	39.3% (44)	☐

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

"**Other**" comments included: Missoula Bone and Joint (8) and Missoula (5)

(View all comments in Appendix F)

Type of Healthcare Specialist Seen (Question 22)

Among the 112 respondents who shared the type of specialist they saw, the most frequently utilized was the "Dentist" at 41.1% (n=46), then "Dermatologist" at 29.5% (n=33) and "Orthopedic surgeon" at 26.8% (n=30). Respondents were asked to choose all that apply, so percentages do not equal 100%.

Type of Specialists Seen	2019 % (n)	2022 % (n)	2025 % (n)	SIGNIFICANT CHANGE
Number of respondents	115	119	112	
Dentist	32.2% (37)	38.7% (46)	41.1% (46)	☐
Dermatologist	20.0% (23)	31.1% (37)	29.5% (33)	☐
Orthopedic surgeon	24.3% (28)	31.1% (37)	26.8% (30)	☐
Cardiologist	16.5% (19)	22.7% (27)	25.9% (29)	☐
Physical therapist	19.1% (22)	18.5% (22)	25.0% (28)	☐
Optometrist	12.2% (14)	19.3% (23)	17.0% (19)	☐
Radiologist	19.1% (22)	15.1% (18)	17.0% (19)	☐
ENT (ear/nose/throat)	8.7% (10)	10.9% (13)	14.3% (16)	☐
Neurologist	7.8% (9)	5.0% (6)	14.3% (16)	■
Gastroenterologist	10.4% (12)	16.0% (19)	13.4% (15)	☐
General surgeon	7.0% (8)	10.9% (13)	11.6% (13)	☐
OB/GYN	9.6% (11)	16.0% (19)	11.6% (13)	☐

Ophthalmologist	13.9% (16)	16.0% (19)	11.6% (13)	☐
Urologist	18.3% (21)	20.2% (24)	11.6% (13)	☐
Chiropractor	8.7% (10)	15.1% (18)	10.7% (12)	☐
Oncologist	8.7% (10)	7.6% (9)	10.7% (12)	☐
Pain management specialist			9.8% (11)	☐
Neurosurgeon	3.5% (4)	5.0% (6)	8.9% (10)	☐
Rheumatologist	6.1% (7)	5.0% (6)	8.9% (10)	☐
Mental health counselor	5.2% (6)	5.0% (6)	6.3% (7)	☐
Podiatrist	6.1% (7)	6.7% (8)	6.3% (7)	☐
Allergist	6.1% (7)	5.9% (7)	5.4% (6)	☐
Audiologist	10.4% (12)	7.6% (9)	5.4% (6)	☐
Chronic illness education/ management specialist			3.6% (4)	☐
Pulmonologist	3.5% (4)	4.2% (5)	3.6% (4)	☐
Dietician		0.8% (1)	2.7% (3)	☐
Endocrinologist	1.7% (2)	4.2% (5)	2.7% (3)	☐
Psychiatrist (M.D.)	3.5% (4)	1.7% (2)	2.7% (3)	☐
Psychologist	0.9% (1)	0.0% (0)	2.7% (3)	☐
Speech therapist	0.0% (0)	0.8% (1)	2.7% (3)	☐
Geriatrician	0.0% (0)	1.7% (2)	0.9% (1)	☐
Pediatrician	4.3% (5)	2.5% (3)	0.9% (1)	☐
Licensed Addiction Counselor	0.0% (0)	2.5% (3)	0.0% (0)	☐
Occupational therapist	5.2% (6)	2.5% (3)	0.0% (0)	■
Social worker	1.7% (2)	0.0% (0)	0.0% (0)	☐
Other	13.0% (15)	6.7% (8)	7.1% (8)	☐

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

"**Other**" comments included: "Somnologist," "Plastic surgeon," "Nephrologist" (2), PA (2)

(View all comments in Appendix F)

Overall Quality of Care through GCMC (Question 23)

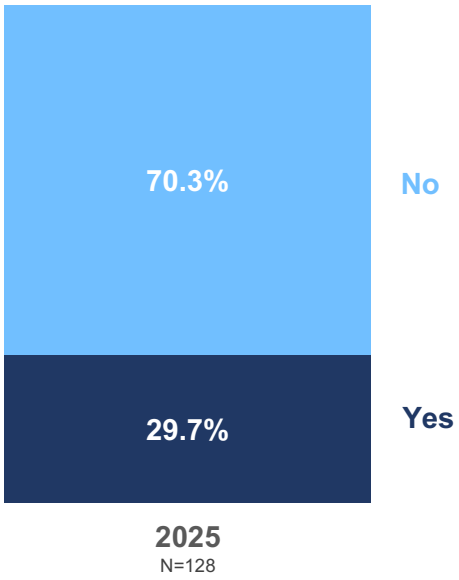
Respondents were asked to rate various services available throughout GCMC using the scale of 4= Excellent, 3= Good, 2= Fair, 1=Poor, and Haven't Used. The service that received the highest score was Pharmacy services (3.6 out of 4.0). Overall, the average rating on quality and availability of the health services listed was 3.2 out of 4.0.

Quality of Care Rating at Granite County Medical Center	2019 Average (n)	2022 Average (n)	2025 Average (n)	SIGNIFICANT CHANGE
Total number of respondents	121	133	125	
Pharmacy services	3.3 (83)	3.6 (94)	3.6 (100)	■
Dental services	3.3 (43)	3.2 (37)	3.5 (49)	□
Physical Therapy Services	3.4 (49)	3.4 (42)	3.4 (55)	□
Granite County Medical Center Drummond Clinic	2.5 (29)	2.8 (26)	3.2 (32)	■
Granite County Medical Center Philipsburg Clinic	2.8 (87)	3.0 (85)	3.1 (75)	□
Healthy Granite County Network		3.0 (31)	3.1 (19)	□
Granite County Medical Center Emergency Room	2.8 (59)	2.8 (58)	2.9 (59)	□
Mental Health Crisis services	2.4 (11)	2.1 (10)	2.9 (16)	□
Public/County Health Department	2.7 (23)	2.9 (36)	2.8 (30)	□
Adult Day Care / Respite Care			2.7 (17)	□
Granite County Medical Center in patient services	2.7 (59)	2.8 (46)	2.7 (33)	□
Granite County Medical Center long term care	3.2 (26)	2.2 (25)	2.7 (19)	■
Transitional care (post-rehab)			2.4 (5)	□
911 ambulance services	2.4 (36)	2.6 (33)	2.3 (36)	□
Senior Companion			2.0 (4)	□
Overall average	**3.0 (121)**	**3.1 (133)**	**3.2 (125)**	■

A solid blue square indicates a statistically significant change between years ($p \leq 0.05$). Respondents were asked to rate the quality of services offered at Granite County Medical Center on a scale of 1 to 4 with 1 being Poor, 2 being Fair, 3 being Good, and 4 being Excellent. Note that options that were asked in prior years but removed for the current survey are not included in the table, which means the individual counts, n, will not add up to the total listed for the overall average. Grayed out cells indicate the question was not asked that year.

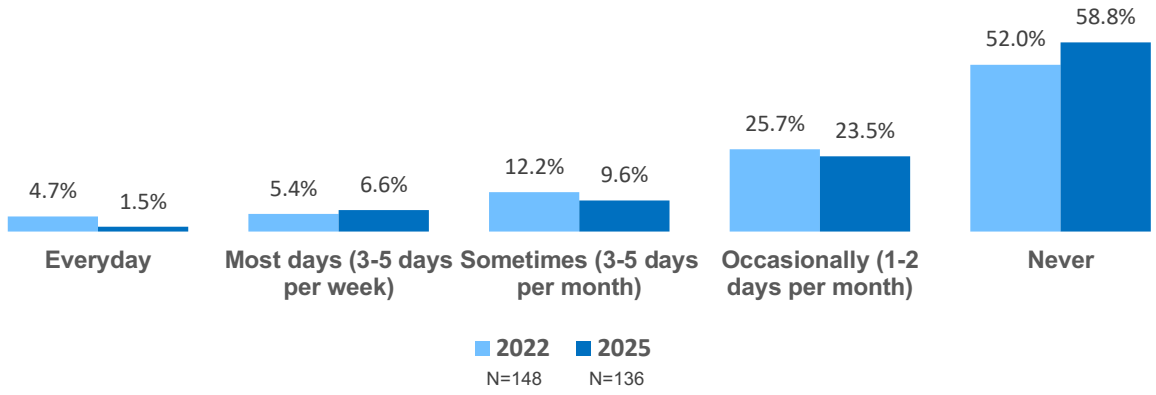
Awareness of Post-Rehab Services (Question 24)

Respondents were asked if they were aware that Granite County Medical Center offers transitional care/post-rehab services. 70.3% of respondents (n=90) indicated they were not aware of this service, while 29.7% (n=38) said that they did know about it.



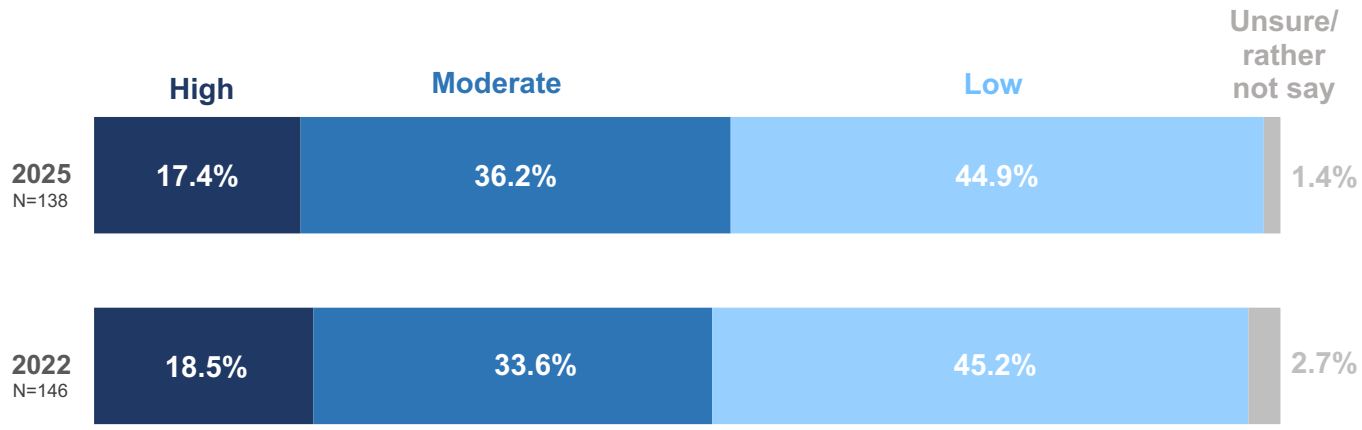
Social Isolation (Question 25)

Respondents were asked to indicate how often they felt lonely or isolated in the past year. 58.5% of respondents (n=80) indicated they "Never" felt lonely or isolated, and 23.7% of respondents (n=32) indicated they "Occasionally (1-2 days per month)" felt lonely or isolated. 1.5% of respondents (n=2) said they felt lonely or isolated "Every day."



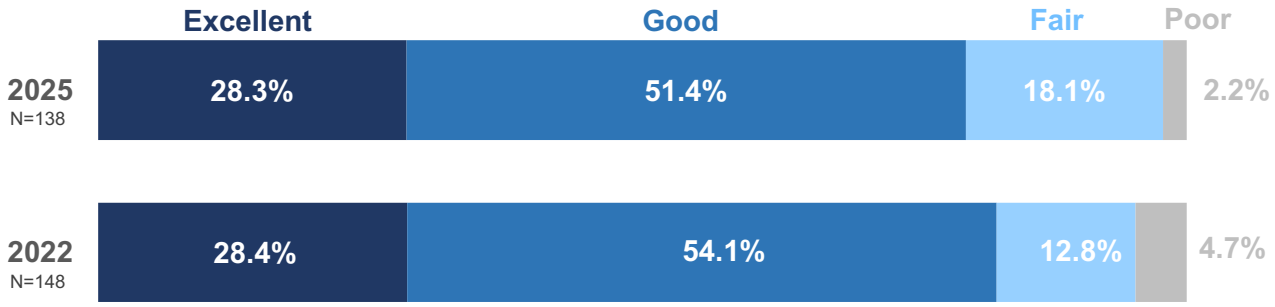
Rating of Stress (Question 26)

Respondents were asked to indicate how they would describe their stress level over the past year. 44.9% of respondents (n=62) indicated they experienced a “Low” level of stress, 36.2% (n=50) had a “Moderate” level of stress, 17.4% of respondents (n=24) indicated they had experienced a “High” level of stress, and 1.4% (n=2) indicated they were “Unsure/rather not say.”



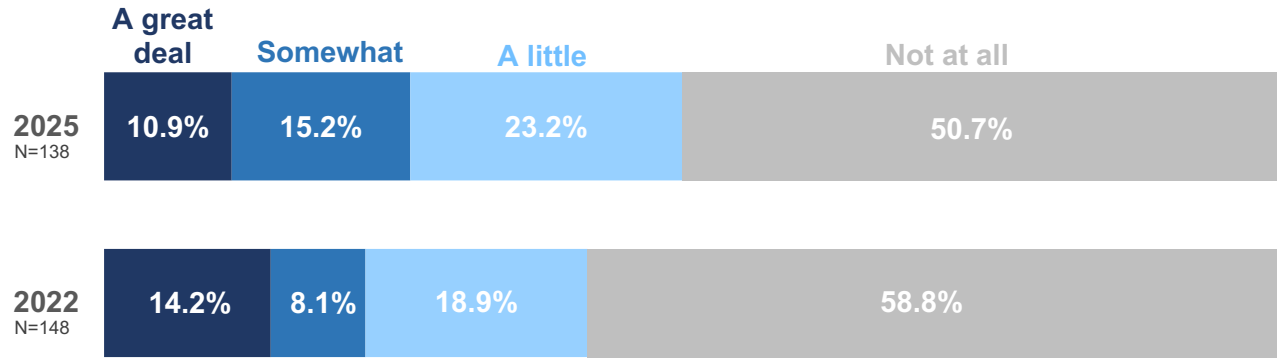
Rating of Mental Health (Question 27)

Respondents were asked to indicate how they would describe their mental health in general when considering stress, anxiety, depression, and emotional problems. 51.4% of respondents (n=71) felt their mental health was “Good,” 28.3% (n=39) rated theirs as “Excellent,” 18.1% of respondents (n=25) felt their mental health was “Fair,” and 2.2% of respondents (n=3) rated theirs as “Poor.”



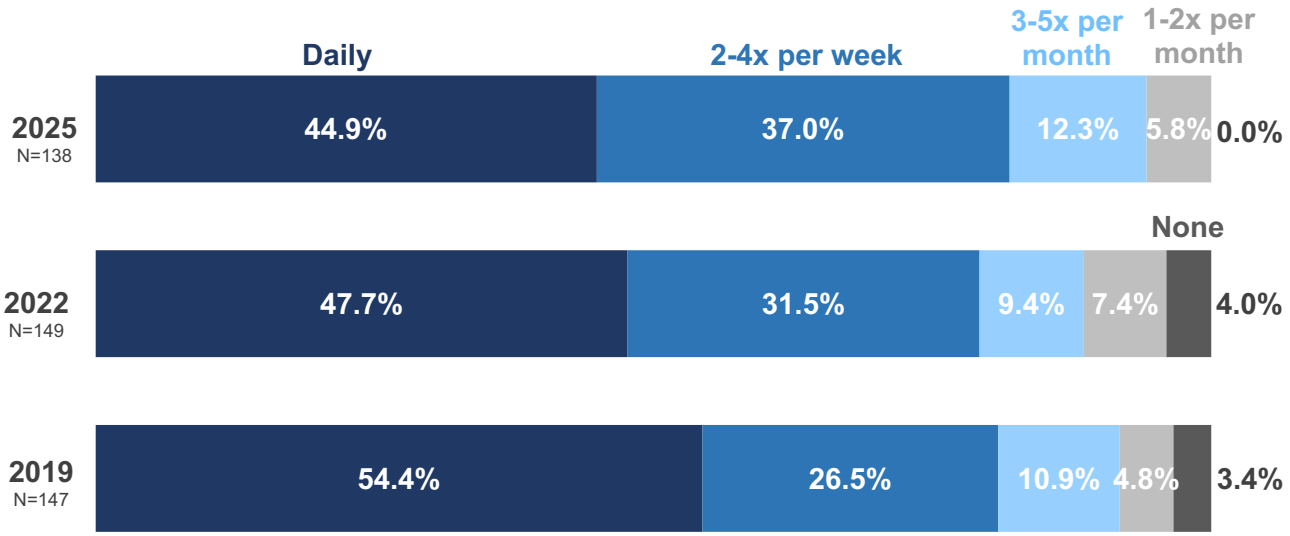
Impact of Substance Abuse (Question 28)

Respondents were asked to indicate to what degree their life has been negatively affected by their own or someone else's substance abuse issues including alcohol, prescription, or other drugs. 50.7% of respondents (n=70) indicated their life was "Not at all" affected, but 10.9% (n=15) said their life was "A great deal" affected.



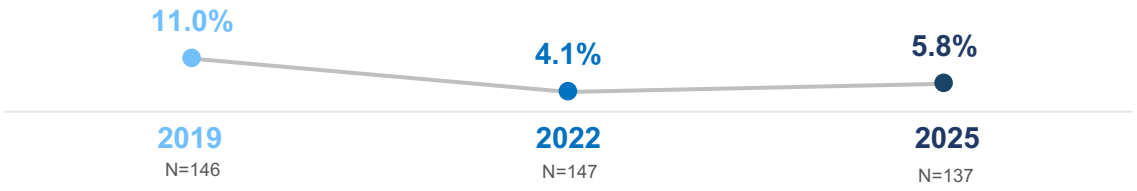
Physical Activity (Question 29)

Respondents were asked to indicate how frequently they had physical activity for at least twenty minutes over the past month. 44.9% of respondents (n=62) reported getting "Daily" activity, and 37.0% (n=51) reported activity "2-4x per week." 5.8% of respondents (n=8) reported getting activity only "1-2x per month."



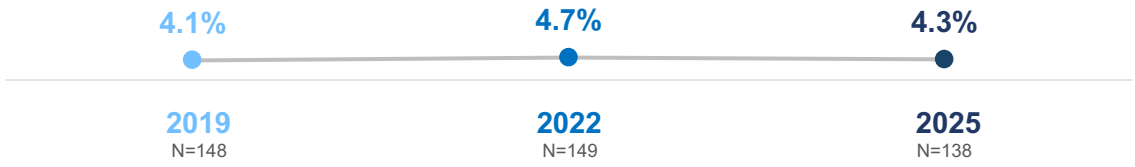
Difficulty Getting Prescriptions (Question 30)

Respondents were asked to indicate if, during the last year, medication costs had prohibited them from getting a prescription or taking their medication regularly. 5.8% of respondents (n=8) said cost had prohibited them from getting or takins prescriptions or medications, while 80.3% (n=110) said cost was not prohibitive for them. 13.9% of respondents (n=19) said this was not an applicable question for them.



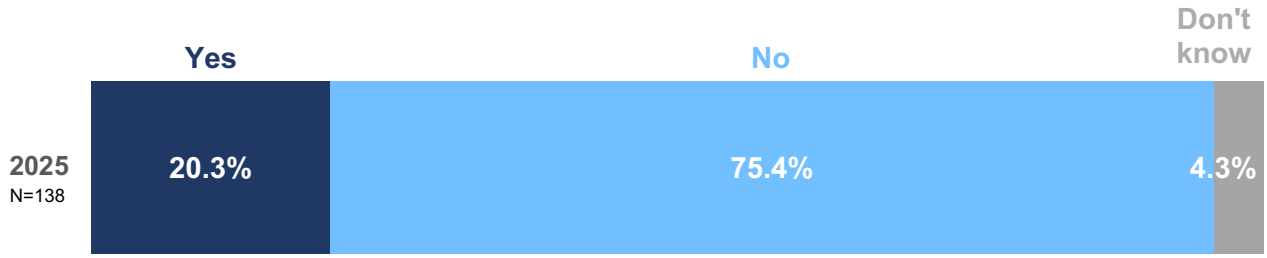
Food Insecurity (Question 31)

Respondents were asked to indicate if, during the last year, they had worried that they would not have enough food to eat. The majority, 95.7% (n=132), were not worried, but 4.3% (n=6) were concerned about not having enough to eat.



Housing Availability (Question 32)

Respondents were asked to indicate if they feel that the community had adequate and affordable housing options available. The majority (75.4%, n=104) felt that there were not adequate and affordable housing options available, 20.3% (n=28) felt that there were, and 4.3% (n=6) did not know.



Type of Housing Needed (Question 33)

Respondents, if they thought there were not adequate and affordable housing options available, were asked to indicate what type of housing they think is needed in the community. Most people said "Low-income" (72.9%, n=86), followed by "Family" (65.3%, n=77) and "Single" (50.0%, n=59). Respondents could select all options that applied.

What Housing is Needed	2025 % (n)
Total number of respondents	118
Low-income	72.9% (86)
Family	65.3% (77)
Single	50.0% (59)
Senior	49.2% (58)
Assisted living	34.7% (41)
Handicapped	26.3% (31)
Other	6.8% (8)

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

"**Other**" comments included: "Workforce housing" (2), "All"

(View all comments in Appendix F)

Health Insurance Type (Question 34)

Respondents were asked to indicate what type of health insurance covers the majority of their medical expenses. 44.2% (n=61) indicated they have “Medicare” coverage, 31.9% (n=44) indicated they have “Employer sponsored” coverage, and 23.2% (n=32) said they had “Private” covergae. Eight respondents were moved to “Other” for selecting over the allotted one medical insurance type.

Type of Medical Insurance	2025 % (n)
Number of respondents	138
Medicare	44.2% (61)
Employer sponsored	31.9% (44)
Private insurance/private plan	23.2% (32)
Medicare Advantage Plan	8.7% (12)
Health Insurance Marketplace	7.2% (10)
Medicaid	5.8% (8)
VA/Military	5.8% (8)
None/pay out of pocket	5.1% (7)
Healthy MT Kids	2.9% (4)
Health Savings Account	2.2% (3)
Indian Health	0.0% (0)
Other	10.9% (15)

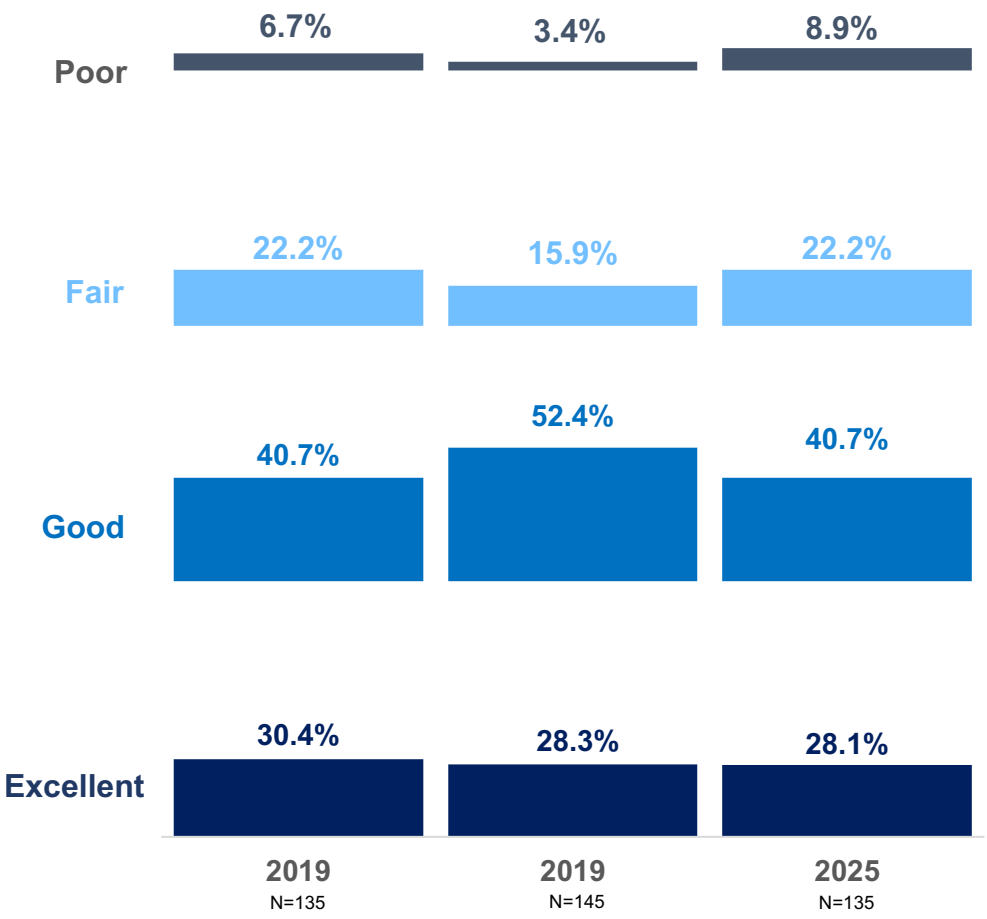
Respondents were asked to select two types of medical insurance they had, so percentages do not equal 100%.
*Respondents (N=8) who selected over the allotted amount were moved to “Other.”

“**Other**” comments included: “Medicare supplement,” “Humana,” “COBRA,” “United Healthcare” (2)

(View all comments in Appendix F)

Insurance and Healthcare Costs (Question 35)

Respondents were asked to indicate how well they felt their health insurance covers their healthcare costs. 40.7% of respondents (n=55) said their insurance covers a “Good” amount of their costs, and 28.1% (n=38) said theirs covered an “Excellent” amount. 8.9% of respondents (n=12) said their insurance coverage was “Poor.”



Barriers to Having Insurance (Question 36)

The survey respondents who indicated they did not have health insurance (n=4) were asked their reasons for not having health insurance. The top reason selected for not having health insurance was "Can't afford to pay for medical insurance." Respondents could select all barriers that applied.

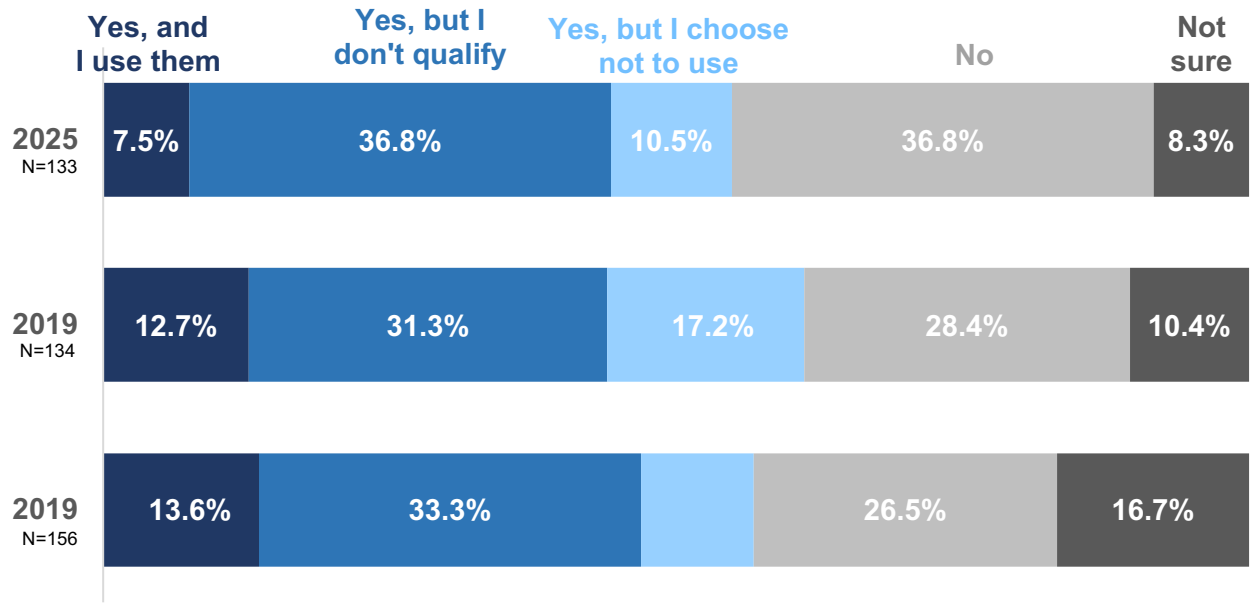
Reasons for No Health Insurance	2025 % (n)
Number of respondents	4
Can't afford to pay for health insurance	75.0% (3)
Choose not to have health insurance	25.0% (1)
Employer does not offer insurance	0.0% (0)
Too confusing/don't know how to apply	0.0% (0)
Other	50.0% (2)

"**Other**" comments included: "Cancelled me," "I'm a self employed veteran and haven't taken the time to figure out how to get VA health benefits"

(View all comments in Appendix F)

Awareness of Health Cost Assistance Programs (Question 37)

Respondents were asked to indicate their awareness of programs that help people pay for healthcare bills. Equal numbers of respondents (36.8%, n=49) indicated that they are aware of these programs but don't qualify to utilize them and that there were not aware of these programs. Only 7.5% of respondents (n=10) both were aware of these programs and utilized them.



FOCUS GROUP RESULTS

Focus Group Methodology

Two focus groups were held in January 2025, one in Philipsburg and one in Drummond. Locations were chosen within Granite County Medical Center's service area, and they were advertised and open to the public.

The two focus groups were conducted in person and lasted around an hour in length. Both followed the same line of questioning and were facilitated by Montana Office of Rural Health staff. Focus group transcripts can be found in Appendix H.

Focus Group Themes

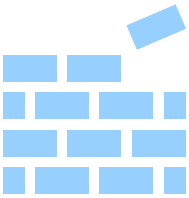
The following key findings, themes, and health needs emerged from the responses which participants gave to the line of questioning found in Appendix G.

INFORMATION ABOUT AVAILABLE RESOURCES

A prominent theme that was discussed at both focus groups was the need for more information about the services and resources available at and through Granite County Medical Center. Many participants expressed surprise at learning that GCMC offered services they have been traveling for. They said that one information hub where they go could to for all resources available locally would be helpful. Additionally, a participant brought up the need for the community to continue to utilize GCMC's services in order for them to stay available locally.

One participant brought up the idea to advertise relevant services to particular demographics, e.g. letting mothers know what is available in terms of women's health and pediatrics; the participant suggested that this would make people more receptive, as opposed to general education campaigns that list all services and resources available.

Other ideas to advertise GCMC's services and resources included forums in communities throughout the county, as well as utilizing more digital tools to advertise. Hearing from family and friends, or a trusted medical provider, is also key in educating the community and gaining their trust.



SERVICES NEEDED IN THE COMMUNITY

- Additional childcare options
- More providers and services offered locally
- More telehealth
- Increased hours at Drummond Clinic
- Better communication about scheduling clinic visits and tests
- Dermatologist
- Pediatrician
- Reliable ambulance services
- Preventive care – e.g. mammograms, colonoscopies
- Suicide prevention resources
- Recreation facilities for winter
- Community cohesion
- More consistent providers
- Wilderness medicine courses
- Transparency with pricing

EXECUTIVE SUMMARY

Executive Summary

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

Areas of Opportunity	Secondary Data	Survey	Focus Groups
Access to Healthcare Services			
More primary care providers	⊗		☑
More specialty care	⊗	✓	☑
Increased appointment availability/hours		✓	☑
Improved quality of care		✓	☑
Cost assistance programs	⊗	✓	☑
Transportation assistance	⊗		
More information about available services		✓	☑
Increased telehealth access			☑
Health Conditions & Behaviors			
Alcohol/substance use	⊗	✓	
Mental health issues	⊗	✓	☑
Nutrition/wellness/weight/physical activity	⊗	✓	☑
Vaccination rates	⊗		
Preventive screenings & care		✓	☑
Other			
Improved emergency services		✓	☑
Affordable housing		✓	
Child care options			☑
Senior care		✓	

NEXT STEPS & RESOURCES

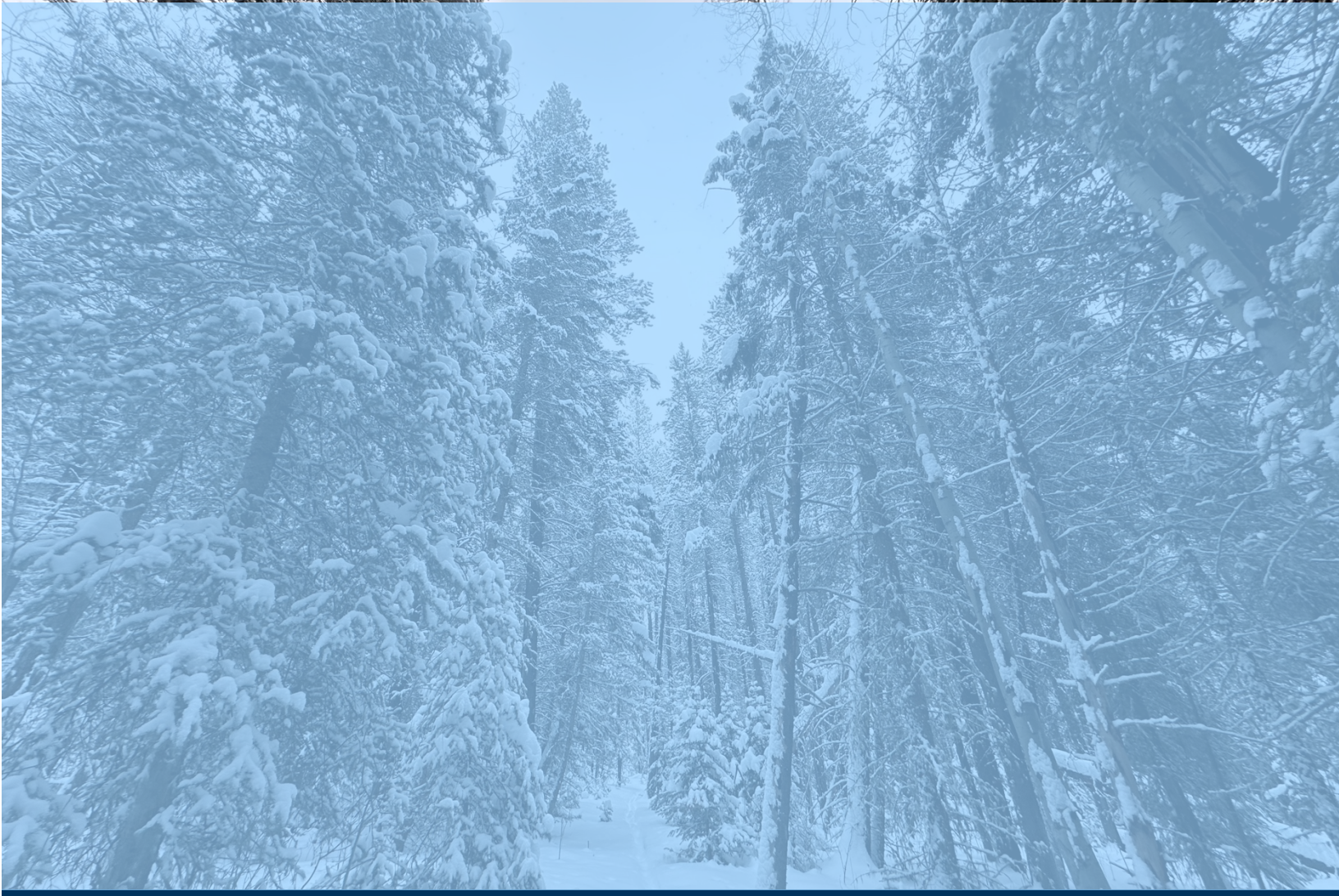
Available Community Resources

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

- Anna Bergerson, LCSW, Healthy Granite County Network
- Gypsy Ray, LCSW
- Jennifer M. Graham, PCLC, Providence Mental Health
- Wendy Dyer, ACLC
- Philipsburg AA Meeting
- Granite County Public Health Department
- Tri-County Tobacco Prevention Specialist
- Crisis Text Line – Text MT to 741-741
- Montana Crisis Hotline – 1-877-503-0833
- Montana Mental Health Warmline-877-688-3377
- Thriveformontana.com
- Alzheimer's Association 24/7 Helpline: 800.272.3900
- Montana Recovery Line: 877-688-3377
- National Eating Disorders Association Helpline: 800-931-2237
- Granite County Alzheimer’s Support Group
- National Domestic Violence Hotline: 1-800-787-SAFE (7233) or 1-800-787-3224
- Child and Elder Abuse Helpline: 1-800-332-6100 or 406-444-9810
- The Gay, Lesbian, Bisexual and Transgender National Hotline: (888) 843-4564
- The LGBT National Youth Talkline (youth serving youth through age 25): (800) 246-7743
- YWCA of Missoula
- First Step Resource Center – Saint Patrick Hospital:(406) 329-5776
- Missoula’s Poverello Center Inc- (406) 728-1809
- Butte Rescue Mission Center of Hope- (406) 782-0925
- Renew Wellness
- Iron Mountain Retreat Center

- Office of Public Assistance: Granite County
- Granite County Food Pantry
- Food Bank of the Valley
- SNAP (Supplemental Nutrition Assistance Program):1-888-706-1535
- WIC (Women, Infants, and Children)
- Consumer Protection Office
- Drummond Senior Center
- Phillipsburg Senior Community Center
- Granite County, Area V Council on Aging – Public Health Department
- Philipsburg Public Library
- Drummond Public Library

Visit the Healthy Granite County Network website for a comprehensive guide of resources available in Granite County. https://www.healthygranitecounty.com/



APPENDICES

Appendix A – Steering Committee

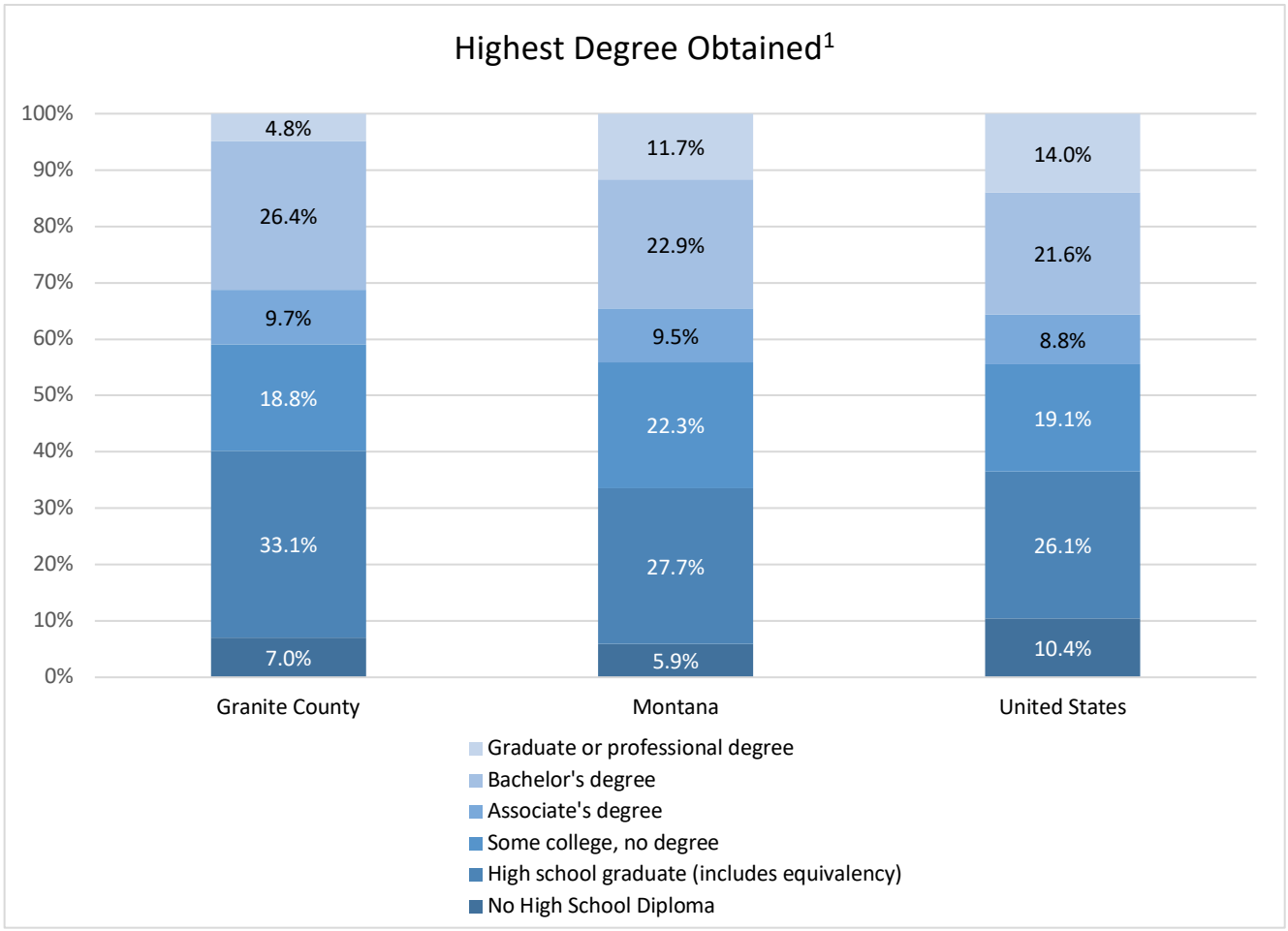
Steering Committee Member	Organization Affiliation
Jaime Bancroft	COO – Granite County Medical Center
Doris Gulbertson	Board Member – Granite County Medical Center
Brian Huso	CEO – Granite County Medical Center
Kristi Mainwaring	Board Member – Granite County Medical Center
Becky Mitchell	Community Member
Barbara Neidich	CNO – Granite County Medical Center
Eric Nord	Board Member – Granite County Medical Center
Lisa Stavrakas	Massage therapist/Yoga instructor/Wellness coach – Renewal Wellness

Granite County
Medical Center

Appendix B – Granite County Secondary Data

Demographic Measure (%)		County			Montana			Nation		
Population[1]		3,595			1,084,225			331,449,281		
Population Density[1]		1.9			7.1			93.3		
Veteran Status[1]		11.1%			9.6%			7.0%		
Disability Status[1]		17.4%			13.8%			13.5%		
Age[1]		<5	18-64	65+	<5	18-64	65+	<5	18-64	65+
		3.8%	66.3%	30.7%	5.1%	74.9%	20.0%	6.1%	61.7%	15.6%
Gender[1]		Male	Female		Male	Female		Male	Female	
		51.7%	48.3%		50.7%	49.3%		49.2%	50.8%	
Race/Ethnic Distribution[1]	White	95.4%			86.4%			75.3%		
	American Indian or Alaska Native	0.9%			5.8%			1.7%		
	Other †	3.7%			7.8%			26.5%		

1 US Census Bureau - American Community Survey (2022) † Black, Asian/Pacific Islanders, Hispanic & Non-Hispanic Ancestry



Socioeconomic Measures (%)	County	Montana	Nation
Median Income[1]	$ 54,646	$ 70,804	$ 74,755
Unemployment Rate[5]	6.4%	2.6%	5.4%
Persons Below Poverty Level[1]	10.4%	11.7 %	12.6%
Children in Poverty[1]	1.8%	13.4%	16.3%
Internet at Home[2]	83.5%	81.5%	-
Households with Population Age 65+ Living Alone[2]	209	52,166	-
Households Without a Vehicle[2]	50	21,284	-
Households Receiving SNAP[3]	77	42,109	-
Eligible Recipients of Free or Reduced Price Lunch[3] *2023/2024 school year*	48.6%	46.6%	-
Enrolled in Medicaid[4, 1]	34.1%	20.5%	18.0%
Uninsured Adults[5] *Age <65*	7.9%	12.0%	16.3%
Uninsured Children[1] *Age <18*	2.1%	7.0%	6.0%

1 US Census Bureau - American Community Survey (2022)

1 US Census Bureau - American Community Survey (2022), 2 US Census Bureau – COVID-19 Impact Report (2019), 3 Kids Count Data Center, Annie E. Casey Foundation (2024), 4 Medicaid Expansion Dashboard, MT-DPHHS (2024), 5 County Health Ranking, Robert Wood Johnson Foundation (2024)

Maternal Child Health	County	Montana	Nation
General Fertility Rate* [7] *Per 1,000 Women 15-44 years of age (2017-2019)*	45.1	59.3	-
Preterm Births[7] *Born less than 37 weeks (2017-2019)*	-	9.4%	-
Adolescent Birth Rate[5] *Per 1,000 years females 15-19 years of age (2016-2022)*	-	17	-
Smoking during pregnancy[3, 8] *(2016-2020)*	-	16.5%	7.2%
Kotelchuck Prenatal Care** [7] *Adequate or Adequate-Plus (2017-2019)*	85.2%	75.7%	-
Low and very low birth weight infants[7] *Less than 2500 grams (2017-2019)*	-	7.6%	-
Childhood Immunization Up-To-Date (UTD)[§ 9]	-	64.8%	-

7 IBIS Birth Data Query, MT-DPPHS (2020), 3 Kids Count Data Center, Annie E. Casey Foundation (2020), 5 County Health Ranking, Robert Wood Johnson Foundation (2024), 8 National Center for Health Statistics (NCHS), CDC (2024), 9 Clinic Immunization Results, MT-DPHHS (2020)

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

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

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

Behavioral Health	County	Montana	Nation
Adult Smoking[5]	18%	15%	16.0%
Excessive Drinking[5]	19%	24%	19.0%
Adult Obesity[5]	33%	32%	32.0%
Poor Mental Health Days[5] *(Past 30 days)*	5.0	4.9	4.8
Physical Inactivity[5]	23%	20%	22.0%
Do NOT wear seatbelts[10]	-	11%	5.8%
Drink and Drive[10]	-	4.0%	2.3%

5 County Health Ranking, Robert Wood Johnson Foundation (2024), 10 Behavioral Risk Factor Surveillance System, CDC (2024)

Cancer prevention & screening	County	Montana	Nation
Human Papillomavirus (HPV) vaccination UTD †† [11, 12] *Adolescents 13-17 years of age (2020)*	0.0%	48.4%	51.1%
Cervical cancer screening in past 3 years[13, 10, 11] *Age adjusted (county/state) and crude (nation) prevalence among adult women aged 21–65 years (2020)*	-	56.1%	51.6%
Mammography in past 2 years[13, 10] *Prevalence among women 50-74 years (2022)*	74.6%	73.4%	76.5%
Colorectal Cancer Screening[13, 10] *Prevalence among adults 45-75 years (2022)*	66.6%	64.5%	66.3%

11 State Cancer Profiles – CDC/NIH (2024), 12 Adolescent Immunization Coverage – MT DPHHS (2024), 13 PLACES Project, CDC (2024), 10 Behavioral Risk Factor Surveillance System, CDC (2024)

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

Infectious Disease Incidence Rates *Per 100,000 people*	County	Montana
Enteric Diseases * *(2015-2017)*	30.1	80.1
Hepatitis C virus *(2015-2017)*	0.0	93.4
Sexually Transmitted Infections (STI)[5] † *(2021)*	119.6	364.9
Vaccine Preventable Diseases (VPD) § *(2015-2017)*	10.0	91.5

5 County Health Ranking, Robert Wood Johnson Foundation (2024), 14 IBIS Community Snapshot, MT-DPPHS

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

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

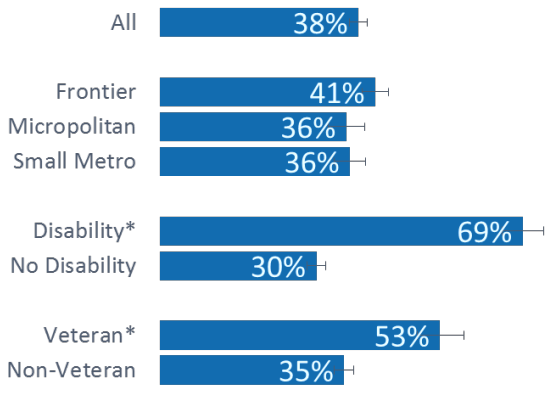
Chronic Conditions	Montana	Nation
Cardiovascular Disease (CVD) prevalence [10] ***Adults aged 18 years and older (2023)***	3.6%	4.0%
Chronic Obstructive Pulmonary Disease (COPD) prevalence [10] ***Adults aged 18 years and older (2023)***	7.3%	6.3%
Diabetes Prevalence [10] ***Adults aged 18 years and older (2023)***	11.8%	11.8%
Breast Cancer Incidence Rate [11] ***Age-Adjusted Per 100,000 population (2017-2021)***	136.3	129.8
Cervical Cancer Incidence Rate [11] ***Age-Adjusted Per 100,000 population (2017-2021)***	6.7	7.5
Colon and Rectum Cancer (CRC) Incidence Rate [11] ***Age-Adjusted Per 100,000 population (2017-2021)***	36.7	36.4
Lung Cancer Incidence Rate [11] ***Age-Adjusted Per 100,000 population (2017-2021)***	46.2	53.1
Melanoma Cancer Incidence Rate [11] ***Age-Adjusted Per 100,000 population (2017-2021)***	27.9	22.7
Prostate Cancer Incidence Rate [11] ***Age-Adjusted Per 100,000 population (2017-2021)***	131.4	113.2

10 Behavioral Risk Factor Surveillance System, CDC (2023), 11 State Cancer Profiles – CDC/NIH (2024)

Montana Adults with Self-Reported Chronic Condition[10]	
1. Arthritis	29.1%
2. Depression	24.4%
3. Asthma	11.7%
4. Diabetes	9.4%
5. COPD	7.3%
6. Cardiovascular disease	3.6%
7. Kidney disease	3.2%

10 Behavioral Risk Factor Surveillance System, CDC (2023)

Percent of Montana Adults with Two or More Chronic Conditions



Mortality	County	Montana	Nation
Suicide Rate[15] *Per 100,000 population (2022)*	Number = 12	28.9	14.2
Veteran Suicide Rate[15] *Per 100,000 population (2021)*	-	51.2	33.9
Alzheimer's Disease Mortality Rate[16] *Age-Adjusted per 100,000 population (2021)*	<5	30.9	36.0
Pneumonia/Influenza Mortality Rate[17] *Age-Adjusted per 100,000*	-	7.4	11.3
Leading Causes of Death[18]	-	1. Heart Disease 2. Cancer 3. Accidents	1. Heart Disease 2. Cancer 3. Accidents

15 Suicide in Montana, MT-DPHHS (2024), 16 Selected Vital Statistics - DPPHS (2021), 17 Kaiser State Health Facts, National Pneumonia Death Rate (2022), 18 National Vital Statistics, CDC (2022)

Montana Health Disparities[10]	White, non-Hispanic	American Indian/Alaska Native	Low Income*
14+ Days when physical health status was NOT good *Crude prevalence (2022)*	12.6%	22.4%	35.6%
14+ Days when mental health status was NOT good *Crude prevalence (2022)*	15.5%	26.0%	34.5%
Current smoker *Crude prevalence (2022)*	13.1%	35.0%	36.7%
Routine checkup in the past year *Crude prevalence (2022)*	74.0%	75.7%	74.3%
No personal doctor or health care provider *Crude prevalence (2022)*	19.3%	20.4%	21.0%
No dental visit in the last year for any reason *Crude prevalence (2022)*	34.4%	47.0%	57.0%
Consumed fruit less than one time per day *Crude prevalence (2021)*	40.1%	41.4%	46.6%
Consumed vegetables less than one time per day *Crude prevalence (2021)*	16.0%	24.8%	23.8%
Does not always wear a seat belt *Crude prevalence (2020)*	10.8%	15.9%	16.0%

10 Behavioral Risk Factor Surveillance System, CDC (2022)

*Annual household income < $15,000

Youth Risk Behavior[19]	Montana		Nation
	All respondents	American Indian/Alaska Native	
Felt Sad or Hopeless *Almost every day for two weeks or more in a row, during the past 12 months*	41.4%	49.0%	42.3%
Attempted Suicide *During the past 12 months*	10.2%	17.6%	10.2%
Lifetime Cigarette Use *Students that have ever tried smoking*	27.8%	52.2%	17.8%
Currently Drink Alcohol *Students that have had at least one drink of alcohol on at least one day during the past 30 days*	31.4%	24.4%	22.7%
Lifetime Marijuana Use *Students that have used marijuana one or more times during their life*	37.0%	55.1%	27.8%
Texting and Driving *Among students who drove a car in the past 30 days*	57.1%	37.0%	36.1%
Carried a Weapon on School Property *In the last 30 days*	9.1%	7.4%	3.1%

19 Montana Youth Risk Behavior Survey (2022)

Appendix C – Survey Cover Letter

February 14, 2025

Dear [LNameProperSuffix] household:

Participate in our Community Health Needs Assessment survey for a chance to **WIN one of six $50 gas cards!**

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

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

1. Due date to complete survey: March 21, 2025
2. Complete the enclosed survey and return it in the envelope provided - no stamp needed.
3. You can also access the survey at https://www.montana.edu/socialdata/currentsurveys.html. Select "Granite County Medical Center Survey." Your access code is [CODED]
4. The winners of the $50 gas cards will be contacted the week of March 31st.

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

Thank you for your assistance. We appreciate your time.

Sincerely,
Brian Huso, CEO

Access the survey on your smart phone: Use your camera to scan the QR code

Appendix D – Survey Instrument

Community Health Needs Assessment Survey
Philipsburg, Montana

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

1. How would you rate the general health of our community?
☐ Very healthy ☐ Healthy ☐ Somewhat healthy ☐ Unhealthy ☐ Very unhealthy

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

☐ Access to water/food
☐ Alcohol/substance use
☐ Alzheimer's/dementia
☐ Cancer screening
☐ COPD/asthma/respiratory disorders
☐ Housing/homelessness
☐ Diabetes
☐ Domestic violence
☐ Heart disease & stroke
☐ Lack of access to healthcare
☐ Mental health issues (depression, anxiety, stress, PTSD, etc.)
☐ Overweight/obesity
☐ Recreation and work related accidents/injuries
☐ Tobacco use
☐ Transportation
☐ Vaccine hesitancy
☐ Other:_____

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

☐ Access to addiction counseling
☐ Access to childcare/after school programs
☐ Access to healthcare services
☐ Access to healthy foods
☐ Affordable housing
☐ Clean environment
☐ Emergency medication services
☐ Good jobs and a healthy economy
☐ Good schools
☐ Healthy behaviors and lifestyles
☐ Lack of health insurance coverage
☐ Low crime/safe neighborhoods
☐ Low death and disease rates
☐ Parks and recreation
☐ Strong family life
☐ Transportation services
☐ Other: _____

4. How do you rate your knowledge of the health services that are available through Granite County Hospital District?
☐ Excellent ☐ Good ☐ Fair ☐ Poor

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

☐ Billboards/posters
☐ Friends/family
☐ Healthcare provider
☐ Mailings/newsletter
☐ Newspaper
☐ Presentations
☐ Public health nurse
☐ Radio
☐ Social media
☐ Website/internet
☐ Word of mouth/reputation
☐ Other: _____

6. Which community health resources, other than the hospital or clinic, have you or your household used in the last three years? (**Select ALL that apply**)

☐ Area V Agency on Aging
☐ Blood donation
☐ Dentist
☐ Fitness center
☐ Food banks
☐ Healthy Granite County Network
☐ Home care services
☐ Hospice services
☐ Meals on Wheels
☐ Mental health
☐ Pharmacy
☐ Public health
☐ Public library
☐ Senior center
☐ Substance abuse services
☐ Veteran services/resources
☐ Other: _____

7. How important are local healthcare providers and services (i.e., hospitals, clinics, nursing homes, assisted living, etc.) to the economic well-being of the area?
☐ Very important ☐ Important ☐ Not important ☐ Don't know

Turn to BACK of page to continue

8. In your opinion, what would improve our community's access to healthcare? (**Select ALL that apply**)

- ☐ Expanded clinic hours
- ☐ Greater health education services
- ☐ Health Navigator (i.e., assistance signing up for insurance, Medicare, or Medicaid)
- ☐ Improved quality of care
- ☐ Interpreter services (including sign language)/cultural sensitivity
- ☐ More information about available services
- ☐ More specialists
- ☐ Outpatient services expanded hours
- ☐ Payment assistance programs (healthcare expenses)
- ☐ Telemedicine/telehealth
- ☐ Transportation assistance
- ☐ Other: _____

9. If any of the following classes/programs were made available to the community, which would you be most interested in attending? (**Select ALL that apply)**

- ☐ Alcohol/substance use
- ☐ Alzheimer's/dementia
- ☐ Cancer
- ☐ Chronic illness
- ☐ Diabetes/diabetes prevention
- ☐ First aid/CPR Stop the Bleed
- ☐ Fitness
- ☐ Grief counseling
- ☐ Health and wellness
- ☐ Heart disease
- ☐ Lactation/breastfeeding support
- ☐ Living will/advance directives
- ☐ Meditation/yoga
- ☐ Men's health
- ☐ Mental health
- ☐ Nutrition
- ☐ Parenting
- ☐ Prenatal
- ☐ Smoking/tobacco cessation
- ☐ Weight loss
- ☐ Women's health
- ☐ Other: _____

10. What additional healthcare services would you use if available locally? **(Select ALL that apply)**

- ☐ Addiction counseling
- ☐ Audiology (ear)
- ☐ Cancer care
- ☐ Cardiac ECHOs
- ☐ Cardiac rehabilitation
- ☐ Chiropractor
- ☐ Coagulation therapy monitoring
- ☐ Diabetic dietary counseling
- ☐ Family planning
- ☐ Home health/senior services
- ☐ Mammography
- ☐ Medication management
- ☐ Mental/behavioral health/counseling
- ☐ Mental function tests
- ☐ MRI
- ☐ Naturopathy
- ☐ Occupational therapy
- ☐ Ophthalmologist (eye)
- ☐ Pain management
- ☐ Pediatrician
- ☐ Physical therapy
- ☐ Podiatry
- ☐ Pre-employment testing (e.g., drug testing, physicals, etc.)
- ☐ Psychiatry
- ☐ Pulmonology
- ☐ Reproductive health services
- ☐ Speech therapy
- ☐ STD testing
- ☐ Urology
- ☐ Other: _____

11. Which of the following preventive services have you or someone in your household used in the past year? **(Select ALL that apply)**

- ☐ Blood panel
- ☐ Blood pressure check
- ☐ Blood sugar checks
- ☐ Breast cancer screenings
- ☐ Cardiovascular disease screenings
- ☐ Cervical cancer screenings
- ☐ Children's checkup/well baby
- ☐ Cholesterol check
- ☐ Colonoscopy
- ☐ COPD screenings
- ☐ Dental check
- ☐ Diabetes screenings
- ☐ Flu shot/immunizations
- ☐ Health checkup
- ☐ Health fair
- ☐ Hearing check
- ☐ Lung cancer screenings
- ☐ Mammography
- ☐ Pap test
- ☐ Prostate (PSA)
- ☐ Skin cancer screenings
- ☐ STD Testing
- ☐ Vision check
- ☐ Weight/BMI check
- ☐ None
- ☐ Other:_____

12. In the past three years, was there a time when you or a member of your household thought you needed healthcare services but did NOT get or delayed getting medical services?

☐ Yes ☐ No (**If no, skip to question # 14**)

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

☐ Could not get an appointment
☐ Could not get off work
☐ Didn't know where to go
☐ Don't like doctors/PAs/NPs
☐ Don't understand healthcare system
☐ Had no childcare
☐ It cost too much
☐ It was too far to go
☐ Language barrier
☐ My insurance didn't cover it
☐ No insurance
☐ Not treated with respect
☐ Office wasn't open when I could go
☐ Privacy/confidentiality
☐ Qualified provider not available
☐ Requested provider not available
☐ Too long to wait for an appointment
☐ Too nervous or afraid
☐ Transportation problems
☐ Unsure if services were available
☐ Other: _____

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

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

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

☐ Anaconda
☐ Bozeman
☐ Butte
☐ Deer Lodge
☐ Granite County Medical Center – Drummond
☐ Granite County Medical Center – Philipsburg
☐ Helena
☐ Missoula
☐ Telehealth
☐ VA Facility
☐ Other: _____

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

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

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

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

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

☐ Bozeman Health
☐ Community Hospital of Anaconda
☐ Community Medical Center – Missoula
☐ Deer Lodge Medical Center
☐ Granite County Medical Center – Philipsburg
☐ St. James Healthcare – Butte
☐ St. Patrick Hospital – Missoula
☐ St. Peter's Hospital – Helena
☐ VA Facility
☐ Other: _____

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

☐ Closest to home
☐ Closest to work
☐ Cost of care
☐ Emergency, no choice
☐ Financial assistance programs
☐ Hospital's reputation for quality
☐ Prior experience with hospital
☐ Privacy/confidentiality
☐ Recommended by family or friends
☐ Referred by provider
☐ Required by insurance plan
☐ VA/Military requirement
☐ Other: _____

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

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

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

☐ Bozeman Health
☐ Community Hospital of Anaconda
☐ Community Medical Center – Missoula
☐ Deer Lodge Medical Center
☐ Granite County Medical Center – Philipsburg
☐ St. James Healthcare – Butte
☐ St. Patrick Hospital – Missoula
☐ St. Peter's Hospital – Helena
☐ Telehealth
☐ VA Facility
☐ Other: _____

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

☐ Allergist
☐ Audiologist
☐ Cardiologist
☐ Chiropractor
☐ Chronic illness education/management specialist
☐ Dentist
☐ Dermatologist
☐ Dietician
☐ Endocrinologist
☐ ENT (ear/nose/throat)
☐ Gastroenterologist
☐ General surgeon
☐ Geriatrician
☐ Licensed Addiction Counselor
☐ Mental health counselor
☐ Neurologist
☐ Neurosurgeon
☐ OB/GYN
☐ Occupational therapist
☐ Oncologist
☐ Ophthalmologist
☐ Optometrist
☐ Orthopedic surgeon
☐ Pain management specialist
☐ Pediatrician
☐ Physical therapist
☐ Podiatrist
☐ Psychiatrist (M.D.)
☐ Psychologist
☐ Pulmonologist
☐ Radiologist
☐ Rheumatologist
☐ Social worker
☐ Speech therapist
☐ Urologist
☐ Other: _____

23. The following services are available in Granite County. Please rate the overall quality for each service by circling your answer. **(Please circle N/A if you have not used the service)**

	Excellent	Good	Fair	Poor	Haven't used	Don't Know
911 ambulance services	4	3	2	1	N/A	DK
Adult Day Care / Respite Care	4	3	2	1	N/A	DK
Dental services	4	3	2	1	N/A	DK
Granite County Medical Center Drummond Clinic	4	3	2	1	N/A	DK
Granite County Medical Center Emergency Room	4	3	2	1	N/A	DK
Granite County Medical Center in patient services	4	3	2	1	N/A	DK
Granite County Medical Center long term care	4	3	2	1	N/A	DK
Granite County Medical Center Philipsburg Clinic	4	3	2	1	N/A	DK
Healthy Granite County Network	4	3	2	1	N/A	DK
Mental Health Crisis services	4	3	2	1	N/A	DK
Pharmacy services	4	3	2	1	N/A	DK
Physical Therapy Services	4	3	2	1	N/A	DK
Public/County Health Department	4	3	2	1	N/A	DK
Senior Companion	4	3	2	1	N/A	DK
Transitional care (post-rehab)	4	3	2	1	N/A	DK

24. Are you aware that transitional care/post-rehab services are available through Granite County Medical Center?

☐ Yes ☐ No

25. In the past year, how often have you felt lonely or isolated?
☐ Every day ☐ Occasionally (1 – 2 days per month)
☐ Most days (3 – 5 days per week) ☐ Never
☐ Sometimes (3 – 5 days per month)

26. Thinking over the past year, how would you describe your stress level?
☐ High ☐ Moderate ☐ Low ☐ Unsure/rather not say

27. Thinking about your mental health (which includes stress, anxiety, depression, and problems with emotions), how would you rate your mental health in general?
☐ Excellent ☐ Good ☐ Fair ☐ Poor

28. To what degree has your life been negatively affected by your own or someone else's substance use issues, including alcohol, prescription, or other drugs?
☐ A great deal ☐ Somewhat ☐ A little ☐ Not at all

29. Over the past month, how often have you had physical activity for at least 20 minutes?
☐ Daily ☐ 3 – 5 times per month ☐ No physical activity
☐ 2 – 4 times per week ☐ 1 – 2 times per month

30. Has cost prohibited you from getting a prescription or taking your medication regularly?
☐ Yes ☐ No ☐ Not applicable

31. In the past year, did you worry that you would not have enough food?
☐ Yes ☐ No

32. Do you feel that the community has adequate and affordable housing options available?
☐ Yes **(If yes, skip to question #34)** ☐ No ☐ Don't know

33. If you do not feel there are adequate and affordable housing options, what type of housing do you think is needed? **(Select ALL that apply)**
☐ Assisted living ☐ Low-income ☐ Other: _____
☐ Family ☐ Senior
☐ Handicapped ☐ Single

34. What type of health insurance covers the **majority** of your household's medical expenses? **(Select ONLY 2)**
☐ Employer sponsored ☐ Indian Health ☐ Private insurance/private plan
☐ Health Insurance Marketplace ☐ Medicaid ☐ VA/Military
☐ Health Savings Account ☐ Medicare ☐ None/pay out of pocket
☐ Healthy MT Kids ☐ Medicare Advantage Plan ☐ Other: _____

35. How well do you feel your health insurance covers your healthcare costs?
☐ Excellent ☐ Good ☐ Fair ☐ Poor

36. If you **do NOT** have health insurance, why? (**Select ALL that apply**)
☐ Can't afford to pay for health insurance ☐ Too confusing/don't know how to apply
☐ Employer does not offer insurance ☐ Other: _____
☐ Choose not to have health insurance

37. Are you aware of programs that help people pay for healthcare expenses?
☐ Yes, and I use them ☐ Yes, but I do not qualify ☐ Yes, but choose not to use ☐ No ☐ Not sure

Demographics

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

38. Where do you currently live, by zip code?

- ☐ 59711 Anaconda
- ☐ 59832 Drummond
- ☐ 59837 Hall
- ☐ 59858 Philipsburg
- ☐ Other: _____

39. What is your gender?_____

40. What age range represents you?

- ☐ 18-24
- ☐ 25-34
- ☐ 35-44
- ☐ 45-54
- ☐ 55-64
- ☐ 65-74
- ☐ 75-84
- ☐ 85+

41. If you have dependents in your household, indicate how many in each age range:

Under 5: _____ 20-24: _____ 55-64: _____

5-9: _____ 25-34: _____ 65-74: _____

0-14: _____ 35-44: _____ 75-84: _____

15-19: _____ 45-54: _____ 85+: _____

42. What is your employment status?

- ☐ Work full-time
- ☐ Work multiple jobs
- ☐ Work part-time
- ☐ Retired
- ☐ Student
- ☐ Collect disability
- ☐ Unemployed, but looking
- ☐ Not currently seeking employment
- ☐ Other: _____

43. How long have you lived in Granite County?

☐ 0-5 years ☐ 6-15 years ☐ 16+ years

44. How many months do you live in Granite County each year?

☐ 3 or less ☐ 4-6 months ☐ 7-9 months ☐ 10-12 months

[CODED]

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

Social Data Collection & Analysis Services
Montana State University
PO Box 172245
Bozeman, MT 59717

THANK YOU VERY MUCH FOR YOUR TIME

Please note that all information will remain confidential

Appendix E – Cross Tabulation Analysis

Knowledge Rating of Granite County Medical Center Services by How Respondents Learn About Healthcare Services

	Excellent	Good	Fair	Poor	Total
Billboards/posters	-	71.4% (10)	28.6% (4)	-	**14**
Friends/family	8.0% (7)	57.5% (50)	32.2% (28)	2.3% (2)	**87**
Healthcare provider	14.3% (7)	65.3% (32)	20.4% (10)	-	**49**
Mailings/newsletter	10.7% (3)	57.1% (16)	28.6% (8)	3.6% (1)	**28**
Newspaper	18.9% (7)	48.6% (18)	27.0% (10)	5.4% (2)	**37**
Presentations	-	66.7% (4)	33.3% (2)	-	**6**
Public health nurse	14.3% (2)	64.3% (9)	14.3% (2)	7.1% (1)	**14**
Radio	-	100.0% (1)	-	-	**1**
Social media	13.3% (4)	33.3% (10)	53.3% (16)	-	**30**
Website/internet	18.5% (5)	51.9% (14)	25.9% (7)	3.7% (1)	**27**
Word of mouth/reputation	8.1% (7)	48.8% (42)	36.0% (31)	7.0% (6)	**86**
Other	25.0% (2)	37.5% (3)	37.5% (3)	-	**8**

Delay or Did Not Get Need Healthcare Services by Residence

	Yes	No	Total
59711 Anaconda	50.0% (2)	50.0% (2)	**4**
59832 Drummond	40.0% (10)	60.0% (15)	**25**
59837 Hall	27.8% (5)	72.2% (13)	**18**
59858 Philipsburg	26.2% (22)	73.8% (62)	**84**
TOTAL	**29.8% (39)**	**70.2% (92)**	**131**

Location of primary care clinic most utilized by residence

	Anaconda	Bozeman	Butte	Deer Lodge	GCMC - Drummond	GCMC - Philipsburg	Helena	Missoula	Telehealth	Other	TOTAL
59711 Anaconda	40.0% (2)	-	20.0% (1)	-	-	20.0% (1)	-	20.0% (1)	-	-	**5**
59832 Drummond	-	-	-	21.7% (5)	4.3% (1)	-	-	56.5% (13)	4.3% (1)	13.0% (3)	**23**
59837 Hall	10.5% (2)	-	-	-	5.3% (1)	5.3% (1)	-	42.1% (8)	-	36.8% (7)	**19**
59858 Philipsburg	24.4% (19)	2.6% (2)	2.6% (2)	-	2.6% (2)	33.3% (26)	1.3% (1)	15.4% (12)	-	17.9% (14)	**78**
TOTAL	**18.4% (23)**	**1.6% (2)**	**2.4% (3)**	**4.0% (5)**	**3.2% (4)**	**22.4% (28)**	**0.8% (1)**	**27.2% (34)**	**0.8% (1)**	**19.2% (24)**	**125**

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

	Anaconda	Bozeman	Butte	Deer Lodge	GMMC - Drummond	GMMC - Philipsburg	Helena	Missoula	Telehealth	Other	TOTAL
Appointment availability	20.5% (9)	2.3% (1)	-	4.5% (2)	6.8% (3)	25.0% (11)	-	27.3% (12)	-	13.6% (6)	**44**
Clinic/provider's reputation for quality	22.0% (9)	-	4.9% (2)	7.3% (3)	2.4% (1)	7.3% (3)	-	31.7% (13)	-	24.4% (10)	**41**
Closest to home	20.8% (11)	-	-	3.8% (2)	3.8% (2)	47.2% (25)	-	3.8% (2)	-	20.8% (11)	**53**
Cost of care	-	-	-	-	-	50.0% (3)	-	50.0% (3)	-	-	**6**
Length of waiting room time	-	-	-	-	-	71.4% (5)	-	28.6% (2)	-	-	**7**
Prior experience with clinic	10.3% (4)	-	2.6% (1)	2.6% (1)	5.1% (2)	28.2% (11)	2.6% (1)	33.3% (13)	-	15.4% (6)	**39**
Privacy/ confidentiality	16.7% (1)	-	-	-	-	-	-	50.0% (3)	-	33.3% (2)	**6**
Recommended by family or friends	24.1% (7)	3.4% (1)	-	6.9% (2)	3.4% (1)	3.4% (1)	3.4% (1)	24.1% (7)	-	31.0% (9)	**29**
Referred by physician or other provider	17.6% (3)	-	-	-	-	5.9% (1)	-	52.9% (9)	-	23.5% (4)	**17**
Required by insurance plan	37.5% (3)	-	-	-	-	12.5% (1)	-	12.5% (1)	-	37.5% (3)	**8**
VA/Military requirement	-	-	16.7% (1)	-	-	16.7% (1)	-	50.0% (3)	-	16.7% (1)	**6**
Other	13.3% (2)	-	6.7% (1)	-	-	6.7% (1)	-	40.0% (6)	6.7% (1)	26.7% (4)	**15**

Indian Health Services removed from reason for selecting primary care provider (first column) due to non-response.

Location of most utilized hospital by residence

	Bozeman Health	Community Hospital of Anaconda	CMC - Missoula	Deer Lodge Medical Center	GCMC - Philipsburg	St. James - Butte	St. Patrick - Missoula	Other	Total
59711 Anaconda	-	66.7% (2)	-	-	-	-	33.3% (1)	-	**3**
59832 Drummond	-	-	23.5% (4)	5.9% (1)	-	-	47.1% (8)	23.5% (4)	**17**
59837 Hall	-	7.7% (1)	15.4% (2)	-	-	-	53.8% (7)	23.1% (3)	**13**
59858 Philipsburg	1.9% (1)	18.5% (10)	1.9% (1)	-	14.8% (8)	3.7% (2)	31.5% (17)	27.8% (15)	**54**
TOTAL	**1.1% (1)**	**14.9% (13)**	**8.0% (7)**	**1.1% (1)**	**9.2% (8)**	**2.3% (2)**	**37.9% (33)**	**25.3% (22)**	**87**

St. Peter's – Helena and VA Facility removed due to non-response.

Location of most recent hospitalization by reasons for hospital selection

	Bozeman Health	Community Hospital of Anaconda	CMC - Missoula	Deer Lodge Medical Center	GCMC - Philipsburg	St. James - Butte	St. Patrick - Missoula	Other	Total
Closest to home	-	26.9% (7)	7.7% (2)	3.8% (1)	23.1% (6)	-	15.4% (4)	23.1% (6)	**26**
Closest to work	-	50.0% (1)	-	-	50.0% (1)	-	-	-	**2**
Cost of care	-	-	-	100.0 % (1)	-	-	-	-	**1**
Emergency, no choice	3.7% (1)	14.8% (4)	-	-	25.9% (7)	3.7% (1)	37.0% (10)	14.8% (4)	**27**
Financial assistance programs	50.0% (1)	-	-	-	-	-	50.0% (1)	-	**2**
Hospital's reputation for quality	-	18.2% (6)	12.1% (4)	-	-	-	54.5% (18)	15.2% (5)	**33**
Prior experience with hospital	-	17.2% (5)	10.3% (3)	-	6.9% (2)	-	44.8% (13)	20.7% (6)	**29**
Privacy/ confidentiality	-	100.0 % (2)	-	-	-	-	-	-	**2**
Recommended by family or friends	-	27.3% (3)	9.1% (1)	9.1% (1)	-	-	36.4% (4)	18.2% (2)	**11**
Referred by provider	-	17.9% (5)	10.7% (3)	-	-	7.1% (2)	42.9% (12)	21.4% (6)	**28**
Required by insurance plan	-	-	-	-	-	33.3% (1)	33.3% (1)	33.3% (1)	**3**
VA/Military requirement	--	-	-	-	-	-	-	100.0 % (2)	**2**
Other	-	7.1% (1)	14.3% (2)	-	-	-	28.6% (4)	50.0% (7)	**14**

St. Peter's – Helena and VA Facility removed due to non-response.

Appendix F – Responses to Other & Comments

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

- Pot
- Emergency Response
- Lack of help for the elderly (2)
- MS, RA, Hearing problems
- Home health care
- Service continuity
- Immorality

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

- Alcohol/substance use (3)
- Alzheimer's/dementia (1)
- Cancer screening (1)
- Heart disease & stroke (1)
- Lack of access to healthcare (1)
- Mental health issues (depression, anxiety, stress, PTSD, etc.) (1)
- Overweight/obesity (2)
- Recreation and work related accidents/injuries (1)
- Tobacco use (2)
- Transportation (1)
- Vaccine hesitancy (2)

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

- Access to emergency/ ambulance services
- Exercise
- Water fill station (pay for water for drinking)

*Responses when more than 3 were selected (0 participants)

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

- Work
- Flyers
- Doctor visits
- Personal experience
- Resident 40 yrs
- The building
- Emergency room

- No other alternatives close by

6. Which community health resources, other than the hospital or clinic, have you used in the last three years? (Select ALL that apply)
- Goathouse Gym
- None
- Brewery, local vaccination
- None in Granite County used
- PT
- Local CSA boxes
- Life flight
- Partnership/Missoula
- None we go to Missoula for everything

8. In your opinion, what would improve our community's access to healthcare? (Select ALL that apply)
- Wider scope of treatment at GCMC
- Urgent Care- like services
- Affordable cost
- Affordable mental health
- Ambulance services available 24/7 not just at their convenience
- 1. Ambulance service that is dependable & Air-care 24/7 with information about how to access these services and processes widely disseminated. 2. Defibrillators throughout the towns and communities
- Keep nurses, doctors, CNA's, home care workers local
- Provider stability
- More services
- Integrated behavioral health
- Co-op with St. Pats-Missoula
- No rheumatologist
- Medical records system matches to other systems in the area, my chart and community hospital- Missoula
- Competent billing of services
- EMS
- Dialysis machine
- Sliding scale dentist for Medicare recipients

9. If any of the following classes/programs were made available to the community, which would you be most interested in attending? (Select ALL that apply)
- Hormone Replacement therapy
- E.M.T

- I am a physician so do not need these services - defer to others who do. Would strongly suggest CPR courses with defibrillator training.
- Hospice
- Blood drive
- Palliative care
- Living with constant pain
- None
- Epilepsy

10. What additional healthcare services would you use if available locally? (Select ALL that apply)

- Hormone therapy
- Counseling to counter MAGA madness
- GCMC doesn't have psych meds management
- Optometry would be more useful to most instead of ophthalmology now need to go to Anaconda
- Orthopedic
- Rheumatology, Neurology
- Skin Cancer Screen
- Dermatologist
- Emergency services for transport
- Dentist

11. Which of the following preventive services have you or someone in your household used in the past year? (Select ALL that apply)

- But not in the county
- Allergy testing

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

- Not available
- Referral was never forwarded by specialist

*Responses when more than 3 were selected (6 participants):

- Could not get an appointment (2)
- Could not get off work (2)
- Didn't know where to go (1)
- Don't like doctors/PAs/NPs (4)
- Don't understand healthcare system (1)
- It cost too much (4)
- It was too far to go (5)
- My insurance didn't cover it (3)
- No insurance (1)

- Office wasn't open when I could go (3)
- Privacy/confidentiality (1)
- Qualified provider not available (2)
- Too long to wait for an appointment (2)
- Too nervous or afraid (1)
- Transportation problems (2)
- Unsure if services were available (2)

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

- Minnesota
- Salt Lake City
- Kalispell (2)

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

- Anaconda (11)
- Butte (5)
- Deer Lodge (3)
- Granite County Medical Center – Drummond (8)
- Granite County Medical Center – Philipsburg (9)
- Helena (3)
- Missoula (13)
- Telehealth (1)

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

- Long time patient of doctor
- Distance
- Naturopathic doctor
- Physician longevity
- Winter in Salt Lake City and use U. of Utah health
- Been seeing provider for 15 years
- Cardiologist
- Don't have one
- I have not seen a doctor for over 7 years
- Was a patient when I lived in Butte
- Work in Anaconda
- Near place of work
- Only VNS doctor

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

- Big Sky Surgery Missoula
- Renown in Reno, NV
- U of Utah hospital
- MD Anderson

- Bone and joint Missoula (2)
- Bone and joint surgery center
- Dartmouth Hitchcock

*Responses when more than 1 was selected (20 participants):

- Community Hospital of Anaconda (9)
- Community Medical Center – Missoula(8)
- Deer Lodge Medical Center (2)
- Granite County Medical Center – Philipsburg (9)
- St. James Healthcare – Butte (1)
- St. Patrick Hospital – Missoula (12)
- St. Peter's Hospital – Helena (3)
- VA Facility (2)

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

- Only facility that had the specialists I need
- Was suppose to be a walk in clinic visit, but charged for ER
- Was unsure closer options could do anything
- Specialties
- Cardiologist, electrophysiologist
- Dr. wanted to operate there
- I trust the healthcare providers

*Responses when more than 3 were selected (8 participants):

- Closest to home (1)
- Emergency, no choice (4)
- Financial assistance programs (1)
- Hospital's reputation for quality (7)
- Prior experience with hospital (6)
- Privacy/confidentiality (3)
- Recommended by family or friends (2)
- Referred by provider (6)
- Required by insurance plan (5)
- VA/Military requirement (1)

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

- Office visit in Butte/Missoula/Anaconda
- Bone & Joint, Women’s Health & Family Wellness, Asthma and Allergy Care
- Specialist in Missoula, Big Sky Diagnostic Imaging-Butte, Big Sky Foot and Ankle-Butte
- Private Specialist Missoula i.e. - ENT/Eyes/DDs/Arthritis
- Missoula (5)
- Sleep diagnostics
- Missoula Bone and Joint (8)

- MSD bone and joint
- Edina, Minnesota
- Kalispell
- Rocky Mountain ENT
- Rocky Mountain Orthopedics
- Dentist in Missoula
- Ephinay Dermatology
- Renown in Reno, NV
- Univ Utah health
- Montana functional health
- MD Anderson
- Physical therapy premier PT
- Forefront dermatology
- Rocky mountain eye, Phillipsburg dental
- Fresenius Missoula
- Five Valley Urology (2)
- Dermatologist
- Rocky Mountain Ear Nose Throat
- Dermatologist – Missoula / Foot and ankle – Anaconda
- Office
- Kalispell, Missoula
- Vacation emergency - Mimbres Memorial - New Mexico
- Wyoming
- Private
- Salt Lake
- Rocky Mountain Eye Clinic Missoula
- Missoula surgical associates

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

- Somnologist
- Plastic surgeon
- Kidney doctor
- Nephrologist
- PA (2)
- Bone Dr.

33. If you do not feel there are adequate and affordable housing options, what type of housing do you think is needed? (Select ALL that apply)

- N/A
- Workforce housing
- Housing affordable for majority of people working in town
- All

- Real estate is expensive
- Homes
- General housing for working people
- Possibly apartments

34. What type of health insurance covers the **majority** of your household's medical expenses? (Select ONLY 2)

- Medicare supplement
- United Health
- I am the owner of the company that provides our medical insurance
- Humana
- COBRA
- Blue cross/ Blue shield
- United Healthcare
- Medical supplement ins

*Responses when more than 2 were selected (8 participants):

- Employer sponsored (2)
- Health Insurance Marketplace (2)
- Health Savings Account (1)
- Medicare (7)
- Medicare Advantage Plan (2)
- Private insurance/private plan (4)
- VA/Military (3)
- None/pay out of pocket (1)

36. If you do NOT have health insurance, why? (Select ALL that apply)

- I'm a self employed veteran and haven't taken the time to figure out how to get VA health benefits
- N/A
- Neuropathy, can't work psoriatic arthritis
- Cancelled me

38. Where do you currently live, by zip code?

- *No "Other" responses*

39. What is your gender? Responses other than "Male" or "Female"

- 1 male 1 female

42. What is your employment status?

- Stay at home/ work at home mom
- Self
- Retired, manage tree farm and cows for 6 months each year

- Self-employed

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

- Work full-time (2)
- Work multiple jobs (2)
- Work part-time (3)
- Retired (6)
- Collect disability (2)
- Not currently seeking employment (1)

General comments

- (Q6)
  - Selected “Pharmacy” and wrote “Granite” next to it.
  - Selected “Public library” and wrote “Philipsburg” next to it.
  - Did not select any choices and wrote “None!” next to the choices.
- (Q10)
  - Did not select “Cancer care” but wrote “suggest this is too complicated for our community other than blood testing” next to it.
  - Did not select “Coagulation therapy monitoring” but wrote “becoming less needed with increased use of newer oral anticoag” next to it.
- (Q11)
  - Selected “Skin cancer screening” and wrote “Referred to Missoula” next to it.
  - Selected several choices and wrote “all done in Anaconda or Missoula” below the question.
  - Selected several choices and wrote “None used in Granite County” below the choices.
- (Q17)
  - Selected “Yes” and wrote “Day procedure” next to it.
- (Q21)
  - Selected “Granite County Medical Center – Philipsburg” and wrote “primary care” next to it.
- (Q22)
  - Selected “Ophthalmologist” and wrote “out of state” next to it.
  - Selected “Podiatrist” and wrote “Foot + Ankle” next to it.
- (Q23)
  - For “Pharmacy services” selected “3” and wrote “Granite” next to it.
  - For “Granite County Medical Center Drummond Clinic” through “Transitional care (post-rehab)” selected “DK” and wrote “Always go to Deer Lodge Medical Center ER they are outstanding” next to it.
  - For “Dental services” selected “N/A” but wrote “Husband used – was good” next to it.
  - For “911 ambulance services” did not rate the service and wrote “No ambulance!” next to it.

    - For all services, circled both N/A and DK for Haven't used and Don't know respectively.
- (Q28)
    - Selected "A great deal" and circled "alcohol" in the question text and wrote "ex-husband" next to it.
- (Q31)
    - Selected "No" and wrote "If we can drive to Missoula – we need a grocery store here" next to it.
- (Q34)
    - Selected "Employer sponsored" and wrote "retired" next to it.
- (Q39)
    - Wrote in "M" and also "Wife assisted with her needs, V.A. assists me" next to the question.
- (Q40)
    - Selected both "55-64" and "65-74" based on answer to gender question, survey was answered for two people.
- (Q41)
    - Did not enter any values into the blanks and wrote "None" next to the question. (NOTE: Several people did this.)
- (Q43)
    - Did not select any choices and wrote "Never" next to it. The individual had selected the Anaconda zip code.
- (Q44)
    - Selected "10-12 months" and wrote "part time for greater than 40 years; full time 4 years" next to it.
    - Did not select any choices and wrote "Don't" next to it. The individual had selected the Anaconda zip code.

Appendix G – Focus Group Questions

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

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

2. What are your views/opinions about these local services:
   - Hospital/clinic
   - EMS Services (ER/Ambulance)
   - Public/County Health Department
   - Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
   - Services for Low-Income Individuals/Families

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

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

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

Appendix H – Focus Group Notes

CHSD Focus Group #1
Granite County Medical Center
Philipsburg Public Library
21 January 2025
10 participants, including CEO & 2 board members, 1 media

1. How do you feel about the general health of your community?
   - Substance use, obesity, and diabetes are issues here, according to stats
   - High suicide rate here, not unusual for rural areas; problem now even though there are more resources than a decade ago; single men with firearms (+alcohol) is the highest suicide population; people don't necessarily know about the resources, that they're here
   - Granite County has been in top 10 for suicide percentage for some time now
   - Doesn't seem that alcohol is as crazy as it was in the past, not as high a usage; we would be healthier with less alcohol
   - Need for more providers and services here instead of all of them going to Missoula
   - More telehealth could be really helpful here in this rural, in-between place; good thing for the hospital to offer instead of people going to Missoula first

2. What are your views/opinions about these local services:
   - Hospital/clinic
     - Where do people go for care? Missoula? Why would people go to Philipsburg? Frustration with coming to Philipsburg if you're just going to get sent to Missoula
     - Frustration with Drummond clinic only being open 1-2 days per week – we don't always get sick when the clinic is open
     - People in Drummond don't necessarily want to pay for the clinic because they don't always feel like they're getting value out of it because they'd just as soon go to Missoula
     - For serious issues/care, it can't happen in Philipsburg; have to go to Missoula
     - Could hospital district get life flight insurance for county?
     - If GCMC had new facility in Hall, would that be something that Philipsburg and Drummond communities would use? More of a central location
       - On paper it's a good idea; in practice, why would we throw more money towards this when folks go to Missoula anyway
     - Seems like there needs to be 2 facilities; Philipsburg more urban facility, oriented towards urban injuries/issues; Drummond more ranching/rural injuries
     - How many people in Philipsburg even visit this hospital?
     - Better communication and scheduling with clinic visits and pre-clinic tests
     - Email reminders about health checkups are helpful
   - EMS Services (ER/Ambulance)

    - Ambulances take folks to Missoula – brings up the question of whether people should go to Philipsburg in order to just get bussed to Missoula
    - Ambulances keep being not available; not sure what's going on with them ever
- Public/County Health Department
    - Was not addressed
- Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
    - Senior specialty care is not here often; people have to go to Missoula
    - Could get assisted living/rest home something here, if space could be found
    - Dermatology is desired
- Services for Low-Income Individuals/Families
    - Need more childcare, pediatrics; services for younger folks/families
    - Kids might need speech therapy

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

- Confusion about Granite County Medical Center Foundation – what it is, what it does, what is its relationship with GCMC; the money the foundation raises should come back to the hospital
- Pediatric care is needed here
- Reliable ambulance services; getting folks to GCMC from remote parts of the county is difficult; life flights can be hard to pinpoint without GPS, especially if pilots don't know the area
- Senior care specialists are often out of town; people migrate their primary care out of town as well if they're already leaving for specialty care
- Outreach from the hospital about services available, quality of care
- People need to trust GCMC again and stop going to Anaconda/Missoula for regular and emergency care

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

- Quality care; people need to hear through the grapevine that GCMC is doing better
- Hospital needs to advertise more; education about available services
- Some specialty care is so hard to come by
- Reliable ambulance services
- Internal medicine sub-specialties (hard to get here just because of volume)
- Services for kids/families; growing younger population in Granite County and their needs should be met
- Dermatology
- Mammogram
- Colonoscopy
- PT is always very busy these days
- Naturopath, acupuncture
- Suicide prevention resources; for folks who are thinking about it, where do they go, where can you take them (Healthy Granite County Network does a lot of work with this, has mental health resources)

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

- If people knew what the hospital has services for these days; if the hospital could tell various groups/demographics exactly what services GCMC has available for them
- More trust in the hospital & the services here
- We need more things to do than just the bar
- Some recreation facility would be great; it's hard to exercise in the winter, especially if you're elderly; could be used by old and young people
- We need community cohesion about what would be best for the community going forward; community is fractured right now
- Swimming pool
- "It's just a matter of doing what you're doing"

CHSD Focus Group #2
Granite County Medical Center
Drummond Public Library

27 January 2025

6 participants, including CEO and 1 board member

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

- Depends on how you define health
- Lots of seniors here with specialized problems (cardio, cancer, etc)
- People tend to go for specialized care in other places so they stop coming to Granite County for care since they're already going elsewhere
- It takes a long time to get appointments for specialized tests in other hospitals
- Limited resources to help geriatric folks
- Under 60s are pretty healthy – healthy lifestyle, lots of ranching and recreation here
- Women's health event a while back was a huge success (sponsored by the hospital foundation)
- Word of mouth is the primary way new residents know about GCMC services
- In Drummond the school is the center of information in town; might be good to work with superintendent to get information out
- People don't like to come out to informational meetings; could there be virtual options?
- People here don't necessarily know their neighbors here; it can be hard to meet people

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

- Hospital/clinic
  - One time blood tests sent from here were incomplete so patient had to return to facility for more tests

    - Would really only go to Philipsburg hospital for urgent care or if I knew what was wrong; if it were bigger I'd go to Missoula where there are more resources
    - Son goes to Anaconda pediatrics so it's also an option for me to go there
    - Clinic in Drummond has really helped make us healthier; I appreciate it being here
    - GCMC website doesn't list staff like it used to
    - Collections were a big issue before; hospital wasn't able to collect the money owed to them
    - Clinic in Drummond was fairly well staffed and utilized; lots of women got care here; then provider left and many people followed her
    - Clinic here is open 2 days/week, but I'd like to see it open more
- EMS Services (ER/Ambulance)
    - We've had a couple ranch injuries recently and GCMC provided excellent service in both cases; both were seen at GCMC and not taken elsewhere
    - In an emergency, the time to get to Missoula is only marginally more than to get to Philipsburg and there are more resources there
    - Philipsburg hospital is pretty quick at determining when folks need to go for better care
    - Many folks have life flight insurance personally since it is so rural
    - Cost of emergency services has been an issue
- Public/County Health Department
    - Very convenient, lots of vaccination clinics here
- Senior Services (Nursing homes, assisted living, home health, senior center, etc.)
    - Mother was in long-term care at GCMC; we were happy with it and appreciate that it's here
    - Most older folks go to Missoula or Butte for all their specialized healthcare needs and then do all their doctoring there
    - Folks are a bit unsure of what senior options the hospital offers
- Services for Low-Income Individuals/Families
    - Need more childcare options
    - Closer groceries/grocery delivery options
    - Need more information about services and resources available here for them
    - It's difficult to know what insurance will cover at the hospital; they could make that clearer; more streamlined way to determine what is covered for each issue
    - More availability/access to pediatricians and their expertise

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

- Understanding available resources; people need to know that it's important to use the available resources if we want them to keep going, letting people know their involvement is necessary
- People need a reason to go visit the hospital so they can know what is offered
- How to reach people is always a big issue; maybe be at the theater, women who wine, fire department's cookoff
- Information meetings for new residents about how to deal with medical issues in really rural places, because often new residents don't know
- There is lots of room for digital tools to be used for marketing for the hospital
- Knowing who the medical providers here are; making them personable

- We need a forum in the Drummond area for people to learn about all the services GCMC offers
- One-on-one communication, trust, a relationship with a provider is going away but is really wanted still

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

- Folks aren't quite aware of all the services that GCMC offers/provides
- More providers, consistent care – like to be in charge of own care and know you'll see the same provider every time, be able to establish relationship
- Ability to connect as a preferred provider with larger companies might bring more people into GCMC
- Childcare is a big need here; there is a growing younger population
- Where do people see signs about community events? Post office, Flint Creek Courier. Not many other places
- Maybe more telehealth; people are probably going to do the fastest/cheapest option
- Wilderness medicine could be another avenue to be promoted in a place like this; hospital could host a course/refresher with a wilderness medicine provider
- More word of mouth; if providers could promote reviews with hospital visits
- Some people here would still like grocery delivery like the student group did a while back, and there is still funding for it
- Veterinary care is also hard to get here; hospital could try to facilitate vets coming in/clinics to get people in the door
- Hospital could collaborate with Healthy Granite County Network, especially on women's/maternal care
- If there was one place people could go for all information (care, life flight, spay neuter clinic) that would be super helpful

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

- More childcare options
- More consistent providers so people can control their own care a little more
- Door to door outreach from the hospital might be a good way to let folks know what is available at the hospital
- If people were armed with wilderness medicine skills
- More awareness of resources available locally; people need to know that they can go to the Philipsburg hospital for many of the resources and services they need
- Increased availability/open days at Drummond clinic; people here really need this clinic
- Older folks have ideas about the hospital from previous years that are not good but also not necessarily true now; people need to be re-taught about GCMC's new services and quality of care and resources
- More autonomy in choosing care and knowing finances of the options available
- Transparency with pricing or creative/different coverage options would be nice because a lot of people in Granite County work part-time and have to navigate the mosaic of insurance

Appendix I – Request for Comments

Written comments on this 2025 Community Health Needs Assessment Report can be submitted to Brian Huso, CEO at Granite County Hospital District:

Administration
Granite County Medical Center
P.O. Box 729
Philipsburg, Montana 59858

Contact Brian Huso at
406-859-3271 or brian.huso@granitecmc.org with questions.