



midwest

MEDICAL CENTER

2025 COMMUNITY HEALTH
NEEDS ASSESSMENT



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Secondary Data is documented in a separate document entitled [Midwest Medical Center 2025 Secondary Data](#).



Midwest Medical Center

Rite Entrance EMERGENCY Main Entrance EMERGENCY

Midwest Medical Center
↑ Main Entrance
→ Emergency Parking

Introduction

Midwest Medical Center (MMC), a 501(c) 3, was previously known as Galena Stauss Hospital & Healthcare Center, a 45-year-old hospital and nursing home. In 2000, Galena Stauss became the third Critical Access Hospital (CAH) in the State of Illinois. In 2008, MMC became one of the first CAHs to replace its dated building and opened a new hospital on a new campus just west of town.

The new facility is state-of-the-art, featuring warm colors, rich woods, soothing sconce lighting, a vaulted ceiling, and life-size windows that point to the blue Midwestern sky. Features such as the 24/7 state-of-the-art Fitness Center, Resource Library, Meditation Suite, Whispering Willow Gift Shop, and Vista Cafe attract community members to visit the facility for reasons other than illness.

The services provided by MMC have expanded over the years to meet the evolving needs of the communities it serves. Today's services include Inpatient Services, Emergency Care, Convenient Care, Imaging, Lab, Physical Therapy, Speech Therapy, Occupational Therapy, Cardiac Rehabilitation, Clinics, Surgery, and a Health & Fitness Center. The Nursing Home and Assisted Living remain part of MMC but are located on the old campus.

Midwest Medical Center in Galena, Illinois, was named one of the top 20 critical access hospitals (CAHs) in the country for Best Practice in Patient Satisfaction. The top 20 CAHs, including MMC, scored best among CAHs as determined by the Chartis Center for Rural Health for Best Practice in Patient Satisfaction. The rankings were announced by the National Rural Health Association (NRHA). The top 20 CAHs have achieved success in overall performance based on a composite rating from eight indices of strength: inpatient market share, outpatient market share, quality, outcomes, patient perspective, cost, charge, and finance.

"Hard work, dedication, and perseverance have made us who we are today and are why we continue to grow. We are so proud of every member of our team for their commitment, collaboration, and willingness to serve the needs of our patients," said Tracy Bauer, president and CEO. "Our recognition as a top 20 Best Practice in Patient Satisfaction Critical Access Hospital in the nation means our community further identifies 'the Midwest Difference' and assures our patients they can count on us to continue to deliver the expert services they need now and in the future."



Mission & Vision

Mission

Midwest Medical Center will provide the caring, competent, cost-effective healthcare every member of this great community deserves.

Vision Statement

Midwest Medical Center is driven by a vision of healthcare service excellence. In achieving this vision, Midwest Medical Center will be recognized as a leader in promoting and maintaining the health and wellness of the communities we proudly serve.



Executive Summary

Provisions in the Affordable Care Act (ACA) require charitable hospitals to conduct a Community Health Needs Assessment (CHNA). CHNA is a systematic process that involves the community in identifying and analyzing community health needs, as well as community assets and resources, to plan and act upon priority community health needs.

This assessment process yields a CHNA report, which aids the hospital in planning, implementing, and evaluating its strategies and community benefit activities. The Community Health Needs Assessment was developed and conducted in partnership with community representatives by a consultant provided through the Illinois Critical Access Hospital Network (ICAHN).

ICAHN is a not-for-profit 501(c)(3) corporation established in 2003 to share resources, promote education, and improve operational efficiencies to enhance healthcare services for member critical access and rural hospitals and their communities.

ICAHN, with 60 member hospitals, is an independent network governed by a nine-member board of directors, with standing and project development committees facilitating the network's overall activities. ICAHN continually strives to strengthen the capacity and viability of its members and rural health providers.

This Community Health Needs Assessment will serve as a guide for planning and implementing healthcare initiatives that will enable the hospital and its partners to best address the emerging health needs of Galena and the surrounding area. The Administrative Assistant and Credentialing Coordinator coordinated the CHNA process in conjunction with the facility's CEO.

Four focus groups were convened to discuss the state of overall health and wellness in the Midwest Medical Center/ Galena service area, identifying health concerns and needs in healthcare delivery and health services to enhance wellness and reduce chronic illness among all residents. The focus groups included representatives from healthcare providers, community leaders, community service providers, schools, faith-based organizations, local elected officials, public health, and other relevant stakeholders. Several members of these groups provided services to the underserved as part of their roles.

The findings of the focus groups, along with secondary data analyzed by the consultant, were presented to a focus group for the identification and prioritization of the significant health needs facing the community.





Identification and Prioritization

Addressing the Need

Priority areas were considered by the prioritization workgroup based on data from onsite meetings and secondary data. The team discussed each focus area, and after their review and discussion, the identification and prioritization group advanced the goals and actions:

1. **Advancing Emergency Medical Services/Ambulance in the Community**
2. **Mental Health Access**
3. **Senior Resources and Care**

Senior staff at Midwest Medical identified and prioritized potential actions to address the needs.

Addressing the Need

Creating the Plan

The group addressed the needs with the following strategies:

- Focus on community collaboration to address concerns. Create opportunities for all communities to collaborate and work together.
- Leverage services that are already in the communities but may not be widely known.
- Develop educational resources for mental health and chronic conditions to help people not only understand what resources are available and how to access them, but also to improve their coping skills.
- Increase screening opportunities for chronic diseases to diagnose and treat earlier, with a focus on seniors.
- Develop low-cost or free events to encourage people to improve their health.

Background

The Community Health Needs Process is conducted every three years. Midwest Medical Center has taken the following actions in response to issues identified and prioritized, as well as the implementation strategy developed to address them.

Midwest Medical Center CHNA 2022

Five prioritized needs were identified as significant health needs and prioritized:

Priority #1 – Improve Access to Mental Health

Actions

- Added counselors and other mental health resources to improve access to behavioral mental health and substance abuse disorders.
- Developed a web-based guide for local health resources that included mental health.
- Added behavioral health suite and group room to the new outpatient center.
- Explored adding mental health inpatient services.
- Received funds from the 708 Board to help offset the expenses of mental health services.
- The MMC CEO serves on the Jo Daviess Mental Ad-Hoc Committee.
- Jo Daviess County is conducting mental health survey to evaluate the additional needs of the county's residents.

Priority #2 – Improve Access to Physical Healthcare

Actions

- Developed a web-based guide for local health resources that included physical health.
- Evaluated the need for a pain clinic.
- Created space for an infusion center.
- Evaluated the need for dialysis services.
- Explored the expansion of cardiac care services.

Priority #3 – Improve Access to Available, Flexible Transportation

Actions

- Established a taxi fund to help patients with the cost of transportation.
- Work with Jo Daviess County Transit to assist with transportation for patients
- Case manager provides education to patients on available transportation options.
- Explored the cost of having a handicap accessible van

Priority #4 – Increase Information to the Community About Locally Available Health and Wellness Activities

Actions

- Developed direct and indirect marketing to educate people on Medicare and Medicaid replacements
- Partnered to expand health screenings
- Opened the new outpatient center and wellness centers

Priority #5 – Increase Resources for Seniors

Actions

- Developed direct and indirect marketing to educate people on Medicare and Medicaid replacements
- Partnered to expand health screenings



Midwest Medical Fitness Center

Evaluation of Prior Impact

Priority #1 – Improve Access to Mental Health

- Access to mental health providers has improved, but it still lags state and national norms.

Report Area	Access to Mental Health Providers 2025	Access to Mental Health Providers 2022
Midwest Medical Center	108.3	89.5
Illinois	314.5	269.2
United States	313.6	282.3

Data Source: Centers for Medicare and Medicaid Services, National Plan and Provider Enumeration System (NPPES).

Priority #2 – Improve Access to Physical Healthcare

Report Area	Access to Primary Care Physicians 2025	Access to Primary Care Physicians 2025
Midwest Medical Center	45.02	47.09
Illinois	79.12	81.24
United States	74.94	76.51

Data Source: US Department of Health & Human Services, Health Resources and Services Administration, HRSA - Area Health Resource File

Priority #3 – Improve Access to Available, Flexible Transportation

- Jo Daviess County transport provided 59,779 trips in 2024, a 54% increase in ridership since 2019. Midwest Medical Center is the destination for approximately **6.2%** of the riders.

Data Source: Jo Daviess County Transit Comprehensive Ridership Analysis, 2025

Priority #4 – Increase Information to the Community About Locally Available Health and Wellness Activities

- Fitness Membership is increasing:
 - » 2022: 400
 - » 2025: 1100

Priority #5 – Increase Resources for Seniors

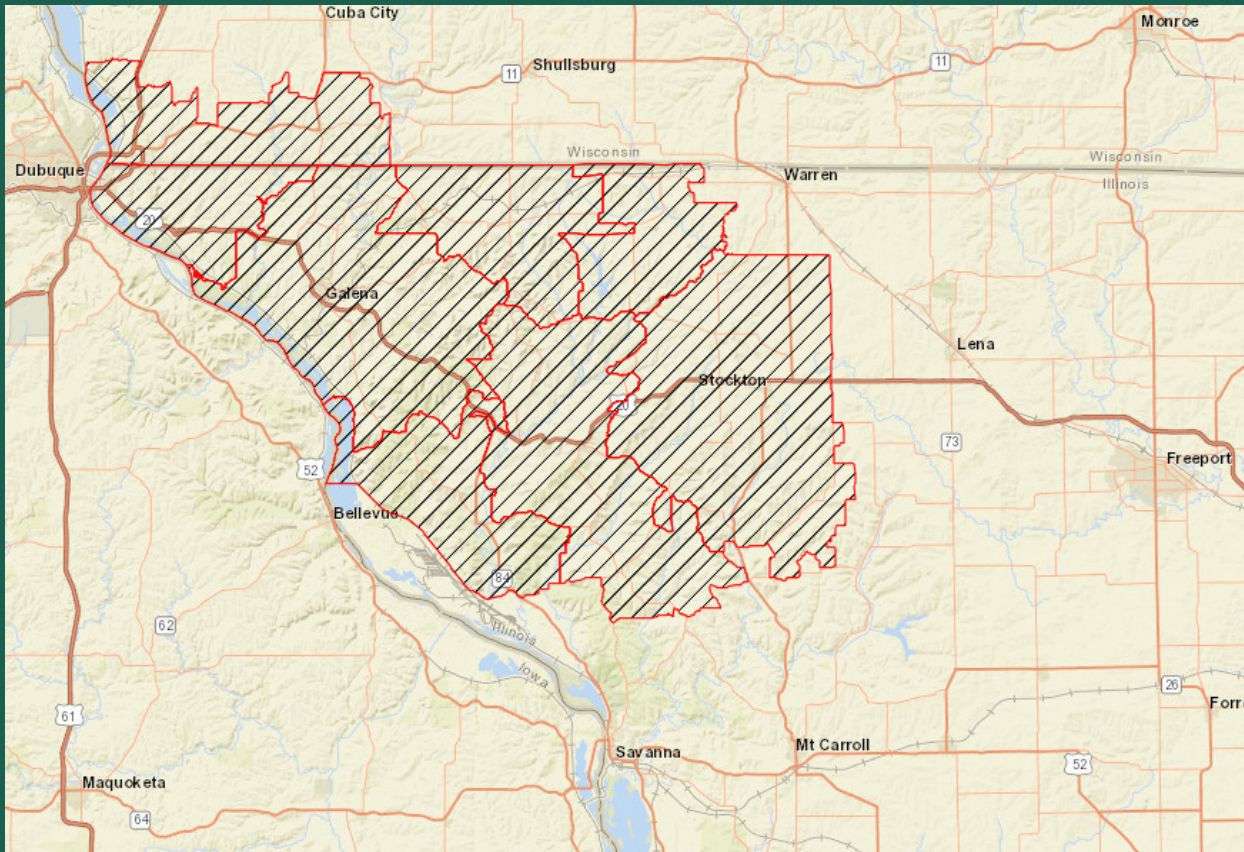
- No statistics available.



Horizon Health Service Area

For this CHNA, Midwest Medical has defined its primary service area and populations as the general population within the geographic area surrounding Galena, Illinois, described below. The hospital's patient population includes all individuals who receive care, regardless of insurance coverage or eligibility for assistance.

A total of 22,688 people reside in the 591.72 square mile report area defined for this assessment, according to the U.S. Census Bureau's American Community Survey 2019-23 5-year estimates. The population density for this area, estimated at 38 people per square mile, is less than the national average population density of 94 people per square mile.



The service area, defined by zip code data, includes the following rural communities:

Illinois:

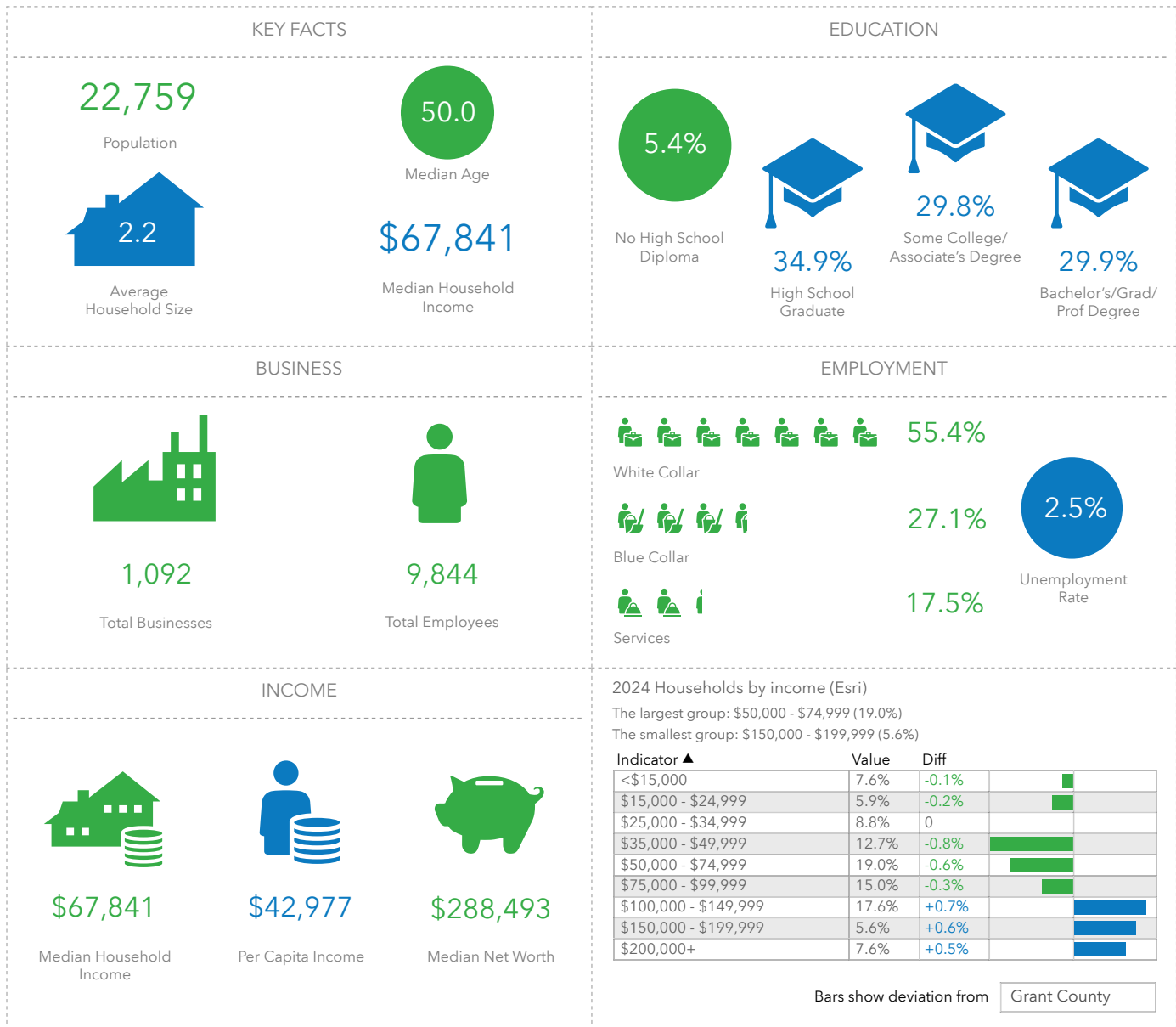
Galena, Elizabeth, Hanover, Scales Mound, Apple River, Stockton, East Dubuque

Wisconsin:

Hazel Green

Key Facts

8 ZIP Codes
Geography: ZIP Code



Source: This infographic contains data provided by Esri (2024, 2029), Esri-Data Axle (2024). © 2025 Esri

The average household size of the area, at 2.17, is lower than both Illinois and the U.S. The median age is 50 years, which is higher than in Illinois and the U.S. The largest education segment is high school graduates, followed by those with some college. 6.26% of the population has no high school diploma or GED, and 31.48% of the community's population has only a high school degree. Unemployment at the time of writing was 3.3%, which is below both the State of Illinois and the United States' unemployment rate averages (as of April 2025).

The average household income for the service market area, based on the latest 5-year American Community Survey estimates, was \$114,695. This is slightly under the Illinois (\$136,221), Wisconsin (\$120,678), and United States (\$130,215) averages.

Social Determinants of Health (SDoH)

The data and discussion on the following pages will examine the social determinants in the Midwest Medical service area and provide insight into the complexity of circumstances that affect physical and mental well-being. The infographic provides a snapshot of the at-risk population served by Midwest Medical.

The CDC describes social determinants of health as conditions in the places where people live, learn, work, and play that affect a wide range of health and quality of life risks and outcomes. Healthy People 2030 uses a place-based framework that outlines five key areas of SDoH:

Five Key Areas of SDoH

Healthcare Access and Quality includes access to healthcare overall, primary care, health insurance coverage, health literacy, and compliance with recommended screenings and incidents of certain health-related conditions.

Education Access and Quality which includes high school graduation rates, enrollment in higher education, educational attainment in general, language and literacy, and early childhood education and development.

Social and Community Context includes the incidents of homelessness, teen birth rates, juvenile arrest rates, and the incidents of young people not in school and not working.

Economic Stability includes average household income, rates of unemployment, cost of living, people living in poverty, employment, food security, and housing stability.

Neighborhood and Built Environment include the cost and quality of housing, access to transportation, access to healthy food, air and water quality, broadband access, access to fitness and recreation facilities, walkability, and rates of crime and violence.



AT RISK POPULATION PROFILE

8 ZIP Codes

22,759

Population

10,339

Households

2.17

Avg Size Household

50.0

Median Age

\$67,841

Median Household Income

\$249,066

Median Home Value

97

Wealth Index

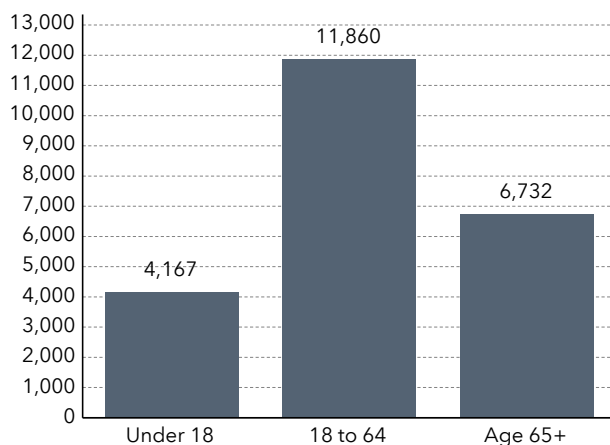
97

Housing Affordability

20

Diversity Index

POPULATION BY AGE



AT RISK POPULATION



2,867

Households With Disability



6,732

Population 65+



725

Households Without Vehicle

POVERTY AND LANGUAGE



8%

Households Below the Poverty Level



889

Households Below the Poverty Level



0

Pop 65+ Speak Spanish & No English

POPULATION AND BUSINESSES



20,375

Daytime Population



1,092

Total Businesses



9,844

Total Employees

Language Spoken (ACS)	Age 5-17	18-64	Age 65+	Total
English Only	3,255	11,930	6,434	21,619
Spanish	30	149	67	246
Spanish & English Well	29	131	60	220
Spanish & English Not Well	1	18	7	26
Spanish & No English	0	0	0	0
Indo-European	9	64	57	130
Indo-European & English Well	9	55	50	114
Indo-European & English Not Well	0	4	7	11
Indo-European & No English	0	4	0	4
Asian-Pacific Island	2	53	19	74
Asian-Pacific Isl & English Well	2	53	19	74
Asian-Pacific Isl & English Not Well	0	0	0	0
Asian-Pacific Isl & No English	0	0	0	0
Other Language	2	2	14	18
Other Language & English Well	2	2	11	15
Other Language & English Not Well	0	0	3	3
Other Language & No English	0	0	0	0

Process Methods and Accountability

Establishing the CHNA Infrastructure and Partnerships

Description of Data Sources – Quantitative/Secondary Data

Quantitative (secondary) data is collected from many resources, including, but not restricted to, the following:

Source	Description
Behavioral Risk Factor Surveillance System	The largest, continuously conducted telephone health survey in the world. It enables the Center for Disease Control and Prevention (CDC), state health departments, and other health agencies to monitor modifiable risk factors for chronic diseases and other leading causes of death.
SparkMap	An online mapping and reporting platform powered by the Center for Applied Research and Engagement Systems (CARES) at the University of Missouri.
U.S. Census	National census data is collected by the US Census Bureau every 10 years.
Centers for Disease Control	Through the CDC's National Vital Statistics System, states collect and disseminate vital statistics as part of the US's oldest and most successful intergovernmental public health data sharing system.
County Health Rankings	Each year, the overall health of each county in all 50 states is assessed and ranked using the latest publicly available data through a collaboration of the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute.
American Communities Survey	A product of the U.S. Census Bureau which helps local officials, community leaders, and businesses understand the changes taking place in their communities. It is the premier source for detailed population and housing information about our nation.
Illinois Department of Employment Security	The state's employment agency that collects and analyzes employment information.

Secondary data is initially collected through the Spark Map and/or ESRI systems and then reviewed. Questions raised by the data reported from those sources are compared with other federal, state, and local data sources to resolve or reconcile potential issues with reported data.

Secondary data is available in a separate document titled, "Midwest Medical Center 2025 Secondary Data."

Source	Description
National Cancer Institute	Coordinates the National Cancer Program, which conducts and supports research, training, health information dissemination, and other programs with respect to the cause, diagnosis, prevention, and treatment of cancer, rehabilitation from cancer, and the continuing care of cancer patients, and the families of cancer patients.
Illinois Department of Public Health	IDPH is the state agency responsible for preventing and controlling disease and injury, regulating medical practitioners, and promoting sanitation.
Health Resources and Services Administration	The US Department of Health and Human Services develops health professional shortage criteria for the nation and uses that data to determine the location of Health Professional Shortage Areas and Medically Underserved Areas and Populations.
Local IPLANS	The Illinois Project for Local Assessment of Needs (IPLAN) is a community health assessment and planning process conducted every five years by local health jurisdictions in Illinois.
ESRI (Environmental Systems Research Institute)	An international supplier of Geographic Information System (GIS) software, web GIS and geodatabase management applications. ESRI allows for specialized inquiries at the zip code, or other defined, level.
Illinois State Board of Education	The Illinois State Board of Education administers public education in the state of Illinois. Each year, it releases school "report cards" which analyze the makeup, needs, and performance of local schools.
United States Department of Agriculture	USDA, among its many functions, collects and analyzes information related to nutrition and local production and food availability.

Primary Data

Three community focus groups were convened at Midwest Medical in April 2025. Thirty-seven community members participated, representing local service groups, healthcare providers, schools, and churches. A complete listing of participants is in the Secondary Data document.

Anecdotal data collected from the focus groups revealed the following.

The Top Five (5) Strengths:

- Hospital staff/culture/service/quality
- Community engagement
- Tourism/Parks/recreational and event venues
- Strong Schools
- Community transportation

The Top Five (5) Opportunities That Need To Be Addressed:

- Access to safe and affordable housing
- Mental Health resources
- Senior/Elder support
- Emergency Medical Services/Ambulance
- Promotion of medical specialties at MM

The Top Five (5) Aspirations:

- To be the healthcare provider of choice
- Adequate mental health access
- Resources available for seniors/elders
- Resources for young people
- All residents have adequate food, clothing, and shelter

Description of the Community Health Needs Identified

After their review and discussion, the identification and prioritization group advanced the following areas of focus:

1. Advancing Emergency Medical Services/Ambulance in the Community
2. Mental Health Access
3. Senior Resources and Care



Resources Available to Meet Priority Health Needs

Hospital Resources

- Hospital Executive and Leadership Teams
- MM providers
- Senior Care services
- Marketing
- Quality improvement
- Human Resources recruiters

Healthcare Partners Or Other Resources, Including Telemedicine

- Health Department
- Mental Health agencies, providers, and organizations
- Department of Aging – SHIP program
- Rosecrance Crisis Services

Community Resources

- EMS providers
- Countywide committees
- Local and state legislators
- Senior Resource Centers

Documenting and Communicating Results

This CHNA Report will be available to the community on the hospital's public website, www.midwestmedicalcenter.org.

A hard copy may be reviewed at the hospital by inquiring at the information desk at the main entrance. No written comments were received concerning the hospital facility's most recently conducted CHNA or the adopted Implementation Strategy. A method for retaining written public comments and responses exists, but none have been received.



Planning Process

The Implementation Strategy was developed through a facilitated meeting involving key community members and administrative staff of Midwest Medical in June 2025. The group reviewed the needs assessment process completed to that point and considered the prioritized significant needs and supporting documents. They also evaluated internal and external resources that could potentially address the current prioritized needs.

The group then considered each of the prioritized needs. For each of the priority areas, the hospital has identified the actions it intends to take, along with their anticipated impact, the resources it plans to commit, and the external collaborators it will cooperate with to address the needs.

The plan will be evaluated through periodic reviews of measurable outcome indicators, in conjunction with annual reviews and reporting.



midwest
FITNESS CENTER

← Walking/
Running
Direction



Implementation Strategy

The group addressed the needs with the following strategies:

Priority 1: Emergency Medical Services/Ambulance

Indicators that Support this Priority

- EMS/Ambulance concerns were in the top five opportunities identified by the onsite community groups.
- Currently, there are multiple ambulance providers in the community, but all feel they are underfunded and understaffed to serve the community adequately.
- On average, the MMC ER transfers 29 patients per month to a higher level of care. (Data Source: MMC records Oct 2024-June 2025).

Actions The Hospital Intends To Take To Address The Health Need

- Continuing the partnership with Galena EMS, addressing response times (this service is primarily a volunteer-staffed service) and transfer needs.
- Participate in the county-wide ad hoc committee for EMS improvement. This committee includes county board members, all EMS providers in the community, and the hospital. Once the white paper is developed, collaborate with stakeholders to create action plans that move this initiative forward.
- Investigate in collaboration with the county-wide task force on EMS in the formation of a single EMS district.
- Continue to support the legislation that has been locally passed for tax incentives for the Galena area. This is currently before the Illinois state bureaucracy and has been held up from being implemented.
- Investigate partnerships with schools and colleges in the community to train high school students as Emergency Medical Technicians (EMTs). Investigate how this is currently done in Scales Mound and consider replicating their program.
- Investigate using paramedics for transfers.

Anticipated Impacts Of These Actions

- Improved collaboration between EMS partners to provide improved services.
- Improved transfer times for patients being transferred from Midwest Medical.
- The ultimate goal is to have a fully funded, full-time EMS service for the community.

Programs And Resources That The Hospital Plans To Commit To Address The Health Need

- Hospital leadership

Planned Collaboration Between the Hospital and Other Facilities or Organizations

- Schools
- Colleges
- County Board Committee on EMS
- County and state legislators
- EMS partners



Priority 2: Mental Health

Indicators that Support this Priority

- Access to mental health resources was one of the top five opportunities identified by the on-site community group.
- Access to mental health providers is diminished in the area.

Report Area	Access to Mental Health Providers 2025
Midwest Medical Center	108.3
Illinois	314.5
Wisconsin	251.3
United States	313.6

Data Source: Centers for Medicare and Medicaid Services, National Plan and Provider Enumeration System (NPPES).

- The number of poor mental health days self-identified by adults aged 18+ is greater than the Illinois, Wisconsin, and United States averages.

Report Area	Poor Mental Health Days/Month
Midwest Medical Center	5.0
Illinois	4.4
Wisconsin	4.8
United States	4.9

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System

- The rate of depression is increased in adults 18 plus.

Report Area	Depression (Medicare Only)	Depression (Medicare Dual Eligible)	Depression Adults > 18
Midwest Medical Center	11%	22%	20.4%
Illinois	15%	24%	19.0%
Wisconsin	16%	27%	23.35
United States	17%	27%	20.7%

Data Source: Centers for Disease Control and Prevention, CDC - Atlas of Heart Disease and Stroke.
Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System

- Substance abuse is a concern in the area due to the intertwined relationships between mental health and substance abuse.

Report Area	Current Smokers	Women Who Smoked During Pregnancy
Midwest Medical Center	14.5%	7.2%
Illinois	13.3%	4.4%
Wisconsin	15.5%	6.8%
United States	12.9%	4.6%

Report Area	Heavy Alcohol Consumption
Midwest Medical Center	23.12%
Illinois	19.29%
Wisconsin	23.53%
United States	19.35%

Data Source: Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System
Data Source: University of Wisconsin Population Health Institute, County Health Rankings.

- Opioid use by Medicare beneficiaries is a concern in the area.

Report Area	Opioid Drug Claims as a Percentage of Total Drug Claims
Midwest Medical Center	4.0%
Illinois	3.5%
Wisconsin	3.7%
United States	3.9%

Data Source: Centers for Medicare & Medicaid Services, CMS - Part D Opioid Drug Mapping Tool.

- The suicide rate among adults over 18 is above the state and the United States average.

Report Area	Heavy Alcohol Consumption
Midwest Medical Center	15.4
Illinois	11.7
Wisconsin	15.2
United States	14.5

Data Source: Centers for Disease Control and Prevention, CDC - National Vital Statistics System.

Actions The Hospital Intends To Take To Address The Health Need

- Participate in the county-wide committee to address community mental health needs.
- Promote the mental health survey conducted by the county.
- Investigate grant funding for mental health needs.
- Use the PDCA cycle to evaluate no-show rates for counseling services to mitigate this and provide more viable services.
- Celebrate Mental Health Awareness month in May using internal and external resources to promote awareness of mental health services available in the community and how to access them. Help address the stigma of seeking assistance for mental health or substance abuse needs.

- Continue active recruitment for open mental health counselor positions.
- Continue and potentially expand the partnership with Rosecrance Crisis Counselors for emergency department mental health evaluations and inpatient admissions.
- Investigate potential transportation sources and funding for transportation for patients who need mental health services.
- Investigate additional training for the Emergency Department on crisis intervention and handling patients in mental health crises.
- Investigate the provision of training for EMS, police, and fire, and crisis intervention and handling patients in mental health crises.

Anticipated Impacts Of These Actions

- Community members will be more informed about improving their own mental health and mental health overall.
- The community will be informed about the kinds of resources available and how to access them to improve their mental health.
- Long term, the stigma of seeking help will be decreased.
- No-show rates for counseling appointments will be reduced, allowing more patients to be seen in a timely manner.

Programs And Resources That The Hospital Plans To Commit To Address The Health Need

- Hospital executive and leadership teams
- Educators
- Social Workers
- Marketing team
- Mental health counselors
- Wellness team
- Long-term care team

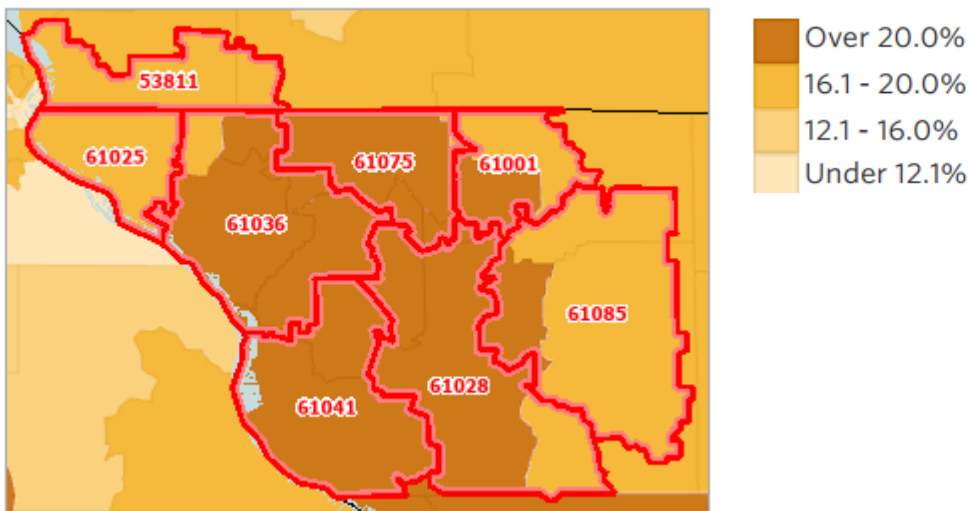
Planned Collaboration Between the Hospital and Other Facilities or Organizations

- County partners on the mental health committee
- ICAHN and other potential grant funding sources
- Rosecrance Crisis Counselors
- EMS, fire, and police departments
- Crisis intervention educators

Priority 3: Senior Resources/Care

Indicators that Support this Priority

- The onsite community group identified senior/elder support deficiencies as one of the top five opportunities. In-home care, memory care, home health care, support for individuals with special needs, and advocacy for seniors were all mentioned.
- 28.52% of the community is age 65 plus.



Data Source: US Census Bureau, Decennial Census. 2020.

- The number of patients covered under Medicare in the community is almost 60% higher than in the state and the nation.

Report Area	Employer or Union Provided	Direct Purchase	TRICARE or Military	Medicare	Medicaid	VA Health Care
Midwest Medical Center	58.81%	20.82%	1.24%	31.82%	16.30%	3.17%
Illinois	63.74%	13.50%	1.31%	18.66%	20.73%	1.69%
Wisconsin	64.48%	15.74%	1.62%	20.49%	18.64%	2.35%
United States	60.22%	14.85%	2.97%	19.82%	22.61%	2.42%

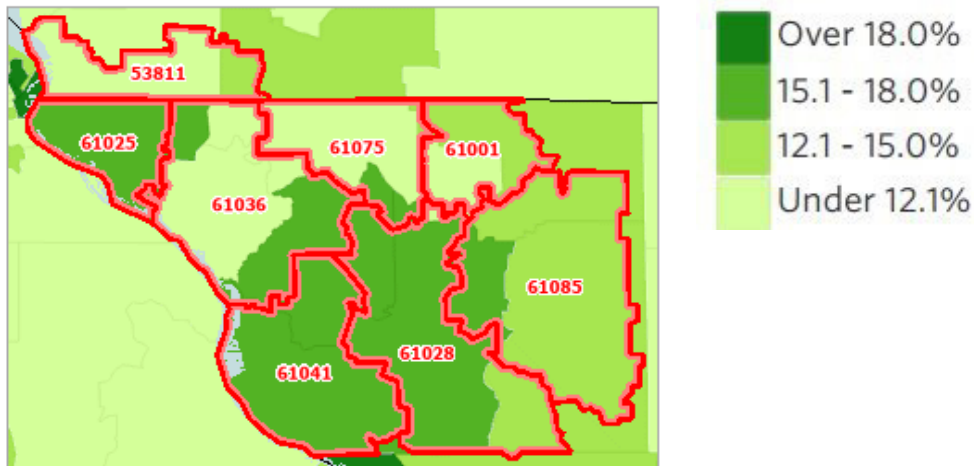
Data Source: US Census Bureau, American Community Survey

- The life expectancy of community residents is 80.3 years, higher than the state or the nation.
- The completion of the Medicare Annual Wellness Exam is below the target for the state and nation.

Report Area	AWE Completed
Midwest Medical Center	39%
Illinois	41%
Wisconsin	46%
United States	41%

Data Source: Centers for Medicare and Medicaid Services, Mapping Medicare Disparities Tool

- There is a larger-than-average number of people in the community with a disability. This is especially true in the southern and northwestern regions of the service market area. 26.69% of the disabled population is aged 65 plus. Almost 28% of the households in the service area have someone living with a disability.



Report Area	Percent with a Disability
Midwest Medical Center	12.8%
Illinois	11.84%
Wisconsin	12.86%
United States	13.04%

Data Source: US Census Bureau, American Community Survey.

- The ALICE population in the community is concentrated in households with householders under the age of 25 and over the age of 65. ALICE is defined by the United Way's report system, "United for ALICE," as households that are asset-limited, income-constrained, and employed. They are defined as earning more than the Federal Poverty Level but less than the county's basic cost of living. Basic costs include housing, childcare, food, transportation, health care, and a basic smartphone plan.
- The number of Medicare recipients who are hospitalized for preventable conditions has increased. This includes admission for diabetes with short-term complications, diabetes with long-term complications, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, bacterial pneumonia, or urinary tract infection. Numbers are presented as a rate per 100,000 beneficiaries.

Report Area	Preventable Hospitalizations
Midwest Medical Center	4,123
Illinois	3,239
Wisconsin	2,498
United States	2,666

Data Source: Centers for Medicare and Medicaid Services, Mapping Medicare Disparities Tool.

Actions The Hospital Intends To Take To Address The Health Need

- Provide education for families on qualifying for Medicare and Medicaid, as well as selecting the correct insurance coverage for these beneficiaries.
- Investigate the Department of Aging SHIP – Senior Health Insurance Program and potentially add SHIP counselors.
- Investigate a partnership with local senior resources centers to provide education to seniors.
- Increase offerings for free or low-cost senior wellness events.
- Provide education to patients on healthy living and how to cope with chronic illnesses.
- Continue advocacy for the state's long-term care regulations. Currently, regulations are challenging, as is staffing the LTC.

- Develop a listing of in-home assistants from the community to provide to elders who want to “age in place.”
- Partner with the Senior Resource Center in Freeport to assess their service offerings and ability to provide support and education to in-home caregivers.
- Develop a resource guide specifically for seniors that outlines services available in the community and how to access them.
- Investigate the need for an in-home caregiver support group.
- Promote the use of swing beds for short-term senior rehabilitation.

Anticipated Impacts Of These Actions

- Seniors living in the community and those providing care to seniors will learn health improvement tactics. This could include knowledge of healthy eating and living, as well as education on selected health conditions.
- Seniors will know how and where to get the health information and assistance they need.
- Seniors will be enabled to age in place, versus going to an in-center care/nursing home.

Programs And Resources That The Hospital Plans To Commit To Address The Health Need

- Hospital executive and leadership teams
- Providers
- Rural health clinic teams
- Marketing Team
- Health Educators
- Fitness team

Planned Collaboration Between the Hospital and Other Facilities or Organizations

- Long-term care providers
- Senior Resource Centers
- Department of Aging – SHIP Programs
- Community members who provide in-home care services
- Home health providers

Notes:

Statistics may vary slightly depending on the resources.



midwest
MEDICAL CENTER

2025 Community Health Needs Assessment

(815) 777-1340