2016 Implementation Plan

LDS Hospital

Intermountain® Healthcare

Intermountain LDS Hospital
Implementation Plan
2017 – 2019

LDS Hospital
8th Avenue C Street
Salt Lake City, Utah 84143

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Summary

Intermountain Healthcare created a system-wide planning process to be used by each of its hospitals to address the health priority identified in the Community Health Needs Assessment (CHNA) to further its mission of helping people live the healthiest lives possible.® This implementation plan, a companion to the CHNA Report, outlines the community health improvement initiatives Intermountain LDS Hospital[1] will implement over the next several years.

The Patient Protection and Affordable Care Act (ACA) requires each not-for-profit hospital to conduct a CHNA every three years to identify significant health needs in the community, report impact of previous community health improvement initiatives, and to develop an implementation plan to address and measure community health improvement activities created to address the significant health need.

LDS Hospital and Intermountain report compliance with the requirements on the IRS Form 990 Schedule H annually. Intermountain created CHNA reports and implementation plans for each of its 22[2] hospitals to make the documents publicly available.

LDS Hospital completed the CHNA in collaboration with the Salt Lake County Health Department and the Utah Department of Health to identify health indicators, gather and analyze data, and prioritize the indicators to determine the significant health needs to address over the next several years. Based on that prioritization process, the hospital and Intermountain identified the priority health need as:

Prevention of prediabetes, high blood pressure, depression, and prescription opioid misuse

Results of the CHNA were used to develop a three-year plan outlining the health improvement initiatives to address the significant health need using evidence based programs. A process was used to identify evidence based programs that have worked nationally and would utilize assets within the LDS Hospital community, Intermountain's Clinical Programs, and SelectHealth, Intermountain's not-for-profit health insurance company.

As a result, the hospital's initiatives combine local and Intermountain resources and create local community partnerships to improve health for low-income, underserved, and uninsured populations. The implementation plan includes a description of the resources LDS Hospital has committed to the initiatives and how such resources will be augmented by collaborative partnerships in the hospital community. Outcome measures will be tracked quarterly over three years and reported annually through the evaluation process.

[1] The official name of the hospital is Intermountain LDS Hospital; for this document, reference will be made to LDS Hospital.

[2] Intermountain owns and operates 21 hospitals in Utah and southeastern Idaho and manages Garfield Memorial Hospital, owned by Garfield County, in Panguitch, Utah. Intermountain included Garfield Memorial Hospital in its system-wide CHNA and Implementation Planning. For purposes of this report, reference will be made to 22 hospitals to include this hospital.

Implementation Planning

A comprehensive approach was used to identify community health improvement initiatives to address the identified health priority of prevention of prediabetes, high blood pressure, depression, and prescription opioid misuse in the hospital's implementation plan and throughout Intermountain hospitals.

Implementation Planning Governance and Collaboration
Internal committees and an external advisory panel—all with experts in clinical care, public health, and human services—guided the implementation planning process to create health improvement initiatives in communities to address assessment results.

- The Community Health Improvement Guidance Council acted as the executive body to approve the community health improvement initiatives.
- The Community Benefit Steering Committee coordinated community health improvement initiatives.
- The CHNA Executive Committee provided oversight.
- An Implementation Planning Workgroup guided the identification of potential health improvement initiatives, developed tools for hospital planning meetings, and guided development of the hospital implementation plans.
- LDS Hospital Implementation Team used tools to develop local health improvement initiatives and identify existing community programs.
- Community Benefit Managers have local accountability in each of their hospitals to coordinate planning meetings, identifying community partners, managing the initiatives, evaluation, and measuring and reporting outcomes.
- The Community Advisory Panel provided public health expertise for the health improvement initiatives throughout Intermountain. Membership was expanded during the health improvement planning to provide recommendations and review initiatives. The panel will continue meeting over the coming years to align education programs, public messaging, and measure and evaluate community health improvement initiatives.
  Membership includes leadership from:
  - Association for Utah Community Health (Utah's primary care association)
  - HealthInsight (Utah's designated quality improvement organization and quality innovation network)
  - Utah's public behavioral health system
  - Utah's local health departments
  - Utah Department of Health
  - Utah Division Substance Abuse and Mental Health

Establishing Criteria for Community Health Improvement Initiatives
After results of the CHNA were analyzed and the health priority was defined, criteria for community health improvement initiatives for the hospital community was developed utilizing existing resources scaled for population and aligned with other health improvement activities. The Intermountain Implementation Planning Workgroup was convened with clinical experts to identify and select effective initiatives to prevent prediabetes, high blood pressure, depression, and prescription opioid misuse in our communities. The hospital created a local planning team to develop plans and community collaborations to implement strategies to address the health priority.

First, in preparation for the Implementation Planning Workgroup's task, Intermountain engaged students from the Harvard T. H. Chan School of Public Health Doctor of Public Health program to review

the literature on evidenced based programs that addressed the health priority and demonstrated health improvement. The team also conducted onsite assessments of Intermountain hospitals' existing programs, community resources, partners, programs, and interventions with recommendations for collaborations.

Second, the LDS Hospital staff presented the CHNA results to hospital community stakeholder organizations, many of whom were later identified as collaborative partners. The hospital worked with them to create a comprehensive inventory of existing local programs and interventions to address the identified health priority. The community participants included:

- Advocates for Recovery Awareness
- Canyons School District
- Community Health Centers, Inc.
- Comunidades Unidas
- Family Counseling Center
- Fourth Street Clinic
- Health Access Project
- HealthInsight
- Hope Clinic
- Maliheh Clinic
- Midtown Community Health Center—South Salt Lake
- Mexican Consulate
- Murray City School District
- National Alliance on Mental Illness
- Polizzi Clinic
- Salt Lake County Health Department
- Sandy Senior Center
- Utah Department of Health
- Utah Partners for Health
- Utah State Board of Education
- Valley Mental Health
- Voices for Utah Children
- Volunteers of America

The Implementation Planning Workgroup conducted an inventory of Intermountain Clinical Programs, Medical Group Clinics, and SelectHealth to identify evidence based practices with application to community health improvement initiatives. Each hospital's local Implementation Planning Team also held community meetings to complete an inventory of local community evidence based interventions focused on the health priority.

Selection of Community Health Improvement Initiatives

The evidence based interventions within hospital services, the hospital community, and throughout Intermountain's service area were scored by the Implementation Planning Workgroup according to:

- Ability to implement and maintain fidelity to achieve anticipated outcomes
- Cost – total expense of the intervention (education materials, instructor, screening supplies, promotional materials, evaluation, and data management)
- Effectiveness – measure of improved health as a result of intervention
- Evidence based either through peer review, published researched, or validated outcomes
- Existing or potential to create community collaboration
- Health improvement – measure of change in a person's health status and how it can be maintained over a period of time
- Potential to influence public policy to improve health
- Reach – measure of people in the target population participating in intervention
- Sustainability – measure of how the intervention can be sustained over a period of time

The highest scoring hospital and community-based interventions were selected to address the health priority. The LDS Hospital Implementation Planning Team met with community stakeholders to present the selected interventions and determine possible collaborations.

Intermountain Community Health Improvement Initiatives

LDS Hospital and Intermountain established a plan for implementing community health improvement initiatives in the hospital community to prevent prediabetes, high blood pressure, depression, and prescription opioid misuse for underserved, low-income people. Initiatives are summarized below; the detailed framework with annual targets is in the Appendix.

Prevention of Prediabetes

LDS Hospital will adopt a comprehensive approach to diagnosing and managing prediabetes by screening underserved community members and improving access to preventive interventions. The hospital will provide screening materials and cash contributions to community partners to provide diabetes prevention programs.

Community members will be simultaneously screened for prediabetes, high blood pressure, and depression. Screening for depression will also occur in primary care clinics and other care settings in order to be sensitive to people who are less comfortable addressing depression in public community settings. Over three years, 460 people will be screened for prediabetes. People who screen positive for prediabetes will receive information encouraging participation in diabetes prevention programs including Intermountain's Prediabetes 101 class or community-based diabetes prevention programs. Research shows that the incidence of diabetes is reduced by at least 50 percent for people who participate in diabetes prevention programs.

Prevention of High Blood Pressure

LDS Hospital will adopt a comprehensive approach to diagnosing and managing high blood pressure by screening underserved community members and improving access to preventive interventions and treatment. The hospital will provide screening materials and cash contributions to community partners to provide Chronic Disease Self-Management Program (CDSMP) workshops. CDSMP is a six-week course in community settings on chronic disease self-management that promotes healthy behaviors and self-management strategies.

Over three years, 460 people will be screened for high blood pressure. People who screen positive for high blood pressure will receive resources for treatment and CDSMP workshops. According to the Centers for Disease Control, 30 percent of Americans have high blood pressure and national studies indicate that about 52 percent of people who screen positive will be able to control their high blood pressure through the planned interventions.

Prevention of Depression

LDS Hospital will adopt a comprehensive approach to diagnosing and managing depression by expanding screening for depression in a variety of settings where people feel comfortable being screened, discussing results, and receiving options for follow up and treatment. These options include community-based screenings, or screening in clinics with mental health integration services. There is potential for screening to expand to community partners who choose to adopt Intermountain's Mental Health Integration (MHI) model, a team approach to assessing and treating mental health in the primary care setting. LDS Hospital is exploring adoption of the model with Maliheh Clinic, Midtown Community Health Center, Odyssey House, Utah Partners for Health and Community Health Centers Inc., and will support training if they determine to add the model in their clinics.

The hospital will maintain the existing adult Behavioral Health Network (BHN), a group of community mental health providers offering mental health services to uninsured people and expand the network to provide additional access for adults, adolescents, and children.

The networks have demonstrated effectiveness in improving access to care. Prior to implementation, only 23 percent of uninsured people received follow-up care with mental health providers within seven days. After implementing the networks in several Intermountain urban communities, evaluation showed that 95 percent of people who received care at Intermountain hospital and then were provided resources to a network received follow-up care within seven days after hospital discharge.

Public messaging to improve awareness of the signs and symptoms of depression and suicide in youth will be promoted. LDS Hospital is working with the local school districts to explore interest in adopting "Hold On. Persuade. Empower." (HOPE) Squads. The hospital will fund at least one new HOPE Squad over the three year period, 2017 through 2019 depending if interest is present. HOPE Squads are community-based support teams trained to help respond to peers struggling with emotional issues such as depression and suicide.

Professionals will be trained to recognize the signs and symptoms of depression and suicide in children and adolescents.

Prevention of Prescription Opioid Misuse

LDS Hospital will promote the safe use, storage, and disposal of prescription opioids through offering drop boxes, a public awareness campaign, and donations of Naloxone, an overdose reversal medication.

The hospital will work with community partners to maintain existing drop boxes (safe, secure, anonymous collection boxes for unused prescription medications). The hospital will also support community Take Back events, scheduled public efforts to dispose of unused medications. Public messaging on safe use and disposal of unused prescription medications will continue through 2019.

The hospital will improve access to treatment by making Naloxone rescue kits available to community partners who will then distribute the kits. A minimum of 50 rescue kits and training will be provided in 2017; replacement of outdated or used kits as well as additional kits and training will be provided in 2018 and 2019.

LDS Hospital will support community partners in implementing medication assisted treatment combined with counseling by sharing resources and expertise, offering training, collaborating in the development of services, and assisting Community Health Centers, Inc., Midtown Community Health Center, and Utah Partners for Health in applying for federal substance use disorder treatment funding.

LDS Hospital will support at least one CDSMP- Pain class for community members living with chronic pain.

Evaluation

LDS Hospital and Intermountain investigated various evaluation tools and selected the RE-AIM[3] methodology for evaluation of the community health improvement initiatives. This method evaluates the following elements:

Reach – the number of people in a target population affected by the initiative
Effectiveness – measurement of improved health
Adoption – partners and sites who adopted the initiative in ongoing delivery services
Implementation – critical activities and process to ensure fidelity
Maintenance – sustainability of the health initiative

A tool kit was developed for evaluating the initiatives including defining the data points for process and impact measures, data collection methods and analysis, reporting results, and evaluation review. LDS Hospital will report goal progress and impact annually.

Resources for Community Health Improvement Initiatives

LDS Hospital and Intermountain committed resources to address the health priority.
Budget for the community health improvement initiatives includes:

- Designing and implementing public awareness messaging campaigns
- Offering education and materials to community partners
- Hiring and training staff for community-based screening events and education
- Offering financial support for safety net clinic health providers to participate in professional education on the prevention of prediabetes, high blood pressure, depression, and prescription opioid misuse
- Purchasing Naloxone kits and donating to community agencies
- Contributing cash to community not-for-profit agencies to support efforts to address the health priority
- Providing supplies for community-based health assessment events

LDS Hospital will support staffing community health education to maximize resources and utilize existing education materials for the four focus areas of the health priority. Measurement and evaluation of each initiative will be coordinated by existing hospital staff. These resources will complement community resources identified during the planning process.

LDS Hospital and Intermountain have the opportunity to impact the prevention of prediabetes, high blood pressure, depression, and prescription opioid misuse through the delivery of healthcare in its community. The CHNA informed the development of community health improvement initiatives which were then aligned with hospital clinical goals. The hospital's Community Benefit staff and the clinical teams will continue to work together to ensure these community health improvement initiatives impact our community where they live, work, worship, and play, and when they seek care from our clinical teams.

[3] *Applying the RE-AIM Framework to Intervention Planning and Evaluation*. P.A. Estabrooks et al. BMC Public Health, April 2014.

Other Needs Identified in CHNA

The LDS Hospital CHNA also identified "access to healthcare" among the top five needs in the assessment. Access was not identified as a high priority for LDS Hospital because the issue is part of ongoing hospital and Intermountain initiatives described below.

Access to Healthcare Services
LDS Hospital and Intermountain continue to provide access to healthcare services for low-income and uninsured people in communities served by its hospitals and clinics through its Financial Assistance program and by supporting and operating clinics to eliminate barriers in accessing care for underserved people in our communities.

- People presenting in Intermountain hospitals and clinics may receive medically necessary services regardless of ability to pay and are assisted with applying for Financial Assistance and government programs for which they are eligible. In 2015 LDS Hospital provided over $42.6 million (gross) in Financial Assistance in more than 13,690 cases.
- Intermountain has agreements with 35 clinics serving people below 200 percent of Federal Poverty Guidelines to provide vouchers for diagnostic imaging, lab tests, and certain specialty care services. In 2015, more than 10,000 vouchers were provided to these clinics for services in Intermountain clinics and hospitals.
- Intermountain provides grants through Intermountain Community Care Foundation to Federally Qualified Health Centers and other safety net clinics in excess of $3.5 million per year to help increase access to a regular place for comprehensive medical care for low-income and uninsured people. In 2016 more than $1.5 million were awarded to FQHCs in Salt Lake County.

Conclusion

The LDS Hospital Implementation Plan was reviewed and adopted by its Governing Board as required by the Affordable Care Act.

LDS Hospital staff is grateful for the support of community members and agencies for their participation in developing community health improvement initiatives in the hospital's community. The hospital will conduct its next CHNA in 2019 and will develop health improvement initiatives to address identified health priorities in that assessment and will continue collaborations to improve the health of our community.

Acknowledgement

This implementation plan is the result of collaboration and support of the state and local health departments, state and local mental health and substance abuse authorities, school districts, universities, safety net providers, and local not-for-profit human service agencies. We recognize the invaluable contribution and support, from Intermountain's clinical experts, programs, and services. Many more partners will be important to the community health improvement initiatives. We look forward to working together to improve community health.

For more information about the implementation plan:

Nathan Peterson, Intermountain Central Region Community Benefit Director;
nathan.peterson@imail.org
Mikelle Moore, Vice President, Intermountain Community Benefit; mikelle.moore@imail.org
Terry Foust, Intermountain Community Benefit; terry.foust@imail.org

Appendix A

LDS Hospital Community Health Improvement Initiatives 2017 – 2019

Hospital resources	Community partnerships	Supporting activities	Yearly targets
Initiative: **Develop and implement community-based screenings for prediabetes, high blood pressure, and depression for uninsured, low-income, and underserved people**			
• Screening tools • Screening coordinator • Screening event staff • Patient education materials, including treatment resources • Healthy behavior education materials	• Boys and Girls Club • Comunidades Unidas • Family Counseling Center • HealthInsight • Midtown Community Health Center • Odyssey House • Mexican Consulate • Polizzi Clinic • Salt Lake County Health Department • Salt Lake County Aging Services • Volunteers of America	Preparation: hire staff, develop materials, refine evaluation processes	Complete Q1 and Q2 2017
		Coordinate screening events and/or ongoing screening efforts	2017: At least two events 2018: At least two events 2019: At least four events
		Screen people	2017: At least 100 people 2018: At least 120 people 2019: At least 240 people
		Collect demographic information of people screened to monitor inclusion of underserved populations	2017-2019: 90 percent of people screened
Initiative: **Offer education and materials on prediabetes, high blood pressure, depression, and prescription opioid misuse to community-based providers**			
• Training for community partners	• Salt Lake County Health Department • Family Counseling Center • Maliheh Clinic • HealthInsight • Midtown Community Health Center • Utah Partners for Health • Community Health Centers, Inc. • Polizzi Clinic • Odyssey House	Provide expertise, resources, and education to community providers	2017 - 2019: Offer at least one education course to community partners each year

Intermountain resources	Community partnerships	Supporting activities	Yearly target
Focus Area: Prevention of prediabetes			
Initiative: **Provide resources to connect people found to be at risk for prediabetes to community-based Prediabetes 101 and/or Diabetes Prevention Program (DPP) classes**			
• Develop Prediabetes 101 course • Cash contributions to community partners to improve access to DPP	• Salt Lake County Health Department • HealthInsight • Utah Partners for Health • Maliheh Clinic • Community Health Centers, Inc. • Odyssey House • Fourth Street Clinic • Comunidades Unidas • Mexican Consulate	Preparation: hire staff, develop materials, and distribution of grant funds	Complete Q1 and Q2 2017
		Provide Prediabetes 101 and/or DPP courses	2017 – 2019: Offer Prediabetes 101 classes and/or DPP courses to people identified at risk for prediabetes at screening
Focus Area : Prevention of high blood pressure			
Initiative: **Provide high blood pressure educational materials and treatment resources to safety net providers**			
• Resources for treatment • Financial assistance for care through Intermountain-affiliated primary care sites where no other resources are available	• Midtown Community Health Center • Salt Lake County Health Department • HealthInsight • Utah Partners for Health • Maliheh Clinic • Community Health Centers, Inc. • Odyssey House • Fourth Street Clinic	Provide educational materials and resources for treatment to people with positive screening results	2017 – 2019: 100 percent of people who screen positive will receive resources for treatment and education materials
Initiative: **Provide resources to connect people with high blood pressure to Chronic Disease Self-Management Program (CDSMP)**			
• Fund training for CDSMP facilitators • CDSMP coordinator • Cash contributions to support workshops hosted by community partners	• Salt Lake County Aging Services • Senior Centers • Utah Department of Health • HealthInsight	Provide CDSMP for people who screen positive for high blood pressure	2017 – 2019: Offer at least one CDSMP course per year to people who screen positive for high blood pressure

Intermountain resources	Community partnerships	Supporting activities	Yearly targets
Focus Area: Prevention of depression			
Initiative: **Create access to behavioral health services for children and adults**			
• Cash contributions to maintain the Behavioral Health Network (BHN) for adult services • Expand BHN to include specialized services for children and adolescents • Messaging on signs and symptoms of depression and suicidality in children and adolescents	• BHN Partners	Develop demographic tracking mechanisms Maintain adult services	2017: Determine baseline 2018 - 2019: Track demographic measures and total visits
		Provide public messaging and training for professionals geared towards children and adolescents	2017 – 2018: Train health professionals and community partners on depression and suicidality in children and adolescents
		Coordinate care for children and adolescents through newly established Pediatric BHN	2019: 20 visits/year
Initiative: **Support creation and maintenance of "Hold On. Persuade. Empower." (HOPE) Squads in schools**			
• Support conferences for peer leaders • Cash contributions to establish new HOPE Squads	• Granite School District • Salt Lake School District	Explore interest to establish HOPE Squads	2017: Work with local schools
		Support establishment of new HOPE Squads if interest is present	2017 – 2019: Establish at least one new HOPE Squad
		Support training	2017-2019: Training for local teams
Initiative: **Support Mental Health Integration (MHI) training and development with FQHCs and other safety net providers**			
• Initial MHI training and on-going support to community partners	• HealthInsight • Midtown Community Health Center • Maliheh Clinic • Utah Partners for Health • Community Health Centers, Inc.	Explore the interest of community partners to adopt MHI	2017: Explore the interest of community partners to adopt MHI
		Support MHI training for community partners if interest is present	2018 – 2019: Provide MHI training to interested community partners
Focus Area: Prevention of prescription opioid misuse			
Initiative: **Support prevention of prescription opioid misuse**			
• Disseminate information on the Use Only As Directed campaign • Cash contributions for drop boxes	• Use Only as Directed	Disseminate public messaging on safe use, storage, and disposal	2017: Distribute throughout hospital community
		Cash contributions to maintain drop boxes in Intermountain community pharmacies	2017 - 2019: Maintain existing drop boxes; monitor for pounds collected annually

Intermountain resources	Community partnerships	Supporting activities	Yearly targets
Initiative: **Make Naloxone rescue kits available to underserved community members**			
• Cash contributions to purchase Naloxone rescue kits • Training on the use of Naloxone to community partners	• Behavioral Health Network community partners	Distribute Naloxone kits to partners	2017: Participate in distribution of 50 Naloxone kits county wide 2018-2019: Provide replacement of outdated or used kits
		Provide Naloxone training to community partners	2017-2019: Provide one training each year for community partners
Initiative: **Provide Chronic Disease Self-Management Program to people living with chronic pain**			
• Fund training for CDSMP facilitators • Fund certification in chronic pain for CDSMP leaders • CDSMP coordinator • Cash contributions to support workshops hosted by community partners	• Senior Centers • Utah Department of Health	Provide training and certification for CDSMP specific to chronic pain	2017: Train and certify CDSMP facilitators in chronic pain
		Provide CDSMP to people with chronic pain	2017 – 2019: Provide at least one CDSMP workshop each year
Initiative: **Support community partners in implementing medication assisted treatment for opioid misuse through training and consultation**			
• Provide training and establishment of best practices in medication assisted treatment to community partners • Assist in implementing medication assisted treatment • Assist in grant writing to support medication assisted treatment • Collaborate on providing services	• Community Health Centers, Inc. • Utah Partners for Health • Midtown Community Health Center • Family Counseling Center • Fourth Street Clinic	Support community partners interested in adopting medication assisted treatment	2017: Explore interest of community partners to provide medication assisted treatment; assist in grant writing as needed 2017 – 2019: Support community partners in adopting medication assisted treatment if interest is present

*Projections and activities are based on current understanding about the interest and capacity of community partners and pricing of supplies and products available in 2016. This plan may change in accordance with changes in those variables.

Appendix B

Intermountain Healthcare Hospitals
Community Health Needs Assessments and Implementation Plans

Alta View Hospital in Sandy, Utah
https://intermountainhealthcare.org/locations/alta-view-hospital/hospital-information/alta-view-hospital-chna/
American Fork Hospital in American Fork, Utah
https://intermountainhealthcare.org/locations/american-fork-hospital/hospital-information/american-fork-hospital-chna/
Bear River Valley Hospital in Tremonton, Utah
https://intermountainhealthcare.org/locations/bear-river-valley-hospital/hospital-information/bear-river-valley-hospital-chna/
Cassia Regional Hospital in Burley, Idaho
https://intermountainhealthcare.org/locations/cassia-regional-hospital/hospital-information/cassia-regional-hospital-chna-report/
Cedar City Hospital in Cedar City, Utah
https://intermountainhealthcare.org/locations/cedar-city-hospital/hospital-information/cedar-city-chna-report/
Delta Community Hospital in Delta, Utah
https://intermountainhealthcare.org/locations/delta-community-hospital/hospital-information/delta-community-hospital-chna-report/
Dixie Regional Medical Center in St. George, Utah
https://intermountainhealthcare.org/locations/dixie-regional-medical-center/hospital-information/dixie-regional-chna-report/
Fillmore Community Hospital in Fillmore, Utah
https://intermountainhealthcare.org/locations/fillmore-community-hospital/hospital-information/fillmore-community-hospital-chna-report/
Garfield Memorial Hospital in Panguitch, Utah
https://intermountainhealthcare.org/locations/garfield-memorial-hospital/hospital-information/garfield-memorial-hospital-chna-report/
Heber Valley Hospital in Heber City, Utah
https://intermountainhealthcare.org/locations/heber-valley-hospital/hospital-information/heber-valley-hospital-chna-report/
Intermountain Medical Center in Salt Lake City, Utah
https://intermountainhealthcare.org/locations/intermountain-medical-center/hospital-information/intermountain-medical-center-chna-report/
LDS Hospital in Salt Lake City, Utah
https://intermountainhealthcare.org/locations/lds-hospital/hospital-information/lds-hospital-chna-report/
Logan Regional Hospital in Logan, Utah
https://intermountainhealthcare.org/locations/logan-regional-hospital/hospital-information/logan-regional-hospital-chna-report/
McKay-Dee Hospital in Ogden, Utah
https://intermountainhealthcare.org/locations/mckay-dee-hospital/hospital-information/mckay-dee-hospital-chna-report/

Orem Community Hospital in Orem, Utah
https://intermountainhealthcare.org/locations/orem-community-hospital/hospital-information/orem-community-hospital-chna-report/

Park City Hospital in Park City, Utah
https://intermountainhealthcare.org/locations/park-city-hospital/hospital-information/park-city-medical-center-chna-report/

Primary Children's Hospital in Salt Lake City, Utah
https://intermountainhealthcare.org/locations/primary-childrens-hospital/hospital-information/primary-childrens-hospital-chna-report/

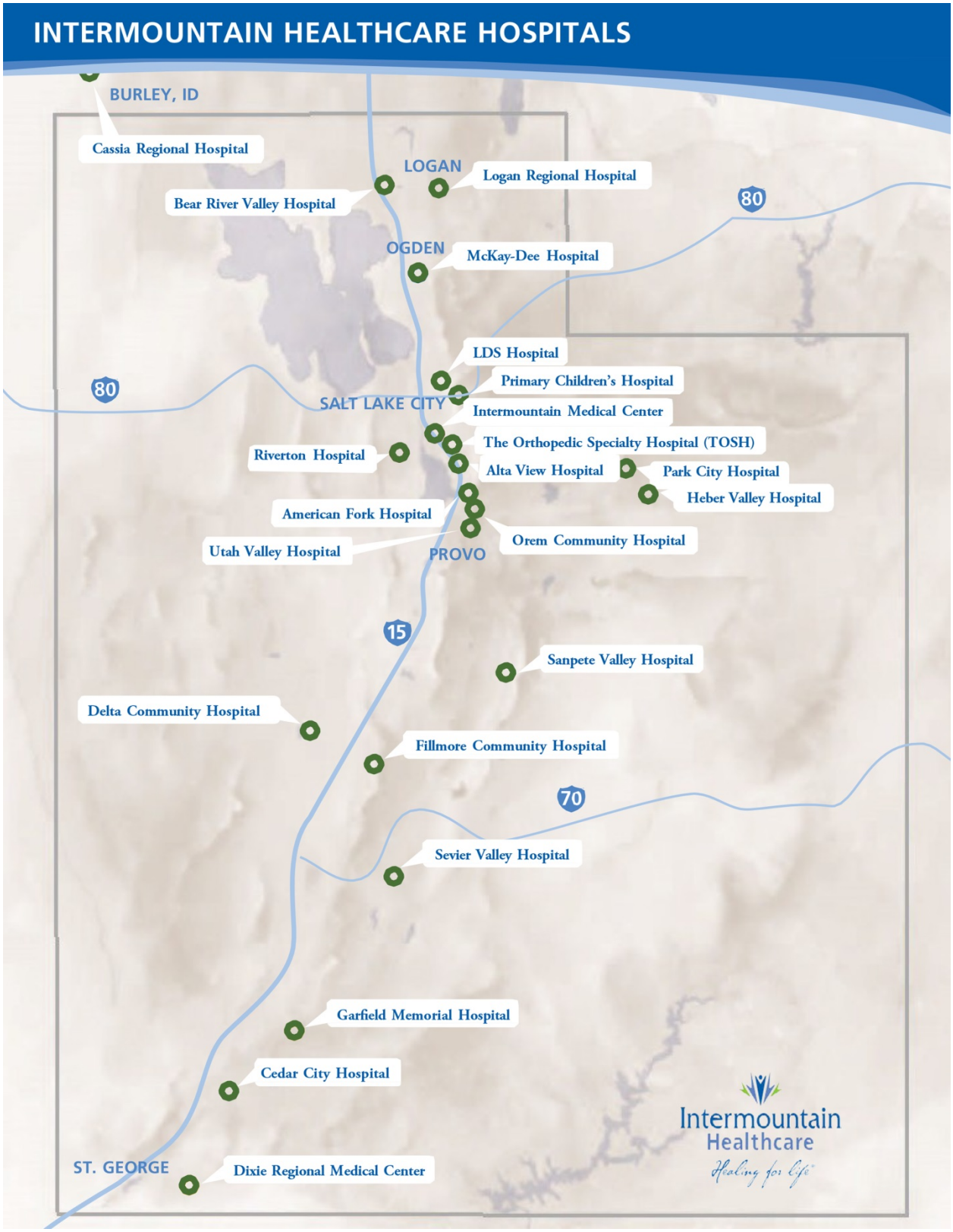
Riverton Hospital in Riverton, Utah
https://intermountainhealthcare.org/locations/riverton-hospital/hospital-information/riverton-hospital-chna-report/

Sanpete Valley Hospital in Mount Pleasant, Utah
https://intermountainhealthcare.org/locations/sanpete-valley-hospital/hospital-information/sanpete-valley-hospital-chna-report/

Sevier Valley Hospital in Richfield, Utah
https://intermountainhealthcare.org/locations/sevier-valley-hospital/hospital-information/sevier-valley-hospital-chna-report/

TOSH-The Orthopedic Specialty Hospital in Murray, Utah
https://intermountainhealthcare.org/locations/the-orthopedic-specialty-hospital/hospital-information/tosh-chna-report/

Utah Valley Hospital in Provo, Utah
https://intermountainhealthcare.org/locations/utah-valley-hospital/hospital-information/utah-valley-chna-report/


INTERMOUNTAIN HEALTHCARE HOSPITALS
BURLEY, ID
Cassia Regional Hospital
LOGAN
Logan Regional Hospital
Bear River Valley Hospital
80
OGDEN
McKay-Dee Hospital
LDS Hospital
Primary Children's Hospital
80
SALT LAKE CITY
Intermountain Medical Center
The Orthopedic Specialty Hospital (TOSH)
Riverton Hospital
Alta View Hospital
Park City Hospital
Heber Valley Hospital
American Fork Hospital
Orem Community Hospital
Utah Valley Hospital
PROVO
15
Sanpete Valley Hospital
Delta Community Hospital
Fillmore Community Hospital
70
Sevier Valley Hospital
Garfield Memorial Hospital
Cedar City Hospital
Intermountain
Healthcare
Healing for Life
ST. GEORGE
Dixie Regional Medical Center