

Community Health Improvement Plan

Mercy Hospital Ardmore
Fiscal Year 2026



Your life is our life's work.





Our Mission

As the Sisters of Mercy before us,
we bring to life the healing ministry of Jesus
through our compassionate care
and exceptional service.

Our Values

Dignity
Excellence
Justice
Service
Stewardship

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Introduction

Mercy Hospital Ardmore is a full-service hospital with 190 licensed beds, more than 700 coworkers and 12 clinic locations, including 4 for primary care. Mercy Clinic is a physician-governed group practice comprised of more than 20 board-certified and board eligible primary care physicians and advanced practice providers serving in the Ardmore area. This provider partnership gives patients access to the best quality care in the country with access to an entire health care team and advanced services. Mercy Clinic physicians have access to an electronic health record that is shared at Mercy facilities in four states. Patients may connect to their own health record and health teams anywhere they connect to the internet through My Mercy.

The service area of Mercy Hospital Ardmore is comprised of six counties: Carter, Jefferson, Johnston, Love, Marshall, and Murray, with a population of 106,668. For the purposes of this Community Health Needs Assessment (CHNA), these six counties will define the community served by Mercy Hospital Ardmore. The main campus includes the hospital and four medical buildings, including inpatient/outpatient rehabilitation and therapy services, primary care and specialty clinics. Since the last CHNA, Mercy Hospital Ardmore has been chosen as one of the top 100 rural hospitals in the United States by Becker's Hospital Review in 2022.



Introduction *(continued)*

Mercy's mission is to deliver "compassionate care and exceptional service" to every community member. In dedication to this mission, our work includes the development of a Community Health Needs Assessment (CHNA) during the last year, in partnership with the Carter County Health Department, Good Shepherd Community Clinic, and in cooperation with stakeholders throughout the community.

Mercy Hospital Ardmore contributes to community building activities to promote the health of the communities in which they serve. Through active participation in community boards, neighborhood community meetings and involvement in community-based events, Mercy Hospital Ardmore demonstrates its ongoing commitment to the residents it serves. These activities serve as a link to engage Mercy coworkers to look beyond the walls of the facilities in which they serve.

The Community Health Needs Assessment (CHNA) and Community Health Improvement Plan (CHIP) process involved review of both quantitative and qualitative data to attain the full scope of the community needs as they relate to health. This summary is documentation that Mercy Hospital Ardmore follows IRS requirements for conduction of the CHNA and CHIP.

Introduction *(continued)*

The CHNA identified six top-priorities and of the six, **three have been chosen as health needs for the Mercy Hospital Healdton community**. We will strive diligently to address these needs with a Health Equity lens over the next three years:



Access to Care



Behavioral Health



Food Insecurity

As always, we seek to develop a rich and rewarding network of partnerships with our neighbors. We welcome any thoughts you may have on ways to achieve our goal for a healthier community.

Improvement Plan by Prioritized Health Need





Prioritized Need #1: Access to Care

GOAL 1

Increase access to health care for uninsured and at-risk persons.





Prioritized Need #1: Access to Care

Program 1 of 2: Community Health Worker Expansion

PROGRAM DESCRIPTION:

Community Health Workers (CHWs) serve as liaisons/links between health care and community and social services, screening for needs related to social determinants of health, and facilitating access to services and improving the quality and culture competence of care. CHWs work one-on-one with at-risk patients and community members, acting as patient advocates, assisting patients in applying for insurance, Medicaid, and financial assistance and connecting patients with community resources.

ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

- Identify uninsured and at-risk patients in need of assistance in Mercy clinics, emergency department, inpatient settings, as well as using reports and dashboards.
- Assist uninsured patients in applying for Mercy Financial Assistance, Medicaid programs, and connect to Marketplace insurance plans.
- Assist patients without an established primary care provider in establishing care with a primary care clinic or provider.
- Screen patients for health-related social needs and connect patients to community resources to meet identified needs.

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- Each CHW will assist at least 50 patients per month with community and medication assistance resources.
- 80% of patients referred to CHW (within their scope) will be screened for health-related social needs (HRSNs)
- 50% of new patients to each CHW without a primary care provider will establish care with a PCP at a Mercy clinic or other clinic within 6 months.
- Patients enrolling in CHW program will demonstrate reduced ED utilization by 10%.



Prioritized Need #1: Access to Care

Program 1 of 2: Community Health Worker Expansion

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Compensation and benefits for full-time Community Health Workers.
- Office space and indirect expenses dedicated to CHW work.

COLLABORATIVE PARTNERS:

- Mercy Clinics
- Carter County Health Department
- OK Managed Medicaid partners



Prioritized Need #1: Access to Care

Program 2 of 2: Dispensary of Hope

PROGRAM DESCRIPTION:

The Dispensary of Hope is a charitable medication distributor that delivers critical medicine donated by pharmaceutical manufacturers for free to the people who need it the most but cannot afford it. By partnering with Dispensary of Hope, Mercy Pharmacy can get access to their charitable formulary, connecting self-pay patients with the direst financial need to essential medicines across a range of drug classes, including insulins, anti-infectives, and psychotropics.

ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

- In contract with the Dispensary of Hope, Mercy Pharmacy will manage charitable formularies within participating pharmacies, including maintaining inventory and making weekly orders.
- Mercy will use attestation form to enroll qualifying patients in the Dispensary of Hope program and will promote the formulary with Mercy providers and co-workers across relevant departments, including Hospitalists and ED physicians, Care Management, Diabetes Education, Behavioral Health, and Mercy Clinic.
- Mercy will communicate with community partners, including other healthcare providers, to promote the use of the formulary for patients in need.
- Mercy will work to connect qualifying patients with Mercy Financial Assistance and Medicaid and Medicare as applicable.

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- Increase/maintain number of patients served / month
- Increase/maintain number of patient encounters / month
- Each year, 5% reduction in ED visits
- Each year, 5% reduction in total cost of care.



Prioritized Need #1: Access to Care

Program 2 of 2: Dispensary of Hope

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Annual contract fees to Dispensary of Hope for formulary access (\$12,500 per year per pharmacy)
- Pharmacist support for formulary management
- Marketing and communications support, in the form of flyers, rack cards, enrollment cards, etc.
- Training for co-workers to understand enrollment process for Dispensary of Hope

COLLABORATIVE PARTNERS:

- Dispensary of Hope
- Mercy Pharmacy Ardmore, Integrated Health and Social Care, Care Management, Hospitalists, Mercy Clinics West



Prioritized Need #2: Behavioral Health

GOAL 1

Increase access to behavioral health services in both the emergency and primary care setting.





Prioritized Need #2: Behavioral Health

Program 1 of 3: Virtual Behavioral Health

PROGRAM DESCRIPTION:

Mercy's Virtual Behavioral Health (vBH) program provides integrated, regional support for patients with behavioral health needs. Based out of local and centralized Ministry locations, vBH co-workers provide virtual and telephonic behavioral health assessments to establish patients' level of care, and facilitate referrals for inpatient, intensive outpatient (IOP), and outpatient services, as well as for basic social needs in their home communities. vBH also provides virtual psychiatric consults to help with medication stabilization related to the exacerbation of behavioral health conditions.

ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

- Operate a hub-based model of virtual care, where clinical vBH co-workers respond to incoming referrals, conduct telephonic behavioral health assessments, and facilitate outgoing referrals for ongoing diagnosis, treatment, and support.
- Collaborate with external partners and behavioral health service providers such as Lighthouse Behavioral to ensure a strong regional network for care coordination and social service navigation.
- Maintain internal coordination between relevant stakeholders, including Population Health, Behavioral Health, and Community Health, for ongoing assessment of community needs, assets, and barriers, and increased data and service integration for improved continuity of care and patient outcomes.
- Analyze true cost of care and return on investment analysis (ROI) for vBH patients and explore prospective for further developing complex care model

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- Each year, the vBH program will increase the number of patient assessments completed by 20% Ministry-Wide.
- Across the Ministry, the vBH program will maintain a 70% connection to treatment rate.
- Over three-year period patients who participated in vBH program will demonstrate a 10% decrease in hospital readmissions and ED visits.



Prioritized Need #2: Behavioral Health

Program 1 of 3: Virtual Behavioral Health

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Cost of coworker and clinician time, including Regional Resource Behavioral Health RNs and LPNs and Patient RN Advocates as needed.
- Operational budgeted support as appropriate.
- Indirect expenses related to EMR and clinic operations

COLLABORATIVE PARTNERS:

- Mercy Clinics
- Mercy Behavioral Health Leadership
- Mercy Virtual Behavioral Health (vBH)
- Lighthouse Behavioral



Prioritized Need #2: Behavioral Health

Program 2 of 3: Collaborative Care with Concert Health for Primary Care

PROGRAM DESCRIPTION:

Mercy Hospital Ardmore & Clinics will collaborate with Concert Health to support primary care providers (family medicine, internal medicine, obstetrics & gynecology, and pediatrics) in providing mental and behavioral health services to patients in need. The model provides a behavioral care manager to interact directly with patients, perform assessments, initiate treatment, and communicate and collaborate with primary care physicians. Concert Health provides a psychiatric consultant who meets with care managers regularly, reviews patient charts, and makes recommendations for medication and ongoing treatment.

ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

- Consistent with the Behavioral Health Service Line model of care, Mercy Hospital Ardmore will implement the Concert Health Collaboration in Primary Care Clinics.
- Train providers in use of the care approach.
- Promote the initiative.
- Identify gaps in care.

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- Increase patient referrals by 10% each year.
- Increase patient satisfaction assessment participation by 10% from previous CHIP cycle.
- Increase access to community resources through referrals to Community Health Workers.



Prioritized Need #2: Behavioral Health

Program 2 of 3: Concert Health Collaborative Care for Primary Care

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Cost of coworker and clinician time.
- Operational budgeted support as appropriate.
- Indirect expenses related to EMR and clinic operations

COLLABORATIVE PARTNERS:

- Mercy Clinics
- Mercy Behavioral Health Service Line Leadership
- Mercy Virtual Behavioral Health (vBH)
- Concert Health



Prioritized Need #2: Behavioral Health

Program 3 of 3: Virtual Substance Use Recovery Program (vSURP)

PROGRAM DESCRIPTION:

Mercy's Virtual Substance Use Recovery Program (vSURP) is an integrated, mission-driven, patient-centric approach to Opioid Use Disorder. vSURP will ensure that any patient seeking care through Mercy will be connected to ongoing care for Opioid Use Disorder regardless of geography, clinical setting, or ability to pay. vSURP provides Medication-Assisted Therapy (MAT), primarily through buprenorphine, for patients with Opioid Use Disorder. Patients who participate in vSURP are also connected to support services, including counseling, behavioral therapies and general primary care, to implement a holistic harm-reduction care model.

ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

- Consistent with Mercy's care model, clinicians will refer patients identified with Opioid Use Disorder to vSURP program.
- vSURP LCSWs will outreach and engage with patients, providing necessary direct support as well as referrals and care coordination for treatment and primary care provision
- vSURP clinicians will facilitate MAT for patients, managing MAT medication prescription and adherence
- Community Health Leaders will maintain ongoing relationship with vBH team and facilitate reporting of outcomes to relevant hospital stakeholders.

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- To increase the number of referrals of ED patients to vSURP program by 10% each year.
- Maintain engagement of 10% of patients that engage through a six-month period.
- Over three-year period (FY26-FY29), patients who participated in vSURP program will demonstrate a 5% decrease in hospital readmissions and ED visits.



Prioritized Need #2: Behavioral Health

Program 3 of 3: Virtual Substance Use Recovery Program (vSURP)

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Support and education for clinicians in primary care, inpatient settings, and ED to identify and facilitate patient referrals.
- Operational budgeted support as appropriate.
- Indirect expenses related to EMR and clinic operations

COLLABORATIVE PARTNERS:

- Mercy Clinics
- Mercy Behavioral Health Leadership
- Mercy Virtual Behavioral Health (vBH)



Prioritized Need #3: Food Insecurity

GOAL #1

To increase access to healthy food and resources to patients identified as food insecure by Mercy Hospital and Clinics.





Prioritized Need #3: Food Insecurity

Program 1 of 2: Catherine's Pantry Program Expansion

PROGRAM DESCRIPTION:

Catherine's Pantry Program is a partnership between Mercy Hospital Ardmore, Mercy Clinics, and the Regional Food Bank of Oklahoma to drive improved health outcomes for patients experiencing food insecurity. Food insecurity is an emerging factor for chronic disease, and although food insecurity on its own will not relieve adults of their illness, such reductions could make chronic diseases easier to manage thus improving a patient's health and well-being.

ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

- Screen patients for food insecurity in both the hospital and clinic settings.
- Identify centric area within the hospital and/or clinic to safely maintain food pantry items.
- Collaborate with internal and external partners to receive weekly/monthly food products and produce for patients.
- Connect patients with local food-related resources through referrals.

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- By the end of each fiscal year, at least 80% of patients identified as food insecure will be given food pantry items and/or referred to the local food bank.
- Increase new patients in receiving food boxes and referrals from baseline by 20%.
- Patient connections to available food resources in the community.



Prioritized Need #3: Food Insecurity

Program 1 of 2: Catherine's Pantry Program

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Appropriate space for food pantry.
- Partnership with local community resources.
- Indirect expenses related to organization of pantry items.

COLLABORATIVE PARTNERS:

- Mercy Clinics
- Regional Food Bank of Oklahoma



Prioritized Need #3: Food Insecurity

Program 2 of 2: Mid-Week Market

PROGRAM DESCRIPTION:

Mercy's Mid-Week Market is a farmer's market-style event that takes place in the hospital lobby. Local vendors are invited to setup booths to sell their products, giving caregivers and patients easy access to locally crafter foods right on campus. This is a "producers only" market, where only homegrown, handmade, or vendor-created items will be available. Fresh fruit and vegetables will be offered in the spring and summer. The market will occur monthly in the fall and winter, and bi-weekly throughout the spring and summer.

ACTIONS THE HOSPITAL INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

- Identify centric area within the hospital to safely maintain food items.
- Collaborate with internal and external partners to provide bi-weekly/monthly food products and produce for caregivers and patients.
- Connect caregivers and patients with local food-related resources.

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- To promote wellness through access to wholesome, locally sourced products
- To strengthen the culture of community within Mercy and with the public
- To engage more caregivers in the Mercy Healthification program



Prioritized Need #3: Food Insecurity

Program 2 of 2: Mid Week Market

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Appropriate space for vendor booths.
- Partnership with local community resources.
- Indirect expenses related to organization of event.

COLLABORATIVE PARTNERS:

- USDA-Certified Farmers Market program
- Mercy Healthification

Other Community Health Programs

Mercy Hospital Ardmore conducts other community health programs not linked to a specific prioritized health need. These programs address a community health need and meet at least one of the following community benefit objectives: improve access to health care services, enhance the health of the community, advance medical or health care knowledge or relieve or reduce government burden to improve health. The need for these programs was identified through documentation of demonstrated community need, a request from a public health agency or community group, or the involvement of an unrelated, collaborative tax-exempt or government organization as partners in the activity or program carried out for the express purpose of improving community health. Although this is not an exhaustive list, many of these programs are listed on the next page.

Other Community Health Programs (Continued)

Community Benefit Category	Program	Outcomes Tracked
Community Health Improvement Services	Community Health Fairs & Screenings	Patients seen
	Free Sports Physicals	Patients seen
	Ardmore Community Baby Shower	Public served
Health Professions Education	Health professions student education nursing, imaging, therapy, pharmacy, medical student, lab, emergency medical technician and advanced practice nursing	Clinical Students
Financial & In-Kind Contributions	Community Building -Cash/In-kind Contributions	



Other Community Health Programs (Continued)

Community Benefit Category	Program	Outcomes Tracked
Financial & In-Kind Contributions	Community Event Sponsorships	Financial contribution
	Blood Drives	In-kind
	Ardmore Soup Kitchen	In-kind
	Speaking engagements	In-kind
	Project 31	In-kind
Community Building	Coalition Building/Board Memberships	



Other Community Health Programs (Continued)

Community Benefit Category	Program	Outcomes Tracked
Community Building	Ardmore Behavioral Health Collaborative	In-kind
	3H Taskforce	In-kind
	Bridges out of Poverty Steering Committee	In-kind
	Community Youth Services Transitional Living Program Committee	In-kind
	Healthcare HFV Steering Committee	In-kind
	United Way Allocation Committee	In-kind



Other Community Health Programs (Continued)

Community Benefit Category	Program	Outcomes Tracked
Community Building	YMCA Board	In-kind
	Ardmore Chamber of Commerce Board	In-kind
	Ardmore Young Professionals Board	In-kind
	Southern Oklahoma Ambulance Service Board	In-kind
	Carter County Healthy Living Committee	In-kind
Health Care Support Services	340B Program	Program funding



Significant Health Needs Not Being Addressed

In any case of prioritization, there will be some areas of needs that are identified that are not chosen as a priority. Because Mercy Hospital Ardmore has limited resources, not every community need will be addressed at this time. Throughout the CHNA process, the following needs arose as community concerns:

- Financial Strain
- Transportation
- Housing

While these needs listed will not be specifically addressed in our priorities, they will most likely be impacted indirectly through the work in our other community outreach priorities. Mercy Hospital Ardmore is currently working on partnerships with community organizations to address these significant community needs collaboratively.



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