

Community Health Improvement Plan

Mercy Hospital Joplin
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 Joplin is a 240-bed acute care hospital located in Joplin, Missouri. As part of Mercy, a large Catholic health system headquartered in St. Louis, it is one of five hospitals in Mercy's Southwest Missouri and Southeast Kansas Community. Founded in 1896 by the Sisters of Mercy, the hospital was completely rebuilt after the devastating 2011 tornado that damaged the original building. In 2015, Mercy Hospital Joplin reopened in a new facility, equipped with advanced technology to provide innovative, nationally-recognized care to the community. Offering a broad range of services including 24-hour emergency care, surgery, rehabilitation and therapy services, and multiple primary care and specialty clinics, Mercy Hospital Joplin is committed to meeting the health needs of the growing region.

Mercy Hospital Joplin's primary service area includes Barton, Jasper, Newton, McDonald, and Vernon Counties in Missouri, Crawford and Cherokee Counties in Kansas, and Ottawa and Delaware Counties in Oklahoma. It focuses on important community health needs, such as transportation challenges to accessing care, which most often affect patients with lower incomes and individuals with limited mobility, and the shortage of health care providers in the nearby rural communities that Mercy Hospital Joplin serves. Mercy Hospital Joplin is actively engaged in community partnerships and initiatives that advance health equity, improve access to care, and promote overall well-being in the community.



Introduction *(continued)*

Mercy's mission is to deliver “compassionate care and exceptional service” to every community member. In dedication to this mission, Mercy Hospital Joplin completed a comprehensive Community Health Needs Assessment (CHNA), in partnership with the Ozark's Health Commission and in collaboration with partners throughout the community, that was adopted by the Board of Directors in February 2025.

Since 2016, hospital systems, local public health agencies (LPHAs), and other healthcare partners in the greater Ozarks region have worked together to release comprehensive CHNAs every three years. This collaboration continued with the 2025 CHNA, building on the regional approach introduced in 2022.

The process involved reviewing both quantitative and qualitative data to better understand the health and well being of the community served. It included data from hospitals and the community, in addition to feedback from community partners and residents across the region. The findings reflect the collaborative work of the OHC and its partners, with a continued focus on health equity and using a social drivers of health framework. The full 2025 CHNA report is available electronically at mercy.net/communitybenefits.

Introduction *(continued)*

The 2025 CHNA identified seven top-priorities and of the seven, **three have been chosen as health needs for the Mercy Hospital Joplin community**. We will strive diligently to address these needs with a Health Equity lens over the next three years:



Behavioral Health



Chronic Disease



Nutrition & Physical Activity

This three-year Community Health Improvement Plan (CHIP) will guide the coordination and strategic focus of resources, and the planning, implementation, and evaluation both new and existing programs and interventions. The 2025 CHNA and this resulting CHIP will provide the framework for Mercy Hospital Joplin as we work in collaboration with community partners to improve health and well-being in our community.

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



Community Health Improvement Plan | 2026





Prioritized Need #1: Behavioral Health

GOAL 1

Increase access to behavioral health services for rural and underserved populations in the community.





Prioritized Need #1: Behavioral Health

Program 1 of 3: Collaborative Care

PROGRAM DESCRIPTION:

Supporting 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. Collaborative Care provides a psychiatric consultant who meets with care managers regularly, reviews patient charts, and makes recommendations for medication and ongoing treatment.

ACTIONS MERCY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

Mercy will continue training and educating providers on the use of the care approach, identify gaps in care, and refer patients to Collaborative Care.

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- Increase patient referrals by 5% each year from FY25 baseline
- Increase patient satisfaction assessment participation by 10% from FY25 baseline
- Decrease in PHQ-9 patient scores by 25% from FY25 baseline

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
- Operational budgeted support as appropriate
- Indirect expenses related to EMR and clinic operations

COLLABORATIVE PARTNERS:

- Mercy Behavioral Health Service Line Leadership
- Mercy Virtual Behavioral Health (vBH)
- Substance Use Recovery Program (SURP)



Prioritized Need #1: Behavioral Health

Program 2 of 3: Virtual Behavioral Health (vBH)

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 MERCY 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 to ensure a strong regional network for care coordination and social service navigation.

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- 10% decrease in hospital readmissions and ED visits by FY28

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
- Operational budgeted support as appropriate
- Indirect expenses related to EMR and clinic operations

COLLABORATIVE PARTNERS:

- Mercy Behavioral Health Service Line Leadership
- Mercy Virtual Behavioral Health (vBH)
- Substance Use Recovery Program (SURP)



Prioritized Need #1: Behavioral Health

Program 3 of 3: Substance Use Recovery Program (SURP)

PROGRAM DESCRIPTION:

Mercy Substance Use Recovery Program (SURP) is an integrated, mission-driven, patient-centric approach to Opioid Use Disorder. SURP 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. Through a virtual-first care experience, SURP provides Medication-Assisted Therapy (MAT), primarily through buprenorphine, for patients with Opioid Use Disorder. Patients who participate in SURP are also connected to support services, including counseling, behavioral therapies and general primary care, to implement a holistic harm-reduction care model. By offering proactive telephonic outreach and virtual treatment and support options, SURP can increase access to essential behavioral health services and facilitate continuity and ease of care for patients.

ACTIONS MERCY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

SURP Licensed Clinical Social Workers will outreach and engage with patients, providing necessary direct support as well as referrals and care coordination for treatment and primary care provision. SURP clinicians will facilitate MAT for patients, managing MAT medication prescription and adherence.

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- Patients reached by SURP will demonstrate a 20% reduction in ED utilization over three years
- Patients reached by SURP will demonstrate a 10% reduction in inpatient readmission over three years

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- SURP staff: providers, psychiatric consultant, and Licensed Clinical Social Workers
- Support and education to identify and facilitate patient referrals
- Staff time and indirect costs necessary to maintain ongoing partnership with BHN

COLLABORATIVE PARTNERS:

- Mercy Virtual Behavioral Health (vBH)



Prioritized Need #1: Behavioral Health

GOAL 2

Increase hospital staff training to improve patient outcomes and reduce stigma around mental health and substance use.



Prioritized Need #1: Behavioral Health

Program 1 of 2: Mental Health First Aid Training

PROGRAM DESCRIPTION:

Mental Health First Aid (MHFA) programs provide comprehensive training to recognize, understand, and respond effectively to mental health challenges and substance use disorders. Mercy Hospital Joplin is encouraging training for hospital staff to understand and help people who may be struggling and help create a more supportive and caring environment for everyone.

ACTIONS MERCY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

Provide training opportunities for certified MHFA training sessions and encourage staff to attend training to help learn how to recognize and support patients with mental health or substance use challenges. Partner with certified curriculum providers to provide ongoing resources or support and track how many individuals complete training, gather feedback from staff on training effectiveness, and listen to patient feedback.

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- Increased staff confidence in managing mental health situations

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Time allocation for training
- Scheduling support for MHFA training sessions
- Leadership endorsement and communication materials

COLLABORATIVE PARTNERS:

- Mercy Behavioral Health Services
- Mercy Managers and Supervisors
- MU Extension Mental Health First Aid Program
- Missouri Department of Mental Health



Prioritized Need #1: Behavioral Health

Program 2 of 2: Trauma-Informed Care Training

PROGRAM DESCRIPTION:

Trauma-Informed Care (TIC) programs provide training and education to guide how to apply a trauma-informed lens to respond to trauma with understanding and support. Mercy Hospital Joplin is promoting a trauma-informed care training opportunity to support hospital and clinic staff in building awareness, understanding, and practical skills related to trauma and its impact on health. Staff are encouraged to participate in state-supported training offered through the Missouri Department of Mental Health (DMH), which is available at no cost and focuses on recognizing signs of trauma, minimizing re-traumatization, and improving patient-provider interactions.

ACTIONS MERCY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

Explore partnerships with DMH and other training organizations to provide recognized, high-quality trauma-informed care education. Encourage staff participation in training and develop a plan to offer incentives, such as recognition, continuing education credits (where applicable), and integration into professional development pathways for staff who complete the training. Mercy Hospital Joplin will track how many staff complete training, gather feedback from individuals trained, and monitor patient satisfaction and well being metrics.

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- Increased staff confidence in managing mental health situations

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Time allocation for training
- Scheduling support for training sessions
- Leadership endorsement and communication materials

COLLABORATIVE PARTNERS:

- Mercy Behavioral Health Services
- Mercy Managers and Supervisors
- Missouri Department of Mental Health
- Trauma-Informed Care Implementation Resource Center



Prioritized Need #2: Chronic Disease

GOAL 1

Reduce chronic disease by addressing underlying social, environmental, and lifestyle factors impacting the community, especially in rural and underserved populations.





Prioritized Need #2: Chronic Disease

Program 1 of 4: Community Health Worker Program

PROGRAM DESCRIPTION:

The Community Health Worker (CHW) Initiative is dedicated to improving health care access and outcomes for underserved communities by bridging gaps between healthcare systems, social services, and the individuals they serve. CHWs engage directly with underserved communities to identify barriers related to social drivers of health, such as transportation, housing, and financial instability, that impact access to care. By fostering trust and cultural humility, this initiative aims to reduce disparities, enhance patient advocacy, and ensure equitable access to comprehensive health care for all community members.

ACTIONS MERCY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

Through personalized support, Mercy CHWs will help community members navigate healthcare services, assist with Medicaid and financial assistance enrollment, understanding health plan benefits, and connect individuals to vital community resources, including medication and social support programs.

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- Reduced 72-hour return rate
- Reducing readmission rates for focused populations

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Compensation and benefits for Community Health Workers.
- Mileage and travel expenses required for CHW work.
- Office space and indirect expenses dedicated to CHW work.
- CHW Training-Offered by Ministry (or through community partnership)

COLLABORATIVE PARTNERS:

- Mercy Primary Care
- Care Partner Network
- Dispensary of Hope



Prioritized Need #2: Chronic Disease

Program 2 of 4: 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 MERCY 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.

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- Each year, will see a 10% reduction in ED visits
- Each year, will see a 10% reduction in total cost of care

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Annual contract fees to Dispensary of Hope for formulary access
- Pharmacist support for formulary management
- Marketing and communications support, in the form of flyers, rack cards, enrollment cards, etc.
- Training for caregivers to understand enrollment process for Dispensary of Hope

COLLABORATIVE PARTNERS:

- Dispensary of Hope
- Internal: Mercy Pharmacy, Integrated Health and Social Care, Care Management, Hospitalists, Mercy Clinics
- External providers: The Community Clinic and FQHC Partners



Prioritized Need #2: Chronic Disease

Program 3 of 4: KCU Student Health Advocate Program

PROGRAM DESCRIPTION:

The Student Health Advocate Program is an initiative from Kansas City University's (KCU) Center for Population Health and Equity (CPHE) where medical students, in partnership with a sponsoring organization, work with individuals or families in a non-clinical capacity to advance shared health goals and help navigate health systems. This program also strengthens the next generation of physicians as KCU student doctors gain real-world experience in care coordination, patient communication, and addressing social drivers of health. In partnership with Mercy Hospital Joplin, KCU students have established short-term relationships with identified patients diagnosed with CHF to help reduce emergency room readmissions, assisting as they schedule and attend follow-up clinic appointments during an eight-month pilot program.

ACTIONS MERCY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

Through continued collaboration with Student Health Advocates and KCU faculty, Mercy Hospital Joplin will work to expand this program to read additional patients with complex chronic disease diagnoses, such as COPD. Mercy will pair students with patients to meet the program criteria, provide mentorship and training for students in care navigation, communication, and social drivers of health, and monitor outcomes to adapt as needed.

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- Reduce 30-day readmissions for patients diagnosed with heart failure
- Improve patient confidence in chronic disease self-management
- Students feedback reporting improved confidence in patient interaction and navigation, increased understanding of health barriers
- Expand program to reach additional patient populations with chronic disease

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Hospital staff for coordination, training, and mentorship
- Collaboration and referral coordination with CHWs
- Tools, support materials, evaluation, onboarding support for students

COLLABORATIVE PARTNERS:

- KCU CPHE
- Mercy Heart Failure Center
- Mercy Clinic Cardiology – Joplin
- Mercy Integrated Health and Social Care



Prioritized Need #2: Chronic Disease

Program 4 of 4: Watered Gardens Respite Program

PROGRAM DESCRIPTION:

The Watered Gardens Respite Program, in partnership with Mercy Hospital Joplin, provides a short-term recovery solution for patients experiencing homelessness following hospitalization. The program helps patients without housing recover safely after a hospital stay, providing a place to rest, heal, and begin planning next steps. Mercy's Community Health Workers (CHWs) provide care coordination to ensure continuity of care and a safe recovery environment and Watered Gardens staff provide goal-setting and non-medical support during the recovery process.

ACTIONS MERCY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

Identify and refer eligible patients from Mercy Hospital Joplin and ensure communication and coordination with Watered Gardens staff. Mercy CHWs provide care coordination and follow-up support, connecting patients to community resources with the primary goal of securing safe housing. Track how many patients use the program, how many patients successfully secure stable housing, and readmission rates among participants.

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- Reduce 30-day readmissions for focused population
- Improve access to stable housing for patients experiencing homelessness
- Improve recovery and disease management post-hospitalization for focused population

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- CHW compensation, benefits, and mileage
- Care team collaboration on discharge planning and follow-up
- Coordination and partnership with Watered Gardens
- Reporting and program evaluation capacity

COLLABORATIVE PARTNERS:

- Watered Gardens Shelter
- Mercy Inpatient Care Management
- Mercy Integrated Health and Social Care
- Joplin housing and social service organizations



Prioritized Need #3: Nutrition & Physical Activity

GOAL 1

Enhance nutrition education, physical activity opportunities, and wellness programs through community partnerships and hospital-led improvements in care and support.





Prioritized Need #3: Nutrition & Physical Activity

Program 1 of 2: Food Programs & Services Analysis

PROGRAM DESCRIPTION:

Mercy Hospital Joplin will collaborate with community partners to conduct a comprehensive assessment to map existing food resources (pantries, meal programs, farmers markets, etc.) and identify barriers to access. Results of this assessment will inform, develop, and pilot creative collaborative approaches to address food insecurity, nutrition, and chronic disease management.

ACTIONS MERCY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

Collect information on local food resources, engage community members and patients to understand their needs, partner with local health departments and area organizations, analyze community conditions, food availability, and barriers. Draft recommendations for food access program implementation.

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- Improved understanding of food resources and capabilities
- Increased programs to improve access to healthy food

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Staff time and resources for research and data analysis
- Program planning and coordination with community partners

COLLABORATIVE PARTNERS:

- Care Partner Network
- One Joplin
- Kansas City University
- Tri-State Community Health Collaborative



Prioritized Need #3: Nutrition & Physical Activity

Program 2 of 2: Joplin Healthy Community Project

PROGRAM DESCRIPTION:

The Joplin Healthy Community Project is a collaborative effort engaging underserved and underrepresented community members to identify barriers and facilitators affecting health outcomes. The project leverages comprehensive assessments and community input to develop a Healthy Community Blueprint, guiding systemic health improvements, and creating a unifying language and action plan to improve the Joplin region's health and wellness. The outcomes of this project will inform strategic planning, goal setting, and partner agency programming, creating systemic change.

ACTIONS MERCY INTENDS TO TAKE TO ADDRESS THE HEALTH NEED:

Mercy Hospital Joplin is participating as a member of the Healthy Community Taskforce, supporting qualitative and quantitative data collection on health barriers and service gaps, and collaborating in planning and implementation of programs based on Blueprint recommendations.

ANTICIPATED IMPACT OF THESE ACTIONS (OBJECTIVES):

- Enhanced inclusion of underserved voices in health planning.
- Identification and reduction of gaps in accessing health care.
- Healthy Community Blueprint.
- Conduct Healthy Community Summit to improve community engagement and build momentum.
- Implementation of focused interventions to improve health outcomes led by Champion Teams.
- Improved patient outcomes, including fewer hospitalizations and better disease self-management.
- Sustain and grow community health improvements through ongoing collaboration.

PROGRAMS AND RESOURCES THE HOSPITAL PLANS TO COMMIT:

- Staff time for taskforce engagement, data support, and focus group participation
- Clinical and community program resources aligned with Blueprint goals
- Staff time and resources to support Champion Teams

COLLABORATIVE PARTNERS:

- One Joplin
- TEconomy, LLC
- Stealth Creative
- Healthy Community Taskforce Members

Other Community Health Programs

Mercy Hospital Joplin 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	Support Groups	Persons served
	Health fairs, presentations, and screenings	Persons served, cost of services
	Transportation Assistance Programs	Persons served, cost of services
	Skin Cancer Education Program	Persons served, cost of services
Health Professions Education	Pharmacy Residency Program	Number of students
	Health professions student education nursing, imaging, therapy, pharmacy, medical student, lab, emergency medical technician and advanced practice nursing	Number of students



Other Community Health Programs (Continued)

Community Benefit Category	Program	Outcomes Tracked
Financial & In-Kind Contributions	Community Building - Cash/In-kind Contributions	Cost of services
	Community Outreach Meals	Cost of services
	Project Homeless Connect	Cost of services
Community Building	Coalition Building/Board Memberships	Cost of services
Health Care Support Services	McAuley Fund – Medication Assistance	Cost of services
	Watered Gardens Clinic	Cost of services
	Eligibility Assist – Medicaid Support	Cost of services



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 Joplin has limited resources, not every community need will be addressed. Throughout the CHNA process, the following needs arose as community concerns, however, will not be addressed as a top priority because other organizations are more appropriate to address these needs.

- **Cancer**

While recognizing the significant impact of cancer on the community, it will not be specifically addressed in our priorities and will most likely be impacted through the work in our chronic disease priorities. Many factors related to this disease are also addressed directly through Mercy Cancer Center and community collaborations.

- **Infectious Disease**

While infectious diseases will not be specifically addressed in our priorities, they will most likely be impacted indirectly through the work in our other community outreach priorities and through collaboration with the local health departments. Because specific services and public health entities are better positioned to drive comprehensive solutions for this need, Mercy will support programs through community partnerships and collaboration to drive initiatives.

- **Dental Care**

Dental care is an identified health need and a concern in our community, although Mercy Hospital Joplin has limited capacity to impact this area directly, some factors related to this need are impacted indirectly through other programs and priorities. Mercy Hospital Joplin CHWs are actively engaged in community collaborations that offer access to dental care through partnerships with FQHCs and Kansas City University's Dental School.

- **Unintentional Injuries**

Unintentional injuries, or accidents, are a growing concern in the Joplin community, and Mercy will continue to address this need through collaborative work. This area will likely be addressed indirectly in areas that may overlap, such as efforts to improve behavioral health may also reduce the occurrence of unintentional injuries.

Now What

Next Steps

After carefully reviewing the data and mapping existing resources, Mercy Hospital Joplin has developed this Community Health Improvement Plan (CHIP) and implementation strategy with evidence-based programs and initiatives that will be monitored and evaluated over the next three years. This summary serves as documentation that Mercy Hospital Joplin is meeting IRS requirements for conducting a CHNA and CHIP (or Implementation Strategy). The full reports are electronically available to the public on the Mercy Hospital Joplin website:

mercy.net/communitybenefits.



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