

Rehoboth McKinley Christian Health Care Services

Community Health Needs Assessment
and Implementation Plan



Rehoboth McKinley
Christian Health Care Services



OCTOBER 2022

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Section 1:

Community Health Needs Assessment

EXECUTIVE SUMMARY



Executive Summary

A comprehensive, six-step community health needs assessment (“CHNA”) was conducted for Rehoboth McKinley Christian Health Care Services (RMCHCS) by Community Hospital Consulting (CHC Consulting). This CHNA utilizes relevant health data and stakeholder input to identify the significant community health needs in McKinley County, New Mexico.

The CHNA Team, consisting of leadership from RMCHCS, reviewed the research findings in April/May 2022 to prioritize the community health needs. Five significant community health needs were identified by assessing the prevalence of the issues identified from the health data findings combined with the frequency and severity of mentions in community input.

The CHNA Team participated in a prioritization process using a structured matrix to rank the community health needs based on three characteristics: size and prevalence of the issue, effectiveness of interventions and the hospital’s capacity to address the need. Once this prioritization process was complete, the hospital leadership took a survey through SurveyMonkey and decided to address four of the five prioritized needs in various capacities through a hospital specific implementation plan.

The five most significant needs, as prioritized by the CHNA team, are listed below:

- 1.) Continued Recruitment & Retention of Healthcare Workforce
- 2.) Access to Mental and Behavioral Health Care Services and Providers
- 3.) Access to Affordable Care and Reducing Health Disparities Among Specific Populations
- 4.) Prevention, Education and Services to Address High Mortality Rates, Chronic Diseases, Preventable Conditions and Unhealthy Lifestyles
- 5.) Access to Dental Care Services and Providers

While RMCHCS acknowledges that this is a significant need in the community, “Access to Dental Care Services and Providers” is not addressed largely due to the fact that it is not a core business function of the hospital and the limited capacity of the hospital to address this need. RMCHCS will continue to support local organizations and efforts to address this need in the community.

RMCHCS leadership has developed an implementation plan to identify specific activities and services which directly address four of the identified priorities. The objectives were identified by studying the prioritized health needs, within the context of the hospital’s overall strategic plan and the availability of finite resources. The plan includes a rationale for each priority, followed by objectives, specific implementation activities, responsible leaders, annual progress and key results (as appropriate).

The RMCHCS Board reviewed and adopted the 2022 Community Health Needs Assessment and Implementation Plan on October 26, 2022.

Priority #1: Continued Recruitment & Retention of Healthcare Workforce

McKinley County has a higher rate of preventable hospitalizations and a lower percentage of those who have a personal doctor than the state. Additionally, McKinley County has several Health Professional Shortage Area designations as defined by the U.S. Department of Health and Human Services Health Resources and Services Administration (HRSA). When asked to rank the top 10 most important health initiatives from a list of options, survey respondents ranked recruiting more health care providers and recruiting specialists who can provide services that are not currently available. Survey respondents mentioned that there are not enough providers and making appointments is very difficult. Survey respondents also mentioned the top barriers to low income residents as lack of capacity and lack of access due to provider distance as some barriers for low income residents.

When asked about barriers to care coordination, survey respondents mentioned lack of staff and time for investment in coordination. One survey respondent stated: "If there is not enough staffing or staff time is limited because they are already overworked, then this is a major barrier to people receiving adequate care in a timely manner. There are also not enough primary care providers. I know many people who don't have a primary care provider because no one is taking on new patients. This is a serious problem." Another survey respondent stated: "Lack of physicians and overutilization of other providers (non-MDs) makes it difficult to get 'medical' treatment for individuals." Additionally, another survey respondent stated: "The community has needs for specialty [care] and most people have to travel to find those specialties. It is difficult to obtain appointments and/or the wait for next appointment that is months out."

Priority #2: Access to Mental and Behavioral Health Care Services and Providers

Data suggests that residents in McKinley County do not have adequate access to mental and behavioral health care services and providers. McKinley County has a lower rate of mental health care providers per 100,000 than the state.

For preventable hospitalizations, survey respondents selected mental illness as the top most important issue. Substance abuse and mental health problems were also the top two health problems that respondents as the most important issues in the community and mental illness was ranked number two by survey respondents for most important chronic conditions in the community. Survey respondents rated that it was very difficult/difficult for low income residents to access mental and behavioral health care services. More than half of community survey respondents rated local mental health screenings as "very inadequate or inadequate." Survey respondents stated the following: "...very limited programs and lack of up-to-date interventions. Substance abuse treatment is only short term or outpatient and not trauma-informed."

Additionally, survey respondents discussed the need for more treatment for substance abuse and how it is often aligned with mental health issues and many times with homelessness. One survey respondent stated: "We need relapse prevention groups for individuals with substance abuse problems. Chronic stress from living on the streets and not getting enough sleep, eating nutritious food, and developing supportive housing will go a long way to improving the quality of life in our community." Another survey respondent stated: "This community sees some of the highest rates of substance use disorder and its related comorbidities. Stronger preventative and education methods are needed throughout lives to improve outcomes."



Priority #3: Access to Affordable Care and Reducing Health Disparities Among Specific Populations

Data suggests that some residents in the study area face significant cost barriers when accessing the healthcare system. McKinley County has higher unemployment rates than the state, as well as lower educational attainment rates than the state. McKinley County also has a higher percentage of families and children living below poverty than the state, as well as a higher percentage of public school students eligible for free or reduced price lunch. Additionally, McKinley County has a higher percentage of overall food insecurity, child food insecurity, and a higher percentage of recipients who qualified for Supplemental Nutrition Assistance Program (SNAP) benefits than the state. McKinley County also has a lower median household income as compared to New Mexico.

McKinley County has a higher rate of those adults (age 18-64) who are uninsured as compared to the state and a higher percentage of residents that experienced a medical cost barrier to care within the past 12 months than the state. When analyzing economic status, McKinley County is in more economic distress than the majority of other counties in the state. Additionally, McKinley County is designated as a Medically Underserved Area, as defined by the U.S. Department of Health and Human Services Health Resources and Services Administration (HRSA).

Through a community survey, more than two-thirds of respondents indicated "Very Inadequate or Inadequate" services for persons who are homeless, persons with substance abuse, the working poor, the uninsured/underinsured, persons with no social or emotional support, persons with mental illness, persons with no source of transportation, persons with chronic diseases, and low income groups. For those survey respondents who chose "Very inadequate or Inadequate" services for the aforementioned subpopulations, one respondent stated: "We do not have free, accessible healthcare and mental healthcare for low income people aside from IHS. We do not have any mental health crisis facilities, we do not have adequate shelter and affordable housing for homeless and working poor, single parents, and disabled. We do not have any long term substance abuse recovery facilities. We do not have LGBTQ and immigrant friendly services." Another interviewee stated: "I think we need more services available for emotional well-being but this means more counseling services or advertising counseling services better. To my knowledge we do not have medical employees that meet people with no transportation so that is an issue. Substance abuse and homelessness is a huge issue and I am not sure that our community is set up to provide for these issues. It can't just be one night at NCI and get released. These people need treatment but then they also need support to find jobs and housing etc. Lastly, I always hear veterans saying that is impossible to get good health care. They can't pay for it so they go to the VA's office but it takes forever or is too complicated. Not sure if RMCH could help with a specific veterans program. We have a lot of Veterans in this community."

Survey respondents discussed several contributing factors when thinking about health need adequacy for specific populations including: limited resources, transportation and cost barriers, limited access to qualifiers to receive care, long wait times, and lack of specialized/higher levels of care. Improving access to healthcare for populations with limited services was the top ranked most important health initiatives. The fourth top ranked healthcare initiative was increasing the proportion of residents who have access to healthcare coverage. When asked about the low income residents in the community, survey respondents mentioned several barriers for such residents, including lack of providers accepting Medicaid/Medicare, lack of coverage/financial hardship, lack of transportation and difficulty navigating the system/lack of awareness of available resources. Respondents were asked to rate the level of difficulty low income residents face when trying to access specific health related services and routine primary/preventative care and emergency services were the top two services.



Priority #4: Prevention, Education and Services to Address High Mortality Rates, Chronic Diseases, Preventable Conditions and Unhealthy Lifestyles

Data suggests that higher rates of specific mortality causes and unhealthy behaviors warrants a need for increased preventive education and services to improve the health of the community. Cancer and heart disease are the two leading causes of death McKinley County and the state. McKinley County has higher mortality rates than New Mexico for the following causes of death: cancer; accidents (unintentional injuries); COVID-19; chronic liver disease and cirrhosis; diabetes mellitus; cerebrovascular diseases; influenza and pneumonia; intentional self-harm (suicide); breast cancer (female); prostate cancer (male); and colon and rectum cancer.

McKinley County has higher prevalence rates of chronic conditions such as diabetes for adults and Medicare beneficiaries, overweight or obesity, asthma, high blood pressure for adults and Medicare beneficiaries and those with a disability than the state. McKinley County has higher percentages of residents participating in unhealthy lifestyle behaviors such as physical inactivity and smokeless tobacco use than the state. With regards to maternal and child health, specifically, McKinley County has higher rates of teen (age 15-19 years) birth rates, and higher rates of women who received inadequate prenatal care than the state. Data suggests that McKinley County residents are not appropriately seeking preventive care services, such as timely mammography, colonoscopy pap tests or prostate screening. McKinley County has higher prevalence rates of communicable diseases such as chlamydia, syphilis and HIV than the state.

Survey respondents were asked to select the five most important issues in the community in regards to chronic diseases and they are diabetes, mental illness, obesity, end stage renal disease/chronic kidney disease and chronic liver disease/cirrhosis. For preventable hospitalizations, survey respondents selected mental illness, uncontrolled diabetes, diabetes long term complications, and high blood pressure and diabetes short term complications as most important issues. Furthermore, obesity and diabetes were within the top five health problems selected by survey respondents. More than half of community survey respondents indicated “very inadequate or inadequate” services provided for nutrition and weight management programs in the community. Survey respondents mentioned that, “Preventative [and] primary care in these sectors would result in better health outcomes for those needing the services,” and how there is “...little to no emphasis on prevention. Our health facilities are designed for ‘acute’ care.”

Survey respondents were asked to rank a list of healthcare initiatives for all residents from most important to least important. Several prevention and educational health initiatives were ranked, including: promoting behavior change in unhealthy lifestyles; health promotion and preventive education; improving access to preventive care (screenings for chronic diseases, immunizations); and promoting chronic disease management.

More than 50% of survey respondents believe that community members get their health-related education from friends and family, the internet or community based organizations. One survey respondent stated: “Hospitals need to re-design their systems to include more preventive care, with limited focus on acute care.” Another survey respondent stated: “Changing the mindset in our area would play a critical role in people's lifestyles. This is important if we want to improve the quality of life of people in our community.”



PROCESS AND METHODOLOGY



Process and Methodology

Background & Objectives

- This CHNA is designed in accordance with CHNA requirements identified in the Patient Protection and Affordable Care Act and further addressed in the Internal Revenue Service final regulations released on December 29, 2014.
- The objectives of the CHNA are to:
 - Meet federal government and regulatory requirements
 - Research and report on the demographics and health status of the study area, including a review of state and local data
 - Gather input, data and opinions from persons who represent the broad interest of the community
 - Analyze the quantitative and qualitative data gathered and communicate results via a final comprehensive report on the needs of the communities served by RMCHCS
 - Document the progress of previous implementation plan activities
 - Prioritize the needs of the community served by the hospital
 - Create an implementation plan that addresses the prioritized needs for the hospital



Process and Methodology

Scope

- The CHNA components include:
 - A description of the process and methods used to conduct this CHNA, including a summary of data sources used in this report
 - A biography of RMCHCS
 - A description of the hospital's defined study area
 - Definition and analysis of the communities served, including demographic and health data analyses
 - Findings from a survey that collected input from local community representatives, including:
 - State, local, tribal or regional governmental public health department (or equivalent department or agency) with knowledge, information or expertise relevant to the health needs of the community;
 - Members of a medically underserved, low-income or minority populations in the community, or individuals or organizations serving or representing the interests of such populations
 - Community leaders
 - A description of the progress and/or completion of community benefit activities documented in the previous implementation plan
 - The prioritized community needs and separate implementation plan, which intend to address the community needs identified
 - Documentation and rationalization of priorities not addressed by the implementation plan
 - A description of additional health services and resources available in the community
 - A list of information gaps that impact the hospital's ability to assess the health needs of the community served

Process and Methodology

Methodology

- RMCHCS worked with CHC Consulting in the development of its CHNA. RMCHCS provided essential data and resources necessary to initiate and complete the process, including the definition of the hospital's study area and the identification of key community stakeholders to be surveyed.
- CHC Consulting conducted the following research:
 - A demographic analysis of the study area, utilizing demographic data from Stratasan
 - A study of the most recent health data available
 - Distributed a survey to individuals who have special knowledge of the communities, and analyzed results
 - Provided the CHNA Team with a data summary to review in April/May 2022. The CHNA Team included:
 - Robert Whitaker, Chief Executive Officer
 - Blaise Bondi, I-Chief Financial Officer
 - Curry Graham, Chief Nursing Officer
 - Rebecca Martell, Senior Vice President/Chief Human Resource Officer
 - Steve Kittridge, Vice President of Clinical Practice Management
 - Chris Lang, Director of Operations
 - Rhonda Ray, Director of Marketing/Government Affairs/Acting Director WHF
- The methodology for each component of this study is summarized in the following section. In certain cases methodology is elaborated in the body of the report.



Process and Methodology

Methodology (continued)

– RMCHCS Biography

- Background information about RMCHCS, mission, vision, core values and services were provided by the hospital or taken from its website

– Study Area Definition

- The study area for RMCHCS is based on hospital inpatient discharge data from October 1, 2020 - September 30, 2021 and discussions with hospital staff

– Demographics of the Study Area

- Population demographics include population change by race, ethnicity, age, median income analysis, unemployment and economic statistics in the study area
- Demographic data sources include, but are not limited to, Stratan, the U.S. Census Bureau, the United States Bureau of Labor Statistics and Feeding America

– Health Data Collection Process

- A variety of sources (also listed in the reference section) were utilized in the health data collection process
- Health data sources include, but are not limited to, the Robert Wood Johnson Foundation, New Mexico Department of Health and Environment, SparkMap, United States Census Bureau, and the Centers for Disease Control and Prevention



Process and Methodology

Methodology (continued)

– Survey Methodology

- CHC Consulting developed an electronic survey tool distributed by RMCHCS via email between February 21, 2022 – March 14, 2022. The survey was sent via email to individuals or organizations representing the need of various community groups in McKinley County. 28 individuals responded to the survey and those 28 responses were collected and analyzed.

– Evaluation of Hospital's Impact

- A description of the progress and/or completion of community benefit activities documented in the previous implementation plan
- RMCHCS provided CHC Consulting with a report of community benefit activity progress since the previous CHNA report

– Prioritization Strategy

- Five significant needs were determined by assessing the prevalence of the issues identified in the health data findings, combined with the frequency and severity of mentions in the survey
- Three factors were used to rank those needs during the prioritization process
- See the prioritization section for a more detailed description of the prioritization methodology



HOSPITAL BIOGRAPHY



Hospital Biography

About Reboth McKinley Christian Health Care Services

About Us

Reboth McKinley Christian Health Care Services (RMCHCS) is an integrated delivery system providing care for northwestern New Mexico and eastern Arizona. We are proud to continue a history of healthcare dating back to the early 1900s. As a private, not-for-profit healthcare system, we are committed to improving the health and wellness of our community and the individuals for whom we care.

Our Home

RMCHCS' roots go back to the early 1900's when Reboth Christian Hospital and St. Mary's Hospital provided healthcare services to the people of Gallup and the Native Americans living on the nearby Navajo and Zuni reservations. St. Mary's Hospital, located near downtown Gallup, became McKinley General Hospital in the late 1970s. In 1983 Reboth Christian Hospital, located on the east side of Gallup, merged with McKinley General Hospital in order to pool their resources so they could better serve the population. Today RMCHCS is a 501 (c) (3) not-for-profit healthcare network located in rural McKinley County.

Reboth McKinley Christian Health Care Services is a fully integrated healthcare organization employing over 30 physicians and mid-level providers. RMCHCS has 60 licensed beds, two outpatient clinics, home health and hospice services, behavioral health services and offers a full range of inpatient and outpatient services to the people of Gallup and the surrounding area.

Source: Reboth McKinley Christian Health Care Services, "About Us"; https://www.rmch.org/getpage.php?name=about_us&sub=About%20Us; accessed September 21, 2022.

Source: Reboth McKinley Christian Health Care Services, "Our Services"; https://www.rmch.org/getpage.php?name=our_services&sub=Our%20Services; accessed October 13, 2022.



Hospital Biography

Mission, Vision and Core Values

Mission

The mission of RMCHCS is to serve God by making a profound and lasting difference in the health and quality of life for all people in the community.

Vision

RMCHCS will work together to become a regional leader in the delivery of excellent healthcare.

Core Values

- **Safety**: Safety is at the forefront of everything we do. The culture of safety is promoted into every facet of our organization as reflected in our decisions and actions. RMCHCS is committed to the safety and well-being of all patients, visitors and staff.
- **Stewardship**: Using the organization's resources is an essential trust. RMCHCS staff will be responsible stewards of the human, time and financial resources used to fulfill our mission.
- **Compassion**: RMCHCS encourages a deep feeling for and understanding of others. This includes kindness, generosity, forgiveness, caring, friendship, listening and love toward all people. We will treat everyone with the utmost dignity and care.
- **Integrity**: RMCHCS operates according to the highest standards, as befitting the community trust placed in us. We will hold ourselves accountable to do what is right at all times.
- **Community**: The RMCHCS community is our inspiration as we work together to serve patients, staff and our diverse population. This united effort exists to build a brighter future and a better society for the greater community.

Source: Rehoboth McKinley Christian Health Care Services, "About Us: Mission/Vision/Core Values"; <https://www.rmch.org/getpage.php?name=mission&sub=About+Us>; information accessed September 21, 2022.

Hospital Biography

Hospital Services

Services

- College Clinic
- Education & Support Groups
- Financial Services
- Home Health & Hospice Care
- Inpatient services
 - Anesthesiology
 - Cardiopulmonary
 - Chaplaincy Services
 - Diagnostic Imaging
 - Intensive Care Unit
 - Laboratory
 - Medical/Surgical
 - Pharmacy
 - Respiratory Therapy
 - Social Services/Case Management
 - Surgery
- Laboratory Services
- Outpatient Services
 - Cardiopulmonary
 - Radiology
 - Education & Support Groups
 - Emergency Room
 - Laboratory
 - Nutrition Services
 - Occupational Health
 - Sleep Disorder Center
- Red Rock Clinic
- RMCHCS Hospital
- Urgent Care Clinic
- Wellness Center

Source: Rehoboth McKinley Christian Health Care Services, "Our Services"; https://www.rmch.org/getpage.php?name=our_services&sub=Our%20Services; accessed September 21, 2022.

Source: Rehoboth McKinley Christian Health Care Services, "Our Services: Inpatient Services"; https://www.rmch.org/getpage.php?name=Inpatient_services&sub=Our+Services; accessed October 13, 2022.

Source: Rehoboth McKinley Christian Health Care Services, "Our Services: Outpatient Services"; https://www.rmch.org/getpage.php?name=outpatient_services&sub=Our+Services; accessed October 13, 2022.



STUDY AREA



Rehoboth McKinley Christian Health Care Services

Study Area

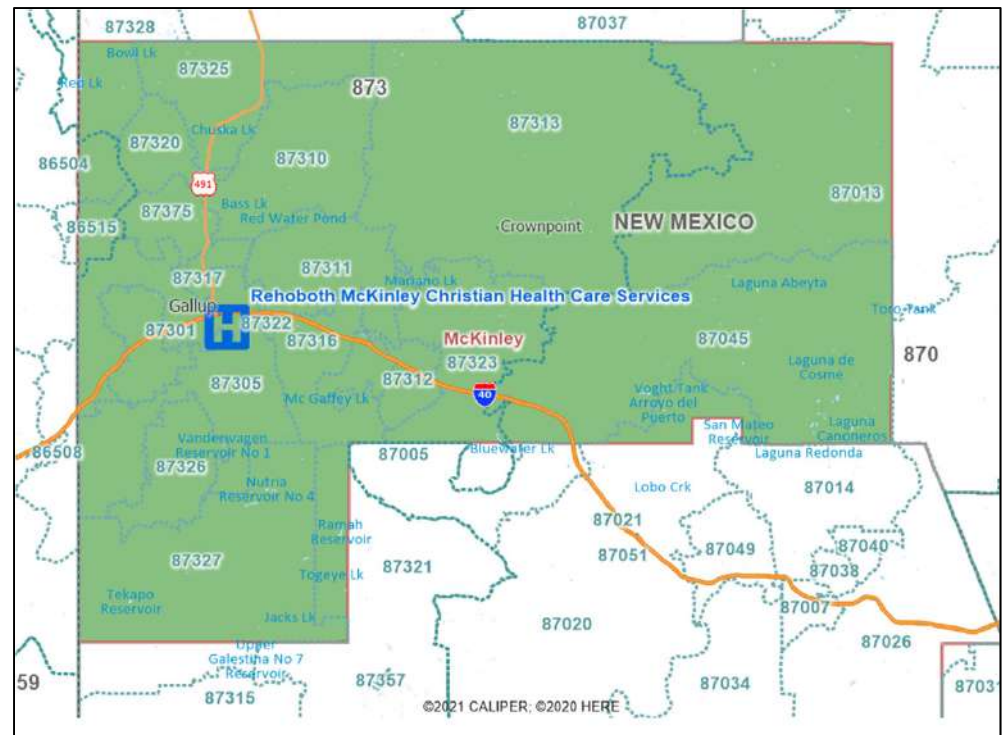
McKinley County
comprises 83.5% of SY
2021 Inpatient Discharges

H Indicates the hospital

**Rehoboth McKinley Christian Health Care Services
Patient Origin by County
October 1, 2020 - September 30, 2021**

| County | State | SY21 Inpatient Discharges | % of Total | Cumulative % of Total |
|--------------------|-------|---------------------------------|---------------|--------------------------|
| McKinley County | NM | 1,556 | 83.5% | 83.5% |
| All Others | | 308 | 16.5% | 100.0% |
| Total | | 1,864 | 100.0% | |

Source: Hospital inpatient discharge data from New Mexico Hospital Association (NMHA), accessed from Stratason for Rehoboth McKinley Christian Health Care System; October 2020 - September 2021; Normal Newborns MS-DRG 795 excluded.



Note: the 2019 RMCHCS CHNA and Implementation Plan report studied McKinley County, New Mexico, which comprised 80.4% of SY 2019 (October 1, 2018 – September 30, 2019) inpatient discharges.

DEMOGRAPHIC OVERVIEW



Population Health

Population Growth

Projected 5-Year Population Growth 2021-2026

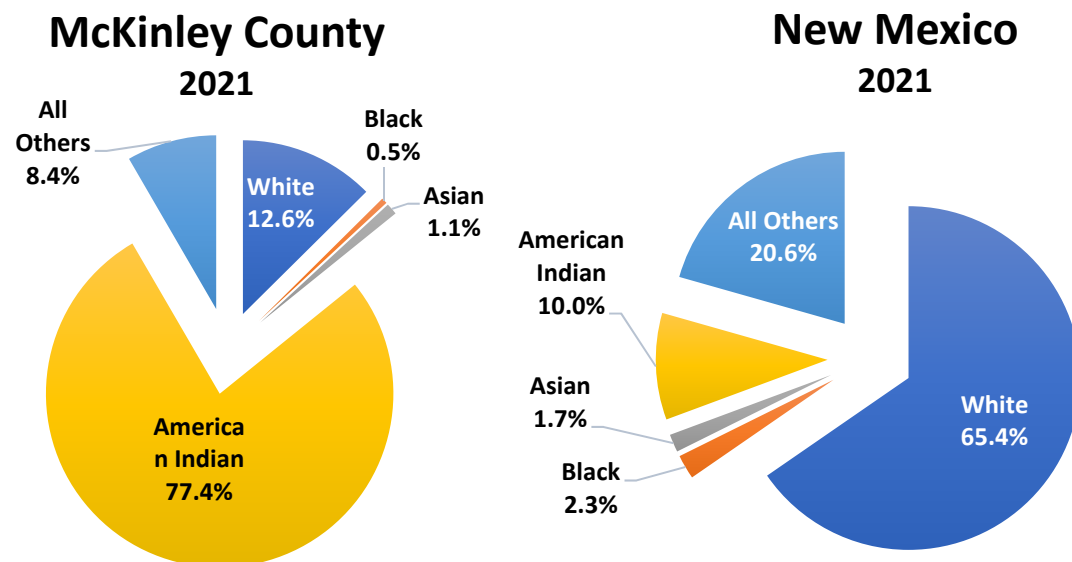


| Overall Population Growth | | | | |
|---------------------------|-----------|-----------|------------------|--------------------|
| Geographic Location | 2021 | 2026 | 2021-2026 Change | 2021-2026 % Change |
| McKinley County | 69,295 | 69,309 | 14 | 0.02% |
| New Mexico | 2,149,586 | 2,212,300 | 62,714 | 2.9% |

Source: Stratatan Canvas Demographics Report, 2022.

Population Health

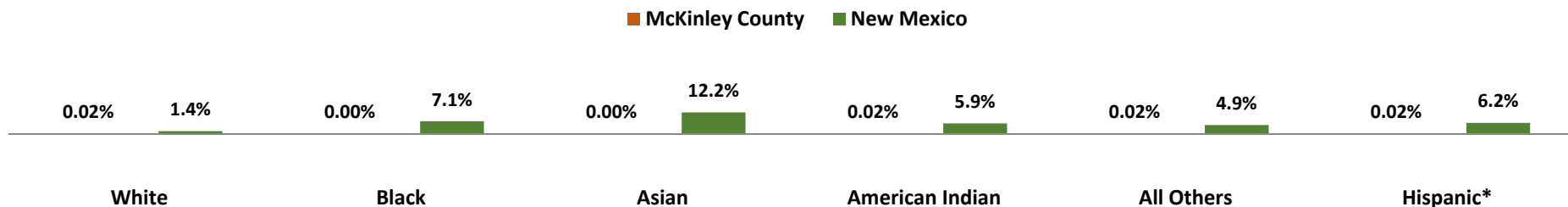
Population Composition by Race/Ethnicity



| McKinley County | | | | |
|-----------------|---------------|---------------|------------------|--------------------|
| Race/Ethnicity | 2021 | 2026 | 2021-2026 Change | 2021-2026 % Change |
| White | 8,711 | 8,713 | 2 | 0.02% |
| Black | 377 | 377 | 0 | 0.00% |
| Asian | 746 | 746 | 0 | 0.00% |
| American Indian | 53,655 | 53,666 | 11 | 0.02% |
| All Others | 5,806 | 5,807 | 1 | 0.02% |
| Total | 69,295 | 69,309 | 14 | 0.02% |
| Hispanic* | 10,284 | 10,286 | 2 | 0.02% |

| New Mexico | | | | |
|-----------------|------------------|------------------|------------------|--------------------|
| Race/Ethnicity | 2021 | 2026 | 2021-2026 Change | 2021-2026 % Change |
| White | 1,405,599 | 1,425,793 | 20,194 | 1.4% |
| Black | 49,137 | 52,641 | 3,504 | 7.1% |
| Asian | 36,081 | 40,486 | 4,405 | 12.2% |
| American Indian | 215,731 | 228,415 | 12,684 | 5.9% |
| All Others | 443,038 | 464,965 | 21,927 | 4.9% |
| Total | 2,149,586 | 2,212,300 | 62,714 | 2.9% |
| Hispanic* | 1,076,220 | 1,142,827 | 66,607 | 6.2% |

Race/Ethnicity Projected 5-Year Growth 2021-2026



Source: Stratatan Canvas Demographics Report, 2022.

*Hispanic numbers and percentages are calculated separately since it is classified as an ethnicity.

Note: A green highlighted row in the table represents the biggest change in true numbers in the population for each county and state.

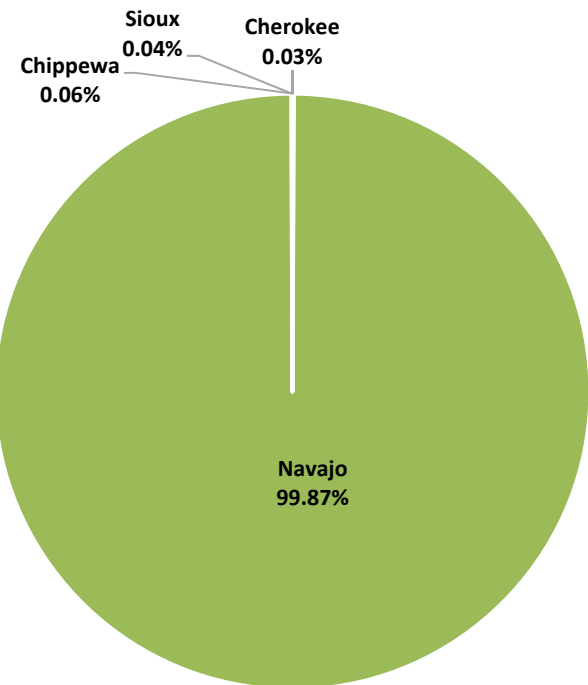
Note: "All Others" is a category for people who do not identify with 'White', 'Black', 'American Indian or Alaska Native', or 'Asian'.

Population Health

Population Composition by Race/Ethnicity – American Indian and Alaska Native Tribal Groupings

- In 2016-2020, the McKinley County American Indian and Alaska Native tribal groupings population was composed of a majority the Navajo tribe (99.87%).

American Indian and Alaska Native Tribal Groupings (of any one race)
5-Year Estimates, Percentage
2016-2020

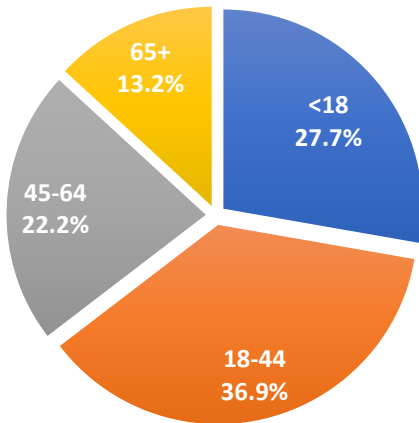


Source: U.S. Census Bureau, 2016-2020 American Community Survey 5-Year Estimates, data filtered for McKinley County, NM, <https://data.census.gov/cedsci/table?q=race%20and%20ethnicity&g=0500000US35059&d=ACS%205-Year%20Estimates%20Data%20Profiles&tid=ACSDP5Y2019.DP05&hidePreview=true>; information accessed March 29, 2022.

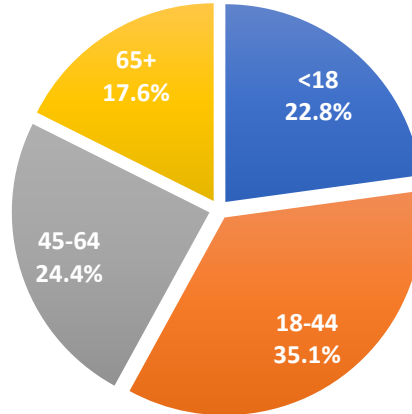
Population Health

Population Composition by Age Group

**McKinley County
2021**

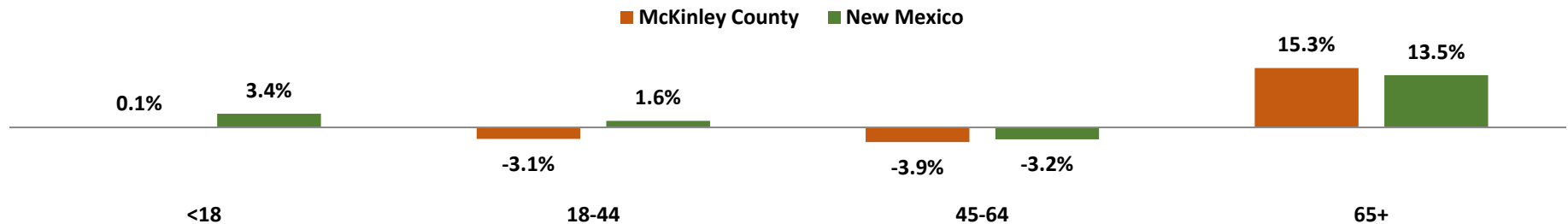


**New Mexico
2021**



| McKinley County | | | | |
|-----------------|-----------|-----------|------------------|--------------------|
| Age Cohort | 2021 | 2026 | 2021-2026 Change | 2021-2026 % Change |
| <18 | 19,226 | 19,246 | 20 | 0.1% |
| 18-44 | 25,536 | 24,739 | -797 | -3.1% |
| 45-64 | 15,409 | 14,802 | -607 | -3.9% |
| 65+ | 9,124 | 10,522 | 1,398 | 15.3% |
| Total | 69,295 | 69,309 | 14 | 0.0% |
| New Mexico | | | | |
| Age Cohort | 2021 | 2026 | 2021-2026 Change | 2021-2026 % Change |
| <18 | 490,837 | 507,589 | 16,752 | 3.4% |
| 18-44 | 755,502 | 767,455 | 11,953 | 1.6% |
| 45-64 | 524,465 | 507,504 | -16,961 | -3.2% |
| 65+ | 378,782 | 429,752 | 50,970 | 13.5% |
| Total | 2,149,586 | 2,212,300 | 62,714 | 2.9% |

Age Projected 5-Year Growth 2021-2026



Source: Stratason Canvas Demographics Report, 2022.

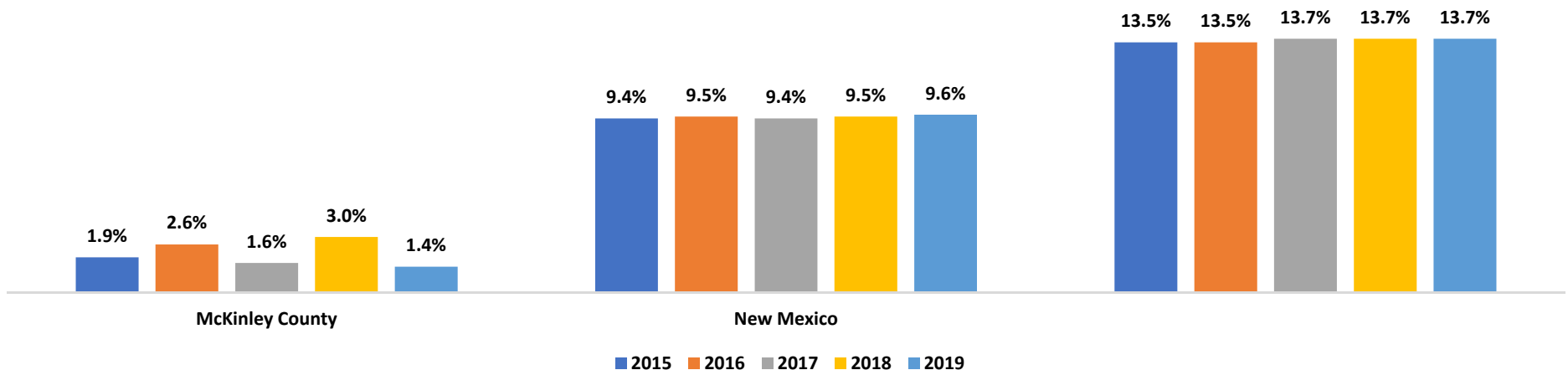
Note: A green highlighted row in the table represents the biggest change in true numbers in the population for each county and state.

Population Health

Subpopulation Composition

- Between 2015 and 2019, the percent of foreign-born residents overall decreased in McKinley County, while the percent in the state and the nation increased.
- Between 2015 and 2019, McKinley County maintained a lower percentage of foreign-born residents than the state and the nation.
- In 2019, McKinley County (1.4%) had a lower percent of foreign-born residents than the state (9.6%) and the nation (13.7%).

Foreign-Born Population



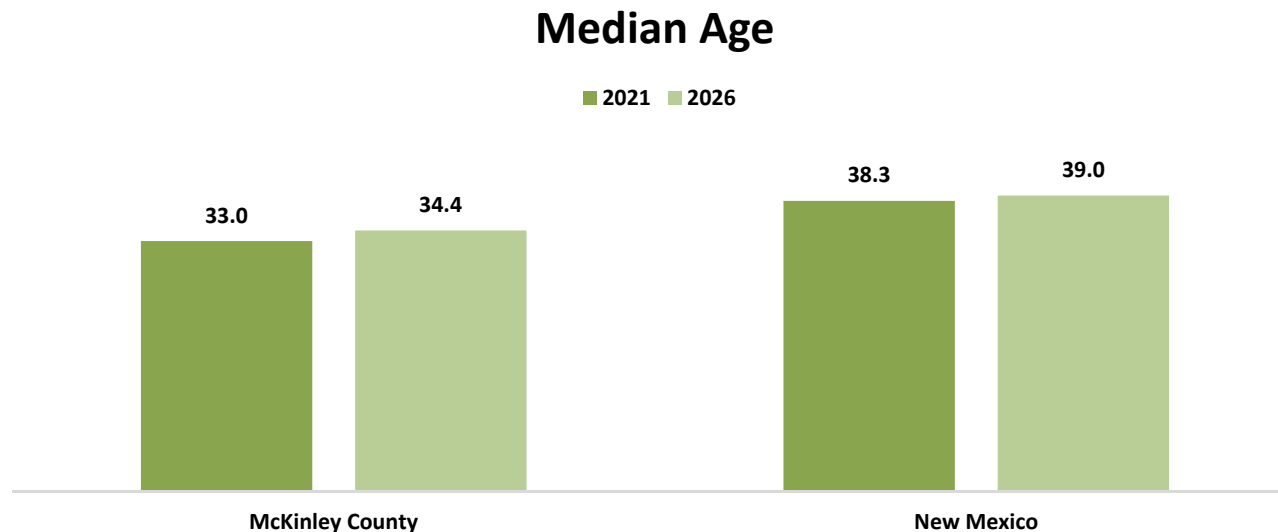
Source: United States Census Bureau, filtered for McKinley County, NM, <https://data.census.gov/cedsci/table?q=foreign%20born&tid=ACSDP1Y2019.DP02>; data accessed March 10, 2022.

Note: Foreign-born means an individual who was born outside of the United States but lives in the United States currently.

Population Health

Median Age

- The median age in McKinley County and the state is expected to increase over the next five years (2021-2026).
- McKinley County (33.0 years) has a younger median age than New Mexico (38.3 years) (2021).



Source: Stratason Canvas Demographics Report, 2022.

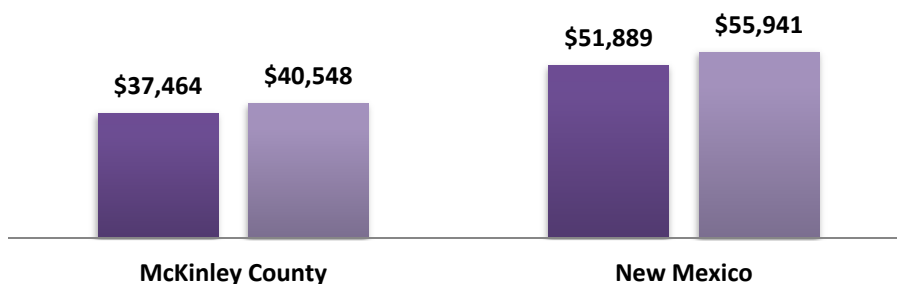
Population Health

Median Household Income and Educational Attainment

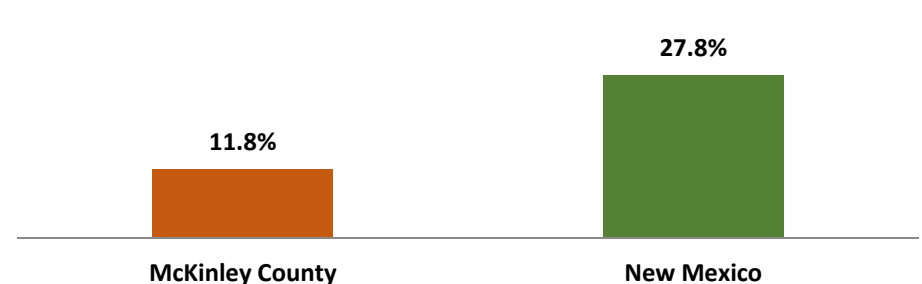
- The median household income in both McKinley County and the state is expected to increase over the next five years (2021-2026).
- McKinley County (\$37,464) has a lower median household income than New Mexico (\$51,889) (2021).
- McKinley County (11.8%) has a lower percentage of residents with a bachelor or advanced degree than the state (27.8%) (2021).

Median Household Income

■ 2021 ■ 2026



Education Bachelor / Advanced Degree 2021



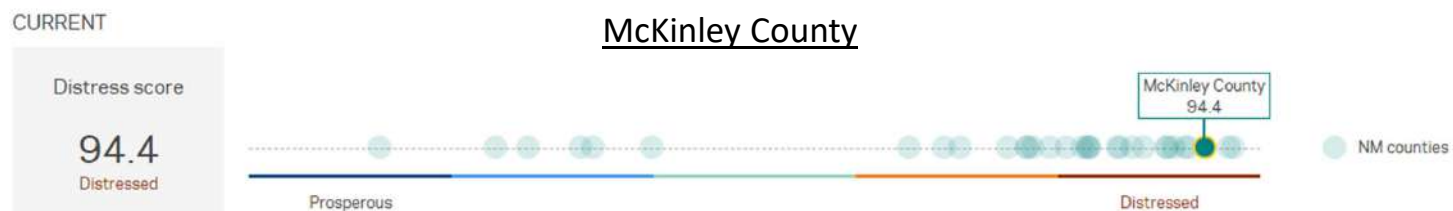
Source: Stratason Canvas Demographics Report, 2022.

Population Health

Distressed Communities Index

- In 2014-2018, 16.0% of the nation lived in a distressed community, as compared to 26.0% of the nation that lived in a prosperous community.
- In 2014-2018, 37.0% of the population in New Mexico lived in a distressed community, as compared to 12.3% of the population that lived in a prosperous community.
- In 2014-2018, the distress score in McKinley County was 94.4 which falls within the distressed economic category and is more distressed as compared to the majority of other counties in the state.

| | New Mexico | United States |
|---------------------------------|------------|---------------|
| Lives in a Distressed Community | 37.0% | 16.0% |
| Lives in a Prosperous Community | 12.3% | 26.0% |



Source: Economic Innovation Group, 2020 DCI Interactive Map, filtered for McKinley County, NM, <https://eig.org/dci/interactive-map?path=state/>; data accessed March 8, 2022.

Definition: 'Prosperous' has a final score of 0 all the way up to 'Distressed' which has a final score of 100.

Note: 2020 DCI edition used U.S. Census Bureau's American Community Survey (ACS) 5 – Year Estimates covering 2014 -2018.

Note: Distressed Communities Index (DCI) combines seven complementary economic indicators: no high school diploma, housing vacancy rate, adults not working, poverty rate, median income ratio, change in employment and change in establishments. Full definition for each economic indicator can be found in the appendix.

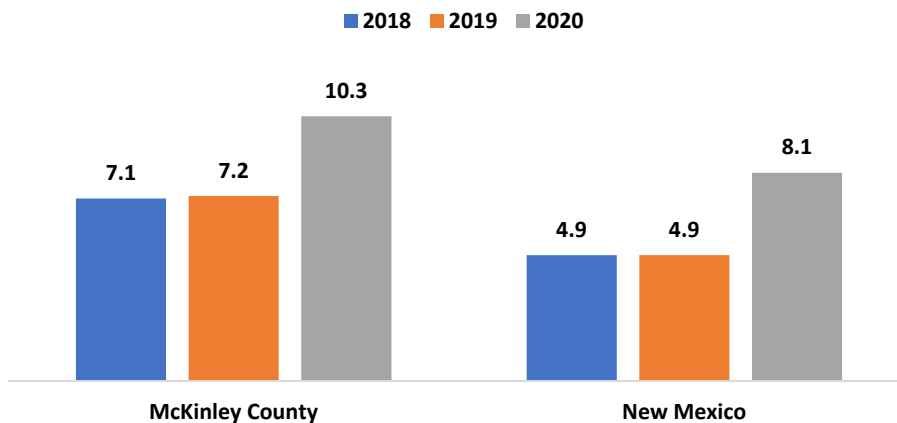


Population Health

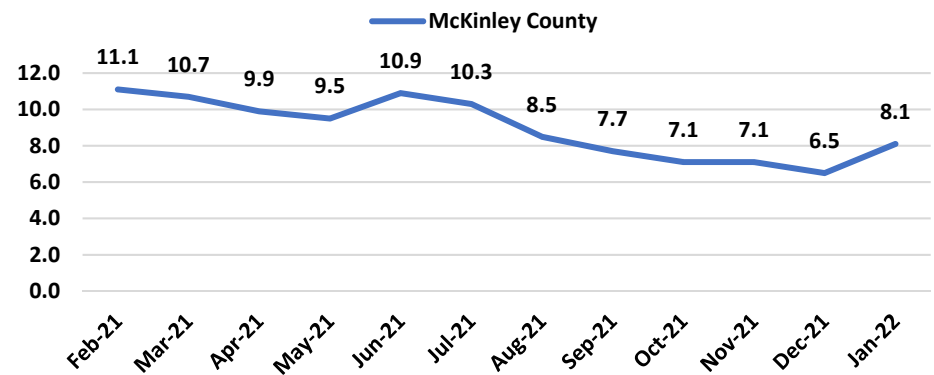
Unemployment

- Unemployment rates in McKinley County and the state increased between 2018 and 2020.
- In 2020, McKinley County (10.3) had a higher unemployment rate than the state (8.1).
- Over the most recent 12-month time period, monthly unemployment rates in McKinley County overall decreased. February 2021 had the highest unemployment rate (11.1) as compared to December 2021 with the lowest rate (6.5).

**Unemployment
Annual Average, 2018-2020**



**Monthly Unemployment
Rates by Month
Most Recent 12-Month Period**



Source: Bureau of Labor Statistics, Local Area Unemployment Statistics, www.bls.gov/lau/#tables; data accessed March 29, 2022.

Definition: Unemployed persons include all persons who had no employment during the reference week, were available for work, except for temporary illness, and had made specific efforts to find employment some time during the 4 week-period ending with the reference week. Persons who were waiting to be recalled to a job from which they had been laid off need not have been looking for work to be classified as unemployed.

Population Health

Industry Workforce Categories

- As of 2019, the majority of employed persons in McKinley County are within Office & Administrative Support Occupations. The most common employed groupings are as follows:

McKinley County

- Office & Administrative Support Occupations (12.5%)
- Sales & Related Occupations (10.1%)
- Management Occupations (7.7%)
- Education Instruction, & Library Occupations (7.4%)
- Healthcare Support Occupations (7.2%)

Source: Data USA, filtered for McKinley County, NM, <https://datausa.io/>; data accessed March 8, 2022.

Population Health

Means of Transportation

- In 2016-2020, driving alone was the most frequent means of transportation to work for both McKinley County and the state.
- In 2016-2020, McKinley County (10%) had a higher percent of people working at home than the state (6%).
- McKinley County (23.2 minutes) had a slightly longer mean travel time to work than the state (22.7 minutes) (2016-2020).

McKinley County

Means of transportation to work



Mean travel time to work: 23.2 minutes

* Universe: Workers 16 years and over

New Mexico

Means of transportation to work



Mean travel time to work: 22.7 minutes

* Universe: Workers 16 years and over

Source: U.S. Census Bureau (2016-2020). Sex of Workers by Means of Transportation to Work American Community Survey 5-year estimates, filtered for McKinley County, NM, <https://censusreporter.org/search/>; data accessed March 29, 2022.

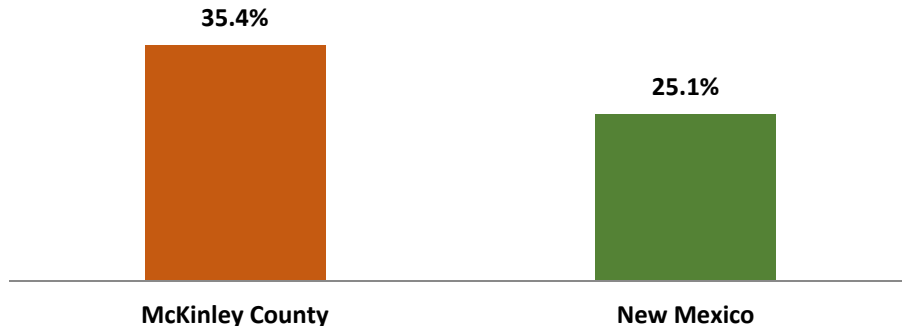
"*" indicates a margin of error is at least 10 percent of the total value. Interpret with caution.

Population Health

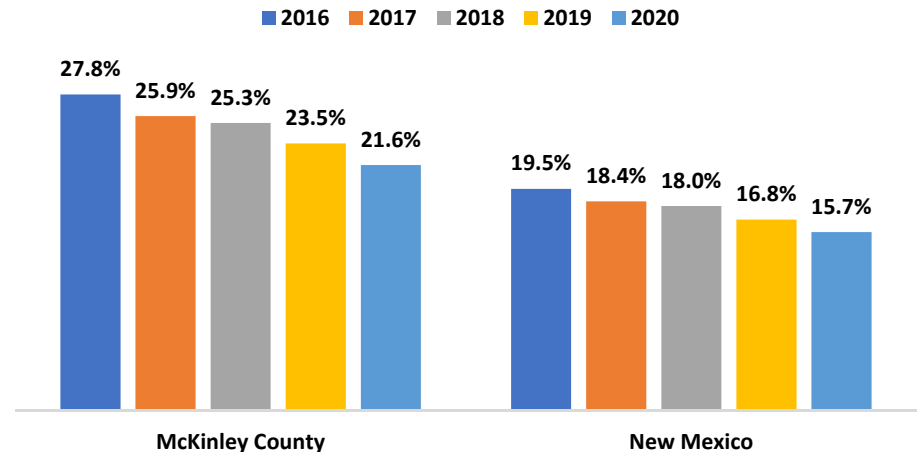
Poverty

- McKinley County (35.4%) has a higher percentage of families living below poverty as compared to the state (25.1%) (2021).
- Between 2016 and 2020, the percent of children (<18 years) living below poverty in McKinley County and the state decreased.
- McKinley County (21.6%) has a higher percentage of children (<18 years) living below poverty than the state (15.7%) (2020).

Families Below Poverty
2021



Children Living in Poverty



Source: Stratan Canvas Demographics Report, 2022.

Source: Small Area Income and Poverty Estimates (SAIPE), filtered for McKinley County, NM, https://www.census.gov/data-tools/demo/saie/#/?map_geoSelector=aa_c; data accessed March 10, 2022.

Children Living Below Poverty Definition: Estimated percentage of related children under age 18 living in families with incomes less than the federal poverty threshold.

Note: The 2022 Federal Poverty Guidelines define a household size of 4 as living below 100% of the federal poverty level if the household income is less than \$27,750, and less than 200% of the federal poverty level if the household income is less than \$55,500. Please see the appendix for the full 2022 Federal Poverty Guidelines.



Population Health

Food Insecurity

- According to Feeding America, an estimated 22.6% of McKinley County residents are food insecure as compared to 14.2% in New Mexico (2019).
- Additionally, 32.4% of the youth population (under 18 years of age) in McKinley County are food insecure, as compared to 22.0% in New Mexico (2019).
- The average meal cost in McKinley County (\$2.83) is lower than the average meal cost in New Mexico (\$2.95).

| Location | Overall Food Insecurity | Child Food Insecurity | Average Meal Cost |
|-----------------|-------------------------|-----------------------|-------------------|
| McKinley County | 22.6% | 32.4% | \$2.83 |
| New Mexico | 14.2% | 22.0% | \$2.95 |

Source: Feeding America, Map The Meal Gap: Data by County in Each State, filtered for McKinley County, NM, https://www.feedingamerica.org/research/map-the-meal-gap/by-county?_ga=2.33638371.33636223.1555016137-1895576297.1555016137&s_src=W194ORGSC; information accessed March 10, 2022.

Food Insecure Definition (Adult): Lack of access, at times, to enough food for an active, healthy life for all household members and limited or uncertain availability of nutritionally adequate foods.

Food Insecure Definition (Child): Those children living in households experiencing food insecurity.

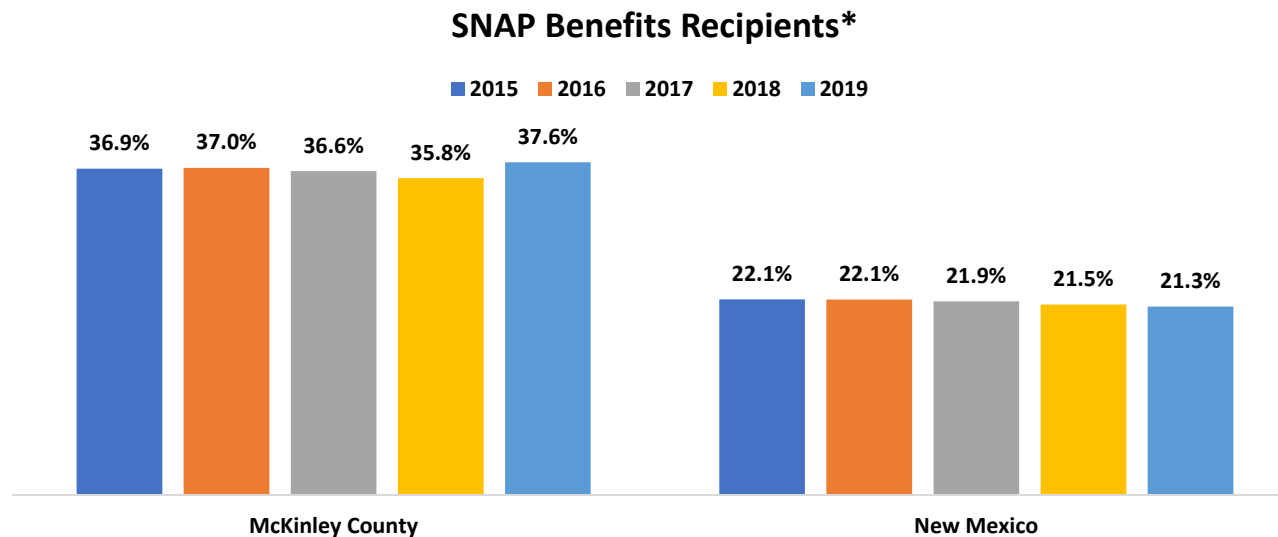
Average Meal Cost Definition: The average weekly dollar amount food-secure individuals report spending on food, as estimated in the Current Population Survey, divided by 21 (assuming three meals a day, seven days a week).



Population Health

Supplemental Nutrition Assistance Program (SNAP) Benefits

- Between 2015 and 2019, McKinley County maintained a higher percentage of recipients who qualified for Supplemental Nutrition Assistance Program (SNAP) benefits than the state. Additionally, the percentage of SNAP Benefit recipients in McKinley County overall increased between 2015 and 2019.
- In 2019, McKinley County (37.6%) had a higher percentage of recipients who qualified for SNAP benefits than the state (21.3%).



Source: SAIPE Model, United States Census Bureau, <https://www.census.gov/data/datasets/time-series/demo/saipe/model-tables.html>; data accessed March 10, 2022.

Source: County Population Totals: 2010-2019, United States Census Bureau, filtered for McKinley County, NM, https://www.census.gov/data/tables/time-series/demo/popest/2010s-counties-total.html#par_textimage_242301767; data access March 10, 2022.

*Percentage manually calculated based on estimated population numbers by county and state between 2015 and 2019 as provided by the United States Census Bureau.

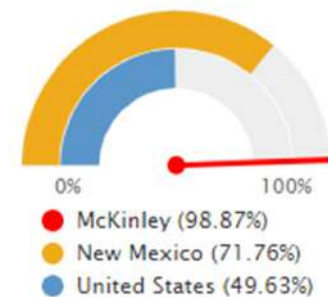


Population Health

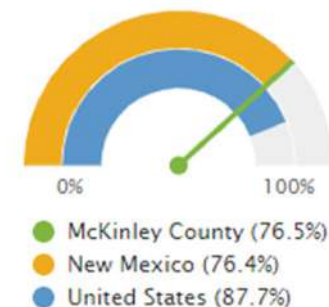
Children in the Study Area

- McKinley County (98.9%) has a higher percentage of public school students eligible for free or reduced price lunch than the state (71.8%) and the nation (49.6%) (2019-2020).
- McKinley County (76.5%) has a slightly higher high school graduation rate than the state (76.4%) and a lower rate than the nation (87.7%) (2018-2019).

Percentage of Students Eligible for Free or Reduced Price School Lunch



Adjusted Cohort Graduation Rate



Note: a green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the state.

Source: SparkMap, Health Indicator Report: logged in and filtered for McKinley County, NM, <https://sparkmap.org/report/>; data accessed March 9, 2022.
Eligible for Free/Reduced Price Lunch definition: Free or reduced price lunches are served to qualifying students in families with income between under 185 percent (reduced price) or under 130% (free lunch) of the US federal poverty threshold as part of the federal National School Lunch Program (NSLP).
Graduation Rate definition: receiving a high school diploma within four years.



HEALTH DATA OVERVIEW



Health Status

Data Methodology

- **The following information outlines specific health data:**
 - Mortality, chronic diseases and conditions, health behaviors, natality, mental health and healthcare access
- **Data Sources include, but are not limited to:**
 - New Mexico's Indicator-Based Information System (NM-IBIS)
 - Small Area Health Insurance Estimates (SAHIE)
 - SparkMap
 - The Behavioral Risk Factor Surveillance System (BRFSS)
 - The Behavioral Risk Factor Surveillance System (BRFSS) is the world's largest, on-going telephone health survey system, tracking health conditions and risk behaviors in the United States yearly since 1984. Currently, information is collected monthly in all 50 states, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, and Guam.
 - It is a state-based system of health surveys that collects information on health risk behaviors, preventive health practices, and health care access primarily related to chronic disease and injury. For many states, the BRFSS is the only available source of timely, accurate data on health-related behaviors.
 - States use BRFSS data to identify emerging health problems, establish and track health objectives, and develop and evaluate public health policies and programs. Many states also use BRFSS data to support health-related legislative efforts.
 - The Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute
 - United States Census Bureau
- **Data Levels:** Nationwide, state, and county level data

Health Status

County Health Rankings & Roadmaps – McKinley County, New Mexico

- The County Health Rankings rank 32 counties in New Mexico (1 being the best, 32 being the worst).
- Many factors go into these rankings. A few examples include:

Length of Life:

- Premature death

Quality of Life:

- Primary care providers
- Preventable hospital stays
- Mammography screening
- Flu vaccinations

Health Behaviors:

- Smoking
- Obesity
- Sexually transmitted infections
- Teen births

Physical Environment:

- Air pollution – particulate matter
- Drinking water violations
- Severe housing problems
- Long commute – driving alone

| 2021 County Health Rankings | McKinley County |
|-----------------------------|-----------------|
| Health Outcomes | 32 |
| LENGTH OF LIFE | 32 |
| QUALITY OF LIFE | 32 |
| Health Factors | 31 |
| HEALTH BEHAVIORS | 32 |
| CLINICAL CARE | 29 |
| SOCIAL & ECONOMIC FACTORS | 31 |
| PHYSICAL ENVIRONMENT | 25 |

Note: Green represents the best ranking for the county, and red represents the worst ranking.

Source: County Health Rankings and Roadmaps; www.countyhealthrankings.org; data accessed March 10, 2022.

Note: Please see the appendix for full methodology.

Note: County Health Rankings ranks 32 of the 33 counties in New Mexico.



Health Status

Mortality – Leading Causes of Death (2016-2020)

| Rank | McKinley County | New Mexico |
|------|--|--|
| 1 | Malignant neoplasms (C00-C97) | Diseases of heart (I00-I09,I11,I13,I20-I51) |
| 2 | Diseases of heart (I00-I09,I11,I13,I20-I51) | Malignant neoplasms (C00-C97) |
| 3 | Accidents (unintentional injuries) (V01-X59,Y85-Y86) | Accidents (unintentional injuries) (V01-X59,Y85-Y86) |
| 4 | COVID-19 (U07.1) | Chronic lower respiratory diseases (J40-J47) |
| 5 | Chronic liver disease and cirrhosis (K70,K73-K74) | Cerebrovascular diseases (I60-I69) |
| 6 | Diabetes mellitus (E10-E14) | Chronic liver disease and cirrhosis (K70,K73-K74) |
| 7 | Cerebrovascular diseases (I60-I69) | Diabetes mellitus (E10-E14) |
| 8 | Influenza and pneumonia (J09-J18) | Intentional self-harm (suicide) (*U03,X60-X84,Y87.0) |
| 9 | Intentional self-harm (suicide) (*U03,X60-X84,Y87.0) | Alzheimer's disease (G30) |
| 10 | Chronic lower respiratory diseases (J40-J47) | COVID-19 (U07.1) |











Source: Centers for Disease Control and Prevention, National Center for Health Statistics, <http://wonder.cdc.gov/ucd-icd10.html>; data accessed March 8, 2022.

Note: Age Adjustment Uses 2000 Standard Population. Rates calculated with small numbers are unreliable and should be used cautiously.



Health Status

Mortality – Leading Causes of Death Rates (2016-2020)

| Disease | McKinley County | New Mexico |
|--|---|------------|
| Malignant neoplasms (C00-C97) |  144.1 | 135.0 |
| Diseases of heart (I00-I09,I11,I13,I20-I51) |  138.5 | 152.3 |
| Accidents (unintentional injuries) (V01-X59,Y85-Y86) |  131.0 | 74.1 |
| COVID-19 (U07.1) |  105.6 | 22.1 |
| Chronic liver disease and cirrhosis (K70,K73-K74) |  93.9 | 27.4 |
| Diabetes mellitus (E10-E14) |  66.3 | 26.9 |
| Cerebrovascular diseases (I60-I69) |  38.1 | 33.9 |
| Influenza and pneumonia (J09-J18) |  31.8 | 13.8 |
| Intentional self-harm (suicide) (*U03,X60-X84,Y87.0) |  30.5 | 23.8 |
| Chronic lower respiratory diseases (J40-J47) |  27.2 | 42.6 |



indicates that the county's rate is lower than the state's rate for that disease category.



indicates that the county's rate is higher than the state's rate for that disease category.

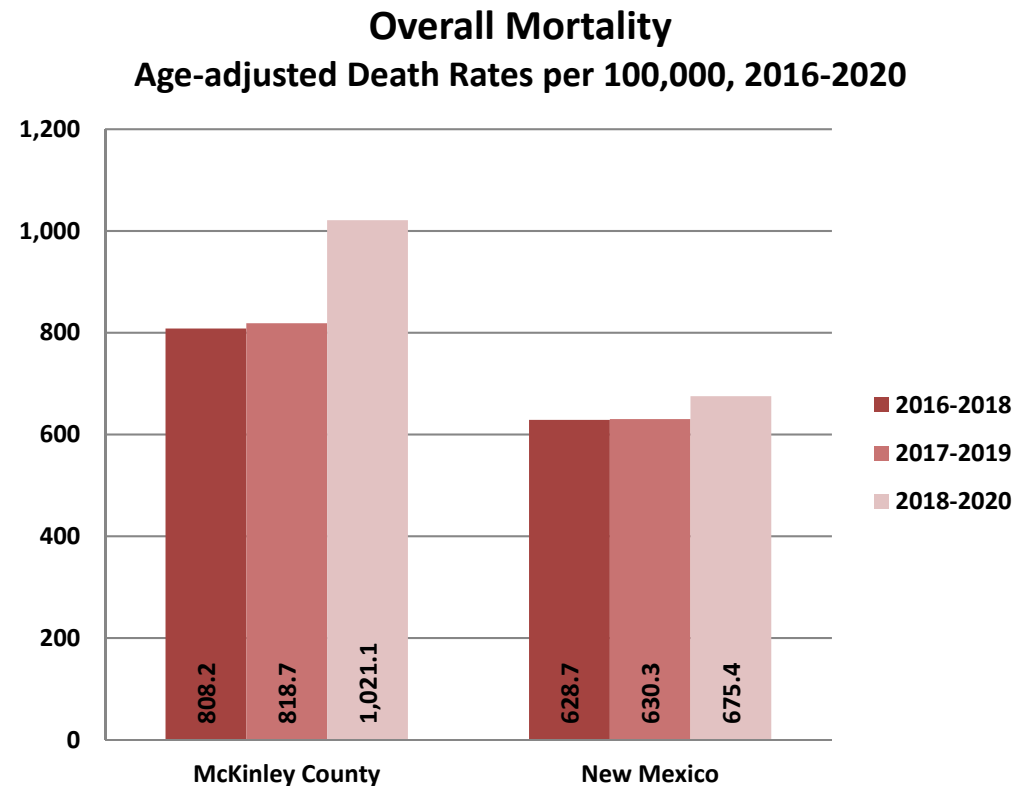
Source: Centers for Disease Control and Prevention, National Center for Health Statistics, <http://wonder.cdc.gov/ucd-icd10.html>; data accessed March 8, 2022.

Note: Age Adjustment Uses 2000 Standard Population. Rates calculated with small numbers are unreliable and should be used cautiously.

Health Status

Mortality – Overall

- Overall mortality rates in McKinley County remained higher than the state between 2016 and 2020.
- Overall mortality rates in McKinley County and the state increased between 2016 and 2020.
- In 2018-2020, the overall mortality rate in McKinley County (1,021.1 per 100,000) was higher than the state (675.4 per 100,000).



| LOCATION | 2016-2018 | | 2017-2019 | | 2018-2020 | | 2016-2020 | |
|-----------------|-----------|-------------------------|-----------|-------------------------|-----------|-------------------------|-----------|-------------------------|
| | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE |
| McKinley County | 1,629 | 808.2 | 1,662 | 818.7 | 2,113 | 1,021.1 | 3,187 | 938.2 |
| New Mexico | 46,923 | 628.7 | 47,846 | 630.3 | 52,217 | 675.4 | 83,226 | 657.8 |

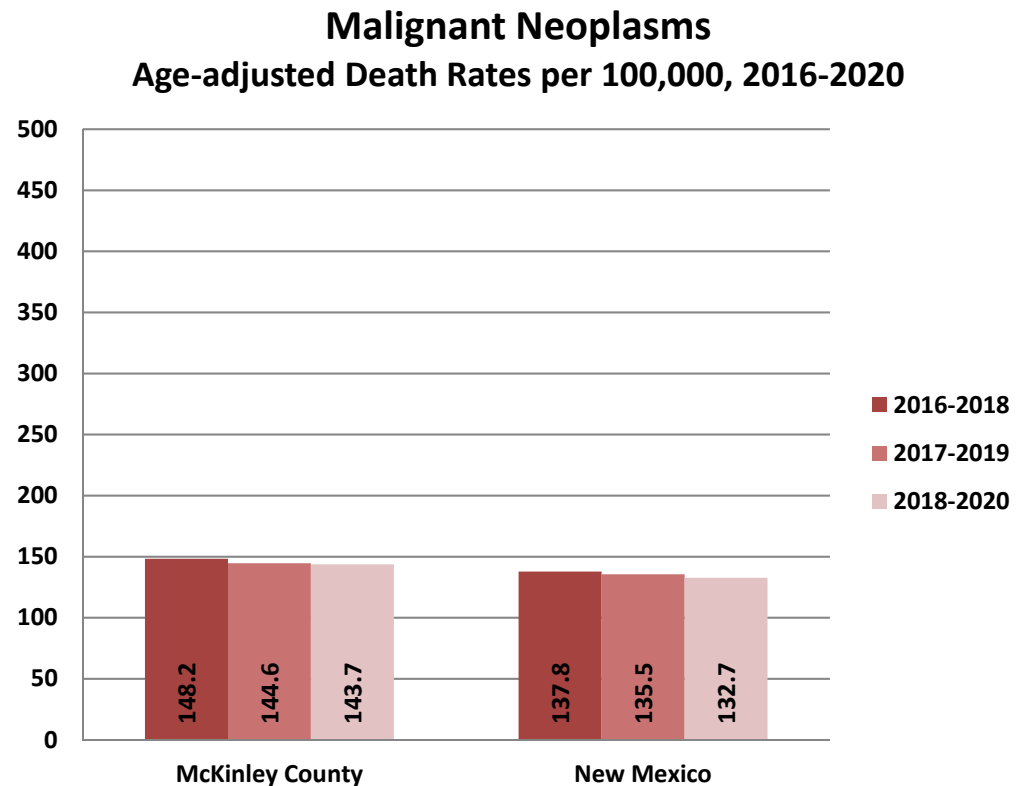
Source: Centers for Disease Control and Prevention, National Center for Health Statistics, <http://wonder.cdc.gov/ucd-icd10.html>; data accessed March 8, 2022.

Note: Age Adjustment Uses 2000 Standard Population. Rates calculated with small numbers are unreliable and should be used cautiously. Data has been pulled in 3-year sets of moving averages for purposes of statistical reliability.

Health Status

Mortality – Malignant Neoplasms

- Cancer is the leading cause of death in McKinley County and the second leading cause of death in the state (2016-2020).
- Between 2016 and 2020, cancer mortality rates decreased in McKinley County and the state.
- In 2018-2020, the cancer mortality rate in McKinley County (143.7 per 100,000) was higher than the state rate (132.7 per 100,000).



| LOCATION | 2016-2018 | | 2017-2019 | | 2018-2020 | | 2016-2020 | |
|-----------------|-----------|-------------------------|-----------|-------------------------|-----------|-------------------------|-----------|-------------------------|
| | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE |
| McKinley County | 305 | 148.2 | 304 | 144.6 | 301 | 143.7 | 498 | 144.1 |
| New Mexico | 10,852 | 137.8 | 10,906 | 135.5 | 10,935 | 132.7 | 18,115 | 135.0 |

Source: Centers for Disease Control and Prevention, National Center for Health Statistics, <http://wonder.cdc.gov/ucd-icd10.html>; data accessed March 8, 2022.

Note: Age Adjustment Uses 2000 Standard Population. Rates calculated with small numbers are unreliable and should be used cautiously. Data has been pulled in 3-year sets of moving averages for purposes of statistical reliability.

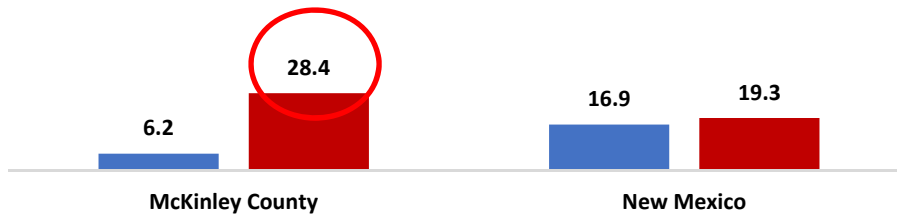
Health Status

Cancer Incident & Mortality by Type

Breast Cancer (Female)

Age-adjusted Incidence & Mortality Rates per 100,000
2018

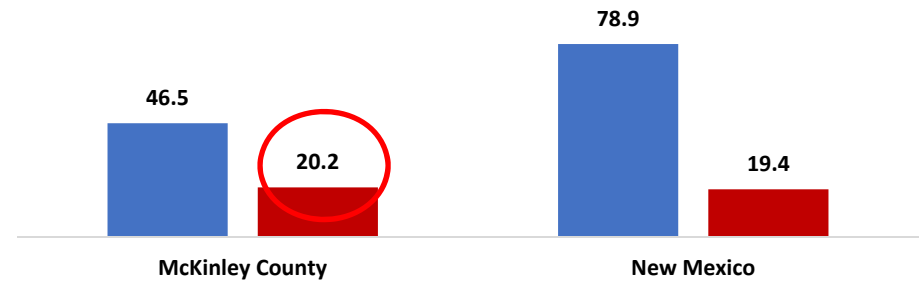
■ Incidence ■ Mortality



Prostate Cancer (Male)

Age-adjusted Incidence & Mortality Rates per 100,000
2018

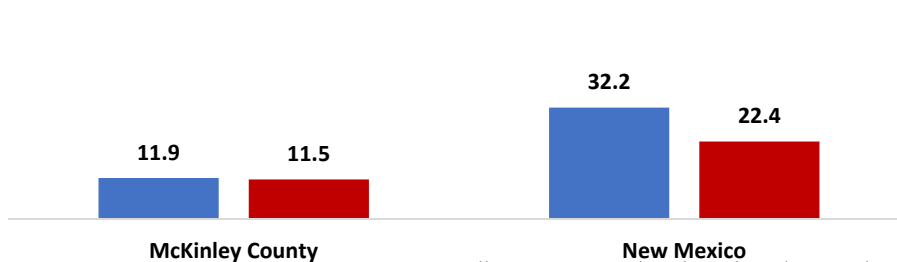
■ Incidence ■ Mortality



Lung & Bronchus Cancer

Age-adjusted Incidence & Mortality Rates per 100,000
2018

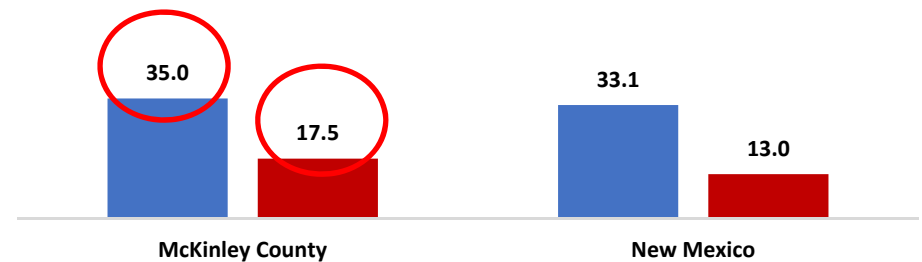
■ Incidence ■ Mortality



Colon & Rectum Cancer

Age-adjusted Incidence & Mortality Rates per 100,000
2018

■ Incidence ■ Mortality



Source: New Mexico's Indicator-Based Information System (NM-IBIS), <https://ibis.health.state.nm.us/query/builder/cancer/CancerCnty/AgeRate.html>; data accessed March 10, 2022.

Source: New Mexico's Indicator-Based Information System (NM-IBIS), <https://ibis.health.state.nm.us/query/builder/mort/MortCnty/AgeRate.html>; data accessed March 10, 2022.

Note: All rates are per 100,000. Rates are age-adjusted to the 2000 U.S. Standard Population.

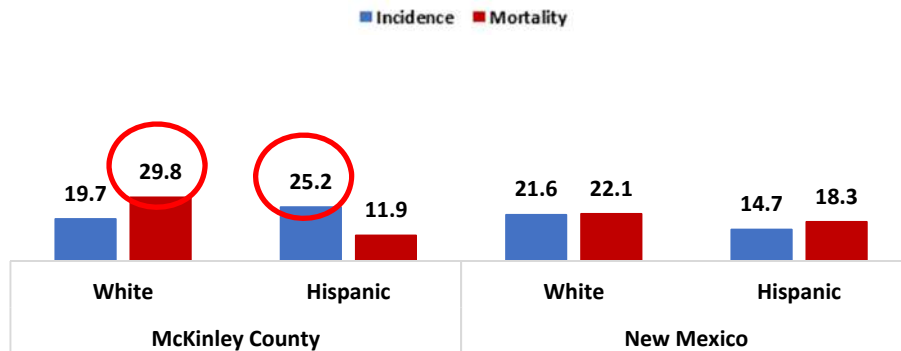


Health Status

Cancer Incidence & Mortality by Type by Race/Ethnicity

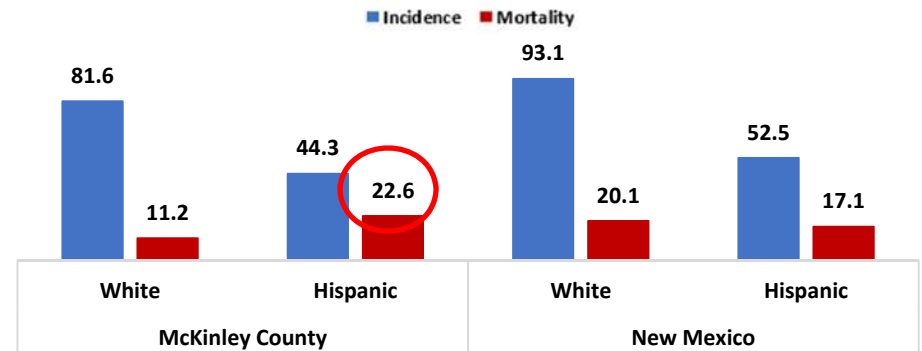
Breast Cancer (Female)

Age-Adjusted Incidence & Mortality Rates per 100,000,
2017-2018



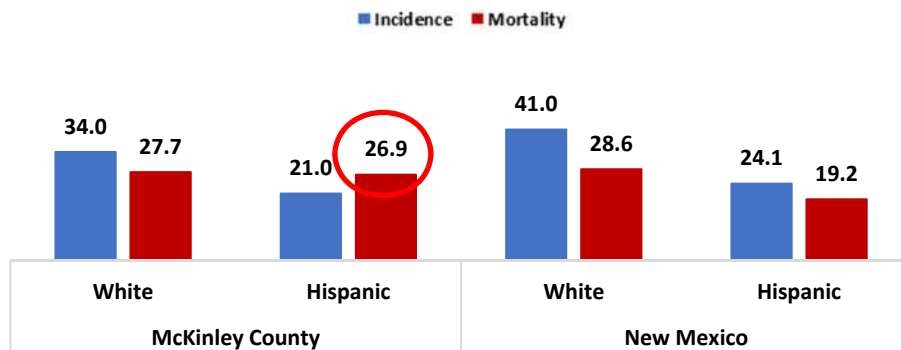
Prostate Cancer (Male)

Age-Adjusted Incidence & Mortality Rates per 100,000,
2017-2018



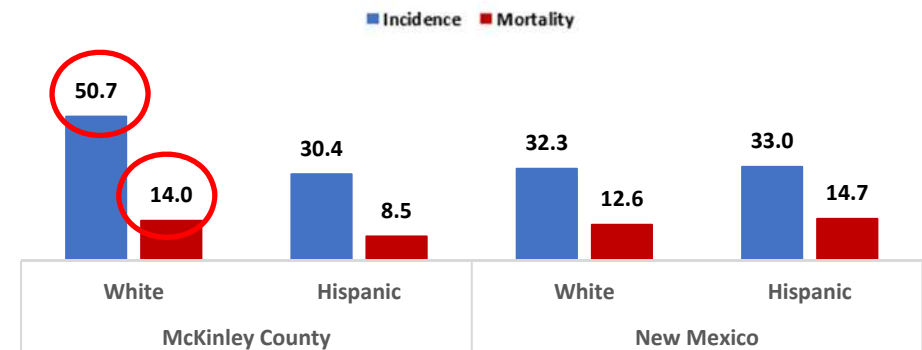
Lung & Bronchus

Age-Adjusted Incidence & Mortality Rates per 100,000,
2017-2018



Colon & Rectum

Age-Adjusted Incidence & Mortality Rates per 100,000,
2017-2018



Source: New Mexico's Indicator-Based Information System (NM-IBIS), <https://ibis.health.state.nm.us/query/builder/cancer/CancerCnty/AgeRate.html>; data accessed March 10, 2022.

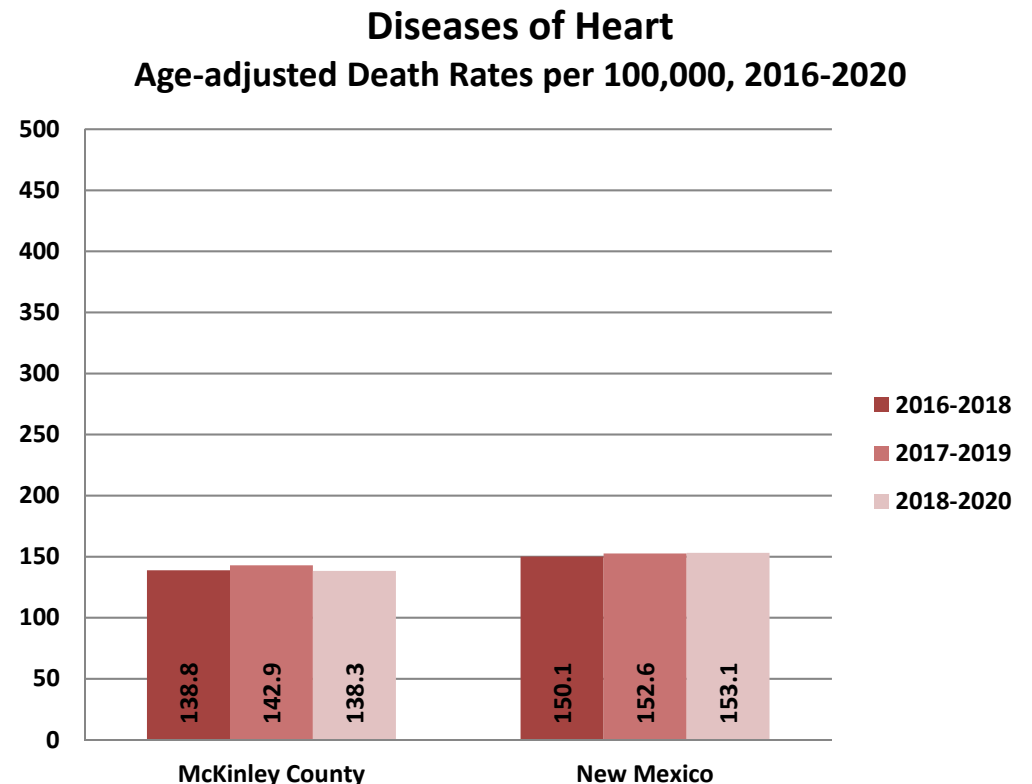
Source: New Mexico's Indicator-Based Information System (NM-IBIS), <https://ibis.health.state.nm.us/query/builder/mort/MortCnty/AgeRate.html>; data accessed March 10, 2022.

Note: All rates are per 100,000. Rates are age-adjusted to the 2000 U.S. Standard Population.

Health Status

Mortality – Diseases of the Heart

- Heart disease is the second leading cause of death in McKinley County and the leading cause of death in the state (2016-2020).
- Between 2016 and 2020, heart disease mortality rates slightly decreased in McKinley County while rates in the state increased.
- In 2018-2020, the heart disease mortality rate in McKinley County (138.3 per 100,000) was lower than the state rate (153.1 per 100,000).



| LOCATION | 2016-2018 | | 2017-2019 | | 2018-2020 | | 2016-2020 | |
|-----------------|-----------|-------------------------|-----------|-------------------------|-----------|-------------------------|-----------|-------------------------|
| | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE |
| McKinley County | 276 | 138.8 | 288 | 142.9 | 288 | 138.3 | 470 | 138.5 |
| New Mexico | 11,631 | 150.1 | 12,076 | 152.6 | 12,399 | 153.1 | 20,095 | 152.3 |

Source: Centers for Disease Control and Prevention, National Center for Health Statistics, <http://wonder.cdc.gov/ucd-icd10.html>; data accessed March 8, 2022.

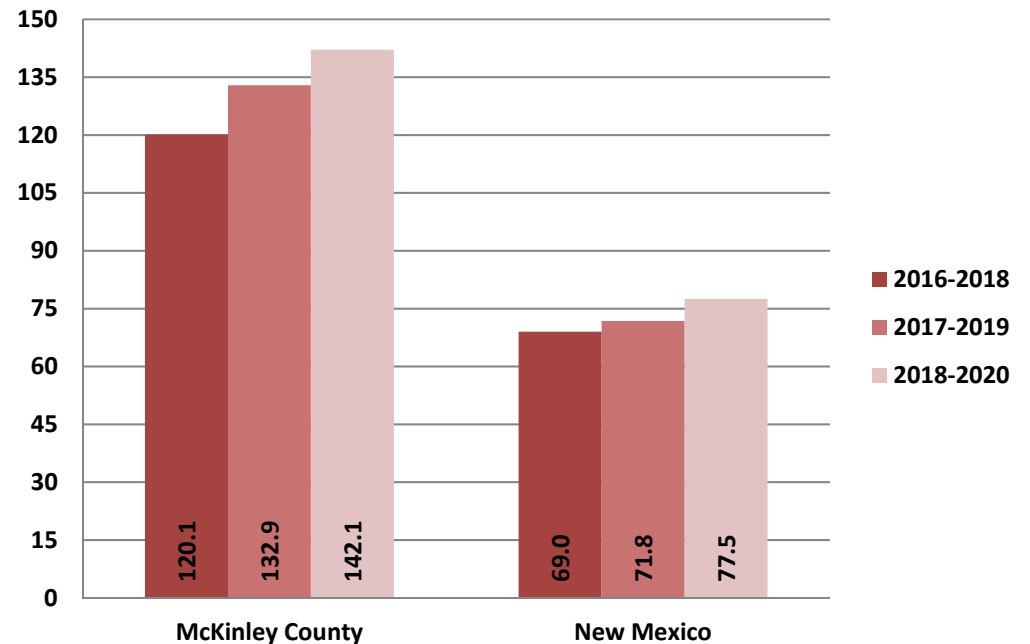
Note: Age Adjustment Uses 2000 Standard Population. Rates calculated with small numbers are unreliable and should be used cautiously. Data has been pulled in 3-year sets of moving averages for purposes of statistical reliability.

Health Status

Mortality – Accidents

Accidents (Unintentional Injuries)

Age-adjusted Death Rates per 100,000, 2016-2020



- Fatal accidents are the third leading cause of death in McKinley County and the state (2016-2020).
- Between 2016 and 2020, fatal accident rates increased in McKinley County and the state.
- In 2018-2020, the fatal accidents mortality rate in McKinley County (142.1 per 100,000) was higher than the state rate (77.5 per 100,000).
- The leading cause of fatal accidents in McKinley County is due to motor vehicle accidents (2018-2020).

| LOCATION | 2016-2018 | | 2017-2019 | | 2018-2020 | | 2016-2020 | |
|-----------------|-----------|-------------------------|-----------|-------------------------|-----------|-------------------------|-----------|-------------------------|
| | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE |
| McKinley County | 247 | 120.1 | 268 | 132.9 | 290 | 142.1 | 444 | 131.0 |
| New Mexico | 4,461 | 69.0 | 4,661 | 71.8 | 5,054 | 77.5 | 8,001 | 74.1 |

Source: Centers for Disease Control and Prevention, National Center for Health Statistics, <http://wonder.cdc.gov/ucd-icd10.html>; data accessed March 8, 2022.

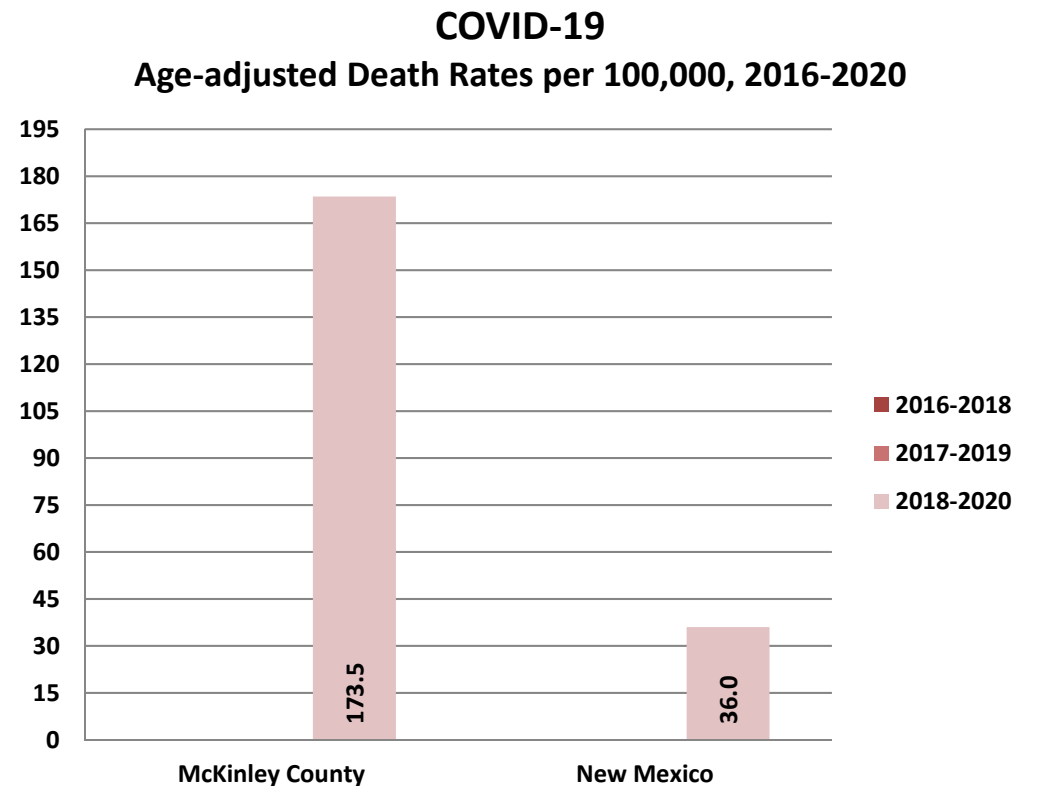
Note: Age Adjustment Uses 2000 Standard Population. Rates calculated with small numbers are unreliable and should be used cautiously. Data has been pulled in 3-year sets of moving averages for purposes of statistical reliability.

Accident mortality rates include: motor vehicle crashes, other land transport accidents, water transport accidents, air and space transport accidents, falls, accidental shootings, drownings, fire and smoke exposures, poisonings, suffocations, and all other unintentional injuries.

Health Status

Mortality – COVID-19

- COVID-19 is the fourth leading cause of death in McKinley County and the tenth leading cause of death in the state (2016-2020).
- In 2018-2020, the COVID-19 mortality rate in McKinley County (173.5 per 100,000) was higher than the state (36.0 per 100,000).



| LOCATION | 2016-2018 | | 2017-2019 | | 2018-2020 | | 2016-2020 | |
|-----------------|-----------|-------------------------|-----------|-------------------------|-----------|-------------------------|-----------|-------------------------|
| | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE |
| McKinley County | | | | | 374 | 173.5 | 374 | 105.6 |
| New Mexico | | | | | 2,841 | 36.0 | 2,841 | 22.1 |

Source: Centers for Disease Control and Prevention, National Center for Health Statistics, <http://wonder.cdc.gov/ucd-icd10.html>; data accessed March 8, 2022.

Note: Age Adjustment Uses 2000 Standard Population. Rates calculated with small numbers are unreliable and should be used cautiously. Data has been pulled in 3-year sets of moving averages for purposes of statistical reliability.

Health Status

COVID-19

- As of April 19, 2022, the percent of the population that has received their first COVID-19 vaccination dose in McKinley County (99.0%) is higher than the state (74.9%).
- As of April 19, 2022, the percent of the population that is fully vaccinated in McKinley County (97.7%) is higher than the state (66.7%).

| Location | % with First Dose Administered | % Fully Vaccinated |
|-----------------|--------------------------------|--------------------|
| McKinley County | 99.0% | 97.7% |
| New Mexico | 74.9% | 66.7% |

Source: New Mexico Department of Health and Environment, New Mexico COVID-19 Vaccination Rates, <https://www.NewMexicovaccine.gov/158/Data>; information accessed April 21, 2022.

Note: Vaccine coverage for at least 1 dose includes all individuals who have received their first dose of COVID-19 vaccine. Vaccine coverage for series completion includes all individuals who have completed 2 doses of Pfizer-BioNTech or Moderna vaccine or 1 dose of Johnson and Johnson/Janssen. Percentages are based on the population of New Mexico aged 18 and over.

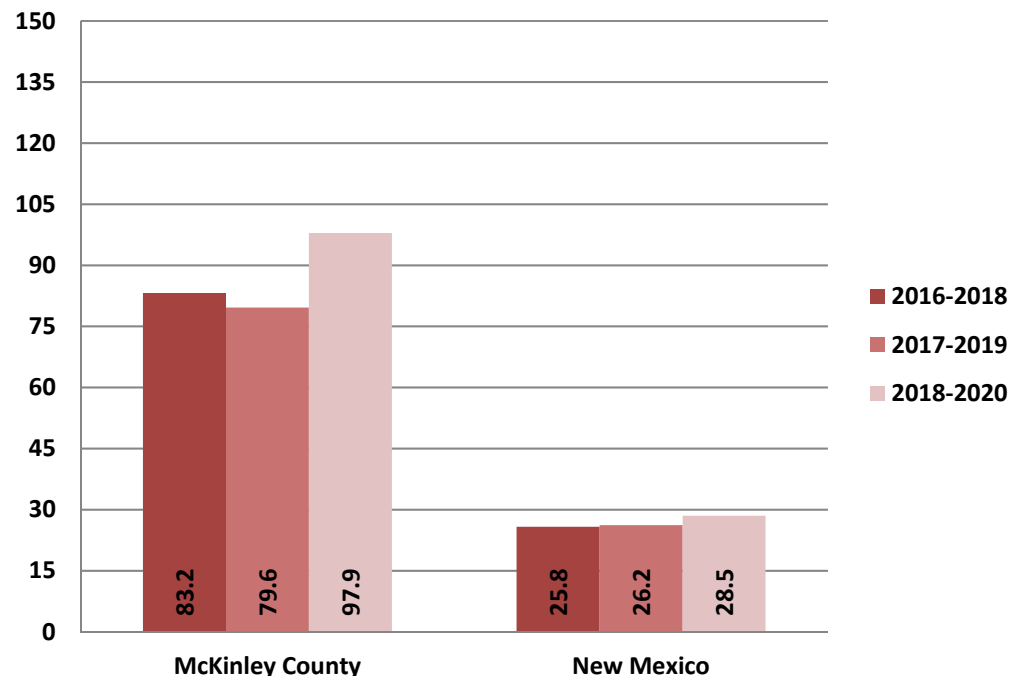


Health Status

Mortality – Chronic Liver Disease and Cirrhosis

- Chronic liver disease and cirrhosis is the fifth leading cause of death in McKinley County and the sixth leading cause of death in the state (2016-2020).
- Between 2016 and 2020, chronic liver disease and cirrhosis mortality rates increased in McKinley County and the state.
- In 2018-2020, the chronic liver disease and cirrhosis mortality rate in McKinley County (97.9 per 100,000) was higher than the state rate (28.5 per 100,000).

Chronic Liver Disease and Cirrhosis
Age-adjusted Death Rates per 100,000, 2016-2020



| LOCATION | 2016-2018 | | 2017-2019 | | 2018-2020 | | 2016-2020 | |
|-----------------|-----------|-------------------------|-----------|-------------------------|-----------|-------------------------|-----------|-------------------------|
| | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE |
| McKinley County | 166 | 83.2 | 158 | 79.6 | 194 | 97.9 | 309 | 93.9 |
| New Mexico | 1,768 | 25.8 | 1,790 | 26.2 | 1,938 | 28.5 | 3,115 | 27.4 |

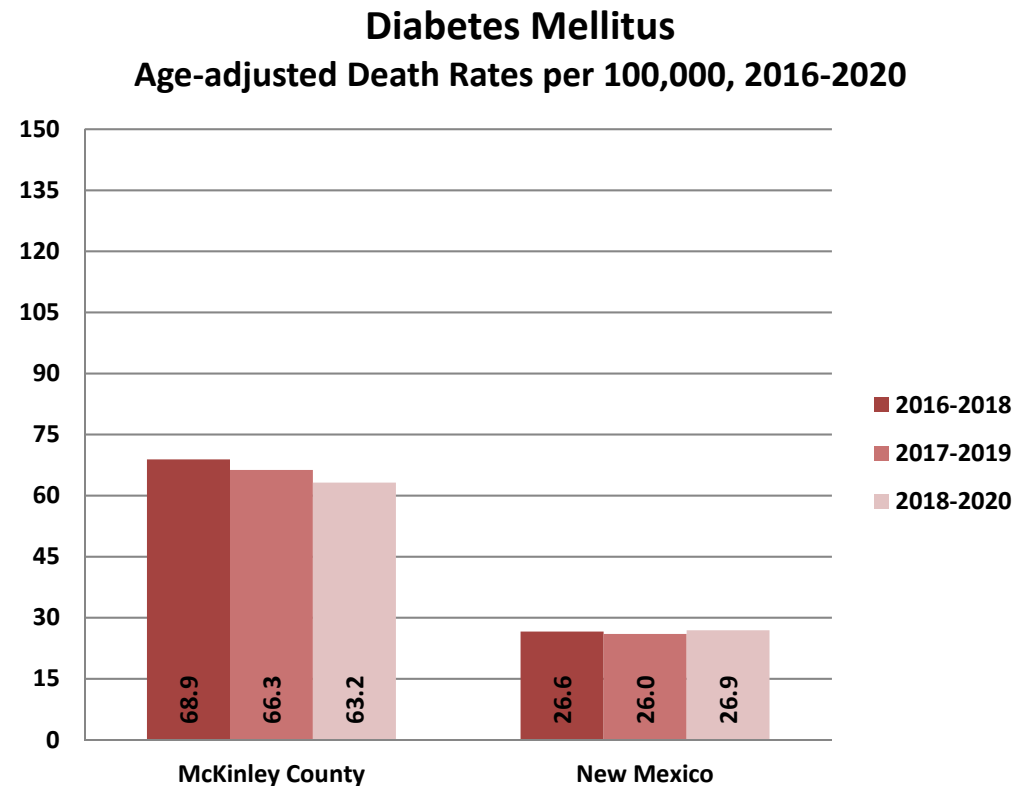
Source: Centers for Disease Control and Prevention, National Center for Health Statistics, <http://wonder.cdc.gov/ucd-icd10.html>; data accessed March 8, 2022.

Note: Age Adjustment Uses 2000 Standard Population. Rates calculated with small numbers are unreliable and should be used cautiously. Data has been pulled in 3-year sets of moving averages for purposes of statistical reliability.

Health Status

Mortality – Diabetes Mellitus

- Diabetes mellitus is the sixth leading cause of death in McKinley County and the seventh leading cause of death in the state (2016-2020).
- Between 2016 and 2020, diabetes mortality rates decreased in McKinley County, while rates in the state slightly increased.
- In 2018-2020, the diabetes mellitus mortality rate in McKinley County (63.2 per 100,000) was higher than the state rate (26.9 per 100,000).



| LOCATION | 2016-2018 | | 2017-2019 | | 2018-2020 | | 2016-2020 | |
|-----------------|-----------|-------------------------|-----------|-------------------------|-----------|-------------------------|-----------|-------------------------|
| | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE |
| McKinley County | 138 | 68.9 | 133 | 66.3 | 130 | 63.2 | 224 | 66.3 |
| New Mexico | 2,036 | 26.6 | 2,031 | 26.0 | 2,151 | 26.9 | 3,502 | 26.9 |

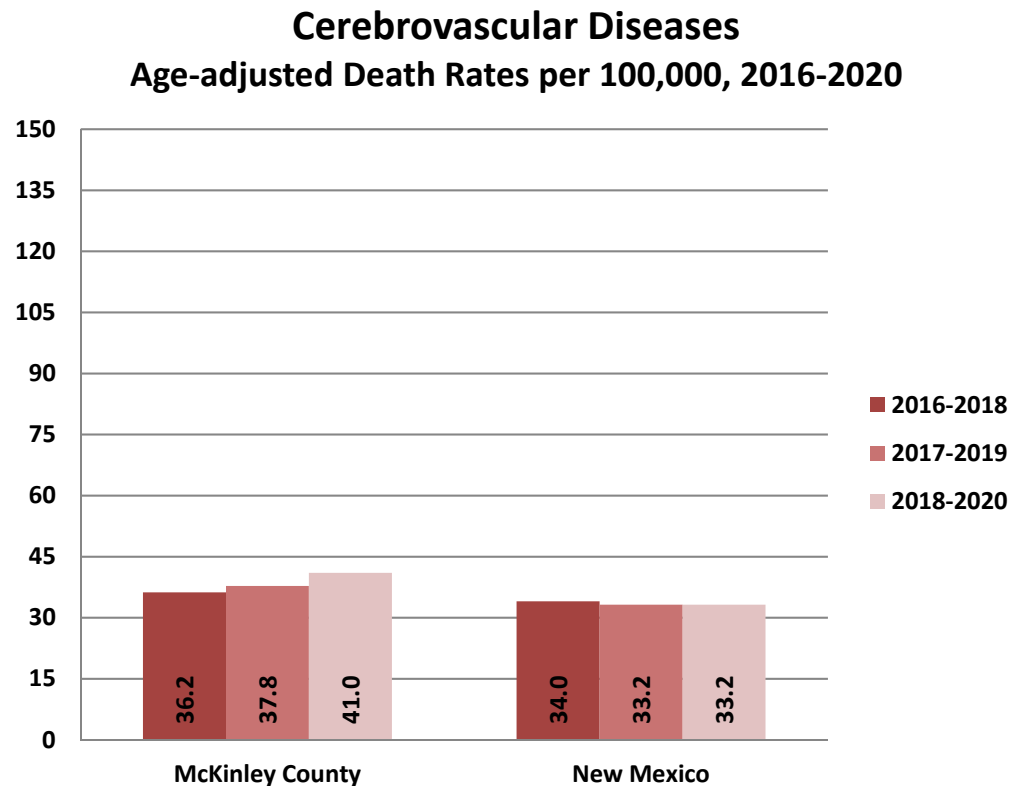
Source: Centers for Disease Control and Prevention, National Center for Health Statistics, <http://wonder.cdc.gov/ucd-icd10.html>; data accessed March 8, 2022.

Note: Age Adjustment Uses 2000 Standard Population. Rates calculated with small numbers are unreliable and should be used cautiously. Data has been pulled in 3-year sets of moving averages for purposes of statistical reliability.

Health Status

Mortality – Cerebrovascular Disease

- Cerebrovascular disease is the seventh leading cause of death in McKinley County and the fifth leading cause of death in the state (2016-2020).
- Between 2016 and 2020, cerebrovascular disease mortality rates in McKinley County increased, while rates in the state slightly decreased.
- In 2018-2020, the cerebrovascular disease mortality rate in McKinley County (41.0 per 100,000) was higher than the state rate (33.2 per 100,000).



| LOCATION | 2016-2018 | | 2017-2019 | | 2018-2020 | | 2016-2020 | |
|-----------------|-----------|-------------------------|-----------|-------------------------|-----------|-------------------------|-----------|-------------------------|
| | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE |
| McKinley County | 70 | 36.2 | 75 | 37.8 | 83 | 41.0 | 125 | 38.1 |
| New Mexico | 2,601 | 34.0 | 2,602 | 33.2 | 2,658 | 33.2 | 4,421 | 33.9 |

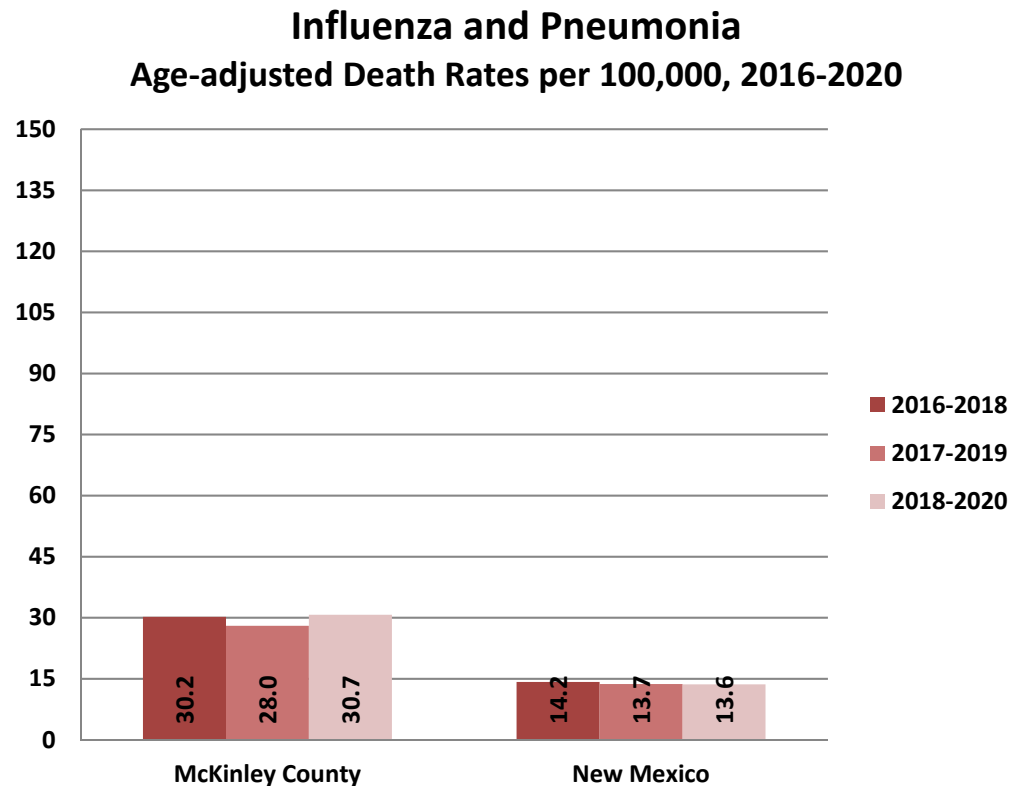
Source: Centers for Disease Control and Prevention, National Center for Health Statistics, <http://wonder.cdc.gov/ucd-icd10.html>; data accessed March 8, 2022.

Note: Age Adjustment Uses 2000 Standard Population. Rates calculated with small numbers are unreliable and should be used cautiously. Data has been pulled in 3-year sets of moving averages for purposes of statistical reliability.

Health Status

Mortality – Influenza and Pneumonia

- Influenza and pneumonia is the eighth leading cause of death in McKinley County and is not a leading cause of death in the state (2016-2020).
- Between 2016 and 2020, influenza and pneumonia mortality rates slightly increased in McKinley County, while rates in the state slightly decreased.
- In 2018-2020, the influenza and pneumonia mortality rate in McKinley County (30.7 per 100,000) was higher than the state rate (13.6 per 100,000).



| LOCATION | 2016-2018 | | 2017-2019 | | 2018-2020 | | 2016-2020 | |
|-----------------|-----------|-------------------------|-----------|-------------------------|-----------|-------------------------|-----------|-------------------------|
| | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE |
| McKinley County | 60 | 30.2 | 57 | 28.0 | 63 | 30.7 | 106 | 31.8 |
| New Mexico | 1,056 | 14.2 | 1,050 | 13.7 | 1,068 | 13.6 | 1,759 | 13.8 |

Source: Centers for Disease Control and Prevention, National Center for Health Statistics, <http://wonder.cdc.gov/ucd-icd10.html>; data accessed March 8, 2022.

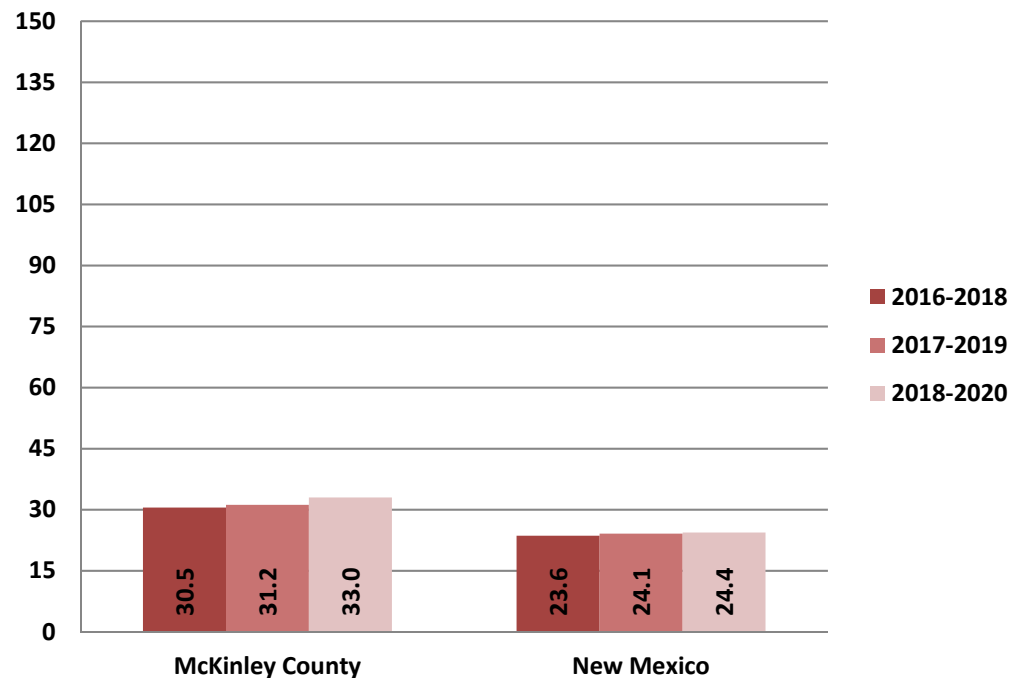
Note: Age Adjustment Uses 2000 Standard Population. Rates calculated with small numbers are unreliable and should be used cautiously. Data has been pulled in 3-year sets of moving averages for purposes of statistical reliability.

Health Status

Mortality – Intentional Self-Harm (Suicide)

- Intentional self-harm (suicide) is the ninth leading cause of death in McKinley County and the eighth leading cause of death in the state (2016-2020).
- Between 2016 and 2020, intentional self-harm (suicide) mortality rates increased in McKinley County and the state.
- In 2018-2020, the intentional self-harm (suicide) mortality rate in McKinley County (33.0 per 100,000) was higher than the state rate (24.4 per 100,000).

Intentional Self-Harm (Suicide)
Age-adjusted Death Rates per 100,000, 2016-2020



| LOCATION | 2016-2018 | | 2017-2019 | | 2018-2020 | | 2016-2020 | |
|-----------------|-----------|-------------------------|-----------|-------------------------|-----------|-------------------------|-----------|-------------------------|
| | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE |
| McKinley County | 63 | 30.5 | 64 | 31.2 | 68 | 33.0 | 105 | 30.5 |
| New Mexico | 1,498 | 23.6 | 1,540 | 24.1 | 1,565 | 24.4 | 2,527 | 23.8 |

Source: Centers for Disease Control and Prevention, National Center for Health Statistics, <http://wonder.cdc.gov/ucd-icd10.html>; data accessed March 8, 2022.

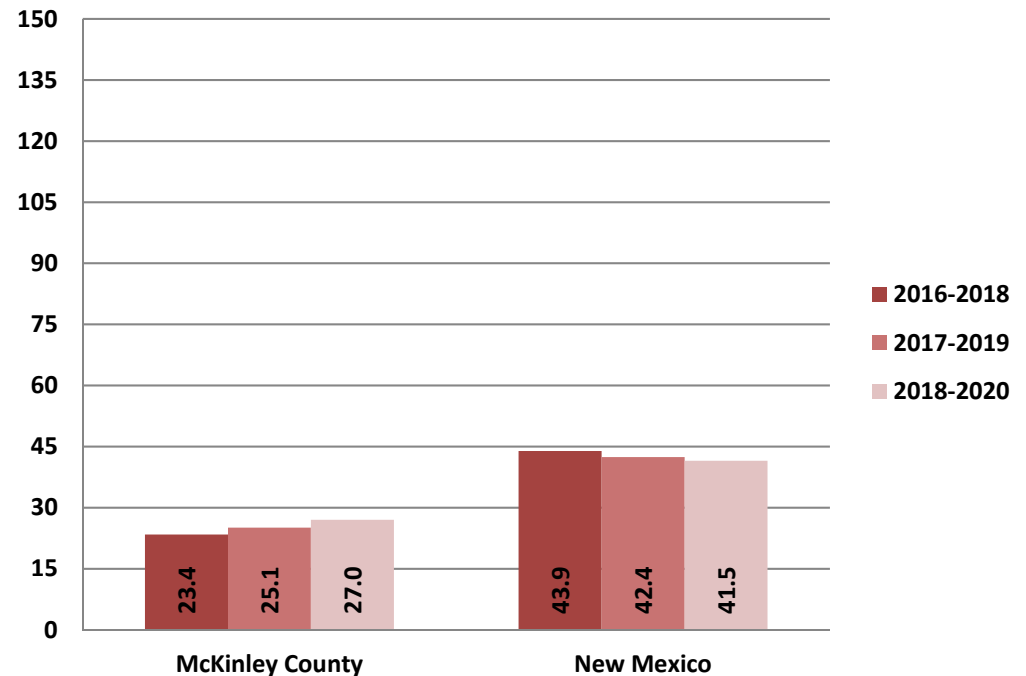
Note: Age Adjustment Uses 2000 Standard Population. Rates calculated with small numbers are unreliable and should be used cautiously. Data has been pulled in 3-year sets of moving averages for purposes of statistical reliability.

Health Status

Mortality – Chronic Lower Respiratory Disease

- Chronic lower respiratory disease (CLRD) is the tenth leading cause of death in McKinley County and the fourth leading cause of death in the state (2016-2020).
- Between 2016 and 2020, CLRD mortality rates increased in McKinley County, while rates decreased in the state.
- In 2018-2020, the CLRD mortality rate in McKinley County (27.0 per 100,000) was lower than the state rate (41.5 per 100,000).

Chronic Lower Respiratory Diseases
Age-adjusted Death Rates per 100,000, 2016-2020



| LOCATION | 2016-2018 | | 2017-2019 | | 2018-2020 | | 2016-2020 | |
|-----------------|-----------|-------------------------|-----------|-------------------------|-----------|-------------------------|-----------|-------------------------|
| | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE | DEATHS | AGE-ADJUSTED DEATH RATE |
| McKinley County | 46 | 23.4 | 51 | 25.1 | 54 | 27.0 | 90 | 27.2 |
| New Mexico | 3,434 | 43.9 | 3,408 | 42.4 | 3,426 | 41.5 | 5,700 | 42.6 |

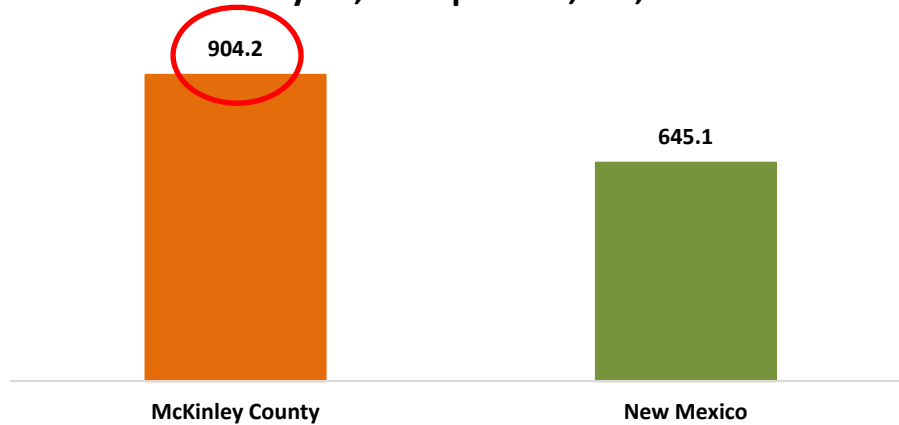
Source: Centers for Disease Control and Prevention, National Center for Health Statistics, <http://wonder.cdc.gov/ucd-icd10.html>; data accessed March 8, 2022.

Note: Age Adjustment Uses 2000 Standard Population. Rates calculated with small numbers are unreliable and should be used cautiously. Data has been pulled in 3-year sets of moving averages for purposes of statistical reliability.

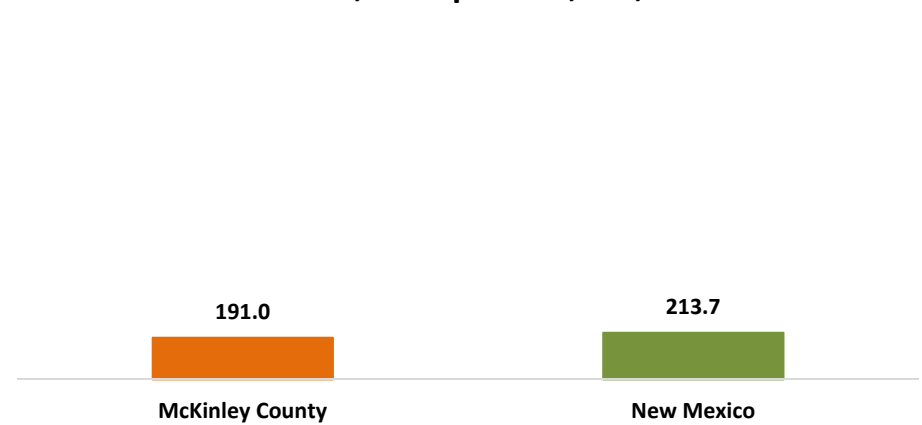
Health Status

Communicable Diseases – Chlamydia, Gonorrhea, Syphilis and HIV

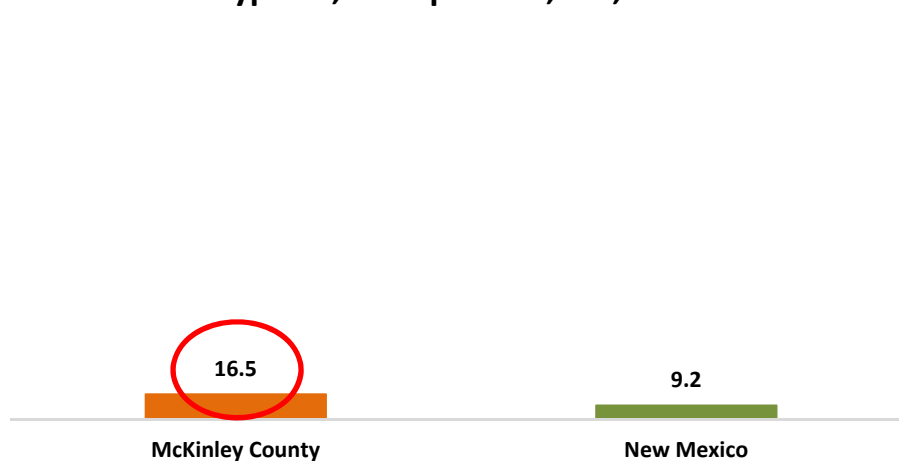
Chlamydia, Rate per 100,000, 2017



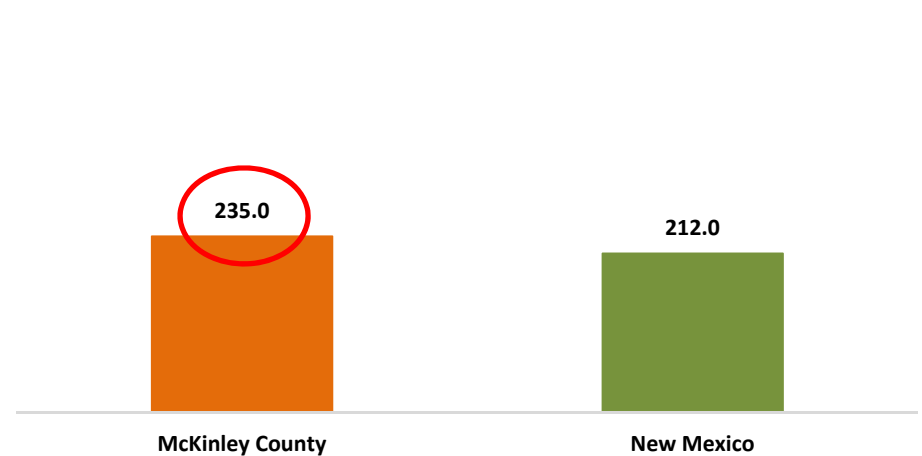
Gonorrhea, Rate per 100,000, 2017



Syphilis, Rate per 100,000, 2017



HIV (Living with HIV), Rate per 100,000, 2019



Source: New Mexico's Indicator-Based Information System (NM-IBIS), <https://ibis.health.state.nm.us/topic/healthoutcomes/InfectiousDisease.html>; data accessed on March 9, 2022.

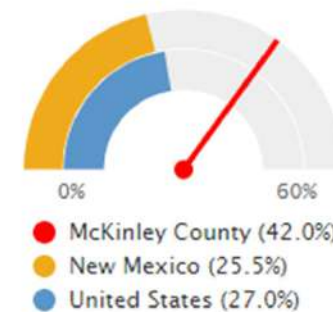
Source: AIDSVu, Interactive Map, <https://map.aidsvu.org/map>; data accessed on March 9, 2022.

Health Status

Chronic Conditions - Diabetes

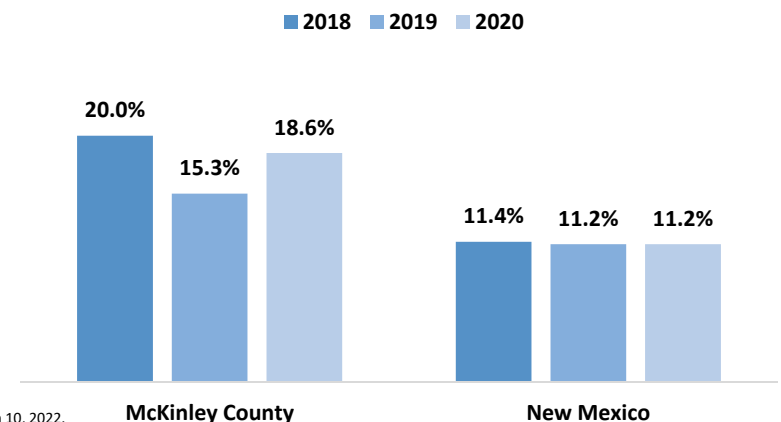
- In 2018, the percentage of **Medicare Beneficiaries** with diabetes in McKinley County (42.0%) was higher than the state (25.5%) and national (27.0%) rates.
- Between 2018 and 2020, diabetes prevalence rates in adults (age 18+) in McKinley County and the state decreased.
- In 2020, McKinley County (18.6%) had a higher percent of adults (age 18+) who had ever been diagnosed with diabetes than the state (11.2%).

Percentage of Medicare Beneficiaries with Diabetes



Note: a green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the state.

Diabetes, Percent, Adults (age 18+), 2018-2020



Source: SparkMap, Health Indicator Report: logged in and filtered for McKinley County, NM, <https://sparkmap.org/report/>; data accessed March 9, 2022.

Source: New Mexico's Indicator-Based Information System (NM-IBIS), https://ibis.health.state.nm.us/query/selection/brfss/_BRFSSSelection.html; data accessed on March 10, 2022.

Definition: Have you ever been told by a doctor or other health professional that you have diabetes?

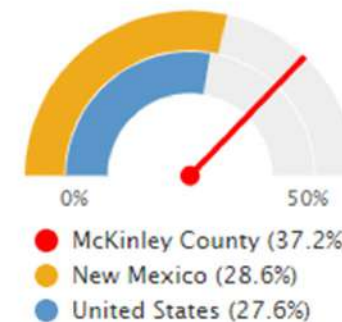


Health Status

Chronic Conditions - Obesity

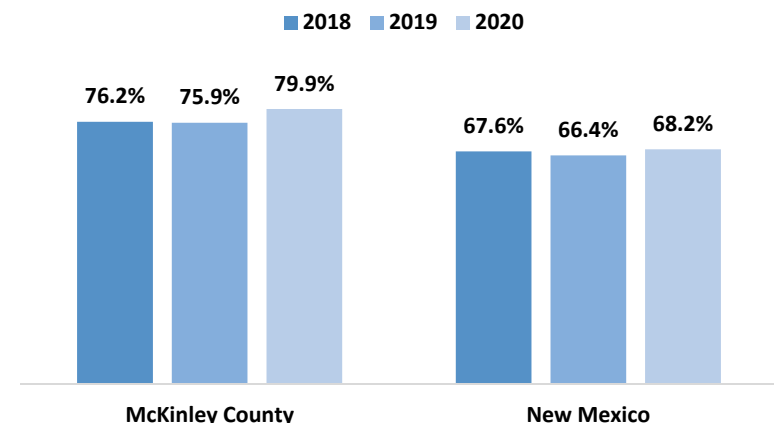
- In 2019, McKinley County (37.2%) had a higher percentage of adults (age 20+) who reported having a Body Mass Index (BMI) greater than 30.0 (obese) than the state (28.6%) and the nation (27.6%).
- Between 2018 and 2020, overweight and obesity prevalence rates in adults (age 18+) in McKinley County and the state increased.
- In 2020, McKinley County (79.9%) had a higher percentage of overweight and obese adults (age 18+) than the state (68.2%).

Percentage of Adults Obese
(BMI > 30.0), 2019



Note: a green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the state.

Overweight or Obese, Percentage, Adults
(age 18+), 2018-2020



Source: SparkMap, Health Indicator Report: logged in and filtered for McKinley County, NM, <https://sparkmap.org/report/>; data accessed March 9, 2022.

Source: New Mexico's Indicator-Based Information System (NM-IBIS), https://ibis.health.state.nm.us/query/selection/brfss/_BRFSSSelection.html; data accessed on March 10, 2022.

Definition: How much do you weigh without shoes? How tall are you without shoes? (Underweight is defined at a BMI less than 18.5, Normal is defined as a BMI 18.5 to less than 25; Overweight, but not obese, is defined as a BMI 25 to less than 30; Obese is defined as a BMI of 30 or more.)

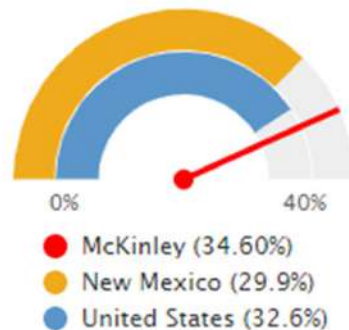


Health Status

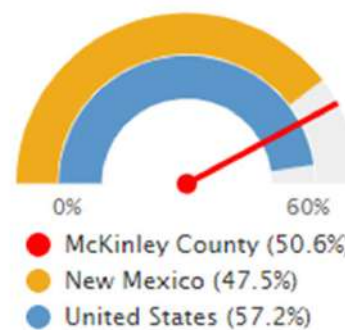
Chronic Conditions – High Blood Pressure

- McKinley County (34.6%) has a higher rate of adults (age 20+) with hypertension as compared to the state (29.9%) and a higher rate than the nation (32.6%) (2019).
- McKinley County (50.6%) has a higher rate of Medicare fee-for-service residents with hypertension as compared to the state (47.5%) and a lower rate than the nation (57.2%) (2018).

Percentage of Adults with High Blood Pressure



Percentage of Medicare Beneficiaries with High Blood Pressure



Note: a green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the state.

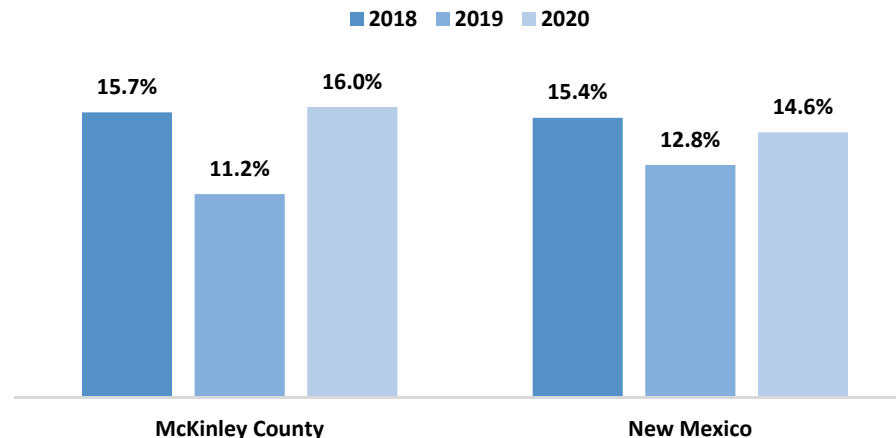
Source: SparkMap, Health Indicator Report: logged in and filtered for McKinley County, NM, <https://sparkmap.org/report/>; data accessed March 9, 2022.

Health Status

Chronic Conditions – Asthma

- Between 2018 and 2020, asthma prevalence rates in adults (age 18+) in McKinley County increased while rates in the state decreased.
- In 2020, McKinley County (16.0%) had a higher percentage of adults (age 18+) ever diagnosed with asthma than the state (14.6%).

Asthma, Percentage, Adults (age 18+), 2018-2020



Source: New Mexico's Indicator-Based Information System (NM-IBIS), https://ibis.health.state.nm.us/query/selection/brfss/_BRFSSSelection.html; data accessed on March 10, 2022.

Definition: Have you ever been told by a doctor or other health professional that you had asthma?

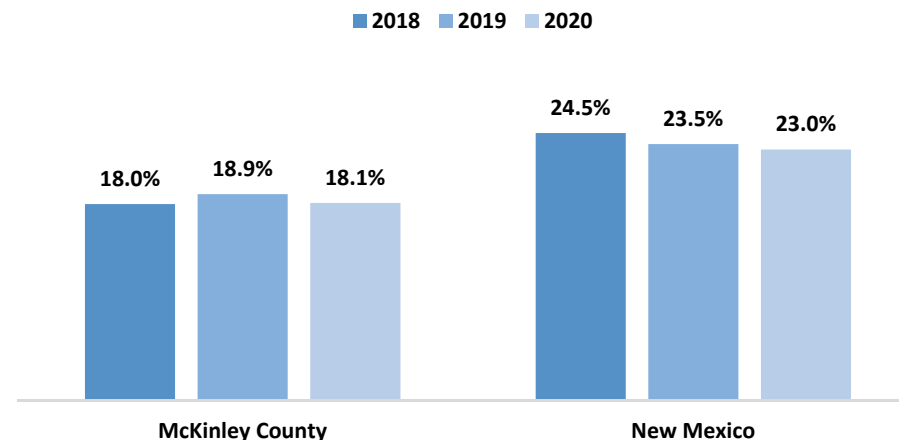


Health Status

Chronic Conditions – Arthritis

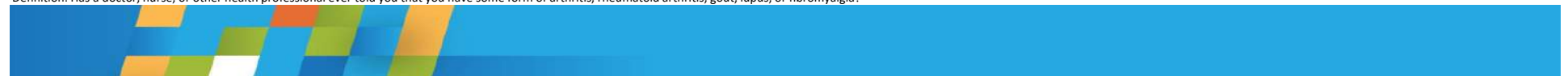
- Between 2018 and 2020, arthritis prevalence rates in adults (age 18+) in McKinley County slightly increased while rates in the state decreased.
- In 2020, McKinley County (18.1%) had a lower percentage of adults (age 18+) ever diagnosed with arthritis than the state (23.0%).

Arthritis, Percentage, Adults (age 18+), 2018-2020



Source: New Mexico's Indicator-Based Information System (NM-IBIS), https://ibis.health.state.nm.us/query/selection/brfss/_BRFSSSelection.html; data accessed on March 10, 2022.

Definition: Has a doctor, nurse, or other health professional ever told you that you have some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia?

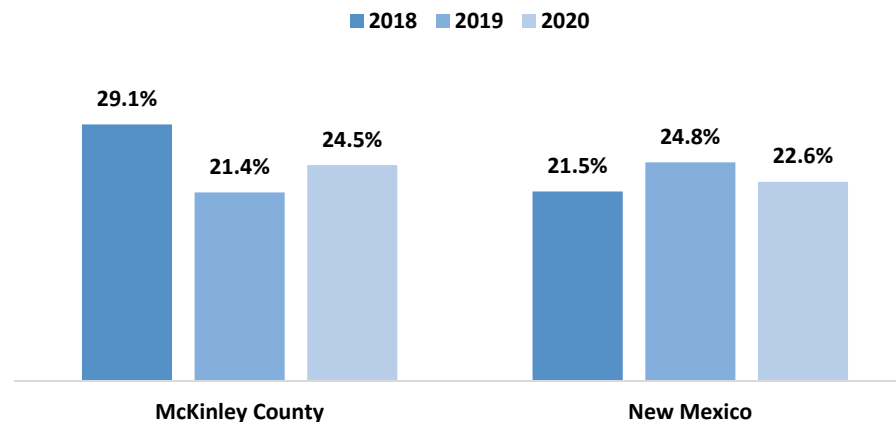


Health Status

Chronic Conditions – Physical Inactivity

- Between 2018 and 2020, the percent of adults (age 18+) that did not participate in physical activity in the past 30 days in McKinley County decreased while the percent increased in the state.
- In 2020, the percentage of adults (age 18+) that did not participate in physical activity in McKinley County (24.5%) was higher than the state (22.6%).

**Physical Inactivity, Percentage, Adults (age 18+),
2018-2020**



Source: New Mexico's Indicator-Based Information System (NM-IBIS), https://ibis.health.state.nm.us/query/selection/brfss/_BRFSSSelection.html; data accessed on March 10, 2022.

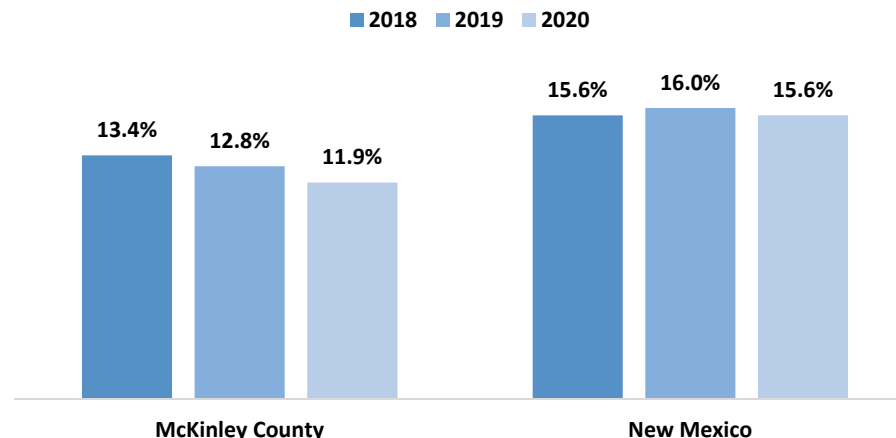
Physical Activity Definition: During the past month, other than your regular job, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening, or walking for exercise?

Health Status

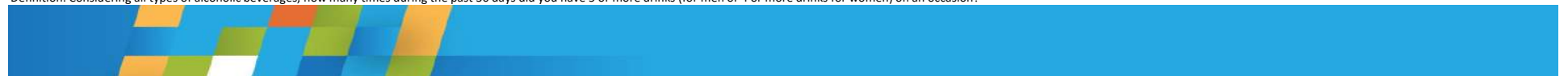
Chronic Conditions – Binge Drinking

- Between 2018 and 2020, the percentage of adults (age 18+) at risk of binge drinking in McKinley County decreased and remained consistent in the state.
- In 2020, McKinley County (11.9%) had a lower percentage of adults (age 18+) at risk of binge drinking than the state (15.6%).

**Binge Drinking, Percentage, Adults (age 18+),
2018-2020**



Source: New Mexico's Indicator-Based Information System (NM-IBIS), https://ibis.health.state.nm.us/query/selection/brfss/_BRFSSSelection.html; data accessed on March 10, 2022.
Definition: Considering all types of alcoholic beverages, how many times during the past 30 days did you have 5 or more drinks (for men or 4 or more drinks for women) on an occasion?

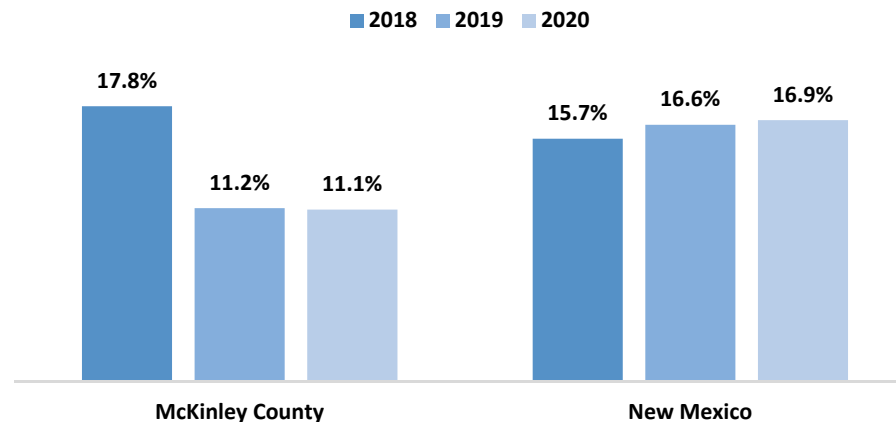


Health Status

Chronic Conditions – Smoking

- Between 2018 and 2020, the prevalence of current, **every day** smokers in McKinley County decreased, while the percent in the state increased.
- In 2020, the percent of adults (age 18+) that self-reported smoking cigarettes **every day** in McKinley County (11.1%) was lower than the state (16.9%).

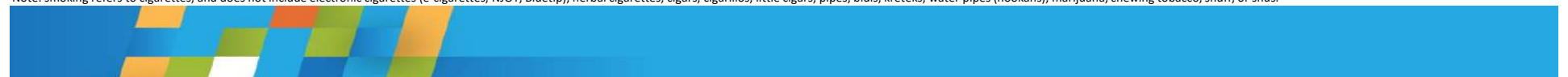
Smoking Frequency - Every Day, Percentage,
Adults (age 18+), 2018-2020



Source: New Mexico's Indicator-Based Information System (NM-IBIS), https://ibis.health.state.nm.us/query/selection/brfss/_BRFSSSelection.html; data accessed on March 10, 2022.

Frequency of Smoking Definition: Have you smoked at least 100 cigarettes in your entire life? Do you now smoke cigarettes every day, some days, or not at all?

Note: smoking refers to cigarettes, and does not include electronic cigarettes (e-cigarettes, NJOY, Bluetip), herbal cigarettes, cigars, cigarillos, little cigars, pipes, bidis, kreteks, water pipes (hookahs), marijuana, chewing tobacco, snuff, or snus.

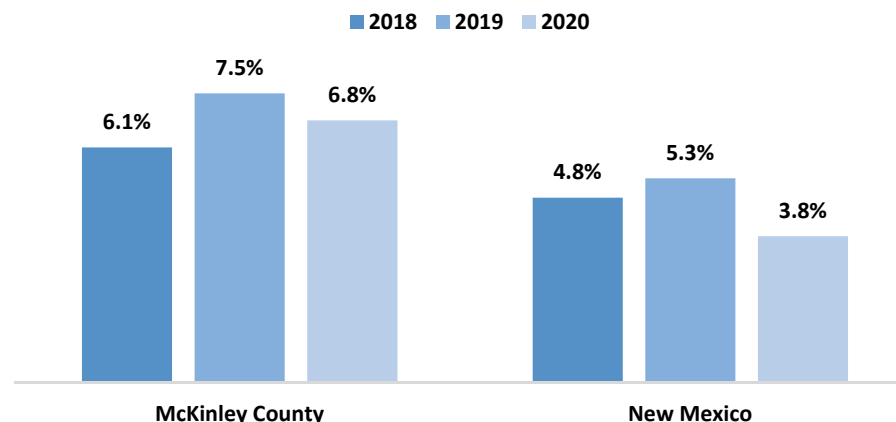


Health Status

Chronic Conditions – Smokeless Tobacco Use

- Between 2018 and 2020, the prevalence of current, **every day** smokeless tobacco users in McKinley County increased, while the percent in the state decreased.
- In 2020, the percent of adults (age 18+) that self-reported using smokeless tobacco products **every day** in McKinley County (6.8%) was higher than the state (3.8%).

Smokeless Tobacco Use - Every Day, Percentage,
Adults (age 18+), 2018-2020



Source: New Mexico's Indicator-Based Information System (NM-IBIS), https://ibis.health.state.nm.us/query/selection/brfss/_BRFSSSelection.html; data accessed on March 10, 2022.

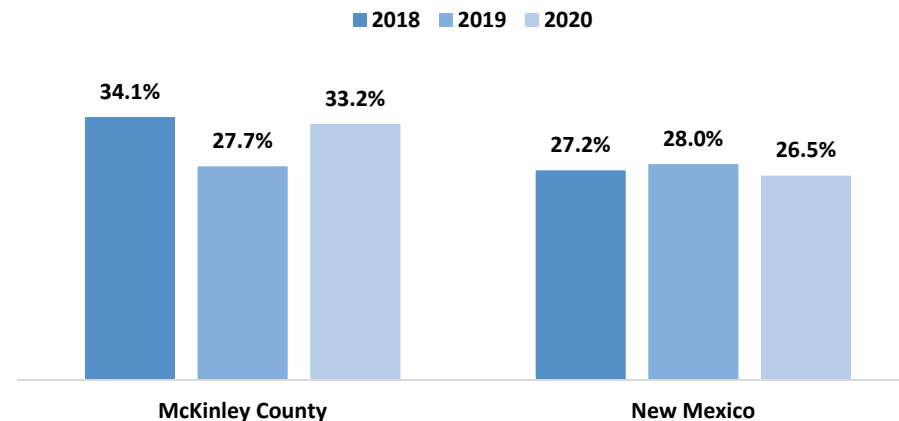
Frequency of Smoking Definition: Do you currently use chewing tobacco, snuff, or snus every day, some days, or not at all?

Health Status

Chronic Conditions – Disability

- Between 2018 and 2020, the percentage of adults (age 18+) who self-reported they have a disability in McKinley County and the state slightly decreased.
- In 2020, McKinley County (33.2%) had a higher percentage of adults (age 18+) who self-reported they have a disability than the state (26.5%).

Have a Disability, Percentage, Adults (age 18+),
2018-2020



Source: New Mexico's Indicator-Based Information System (NM-IBIS), https://ibis.health.state.nm.us/query/selection/brfss/_BRFSSSelection.html; data accessed on March 10, 2022.

Definition: The percentage of people that self-reported that they had a disability

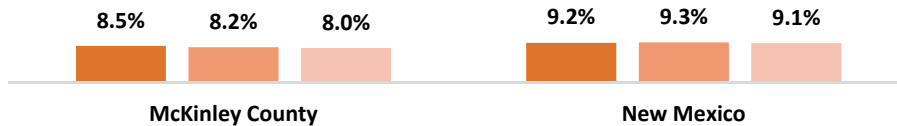


Health Status

Maternal & Child Health Indicators

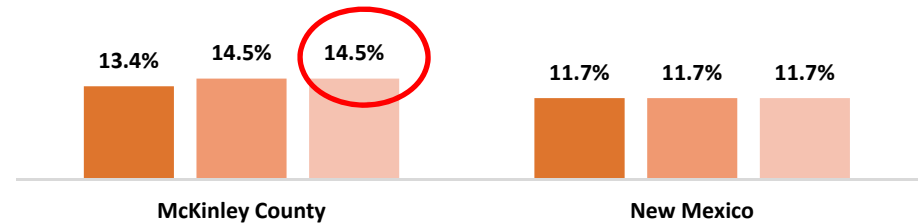
Low Birth Weight (<2,500g), Percent of All Births, 2016-2020

2016-2018 2017-2019 2018-2020



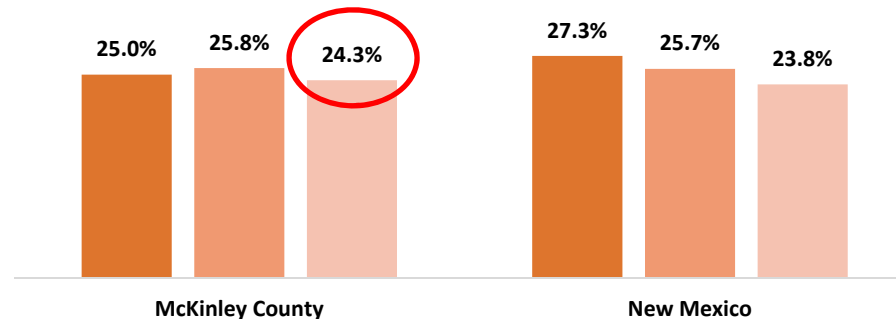
Births to Women Receiving Late 3rd Trimester) or No Prenatal Care, Percent of All Births, 2016-2020

2016-2018 2017-2019 2018-2020



Teen Births (Age 15-19), Rate per 1,000, 2016-2020

2016-2018 2017-2019 2018-2020



Source: New Mexico's Indicator-Based Information System (NM-IBIS), https://ibis.health.state.nm.us/query/selection/birth/_BirthSelection.html; data accessed on March 9, 2022.

Note: Percentages are crude rates based on number of specific indicator-related cases divided by total births. Rates are not calculated if number of cases are too low for statistical reliability. Birth data are reported by mothers' county of residence (as mothers reported on birth certificates during the birth registration) regardless where deliveries actually occurred, in state or out-of-state.

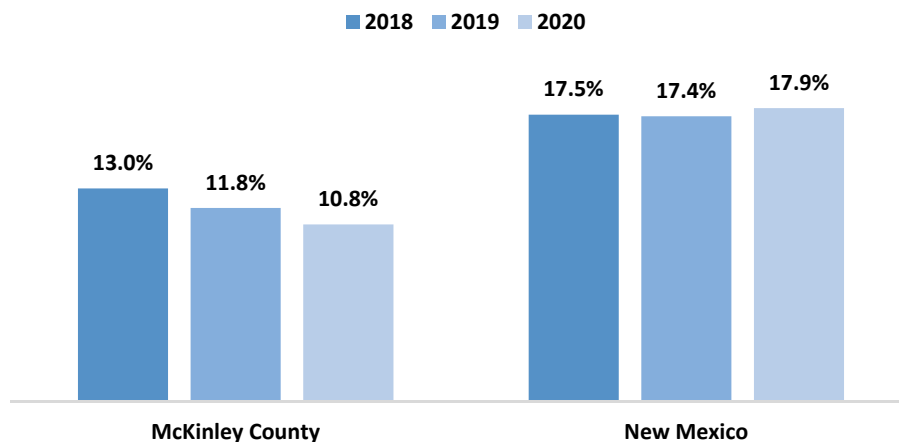
Data has been pulled in 3-year sets of moving averages for purposes of statistical reliability.

Health Status

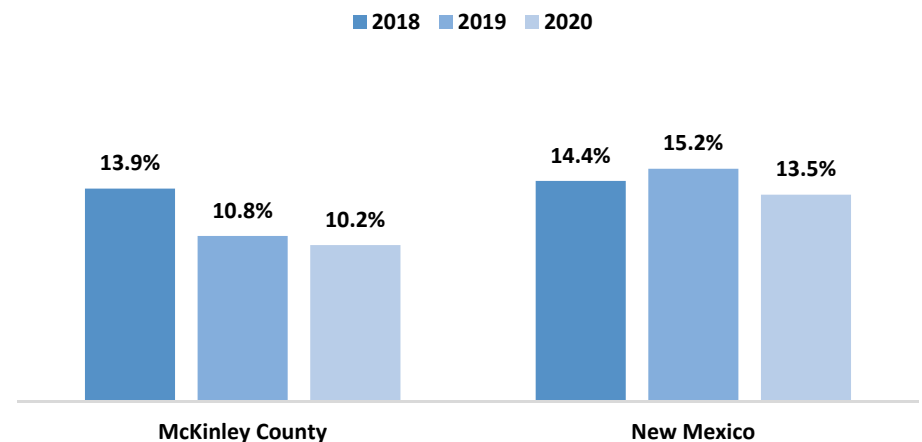
Mental Health – Depressive Disorders & Poor Mental Health

- Between 2018 and 2020, the percent of adults (age 18+) ever diagnosed with a depressive disorder in McKinley County decreased, while the percent in the state slightly increased.
- In 2020, McKinley County (10.8%) had a lower percent of adults (age 18+) ever diagnosed with a depressive disorder than the state (17.9%).
- Between 2018 and 2020, the percent of adults (age 18+) that reported experiencing 14 or more days of poor mental health in McKinley County and the state decreased.
- In 2020, McKinley County (10.2%) had a lower percent of adults (age 18+) that reported experiencing 14 or more days of poor mental health than the state (13.5%).

Depressive Disorders, Percentage, Adults (age 18+), 2018-2020



Days of Poor Mental Health - 14+, Percentage, Adults (age 18+), 2018-2020



Source: New Mexico's Indicator-Based Information System (NM-IBIS), https://ibis.health.state.nm.us/query/selection/brfss/_BRFSSSelection.html; data accessed on March 10, 2022.

Definition: Have you ever been told by a doctor or other health professional that you have a depressive disorder, including depression, major depression, dysthymia, or minor depression?

Definition: Now thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?

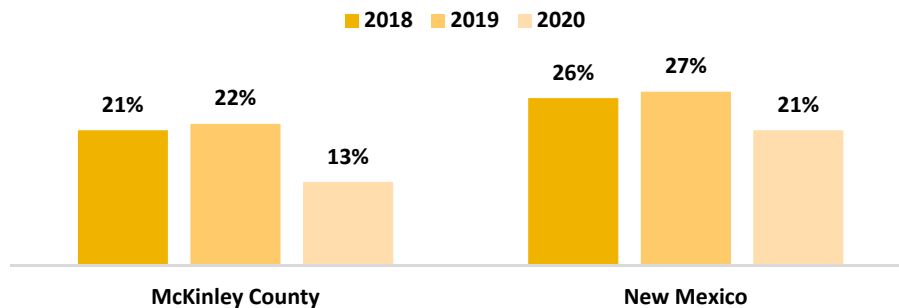
Definition: Days mental health not good - 14 days or more.



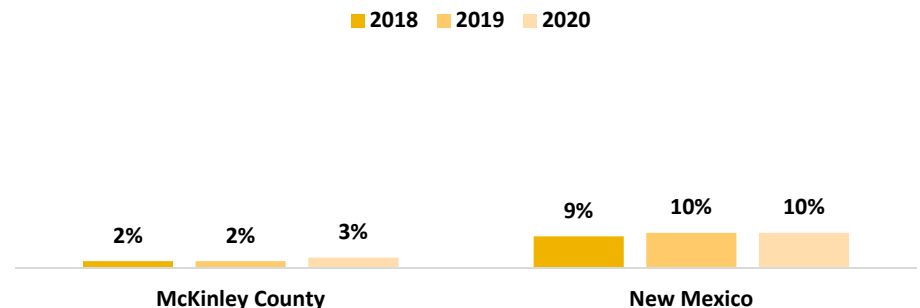
Health Status

Screenings – Mammography, Prostate Screening, Pap Test, Colorectal

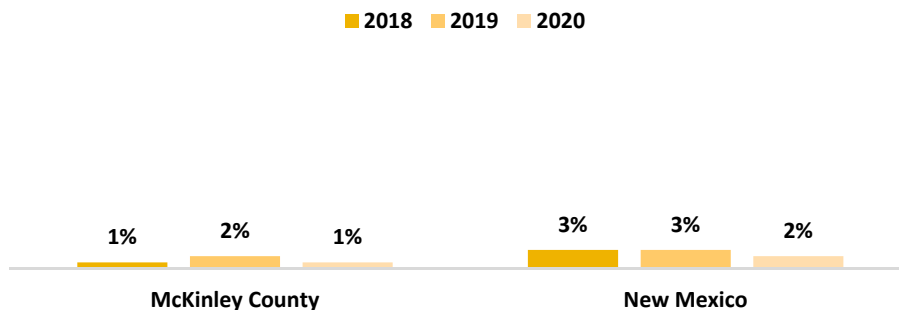
Received Mammography Screening, Percent, Females (age 35+), 2018-2020



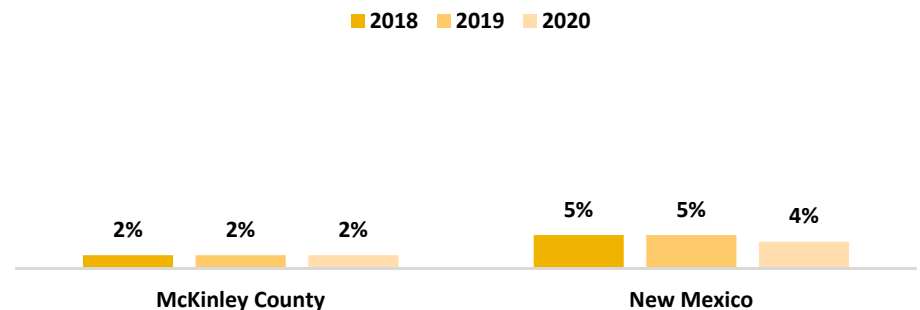
Received Prostate Cancer Screening, Percent, Males (age 50+), 2018-2020



Received Pap Test Screening, Females (all ages), 2018-2020



Received Colorectal Cancer Screening, Percent, Adults (age 50+), 2018-2020



Source: Centers for Medicare & Medicaid Services, Office of Minority Health: Mapping Medicare Disparities, <https://data.cms.gov/mapping-medicare-disparities>; data accessed on March 9, 2022.

Mammography Screening Definition: percentages are identified using the HCPCS/CPT codes present in the Medicare administrative claims. The uptake rate for mammography services is calculated as the percentage of beneficiaries that received at least one of the services (defined by HCPCS/CPT codes) in a given year. Number of beneficiaries for mammography services excludes: beneficiaries without Part B enrollment for at least one month; beneficiaries with enrollment in Medicare Advantage; male beneficiaries; and female beneficiaries aged less than 35.

Colorectal Cancer Screening Definition: percentages are identified using the HCPCS/CPT codes present in the Medicare administrative claims. The uptake rate for colorectal cancer services is calculated as the percentage of beneficiaries that received at least one of the services (defined by HCPCS/CPT codes) in a given year. Number of beneficiaries for colorectal cancer screening services excludes: beneficiaries without Part B enrollment for at least one month; beneficiaries with enrollment in Medicare Advantage; and beneficiaries aged less than 50.

Pap Test Screening Definition: percentages are identified using the HCPCS/CPT codes present in the Medicare administrative claims. The uptake rate for pap test services is calculated as the percentage of beneficiaries that received at least one of the services (defined by HCPCS/CPT codes) in a given year. Number of beneficiaries for colorectal cancer screening services excludes: beneficiaries without Part B enrollment for at least one month; beneficiaries with enrollment in Medicare Advantage; and male beneficiaries.

Prostate Cancer Screening Definition: percentages are identified using the HCPCS/CPT codes present in the Medicare administrative claims. The uptake rate for prostate cancer services is calculated as the percentage of beneficiaries that received at least one of the services (defined by HCPCS/CPT codes) in a given year. Number of beneficiaries for colorectal cancer screening services excludes: beneficiaries without Part B enrollment for at least one month; beneficiaries with enrollment in Medicare Advantage; female beneficiaries; and male beneficiaries aged less than 50.

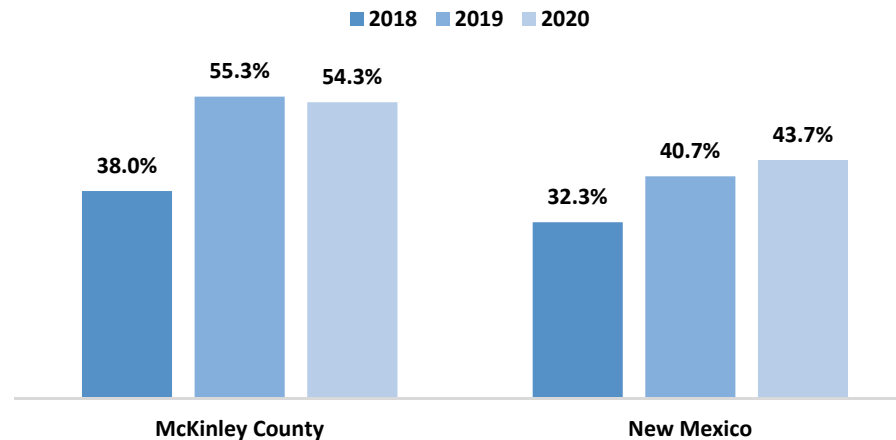


Health Status

Preventive Care – Influenza Vaccine (age 18+)

- Between 2018 and 2020, the percent of adults (age 18+) that **did** receive a flu shot in the past year in McKinley County and the state increased.
- In 2020, McKinley County (54.3%) had a higher percentage of adults (age 18+) that **did** receive a flu shot in the past year than the state (43.7%).

Received Flu Shot in Past Year (age 18-64),
Percentage, 2018-2020



Source: New Mexico's Indicator-Based Information System (NM-IBIS), https://ibis.health.state.nm.us/query/selection/brfss/_BRFSSSelection.html; data accessed on March 10, 2022.

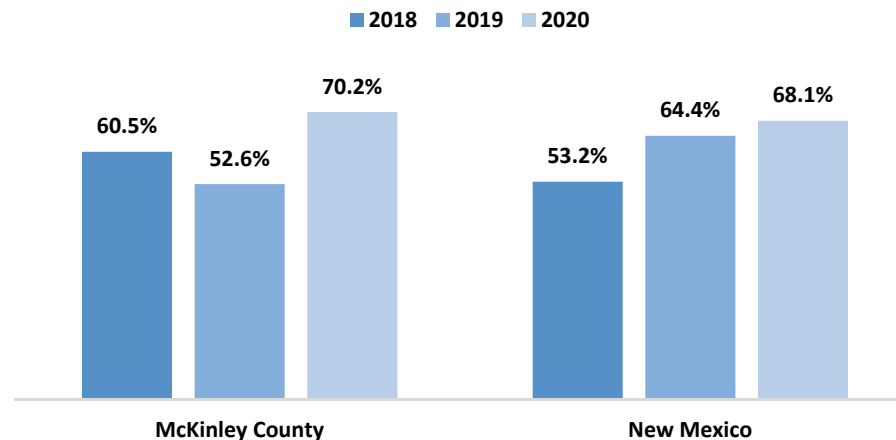
Definition: A flu shot is an influenza vaccine injected in your arm. During the past 12 months, have you had a flu shot? During the past 12 months, have you had a flu vaccine that was sprayed in your nose? The flu vaccine that is sprayed in the nose is also called FluMist.

Health Status

Preventive Care – Influenza Vaccine (age 65+)

- Between 2018 and 2020, the percent of adults (age 65+) that **did** receive a flu shot in the past year in McKinley County and the state increased.
- In 2020, McKinley County (70.2%) had a higher percentage of adults (age 65+) that **did** receive a flu shot in the past year than the state (68.1%).

Received Flu Shot in Past Year (age 65+),
Percentage, 2018-2020



Source: New Mexico's Indicator-Based Information System (NM-IBIS), https://ibis.health.state.nm.us/query/selection/brfss/_BRFSSSelection.html; data accessed on March 10, 2022.

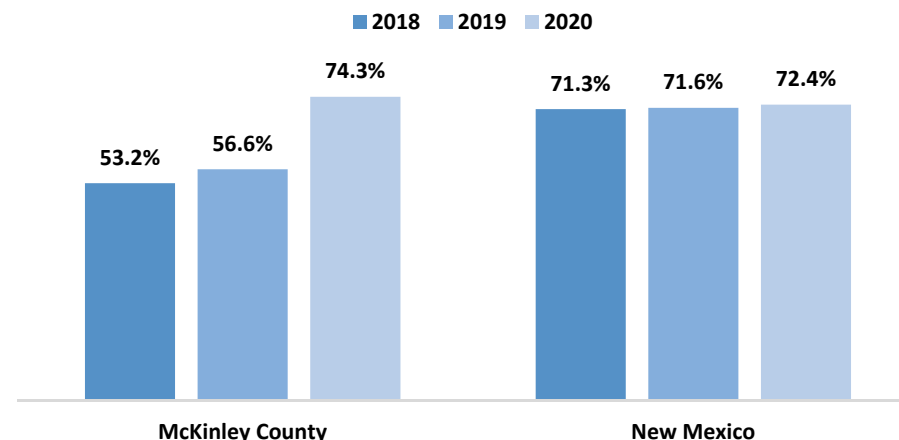
Definition: A flu shot is an influenza vaccine injected in your arm. During the past 12 months, have you had a flu shot? During the past 12 months, have you had a flu vaccine that was sprayed in your nose? The flu vaccine that is sprayed in the nose is also called FluMist.

Health Status

Preventive Care – Pneumococcal Vaccine (age 65+)

- Between 2018 and 2020, the percent of adults (age 18+) that **ever** received a pneumococcal shot in the past year in McKinley County and the state increased.
- In 2020, McKinley County (74.3%) had a higher percentage of adults (age 18+) that **ever** received a pneumococcal shot in the past year than the state (72.4%).

Received Pneumococcal Vaccination (age 65+),
Percentage, 2018-2020



Source: New Mexico's Indicator-Based Information System (NM-IBIS), https://ibis.health.state.nm.us/query/selection/brfss/_BRFSSSelection.html; data accessed on March 10, 2022.

Definition: Have you ever had a pneumonia shot, also known as a pneumococcal vaccine? *ADULTS AGE 65+ YEARS*

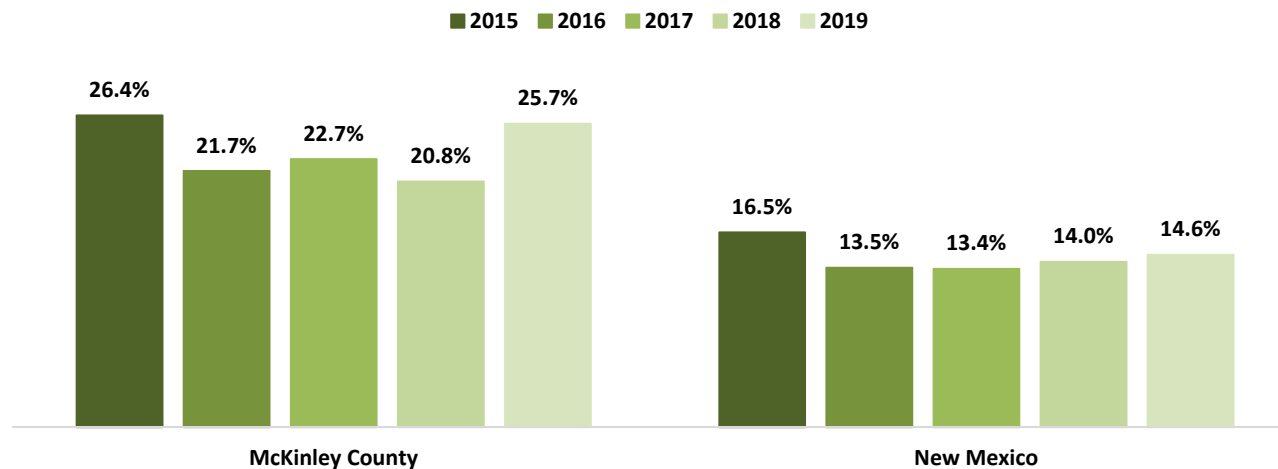


Health Status

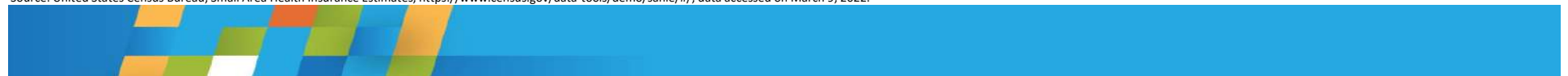
Health Care Access - Uninsured

- As of 2019, McKinley County (25.7%) has a higher rate of uninsured adults (age 18-64) as compared to the state (14.6%).
- McKinley County and the state experienced an increase in the percentage of uninsured adults (age 18-64) between 2016 and 2019.

Uninsured, Percent of Adults (age 18-64), 2015-2019



Source: United States Census Bureau, Small Area Health Insurance Estimates, <https://www.census.gov/data-tools/demo/sahie/#/>; data accessed on March 9, 2022.

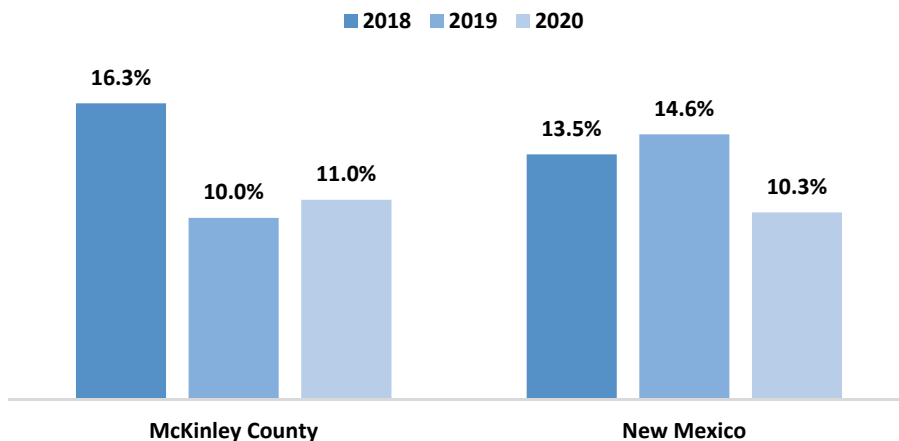


Health Status

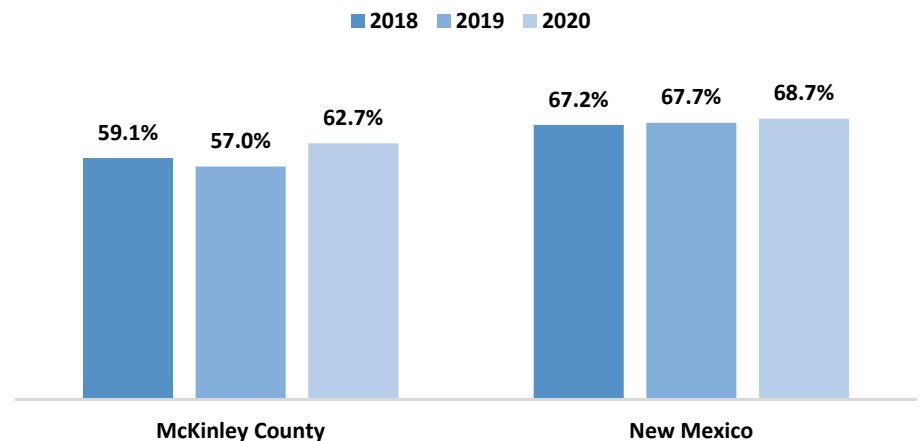
Health Care Access – Medical Cost Barrier & Having a Personal Doctor

- Between 2018 and 2020, the percent of adults (age 18+) that needed medical care but could not receive it due to cost in McKinley County and the state decreased.
- In 2020, the percent of adults (age 18+) that reported experiencing a medical cost barrier in the past 12 months in McKinley County (11.0%) was slightly higher than the state (10.3%).
- Between 2018 and 2020, the percent of adults (age 18+) that reported having a personal doctor in McKinley County and the state increased.
- In 2020, McKinley County (62.7%) had a lower percent of adults (age 18+) that had a personal doctor than the state (68.7%).

Medical Cost Barrier, Percentage, Adults (age 18+), 2018-2020



Have a Personal Doctor, Percentage, Adults (age 18+), 2018-2020



Source: New Mexico's Indicator-Based Information System (NM-IBIS), https://ibis.health.state.nm.us/query/selection/brfss/_BRFSSSelection.html; data accessed on March 10, 2022.

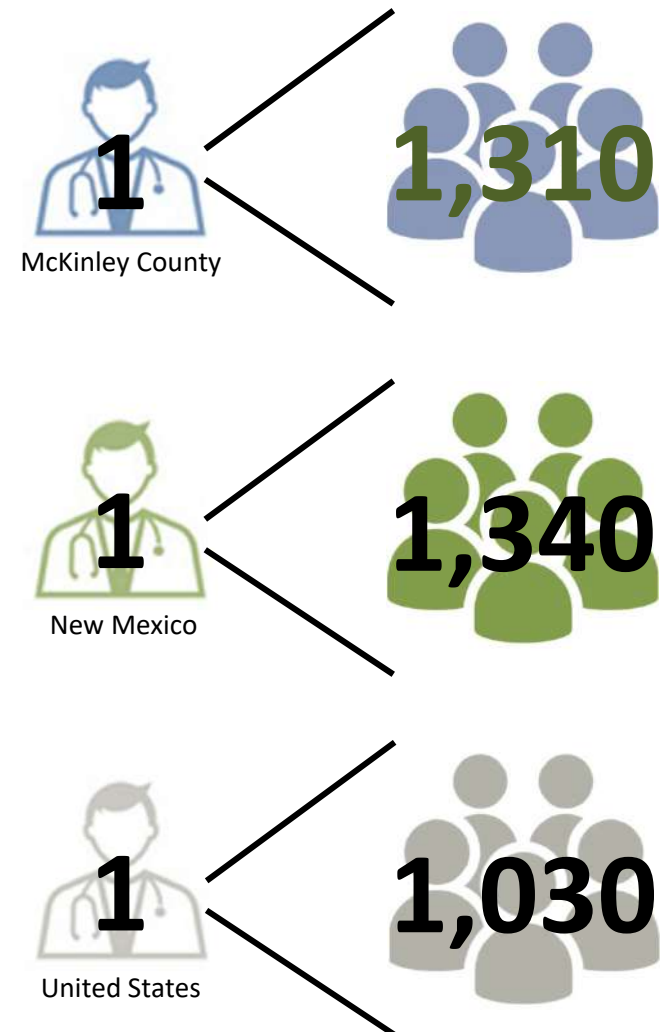
Definition: Was there a time in the last 12 months when you needed to see a doctor, but could not because of the cost?

Definition: Do you have one or more person you think of as your personal doctor or health care provider?

Health Status

Health Care Access – Primary Care Providers

- **Sufficient availability of primary care physicians is essential for preventive and primary care.**
 - In 2018, the population to primary care provider ratio in McKinley County (1,310:1) was lower than the state (1,340:1) and higher than the nation (1,030:1).



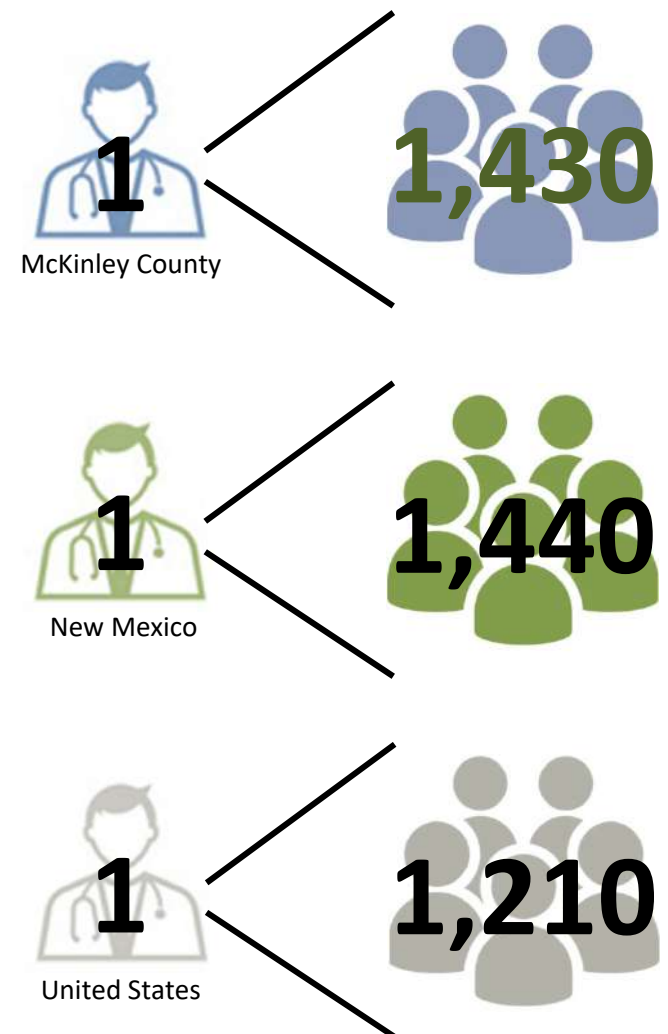
Source: County Health Rankings & Roadmaps, Health Indicator Report: filtered for McKinley County, NM, <https://www.countyhealthrankings.org/>; data accessed March 9, 2022.

Definition: The ratio represents the number of individuals served by one physician in a county, if the population was equally distributed across physicians. "Primary care physicians" classified by the AMA include: General Family Medicine MDs and DOs, General Practice MDs and DOs, General Internal Medicine MDs and General Pediatrics MDs. Physicians age 75 and over and physicians practicing sub-specialties within the listed specialties are excluded.

Health Status

Health Care Access – Dental Care Providers

- **Lack of sufficient dental providers is a barrier to accessing oral health care. Untreated dental disease can lead to serious health effects including pain, infection, and tooth loss.**
 - In 2019, the population to dental provider ratio in New Mexico (1,430:1) was slightly lower than the state (1,440:1) and higher than the nation (1,210:1).



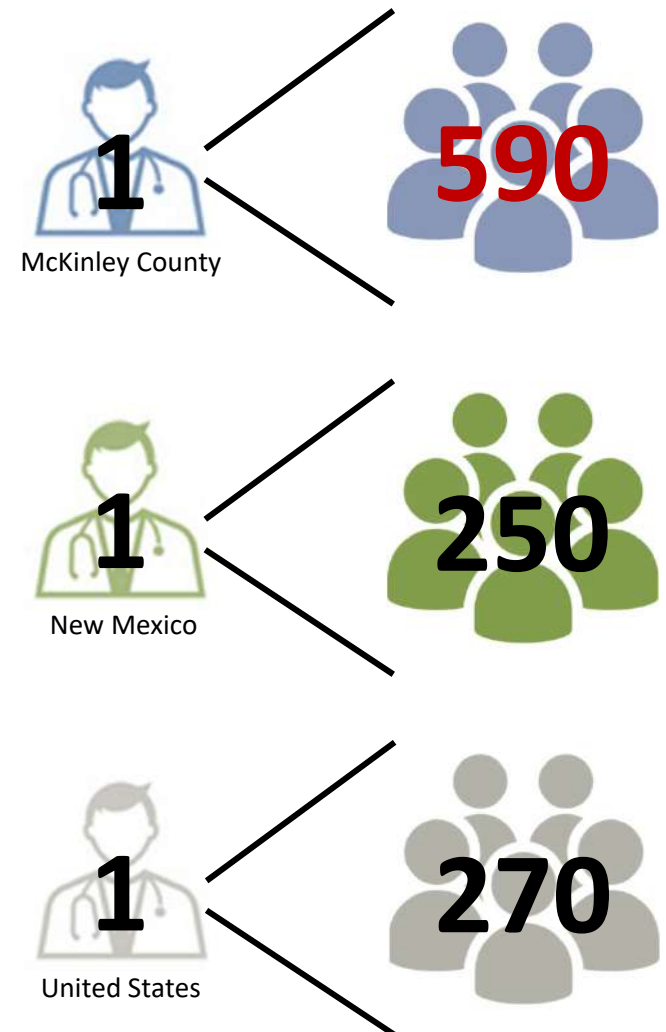
Source: County Health Rankings & Roadmaps, Health Indicator Report: filtered for McKinley County, NM, <https://www.countyhealthrankings.org/>; data accessed March 9, 2022.

Definition: The ratio represents the population served by one dentist if the entire population of a county was distributed equally across all practicing dentists. All dentists qualified as having a doctorate in dental surgery (D.D.S.) or dental medicine (D.M.D.) licensed by the state to practice dentistry and who practice within the scope of that license.

Health Status

Health Care Access – Mental Healthcare Providers

- **Lack of access to mental health care providers not only effects overall individual wellness but also impacts the health of a community.**
 - In 2020, the population to mental health provider ratio in McKinley County (590:1) was higher than the state (250:1) and the nation (270:1).



Source: County Health Rankings & Roadmaps, Health Indicator Report: filtered for McKinley County, NM, <https://www.countyhealthrankings.org/>; data accessed March 9, 2022.

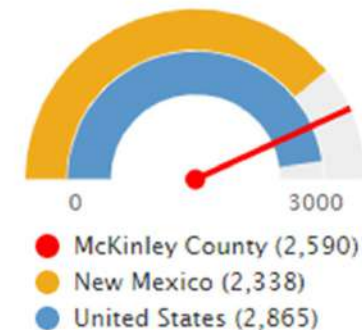
Definition: The ratio represents the number of individuals served by one mental health provider in a county, if the population were equally distributed across providers. Psychiatrists, psychologists, clinical social workers, and counselors that specialize in mental health care.

Health Status

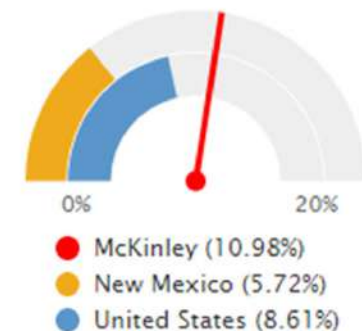
Health Care Access – Common Barriers to Care

- **Lack of available primary care resources for patients to access may lead to increased preventable hospitalizations.**
 - In 2020, the rate of preventable hospital events in McKinley County (2,590 per 100,000 Medicare Beneficiaries) was higher than the state (2,338 per 100,000 Medicare Beneficiaries) and lower than the nation (2,865 per 100,000 Medicare Beneficiaries).
- **Lack of transportation is frequently noted as a potential barrier to accessing and receiving care.**
 - In 2015-2019, 11.0% of households in McKinley County had no motor vehicle, as compared to 5.7% in New Mexico and 8.6% in the nation.

Preventable Hospital Events, Rate per 100,000 Beneficiaries



Percentage of Households with No Motor Vehicle

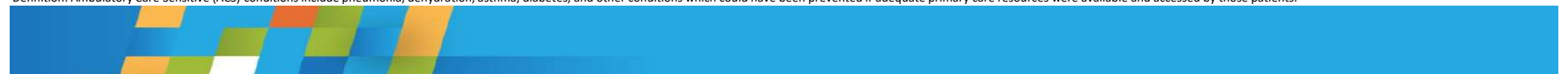


Note: a green dial indicates that the county has a better rate than the state, and a red dial indicates that the county has a worse rate than the state.

Source: SparkMap, Health Indicator Report: logged in and filtered for McKinley County, NM, <https://sparkmap.org/report/>; data accessed March 9, 2022.

Note: Preventable Hospital Events is compared to the state average only.

Definition: Ambulatory Care Sensitive (ACS) conditions include pneumonia, dehydration, asthma, diabetes, and other conditions which could have been prevented if adequate primary care resources were available and accessed by those patients.



COMMUNITY SURVEY FINDINGS



Survey Methodology

- Survey developed by CHC Consulting and distributed on behalf of RMCHCS
- Emailed as an invitation from interim CEO Don Smithburg
- Survey sent to identified individuals/organizations in the community
- Survey conducted between February 21, 2022 – March 14, 2022
 - 28 respondents serving a multi-county area, including McKinley County
- Respondents allowed to take survey only once but were encouraged to forward the survey to additional community leaders
 - We were not able to track the number of times the survey was forwarded so it is difficult to calculate an overall response rate
 - It should be noted that not all survey questions were answered by all of those submitting surveys
 - The percentages reflected in the following summary were calculated using the actual number of respondents to the specific survey question

Source: Rehoboth McKinley Christian Health Care Services, 2022 Community Health Needs Assessment Survey conducted by CHC Consulting; February 21, 2022 – March 14, 2022.

Organizations Responding to Survey

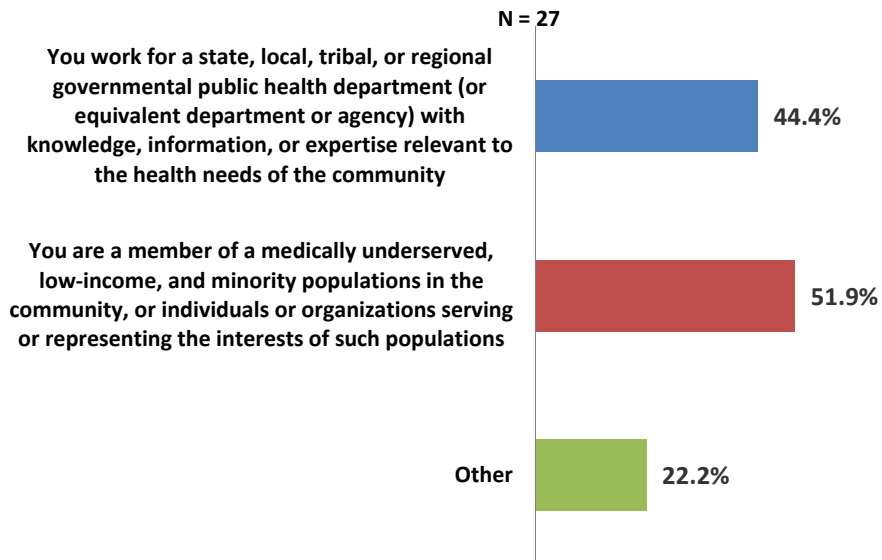
- Battered Families Services, INC.
- Big Brothers Big Sisters
- Catholic Charities of Gallup
- City of Gallup Senior Center
- Department of Health/McKinley Public Health Office
- Four Corners Detox Recovery Center
- Heading Home
- Hozho Center for Personal Enhancement
- McKinley Community Health Alliance
- McKinley County
- McKinley County Office of Emergency Management
- Presbyterian Medical Services
- Rehoboth Christian School
- Triplehorn Health Solutions, LLC
- Vollara

Source: Rehoboth McKinley Christian Health Care Services, 2022 Community Health Needs Assessment Survey conducted by CHC Consulting; February 21, 2022 – March 14, 2022.

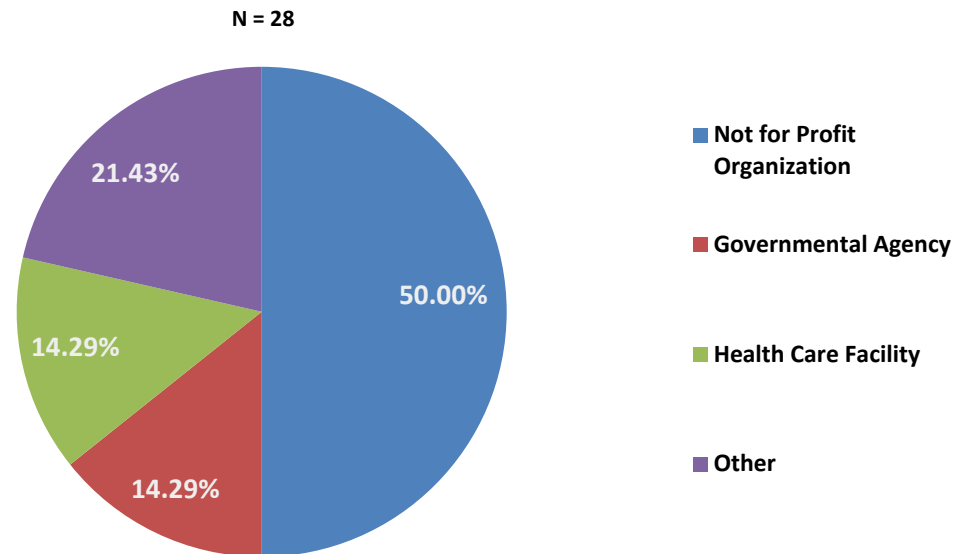
Organization Type

- CHNA regulations require input from two specific groups and input was gained from each
 - State, local, tribal, or regional governmental public health department (or equivalent department or agency) with knowledge, information, or expertise relevant to the health needs of the community – **44.4% (12 of 27)**
 - Member of a medically underserved, low-income, and minority populations in the community, or individuals or organizations serving or representing the interests of such populations – **51.9% (14 of 27)**
- Majority of respondents (50.0%) work for a not for profit organization followed by other (21.4%)
- Respondents who indicated “Other” for their company/organization include county positions, public health office, self-employed and school

What type of company/organization do you work for?



What type of company/organization do you work for?



Source: Rehoboth McKinley Christian Health Care Services, 2022 Community Health Needs Assessment Survey conducted by CHC Consulting; February 21, 2022 – March 14, 2022.

Communities Served

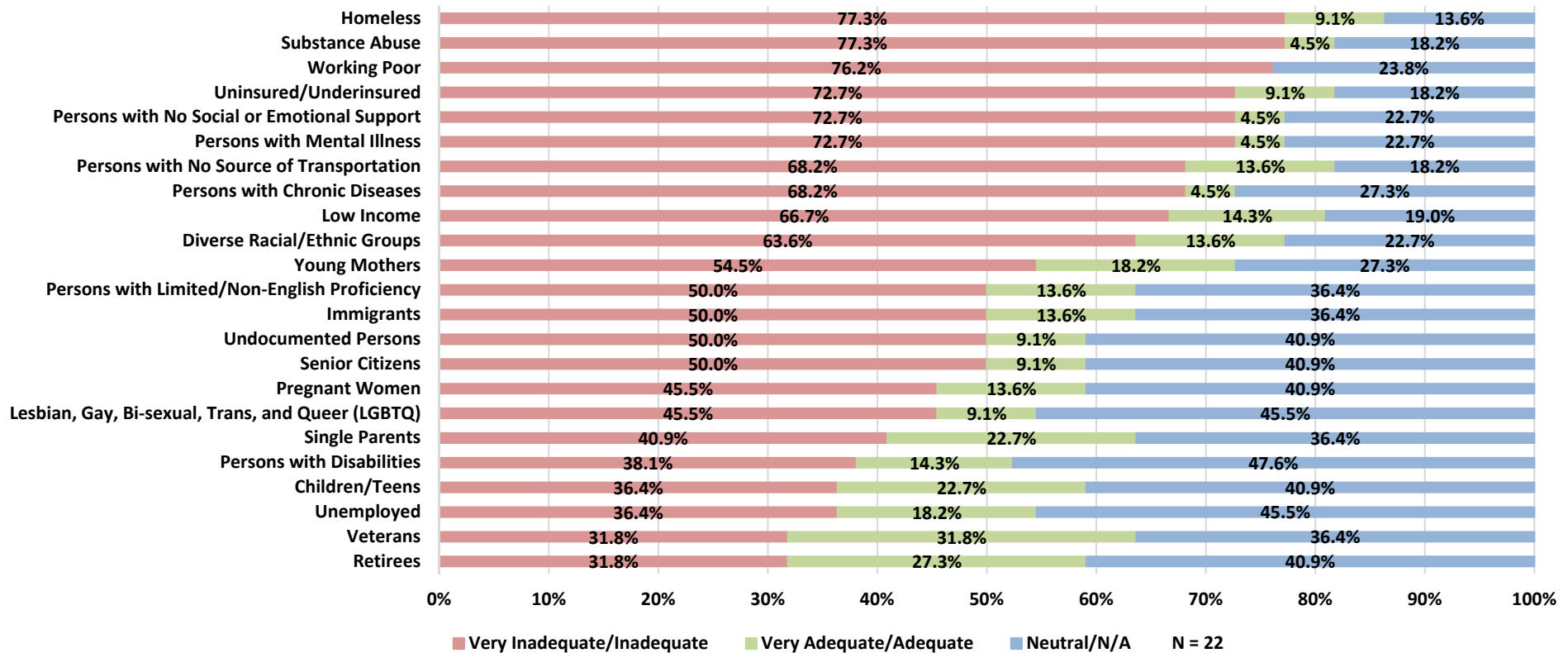
- In addition to McKinley County, respondents indicated serving the following communities:
 - Apache
 - Arizona
 - Bernalillo
 - Cibola
 - Northwestern Counties of NM
 - San Juan
 - Surrounding communities within Navajo Nation

Source: Rehoboth McKinley Christian Health Care Services, 2022 Community Health Needs Assessment Survey conducted by CHC Consulting; February 21, 2022 – March 14, 2022.

Health Need Adequacy for Specific Populations

- More than two-thirds of respondents indicated "Very Inadequate or Inadequate" services for persons who are homeless, persons with substance abuse, the working poor, the uninsured/underinsured, persons with no social or emotional support, persons with mental illness, persons with no source of transportation, persons with chronic diseases, and low income groups.

Health Need Adequacy



Source: Rehoboth McKinley Christian Health Care Services, 2022 Community Health Needs Assessment Survey conducted by CHC Consulting; February 21, 2022 – March 14, 2022.

Health Need Adequacy for Specific Populations

- Survey respondents indicated the following regarding “Very Inadequate or Inadequate” services:
 - *We do not have free, accessible healthcare and mental healthcare for low income people aside from IHS. We do not have any mental health crisis facilities, we do not have adequate shelter and affordable housing for homeless and working poor, single parents, and disabled. We do not have any long term substance abuse recovery facilities. We do not have LGBTQ and immigrant friendly services.*
 - *I think we need more services available for emotional well-being but this means more counseling services or advertising counseling services better. To my knowledge we do not have medical employees that meet people with no transportation so that is an issue. Substance abuse and homelessness is a huge issue and I am not sure that our community is set up to provide for these issues. It can't just be one night at NCI and get released. These people need treatment but then they also need support to find jobs and housing etc. Lastly, I always hear veterans saying that is impossible to get good health care. They can't pay for it so they go to the VA's office but it takes forever or is too complicated. Not sure if RMCH could help with a specific veterans program. We have a lot of Veterans in this community.*

Source: Rehoboth McKinley Christian Health Care Services, 2022 Community Health Needs Assessment Survey conducted by CHC Consulting; February 21, 2022 – March 14, 2022.

Health Need Adequacy for Specific Populations: Very Inadequate/Inadequate Detail

- Contributing factors indicated by respondents on open ended questions:
 - Not enough services, resources and meaningful engagement to improve their health outcomes.
 - Health care provision is focused on the "underprivileged" with little to no emphasis on prevention.
 - Our community has very limited resources for the populations noted.
 - Some patients do not or can not afford transportation to clinic. There are enormous amounts of homelessness without the care they need.
 - Limited resources, hardship experienced by population that limit access to resources, qualifiers or ineligibility.
 - Gallup/McKinley County and Navajo Nation are suffering from a passive/aggressive mentality caused by historical and intergenerational trauma.
 - The community has needs for specialty [care] and most people have to travel to find those specialties. It is difficult to obtain appointments and/or the wait for next appointment that is months out.
 - Lack of resources.
 - The medical services are basic. All others require going out of town.
 - There are not enough providers and making appointments is very difficult. Behavioral health is a nightmare to get seen and get help.
 - We have two staff people doing the jobs of five people.
 - Focus is on immigrants and less on existing county population who have always been and remain underserved.
 - Gallup has no services for these clients.

Source: Rehoboth McKinley Christian Health Care Services, 2022 Community Health Needs Assessment Survey conducted by CHC Consulting; February 21, 2022 – March 14, 2022.

Most Important Health Initiatives

- Respondents ranked the following health care initiatives for all residents from most important to least important:
 1. Improving access to health care for populations with limited services
 2. Improving access to dental care for populations with limited services
 3. Helping ensure the availability of cutting edge treatments
 4. Increasing the proportion of residents who have access to health coverage
 5. Promoting behavior change in unhealthy lifestyles
 6. Health promotion and preventive education
 7. Improving access to preventive care (screenings for chronic diseases, immunizations)
 8. Promoting chronic disease management
 9. Recruiting more health care providers
 10. Recruiting specialists who can provide services that are not currently available
 11. Promoting provider connectedness

Source: Rehoboth McKinley Christian Health Care Services, 2022 Community Health Needs Assessment Survey conducted by CHC Consulting; February 21, 2022 – March 14, 2022.

Most Important Health Problems

- Respondents were asked to select the five most important issues in the community for the categories listed below:

Health Problems

1. Substance Abuse (85.7%)
2. Mental Health Problems (71.4%)
3. Obesity (Adult) (42.9%)
4. Diabetes (38.1%)
5. Domestic Abuse (38.1%)

Chronic Diseases

1. Diabetes (95.0%)
2. Mental Illness (85.0%)
3. Obesity (70.0%)
4. End stage renal disease/Chronic Kidney Disease (50.0%)
5. Chronic Liver Disease/Cirrhosis (50.0%)

Preventable Hospitalizations

1. Mental Illness (75.0%)
2. Uncontrolled Diabetes (70.0%)
3. Diabetes Long-Term Complications (60.0%)
4. Hypertension (high blood pressure) (55.0%)
5. Diabetes Short-Term Complications (50.0%)

Source: Rehoboth McKinley Christian Health Care Services, 2022 Community Health Needs Assessment Survey conducted by CHC Consulting; February 21, 2022 – March 14, 2022.

Barriers for Low Income Residents

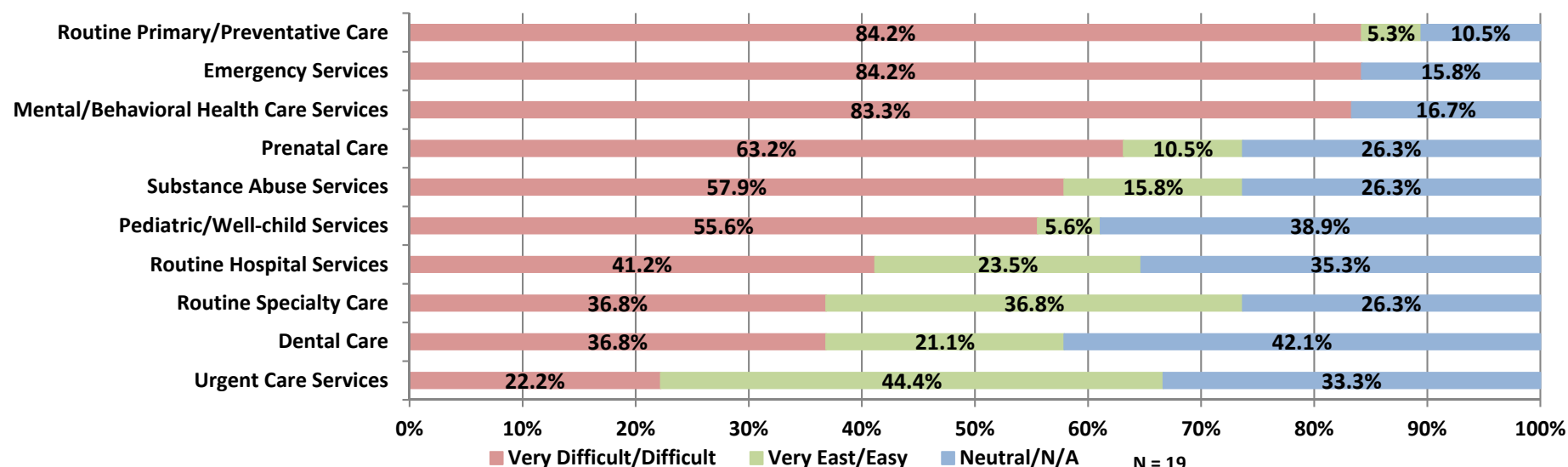
- Respondents asked to rank barriers related to access to primary/preventative care for low income residents in the community which include (in rank order):
 1. Lack of capacity (e.g. insufficient providers/extended wait times)
 2. Lack of providers accepting Medicaid/Medicare
 3. Lack of child care
 4. Lack of coverage/financial hardship
 5. Lack of transportation resource
 6. Language barriers
 7. Difficulty navigating system/lack of awareness of available resources
 8. Eligibility screening process for benefits/covered services
 9. Delays or complications in referrals to services
 10. Delays in authorization/referral approval
 11. Lack of access due to provider distance
 12. Scheduling (system inefficiency/non-standardized process)

Source: Rehoboth McKinley Christian Health Care Services, 2022 Community Health Needs Assessment Survey conducted by CHC Consulting; February 21, 2022 – March 14, 2022.

Access for Low Income Residents

- Respondents were asked to rate the level of difficulty low income residents face when trying to access specific health related services
 - Most difficulty accessing routine primary/preventative care, emergency services and mental and behavioral health care services
 - Easier access to urgent care services, routine specialty care and routine hospital services

Access for Low Income



Source: Rehoboth McKinley Christian Health Care Services, 2022 Community Health Needs Assessment Survey conducted by CHC Consulting; February 21, 2022 – March 14, 2022.



Barriers to Care Coordination

- Below are barriers to effective care coordination
 1. Lack of staff and time for investment in coordination (at the practice and broader community levels)
 2. Lack of communication between health care facilities and providers
 3. Practice norms that encourage clinicians to act in silos rather than coordinate with each other
 4. Complexity of coordination for patients with high levels of need and/or with frequent hospital and clinic visits
 5. Lack of partnerships across community organizations
 6. No (or few) financial incentives or requirements for care coordination for providers
 7. Fragmented, stand-alone services, rather than an integrated delivery system
 8. Limited Primary Care provider involvement in inpatient care
 9. Transition from hospital setting to primary care provider
 10. Limited health IT infrastructure and interoperability
 11. Lack of community involvement
 12. Competition between facilities
 13. Limited financial integration across most providers
 14. Misconception regarding privacy laws and limits to information sharing/access (HIPAA)

Source: Rehoboth McKinley Christian Health Care Services, 2022 Community Health Needs Assessment Survey conducted by CHC Consulting; February 21, 2022 – March 14, 2022.

Barriers to Effective Care Coordination:

Major Barrier Detail

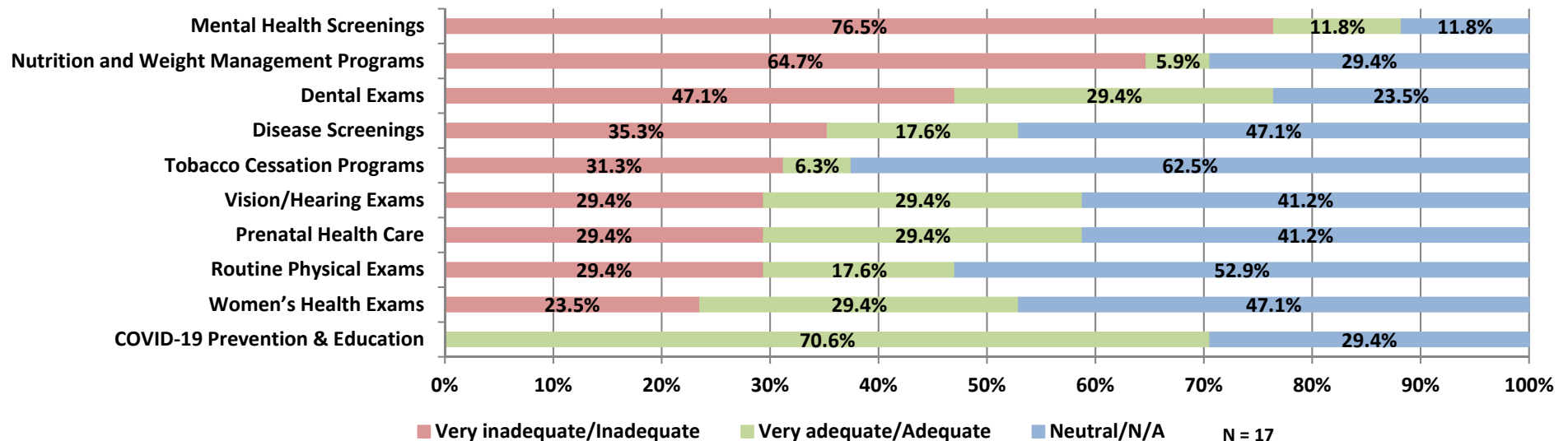
- When asked to elaborate, respondents indicated the following factors as the top barriers of care coordination most affecting patients:
 - Silos, individualism & competition between some organizations and agencies continue to erode at collaborative efforts with the community to work on better health outcomes. Communication and awareness overall of one another has improved.
 - Physician and nursing apathy and feelings of entitlement.
 - Negative mindset is a problem.
 - If there is not enough staffing or staff time is limited because they are already overworked, then this is a major barrier to people receiving adequate care in a timely manner. There are also not enough primary care providers. I know many people who don't have a primary care provider because no one is taking on new patients. This is a serious problem.
 - Communication and coordination between organizations is limited and very delayed. All organizations need to work together to ensure the health of the patient.
 - Too many silos and not enough collaboration.
 - Lack of physicians and overutilization of other providers (non-MDs) makes it difficult to get "medical" treatment for individuals.

Source: Rehoboth McKinley Christian Health Care Services, 2022 Community Health Needs Assessment Survey conducted by CHC Consulting; February 21, 2022 – March 14, 2022.

Health Care Service Adequacy

- Respondents were asked to rate services adequately provided in the community
 - More than half of survey respondents indicated "very inadequate or inadequate" services provided for mental health screenings and nutrition and weight management programs
 - More than 70% of respondents feel COVID-19 prevention & education are "very adequate or adequate"

Adequacy of Health Services



Source: Rehoboth McKinley Christian Health Care Services, 2022 Community Health Needs Assessment Survey conducted by CHC Consulting; February 21, 2022 – March 14, 2022.

Health Care Service Adequacy: Very Inadequate and Inadequate Detail

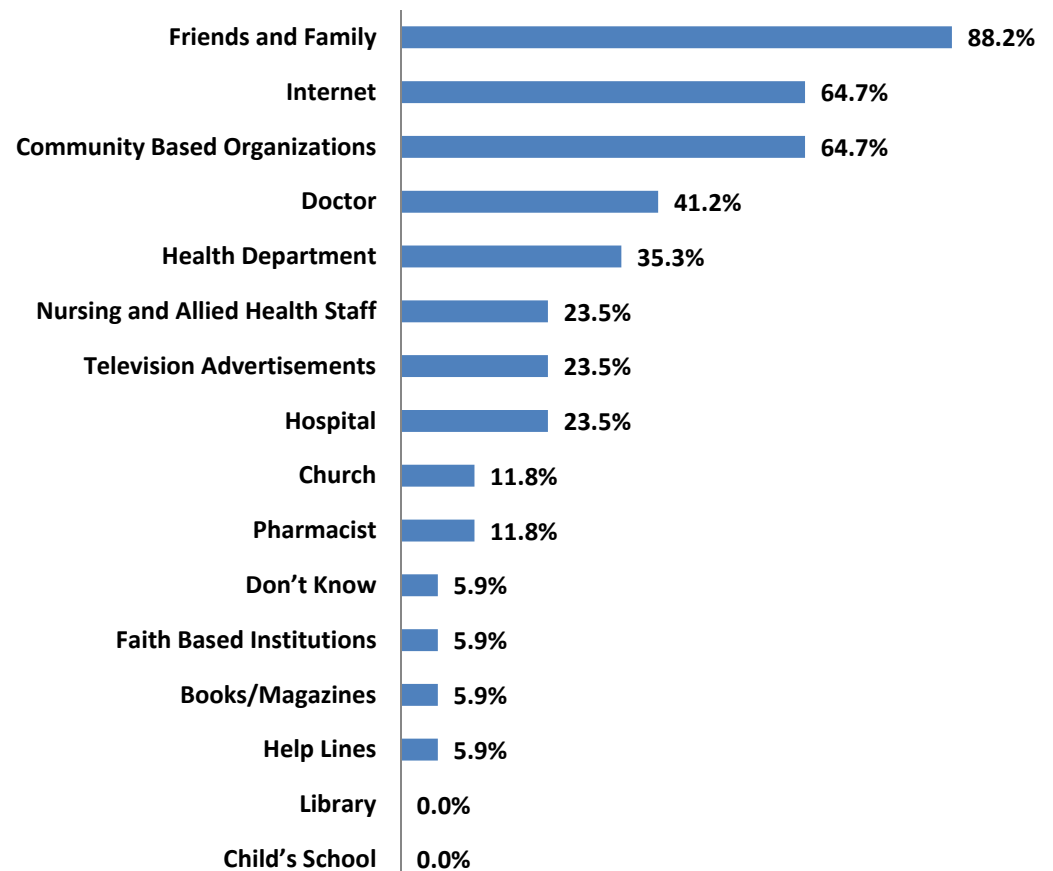
- When asked to give their thoughts on issues of service inadequacy, respondents commented most on the following areas:
 - Preventative & primary care in these sectors would result in better health outcomes for those needing the services.
 - Little to no emphasis on prevention. Our health facilities are designed for "acute" care.
 - Very limited programs and lack of up-to-date interventions. Substance abuse treatment is only short term or outpatient and not trauma-informed.
 - We need more treatment for substance abuse. Substance abuse is also often aligned with mental health issues and many times with homelessness so it is a trickle down effect.
 - Women's health care is severely lacking here.

Source: Rehoboth McKinley Christian Health Care Services, 2022 Community Health Needs Assessment Survey conducted by CHC Consulting; February 21, 2022 – March 14, 2022.

Health Education

- More than 50% of respondents believe that community members get their health-related education from friends and family, the internet or community based organizations
- Less than 20% of respondents believe that community members are accessing health-related education from are churches, pharmacists, faith based institutions, books/magazines, help lines, library or child's school

Source of Health Related Education



N = 17

Source: Rehoboth McKinley Christian Health Care Services, 2022 Community Health Needs Assessment Survey conducted by CHC Consulting; February 21, 2022 – March 14, 2022.

LOCAL COMMUNITY HEALTH REPORTS



2020 Navajo Nation Maternal and Child Health Needs Assessment

- In 2020, the Bureau contracted with Diné College to lead a Maternal and Child Health (MCH) Needs Assessment specific to the Navajo Nation reservation. Diné College engaged the Navajo Nation Epidemiology Center, the Navajo Nation Pregnancy Risk Assessment Monitoring System (PRAMS) advisory group and Northern Arizona University to collaborate in the design, implementation and development of the 2020 Navajo Nation MCH Needs Assessment.
- The purpose of the Navajo Maternal and Child Health Needs Assessment is to identify areas where maternal, infant, and child health can improve on the Navajo Nation.
- Qualitative and quantitative methods were used to collect health data. Primary health data was collected from adolescent, caregiver, and provider input sessions. Secondary health data was reviewed to provide an understanding of health status.

Source: 2020 Navajo Nation Maternal and Child Health Needs Assessment, https://www.aastec.net/wp-content/uploads/2020/10/MaternalChildHealth.V7.HiRez_Sept_30.20.pdf; accessed April 20, 2022.

2020 Navajo Nation Maternal and Child Health Needs Assessment

Methods

- In February and March 2020, five input events were held throughout the Navajo Nation Reservation facilitated by Diné College and Northern Arizona University public health staff. All input events took place at pre-existing events held throughout Navajo and were conducted in one of two ways: in-person using large Post-It notes, or by having participants write their answers to the questions or remotely through a Google Form while staff were facilitating the discussion through video conferencing.
- Participants were asked about:
 - 1) cultural teachings
 - 2) the health needs of caregivers and/or their children
 - 3) what problems/barriers caregivers and/or children experience when trying to access services
 - 4) services that are needed but not being received and
 - 5) what is needed in the community and/or Navajo
- The provider survey was launched in April and concluded at the end of May 2020. The eight-question survey (open ended and multiple-choice questions) was administered through the Qualtrics survey platform to gather demographics, and provider perspectives on:
 - 1) intervention use and needs
 - 2) client and provider barriers
 - 3) health information and
 - 4) maternal and child health priorities

Source: 2020 Navajo Nation Maternal and Child Health Needs Assessment, https://www.aastec.net/wp-content/uploads/2020/10/MaternalChildHealth.V7.HiRez_Sept_30.20.pdf; accessed April 20, 2022.

2020 Navajo Nation Maternal and Child Health Needs Assessment

Priorities

The Navajo Nation will work toward:

- Decreasing:
 - Infant, child, adolescent and maternal morbidities and mortalities
 - Substance abuse, effects and risky behaviors
 - Sex trafficking and violence
- Increasing:
 - Access to health care: family planning/education, prenatal care, infant, child and adolescent care
 - Support for breastfeeding mothers
 - Mental health care access
 - Access to early intervention and support services for children with disabilities and special health care needs
 - Services and support related to family composition, displacement, and homelessness
- Organizing:
 - Database to improve data-driven decisions to focus on persons with special needs, experiencing violence, and environmental health issues

Source: 2020 Navajo Nation Maternal and Child Health Needs Assessment, https://www.aastec.net/wp-content/uploads/2020/10/MaternalChildHealth.V7.HiRez_Sept_30.20.pdf; accessed April 20, 2022.

INPUT REGARDING THE HOSPITAL'S PREVIOUS CHNA



Consideration of Previous Input

- IRS Final Regulations require a hospital facility to consider written comments received on the hospital facility's most recently conducted CHNA and most recently adopted Implementation Strategy in the CHNA process.
- The hospital made every effort to solicit feedback from the community by providing a feedback mechanism on the hospital's website. However, at the time of this publication, written feedback has not been received on the hospital's most recently conducted CHNA and Implementation Strategy.
- To provide input on this CHNA please see details at the end of this report or respond via direct mail or email to the hospital. The physical address and email address can be found directly on the hospital's website at the site of this download.



EVALUATION OF HOSPITAL'S IMPACT



Evaluation of Hospital's Impact

- IRS Final Regulations require a hospital facility to conduct an evaluation of the impact of any actions that were taken, since the hospital facility finished conducting its immediately preceding CHNA, to address the significant health needs identified in the hospital's prior CHNA.
- This section includes activities completed based on the 2020 to 2022 Implementation Plan.



REHOBOTH MCKINLEY CHRISTIAN HEALTH CARE SERVICES IMPLEMENTATION PLAN 2020- 2022

This Implementation Plan seeks to share how Rehoboth McKinley Christian Health Care Services (RMCHCS) has addressed, and plans to address, the health needs and social factors that impede or enhance the ability of women, men, youth, children and families to grow and thrive in McKinley County.

RMCHCS' 2019 Community Health Needs Assessment for McKinley County, and surrounding areas, identified the broad areas of need as priority community health and social concerns for McKinley County and its surrounding communities. These general areas are similar to the areas of need identified in the 2016 Community Health Needs Assessment and encompass many specific issues faced in this region.

The areas of need RMCHCS is responding to in the implementation plan are:

- **Social & Environmental Conditions**
- **Education**
- **Collaboration & Communication**
- **Women's Health**

The goal of the 2019 Community Needs Health Assessment was to look at these priority health issues and social needs to see how they have changed, or not changed over the past three years. The assessment began by comparing measurable statistics from 2016 to 2019 in each of these priority areas and highlighting current anecdotal information regarding each issue.

Environmental and contextual influences also reveal the larger picture of this very diverse and complex community. Some conditions have seen improvement, while some have remained static or worsened. Additionally, the assessment presented the many community efforts made to address these issues between 2016 and 2019.

RMCHCS' 2020-2022 Implementation Plan presents the interventions the organization has initiated in the last three years, as well as plans for future expansion or creation of programs to address these priority areas.

Progress updates have been included in appropriate sections below. It is important to note that due to significant turnover in the organization, certain details may be lacking and/or missing.

SOCIAL & ENVIRONMENTAL CONDITIONS - Poverty/Economic Equity, Employment, Transportation, Access to Services, Safety, Housing

The economic and social environment of an area has a tremendous impact on the health of its residents. Economic equity, jobs that pay a livable wage, affordable adequate housing, and access to services - particularly healthcare, reliable transportation, and a sense of safety are critical to the

quality of life in McKinley County. They influence the mental and physical health of the 72,488 residents of this county and region. As a major employer in the region, RMCHCS is committed to creating employment opportunities and supporting fair wages. By providing access to medical transport through its hospital social workers and the mobile health unit, RMCHCS seeks to reduce the barriers that the lack of transportation, particularly to access healthcare, creates.

2020-2022 Update:

- **RMCHCS has been a leader in being one of the primary employers in McKinley County. Effective January 1, 2021 the minimum wage adjusted for the state of New Mexico with incremental increases through January 1, 2022 to \$12/hour. RMCHCS has led the way by increasing all employee minimum wages to \$12/hour versus waiting. We continue to perform market analysis and internal equity for all positions and employees.**

Each of these environmental factors is important, but for the next few years, RMCHCS will focus its resources on the following areas:

Access to Services - Access to medical care is an important area of focus for RMCHCS. The organization has increased access to services by opening an Urgent Care Center and developing a mobile health clinic program. In 2019, RMCHCS worked on plans to provide women's health services to women ages 15 and up through its mobile health unit. It began providing services in the Ramah-Navajo Chapter, one of the rural areas in the region. The plan is to grow this service and provide additional needed services such as podiatry and eye exams, which is especially important for those with chronic diabetes. Over the next three years, RMCHCS plans to expand services to other areas in rural McKinley County.

RMCHCS' Family Medicine Residency Program addresses the need for more primary care providers in the region, which will help improve access to care. In 2019, RMCHCS achieved accreditation as a sponsoring institution for the Family Medicine Residency Program and in 2020; it achieved accreditation for the program. RMCHCS is recruiting first-year Family Medicine residents who will begin in July 2021. By 2022, RMCHCS expects to have 12 Family Medicine residents in its 3-year program. Palliative care, a specific need mentioned in the Community Needs Assessment, will also be included as one of the rotations in the program.

RMCHCS continues to focus on recruiting additional providers to increase access to care. In 2019, it added three family medicine physicians to its staff as well as two OB-GYN providers. RMCHCS has contracted with two orthopedic providers and is bringing in new services such as hand surgery and spine care. RMCHCS plans to continue to grow women's health, podiatry, and wound care services. RMCHCS will continue to work on expanding its primary care and some specialty care services so individuals will not have to travel long distances to receive care. Telemedicine has become a significant component of RMCHCS' delivery of services, especially since the pandemic began in March 2020. RMCHCS will continue to develop its telemedicine program.

2020-2022 Update:

- **Rehoboth McKinley Christian Health Care Services (RMCHCS) launched its regional medical**

education program in conjunction with the opening of its newly renovated Family Medicine Clinic located at College Clinic, 2111 College Dr. Gallup. The new clinic space includes 12 exam rooms, a registration area and office space for the resident physicians as well as RMCHCS faculty physicians. The Family Medicine Clinic provides care for patients of all ages, from pediatrics to geriatrics, including prenatal and pregnancy services. The mission of the program is to train family medicine residents to provide the highest quality accessible culturally competent care while inspiring them to serve New Mexico and the Four Corner's rural and Native American population.

- The Family Medicine Clinic is the home of RMCHCS' Family Medicine Residency Program. Over the past several years, RMCHCS completed an extensive accreditation and planning process that contributed to the development of the independent Family Medicine Residency beginning on July 1, 2021. The program trained four early career doctors per year (for a total of 12 doctors in the three-year program once fully implemented) to practice full-spectrum family medicine and to serve the unique needs of our community.
- A grand opening ceremony was held on Wednesday, June 30, 2021 from 10am – 12 noon. A short program will take place around 10:15am followed by tours of the clinic. This event also marks the official start of the Burrell College of Osteopathic Medicine's Four Corners Hub at RMCHCS. The Four Corners Hub brings five third-year medical students to complete a full year of medical school training here in Northwest New Mexico. Students spend time with RMCHCS' clinic and hospital physicians, as well as with other physicians stretching from Zuni to Farmington.
- The Family Medicine Residency Program as well as the Four Corners Hub are part of a long-term strategy to address the physician shortages in our region.
- As of May 2022, the residency program is temporary closed and students have moved on to other locations.

Safety – Providing healthcare to the entire region exposes providers to many of the challenges to safety that exist in the community at-large. Working closely with public officials, personnel and community safety is always of utmost significance at RMCHCS. Although the 2019 assessment highlights crime statistics and violence, the greatest safety issue in 2020 is the coronavirus.

RMCHCS has been providing drive-up COVID-19 testing, treating COVID-19 positive patients and working with the City of Gallup, McKinley County, and Gallup Indian Medical Center to help mitigate the spread of the virus. Since March 2020, the hospital, clinics, and urgent care center have focused the majority of their attention on providing safe and effective care for coronavirus patients. McKinley County was as the epicenter of the pandemic from April – June 2020 and throughout the fourth quarter of the year with the highest number of cases per 100,000 population. RMCHCS has been an active participant in the hotel isolation program for unsheltered individuals and families who have tested positive for COVID-19 and who need a safe place to quarantine. RMCHCS has also served on the community-wide committee in the development of an alternative care facility housed in a high school gymnasium. RMCHCS is participating with the State and County on developing a vaccine distribution program. Once the vaccine is available to the public, the distribution program will go in effect, hopefully sometime in late December 2020 and into the first quarter of 2021.

2020-2022 Update:

- RMCHCS no longer provides the option for drive up testing at our Clinic due to changes in Emergency Declaration Waivers. Patients are required to be evaluated by a Provider in order to have a Covid test ordered should their physical condition warrant testing. Covid-19 Antigen Rapid test kits are available at local pharmacies for at home testing and many concerned individuals choose to use them. We continue to work with the McKinley County and New Mexico Departments of Health (NMDOH) as well as the NM Hospital Association (NMHA) and McKinley County Office of Emergency Management as needed. We continue to follow the CDC Guidelines as we have since the start of the pandemic regarding COVID-19 vaccinations and testing. Monthly meetings continue to be sponsored by the NMHA and NMDOH to discuss current treatment options and restrictions, COVID-19 cases, trends, and Variants of Concern that could impact our community. RMCHCS continues to provide public service announcements on a regular basis to keep the community informed.
- RMCHCS is not currently participating in the hotel isolation program since there have been no identified needs. The program is still active and can be utilized when needs are identified and criteria for admission are appropriately met.
- The alternative care facility was closed and the gym converted back to its prior state in June of 2020.
- Participation in COVID-19 vaccine distribution began in December of 2020 and has continued to date. Our organization administers vaccinations through our College Clinic location to anyone meeting the criteria for vaccination as set forth by the CDC and NMDOH. There is currently plenty of COVID-19 vaccine supply to accommodate the needs of those within the community meeting the criteria.
- As of 6/1/2022, RMCHCS has administered 21,779 doses of COVID-19 vaccine. Our county which is McKinley County, has a population of 50,482.
- The percentage of residents in the county who have completed their primary series as documented through our NM state Department of Health is 99%).

Housing - RMCHCS has been a participant in community efforts to deal with housing issues for homeless individuals, in particular a Housing First program for chronically homeless individuals. This project is currently on hold due to lack of land availability and funding. While RMCHCS continues to support community efforts to develop affordable housing opportunities, the organization will no longer take the lead in such efforts, as it must focus its attention and resources on growing and improving access to healthcare. Other organizations in Gallup are now taking the lead in addressing housing needs in the community.

2020-2022 Update:

- The Housing First program is no longer up and running.
- RMCHCS continues to support community efforts to develop affordable housing opportunities, but will focus its efforts and resources on growing and improving access to healthcare.

EDUCATION

One cannot over emphasize the importance of education in the growth and strength of a community. Humans learn from birth until death. The availability of educational opportunities at every stage of life impacts an individual's future sphere of options.

As a healthcare system, RMCHCS' is focusing on higher education and graduate education. RMCHCS will continue to strengthen its connection with University of New Mexico (UNM) Gallup Campus' Nursing Program as well as other health-related programs to provide learning opportunities within the hospital environment for its students. RMCHCS offers opportunities for college students who are in the UNM BA/MD program and medical students from various institutions to work with the medical staff. RMCHCS now serves as a primary "Hub" for Burrell College of Medicine in Las Cruces, NM, marked by increasing medical student engagement in the community.

There are also plans for outreach to educate and encourage medical careers among secondary students. With the addition of the Family Medicine Residency Program, RMCHCS plans to have residents connect with middle school and high school students to encourage them to consider careers in medicine. RMCHCS has a robust continuing medical education program that provides programs and trainings for clinical staff and physicians from RMCHCS and health centers throughout the region and will continue to support this program.

2020-2022 Update:

- RMCHCS continues to work with the University of New Mexico (UNM) Gallup campus to support the Nursing Program and students. This is a collaborative effort with the CNO and CHRO from RMCHCS with the Nursing Director of the program. Effective May 2022, RMCHCS is now offering RN scholarships with hopes of implementing an official Nurse Intern program Fall of 2022. Ideally these positions would be filled with RN scholarship recipients. CHRO at RMCHCS will be discussing additional programs the local campus offers and expanding offerings such as a Medical Assistant program.
- As a healthcare system, RMCHCS is focusing on higher education and graduate education. RMCHCS will continue to strengthen its connection with University of New Mexico Medical School, UNM College of Nursing and (UNM) Gallup Campus' Nursing and Allied Health Program as well as other health-related programs to provide learning opportunities within the hospital environment for its students. Through UNM, RMCHCS offers opportunities for college students who are in the UNM BA/MD program, the Rural and Urban Underserved Program (RUUP) as well as other UNM medical school programs.
- RMCHCS works with other medical and health profession educational institutions such as Central New Mexico Community College, Carrington College, Pima Medical Institute, San Juan College, Walden University, Grand Canyon University and other institutions in New Mexico and around the country. RMCHCS serves as a primary "Hub" for the Burrell College of Medicine in Las Cruces, New Mexico, increasing medical student engagement in the community.
- Students can conduct clinical rotations at RMCHCS in medicine, nursing, emergency medical services, medical assistant, laboratory services, surgical technicians, radiology, physical

therapy, pharmacy technicians, medical records and other allied health fields.

- RMCHCS will continue to strengthen its connection with University of New Mexico (UNM) Gallup Campus' Nursing, EMS and other allied health fields programs to provide learning opportunities within the hospital environment for its students. This is a collaborative effort with the Chief Nursing Officer, the Chief Human Resource Officer (CHRO) and the Education Department.
- RMCHCS offers opportunities for high school students to experience healthcare settings by observing healthcare providers and staff in real life health settings. These shadowing opportunities can provide students some help on what direction they may want to take to start their health careers.

COLLABORATION & COMMUNICATION

Collaboration is not easily measured. Numbers or statistics do not accurately evaluate collaborative efforts. The 2016 Community Health Needs Assessment revealed that there were many individuals and organizations working in silos, unaware of the work of others, on solutions to the same issues. The 2019 assessment shows evidence of real effort and growth in collaboration within the organizations in the community over the past several years. Yet there are still numerous opportunities to build even stronger relationships and break down long- standing barriers. The open sharing of data among agencies and providers continues to be a challenge.

RMCHCS is involved in many health-related collaborative groups that address various community health needs. In particular, collaborations with surrounding Indian Health Service hospitals continue to grow. Gallup Indian Medical Center (GIMC) and Zuni Comprehensive Health Center will serve as training sites for the Family Medicine Residency Program. RMCHCS is collaborating with Pine Hill Health Clinic and Community Outreach and Patient Empowerment program on the mobile health clinic program. As mentioned earlier, RMCHCS has been collaborating with Gallup Indian Medical Center, the County and the City on issues related to the pandemic and the motel respiratory shelter program. RMCHCS participates in multiple weekly zoom meetings with collaborating organizations. RMCHCS will continue to seek additional collaborations and partnerships to address health needs in the community.

RMCHCS also participates in the Community Alcohol Task Force, which is addressing Medical Detox and Medically Assisted Treatment (MAT) for addiction, establishing a standardized protocol for all hospitals, clinics and providers. RMCHCS is planning to offer MAT at WellSpring Recovery Center, RMCHCS' go-day residential substance abuse treatment program, and has already begun offering this service at its primary and specialty clinics.

WellSpring Recovery Center has reached out to community professionals with various skills and education to collaborate in providing client services to help with post-recovery re-entry. The Center has an agreement with the McKinley County Drug Court to provide Intensive Outpatient Services. In 2021, Santa Fe Recovery Center expects to open a sobering house in Gallup. WellSpring Recovery Center will collaborate with Santa Fe Recovery Center to provide services for individuals who are ready to leave their program and enter a residential treatment program.

Recently the facility received accreditation from the Commission on Accreditation of Rehabilitation Facilities (CARF), which should enable RMCHCS to become Medicaid-certified at WellSpring Recovery Center.

2020-2022 Update:

- In May 2021, RMCHCS temporarily suspended operations of WellSpring Recovery Center, the residential treatment center for adults struggling with substance use disorders, while it works to identify a new partner to manage the program. The move follows significant and ongoing financial losses in the millions at WellSpring, as well as an analysis of investments needed to ensure the continued delivery of safe, quality care. In addition to financial challenges, WellSpring experienced staff turnover and a lower-than-average census due to COVID-19. WellSpring suspended new admissions and began working with its existing clients to develop an ongoing care plan at other sites. Where possible, residents were transferred to a similar treatment facility in the area. Additionally, the WellSpring employees impacted by the suspension were encouraged to apply for open positions at RMCHCS. Severance and outplacement services were also provided.
- As of January 1, 2022, WellSpring Recovery Center is no longer in business and is completely closed.

WOMEN'S HEALTH

Reproductive health affects the very heart of families and communities. The strength of a community is partially dependent on the continued growth of its population and the health and development of its children. Across her lifespan, a woman's health status matters to herself, her family and her community. Women access the health system more frequently than men do, both for themselves and on behalf of their children.

RMCHCS is expanding services in women's health by growing its women's health program and by providing more services for the community. RMCHCS has added two female OB-GYN physicians and two visiting physicians who are part of a fellowship program, which includes six months in an underserved area such as McKinley County. Women's health will be an important component of the Family Medicine Residency Program. RMCHCS is also planning to expand access to women's health services through the mobile clinic and is working to expand those services to other areas in the County.

2020-2022 Update:

- Since late 2021, RMCHCS has become the newest Human Milk Repository Station in N.M. (HMRNM), the states only collection and distribution organization for human milk (breastmilk) donations.
- RMCHCS continues to focus on and invest in the OG/GYN service line enhancing the services we can provide to the expecting parents. The WHU is currently undergoing renovation and will be completed in June of 2022, providing not only an aesthetically pleasing environment but one with state of the art equipment.

PREVIOUS PRIORITIZED NEEDS



Previous Prioritized Needs

2016 Prioritized Needs

1. Substance Abuse
 - Alcohol
 - Opioids
2. Social & Environmental Conditions
3. Poverty/Economic Equity, Employment, Housing, Access to Services, Transportation, Safety
 - Affordable Housing/Homelessness
 - Access to Services
4. Education and Family Supports
 - Early Education
 - Early Intervention
 - Early Childhood Education
 - Elementary Education
 - Middle School Education
 - High School Education
5. Collaboration and Communication
6. Reproductive Health
 - Maternal and Infant Health
 - Sexual Activity

2019 Prioritized Needs

1. Substance Abuse
 - Alcohol
 - Opioids
2. Social & Environmental Conditions
3. Poverty/Economic Equity, Employment, Housing, Access to Services, Transportation, Safety
 - Affordable Housing/Homelessness
 - Access to Services
4. Education and Family Supports
 - Early Education
 - Early Intervention
 - Early Childhood Education
 - Elementary Education
 - Middle School Education
 - High School Education
5. Collaboration and Communication
6. Reproductive Health
 - Maternal and Infant Health
 - Sexual Activity

Source: Rehoboth McKinley Christian Health Care Services, 2016 and 2019 Community Health Needs Assessment and Implementation Plan reports, https://www.rmch.org/getpage.php?name=community_health_needs&sub=About%20Us; information accessed March 21, 2022.

2022 CHNA PRELIMINARY HEALTH NEEDS



2022 Preliminary Health Needs

- Access to Affordable Care and Reducing Health Disparities Among Specific Populations
- Access to Dental Care Services and Providers
- Access to Mental and Behavioral Health Care Services and Providers
- Continued Recruitment & Retention of Healthcare Workforce
- Prevention, Education and Services to Address High Mortality Rates, Chronic Diseases, Preventable Conditions and Unhealthy Lifestyles



PRIORITIZATION



The Prioritization Process

- In April/May 2022, leadership from RMCHCS reviewed the data findings and prioritized the community's health needs. Members of the hospital CHNA team included:
 - Robert Whitaker, Chief Executive Officer
 - Blaise Bondi, I-Chief Financial Officer
 - Curry Graham, Chief Nursing Officer
 - Rebecca Martell, Senior Vice President/Chief Human Resource Officer
 - Steve Kittridge, Vice President of Clinical Practice Management
 - Chris Lang, Director of Operations
 - Rhonda Ray, Director of Marketing/Government Affairs/Acting Director WHF
- Leadership ranked the health needs based on three factors:
 - Size and Prevalence of Issue
 - Effectiveness of Interventions
 - Hospital's Capacity
- See the following page for a more detailed description of the prioritization process.



The Prioritization Process

- The CHNA Team utilized the following factors to evaluate and prioritize the significant health needs.

| |
|--|
| 1. Size and Prevalence of the Issue |
| <ul style="list-style-type: none">a. How many people does this affect?b. How does the prevalence of this issue in our communities compare with its prevalence in other counties or the state?c. How serious are the consequences? (urgency; severity; economic loss) |
| |
| 2. Effectiveness of Interventions |
| <ul style="list-style-type: none">a. How likely is it that actions taken will make a difference?b. How likely is it that actions will improve quality of life?c. How likely is it that progress can be made in both the short term and the long term?d. How likely is it that the community will experience reduction of long-term health cost? |
| |
| 3. RMCHCS Capacity |
| <ul style="list-style-type: none">a. Are people at RMCHCS likely to support actions around this issue? (ready)b. Will it be necessary to change behaviors and attitudes in relation to this issue? (willing)c. Are the necessary resources and leadership available to us now? (able) |



Health Needs Ranking

- Hospital leadership participated in a prioritized ballot process to rank the health needs in order of importance, resulting in the following order:
 1. Continued Recruitment & Retention of Healthcare Workforce
 2. Access to Mental and Behavioral Health Care Services and Providers
 3. Access to Affordable Care and Reducing Health Disparities Among Specific Populations
 4. Prevention, Education and Services to Address High Mortality Rates, Chronic Diseases, Preventable Conditions and Unhealthy Lifestyles
 5. Access to Dental Care Services



Final Priorities

- Hospital leadership decided to address four of the five of the ranked health needs. The final health priorities that RMCHCS will address through its Implementation Plan are listed below:
 1. Continued Recruitment & Retention of Healthcare Workforce
 2. Access to Mental and Behavioral Health Care Services and Providers
 3. Access to Affordable Care and Reducing Health Disparities Among Specific Populations
 4. Prevention, Education and Services to Address High Mortality Rates, Chronic Diseases, Preventable Conditions and Unhealthy Lifestyles



PRIORITIES THAT WILL NOT BE ADDRESSED



Priorities That Will Not Be Addressed

- RMCHCS decided not to specifically address “Access to Dental Care Services and Providers.”
- While RMCHCS acknowledges that this is a significant need in the community, "Access to Dental Care Services and Providers" is not addressed largely due to the fact that it is not a core business function of the hospital and the limited capacity of the hospital to address this need.
- RMCHCS will continue to support local organizations and efforts to address this need in the community.



RESOURCES IN THE COMMUNITY



Additional Resources in the Community

- In addition to the services provided by RMCHCS, other charity care services and health resources that are available in McKinley County are included in this section.



CHC CHNA Resource List 1-2022

| Name/Organization | Address | Address (cont'd) | Phone Number | Email Address | Category/Description |
|--|---|-----------------------|----------------|--|--|
| 24- Hour Domestic Violence Hotline | | | 1-800-799-7233 | | Crisis Intervention |
| A:shiwi College and Career Center | 67 Rte. 301 N | Zuni, NM 87327 | 1-505-782-6010 | | Education: College/Career Center |
| A:shiwi Transport | PO Box 339 | Zuni, NM 87327 | 1-505-782-7288 | | Transportation |
| Adult Protective Services | 2550 Cerrillos Road | Santa Fe, NM 87505 | 1-866-654-3219 | | Crisis Intervention: adult abuse, neglect & exploitation reporting |
| Amazing Grace Personal Care Services | 1613 S. 2nd St. | Gallup, NM 87301 | 1-505-863-5898 | | Healthcare: Home Health Care |
| American Heart Association - New Mexico | 2201 San Pedro Dr. NE | Albuquerque, NM 87110 | 1-505-485-1330 | | Healthcare - Support |
| Basin Coordinated Health Care | 1662 S. 2nd #5817 | Gallup, NM 87301 | 1-505-863-2357 | | Healthcare: |
| Battered Family Services. Inc. - Gallup | 207 S. Strong Dr. | Gallup, NM 87301 | 1-505-722-7483 | | Crisis Intervention |
| BCBS of NM | PO Box 27630 | Albuquerque, NM 87113 | 1-505-291-3500 | | Healthcare - Insurance |
| BeeHives Homes of Gallup | 600 Gurley Ave. | Gallup, NM 87301 | 1-505-591-7024 | | Housing: Assisted living |
| BeWellNM - NM Insurance Marketplace | | Albuquerque, NM | 1-833-862-3935 | | Healthcare - Insurance |
| Bible Baptist Shepard School | PO Box 1708 | Crownpoint, NM 87313 | 1-505-786-7193 | | Education: Grades 3-10 |
| Big Brothers Big Sisters Mountain Region | 100 E. Aztec | Gallup, NM 87301 | 1-505-726-4285 | | Community Support |
| Bluewater Acres Fire Department | HC 62 Box 4066 | Thoreau, NM 87323 | 1-505-862-8238 | | Public Safety |
| BSNF Railroad Hotline | | | 1-800-832-5452 | | Transportation: railway |
| Bureau of Indian Affairs - Ramah | HC 61 Box 14 | Ramah, NM 87321 | 1-505-775-3235 | | Government |
| Calvary Indian Mission School | 5 miles SW of Coyote Canyon Chpt. House | Brimhall, NM 87310 | 1-505-735-2246 | | Education: K-5 |
| Catherine A. Miller Elementary School | 6102 Challenger Rd. | Church Rock, NM 87311 | 1-505-721-1400 | | Education: Elementary School |
| Catholic Charities | 503 US Rte. 66 | Gallup, NM 87301 | 1-505-722-2837 | | Community Support |
| Cecil Garcia Fitness Center | 700 Old Zuni Road | Gallup, NM 87301 | 1-505-722-7271 | | Fitness |
| Centers for Medicare and Medicaid | | | 1-800-633-4227 | | Healthcare - Government |
| Chee Dodge Elementary School | 641 N Hwy 491 | Yahtahey, NM 87375 | 1-505-721-1300 | | Education: Elementary School |
| Chief Manuelito Middle School | 1325 Rico St. | Gallup, NM 87301 | 1-505-721-5600 | | Education: Middle School |
| Children, Youth and Families Department | 1720 E. Aztec #B | Gallup, NM 87301 | 1-505-722-7857 | | Crisis Intervention: Protective Services, Individual & Family Support Services |
| Church Rock Chapter | 57 Telstar Road | Church Rock, NM 87311 | 1-505-488-2166 | churchrock@navajochapters.org | Community Support |
| Church Rock Senior Center | 57 Telstar Road | Church Rock, NM 87311 | 1-505-905-5683 | | Community Support |
| City of Gallup Animal Control | | Gallup, NM 87301 | 1-505-726-1453 | | Animal Control |
| City of Gallup Utility | | Gallup, NM 87301 | 1-505-863-1200 | | Utilities |
| Coaches Korner | 104 Boardman Dr. | Gallup, NM 87301 | 1-505-203-6164 | | Fitness |
| Community Hospital Corporation | 7950 Legacy Dr. Ste. 1000 | Plano, TX 75024 | 1-972-943-6400 | | Healthcare - RMCHCS Management Company |
| Coyote Canyon Chapter | PO Box 257 | Brimhall, NM 87310 | 1-505-735-2623 | coyotecanyon@navajochapters.org | Community Support |
| Coyote Canyon Rehabilitation Center | PO Box 158 | Brimhall, NM 87310 | 1-505-735-2261 | | Community Support |
| Crimestoppers | | | 1-877-722-6161 | | Law Enforcement |
| Crownpoint Chapter | PO Box 336 | Crownpoint, NM 87313 | 1-505-786-2130 | | Community Support |
| Crownpoint Elementary School | #1 Codetalker Dr. | Crownpoint, NM 87313 | 1-505-721-1500 | | Education: Elementary School |
| Crownpoint Field Office - EMS | PO Box 358 | Crownpoint, NM 87313 | 1-505-786-6273 | | Healthcare: EMS/transportation |
| Crownpoint Healthcare Facility | Junction Rd. 371 Rt. 9 | Crownpoint, NM 87313 | 1-505-786-5291 | | Healthcare: Medical Clinic |
| Crownpoint High School | #1 Eagle Dr. | Crownpoint, NM 87313 | 1-505-721-1600 | | Education: High School |
| Crownpoint Hospital | Junction Rd. 371 Rt. 9 | Crownpoint, NM 87313 | 1-505-786-5291 | | Healthcare: Acute Care Hospital/Emergency Department |
| Crownpoint Judicial Court | 2925a NM 371 | Crownpoint, NM 87313 | 1-505-786-2072 | | Courts |
| Crownpoint Middle School | #1 Eagle Dr. | Crownpoint, NM 87313 | 1-505-721-5400 | | Education: Middle School |
| Crownpoint Volunteer Fire Department | Chaco Blvd | Crownpoint, NM 87313 | 1-505-786-7385 | | Public Safety |
| Crystal Chapter | Indian Service Rte. 12 | Crystal, NM 87328 | 1-505-777-2800 | | Community Support |
| Dalton Pass Chapter | PO Box 369 | Crownpoint, NM 87313 | 1-505-786-2370 | | Community Support |
| David Skeet Elementary School | Rt. 45 Jones Rd | Vanderwagon, NM 87326 | 1-505-721-1700 | | Education: Elementary School |
| Del Norte Elementary School | 700 W. Wilson | Gallup, NM 87301 | 1-505-721-5200 | | Education: Elementary School |
| Dental Innovations | 214 West Aztec | Gallup, NM 87301 | 1-505-863-4457 | | Healthcare - Dental |
| Dept. of Veterans Affairs Medical Center | 1501 San Pedro Dr. SE | Albuquerque, NM 87108 | 1-505-265-1711 | | Healthcare - Veterans |
| DNV GL- Hospital Accreditation | 400 Teche Center Dr. Ste. 100 | Milford, OH 45150 | 1-866-528-6842 | | Healthcare- Accreditation |
| Dowa Yalanne Elementary School | 22 Salt Lake Rd. | Zuni, NM 87327 | 1-505-782-4441 | | Education: Elementary School |
| Family Medicine Associates of Gallup | 517 Nizhoni Blvd | Gallup, NM 87301 | 1-505-722-6603 | | Healthcare: Medical Clinic |
| Four Corners Detox Recovery Center | 2105 Hasler Valley Rd. | Gallup, NM 87301 | 1-505-413-3447 | | Community Support - Detox Recovery |
| Gallup Aquatic Center | 620 Boardman | Gallup, NM 87301 | 1-505-726-5460 | | Fitness |
| Gallup Cardiology | 2028 E. Aztec | Gallup, NM 87301 | 1-505-863-2208 | | Healthcare: Cardiology Clinic |
| Gallup Central High School | 325 Marguerite | Gallup, NM 87301 | 1-505-721-2400 | | Education: Middle School |

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| Gallup Chamber of Commerce | 106 US Rte. 66 | Gallup, NM 87301 | 1-505-722-2228 | | Community Support |
| Gallup Christian School | 12 theta St. | Gallup, NM 87301 | 1-505-722-2007 | | Education: Grades 2-12 |
| Gallup Dental Group | 1421 US - 491 | Gallup, NM 87301 | 1-505-863-8000 | | Healthcare - Dental |
| Gallup District Court | 207 W. Hill Ave. | Gallup, NM 87301 | 1-505-863-6816 | | Courts |
| Gallup Eye Group | 816 S. Boardman Dr. | Gallup, NM 87301 | 1-505-339-2015 | | Healthcare - Vision - Optometrist |
| Gallup Indian Medical Center | | Gallup, NM 87301 | 1-505-722-1000 | | Healthcare |
| Gallup McKinley County Schools Administration Offices | 640 Boardman | Gallup, NM 87301 | 1-505-721-1199 | | Education - Administration |
| Gallup Middle School | 1000 S. Grandview | Gallup, NM 87301 | 1-505-721-2700 | | Education: Middle School |
| Gallup Municipal Airport | 2111 W. Historic Hwy 66 | Gallup, NM 87301 | 1-505-863-5501 | | Transportation |
| Gallup Municipal Court | 451 State Road 564 | Gallup, NM 87301 | 1-505-863-4469 | | Courts |
| Gallup Municipal Police Department | 451 State Road 564 | Gallup, Nm 87301 | 1-505-863-9365 | | Law Enforcement, Government |
| Gallup Senior Center | 607 N. 4th St. | Gallup, NM 87301 | 1-505-722-4740 | | Community Support |
| Gallup VA Clinic | 1981 NM 602 | Gallup, NM 87301 | 1-505-722-7234 | | Healthcare - Veterans |
| Gallup WIC Office | 915 W. Coal | Gallup, NM 87301 | 1-505-722-4767 | | Community Support |
| Genesis Health Care | 306 Nizhoni Blvd | Gallup, NM 87301 | 1-505-863-9551 | | Healthcare: Nursing Home/Long Term/Short Term/Skilled/Respite |
| GIMC Outpatient Surgical Center | 516 Nizhoni Blvd | Gallup, NM 87301 | 1-505-722-1000 | | Healthcare: Outpatient Surgery Center |
| GIMC Pharmacy | 516 Nizhoni Blvd | Gallup, NM 87301 | 1-505-722-1170 | | Healthcare - Pharmacy |
| GIMC Primary Walk-in Clinic | 516 Nizhoni Blvd | Gallup, NM 87301 | 1-505-722-1000 | | Healthcare: Medical Clinic |
| Habitat for Humanity International | Multiple Location | McKinley County | 1-800-422-4828 | | Housing |
| Halona Marketplace | 1276 nm 53 | Zuni, NM 87327 | 1-505-782-4547 | | Food: Grocery Store |
| Hanger Clinic : Prosthetics and Orthotics | 1660 S. 2nd St. | Gallup, NM 87301 | 1-505-722-2532 | | Healthcare - Prosthetics and Orthotics |
| Harold Runnels Athletic Center | 898 E. Wilson Ave #700 | Gallup, NM 87301 | 1-505-722-7107 | | Fitness |
| Hilltop Christian School | 2 A Deerfield | Gallup, NM 87301 | 1-505-371-5726 | | Education: PreK-7 |
| Hiroshi Miyamura High School | 680 Boardman | Gallup, NM 87301 | 1-505-721-1900 | | Education: Middle School |
| HME Specialists | 205 Nizhoni Blvd. | Gallup, NM 87301 | 1-505-888-6500 | | Healthcare - DME |
| Home Care Options | 1610 S. 2nd Street | Gallup, NM 87301 | 1-505-722-6250 | | Healthcare: Home Health Care |
| Hozho Center | 216 West Maloney Ave | Gallup, NM 87301 | 1-505-870-1483 | | Community Support |
| Indian Hills Elementary School | 3604 Ciniza Dr. | Gallup, NM 87301 | 1-505-721-2900 | | Education: Elementary School |
| Jefferson Elementary School | 300 Mollica | Gallup, NM 87301 | 1-505-721-3000 | | Education: Elementary School |
| KASA - TV | 2400 Monroe NE | Albuquerque, NM 87110 | 1-505-881-4444 | | Communications: Television |
| Kennedy Middle School | 600 Boardman | Gallup, NM 873-1 | 1-505-721-3100 | | Education: Middle School |
| KGAK | 401 E. Coal Ave | Gallup, NM | 1-505-722-9400 | | Communications: Radio |
| KGLP - Gallup Public Radio | 705 Gurley Ave, | Gallup, NM 87301 | 1-505-863-7626 | | Communications: Radio |
| KGLX | 1632 S. Second St | Gallup, NM 87301 | 1-866-863-9391 | | Communications: Radio |
| Khorey Eye Care | 1300 West Maloney | Gallup, NM 87301 | 1-505-863-1909 | | Healthcare - Vision - Optometrist |
| KOAT - TV | 3801 Carlisle Blvd | Albuquerque, NM 87107 | 1-505-884-7777 | | Communications: Television |
| KOB - TV | 4 Broadcast Blvd NE | Albuquerque, NM 87104 | 1-505-243-4411 | | Communications: Television |
| KRKE | 1213 San Pedro NE | Albuquerque, NM 87110 | 1-505-899-5029 | | Communications: Radio |
| KRQE - TV | 13 Broadcast Place SW | Albuquerque, NM 87104 | 1-505-243-2285 | | Communications: Television |
| KYVA/KXXI/K-YA-T - Millennium Media Inc. | 300 W. Aztec Ave. Ste 200 | Gallup, NM 87301 | 1-505-863-6851 | | Communications: Radio |
| Larry Brian Mitchell Recreation Center | 400 Marguerite St | Gallup, NM 87301 | 1-505-722-2619 | | Fitness |
| Lexington Hotel | 405 US Rte. 66 | Gallup, NM 87301 | 1-505-344-2323 | | Community Support - Homeless Shelter |
| Lincoln Elementary School | 801 West Hill | Gallup, NM 87301 | 1-505-721-3400 | | Education: Elementary School |
| Major Market | 1254 NM 53 | Zuni, NM 87327 | 1-505-495-1053 | | Food: Grocery Store |
| Major Medical | 814 Boardman Dr. | Gallup, NM 87301 | 1-505-863-5220 | | Healthcare - DME |
| Manuelito Children's Home | PO Box 58 | Gallup, NM 87305 | 1-505-863-5530 | | Community Support/Social Advocacy Groups: Residential Care/Education/Counseling/Spiritual |
| March of Dimes NM Chapter | 7007 Wyoming Blvd NE # E2 | Albuquerque, NM 87109 | 1-505-344-5150 | | Community Support - Infants and Children |
| McKinley Community Health Alliance | PO Box 224 | Mentmore, NM 87319 | 1-505-870-9239 | chrisbhudson15@gmail.com | Community Action/Social Advocacy Groups: Advocacy Organization |
| McKinley Community Health Alliance | 2025 E. Aztec Ave. | Gallup, NM 87301 | 1-505-862-9329 | | Community Support |
| McKinley Country Fire and Emergency Services | 413 Bataan Veterans Street | Gallup, NM 87301 | 1-505-863-3839 | | Public Safety |
| McKinley Country Adult Detention Center | 255 Boardman Ave. | Gallup, NM 87301 | 1-505-726-8474 | | Law Enforcement |
| McKinley County Emergency Management | 2221 Boyd Ave | Gallup, NM 87301 | 1-505-722-4248 | | Public Safety |
| McKinley County Magistrate Court | 285 Boardman Dr. | Gallup, NM 87301 | 1-505-722-6636 | | Courts |
| McKinley County Manager's Office | PO Box 70 | Gallup, NM 87305 | 1-505-863-1400 | | Government |
| McKinley County Sheriffs Office | 300 B Nizhoni Blvd | Gallup, NM 87301 | 1-505-722-7205 | | Law Enforcement, Government |
| McKinley Medical Supply | 210 Nizhoni Blvd. | Gallup, NM 87301 | 1-505-722-4311 | | Healthcare - DME |
| Mexican Springs (Nakai Bito) Chapter | PO Box 689 | Tohatchi, NM 87325 | 1-505-733-2832 | | Community Support |
| Missing Persons Information | 4491 Cerrillos Rd. | Santa Fe, NM 87507 | 1-505-827-9297 | | Law Enforcement, Government |

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| Navajo Elementary School | 123 Cedar Ave | Navajo, NM 87328 | 1-505-721-3500 | | Education: Elementary School |
| Navajo Middle School | West Walnut Ave | Navajo, NM 87328 | 1-505-721-5300 | | Education: Middle School |
| Navajo Nation Covid isolation Referral | | | 1-844-935-3932 | | Healthcare - Covid Resource |
| Navajo Nation Dept. of Health | Window Rock Blvd. | Window Rock, AZ 86515 | 1-928-871-6350 | | Healthcare - Government |
| Navajo Nation Head Start | PO Box 3390 | Window Rock, AZ 86515 | 1-928-871-6000 | | Education: Early Childhood Care & Education |
| Navajo Nation Office of Vital Records & Identification - Central | PO Box 3240 | Window Rock, AZ 86515 | 1-928-871-6386 | | Vital Records |
| Navajo Nation Police - Window Rock | PO Box 250 | Window Rock, AZ 86515 | 1-505-871-6111 | | Law Enforcement |
| Navajo Nation Police - Crownpoint | 2925a NM 371 | Crownpoint, NM 87313 | 1-505-786-2050 | | Law Enforcement |
| Navajo Nation Programs | PO Box 3390 | Window Rock, AZ 86515 | 1-928-871-6000 | | Government, Multi-source |
| Navajo Nation Tribal Courts | PO Box 3390 | Window Rock, Az 86515 | 1-928-871-6000 | | Courts |
| Navajo Pine High School | West Walnut Ave | Navajo, NM 87328 | 1-505-721-3600 | | Education: Middle School |
| Navajo Pine Volunteer Fire Department | Walnut Ave & Shepard Spring Blvd | Navajo, NM 87328 | 1-505-777-2233 | | Public Safety |
| Navajo Technical University | Lowerpoint Rd State Hwy 371 | Crownpoint, NM 87313 | 1-505-674-5764 | | Education: University |
| Navajo Township Community Development Corp. | PO Box 876 | Navajo, NM 87328 | 1-505-777-2245 | | Housing |
| Navajo United Way | 265 Loop Rd. | Window Rock, AZ 86515 | 1-928-871-6661 | | Community Support |
| NCI - Detox | 2201 Boyd Ave | Gallup, NM 87301 | 1-505-863-3869 | | Crisis Intervention: Detox Facility/Alcohol Treatment |
| New Mexico Department of Health | 1190 S. St Francis Drive | Santa Fe, NM 87505 | 1-505-827-2613 | | Healthcare - Government |
| New Mexico Hospital Assoc. | 7471 Pan American Fwy NE | Albuquerque, NM 87109 | 1-505-343-0010 | | Healthcare - Support |
| New Mexico Legal Aid | 211 W. Mesa Ave Ste. 5 & 6 | Gallup, NM 87301 | 1-505-722-5517 | | Community Support |
| New Mexico Medical Board | 2055 S. Pacheco Street | Santa Fe, NM 87505 | 1-505-476-7220 | | Licensing and Registration, Government |
| New Mexico State Police Dept. - Gallup | 4200 US Rte. 66 | Gallup, NM 87301 | 1-505-863-9353 | | Law Enforcement, Government |
| Nizhoni Vision Center | 305 Nizhoni Blvd | Gallup, NM 87301 | 1-505-863-5747 | | Healthcare - Vision - Optometrist |
| NM Aging & Long Term Services Dept. | 2550 Cerrillos Road | Santa Fe, NM 87505 | 1-866-451-2901 | | Community Action/ Social Advocacy Groups: Promoting independence of elderly and disabled individuals |
| NM Area Agencies on Aging - McKinley County | PO Box 51156 | Santa Fe, NM 87502-6110 | 1-505-827-7313 | | Community Support |
| NM Area Agencies on Aging - Navajo Nation | PO Box 1390 | Window Rock, AZ 86515 | 1-928-871-6743 | | Community Support |
| NM Area Agencies on Aging - Pueblos and Apache Tribe | 1015 Tijeras NM Ste. 200 | Albuquerque, NM 87102 | 1-505-222-4516 | | Community Support |
| NM Behavioral Health Collaborative | 37 Plaza La Prensa | Santa Fe, NM 87507 | 1-505-476-9266 | | Healthcare: Behavioral Health & Substance Abuse Services |
| NM Bureau of Geology and Mineral Resources | 801 Leroy Place | Socorro, NM 87801 | 1-575-835-5490 | | Environmental Protection and Improvement |
| NM Commission for Deaf and Hard of Hearing Persons | 2407 W. Picacho, Suite A-100 | Las Cruces, NM 88007 | 1-575-525-1036 | | Community Action/Social Advocacy Groups |
| NM Correctional Facility | 4337 NM 14 | Santa Fe, NM 87508 | 1-505-827-8645 | | Law Enforcement: Correctional System |
| NM Courts Information Center | 237 Don Gasper | Santa Fe, NM 87501 | 1-505-827-4800 | | Courts, Government |
| NM Department of Agriculture | 3190 S. Espina | Las Cruces, NM 88003 | 1-575-646-3007 | | Food, Government |
| NM Department of Transportation | 1120 Cerrillos Road | Santa Fe, NM 87504-1149 | 1-505-827-5100 | | Transportation, Government |
| NM Dept. of Finance and Administration | 407 Galisteo Street | Santa Fe, NM 87501 | 1-505-827-4985 | | Government |
| NM DOH Family Infant Toddler Program | 810 San Mateo | Santa Fe, NM 87502-6110 | 1-877-696-1472 | | Healthcare: Rehab Services, Disabilities & Health Concerns, Government |
| NM Environmental Department | 525 Camino De Los Marquez | Santa Fe, NM 87505 | 1-505-476-3614 | | Environmental Protection and Improvement, Government |
| NM Higher Education Department | 2048 Galisteo Street | Santa Fe, NM 87505-2100 | 1-505-476-8400 | | Education: Post-Secondary Education, Government |
| NM Historical Sites | 725 Camino Lejo | Santa Fe, NM 87504 | 1-505-476-1130 | | Arts and Culture, Government |
| NM HSD Medical Assistance Division | 2009 S. Pacheco Street | Santa Fe, NM 87505 | 1-888-997-2583 | | Healthcare: Public Assistance Program, Government |
| NM Martin Luther King Jr. State Commission | 310 San Pedro Drive NE | Albuquerque, NM 87108 | 1-505-222-6467 | | Community Action/Social Advocacy Groups, Cultural Awareness |
| NM Motor Vehicle Division | 1710 East Aztec | Gallup, NM 87301 | 1-505-863-3847 | | Licensing and Registration, Government |
| NM Office of the State Engineer | 407 Galisteo Street | Santa Fe, NM 87504-5102 | 1-505-827-6160 | | Environmental Protection & Improvement, Government |
| NM PreK | 300 Don Gasper Avenue | Santa Fe, NM 87501 | 1-505-827-6655 | | Education: Early Childhood Care & Education |
| NM Public Regulation Commission | 142 W. Palace Ave | Santa Fe, NM 87501 | 1-888-427-5772 | | Licensing and Registration, Government |
| NM Regulation and Licensing Department | 2550 Cerrillos Road | Santa Fe, NM 87505 | 1-505-476-4500 | | Licensing and Registration, Government |
| NM.Gov. - Coronavirus Information Hotline | | | 1-833-551-0518 | | Healthcare - Covid Resource |
| NM.Gov. - Covid Health Hotline | | | 1-855-600-3453 | | Healthcare - Covid Resource |
| NMDOH Immunization Program | PO Box 26610 | Santa Fe, NM 87508-5872 | 1-800-232-4636 | | Healthcare: Specialty Treatment, Health, Government |
| NMDOH NW Region - Gallup- Public Health Office | 705 Gurley Ave | Gallup, NM 87301 | 1-505-722-4391 | | Healthcare: Public Health Office, Government |
| NWNM Solid Water Authority (landfill) | | Gallup, NM 87301 | 1-505-863-5776 | | Environmental Protection & Improvement |
| Office of School and Adolescent Health | 300 San Mateo Blvd., Suite 902 | Albuquerque, NM 87108 | 1-505-222-8682 | | Education: Educational Support Services |

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| One Care Infusion Pharmacy | 907 West Coal Ave. | Gallup, NM 87301 | 1-505-726-4155 | | Healthcare - Pharmacy |
| Our Lady-Guadalupe | 711 S. Puerco | Gallup, NM 87301 | 1-505-722-5511 | | Community Support |
| Pine Hill Health Center | I-40 and Indian Service Rte. 125 | Pinehill, NM 87357 | 1-505-775-3271 | | Healthcare: Medical Clinic |
| Pueblo of Zuni - New Beginnings | PO Box 339 | Zuni, NM 87327 | 1-505-782-4600 | | Crisis Intervention: Safe Haven for Women and Children |
| Pueblo of Zuni Adult Day Care | 1836 NM 53 | Zuni, NM 87327 | 1-505-782-2791 | | Community Support/Social Advocacy Groups |
| Pueblo of Zuni Public Library | 27 East Chavez Circle | Zuni, NM 87327 | 1-505-782-4545 | Jennifer.Lonjose@ashiwi.org | Library |
| Pueblo of Zuni Tribal Government | 1203 NM 53 | Zuni, NM 87327 | 1-505-782-7000 | | Government |
| Pueblo of Zuni Wellness Center | 31 Pincion Street | Zuni, NM 87327 | 1-505-782-2665 | | Fitness |
| Pueblo Pintado Chapter | Navajo Rte. 9 N.M. 76 | Cuba, NM 87031 | 1-505-655-3221 | | Community Support |
| Rainaldi Dental | 501 Nizhoni Blvd | Gallup, NM 87301 | 1-505-863-9363 | | Healthcare - Dental |
| Ramah Adult Care | 28 Lewis Road | Ramah, NM 87321 | 1-505-783-4024 | | Healthcare: assisted Living |
| Ramah Care Services | 2405 Fuhs Ave | Gallup, NM 87301 | 1-505-863-8941 | | Healthcare: Home Health Care/Assisted Living |
| Ramah Elementary School | 27 Lewis St. | Ramah, NM 87321 | 1-505-721-3700 | | Education: Elementary School |
| Ramah Middle/High School | 74 S. Bloomfield | Ramah, NM 87321 | 1-505-721-3800 | | Education: Middle/High School |
| Ramah Navajo Police Department | 435 BIA Rd. 125 | Pinehill, NM 87357 | 1-505-775-3224 | | Law Enforcement, Government |
| Ramah Volunteer Fire Department | 4 Tietjen Rd | Ramah, NM 87321 | 1-505-783-4252 | | Public Safety |
| Ramah Water & Sanitation | 47S. Bloomfield Ave #B | Ramah, NM 87321 | 1-505-783-4018 | | Utilities |
| Rapid Care Clinic | 1850 E, Hwy 66 #1 | Gallup, NM 87301 | 1-505-488-2603 | | Healthcare: Urgent Care Center |
| Red Lake Chapter | 327 A Walnut Ave. | Navajo, NM 87328 | 1-505-777-2810 | | Community Support |
| Red Rock Dialysis - Crownpoint | NM 371 & W Rte. 9 | Crownpoint, NM 87313 | 1-505-786-5280 | | Healthcare: Dialysis Center |
| Red Rock Dialysis - US Renal Care | 725 Hospital Dr. | Gallup, NM 87301 | 1-505-863-3465 | | Healthcare: Dialysis Center |
| Red Rock Dialysis - Zuni | 20 D Ave. | Zuni, NM 87327 | 1-505-782-5663 | | Healthcare: Dialysis Center |
| Red Rock Elementary Scholl | 1305 Red Rock Dr. | Gallup, NM 87301 | 1-505-721-3900 | | Education: Elementary School |
| Red Rocks Care Center | 3720 Church Rock St. | Gallup, NM 87301 | 1-505-722-2261 | | Healthcare: Nursing Home/Long Term/Short Term/Skilled |
| Rehoboth Christian Schools | 7 Tse Yaaniichil Ln | Rehoboth, NM 87322 | 1-505-863-4412 | | Education: PreK-12 |
| RMCHCS - Behavioral Health | 2111 College Dr. | Gallup, NM 87301 | 1-505-863-1820 | | Healthcare: Behavioral Health |
| RMCHCS College Clinic | 2111 College Drive | Gallup, NM 87301 | 1-505-863-1820 | | Healthcare: Medical Clinic |
| RMCHCS Home Health Care | 211 East Aztec Ave. | Gallup, NM 87301 | 1-505-863-7041 | | Healthcare: Home Health Care/Hospice |
| RMCHCS Hospital | 1901 Red Rock Drive | Gallup, NM 87301 | 1-505-863-7000 | | Healthcare: Acute Care Hospital /Emergency Department |
| RMCHCS Red Rock Specialty Clinic | 1900 Red Rock Drovve | Gallup, NM 87301 | 1-505-863-7200 | | Healthcare: Specialty Clinic |
| Rock Springs Chapter | PO Box 4608 | Yahtahey, NM 87375 | 1-505-371-5100 | | Community Support |
| Rocky View Elementary School | 345 Basilio Dr. | Gallup, NM 87301 | 1-505-721-4000 | | Education: Elementary School |
| Sacred heart Catholic School | 515 Park Ave. | Gallup, NM 87301 | 1-505-863-6652 | | Education: PreK-8 |
| Safeway Pharmacy | 980 N. Hwy 491 | Gallup, NM 87301 | 1-505-722-9977 | | Healthcare - Pharmacy |
| Shiwi Ts'ana Elementary School | 38 Rt 301 N | Zuni, NM 87327 | 1-505-782-4441 | | Education: Elementary School |
| Small Fry Dentistry | 107 W. Green Ave | Gallup, NM 87301 | 1-505-721-0040 | | Healthcare - Dental |
| Soaring Eagles Home Care | 710 S. 3rd St | Gallup, NM 87301 | 1-505-863-9236 | | Healthcare: Home Health Care/Respite |
| Southwest Indian Foundation | 100 West Coal Ave. | Gallup, NM 87301 | 1-505-863-2837 | | Community Support |
| St. Anthony Indian School | 11 St. Anthony Dr. | Zuni, NM 87327 | 1-505-782-4596 | | Education: PreK-8 |
| St. Bonaventure School | 8 Lenore Ave. | Thoreau, NM 87323 | 1-505-862-7465 | | Education: NS-8 |
| Stagecoach Elementary School | 725 Freedom Dr. | Gallup, NM 87301 | 1-505-721-4300 | | Education: Elementary School |
| Sundance Dental Care of Gallup | 1601 S. 2nd St | Gallup, NM 87301 | 1-505-722-4422 | | Healthcare - Dental |
| The Colosseum Gym | 2006 E. Hwy 66 | Gallup, NM 87301 | 1-505-870-9900 | | Fitness |
| Thoreau Community Center | 19 Paradise Lane | Thoreau, NM 87323 | 1-505-862-7590 | | Community Support |
| Thoreau Elementary School | #6 Fourth Ave | Thoreau, NM 87323 | 1-505-721-4400 | | Education: Elementary School |
| Thoreau Health Clinic | 3 E. Navarre Blvd | Thoreau, NM 87323 | 1-505-862-8250 | | Healthcare: Medical Clinic |
| Thoreau High School | #4 Hawk Circle | Thoreau, NM 87323 | 1-505-721-4500 | | Education: High School |
| Thoreau Middle School | #8 Hawk Circle | Thoreau, NM 87323 | 1-505-721-4600 | | Education: Middle School |
| Timberlake Ranch Fire Department | Timberlake Road | Ramah, NM 87321 | 1-505-783-4221 | | Public Safety |
| Tobe Turpen Elementary School | 3310 Manuelito | Gallup, NM 87301 | 1-505-721-5000 | | Education: Elementary School |
| Tohatchi Elementary School | 100 Chuska Rd | Tohatchi, NM 87325 | 1-505-721-4700 | | Education: Elementary School |
| Tohatchi High School | Cougar Ln N | Tohatchi, NM 87325 | 1-505-721-4800 | | Education: High School |
| Tohatchi Middle School | Mid School Lane | Tohatchi, NM 87325 | 1-505-721-4900 | | Education: Middle School |
| Tse Yi Gai School | HCR 79 | Cuba, NM 87031 | 1-505-870-5500 | | Education: High School |
| Twin Butts Cyber Academy | 10 N Sandy Springs Rd. | Zuni, NM 87327 | 1-505-782-4716 | | Education: Specialty School |
| Twin Lakes Elementary School | 19 Mi. 9 Hwy 491 | Gallup, NM 87301 | 1-505-721-5100 | | Education: Elementary School |
| United Way of Central NM | 2340 Alamo Ave. SE. 2nd Floor | Albuquerque, NM 87106 | 1-505-247-3671 | | Community Support |
| University of New Mexico - Gallup | 425 N 7th St. | Gallup, NM 87301 | 1-505-863-7516 | | Education: University |

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| UNM Health Gallup Specialty Care | 205 Nizhoni Blvd | Gallup, NM 87301 | 1-505-925-7505 | Healthcare: Specialty Clinic |
| US Renal Care | 1801 Red Rock Dr. | Gallup, NM 87301 | 1-505-863-3472 | Healthcare: Dialysis Center |
| Vanderwagon Volunteer Fire Department | 08 Cousins Rd. | Vanderwagon, NM 87326 | 1-505-778-5511 | Public Safety |
| Veterans Crisis Line | | | 1-800-273-8255 | Crisis Intervention - Suicide Prevention - Veterans |
| Veterans Health Administration | 2075 NM Hwy 602 | Gallup, NM 87301 | 1-505-722-7234 | Healthcare: Medical Clinic |
| Vision Clinic | 1300 S. 2nd St. | Gallup, NM 87301 | 1-505-722-3388 | Healthcare - Vision - Optometrist |
| Walgreens Pharmacy | 1870 E. Historic Hwy 66 | Gallup, NM 87301 | 1-505-722-9499 | Healthcare - Pharmacy |
| Wal-Mart Pharmacy | 1650 W. Maloney Ave. | Gallup, NM 87301 | 1-505-722-3823 | Healthcare - Pharmacy |
| Western New Mexico Medical Group - PMS | 2025 East Aztec Ave. | Gallup, NM 87301 | 1-505-863-3828 | Healthcare: Medical Group/Behavioral health |
| White Cliffs Volunteer Fire Dept | 10 Rd. 58 | Gallup, NM 87301 | 1-505-863-6002 | Public Safety |
| WildCat Christian Academy | Hwy 264 Mile Marker 9 Wildcat Dr. | Gallup, NM 87305 | 1-505-371-5368 | Education: K-12 |
| Wowie's Gym | 1500 S 2nd Unit C | Gallup, NM 87301 | 1-505-863-4858 | Fitness |
| Youth America Hotline | | | 1-877-968-8454 | Crisis Intervention: Suicide Prevention |
| Zuni Christian Mission School | 19 Pia Mesa Rd | Zuni, NM 87327 | 1-505-782-4546 | Education: K-8 |
| Zuni Comprehensive Community Health Center | 12 B Ave. | Zuni, NM 87327 | 1-505-782-4431 | Healthcare |
| Zuni Dental Clinic | 12 B Ave. | Zuni, NM 87327 | 1-505-782-7349 | Healthcare: Dental |
| Zuni Education and Career Development | 01 Twin Buttes Drive | Zuni, NM 87327 | 1-505-782-5998 | Education: Educational Support Services |
| Zuni Head Start Program | 111 Rte. 301 S | Zuni, NM 87327 | 1-505-782-5750 | Education: Early Childhood Care & Education |
| Zuni High School | 71 Rte. 301 N | Zuni, NM 87327 | 1-505-782-5511 | Education: High School |
| Zuni Independent Fire District 8 | 04 Third St NE | Zuni, NM 87327 | 1-505-782-7191 | Public Safety |
| Zuni Middle School | 17 Zuni Mid School Dr. | Zuni, NM 87327 | 1-505-782-5561 | Education: Middle School |
| Zuni NM - Home Health Care | 52 Rte. 301 N | Zuni, NM 87327 | 1-505-782-5544 | Healthcare: Home Health Care |
| Zuni PHS Indian Hospital | 301 N B St. | Zuni, NM 87327 | 1-505-782-4431 | Healthcare |
| Zuni Police Dispatch | 1203 State Hwy 53 | Zuni, NM 87327 | 1-505-782-4493 | Law Enforcement, Government |
| Zuni Public School District | 10 Sandy Springs Rd | Zuni, NM 87327 | 1-505-782-5511 | Education: Educational Support Services |
| Zuni Pueblo Police Department | 1203 State Hwy 53 | Zuni, NM 87327 | 1-505-782-4493 | Law Enforcement, Government |
| Zuni Pueblo Solid Waste Program | PO Box 339 | Zuni, NM 87327 | 1-505-782-7162 | Environmental Protection & Improvement |
| Zuni Senior Citizens Center | 1386 NM 53 | Zuni, NM 87327 | 1-505-782-5541 | Community Support/Social Advocacy Groups Senior Citizens Center |
| Zuni Tribal Courts | PO Box 339 | Zuni, NM 87327 | 1-505-782-7045 | Courts |
| Zuni Tribal Roads | PO Box 339 | Zuni, NM 87327 | 1-505-782-7101 | Transportation: Public Safety |
| Zuni Utility | 143 Rte. 301 South | Zuni, NM 87327 | 1-505-782-4834 | Utilities |
| Zuni Utility Department | 143 Rte. 301 S | Zuni, NM 87327 | 1-505-782-5654 | Utilities |

INFORMATION GAPS



Information Gaps

- While the following information gaps exist in the health data section of this report, please note that every effort was made to compensate for these gaps in the surveys conducted by Community Hospital Consulting.
 - This assessment seeks to address the community's health needs by evaluating the most current data available. However, published data inevitably lags behind due to publication and analysis logistics.
 - Due to smaller population numbers and the general rural nature of McKinley County, 1-year estimates for a few data indicators are statistically unreliable. Therefore, sets of years were combined to increase the reliability of the data while maintaining the county-level perspective.
 - Additionally, information gaps exist due to the limited availability of local community health reports focused on the tribal nations that are within the McKinley County community.



ABOUT COMMUNITY HOSPITAL CONSULTING



About CHC Consulting

- Community Hospital Corporation owns, manages and consults with hospitals through three distinct organizations – CHC Hospitals, CHC Consulting and CHC ContinueCare, which share a common purpose of preserving and protecting community hospitals.
- Based in Plano, Texas, CHC provides the resources and experience community hospitals need to improve quality outcomes, patient satisfaction and financial performance. For more information about CHC, please visit the website at:
www.communityhospitalcorp.com



APPENDIX

- SUMMARY OF DATA SOURCES
- DATA REFERENCES
- MUA/P AND HPSA INFORMATION
- PRIORITY BALLOT



SUMMARY OF DATA SOURCES



Summary of Data Sources

- **Demographics**

- This study utilized demographic data from **Stratasan**.
- The **United States Bureau of Labor Statistics Local Area Unemployment Statistics** provides unemployment statistics by county and state; <http://www.bls.gov/lau/#tables>.
- Food insecurity information is pulled from **Feeding America's Map the Meal Gap**, which provides food insecurity data by county, congressional district and state: <http://map.feedingamerica.org/>.
- This study also used health data collected by the **SparkMap**, a national platform that provides public and custom tools produced by the Center for Applied Research and Engagement Systems (CARES) at the University of Missouri. Data can be accessed at <https://sparkmap.org/report/>.
- **The United States Census Bureau** provides access to transportation data at the county and state level: data can be accessed at <https://censusreporter.org/search/>.
- This study utilizes data from the **Economic Innovation Group**, which provides distressed community index scores by county and state: <https://eig.org/dci/interactive-map?path=state/>.
- **Economic Innovation Group**, 2020 DCI Interactive Map provided us with formation on distressed communities. Data can be accessed at <https://eig.org/dci/interactive-map?path=state/>.
- This study also used data collected by the **Small Area Income and Poverty Estimates (SAIPE)**, that provides **Supplemental Nutrition Assistance Program (SNAP) Benefits** as well as poverty estimates by county and state [https://www.census.gov/data-tools/demo/saipe/#/?map_geoSelector=aa_c and <https://www.census.gov/data/datasets/time-series/demo/saipe/model-tables.html> respectively]
- **United States Census Bureau** provides foreign-born population statistics by county and state: <https://data.census.gov/cedsci/table?q=foreign%20born&tid=ACSDP1Y2019.DP02>.

- **Health Data**

- The **County Health Rankings** are made available by the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute. The Rankings measure the health of nearly all counties in the nation and rank them within states. The Rankings are compiled using county-level measures from a variety of national and state data sources. These measures are standardized and combined using scientifically-informed weights. The Rankings are based on a model of population health that emphasizes the many factors that, if improved, can help make communities healthier places to live, learn, work and play. Building on the work of America's Health Rankings, the University of Wisconsin Population Health Institute has used this model to rank the health of Wisconsin's counties every year since 2003; <http://www.countyhealthrankings.org/>.



Summary of Data Sources

- **Health Data (continued)**

- The **Centers for Disease Control and Prevention National Center for Health Statistics WONDER Tool** provides access to public health statistics and community health data including, but not limited to, mortality, chronic conditions, and communicable diseases; <http://wonder.cdc.gov/ucd-icd10.html>.
- This study utilizes county level data from the **Behavioral Risk Factor Surveillance System (BRFSS)**, provided by the New Mexico's Indicator-Based Information System (NM-IBIS), https://ibis.health.state.nm.us/query/selection/brfss/_BRFSSSelection.html.
- This study also used health data collected by the **SparkMap**, a national platform that provides public and custom tools produced by the Center for Applied Research and Engagement Systems (CARES) at the University of Missouri. Data can be accessed at <https://sparkmap.org/report/>.
- The **U.S. Census Bureau's Small Area Health Insurance Estimates** program produces the only source of data for single-year estimates of health insurance coverage status for all counties in the U.S. by selected economic and demographic characteristics and children poverty estimates [<https://www.census.gov/data-tools/demo/sahie/index.html> and , https://www.census.gov/data-tools/demo/saie/#/?map_geoSelector=aa_c respectively]
- The **U.S. Department of Health and Human Services Health Resources and Services Administration (HRSA)** provides Medically Underserved Area / Population and Health Professional Shortage Area scores, and can be accessed at: <https://datawarehouse.hrsa.gov/tools/analyzers.aspx>.
- The **New Mexico Department of Health and Environment** produces a COVID-19 dashboard about vaccinations in New Mexico and at the county level. Data can be accessed at: <https://www.NewMexicovaccine.gov/158/Data>.
- The **Centers for Medicare & Medicaid Services, Office of Minority Health** provides public tools to better understand disparities in chronic diseases. Data can be accessed at: <https://data.cms.gov/mapping-medicare-disparities>.

- **Survey**

- CHC Consulting worked with Rehoboth McKinley Christian Health Care Services from February 21, 2022 – March 14, 2022 to send electronic surveys.

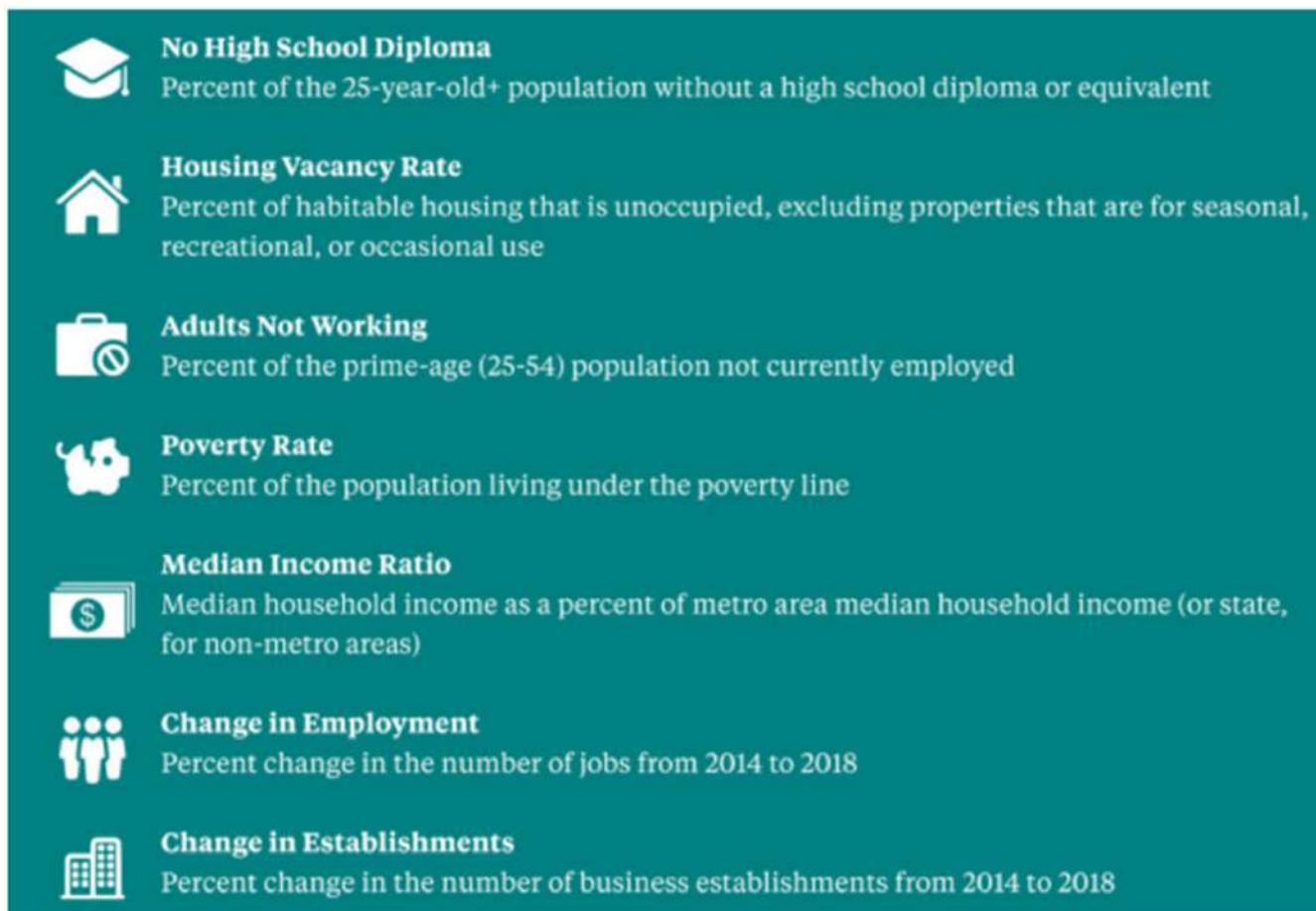


DATA REFERENCES



Distressed Communities Index

The seven components of the index are:



Source: Economic Innovation Group, Methodology; <https://eig.org/dci/methodology>; data accessed April 12, 2022.

2022 Poverty Guidelines

| 2022 POVERTY GUIDELINES FOR THE 48 CONTIGUOUS STATES AND THE DISTRICT OF COLUMBIA | |
|---|-------------------|
| Persons in family/household | Poverty guideline |
| 1 | \$13,590 |
| 2 | \$18,310 |
| 3 | \$23,030 |
| 4 | \$27,750 |
| 5 | \$32,470 |
| 6 | \$37,190 |
| 7 | \$41,910 |
| 8 | \$46,630 |
| For families/households with more than 8 persons, add \$4,720 for each additional person. | |

Source: Poverty Guidelines, Office Of The Assistant Secretary For Planning and Evaluation, <https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines>; data accessed April 12, 2022.

MUA/P AND HPSA INFORMATION



Medically Underserved Areas/Populations

Background

- Medically Underserved Areas (MUAs) and Medically Underserved Populations (MUPs) are areas or populations designated by HRSA as having too few primary care providers, high infant mortality, high poverty or a high elderly population.
- MUAs have a shortage of primary care services for residents within a geographic area such as:
 - A whole county
 - A group of neighboring counties
 - A group of urban census tracts
 - A group of county or civil divisions
- MUPs are specific sub-groups of people living in a defined geographic area with a shortage of primary care services. These groups may face economic, cultural, or linguistic barriers to health care. Examples include, but are not limited to:
 - Homeless
 - Low income
 - Medicaid eligible
 - Native American
 - Migrant farmworkers

Source: U.S. Department of Health and Human Services, Health Resources and Services Administration, <http://www.hrsa.gov/>; data accessed June 28, 2022.



Medically Underserved Areas/Populations

Background (continued)

- The Index of Medical Underservice (IMU) is applied to data on a service area to obtain a score for the area. IMU is calculated based on four criteria:
 1. Population to provider ratio
 2. Percent of the population below the federal poverty level
 3. Percent of the population over age 65
 4. Infant mortality rate
- The IMU scale is from 1 to 100, where 0 represents 'completely underserved' and 100 represents 'best served' or 'least underserved.'
- Each service area or population group found to have an IMU of 62.0 or less qualifies for designation as a Medically Underserved Area or Medically Underserved Population.

Source: U.S. Department of Health and Human Services, Health Resources and Services Administration, <http://www.hrsa.gov/>; data accessed June 28, 2022.



| Discipline | MUA/P ID | Service Area Name | Designation Type | Primary State Name | County | Index of Medical Underservice Score | Status | Rural Status | Designation Date | Update Date |
|--------------|----------------------|-----------------------|----------------------------|--------------------|---------------------|-------------------------------------|------------|-----------------|------------------|------------------------|
| Primary Care | 02158 | MCKINLEY SERVICE AREA | Medically Underserved Area | New Mexico | McKinley County, NM | 37.8 | Designated | Rural | 11/01/1978 | 11/01/1978 |
| | Component State Name | | Component County Name | Component Name | | Component Type | | Component GEOID | | Component Rural Status |
| | New Mexico | | McKinlev | McKinlev | | Single County | | 35031 | | Rural |

Health Professional Shortage Areas

Background

- Health Professional Shortage Areas (HPSAs) are designations that indicate health care provider shortages in:
 - Primary care
 - Dental health
 - Mental health
- These shortages may be geographic-, population-, or facility-based:
 - Geographic Area: A shortage of providers for the entire population within a defined geographic area.
 - Population Groups: A shortage of providers for a specific population group(s) within a defined geographic area (e.g., low income, migrant farmworkers, and other groups)
 - Facilities:
 - Other Facility (OFAC)
 - Correctional Facility
 - State Mental Hospitals
 - Automatic Facility HPSAs (FQHCs, FQHC Look-A-Likes, Indian Health Facilities, HIS and Tribal Hospitals, Dual-funded Community Health Centers/Tribal Clinics, CMS-Certified Rural Health Clinics (RHCs) that meet National Health Service Corps (NHSC) site requirements)

Source: U.S. Department of Health and Human Services, Health Resources and Services Administration, <http://www.hrsa.gov/>; data accessed June 28, 2022.

Health Professional Shortage Areas

Background (continued)

- HRSA reviews these applications to determine if they meet the eligibility criteria for designation. The main eligibility criterion is that the proposed designation meets a threshold ratio for population to providers.
- Once designated, HRSA scores HPSAs on a scale of 0-25 for primary care and mental health, and 0-26 for dental health, with higher scores indicating greater need.

Source: U.S. Department of Health and Human Services, Health Resources and Services Administration, <http://www.hrsa.gov/>; data accessed June 28, 2022.

| Discipline | HPSA ID | HPSA Name | Designation Type | Primary State Name | County Name | HPSA FTE Short | HPSA Score | Status | Rural Status | Designati on Date | Update Date |
|---------------|----------------------|------------------------------|---|--------------------|---|-----------------|------------|------------------------|-----------------|-------------------|-------------|
| Primary Care | 1358768476 | McKinley County | High Needs Geographic HPSA | New Mexico | McKinley County, NM | 10.21 | 17 | Designated | Rural | 05/30/1979 | 09/10/2021 |
| | Component State Name | Component County Name | Component Name | Component Type | | Component GEOID | | Component Rural Status | | | |
| | | | | | | | | | | | |
| | New Mexico | McKinley | McKinley | Single County | | 35031 | | Rural | | | |
| Dental Health | 6359587218 | Low Income - McKinley County | Low Income Population HPSA | New Mexico | McKinley County, NM | 10.96 | 21 | Designated | Rural | 08/22/2013 | 09/10/2021 |
| | Component State Name | Component County Name | Component Name | Component Type | | Component GEOID | | Component Rural Status | | | |
| | | | | | | | | | | | |
| | New Mexico | McKinley | McKinley | Single County | | 35031 | | Rural | | | |
| Mental Health | 7352716392 | Catchment Area 1 | High Needs Geographic HPSA | New Mexico | McKinley County, NM San Juan County, NM | 11.08 | 19 | Designated | Partially Rural | 05/13/1992 | 09/10/2021 |
| | Component State Name | Component County Name | Component Name | Component Type | | Component GEOID | | Component Rural Status | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | New Mexico | McKinley | McKinley | Single County | | 35031 | | Rural | | | |
| | New Mexico | San Juan | San Juan | Single County | | 35045 | | Partially Rural | | | |
| Primary Care | 1359993560 | ZUNI INDIAN HOSPITAL | Indian Health Service, Tribal Health, and Urban Indian Health Organizations | New Mexico | McKinley County, NM | | 20 | Designated | Rural | 10/26/2002 | 09/11/2021 |
| | Site Name | Site Address | Site City | Site State | Site ZIP Code | | County | | Rural Status | | |
| | | | | | | | | | | | |
| | ZUNI INDIAN HOSPITAL | 21 B Ave | Zuni | NM | 87327 | | McKinley | | Rural | | |
| Mental Health | 7359993524 | ZUNI INDIAN HOSPITAL | Indian Health Service, Tribal Health, and Urban Indian Health Organizations | New Mexico | McKinley County, NM | | 22 | Designated | Rural | 10/26/2002 | 09/11/2021 |
| | Site Name | Site Address | Site City | Site State | Site ZIP Code | | County | | Rural Status | | |
| | | | | | | | | | | | |
| | ZUNI INDIAN HOSPITAL | 21 B Ave | Zuni | NM | 87327 | | McKinlev | | Rural | | |

| Discipline | HPSA ID | HPSA Name | Designation Type | Primary State Name | County Name | HPSA FTE Short | HPSA Score | Status | Rural Status | Designation Date | Update Date |
|---------------|------------------------------|------------------------------|---|--------------------|----------------------|----------------|---------------------|------------|--------------|------------------|-------------|
| Dental Health | 6359993532 | ZUNI INDIAN HOSPITAL | Indian Health Service, Tribal Health, and Urban Indian Health Organizations | New Mexico | McKinley County, NM | | 24 | Designated | Rural | 10/26/2002 | 09/11/2021 |
| | Site Name | Site Address | Site City | Site State | Site ZIP Code | County | Rural Status | | | | |
| | ZUNI INDIAN HOSPITAL | 21 B Ave | Zuni | NM | 87327 | McKinley | Rural | | | | |
| Primary Care | 1356901986 | THOREAU HEALTH STATION | Indian Health Service, Tribal Health, and Urban Indian Health Organizations | New Mexico | McKinley County, NM | | 20 | Designated | Rural | 08/18/2019 | 09/11/2021 |
| | Site Name | Site Address | Site City | Site State | Site ZIP Code | County | Rural Status | | | | |
| | THOREAU HEALTH STATION | 3 E Navarre Blvd | Thoreau | NM | 87323 | McKinley | Rural | | | | |
| Mental Health | 7355765876 | THOREAU HEALTH STATION | Indian Health Service, Tribal Health, and Urban Indian Health Organizations | New Mexico | McKinley County, NM | | 22 | Designated | Rural | 08/18/2019 | 09/11/2021 |
| | Site Name | Site Address | Site City | Site State | Site ZIP Code | County | Rural Status | | | | |
| | THOREAU HEALTH STATION | 3 E Navarre Blvd | Thoreau | NM | 87323 | McKinley | Rural | | | | |
| Dental Health | 6357241539 | THOREAU HEALTH STATION | Indian Health Service, Tribal Health, and Urban Indian Health Organizations | New Mexico | McKinley County, NM | | 24 | Designated | Rural | 08/18/2019 | 09/11/2021 |
| | Site Name | Site Address | Site City | Site State | Site ZIP Code | County | Rural Status | | | | |
| | THOREAU HEALTH STATION | 3 E Navarre Blvd | Thoreau | NM | 87323 | McKinley | Rural | | | | |
| Primary Care | 1359993562 | GALLUP INDIAN MEDICAL CENTER | Indian Health Service, Tribal Health, and Urban Indian Health Organizations | New Mexico | McKinley County, NM | | 20 | Designated | Rural | 10/26/2002 | 09/11/2021 |
| | Site Name | Site Address | Site City | Site State | Site ZIP Code | County | Rural Status | | | | |
| | GALLUP INDIAN MEDICAL CENTER | 516 E Nizhoni Blvd | Gallup | NM | 87301-5748 | McKinley | Rural | | | | |

| Discipline | HPSA ID | HPSA Name | Designation Type | Primary State Name | County Name | HPSA FTE Short | HPSA Score | Status | Rural Status | Designation Date | Update Date |
|---------------|------------------------------|-------------------------------|---|--------------------|----------------------|----------------|---------------------|------------|--------------|------------------|-------------|
| Mental Health | 7359993526 | GALLUP INDIAN MEDICAL CENTER | Indian Health Service, Tribal Health, and Urban Indian Health Organizations | New Mexico | McKinley County, NM | | 22 | Designated | Rural | 10/26/2002 | 09/11/2021 |
| | Site Name | Site Address | Site City | Site State | Site ZIP Code | County | Rural Status | | | | |
| | GALLUP INDIAN MEDICAL CENTER | 516 E Nizhoni Blvd | Gallup | NM | 87301-5748 | McKinley | Rural | | | | |
| Dental Health | 6359993534 | GALLUP INDIAN MEDICAL CENTER | Indian Health Service, Tribal Health, and Urban Indian Health Organizations | New Mexico | McKinley County, NM | | 24 | Designated | Rural | 10/26/2002 | 09/11/2021 |
| | Site Name | Site Address | Site City | Site State | Site ZIP Code | County | Rural Status | | | | |
| | GALLUP INDIAN MEDICAL CENTER | 516 E Nizhoni Blvd | Gallup | NM | 87301-5748 | McKinley | Rural | | | | |
| Primary Care | 1359993557 | Presbyterian Medical Services | Federally Qualified Health Center | New Mexico | Santa Fe County, NM | | 22 | Designated | Non-Rural | 10/26/2002 | 09/11/2021 |

| Discipline | HPSA ID | HPSA Name | Designation Type | Primary State Name | County Name | HPSA FTE Short | HPSA Score | Status | Rural Status | Designation Date | Update Date |
|------------|---|-----------------------|------------------|--------------------|-------------|----------------|------------|------------|--------------|------------------|-------------|
| | PMS - Chaparral Family Health Center | 204 Angelina Blvd | Chaparral | NM | | 88081-7558 | | Otero | | Rural | |
| | PMS - COUNSELOR CLINIC | 9837 US-550 | Counselor | NM | | 87018 | | Sandoval | | Rural | |
| | PMS - Cuba Elementary School | 4 School Rd | Cuba | NM | | 87013 | | Sandoval | | Rural | |
| | PMS - Cuba Health Center | 6349 US Highway 550 | Cuba | NM | | 87013 | | Sandoval | | Rural | |
| | PMS - Cuba School-Based Health Center | 50 CR-13 | Cuba | NM | | 87013 | | Sandoval | | Rural | |
| | PMS - Deming Behavioral Health Health Center | 901 W Hickory St | Deming | NM | | 88030-4046 | | Luna | | Rural | |
| | PMS - Deming Health Center | 300 S Diamond Ave | Deming | NM | | 88030-3752 | | Luna | | Rural | |
| | PMS - Desert Sage Academy | 351 W Zia Rd | Santa Fe | NM | | 87505-5724 | | Santa Fe | | Non-Rural | |
| | PMS - Early College Opportunities (ECO) High School | 2301 W Zia Rd | Santa Fe | NM | | 87505-7017 | | Santa Fe | | Non-Rural | |
| | PMS - El Camino Real Academy | 2500 S Meadows Rd | Santa Fe | NM | | 87507-3601 | | Santa Fe | | Non-Rural | |
| | PMS - Eldorado Community School | 2 Avenida Torreon | Santa Fe | NM | | 87508-8852 | | Santa Fe | | Non-Rural | |
| | PMS - Espanola Family Wellness Center | 1200 N Paseo De Onate | Espanola | NM | | 87532-2687 | | Rio Arriba | | Rural | |
| | PMS - ESPERANZA FAMILY HEALTH CENTER | 903 5th St APT C | Estancia | NM | | 87016-1155 | | Torrance | | Rural | |
| | PMS - Express Care by Presbyterian Medical Services | 202 E Church St | Carlsbad | NM | | 88220-6308 | | Eddy | | Rural | |

| Discipline | HPSA ID | HPSA Name | Designation Type | Primary State Name | County Name | HPSA FTE Short | HPSA Score | Status | Rural Status | Designation Date | Update Date |
|------------|---|-----------------------------|------------------|--------------------|-------------|----------------|------------|----------|--------------|------------------|-------------|
| | PMS - FARMINGTON COMM HLTH CTR | 1001 W Broadway STE E | Farmington | NM | | 87401-5638 | | San Juan | | Non-Rural | |
| | PMS - FARMINGTON COMM HLTH CTR | 1001 W Broadway STE D | Farmington | NM | | 87401-5638 | | San Juan | | Non-Rural | |
| | PMS - Farmington Community Health Center Substance Abuse Services | 744 W Animas St | Farmington | NM | | 87401-5617 | | San Juan | | Non-Rural | |
| | PMS - Farmington PSR | 2015 E 12th St | Farmington | NM | | 87401-7460 | | San Juan | | Non-Rural | |
| | PMS - Grants Family Counseling | 1040 Sakelares Blvd | Grants | NM | | 87020-3819 | | Cibola | | Rural | |
| | PMS - Grants Family Health Center | 1217 Bonita St | Grants | NM | | 87020-2103 | | Cibola | | Rural | |
| | PMS - HOBBS FAMILY HEALTH CENTER | 200 W Lea St | Hobbs | NM | | 88240-5110 | | Lea | | Rural | |
| | PMS - Hopewell Family Health Center | 1775 Hopewell St | Santa Fe | NM | | 87505-3896 | | Santa Fe | | Non-Rural | |
| | PMS - Kearny Elementary School | 901 Avenida De Las Campanas | Santa Fe | NM | | 87507-5369 | | Santa Fe | | Non-Rural | |
| | PMS - LOVING HEALTH CTR | 602 S 4th St | Loving | NM | | 88256 | | Eddy | | Rural | |
| | PMS - MAGDALENA AREA HLTH CENTER | 801 W 10th St | Magdalena | NM | | 87825 | | Socorro | | Rural | |
| | PMS - Mandela International Magnet School | 1604 Agua Fria St | Santa Fe | NM | | 87505-0912 | | Santa Fe | | Non-Rural | |
| | PMS - Milagro Middle School | 341 W Zia Rd | Santa Fe | NM | | 87505-5724 | | Santa Fe | | Non-Rural | |
| | PMS - Monte del Sol Charter School | 4157 Walking Rain Rd | Santa Fe | NM | | 87507-0825 | | Santa Fe | | Non-Rural | |

| Discipline | HPSA ID | HPSA Name | Designation Type | Primary State Name | County Name | HPSA FTE Short | HPSA Score | Status | Rural Status | Designation Date | Update Date |
|------------|--|---------------------|------------------|--------------------|-------------|----------------|------------|------------|--------------|------------------|-------------|
| | PMS - MOUNTAINAIR FAM HLTH CTR | 105 Pinon St E | Mountainair | NM | 87036 | | | Torrance | | Rural | |
| | PMS - Nina Otero Community School | 5901 Herrera Dr | Santa Fe | NM | 87507-2676 | | | Santa Fe | | Non-Rural | |
| | PMS - OJO ENCINO CLINIC | 2 Ojo Encino | Cuba | NM | 87013-6027 | | | Sandoval | | Rural | |
| | PMS - Ojo Encino Day School | 5 Ojo Encino | Cuba | NM | 87013-6012 | | | Sandoval | | Rural | |
| | PMS - Ortiz Middle School | 4161 S Meadows Rd | Santa Fe | NM | 87507-3060 | | | Santa Fe | | Non-Rural | |
| | PMS - Pecos Valley Medical Center | 199 NM Highway 50 | Pecos | NM | 87552 | | | San Miguel | | Rural | |
| | PMS - Pecos Valley Medical Center | 199 NM Highway 50 | Pecos | NM | 87552 | | | San Miguel | | Rural | |
| | PMS - Pecos Valley Medical Center School-Based Health Center | 28 Panther Pkwy | Pecos | NM | 87552 | | | San Miguel | | Rural | |
| | PMS - QUAY CTY FAMILY HLTH CTR | 1302 E Main St | Tucumcari | NM | 88401-2508 | | | Quay | | Rural | |
| | PMS - Quemado Health/School-Based Health Center | 8 Old Town Loop | Quemado | NM | 87829 | | | Catron | | Rural | |
| | PMS - QUESTA HEALTH CENTER | 2573 NM-522 | Questa | NM | 87556 | | | Taos | | Rural | |
| | PMS - Questa Junior/Senior High School | 57 Sagebrush Rd | Questa | NM | 87556 | | | Taos | | Rural | |
| | PMS - Ramirez Thomas Elementary School | 3200 Calle PO Ae Pi | Santa Fe | NM | 87507-7767 | | | Santa Fe | | Non-Rural | |
| | PMS - Rio Rancho Family Health Center PSR | 224 Unser Blvd NE | Rio Rancho | NM | 87124-4044 | | | Sandoval | | Non-Rural | |

| Discipline | HPSA ID | HPSA Name | Designation Type | Primary State Name | County Name | HPSA FTE Short | HPSA Score | Status | Rural Status | Designation Date | Update Date |
|------------|--|----------------------|------------------|--------------------|-------------|----------------|------------|----------|--------------|------------------|-------------|
| | PMS - RIO RANCHO FAMILY HLTH CTR | 184 Unser Blvd NE | Rio Rancho | NM | | 87124-4045 | | Sandoval | | Non-Rural | |
| | PMS - Ruidoso Behavioral Health Center | 1400 Sudderth Dr | Ruidoso | NM | | 88345-6103 | | Lincoln | | Rural | |
| | PMS - SACRAMENTO MTN MEDICAL CTR | 74 James Canyon Hwy | Cloudcroft | NM | | 88317-1139 | | Otero | | Rural | |
| | PMS - Salazar Elementary School | 1231 Apache Ave | Santa Fe | NM | | 87505-3209 | | Santa Fe | | Non-Rural | |
| | PMS - Sandoval County Health Commons Dental Services | 1500 Idalia BLDG B | Bernalillo | NM | | 87004-6303 | | Sandoval | | Non-Rural | |
| | PMS - SANTA FE COMM GUIDANCE CTR | 2960 Rodeo Park Dr W | Santa Fe | NM | | 87505-6351 | | Santa Fe | | Non-Rural | |
| | PMS - Santa Fe Family Wellness Center | 2504 Camino Entrada | Santa Fe | NM | | 87507-4851 | | Santa Fe | | Non-Rural | |
| | PMS - Socorro Teen Health Center | 1200 Michigan Ave | Socorro | NM | | 87801 | | Socorro | | Rural | |
| | PMS - Sweeney Elementary School | 501 Airport Rd | Santa Fe | NM | | 87507-2876 | | Santa Fe | | Non-Rural | |
| | PMS - TEEN HEALTH CENTER - SANTA FE HS | 2100 Yucca St | Santa Fe | NM | | 87505-5456 | | Santa Fe | | Non-Rural | |
| | PMS - TEEN HEALTH CENTER-CAPITAL HS | 4851 Paseo Del Sol | Santa Fe | NM | | 87507-3027 | | Santa Fe | | Non-Rural | |
| | PMS - TORREON HEALTH CLINIC | 2500 NM-197 | Cuba | NM | | 87013 | | Sandoval | | Rural | |
| | PMS - Torreon Day School | 2600 NM-197 | Cuba | NM | | 87013 | | Sandoval | | Rural | |
| | PMS - TOTAH BEHAVIORIAL HLTH AUTHORITY | 1615 Ojo Ct | Farmington | NM | | 87401 | | San Juan | | Rural | |

| Discipline | HPSA ID | HPSA Name | Designation Type | Primary State Name | County Name | HPSA FTE Short | HPSA Score | Status | Rural Status | Designation Date | Update Date |
|------------|--|-----------------------|------------------|--------------------|-------------|----------------|------------|--------|--------------|------------------|-------------|
| | PMS - TULAROSA MEDICAL CENTER | 111 Central Ave | Tularosa | NM | 88352-2063 | | Otero | | Rural | | |
| | PMS - Valley Community Health Center | 835 Spruce St Ste B | Espanola | NM | 87532-3455 | | Rio Arriba | | Rural | | |
| | PMS - Valley Community Health Center | 835 Spruce St | Espanola | NM | 87532-3455 | | Rio Arriba | | Rural | | |
| | PMS - Veguita Family Health Center | 1 Salomon Griego Rd. | Veguita | NM | 87062 | | Socorro | | Rural | | |
| | PMS - WESTERN NM MED GRP - THOREAU | 15 E Navarre Blvd | Thoreau | NM | 87323 | | McKinley | | Rural | | |
| | PMS - WESTERN NM MED GRP-BH - GALLUP | 2025 E Aztec Ave | Gallup | NM | 87301-4803 | | McKinley | | Rural | | |
| | PMS - WESTERN NM MEDICAL GRP - GALLUP | 610 N Fifth St | Gallup | NM | 87301-5306 | | McKinley | | Rural | | |
| | PMS - Wood Gormley Elementary School | 141 E Booth St | Santa Fe | NM | 87505-2617 | | Santa Fe | | Non-Rural | | |
| | PMS -ORTIZ MOUNTAIN HLTH CENTER | 06B Main St | Cerrillos | NM | 87010 | | Santa Fe | | Rural | | |
| | PMS Socorro Mental Health | 1200 Highway 60 | Socorro | NM | 87801-3914 | | Socorro | | Rural | | |
| | PMS- GALLUP TEEN HEALTH CENTER | 1055 1/2 Rico St | Gallup | NM | 87301 | | McKinley | | Rural | | |
| | PMS-SOCORRO COMM HEALTH CENTER | 1300 Enterprise Rd | Socorro | NM | 87801-4199 | | Socorro | | Rural | | |
| | PRESBYTERIAN MEDICAL SERVICES | 1422 Paseo de Peralta | Santa Fe | NM | 87501-4391 | | Santa Fe | | Non-Rural | | |
| | Presbyterian Medical Services Family Health Center | 2300 Grande Blvd SE | Rio Rancho | NM | 87124-1755 | | Sandoval | | Non-Rural | | |

| Discipline | HPSA ID | HPSA Name | Designation Type | Primary State Name | County Name | HPSA FTE Short | HPSA Score | Status | Rural Status | Designation Date | Update Date |
|---------------|------------|-------------------------------|-----------------------------------|--------------------|---------------------|----------------|------------|------------|--------------|------------------|-------------|
| Mental Health | 7359993520 | Presbyterian Medical Services | Federally Qualified Health Center | New Mexico | Santa Fe County, NM | | 21 | Designated | Non-Rural | 05/20/2003 | 09/11/2021 |

| Discipline | HPSA ID | HPSA Name | Designation Type | Primary State Name | County Name | HPSA FTE Short | HPSA Score | Status | Rural Status | Designation Date | Update Date |
|------------|---|----------------------|------------------|--------------------|----------------------|----------------|---------------------|--------|--------------|------------------|-------------|
| | Site Name | Site Address | Site City | Site State | Site ZIP Code | County | Rural Status | | | | |
| | PMS - Academy for Technology & the Classics (ATC) | 74 A Van Nu PO | Santa Fe | NM | 87508-1465 | Santa Fe | Non-Rural | | | | |
| | PMS - Alamogordo Behavioral Health Family Health Center | 2360 Indian Wells Rd | Alamogordo | NM | 88310-4609 | Otero | Rural | | | | |
| | PMS - Alamogordo Family Health Center | 1501 10th St | Alamogordo | NM | 88310-5044 | Otero | Rural | | | | |
| | PMS - Amy Biehl Community School | 310 Avenida Del Sur | Santa Fe | NM | 87508-1565 | Santa Fe | Non-Rural | | | | |
| | PMS - Artesia Family Health Center | 1105 Memorial Dr | Artesia | NM | 88210-1189 | Eddy | Rural | | | | |
| | PMS - Artesia Family Health Center PSR | 1103 Memorial Dr | Artesia | NM | 88210-1189 | Eddy | Rural | | | | |
| | PMS - Aspen Community Magnet School | 450 La Madera St | Santa Fe | NM | 87501-2420 | Santa Fe | Non-Rural | | | | |
| | PMS - Atalaya Elementary School | 721 Camino Cabra | Santa Fe | NM | 87505-5964 | Santa Fe | Non-Rural | | | | |
| | PMS - Carlsbad Family Health Center Behavioral Health | 914 N Canal St | Carlsbad | NM | 88220-5110 | Eddy | Rural | | | | |
| | PMS - CARLSBAD FAMILY HLTH CTR | 2013 San Jose Blvd | Carlsbad | NM | 88220-5426 | Eddy | Rural | | | | |
| | PMS - CARLSBAD SCHOOL BASED HLTH CTR, THE CAVE | 3000 W Church St | Carlsbad | NM | 88220-3110 | Eddy | Rural | | | | |
| | PMS - CATRON COUNTY MED CENTER | 1 Foster Dr | Reserve | NM | 87830 | Catron | Rural | | | | |
| | PMS - Cesar Chavez Elementary School | 6251 Jaguar Dr | Santa Fe | NM | 87507-1618 | Santa Fe | Non-Rural | | | | |

| Discipline | HPSA ID | HPSA Name | Designation Type | Primary State Name | County Name | HPSA FTE Short | HPSA Score | Status | Rural Status | Designation Date | Update Date |
|------------|---|-----------------------|------------------|--------------------|-------------|----------------|------------|------------|--------------|------------------|-------------|
| | PMS - Chaparral Family Health Center | 204 Angelina Blvd | Chaparral | NM | | 88081-7558 | | Otero | | Rural | |
| | PMS - COUNSELOR CLINIC | 9837 US-550 | Counselor | NM | | 87018 | | Sandoval | | Rural | |
| | PMS - Cuba Elementary School | 4 School Rd | Cuba | NM | | 87013 | | Sandoval | | Rural | |
| | PMS - Cuba Health Center | 6349 US Highway 550 | Cuba | NM | | 87013 | | Sandoval | | Rural | |
| | PMS - Cuba School-Based Health Center | 50 CR-13 | Cuba | NM | | 87013 | | Sandoval | | Rural | |
| | PMS - Deming Behavioral Health Health Center | 901 W Hickory St | Deming | NM | | 88030-4046 | | Luna | | Rural | |
| | PMS - Deming Health Center | 300 S Diamond Ave | Deming | NM | | 88030-3752 | | Luna | | Rural | |
| | PMS - Desert Sage Academy | 351 W Zia Rd | Santa Fe | NM | | 87505-5724 | | Santa Fe | | Non-Rural | |
| | PMS - Early College Opportunities (ECO) High School | 2301 W Zia Rd | Santa Fe | NM | | 87505-7017 | | Santa Fe | | Non-Rural | |
| | PMS - El Camino Real Academy | 2500 S Meadows Rd | Santa Fe | NM | | 87507-3601 | | Santa Fe | | Non-Rural | |
| | PMS - Eldorado Community School | 2 Avenida Torreon | Santa Fe | NM | | 87508-8852 | | Santa Fe | | Non-Rural | |
| | PMS - Espanola Family Wellness Center | 1200 N Paseo De Onate | Espanola | NM | | 87532-2687 | | Rio Arriba | | Rural | |
| | PMS - ESPERANZA FAMILY HEALTH CENTER | 903 5th St APT C | Estancia | NM | | 87016-1155 | | Torrance | | Rural | |
| | PMS - Express Care by Presbyterian Medical Services | 202 E Church St | Carlsbad | NM | | 88220-6308 | | Eddy | | Rural | |

| Discipline | HPSA ID | HPSA Name | Designation Type | Primary State Name | County Name | HPSA FTE Short | HPSA Score | Status | Rural Status | Designation Date | Update Date |
|------------|---|-----------------------------|------------------|--------------------|-------------|----------------|------------|----------|--------------|------------------|-------------|
| | PMS - FARMINGTON COMM HLTH CTR | 1001 W Broadway STE E | Farmington | NM | | 87401-5638 | | San Juan | | Non-Rural | |
| | PMS - FARMINGTON COMM HLTH CTR | 1001 W Broadway STE D | Farmington | NM | | 87401-5638 | | San Juan | | Non-Rural | |
| | PMS - Farmington Community Health Center Substance Abuse Services | 744 W Animas St | Farmington | NM | | 87401-5617 | | San Juan | | Non-Rural | |
| | PMS - Farmington PSR | 2015 E 12th St | Farmington | NM | | 87401-7460 | | San Juan | | Non-Rural | |
| | PMS - Grants Family Counseling | 1040 Sakelares Blvd | Grants | NM | | 87020-3819 | | Cibola | | Rural | |
| | PMS - Grants Family Health Center | 1217 Bonita St | Grants | NM | | 87020-2103 | | Cibola | | Rural | |
| | PMS - HOBBS FAMILY HEALTH CENTER | 200 W Lea St | Hobbs | NM | | 88240-5110 | | Lea | | Rural | |
| | PMS - Hopewell Family Health Center | 1775 Hopewell St | Santa Fe | NM | | 87505-3896 | | Santa Fe | | Non-Rural | |
| | PMS - Kearny Elementary School | 901 Avenida De Las Campanas | Santa Fe | NM | | 87507-5369 | | Santa Fe | | Non-Rural | |
| | PMS - LOVING HEALTH CTR | 602 S 4th St | Loving | NM | | 88256 | | Eddy | | Rural | |
| | PMS - MAGDALENA AREA HLTH CENTER | 801 W 10th St | Magdalena | NM | | 87825 | | Socorro | | Rural | |
| | PMS - Mandela International Magnet School | 1604 Agua Fria St | Santa Fe | NM | | 87505-0912 | | Santa Fe | | Non-Rural | |
| | PMS - Milagro Middle School | 341 W Zia Rd | Santa Fe | NM | | 87505-5724 | | Santa Fe | | Non-Rural | |
| | PMS - Monte del Sol Charter School | 4157 Walking Rain Rd | Santa Fe | NM | | 87507-0825 | | Santa Fe | | Non-Rural | |

| Discipline | HPSA ID | HPSA Name | Designation Type | Primary State Name | County Name | HPSA FTE Short | HPSA Score | Status | Rural Status | Designation Date | Update Date |
|------------|--|---------------------|------------------|--------------------|-------------|----------------|------------|------------|--------------|------------------|-------------|
| | PMS - MOUNTAINAIR FAM HLTH CTR | 105 Pinon St E | Mountainair | NM | 87036 | | | Torrance | | Rural | |
| | PMS - Nina Otero Community School | 5901 Herrera Dr | Santa Fe | NM | 87507-2676 | | | Santa Fe | | Non-Rural | |
| | PMS - OJO ENCINO CLINIC | 2 Ojo Encino | Cuba | NM | 87013-6027 | | | Sandoval | | Rural | |
| | PMS - Ojo Encino Day School | 5 Ojo Encino | Cuba | NM | 87013-6012 | | | Sandoval | | Rural | |
| | PMS - Ortiz Middle School | 4161 S Meadows Rd | Santa Fe | NM | 87507-3060 | | | Santa Fe | | Non-Rural | |
| | PMS - Pecos Valley Medical Center | 199 NM Highway 50 | Pecos | NM | 87552 | | | San Miguel | | Rural | |
| | PMS - Pecos Valley Medical Center | 199 NM Highway 50 | Pecos | NM | 87552 | | | San Miguel | | Rural | |
| | PMS - Pecos Valley Medical Center School-Based Health Center | 28 Panther Pkwy | Pecos | NM | 87552 | | | San Miguel | | Rural | |
| | PMS - QUAY CTY FAMILY HLTH CTR | 1302 E Main St | Tucumcari | NM | 88401-2508 | | | Quay | | Rural | |
| | PMS - Quemado Health/School-Based Health Center | 8 Old Town Loop | Quemado | NM | 87829 | | | Catron | | Rural | |
| | PMS - QUESTA HEALTH CENTER | 2573 NM-522 | Questa | NM | 87556 | | | Taos | | Rural | |
| | PMS - Questa Junior/Senior High School | 57 Sagebrush Rd | Questa | NM | 87556 | | | Taos | | Rural | |
| | PMS - Ramirez Thomas Elementary School | 3200 Calle PO Ae Pi | Santa Fe | NM | 87507-7767 | | | Santa Fe | | Non-Rural | |
| | PMS - Rio Rancho Family Health Center PSR | 224 Unser Blvd NE | Rio Rancho | NM | 87124-4044 | | | Sandoval | | Non-Rural | |

| Discipline | HPSA ID | HPSA Name | Designation Type | Primary State Name | County Name | HPSA FTE Short | HPSA Score | Status | Rural Status | Designation Date | Update Date |
|------------|--|----------------------|------------------|--------------------|-------------|----------------|------------|----------|--------------|------------------|-------------|
| | PMS - RIO RANCHO FAMILY HLTH CTR | 184 Unser Blvd NE | Rio Rancho | NM | | 87124-4045 | | Sandoval | | Non-Rural | |
| | PMS - Ruidoso Behavioral Health Center | 1400 Sudderth Dr | Ruidoso | NM | | 88345-6103 | | Lincoln | | Rural | |
| | PMS - SACRAMENTO MTN MEDICAL CTR | 74 James Canyon Hwy | Cloudcroft | NM | | 88317-1139 | | Otero | | Rural | |
| | PMS - Salazar Elementary School | 1231 Apache Ave | Santa Fe | NM | | 87505-3209 | | Santa Fe | | Non-Rural | |
| | PMS - Sandoval County Health Commons Dental Services | 1500 Idalia BLDG B | Bernalillo | NM | | 87004-6303 | | Sandoval | | Non-Rural | |
| | PMS - SANTA FE COMM GUIDANCE CTR | 2960 Rodeo Park Dr W | Santa Fe | NM | | 87505-6351 | | Santa Fe | | Non-Rural | |
| | PMS - Santa Fe Family Wellness Center | 2504 Camino Entrada | Santa Fe | NM | | 87507-4851 | | Santa Fe | | Non-Rural | |
| | PMS - Socorro Teen Health Center | 1200 Michigan Ave | Socorro | NM | | 87801 | | Socorro | | Rural | |
| | PMS - Sweeney Elementary School | 501 Airport Rd | Santa Fe | NM | | 87507-2876 | | Santa Fe | | Non-Rural | |
| | PMS - TEEN HEALTH CENTER - SANTA FE HS | 2100 Yucca St | Santa Fe | NM | | 87505-5456 | | Santa Fe | | Non-Rural | |
| | PMS - TEEN HEALTH CENTER-CAPITAL HS | 4851 Paseo Del Sol | Santa Fe | NM | | 87507-3027 | | Santa Fe | | Non-Rural | |
| | PMS - TORREON HEALTH CLINIC | 2500 NM-197 | Cuba | NM | | 87013 | | Sandoval | | Rural | |
| | PMS - Torreon Day School | 2600 NM-197 | Cuba | NM | | 87013 | | Sandoval | | Rural | |
| | PMS - TOTAH BEHAVIORIAL HLTH AUTHORITY | 1615 Ojo Ct | Farmington | NM | | 87401 | | San Juan | | Rural | |

| Discipline | HPSA ID | HPSA Name | Designation Type | Primary State Name | County Name | HPSA FTE Short | HPSA Score | Status | Rural Status | Designation Date | Update Date |
|------------|--|-----------------------|------------------|--------------------|-------------|----------------|------------|--------|--------------|------------------|-------------|
| | PMS - TULAROSA MEDICAL CENTER | 111 Central Ave | Tularosa | NM | 88352-2063 | | Otero | | Rural | | |
| | PMS - Valley Community Health Center | 835 Spruce St Ste B | Espanola | NM | 87532-3455 | | Rio Arriba | | Rural | | |
| | PMS - Valley Community Health Center | 835 Spruce St | Espanola | NM | 87532-3455 | | Rio Arriba | | Rural | | |
| | PMS - Veguita Family Health Center | 1 Salomon Griego Rd. | Veguita | NM | 87062 | | Socorro | | Rural | | |
| | PMS - WESTERN NM MED GRP - THOREAU | 15 E Navarre Blvd | Thoreau | NM | 87323 | | McKinley | | Rural | | |
| | PMS - WESTERN NM MED GRP-BH - GALLUP | 2025 E Aztec Ave | Gallup | NM | 87301-4803 | | McKinley | | Rural | | |
| | PMS - WESTERN NM MEDICAL GRP - GALLUP | 610 N Fifth St | Gallup | NM | 87301-5306 | | McKinley | | Rural | | |
| | PMS - Wood Gormley Elementary School | 141 E Booth St | Santa Fe | NM | 87505-2617 | | Santa Fe | | Non-Rural | | |
| | PMS -ORTIZ MOUNTAIN HLTH CENTER | 06B Main St | Cerrillos | NM | 87010 | | Santa Fe | | Rural | | |
| | PMS Socorro Mental Health | 1200 Highway 60 | Socorro | NM | 87801-3914 | | Socorro | | Rural | | |
| | PMS- GALLUP TEEN HEALTH CENTER | 1055 1/2 Rico St | Gallup | NM | 87301 | | McKinley | | Rural | | |
| | PMS-SOCORRO COMM HEALTH CENTER | 1300 Enterprise Rd | Socorro | NM | 87801-4199 | | Socorro | | Rural | | |
| | PRESBYTERIAN MEDICAL SERVICES | 1422 Paseo de Peralta | Santa Fe | NM | 87501-4391 | | Santa Fe | | Non-Rural | | |
| | Presbyterian Medical Services Family Health Center | 2300 Grande Blvd SE | Rio Rancho | NM | 87124-1755 | | Sandoval | | Non-Rural | | |

| Discipline | HPSA ID | HPSA Name | Designation Type | Primary State Name | County Name | HPSA FTE Short | HPSA Score | Status | Rural Status | Designation Date | Update Date |
|---------------|------------|-------------------------------|-----------------------------------|--------------------|---------------------|----------------|------------|------------|--------------|------------------|-------------|
| Dental Health | 6359993528 | Presbyterian Medical Services | Federally Qualified Health Center | New Mexico | Santa Fe County, NM | | 25 | Designated | Non-Rural | 10/26/2002 | 09/11/2021 |

| Discipline | HPSA ID | HPSA Name | Designation Type | Primary State Name | County Name | HPSA FTE Short | HPSA Score | Status | Rural Status | Designation Date | Update Date |
|------------|---|----------------------|------------------|--------------------|----------------------|----------------|---------------------|--------|--------------|------------------|-------------|
| | Site Name | Site Address | Site City | Site State | Site ZIP Code | County | Rural Status | | | | |
| | PMS - Academy for Technology & the Classics (ATC) | 74 A Van Nu PO | Santa Fe | NM | 87508-1465 | Santa Fe | Non-Rural | | | | |
| | PMS - Alamogordo Behavioral Health Family Health Center | 2360 Indian Wells Rd | Alamogordo | NM | 88310-4609 | Otero | Rural | | | | |
| | PMS - Alamogordo Family Health Center | 1501 10th St | Alamogordo | NM | 88310-5044 | Otero | Rural | | | | |
| | PMS - Amy Biehl Community School | 310 Avenida Del Sur | Santa Fe | NM | 87508-1565 | Santa Fe | Non-Rural | | | | |
| | PMS - Artesia Family Health Center | 1105 Memorial Dr | Artesia | NM | 88210-1189 | Eddy | Rural | | | | |
| | PMS - Artesia Family Health Center PSR | 1103 Memorial Dr | Artesia | NM | 88210-1189 | Eddy | Rural | | | | |
| | PMS - Aspen Community Magnet School | 450 La Madera St | Santa Fe | NM | 87501-2420 | Santa Fe | Non-Rural | | | | |
| | PMS - Atalaya Elementary School | 721 Camino Cabra | Santa Fe | NM | 87505-5964 | Santa Fe | Non-Rural | | | | |
| | PMS - Carlsbad Family Health Center Behavioral Health | 914 N Canal St | Carlsbad | NM | 88220-5110 | Eddy | Rural | | | | |
| | PMS - CARLSBAD FAMILY HLTH CTR | 2013 San Jose Blvd | Carlsbad | NM | 88220-5426 | Eddy | Rural | | | | |
| | PMS - CARLSBAD SCHOOL BASED HLTH CTR, THE CAVE | 3000 W Church St | Carlsbad | NM | 88220-3110 | Eddy | Rural | | | | |
| | PMS - CATRON COUNTY MED CENTER | 1 Foster Dr | Reserve | NM | 87830 | Catron | Rural | | | | |
| | PMS - Cesar Chavez Elementary School | 6251 Jaguar Dr | Santa Fe | NM | 87507-1618 | Santa Fe | Non-Rural | | | | |

| Discipline | HPSA ID | HPSA Name | Designation Type | Primary State Name | County Name | HPSA FTE Short | HPSA Score | Status | Rural Status | Designation Date | Update Date |
|------------|---|-----------------------|------------------|--------------------|-------------|----------------|------------|------------|--------------|------------------|-------------|
| | PMS - Chaparral Family Health Center | 204 Angelina Blvd | Chaparral | NM | | 88081-7558 | | Otero | | Rural | |
| | PMS - COUNSELOR CLINIC | 9837 US-550 | Counselor | NM | | 87018 | | Sandoval | | Rural | |
| | PMS - Cuba Elementary School | 4 School Rd | Cuba | NM | | 87013 | | Sandoval | | Rural | |
| | PMS - Cuba Health Center | 6349 US Highway 550 | Cuba | NM | | 87013 | | Sandoval | | Rural | |
| | PMS - Cuba School-Based Health Center | 50 CR-13 | Cuba | NM | | 87013 | | Sandoval | | Rural | |
| | PMS - Deming Behavioral Health Health Center | 901 W Hickory St | Deming | NM | | 88030-4046 | | Luna | | Rural | |
| | PMS - Deming Health Center | 300 S Diamond Ave | Deming | NM | | 88030-3752 | | Luna | | Rural | |
| | PMS - Desert Sage Academy | 351 W Zia Rd | Santa Fe | NM | | 87505-5724 | | Santa Fe | | Non-Rural | |
| | PMS - Early College Opportunities (ECO) High School | 2301 W Zia Rd | Santa Fe | NM | | 87505-7017 | | Santa Fe | | Non-Rural | |
| | PMS - El Camino Real Academy | 2500 S Meadows Rd | Santa Fe | NM | | 87507-3601 | | Santa Fe | | Non-Rural | |
| | PMS - Eldorado Community School | 2 Avenida Torreon | Santa Fe | NM | | 87508-8852 | | Santa Fe | | Non-Rural | |
| | PMS - Espanola Family Wellness Center | 1200 N Paseo De Onate | Espanola | NM | | 87532-2687 | | Rio Arriba | | Rural | |
| | PMS - ESPERANZA FAMILY HEALTH CENTER | 903 5th St APT C | Estancia | NM | | 87016-1155 | | Torrance | | Rural | |
| | PMS - Express Care by Presbyterian Medical Services | 202 E Church St | Carlsbad | NM | | 88220-6308 | | Eddy | | Rural | |

| Discipline | HPSA ID | HPSA Name | Designation Type | Primary State Name | County Name | HPSA FTE Short | HPSA Score | Status | Rural Status | Designation Date | Update Date |
|------------|---|-----------------------------|------------------|--------------------|-------------|----------------|------------|----------|--------------|------------------|-------------|
| | PMS - FARMINGTON COMM HLTH CTR | 1001 W Broadway STE E | Farmington | NM | | 87401-5638 | | San Juan | | Non-Rural | |
| | PMS - FARMINGTON COMM HLTH CTR | 1001 W Broadway STE D | Farmington | NM | | 87401-5638 | | San Juan | | Non-Rural | |
| | PMS - Farmington Community Health Center Substance Abuse Services | 744 W Animas St | Farmington | NM | | 87401-5617 | | San Juan | | Non-Rural | |
| | PMS - Farmington PSR | 2015 E 12th St | Farmington | NM | | 87401-7460 | | San Juan | | Non-Rural | |
| | PMS - Grants Family Counseling | 1040 Sakelares Blvd | Grants | NM | | 87020-3819 | | Cibola | | Rural | |
| | PMS - Grants Family Health Center | 1217 Bonita St | Grants | NM | | 87020-2103 | | Cibola | | Rural | |
| | PMS - HOBBS FAMILY HEALTH CENTER | 200 W Lea St | Hobbs | NM | | 88240-5110 | | Lea | | Rural | |
| | PMS - Hopewell Family Health Center | 1775 Hopewell St | Santa Fe | NM | | 87505-3896 | | Santa Fe | | Non-Rural | |
| | PMS - Kearny Elementary School | 901 Avenida De Las Campanas | Santa Fe | NM | | 87507-5369 | | Santa Fe | | Non-Rural | |
| | PMS - LOVING HEALTH CTR | 602 S 4th St | Loving | NM | | 88256 | | Eddy | | Rural | |
| | PMS - MAGDALENA AREA HLTH CENTER | 801 W 10th St | Magdalena | NM | | 87825 | | Socorro | | Rural | |
| | PMS - Mandela International Magnet School | 1604 Agua Fria St | Santa Fe | NM | | 87505-0912 | | Santa Fe | | Non-Rural | |
| | PMS - Milagro Middle School | 341 W Zia Rd | Santa Fe | NM | | 87505-5724 | | Santa Fe | | Non-Rural | |
| | PMS - Monte del Sol Charter School | 4157 Walking Rain Rd | Santa Fe | NM | | 87507-0825 | | Santa Fe | | Non-Rural | |

| Discipline | HPSA ID | HPSA Name | Designation Type | Primary State Name | County Name | HPSA FTE Short | HPSA Score | Status | Rural Status | Designation Date | Update Date |
|------------|--|---------------------|------------------|--------------------|-------------|----------------|------------|------------|--------------|------------------|-------------|
| | PMS - MOUNTAINAIR FAM HLTH CTR | 105 Pinon St E | Mountainair | NM | 87036 | | | Torrance | | Rural | |
| | PMS - Nina Otero Community School | 5901 Herrera Dr | Santa Fe | NM | 87507-2676 | | | Santa Fe | | Non-Rural | |
| | PMS - OJO ENCINO CLINIC | 2 Ojo Encino | Cuba | NM | 87013-6027 | | | Sandoval | | Rural | |
| | PMS - Ojo Encino Day School | 5 Ojo Encino | Cuba | NM | 87013-6012 | | | Sandoval | | Rural | |
| | PMS - Ortiz Middle School | 4161 S Meadows Rd | Santa Fe | NM | 87507-3060 | | | Santa Fe | | Non-Rural | |
| | PMS - Pecos Valley Medical Center | 199 NM Highway 50 | Pecos | NM | 87552 | | | San Miguel | | Rural | |
| | PMS - Pecos Valley Medical Center | 199 NM Highway 50 | Pecos | NM | 87552 | | | San Miguel | | Rural | |
| | PMS - Pecos Valley Medical Center School-Based Health Center | 28 Panther Pkwy | Pecos | NM | 87552 | | | San Miguel | | Rural | |
| | PMS - QUAY CTY FAMILY HLTH CTR | 1302 E Main St | Tucumcari | NM | 88401-2508 | | | Quay | | Rural | |
| | PMS - Quemado Health/School-Based Health Center | 8 Old Town Loop | Quemado | NM | 87829 | | | Catron | | Rural | |
| | PMS - QUESTA HEALTH CENTER | 2573 NM-522 | Questa | NM | 87556 | | | Taos | | Rural | |
| | PMS - Questa Junior/Senior High School | 57 Sagebrush Rd | Questa | NM | 87556 | | | Taos | | Rural | |
| | PMS - Ramirez Thomas Elementary School | 3200 Calle PO Ae Pi | Santa Fe | NM | 87507-7767 | | | Santa Fe | | Non-Rural | |
| | PMS - Rio Rancho Family Health Center PSR | 224 Unser Blvd NE | Rio Rancho | NM | 87124-4044 | | | Sandoval | | Non-Rural | |

| Discipline | HPSA ID | HPSA Name | Designation Type | Primary State Name | County Name | HPSA FTE Short | HPSA Score | Status | Rural Status | Designation Date | Update Date |
|------------|--|----------------------|------------------|--------------------|-------------|----------------|------------|----------|--------------|------------------|-------------|
| | PMS - RIO RANCHO FAMILY HLTH CTR | 184 Unser Blvd NE | Rio Rancho | NM | | 87124-4045 | | Sandoval | | Non-Rural | |
| | PMS - Ruidoso Behavioral Health Center | 1400 Sudderth Dr | Ruidoso | NM | | 88345-6103 | | Lincoln | | Rural | |
| | PMS - SACRAMENTO MTN MEDICAL CTR | 74 James Canyon Hwy | Cloudcroft | NM | | 88317-1139 | | Otero | | Rural | |
| | PMS - Salazar Elementary School | 1231 Apache Ave | Santa Fe | NM | | 87505-3209 | | Santa Fe | | Non-Rural | |
| | PMS - Sandoval County Health Commons Dental Services | 1500 Idalia BLDG B | Bernalillo | NM | | 87004-6303 | | Sandoval | | Non-Rural | |
| | PMS - SANTA FE COMM GUIDANCE CTR | 2960 Rodeo Park Dr W | Santa Fe | NM | | 87505-6351 | | Santa Fe | | Non-Rural | |
| | PMS - Santa Fe Family Wellness Center | 2504 Camino Entrada | Santa Fe | NM | | 87507-4851 | | Santa Fe | | Non-Rural | |
| | PMS - Socorro Teen Health Center | 1200 Michigan Ave | Socorro | NM | | 87801 | | Socorro | | Rural | |
| | PMS - Sweeney Elementary School | 501 Airport Rd | Santa Fe | NM | | 87507-2876 | | Santa Fe | | Non-Rural | |
| | PMS - TEEN HEALTH CENTER - SANTA FE HS | 2100 Yucca St | Santa Fe | NM | | 87505-5456 | | Santa Fe | | Non-Rural | |
| | PMS - TEEN HEALTH CENTER-CAPITAL HS | 4851 Paseo Del Sol | Santa Fe | NM | | 87507-3027 | | Santa Fe | | Non-Rural | |
| | PMS - TORREON HEALTH CLINIC | 2500 NM-197 | Cuba | NM | | 87013 | | Sandoval | | Rural | |
| | PMS - Torreon Day School | 2600 NM-197 | Cuba | NM | | 87013 | | Sandoval | | Rural | |
| | PMS - TOTAH BEHAVIORIAL HLTH AUTHORITY | 1615 Ojo Ct | Farmington | NM | | 87401 | | San Juan | | Rural | |

| Discipline | HPSA ID | HPSA Name | Designation Type | Primary State Name | County Name | HPSA FTE Short | HPSA Score | Status | Rural Status | Designation Date | Update Date |
|------------|--|-----------------------|------------------|--------------------|-------------|----------------|------------|--------|--------------|------------------|-------------|
| | PMS - TULAROSA MEDICAL CENTER | 111 Central Ave | Tularosa | NM | 88352-2063 | | Otero | | Rural | | |
| | PMS - Valley Community Health Center | 835 Spruce St Ste B | Espanola | NM | 87532-3455 | | Rio Arriba | | Rural | | |
| | PMS - Valley Community Health Center | 835 Spruce St | Espanola | NM | 87532-3455 | | Rio Arriba | | Rural | | |
| | PMS - Veguita Family Health Center | 1 Salomon Griego Rd. | Veguita | NM | 87062 | | Socorro | | Rural | | |
| | PMS - WESTERN NM MED GRP - THOREAU | 15 E Navarre Blvd | Thoreau | NM | 87323 | | McKinley | | Rural | | |
| | PMS - WESTERN NM MED GRP-BH - GALLUP | 2025 E Aztec Ave | Gallup | NM | 87301-4803 | | McKinley | | Rural | | |
| | PMS - WESTERN NM MEDICAL GRP - GALLUP | 610 N Fifth St | Gallup | NM | 87301-5306 | | McKinley | | Rural | | |
| | PMS - Wood Gormley Elementary School | 141 E Booth St | Santa Fe | NM | 87505-2617 | | Santa Fe | | Non-Rural | | |
| | PMS -ORTIZ MOUNTAIN HLTH CENTER | 06B Main St | Cerrillos | NM | 87010 | | Santa Fe | | Rural | | |
| | PMS Socorro Mental Health | 1200 Highway 60 | Socorro | NM | 87801-3914 | | Socorro | | Rural | | |
| | PMS- GALLUP TEEN HEALTH CENTER | 1055 1/2 Rico St | Gallup | NM | 87301 | | McKinley | | Rural | | |
| | PMS-SOCORRO COMM HEALTH CENTER | 1300 Enterprise Rd | Socorro | NM | 87801-4199 | | Socorro | | Rural | | |
| | PRESBYTERIAN MEDICAL SERVICES | 1422 Paseo de Peralta | Santa Fe | NM | 87501-4391 | | Santa Fe | | Non-Rural | | |
| | Presbyterian Medical Services Family Health Center | 2300 Grande Blvd SE | Rio Rancho | NM | 87124-1755 | | Sandoval | | Non-Rural | | |

| Discipline | HPSA ID | HPSA Name | Designation Type | Primary State Name | County Name | HPSA FTE Short | HPSA Score | Status | Rural Status | Designation Date | Update Date |
|---------------|--------------------------------|--------------------------------|---|--------------------|----------------------|----------------|---------------------|------------|--------------|------------------|-------------|
| Primary Care | 1359993561 | Crownpoint Healthcare Facility | Indian Health Service, Tribal Health, and Urban Indian Health Organizations | New Mexico | McKinley County, NM | | 20 | Designated | Rural | 10/26/2002 | 09/12/2021 |
| | Site Name | Site Address | Site City | Site State | Site ZIP Code | County | Rural Status | | | | |
| | Crownpoint Healthcare Facility | NM-371 & W Route 9 | Crownpoint | NM | 87313 | McKinley | Rural | | | | |
| Mental Health | 7359993525 | Crownpoint Healthcare Facility | Indian Health Service, Tribal Health, and Urban Indian Health Organizations | New Mexico | McKinley County, NM | | 21 | Designated | Rural | 10/26/2002 | 09/12/2021 |
| | Site Name | Site Address | Site City | Site State | Site ZIP Code | County | Rural Status | | | | |
| | Crownpoint Healthcare Facility | NM-371 & W Route 9 | Crownpoint | NM | 87313 | McKinley | Rural | | | | |
| Dental Health | 6359993533 | Crownpoint Healthcare Facility | Indian Health Service, Tribal Health, and Urban Indian Health Organizations | New Mexico | McKinley County, NM | | 22 | Designated | Rural | 10/26/2002 | 09/12/2021 |
| | Site Name | Site Address | Site City | Site State | Site ZIP Code | County | Rural Status | | | | |
| | Crownpoint Healthcare Facility | NM-371 & W Route 9 | Crownpoint | NM | 87313 | McKinley | Rural | | | | |

SURVEYOR INFORMATION



Rehoboth McKinley Christian Health Care Services Community Health Needs Assessment Surveyee Information

| Name | Title | Organization | Survey Sent | County Served | Surveyor | IRS Category | | | Population Served |
|-----------------|---|---|-------------|--|----------------|--------------|---|---|--|
| | | | | | | A | B | C | |
| Rochelle Begay | Nurse Manager | Gallup Veterans - Clinic | 2/21/2022 | McKinley County | CHC Consulting | | X | | Veterans |
| Cecelia Belone | Director | Zuni Comprehensive Health Center | 2/21/2022 | McKinley County | CHC Consulting | | | X | General Public |
| Adam Berry | Emergency Manager | McKinley County Emergency Management | 2/21/2022 | McKinley County | CHC Consulting | X | | | General Public |
| Jeremy Boucher | Director | Southwest Indian Foundation Project Office | 2/21/2022 | McKinley County | CHC Consulting | | | X | Tribal Group |
| Erin Buck | Gallup Program Director | Lexington Hotel | 2/21/2022 | Multi-county area, including McKinley County | CHC Consulting | | | X | Homeless |
| Donna Castillo | Office Manager | Presbyterian Medical Services | 2/21/2022 | McKinley County | CHC Consulting | | | X | Behavioral Health |
| Marie Chioda | Resident | Resident - Gallup, New Mexico | 2/21/2022 | McKinley County | CHC Consulting | | X | | General Public |
| Jim Christin | Executive Director | Manuelito Children's Home | 2/21/2022 | McKinley County | CHC Consulting | | X | | Pediatrics |
| Ken Collins | Executive Director | Hozho Center for Personal Enhancement | 2/21/2022 | McKinley County | CHC Consulting | | | X | Seniors/Elderly, Medically Complex |
| Emily Ellison | Executive Director | Battered Family Shelter | 2/21/2022 | Eddy County | CHC Consulting | | X | | Homeless Un/underinsured |
| Dr. Kevin Foley | Executive Director | Na Nihzhoozhi Center Inc. Detox and Inpatient Substance Use Rehab | 2/21/2022 | McKinley County | CHC Consulting | | X | | Behavioral Health |
| Chris Hudson | McKinley County Health Alliance Coordinator | McKinley County Health Alliance | 2/21/2022 | McKinley County | CHC Consulting | | X | | Medicaid |
| Mike Hyatt | Superintendent | Gallup McKinley County Schools | 2/21/2022 | McKinley County | CHC Consulting | | X | | Youth/Adolescent |
| Bob Ippel | Executive Director | Rehoboth Christian School | 2/21/2022 | McKinley County | CHC Consulting | | | X | Youth/Adolescent |
| Dr. Jill Jim | Executive Director | Navajo Nation Department of Health | 2/21/2022 | Apache County, AZ | CHC Consulting | X | | | Tribal Group |
| Bill Lee | Chief Operating Officer | Gallup McKinley County Chamber of Commerce | 2/21/2022 | McKinley County | CHC Consulting | X | | | Underserved, Low income, Un/underinsured |
| Myron Lizer | Vice President | Navajo Nation | 2/21/2022 | Multi-county area, including McKinley County | CHC Consulting | X | | | Tribal Group |
| Erica Marquez | Nursing Supervisor | New Mexico Department of Health | 2/21/2022 | Multi-county area, including McKinley County | CHC Consulting | X | | | General Public |

Rehoboth McKinley Christian Health Care Services Community Health Needs Assessment Surveyee Information

| Name | Title | Organization | Survey Sent | County Served | Surveyor | IRS Category | | | Population Served |
|-------------------------|--|---|-------------|--|----------------|--------------|---|---|---|
| | | | | | | A | B | C | |
| Debra Martinez | Behavioral Health Investment Zone Manager | City of Gallup - COVID-19 Hotel Shelter | 2/21/2022 | McKinley County | CHC Consulting | X | | | General Public |
| Crystal Masingale | Technical Assistance Manager | Four Corners Recovery Center | 2/21/2022 | Multi-county area, including McKinley County | CHC Consulting | | | X | Behavioral Health |
| K'Dawn Montano | Instructional Coach | Gallup McKinley County Schools (Support Services) | 2/21/2022 | McKinley County | CHC Consulting | | | X | Youth/Adolescent |
| Senator George K. Munoz | State Senator | State Senator - District 4 | 2/21/2022 | Multi-county area, including McKinley County | CHC Consulting | X | | | General Public |
| Camie Nelson | Women, Infants and Children Nutritionist Supervisor | Gallup Women, Infants and Children Office | 2/21/2022 | McKinley County | CHC Consulting | | X | | Obstetrics |
| Sarah Piano | Senior Director of Northern New Mexico City Councilor-District 3 | Big Brothers - Big Sisters Mountain Region City of Gallup | 2/21/2022 | McKinley County | CHC Consulting | | | X | Youth, General Public |
| Charles Reado | Deputy Director | Children Youth & Families Department Gallup Office | 2/21/2022 | McKinley County | CHC Consulting | | | X | Youth/Families |
| Kimberly Ross-Toledo | Senior Program Manager | City of Gallup Senior Citizens Center | 2/21/2022 | McKinley County | CHC Consulting | X | | | Seniors, Elderly |
| Christine Silva | Director | Bethany Day Care | 2/21/2022 | McKinley County | CHC Consulting | | | X | Pediatric |
| Maura Schanefelt | Operations Manager | Four Corners Recovery Center | 2/21/2022 | Multi-county area, including McKinley County | CHC Consulting | | | X | Behavioral Health |
| Helen Triplehorn | Resident | Resident - Gallup, New Mexico | 2/21/2022 | McKinley County | CHC Consulting | | X | | General Public |
| Vickie Trujillio | Executive Director | Catholic Charities | 2/21/2022 | Bernalillo County | CHC Consulting | X | | | Low income, Un/underinsured, General Public |
| Ben Welch | Community Services Coordinator | McKinley County Health Alliance | 2/21/2022 | McKinley County | CHC Consulting | | X | | Medicaid |

A: Work for a State, local, tribal, or regional governmental public health department (or equivalent department or agency) with knowledge, information, or expertise relevant to the health needs of the community

B: Member of a medically underserved, low-income, and minority populations in the community, or individuals or organizations serving or representing the interests of such populations

C: Community Leaders

Source: Rehoboth McKinley Christian Health Care Services, 2022 Community Health Needs Assessment Survey conducted by CHC Consulting; February 21, 2022 – March 14, 2022.

PRIORITY BALLOT



Prioritization Ballot

Upon reviewing the comprehensive preliminary findings report for the 2022 Rehoboth McKinley Christian Health Care Services (RMCHCS) Community Health Needs Assessment (CHNA), we have identified the following needs for the RMCHCS CHNA Team to prioritize *in order of importance*.

Please review the following criteria (Size and Prevalence of the Issue, Effectiveness of Interventions and RMCHCS Capacity) that we would like for you to use when identifying the top community health priorities for RMCHCS, then cast 3 votes for each priority.

1. Size and Prevalence of the Issue

In thinking about the "Size and Prevalence" of the health need identified, ask yourself the following questions listed below to figure out if the overall magnitude of the health issue should be ranked as a "1" (least important) or a "5" (most important).

- a. How many people does this affect?**
- b. How does the prevalence of this issue in our communities compare with its prevalence in other counties or the state?**
- c. How serious are the consequences? (urgency; severity; economic loss)**

2. Effectiveness of Interventions

In thinking about the "Effectiveness of Interventions" of the health need identified, ask yourself the following questions listed below to figure out if the overall magnitude of the health issue should be ranked as a "1" (least important) or a "5" (most important).

- a. How likely is it that actions taken by RMCHCS will make a difference?**
- b. How likely is it that actions taken by RMCHCS will improve quality of life?**
- c. How likely is it that progress can be made in both the short term and the long term?**
- d. How likely is it that the community will experience reduction of long-term health cost?**

3. RMCHCS Capacity

In thinking about the Capacity of RMCHCS to address the health need identified, ask yourself the following questions listed below to figure out if the overall magnitude of the health issue should be ranked as a "1" (least important) or a "5" (most important).

- a. Are people at RMCHCS likely to support actions around this issue? (ready)**
- b. Will it be necessary to change behaviors and attitudes in relation to this issue? (willing)**
- c. Are the necessary resources and leadership available to us now? (able)**

****Please note that the identified health needs below are in alphabetical order for now, and will be shifted in order of importance once they are ranked by the CHNA Team.***

* 1. Access to Affordable Care and Reducing Health Disparities Among Specific Populations

| | 1 (Least Important) | 2 | 3 | 4 | 5 (Most Important) |
|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Size and Prevalence of the Issue | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Effectiveness of Interventions | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| RMCHCS Capacity | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

* 2. Access to Dental Care Services and Providers

| | 1 (Least Important) | 2 | 3 | 4 | 5 (Most Important) |
|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Size and Prevalence of the Issue | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Effectiveness of Interventions | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| RMCHCS Capacity | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

* 3. Access to Mental and Behavioral Health Care Services and Providers

| | 1 (Least Important) | 2 | 3 | 4 | 5 (Most Important) |
|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Size and Prevalence of the Issue | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Effectiveness of Interventions | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| RMCHCS Capacity | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

* 4. Continued Recruitment & Retention of Healthcare Workforce

| | 1 (Least Important) | 2 | 3 | 4 | 5 (Most Important) |
|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Size and Prevalence of the Issue | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Effectiveness of Interventions | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| RMCHCS Capacity | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

* 5. Prevention, Education and Services to Address High Mortality Rates, Chronic Diseases, Preventable Conditions and Unhealthy Lifestyles

| | 1 (Least Important) | 2 | 3 | 4 | 5 (Most Important) |
|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Size and Prevalence of the Issue | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Effectiveness of Interventions | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| RMCHCS Capacity | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

* 6. When thinking about the above needs, are there any on this list that you DO NOT feel that RMCHCS could/would work on over the next 3 years?

Yes, we could/should work on this issue. No, we cannot/should not work on this issue.

| | | |
|---|-----------------------|-----------------------|
| Access to Affordable Care and Reducing Health Disparities Among Specific Populations | <input type="radio"/> | <input type="radio"/> |
| Access to Dental Care Services and Providers | <input type="radio"/> | <input type="radio"/> |
| Access to Mental and Behavioral Health Care Services and Providers | <input type="radio"/> | <input type="radio"/> |
| Continued Recruitment & Retention of Healthcare Workforce | <input type="radio"/> | <input type="radio"/> |
| Prevention, Education and Services to Address High Mortality Rates, Chronic Diseases, Preventable Conditions and Unhealthy Lifestyles | <input type="radio"/> | <input type="radio"/> |

Section 2:

Implementation Plan

Rehoboth McKinley Christian Health Care Services

FY 2023 - FY 2025 Implementation Plan

A comprehensive, six-step community health needs assessment (“CHNA”) was conducted for Rehoboth McKinley Christian Health Care Services (RMCHCS) by Community Hospital Consulting (CHC Consulting). This CHNA utilizes relevant health data and stakeholder input to identify the significant community health needs in McKinley County, New Mexico.

The CHNA Team, consisting of leadership from RMCHCS, reviewed the research findings in April/May 2022 to prioritize the community health needs. Five significant community health needs were identified by assessing the prevalence of the issues identified from the health data findings combined with the frequency and severity of mentions in community input.

The CHNA Team participated in a prioritization process using a structured matrix to rank the community health needs based on three characteristics: size and prevalence of the issue, effectiveness of interventions and the hospital’s capacity to address the need. Once this prioritization process was complete, the hospital leadership took a survey through SurveyMonkey and decided to address four of the five prioritized needs in various capacities through a hospital specific implementation plan.

The five most significant needs, as prioritized by the CHNA team, are listed below:

- 1.) Continued Recruitment & Retention of Healthcare Workforce
- 2.) Access to Mental and Behavioral Health Care Services and Providers
- 3.) Access to Affordable Care and Reducing Health Disparities Among Specific Populations
- 4.) Prevention, Education and Services to Address High Mortality Rates, Chronic Diseases, Preventable Conditions and Unhealthy Lifestyles
- 5.) Access to Dental Care Services and Providers

While RMCHCS acknowledges that this is a significant need in the community, “Access to Dental Care Services and Providers” is not addressed largely due to the fact that it is not a core business function of the hospital and the limited capacity of the hospital to address this need. RMCHCS will continue to support local organizations and efforts to address this need in the community.

RMCHCS leadership has developed the following implementation plan to identify specific activities and services which directly address four of the identified priorities. The objectives were identified by studying the prioritized health needs, within the context of the hospital’s overall strategic plan and the availability of finite resources. The plan includes a rationale for each priority, followed by objectives, specific implementation activities, responsible leaders, annual progress and key results (as appropriate).

The RMCHCS Board reviewed and adopted the 2022 Community Health Needs Assessment and Implementation Plan on October 26, 2022.

Priority #1: Continued Recruitment & Retention of Healthcare Workforce

Rationale:

McKinley County has a higher rate of preventable hospitalizations and a lower percentage of those who have a personal doctor than the state. Additionally, McKinley County has several Health Professional Shortage Area designations as defined by the U.S. Department of Health and Human Services Health Resources and Services Administration (HRSA). When asked to rank the top 10 most important health initiatives from a list of options, survey respondents ranked recruiting more health care providers and recruiting specialists who can provide services that are not currently available. Survey respondents mentioned that there are not enough providers and making appointments is very difficult. Survey respondents also mentioned the top barriers to low income residents as lack of capacity and lack of access due to provider distance as some barriers for low income residents.

When asked about barriers to care coordination, survey respondents mentioned lack of staff and time for investment in coordination. One survey respondent stated: "If there is not enough staffing or staff time is limited because they are already overworked, then this is a major barrier to people receiving adequate care in a timely manner. There are also not enough primary care providers. I know many people who don't have a primary care provider because no one is taking on new patients. This is a serious problem." Another survey respondent stated: "Lack of physicians and overutilization of other providers (non-MDs) makes it difficult to get 'medical' treatment for individuals." Additionally, another survey respondent stated: "The community has needs for specialty [care] and most people have to travel to find those specialties. It is difficult to obtain appointments and/or the wait for next appointment that is months out."

Objective:

Engage in physician recruitment efforts, coupled with the implementation of strategies to retain physicians in the area

| Implementation Activity | Responsible Leader(s) | FY 2023 | | FY 2024 | | FY 2025 | |
|---|--|---|---------------------------------|----------|---------------------------------|----------|---------------------------------|
| | | Progress | Key Results (As Appropriate) | Progress | Key Results (As Appropriate) | Progress | Key Results (As Appropriate) |
| 1.A. RMCHCS continues to work with various academic institutions to support the nursing programs and students and within other medical and health profession educational institutions in New Mexico and around the country, such as the University of New Mexico (UNM) Gallup campus and the Burrell College of Medicine. RMCHCS will also continue to offer RN scholarships and explore additional programs to expand offerings, such as a Medical Assistant program. Furthermore, students can conduct clinical rotations at RMCHCS in medicine, nursing, emergency medical services, medical assistant, laboratory services, surgical technicians, radiology, physical therapy, pharmacy technicians, medical records and other allied health fields. | CNO, CHRO, Education Coordinator, VP of Clinic Practice Management | Current Examples include: Central New Mexico Community College, Carrington College, Pima Medical Institute, San Juan College, Walden University, Grand Canyon University and other institutions | | | | | |
| 1.B. RMCHCS will continue to strengthen its connections with University of New Mexico Medical School, UNM College of Nursing and (UNM) Gallup Campus' Nursing, EMS, and Allied Health Program as well as other health-related programs to provide learning opportunities within the hospital environment for its students. Through UNM, RMCHCS will continue to offer opportunities for college students who are in the UNM BA/MD program, the Rural and Urban Underserved Program (RUUP) as well as other UNM medical school programs. | Education Coordinator | | | | | | |
| 1.C. RMCHCS will continue to offer opportunities for high school students to experience healthcare settings by observing healthcare providers and staff in real life health settings. | Education Coordinator | | | | | | |
| 1.D. RMCHCS will continue to operate the Burrell College of Osteopathic Medicine's Four Corners Hub at the hospital. The Four Corners Hub brings five third-year medical students to complete a full year of medical school training here in Northwest New Mexico. Students spend time with RMCHCS' clinic and hospital physicians, as well as with other physicians stretching from Zuni to Farmington. | Education Coordinator, Four Corners Regional Hub Coordinator | | | | | | |
| 1.E. RMCHCS will continue to perform market analyses and internal equity for all positions and employees and adjust wages as appropriate. | CHRO | | | | | | |

| Implementation Activity | Responsible Leader(s) | FY 2023 | | FY 2024 | | FY 2025 | |
|---|--|--|---------------------------------|----------|---------------------------------|----------|---------------------------------|
| | | Progress | Key Results (As Appropriate) | Progress | Key Results (As Appropriate) | Progress | Key Results (As Appropriate) |
| 1.F. RMCHCS will continue to collaborate/partner with community agencies, providers and government entities to focus on increased access to health care providers/services. | Administration Council, Director of Marketing | | | | | | |
| 1.G. RMCHCS will continue to partner with outside organizations for specialty care services. Organization is currently partnered with Dialysis services. | CNO, CEO | | | | | | |
| 1.H. RMCHCS will continue to provide referral services to patients who require specialty care. RMCHCS will update the referral list accordingly. | CNO, Director of Marketing | | | | | | |
| 1.I. RMCHCS will continue to provide access to multi-disciplinary consultation and rounding via the ECHO program. This program currently provides access to renowned institutions and provider expertise across the US. The following disease processes are targeted for weekly review: COVID-19 Long-Term-Syndrome, AIDS, Hepatitis and others. | Director of Operations, VP of Clinic Practice Management, Director of Marketing, Infectious Disease/IM & Medical Group Clinic. | | | | | | |
| 1.J. RMCHCS continues to utilize their community health needs assessment for McKinley County as the stepping stone in building collaboration among human service agencies, health care providers, multiple governmental entities in the region and private sectors and Western Health Foundation. | CEO | Current Examples include: New Mexico Hospital Association, McKinley Community Health Alliance, NM Dept. Health, NM Council of Governments, local Native America Tribes | | | | | |

Priority #2: Access to Mental and Behavioral Health Care Services and Providers

Rationale:

Data suggests that residents in McKinley County do not have adequate access to mental and behavioral health care services and providers. McKinley County has a lower rate of mental health care providers per 100,000 than the state.

For preventable hospitalizations, survey respondents selected mental illness as the top most important issue. Substance abuse and mental health problems were also the top two health problems that respondents as the most important issues in the community and mental illness was ranked number two by survey respondents for most important chronic conditions in the community. Survey respondents rated that it was very difficult/difficult for low income residents to access mental and behavioral health care services. More than half of community survey respondents rated local mental health screenings as "very inadequate or inadequate." Survey respondents stated the following: "...very limited programs and lack of up-to-date interventions. Substance abuse treatment is only short term or outpatient and not trauma-informed."

Additionally, survey respondents discussed the need for more treatment for substance abuse and how it is often aligned with mental health issues and many times with homelessness. One survey respondent stated: "We need relapse prevention groups for individuals with substance abuse problems. Chronic stress from living on the streets and not getting enough sleep, eating nutritious food, and developing supportive housing will go a long way to improving the quality of life in our community." Another survey respondent stated: "This community sees some of the highest rates of substance use disorder and its related comorbidities. Stronger preventative and education methods are needed throughout lives to improve outcomes."

Objective:

Provide a point of access for mental health services in the community

| Implementation Activity | Responsible Leader(s) | FY 2023 | | FY 2024 | | FY 2025 | |
|--|----------------------------------|----------|---------------------------------|----------|---------------------------------|----------|---------------------------------|
| | | Progress | Key Results (As Appropriate) | Progress | Key Results (As Appropriate) | Progress | Key Results (As Appropriate) |
| 2.A. RMCHCS will continue to collaborate with local organizations in finding the appropriate level of care based on the patient's mental health needs as opportunities arise. | CNO | | | | | | |
| 2.B. RMCHCS will continue to provide mental health support to its employees through offering the Employee Assistance Program (EAP). | CHRO | | | | | | |
| 2.C. RMCHCS will continue to provide communication from the NM Crisis and Access Line internally to patients and through the website. | Director of Marketing | | | | | | |
| 2.D. RMCHCS provides case management services in the outpatient area and the BHS team covers the inpatient needs. RMCHCS also utilizes providers at the College Clinic to evaluate inpatients who present with mental and/or behavioral health issues. | Director of Case Management | | | | | | |
| 2.E. RMCHCS continues to staff social workers and social services through their home health & hospice. | VP of Clinic Practice Management | | | | | | |
| 2.F. RMCHCS continues to staff mental health professionals to ensure the community has access to mental and behavioral health providers. | VP of Clinic Practice Management | | | | | | |
| 2.G. RMCHCS screens patients appropriately who come into the ER with mental health issues. The patient is referred to RMCHCS' BHS team if they need to be seen in the ER or they are referred to the College Clinic for outpatient mental and behavioral health services. | CNO | | | | | | |

Priority #3: Access to Affordable Care and Reducing Health Disparities Among Specific Populations

Rationale:

Data suggests that some residents in the study area face significant cost barriers when accessing the healthcare system. McKinley County has higher unemployment rates than the state, as well as lower educational attainment rates than the state. McKinley County also has a higher percentage of families and children living below poverty than the state, as well as a higher percentage of public school students eligible for free or reduced price lunch. Additionally, McKinley County has a higher percentage of overall food insecurity, child food insecurity, and a higher percentage of recipients who qualified for Supplemental Nutrition Assistance Program (SNAP) benefits than the state. McKinley County also has a lower median household income as compared to New Mexico.

McKinley County has a higher rate of those adults (age 18-64) who are uninsured as compared to the state and a higher percentage of residents that experienced a medical cost barrier to care within the past 12 months than the state. When analyzing economic status, McKinley County is in more economic distress than the majority of other counties in the state. Additionally, McKinley County is designated as a Medically Underserved Area, as defined by the U.S. Department of Health and Human Services Health Resources and Services Administration (HRSA).

Through a community survey, more than two-thirds of respondents indicated "Very Inadequate or Inadequate" services for persons who are homeless, persons with substance abuse, the working poor, the uninsured/underinsured, persons with no social or emotional support, persons with mental illness, persons with no source of transportation, persons with chronic diseases, and low income groups. For those survey respondents who chose "Very inadequate or Inadequate" services for the aforementioned subpopulations, one respondent stated: "We do not have free, accessible healthcare and mental healthcare for low income people aside from IHS. We do not have any mental health crisis facilities, we do not have adequate shelter and affordable housing for homeless and working poor, single parents, and disabled. We do not have any long term substance abuse recovery facilities. We do not have LGBTQ and immigrant friendly services." Another interviewee stated: "I think we need more services available for emotional well-being but this means more counseling services or advertising counseling services better. To my knowledge we do not have medical employees that meet people with no transportation so that is an issue. Substance abuse and homelessness is a huge issue and I am not sure that our community is set up to provide for these issues. It can't just be one night at NCI and get released. These people need treatment but then they also need support to find jobs and housing etc. Lastly, I always hear veterans saying that is impossible to get good health care. They can't pay for it so they go to the VA's office but it takes forever or is too complicated. Not sure if RMCH could help with a specific veterans program. We have a lot of Veterans in this community."

Survey respondents discussed several contributing factors when thinking about health need adequacy for specific populations including: limited resources, transportation and cost barriers, limited access to qualifiers to receive care, long wait times, and lack of specialized/higher levels of care. Improving access to healthcare for populations with limited services was the top ranked most important health initiatives. The fourth top ranked healthcare initiative was increasing the proportion of residents who have access to healthcare coverage. When asked about the low income residents in the community, survey respondents mentioned several barriers for such residents, including lack of providers accepting Medicaid/Medicare, lack of coverage/financial hardship, lack of transportation and difficulty navigating the system/lack of awareness of available resources. Respondents were asked to rate the level of difficulty low income residents face when trying to access specific health related services and routine primary/preventative care and emergency services were the top two services.

Objective:

Implement and offer programs that aim to reduce health disparities by targeting specific populations

| Implementation Activity | Responsible Leader(s) | FY 2023 | | FY 2024 | | FY 2025 | |
|--|--|----------|------------------------------|----------|------------------------------|----------|------------------------------|
| | | Progress | Key Results (As Appropriate) | Progress | Key Results (As Appropriate) | Progress | Key Results (As Appropriate) |
| 3.A. RMCHCS will continue to be a part of the Human Milk Repository Station organization, which collects and distributes human milk (breastmilk). | CNO | | | | | | |
| 3.B. RMCHCS continues to invest in the OB/GYN service line for expecting patients. Additionally, the Women's Health Unit (WHU) is undergoing renovation to better meet the needs of the community like housing state of the art equipment. | CNO | | | | | | |
| 3.C. RMCHCS continues to provide OnSite financial advisors. RMCHCS customer service provides education on insurance and also assists with Medicaid enrollment, McKinley County Indigent, and Charity enrollment. | Director of Revenue Cycle | | | | | | |
| 3.D. RMCHCS will continue to offer telehealth programs for both inpatient and outpatient services. RMCHCS is currently reviewing options to expand it's telehealth programs. | CNO, VP of Clinic Practice Management | | | | | | |
| 3.E. RMCHCS will continue to provider LTC (Nursing Home), and Assisted Living facilities with Internal Medicine and Infectious Disease consults as allowable with Dr Gonzaga's schedule. | VP of Clinic Practice Management | | | | | | |
| 3.F. In conjunction with our Urgent Care Facility, RMCHCS provides extended hours for Primary Care & Ambulatory Care sick-visits. Extended-hours staff can view PCP notes and preventive-health needs of established RMCHCS patients. RMCHCS is also the only provider of after-hours Occupational Health services in the region. | VP of Clinic Practice Management | | | | | | |
| 3.G. RMCHCS provides resources in multiple languages through our language line and internal certified interpreters. Interpreters includes local Native American speakers and sign language. | Director of Revenue Cycle, Education Coordinator | | | | | | |

| Implementation Activity | Responsible Leader(s) | FY 2023 | | FY 2024 | | FY 2025 | |
|--|-----------------------|----------|---------------------------------|----------|---------------------------------|----------|---------------------------------|
| | | Progress | Key Results (As Appropriate) | Progress | Key Results (As Appropriate) | Progress | Key Results (As Appropriate) |
| 3.H. RMCHCS provides medication reconciliation for patients on admit and prior to discharge to ensure that the patient has an accurate list of their medications for their health needs. | Director of Pharmacy | | | | | | |
| 3.I. RMCHCS will continue to host health fair events in the community, where they provide reduced cost health services like low cost mammograms during the month of October, annual physicals, etc. | Director of Marketing | | | | | | |

Priority #4: Prevention, Education and Services to Address High Mortality Rates, Chronic Diseases, Preventable Conditions and Unhealthy Lifestyles

Rationale:

Data suggests that higher rates of specific mortality causes and unhealthy behaviors warrants a need for increased preventive education and services to improve the health of the community. Cancer and heart disease are the two leading causes of death McKinley County and the state. McKinley County has higher mortality rates than New Mexico for the following causes of death: cancer; accidents (unintentional injuries); COVID-19; chronic liver disease and cirrhosis; diabetes mellitus; cerebrovascular diseases; influenza and pneumonia; intentional self-harm (suicide); breast cancer (female); prostate cancer (male); and colon and rectum cancer.

McKinley County has higher prevalence rates of chronic conditions such as diabetes for adults and Medicare beneficiaries, overweight or obesity, asthma, high blood pressure for adults and Medicare beneficiaries and those with a disability than the state. McKinley County has higher percentages of residents participating in unhealthy lifestyle behaviors such as physical inactivity and smokeless tobacco use than the state. With regards to maternal and child health, specifically, McKinley County has higher rates of teen (age 15-19 years) birth rates, and higher rates of women who received inadequate prenatal care than the state. Data suggests that McKinley County residents are not appropriately seeking preventive care services, such as timely mammography, colonoscopy pap tests or prostate screening. McKinley County has higher prevalence rates of communicable diseases such as chlamydia, syphilis and HIV than the state.

Survey respondents were asked to select the five most important issues in the community in regards to chronic diseases and they are diabetes, mental illness, obesity, end stage renal disease/chronic kidney disease and chronic liver disease/cirrhosis. For preventable hospitalizations, survey respondents selected mental illness, uncontrolled diabetes, diabetes long term complications, and high blood pressure and diabetes short term complications as most important issues. Furthermore, obesity and diabetes were within the top five health problems selected by survey respondents. More than half of community survey respondents indicated "very inadequate or inadequate" services provided for nutrition and weight management programs in the community. Survey respondents mentioned that, "Preventative [and] primary care in these sectors would result in better health outcomes for those needing the services," and how there is "...little to no emphasis on prevention. Our health facilities are designed for 'acute' care."

Survey respondents were asked to rank a list of healthcare initiatives for all residents from most important to least important. Several prevention and educational health initiatives were ranked, including: promoting behavior change in unhealthy lifestyles; health promotion and preventive education; improving access to preventive care (screenings for chronic diseases, immunizations); and promoting chronic disease management.

More than 50% of survey respondents believe that community members get their health-related education from friends and family, the internet or community based organizations. One survey respondent stated: "Hospitals need to re-design their systems to include more preventive care, with limited focus on acute care." Another survey respondent stated: "Changing the mindset in our area would play a critical role in people's lifestyles. This is important if we want to improve the quality of life of people in our community."

Objective:

Implement programs and provide educational opportunities that seek to address unhealthy lifestyles and behaviors in the community

| Implementation Activity | Responsible Leader(s) | FY 2023 | | FY 2024 | | FY 2025 | |
|---|--|--|---------------------------------|----------|---------------------------------|----------|---------------------------------|
| | | Progress | Key Results (As Appropriate) | Progress | Key Results (As Appropriate) | Progress | Key Results (As Appropriate) |
| 4.A. RMCHCS will continue to follow the CDC Guidelines regarding COVID-19 vaccinations and testing. Monthly meetings will continue to be sponsored by the NMHA and NMDOH to discuss current treatment options and restrictions, COVID-19 cases, trends, and variants of concern that could impact our community. RMCHCS continues to provide public service announcements on a regular basis to keep the community informed. | Employee Health and Infection Prevention Coordinator | | | | | | |
| 4.B. RMCHCS will continue to have all menu items and recipes reviewed and approved by the dietician. | Director of Dietary Services/Director of Operations | | | | | | |
| 4.C. RMCHCS will continue to support and participate in all feasible community events including health promotion initiatives/activities. | Director of Marketing | | | | | | |
| 4.D. RMCHCS will continue to offer and participate in conferences as related to patient population needs. | Education Coordinator | | | | | | |
| 4.E. RMCHCS will continue to offer employees a full service wellness program through current vendor, Virgin Pulse to include wellness initiatives and healthy lifestyle resources. | CHRO | | | | | | |
| 4.F. RMCHCS provides discounted medical premiums to their employees regarding certain healthy lifestyle behaviors. | CHRO | Current Examples include: Tobacco cessation class | | | | | |

Section 3:

Feedback, Comments and Paper Copies

INPUT REGARDING THE HOSPITAL'S CURRENT CHNA



CHNA Feedback Invitation

- IRS Final Regulations require a hospital facility to consider written comments received on the hospital facility's most recently conducted CHNA and most recently adopted Implementation Strategy in the CHNA process.
- RMCHCS invites all community members to provide feedback on its existing CHNA and Implementation Plan.
- To provide input on this CHNA please see details at the end of this report or respond via direct mail or email to the hospital. The physical address and email address can be found directly on the hospital's website at the site of this download.



Feedback, Questions or Comments?

Please address any written comments on the CHNA and Implementation Plan and/or requests for a copy of the CHNA and Implementation Plan to:

Rehoboth McKinley Christian Health Care Services

ATTN: Administration

1901 Red Rock Drive

Gallup, NM 87301

Email: chna@rmchcs.org

Please find the most up to date contact information on the Rehoboth McKinley Christian Health Care Services website as a direct link labeled CHNA along the blue header at the top of the homepage:

<https://www.rmch.org/?sub=>





Thank You!

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