

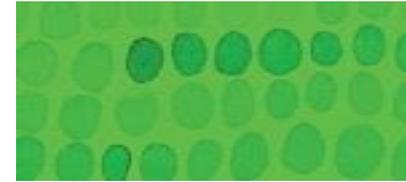
COMMUNITY HEALTH IMPLEMENTATION PLAN (CHIP)

UnityPoint Health – Cedar Rapids (St. Luke's Hospital and Jones Regional Medical Center)
2026-2028 Implementation Strategy in Response to the 2025 Community Health Needs Assessment



UnityPoint Health

Introduction

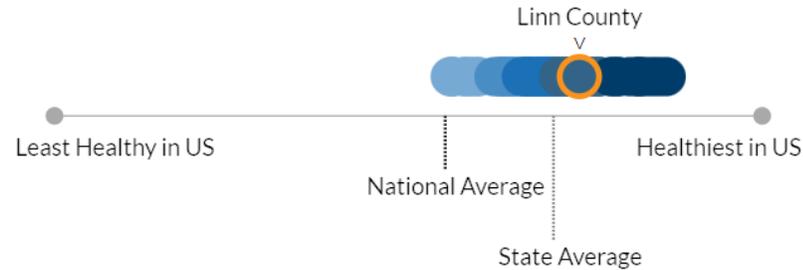


Health of the Community – Linn County

Linn County is faring about the same as the average county in Iowa for Population Health and Well-being, and better than the average county in the nation.

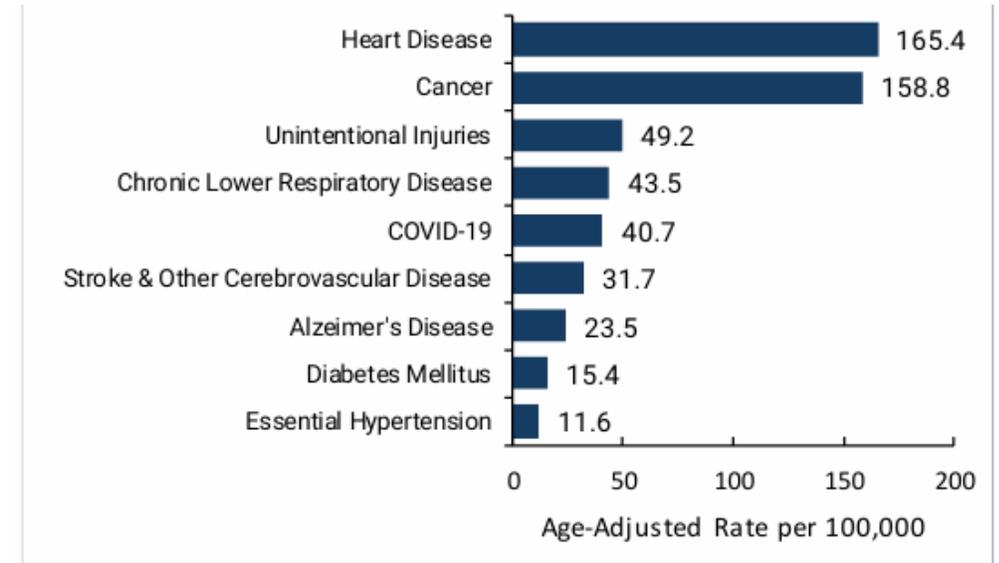


Linn County is faring slightly better than the average county in Iowa for Community Conditions, and better than the average county in the nation.

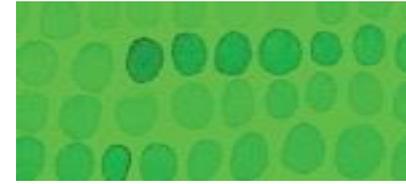


Source: County Health Rankings and Roadmap

Leading Causes of Death in Linn County



Source: CDC Wonder 2022

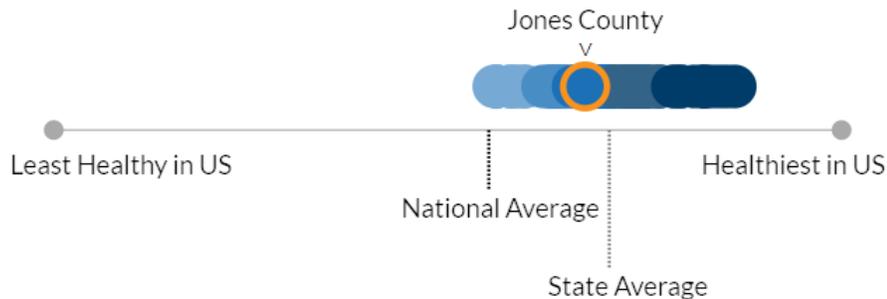


Health of the Community – Jones County

Jones County is faring slightly better than the average county in Iowa for Population Health and Well-being, and better than the average county in the nation.



Jones County is faring about the same as the average county in Iowa for Community Conditions, and better than the average county in the nation.



Source: County Health Rankings and Roadmap

Leading Causes of Death in Jones County

Cause of Death	Death AAR (per 10k)
Diseases of Heart	14.58
Malignant Neoplasms (Cancer)	10.26
Chronic Lower Respiratory Diseases	5.30
Accidents (unintentional injuries)	5.14
Intentional self-harm (suicide)	4.27
Cerebrovascular diseases	4.07
Alzheimer's disease	3.69
Diabetes mellitus	2.46

Source: Iowa Dept. of Health and Human Services: Top 10 Causes, 2023

Demographics: Jones and Linn Counties

Demographics	Jones, IA	Linn, IA
% Below 18 Years of Age	20.1%	22.3%
% 65 and Older	21.5%	17.9%
% Female	46.9%	50.6%
% American Indian or Alaska Native	0.5%	0.3%
% Asian	0.6%	2.5%
% Hispanic	2.7%	4.2%
% Native Hawaiian or Other Pacific Islander	0.0%	0.2%
% Non-Hispanic Black	2.9%	6.8%
% Non-Hispanic White	92.6%	83.3%
% Disability: Functional Limitations	26%	27%
% Not Proficient in English	0%	1%
Children in Single-Parent Households	25%	23%
% Rural	73.8%	13.7%
Population	20,900	228,972



Community Health Improvement Plan (CHIP) Background



The Patient Protection and Affordable Care Act, signed into law in March 2010, requires that nonprofit hospitals conduct a Community Health Needs Assessment at least once every three years beginning in March 2012. Departments of Public Health require local public health agencies to conduct a CHNA at least every five years.

These requirements present the opportunity for local community health leaders to join forces and identify priorities that can serve as a guide for programs, policies, and investments. Working together often creates efficiencies, new partnerships, and increased collaboration. Ultimately, community members benefit when data, resources and expertise are shared to attain the common goal of a healthier community. This CHNA was conducted in full partnership with the local health departments, hospitals, and many other community health organizations.

Conducting this comprehensive CHNA involved surveying community members and leaders as well as gathering relevant health data. The choice of our priorities reflects the idea that a high quality medical/clinic system is essential to treat people who are sick, and critical to help restore people's health; but it is not where health is created. Health is created in people's homes, workplaces, neighborhoods, and communities where people make healthy or unhealthy choices and establish healthy or unhealthy habits. The framework for those choices is the social, economic, and built environments we create. These are the Social Drivers of Health (SDoH).

The ACA also requires nonprofit hospitals to complete an **implementation strategy** in response to each CHNA. A hospital's implementation strategy must be a written plan that, for each significant health need identified, describes how the hospital facility plans to address the health need. In describing how a hospital plans to address a significant health need identified through the CHNA, the implementation strategy must:

- Describe the actions the hospital facility intends to take to address the health need and the anticipated impact of these actions.
- Identify the resources the hospital plans to commit to address the health need.
- Describe any planned collaboration between the hospital and other facilities or organizations in addressing the health need.
- Be adopted by an authorized body of the hospital facility.

CHIP Overview Focus Areas

Initiatives:

- Priority 1: Healthcare Access
- Priority 2: Chronic Disease Prevention and Management
- Priority 3: Supporting Mental Health
- Priority 4: Supporting Community Health through Sustainable Livable Wage Careers
(Added by UPH - CR)



Priority: Healthcare Access

Goal 1: Increase and ensure continuity in health insurance coverage among underserved populations.



Actions	Anticipated Impact	Existing/Planned collaborations	Resources
1. Screen and assist self-pay and underinsured patients with enrollment assistance for Medicaid and Marketplace coverage.	Increase access to insurance	UPH financial counselors, Iowa Medicaid, Health Insurance Marketplace	Staff time
2. Leverage existing collaborations between insurance assisters and health providers.	Increase number of individuals served	Community insurance assisters group	Staff time, partnerships with community organizations
3. Track and respond to state and national level changes to the health insurance climate.	Reduce drops in coverage due to changes	UPH Government Relations	Staff time
4. Develop and implement communication strategies that improve understanding of health insurance, access to health care, and available resources in the community.	Enhance consumer knowledge to take action	Community insurance assisters group	Staff time, printed materials, partnerships with community organizations
5. Increase outreach and support to disproportionately impacted populations.	Reduce variability in insurance coverage	UPH financial counselors Community insurance group	Staff time

Priority: Healthcare Access

Goal 2: Identify and reduce barriers that limit healthcare access among underserved populations.



Actions	Anticipated Impact	Existing/Planned collaborations	Resources
1. Identify barriers that limit access and for whom.	Increased access	Linn County Implementation Plan workgroup	Staff time, partnerships with community organizations
2. For patients experiencing financial barriers, refer patients to UnityPoint Health – Cedar Rapids Financial Counselors for support with medical costs.	Reduce financial burden	UPH Financial Counselors UPH Revenue Cycle	Staff time
3. Provide in-kind services to local free clinics and Federally Qualified Health Center to ensure access to care for uninsured and underinsured individuals.	Increased capacity and access	UPH – Cedar Rapids, His Hands Free Clinic, Community Free Clinic, Eastern Iowa Health Center	Staff time, funding
4. Promote culturally and linguistically appropriate services (CLAS) and interpretive services to ensure equitable, respectful, and effective healthcare for all populations.	Improved outcomes and experience	Community agencies UPH Globo Interpretive Services UPH Community Impact and Engagement Team	Staff time, technology, printed material, partnerships with community organizations
5. Ensure health navigation for community members using community health workers, care navigators, etc.	Reduction in missed appointment Increase in health needs being met	UPC Community Health Workers, Care Managers Linn County Community Health Workers	Staff time, partnerships with community organizations

Priority: Healthcare Access

Goal 2 (cont.): Identify and reduce barriers that limit healthcare access among underserved populations.



Actions	Anticipated Impact	Existing/Planned collaborations	Resources
6. Continue to improve primary, specialty, and mental health access across UnityPoint Health – Cedar Rapids including rural areas.	Early detection and prevention	UPC primary and specialty providers Independent providers	Staff time, provider availability
7. Further access and connections to programs for the aging individuals that support safe aging in the home.	Reduced falls, reduce escalating health issues, improved experience	UPH PACE UPH @ Home Abbe Aging Services	Staff time
8. Identify and expand Social Determinants of Health screening and completed referrals to address factors that contribute to poorer health among underserved populations (transportation, food insecurity, financial barriers).	Increased ability to address needs that can impact health outcomes	My Care Community UnityPoint Health – Cedar Rapids	UPH Epic's Find Help, staff time, partnership with community agencies
9. Provide in-kind support and donations to local food banks to address food insecurities.	Increase capacity for food banks to serve the community	HACAP	Staff time, funding, partnership with community organizations

Priority: Chronic Disease Prevention and Management

Goal: Improve early detection of the top five leading cancer diagnoses and promote chronic disease prevention efforts through community collaborations.



Actions	Anticipated Impact	Existing/Planned collaborations	Resources
<p>1. Address gaps in access to preventative resources and knowledge of risk and protective factors related to chronic illness through intentional listening and engagement with the community.</p>	<p>Increase in preventative care</p>	<p>Together Healthy Linn Workgroup</p>	<p>Staff time, partnership with community organizations</p>
<p>2. Identify and address opportunities in collaboration with the healthcare systems to increase common screenings for the top five cancer diagnoses.</p> <ul style="list-style-type: none"> • Monitor and analyze cancer screening rates; conduct outreach and provide education on cancer prevention, risk factors, and available screening opportunities • Review and update cancer screening guidelines annually in alignment with current evidence • Provide community cancer screenings (e.g., breast, prostate) for uninsured and underinsured individuals • Promote the Especially for You fund to reduce financial barriers to breast and gynecological cancer services 	<p>Early detection Reduce financial barrier to care</p>	<p>UPH Cancer Services UPC Mercy Cancer Services Mercy Primary Care Eastern Iowa Health Center Linn County Public Health Community Free Clinic His Hands Free Clinic</p>	<p>Staff time, provider availability, partnership with community healthcare organizations, partnership with community agencies, printed material</p>

Priority: Chronic Disease Prevention and Management

Goal (cont.): Improve early detection of the top five leading cancer diagnoses and promote chronic disease prevention efforts through community collaborations.



Actions	Anticipated Impact	Existing/Planned collaborations	Resources
<p>3. Reduce the burden of heart disease and stroke through prevention, early detection, and management of cardiovascular risk.</p> <ul style="list-style-type: none"> Quarterly Acute Coronary Syndrome education and screening events 	<p>Decrease in cardiovascular mortality rates</p>	<p>UPH Heart Care Services UPC primary and specialty care Community partnerships for Stop the Bleed and CPR</p>	<p>Staff time, Stop the Bleed kits, partnership with community organizations</p>
<p>4. Ensure multidisciplinary discharge planning and care transitions that holistically address patients' medical, behavioral, and social needs—connecting them to home- and community-based supports</p>	<p>Decrease in readmissions, increase patient experience</p>	<p>UPH Care Team Community referral agencies</p>	<p>Staff time, partnership with community organizations</p>
<p>5. Ensure UPH outpatient care management support for individuals with rising risk.</p>	<p>Improved chronic disease outcomes</p>	<p>UPC</p>	<p>Staff time</p>
<p>6. Improve rate of Physicals/Well Child Visits (Ages 18+)/Medicare to engage patients in preventative screenings, vaccinations and care.</p>	<p>Increase opportunity for preventative care & Social Determinants of Health screening</p>	<p>UPC</p>	<p>Staff time, provider availability</p>
<p>7. Increase number of opportunities to exercise.</p>	<p>Increase in healthy behaviors that reduce risk</p>	<p>UPH Wellness Services UPH Hospital Gyms</p>	<p>UPH On-Point Health Challenges Low-cost hospital gyms</p>

Priority: Supporting Mental Health

Goal: Strengthen mental health support by expanding community partnerships, promoting well-being, and fostering resilience.



Actions	Anticipated Impact	Existing/Planned collaborations	Resources
1. Advocate for workshops, resources, and policies to educate and encourage mental health support for employers and employees.	Increase in employees accessing help	Together Healthy Linn Workgroup UPH EAP	Staff time, partnership with community organizations, funding
2. Coordinate communication strategies to promote awareness and reduce stigma around access, language, awareness, safety plans, safe havens, resource lists, etc.	Increase in community members accessing help	Together Healthy Linn Workgroup	Staff time, printed materials, partnership with community organizations
3. Support community implementation of the Problem Management Plus (PM+) program focused on resiliency.	Increased access to peer based programs	Together Healthy Linn Workgroup Abbe Health	Staff time, partnership with community organizations, funding
4. Further employee engagement in Peer Support, Reigniting the Spirit, EAP, and Quiet Reflection Spaces programs across UnityPoint Health – Cedar Rapids for team member wellbeing.	Decrease in burn-out and turnover	UPH Services St. Luke's Foundation	Staff time, partnership with community organizations, funding
5. Provide transition support after substance use treatment, including discharge planning, weekly aftercare, and family support groups.	Continuity of care to improve outcomes	UPH Hospitals Abbe Health UPH Outpatient Services	Staff time, partnership with community organizations

Priority: Supporting Mental Health

Goal (cont.): Strengthen mental health support by expanding community partnerships, promoting well-being, and fostering resilience.



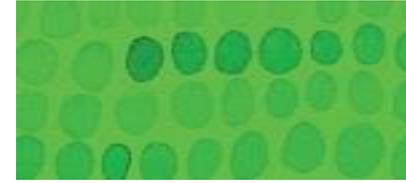
Actions	Anticipated Impact	Existing/Planned collaborations	Resources
<p>6. Strengthen mental health support through advancing priority opportunities identified in the UPH– Cedar Rapids Behavioral Health Patient Experience Mapping work:</p> <ul style="list-style-type: none">• Increase same day access to Abbe Health Services• Advanced Practice Psych Nurse in the Emergency Departments.• Improved Abbe Health discharge practices Improve anticipating patients in crisis and connect to resources / appropriate sites of care.• Care Management improvements	Improved patient/client outcomes and experience	UPH Hospitals Abbe Health	Staff time, provider availability, training
<p>7. Increase early suicide intervention services through inpatient risk screening, safety planning, and referral.</p>	Decrease in community suicide rates	UPH Hospitals Abbe Health	Staff time, partnership with community organizations

Priority: Supporting Community Health through Livable Wage Careers

Goal: Promote equitable access to livable-wage healthcare careers to improve community well-being and economic stability.



Actions	Anticipated Impact	Existing/Planned collaborations	Resources
<p>1. Expand accessible healthcare career entry and advancement with emphasis in zip codes where variability in life expectancy exists.</p> <ul style="list-style-type: none"> • Health career exploration programs • Mentorship and internship programs • Pathway programs for internal advancement • Scholarship and tuition assistance funds • Healthcare apprenticeships and pathway programs • Jones Regional Simulation Lab • Jones Regional “Day in the Life” for high school students 	<p>Advancement toward livable wage, decrease the gap in life expectancy in area zip codes where highest variability exists.</p>	<p>UPH team members, The Arc Project Search, area schools and colleges, community workforce agencies, neighborhood associations</p>	<p>Staff time, funding, partnerships with community organizations, partnerships with schools</p>
<p>2. Strengthen the healthcare pipeline to meet the health needs of the community by providing training opportunities for students.</p>	<p>Increase students graduating into healthcare careers.</p>	<p>UPH, area schools and colleges</p>	<p>Staff time</p>



Additional needs were reviewed but did not identify as the top three areas in the CHNA. UnityPoint Health is actively addressing these additional needs through various initiatives:

- **Childcare Access & Cost:** UPH – Cedar Rapids participated in MedQuarter assessments to better understand childcare needs.
- **Food Security & Access:** UPH – Cedar Rapids screens patients for food insecurities and makes referrals to HACAP for addressing the needs. In addition, we provide financial donations to HACAP to further their ability to purchase necessary food items. In addition, our hospital and clinic dietitians support patients in providing education on food options to contribute to their overall wellness and health outcomes.
- **Built Environment:** UPH – Cedar Rapids, in partnership with the MedQuarter has pocket parks on campus. In addition, we have several healing spaces for employees and patients. UPH-Cedar Rapids ensures ADA compliance and will be partnering with the ARC of East Central Iowa in utilizing their healthcare environment assessment. UPH-Cedar Rapids serves on the Homeless Systems Oversight Board for the county, Willis Dady Board and is contributing financially to the Waypoint capital project for homelessness housing.
- **Violence and Safety:** UPH-Cedar Rapids assesses patients for physical and sexual abuse. We have the blue dot program for patients to safely report personal safety concerns. UPH-Cedar Rapids has invested in upgrading security cameras, systems, lighting, and staff across the market. We will be furthering the roll-out of security alarms on badges for team members. UPH-Cedar Rapids also participates in the community Stand Up for Peace initiative. As part of this process, for patients that are victims of gun violence, we refer to Waypoint and Foundation 2 who provide resources and convey the message of non-retaliation.

About UnityPoint Health – Cedar Rapids

St. Luke's Hospital and Jones Regional Medical Center are two charitable hospital organizations that are part of UnityPoint Health – Cedar Rapids Region.

Our personal mission is to give the healthcare we'd like our loved ones to receive. We do this by combining the best technology, [innovation](#) and personal expertise, all while putting you first. We are proud of [our many accomplishments](#) and to be part of the amazing community of Cedar Rapids, which was recognized nationally for providing high-quality healthcare at a low cost.

St. Luke's has been a committed and involved member of the Cedar Rapids community since its founding more than 140 years ago. Part of that commitment is providing [financial assistance](#) to the underinsured and uninsured. We also offer a number of [services](#) to help our community live thriving, healthy lives.

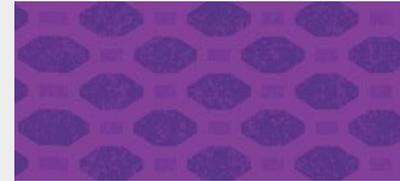


CHIP Project Team

UnityPoint Health – Cedar Rapids CHIP is a joint implementation strategy done in collaboration with community entities through Together! Healthy Linn Steering Committee with additional strategies through Jones County Public Health Workgroup in accordance with 501(r)(3).

UPH – Cedar Rapids Team

- UPH – Cedar Rapids Executive Sponsors:
 - Casey Greene, Market President
 - Eric Briesemeister, Rural President
- CHIP Project Manager:
 - Lori Weih, Director of Community Engagement
- Supporting Committee:
 - UPH – Cedar Rapids Community Impact and Engagement Committee



Summary of CHIP Development Activities

<p>Phase 3: Identify Strategic Issues</p> <p>November 1, 2024 Participants: 5 Steering Committee Members</p> <p>November 24, 2024 Participants: 7 Steering Committee Members</p> <p>January 30, 2025 Participants: 12 Steering Committee Members, 7 MAPP Core Team Members, and 2 LCPH Staff</p>	<p>Activity: Together! Healthy Linn Steering Committee reviewed data from the assessments conducted in the Community Health Assessment.</p> <p>Purpose: To identify the issues critical to the success of the local public health system.</p>
<p>Phase 3: Formulate Goals and Strategies</p> <p>Healthcare Access February 24, 2025 Participants: 16 community partners</p> <p>Supporting Mental Health March 4, 2025 Participants: 27 community partners</p> <p>Chronic Illness Prevention and Management March 6, 2025 Participants: 20 community partners</p>	<p>Activity: Community partners reviewed assessment data related to chronic illness prevention and management and identified a goal and strategies through small and large group discussion and multi-voting.</p> <p>Purpose: To identify long-term results associated with the priority areas and identify strategies the community can take to reach those goals.</p>

This plan was reviewed and approved by the UPH – Jones Regional Medical Center Board of Directors on November 3, 2025 and the UPH – St. Luke’s Hospital Board of Directors on December 17, 2025.

Contact Information



For questions or written comments related to the UnityPoint Health – Cedar Rapids Community Health Implementation Plan, please contact:

Lori Weih, MA

Director, Community Engagement

UnityPoint Health – Cedar Rapids

Lori.weih@unitypoint.org