



## 2018-2019 Community Health Needs Assessment and Implementation Plan

Research Conducted July, August, September 2018  
Assessment and Implementation Plan Publically Posted January 2019

# Beauregard Health System

## Mission – Vision – Values

### Our Mission

*What is our calling? Why do we exist?*

To improve the health and well-being of the people of Beauregard Parish and our surrounding communities.

### Our Vision

*Where are we going? What do we want to be? What will be our service?*

To be the premier provider of health and wellness services in our community and to be the primary connector to healthcare solutions wherever individuals and families are best served.

### Shared Core Values

*What really counts? What won't we compromise? What do we care about most?*

#### Service

The privilege of reaching out to meet the needs of others.

#### Reverence and Love for All of Life

Acknowledging that all of life is a gift from God.

#### Choosing Our Attitude

An awareness of our individual ownership of creating and maintaining a positive "can do" approach to our actions and activities.

#### Being There

Striving for equity and fairness in all relationships with special concern for those most in need and by treating each individual with personal service and respect.

#### Making Their Day

Making a commitment to Warm Welcomes, Magic Moments and Fond Farewells with each patient and guest encounter.

#### Joyfulness of Spirit and Having Fun

Recognizing that each day of service is a blessing and that our work is both a calling and a ministry and that our service and commitment to others and to one another is a joyful experience.

## History

In 1946, several of the town's leaders met to discuss building a hospital for the city. This hospital was to meet the growing needs of the citizens for surgical facilities and medical care involving hospital stays of a week or more. The group connected with the Louisiana Baptist Convention to establish Beauregard Memorial Baptist Hospital.

Beauregard Memorial Baptist Hospital opened its doors in 1950 with 28 beds. Only three physicians served the citizens of DeRidder at the time. The population of DeRidder and Beauregard Parish continued growing, and in 1959 the hospital had 63 beds. With additional construction being completed in 1968, bringing the total to 84 medical/surgical beds and four labor and delivery beds, the need for a new business office, boardroom and patient beds was on the horizon as the population continued to grow.

With this growth, advances in medical technology and increasingly stringent safety regulations imposed upon healthcare facilities, it became apparent in the early 1970s that a new and modern hospital was a necessity.

The Board of Trustees asked that the hospital be released from the Louisiana Baptist Convention so that other sources could be explored for funding the construction of a new hospital. The Louisiana Baptist Convention released the hospital to the existing Board of Trustees in November 1975. The word "Baptist" was deleted from the hospital name and the board expanded from 9 to 14 to include members from other denominations.

The Police Jury was asked to assist in securing funds for a new facility, and in April 1977 the citizens of Beauregard Parish voted a bond issue of \$3,680,000. Beauregard Memorial received \$3,180,000 of this, and a loan was secured from FHA for \$3,500,000. Construction started in July 1978 and was completed in early 1980.

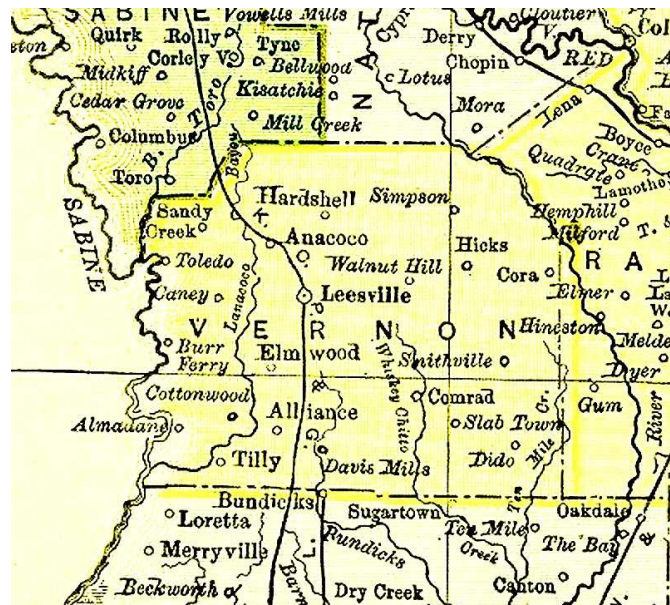
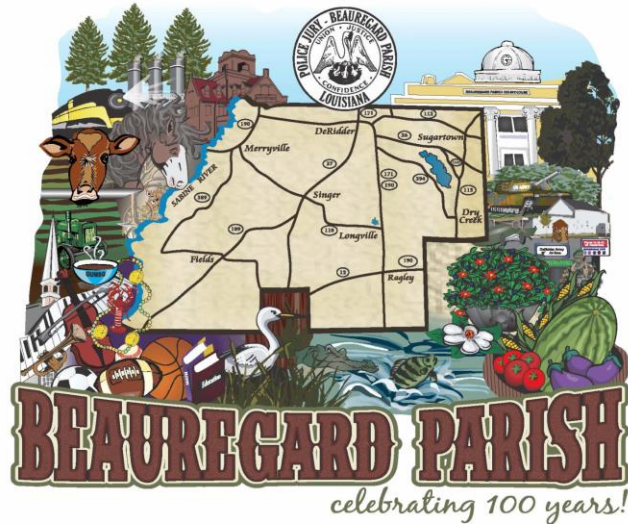
In 2018 the hospital's name changed to Beauregard Health System. The new name reflects the organization today and where the organization is going in the future. As we have maintained our mission to improve the health and well-being of the people in Beauregard Parish and surrounding communities, we have also evolved and strive to be the premier provider of health and wellness services in our community, as well as the primary connector to healthcare solutions wherever individuals and families are best served.

# Patient Volume for Fiscal Year 2017-2018

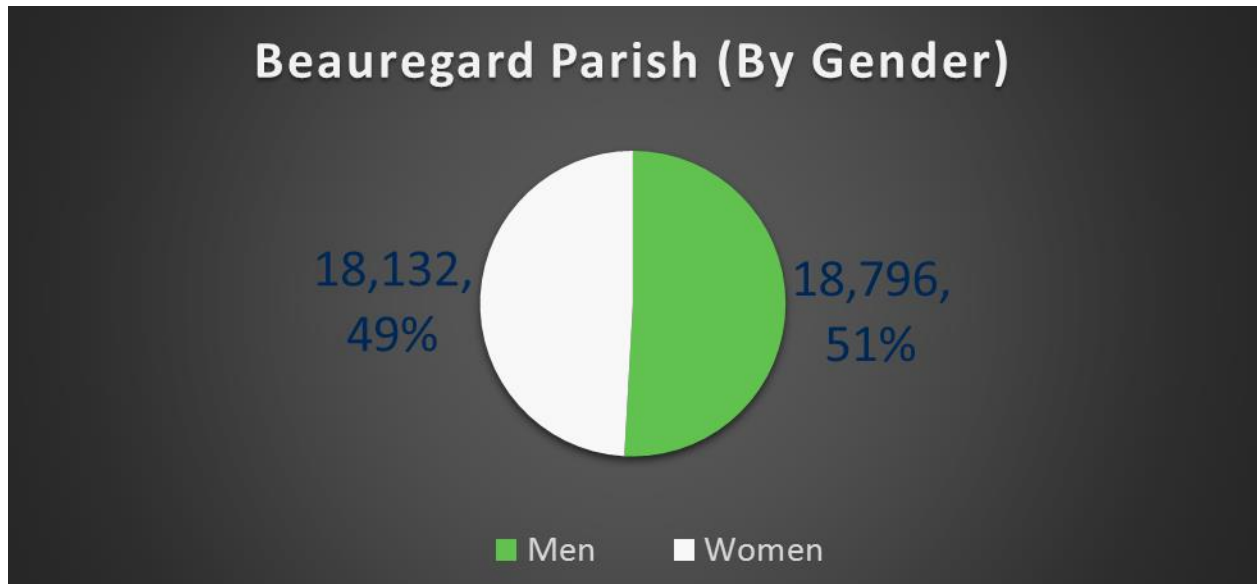
November 1<sup>st</sup>, 2017 – October 31<sup>st</sup>, 2018

|                                   |        |
|-----------------------------------|--------|
| Total Emergency Services          | 19,325 |
| Total Diagnostic Testing Services | 57,854 |
| Total Inpatient Services          | 3,081  |
| Total Urgent Care Services        | 8,009  |

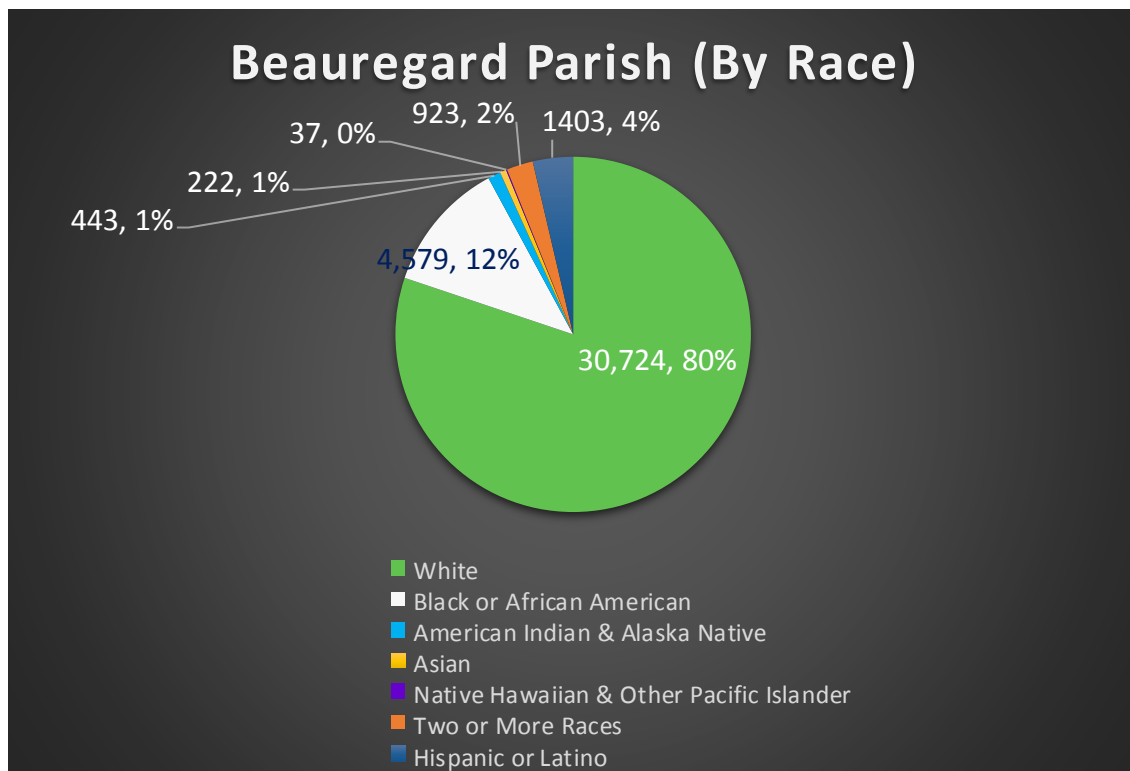
## Service Area



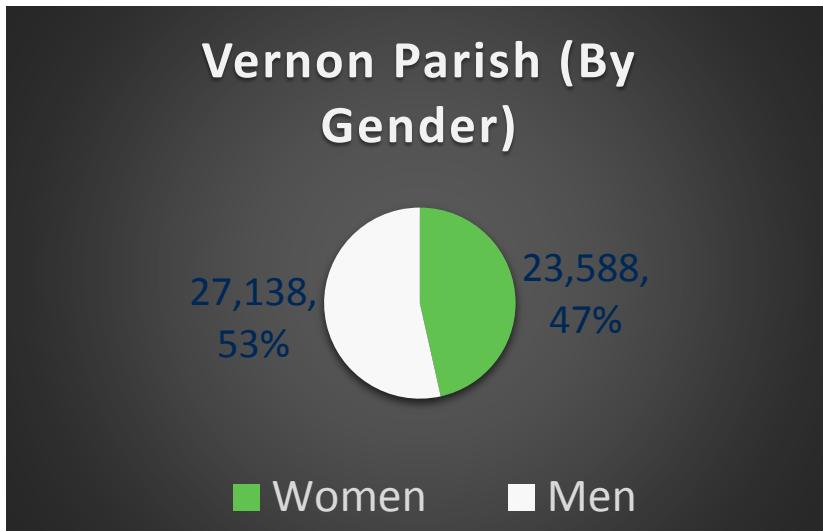
## Characteristics of the Area



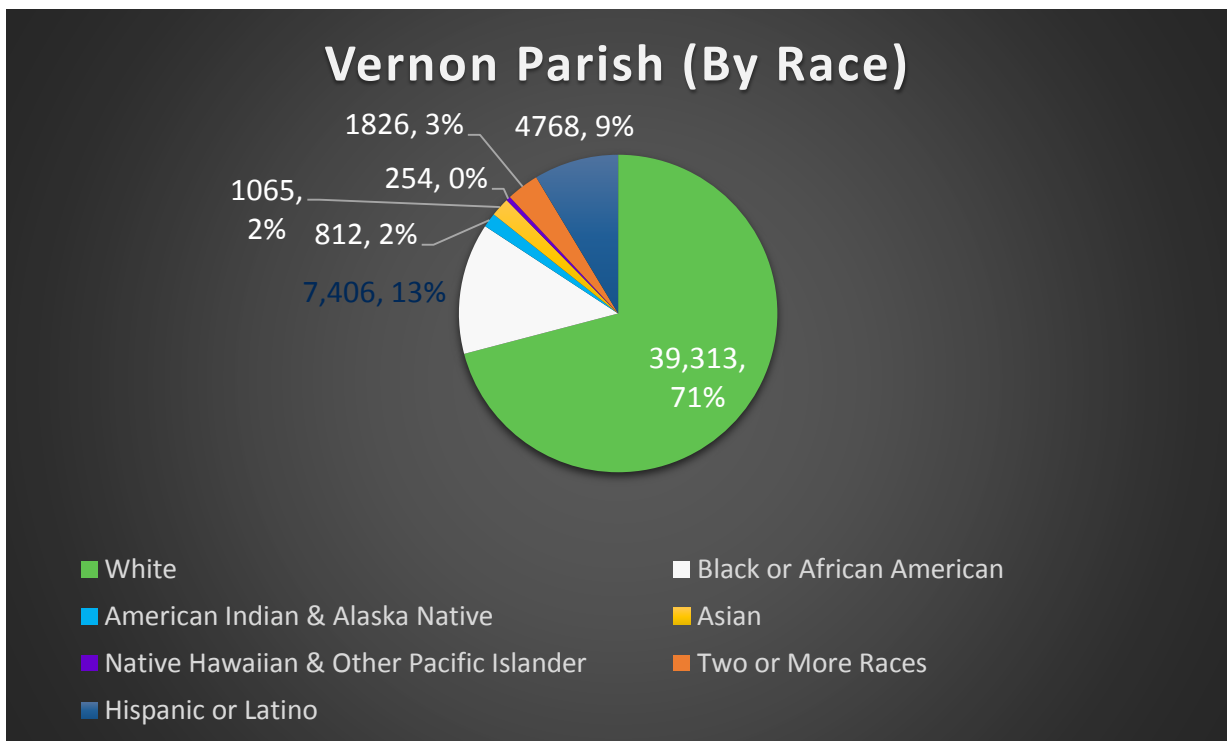
United States Census Bureau. (2017). *Quick Facts: Beauregard Parish, LA* [Data file]. Retrieved from <https://www.census.gov/quickfacts/beauregardparishlouisiana>



United States Census Bureau. (2017). *Quick Facts: Beauregard Parish, LA* [Data file]. Retrieved from <https://www.census.gov/quickfacts/beauregardparishlouisiana>

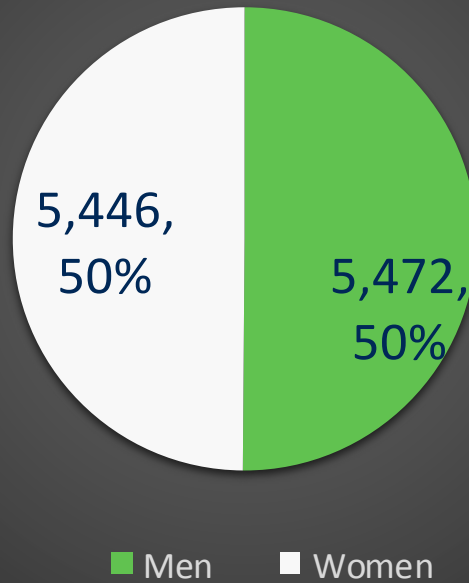


United States Census Bureau. (2017). *Quick Facts: Vernon Parish, LA* [Data file]. Retrieved from <https://www.census.gov/quickfacts/fact/table/vernonparishlouisiana/PST045217>



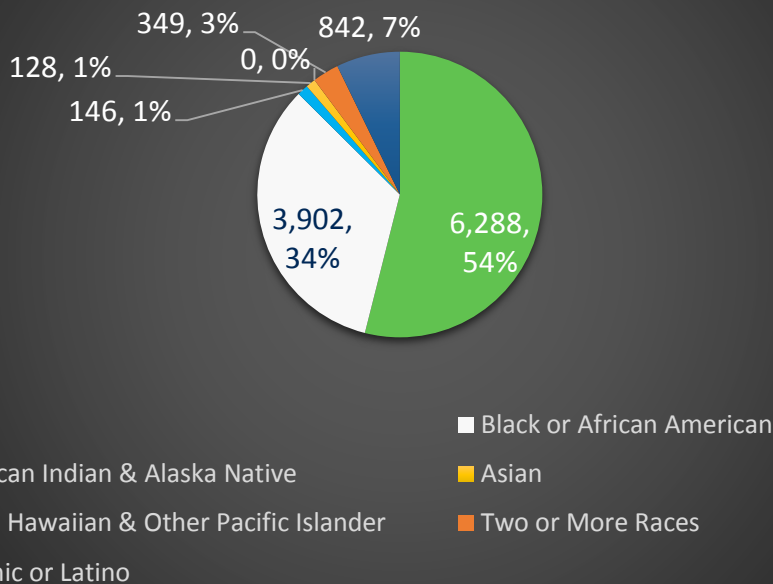
United States Census Bureau. (2017). *Quick Facts: Vernon Parish, LA* [Data file]. Retrieved from <https://www.census.gov/quickfacts/fact/table/vernonparishlouisiana/PST045217>

## DeRidder, Louisiana (By Gender)



United States Census Bureau. (2016). *Community Facts: DeRidder, Louisiana* [Data file]. Retrieved from <https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=CF>

## DeRidder, Louisiana (By Race)



United States Census Bureau. (2016). *Community Facts: DeRidder, Louisiana* [Data file]. Retrieved from <https://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=CF>

## Community Health Needs Assessment - Background

The Patient Protection & Affordable Care Act adds requirements that a nonprofit hospital must meet in order to maintain its 501 (c-3) tax-exempt status under the Internal Revenue Code. A hospital must conduct a community health needs assessment at least once every three years and faces financial penalties for failing to timely conduct the assessment. This process must take into account input from people representing the broad interests of the community served by the facility, including those with special knowledge or expertise in public health issues. In addition, the needs assessment process must be made widely available to the public.

## 2018 CHNA Research Program

The research design is the framework or blueprint for collecting and analyzing market information. Strategic Marketing & Research LLC conduct the various research efforts to understand the needs and concerns of key informant/stakeholders on behalf of Beauregard Health System.

- (1) Community Survey (primary and secondary service area) – BHS interviewed 400 random community residents. The primary objective of the research was to assess the impressions of BHS and discover the health needs and concerns of area residents.
- (2) Discussion Group with Hospital Stakeholders – BHS completed a focus group with citizens representing the broad interest of the community serviced by BHS. This group included those with special knowledge in public health issues.
- (3) Employer Research – BHS conducted a survey of 20 larger businesses operating within the primary service area.



## Additional Research Framework

### Hospital Administrator:

William F. Barrow, II, CEO Beauregard Health System

### Facilitators:

- A. Chad Fremin, Strategic Marketing and Research, LLC
- B. Kelli C. Brooks, Vice President Corporate Development, BHS

### Research Methodology:

- A. Community Survey – Sample of 400 Residents in the Primary and Secondary Service Area. Data collection – July 2018
- B. Employer Survey – Sample of 20 Employers in Beauregard Parish. Data collection – August 2018.
- C. Community Advisory Committee (Stakeholder) – Focus Group Study/Discussion – September 11, 2018.

### 2018 Community Advisory Committee: (Eleven Total)

- A. City Government Representative
- B. Local Public Health and State Government Representatives
- C. Health Care Provider
- D. Chamber of Commerce Representative
- E. Public Education
- F. Volunteer – Non Profit Organizations

### Medical Service Area:

- A. Primary Area: DeRidder – 70634; Dry Creek – 70637; Merryville – 70653; Rosepine – 70659; Singer – 70660
- B. Secondary Service Area: Evans 70639; Pitkin – 70656; Anacoco – 71403; Hornbeck – 71439; Leesville 71446;-71459; New Llano – 71461

## Purpose of Research Program

The overall purpose of the research effort was to provide an in-depth understanding of the health care needs, impressions and preferences and to compare the changes in the marketplace from the previous research studies. The major findings that emerge from this research serve as a foundation for the development of future strategic marketing and management strategies.

### Research Objectives

The specific research objectives are summarized below.

- To assess consumer/physician relationships in terms of physician utilization patterns (including outmigration) and the perceived need for additional physicians (by specialty).
- To define the level of familiarity and overall image maintained by major health care providers.
- To determine utilization patterns for emergency, outpatient and inpatient services, develop patient profiles, and to assess satisfaction levels for BHS and its competitors.
- To measure hospital preference levels and future usage intentions (i.e., which hospitals are preferred and why), as well as the strength of loyalty to each hospital.
- To evaluate the future consideration of BHS.
- To assess awareness for medical services provided by Beauregard Health System.
- To measure and evaluate changes in the market over time.
- To develop an understanding of the overall attitudes and perceptions among local employers with respect to their experiences with BHS.
- To identify the strengths and weaknesses of Beauregard Health System, from the employer's perspective.
- To determine the need for additional types of health care services and health-related information among area employers.
- To assess changes and/or trends among local employers, relative to obtaining health insurance and health care services for their employees.

## Action & Implementation Plan

The following represent guidelines and potential targets for improving the length and quality of life in the community, based on the CHNA assessment and Healthy People 2020 (U.S. Department of Health & Human Services). The main conclusions and supporting research are as follows:

### Preventive Healthcare

The critical role of preventive health services across the continuum of care must be recognized. Increasing the use of preventive health services in Beauregard parish should be a key priority. Beauregard Parish residents continue to achieve the following *Healthy People 2020* goals: blood pressure checks within 2 years; cholesterol checks within 5 years; children’s immunizations; and action taken to control blood pressure, mammograms with 2 years by women 40 and older.

On the other hand, Beauregard Parish residents did not meet the following *Health People 2020* goals: influenza and pneumonia vaccinations by residents 65 and older; colorectal cancer screening and understanding diabetes management.

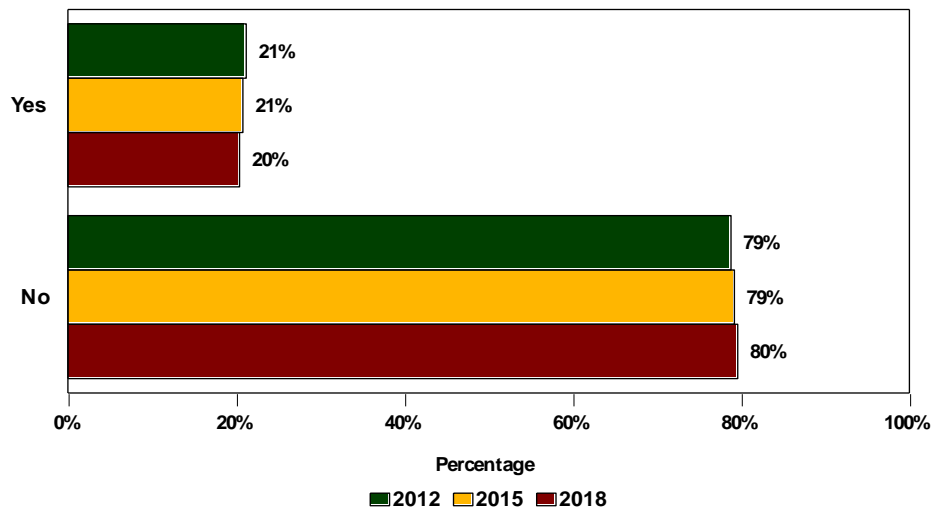
\*In 2015, Research indicated that BHS fell short of the Diabetes and Mammogram Healthy People 2020 Goal and focus group findings indicated the need for more community outreach. Beauregard Health System set goals and priorities to improve in these areas and the 2018 research indicates improvement in each area.

### 2018 Key Findings:

- Incidence of Diabetes - Two out of ten Beauregard residents have been diagnosed with diabetes (20%).

## Incidence of Diabetes

Has a doctor, nurse, or other health care professional ever told you that you had diabetes or high blood sugar? (Q3)

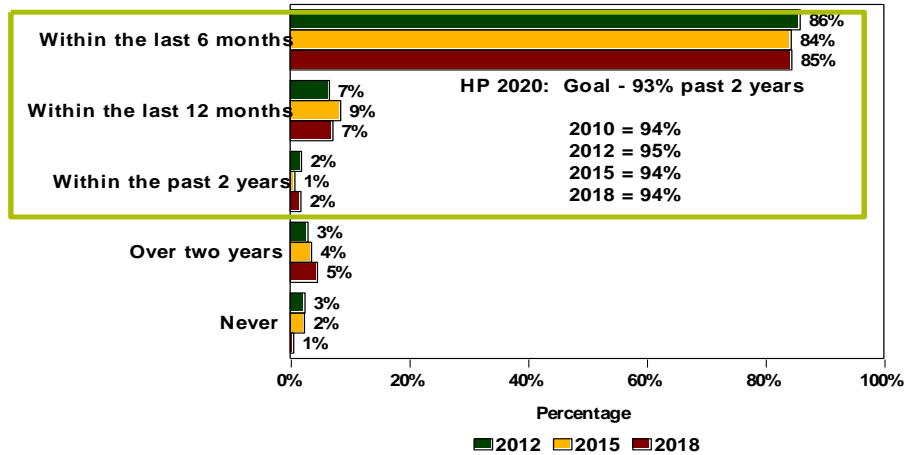


\*Denotes a significant difference from the prior period

- A high percentage of Beaugard residents have had blood pressure checks - High blood pressure places an individual at increased risk for a variety of serious health problems. This problem, however, can often be controlled through medication once it has been identified. It is encouraging to note that almost nine out of ten area residents have had their blood pressure checked within the last 6 months (85%). Furthermore, within the last two years, 94 percent of the Beaugard area residents have had their blood pressure checked (exceeds HP 2020 goal).

## Blood Pressure

About how long has it been since you last had your blood pressure checked? (Q4)

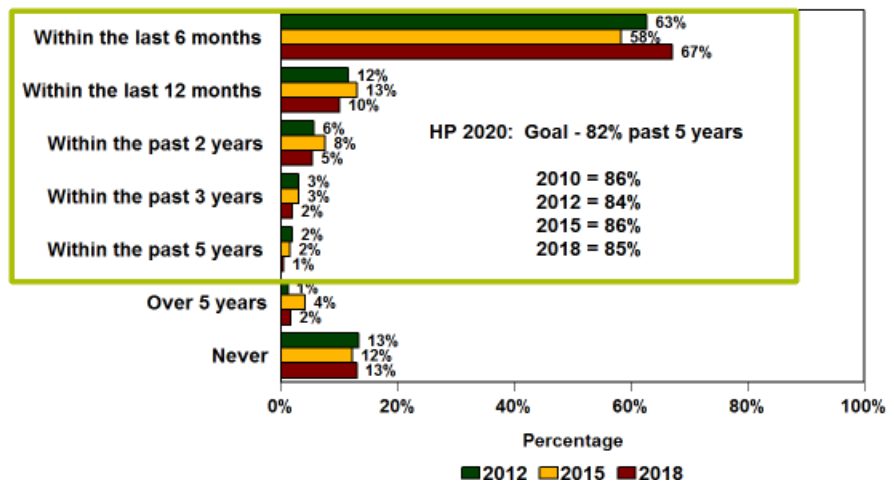


\*Denotes a significant difference from the prior period

- A high percentage of Beaugard residents have had cholesterol checks - High cholesterol levels also place an individual at increased risk for a variety of serious health problems. This, as with high blood pressure, cholesterol can be controlled through medication once it has been identified. Over two-thirds of Beaugard area residents have had their cholesterol level checked within the last 6 months (67%). Within the last five years, 85 percent of the respondents have had their cholesterol levels checked. (Exceeds HP 2020 goal).

## Cholesterol

Cholesterol is a fatty substance found in the blood. About how long has it been since you last had your blood cholesterol checked? (Q5)

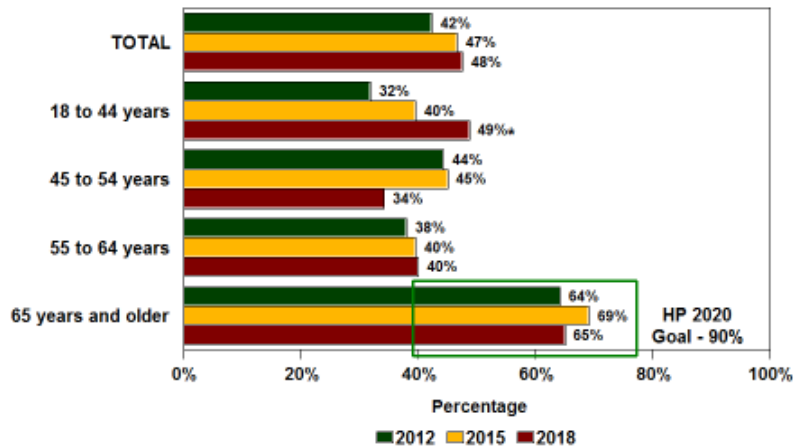


\*Denotes a significant difference from the prior period

- A high percentage of Beauregard residents 65 and older have **not** received their recommended vaccinations. The target for vaccination against influenza (annual) and pneumonia (lifetime) is 90 percent of non-institutionalized adults aged 65 years and older. Over six out of ten respondents who are 65 years and older receive the flu shot (65%). Six out of ten area residents 65 years and older have been vaccinated with the pneumonia booster (60%).

## Adult Immunizations

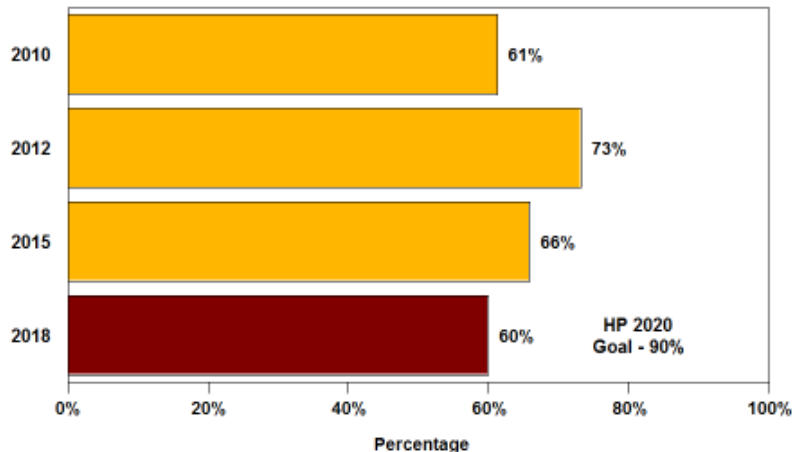
During the past 12 months, have you had a flu shot? (Q6)



\*Denotes a significantly difference from the prior period

## Adult Immunizations

[65 YEARS AND OLDER] Since you turned 65, have you received the pneumonia vaccination? (Q7)



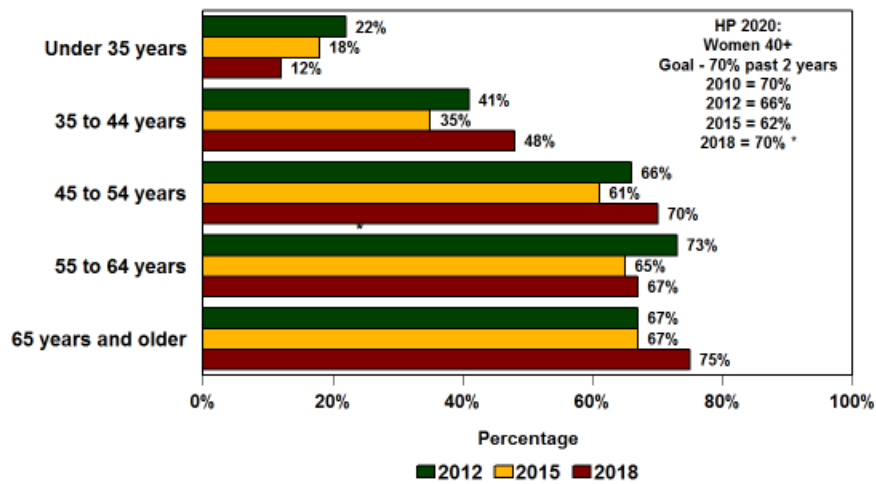
\*Denotes a significantly difference from the prior period

- Beauregard women 40 years and older have met the goal for regularly receiving Mammograms. Since early detection and treatment offer women the best chance for survival of breast cancer, it is very important that mammograms be performed regularly. Three-fourths of the surveyed Beauregard women have had a mammogram (76%). On the other hand, one-fourth of the area women have never had a mammogram (24%).

The Healthy People 2020 set a target for 70 percent of area women 40 years of age and older to have a mammogram within the last two years. Currently, Beauregard area respondents have achieved this goal.

## Mammogram

A Mammogram is an x-ray of the breast to look for cancer. How long has it been since you had your last breast x-ray, if ever? (Q8)

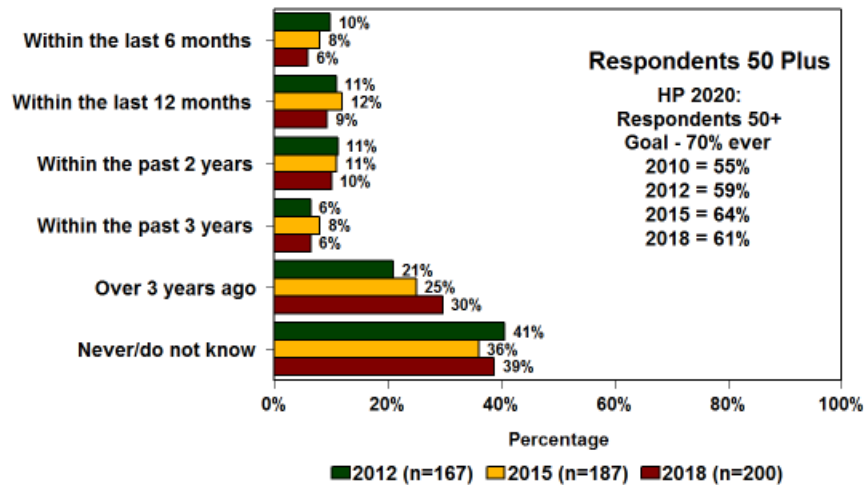


\*Denotes a significantly difference from the prior period  
 Base: Female respondents

- A high percentage of Beaugard residents 50 years and older have had a colorectal cancer screening. Healthy People 2020 set a 70 percent target as the goal for colorectal cancer screening among adults aged 50 years and older with a baseline of 52 percent. Within the last 12 months, over two out of ten Beaugard area residents 50 years and older have had a screen to test for colorectal cancer (15%). In total, about six out of ten area residents 50 years and older have previously had a colorectal cancer screening (61%). Currently, the results for the colorectal cancer screening fall short of the goal by 9 percent for the Beaugard area.

## Colorectal Cancer Screening

[RESPONDENTS 50 & OLDER] A colonoscopy is a standard test used to screen for colorectal cancer. Have you ever had a colonoscopy and, if so, when was the last one? (Q9)

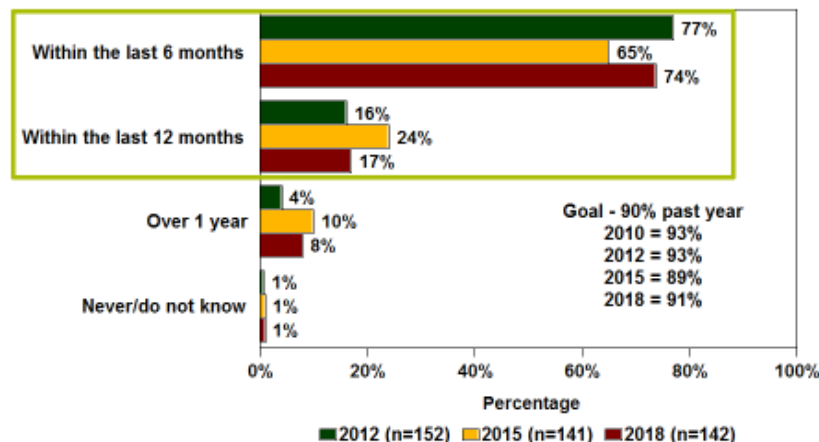


\*Denotes a significantly difference from the prior period

- Most recent MD visit for a Child over seven out of ten respondents have brought their children to a doctor within the last six months (74%) and over nine out of ten children have visited a physician in the past year (91%). However, 8 percent of the parents have waited more than a year since bringing their children to a doctor.

## Recent Doctor Visit - Child

About how long has it been since that child visited a doctor for a routine checkup? (Q14)



\*Denotes a significant difference from the prior period  
 Base: Respondents who have children in the household

- EMPLOYER Value of Health Related Programs/Services - Four of ten employers stress the importance of employees having access to prevention screenings (40%).
- STAKEHOLDERS promote increasing the number of health fairs & community, targeting low income families, seniors and young parents.

**BHS Goals & Priorities:**

- (1) Offer Diabetic Education to the community.**
- (2) Promote Breast Health Awareness and Mammogram Education.**
- (3) Expand Community and Employer Health Education efforts in conjunction with Wellness Works.**
- (4) Provide education on colorectal cancer screenings and the importance of vaccinations especially for the 65+ population at community and employer health fairs and community senior citizen days.**

**BHS Strategies - Initiatives:**

- Continue to grow Diabetes Education Classes conducted by the Hospital Dietitian on a monthly basis. Invite additional speakers to conduct classes, such as internal medicine physicians, exercise physiologist and wound care specialist. Offer free diabetic meals and recipes to the community and class when appropriate. Promote Diabetic health at community and employer health fairs.
- In 2017 Beauregard Health System invested in the Genius 3D Mammography system developed by Hologic, a worldwide leader in Women’s Health. BHS also promoted the new system and the importance of mammograms via an extensive marketing campaign including a digital media platform, print, billboard and radio ads. BHS saw a significant increase in scheduled mammograms and will continue to promote women’s health and breast health well into the future.
- Promote breast health awareness at community events and offer discounted mammograms during the month of October to the uninsured and underinsured.
- In 2017 Beauregard Health System partnered with Wellness Works to offer area employers more comprehensive preventative health and wellness programs, as well as assist with injury management. Wellness Works in conjunction with BHS Public Relations Department worked with area employers to set up numerous employer health fairs offering the following services: blood pressure screenings, glucose and cholesterol screenings, anemia screenings, pulmonary function screenings, Prostate-Specific Antigen (PSA) screenings, bone density screenings, body composition screenings, scheduling of wellness visits and flu shots.
- Provide community health education via community health fairs: Beauregard Parish Fair – Children’s Day (Pediatrician on site), Senior Day – free blood pressure checks and health education.
- Continue community health education by working with schools, churches, civic organizations and the like to provide on-site education and screenings as needed and requested.
- Internal influenza vaccination campaign to BHS associates – 96% of associates vaccinated during the 2017-2018 flu season.
- Internal influenza vaccination campaign for BHS patients – 94% of patients vaccinated during the 2017-2018 flu season.



## Lifestyle Choices

Area residents often do not adequately understand the direct or indirect impact their lifestyle choices have on their health. Beauregard residents need to be educated about how to make better lifestyle choices in order to improve their health and quality of life. More specifically, Beauregard residents need to be encouraged to quit smoking, get more exercise, and lose weight.

Beauregard Parish residents did not meet the *Healthy People 2020* goals for smoking and moderate exercising.

### Key Findings:

- **Too many Beauregard adults smoke.** The goal of Healthy People 2010 is to reduce cigarette smoking among adults 18 years and older to 12 percent. Currently, the incidence of cigarette smoking among Beauregard residents (28%) is slightly over the goal.
- **Beauregard residents are more physically active this year, however they did not quite meet the goal for moderate exercise.** The goal of Healthy People 2020 is to reduce the proportion of adults who engage in no leisure time activity to 20 percent. Currently, the physical activity level reported by Beauregard residents (no physical activity=19%) exceeds the goal. In addition, Healthy People 2020 would like to have 35 percent of adults engage in moderate physical activity for at least 30 minutes per occasion 5 or more days per week. The moderate physical activity for Beauregard residents is 29%, which is similar to the desired goal.

### **BHS Goals & Priorities:**

- (1) Promote Smoke Free Campus and Smoking Cessation.**
- (2) Promote BHS Fitness Center, Weekly Fitness Classes and Special Boot Camps.**
- (3) Promote Fitness Challenges to associates and community employers.**
- (4) Promote one-on-one nutritional counseling.**

### **BHS Strategies - Initiatives:**

- In conjunction with Beauregard Health System's commitment to provide a healthy and safe environment for associates, patients, visitors, volunteers, vendors, contractors, and physicians, BHS became a Tobacco-Free Campus in 2017.
- BHS provided Nicotine Replacement Therapy (NRT) to all associates who were smokers free of charge for a specified period of time.
- Continue to promote smoke free environment and the benefits of a smoke free environment.
- Offer Smoking Cessation classes to associates and the community.
- BHS offers free fitness memberships for all BHS associates. BHS fitness center is open to the public with 24 hour access. BHS fitness center offers personal trainers. BHS fitness center offers weekly fitness classes to the public, BHS fitness center offers special boot camps at least two times per year.
- Promote BHS fitness center and the importance of physical exercise via social media outlets.
- Continue to promote fitness 'challenges' in-house, in the community and with employers: Biggest Loser Contest (Amerisafe and BHS), 10,000 Steps Team Contest (BHS), etc.
- Provide one-on-one nutritional counseling to patients and the public when appropriate. Counseling provided by Beauregard Health System's Dietitian.

## Primary Health Concerns

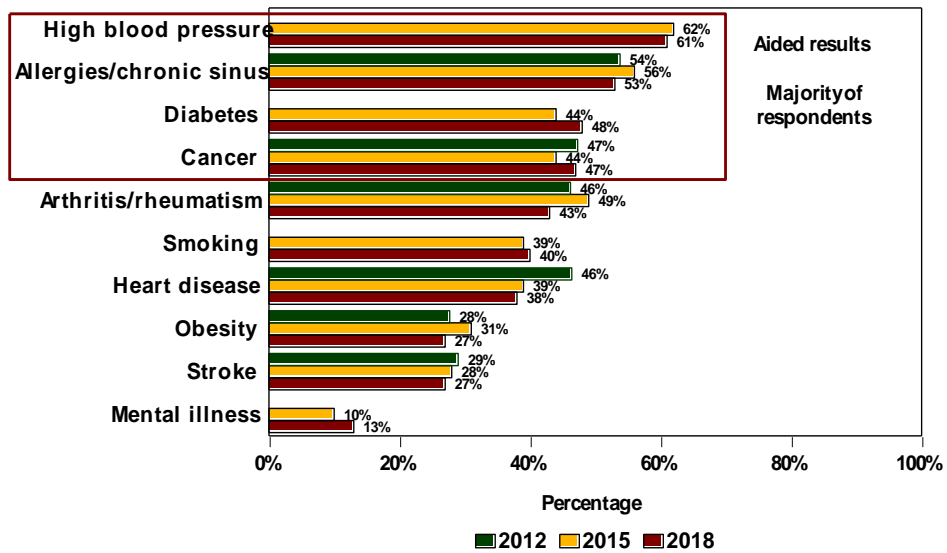
Heart disease and cancer in Beauregard and Vernon Parish remain the leading causes of death in the area. Community-wide efforts to reduce the risks for and promote the early detection of these diseases need to be continued. In addition, it is important to note almost half of all families deal with high blood pressure, allergies/arthritis and diabetes. Therefore, opportunities exist to educate residents on these health issues.

### Key Findings:

- Family History of Medical Problems – On an aided basis, approximately half of the area residents reported having a family history of high blood pressure (61%), allergies/chronic sinus problems (53%), diabetes (48%) and cancer (47%). The next tier of common illnesses consists of arthritis/rheumatism (43%), smoking (40%), and heart disease (38%).

## Family History of Medical Problems

Please tell me if you have a history of any of the following illnesses in your family(Q2) [AIDED]

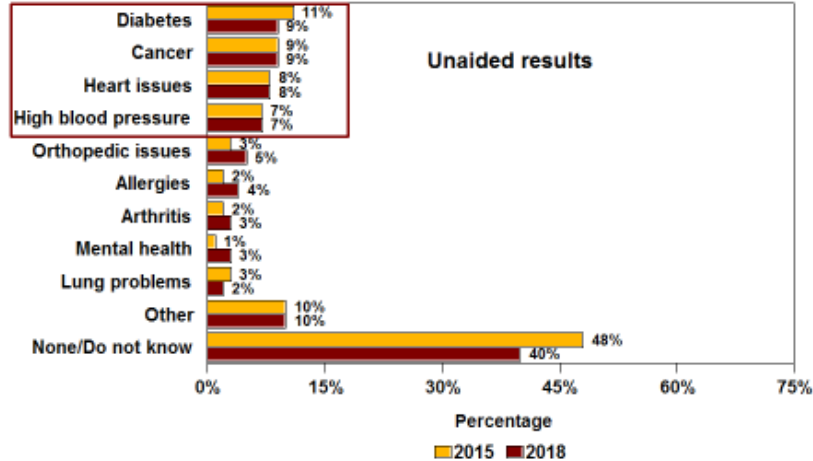


\*Denotes a significant difference from the prior period

- Most Important Medical Concern** – On an unaided basis, diabetes, cancer, heart disease/stroke, and high blood pressure are the most frequently mentioned health concerns of area residents. Approximately, one out of ten respondents, mentioned diabetes (9%), cancer (9%), heart disease/stroke (8%), or high blood pressure (7%) as the main health concern for their family.

## Physical Health

Personally, which medical problems are you most concerned about for yourself and your immediate family members? [UNAIDED]

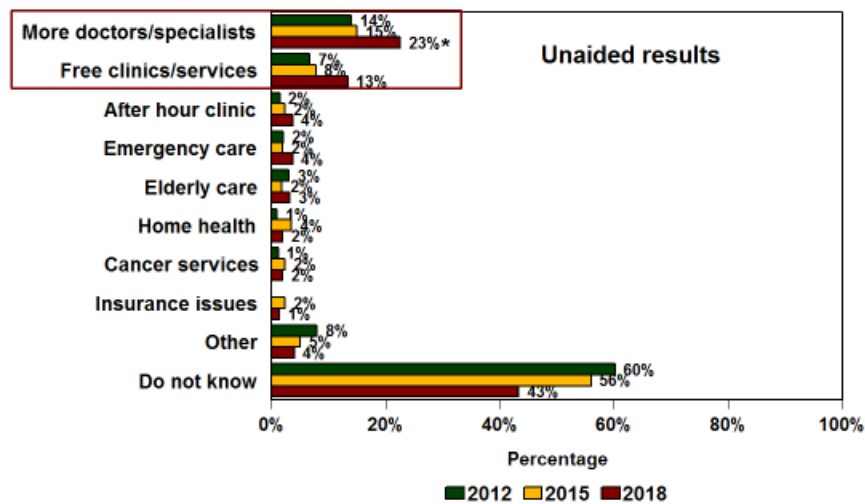


\*Denotes a significant difference from the prior period

- Unmet Local Health Needs** – Using an unaided method, about six out of ten respondents were able to identify a particular health care service needed in their community. Over two out of ten respondents believe that there is a need for more physicians and specialists (23%), significantly higher than in 2015. In addition, residents frequently mentioned free clinics/health care services (13% up 5%).

## Unmet Local Health Needs

Which type of health care service, if any, do you feel is most needed in your community? (Q11) [UNAIDED]

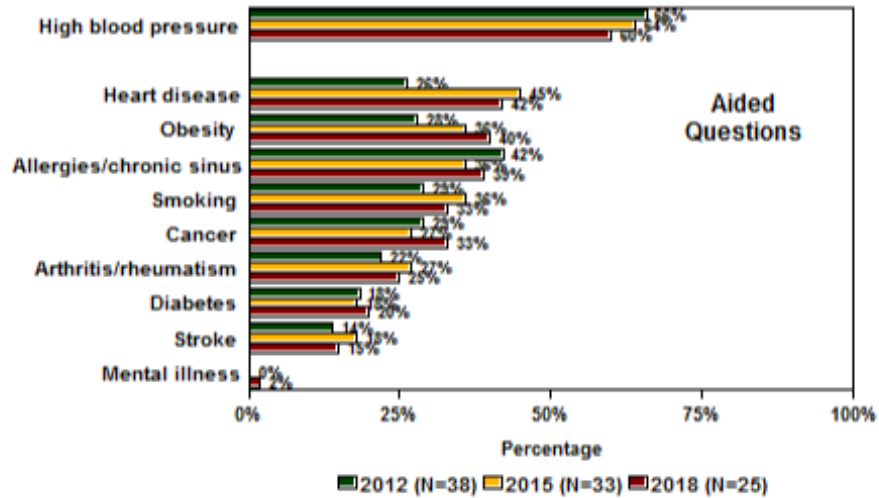


\*Denotes a significant difference from last period

- **EMPLOYER Family History Concerns** – On an aided basis, over half of the respondents reported having an employee dealing with high blood pressure (60%), while about four of ten respondents cited heart disease (42%), obesity (40%) and a history of allergies/chronic sinus problems (39%). Approximately, three out of ten expressed smoking (33%) and cancer (33%) concerns

## Major Health Concerns

I am going to read you a list of various health concerns, please tell me if each following is a major problem, minor problem or not a problem for your employ



- **EMPLOYER Most Important Medical Concern** – On an unaided basis, heart disease/stroke, influenza, and high blood pressure are the greatest health concerns of employees.

**BHS Goals & Priorities:**

- (1) Continue to provide education on high blood pressure and blood pressure checks at community and employer health fairs and events.
- (2) Continue to offer Diabetic Education to the community.
- (3) Continue clinical affiliation agreement and focus on producing high quality, coordinated care to the community.
- (4) Continue to explore and utilize telehealth services in identified specialty areas.

**BHS Strategies - Initiatives:**

- Partner with local employers to provide free blood pressure checks to employees as part of health fairs and/or events. Continue to provide free blood pressure checks and educational information to community members at community events.
- Continue to grow Diabetes Education Classes conducted by the Hospital Dietitian on a monthly basis. Invite additional speakers to conduct classes, such as Internal Medicine Physicians, exercise physiologist and wound care specialist. Offer free diabetic meals and recipes to the community and class when appropriate. Promote Diabetic health at community and employer health fairs.
- Partner with Wellness Works to increase the number of scheduled wellness appointments with patients to address health concerns such as high blood pressure and diabetes.
- Continue partnership with LCMHS. The clinical affiliation will deliver quality care more efficiently, leading to better patient outcomes. Additionally, BHS will work to be the premiere provider of health and wellness services in the community, and through the clinical affiliation with LCMHS, BHS will be the connector or 'gateway' to health care solutions where individuals and families are best served.
- Memorial Medical Group will provide subspecialist in the community where the need exists. (Oncology, Cardiology, Orthopedics, ENT).
- Beauregard Health System will continue partnership with a **telestroke** program that provides rapid assessment from a neurologist to help determine course of treatment for stroke patients. Beauregard Health System will also continue its partnership with a **telepsych** program that assists with placement of patients who are in need of mental health treatment.

## Physician Utilization Patterns

Beauregard Health’s effort to recruit additional physicians continues to have a positive impact on the local community. Indeed, most area residents have an established physician relationship, particularly for primary care, and are likely to use local doctors. Across the entire service area, DeRidder physicians are widely used for primary care, including family physicians, OB/GYNs, and internists.

On the other hand, the lowest use of DeRidder physicians includes: oncologist, cardiologist, and orthopedist. Given the higher utilization rates for orthopedics and cardiology, future physician recruitment or clinical affiliations should focus on these areas.

As previously stated, in order to be most effective in reducing future out-migration for hospital services, Beauregard Health System must actively support physicians in their efforts to retain local patients and attract new patients from surrounding areas. This is particularly important, as the decision to select a hospital for medical care is greatly influenced by the patient’s physician.

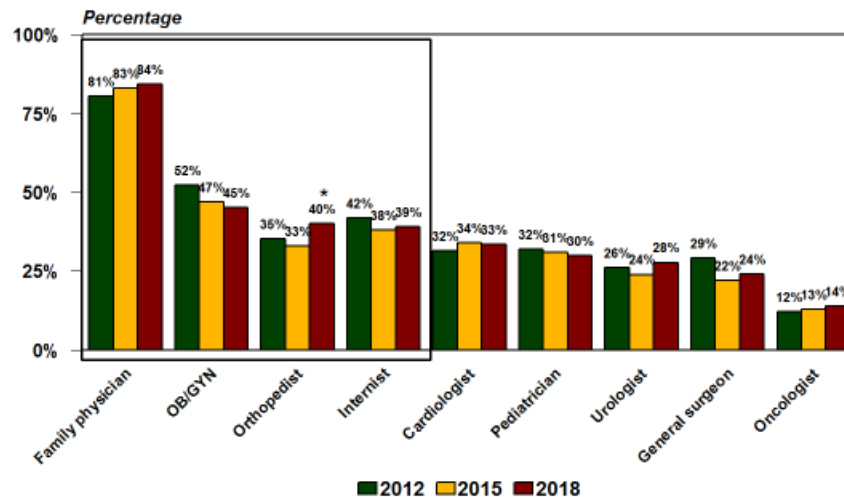
### Key Findings:

- **Physician Relationships** – In general, area residents are most likely to maintain established physician relationships with family physicians (84%). In addition, four out of ten area residents, maintain an established relationship with an OB/GYN (45%), orthopedist (40%) and internist (39%). Since the 2015 study, a significantly higher percentage of primary service area residents maintain established relationships with orthopedist physicians (33% in 2015 to 40% in 2018)

Furthermore, respondents have established relationships with the following other specialists: cardiologists (33%), pediatricians (30%); urologists (28%); and general surgeons (24%). Only about one out of ten maintain an established relationship with an oncologist (14%)

## Physician Utilization

*Do you or any member of your household use the following:*

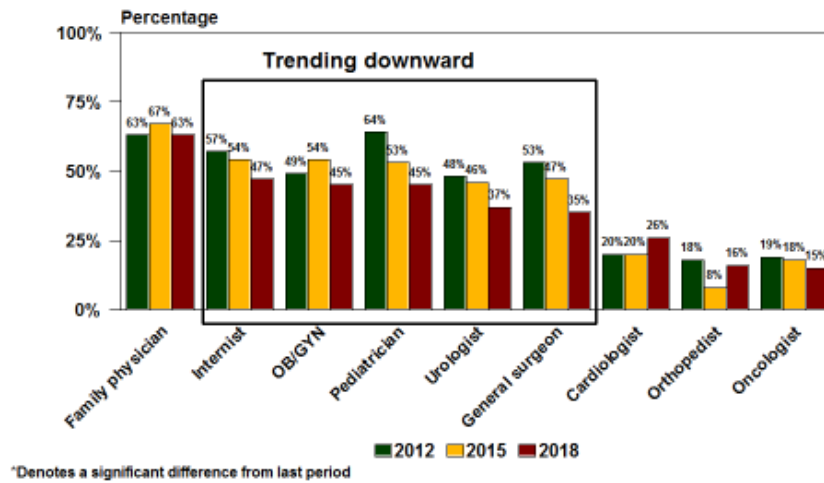


\*Denotes a significant difference from last period

- Location of Physician's Office** – Among Beauregard residents, the highest utilization rates for DeRidder physicians include family physicians (63%); Internist (47%), and OB/GYNs (45%). On the other hand, the lowest utilization rates for DeRidder physicians include: oncologist (15%); orthopedist (16%) and cardiologist (26%).

## Physician Relationships

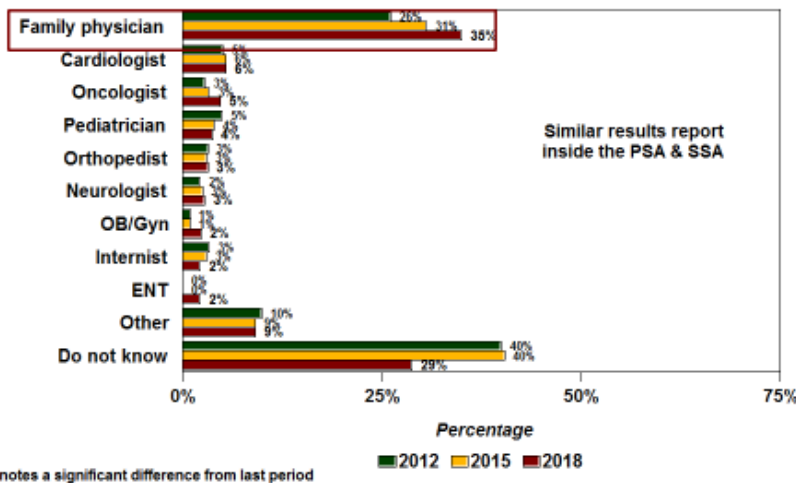
Beauregard Residents using a DeRidder Physician



- Most Needed Physicians** – Even though over 80 percent of households indicate using a family physician, approximately one-third, continue to believe that additional family physicians are most needed in the area (35%). Given the large percentage of households with an existing relationship, the demand for more general physicians could indicate issues with access and customer care. To a much smaller degree, respondents stated a need for additional cardiologists (6%) and oncologist (5%)

## Most Needed Physicians

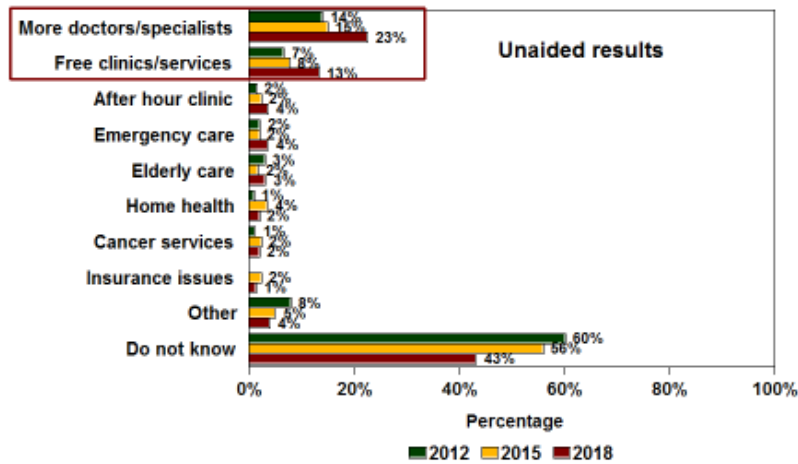
Which type of physician, if any, do you feel is most needed in your community? [UNAIDED]



- Unmet Local Health Needs – Using an unaided method, about six out of ten respondents were able to identify a particular health care service needed in their community (56%). Over one out of ten respondents believe that there is a need for more physicians and specialists (23%), significant higher than in 2015.

## Unmet Local Health Needs

Which type of health care service, if any, do you feel is most needed in your community? (Q11) [UNAIDED]



\*Denotes a significant difference from last period

- EMPLOYER Value of Health Related Programs/Services – A majority of employers would like to have special MD appointment times (52%) such as after hours, weekends or onsite for its employees.
- STAKEHOLDERS want to see an increase in the number of primary care physicians and pediatricians serving the community.



**BHS Goals & Priorities:**

- (1) Update the Medical Staff Recruitment and Retention Plan.
- (2) Work to recruit physicians and non-physician providers as recommended in the Recruitment and Retention Plan.
- (3) Work to reduce outmigration by providing and promoting greater access to primary care via Rural Health Clinics and mid-level providers.
- (3) Align with tertiary care providers or certain medial groups to fulfill the needs of specialty service lines.
- (4) Leverage telehealth services.

**BHS Strategies - Initiatives:**

- Beauregard Health System most recently recruited a Family Physician (in August 2018) to assist in providing greater access to primary care in the community.
- Four Rural Health Clinics in the community are now staffed with primary care physicians as well as mid-level providers to provide greater access to primary care in the community.
- Beauregard Health System will utilize mid-level providers in the rural health clinics and the direct care/urgent care center to provide greater access to primary care in the community.
- In 2018, Beauregard Health System and Lake Charles Memorial Health System entered into a clinical affiliation agreement in an effort to deliver quality care more efficiently and cost-effectively.
- Lake Charles Memorial Health System physicians will staff a local clinic providing Oncology, Orthopedics, Cardiology and ENT services on a weekly basis.
- Beauregard Health System will continue partnership with a **telestroke** program that provides rapid assessment from a neurologist to help determine course of treatment for stroke patients. Beauregard Health System will also continue its partnership with a **telepsych** program that assists with placement of patients who are in need of mental health treatment.

## Hospital Utilization Patterns

Consumers are the primary determinate of emergency care and diagnostic testing facility selection. In 2018, Beauregard Health is the most widely used facility for emergency care and diagnostics services within the service area. However, BHS continues to see erosion in with diagnostic testing services and outpatient surgeries.

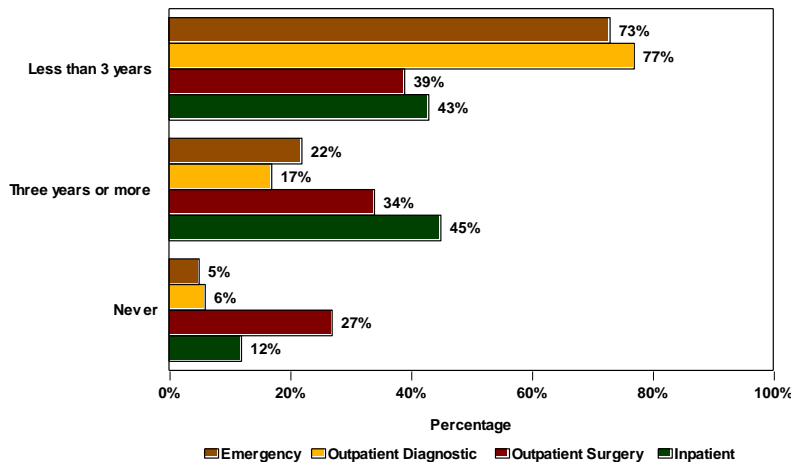
Patient satisfaction with emergency services seems to be improving. This is an important aspect as poor experiences in an emergency room can result in the deterioration of a hospital’s overall image, particularly in smaller markets, because residents tend to talk about their negative experiences with others. Enhancements and improvements in the delivery of emergency care needs to be key priority moving forward.

### Key Findings:

- Incidence of Use** – Residents who have recently used medical services are more likely to have utilized outpatient diagnostic or emergency services, than outpatient surgery or inpatient services. Within the last three years, almost eight out ten of the respondents have had diagnostic testing (77%) or emergency (73%) services. By comparison, about four out of ten respondents have used inpatient services (43%) or had outpatient surgery (39%).

## Hospital Utilization

Incidence of Use (Q32a, Q33a, Q34a & Q35a)

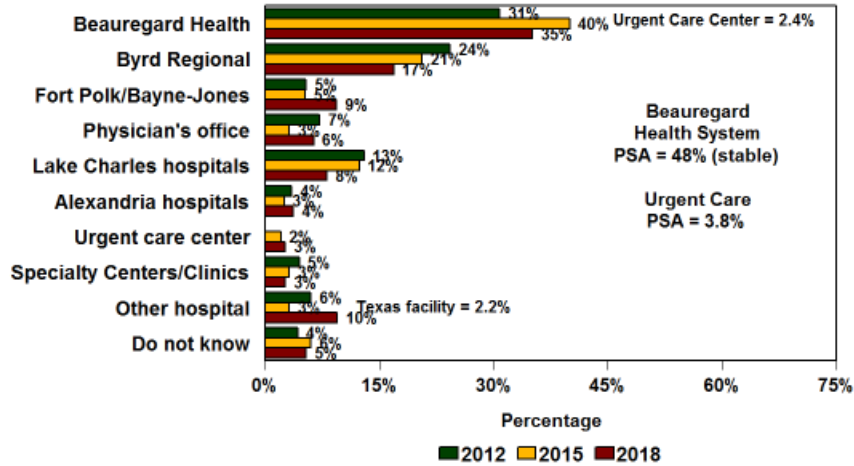


2018 Study

- **Emergency Provider Used** – Beauguard Health remains the market leader for emergency services (35%). Byrd Regional is the second strongest competitor, with an estimated market share of 17 percent.

## Emergency Provider Used

How long has it been since you or someone in your household was treated for an emergency at a hospital emergency room, walk-in clinic, or doctors' office? Which medical facility did you use? (Q23b)

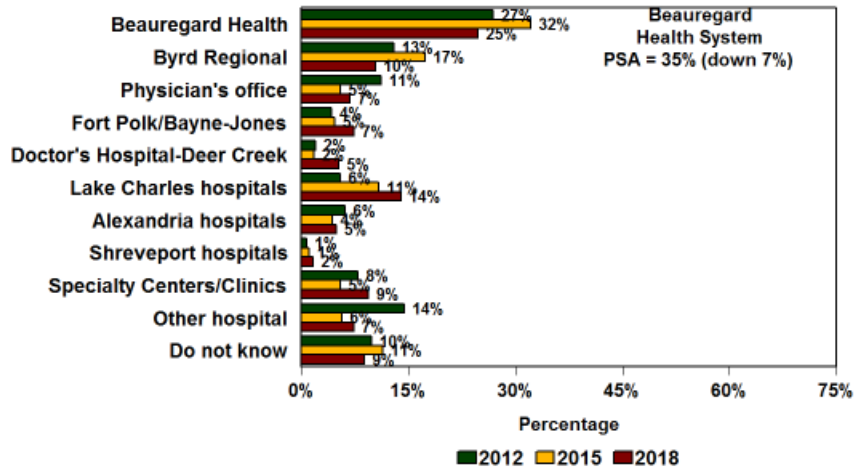


\*Denotes a significant difference from last period  
Base: Respondents who utilized emergency services within the last three years

- **Outpatient Diagnostic Provider Used** – The market is more competitive for outpatient diagnostic services. Beauguard Health System continues to be the market leader for outpatient diagnostic services (25%). Approximately one out of ten respondents use Byrd Regional (10%), or traveled to Lake Charles (14%) for diagnostic testing services

## Outpatient Diagnostic Provider Used

How long has it been since you or someone in your immediate household received OUTPATIENT diagnostic services such as lab tests, x-rays, MRIs, etc.? Which medical facility did you use? (Q24b)

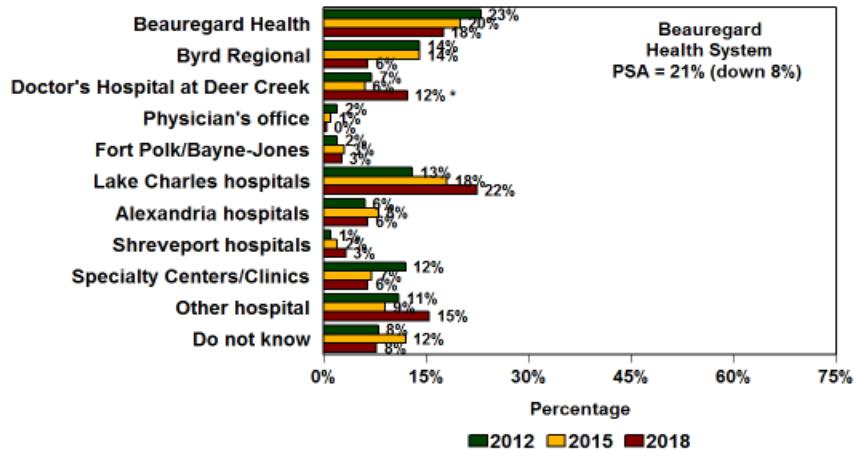


\*Denotes a significant difference from last period  
Base: Respondents who utilized outpatient diagnostic services within the last three years

- Outpatient Surgery Provider Used** – Hospitals continue to report growing outpatient surgery numbers inside the service area. Beauregard Health System (18%) is the market leader for outpatient surgery, but trending downward. In addition, about two out of ten respondents utilized a Lake Charles facility (22%), while approximately one out of ten residents most recently used Doctor’s Hospital at Deer Creek (12%)

## Outpatient Surgery Provider Used

How long has it been since you or someone in your immediate household had an OUTPATIENT SURGERY or a day surgery procedure? Which medical facility did you use? (Q25b)

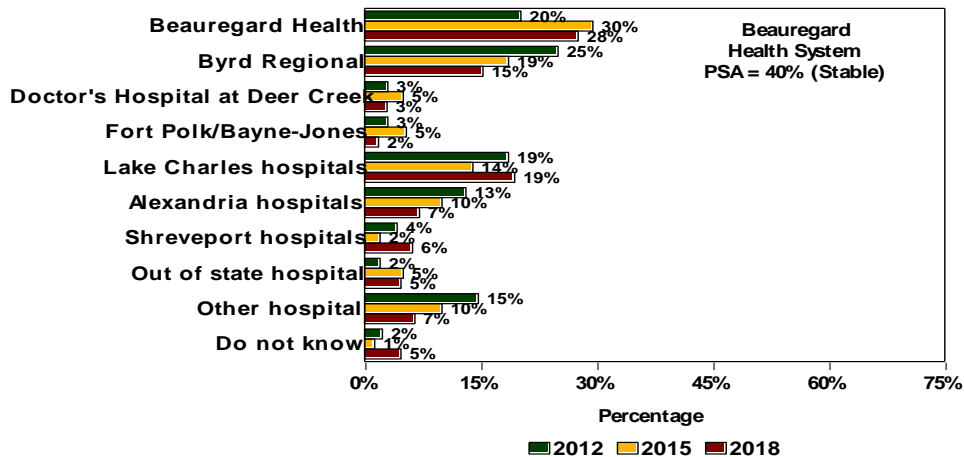


\*Denotes a significant difference from last period  
 Base: Respondents who utilized outpatient surgery within the last three years

- Inpatient Services Provider Used** –Beauregard Health System (28%) continues to maintain its market leadership position for inpatient services, while about one out of ten residents most recently utilized Byrd Regional (15%). Almost two out of ten inpatients traveled to a facility in Lake Charles (19%), while about one out of ten respondents traveled to a facility in Alexandria (7%) and Shreveport (6%)

## Inpatient Provider Used

How long has it been since you or someone in your household stayed overnight in a hospital? Which medical facility did you use? (Q26b)

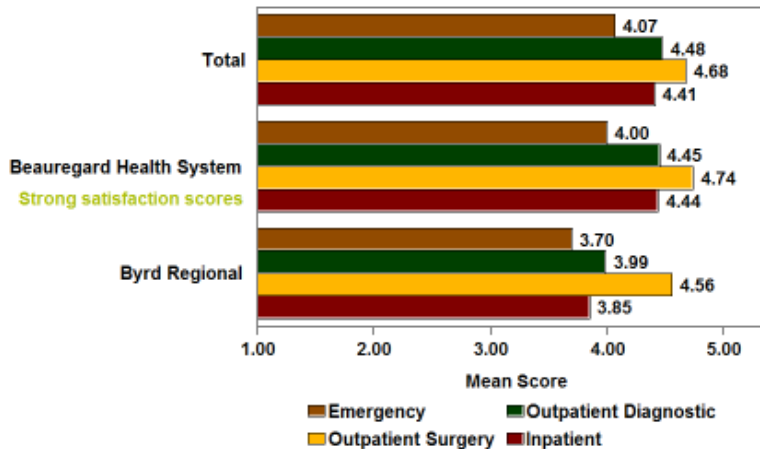


\*Denotes a significant difference from last period  
 Base: Respondents who utilized inpatient services within the last three years

- Satisfaction with Provider** – Beauregard Health System and Byrd Regional report similar patient satisfaction scores with respect to outpatient surgery (BHS=4.74 to Byrd 4.56). However, Beauregard Health System is outperforming Byrd Regional in the area of emergency care (4.00 to 3.70), outpatient diagnostic services (4.45 to 3.99), and inpatient services (4.44 to 3.85)

### Satisfaction With Provider

Overall, were you very satisfied, somewhat satisfied, neutral, somewhat dissatisfied, or very dissatisfied with the care you received? (Q23c, Q24c, Q25c, Q26c)

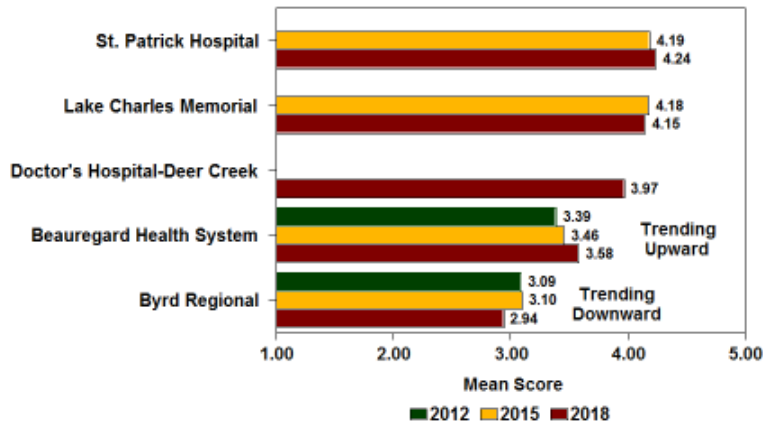


2018 Study  
Base: Respondents who used each hospital

- Impressions of Area Hospitals** – The image for Beauregard Health System (3.58) continues to be stronger than Byrd Regional (2.94). Furthermore, Beauregard Health System’s overall image rating continues to improve.

### Impressions of Area Hospitals

After I read the hospital name, please tell me if your opinion of the hospital is Very Positive, Somewhat Positive, Neutral, Somewhat Negative, or Very Negative. How do you feel about... (Q22a-e)

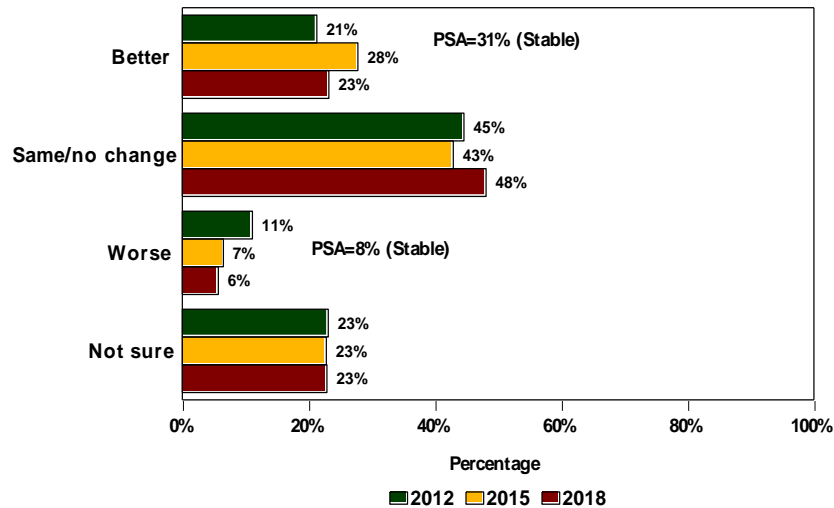


\*Denotes a significant difference from last period  
Base: Respondents who were familiar with each hospital

- **EMPLOYER Impressions of Area Hospitals** – Beauregard Health System (74%=very positive/somewhat positive) maintains the strongest positive image among employers. Approximately seven out of ten familiar respondents have a positive impression of Lake Charles Memorial (70%) and St. Patrick’s Hospital (67%). Byrd Regional Hospital maintains the weakest image of the four competitors (36%).
- **Change in BHS Impress** – Almost half of all respondents indicated that their impression of Beauregard Health System has remained about the same over the past twelve months (48%). On the other hand, over two out of ten respondents believe that the facility has gotten better (23%), while only a small percentage of market residents indicated that their opinion of Beauregard Health System has become worse over the past year (6% - trending downward).

**Change in Impressions of Beauregard Health System**

Would you say that your overall opinion of Beauregard Memorial has gotten better, stayed about the same, or gotten worse in the last 12 months? (Q30)

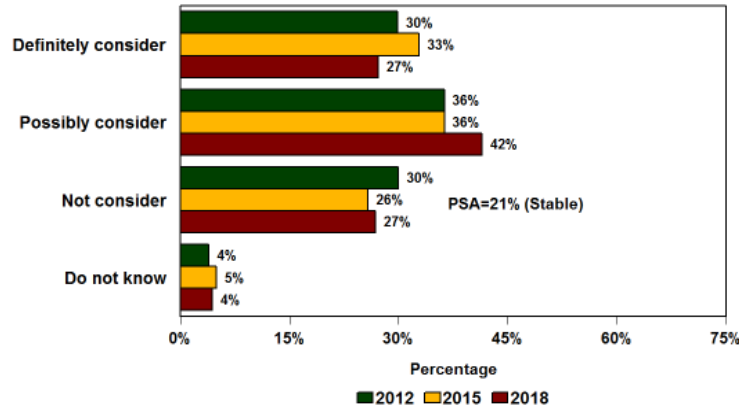


\*Denotes a significant difference from last period

- Future Consideration of BHS** – Approximately seven out of ten respondents would consider using Beauregard Health System for future medical services (definitely consider=27% and possibly consider=42%). To a lesser extent, three out of ten respondents are unlikely to consider using Beauregard Health System in the future (27%). Once again, a concern is the high percentage of respondents that would NOT consider Beauregard Health System in the future.

## Future Consideration

In general, if you or any member of your family needed to use a hospital in the future, would you definitely consider, possibly consider, or not consider using Beauregard Memorial Hospital? (Q29)



\*Denotes a significant difference from last period

**BHS Goals & Priorities:**

- (1) Continue to enhance the quality of care provided in the emergency room, with a focus on wait times, relationship with emergency physician provider and patient satisfaction.**
- (2) Change centralized scheduling to de-centralize scheduling to provide a better patient experience in outpatient and diagnostic testing areas.**

**BHS Strategies - Initiatives:**

- Continue to improve wait times in the ER by monitoring daily, improving efficiencies in triage, and providing mid-level providers during peak times to assist with high volume.
- Continue to monitor and improve new ER provider relationship. Conduct meetings as needed with ER Physician Group Owner, work closely with Emergency Department Medical Director to improve relationship with all ER physicians and with ancillary staff (i.e. lab and radiology), share patient satisfaction results with ER physician group and work together on plans for improvement in specified areas.
- Offer point-of-service registration for lab and radiology to improve the patient experience.
- Improve the Central Scheduling Process to reduce lost calls and patient frustration. (Patients will leave physician office with scheduled appointments for mammograms, etc..... instead of having the patient call to schedule appointments after they leave the physician office.)
- Leverage clinical affiliation with LCMHS to reduce outmigration in ambulatory surgery services.
- Promote Beauregard Health System's impressive arsenal of outpatient diagnostic equipment, technology and knowledgeable staff via social media marketing and other outlets. (3-D Mammogram, Digital X-Ray, New MRI, New Bone Density, etc.)



## BHS Urgent Care Center

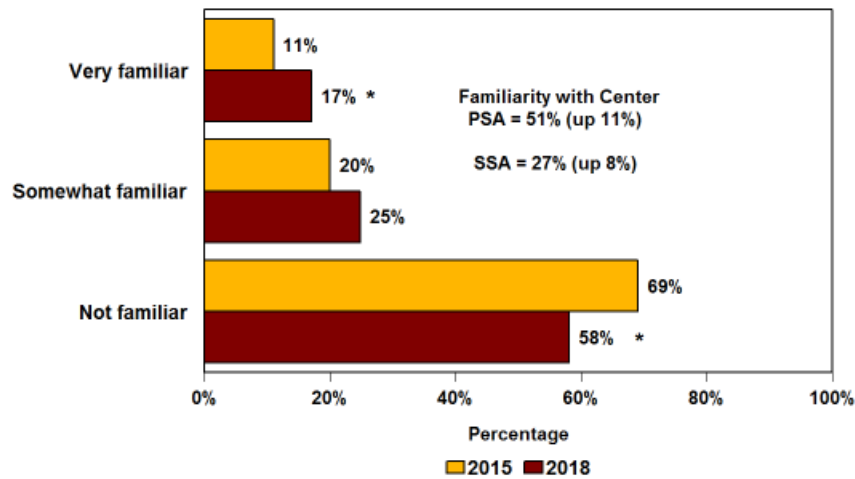
Beauregard Health System has done a tremendous job building awareness for its Urgent Care Center, as a majority of primary service area respondents are now familiar with the facility. In addition, positive impressions of the center are increasing. Finally, the utilization of the urgent care center is increasing and users have indicated a positive experience accessing the facility. Two improvement recommendations include: greater physician access and expanded hours of operation.

### Key Findings:

- Aided Awareness for BHS Urgent Care Center – In 2018, approximately four out of ten respondents are familiar with the Urgent Care Center (42%, up 11%). Furthermore, almost two out of ten residents are very familiar with the facility (17%) which represents a significant increase in 2015 (up 6%). Within the primary service area, familiarity with the Urgent Care Center is significantly higher (40% in 2015 up to 51% in 2018).

### Level of Familiarity

Are you very familiar, somewhat familiar or not familiar with the Beauregard Urgent Care Center? (q28a)

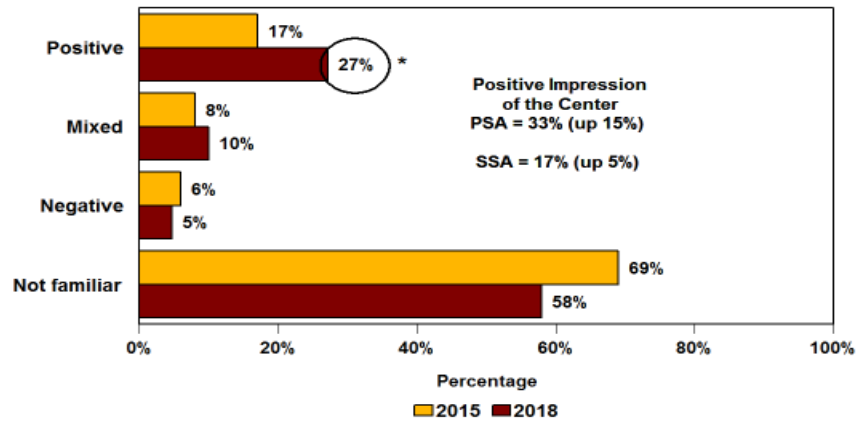


\*Denotes a significant difference from last period

- [Impression of BHS Urgent Care Center](#) – Almost three out of ten area residents maintain a positive impression the Beauregard’s Urgent Care Center (27%). Furthermore, only five percent of survey participants had a negative impression of the facility. These results depict a solid market position that is well equipped for growth. Within the primary service area, over three out of ten households have a positive impression of the Urgent Care Center (33%), which is significantly higher than the previous study (up 15%). In addition, the number of respondents reporting a negative perception was cut in half (10% in 2015 and 5% in 2018).

## Facility Image

Please tell me if your opinion of Beauregard Urgent Care Center is very positive, somewhat positive, mixed, somewhat negative, or very negative? (Q28b)

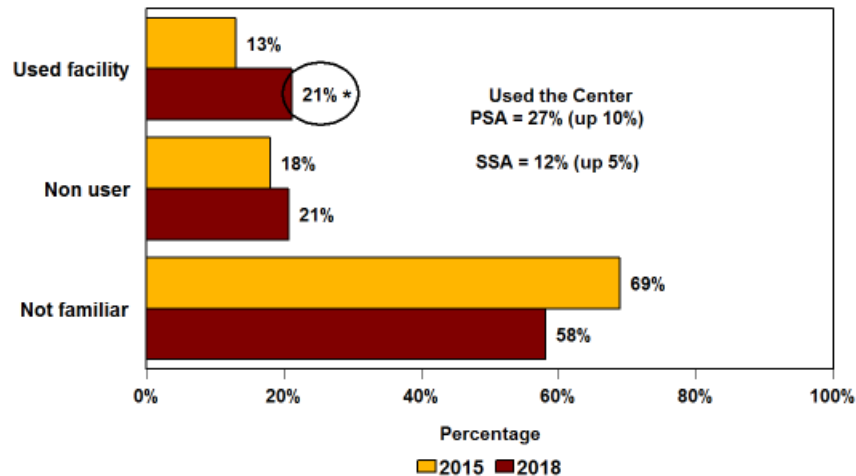


\*Denotes a significant difference from last period

- [Utilization of the BHS Urgent Care Center](#) – Over two out of ten area residents have utilized the services provided by the Beauregard’s Urgent Care Center (21%). This represents a significant increase from 2015. Within the primary service area, almost three out of ten households have used the Urgent Care Center (27%)

## Rate of Utilization

Have you or someone living in your household USED the new Beauregard Urgent Care Center? (Q28c)



\*Denotes a significant difference from last period

- Experience using the BHS Urgent Care Center– Among previous users of the urgent care center, almost eighty percent had a positive impression of the facility (78%). This equates high levels of satisfaction with the experience
- Recommendations for Improvement – Among respondents familiar with the Urgent Care Center about four out of ten respondents provided improvement suggestions (42%). The mostly frequently mentioned recommendations include: greater physician access (n=17) and expanded hours of operation (n=16).

**BHS Goals & Priorities:**

**(1) Continue to build awareness and utilization for the Urgent Care Center/ Walk-in Clinic.**

**(2) Position clinic for continued success in a competitive environment.**

**BHS Strategies - Initiatives:**

- Provide consistent hours of operation with local, reliable mid-level providers.
- Promote hours of operation and services offered to the general public to generate greater awareness.
- Monitor and report user volume.



## Number of Beds

Beauregard Health System currently houses 49 patient beds.

## Service Lines

As we have maintained our mission to improve the health and well-being of the people in Beauregard Parish and surrounding communities, we have also evolved and strive to be the premier provider of health and wellness services in our community, as well as the primary connector to healthcare solutions wherever individuals and families are best served. The service lines we offer include:

- Cardiology
- Chemotherapy
- Emergency Department
- Fitness Center
- Home Health
- Hospitalists
- Imaging
- Intensive Care Unit
- Laboratory
- Maternal-Child Services
- Inpatient Services
- Nutritional Services
- Pediatrics
- Rehabilitation
- Surgery Services
- Urgent Care
- WellnessWorks
- Wound Care & Lymphedema

## Fitness Center

The Fitness Center is located in the hospital's northeast wing of the third floor and is available for use by all members, 24 hours a day, 7 days a week. Individualized training sessions and group fitness classes are available.

## Diabetes and Nutrition Education Class

Diabetes and Nutrition Education Classes are held monthly for the community. Topics vary each month, focusing on the importance of maintaining a healthy lifestyle while living with diabetes. The classes are hosted by Missy Hennigan, MS, RD, LDN, with guest speakers periodically. There is no cost to attend the class. A diabetic-friendly lunch is provided. Over the past 3 years, nearly 1,000 attendees have been present at Beauregard Health System's monthly Diabetes and Nutrition Education Classes.

## Health Fairs

Beauregard Health System is committed to promoting a healthy lifestyle to members in Beauregard, Vernon, and surrounding parishes. Every year, Beauregard Health System is pleased to partner with local businesses and organizations to participate in health fairs for our community. The businesses and organizations we partner with to provide these health fairs can be found below, along with the diagnostic screenings provided.

- Amerisafe
- Beauregard Council on Aging
- Beauregard Electric (BECI)
- Beauregard Parish Fair Association
- Beauregard Parish Police Jury
- Beauregard Parish School Board
- Chamber of Commerce
- City of DeRidder
- DeRidder Fire Department
- DeRidder Junior Women's League
- Deridder Police Department
- Jay's Carpet One Home and Floor
- Merryville Police Department
- Town of Merryville (Town Hall)
- Walmart Supercenter – DeRidder

Services provided:

- Blood pressure screenings
- Cholesterol screenings
- Bone density screenings
- Cardiopulmonary screenings
- BMI and body composition screenings
- PSAs

## Indigent/Charity Care and Financial Assistance

Beauregard Health System (BHS), is committed to meeting the healthcare needs of the communities we serve. Emergency medical care is provided to everyone, regardless of ability to pay or lack of insurance coverage. Financial assistance is available to help eligible patients who cannot afford to pay for their essential healthcare services.

Our financial counselor can help patients understand if they qualify for Medicaid or other low-income programs offered by the State. Once it is determined a patient does not qualify, the hospital will assist with the BHS Charity Care and Financial Assistance Program.

Patients may be eligible for help with medical bills if they are uninsured and have a low income. Participation in the program is voluntary and based on household income. Eligible families that have incomes below 200 percent of the Federal Poverty Level will receive a 100 percent charity income. If the household income is between 200 to 300 percent of the Federal Poverty Level, a sliding scale will be used to calculate the reduction of charity income. Household income at or greater than 300 percent of the Federal Poverty Level qualifies for a 52 percent reduction of charity income.

The following documents are required to apply for the Indigent/Charity Care program listed above:

- Proof of income for the last 30 days (pay stubs, Social Security award letter, etc.).
- Last filed federal income tax return.
- Copy of a Medicaid denial letter.

If patients need help paying BHS hospital bills, they may contact the Financial Counselor at [337.462.7342](tel:337.462.7342) for an application.

| Year of Service | Number of Charity Care Cases | Amount of Charity Care provided to the community |
|-----------------|------------------------------|--|
| 2016            | 52                           | \$150,091.14                                     |
| 2017            | 28                           | \$32,116.75                                      |
| 2018            | 24                           | \$38,379.83                                      |

## Partnerships and Affiliations

### Beauregard Health System and Lake Charles Memorial Health System Announce Affiliation


Beauregard Health System and Lake Charles Memorial Health System are pleased to announce the parties have entered into a clinical affiliation agreement. This agreement will create a partnership that focuses on producing high quality, coordinated care to the residents of Southwest Louisiana that will offer patients more comprehensive care. As health care dynamics continue to change in the industry, this affiliation will strategically position both health systems for continued success. Integrated health systems that can deliver quality care more efficiently and cost-effectively, leading to better patient outcomes, will see increased stability and improved services for patients.

“As health reform evolves, health systems and providers are developing more regional strategies and this affiliation between Beauregard Health System and Lake Charles Memorial Health System is a step in the right direction,” says William F. “Bud” Barrow, II, Chief Executive Officer of Beauregard Health System. “Our vision is to be the premier provider of health and wellness services in our community and to be the primary connector or ‘gateway’ to health care solutions wherever individuals and families are best served. This affiliation represents the results of a careful and deliberate process to ensure the best strategic direction forward.”

The success of Beauregard Health System and Lake Charles Memorial Health System lies in the shared mindset that health care is best delivered on a local level. The systems have complimentary missions, visions and values and share a passion to improve the health of the people and communities they have been called to serve. While both have clear strengths in their markets, the affiliation is a good fit and will enhance services, programs and access to care.

"This affiliation makes sense on so many levels. Lake Charles Memorial and Beauregard Health System are both not-for-profit, community-owned health systems. Every dollar made is reinvested back into our hospitals to bring the best technology, physicians, and facilities to the respective communities we serve," says Larry Graham, President and Chief Executive Officer of Lake Charles Memorial. "It makes good business and patient care sense for us to coordinate and share resources, saving money and streamlining some services and operations."

This clinical affiliation is not a purchase or an acquisition. Each organization's ownership and governance structure will remain as separate local boards of trustees. The affiliation will enhance the economies of scale for both organizations to allow for sharing of best practices and cost savings.

| <br><b>ACTIVE STAFF PHYSICIANS</b><br><b>With Admitting Privileges at BHS</b>  |  |   |   |   |
|---|--|---|---|---|
| Edwin Bonilla, MD – Family Practice<br>David Brown, MD – General Surgeon<br>Jeffrey Dobbins, MD- Family Practice<br>Randall Duplechain, MD – Family Practice<br>Steven Farquhar, MD – Internal Medicine<br>Fernando Garcia, MD – Internal Medicine<br>Chris Granger, MD – Family Practice<br>Michael Hsu, MD – General Surgery<br>Ernesto Kufoy, MD – Internal Medicine<br>Chuen Kwok, MD – Urologist<br>Jennifer R. McCann, MD- OB/GYN<br>Mahesh Pandya, MD – Internal Medicine<br>Michael Perkins, MD – Pediatrics<br>James R. Rudd, Jr., MD - OB/GYN<br>James R. Rudd, Sr., MD - OB/GYN<br>Arnette Scavella, MD – Pediatrics<br>Jonathon Sossamon, MD – Family Practice<br>Robin L. Yue, MD – Cardiology | <b>Hospitalists</b><br><b>(contracted through Concord Group)</b><br>Gabriel Agbanyim, MD<br>David Aymond, MD<br>Mohammed S. Aziz, DO<br>Fernando Garcia, MD<br>Richard Hilliard, DO<br>David Longmire, MD<br>Kamal Masri, MD<br>Raman Saharan, MD<br>Sreenivas Tadikonda, MD<br>Herman Toliver, MD<br>Joseph Walters, MD<br>Amite Warke, MD  | <b>ER Physicians</b><br><b>(contracted through Concord Group)</b><br>David Abdehou, MD<br>Jennifer Bakar, MD<br>Foad Farahmand, MD<br>Joseph Freeman, MD<br>Kenneth Godeaux, MD<br>Gregory Glowacki, MD<br>Richard Hilliard, DO<br>Henry Kaufman, MD<br>Michael Johnson, MD<br>Leland Lenahan, MD<br>Kamal Masri, MD  | John Mercado, MD<br>Tanya Mitchell, MD<br>Irina Pechenko, MD<br>Ronald Peeler, MD<br>Tomas Golan, MD<br>Roger Price, MD<br>Maurice Prince, MD<br>Mark Schneider, MD<br>Gyanendra Sharma, MD<br>Brian Sullivan, MD<br>Sreenivas Tadikonda, MD<br>Wesley Vanderlan, M.D.  |   |
| <b>Current as of DECEMBER 15, 2018</b>  |  |   |   |   |
| <b>Other Physicians with Privileges at BHS</b><br><b>These physicians DO NOT have admitting privileges</b>  |  |   |   |   |
| <b>Affiliate Staff</b><br>Henry Carter, M.D.<br>David Jones, MD – GYN<br><b>Anesthesiology</b><br>Joseph W. Crookshank, III, M.D.<br><b>Dentistry</b><br>James T. Shirley, DDS<br>Thomas Shirley, DDS<br><b>ENT</b><br>Samuel Sprehe, MD<br>Steven Sewell, MD<br><b>Internal Medicine</b><br>Michael Bergeron, MD - IM<br>Brett Goodwin, MD - Cardiology<br>John Griffin, MD – Internal Med<br>Jake LeBeau, MD - Cardiology<br>King White, MD – Cardiology<br><b>Internal Medicine/Sleep Study</b><br>Richard Casey, MD<br>Phillip Conner, MD   | <b>Nephrology</b><br>Abdel Abushamat, MD<br><b>Neurology –</b><br><b>(w/Telemedx/EEG</b><br><b>Interpretations)</b><br>Michael Vengrow, MD<br><b>Neurology</b><br><b>(Telead Services)</b><br>(agreement with OLOL RMC)<br>Leopoldo Dealvare, MD<br>Kevin R. Hargrave, MD<br>Fabian Lugo, MD<br>Shelly Savant, MD<br>Lanny J. Turkewitz, MD<br><b>OB/GYN</b><br>Minerva Ramirez, MD<br><b>Family Practice</b><br>Jason Hagen, MD | <b>Orthopedics</b><br>J. David DeLapp, MD (Medical Director for Rehab Svcs.)<br>Shawn Granger, MD<br>Andrew Foret, MD – Hand Surgery<br>Jonathan Foret, MD – Orthopedics<br>John Noble, MD – Orthopedics<br>Robert Moukartzel, MD - Ortho<br><b>Pediatrics</b><br>Juan Bossano, MD<br>(Level II Nursery Medical Director)<br><b>Psychology</b><br>Samuel Hugh Bryan, Ph.D. (provides Telepsych services)<br><b>Podiatry</b><br>Jayson Cortez, DPM<br>Oghale Eleyae, DPM<br>John Pourciau, DPM | <b>Pathology –</b><br><b>(with The Path Lab)</b><br>Regina Burton, MD<br>Paula Smith Eapen, MD<br>Brandi Kelly, MD<br>Thad Primeaux, MD<br>Stephanie Richard, MD<br>Robert Rumsey, MD<br>John VanHoose, MD<br><b>Radiology</b><br><b>(contracted through Access Radiology)</b><br>Bruce Bordlee, M.D.<br>Jason Braud, M.D.<br>Charles Brdlik, M.D.<br>Randy Brown, M.D.<br>Robert Brown, M.D.<br>Stephanie Casey, M.D.<br>Denny Dartez, MD<br>Charles Lim, M.D. | <b>Radiology con't</b><br>Cynthia Lyle, MD<br>Richard Martinez, M.D.<br>Bao Nguyen, MD<br>Adam Olsan, M.D.<br>Scott Osborne, MD<br>Mark Trahan, M.D.<br>Donald Thomas, M.D.<br>Michael Walker, M.D.<br>Christopher Graham, M.D.<br>David Wallace, M.D.<br>Roy DiVittorio, MD*<br>Timothy Dozier, M.D.*<br>Donald Woolridge, M.D.*<br>(*telead reader) |

BHS PHYSICIANS/AHP STAFF  
 PAGE TWO  
 December 15, 2018

**Allied Health Professionals Staff**

J. Ramsey Caraway, CRNA (contracted with YPS Anesthesia)  
 Derek Conner, CRNA (contracted with YPS Anesthesia)  
 Tom Franks, CRNA (contracted with YPS Anesthesia)  
 Robert Rushford, CRNA (contracted with YPS Anesthesia)  
 Jeffrey Allain, CRNA (contracted with YPS Anesthesia)  
 August Klohn, CRNA (contracted with YPS Anesthesia)  
 Richard Hargett, CRNA (contracted with YPS Anesthesia)  
 Thomas Marcantel, CRNA

**Emergency Room Nurse Practitioners** (contracted through Concord Medical Group)

Yvonne Alexander, APRN  
 Stephanie Easton, APRN  
 Amanda Harrell, APRN  
 Rhonda McCormick, APRN  
 Jarrett Rule, APRN  
 Anna Reuber, APRN  
 Deborah Thompson, APRN  
 Susan Wilhelm, APRN

**Rural Health Clinics**

Kallie Hess, APRN  
 Claire Joubert, APRN  
 Dennis Kleinpeter, APRN  
 Amanda Harrell, APRN  
 Gretchen Wilkerson, APRN (PRN)

**Employee Health**

Anita Thibodeaux, APRN (employed by BHS)

**Current as of December 15, 2018**