The Rehabilitation Hospital of Montana

2026 Community Health Needs Assessment Executive Summary

The Rehabilitation Hospital of Montana

In Partnership with
Billings Clinic & St. Vincent Healthcare

The Rehabilitation Hospital of Montana

The Rehabilitation Hospital of Montana opened in 2019 as a venture between Billings Clinic, St. Vincent Regional Hospital, and Lifepoint Health and became the first freestanding inpatient rehabilitation hospital in Montana. It is a state-of-the-art, acute inpatient hospital dedicated to individuals recovering from stroke, brain injury, neurological conditions, trauma, spinal cord injury, amputation, and orthopedic injury. It offers customized, intensive programs through interdisciplinary teams committed to restoring independence and improving quality of life for our patients.

In addition, it is accredited by The Joint Commission and the Commission on Accreditation for Rehabilitation Facilities (CARF), and is the only inpatient rehabilitation hospital in Montana to consecutively rank among the nation's top 10% for quality outcomes.

To submit comments on the 2026 CHNA Report or to request a paper copy, please email Lynn.Ratcliff@RehabHospitalofMontana.com

Community Profile

Service Area

The primary service area is determined geographically by the ZIP codes where most patient admissions originate. It is also defined by the populations served at the hospital including underrepresented, underserved, and low-income community members.

County	Zip Code		
Yellowstone	59002	59044	59088
	59006	59057	59101
	59015	59063	59102
	59024	59064	59105
	59037	59079	59106
	59041		

Community Demographics

Demographic Factors	Hospital Service Area	Montana	United States
Population	168,957	1,116,875	334,992,449
Persons Under 18 Years	23.0%	21.0%	22.0%
Persons 65 Years and Over	18.3%	20.1%	17.2%
Female Persons	50.4%	49.3%	50.5%
High School Graduate or Higher (age 25 years+)	95.5%	94.6%	89.6%
Persons in Poverty (150% Federal Poverty Level)	15.9%	20.9%	20.1%
Median Household Income (2024 dollars)	$76,570	$72,509	$80,734
Persons without Health Insurance (under age 65)	7.7%	8.6%	8.4%
White, not Hispanic or Latino	83.4%	83.6%	57.4%
Hispanic or Latino	6.6%	4.6%	19.3%
Black or African American	0.4%	0.4%	11.9%
Asian	0.7%	0.8%	5.9%
American Indian and Alaska Native	3.6%	5.3%	0.5%
Native Hawaiian and Other Pacific Islander	0.0%	0.0%	0.2%
Two or More Races	4.7%	4.7%	4.3%
Limited English Proficiency	0.9%	0.9%	8.6%

A demographic snapshot of the service area compared to Montana and the United States (Source: U.S. Census Bureau: American Community Survey, 2020-2024)

CHNA Data Methodology and Prioritization

Collaborative Process

The Rehabilitation Hospital of Montana participated in the 2026 Yellowstone County Community Health Needs Assessment with Billings Clinic, RiverStone Health, Intermountain Health St. Vincent Regional Hospital, and with research consultation from PRC. Conducting the assessment together resulted in shared opportunities to improve the quality of health data, reduce duplication, and align health needs.

The data methodology was informed by three key components:

- **Secondary Data**: vital statistics and other health-related data that allowed for trending and comparison of benchmark data at state and national levels.
- **Community Health Survey**: a randomized community health survey that provided input on health needs.
- **Key Informant Survey**: a survey of representatives and leaders with expertise and experience on community health needs.

The preliminary health needs identified through this primary and secondary data analysis were used for the hospital's own prioritization process.

The Rehabilitation Hospital of Montana Prioritization

The Rehabilitation Hospital of Montana applied the Hanlon Method for Prioritizing Problems, a nationally recognized technique used in public health needs assessments and recommended by the National Association of County and City Health Officials. Its scoring process reliably develops objective, data-driven priorities.

Hospital leaders scored the collaborative CHNA's preliminary health needs based on scope, seriousness, and feasibility. The final Hanlon Method score was calculated using a formula that incorporated community prioritization conducted during a forum for residents and key sector representatives. There were instances when preliminary health needs were combined.

Following the scoring process, the PEARL test was applied to screen out health needs based on feasibility to impact using these criteria:

- **P** **Propriety:** Is an Intermountain-led or -supported activity for the health need suitable?
- **E** **Economics:** Does it make economic sense to address the need? Are there economic consequences if a need is not addressed?
- **A** **Acceptability:** Will the community accept Intermountain's intervention? Is the intervention wanted?
- **R** **Resources:** Is funding available or potentially available for the intervention?
- **L** **Legality:** Do current laws allow the intervention to be implemented?

Board Approval

This prioritization process resulted in the Rehabilitation Hospital of Montana's significant health needs. The hospital board approved the CHNA process, significant health needs, and report as presented on September 1, 2026 The report was published on the hospital's public website prior to December 31, 2026.

CHNA Significant Health Needs

THE REHABILITATION HOSPITAL OF MONTANA PRELIMINARY HEALTH NEEDS

Access to healthcare services	Cancer	Diabetes	Disabling conditions
Heart disease and stroke	Housing	Injury and violence	Mental health
Nutrition, physical activity, and weight	Respiratory disease	Substance use	Tobacco use

SIGNIFICANT HEALTH NEEDS

IMPLEMENTATION STRATEGY

Identify hospital and community resources to address significant health needs

Develop strategies to address significant health needs with an emphasis on anticipated impact

Collaborate with other community organizations to have the greatest possible impact on data-identified needs

Evaluation of Prior CHNA

The previous CHNA was conducted in 2023, and the significant health needs were identified as access to healthcare services, behavioral health and nutrition, physical activity, and healthy weight. A companion Implementation Strategy was also developed to address these health needs identified among the medically underserved, underrepresented, and low-income residents in the CHNA data. Notable outcomes from those activities are below.

2024 - 2025 Implementation Strategies and Outcomes

Significant Health Need	Strategies	Outcomes 2024-2025
	• Increase access to rehabilitation services, both in person and virtually • Increase workforce capacity to provide rehabilitation services	• Provided outreach to rural residents in communities outside of Yellowstone County • Provided an amputation support group since May 2025 • Provided clinical rotations for 6 therapy students
	• Promote mental health resources • In-kind support for community mental health collaborations and organizations	• Offered monthly mental health focused messages on social media • Unable to provide in-kind support for community mental health collaborations and organizations due to staffing capacity
	• Support healthy lifestyle messaging • Support community collaborations and organizations addressing nutrition, physical activity, and healthy weight	• Offered monthly nutrition classes beginning in 2025 • Supported the Adaptive 1K race for individuals with disabilities • Provided monthly nutrition, physical activity, and healthy weight messages on social media • Unable to participate in coalition initiatives due to staffing capacity

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