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415 Jefferson St. N
Wadena, MN 56482

COMMUNITY HEALTH NEEDS ASSESSMENT 2025







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Executive Summary

Astera Health presents its Community Health Needs Assessment (CHNA) for 2025. The goal of this report is to summarize and highlight key findings and opportunities for implementation of three initiatives to address and help guide the organization in its community benefits planning efforts aligned with the 2025-2030 Strategic Plan. A Community Health Implementation Plan (CHIP) will also be developed based on the CHNA.

Minnesota nonprofit hospitals have moral obligations to the communities they serve. Under the Patient Protection and Affordable Care Act, the CHNA is required for hospitals to maintain their tax-exempt 501(c)(3) status. This requirement applies to tax years beginning after March 23, 2012. Astera Health has joined with Wadena County Public Health, Todd County Health and Human Services, Lakewood Health System, CHI St. Gabriel's Health, Morrison County Public Health, and CentraCare, local citizens and local organizations to make the most comprehensive assessment possible of our service area and further enhance care in our rural healthcare community.

The Board of Directors ratified the CHNA and Implementation Plan on December 29, 2025.

Sources of Input

Quantitative and qualitative data was gathered from many sources like the County Health Rankings and Roadmaps, US Census data, public health data, our internal electronic health record data, community health survey data from county residents, community health forums with community agencies and organizations, feedback from our patient and family advisory council and organizational leadership.

Priorities

The data gathered was used to identify specific issues and prioritize them according to need. These prioritized issues were used to develop strategies for the implementation of interventions.

Astera Health will focus on the following initiatives over the next three years.

1. **Hypertension (high blood pressure)** – Many adults in our area have high blood pressure, which can lead to heart disease and stroke. Astera Health will focus on education, screenings, and support for healthy habits.
2. **Obesity** – Wadena County has one of the highest obesity rates in the state. We'll continue programs that encourage physical activity, healthy eating, and regular checkups.
3. **Substance Use Disorder** – Drug and alcohol use are major community concerns. Astera Health will expand treatment options, prevention education, and community partnerships to support those affected.

Introduction and Background

Astera Health began operating in 1925 in Wadena, Minnesota, as Wesley Hospital and has grown into a healthcare organization with approximately 460 employees. In 1972, Tri-County Hospital construction began, changing name and location. In 2008, Tri-County Health Care was formed after a merger with Wadena Medical Center. In 2023, Astera Health opened at a new location in a state-of-the-art facility and changing its name. In 2025, in partnership with CentraCare, a cancer center was added at the Astera Health main campus.

Astera Health is an independent, non-profit organization offering patient-centered care in orthopedics, oncology, urology, ENT, chiropractic care, women's health, and diagnostic imaging. Our hospital, clinic, and cancer center are in Wadena, along with five satellite and two physical therapy clinics in Bertha, Henning, Ottertail, Sebeka, and Verndale. Our hospital features surgery suites, labor and delivery, lab, rehab services, and 24-hour emergency care.

Methodology

Primary Data Collection

A community health survey was disseminated and analyzed during the Community Health Needs Assessment process in the Astera Health service area in July and August of 2024. A pulse survey was distributed in the first quarter of 2025 at events in the region that Astera Health participated in, like the Maslowski Wellness and Research Center 10th Anniversary event as well at our patient and family advisory council meetings in Quarter 1 and 2 of 2025. A community health forum was conducted with community stakeholders to help determine needs as well.

Secondary Data Collection

Secondary data was collected from a variety of local, county, state and federal sources to compile a community profile, birth and death characteristics, access to healthcare, chronic disease, mental health and social issues, as well as school and social characteristics. When pertinent, this data was presented in the context of the Astera Health service area and the state of Minnesota, framing the scope of an issue as it relates to a broader community.

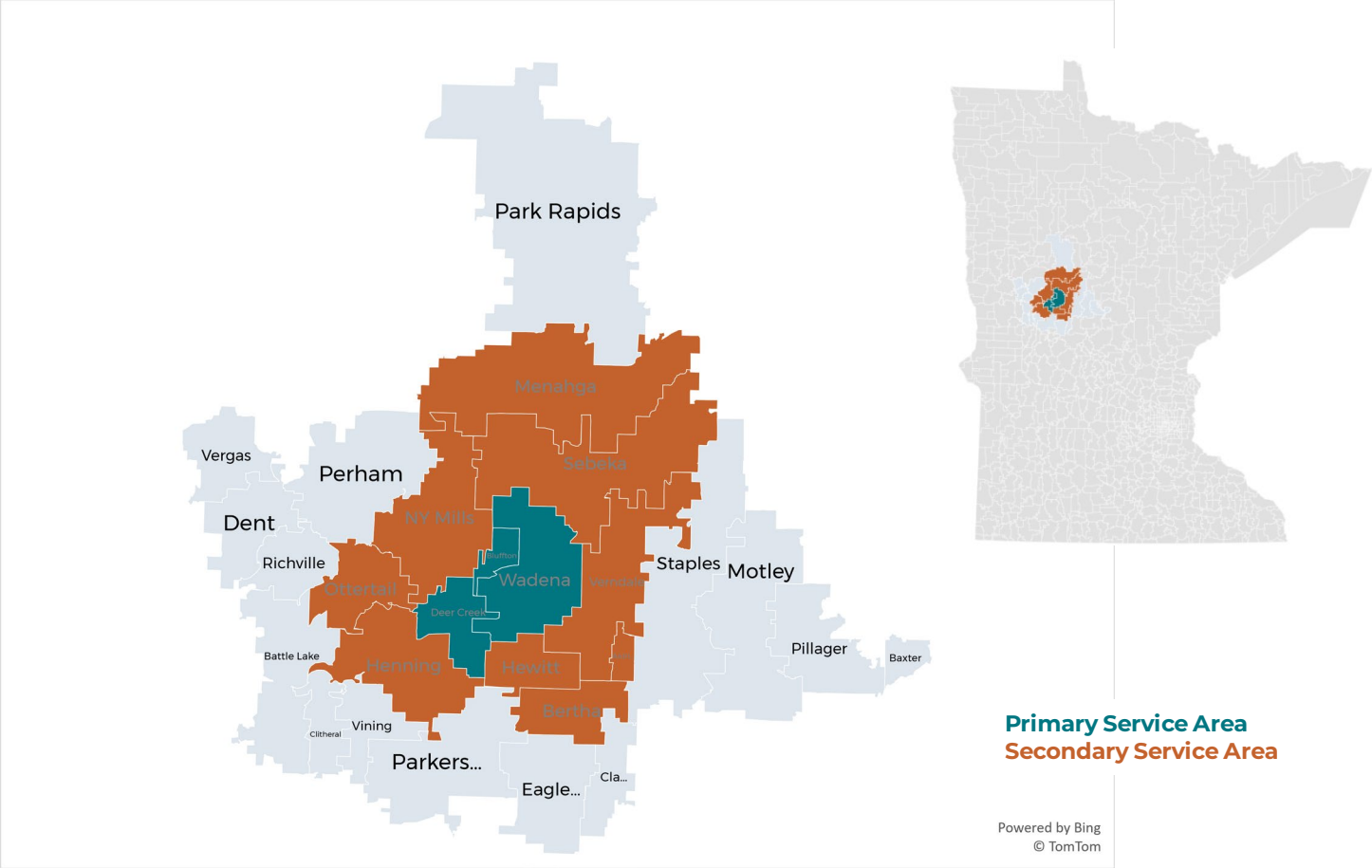
Data Analysis and Prioritization

Based on community input and data, priorities are selected using the following criteria:

- Severity
- Feasibility
- Impact potential
- Community identified

Communities Served

The Astera Health community is in West Central Minnesota and includes eastern/central Otter Tail, Todd, and Wadena counties.



The population of our service areas is 75,979 at the 2020 census. The service area is determined by patient data as well as proximity to other healthcare facilities. The Astera Health service area remains predominantly white/Caucasian (average ~90.4%), reflecting rural Minnesota's broader population makeup. By contrast, the state of Minnesota is 76.9% white/Caucasian with 23.1% identifying as part of a minority group[1].

Other key statistics from Census Bureau data for our service area:

- 97% speak English
- 91.9% of households have a computer with 84.1% having access to broadband internet.
- 15.5% of civilians have a disability
- 91.4% have a high school diploma or higher
- 2.33 is the average household size
- Median household income is substantially below the State of Minnesota

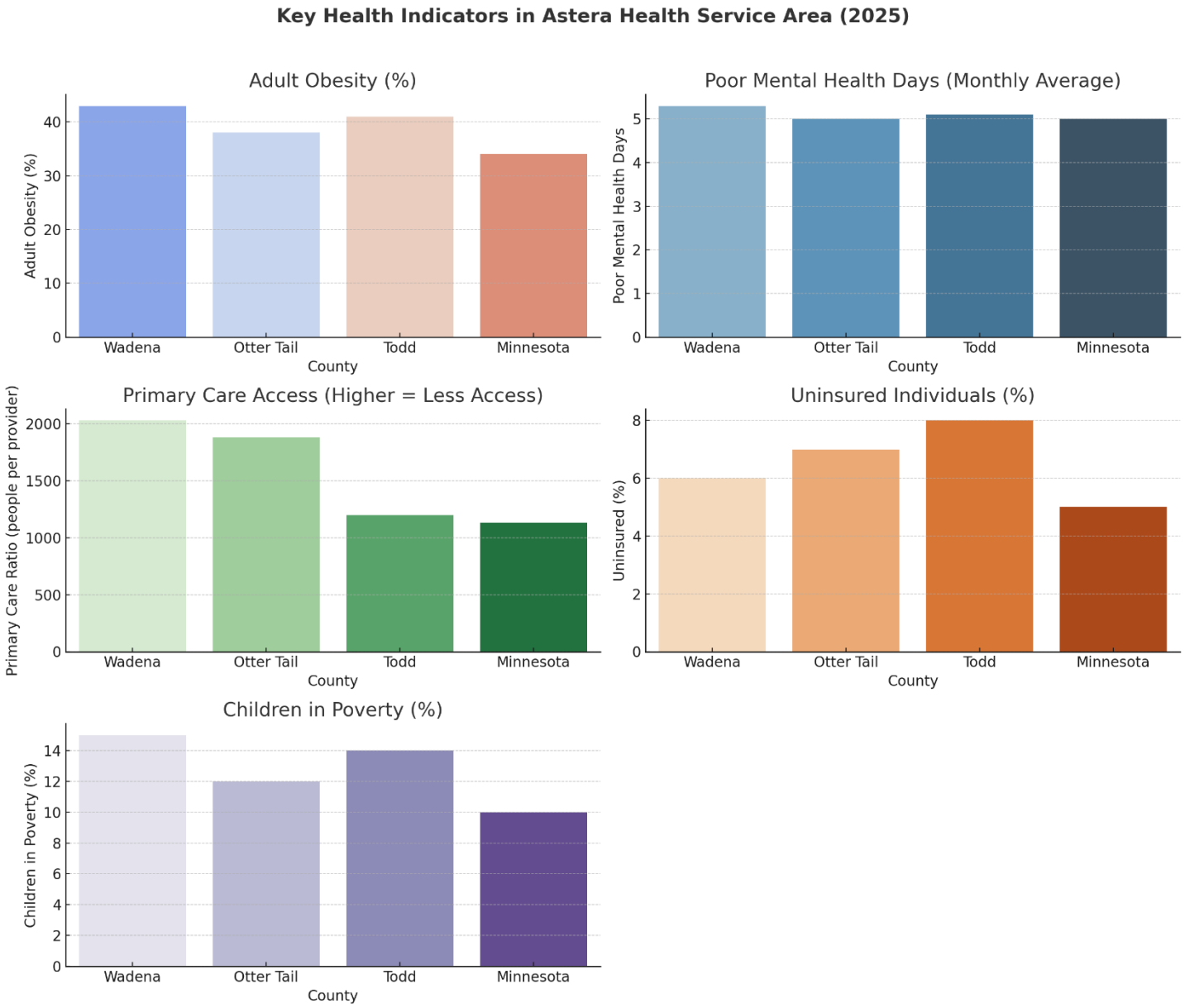
Stat	Service Area	Minnesota
Under 5 Years	6.6%	5.9%
5-17 Years	25.3%	23.1%
18-64 Years	46.2%	54.3%
65 and Over	21.9%	16.7%
Median Household Income	$56,882	$87,556

https://www.census.gov/quickfacts/table/PST045215/27,27153,27159

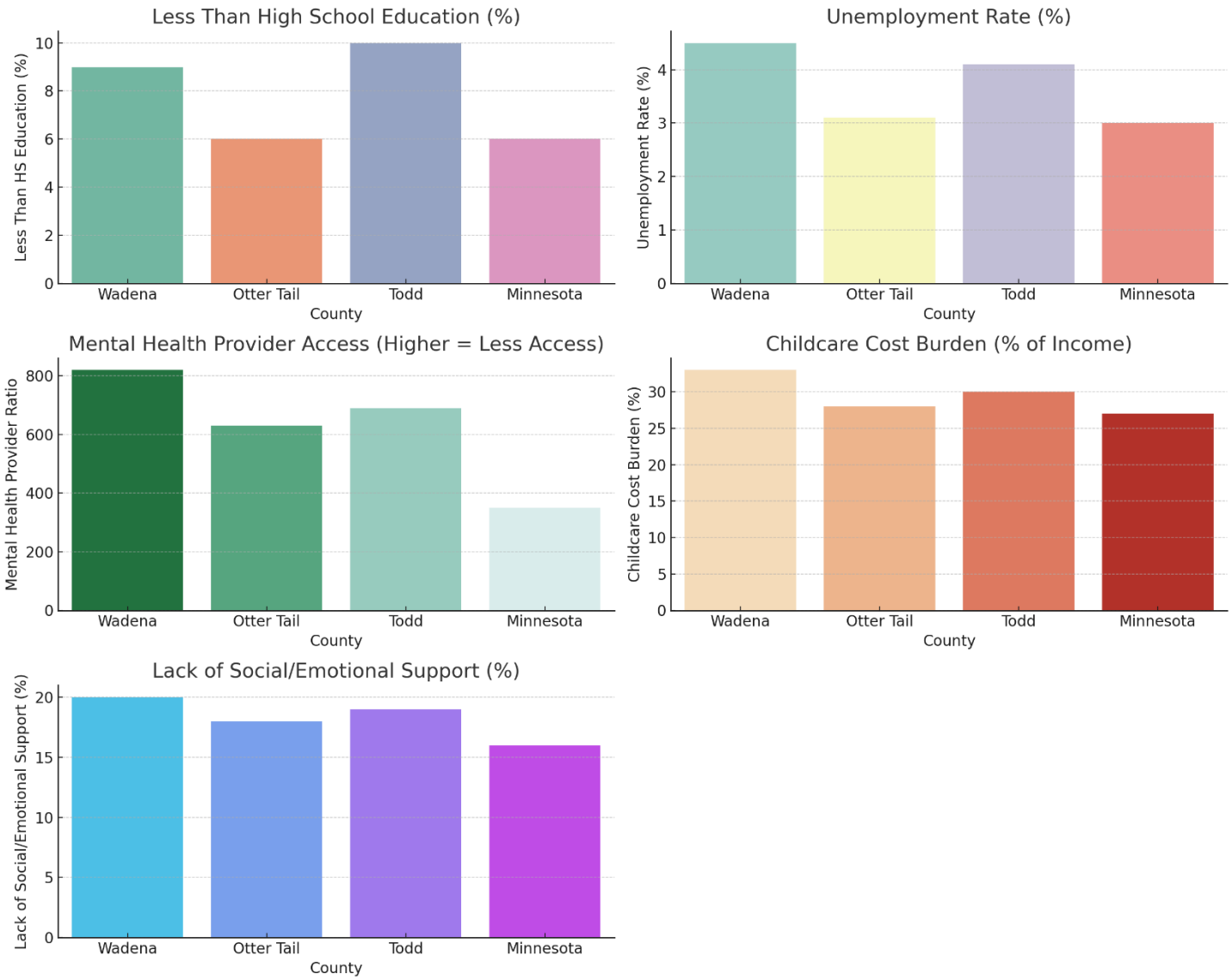
[1] U.S. Census Bureau, *QuickFacts* (2023)

The County Health Rankings and Roadmaps by the Robert Wood Johnson Foundation releases a report each March with key indicators for the social determinants of health. The full 2025 report can be found in the appendix.

Below are some key indicators for those living withing the three counties served by Astera Health compared to the state of Minnesota.

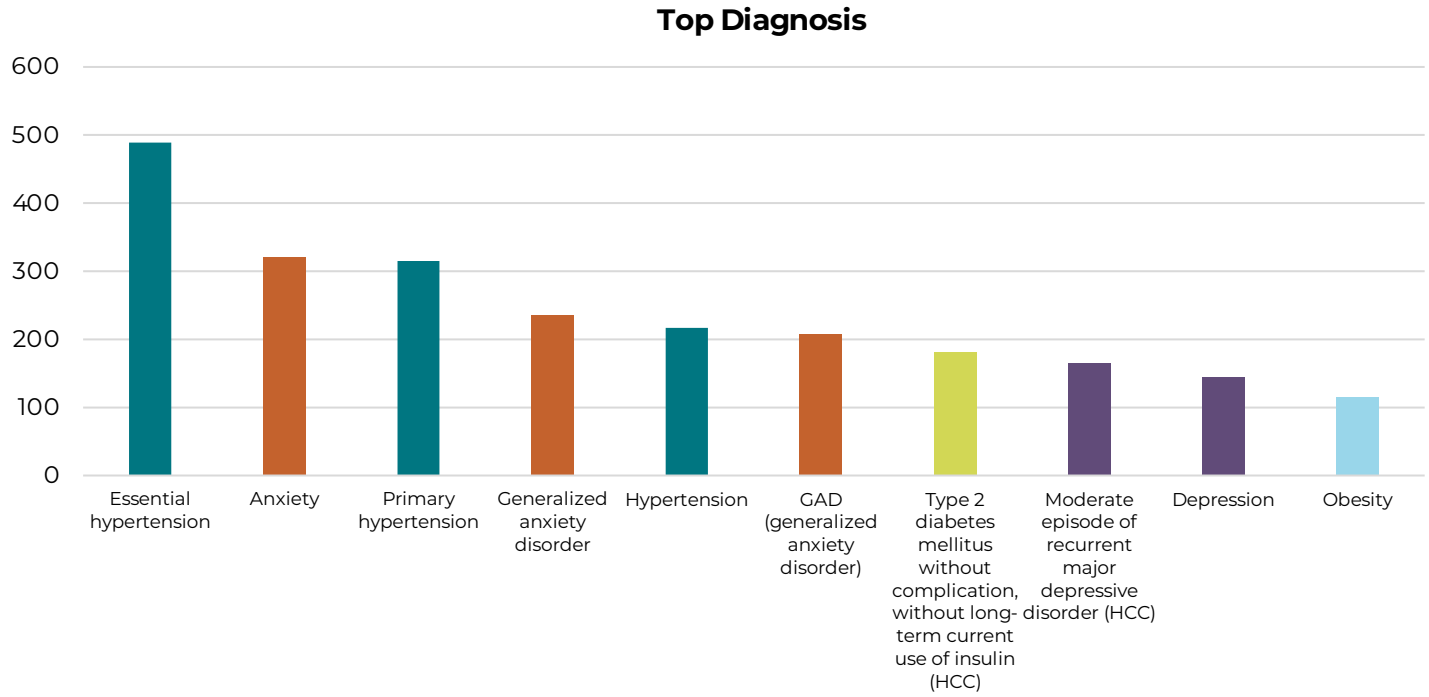


- Wadena leads with the highest obesity rate at 43%, well above the state average of 34%.
- All three counties report 5+ days/month, with Wadena at 5.3 days, indicating elevated mental health burdens compared to the state average of 5.0 days.
- Wadena County has the poorest access with 1 provider per 2,030 residents, far behind Minnesota's average of 1:1,130.
- Todd County has the highest uninsured rate at 8%, compared to 5% statewide, highlighting disparities in healthcare coverage.
- Children in poverty rates are high in Wadena (15%) and Todd (14%), again exceeding Minnesota's average of 10%.



- Todd County has the highest proportion of residents without a high school diploma (10%), compared to 6% statewide.
- Wadena (4.5%) and Todd (4.1%) have higher unemployment than the Minnesota average (3.0%)
- Wadena has the most limited access with 1 mental health provider per 820 people, compared to 1:350 statewide.
- Families in Wadena spend an estimated 33% of income on childcare—above the state's 27% average—reinforcing the need for affordable care access.
- Roughly 20% of Wadena residents report lacking social or emotional support, compared to 16% across Minnesota.

Astera Health Top 10 Problem List – 2024



The top problems for Astera Health patients relate to four broader categories, in order of prevalence:

1. Hypertension
2. Anxiety
3. Depression
4. Type 2 Diabetes
5. Obesity

LEADING CAUSE OF DEATH (2022)								
Cause of Death					Rate of Death per 100,000 age adjusted			
MN Rank	Wadena County Rank	Ottertail County Rank	Todd County Rank	Condition	MN Rate	Wadena County Rate	Ottertail County Rate	Todd County Rate
1	4	66	65	Cancer	143.24	184.61	157.32	157.33
2	4	25	74	Heart Disease	123.87	197.25	163.66	131.02
3	4	18	17	COVID-19	64.05	95.34	69.18	70.97
4	31	62	35	Accidents	61.45	47.14	39.69	46.37
5	6	33	83	Stroke	34.49	51.2	42.29	30.25
6	7	13	82	Alzheimer's	33.07	41.54	34.85	12.37
7	4	35	57	Lung Disease	29.21	47.08	37.64	34.01
8	5	66	25	Diabetes	22.6	33.01	18.79	25.54
9	55	80	29	Hypertension	12.76	6.94	4.28	8.82
10	17	31	44	Liver Disease	13.49	9.63	8.44	7.53
11	18	11	35	Suicide	13.93	15.8	17	14.52
12	11	37	85	Parkinson's	10.3	10.54	8.7	4.36

Source: https://www.worldlifeexpectancy.com/usa

Orange denotes conditions with higher rates than Minnesota in two or more counties in service area (considered COVID-19 as outlier).

Identification of Health Needs

We held a community health forum with community stakeholders to understand the needs of the people they serve to help us in determining our top priorities as their community hospital. Agencies participating were: Astera Health, City of Wadena, Someplace Safe, Wadena County Public Health, Friendly Rider, Wadena County Sheriff's Department, Wadena City Police Department, Otter Tail County Public Health, Wadena Immanuel Lutheran Church, Wadena-Deer Creek Schools, Vivie Home Health and Hospice, and Maslowski Research and Wellness Center. This group shared the needs of those they served and then chose the top three needs for each area of the social determinants of health. From there, the group chose the top priorities they thought Astera Health should focus on:

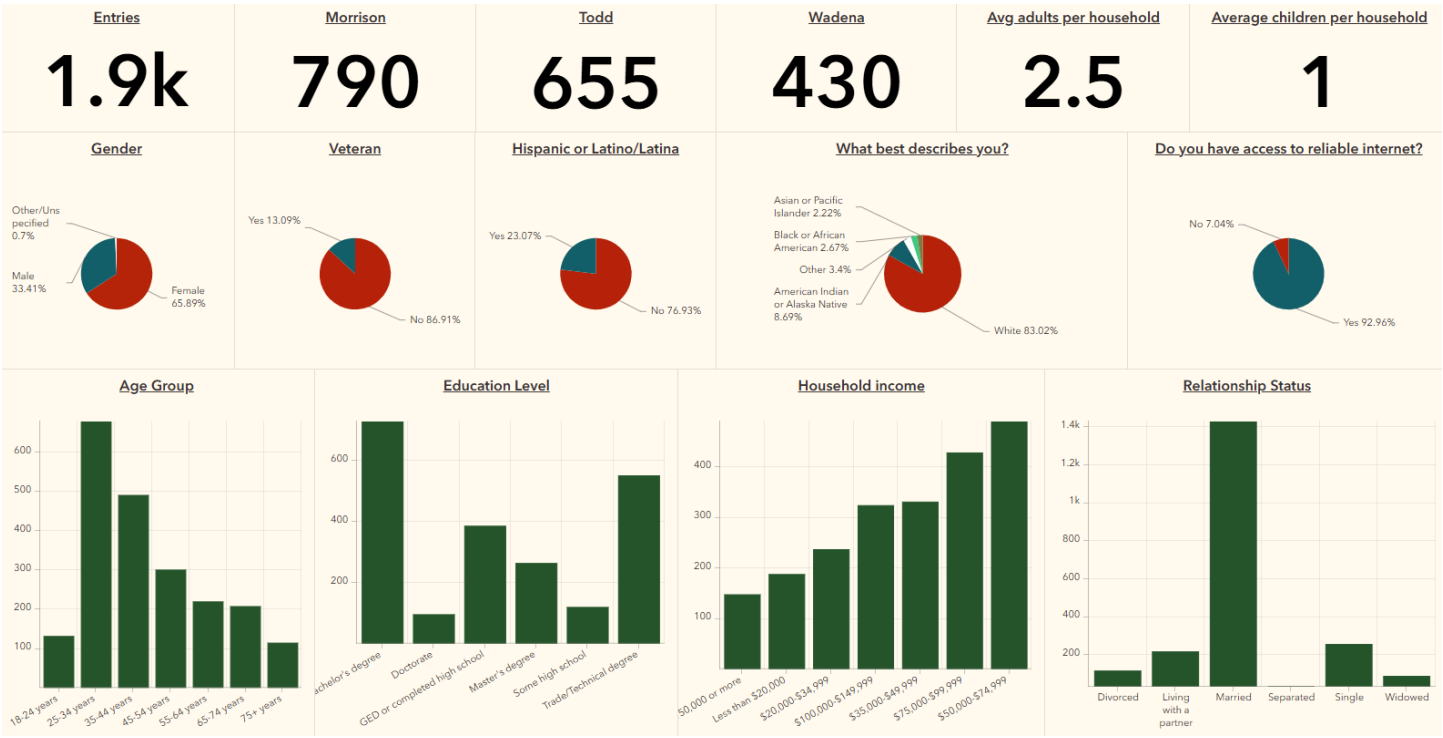
Top initiatives recommended (in order based on number of votes):

1. Mental Healthcare
2. Substance Use Treatment
3. Family and Safety Support
4. Dementia
5. Vulnerable Adults
6. Primary/Preventative Care
7. Medication Management

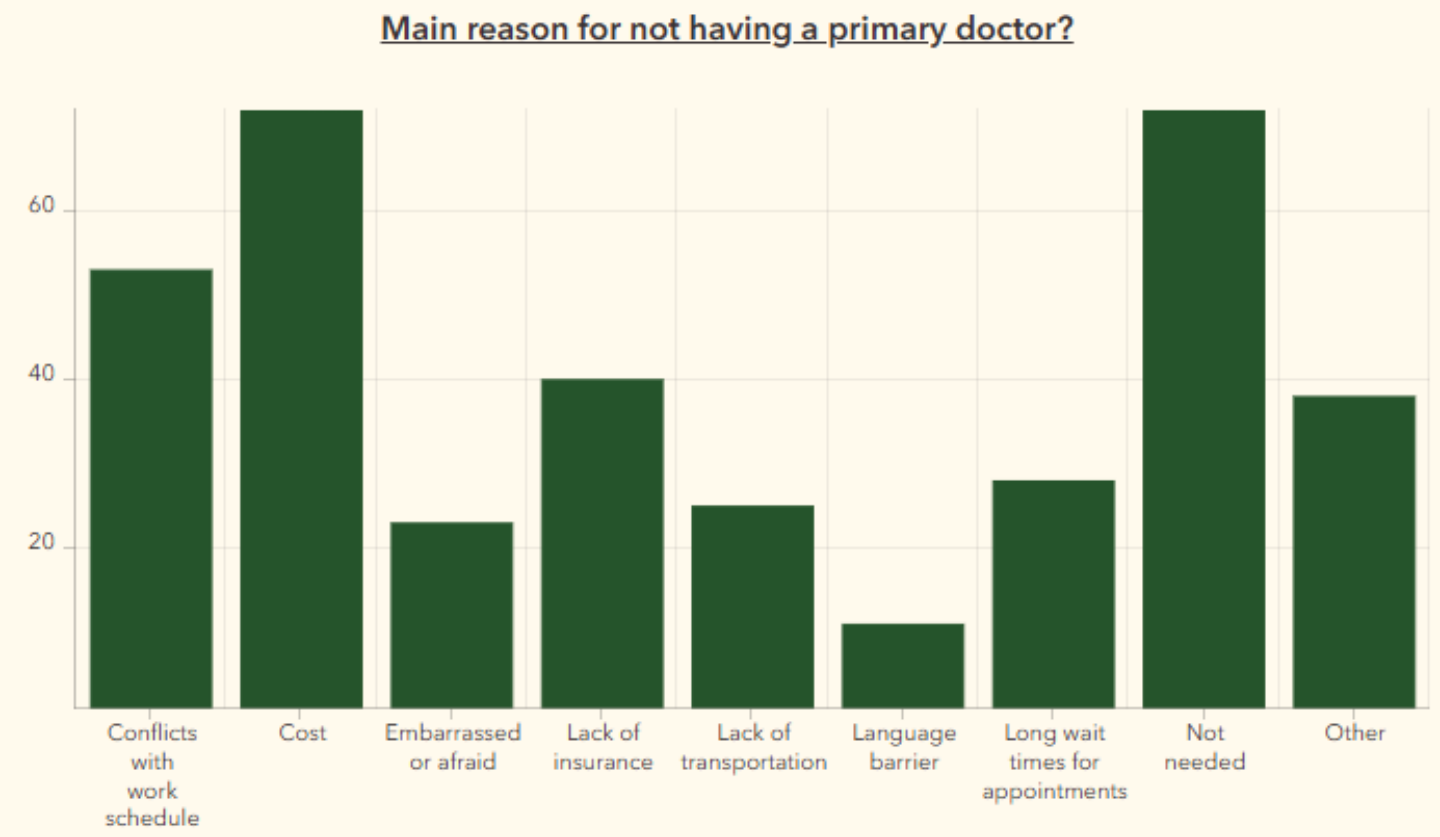
Community Health Survey

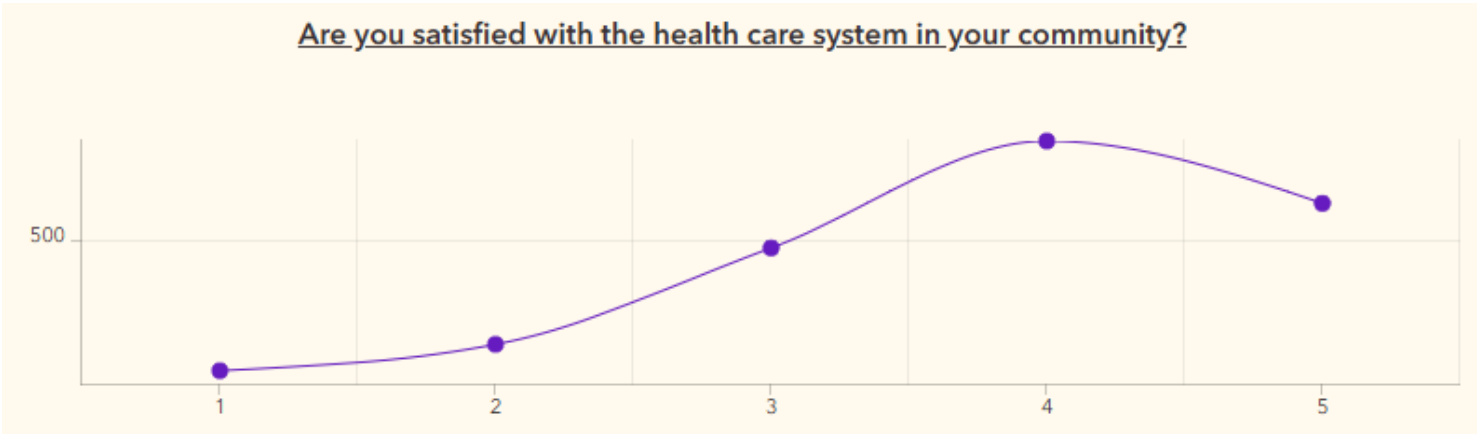
A survey was developed and coordinated by public health staff in Morrison County. Questions were determined based on previous surveys and current community issues. The survey was a self-administered digital survey with paper surveys as an option for Spanish speaking participants or those requesting such. The GIS department at Todd County created the survey in their Arc GIS program, Survey 123. Completed surveys were received from 1,875 adult residents of three counties; thus, the overall response rate was 19.8%. County-level response rates were 42% (Morrison), 35% (Todd) and 23% (Wadena). The results were validated by surveys at various community events.

Demographics of participants are in the graph below:

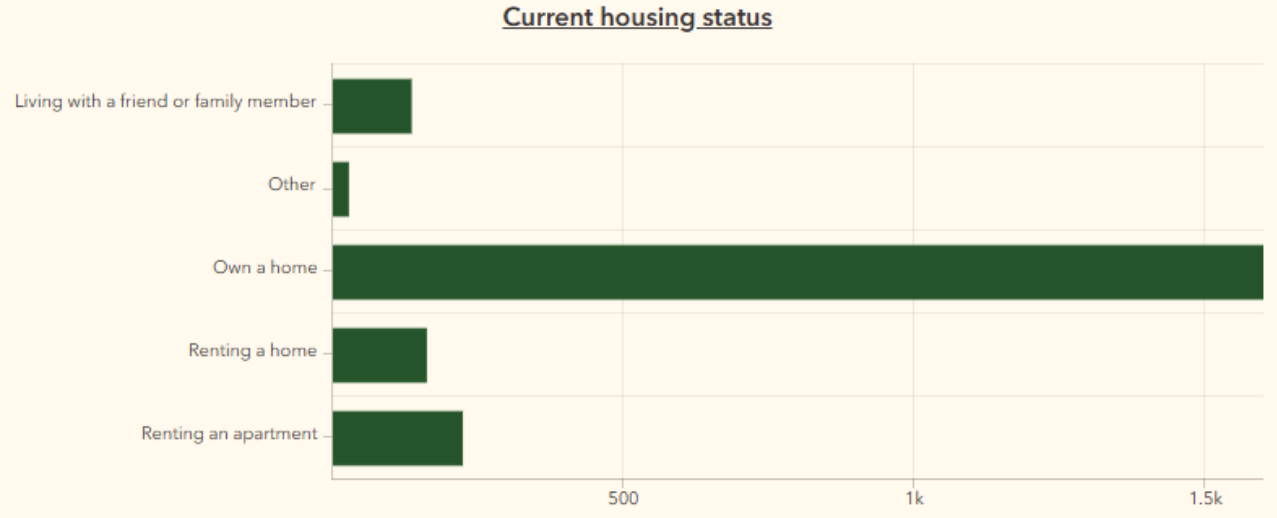


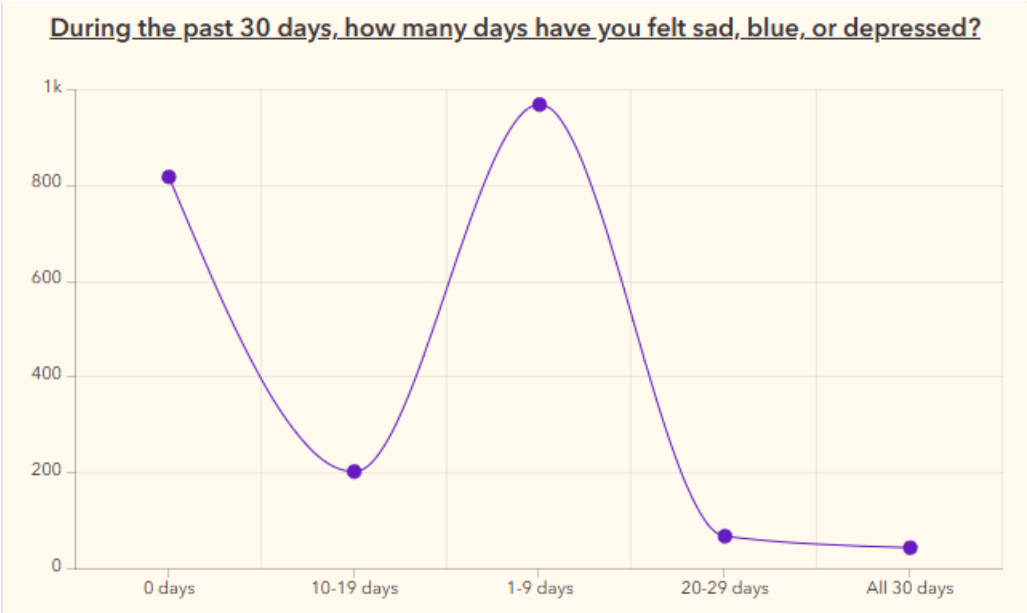
There were many topics addressed in the survey: quality of life, social interaction and stress, housing concerns, health behaviors and community concerns, and safety and resources. Those questions pertaining to Astera Health are highlighted below:

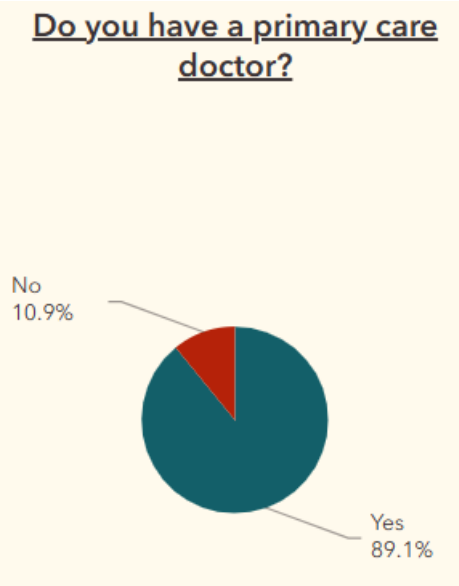


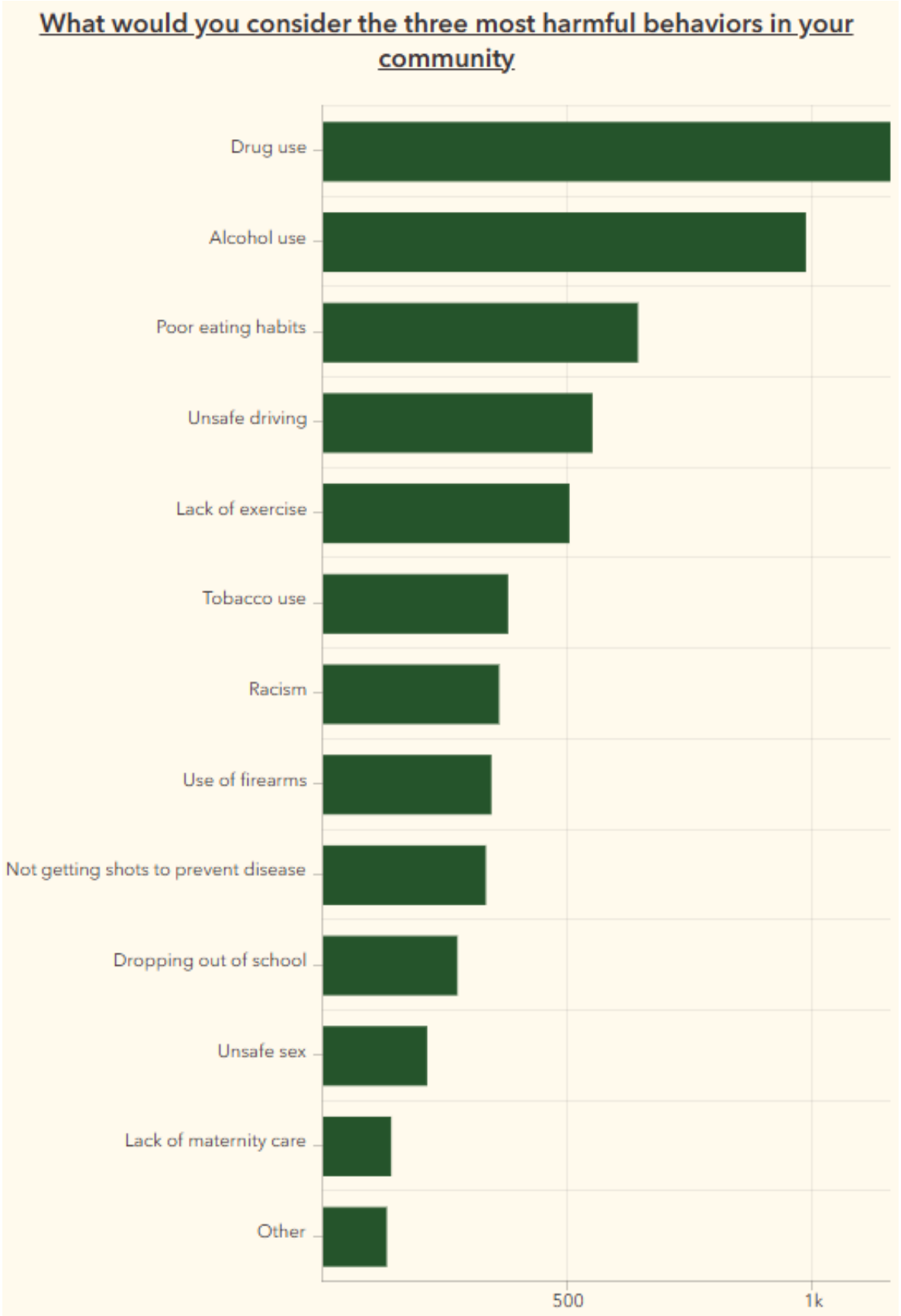


1 = Strongly Disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, 5 = Strongly Agree


Current housing status
Living with a friend or family member
Other
Own a home
Renting a home
Renting an apartment
500
1k
1.5k


During the past 30 days, how many days have you felt sad, blue, or depressed?
1k
800
600
400
200
0
0 days
10-19 days
1-9 days
20-29 days
All 30 days


Do you have a primary care doctor?
No
10.9%
Yes
89.1%



Source for full results: [Morrison-Todd-Wadena Community Health Survey 2024]

Evaluation and Prioritization of Health Needs

Data Analysis and Prioritization

Based on community input and data, priorities are selected using the following criteria:

Severity

Health needs that are deemed worse than benchmarks if the supported county data was worse than the state averages, and if need appeared in top problem list for Astera Health patients.

Feasibility

Growing health needs where interventions by the hospital are feasible and within capacity and capabilities of the organization as well as aligned with the mission and strategic goals.

Impact Potential

Health needs that disproportionately affect vulnerable populations and can impact health equity by being addressed.

Identified by the Community

Health needs expressed in the community survey and forums.

Community Health Needs Prioritization Matrix

Condition/Outcome	Severity	Feasibility	Impact Potential	Identified by Community
Access to Care	✓	✓	✓	✓
Alzheimer's and Dementia	✓		✓	
Anxiety and Depression	✓	✓	✓	✓
Cancer	✓	✓	✓	
Diabetes	✓	✓	✓	
Family and Safety Support			✓	✓
Heart Disease	✓	✓	✓	
Hypertension	✓	✓	✓	
Lung Disease	✓			
Medication Management		✓	✓	✓
Obesity	✓	✓	✓	✓
Poor Eating Habits			✓	✓
Stroke	✓	✓	✓	
Substance Use Disorder	✓	✓	✓	✓
Suicide	✓		✓	
Vulnerable Adults			✓	✓

Overview of Priorities

Astera Health will focus on the following community health priorities over the next three years based on the results of the prioritization exercise and meetings with internal stakeholders.

1. **Hypertension (high blood pressure)** – Many adults in our area have high blood pressure, which can lead to heart disease and stroke. Astera Health will focus on education, screenings, and support for healthy habits.
2. **Obesity** – Wadena County has one of the highest obesity rates in the state. We'll continue programs that encourage physical activity, healthy eating, and regular checkups.
3. **Substance Use Disorder** – Drug and alcohol use are major community concerns. Astera Health will expand treatment options, prevention education, and community partnerships to support those affected.

Needs Not Addressed as Top Priorities

Astera Health screens for social determinants of health with each patient and refer them for assistance in those areas where they report need if they consent to discuss the results of their screening.

Astera Health is working closely with public health departments, schools, and local organizations to address those needs that Astera does not provide, like family and safety support and Alzheimer's and Dementia care. Other areas like mental health, access to care, and family safety will continue to receive support through community programs.

There are many needs in our region that we encounter as a healthcare provider. We offer many services including behavioral health which will continue to serve patients needing that service. Our past CHNAs focused on access to care and mental health allowing us to focus on different priorities for our 2025 assessment.

Resources Available to Meet Needs

Assisted Living/Nursing Homes
- Comfort Care Cottages – Wadena
- Fair Oaks Lodge, Inc. – Wadena
- Greenwood Connections – Menahga
- Heritage Home – Sebeka
- Little Bit of Country – Wadena
- The Meadows – Wadena
- Our Home Your Home – Henning
- Willow Creek Assisted Living – Henning

Cancer Support
- Support and Online Communities - American Cancer Society
- Cancer Support Groups - CanCare
- Cancer Support Groups
- Cancer Support Community

County Public Health Departments
- Otter Tail County Public Health
- Todd County Health and Human Services
- Wadena County Public Health

Dementia Support
- Lakes Homes Solutions - Perham

Financial Support
- Astera Health Patient Financial Advocates
- Energy Assistance
- Otter Tail County Economic Assistance
- Todd County Financial Assistance
- Wadena County Financial Services

Fitness and Recreation
- Maslowski Wellness and Research Center – Wadena
- Otter Tail County Parks and Recreation
- Todd County Parks and Trails
- Wadena County Parks

Foot Care
- Wadena Senior Center – 218-631-4077

Home Health
- CK Home Healthcare – Fergus Falls
- Lake Country Home Care – New York Mills
- Mahube-Otwa Senior Homemaking and Chore Services
- Vivie Home Care and Hospice – Wadena

Housing Assistance
- Assistance & Eviction Prevention | Lutheran Social Service of Minnesota
- The Bridge on 7th Overnight Shelter | Bridges of Hope
- Coordinated Entry | Central Minnesota Housing Partnership
- MAHUBE-OTWA
- Minnesota Homeless Shelters
- Place of Hope

Mental Health (stress, anxiety, depression)
- Astera Health
- Birch Lake Counseling - Wadena
- HOPE Center
- Imagine Mental Health Counseling – Wadena, Ottertail
- Mental Health Crisis Line – Call 988
- Minnesota Specialty Health System – Wadena
- Northern Pines Mental Health – Wadena
- Region V Mental Health Initiative
- The Center for Family Counseling
- Wadena Area Family Counseling
- Wadena County Behavioral Health

Nutrition Support
- Food Assistance – Otter Tail County
- Hilltop Regional Kitchen – Meals on Wheels Clarissa, Eagle Bend, Bertha, Hewitt, Wadena, Verndale, and Staples
- Food Shelves – Otter Tail and Wadena Counties
- Living Bread Pantry - Eagle Bend
- MN Dept of Children, Youth, and Families
- SNAP – Wadena County
- Ruby's Pantry - Menahga
- Ruby's Pantry - Perham
- Wadena Food Shelf – 205 Aldrich Ave SE

Pharmacies
- Seip Drug – Battle Lake, Bertha, Clarissa, Henning, New York Mills, Ottertail
- Thrifty White Pharmacy – Wadena
- Walmart Pharmacy – Wadena

Substance Use Treatment
- Aneway Treatment Center – Long Prairie
- Alano Society of Wadena
- Rewind Center – Perham

Transportation Services
- Friendly Rider Transit – Todd and Wadena Counties
- Medi Van – Detroit Lakes area
- The Otter Express – Ottertail
- People's Express – Wadena
- Rainbow Rider Bus – Todd County

Victim's Services
- Domestic Violence Support | National Domestic Violence Hotline
- Hands of Hope Resource Center – Minnesota Recovery Connection
- Mid-Minnesota Women's Center
- Minnesota's Largest LGBTQ+ Advocacy Organization | OutFront Minnesota
- StrongHearts Native Helpline
- Someplace Safe – Wadena, Ottertail

Implementation Strategy Overview

These areas were selected due to their significant impact on community health status, their connection to preventable chronic disease, and their alignment with Astera Health's strategic goals for 2025–2030. The plan integrates clinical strategies, community partnerships, public education, and social determinants of health interventions to support measurable improvement across the region.

Priority 1: Hypertension

Hypertension is the most common diagnosis among Astera Health patients and is closely tied to elevated heart disease mortality rates in Wadena and surrounding counties. Barriers such as lower income levels, higher uninsured rates, and rural access challenges increase risk and reduce care continuity.

Key Tactics

1. Expansion of Home and Ambulatory Monitoring Tools
Astera Health offers free 24-hour ambulatory blood pressure monitoring (Oscar 2) and validated home BP machines for patients unable to afford their own. Education includes proper use of devices, lifestyle modification guidance, and follow-up through MyChart or phone review.

2. MyChart Blood Pressure Monitoring Flowsheets
Providers can add a monitoring flowsheet to patients' MyChart portals, allowing patients to electronically log BP readings and enabling real-time clinical assessment and early intervention.

3. Future Technology Integration
The plan includes exploring Bluetooth-enabled BP cuffs integrated with EHR-connected apps, allowing nurses and care teams to monitor trends and intervene more proactively.

4. Pharmacist-Led Hypertension Clinics
Pharmacists would support medication adjustments using standing protocols, focusing on affordability, adherence, and side-effect management. Partnerships include Thrifty White, Walmart, and local pharmacies.

5. Community Paramedic (CP) Home Visits
Community paramedics will assist home-bound individuals by measuring blood pressure, providing education, and connecting patients to additional resources.

6. Food-as-Medicine Approaches
Strategies include:

- DASH-diet education and Mrs. Dash seasoning packets for newly diagnosed patients
- Produce prescriptions or vouchers
- Dietitian referrals and customized nutrition plans
- Possible partnerships with co-ops, farmers, and food pantries

7. Social Determinants of Health Screening
Routine screening for food insecurity, financial strain, housing instability, and transportation barriers allows connection to community resources and wrap-around support.

8. Community Education & Accessibility
Hypertension awareness and education will be provided through Bite-Size Conversations, Healthy Times Magazine, social media, and walk-in BP checks available anytime across facilities.

Priority 2: Obesity

Adult obesity rates across Wadena, Todd, and Otter Tail counties significantly exceed state averages, intersecting with elevated physical inactivity rates and chronic disease burdens. Poor nutrition, economic barriers, and lifestyle habits identified in community forums contribute to obesity trends.

Key Tactics

1. High-Risk Patient Identification & Clinical Enhancement
Using EHR data, Astera identifies high-BMI patients, screens for comorbidities, and proactively invites them to weight-management supports. Interventions include:

- GLP-1 medication management
- Referrals to dietitians
- Personalized nutrition and exercise plans

2. Community Education & Awareness Campaigns
Obesity-related education will be delivered through Bite-Size Conversations, the website, Healthy Times Magazine, blogs, and social media platforms. Partnerships with the American Heart Association and CDC further supply evidence-based materials.

3. Walking Clubs & School Partnerships
The plan recommends creating walking groups using community volunteer leaders. Schools may provide access to indoor tracks, supporting year-round low-barrier physical activity.

4. Staff Wellness & Community Modeling
Internal wellness initiatives—water intake challenges, healthy lunch campaigns, and step competitions—aim to strengthen a culture of health inside the organization. Astera will partner with workplaces in the broader region to promote similar wellness programming.

5. Community Garden Exploration
Astera may support or sponsor community garden spaces by offering seeds, supplies, and volunteer engagement days. This initiative supports food security and fresh-produce access.

6. Collaboration with Public Health & Resource Identification
Partnerships with public health departments across Wadena, Todd, Becker, and Otter Tail

counties enhance access to postpartum visits, nutrition support, and community education. Data on SDOH and patient trends will be used to drive targeted interventions.

Priority 3: Substance Use Disorder (SUD)

SUD—including both opioid and alcohol misuse—has intensified across the region. Overdose fatalities, rising rates of synthetic opioid exposure, and community impacts such as emergency department violence underscore the urgent need for comprehensive intervention. The closure of Bell Hill Recovery Center widens service gaps.

Key Tactics

1. Robust Opioid Management Program
Astera's program targets two groups:

- Chronic opioid users**,** including those needing tapering plans
- Acute opioid patients**,** to prevent long-term dependence

Tactics include controlled substance agreements (CSAs), medication tapering pathways, Suboxone (MAT) treatments, and integration of behavioral health services.

2. Expansion of Behavioral Health Integration
Embedded behavioral health professionals will support trauma treatment, mental health care, and relapse-prevention planning within the Suboxone program.

3. Standardizing Controlled Substance Agreements
Organization-wide standardized CSAs ensure accountability, clear expectations for patients, and consistent documentation in the EHR.

4. Opioid Health Coaching & Follow-Up Care
Health coaches provide intensive guidance and have achieved 100% CSA adherence among enrolled patients. Coaches will also support appointment coordination, adherence tracking, and care plan updates.

5. Alternative Pain Management Services
Patients will be referred to:

- Chiropractic care
- Physical therapy and dry needling
- Aquatic therapy
- Non-opioid pain regimens and integrative therapies

6. Community Partnerships for Harm Reduction
Collaborations with organizations such as:

- Steve Rummler Hope Foundation
- Mahube-Otwa Community Action Agency
  will expand access to Narcan, fentanyl test strips, and recovery resources.

7. Data-Driven Care Coordination
Use of Epic's Compass Rose SDOH screening and Slicer-Dicer reporting will help track high-risk populations, social barriers, and program outcomes.

8. Multi-Year Program Expansion
Performance periods from 2025–2028 outline phased growth in behavioral-health integration, patient goal-setting, provider engagement, tapering workflows, substitution therapies, and sustainability planning.

Astera Health's 2025 CHIP outlines a comprehensive, equity-focused roadmap to improve community health through targeted, evidence-based action. By integrating clinical care, population health strategies, and strong community partnerships, Astera aims to reduce hypertension and obesity prevalence, improve safe pain-management practices, and address rising substance use challenges. The plan promotes sustainable change by aligning medical treatment with social supports, education, prevention, and culturally relevant engagement strategies—all designed to strengthen the health and well-being of the region.

Impact Evaluation of 2022 CHNA

ASTERA HEALTH COMMUNITY HEALTH PRIORITIES –2022 ASSESSMENT

As a result of work completed through the MAPP process in partnerships with local public health agencies and other area healthcare facilities, the following items were identified as the top significant issues for the purpose of this assessment and then in 2023, more focused:

- Healthy behaviors and chronic disease management
  - Diabetes
  - Hypertension
- Mental health/opioid-use disorder and prescription management
  - Mental health – top priority
- Social determinants of health
  - Adult obesity
  - Primary care access

Priority 1: Healthy Behaviors and Chronic Disease Management: Focus on Diabetes and Hypertension

Strategy 1: Community education and partnerships

Tactics:

- Bite Size Conversations: monthly education event providing healthy lunch
- Healthy Times magazine distribution every 4 months (3x per year) with articles aligned with healthy behaviors, education on chronic disease prevention and management delivered to over 40,000 addresses in the region

Outcomes:

- Patients come to their appointments referencing BSC events
- Over 50% of event attendees state the Healthy Times is how they heard about the event

Strategy 2: Increase preventative medical visits

Tactics:

- Promote primary care services

Outcomes:

- Volumes continued to be maintained or increased at each clinic site.

Strategy 3: Employee wellness initiatives

Tactics:

- Sharing healthy articles with team via intranet
- Employee Light book club implemented

Outcomes:

- 52 healthy articles that relate to staff wellbeing posted on internal intranet (posted weekly)
- The clinic leadership team developed a leadership book club, where members of the leadership team read leadership development books and discuss at routine meetings.

Strategy 4: Continue chronic disease management efforts to improve optimal care outcomes

Tactics:

- Hire permanent diabetic educator
- Re-evaluated and altered our HTN workflows within the clinic, implemented, and are routinely evaluating efficacy.

Outcomes:

- Hired full-time diabetic educator. Reduced the percentage of patients aged 18-85 years old that have an A1C greater than 9 to 19 percent. Currently exceeding goal with only 15.7% of patients poorly controlling blood sugar.
- Increase the percentage of patients aged 18 to 85 years old to control blood pressure to 74 percent. Currently just below goal at 72.8% of patients.

Priority 2: Mental Health/Opioid-Use Disorder and Prescription Management

Strategy 1: Identification of patient population with opioid and mental health

Tactics:

- Identify patients using opioids and controlled substances on a consistent basis, increase controlled substance care plans for patients, decrease the number of patients chronically using opioids and controlled substances, identify gaps in mental healthcare provided to patients, provide medication-assisted treatment for patients addicted to opioids.
- Astera Health also participates in the State of Minnesota's Integrated Health Partnerships (IHP)[2]. The IHP strives to deliver higher quality and lower cost healthcare through innovative approaches to care and payment. Participants receive a population-based payment for care coordination and are required to design an intervention to address specific healthcare disparities observed. This equity intervention is an opportunity for IHPs to innovate and advance efforts such as community partnerships, screening, referral, and care coordination for social needs, plus other strategies to meet their population's needs.
- Screen 70% of all patients aged 12 years or older for depression and follow-up plan.

Outcomes

- Renewed updated contract with the IHP.
- Currently exceeding goal with 77.8% of all patients over 12 being screened for depression. If the screen is positive, they have a follow-up plan for clinical depression documented.

Strategy 2: Mental health service line assessment and strategic plan developed

Tactics:

- Recruit additional licensed independent clinical social worker
- Expand social services to satellite locations

Outcomes

- Additional social workers recruited and utilized for mental health assessment
- A social worker is available at every rural health clinic in our system

Strategy 3: Opioid plan execution

Tactics:

[2] State of Minnesota, *Integrated Health Partnerships*, 2025

- RN health coaching for opioid management. Support those who want help with addiction get onto suboxone; have gotten Narcan prescriptions for those prescribed opioids, provide Narcan for those who cannot afford it,
- Implement Sublocade injections in the clinic, are working to develop ER protocols for withdrawal, and to be in line with CDC and state guidelines are working to ensure that all patients prescribed controlled substances have a current controlled substance agreement with their provider.

Outcome:
- Program created: Addiction Relief - Astera Health

Collaboration**:** Wadena County CHAMP (Chemical Health Awareness and Multi-drug Prevention), Ottertail County Opioid Taskforce, local businesses, area health care agencies. The RN Opioid Health Coaches attend the CHAMP meetings with Wadena County as well as the Ottertail County Opioid Taskforce.

Priority 3: Social Determinants of Health: Focus on Adult Obesity

Strategy 1: Tracking/system/identification

Tactics:
- Develop and implement a system for the identification of social determinants of health of patients within electronic health record. We have identified and implemented a process within EPIC that assists in screening for social determinants of health.
- Determine and establish relationships with community stakeholders.
- Identify resources for social needs determined through a screening process. Provide list of resources to patients based on screening results. Social Services department will meet with the patient on request of the patient/provider. Successful
- Utilize data to determine patterns and trends of social challenges patients are facing

Outcomes:
- Social determinants of health screenings implemented in MyChart or at time of visit.
- Inaugural Community Health Forum held in 2025 with community stakeholders. Will meet bi-annually to share best practices, trends, and needs of those served.
- Resource list developed based on determinants. Patients can privately and safely access the list in exam rooms or restrooms. It is also available on our website.

Strategy 2: Increase primary care visits

Tactics:
- Promote primary care services
- Promote Well Child Exams/preventative visits.
- Referrals are placed to our Nutrition/Dietician services, when identified.

Outcomes:
- Promoted vaccination update visits with recent outbreaks of measles in our state.
- Developed provider education to assist in an increase of Nutrition/Dietician/Diabetic referrals.

Collaboration**:** Wadena County Public Health, Todd County Public Health, Becker County Public Health, and Ottertail County Public Health to provide 1 week well baby visits and postpartum visits.

Appendices

Substance Use

Smoking/Tobacco Use

Astera Health continues to offer 1:1 coaching to patients who smoke and have a desire to quit. The American Lung Association provides "America's gold standard in smoking cessation programs." This program has a positive focus on emphasizing the benefits of better health, improved lifestyle habits, and mastery of one's own life. The activities and assignments provide individuals who smoke with proven strategies for changing their behavior and lifestyle. In 2024, 48 patients were enrolled in the program and 6 successfully quit smoking.

Service Area Smoking Rates

	Wadena County	Otter Tail County	Todd County	MN Average
Adult Smoking	19%	20%	17%	13%

Source: 2025 County Health Rankings

The Minnesota Student Survey was developed in 1989 to monitor risk and protective behaviors among students. Beginning in 2013, grade-levels changed to 5, 8, 9, and 11 responded to the survey. While many categories remain consistent over time, others are adjusted to reflect current priority topics. Some categories include tobacco, alcohol, and other drug use; nutrition; physical activity; sexual behavior; school safety; mental health; and relationships. The survey is voluntary and anonymous. Results from substance use questions for Wadena County 11th graders from the most current survey in 2022 are below:

Use of conventional tobacco products (cigarettes, cigars, smokeless tobacco) during the last 30 days. (This is a computed variable based on combinations of responses to two or more survey items.)

	Count	%
No	96	88.9
Yes	12	11.1

Use of any tobacco products, including e-cigarettes and hookah, during the last 30 days. (This is a computed variable based on combinations of responses to two or more survey items.)

	Count	%
No	83	76.9
Yes	25	23.1

In your opinion, how often do you think MOST STUDENTS in your school use each of the following: Tobacco (cigarettes, chew)?

	Count	%
Never	33	32.7
Tried once or twice	26	25.7
Once or twice a year	8	7.9
Once a month	7	6.9
Twice a month	8	7.9
Once a week	12	11.9
Daily	7	6.9

Alcohol Use

Health Outcome[3]	Wadena	Otter Tail	Todd	MN
Excessive Drinking	24%	25%	23%	23%
Alcohol-Impaired Driving Deaths	27%	35%	29%	31%

Results from alcohol use questions for Wadena County 11th graders from the most current Minnesota Student Survey in 2022 are below:

During the last 30 days, on how many days did you drink one or more drinks of an alcoholic beverage?

	Count	%
0 days	87	81.3
1 to 2 days	13	12.1
3 to 5 days	3	2.8
6 to 9 days	4	3.7

During the last 12 months, on how many occasions (if any) have you had alcoholic beverages to drink?

	Count	%
0	73	68.9
1 to 2	9	8.5
3 to 5	8	7.5
6 to 9	6	5.7
10 to 19	4	3.8
20 to 39	3	2.8
40 or more	3	2.8

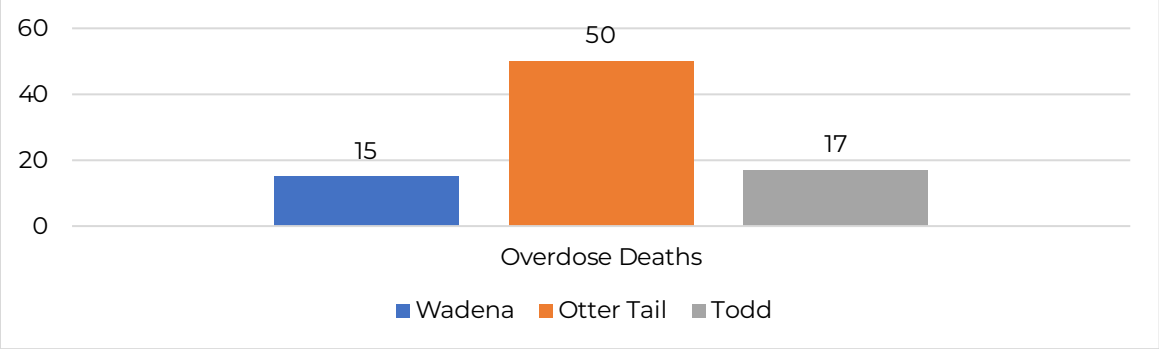
How often do you use the following? Alcohol (beer, wine, liquor)

	Count	%
Never	60	58.8
Tried once or twice	15	14.7
Once or twice a year	10	9.8
Once a month	8	7.8
Twice a month	6	5.9
Once a week	2	2.0
Daily	1	1.0

Drug Use

There have been 3,313 drug overdose deaths[4] from 2014-2023 in Greater Minnesota. Otter Tail County has experienced more overdose deaths in that period compared to Wadena and Todd Counties.

[3] County Health Rankings and Roadmaps: A Healthier Nation County by County, 2025
[4] Drug Overdose Deaths by County (2014 – 2023*)



From 2014 through 2023, Wadena, Todd, and Otter Tail counties have experienced a steady increase in drug overdose fatalities, mirroring statewide trends. Preliminary data for 2023 shows continued high rates, particularly driven by synthetic opioid involvement. Lack of demographic details limits subgroup analysis, but local EMS, hospital, and public health partners confirm increased burden among rural white adult populations and rising involvement of fentanyl.

Results from alcohol and drug use questions for Wadena County 11th graders from the most current Minnesota Student Survey in 2022 are below. The students report they do not use drugs themselves but report their peers have tried or use drugs.

During the last 12 months, on how many occasions (if any) have you used LSD (acid), PCP (wet sticks or dipped joints), or other psychedelics (mushrooms, angel dust)?

	Count	%
0	105	98.1
3 to 5	1	.9
20 or more	1	.9

During the last 12 months, on how many occasions (if any) have you used MDMA (E, X, ecstasy, Molly), GHB (G, Liquid E, Liquid X, roofies) or Ketamine (Special K)?

	Count	%
0	105	97.2
1 to 2	1	.9
10 to 19	1	.9
20 or more	1	.9

During the last 12 months, on how many occasions (if any) have you used crack, coke or cocaine in any form?

	Count	%
0	106	98.1
6 to 9	1	.9
20 or more	1	.9

How much do you think people risk harming themselves physically or in other ways if they use marijuana once or twice per week?

	Count	%
No risk	32	30.2
Slight risk	27	25.5
Moderate risk	25	23.6
Great risk	22	20.8

How much do you think people risk harming themselves physically or in other ways if they use prescription drugs not prescribed for them?

	Count	%
No risk	19	17.9
Slight risk	6	5.7
Moderate risk	28	26.4
Great risk	53	50.0

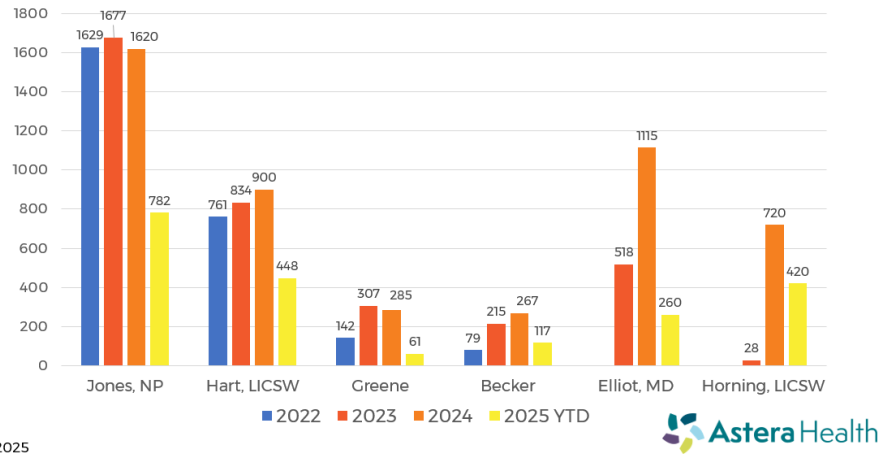
In your opinion, how often do you think most students in your school use the following? Marijuana (pot, hash, hash oil)

	Count	%
Never	49	49.0
Tried once or twice	16	16.0
Once or twice a year	5	5.0
Once a month	6	6.0
Twice a month	7	7.0
Once a week	10	10.0
Daily	7	7.0

Mental Health

Astera Health's psychiatry and therapy professionals provide services to those needing medication management, ongoing individual therapy, and other psychiatric services. Astera Health employs a full-time certified nurse practitioner specializing in the field of psychiatry to meet the increasing demand for mental health services and a licensed independent clinical social worker. Together, we pledge to work with patients and families to provide individualized treatment and improved quality of life.

BEHAVIORAL HEALTH VISITS



07/01/2025

Astera Health

Results from mental health questions for Wadena County 11th graders from the most current Minnesota Student Survey in 2022 are below:

Do you have any long-term mental health, behavioral or emotional problems? Long-term means lasting 6 months or more.

	Count	%
Yes	27	25.0
No	81	75.0

Have you ever been treated for a mental health, emotional or behavioral problem? (Mark all that apply)

	Count	%
No	77	72.0
Yes, during the last year	19	17.8
Yes, more than a year ago	15	14.0

Over the past 2 weeks, how often have you been bothered by little interest or pleasure in doing things?

	Count	%
Not at all	31	29.0
Several days	51	47.7
More than half the days	14	13.1
Nearly every day	11	10.3

I feel good about myself.

	Count	%
Not at all or rarely	13	12.1
Somewhat or sometimes	36	33.6
Very or often	46	43.0
Extremely or almost always	12	11.2

I say no to things that are dangerous or unhealthy.

	Count	%
Not at all or rarely	6	5.6
Somewhat or sometimes	31	29.0
Very or often	35	32.7
Extremely or almost always	35	32.7

During the last 12 months, how many times did you do something to purposely hurt or injure yourself without wanting to die, such as cutting, burning, or bruising yourself on purpose?

	Count	%
0 times	82	77.4
1 or 2 times	5	4.7
3 to 5 times	5	4.7
6 to 9 times	4	3.8
10 to 19 times	5	4.7
20 or more times	5	4.7

Have you ever seriously considered attempting suicide? (Mark all that apply)

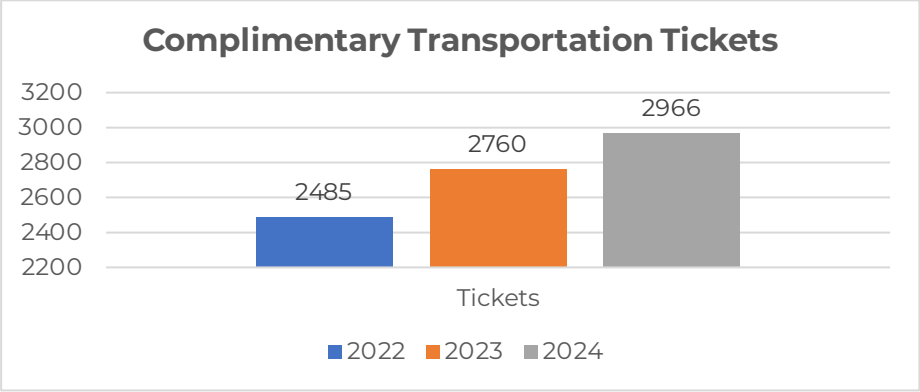
	Count	%
No	82	76.6
Yes, during the last year	16	15.0
Yes, more than a year ago	12	11.2

Have you ever actually attempted suicide? (Mark all that apply)

	Count	%
No	94	87.9
Yes, during the last year	3	2.8
Yes, more than a year ago	11	10.3

Transportation Assistance

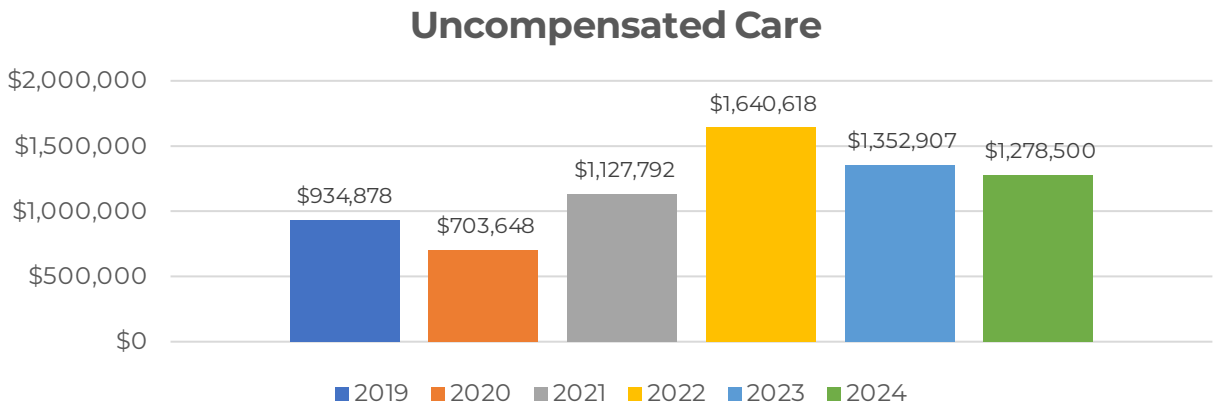
Transportation needs are great in our region. Friendly Rider is curb-to-curb transportation offered to and from many locations within our service area. The service is provided based on space availability and is open to the general public. All buses are wheelchair and handicap accessible.



Astera Health offers complimentary tickets to patients needing transportation assistance for healthcare. With this support from Astera Health, Friendly Rider has helped ensure patients have a safe way to travel for their care. This service allows individuals to stay in their communities longer and remain self-sufficient.

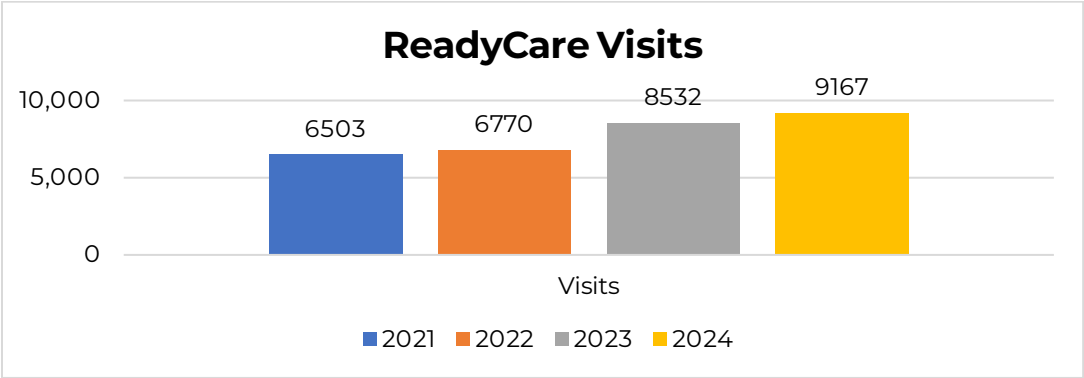
Uncompensated Care Program

Astera Health provides free or reduced rates for services for individuals with a financial need. The amount of uncompensated care Astera Health has provided in our service area remains to be over $1 million each year.



ReadyCare

Our ReadyCare service, also known as urgent care, gives patients a choice of timely, affordable, and quality same-day, walk-in, and same-day appointments for non-emergency but urgent illnesses and injuries. Expanding access to primary care, ReadyCare is available six days per week, Monday through Saturday. ReadyCare volumes continue to increase year-over-year, while reducing more expensive visits to the Emergency Room.

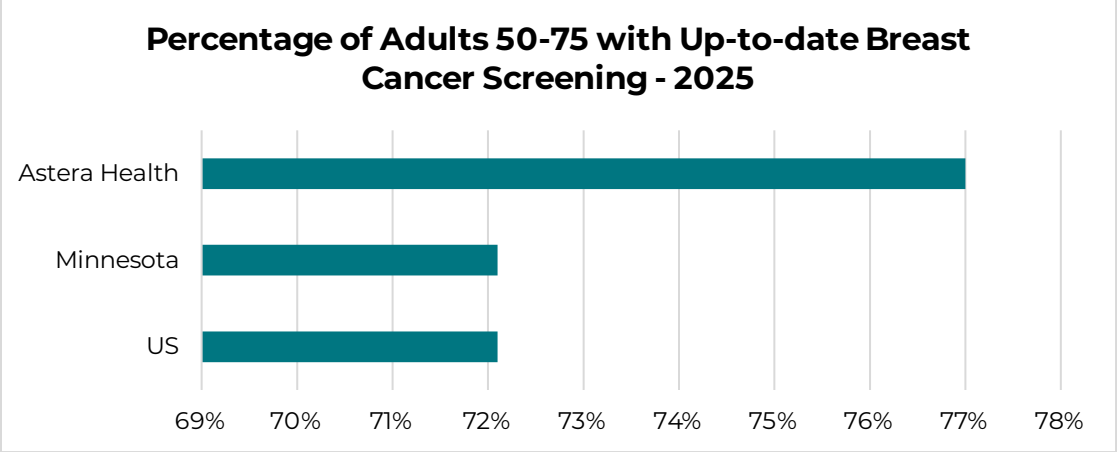


Cancer

Breast Cancer

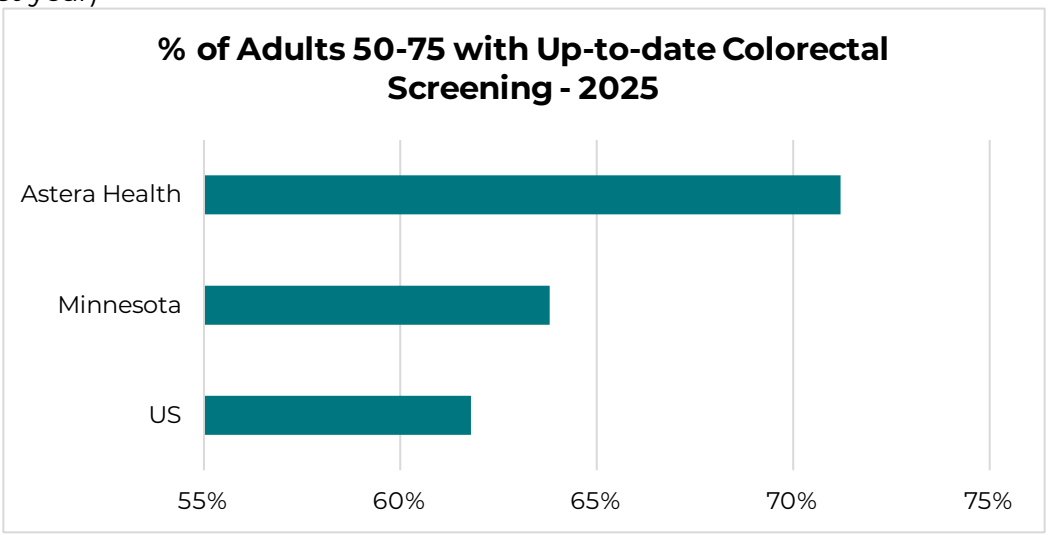
In 2018, 4,500 women were diagnosed with invasive breast cancer in Minnesota (an increase of 400 women from 2012). Breast cancer is the most commonly diagnosed cancer in women, accounting for nearly one out of every three cancers.

Astera Health screened 77 percent of eligible patients for breast cancer as of July of 2025, higher than the US and Minnesota percentages.



Colon Cancer

Astera Health has made great strides in increasing the colorectal screenings of patients through personalized care by providers and health coaches and since our last CHNA exceeds the Minnesota and US averages. The chart below indicates the percentage of adults ages 45-75 who reported receiving one or more of the recommended colorectal cancer screening tests within the recommended time interval (blood stool test within the past year; sigmoidoscopy within the past five years; colonoscopy within the past 10 years; stool DNA test within the past three years; virtual colonoscopy within the past five years or sigmoidoscopy within the past 10 years and blood stool test in the past year)[5]



Chronic Disease

Hypertension

Astera Health has made significant improvements in blood pressure monitoring and created quality goal to measure progress. Our goal for 2025 is to have 74 percent of patients controlling their blood pressure and we are currently at 72.8%.

Diabetes

[5] America's Health Rankings analysis of U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, United Health Foundation, AmericasHealthRankings.org, accessed 2025.

Optimal Diabetes Care is achieved when a patient meets all five measures in the Minnesota Community Measurement Diabetic Measure set. These measures are blood pressure, Hemoglobin A1C in good control, Tobacco free, Daily Aspirin if indicated, and use of a Statin medication for high cholesterol.

According to the Minnesota Department of Health, in 2024, 10.5 percent of Minnesota adults were diagnosed with diabetes (Type 1 or 2), up from 8.8 percent in 2020. Around 24,000 new cases are diagnosed each year. Around 1 in 10 people with diabetes do not know they have the disease[6].

Astera Health has a strategic quality goal to decrease the percent of patients with poorly controlled blood sugar; which is having an A1C over 9. We are exceeding our goal of less than 19 percent of patients and we are currently at 15.7 percent.

Obesity

A Body Mass Index (BMI) of 25.0-29.9 is considered overweight, and more than 30.0 is obese. Both measures are considered unhealthy weight.

People who have obesity, compared to those with normal or healthy weight, are at increased risk for[7]:

- High blood pressure
- Type 2 diabetes
- Coronary heart disease
- Stroke
- Osteoarthritis (a breakdown of cartilage and bone within a joint)
- Sleep apnea and breathing problems
- Cancers such as endometrial, breast, colon, kidney, gallbladder, and liver
- Low quality of life
- Mental illnesses such as clinical depression, anxiety, and other mental disorders
- Body pain and difficulty with physical functioning

All counties in our service area are above the state average of obese residents as well as physical inactivity.

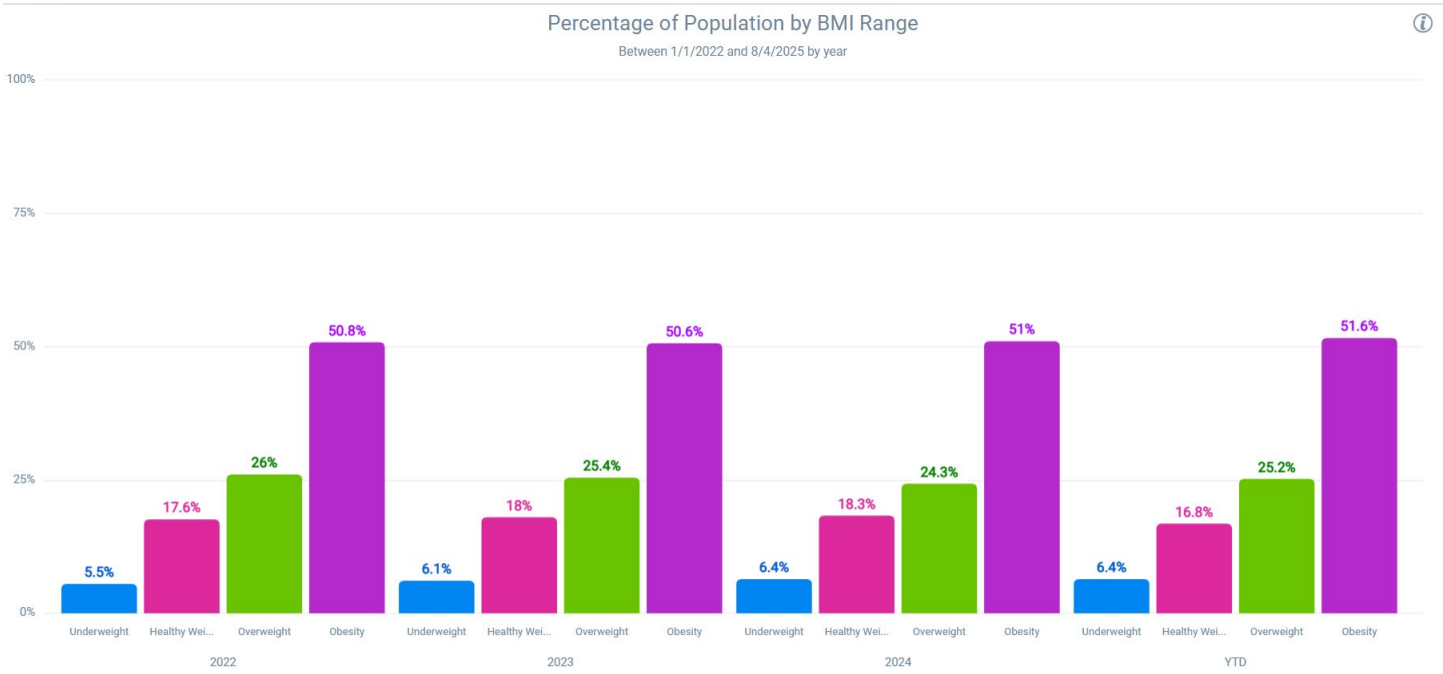
Health Outcome[8]	Wadena	Otter Tail	Todd	MN
Adult Obesity	43%	38%	41%	34%
Physical Inactivity	24%	27%	24%	20%

[6] https://www.health.state.mn.us/diseases/diabetes/data/diabetesfacts.html

[7] http://www.cdc.gov/obesity/adult/causes.html

[8] County Health Rankings and Roadmaps: A Healthier Nation County by County, 2025

BMI is tracked at Astera Health for all patients. The chart below shows steady rates since 2021.



Community Health Needs Assessment Public Survey Results:
https://www.arcgis.com/apps/dashboards/f628d6b55b2c4198b66dad69f51967fa

Other Initiatives

Health Coaches

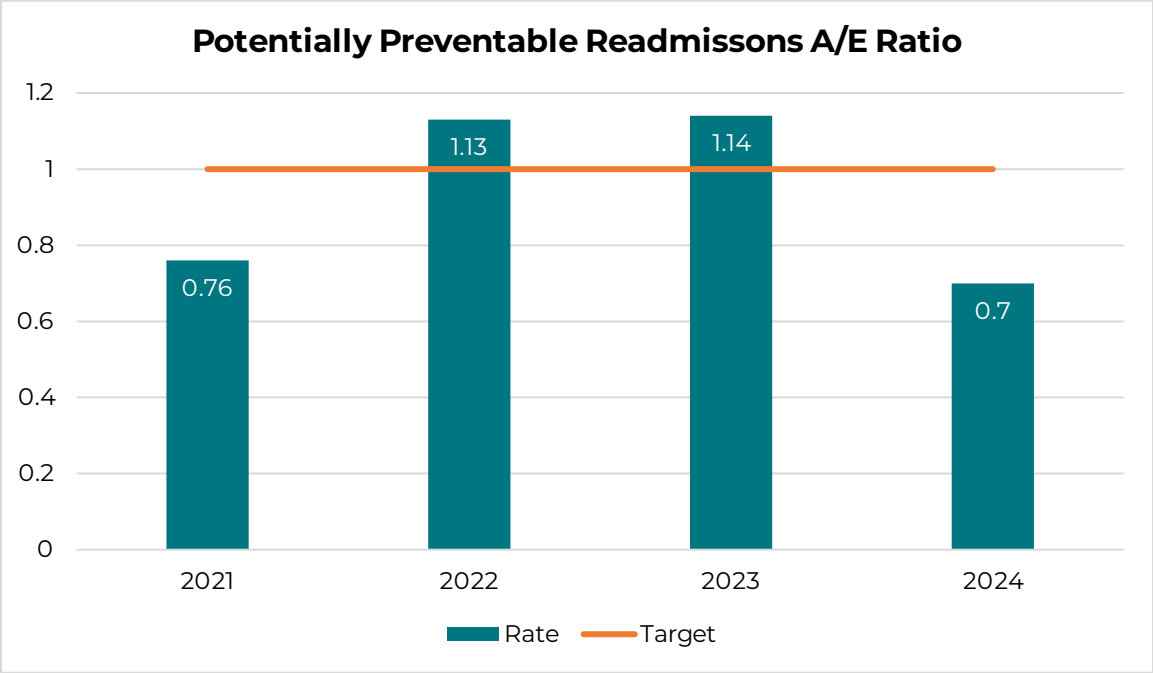
Astera Health incorporates health coaches to help deliver team-based care between the patient, the patient's family, and the primary healthcare team by serving a role in disease management through setting health related goals, providing disease specific education, assisting in obtaining tools to help reach goals, support as appropriate, identifying worrisome signs and symptoms that need immediate attention, and assisting with appropriate referrals to specialty departments and/or community resources.

There are five registered nurses in the health coach department at Astera Health. The health coaches work with care teams in the Wadena Clinic and satellite clinics to improve efficiency and communication between providers, staff, and patients. The focus of the health coaches has been working with patients to self-manage their congestive heart failure diagnosis, individual coaching to aid in nicotine cessation, and those patients with hypertension, along with opioid/controlled substance management and Suboxone/Sublocade therapy.

Astera Health received recognition and increased level of certification - Health Care Home Level 3. HCH leaders specifically recognized Astera's care management model that incorporated program coordinators and health coaches in response to the Community Health Needs Assessment (CHNA), communication with team members, patients and families through publications, digital screens, and community education sessions, and your above average adult depression six-month remission rates.

Community Paramedic Program

Astera Health began its Community Paramedic Program in January 2014. The goal of the Community Paramedic Program is to help patients become more independent and confident in their healthcare. This may mean medication reconciliation, lifestyle changes, ideas to promote home safety, or equipment modifications/recommendations shared with the patient to keep them healthy and out of the hospital.



County Health Rankings & Roadmaps

Compare Counties

Select from all counties or choose based on demographic, social and economic indicators.

Select year: 2025

To add any additional locations, an existing selection will need to be removed.

Select | Additional

		Wadena, MN	Otter Tail, MN	Todd, MN	Minnesota
		Remove Location	Remove Location	Remove Location	Remove Location
Population Health and Well-being					
Length of life		Wadena, MN	Otter Tail, MN	Todd, MN	Minnesota
Life Expectancy		77.1	78.9	80.9	79.3
Premature Age-Adjusted Mortality		370	330	330	320
Child Mortality		60	40	40	40
Infant Mortality			5		5
Quality of life		Wadena, MN	Otter Tail, MN	Todd, MN	Minnesota
Frequent Physical Distress		13%	13%	13%	10%
Diabetes Prevalence		10%	10%	10%	9%
HIV Prevalence		77	49	24	197
Adult Obesity		43%	38%	41%	34%
Frequent Mental Distress		18%	19%	18%	16%
Suicides		16	20	19	14
Feelings of Loneliness		32%	29%	33%	31%
Community Conditions					

Health infrastructure		Wadena, MN	Otter Tail, MN	Todd, MN	Minnesota
Limited Access to Healthy Foods		2%	6%	11%	6%
Food Insecurity		12%	10%	11%	9%
Insufficient Sleep		31%	34%	31%	30%
Teen Births		17	12	20	9
Sexually Transmitted Infections		174.7	143.8	262.4	386.1
Excessive Drinking		24%	25%	23%	23%
Alcohol-Impaired Driving Deaths		27%	35%	29%	31%
Drug Overdose Deaths			9		22
Adult Smoking		19%	20%	17%	13%
Physical Inactivity		24%	27%	24%	20%
Uninsured Adults		8%	7%	9%	6%
Uninsured Children		4%	5%	7%	3%
Other Primary Care Providers		310:1	1,100:1	2,140:1	620:1
Physical environment		Wadena, MN	Otter Tail, MN	Todd, MN	Minnesota
Traffic Volume		26	27	14	135
Homeownership		73%	79%	83%	72%
Severe Housing Cost Burden		9%	9%	9%	11%
Access to Parks		4%	2%		61%
Adverse Climate Events		2	1	2	
Census Participation		64.6%	57.6%	60.0%	
Voter Turnout		76.7%	80.8%	72.8%	79.7%
Social and economic factors		Wadena, MN	Otter Tail, MN	Todd, MN	Minnesota
High School Graduation		79%	83%	93%	84%
Reading Scores			3.2	2.8	3.1
Math Scores			3.4	3.0	3.3
School Segregation		0.05	0.12	0.24	0.24
School Funding Adequacy		$75	$1,942	-$3,856	$2,332
Children Eligible for Free or Reduced Price Lunch		58%	45%	59%	43%
Gender Pay Gap		0.80	0.79	0.79	0.83
Median Household Income		$55,400	$69,100	$61,000	$85,100

Living Wage		$41.19	$45.28	$42.50	$55.66
Child Care Centers		3	4	6	6
Residential Segregation - Black/White		56	78		62
Homicides			3		3
Motor Vehicle Crash Deaths		17	10	15	8
Firearm Fatalities		14	15	11	9
Disconnected Youth			3%	13%	5%
Lack of Social and Emotional Support		22%	20%	23%	7%
Demographics		Wadena, MN	Otter Tail, MN	Todd, MN	Minnesota
% Below 18 Years of Age		26.5%	21.7%	24.5%	22.7%
% 65 and Older		20.3%	26.0%	23.9%	17.8%
% Female		49.9%	49.2%	48.0%	49.9%
% American Indian or Alaska Native		0.9%	0.8%	0.9%	1.4%
% Asian		0.5%	0.5%	0.5%	5.5%
% Hispanic		2.7%	3.9%	10.2%	6.5%
% Native Hawaiian or Other Pacific Islander		0.0%	0.1%	0.2%	0.1%
% Non-Hispanic Black		1.0%	1.5%	0.6%	7.6%
% Non-Hispanic White		93.0%	92.0%	86.9%	76.9%
% Disability: Functional Limitations		30%	30%	31%	25%
% Not Proficient in English		0%	1%	3%	2%
Children in Single-Parent Households		21%	14%	16%	19%
% Rural		71.8%	77.9%	99.4%	28.1%
Population		14,241	60,626	25,667	5,737,915

Note: Blank values reflect unreliable or missing data.

County Health Rankings & Roadmaps

Compare Counties

Select from all counties or choose based on demographic, social and economic indicators.

Select year: 2025

To add any additional locations, an existing selection will need to be removed.

Select | Additional

		Wadena, MN	Otter Tail, MN	Todd, MN	Minnesota
		Remove Location ☐	Remove Location ☐	Remove Location ☐	Remove Location ☐
Population Health and Well-being					
Length of life		Wadena, MN	Otter Tail, MN	Todd, MN	Minnesota —
Premature Death		6,300	6,900	7,100	6,500
Quality of life		Wadena, MN	Otter Tail, MN	Todd, MN	Minnesota —
Poor Physical Health Days		3.9	3.5	4.1	3.4
Low Birth Weight		7%	6%	5%	7%
Poor Mental Health Days		5.3	5.0	5.1	5.0
Poor or Fair Health		17%	17%	17%	14%
Community Conditions					
Health infrastructure		Wadena, MN	Otter Tail, MN	Todd, MN	Minnesota —
Flu Vaccinations		22%	48%	20%	53%
Access to Exercise Opportunities		40%	51%	40%	86%
Food Environment Index		8.6	8.7	7.9	9.0
Primary Care Physicians		2,030:1	1,880:1	1,200:1	1,130:1

Mental Health Providers		260:1	620:1	3,670:1	280:1
Dentists		1,300:1	1,440:1	2,130:1	1,290:1
Preventable Hospital Stays		1,732	1,570	2,392	2,255
Mammography Screening		55%	54%	55%	52%
Uninsured		6%	7%	8%	5%
Physical environment		Wadena, MN	Otter Tail, MN	Todd, MN	Minnesota
Severe Housing Problems		13%	11%	14%	13%
Driving Alone to Work		77%	74%	72%	70%
Long Commute - Driving Alone		28%	26%	32%	30%
Air Pollution: Particulate Matter		5.1	5.8	5.6	6.0
Drinking Water Violations		No	Yes	No	
Broadband Access		84%	86%	79%	91%
Library Access		2	5	2	2
Social and economic factors		Wadena, MN	Otter Tail, MN	Todd, MN	Minnesota
Some College		66%	71%	48%	75%
High School Completion		91%	94%	89%	94%
Unemployment		4.7%	3.3%	3.6%	2.8%
Income Inequality		4.6	4.2	3.7	4.2
Children in Poverty		15%	12%	14%	10%
Injury Deaths		86	76	82	77
Social Associations		18.2	18.2	19.2	12.4
Child Care Cost Burden		32%	33%	29%	30%

Note: Blank values reflect unreliable or missing data.