

Community Health Improvement

Strategic Action Plan Fiscal Year 2026 - 2028

CHI Health Nebraska Heart – Lincoln, NE

A Joint Plan

Board Approved October 2025



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At-a-Glance Summary

Community Served 	For the purposes of the NNH Community Health Needs Assessment, the primary service area was defined as Lancaster County, NE, based on patient data for CHI Health St. Elizabeth and NHH, 2 consideration of the county in which the hospitals are located, and partnering organization's service areas. Zip Codes Corresponding to 80% of IP Admissions to St. Elizabeth's and Nebraska Heart Hospital: 68003, 68017, 68033, 68042, 68050, 68065, 68066, 68070, 68301, 68304, 68305, 68307, 68310, 68317, 68320, 68323, 68324, 68328, 68329, 68331, 68332, 68333, 68336, 68339, 68341, 68343, 68344, 68346, 68347, 68348, 68349, 68352, 68355, 68357, 68358, 68360, 68366, 68368, 68372, 68376, 68377, 68378, 68379, 68380, 68402, 68404, 68405, 68407, 68410, 68417, 68418, 68419, 68420, 68421, 68422, 68423, 68424, 68428, 68430, 68434, 68437, 68441, 68442, 68443, 68446, 68447, 68448, 68450, 68454, 68458, 68461, 68462, 68463, 68465, 68502, 68503, 68504, 68505, 68506, 68507, 68508, 68510, 68512, 68514, 68516, 68517, 68520, 68521, 68522, 68523, 68524, 68526, 68527, 68528, 68531, 68532, 68583
Significant Community Health Needs Being Addressed 	The significant community health needs the hospital is helping to address and that form the basis of this document were identified in the hospital's most recent Community Health Needs Assessment (CHNA). Needs the hospitals intends to address with strategies and programs are: • Access to Care • Depression • Suicide
Strategies and Programs to Address Needs 	The hospital intends to take actions and to dedicate resources to address these needs, including: • Access to Care: ◦ Engage with community partners and key service providers in existing efforts to improve access points and coordination of health care services across the City of Lincoln and Lancaster County. ◦ Expand evidence-based chronic disease management programs. ◦ Align primary and cardiovascular specialty care. ◦ Enhance care coordination for Health Related Social Needs ◦ Continue to support maternal/child health home visits.

- Invest in community-based organizations capacity to deliver community health programs
- Enhance access to comprehensive healthcare and improve care coordination for patients with chronic diseases and health-related social needs through targeted interventions in hypertension management, cancer screenings, and well-child checks, leveraging collaborative partnerships and continuous medical education to drive quality improvement.
- Offer free medical clinic services to expand access to care

- **Behavioral Health (Depression and Suicide)**

- Firearm Safety
- Education on Adverse Childhood Experiences (ACE) through community partnership with BraveBe
- Mental Health First Aid Training
- Depression Screening
- Age-friendly initiatives
- Provide peer support within the Neonatal Intensive Care Unit (NICU) setting to empower families and improve their access to behavioral health resources
- Provide a postpartum alert program
- Increase access to behavioral health care for cancer survivors by providing targeted education and psychosocial distress screenings to identify and address their unique mental health needs.

Planned resources and collaborators to help address these needs, as well as anticipated impacts of the strategies and programs, are described in the “Strategies and Program Activities by Health Need” section of the document.

This document is publicly available online at the hospital's website. Written comments on this strategy and plan can be submitted to the Administration Office of CHI Health Nebraska Heart. Written comments on this report can be submitted via mail to CHI Health - The McAuley Fogelstrom Center (12809 W Dodge Rd, Omaha, NE 68154 attn. Healthy Communities); [electronically](#) at: <https://forms.gle/KGRq62swNdQyAehX8> or by calling Ashley Carroll, Market Director, Community and Population Health, at: (402) 343-4548.

Our Hospital and the Community Served

About the Hospital

CHI Health Nebraska Heart is a part of CommonSpirit Health, one of the largest nonprofit health systems in the U.S., with more than 2,200 care sites in 24 states coast to coast, serving patients in big cities and small towns across America.

CHI Health Nebraska Heart Overview:

CHI Health NHH is in Lincoln, Nebraska. NHH has 200 employees, is focused on cardiac care, and operates 63 beds. NHH services are also listed below.

Nebraska Heart Services and Treatment Areas:

- 64-Slice CT Scanning • Anticoagulation Clinic
- Atrial Fibrillation
- Cardiovascular Health & Lipid Clinic
- Carotid Intima-Media Thickness
- Chest Pain Center
- Coronary Artery Bypass
- Echocardiogram
- Electrophysiology/Arrhythmia
- General Cardiology
- Heart Failure
- Heart Valve Center
- Holter Monitoring
- Imaging
- MUGA Heart Scan
- Nuclear Stress Test
- Pacemaker/ICD
- Stents
- Structural Heart
- TAVR
- Trans-myocardial Revascularization
- Treadmill Stress Test
- Valvular Procedures
- Vascular Disease
- Vein Clinic
- Women's Heart Program

Our Mission

The hospital's dedication to assessing significant community health needs and helping to address them in conjunction with the community is in keeping with its mission. As CommonSpirit Health, we make the healing presence of God known in our world by improving the health of the people we serve, especially those who are vulnerable, while we advance social justice for all.

Financial Assistance for Medically Necessary Care



It is the policy of CommonSpirit Health to provide, without discrimination, emergency medical care and medically necessary care in CommonSpirit hospital facilities to all patients, without regard to a patient's financial ability to pay.

This hospital has a financial assistance policy that describes the assistance provided to patients for whom it would be a financial hardship to fully pay the expected out-of-pocket expenses for such care, and who meet the eligibility criteria for such assistance. The financial assistance policy, a plain language summary and related materials are available in multiple languages on the hospital's website.

Description of the Community Served

CHI Health St. Elizabeth and NHH have the same service area and considers its primary community to be the City of Lincoln and the surrounding County (Lancaster). Hospital leadership considered the county in which the hospital is located and the zip codes that represent 80% of discharges, and determined the CHNA service area to be the county as many of the zip codes that fall outside of the county are served by other healthcare organizations who are better suited to support local health needs (Figure 1). NHH is a specialty hospital with a broader catchment area, as seen by the list of zip codes below. For the purposes of this CHNA, NHH used the same service area as CHI Health St. Elizabeth. Lancaster County also aligns with the defined service area for the local public health department, Lincoln Lancaster County Health Department (LLCHD).

Figure 1: CHI Health Lincoln CHNA Service Area, Lancaster County, Nebraska

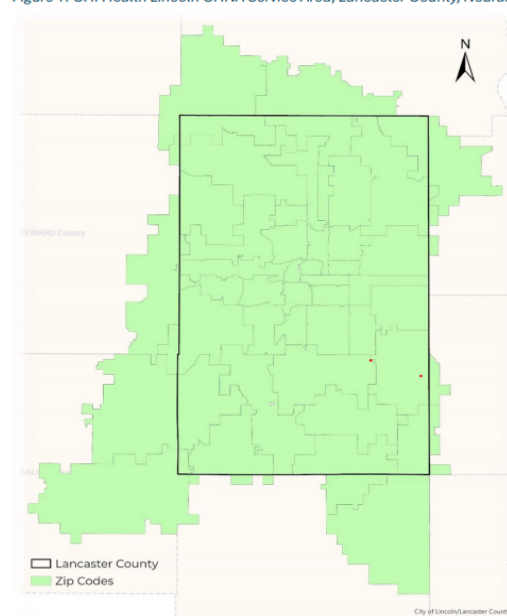


Figure 1: CHI Health Nebraska Heart CHNA Service Area - Lancaster County, NE.

Community Description

CHI Health Nebraska Heart is located in Lincoln, NE. The U.S. Census Bureau, the 2022 population estimate for Lancaster County is 322,063. Of this population, 90.3% resides in urban areas, reflecting Lancaster County's largely urban demographic. The historical trend of increased racial and ethnic diversity continues in both Lincoln and

Lancaster County. The city of Lincoln, the county seat, is also the capital city of Nebraska. Lincoln is the second largest city in Nebraska, behind Omaha.

With four post-secondary educational institutions, the community has a lower-than-average percentage of owner-occupied housing than the state and nation (59.3% Lancaster County, 66.5% Nebraska, 64.8% United States), but a higher educational attainment of a bachelor's degree or higher among the population 25 years and over (40.9%, 33.5%, 35.7%, respectively). Lancaster County hosts over 40 active neighborhood associations and operates under a strong Mayor form of municipal governance with an active City Council. Since the 1980s, the community has welcomed refugees from around the world. Initially, immigrants primarily came from Vietnam, but in recent decades, refugees and immigrants have arrived from Africa, Europe, Russia, the Middle East, and the Far East. Additionally, there has been a steady influx of Latinx residents over several decades. The community has developed numerous social support services and embraced its growing diversity. However, challenges remain in addressing the health needs of new Americans and minorities unfamiliar with the U.S. healthcare system. Lancaster County's demographic changes since 2012 reflect the increased diversity as shown in the tables below. Over the decade from 2012 to 2022, Black (27.6%), American Indian and Alaska Native (106.4%), Asian (39.5%), multiracial (95.9%) and Hispanic or Latino (38.6%) residents have increased as a proportion of the total population faster than the White population.

Socioeconomic Factors

The median household income in 2022 was \$70,387 for households, \$94,679 for families, \$110,774 for married-couple families and \$43,121 for non-family households (U.S. Census Bureau, n.d.). In 2022, the percentage of family households in poverty was 6.7%. For households with children 12 under 18 years the poverty rate was 11.0%. Households with female householders (and no spouse present and children under 18 years), had a poverty rate of 27.4%, while married-couple families had a poverty rate of 3.4%. According to the Nebraska Department of Education, the largest school district in Lancaster County, Lincoln Public Schools, has 41,850 students and 3,045 teachers (Nebraska Department of Education, n.d.). About 7% of those are English learners (limited English proficiency) compared to 8% statewide. Also, 47% of students are on free/reduced lunch, compared to 50% statewide. The attendance rate is 92% (93% statewide) and the dropout rate is 3% (1% statewide). The graduation rate (82%) is lower than the state overall (87%), but the college-going rate is slightly higher (76%) compared to the state of Nebraska (73%).

Health Professional Shortage Areas (HPSA) and Medically Underserved Areas (MUA)

Lancaster County is considered a Medically Underserved Area (MUA) in Primary Care with an Index of Medical Underserved Score of 60.4 (to qualify for this designation, the

score must be below or equal to 62.0 on a scale of 0 - 100 with 100 being the lowest need), (Health Resources & Services Administration).

Community Assessment and Significant Needs

The health issues that form the basis of the hospital's community health implementation strategy and plan were identified in the most recent CHNA report, which was adopted in April, 2025. The CHNA report includes:

- Description of the community assessed consistent with the hospital's service area;
- Description of the assessment process and methods;
- Data, information and findings, including significant community health needs;
- Community resources potentially available to help address identified needs; and
- Impacts of actions taken by the hospital since the preceding CHNA.

Additional details about the needs assessment can be found in the CHNA report, which is publicly available on the hospital's website or upon request from the hospital, using the contact information in the At-a-Glance Summary.

Significant Health Needs

The CHNA identified the significant needs in the table below, which also indicates which needs the hospital intends to address. Identified needs may include specific health conditions, behaviors or health care services, and also health-related social and community needs that have an impact on health and well-being.

Significant Health Need	Description	Intend to Address?
Access to Healthcare	In 2022, 7.0% of Lancaster County residents aged 18 to 64 reported lacking health care coverage. Additionally, 79.0% of respondents indicated they had a routine checkup in the past year. However, 10.2% of residents reported needing to see a doctor but were unable to do so due to cost. Furthermore, 16.7% of respondents indicated they did not have a personal doctor or healthcare provider.	Yes
Depression	According to data from 2022, 17.8% of adults in Lancaster County reported ever being diagnosed with depression by a healthcare professional, with higher prevalence	Yes

Significant Health Need	Description	Intend to Address?
	proportions observed among younger adults (ages 18 to 24) and females. Over the past decade, the percentage of adults ever diagnosed with depression in our community has remained relatively stable, ranging from 16.8% to 20.9%. Notably, the prevalence of depression in Lancaster County is slightly higher than the state percentage for Nebraska, yet lower than the national percentage.	
Suicide	Over the past decade, data among high school students reveal a steady increase in suicidal ideation, rising from 12.4% in 2011 to 19.6% in 2023, and in suicide planning, which grew from 10.6% in 2011 to 15.0% in 2023. In contrast, the rate of suicide attempts among this demographic has decreased significantly, falling from 11.2% in 2011 to 5.9% in 2023. However, deaths due to suicide among all ages have been steadily increasing, from 13.2 deaths per 100,000 persons in 2018 to 14.2 deaths per 100,000 persons in 2023.	Yes

Significant Needs the hospital is addressing in this implementation plan based on the Community Health Needs Assessment priorities are Behavioral Health (Suicide and Depression) and Access to care.

2025 Implementation Strategy and Plan

This section presents strategies and program activities the hospital intends to deliver, fund or collaborate with others to address significant community health needs over the next three years, including resources for and anticipated impacts of these activities.



Planned activities are consistent with current significant needs and the hospital's mission and capabilities. The hospital may amend the plan as circumstances warrant, such as changes in community needs or resources to address them.

Creating the Implementation Strategy

The hospital is dedicated to improving community health and delivering community benefit with the engagement of its staff, clinicians and board, and in collaboration with community partners.

Hospital and health system participants in the community input meeting included the President, Chief Medical Officer, Director of Mission, Market Chief Nursing Officer, Chief Nursing Officer, Director Critical Care Service, Director Women and Children, Chief Development Officer, Registered Nurse Care Management, Manager Healthier Communities, Violence Prevention Coordinator.

Community input or contributions to this implementation strategy included working with community partners to provide input throughout planning. Community partners included: Public Health Epidemiologist, Performance Management, and Health Director of Lincoln-Lancaster County Health Department.

CHI Health Nebraska Heart hosted the Community Health Needs Assessment/Implementation Strategy prioritization community input meeting. Attendees reviewed survey findings, compared them to their own perceptions of community needs, and discussed the demographics of survey respondents. The health needs identified by participants mirrored those from the 2022 CHNA, and attendees concurred that these issues remain priority community health needs. This conclusion was also reflected in the survey findings. For the upcoming three-year CHNA cycle, Access to Care and Behavioral Health (Suicide and Depression), were prioritized.

The programs and initiatives described here were selected on the basis of...

- Severity and impact on other health need areas
- Hospitals' expertise and ability to make impact
- Community's interest in the hospital engaging in this work
- Existing work engaging various community partners
- Political will to address systemic barriers

Community Health Core Strategies

The hospital believes that program activities to help address significant community health needs should reflect a strategic use of resources. CommonSpirit Health has established three core strategies for community health improvement activities. These strategies help to ensure that program activities overall address strategic aims while meeting locally-identified needs.

- Core Strategy 1: Extend the care continuum by aligning and integrating clinical and community-based interventions.
- Core Strategy 2: Implement and sustain evidence-informed health improvement strategies and programs.
- Core Strategy 3: Strengthen community capacity to achieve equitable health and well-being.

Vital Conditions and the Well-Being Portfolio

Community health initiatives at CommonSpirit Health use the Vital Conditions framework and the Well-Being Portfolio¹ to help plan and communicate about strategies and programs.

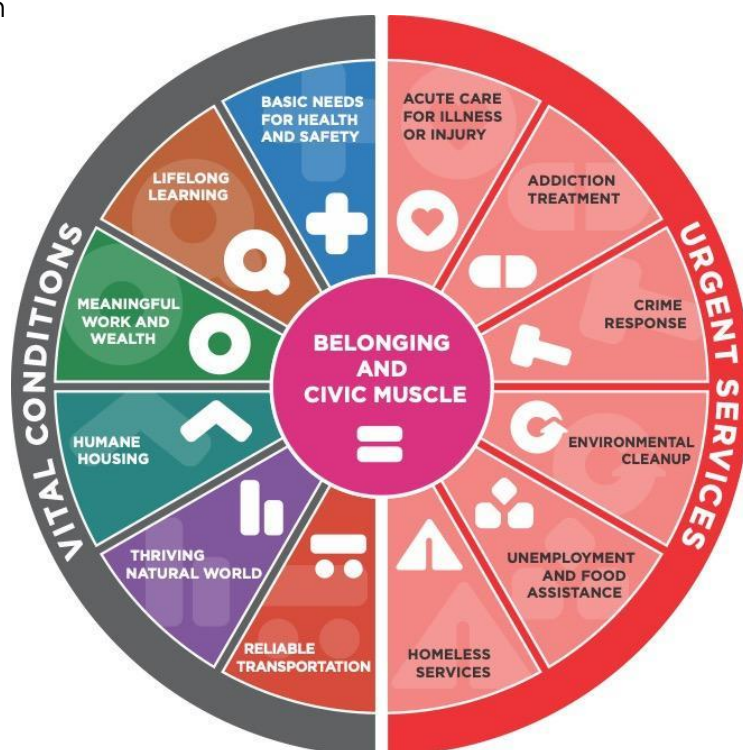
Investments of time, resources, expertise and collaboration to improve health and well-being can take different approaches. And usually, no single approach can fully improve or resolve a given need on its own.

One way to think about any approach is that it may strengthen “vital conditions” or provide “urgent services,” both of which are valuable to support thriving people and communities. A set of program activities may seek to do one or both. Taken together, vital conditions and urgent services compose a well-being portfolio.

What are Vital Conditions?

These are characteristics of places and institutions that all people need all the time to be healthy and well. The vital conditions are related to social determinants or drivers of health, and they are inclusive of health care, multi-sector partnerships and the conditions of communities. They help create a community environment that supports health.

What are Urgent Services?



¹ The Vital Conditions framework and the Well-Being Portfolio were created by the Rippel Foundation, and are being used with permission. Visit <https://rippel.org/vital-conditions/> to learn more.

These are services that anyone under adversity may need temporarily to regain or restore health and well-being. Urgent services address the immediate needs of individuals and communities, say, during illness.

What is Belonging and Civic Muscle?

This is a sense of belonging and power to help shape the world. Belonging is feeling part of a community and valued for what you bring. Civic muscle is the power of people in a society to work across differences for a thriving future.

Well-Being Portfolio in this Strategy and Plan

The hospital's planned strategies and program activities that follow are each identified as aligning with one of the vital conditions or urgent services in this figure.

This helps to identify the range of approaches taken to address community needs, and also acknowledges that the hospital is one community resource and stakeholder among many that are dedicated to and equipped for helping to address these needs and improve health.

Strategies and Program Activities by Health Need

Health Need:	Access to Care				
Population(s) of Focus:	General Population of Lancaster County				
Strategy or Program	Summary Description	Strategic Alignment			
		Strategy 1: Extend care continuum	Strategy 2: Evidence-informed	Strategy 3: Community capacity	Vital Condition (VC) or Urgent Service (US)
Engage with community partners and key service providers in existing efforts to improve access points and coordination of health care services across the City of Lincoln and Lancaster County.	Support and participate in the LLCHD CHIP Access to Care work group and other community-based organizations to support work around maternal child health, preventative care, and barriers to care.	•	•	•	VC
Expand evidence-based chronic disease management programs.	Support the on-going or increased availability of evidence-based chronic disease management programming that leverages primary and specialty care access points (i.e. tobacco cessation	•	•	•	VC

Health Need:	Access to Care				
	classes by specially trained tobacco treatment specialist, diabetes self-management through diabetes clinic, heart failure, etc.) to encourage referral and feedback loop processes.				
Improve access to care by aligning primary and cardiovascular specialty care	Explore and identify ways to promote improved alignment between primary and cardiovascular specialty care in the Lincoln community and identify relevant actions and measures of success for identified work.	•	•	•	VC
Improve access to care by enhancing care coordination for Health Related Social Needs (HRSN).	Improve coordination of care/ resource navigation for patients with HRSNs	•	•	•	US
Improve access to care by supporting maternal/child health home visits	Continue to support the Family Connects home visitation program.	•	•	•	US
Invest in community-based organizations capacity to deliver community health programs	Align community investments with hospital priorities by providing financial support to local organizations through a targeted Community Health Improvement	•	•	•	VC

Health Need:	Access to Care				
	Grant program, based on needs identified in the Community Health Needs Assessment (CHNA).				
Enhance access to comprehensive healthcare and improve care coordination for patients with chronic diseases and health-related social needs through targeted interventions in hypertension management, cancer screenings, and well-child checks, leveraging collaborative partnerships and continuous medical education to drive quality improvement.	Hypertension screening (all lincoln primary care and CHI health market), 2. colorectal cancer screening, Breast cancer screening, Well child check screening. All screening is part of continuing medical education (CME) part 4 collaboration with Lincoln's Partnership for Healthy Lincoln and with Dr. Robert Rauner.	•	•	•	VC
Free medical clinic services to expand access to care	Support Clinic with a Heart: To establish a consistent, monthly evening free clinic service at an established free medical clinic, staffed by volunteer medical				VC

Health Need:	Access to Care				
	professionals from CHI Health St Elizabeth				
Planned Resources:	The hospital will provide staff time, grants, outreach communications, and program management support for these initiatives.				
Planned Collaborators:	• Nebraska Cancer Coalition • City of Lincoln • The Bridge Behavioral Health • CHI Health Clinics • Lincoln Lancaster County Health Department • Cultural Centers of Lincoln • Rural primary care providers • Aging Partners				

Anticipated Impacts (overall long-term goals)	Measure	Data Source
Decrease Heart Disease mortality	Percent of residents with Heart disease	CHNA
Decrease Cancer mortality	Percent of residents with Cancer	CHNA

Health Need:	Behavioral Health				
Population(s) of Focus:	General Population of Lancaster County				
Strategy or Program	Summary Description	Strategic Alignment			
		Strategy 1: Extend care continuum	Strategy 2: Evidence - informed	Strategy 3: Community capacity	Vital Condition (VC) or Urgent Service (US)

Health Need:	Behavioral Health				
Implement Firearm Safety education and providing safety devices	Partner with LLC DH on gun safety and prevention of intentional injury. Provide gun locks and medication pill box locks. Offer gun safety educational materials to patients.	•	•	•	US
Increase awareness of ACEs through community partnership with BraveBe	BraveBe will lead efforts to community awareness, provide training, recognition and response on ACEs	•	•	•	US
Provide Mental Health First Aid Training	Partner with LLCHD to provide Mental Health First Aid training	•	•	•	US
Implement Age-friendly initiatives	Age-friendly work includes geriatric depression screening, assessing what matters most to the individual, mobility screening, and high-risk medication screening, along with cognitive screening, ensuring continuity of care, and fostering collaboration among partners through community training on age-friendly practices.	•	•	•	VC
Provide peer support within the NICU setting to empower families	Connected Forever NICU peer support	•	•	•	VC

Health Need:	Behavioral Health				
and improve their access to behavioral health resources					
Provide a postpartum alert program	A postpartum alert program, utilizing a teal wristband and targeted education, to empower patients and healthcare providers to recognize and respond effectively to postpartum warning signs, thereby improving access to timely and appropriate behavioral and physical healthcare.	•	•	•	VC
Increase access to behavioral health care for cancer survivors by providing targeted education and psychosocial distress screenings to identify and address their unique mental health needs.	Behavioral Health and Cancer Survivorship education and screening	•	•	•	VC
Other Related Activities: Behavioral Health	The following activities represent complementary efforts in which CHI Health system or an individual facility is addressing the identified health need through financial support, in-kind staff contribution or a combination thereof. Improve behavioral health practices by implementing Hospital Whole Mom Standard maternal mental health hospital best practices. Screening all patients for Perinatal Mood and Anxiety Disorders (PMADs) on all delivered patients before discharge. This is a 5				

Health Need:	Behavioral Health
	bundle element which encompasses screening, documentation, education, follow up, & holding of discharge as needed. • Providing Depression Screening. Yankee Hill clinic is focusing their Quality metric this year for Depression screening.
Planned Resources:	The hospital will provide staff time, grants, outreach communications, and program management support for these initiatives
Planned Collaborators:	• Nebraska Cancer Coalition • The Bridge Behavioral Health • CHI Health Clinics • Lincoln Lancaster County Health Department • Cultural Centers of Lincoln - Brave Be Child Advocacy Center

Anticipated Impacts (overall long-term goals)	Measure	Data Source
Improve overall mental health in the community	Percent of residents concern about mental health in the community	CHNA