



2026-2028 UNIVERSITY HOSPITALS

COMMUNITY HEALTH IMPLEMENTATION STRATEGY

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BOARD ADOPTION

University Hospitals adopted the 2026-2028 Community Health Implementation Strategy on March 19, 2026.

It includes the following UH facility located in Portage County, referred to in this report as the “Hospital”:

- University Hospitals Portage Medical Center

COMMUNITY HEALTH IMPLEMENTATION STRATEGY AVAILABILITY



The Implementation Strategy can be found on University Hospitals’ website at www.UHhospitals.org/CHNA-IS or a hard copy can be mailed upon request at CommunityBenefit@UHhospitals.org.

WRITTEN COMMENTS

Individuals are encouraged to submit written comments, questions or other feedback about this Implementation Strategy to CommunityBenefit@UHhospitals.org. Please make sure to include the name of the UH facility that you are commenting about and, if possible, a reference to the appropriate section within the Implementation Strategy.

HOSPITAL MISSION STATEMENT

As wholly owned subsidiaries of University Hospitals, the Hospital is committed to supporting the UH mission, “To Heal. To Teach. To Discover.” by providing a wide range of community benefits including clinical services, community health improvement programs, medical education and research. UH is an integrated delivery system and thus can provide benefits by coordinating within and among various entities.

INTRODUCTION

University Hospitals (UH) presents the 2026–2028 Implementation Strategy (IS) for Portage County developed in response to the 2025 Community Health Needs Assessment (CHNA). University Hospitals Portage Medical Center (the “Hospital”) conducted a community health needs assessment (a “CHNA”) compliant with the requirements of Treas. Reg. §1.501(r) (“Section 501(r)”) and Ohio Revised Code (“ORC”) 3701.981. The 2025 Portage County CHNA served as the foundation for developing University Hospital’s Implementation Strategy (“IS”) to address those needs that, (a) the Hospital determines they are able to meet in whole or in part; (b) are otherwise part of UH’s mission; and (c) are not met (or are not adequately met) by other programs and services in the county. The IS identifies the means through which the Hospital plans to address a number of the needs that are consistent with UH’s charitable mission as part of its community benefit programs. Together the CHNA and IS serve to align hospital resources and activities to address health needs identified in the CHNA.

Likewise, the Hospital is addressing some of these needs simply by providing care to all, regardless of ability to pay, every day. They anticipate that the strategies may change and therefore, a flexible approach is best suited for the development of its response to the 2025 Portage County CHNA.

The purpose of this Implementation Strategy is to describe how UH will address the priority health needs

identified through the 2025 CHNA. These priorities include Chronic Disease, Mental Health and Substance Misuse, and Population Health and Safety with a cross-cutting factor: Equitable Access and Sustainability of Community Resources. To support coordinated planning and alignment with UH strategic priorities, the CHNA findings are

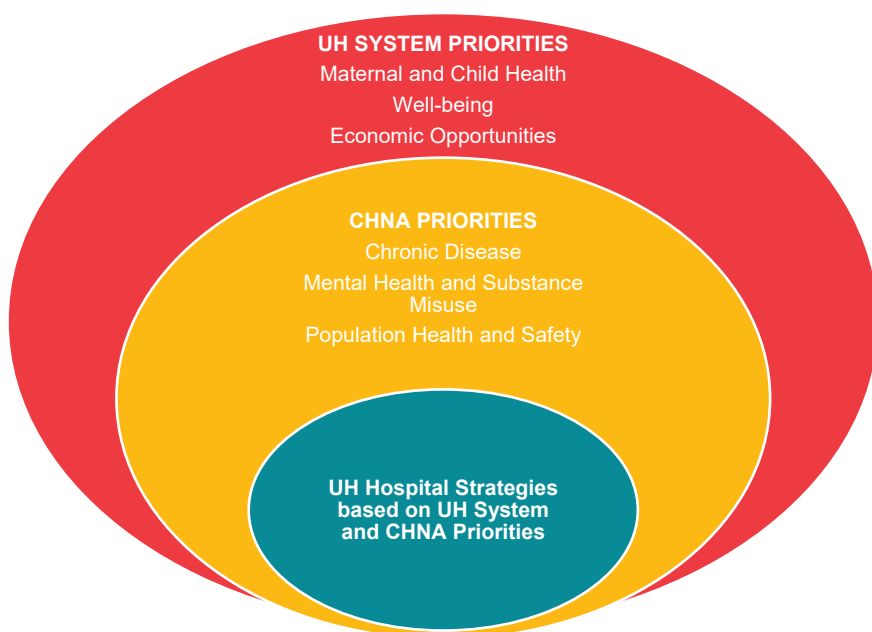


Figure 1. UH Priorities Alignment

organized under UH's Community Health Investment (CHI) Strategy priority areas: Maternal and Child Health, Well-being, and Economic Opportunity as seen in Figure 1.

This IS outlines the goals, objectives, and strategies that UH hospitals will implement, both independently and in collaboration with community partners, to address these priority health needs. The strategies were developed through a series of virtual planning workshops involving UH staff.

The strategies outlined in this IS are designed to leverage existing community resources, strengthen cross-sector partnerships, and guide UH's community health improvement efforts from 2026 through 2028.

ALIGNMENT WITH LOCAL AND STATE STANDARDS

Ohio law requires local health departments (LHDs) and tax-exempt hospitals to submit their Community Health Improvement Plans and Implementation Strategy reports to the Ohio Department of Health (the department). As of January 1, 2020, Ohio law also requires LHDs and tax-exempt hospitals to complete assessments and plans "in alignment on a three-year interval established by the department."

While the Ohio Revised Code does not mandate alignment with specific state-level assessments or plans, the department encourages consistency with the Ohio State Health Assessment (SHA) and the Ohio State Health Improvement Plan (SHIP) to promote coordinated public health priorities across the state. As a result, many communities choose to align their CHNA and Implementation Strategy timelines, indicators, and strategies with those of their local health departments and with broader statewide goals.

University Hospitals meets these expectations by coordinating its CHNA process with local health departments within its service area and by submitting its CHNAs and Implementation Strategies to the Ohio Department of Health in accordance with state requirements. UH's CHNAs and Implementation Strategies also maintain broad alignment with the priorities and focus areas outlined in the SHA and SHIP, supporting consistency between local needs and statewide health improvement efforts.

COMMUNITY DEFINITION

The service area for University Hospitals (UH) IS in Portage County, Ohio, includes an estimated population of 161,421 residents, whose health needs and outcomes are the focus of this Implementation Strategy (see Figure 2).

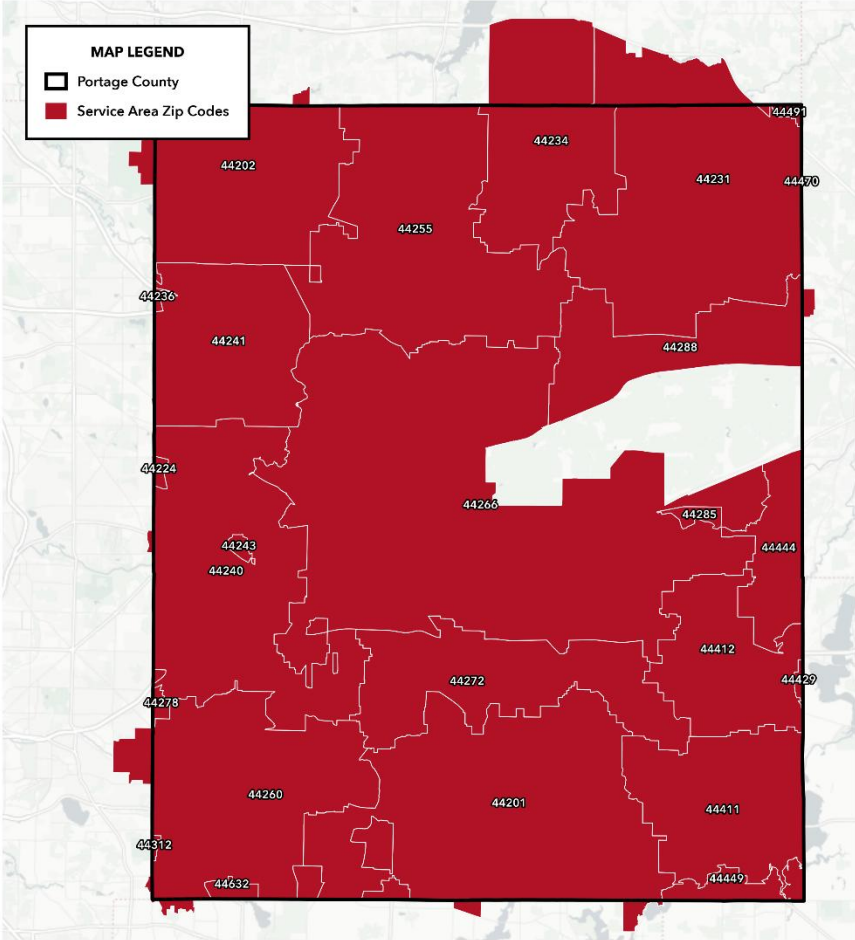


Figure 2. UH Service Area

Clearly defining the service area establishes the geographic scope of the IS and supports a coordinated, comprehensive approach to addressing identified community health priorities across Portage County.

Additional details describing the Portage County community, including demographics and social and economic determinants of health, can be found in the CHNA report on the UH website at: uhhospitals.org/CHNA-IS.

2025 PORTAGE COMMUNITY HEALTH NEEDS ASSESSMENT FINDINGS

University Hospitals (UH) conducted its 2025 Community Health Needs Assessment (CHNA) between January and August 2025 to identify and prioritize the most significant health needs in the community. The CHNA was designed to guide planning and inform community health improvement efforts.

The assessment was conducted by Illuminology using both primary and secondary data. Secondary data included community health indicators from local, state, and national sources, while primary data were collected through surveys, key informant interviews, and focus groups. All data were analyzed using standardized methods, and findings were organized by health topic. Results from both data sources were combined to identify the community's most significant health needs.

On July 17th, 2025, 38 members of Portage County Community Health Partners met in person to review the 2025 Portage County CHNA and to identify priority health issues. The meeting participants were divided into small groups, with each group asked to review a specific section of the 2025 Portage County CHNA, and, within that section, to identify potential priority health issues for consideration by the larger group.

Overall, a total of 20 potential priority health issues were identified by the Portage County Community Health Partners. A multi-voting technique, featuring two rounds of voting, was used to narrow down that list to three broad priority health issues with specific focus areas (Chronic Disease, Mental Health and Substance Misuse, and Population Health and Safety) and one cross-cutting factor (Equitable Access and Sustainability of Community Resources) that affect Portage County residents.



**CHNA Priority Area 1:
Chronic Disease**



**CHNA Priority Area 2:
Mental Health and
Substance Misuse**



**CHNA Priority Area 3:
Population Health and
Safety**

For more information on the CHNA findings and the identification of significant health needs, please refer to the 2025 CHNA report at: uhhospitals.org/CHNA-IS.

2026-2028 IMPLEMENTATION STRATEGY OVERVIEW

This section presents the strategies, objectives, and activities that University Hospitals (UH) hospitals intend to deliver, support, or collaborate on to address significant, prioritized community health needs over the next three years. Planned actions are aligned with current community needs as well as UH's mission, vision, and strategic initiatives. The plan may be amended as circumstances change, including shifts in community needs or available resources.

Implementation Strategy Planning Process

The University Hospitals (UH) Implementation Strategy (IS) planning process involved a series of virtual workshops and electronic communication from January 2025 through February 2026. Participants included hospital staff with expertise in community needs and services for each priority area.

Illuminology facilitated the workshops. During the first virtual session, Illuminology guided participants in reviewing CHNA priorities and identifying:

- Desired changes based on CHNA results to inform goals and community-level indicators
- Potential actions to shape strategies

Following the initial workshop, virtual follow-up sessions were held to refine draft overarching goals, community-level indicators, and implementation plans for each priority area.

The resulting work plans outline strategies for each hospital focusing on the selected priority areas, including:

1. Broad overarching goals and community-level indicators to track long-term progress
2. Strategies with measurable short-term objectives
3. Specific activities, timelines, and responsible teams or individuals

Work plans will be reviewed and updated to reflect evolving community needs, available resources, and ongoing activities.

The number one priority for UH Community Health Investment for 2026–2029 and beyond is the UH Medicaid Enrollment Optimization Program (MEOP). This focus is driven by anticipated federal changes under the One Big Beautiful Bill Act (HR1), which will significantly tighten Medicaid eligibility requirements for adults in the Medicaid expansion group (ages 19–64) beginning January 1, 2027. Key provisions include requiring 80 hours per month of work, volunteering, or schooling; more frequent eligibility redeterminations every six months instead of annually; and shortening retroactive eligibility from three months to two months. With more than 774,000 Ohioans currently enrolled in Medicaid expansion, these shifts are expected to increase the risk of coverage loss. While UH is still working through final systemwide MEOP strategies, we expect to adjust and refine approaches to meet these changing conditions. Many of our existing strategies will also be leveraged to educate the community, strengthen connections to coverage, and proactively identify individuals at risk of becoming uninsured or disenrolled through socio-medical touchpoints. This implementation plan includes a Medicaid enrollment strategy that operates at the system level but will be operationalized and supported across our hospitals. (see page 19 for the MEOP strategy).

IMPLEMENTATION STRATEGIES



SYSTEMWIDE INITIATIVE



Medicaid Enrollment Optimization Program: System-wide initiative

University Hospitals is implementing the Medicaid Enrollment Optimization Program (MEOP) as a system-wide initiative to help eligible individuals maintain and attain coverage and to ensure our hospitals and community partners are ready for forthcoming policy changes. While MEOP will touch every part of UH, early operational focus are concentrated at UH locations within Cuyahoga, Lorain, Lake, and Portage counties where high utilization and risk are especially high. Piloting at sites within these communities will allow rapid learning and scaling across the system. As part of this effort, UH will work closely with community-based organizations, government partners, managed care entities, and other health systems to develop shared strategies, aligned workflows, and coordinated communication plans that support consistent messaging and maximize impact across the region.

Why coverage matters across CHNA priorities

Consistent health insurance coverage is a foundational component supporting all priority areas identified across UH Community Health Needs Assessments. Reliable access to coverage plays a critical role in ensuring that individuals and families can obtain the care and resources they need. Strengthening these connections aligns with UH's Community Health Investment framework particularly the Economic Opportunity priority, as insurance coverage is a critical gateway to financial stability, reduced medical debt, and improved access to preventive and ongoing care.

Medicaid Enrollment Optimization will serve as a shared systemwide goal and will be reflected across implementation plans throughout the UH footprint. This marks the first time a systemwide strategy has been integrated into implementation plan development. While the full program design is still in progress, planning efforts are underway, and updates will be incorporated as the implementation plan evolves.

What's at stake if people lose Medicaid

Forthcoming federal and state changes-work requirements, shorter redetermination intervals, and other eligibility and cost-sharing shifts-could increase churn among expansion adults and other populations. Loss of coverage threatens continuity of care, produces avoidable coverage gaps, and increases the likelihood that patients re-enter the system through higher-acuity, higher-cost settings.

For hospitals, these shifts can lead to rising uncompensated care, operational strain, and worsened outcomes, which in extreme cases could affect the viability of

departments or facilities due to unsustainable reimbursement levels. For communities, coverage loss widens inequities and destabilizes families.

Our approach

MEOP mobilizes cross-functional workstreams—education, communications, operational workflow, government & community outreach, and data—to build a repeatable, scalable model for enrollment and re-enrollment. The program roadmap moves from discovery and solution design to pilot and scale, so that by **January 2027** UH and partners have a tested workflow embedded in operations across priority hospitals and community settings. This approach reflects the program’s OKRs and phased timeline already socialized with stakeholder.

UH Community Health Investment (CHI) Priority Area: Economic Opportunities					
CHNA Priority Area: Overarching Strategy					
Hospital: Systemwide Strategy					
Goal: Improve access to and continuity of Medicaid coverage by optimizing enrollment, re-enrollment, and redetermination workflows across UH and community settings.					
Community-Level Indicators to track long-term outcomes: Medicaid enrollment and retention rates; Reduction in uninsured ED utilization; Reduction in coverage gaps (churn); Increased patient awareness of Medicaid requirements					
Strategy 1: Implement a system-wide Medicaid Enrollment Optimization Program that integrates education, workflow standardization, data analytics, and community partnerships.					
Objective 1: By January 2027, deploy a scalable MEOP workflow across priority UH sites and community settings to support eligible individuals in maintaining or attaining Medicaid coverage.					
Activities	Measures	Collaborators	Year 1	Year 2	Year 3
Develop standardized Medicaid education materials and scripts	Materials developed and deployed		X		
Map and standardize Medicaid enrollment workflows	Workflow documented and implemented		X	X	

Launch MEOP pilot at priority UH hospitals and community sites	# of pilot sites		X	X	
Train caregivers and community partners	# trained		X	X	X
Scale MEOP system-wide	Sites expanded			X	X
Host/participate in community outreach events in priority locations	# of events		X	X	X
Patients connected to UH or partner organizations for work requirements	# of patients			X	X

UH Community Health Investment (CHI) Priority Area: Maternal and Child Health

CHNA Priority Area: Chronic Disease

Goal: Reduce food insecurity among youth.

Community-Level Indicators to track long-term outcomes:

- Food insecurity among children (baseline: 16.5% according to HealthyNeo)

Strategy 1:

- Provide school-based programs to address food insecurity.

Objective:

- By December 31, 2028, increase the number of meals provided through school-based programs by 5%.

Activities	Measures	Collaborators	Year 1	Year 2	Year 3
<p>UH Portage will continue to partner and support school-based programs to address food insecurity.</p> <p>Raven Packs is a community wide initiative to feed food-insecure students in the Ravenna Schools and community. The bags are delivered directly to the schools.</p> <p>Birdie bags are delivered to participating Portage County schools to provide bags of food, snacks and pantry items for food –insecure children.</p>	<p>Number of packs distributed each year (Raven Packs)</p> <p>Number of meals given each year</p> <p>Number of snacks given each year</p> <p>Number of visits to pantries each year</p>	<p>Laura Wunderle, Raven Packs Director of Operations</p> <p>Candace Curtis, Ben Curtis Family Foundation Founder and Chief Executive Officer</p>	X	X	X
<p>Participate in and increase awareness of the Power of Produce kids' program.</p>	<p>Number of visits each year</p>	<p>Kate DeAngelis, Haymaker Farmers' Market in Kent</p>	X	X	X

Continue the UH Portage Kids Summer Lunch program – children ages 1-18 can receive free, healthy lunches in the cafeteria	Number of lunches given each year		X	X	X
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UH Community Health Investment (CHI) Priority Area: Well-being

CHNA Priority Area: Chronic Disease

Goal: Reduce the lung cancer mortality rate.

Community-Level Indicators to track long-term outcomes:
 - Trachea, bronchus, and lung cancer mortality rate (baseline: 38.7/100,000 in 2025 CHNA)
 - Adult cigarette smoking rate (baseline: 7% in 2025 CHNA)

Strategy 1:
 - Provide programs and information related to tobacco, lung cancer, and smoking cessation; provide lung cancer screenings.

Objective:
 - By December 31, 2028, increase the number of lung cancer screenings provided each year by 5%.

Activities	Measures	Collaborators	Year 1	Year 2	Year 3
Continue referring residents to the University Hospitals Portage Medical Center (UH Portage) smoking cessation program	Number of residents referred to the UH Portage smoking cessation program each quarter		X	X	X
Increase lung cancer CT screenings through UH Portage	Number of lung cancer screenings each year		X	X	X

UH Community Health Investment (CHI) Priority Area: Well-being

CHNA Priority Area: Chronic Disease

Goal: Decrease colon cancer rates.

Community-Level Indicators to track long-term outcomes:

- Colon and rectum cancer incidence (baseline: 39.7/100,000 in 2025 CHNA)
- Colon, rectum, and anus cancer mortality rates (baseline: 12.7/100,000 in 2025 CHNA)

Strategy 1:

- Increase education about colon cancer screenings and prevention.

Objective:

- By December 31, 2028, increase education about colon cancer screenings and prevention.

Activities	Measures	Collaborators	Year 1	Year 2	Year 3
Increase education about colon cancer screenings and colon cancer prevention, including information about nutrition and physical activity	Number of colonoscopies provided each year Number of people provided with educational information each quarter		X	X	X

UH Community Health Investment (CHI) Priority Area: Well-being

CHNA Priority Area: Chronic Disease

Goal: Improve nutrition and physical activity.

Community-Level Indicators to track long-term outcomes:

- Amount of times adults eat vegetables in a week (baseline: 5.5 in 2025 CHNA)
- Amount of times adults eat fruit in a week (baseline: 4.6 in 2025 CHNA)
- Percentage of youth who eat fruit 1-3 times per day (baseline: 92.7% in 2025 CHNA)
- Percentage of youth who eat vegetables 1-3 times per day (baseline: 86% in 2025 CHNA)
- Amount of times adults engage in physical activity in a week (baseline: 3.2 in 2025 CHNA)
- Percentage of youth who engage in physical activity every day in a week (baseline: 22% in 2025 CHNA)
- Percentage of adults who drink soft drinks in a week (baseline: 55.4% from HealthyNeo)

- Percentage of adults who use a quick service restaurant 6 or more times in a month (baseline: 34% from HealthyNeo)

Strategy 1:

- Educate Portage County residents on healthy eating and active living.

Objective:

- By December 31, 2028, increase education in Portage County on healthy eating and active living by 10%.

Activities	Measures	Collaborators	Year 1	Year 2	Year 3
Continue physical activity programming made available by University Hospitals Portage Medical Center (UH Portage) and Portage Parks (Parks Rx Program) Increase awareness of programs Include corporate connections Continue Portage Park District's community group hiking opportunities	Number of participants in physical activity programming each quarter	Jennifer White, Portage Park District	X	X	X
Continue community education on nutrition and physical activity. Include corporate connections	Number of people provided with educational information each quarter		X	X	X

UH Community Health Investment (CHI) Priority Area: Well-being

CHNA Priority Area: Chronic Disease

Goal: Reduce food insecurity.

Community-Level Indicators to track long-term outcomes:

- Food insecurity (baseline: 14.1% in 2025 CHNA)
- Food insecurity among children (baseline: 16.5% according to HealthyNeo)
- Percentage of adults who find it not difficult at all to get fresh fruits and vegetables (baseline: 77% in 2025 CHNA)

Strategy 1:

- Increase access to and participation in community-based nutrition programs and opportunities such as farmers' markets.

Objective:

- By December 31, 2028, expand participation in programs to address food insecurity by 10%.

Activities	Measures	Collaborators	Year 1	Year 2	Year 3
Continue and expand referrals and participation addressing food insecurity and its impact on health at the University Hospitals Portage Food For Life Market.	Number of patients seen at the market by referral each quarter Number of people served each year		X	X	X
Participate in and increase awareness of the Senior Nutrition Program.	Number of visits	Kate DeAngelis, Haymaker Farmers' Market in Kent	X	X	X

UH Community Health Investment (CHI) Priority Area: Well-being

CHNA Priority Area: Chronic Disease

Goal: Decrease atherosclerotic cardiovascular disease deaths.

Community-Level Indicators to track long-term outcomes:

- Coronary heart disease death rate (baseline: 231.8/100,000 in 2025 CHNA)
- High blood pressure prevalence (baseline: 37% in 2025 CHNA)
- High cholesterol prevalence (baseline: 32% in 2025 CHNA)
- Stroke/TIA prevalence (baseline: 4% in 2025 CHNA)

Strategy 1:

- Educate the community on chronic disease risk factors; increase access to preventive screenings and monitoring devices.

Objective:

- By December 31, 2028, increase screenings by 5%.

Activities	Measures	Collaborators	Year 1	Year 2	Year 3
Educate the community on chronic disease risk factors and prevention and conduct the following screenings: blood pressure, body mass index, cholesterol, and pre-diabetes screenings (track separately)	<p>Number of blood pressure screenings each year</p> <p>Number of cholesterol screenings each year</p> <p>Number of pre-diabetes screenings each year</p> <p>Number of BMI screenings each year</p>		X	X	X
<p>Fill intern role for American Heart Association Rural at Heart Program.</p> <p>Intern will implement and promote use of blood pressure machines in</p>	Number of blood pressure machines available in libraries		X	X	X

libraries.					
Promote CTs for cardiac calcium score tests (free from UH Portage)	Number of CT scans for cardiac calcium scoring tests performed at UH Portage each year		X	X	X

UH Community Health Investment (CHI) Priority Area: Well-being					
CHNA Priority Area: Population Health and Safety					
Goal: Reduce unintentional injury incidence.					
Community-Level Indicators to track long-term outcomes: - ED visits from falls among seniors (65+ years old) per year (baseline: 3,065 from EpiCenter)					
Strategy 1: - Provide educational programming about various unintentional injuries and distribute safety devices.					
Objectives: 1. By December 31, 2028, increase participation in programs to reduce falls among seniors by 5%. 2. By December 31, 2028, begin offering unintentional injury awareness education to university students.					
Activities	Measures	Collaborators	Year 1	Year 2	Year 3
Offer Stay Active and Independent for Life (SAIL) program, Matter of Balance, and chair yoga for seniors to reduce falls.	Number of participants each quarter Number of events each quarter	Mindy Gusz & Jodi Neu	X	X	X

Provide unintentional injury awareness education to first year Kent State students	Number of students educated each year	Dr. Marie Walters, UH Portage ED Physician		X	X
Explore options for expanding to other colleges/universities and high schools	Number of schools participating each year				

UH Community Health Investment (CHI) Priority Area: Well-being					
CHNA Priority Area: Mental Health and Substance Misuse					
Goal: Reduce opioid overdoses					
Community-Level Indicators to track long-term outcomes: - Substance misuse deaths (baseline: 25 in 2025 in the Coroner's Report)					
Strategy 1: - Provide Narcan and education about Narcan.					
Objectives: - By December 31, 2028, increase distribution of Narcan by 5%. - By December 31, 2028, increase education about Narcan by 5%.					
Activities	Measures	Collaborators	Year 1	Year 2	Year 3
Continue distributing Narcan and educating Portage County residents on how and when to use Narcan.	Narcan distributed each year	UH Portage Medical Center	X	X	X

UH Community Health Investment (CHI) Priority Area: Economic Opportunities					
CHNA Priority Area: Population Health and Safety					
Goal: Increase awareness of career and job opportunities and increase education about careers.					

Community-Level Indicators to track long-term outcomes:

- Number of participants in career days and hiring events

Strategy 1:

- Provide career days for middle and high school students and provide hiring events for residents.

Objective:

- By December 31, 2028, increase the number of participants in career days and hiring events by 5%.

Activities	Measures	Collaborators	Year 1	Year 2	Year 3
Offer career days to expose middle and high school students to the wide variety of healthcare career opportunities that are locally available.	Number of students participating each year	Portage County Schools Portage Development Board	X	X	X
Offer hiring events for residents to learn about career pathways and current job openings	Number of participants in hiring events each year	Portage County Job & Family Services OhioMeansJobs	X	X	X

Significant Health Needs Not Being Addressed by the Hospital

The hospital is implementing strategies that address all three 2025 priority areas: Chronic Disease, Mental Health and Substance Misuse, and Population Health and Safety.

Community Collaborators

UH commissioned this document and is aligning its implementation plan with local public health partners, including the Portage County Health Department, Kent City Health Department, and county and city Boards of Health. Once the health departments' improvement plan becomes available, it will be incorporated into UH's Implementation Strategy.

Consultants

University Hospitals commissioned Illuminology to support the facilitation and development of the Implementation Strategy for University Hospitals 2026-2028. Illuminology is a central Ohio based research firm with 27 years of experience related to research design, analysis, reporting, and strategic planning, and has conducted numerous community health needs assessments and strategic planning projects. The lead consultant for this project was Karen Hines, Ph.D., Senior Researcher.

To learn more about Illuminology, visit Illuminology.net.

Contact Information

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