

Island Health

# Community Health Needs Assessment

2025 – 2027



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# About Island Health

Skagit County Public Hospital District No. 2 (DBA: Island Health), located in Anacortes, Washington, is the center for healthcare in western Skagit County. Since its inception in 1962, Island Health has been ingrained in the community serving the region's healthcare needs. From primary care to specialized services, we have grown up right alongside you. With over 190 physicians and healthcare providers, we are proud to offer a wide range of comprehensive services.

Island Health is a public hospital district, which is responsible for managing and funding healthcare services for the residents within its district boundaries. The boundaries of our district, which constitute our service area, includes Fidalgo, Cypress, Guemes, and Sinclair Islands. Our convenient location attracts patients from north Whidbey Island and La Conner. We also operate a primary care clinic on Orcas Island, serving many San Juan Island residents as the closest acute care hospital in the region. Island Health has five publicly elected Commissioners, who govern our hospital district to ensure best practices are fairly enforced, monitor facility upgrades and see to the enhancement of community services offered to residents of our district.

Island Health employs more than 750 staff members across the main hospital campus, three primary care clinics, and nine specialty clinics located throughout Anacortes. We are designated as a Level III trauma facility with a Level II stroke center. As a 5-star rated Medicare facility and one of the top 100 rural hospitals in the United States, you can expect the highest quality of care where you actively participate in your healthcare planning and goal-setting.

## Our Purpose

Our purpose is to be the best healthcare partner to those we serve. Island Health C.A.R.E.S. by:

Demonstrating compassion	We care for our patients, their loved ones, and one another. We are motivated to make a difference.
Being accountable	We have high integrity. We are empowered to do the right thing, solve issues at every level, and take ownership of all that we do.
Showing respect	We interact with honesty and humility. We treat all with kindness and value each individual.
Striving for excellence	We are results driven, seeking to raise the bar and recognize a job well done.
Practicing stewardship	We make wise use of our talents, time, equipment, and finances.

# Our Services

Island Health offers a full range of comprehensive medical services and support programs for your health care needs. Our medical staff is highly trained and specialized to provide the highest quality of care. In addition, as a commitment to the total well-being of each patient, Island Health offers a number of support programs to complement the medical services provided.

Our services include:

- ▶ Acute and Intensive Inpatient Care
- ▶ Birth Center
- ▶ Cardio Rehabilitation
- ▶ Diabetes Education
- ▶ Diagnostic Imaging
- ▶ Emergency Department (“ED”)
- ▶ Family Medicine
- ▶ Gastroenterology
- ▶ Internal Medicine
- ▶ Laboratory
- ▶ Nephrology
- ▶ Obstetrics and Gynecology
- ▶ Orthopedics
- ▶ Pediatrics
- ▶ Physical and Occupational Therapy
- ▶ Pulmonology
- ▶ Pulmonary Rehabilitation
- ▶ Psychiatry and Behavioral Health



- ▶ Respiratory Care
- ▶ Speech Therapy
- ▶ Sports and Spine Services
- ▶ Surgery (Inpatient and Outpatient)
- ▶ Urology
- ▶ Urogynecology
- ▶ Wound Care and Hyperbaric Medicine
- ▶ Health Education Classes and Events

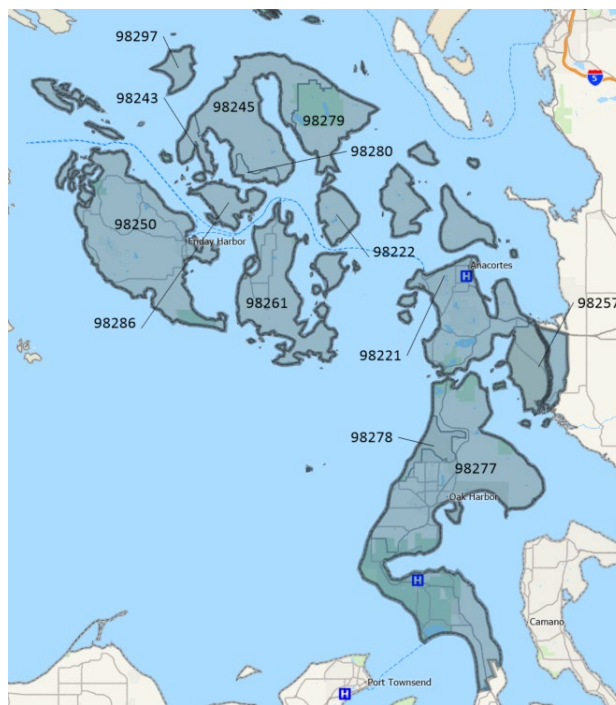
As a community-based health system, Island Health serves as the primary provider of care to a rural community with limited access to healthcare services. Every three years, Island Health conducts a community health needs assessment (“CHNA”) to assess the health of our community and to identify unmet health needs based on population trends, health indicators, and socioeconomic factors. We utilize this assessment to align our services, resources, and areas of strategic focus with the most significant health-related needs within the community we serve.

To learn more about Island Health, visit [www.islandhealth.org](http://www.islandhealth.org).

## Our Community

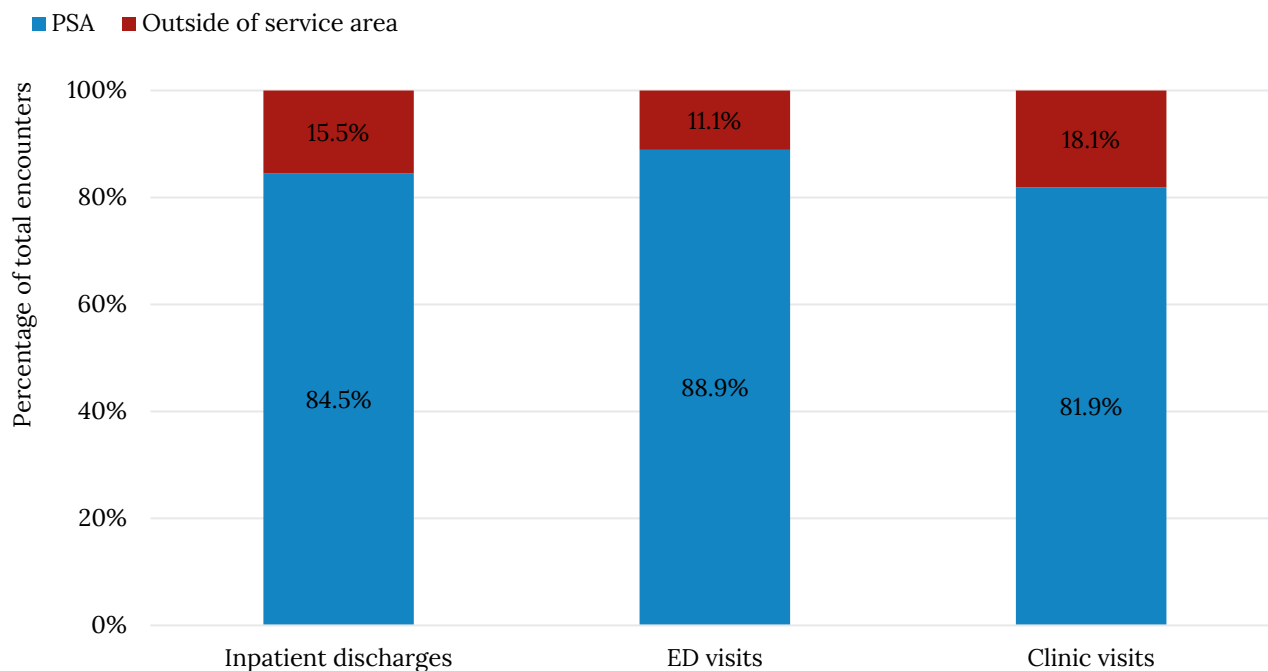
Island Health is a public hospital district located in the city of Anacortes in Skagit County, Washington. While located in Anacortes, Island Health has historically served the healthcare needs of the cities, towns, and islands in western Skagit County, as well as San Juan and Island counties, including Fidalgo, Cypress, Guemes, and Sinclair Islands.

For the purpose of this assessment, the community served by Island Health largely consists of the areas within Island Health’s hospital district boundaries. This primary service area, noted as PSA throughout the rest of the report, is where most of our patients originate from. We also serve individuals living in the broader community outside of our district boundaries, as well as individuals who travel or vacation near Anacortes.



■ Primary service area (“PSA”)

## Patient origin by service line

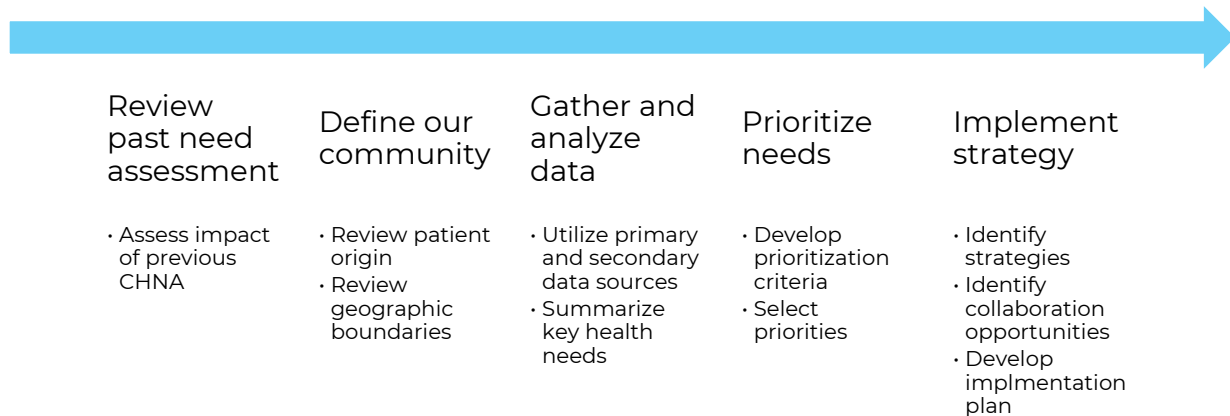


Source: Washington State Hospital Association, 2024

# Methodology

## Our Process

Island Health engaged Wipfli, an independent audit, tax, and advisory firm, to facilitate development of the CHNA. Wipfli utilized the following process to analyze the health needs of the community and develop the priorities of the needs assessment:



This process was overseen by the CHNA Advisory Committee, which consists of leadership from the hospital who represent the broad interests of the community. Committee members were selected based on their knowledge of and role within the community, as well as the relevant skills and qualifications to execute the steps of the CHNA process.

The committee consists of the following members:



### **ELISE CUTTER, MBA, CHIEF EXECUTIVE OFFICER**

Elise Cutter, MBA was named Chief Executive Officer (CEO) of Island Health in 2021. Formerly Island Health's Chief Operating Officer (COO) and Chief Financial Officer (CFO), Elise has risen through the ranks, recognized throughout her years of service to the organization as a leader dedicated to the mission of providing the best healthcare to the residents of Skagit County Public Hospital District, No 2. Throughout her tenure, Cutter was named Island Hospital Employee of the Year, and she received the coveted Island Hospital Management Leadership Award. In 2013, Cutter took on the CFO role, and under her leadership significantly increased the hospital's cash reserves while spearheading initiatives to save hospital and taxpayer dollars. In 2020, as Chief Operating Officer, Cutter readied the organization to address the COVID-19 pandemic, standing up emergency operations, including both testing and vaccination clinics. Under her leadership, Island Health was one of the first healthcare entities in the region to offer vaccinations. Cutter was named Washington State's 2025 "Community Star," awarded by the National Organization of State Offices of Rural Health to recognize outstanding contributions to rural health care. Cutter is a visionary leader who has strengthened Island Health through innovation, workforce development and community engagement. Cutter received a Bachelor of Science Degree in Accounting from Villanova University and obtained a Master of Business Administration with a focus in Healthcare Management from Western Governors University. Cutter is committed to improving healthcare access in our hospital district, ensuring the health and sustainability of the organization through staff development and retention efforts, and providing the best experience for patients at Island Health.

**SHANNON FERNANDEZ, MHA, CHIEF FINANCIAL OFFICER**

Shannon Fernandez joined Island Health in April 2025 bringing over 20 years of experience in healthcare, with experience in financial analytics, managed care, reporting, supply chain, revenue cycle and value-based care. Prior to joining Island Health, Fernandez served as the Chief Strategy Officer and VP of Billing Services for Yakima Valley Farm Workers in Yakima, Washington. In this role, Fernandez implemented the clinic's first strategic plan and increased clinic outreach by 300.0%.

**JASON HOGGE, MD, CHIEF MEDICAL OFFICER**

Dr. Jason Hogge brings more than 20 years of exceptional clinical expertise to the role of Chief Medical Officer at Island Health. Currently a primary care provider at Anacortes Family Medicine, Hogge is also Medical Director at Island Health's Walk-In Clinic. Community minded and collaborative, Hogge's Island Health physician leadership experience includes six years on the Medical Executive Committee and two as Chief of Staff. He believes deeply in educating and cooperating with patients and families to obtain a holistic, patient-centered approach to medical care.

**JENNIFER GRAHAM, MN, RN, CENP, CHIEF NURSING OFFICER**

Jennifer Graham joined Island Health as its Chief Nursing Officer in June 2025. Graham brings over two decades of clinical and executive experience, spanning inpatient oncology and acute care, robotic implementation and clinical training programs, as well as key leadership roles at the Swedish Medical Center and Providence Health System. Prior to joining Island Health, Graham served as Vice President and Regional CNO for MultiCare Health System.

**GALINA GANDY, MBA, CHIEF INFORMATION OFFICER**

Galina Gandy brings over two decades of experience in managed healthcare projects and programs to Island Health. Gandy joined Island Health in 2024 and brought expertise in health systems and strategic planning and operations. Prior to joining Island Health, Gandy served as the Vice President of Information Technology for Doyon Limited in Alaska where she was Chair of the Cybersecurity Consortium.

The process that Wipfli and the Advisory Committee used to complete this needs assessment is in full compliance with Section 501(r)(3) of the Internal Revenue Code. This needs assessment was approved by the Advisory Committee and the Island Health Board of Commissioners on December 18<sup>th</sup>, 2025.

# Data Collection

Information was collected from primary and secondary data sources to identify unmet health needs within the community. Information from these sources was summarized into key themes, which served as the basis of the CHNA.

## PRIMARY DATA

Primary data represents information that was collected firsthand from stakeholders within the hospital's community. This data was collected to validate secondary data findings as they pertain to Island Health's service area, identify issues that were not represented in the secondary data, and understand what specific subgroups of the community may face additional challenges or disparities.

Primary data was collected through interviews with community stakeholders who best represented the broad interests, experiences, and needs of Island Health's community, particularly people who represent medically underserved and vulnerable populations. A complete list of the community stakeholders can be found in the Reference and Acknowledgments.

The interviews were designed to solicit information pertaining to the following topics:

- ▶ Significant healthcare issues or needs
- ▶ Social, behavioral, and environmental factors that contribute to health needs
- ▶ Barriers to care within the community
- ▶ Vulnerable populations who experience disparities
- ▶ Suggestions or ideas to address the community's needs
- ▶ Potential resources or infrastructure to support health, social, behavioral, or environmental needs
- ▶ Areas for collaboration to address health needs

## SECONDARY DATA

Secondary data was collected from data sources available at the local, regional, state, and national level. This data provides a profile of the demographic, social, economic, and health characteristics of Island Health's community. To the extent possible data was collected at the local level and compared to regional, state, or national benchmarks. Sources of secondary data include:

- ▶ American Community Survey
- ▶ Centers for Disease Control and Prevention
- ▶ County Health Rankings (note: data in years reported by County Health Rankings may not be the actual year the data was collected)
- ▶ ESRI Business Information Solutions
- ▶ Healthiest Communities
- ▶ Health Resources & Services Administration
- ▶ National Cancer Institute
- ▶ Population Health Trust
- ▶ United States ("U.S.") Census
- ▶ University of Washington Addictions, Drug, & Alcohol Institute
- ▶ Washington State Department of Social and Health Services
- ▶ Washington State Department of Health
- ▶ Washington State Food Security Survey



## Prioritization of Community Needs

Once the primary and secondary data was gathered, the information was collectively analyzed to identify key themes that represented the unmet health and health-related needs within the community. The Advisory Committee convened as a group to rate the unmet health needs to determine which needs would be prioritized by Island Health over the next three years. Each unmet health-related need was rated based on the following criteria:

### Scope

- How many individuals are touched by this issue?

### Significance

- How significantly does the issue impact those touched by it?

### Impact

- How much of an impact can Island Health have on addressing this issue?

## Limitations

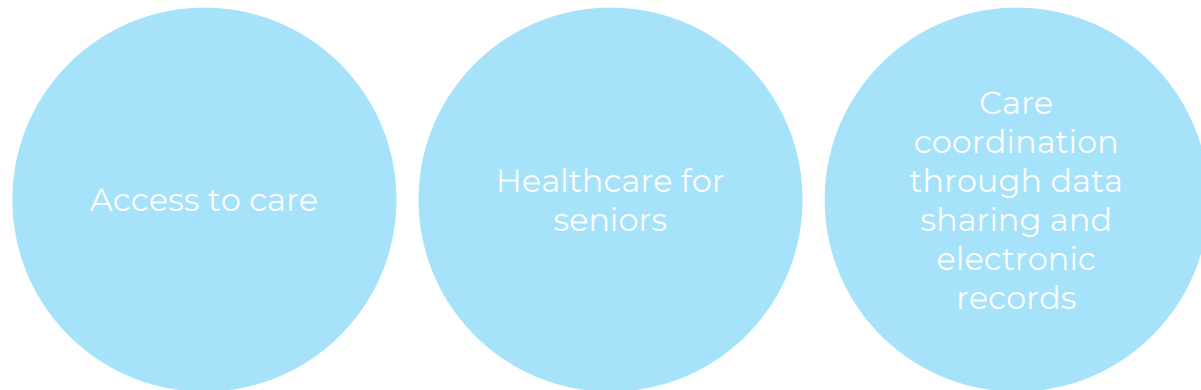
Island Health, in collaboration with Wipfli, has engaged in an extensive process to develop a CHNA that is rooted in the most detailed information available at the time of the writing of this report. However, Island Health recognizes that the responses reflected in the community stakeholder interviews represent the opinions of those interviewed and may not reflect the actual needs of the community. While every effort was made to recruit a set of diverse and representative perspectives, this needs assessment is limited as there is no way to guarantee that the perspectives of these participants are fully representative of those in the service area.

Additionally, county-level data may be featured in this report when more local data pertaining to the hospital's service area was not available. The extent to which local needs vary from county, state, or national trends cannot be ascertained with any degree of certainty.

Island Health's emphasis on recruiting a set of diverse stakeholders and using local or regional data when available to determine the demographic, social, economic, and health-related needs of the community demonstrates Island Health's commitment to understanding and meeting the needs of its service area.

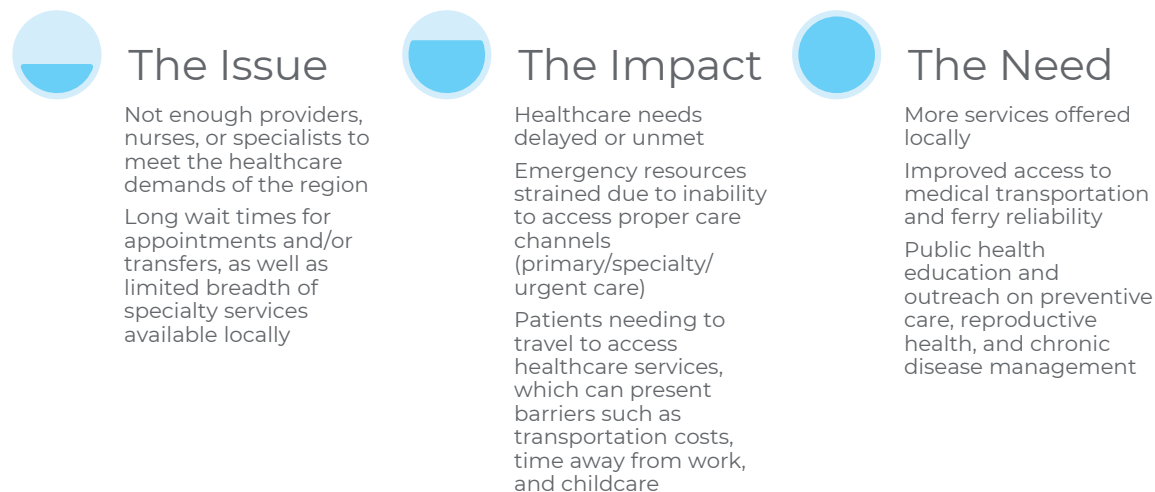
# Community Health Priorities

The 2025 community health priorities, in no particular order, are:



Additional context regarding the selection of these health needs as priorities for Island Health is provided below:

## Access to Care



Almost every stakeholder interviewed (approximately 90%) reported improved access to care as a significant health need in the community. Long wait times, perceived provider shortages, as well as limited local access to certain specialty services, create for limited access and availability of care within Island Health's community. Additionally, unique, regional geographic barriers may further complicate accessing care, especially in emergency circumstances or for vulnerable groups such as the elderly, disabled, and low-income.

### *Primary care*

Stakeholders reported that progress has been made in recent years to expand primary care capacity, yet some challenges remain. In recent years, the number of people per primary care physician in Skagit County has been on par with state and national benchmarks, a significant achievement compared to other rural care providers that depicts the progress in improving local access to care and lessening local provider shortages (County Health Rankings, 2022-2024). However, stakeholders continue to describe long wait times for primary care appointments, with some residents waiting weeks or even months to establish care or receive follow-up care. Adults in the tri-county area exhibit lower rates of recent preventative care visits relative to state and national benchmarks, potentially a result of challenges in accessing primary care services (Healthiest Communities, 2024). In some more geographically remote areas, such as Island and San Juan counties, the lack of pediatricians and limited availability of family medicine providers has resulted in families traveling outside of the community or relying on walk-in clinics for routine care. According to the Health Resources & Services Administration (“HRSA”), San Juan and Island counties are designated as geographic health professional shortage areas (“HPSAs”) for primary care professionals. Stakeholders also expressed that demand is present within the community for additional urgent care and/or after-hours care options, especially in San Juan County.

### *Specialty care*

Residents reported routinely leaving the community to obtain specific specialty services, such as cardiology, oncology, neurology, and behavioral health, due to lack of access to these services locally or due to levels of demand outpacing provider availability. Patients often travel to larger cities such as Bellingham, Everett, or Seattle to access these higher-level specialties, which can mean navigating unreliable ferry schedules, incurring significant travel costs, time away from work, and sometimes overnight stays to access needed healthcare services. Difficulty in accessing specialty care can lead to delays in diagnosis and treatment as well as fragmented care when patients are referred outside of a local system. Other challenges within accessing specialty care mentioned by stakeholders include long wait times for appointments and transfers, limited outreach/visiting specialists, and limited number of specialists who accept Medicaid patients. Despite these barriers to specialty care reported by stakeholders, adults living in Skagit, San Juan, and Island counties generally have similar or slightly lower rates of chronic diseases, such as cancer, diabetes, and heart disease, compared to state and national benchmarks (Healthiest Communities, 2024).

### *Emergency care*

Emergency care was reported to have its own set of challenges. Some stakeholders report that the emergency department (“ED”) is frequently used for non-emergent needs due to access challenges with primary, specialty, and urgent care services. Emergency medical services (“EMS”) and paramedics play a critical role in the region, often serving as the only option for urgent needs, especially for residents of remote islands and for those experiencing mental health or substance use crises. The shortage of inpatient psychiatric

beds or crisis stabilization care means that patients in crisis may wait in the ED for hours or even days before receiving appropriate care.

## Healthcare for Seniors



### The Issue

Seniors experiencing long appointment wait times and often travel outside of community to access routine or specialty care

Gaps in the spectrum of senior services needed to age safely within the community

Greater need for dementia/Alzheimer's care services and geriatric psychiatric services



### The Impact

Seniors unable to age in place and forced to leave the community for care or forego care

EDs and law enforcement increasingly involved in senior crises

Seniors with behavioral issues or higher-acuity behavioral needs often "bounced" from placements



### The Need

More Medicaid-accepting and quality senior care to allow for seniors to age in place

Enhanced collaboration between senior care providers to support placement

Healthcare for seniors was reported to be a major healthcare need by approximately 82% of community stakeholders. More than 1/4<sup>th</sup> of Island Health's PSA population is 65 years or older, with this portion of the community expected grow considerably in the upcoming five years (ESRI, 2025). As the region's highest utilizers of healthcare services, the seniors who live within Island Health's service area face challenges in accessing needed services, such as long wait times for medical appointments, limited provider availability, and a shortage of quality nursing homes, particularly those accepting Medicaid insurance and/or are equipped to care for seniors with complex behavioral or dementia-related needs. Stakeholders reported limited availability across the full spectrum of senior services, including nursing homes, assisted living, hospice and palliative care, geriatric psychiatric care, and home health.

Stakeholders noted a rise in ED and law enforcement involvement in senior crises, with a large proportion of local EMS and fire calls cited to be related to ground-level falls and injuries among seniors. Stakeholders mentioned that seniors may need to travel long distances for routine check-ups or specialty services, a potential barrier that could lead to delays in diagnosis and treatment. Community leaders and providers stressed the need for expanded local geriatric care, improved access to routine and specialty care services most utilized by seniors, and enhanced care coordination between senior care providers and local healthcare facilities to support the region's growing senior population and promote safe aging in place.

# Care Coordination through Data-Sharing and Electronic Records



Care coordination through data sharing and electronic health records (“EHRs”) emerged as a significant community health need by 77% of stakeholders. Stakeholders described how the fragmented nature of multiple EHR systems across different regional hospitals, clinics, and community providers has led to repeated tests, missed follow-ups, and confusion for both patients and providers, especially during transitions between care settings. Seniors, individuals with chronic or behavioral health conditions, and people experiencing homelessness are particularly vulnerable to falling through the cracks due to poor care coordination and limited access to shared records.

Stakeholders reported that care teams often rely on phone calls, faxes, or manual record requests to coordinate care, which increases administrative burden and the risk of errors. Both clinicians and patients expressed frustration with navigating incomplete or inaccessible records, which can delay care and erode trust in healthcare providers. Stakeholders consistently called for interoperable EHRs, centralized care navigation, and standardized data-sharing protocols to improve patient outcomes, reduce frustration, and support whole-person care.

# CHNA Implementation Plan

Strategies to address the unmet health-related needs prioritized by Island Health will be defined through a community health improvement plan (“CHIP”), which is a specific plan that outlines strategies or actions that can be taken to improve priority areas and track progress over time. The CHIP defines specific actions by taking the following into account:

## Strategic Objectives

- What overarching goals is Island Health seeking to achieve to address these issues?

## Impact

- What impact will achieving these goals have on community health?

## Tactics

- What specific strategies or tactics will Island Health explore to achieve its goals?

## Resources

- What resources can Island Health commit to address these issues?

## Partnerships

- What community organizations can Island Health collaborate with to improve health outcomes?

In 2026, the CHNA Advisory Committee and Island Health’s Board of Commissioners will develop a CHIP to detailed potential strategies that can be employed to address the prioritized health-related needs.

# Evaluation of Previous CHNA Implementation Plan (2022 - 2024)

## Previous CHNA Priorities

Island Health conducts a CHNA every three years as part of our ongoing efforts to address our community's most significant health needs. Our previous CHNA identified the following prioritization areas:

- ▶ Access to behavioral health services
- ▶ Access to primary and preventative care
- ▶ Access to specialty care

## Impact Evaluation

The following summarizes Island Health's effort in addressing the previous priority areas:

### Access to behavioral health services

- Employed a licensed social worker within the community's middle school and high school for readily available counseling sessions and services for at-risk youths. 277 children and teenagers have received counseling from this program.
- Expanded psychiatry social work counseling for at-risk mental health patients identified by their primary care provider and referred to Island Health's psychiatry department. This effort has reached more than 600 individuals.
- Expanded patient portal for enhanced patient access, education, and ease of use.
- Ongoing provider recruitment- added psychiatrist and therapist to Island Health's clinic.
- Recruited a licensed social worker to work within Island Health's ED.

### Access to primary and preventative care

- Ongoing provider recruitment- recruited 13 primary care providers to the Island Health clinics.
- Established a community paramedic program for community visits to at-risk and high-risk patients. The program aims to pave an avenue for establishing care with a primary care provider and to decrease unnecessary utilization of the ED. More than 200 people have been served by this program.
- Continued to provide community health education classes and screenings regarding diabetes education, hypertension, healthy aging, nutrition, and pregnancy and parenting. The target audience for these classes and screenings include individuals who are at-risk, elderly, medically fragile and/or are underserved in their healthcare needs. Attendance for program events between 2022 and 2024 has reached more than 2,200 attendees.
- Expanded patient portal for enhanced patient access, education, and ease of use.

### Access to specialty care

- Ongoing provider recruitment- recruited six new specialty care physicians to clinics.
- New service line offerings including gastroenterology, nephrology, pulmonology, urogynecology, and orthopedics.
- Participating in neonatal intensive care unit (NICU) Telehealth Trial.
- Acquired new surgical equipment: Aquablation and DaVinci V Surgical Robot.
- Remodeled the 22<sup>nd</sup> Street Specialty Care Clinic.
- Expanded patient portal for enhanced patient access, education, and ease of use.

# References and Acknowledgments

## Primary Data Sources

This report was made possible through the contribution of the following organizations, who participated as stakeholders in the community input process of this needs assessment:

- ▶ Anacortes Chamber of Commerce
- ▶ Anacortes Fire Department
- ▶ Anacortes Police Department
- ▶ Anacortes School District
- ▶ Island County Public Health
- ▶ North Sound ACH
- ▶ Orcas Island Fire and Rescue
- ▶ Orcas Island Health Care District
- ▶ Skagit Behavioral Health
- ▶ Skagit County Public Health
- ▶ Skagit County Sheriff's Department
- ▶ The Holding Space Birth & Wellness Cooperative

## Secondary Data Sources

Secondary data regarding the community served by Island Health was referenced from the following sources:

- ▶ American Community Survey
- ▶ Centers for Disease Control and Prevention
- ▶ County Health Rankings (note: data in years reported by County Health Rankings & Roadmaps may not be the actual year the data was collected)
- ▶ ESRI Business Information Solutions
- ▶ Healthiest Communities
- ▶ Health Resources & Services Administration
- ▶ National Cancer Institute
- ▶ Population Health Trust
- ▶ United States ("U.S.") Census
- ▶ University of Washington Addictions, Drug, & Alcohol Institute
- ▶ Washington State Department of Social and Health Services
- ▶ Washington State Department of Health
- ▶ Washington State Food Security Survey

## Consulting Expertise

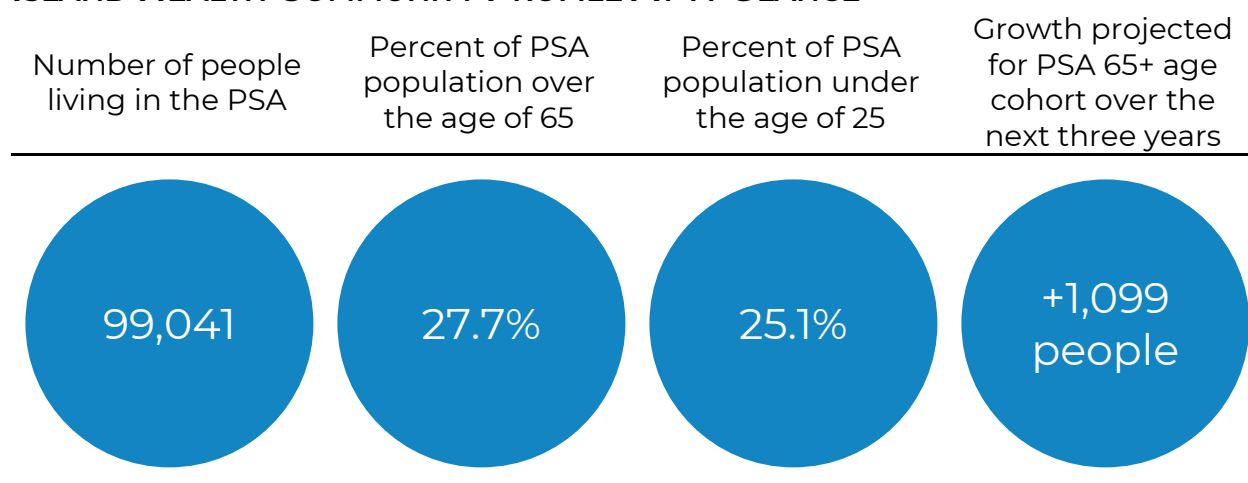
Wipfli, a national certified public accounting and consulting firm, assisted Island Health with all stages of this assessment, including collection and analysis of primary and secondary data, identification of community health needs, direction of the prioritization process, and compilation of this report.



# Community Profile

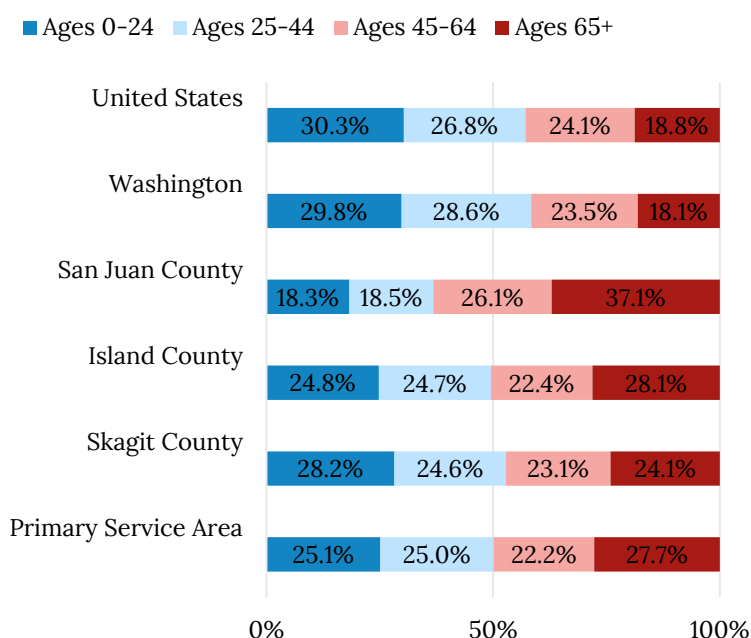
## Demographic Indicators

### ISLAND HEALTH COMMUNITY PROFILE AT-A-GLANCE



The population of the PSA is 99,041 people, which is projected to grow modestly by 2.5% over the next five years. The service area trends significantly older than state and national benchmarks, with the 65 and older age cohort projected to be the fastest growing segment of the service area population over the next 5 years. Island Health's aging population will have an impact on community health needs and will drive a greater demand for healthcare services.

### Population distribution by major age cohort



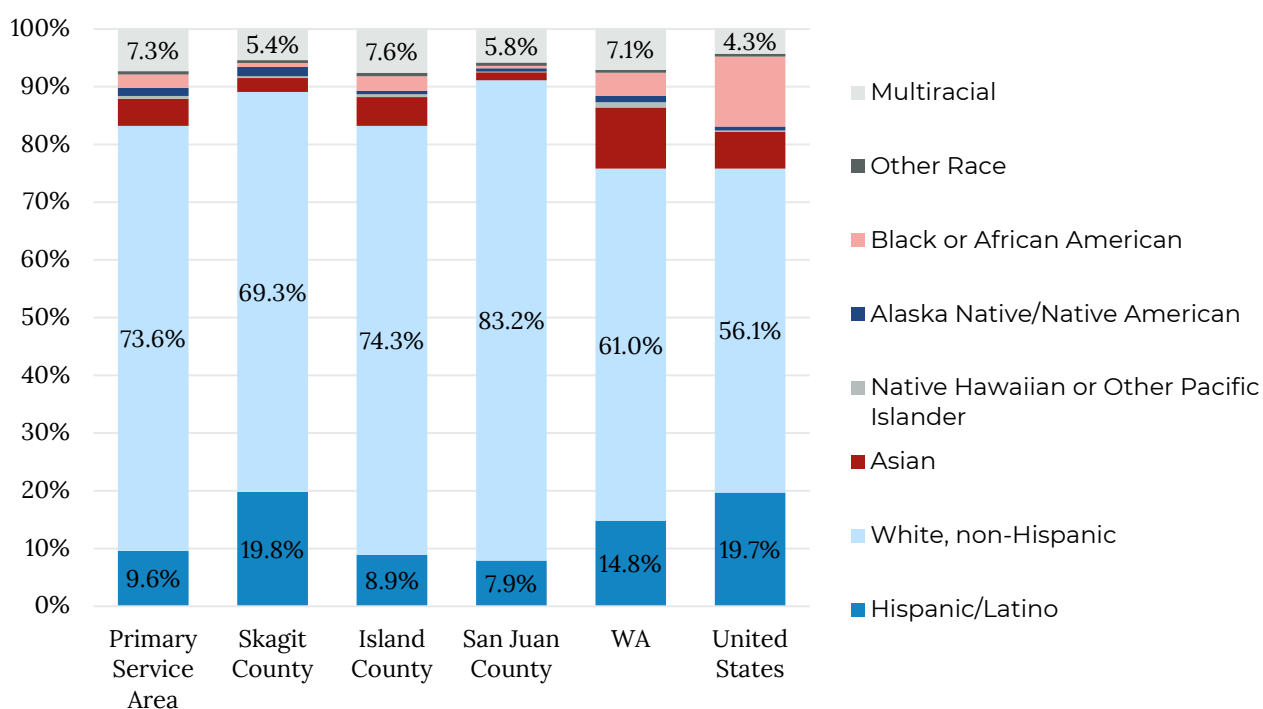
Source: ESRI Business Information Solutions, 2025

## RACE AND ETHNICITY

Social determinants of health are the conditions in which people are born, grow, live, work, and age. Research has shown that racial and ethnic minority groups are more likely to experience disparities that impact health outcomes. These disparities can be attributed to a range of factors, including differences in access to healthcare, educational and economic opportunities, exposure to environmental hazards, and experiences of discrimination and racism.

Island Health's PSA is predominantly white, with 73.6% of the population consisting of individuals who identify as white, non-Hispanic. The service area as a whole maintains a less diverse racial and ethnic composition relative to state and national trends; however, Skagit County's population base has a higher percentage of the population identifying as Hispanic or Latino.

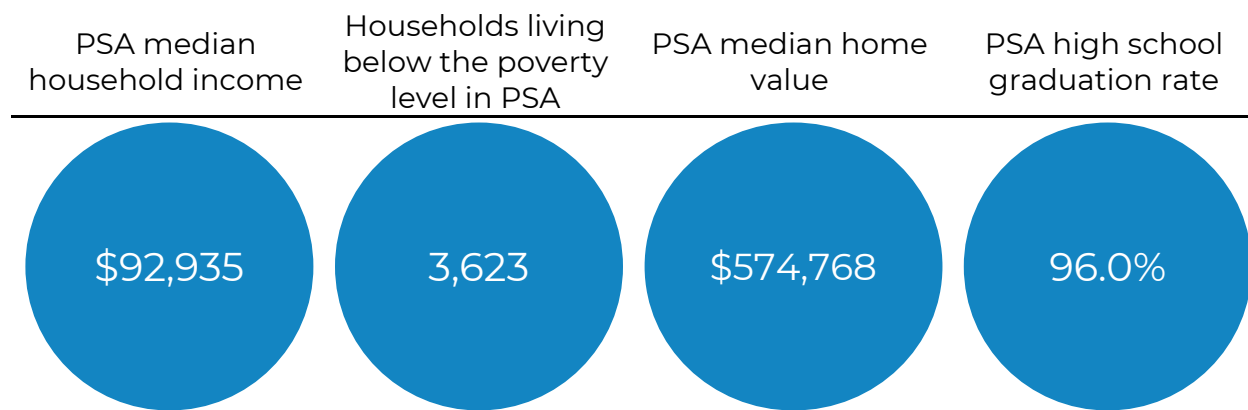
### Population distribution by race/ethnicity category



Source: ESRI Business Information Solutions, 2025

# Socioeconomic Indicators

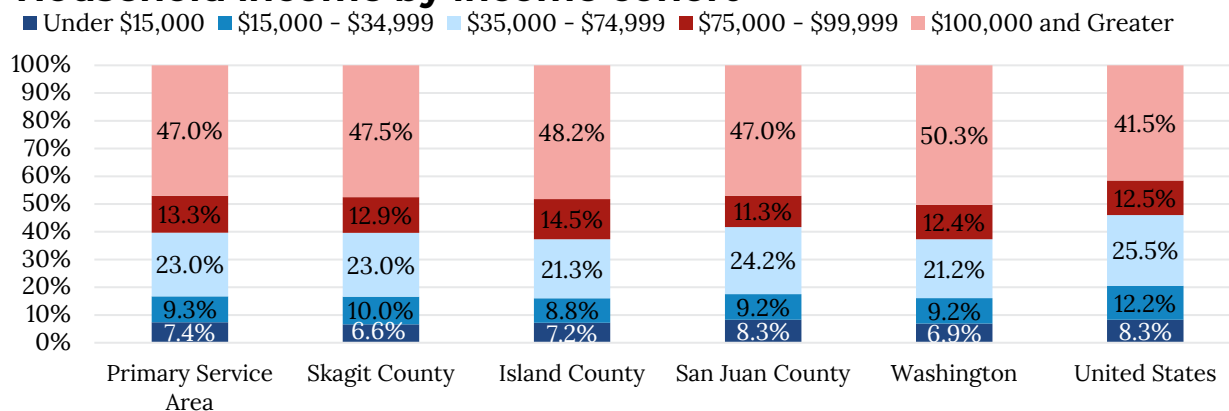
## ISLAND HEALTH COMMUNITY PROFILE AT-A-GLANCE



## INCOME AND POVERTY

Research has consistently shown that individuals and families with lower incomes are more likely to experience a range of health problems. These individuals may also face greater challenges in accessing healthcare services, obtaining healthy food options, and living in safe and stable environments, all of which can negatively impact health outcomes. Thus, household income is an important metric that can influence a range of factors that contribute to individual and population health outcomes. Household income levels across the service area display a slightly lower percentage of households falling in the highest income cohort (\$100,000 and greater) and a slightly higher percentage of households falling in the lowest (\$75,000 and less) income cohorts relative to state benchmarks. Higher cost of living in the Anacortes region further constrains the average household's means to afford basic necessities, including healthcare.

### Household income by income cohort

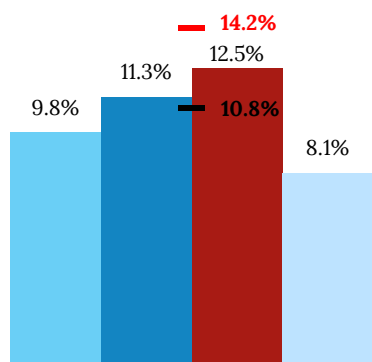


Source: ESRI Business Information Solutions, 2025

Rates of households below the poverty line in the PSA are lower than state and national benchmarks, suggesting slightly more favorable economic conditions; however, poverty rates in Skagit County and San Juan County exceed state rates. Income inequality is less prevalent in Skagit and Island County relative to state and national benchmarks. San Juan County appears to be more in line with the state and national benchmarks indicative of a more pronounced economic disparity. Since 2022, income inequality has increased in both Skagit and San Juan County, signaling that economic gaps in these communities may be widening, or worsening.

### Percent of total households below the poverty line

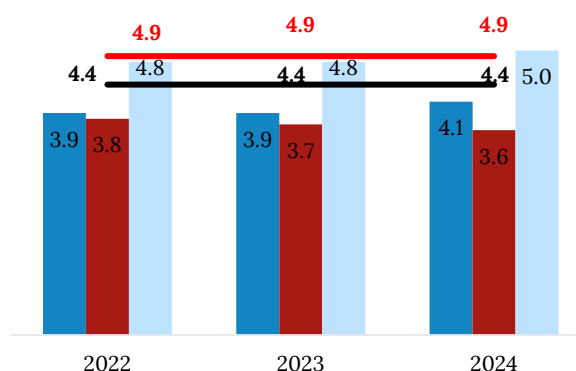
Primary Service Area Skagit County  
San Juan County Island County  
Washington United States



Source: American Community Survey 5-year estimates, 2019-2023

### Income inequality ratio

Skagit County Island County  
San Juan County Washington  
United States

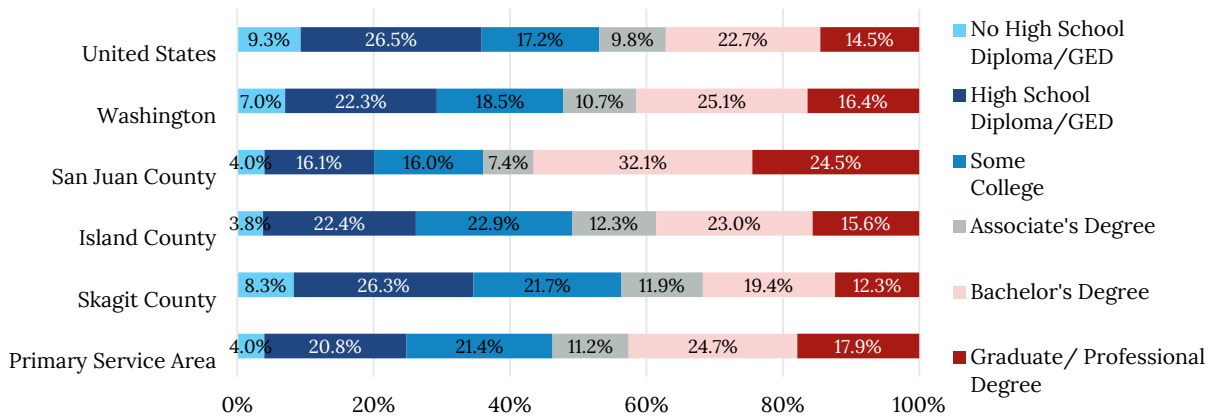


Source: County Health Rankings, 2022-2024  
Metric: Ratio of household income at the 80<sup>th</sup> percentile to the income at the 20<sup>th</sup> percentile. Higher number indicates larger degree of income inequality.

## EDUCATIONAL ATTAINMENT

Educational attainment is another socioeconomic variable that plays a significant role in community health given its association with household income and poverty levels. Higher educational attainment is associated with improved health outcomes, as it often correlates with greater economic and employment stability, health literacy, insurance coverage and access to care. However, with structural barriers such as job market saturation, wage stagnation, high housing costs can prevent educated individuals from escaping poverty. Educational attainment in the region served by Island Health exceeds state and national benchmarks, with 53.8% of the PSA population holding an associate's degree or higher. However, outcomes vary significantly across the counties that constitute Island Health's service area, with Skagit County residents generally exhibiting lower educational attainment and San Juan County residents generally exhibiting higher educational attainment. These factors, coupled with the income and poverty trends within each region, indicate complex needs within each community.

## Educational attainment by degree type



Source: ESRI Business Information Solutions, 2025

Metric: Percent of people age 25 and older who have earned the indicated degree

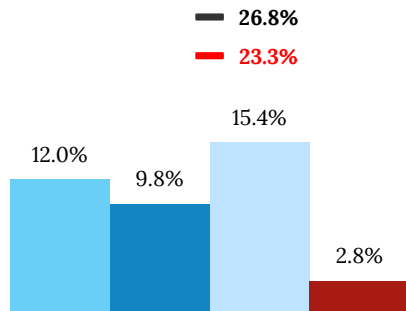
## AFFORDABLE HOUSING

Housing is a critical socioeconomic determinant of community health. As the single largest expense for most households, access to affordable housing enables families to allocate more of their financial resources to pay for other things, such as healthcare, transportation, and food. In the area served by Island Health, housing costs are generally high, requiring residents to spend more of their income on housing compared to state and national benchmarks. The high cost may be driven by a limited supply of homes relative to demand. According to the Population Health Trust, while the rate of new building construction of multi-family residences in Skagit County increased from 2019 to 2021, construction rates of multi-family residences have declined significantly since. In 2025, the rate of vacant housing units available to buy or rent in the PSA is lower than state and national benchmarks, with 12.0% of the housing units in the PSA available to buy or rent compared to 26.8% statewide and 23.3% nationally. Challenges in accessing available housing can be compounded with shortages in affordable housing. In 2024, all three counties exceeded the national affordable housing shortfall, with Island County and San Juan County displaying the most significant shortfalls in affordable housing.

In addition to housing generally being unavailable, housing is also more expensive across the service area, with residents spending a greater portion of their income on their mortgages compared to state and national benchmarks. San Juan County has the lowest percentage of vacant housing units, the highest proportion of income devoted to mortgage payments, and a significant shortfall in affordable housing.

### Percent of vacant housing units available to rent or buy

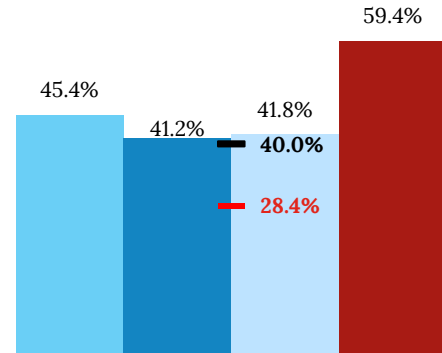
Primary Service Area Skagit County  
Island County San Juan County  
Washington United States



Source: ESRI Business Information Solutions, 2025

### Percent of income used for mortgage

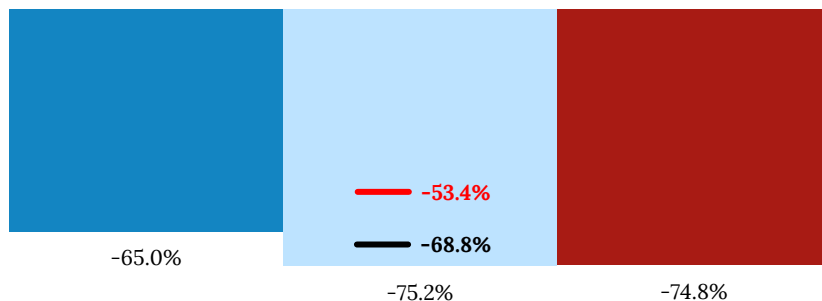
Primary Service Area Skagit County  
Island County San Juan County  
Washington United States



Source: ESRI Business Information Solutions, 2025  
Metric: Percent of income for mortgage (POIFM) quantifies the percentage of median household income dedicated to mortgage payments on a home priced at the median value

### Affordable housing shortfall

Skagit County Island County San Juan County Washington United States



Source: Healthiest Communities, 2024

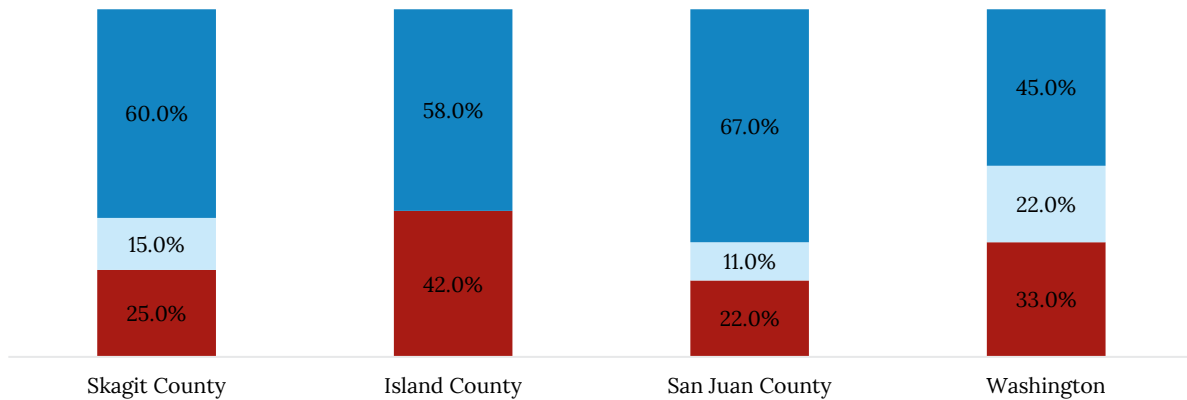
Metric: The availability of affordable housing for families that earn 30.0% or less of median area income. Negative numbers indicate a shortfall; positive numbers indicate greater supply than demand.

## FOOD SECURITY

Access to healthy food options and consuming healthy foods are essential components of a healthy lifestyle, with greater access associated with reduced risk of chronic diseases and optimal growth and development. In 2024, Skagit, Island, and San Juan counties generally reported higher rates of food security compared to state benchmarks, although a significant percentage of respondents continue to report some level of food insecurity.

## Reported food security status of adults sampled by the Washington State Food Security survey

■ Very low food security ■ Low food security ■ Food secure



Source: The Washington State Food Security Survey, 2024

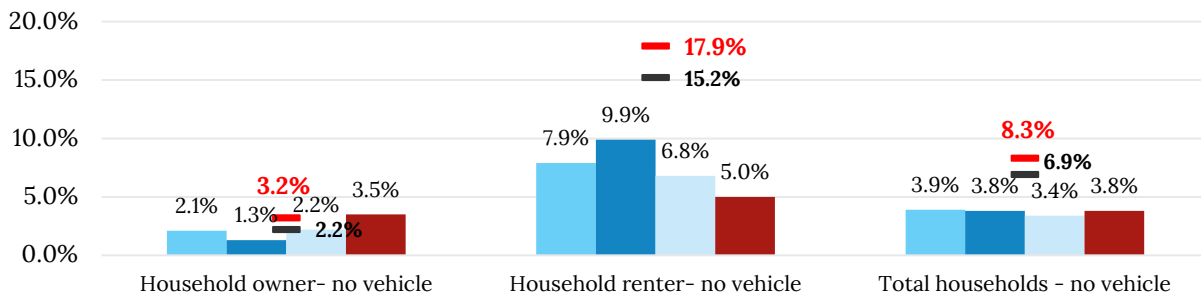
Metric: Percentage of Washington State Food Security Survey respondents reporting indicators of very low food security, low food security, or food security. The survey uses convenience sampling and an online format open to all Washington state residents over 18 years of age but intentionally oversamples households with lower incomes and those using food assistance to provide deeper insights on food insecurity throughout the state.

## TRANSPORTATION

Stakeholders interviewed identified transportation as a barrier to accessing healthcare. Without reliable access to transportation, community members may experience barriers in regularly accessing or utilizing healthcare services, be limited in the availability of healthy food options, or may miss work or school, which impacts income and education outcomes. Approximately 3.9% of households within Island Health's PSA do not have access to a vehicle, which is a lower percentage of the population compared to county, state, and national benchmarks. Households without access to a vehicle tend to be subject to disproportionate burdens on health outcomes.

## Percent of households with no vehicle

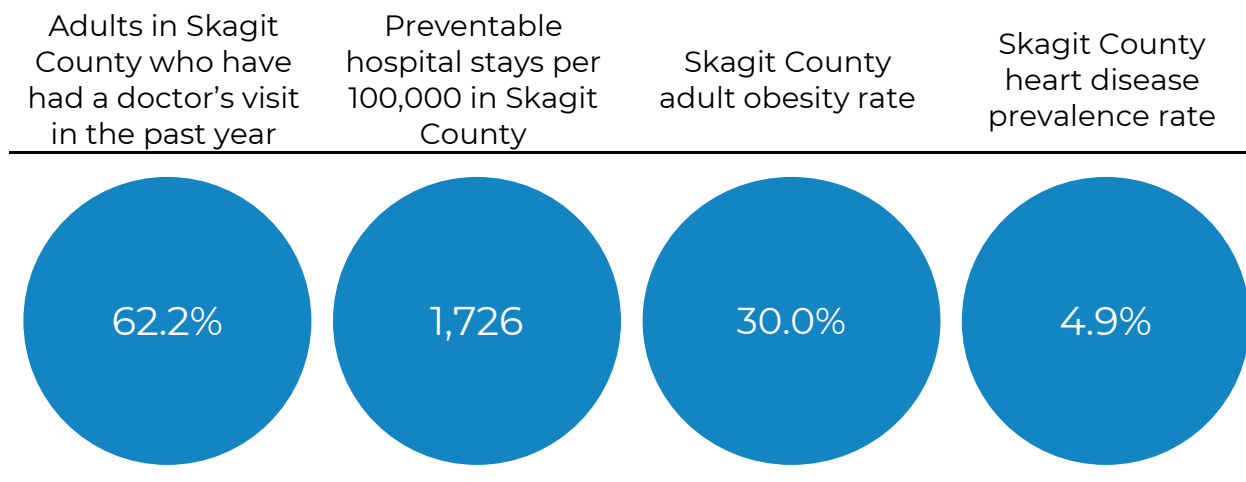
■ PSA ■ Skagit County ■ Island County ■ San Juan County ■ Washington ■ United States



Source: ESRI Business Information Solutions, 2025

# Health and Disease Indicators

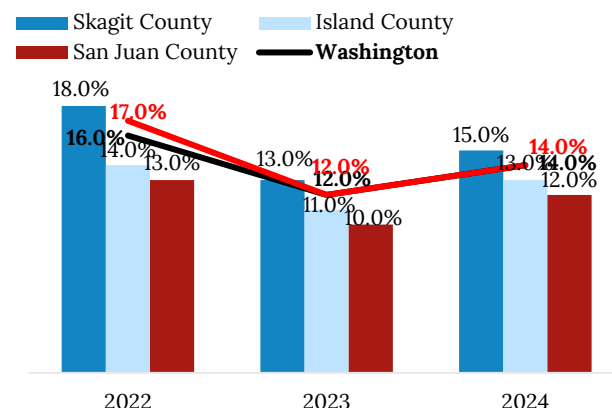
## ISLAND HEALTH COMMUNITY PROFILE AT-A-GLANCE



## POPULATION HEALTH AND CHRONIC DISEASE

Physical health can be impacted by a multitude of factors, including age, gender, race, socioeconomic status, physical activity, and chronic disease. Across the communities served by Island Health, rates of poor or fair health have declined since 2022, consistent with state and national trends. The largest improvement amongst the counties was seen in Skagit County, with a 3.0% decline in the percentage of adults reporting poor or fair health. However, rates of poor health in Skagit County generally remain elevated relative to other areas of the region.

### Percent of adults reporting poor or fair health



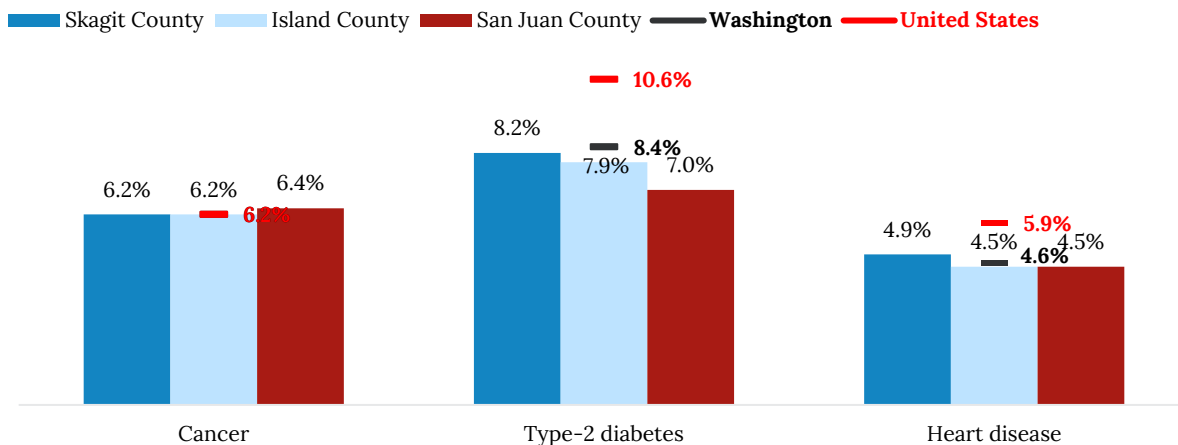
Source: County Health Rankings, 2022-2024  
Metric: Percentage of adults who stated that their physical health was not good 14 or more days in the past month.

Chronic disease can also have a profound impact on communities and physical health outcomes. Chronic disease, broadly defined as conditions that last longer than a year and that require ongoing medical care, is one of the leading causes of death in the U.S., typically stemming from a combination of genetic, lifestyle, and environmental factors. Over time, exposure to risk factors increases the likelihood of developing chronic disease, which disproportionately impacts the elderly.



Adults in the community served by Island Health generally exhibit comparable or slightly lower rates of lifetime chronic diseases, such as cancer, diabetes, and heart disease, relative to state and national benchmarks. Considering the older population base served across these counties relative to state benchmarks, these metrics generally indicate that the population served is healthier than comparable communities.

## Percent of adults with diagnosed chronic disease



Source: Healthiest Communities, 2024

Metric: Percent of adults who have experienced or been diagnosed with the indicated disease.

## TOP CAUSES OF MORTALITY

Knowing a community's top causes of mortality is essential in assessing health needs because it helps identify the most significant health issues affecting the community, which can guide health promotion efforts and prioritize public health initiatives. The leading causes of death in Skagit County have historically been malignant neoplasms (cancer), diseases of the heart, accidents, and Alzheimer's disease. COVID-19 was among the leading causes of death from 2021 to 2022.

Rank	2021		2022		2023	
	Cause of Death	Rate	Cause of Death	Rate	Cause of Death	Rate
1	Malignant neoplasms	146.1	Malignant neoplasms	150.6	Malignant neoplasms	155.6
2	Diseases of heart	123.3	Diseases of heart	144.0	Diseases of heart	122.5
3	Accidents	60.3	Accidents	56.2	Accidents	66.2
4	COVID-19	55.0	Alzheimer's disease	29.3	Chronic lower respiratory	31.2
5	Cerebrovascular diseases	38.2	COVID-19	27.1	Alzheimer's disease	30.2

Source: Washington State Department of Health

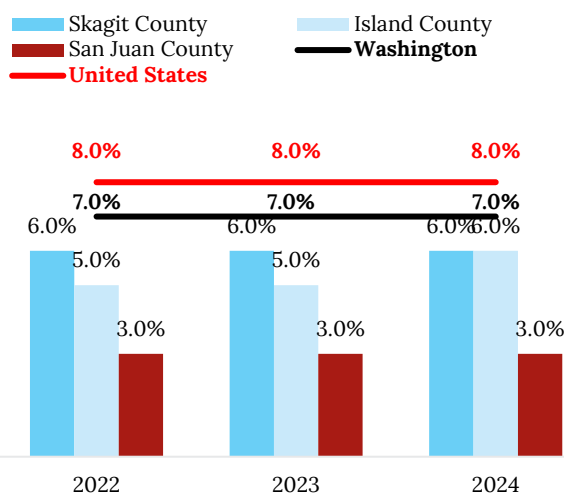
Metric: Age-adjusted deaths per 100,000 population.

## BIRTH OUTCOMES

Newborn birthweights are a strong predictor of newborn health and survival. Rates of low birthweight in a community are often associated with poor maternal health. Low birthweights can lead to higher rates of fetal mortality, stunted growth, impaired cognitive developments, and chronic disease in later life. Low birthweight percentages in the three counties served by Island Health remained steady from 2022 to 2024 and historically have not exceeded state and national benchmarks.

Teen birth is associated with adverse health outcomes for the teenage mother and their children, including a higher risk of birth complications, low birth weight, and maternal, neonatal, and infant mortality. The rate of teen births in Skagit County and Island County has declined since 2022, but Skagit County remains above state benchmarks.

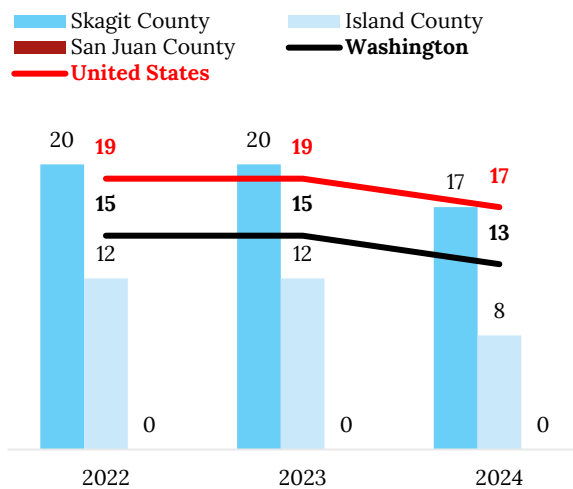
**Percent of total births with low birthweight**



Source: County Health Rankings, 2024

Metric: Percentage of live births with low birthweight (< 2,500 grams).

**Number of teen births per 1,000 females**



Source: County Health Rankings, 2024

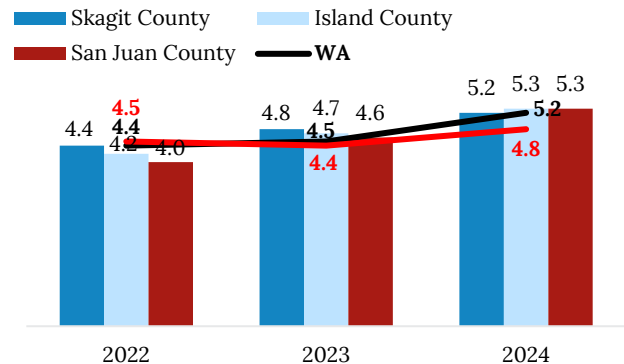
Metric: Number of births per 1,000 female population ages 15-19. Data not available for San Juan County.

## MENTAL HEALTH AND SUBSTANCE USE

The rising prevalence of mental health and substance abuse issues is of growing concern in rural communities across the country, who often disproportionately lack access to mental health services such as therapy, counseling, substance use treatment, and medication management. Mental health can have far-reaching effects on individuals, families, and communities, impacting physical health, social relationships, productivity, and community safety. Communities that lack access to mental health services often exhibit poorer mental health outcomes and higher rates of associated behaviors, such as alcohol or drug use and suicide.

According to data from the Washington State Department of Health, parts of Skagit County and all of San Juan County and Island County are designated as HPSAs for mental health professionals, meaning that there is a shortage of mental health providers to meet the needs of the community. Low-income and disabled adults and children are disproportionately impacted by this lack of access; according to the Washington Department of Social and Health Services, in 2025, approximately 51.0% of Medicaid-covered individuals that need behavioral health treatment in the tri-county area are served by Island Health.

### Average number of mentally unhealthy days reported in the past month

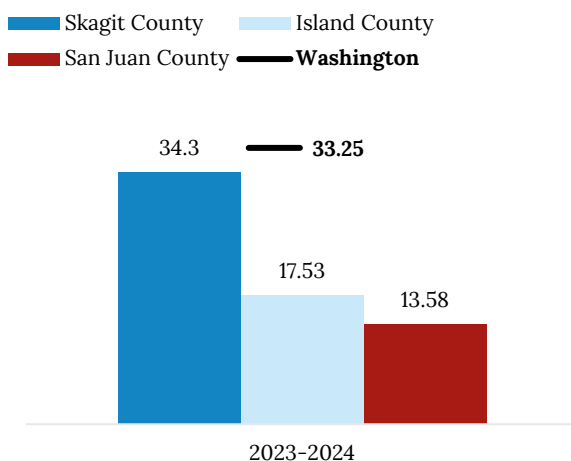


Source: County Health Rankings, 2022-2024

Metric: Average number of mentally unhealthy days reported in past 30 days (age-adjusted).

In recent years, the average number of mentally unhealthy days reported in the past month by residents has increased in all three counties served by Island Health as well as the state and country. According to the University of Washington Addictions, Drug, & Alcohol Institute, 2023 to 2024 data depicts deaths involving any opioid per 100,000 residents in Skagit County to be similar to the state of Washington, while Island and San Juan counties' deaths per 100,000 were about half of the state's death rate. Positively, all three counties and the country as a whole exhibit a decline in excessive drinking since 2022.

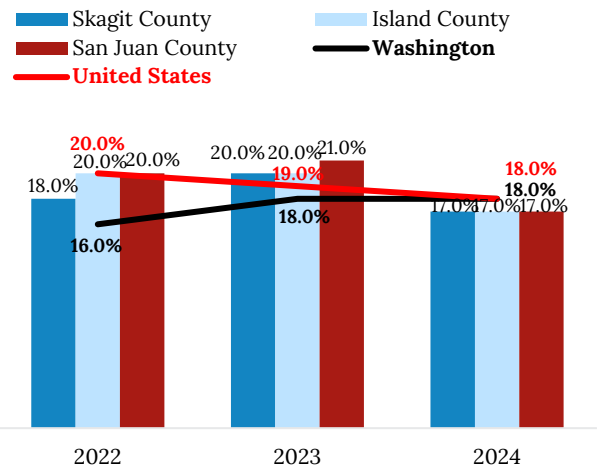
### Deaths involving any opioid per 100,000 residents



Source: University of Washington Addictions, Drug, & Alcohol Institute, 2023-2024

Metric: Number of deaths involving any opioid per 100,000 residents

### Percent of adults who report binge or heavy drinking



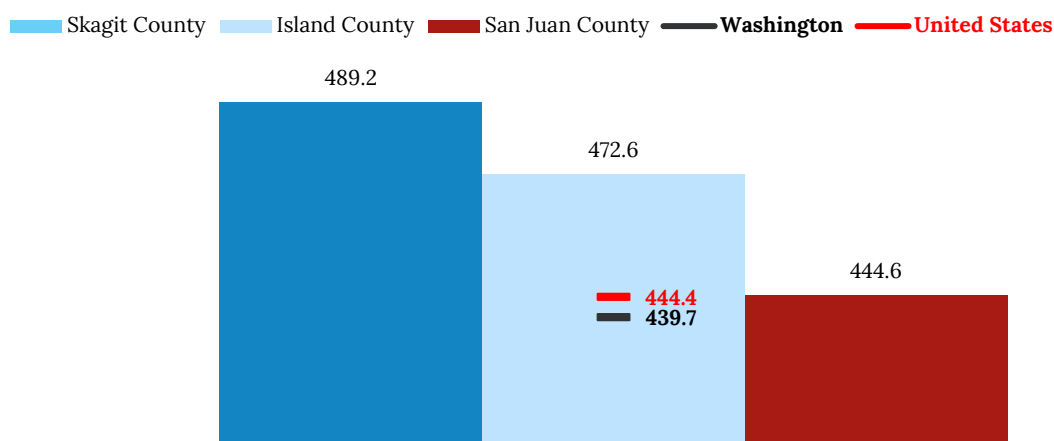
Source: County Health Rankings, 2022-2024

Metric: Percentage of adults who reported binge drinking at least once during the 30 days prior to the survey.

## CANCER

According to information from the Washington State Department of Health, cancer is the leading cause of death in the tri-county region served by Island Health. In 2023, cancer accounted for 603 deaths across the three counties, with 328 deaths occurring in Skagit County. Not only is cancer a significant cause of mortality, but new cancer incidence rates indicate that more people are afflicted with cancer across the tri-county region relative to state and national benchmarks, which is likely partially driven by the older age distribution of the service area population.

### Cancer incidence rate per 100,000 people



Source: National Cancer Institute, State Cancer Profiles, 2017-2021

Metric: Average annual incidence rate of new cancer diagnoses per 100,000 population, age adjusted.

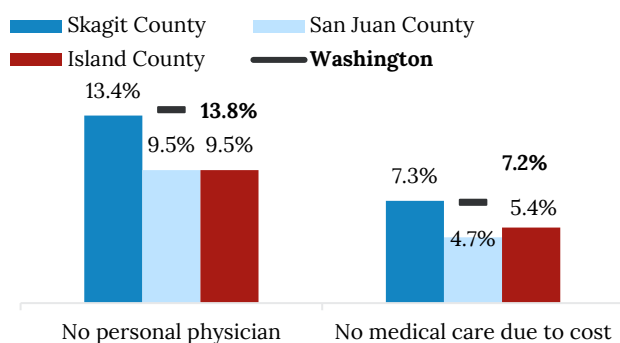
# Preventative Health and Wellness Indicators

## PREVENTATIVE HEALTH

Preventative health behaviors, such as getting annual checkups and recommended vaccinations and preventative health screenings, play an important role in maintaining and strengthening community health by promoting the early detection and prevention of diseases, reducing unnecessary healthcare utilization and costs, promoting healthy behaviors, and improving population health.

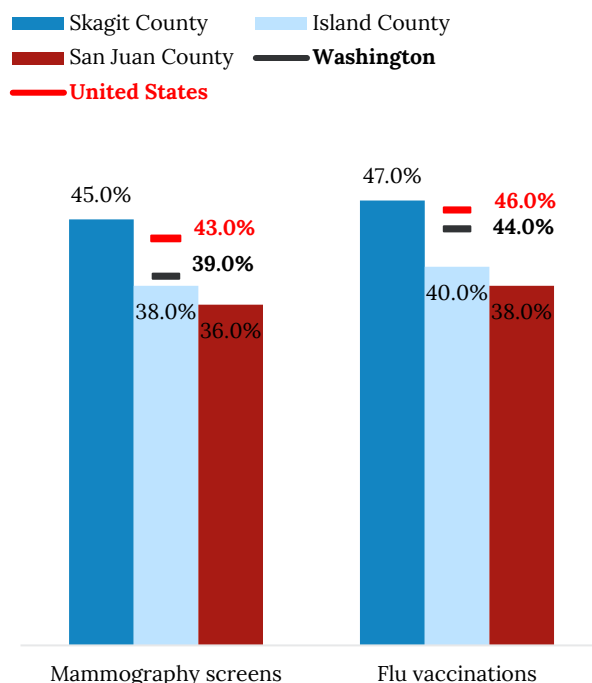
Overall, routine preventative health behaviors, such as mammography screens and flu vaccinations, among older adults in San Juan County and Island County fall slightly below state and national benchmarks, while Skagit County, with its closer proximity to healthcare facilities in Anacortes, exhibits slightly higher rates. However, only 6 in 10 adults in the tri-county area reported having a preventative care visit in the past year, which is on par with state benchmarks but below the national benchmark of 7 in 10 adults. This trend is observed despite lower reported barriers to accessing preventative care, such as not having a personal physician or due to cost.

### Barriers to receiving preventative care



Source: Washington State Department of Health, Behavioral Risk Factor Surveillance Survey, 2020-2022  
Metric: Percentage of adults (ages 18+) who reported the following barriers.

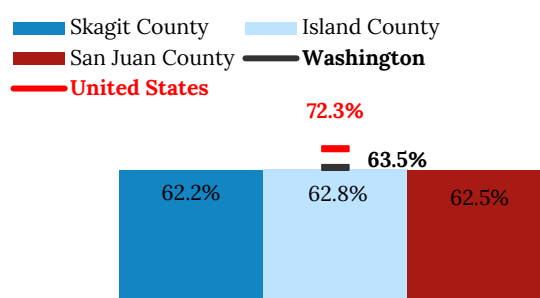
### Percent of adults that engage in routine preventative care



Source: Healthiest Communities, 2024; County Health Rankings, 2024

Metric: Mammography screening denotes percentage of female Medicare enrollees ages 65-74 that received an annual mammography screening. Flu vaccinations denotes percentage of fee-for-service (FFS) Medicare enrollees that had an annual flu vaccination.

### Percent of adults with recent preventative care visit



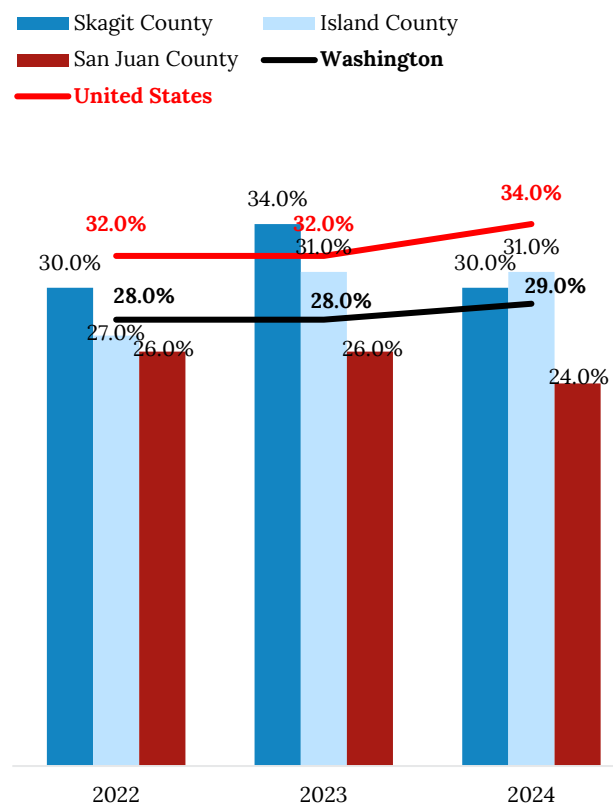
Source: Healthiest Communities, 2024

## ADULT OBESITY AND PHYSICAL ACTIVITY

Many chronic diseases such as diabetes, heart disease, and cancer are impacted by lifestyle and can be mitigated with early detection. Communities can reduce the incidence and burden of these chronic diseases in their populations by promoting healthy habits, such as regular exercise, healthy eating, and screenings for early detection of diseases.

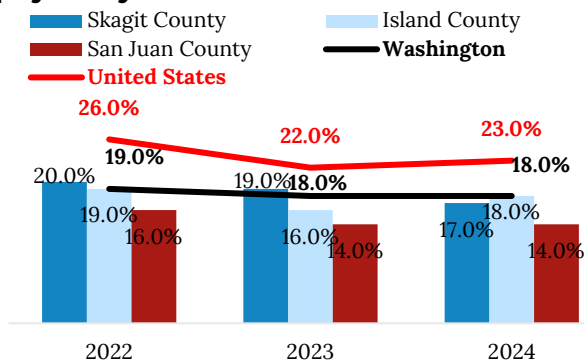
Despite lower rates of physical inactivity compared to national benchmarks, between 24.0% and 31.0% of adults in Skagit County, San Juan County, and Island County are obese, with rates of obesity in Island County generally increasing. While these rates are comparable to state and national benchmarks, further efforts to promote healthy eating and lifestyle choices as well as increased access to medical intervention tools to help reduce obesity rates would help improve health outcomes over time. The percentage of adults experiencing frequent physical distress, or poor physical health, across the three counties are consistent with state and national trends.

### Adult obesity rate



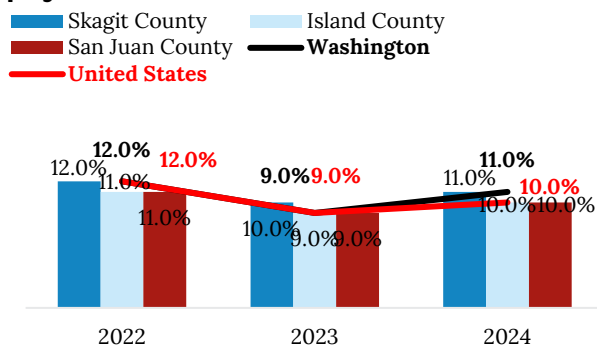
Source: County Health Rankings, 2022-2024  
Metric: Percentage of the adult population who are obese according to the Body Mass Index.

### Percent of adults who are physically inactive



Source: County Health Rankings, 2022-2024  
Metric: Percentage of adults who did not participate in any leisure-time activities (physical activities other than their regular job) during the past month.

### Adults experiencing frequent physical distress



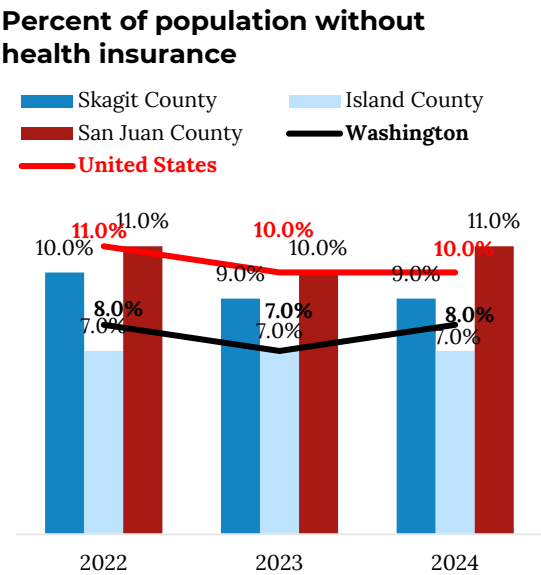
Source: County Health Rankings, 2022-2024  
Metric: Percentage of adults reporting 14 or more days of poor physical health per month (age-adjusted)

# Accessibility of Care Indicators

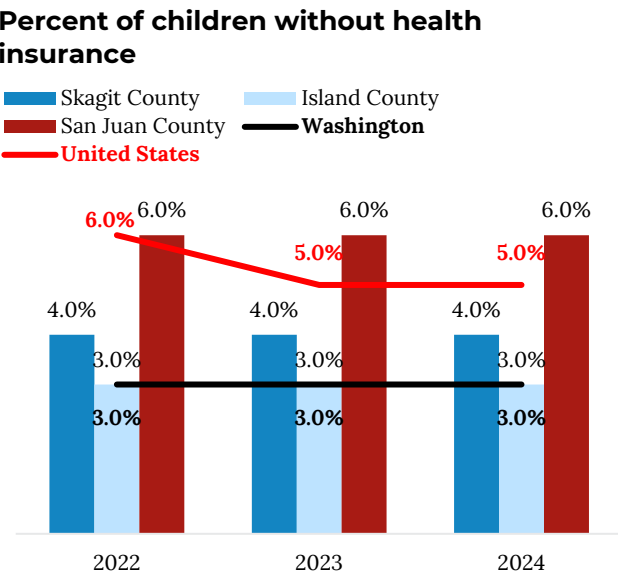
## INSURANCE

The cost of healthcare can be a major barrier that patients experience when trying to access healthcare services. Delaying medical care due to the cost of care can have numerous repercussions such as worsening medical conditions, chronic health problems, reduced quality of life, and increased healthcare costs in the long run. Individuals without health insurance often forego care due to high costs, which can lead to a higher prevalence of chronic disease and poorer health outcomes. For those that have health insurance, many individuals continue to face significant financial strain due to high deductibles and rising premiums, leading to delayed or forgone care. A higher percentage of people in Skagit and San Juan County are uninsured compared to state benchmarks, with San Juan County exceeding national benchmarks as of 2024.

The percentage of children without health insurance has also remained stagnant from 2022 to 2024. Island County reports the lowest rate of uninsured children (3.0%), meeting state (3.0%) benchmarks and below national (5.0%) benchmarks. Skagit County is slightly higher (4.0%) than state benchmarks.



Source: County Health Rankings, 2022-2024  
Metric: Percentage of population under age 65 without any kind of health insurance.

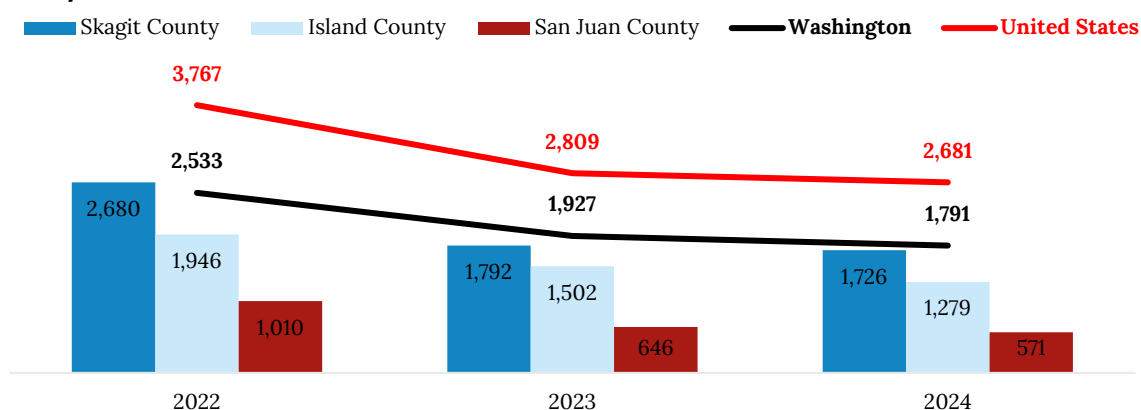


Source: County Health Rankings, 2022-2024  
Metric: Percentage of population 19 years or younger without any kind of health insurance.

## PREVENTABLE HOSPITAL STAYS

Hospitalization for conditions treatable in an outpatient setting suggests that members of the community might not be seeking or receiving necessary preventive care, or that primary and preventative care services are inaccessible to the community. The rate of preventable hospital stays for Skagit County, Island County, and San Juan County declined between 2022 and 2024, and as of 2024, all three counties are below state and national benchmarks. The decline in preventable hospital stays in the counties served by Island Health indicates that while access barriers may exist, such barriers are likely not contributing to unnecessary or preventable utilization of hospital-based inpatient services.

### Number of preventable hospital stays per 100,000 Medicare enrollees



Source: County Health Rankings, 2024

Metric: Rate of hospital stays for ambulatory care-sensitive conditions per 100,000 Medicare enrollees.

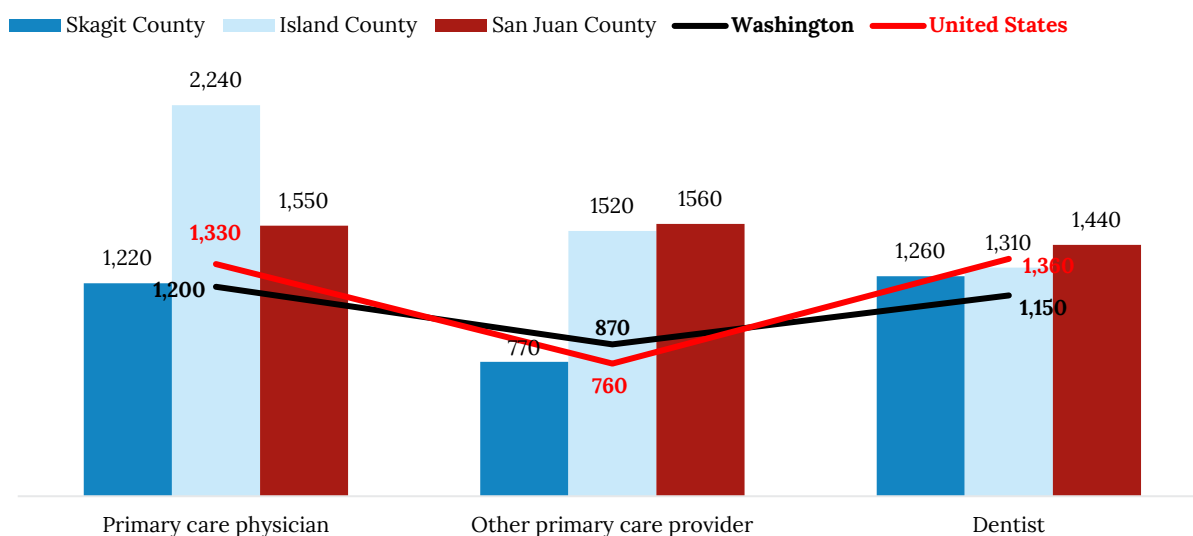
## PROVIDER ACCESSIBILITY

Having enough providers to support a community's needs is essential in maintaining access to healthcare services. Communities that lack access can be characterized by lower utilization of healthcare services and poorer health outcomes.

The ratio of population to primary care physicians is a key indicator of provider availability. High ratios mean more people per provider, signaling potential access challenges. Overall, accessibility of primary care physicians in Skagit and San Juan County are in line with state and national benchmarks. However, Island County has nearly twice the national benchmark for people per primary care physician (2,240 vs. 1,200), indicating a potential shortage of providers.



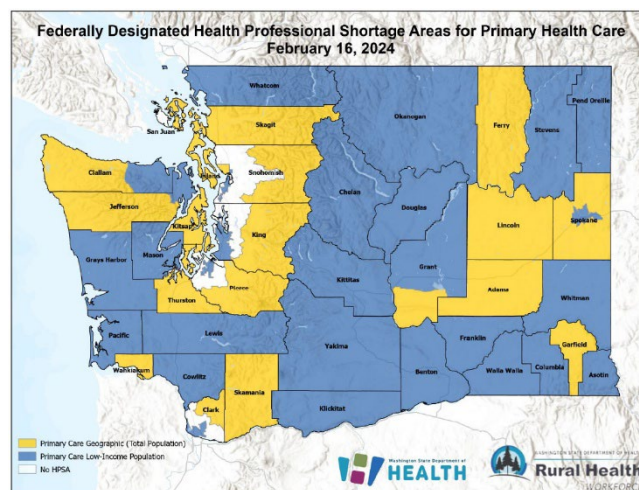
## Number of people per provider type



Source: County Health Rankings, 2024

Other primary care providers are primary care providers other than physicians, such as nurse practitioners (NPs), physician assistants (PAs), and clinical nurse specialists who can provide routine and preventive care.

These findings align with information from HRSA, which designates Skagit County, Island County and part of San Juan County as HPSAs for primary care healthcare professionals. HRSA indicates a need for 7.7 additional primary care full-time equivalent (“FTE”) providers in Skagit County, 0.5 additional FTEs in San Juan County, and 16.5 additional FTEs in Island County to alleviate existing provider shortages.



Source: Washington State Department of Health, 2024

# Existing Healthcare and Community Resources

## Hospital Services

Name	Address	Description of services
Island Health	1211 24th Street, Anacortes, WA	Inpatient services, birthing services, emergency department, surgery, diagnostic imaging and laboratory services, rehabilitative services, specialty care
Skagit Valley Hospital	1415 East Kincaid Street, Mt. Vernon, WA	Inpatient services, birthing services, emergency department, surgery, diagnostic imaging and laboratory services, rehabilitative services, specialty care
PeaceHealth Peace Island Medical Center	1117 Spring Street, Friday Harbor, WA	Inpatient services, emergency department, surgery, specialty care, diagnostic imaging laboratory services
Whidbey General Hospital	101 North Main Street, Coupeville, WA	Inpatient services, birthing services, emergency department, surgery, diagnostic imaging and laboratory services, rehabilitative services, specialty care

## Medical Services

Name	Address	Description of services
Island Primary Care - M Avenue	2601 M Avenue, Suite B, Anacortes, WA	Primary care services
Family Care Network- Island Family Physicians	2511 M Ave A, Anacortes, WA	Primary care services
Cascade Medical Group	1019 24th Street, Suite B, Anacortes, WA	Ear, nose, and throat services
Island Primary Care - 24th Street	1213 24th Street, #100, Anacortes, WA	Primary care services
Skagit Regional Clinic - Anacortes	2511 M Avenue, Suite D, Anacortes, WA	Cardiology services
Optum - Island Internal Medicine	912 32nd Street, Anacortes, WA	Internal medicine services
Didgwalic Wellness Center	8212 South March Point Road, Anacortes, WA	Primary care services
Wellness for Life, PLLP	708 Commercial Avenue, Anacortes, WA	Primary care services, holistic medicine services
North Sound OFS Oral & Facial Surgery	2620 Commercial Ave, Anacortes	Oral and and facial surgery services
Anacortes Dermatology	1801 Commercial Avenue, Anacortes, WA	Dermatology services
North Sound Dermatology	715 Seafarers Way, #100, Anacortes, WA	Dermatology services
Frontier Dermatology	3110 Commercial Ave, #105, Anacortes, WA	Dermatology services
Proliance Surgeons Skagit Northwest Orthopedics	2720 Commercial Ave, Anacortes, WA	Orthopedic surgery services

Skagit Regional Health – LaVenture Orthopedics	1401 S. LaVenture Rd, Mount Vernon, WA	Orthopedic surgery services
Swinomish Medical Clinic	17400 Reservation Road, La Conner, WA	Primary care services for Swinomish Indian Tribal Community
Thrive Direct Health Care	708 E Morris Street, La Conner, WA	Primary care services, holistic medicine services
Planned Parenthood - Mount Vernon	1805 E Division Street, Mount Vernon, WA	Family planning services
Planned Parenthood - Friday Harbor	470 Reed Street, Suite 2A, Friday Harbor, WA	Family planning services
Eventide Health	689 Airport Center, Friday Harbor, WA	Primary care services
Family Foot and Ankle Care	1100 SW Bowmer, Suite A103, Oak Harbor, WA	Podiatry services
Family Dermatology Co.	275 SE Cabot Drive, Suite A3, Oak Harbor, WA	Dermatology services
North Island Medical	165 SE Ely Street, Oak Harbor, WA	Primary care services
Naval Health Clinic - Oak Harbor	3475 North Saratoga Street, Oak Harbor, WA	Primary care services
Whidbey Health Walk-In Clinic	1300 Goldie Road, Oak Harbor, WA	Walk-in clinic services
Whidbey Health Primary Care	275 SE Cabot Drive, #B101, Oak Harbor, WA	Primary care services
Island Primary Care - Orcas	7 Deye Lane, Eastsound, WA	Primary care services
Lopez Island Medical Clinic	103 Washburn Place, Lopez Village, WA	Primary care services

## Behavioral Health Services

Name	Address	Description of services
Island Psychiatry & Behavioral Health	2511 M Avenue, Suite G, Anacortes, WA	Mental health services
Anacortes Behavioral Health Clinic	1004 M Avenue, Anacortes, WA	Mental health services, substance use disorder services
Dr. Christopher Tobey	606 Commercial Avenue, #G, Anacortes, WA	Mental health services
Jocelyn Palmer, MSW	1015 6th Street, #104, Anacortes, WA	Mental health services
Didgwalic Wellness Center	8212 South March Point Road, Anacortes, WA	Mental health services, substance use disorder services
Swinomish Counseling Services	17400 Reservation Road, La Conner, WA	Mental health services for Swinomish Indian Tribal Community
Compass Health	520 Spring Street, Friday Harbor, WA	Mental health services, substance use disorder services, intensive outpatient treatment
McGuire Shahn	55 2nd Street North, #204, Friday Harbor, WA	Marriage and family therapy
The Clearing	2687 West Valley Road, Friday Harbor, WA	Substance use disorder services, rehabilitative services
Island Assessment & Counseling	520 East Whidbey Avenue, Suite 205, Oak Harbor, WA	Substance use disorder services, rehabilitative services
Greg Rolnick	840 SE 8th Avenue, #204, Oak Harbor, WA	Mental health services
Oak Harbor Behavioral Health Clinic	31640 SR-20, #1, Oak Harbor, WA	Mental health services, substance use disorder services, medication-assisted treatment
WhidbeyHealth Behavioral Health	275 SE Cabot Dr B101, Oak Harbor WA	Mental health services, substance use disorder services

Sunrise Community Behavioral Health	530 NE Midway Boulevard, Oak Harbor, WA	Mental health services,
Brandon Adams, MS, LMFT	188 A Street, Eastsound, WA	Mental health services
Healing Arts Center	453 North Beach Road, Eastsound, WA	Mental health services
Island Psychiatric Services	374 North Beach Road, #3, Eastsound, WA	Mental health services



This report was completed in compliance with the IRS requirements described in section 501(r)(3) of the Internal Revenue Code.

Prepared by: Island Health

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Wipfli Advisory LLC

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