

Community Benefits Structure

Hospital Mission Statement	Catholic Healthcare West and our Sponsoring congregation are committed to furthering the healing ministry of Jesus. We dedicate our resources to: Delivering compassionate, high-quality, affordable health services; - Swerving and advocating for our sitters and brothers who are poor and disenfranchised; and partnering with others in the community to improve the quality of life.
Hospital Vision	A vibrant, national health care system known for service, chosen for clinical excellence, standing in partnership with patients, employees and physicians to improve the health of all communities served.
Hospital Values	Excellence, Dignity, Stewardship, Collaboration, Justice
Hospital Community Benefit Plan (groups to target, decision makers, goals)	Plan approved in FY 2010. Based upon a community needs assessment and the Community Needs Index. Priority health areas of focus: Improving access to healthcare; Preventing and managing chronic disease including cancer, heart/stroke, diabetes and lower respiratory disease; Improving access to oral health care; Improving access and utilization of immunizations; Improving community birth outcomes; and Improving nutritional habits and increased levels of physical activity for vulnerable populations. The Community Needs Index identifies socioeconomic differences across zip codes to identify populations who are more vulnerable to disease.

Mission Mapping (these are not required fields)

	Yes	No
Does your mission map to your strategic planning process?	Yes	
Do you have a dedicated community benefits coordinator?	Yes	
Do you have a charitable foundation?	Yes	
Do you conduct teaching and research?	Yes	
Do you operate a Level I or Level II trauma center?		No
Are you the sole provider in your geographic area of any specific clinical services? (If Yes, list services.)		No

Community Health Improvements Services

	Benefit \$ 5,279,849
Community Health Education	\$ 1,594,619
Community-Based Clinical Services	\$ 2,872,197
Health Care Support Services	\$ 813,033

Health Professions Education

	Benefit \$ 379,149
Physicians/Medical Students (net of Direct GME payments)	\$
Nurses/Nursing Students	\$ 251,697
Other Health Professional Education	\$ 127,452
Scholarships/Funding for Professional	\$

Education	
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Subsidized Health Services

	Benefit \$63,796,304
Total Uncompensated Cost from Uncompensated Cost Report filed with DHCFP	\$ 38,314,510
Less: Medicaid Disproportionate Share Payments received for the Period	
Less: Other Payments Received for these Accounts (County Supplemental Funds, etc.)	(\$2,093,643)
Net Uncompensated Care	\$ 36,220,867
Uncompensated SCHIP (Nevada Checkup) Cost	283,763
Uncompensated Medicare Cost (see instructions)	28,646,972
Uncompensated Clinic or Other Cost	218,801
Other Subsidized Health Services	1,302,597
Less: Cost Reported in Another Category	(2,876,696)
Total Subsidized Health Services	\$ 63,796,304

Research

	Benefit \$
Clinical Research	\$
Community Health Research	\$
Other	\$

Financial Contributions

	Benefit \$ 1,126,628
Cash Donations	\$ 301,302
Grants	\$ 369,781
In-Kind Donations	\$ 16,409
Cost of Fund Raising for Community Programs	\$ 439,136

Community Building Activities

	Benefit \$ 230,091
Physical Improvements and Housing	\$
Economic Development	\$
Community Support	\$ 3,803
Environmental Improvements	\$
Leadership Development and Leadership Training for Community Members	\$
Coalition Building	\$ 220,456
Community Health Improvement Advocacy	\$ 5,832
Workforce Development	\$

Community Benefit Operations

	Benefit \$ 90,734
Dedicated Staff	\$ 90,734
Community Health Needs/Health Assets Assessment	\$
Other Resources	\$

Other Community Benefits

(Briefly explain other community Benefits provided but not captured in sections above)	Benefit \$
	\$
	\$
Other Community Benefits Subtotal	\$

Total Community Benefit

	Benefit \$70,902,755

Other Community Support

	Benefit \$50,225
Property Tax	\$ 50,225
Sales and Use Tax	\$
Modified Business Tax	\$
Other Tax (describe)	\$
Assessment for not meeting minimum care obligation of NRS 439B.340	\$
Total Other Community Support	\$

Total Community Benefits & Other Community Support

	\$70,952,980

<p>List and briefly explain educational classes offered</p> <p>Center for Fitness – Health and fitness facility to develop overall health</p> <p>Northern Nevada Dental Health Program – Referral to no- and low-cost oral health services for children</p> <p>Chronic Disease Self Management Program – Educational program to help improve health of seniors with chronic diseases</p> <p>Clinical Rotation for Student Nurses – Clinical training for student nurses</p> <p>Community Disaster Preparedness – Community disaster drills</p> <p>Community Grants Program – Provides funding to local non-profit organizations for targeted programs that support key community benefit priorities</p> <p>Community Health Fairs – Health education events</p> <p>Community Health Screenings – Screening programs to detect health problems</p> <p>Donations to Non-Profit Organizations – Cash and in-kind contributions to organizations that support key community benefit priorities</p> <p>First Aid at Community Events – First aid services provided at community events</p> <p>Home Care/Hospice Services- Home care education program</p> <p>Immunization Program – Childhood, adult and travel immunizations</p> <p>Kids to Senior Korner Program – Mobile medical, social and security outreach to low income residents</p> <p>Cardiac Readmission Initiative - Telephonic support for low income CHF patients</p>

McQueen High School -Partners in Education – Adopt A School program focusing on improving job skills
 Mobile Dental Outreach: Restorative Services – Mobile dental restorative programs for low income children and adults
 Mobile Preventative Dental Sealant Program – School based dental sealant program
 Nell J Redfield Health Centers – Primary care practices (2) for low income residents
 Nevada Immunization Coalition – Support for this community based coalition to promote availability and use of immunizations
 Newborn Education – Education for family members of newborns to help with adjustment
 Oral Surgery Program – Hospital dentistry program for low income children and developmentally disabled adults
 Other Health Professional Training – Clinical experience for Pharmacists, Physical, Occupational, Speech therapists
 Palliative Care – In-home palliative care services
 Personal Assistant Services – In-home patient-directed support to enable independence for disabled individuals
 Physician Training – Training and education program
 Project New Hope Surgery Program – Outpatient surgical programs for low income children
 Services for Organizations and Community Groups – Facility, utilities, and technical services for not for profits
 Support Group: Cancer – 4 cancer support groups
 Support Group: New Parents – Support groups for new parents adjusting to parenthood
 Bereavement Support Group – Support groups and services for teens and adults experiencing loss
 Tobacco Prevention Program – Tobacco cessation program and care giver training to promote cessation attempts
 WIC Program Services – Women’s Infants and Children nutrition enhancement program

List and briefly describe other community benefits provided to the community for which the costs cannot be captured

-Saint Mary’s leadership participation on community not for-profit boards
 -Environmental initiatives that include reduced utility consumption, promotion of local food networks/producers, recycling of plastics, paper, cardboard, and aluminum and reconditioning of medical devices.

Discounted Services & Reduced Charges Policy & Procedures

Charity Care Policy: (attach copies of actual policies if first filing or policy changed)	Policy Effective Date: 05/18/04
Does the hospital have a policy? (Yes or No)	Yes
Policy covers up to what % of Federal Poverty Level?	500%
Discounts given up to what %?	100%
Amount of time to make arrangements (in days or months)	30 Days
Other comments	
Prompt Pay or Other Discounts: (attach copies of actual policies if first filing or policy changed)	Policy Effective Date: 01/01/2007
Does the hospital have a policy? (Yes or No)	Yes
Discounts given up to what %?	30%

Amount of time to make arrangements? (in days or months)	Discount given upon final bill
Other comments	

Collection of Accounts Receivable Policies & Procedures

Effective Date of Policy	05/18/2004
Does hospital have established policy?	Yes
Does hospital make every reasonable effort to help patient to obtain coverage? (Yes or No)	Yes
Number of patient contacts before referral to collection agency	3
Is collection policy consistent with the Fair Debt Collection Practices Act? (Yes or No)	Yes
Methods of communication with patient (e.g. phone, letter, etc.)	Phone & Letter
Number of days prior to referral to collection agency	180
Is the patient notified in writing of referral to collection agency?	Yes, by agency
Is the patient notified in writing prior to a lawsuit being begun?	Yes
Other comments	Referrals may take place sooner if unable to make contact with patient via telephone or letter due to demographic information no longer being valid. The collection agency performs the skip tracing, collection work from that point forward.

Chargemaster

Is hospital chargemaster available in accordance with NRS 449.490 (4) requirements? (Yes or No)	Yes
Is the chargemaster updated at least monthly? (Yes or No)	Yes
How is the chargemaster made available? (E.g. format, location, etc.)	Excel/Hospital BUO