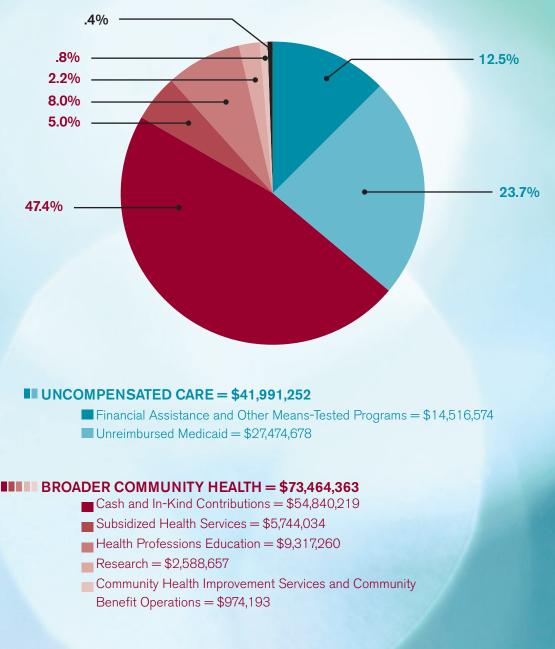




Fiscal Year 2013 Community Benefit Financial Highlights



Total Community Benefit = \$115,455,615

■ COMMUNITY-BUILDING ACTIVITIES = \$432,004

What do these numbers mean?

Bringing Medicine Full Circle

UNCOMPENSATED CARE

Financial Assistance and Other Means-Tested Programs

The Nebraska Medical Center, as a not-for-profit, 501 (c)(3) tax exempt entity, provides charitable medical care to those who qualify. The hospital has financial assistance policies which outline the procedure for patients of limited means to apply for help with payment for their medical care. Patient financial counselors assist patients and families with this process, which includes meeting financial qualification guidelines. For fiscal year 2013, the hospital provided financial assistance to uninsured and underinsured individuals in the amount of **\$14,516,574**.

Unreimbursed Medicaid

In addition to financial assistance provided to those who qualify, The Nebraska Medical Center also accepts any patient who carries Medicaid insurance. The cost of providing medical care exceeds the amount of reimbursement provided to hospitals by Medicaid insurance, thus creating a shortfall. That shortfall is considered a community benefit because hospitals reduce the government's financial burden by covering that shortfall. Last year, the total amount covered by The Nebraska Medical Center for patients carrying Medicaid insurance was **\$27,474,678**.

BROADER COMMUNITY HEALTH

Cash and In-Kind Contributions

As an academic medical center, The Nebraska Medical Center's largest community benefit is its support of the University of Nebraska Medical Center's (UNMC) academic programs and operations. Providing a clinical teaching environment to help educate the students of UNMC is part of the mission of The Nebraska Medical Center. Making sure the community has access to necessary health education programs, critical and specialty medical services and state of the art facilities are top priorities for The Nebraska Medical Center. Further, the hospital practices good citizenship by providing financial and in-kind support of other local charitable organizations. In fiscal year 2013, **\$54,840,219** was given by the hospital in the form of grants for operational support, charitable contributions and in-kind donations of goods or services to other 501 (c) (3) organizations.

Subsidized Health Services

These figures represent the cost of providing necessary health services for the community, despite a financial loss to the hospital. Some examples of subsidized services that qualify as community benefits include burn units, specialty services for women and children, emergency and trauma care, behavioral health services, palliative care, community clinics and neonatal intensive care units. The total dollars provided by The Nebraska Medical Center to subsidize necessary health services was **\$5,744,034**.

Health Professions Education

The support of education for current and future health care providers is a countable community benefit. The numbers represented here include a hospital's direct financial support of medical education, internships, residencies and fellowships, as well as nursing and allied health education programs. There are direct costs associated with providing education for providers, and there are also the indirect costs of staff time required to provide future doctors, nurses and allied health providers a clinical setting with hands-on opportunities, which is a critical piece of their education. Sixty percent of the providers practicing in the state of Nebraska received some sort of clinical training from The Nebraska Medical Center. The dollars in this category for fiscal year 2013 totaled **\$9,317,260**.

Research

Medical research is the cornerstone of advancements in the technology and practice of medicine. While the University of Nebraska Medical Center (UNMC) provides the main research component to the medical center campus, the hospital also participates in research studies and clinical trials in order to advance medical treatments and improve outcomes for patients. These community benefits equaled **\$2,588,657** in fiscal year 2013.



Community Health Improvement Services and Community Benefit Operations

Community health improvement services include activities designed to improve community health. Fiscal year 2013 saw **\$974,193** in hospital resources expended in an attempt to improve community health in a community-based setting. These activities extend above and beyond routine patient care and are not billable services. Some examples include participation in health fairs, free and reduced-cost health screenings, support groups for patients and families and education on various health topics to the community at large. This category also includes outreach efforts to improve access to care for vulnerable populations. A significant expense reflected in this category is the staff time required to implement these health improvement activities and the community benefit operations staff time to track, assess and report community benefit data.

COMMUNITY-BUILDING ACTIVITIES

Community-building activities are designed to address the root causes of health problems. Poverty, homelessness and environmental problems all contribute to poor health. The types of programs included in this category support workforce development and training programs to provide employment and leadership skills training, job shadowing for students interested in health careers and economic development support grants to help revitalize low-income areas and businesses. Fiscal year 2013 figures were **\$432,004**.

Meeting the Needs of Our Community

In order to address the needs of the communities served by The Nebraska Medical Center and Bellevue Medical Center, a thorough community health needs assessment was performed by an outside professional research company. That assessment survey uncovered the top needs in the populations we serve in and around our two hospitals. Key stakeholders from The Nebraska Medical Center and Bellevue Medical Center met to prioritize the community needs that would become priority focus areas for each hospital. Those primary focus areas were identified as: diabetes, heart disease/stroke and access to care.

In order to create a robust and meaningful plan to impact the prioritized needs, a community benefits planning and implementation steering committee was formed. This steering committee has accountability at the board level, and is comprised of top-level senior leaders from both The Nebraska Medical Center and Bellevue Medical Center, and other key stakeholders from the medical center campus including representation from the University of Nebraska Medical Center (UNMC).

To further support the community health improvement efforts, a focus team of people with special expertise in each of the prioritized areas was assembled by the steering committee. Those three focus teams include physicians, nurses, pharmacists, social workers, senior leaders, public and community health experts and other hospital administrators all working side by side to review the organization's community benefits, inform current community health improvement initiatives and plan for future efforts.

The organization's efforts to address diabetes, heart disease/stroke and access to care in the community in fiscal year 2013 included:

- Financial support of community-based organizations focused on supporting the underserved
- Funding for disease management and research-oriented organizations
- Healthy cooking classes for diabetic patients
- Participation in community-wide health fairs
- Blood pressure and stroke screenings
- · Service to area community boards and committees
- · Various educational presentations to community stakeholders
- Specialty education and training to current and future health care providers.

All community based efforts are targeted at reaching the populations who reside in the areas of identified need in the counties serviced by The Nebraska Medical Center and Bellevue Medical Center.

In addition to these external outreach efforts, nurse case managers and social workers from The Nebraska Medical Center and Bellevue Medical Center routinely help low income and vulnerable patients obtain support services, necessary medications or medical supplies. The hospitals also conduct support groups to help individuals manage their conditions after discharge, and these are open to anyone in the community to attend.

Future planning efforts to improve the cardiovascular health, the health of diabetic patients and access to health care concerns in this community are under the oversight of the diabetes, heart/stroke and access to care steering committee and focus teams.