

COMMUNITY BENEFIT NARRATIVE REPORTING INSTRUCTIONS

Effective for FY2015 Community Benefit Reporting

Health Services Cost Review Commission
4160 Patterson Avenue
Baltimore MD 21215

BACKGROUND

The Health Services Cost Review Commission's (HSCRC or Commission) Community Benefit Report, required under §19-303 of the Health General Article, Maryland Annotated Code, is the Commission's method of implementing a law that addresses the growing interest in understanding the types and scope of community benefit activities conducted by Maryland's nonprofit hospitals.

The Commission's response to its mandate to oversee the legislation was to establish a reporting system for hospitals to report their community benefits activities. The guidelines and inventory spreadsheet were guided, in part, by the VHA, CHA, and others' community benefit reporting experience, and was then tailored to fit Maryland's unique regulated environment. The narrative requirement is intended to strengthen and supplement the qualitative and quantitative information that hospitals have reported in the past. The narrative is focused on (1) the general demographics of the hospital community, (2) how hospitals determined the needs of the communities they serve, (3) hospital community benefit administration, and (4) community benefit external collaboration to develop and implement community benefit initiatives.

On January 10, 2014, the Center for Medicare and Medicaid Innovation (CMMI) announced its approval of Maryland's historic and groundbreaking proposal to modernize Maryland's all-payer hospital payment system. The model shifts from traditional fee-for-service (FFS) payment towards global budgets and ties growth in per capita hospital spending to growth in the state's overall economy. In addition to hitting aggressive quality targets, this model must save at least \$330 million in Medicare spending over the next five years. The HSCRC will monitor progress overtime by measuring quality, patient experience, and cost. In addition, measures of overall population health from the State Health Improvement Process (SHIP) measures will also be monitored (see Attachment A).

To succeed, hospital organizations will need to work in collaboration with other hospital and community based organizations to increase the impact of their efforts in the communities they serve. It is essential that hospital organizations work with community partners to identify and agree upon the top priority areas, and establish common outcome measures to evaluate the impact of these collaborative initiatives. Alignment of the community benefit reporting with these larger delivery reform efforts such as the Maryland all-payer model will support the overall efforts to improve population health and lower cost throughout the system.

For the purposes of this report, and as provided in the Patient Protection and Affordable Care Act ("ACA"), the IRS defines a CHNA as a:

Written document developed for a hospital facility that includes a description of the community served by the hospital facility: the process used to conduct the assessment including how the hospital took into account input from community members and public health experts; identification of any persons with whom the hospital has worked on the assessment; and the health needs identified through the assessment process.

The written document (CHNA), as provided in the ACA, must include the following:

A description of the community served by the hospital and how it was determined;

A description of the process and methods used to conduct the assessment, including a description of the sources and dates of the data and other information used in the assessment and the analytical methods applied to identify community health needs. It should also describe information gaps that impact the hospital organization's ability to assess the health needs of the community served by the hospital facility. If a hospital collaborates with other organizations in conducting a CHNA the report should identify all of the organizations with which the hospital organization collaborated. If a hospital organization contracts with one or more third parties to assist in conducting the CHNA, the report should also disclose the identity and qualifications of such third parties;

A description of how the hospital organization obtains input from persons who represent the broad interests of the community served by the hospital facility, (including working with private and public health organizations, such as: the local health officers, local health improvement coalitions ("LHIC's)[see: http://dhmh.maryland.gov/healthenterprisezones/Documents/Local_Population_Health_Improvement_Contacts_4-26-12.pdf] schools, behavioral health organizations, faith based community, social service organizations, and consumers) including a description of when and how the hospital consulted with these persons. If the hospital organization takes into account input from an organization, the written report should identify the organization and provide the name and title of at least one individual in such organizations with whom the hospital organization consulted. In addition, the report must identify any individual providing input, who has special knowledge of or expertise in public health by name, title, and affiliation and provide a brief description of the individual's special knowledge or expertise. The report must identify any individual providing input who is a "leader" or "representative" of certain populations (i.e., healthcare consumer advocates, nonprofit organizations, academic experts, local government officials, community-based organizations, health care providers, community health centers, low-income persons, minority groups, or those with chronic disease needs, private businesses, and health insurance and managed care organizations);

A prioritized description of all the community health needs identified through the CHNA, as well as a description of the process and criteria used in prioritizing such health needs; and

A description of the existing health care facilities and other resources within the community available to meet the community health needs identified through the CHNA.

Examples of sources of data available to develop a CHNA include, but are not limited to:

- (1) Maryland Department of Health and Mental Hygiene's State Health Improvement Process (SHIP)(<http://dhmh.maryland.gov/ship/>);
- (2) SHIP's CountyHealth Profiles 2012 (<http://dhmh.maryland.gov/ship/SitePages/LHICcontacts.aspx>);
- (3) the Maryland ChartBook of Minority Health and Minority Health Disparities (http://dhmh.maryland.gov/mhhd/Documents/2ndResource_2009.pdf);
- (4) Consultation with leaders, community members, nonprofit organizations, local health officers, or local health care providers;
- (5) Local Health Departments;

- (6) County Health Rankings (<http://www.countyhealthrankings.org>);
- (7) Healthy Communities Network (<http://www.healthycommunitiesinstitute.com/index.html>);
- (8) Health Plan ratings from MHCC (<http://mhcc.maryland.gov/hmo>);
- (9) Healthy People 2020 (http://www.cdc.gov/nchs/healthy_people/hp2010.htm);
- (10) Behavioral Risk Factor Surveillance System (<http://www.cdc.gov/BRFSS>);
- (11) Youth Risk Behavior Survey (<http://phpa.dhmh.maryland.gov/cdp/SitePages/youth-risk-survey.aspx>);
- (12) Focused consultations with community groups or leaders such as superintendent of schools, county commissioners, non-profit organizations, local health providers, and members of the business community;
- (13) For baseline information, a CHNA developed by the state or local health department, or a collaborative CHNA involving the hospital; Analysis of utilization patterns in the hospital to identify unmet needs;
- (14) Survey of community residents; and
- (15) Use of data or statistics compiled by county, state, or federal governments.

In order to meet the requirement of the CHNA for any taxable year, the hospital facility must make the CHNA widely available to the public and adopt an implementation strategy to meet the health needs identified by the CHNA by the end of the same taxable year.

The IMPLEMENTATION STRATEGY, as provided in the ACA, must:

- a. Be approved by an authorized governing body of the hospital organization;
- b. Describe how the hospital facility plans to meet the health need, such as how they will collaborate with other hospitals with common or shared CBSAs and other community organizations and groups (including how roles and responsibilities are defined within the collaborations); and
- c. Identify the health need as one the hospital facility does not intend to meet and explain why it does not intend to meet the health need.

Reporting Requirements

I. GENERAL HOSPITAL DEMOGRAPHICS AND CHARACTERISTICS:

1. Please list the following information in Table I below. For the purposes of this section, “primary services area” means the Maryland postal ZIP code areas from which the first 60 percent of a hospital’s patient discharges originate during the most recent 12 month period available, where the discharges from each ZIP code are ordered from largest to smallest number of discharges. This information will be provided to all acute care hospitals by the HSCRC. (Specialty hospitals should work with the Commission to establish their primary service area for the purpose of this report).

Table I

Bed Designation:	Inpatient Admissions:	Primary Service Area Zip Codes:	All other Maryland Hospitals Sharing Primary Service Area:	Percentage of Uninsured Patients, by County:	Percentage of Patients who are Medicaid Recipients, by County:
07/01/15 = 223 (licensed acute-care); 20 (licensed acute rehab); 41 bassinets Source: Office of Health Care Quality; Maryland Health Care Commission	17,029 Inpatient Admissions and 1,957 Newborns	21740 21742 21795 21741 21734 21746	N/A	5.5% total Uninsured (please see Addendum - Table I on page 51 for complete listing by County)	27.49% total Medicaid (please see Addendum - Table I on page 51 for complete listing by County)

2. For purposes of reporting on your community benefit activities, please provide the following information:

a. Describe in detail the community or communities the organization serves. Based on findings from the CHNA, provide a list of the Community Benefit Service Area (CBSA) zip codes. These CBSA zip codes should reflect the geographic areas where the most vulnerable populations reside. Describe how the CBSA was determined, (such as highest proportion of uninsured, Medicaid recipients, and super utilizers, i.e. individuals with > 3 hospitalizations in the past year). This information may be copied directly from the section of the CHNA that refers to the description of the Hospital’s Community Benefit Community.

Community Benefit Service Area (CBSA) Target Population—

Meritus Medical Center’s primary service area is Washington County, Md., with a total population of 149,588 (CountyHealthRankings.org, 2015), 39,662 (U.S. Census Bureau, 2010 Census) from the Hagerstown city limits. Located at the crossroads of western Maryland, southern Pennsylvania and the eastern panhandle of West Virginia, patients at our 223-licensed-acute-bed hospital (MD Health Care Commission, FY16) also come from these secondary areas:

- Frederick County, Md.
- Franklin County, Pa.
- Fulton County, Pa.
- Morgan County, W.Va.
- Jefferson County, W.Va.
- Berkeley County, W.Va.

Established in 1776, Washington County, Md., is 458 square miles in size. The county is located approximately 70 miles west of both Baltimore, Md. and Washington, D.C. and has three major interstates running through it—Interstates 70, 81 and 68.

There are 22,290 seniors, ages 65 and older – nearly 15% of the total population, in the community (Source: U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates). Veterans make up 10.6% of the population. (U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates).

Diversity is limited in Washington County, Md., where 84 percent of the population is white (U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates).

Ninety percent of students successfully graduated high school in the county (CountyHealthRankings.org, 2015). Within the total population, 86.1 percent have at least a high school graduate degree (U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates).

According to the Maryland Department of Business and Economic Development, the largest employers in the county are Meritus Health with 2,730 employees, Citi with 2,700 employees, First Data with 2,322 employees and the Volvo Group with 1,350 employees. Primary business establishments are in the areas of manufacturing, retail trade and health care (Maryland Department of Business and Economic Development, November 2014).

For income in the past 12 months, statistics show 2.3 percent of the county's population with cash public assistance income and 13.8 percent with food stamps and /or SNAP benefits. Among all people, 12.7 percent live below the federal poverty guidelines. (U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates).

Washington County ranks number 13 for health outcomes among counties in the state of Maryland and number 16 for health factors according to the most recent Community Health Ranking (Robert Wood Johnson Foundation, 2015). Adult obesity is 33% of the adult population (reporting a BMI of greater than or equal to 30) while adults at a healthy weight has reduced to 27.9%, indicating significant challenges and at risk for the majority of adults. Rates of heart disease and diabetes mortality continue to exceed the state and national averages. ED utilization for mental health treatment remains 1 standard deviation above state rates. Drug induced death rates and opioid overdoses are trending upwards. The teen pregnancy rate is trending down, but continues to exceed the rate of most other Maryland counties.

b. In Table II, describe the population within the CBSA, including significant demographic characteristics and social determinants that are relevant to the needs of the community and ***include the source of the information in each response***. For purposes of this section, social determinants are factors that contribute to a person’s current state of health. They may be biological, socioeconomic, psychosocial, behavioral, or social in nature. (Examples: gender, age, alcohol use, income, housing, access to quality health care, transportation, education and healthy environment, having or not having health insurance.) (Add rows in the table for other characteristics and determinants as necessary).

Some statistics may be accessed from the Maryland State Health Improvement Process, (<http://dhmh.maryland.gov/ship/>) and its Area Health Profiles 2013, (<http://dhmh.maryland.gov/ship/SitePages/LHICcontacts.aspx>), the Maryland Vital Statistics Administration (<http://dhmh.maryland.gov/vsa/SitePages/reports.aspx>), The Maryland Plan to Eliminate Minority Health Disparities (2010-2014) (http://dhmh.maryland.gov/mhhd/Documents/Maryland_Health_Disparities_Plan_of_Action_6.10.10.pdf), the Maryland ChartBook of Minority Health and Minority Health Disparities, 2nd Edition (<http://dhmh.maryland.gov/mhhd/Documents/Maryland%20Health%20Disparities%20Data%20Chartbook%202012%20corrected%202013%2002%2022%2011%20AM.pdf>), The Maryland State Department of Education (The Maryland Report Card) (<http://www.mdreportcard.org>) Direct link to data– (<http://www.mdreportcard.org/downloadindex.aspx?K=99AAAA>)

Table II

<p>Community Benefit Service Area (CBSA) Target Population (# of people in target population, by sex, race, ethnicity, and average age)</p> <p><i>Source: U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates</i></p>	<p>Total population: 148,913</p> <p>Male 50.9%; Female 49.1%</p> <p>White 84.3%</p> <p>Black 10.4%</p> <p>Hispanic or Latino origin 3.9%</p> <p>Asian 1.6%</p> <p>Two or more races 3.0%</p> <p>Median Age: 40.4</p>
<p>Median Household Income within the CBSA</p> <p><i>Source: U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates</i></p>	<p>\$56,477</p>
<p>Percentage of households with incomes below the federal poverty guidelines within the CBSA</p> <p><i>Source: U.S. Census Bureau, 2010-2014 American</i></p>	<p>26.2% (All families)</p> <p>20.5% (Individuals)</p>

<i>Community Survey 5-Year Estimates</i>	
Please estimate the percentage of uninsured people by County within the CBSA <i>Source: CountyHealthRankings.org, 2015</i>	12% uninsured
Percentage of Medicaid recipients by County within the CBSA <i>Source: Maryland Medicaid Data Overview; Dept. of Health and Mental Hygiene; enrolled as of Dec. 31, 2014</i>	26%
Life Expectancy by County within the CBSA (including by race and ethnicity where data are available) <i>Source: Maryland SHIP data, 2011-2013</i>	78% (County) 77.9% (White) 76.3% (Black)
Mortality Rates by County within the CBSA (including by race and ethnicity where data are available) <i>Sources: CountyHealthRankings.org, 2015; Maryland SHIP data</i>	Residents younger than age 75: 359/100,000 population Infant: 5.5/1,000 live births (in one year) Children younger than age 18: 44.6/100,000 Age-Adjusted Rate From Cancer: 178/100,000 (2011-2013) <ul style="list-style-type: none"> • For Non-Hispanic White: 180.3 • For Non-Hispanic Black: 143.9 Age-Adjusted Rate From Heart Disease: 196.1/100,000 (2011-2013) <ul style="list-style-type: none"> • For Non-Hispanic White: 197 • For Non-Hispanic Black: 225.1
Access to healthy food, transportation and education, housing quality and exposure to environmental factors that negatively affect health status by County within the CBSA. (to the extent information is available from local or county jurisdictions such as the local health officer, local county officials, or other resources) <i>Sources: Maryland SHIP data; CountyHealthRankings.org, 2015)</i>	Children Entering Kindergarten Ready to Learn: 66% (2013-2014) Children Receiving Blood Lead Screening: 55.4% (2013) Child Maltreatment Rate: 20.4/1,000 children (2013) Overweight/Obese Children: 11.8% (2013) Adolescents Using Tobacco Products: 24.6%/30-day period (2013) Adolescents Receiving Wellness Check in Last Year: 54.2% (2013) Children Receiving Dental Visit in Last Year: 59% (2013) Limited Access to Healthy Food: 6% (2015) Children Eligible for Free Lunch: 39% (2015)

<p>Available detail on race, ethnicity, and language within CBSA</p> <p><i>Source: U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates</i></p>	<p>Total Population of Two or More Races: 3% American Indian and Alaska Native Make Up .3% of total population; Includes .1% of Cherokee tribal grouping Asian Make Up 1.6% of total population; Includes Asian Indian, Chinese, Filipino, Japanese, Korean and Vietnamese Hispanic or Latino Make Up 3.9% of total population; Includes Mexican, Puerto Rican and Cuban English as a Second Language: 6.9% of total population</p>
<p>Other</p> <p><i>Sources: CommunityHealthRankings.org; 2015; Maryland SHIP data</i></p>	<p>Reported Violent Crime Offenses: 288/100,000 Unemployment Rate: 8% Median Household Income: \$55,643 Drug-Induced Death Rate: 18.1/100,000 (2011-2013) Suicide Rate: 14.5/100,000 (2011-2013)</p>

II. COMMUNITY HEALTH NEEDS ASSESSMENT

1. Has your hospital conducted a Community Health Needs Assessment that conforms to the IRS definition detailed on pages 4-5 within the past three fiscal years?

Yes
 No

Provide date here. 03/28/13 (mm/dd/yy)

The Community Needs Health Assessment data collection occurred between July 1, 2012 – November 15, 2012 (FY2013).

If you answered yes to this question, provide a link to the document here.

The Meritus Medical Center’s FY2013 CHNA can be publically viewed online by accessing the Community page of the Meritus Health System website and clicking on the link:
<http://www.meritushealth.com/About-Meritus-Health/Healthy-Washington-County/Community-Health-Needs-Assessment.aspx>

(Please note: this may be the same document used in the prior year report).

2. Has your hospital adopted an implementation strategy that conforms to the definition detailed on page 5?

Yes (mm/dd/yy) Enter date approved by governing body here: 03/28/13
 No

If you answered yes to this question, provide the link to the document here.

The Community Health Needs Assessment action plan was reviewed and approved by the Meritus Medical Center Board of Directors on March 28, 2013 (see “Action Planning Process” pages 322-323 of the FY2013 Meritus CHNA after downloading the document: <http://www.meritushealth.com/documents/MERITUS-MASTER-REPORT-5-3-13.pdf>)

A copy of the original CHNA Action Plan approved by the Board is included (see Appendix V).

The top 10 prioritized needs were grouped into six primary community health needs and an objective was developed for each (see “Data Review and Prioritization” pages 317 – 321 of the FY2013 Meritus CHNA or click: <http://www.meritushealth.com/documents/MERITUS-MASTER-REPORT-5-3-13.pdf>).

The prioritized community health needs for FY2015 were:

1. Reduce obesity and increase physical activity
2. Reduce diabetes ED visits, improve management and reduce mortality
3. Reduce heart disease ED visits and mortality; promote smoking cessation
4. Improve access to cancer treatment / research and reduce mortality
5. Improve mental health treatment access and reduce ED visits
6. Reduce rate of teen pregnancy

During Meritus Medical Center’s strategic planning process the Community Health Needs Assessment and FY2015 CHNA Action Plan were aligned with the organization’s strategic goal to Improve Population Health. Section V of this narrative includes the highlights of Community Benefit initiatives, programs and outcomes that have been implemented based on the FY2013 CHNA health needs. The CHNA Action Plan continues to be updated annually to document the initiatives that help meet identified needs and demonstrate the outcomes that have been achieved.

III. COMMUNITY BENEFIT ADMINISTRATION

1. Please answer the following questions below regarding the decision making process of determining which needs in the community would be addressed through community benefits activities of your hospital? **(Please note: these are no longer check the blank questions only. A narrative portion is now required for each section of question b.)**

- a. Is Community Benefits planning part of your hospital’s strategic plan?

Yes
 No

If yes, please provide a description of how the CB planning fits into the hospital’s strategic plan, and provide the section of the strategic plan that applies to CB.

As a community hospital, Meritus Medical Center purposefully incorporates our commitment to community service into our management and governance structures as well as strategic and operational plans. Meritus conducts a community health needs assessment every three years to identify and prioritize health needs and service gaps. An action plan of initiatives and goals are developed to address the prioritized needs. The action plan is

reviewed by the Meritus Board Strategic Planning committee and approved by the Meritus Board of Directors.

The identified community health needs and the updated CHNA action plan are reviewed annually by Leadership during the environmental assessment step of the strategic planning process. Using these and other inputs, Meritus develops its strategic plan by identifying measureable outcomes and sets specific goals it seeks to achieve. The strategic plan is approved annually by the Meritus Board of Directors.

- b. What stakeholders in the hospital are involved in your hospital community benefit process/structure to implement and deliver community benefit activities? (Please place a check next to any individual/group involved in the structure of the CB process and describe the role each plays in the planning process (additional positions may be added as necessary))

i. Senior Leadership

1. CEO
2. CFO
3. Other (please specify) Chief Compliance Office

Describe the role of Senior Leadership.

Senior Leadership provides support and guidance necessary to develop the strategic framework underlying the Community Benefits activities. Senior leaders take an active role in annual organizational strategic planning that incorporates and aligns goals and initiatives, including those based on community health needs and the prior year's outcomes. The final Community Benefit report is reviewed and approved by Senior Leadership. In addition, a final audit of the CB report findings is conducted by the Finance department and approved by the CFO.

ii. Clinical Leadership

1. Physician
2. Nurse
3. Social Worker
4. Others (please specify)
Dietitian, Educator

Describe the role of Clinical Leadership

In coordination with Administration, Clinical Leadership designs, plans and implements the initiatives to address community health needs. They provide the direct, front-line clinical and educational services, screenings and programs to targeted populations in our community. They document efforts and help measure and analyze outcomes monthly. Clinical Leadership makes recommendations for improvements and alternative initiatives based on effectiveness using the PDSA model.

iii. Community Benefit Operations

1. Individual (please specify FTE)

2. Committee (please list members)
 Director, Behavioral & Community Health Services
 Department Assistant, Behavioral & Community Health Services
 Executive Director, Finance
 Vice President, Business Integrity
 Community Relations Coordinator, Corporate Communications
 Executive Director, Strategic Planning
 Physician Recruiter
3. ___ Department (please list staff)
4. ___ Task Force (please list members)
5. ___ Other (please describe)

Briefly describe the role of each CB Operations member and their function within the hospital's CB activities planning and reporting process.

Director, Behavioral & Community Health Services (BCHS) Leads the tri-annual Community Health Needs Assessment (CHNA), facilitates a quarterly review of CHNA Action Plan with Clinical and Operations leadership to assess progress with meeting goals and initiatives and oversees the organizational reporting of Community Benefit activities. The Director of BCBS co-chairs the Washington County Local Health Improvement Coalition (LHIC) to better coordinate initiatives with community partners. Contributes to writing the CB report narrative and summarizes the outcomes of the initiatives.

Department Assistant, Behavioral & Community Health Services Assists and supports the Director of BCBS in completion of CB activities, collects, updates and revises the CHNA Action Plan, prompts and collects Community Benefits reports for the Meritus organization, updates CBISA software program detailing CB activity monthly. Compiles and types the final CB report.

Executive Director, Finance Provides assistance with financial and salary information, regulatory guidance and overall review of the Community Benefit Report to ensure that data is submitted accurately and in the correct categorization. Provides description of the Financial Assistance policy.

Community Relations Coordinator, Corporate Communications Describes the general hospital demographics and characteristics of the primary service area. Researches and updates the significant socio-demographic characteristics of the population living in the CB service area. Publicizes the Meritus Health CB results annually.

Executive Director, Strategic Planning Provides support and guidance necessary to develop the strategic framework underlying the Community Benefits activities. Leads senior leadership in annual strategic planning that incorporates and aligns organizational goals and initiatives, including those based on community health needs and the prior year's outcomes. Monitors progress on goals and outcome measurement and provides updates to the Board of Directors.

Physician Recruiter Provides a written description of the availability of physicians, specialist providers, including outpatient specialty care, and gaps with regard to the service region.

Vice President, Business Integrity Provides support and guidance in carrying out the organization's Community Benefits activities. Helps ensure compliance with the collection of data and completion of all reporting requirements. Participates in proofing the narrative and

assesses general alignment with the organization's strategy. Reviews and approves the final Community Benefit report.

- c. Is there an internal audit (i.e., an internal review conducted at the hospital) of the Community Benefit report?)

Spreadsheet yes no
Narrative yes no

If yes, describe the details of the audit/review process (who does the review? Who signs off on the review?)

An internal audit of the Community Benefit report is completed by our Finance personnel. The audit includes a review of the data, criteria used and the calculations, signed by our CFO prior to submission to the HSCRC. In addition, the report is audited as part of the HSCRC Special Audit annually.

- d. Does the hospital's Board review and approve the FY15 Community Benefit report that is submitted to the HSCRC?

Spreadsheet yes no
Narrative yes no

If no, please explain why.

The FY15 Community Benefit report is posted on our Board of Director's portal for review. Given the conclusion of the fiscal year, publication of CB instructions, tight deadline for Community Benefit submission and the fact that our Board of Directors meet every other month, there is inadequate time for Board approval prior to submission deadline. However the full Community Benefit report is made available and reviewed by the Board to ensure that they are fully informed of the results.

IV. COMMUNITY BENEFIT EXTERNAL COLLABORATION

External collaborations are highly structured and effective partnerships with relevant community stakeholders aimed at collectively solving the complex health and social problems that result in health inequities. Maryland hospital organizations should demonstrate that they are engaging partners to move toward specific and rigorous processes aimed at generating improved population health. Collaborations of this nature have specific conditions that together lead to meaningful results, including: a common agenda that addresses shared priorities, a shared defined target population, shared processes and outcomes, measurement, mutually reinforcing evidence based activities, continuous communication and quality improvement, and a backbone organization designated to engage and coordinate partners.

- a. Does the hospital organization engage in external collaboration with the following partners:

Other hospital organizations

- Local Health Department
- Local health improvement coalitions (LHICs)
- Schools
- Behavioral health organizations
- Faith based community organizations
- Social service organizations

b. Use the table below to list the meaningful, core partners with whom the hospital organization collaborated to conduct the CHNA. Provide a brief description of collaborative activities with each partner (please add as many rows to the table as necessary to be complete)

Organization	Name of Key Collaborator	Title	Collaboration Description
Brook Lane Hospital	Curtis Miller	Director of Public Affairs	CHNA committee Provided hospital data, financial support of survey and analysis
Brothers Who Dare	Andy Smith	Director	CHNA committee, insight for neighborhood strategies to address health disparities
Community Foundation of Washington Co.	Brad Sell	Executive Director	CHNA committee Funding resources
Community Free Clinic	Adam Roberson	Clinical Director	CHNA committee, Strategy to reach uninsured populations
Community Member	William Christoffel	None; member of public	CHNA committee member who provided insights of consumer needs
Community Member	James Nyamekah	None; member of public	CHNA committee member who provided insights of consumer needs

Easter Seals	Carolyn Kaeser	Center Director	CHNA committee member
Easter Seals	Brenda Bush	Community Outreach Director	CHNA committee member
Johns Hopkins School of Public Health - Comstock Center	Josef Coresh	Center Director	CHNA committee, study design and analysis support
Johns Hopkins School of Public Health - Comstock Center	Pat Crowley	Operations Director	CHNA committee, study design and analysis support
Meritus Medical Center	Cynthia Earle	Manager, Community Health and Wellness	CHNA committee, strategy to help meet community needs
Meritus Medical Center	Julie Lough	Administrative Assistant	CHNA committee, compilation of data and narrative
Meritus Medical Center	Mary Rizk	Executive Director, Corporate Communications	CHNA committee, compilation of data and narrative, publicity
Meritus Medical Center	Allen Twigg	Administrative Director, Behavioral Services	Co-chair of Washington Co. LHIC and facilitated CHNA steering committee
TriState Community Health Center FQHC	Susan Walter	Executive Director	CHNA committee, representative of western county, disparities and strategy to reach underserved
United Healthcare	Tracy Curry	Community Development Specialist	CHNA committee, managed care perspective, community health
Walnut Street Community Health	Kim Murdaugh	Executive Director	CHNA committee, representative of

Center FQHC			central city, health disparities and strategy to reach underserved
Way Station	Melissa Lewis	Director Adult Services	CHNA committee, case management strategy for behavioral health
Washington Co. Depart of Social Services	Dave Engle	Executive Director	CHNA committee, social determinants of health expertise
Washington County Health Department	Rod MacRae	Director Adult Services	Co-chair of Washington Co. LHIC and facilitated CHNA steering committee
Washington County Health Department	Mary McPherson	Health Services Program Manager	CHNA committee, community disease mgmt., wellness and prevention expertise
Washington County Health Department	Earl Stoner	Washington County Health Officer	CHNA committee Provided state data, financial support of survey, analysis, and prioritization
Washington Co. Mental Health Authority	Rick Rock	Director	CHNA committee, behavioral health resource and expertise

c. Is there a member of the hospital organization that is co-chairing the Local Health Improvement Coalition (LHIC) in the jurisdictions where the hospital organization is targeting community benefit dollars?

yes no

Allen L. Twigg, Director of Behavioral and Community Health Services

d. Is there a member of the hospital organization that attends or is a member of the LHIC in the jurisdictions where the hospital organization is targeting community benefit dollars?

yes no

Cindy Earle, Manager of Community Health and Wellness

Andrea Horton, Director of Care Management

V. HOSPITAL COMMUNITY BENEFIT PROGRAM AND INITIATIVES

This Information should come from the implementation strategy developed through the CHNA process.

1. Please use Table III, to provide a clear and concise description of the primary needs identified in the CHNA, the principal objective of each evidence based initiative and how the results will be measured (what are the short-term, mid-term and long-term measures? Are they aligned with measures such as SHIP and all-payer model monitoring measures?), time allocated to each initiative, key partners in the planning and implementation of each initiative, measured outcomes of each initiative, whether each initiative will be continued based on the measured outcomes, and the current FY costs associated with each initiative. Use at least one page for each initiative (at 10 point type). Please be sure these initiatives occurred in the FY in which you are reporting. Please see attached example of how to report.

Table III Initiative Cancer

<p>a) 1. Identified Need</p> <p>2. Was this identified through the CHNA process?</p>	<p>Improve access to cancer treatment / research and reduce mortality The rate of cancer deaths in Washington Co. was higher at 185.4 than the MD baseline 177.7 and the national rate of 178.4. The MD 2014 target was 169.2 and the Healthy People 2020 goal is 160.6. The rate among the Black population is also significantly higher at 248.7. Meritus Medical Center cancer cases had a higher than average percentage of diagnosis in later Stages 3 and 4.</p> <p>Yes, this was identified through the CHNA process.</p>
<p>b) Hospital Initiatives</p>	<ol style="list-style-type: none"> 1. Expanded cancer clinical research trials. 2. Increase community awareness and provide screenings to identify disease processes earlier. 3. Establish a clinical program for lung nodules. 4. Provide patient cancer support groups.
<p>c) Total Number of People Within the Target Population</p>	<p>~65% of Washington County adults are eligible for preventative cancer screening = 74,750 adults in Washington County.</p>
<p>d) Total Number of People Reached by the Initiative Within the Target Population</p>	<ol style="list-style-type: none"> 1. 120 persons participated in 8 clinical trials. 2. 536 persons received screening and support. 3. Lung navigator managed 234 nodules in 42 patients. 4. Leukemia and Lymphoma support group – 102 persons Look Good and Feel Better support group – 18 persons
<p>e) Primary Objective of the Initiative</p>	<ol style="list-style-type: none"> 1. Provide access to investigational study drug and/or procedure for cancer. 2. Increase awareness and likelihood of earlier diagnosis for treatment. 3. Improve the management of people presenting with lung nodules. 4. Provide emotional support to patients and family members.
<p>f) Single or Multi-Year Initiative –Time Period</p>	<p>Multi Year</p>
<p>g) Key Collaborators in Delivery of the Initiative</p>	<p>Meritus Medical Center: John R. Marsh Cancer Center, Community Health & Wellness, Clinical Research, Corporate Communication. Washington County Health Department and Local Health Improvement Coalition. Cumberland Valley BCA, Avon Foundation..</p>
<p>h) Impact/Outcome of Hospital Initiative?</p>	<ol style="list-style-type: none"> 1. Identified and opened 6 new clinical trials; 4 breast and 2 lung . 2. Increased awareness for screening and earlier identification & treatment. 3. Improved quality of life and survivability of 42 patients. 4. Support services provided to 120 participants.
<p>i) Evaluation of Outcomes:</p>	<p>Indicators from the MD SHIP demonstrate a downward trend in the rate of heart disease mortality to 196.1 (2011 – 2013). However, ED utilization for hypertension has increased from 152.7 to 182.4 (below MD baseline) with the highest rate observed in the Black community.</p>
<p>j) Continuation of Initiative?</p>	<p>Yes. We are continuing cancer screening, education and referrals. New initiatives to include communities with identified disparities.</p>

Table III Initiative Cancer

k) Total Cost of Initiative for Current Fiscal Year and What Amount is from Restricted Grants/Direct Offsetting Revenue	A. Total Cost of Initiative 1. Researcher 1.0 FTE - \$80,850 2a. Komen Grant-\$107,370 2b. Avon Grant #2-\$60,187 3. Lung Navigator - \$96,175 4. Support Groups - \$1,656 Total Cost \$346,238	B. Direct Offsetting Revenue from Restricted Grants 1. \$ 13,350 2a. \$107,370 2b. \$60,187 3. \$0 4. \$0 Total Offsetting Revenue \$180,907
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Table III Initiative Diabetes I

<p>a) 1. Identified Need</p> <p>2. Was this identified through the CHNA process?</p>	<p>Reduce diabetes ED visits, improve management and reduce mortality The age-adjusted mortality rate for diabetes indicates that Washington County is among the highest rates in Maryland. Prevalence is similar and ED utilization of 267.2 was below the MD baseline of 347.2 (2009-2010). FY13 CHNA indicated a disparity of higher ED utilization among Blacks for diabetic crisis at 523.6 and that only 3.6% of people diagnosed with diabetes participating in the FY13 CHNA BRFSS had ever received diabetes education.</p> <p>Yes this was identified through the CHNA process.</p>
<p>b) Hospital Initiative</p>	<ol style="list-style-type: none"> 1. Identify persons at risk or with uncontrolled or undiagnosed diabetes and refer to education and support programs. 2. Provide targeted diabetes education and support to 10 community primary care practices. 3. Offer Living Well with Diabetes education and support program. 4. Provide training and education for diabetes prevention. 5. Provide Diabetes Self-Management Education Program.
<p>c) Total Number of People Within the Target Population</p>	<p>16.4% of Washington County adults in FY13 BRFSS were told they have diabetes = ~18,860 adults in Washington County per year (+/- 3.5%).</p>
<p>d) Total Number of People Reached by the Initiative Within the Target Population</p>	<ol style="list-style-type: none"> 1. Community screenings identified 1,514 who identified at risk and were provided nutrition, diabetes education and support information. 2. A certified diabetes educator was integrated in 10 primary care practices as a resource to physicians and patients; has provided 1:1 diabetes education to 53 patients. 3. Living Well with Diabetes groups were provided in 6 underserved community locations with a total of 71 people having participated. 4. 37 persons were trained to facilitated a Diabetes Prevention Program (will implement in FY16). 5a. 2,877 encounters for diabetes education. 5b. 4,406 encounters for endocrinology.
<p>e) Primary Objective of the Initiative</p>	<ol style="list-style-type: none"> 1. Provide linkage to targeted education and support to improve the management and quality of life for people diagnosed with diabetes. 2. – 3. Decrease diabetes ED crisis and longer term mortality rates. 4. Create infrastructure to prevent persons at risk from developing Type II diabetes. 5. Provide diabetes education for disease management, lifestyle changes, risk reduction and prevention.
<p>f) Single or Multi-Year Initiative –Time Period</p>	<p>Multi Year</p>
<p>g) Key Collaborators in Delivery of the Initiative</p>	<p>Meritus Medical Center: Community Health & Wellness, Meritus Endocrine Nutrition and Diabetes Center (MEND), Care Management Washington County Health Department and Local Health Improvement Coalition</p>

Table III Initiative Diabetes I

h) Impact/Outcome of Hospital Initiative?	New survey indicates that 25.7% of persons with diabetes have received diabetes education, a 22% increase. Black population ED utilization for diabetes crisis has been reduced by nearly 100 to 430.2 from baseline data CHNA FY13 and SHIP BRFSS.	
i) Evaluation of Outcomes:	Indicators from the BRFSS Survey show a reduction in ED utilization for diabetes crisis from 208.9 in 2012 to 187.9 in 2014. Downward trend is encouraging. Diabetes mortality rate remains above the state average through 2014.	
j) Continuation of Initiative?	Yes. We are currently expanding initiatives by adding additional certified diabetes educators to primary care practices, expanding Living Well training and support groups and initiating a large scale community Diabetes Prevention Program.	
k) Total Cost of Initiative for Current Fiscal Year and What Amount is from Restricted Grants/Direct Offsetting Revenue	<p>A. Total Cost of Initiative</p> <p>1. \$2,340</p> <p>2. \$24,128</p> <p>3. \$3,619</p> <p>4. \$754</p> <p>5a. \$485,932 Diabetes Education</p> <p>5b. \$700,145 Endocrinology</p> <p>Total Cost \$1,216,918</p>	<p>B. Direct Offsetting Revenue from Restricted Grants</p> <p>1. \$0</p> <p>2. \$0</p> <p>3. \$0</p> <p>4. \$0</p> <p>5a. \$202,681</p> <p>5b. \$461,750</p> <p>Total Offsetting Revenue \$664,431</p>

Table III Initiative Heart Disease

<p>a) 1. Identified Need</p> <p>2. Was this identified through the CHNA process?</p>	<p>Reduce heart disease ED visits and mortality The rate of heart disease mortality for Washington Co. was significantly higher at 208.4 compared with the MD baseline of 194 (SHIP BRFSS 2007- 2009). The MD 2014 goal for HD mortality was 173.4. Washington Co. ED visits for hypertension was 170.3 with disparity identified among the Black population, 353.8 (SHIP BRFSS). Seniors are also at risk with nearly 50% of the population age 55+ have been told they have high blood pressure.</p> <p>Yes, this was identified through the CHNA process.</p>
<p>b) Hospital Initiatives</p>	<p>1. Conducted a 15 week community wide blood pressure screening campaign to identify persons with hypertension, provide education and refer to medical management.</p> <p>2. Created “Healthy Washington County”, a community partnership that placed 5 blood pressure kiosks at community locations and developed an interactive website with links to heart health education and resources. www.healthywashingtoncounty.com</p> <p>3. Provide monthly B/P screening clinics at senior residential centers.</p> <p>4. Provide 1:1 education and support improve management of hypertension.</p> <p>5. Sponsored a “Wear Red” educational event for women’s heart health.</p> <p>6. Smoking cessation.</p>
<p>c) Total Number of People Within the Target Population</p>	<p>34.4% of Washington County adults in FY13 BRFSS were told they have hypertension = ~39,560 adults in Washington County per year at risk for hypertension and heart disease (+/- 3.5%).</p>
<p>d) Total Number of People Reached by the Initiative Within the Target Population</p>	<p>1. Community screenings and heart health information was provided to 7,057 people (6.1% of adult population).</p> <p>2. 7,201 screenings at kiosks occurred over 90 days with 4,481 unique page views of the HWC website (3/1/15 – 6/30/15).</p> <p>3. 409 B/P screenings were conducted at 5 senior living centers.</p> <p>4. 58 participants with HTN received 1:1 coaching to make lifestyle changes</p> <p>5. 188 persons attended.</p> <p>6. 1,101 people received written education material on tobacco.</p>
<p>e) Primary Objective of the Initiative</p>	<p>1. Screen for hypertension and provide heart health information.</p> <p>2. Develop infrastructure necessary to change community culture to a focus on personal health.</p> <p>3. Screen for untreated or poorly managed hypertension in senior population.</p> <p>4. Improve management of HTN and make sustained lifestyle modifications.</p> <p>5. Increase awareness and support.</p> <p>6. Provide support in stopping smoking.</p>
<p>f) Single or Multi-Year Initiative –Time Period</p>	<p>Multi Year</p>

Table III Initiative Heart Disease

g) Key Collaborators in Delivery of the Initiative	Meritus Medical Center: Cardiac Rehab, Community Health & Wellness, Parish Nursing, Care Management, Corporate Communication. Maryland DHMH. Washington County Health Department and Local Health Improvement Coalition. Chamber of Commerce, Washington Co. Public Schools, Herald-Mail newspaper.	
h) Impact/Outcome of Hospital Initiative?	<ol style="list-style-type: none"> 1. Identified persons with elevated B/P and obtained PCP follow up and increased education and awareness to lower risk factors with persons in normal range. 2. Increased community awareness with platform to launch new health initiatives. 3. Identified 39 persons with elevated B/P and obtained PCP follow up. 4. 91.3% of participants improved their B/P through lifestyle changes over 90 days; systolic improved 12%, diastolic improved 10%. (Reported through MD DHMH Million Hearts). 5. Increased participation by 22% from FY14. 6. 341 persons completed smoking cessation, 228 persons received nicotine replacement at no cost. 	
i) Evaluation of Outcomes:	Indicators from the MD SHIP demonstrate a downward trend in the rate of heart disease mortality to 196.1 (2011 – 2013). However, ED utilization for hypertension has increased from 152.7 to 182.4 (below MD baseline) with the highest rate observed in the Black community.	
j) Continuation of Initiative?	Yes. We are continuing B/P screening, education and referrals and are following up the success of the Parish Nurse intervention. Knowledge gained from motivating persons to make lifestyle changes is being applied with other health initiatives. New initiatives include communities with identified disparities.	
k) Total Cost of Initiative for Current Fiscal Year and What Amount is from Restricted Grants/Direct Offsetting Revenue	<p>A. Total Cost of Initiative</p> <ol style="list-style-type: none"> 1. \$ 3,549 2. \$ 2,352 3. \$ 1,538 4. \$28,307 5. \$12,437 6. \$ 0 <p>Total Cost \$48,183</p>	<p>B. Direct Offsetting Revenue from Restricted Grants</p> <ol style="list-style-type: none"> 1. \$0 2. \$ 2,352 3. \$0 4. \$27,205 DHMH Million Hearts Grant 5. \$0 6. \$0 <p>Total Offsetting Revenue \$29,557</p>

Table III Initiative Mental Health Access

<p>a) 1. Identified Need</p> <p>2. Was this identified through the CHNA process?</p>	<p>Improve mental health treatment access and reduce ED visits The 2013 CHNA indicated that ED utilization for mental health visits was 17% higher than the MD state average. Highest rates of recidivism found with chronic mentally ill population. About 5% of BRFSS respondents indicated an inability to receive mental health care when needed.</p> <p>Yes, this was identified through the CHNA process.</p>
<p>b) Hospital Initiatives</p>	<ol style="list-style-type: none"> 1. Decrease utilization of ED by Emergency Psychiatric Services (EPS) linking patients with appropriate level of care. 2. Provide targeted mental health education and support groups to community. 3. Integrate behavioral health professionals into primary care practices. 4. Implement a community case management program for high ED utilizers. 5. Prepare and train behavioral health graduate students. 6. Provide increased access to psychiatry evaluation and care.
<p>c) Total Number of People Within the Target Population</p>	<p>~22% of Washington County adults have a diagnosable mental health condition = 25,300 adults in Washington County.</p>
<p>d) Total Number of People Reached by the Initiative Within the Target Population</p>	<ol style="list-style-type: none"> 1. 10,914 patients discharged from the ED with plan. 2. 1,439 persons attended community education and support groups. 3. 526 persons were evaluated for mental health issues at PCP offices. 4. 201 patients with CMI care coordinated between programs to improve communication and avert unnecessary ED visits. 5. 6 student internships; 4 MSW students, 2 nurse practitioner placements. 6. 33 patients in crisis seen by Accelerated Care Program, preventing ED visit.
<p>e) Primary Objective of the Initiative</p>	<ol style="list-style-type: none"> 1. Coordinate with community providers to provide direct intake to existing treatment. 2. Provide community support groups and targeted mental health education . 3. Provide mental health evaluations and referrals in Meritus ACO practices. 4. Collaborate with WayStation to provide Health Home case management services for chronic population. 5. Provide student internships in emergency and ambulatory behavioral health setting. 6. Increase access to timely psychiatric evaluation and crisis stabilization.
<p>f) Single or Multi-Year Initiative –Time Period</p>	<p>Multi Year</p>
<p>g) Key Collaborators in Delivery of the Initiative</p>	<p>Meritus Medical Center: Behavioral Health Services, Care Management, MMG Physician Practices, ACO. WayStation, Inc, The Washington County Mental Health Authority (CSA), The Mental Health Center, QCI, Catocin Counseling, Potomac Case Management. Washington County Health Department and Local Health Improvement Coalition. University of Maryland, Shenandoah University.</p>

Table III Initiative Mental Health Access

<p>h) Impact/Outcome of Hospital Initiative?</p>	<p>1. ED re-visits within 30 days of discharge remained flat at 11% from FY14 to FY15. 2. Increased education, awareness and support provided to 1,439 persons. 3. Only two persons from the 524 screened at PCP office had an ED visit (0.004%). 4. Formal collaboration with a community partner established. Measurable outcome is pending. 5. Five graduate students completed behavioral health internships (3 MSWs, 2 NPs). 6. Potential ED diversions.</p>	
<p>i) Evaluation of Outcomes:</p>	<p>Indicator from the MD SHIP data demonstrates a downward trend in the rate of Mental Health ED utilization through 2014 with total visits decreasing by 19.3%. However, ED utilization remains significantly higher than the MD baseline data.</p>	
<p>j) Continuation of Initiative?</p>	<p>Yes. We are continuing and exploring new initiative to include expansion of clinical integration of behavioral health services in PCP offices (not reimbursed), BH community case management and exploration of opioid treatment options.</p>	
<p>k) Total Cost of Initiative for Current Fiscal Year and What Amount is from Restricted Grants/Direct Offsetting Revenue</p>	<p>A. Total Cost of Initiative</p> <p>1. \$27,479 2. \$ 4,992 3. \$24,128 4. \$ 1,229 5. \$21,327 6. \$ 1,287</p> <p>Total Cost \$80,442</p>	<p>B. Direct Offsetting Revenue from Restricted Grants</p> <p>1. \$0 2. \$0 3. \$0 4. \$0 5. \$0 6. \$0</p> <p>Total Offsetting Revenue \$0</p>

Table III Initiative Obesity I

<p>a) 1. Identified Need</p> <p>2. Was this identified through the CHNA process?</p>	<p>Reduce obesity and increase physical activity (adults) - 35.4% of the adult population of the county maintains a healthy weight (2009 SHIP). As part of the FY13 CHNA, 72.6% of 819 randomly sampled adults in Wash. Co. had a BMI >25, higher than the national average of 63.5% (CDC 2012). The Maryland 2014 goal for persons at a healthy weight is 35.7%.</p> <p>Yes this was identified through the CHNA process.</p>
<p>b) Hospital Initiative</p>	<p>1. Promoted “Re-Think Your Drink” campaign to replace drinking soda with water, hydration station added in dining room (infused water), fryers removed from kitchen.</p> <p>2. Sponsored and promoted a learning station at H.E.A.L.'s 5K Color Splash.</p> <p>3. Provide a weekly community weight loss support group.</p>
<p>c) Total Number of People Within the Target Population</p>	<p>72.6% adults in Washington County = 83,490 persons (+/- 3.5%).</p>
<p>d) Total Number of People Reached by the Initiative Within the Target Population</p>	<p>1. 3,025 persons reached directly through community events and health fairs, 2,300 employees received wellness information; total 5,325 persons (6.3%).</p> <p>2. 2,005 participants at the 5K color splash. (2.4%).</p> <p>3. 302 participants over 12 months (0.036%).</p>
<p>e) Primary Objective of the Initiative</p>	<p>To provide adults with the necessary information and support needed to make healthy nutrition changes and increase physical activity.</p>
<p>f) Single or Multi-Year Initiative –Time Period</p>	<p>Multi Year</p>
<p>g) Key Collaborators in Delivery of the Initiative</p>	<p>Meritus Medical Center: Nutrition Services staff, Community Health & Wellness staff, Corporate Communications team, Nursing dept. volunteers, Weight Loss Center team. Healthy Eating & Active Lifestyles, Inc. (H.E.A.L.): staff and Board of Directors http://healofwashingtoncounty.org/</p>
<p>h) Impact/Outcome of Hospital Initiative?</p>	<p>1. Lower calorie food choices and water being drank routinely in hospital, caloric soda sales are down for FY15.</p> <p>2. The 2,005 participants received printed educational info on diet and exercise.</p> <p>3. 100% of our support group participants had a documented reduction in BMI.</p>
<p>i) Evaluation of Outcomes:</p>	<p>Indicators from the BRFSS Survey show no reduction in obesity of the target population.</p>
<p>j) Continuation of Initiative?</p>	<p>Yes, there has been little change in the rate of obesity and physical inactivity among adults in Washington County to date. As obesity has been related to other chronic diseases Meritus Medical Center in collaboration with the Washington County Health Improvement Coalition will continue to make coordinated clinical efforts to provide education, screening and treatment to prevent and reduce this disease burden.</p>

Table III Initiative Obesity I

<p>k) Total Cost of Initiative for Current Fiscal Year and What Amount is from Restricted Grants/Direct Offsetting Revenue</p>	<p>C. Total Cost of Initiatives</p> <p>1. \$5,000</p> <p>2. \$1,002</p> <p>Total Cost \$ 6,002</p>	<p>D. Direct Offsetting Revenue from Restricted Grants</p> <p>1. \$0</p> <p>2. \$0</p> <p>Total Offsetting Revenue \$0</p>
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Table III Initiative Obesity 2

<p>a) 1. Identified Need</p> <p>2. Was this identified through the CHNA process?</p>	<p>Reduce obesity and increase physical activity (Children) - Washington County's youth obesity was 12%, higher than the state rate of 11% (2010). The Maryland SHIP 2014 goal was 10.7%.</p> <p>Yes this was identified through the CHNA process.</p>	
<p>b) Hospital Initiative</p>	<p>Implement CATCH (Coordinated Approach to Child Health) programming in after school centers.</p>	
<p>c) Total Number of People Within the Target Population</p>	<p>15.3% children and adolescents in Washington County = 4,973 persons (+/- 3.5%).</p>	
<p>d) Total Number of People Reached by the Initiative Within the Target Population</p>	<p>2,624 children and adolescents participant visits in a CATCH program (53%).</p>	
<p>e) Primary Objective of the Initiative</p>	<p>CATCH is the most proven program to prevent childhood obesity and launch kids and toward healthier lifestyles by impacting a child's nutrition, level of physical activity, classroom environment and community.</p>	
<p>f) Single or Multi-Year Initiative –Time Period</p>	<p>Multi Year</p>	
<p>g) Key Collaborators in Delivery of the Initiative</p>	<p>Meritus Medical Center: Community Health & Wellness staff. Community organizations: Rehoboth Learning Center, The Learning Center, Boys and Girls Club, Elgin Station, Girls Inc., SanMar Children's Home, Calvary's Kids Childcare.</p>	
<p>h) Impact/Outcome of Hospital Initiative?</p>	<p>2,624 children and adolescents actively participated in the CATCH programs at 7 different after school centers during the course of the fiscal year. CATCH is a standardized, evidenced-based program that has demonstrated a reduction in the rate of obesity among children.</p>	
<p>i) Evaluation of Outcomes:</p>	<p>Indicators from the BRFSS Survey show a slight reduction in obesity of the C&A target population for Washington Co. since 2010, decreased 2/10ths of a percent to 11.8% (2013).</p>	
<p>j) Continuation of Initiative?</p>	<p>Yes, the overall rate of obesity among youth in Washington County demonstrates a slight downward trend.</p>	
<p>k) Total Cost of Initiative for Current Fiscal Year and What Amount is from Restricted Grants/Direct Offsetting Revenue</p>	<p>A. Total Cost of Initiatives</p> <p>Total Cost \$7,917</p>	<p>B. Direct Offsetting Revenue from Restricted Grants</p> <p>Total Offsetting Revenue \$0</p>

Table III Initiative Teen Pregnancy

<p>a) 1. Identified Need</p> <p>2. Was this identified through the CHNA process?</p>	<p>Reduce rate of teen pregnancy - While most of the state has seen a decrease in teen birth rates, Washington County had an alarming upward trend with an increase to 52 births per 1,000 in 2011 as reported by the Family Planning Center. Decreasing the rate of teen pregnancies remains a primary community health need that is targeted by Meritus Medical Center and community partners.</p> <p>Yes, this was identified through the CHNA process.</p>	
<p>b) Hospital Initiatives</p>	<p>1. Provide education & prevention measures delivered through school-based health centers</p> <p>2. Provide financial support to support the education & prevention measures delivered through the Community Free Clinic</p> <p>3. Provide birth control education and prevention</p>	
<p>c) Total Number of People Within the Target Population</p>	<p>~12, 100 teenagers in Washington County</p>	
<p>d) Total Number of People Reached by the Initiative Within the Target Population</p>	<p>1. None</p> <p>2. 384 teens participated in the CFC program</p> <p>3. Implemented at the local Health Dept. to whom we send referrals</p>	
<p>e) Primary Objective of the Initiative</p>	<p>1. Provide 1:1 health interventions with targeted school based population</p> <p>2. Provide education & prevention to at risk teens through after school program</p> <p>3. Distribution of free birth control by the local health department</p>	
<p>f) Single or Multi-Year Initiative –Time Period</p>	<p>Multi Year</p>	
<p>g) Key Collaborators in Delivery of the Initiative</p>	<p>Meritus Medical Center Community Health & Wellness, Washington County Public Schools, Community Free Clinic, Washington County Health Dept.</p>	
<p>h) Impact/Outcome of Hospital Initiative?</p>	<p>1. Unable to implement school based nursing intervention</p> <p>2. 98.5% of teens who participated did not become pregnant</p> <p>3. Unknown</p>	
<p>i) Evaluation of Outcomes:</p>	<p>Local data of live teen births demonstrate a downward trend in the rate of teen pregnancy for the past three years, reduced to 42 per 1,000 in 2014 according to the MD SHIP indicator dashboard. Remains a higher rate than the state of MD baseline.</p>	
<p>j) Continuation of Initiative?</p>	<p>Yes, teen pregnancy prevention initiative implemented at the Community Free Clinic will be continued during FY2016.</p>	
<p>k) Total Cost of Initiative for Current Fiscal Year and What Amount is from Restricted Grants/Direct Offsetting Revenue</p>	<p>A. Total Cost of Initiative</p> <p>1. \$0</p> <p>2. \$50,000</p> <p>3. \$0</p> <p>Total Cost \$ 50,000</p>	<p>B. Direct Offsetting Revenue from Restricted Grants</p> <p>1. \$0</p> <p>2. \$0</p> <p>3. \$0</p> <p>Total Offsetting Revenue \$ 0</p>

2. Were there any primary community health needs identified through the CHNA that were not addressed by the hospital? Yes.

If so, why not?

It is recognized that more needs were identified and exist than can be successfully met. The prioritization criterion and assigned weights assisted the Coalition to narrow the focus and directly address the issues that would have the greatest impact for improving the health of people in our community. Meritus Medical Center focused Community Benefit activities on the top six health priorities.

When other community resources already exist to meet identified needs, the need was scored as a lower priority. For example, although accessing medication was an identified need it was determined that a community program already exists to provide low cost access to medications and meets this need. Given finite resources Meritus avoided duplicating existing community services and seeks to coordinate better linkage to services whenever appropriate.

Other community providers are using the results of the CHNA to help target other health needs based on their areas of expertise and resources. For example Family Healthcare of Hagerstown, an FQHC, has expanded access to dental care. A subcommittee of the WCHIC is addressing access to healthcare by providing locations for the MD Health Exchange Navigators to reach uninsured persons. Locations include: Meritus Medical Center, the Community Free Clinic, Washington County Health Department and Washington County Department of Social Services.

Other identified needs are being addressed by the Strategic Community Impact Council (SCIP), a collaboration of a diverse group of community providers, leadership and volunteers who serve on eleven different work committees, some of which include:

- Education – reduce learning loss rates over three years
- Jobs and Economic Development - increase number of new jobs, reducing unemployment
- Health and Well-Being - decrease obesity rates, increase access to substance abuse treatment
- Family Safety – reduce child abuse and maltreatment, reduce domestic violence
- Seniors – increase use of advanced directives, increase % living at home
- Transportation – expand service point data collection system and improve based on database
- Public Safety – decrease number of incarcerations for drug and alcohol possession by 5%
- Disabilities – increase number of disabled workers in the workforce
- Self Sufficiency – increase financial literacy, initiate a Housing First program

With the advent of the next CHNA we will reassess and prioritize community health needs and strategies based upon those needs.

(Examples include other social issues related to health status, such as unemployment, illiteracy, the fact that another nearby hospital is focusing on an identified community need, or lack of resources related to prioritization and planning.) This information may be copied directly from the CHNA that refers to community health needs identified but unmet

3. How do the hospital's CB operations/activities work toward the State's initiatives for improvement in population health? (see links below for more information on the State's various initiatives)

Meritus developed its mission, vision, and current strategic plan in 2012 in response to the changes in healthcare delivery both in Maryland and nationally. Meritus Health envisions a health care system in which multi-disciplinary teams work in collaboration to manage and meet patient health needs to improve outcomes, lower costs, and enhance patient experience. The new strategy heightened the organization's focus on providing high quality, cost effective care, meeting and exceeding our patients' expectations.

Meritus Health has aligned strategic planning with both the CHNA and SHIP processes, to allocate and deploy resources in coordination with community partners such as the WCHIC (LHIC) to target the priority health needs. The effectiveness of interventions and outcomes are measured periodically and reviewed by monitoring the SHIP BRFSS trends and goals.

The proposed Regional Transformation Plan with Trivergent Health Alliance is an extension of Meritus' strategy for success in the evolving healthcare environment and will play a significant part in further achieving our vision for improving the health of people living in our community.

STATE INNOVATION MODEL (SIM) <http://hsia.dhmf.maryland.gov/SitePages/sim.aspx>

MARYLAND STATE HEALTH IMPROVEMENT PROCESS (SHIP)

<http://dhmf.maryland.gov/ship/SitePages/Home.aspx>

HEALTH CARE INNOVATIONS IN MARYLAND

<http://www.dhmf.maryland.gov/innovations/SitePages/Home.aspx>

MARYLAND ALL-PAYER MODEL <http://innovation.cms.gov/initiatives/Maryland-All-Payer-Model/>

COMMUNITY HEALTH RESOURCES COMMISSION <http://dhmf.maryland.gov/mchrc/sitepages/home.aspx>

VI. PHYSICIANS

1. As required under HG§19-303, provide a written description of gaps in the availability of specialist providers, including outpatient specialty care, to serve the uninsured cared for by the hospital.

Washington County has very limited HPSA status for Primary Care and Mental Health. These designations are specifically assigned to the two FQHC facilities, one in downtown Hagerstown and the other in Hancock. The entire county is designated as a HPSA for Medical Assistance patients requiring dental care.

Specific benchmarking was completed by an outside vendor in the form of a Physician/Community Needs Assessment. This documented physician demand, physician assets and defined the gaps in this community. The document was prepared to support physician recruitment needs and complies with Stark III. The most recent Assessment was conducted in Q4 of FY2012. The next Assessment will be conducted in Q2 FY2016.

For purposes of this HSCRC Community Benefit Report, we considered the defined Total Service Area (23 zip codes in Maryland, 8 zip codes in Pennsylvania and 6 zip codes in West Virginia).

The largest identified gaps by the FY2012 Assessment are:

Primary Care: A gap of 84.6 internists, pediatricians, family medicine specialists, OB/GYN, and geriatricians.

In FY 2015, the following primary care providers were added as employees of Meritus Health:

OB/GYN: 2FTE
Family Medicine: 9FTE
IM/Peds: 1FTE

<u>Specialists:</u>	<u>Gap:</u>
Cardio-thoracic Surgery	12.7
General Surgery	16.3
Psychiatry	18.8
Urology	5.7
Orthopedics	7.4

In FY 2015, providers in the following specialty providers were added:

Oncology: 2FTE
General Surgery: 1FTE

According to the County Health Ratings published by Robert Wood Johnson Foundation, Washington County, MD scores below national benchmarks on 27 of 30 categories. The ratio for Primary Care Physicians to patients is 1:1,658, 64% worse than the National Benchmark of 1:1,067. The surrounding counties in Pennsylvania and West Virginia, which are part of the Total Service Area, are similarly ranked, but the ratio of physician/patient is significantly worse than in this county.

Referral staff report no difficulties in obtaining appointments for uninsured or Medicaid patients who are seeking care in a Meritus Health owned specialty practice such as Gastroenterology, Endocrinology or OB/GYN. Psychiatry services are also available through both the Meritus Health outpatient practice and through local mental health resources. One private cardiology practice accepts uninsured/Medicaid patients with minimal down payment and a payment plan.

The most difficult specialty for patient access is orthopedics where high down payments are required. Other specialty services with limited access, reported by the local FQHC are Dermatology, Allergy/Asthma, Neurology, Neuro-surgery, Urology, Pulmonology and Otolaryngology.

2. If you list Physician Subsidies in your data in category C of the CB Inventory Sheet, please indicate the category of subsidy, and explain why the services would not otherwise be available to meet patient demand. The categories include: Hospital-based physicians with whom the hospital has an exclusive contract; Non-Resident house staff and hospitalists; Coverage of Emergency Department

Call; Physician provision of financial assistance to encourage alignment with the hospital financial assistance policies; and Physician recruitment to meet community need.

As a sole community provider, Meritus Medical Center must provide around the clock care in the Emergency Department. It has become increasingly difficult to insure 24/7 specialist coverage for the ED in the current environment of decreased physician reimbursement and increasing volume. Therefore, Meritus Medical Center pays on-call fees for Emergency Specialist Call to insure adequate physician coverage in the Emergency Department.

Those specialties contracted with to provide Emergency Specialist Call include: Cardiology, Critical Care, Ear Nose Throat, Ophthalmology, Gastroenterology, General Surgery, Interventional Cardiologist, Neurology, Neurosurgery, Orthopedics, Pediatrics, Plastics, and Urology.

In addition, Meritus Medical Center subsidizes the Hospitalist program in response to a community need for this service. An increasing number of area physicians have elected to no longer admit their patients to the hospital so that they can focus their time and resources to their office practices. This along with an increase in the uninsured/underinsured population necessitated the need for a Hospitalist program subsidized by the Hospital.

VII. APPENDICES

Please see Appendices at end (pages 34 – 53).

To Be Attached as Appendices:

1. Describe your Financial Assistance Policy (FAP):
 - a. Describe how the hospital informs patients and persons who would otherwise be billed for services about their eligibility for assistance under federal, state, or local government programs or under the hospital's FAP. (label appendix I)

For *example*, state whether the hospital:

- Prepares its FAP, or a summary thereof (i.e., according to National CLAS Standards):
 - in a culturally sensitive manner,
 - at a reading comprehension level appropriate to the CBSA's population, and
 - in non-English languages that are prevalent in the CBSA.
- posts its FAP, or a summary thereof, and financial assistance contact information in admissions areas, emergency rooms, and other areas of facilities in which eligible patients are likely to present;
- provides a copy of the FAP, or a summary thereof, and financial assistance contact information to patients or their families as part of the intake process;
- provides a copy of the FAP, or summary thereof, and financial assistance contact information to patients with discharge materials;
- includes the FAP, or a summary thereof, along with financial assistance contact information, in patient bills; and/or

- discusses with patients or their families the availability of various government benefits, such as Medicaid or state programs, and assists patients with qualification for such programs, where applicable.
- b. Provide a brief description of how your hospital’s FAP has changed since the ACA’s Health Care Coverage Expansion Option became effective on January 1, 2014 (label appendix II).
 - c. Include a copy of your hospital’s FAP (label appendix III).
 - d. Include a copy of the Patient Information Sheet provided to patients in accordance with Health-General §19-214.1(e) Please be sure it conforms to the instructions provided in accordance with Health-General §19-214.1(e). Link to instructions: http://www.hsrc.state.md.us/documents/Hospitals/DataReporting/FormsReportingModules/MD_HospPatientInfo/PatientInfoSheetGuidelines.doc (label appendix IV).
2. Attach the hospital’s mission, vision, and value statement(s) (label appendix V).
Attachment A

MARYLAND STATE HEALTH IMPROVEMENT PROCESS (SHIP) SLECTED
POPULATION HEALTH MEASURES FOR TRACKING AND MONITORING
POPULATION HEALTH

- Increase life expectancy
- Prevention Quality Indicator (PQI) Composite Measure of Preventable Hospitalization
- Reduce the % of adults who are current smokers
- Reduce the % of youth using any kind of tobacco product
- Increase the % vaccinated annually for seasonal influenza
- Increase the % of children with recommended vaccinations
- Reduce new HIV infections among adults and adolescents
- Reduce diabetes-related emergency department visits
- Reduce hypertension related emergency department visits
- Reduce the % of children who are considered obese

- Increase the % of adults who are at a healthy weight
- Reduce hospital ED visits from asthma
- Reduce hospital ED visits related to behavioral health
- Reduce Fall-related death rate

APPENDIXES

Appendix 1 – Financial Assistance Policy Description

Meritus Medical Center (MMC) is committed to providing quality health care for all patients regardless of their inability to meet the associated financial obligation and without discrimination on the grounds of race, color, national origin or creed. Financial assistance can be offered during or after services are rendered. The Financial Assistance procedures are designed to assist individuals who qualify for less than full coverage under available Federal, State, and Local Medical Assistance Programs, but whom residual "self-pay" balances exceed their own ability to pay.

MMC informs patients and/or their families of the hospital's financial assistance policy by providing a summary of the policy and contact information as part of the intake process. It is also included on the back of the patient billing statement. This information is available in both English and Spanish languages. Notice of availability of financial assistance and contact information is posted in the admitting area, emergency room, and other areas throughout the facility where eligible patients are likely to present. When applicable, a representative of the hospital discusses the availability of financial assistance as well as Medicaid and other governmental benefits with patients or their families. The hospital makes every effort to inform patients of this policy throughout their visit.

Appendix II – Description of How Hospital’s FAP has changed since ACA

The Accountable Care Act (ACA) enhanced access to health care insurance for a population of patients either uninsured or under-insured. This coupled with the Medicaid Expansion activities of the past few years has resulted in Meritus seeing a reduction in our uninsured population. In FY 2015 we saw 35% less uninsured patients than FY 2014 which resulted in 52% less uninsured gross charges. This resulted in a decline in overall uncompensated care of 36%, charity care declining 50% and bad debts declining 29%. We do continue to see Financial Assistance needs within this population of patients due to gaps in coverage provided in the ACA. Meritus as part of its mission will continue to support the care and provide necessary assistance to these patients.

Appendix III – Financial Assistance Policy (FAP)

Meritus Medical Center

DEPARTMENT: Patient Accounts
POLICY NAME: Financial Assistance
POLICY NUMBER: 0436
ORIGINATOR: Patient Accounts
EFFECTIVE DATE: 8/15/97
REVISION DATE(s): 03/26/99, 03/22/00, 03/14/03, 02/23/04, 03/03/04, 06/10/04,
10/28/04, 6/27/05, 3/2/06, 2/1/07, 3/27/07, 1/23/08, 3/23/09
3/30/09, 8/10/10, 2/7/11, 1/25/12, 1/14
REVIEWED DATE: 12/1/00, 2/24/03, 3/24/04
Signed copy on file in Patient Financial Services

SCOPE

The Financial Assistance procedures are designed to assist individuals who qualify for less than full coverage under available Federal, State and Local Medical Assistance Programs, but whom residual "self-pay" balances exceed their own ability to pay. The underlying theory is that a person, over a reasonable period of time can be expected to pay only a maximum percentage of their disposable income towards charges incurred while in the hospital. Any "self-pay" amount in excess of this percentage would place an undue financial hardship on the patient or their family and may be adjusted off as Financial Assistance.

PURPOSE

Meritus Medical Center (MMC) is committed to providing quality health care for all patients regardless of their inability to meet the associated financial obligation and without discrimination on the grounds of race, color, national origin or creed. Financial assistance can be offered during, or after services are rendered and the hospital will inform the applicant regarding a probable eligibility determination within 2 business days. The purpose of this document is to present a formal set of policies and procedures designed to assist hospital Patient Financial Services personnel in their day to day application of this commitment.

While flexibility in apply guidelines to an individual patient's financial situation is clearly needed, certain objective criteria listed below are essential to assure consistency in the implementation of the hospital's financial assistance program.

POLICY

1. Financial Assistance is determined by using the U.S. Department of Health and Human Services, U.S. Federal Poverty Measure guidelines. Patients must be a US citizen and have a valid social security number.
2. The Poverty Guidelines are issued each year in the Federal Register by the (HHS). The guidelines are a simplification of the Poverty thresholds for use for administrative

Patient Accounts
Page 1 of 5

Financial Assistance Policy

Appendix III – Financial Assistance Policy continued

Meritus Medical Center

purposes.

3. The Poverty Guidelines are available on-line at: <http://aspe.dhhs.gov/poverty> then choose the guidelines you wish. See Appendix 1.
4. Poverty Guidelines are updated each year by the Census Bureau thereby thresholds are used mainly for statistical purposes and weighted for the average poverty thresholds determination.
5. Public Assistance Programs are available to assist patients for services and specific diagnoses. Patients who present for services who may qualify for these public programs will be referred to the appropriate agency:
 - a. Medicaid
 - b. Medicare
 - c. DHMH Woman's Breast/Cervical Cancer Program
 - d. DHMH Colorectal Cancer Program
 - e. Other
6. MMC will follow the Maryland Hospital Association Standards for Financial Assistance for Maryland.
 - a. MMC will provide 100 percent free hospital care for patients below 200 percent of Federal Poverty levels and the income threshold for reduced-cost medically necessary care is between 200 and 300 percent of the federal poverty level and who have less than \$10,000 in net assets.
 - b. When a patient's income and/or net assets does not qualify them for 100 percent Financial Assistance, they may be eligible to qualify for financial assistance based on a sliding scale as referenced in Appendix 1.
 - c. MMC will consider the size of a patient's bill relative to their ability to pay in determining financial assistance and financial assistance options, which could include payment plans.
 - d. MMC will grant financial assistance for services determined to be medically necessary.
 - e. It is recognized that Amish and Mennonite patients do not rely on in any manner on any type of government programs or private insurance based upon their religious beliefs. These groups rely on their religious community to pull resources together to pay for healthcare bills for members of their community. These patients, who are 100% self-pay, will be granted a 25% discount when bill is paid in full within 30 days of service.
7. This policy is to ensure established and standardized procedures for Financial Assistance. This policy will be uniform hospital wide, ensuring a satisfactory level of control is maintained over adjustments to accounts receivables.
8. Financial Assistance written notices will be posted at all registration areas throughout the hospital and made available to a patient or family.

Patient Accounts
Page 2 of 5

Financial Assistance Policy

Appendix III – Financial Assistance Policy continued

Meritus Medical Center

9. An annual notice may be published in the local newspaper or other media may be used i.e., radio, web site, etc., to inform the public of the hospital's Financial Assistance program.
10. A Patient Financial Services Representative will use the criteria in this document for eligibility of Financial Assistance.
11. Eligible care covered under this program is deemed as all medically necessary medical care provided.

PROCEDURE

1. Financial eligibility criteria will be based on gross family income of the patient and/or responsible guarantor. Exception allowance will be deducted for each person living in the gross family income. Annual income criteria used will be 150% of the current poverty guidelines as published in the yearly Federal Register and those who have less than \$10,000 in net assets.
 - a. Adjustment of accounts meeting the criteria will be entered as Financial Assistance for patients who are US citizens and have a valid social security number.
 - b. Some persons may exceed established income levels but still qualify for Financial Assistance with additional factors considered. These will be reviewed case by case.
2. Gross income, refers to money wages and salaries from all sources before deductions. Income also refers to social security payments, veteran's benefits, pension plans, unemployment and worker's compensations, trust payments, alimony, public assistance, union funds, income from rent, interest and dividends or other regular support from any person living in the home or outside of the home. Also, included as regular income is 100% of all liquid or near liquid assets,(i.e., certificates of deposit, stocks, money market funds, etc.)
3. Assets refer to real and chattel/personal property. These may be evaluated for inclusion as regular income.
4. All other third party resources will first be applied including Medicaid Medical Assistance, before a Financial Assistance adjustment will be granted. The individual must apply for available Medical Assistance funds as appropriate in each individual case.
5. Patients requesting Financial Assistance may apply prior to treatment by contacting a Patient Financial Services Representative for a Financial Application.
6. Probable determination for Financial Assistance eligibility will be completed within two (2) business days, depending upon the availability of the specific required

Patient Accounts
Page 3 of 5

Financial Assistance Policy

Appendix III – Financial Assistance Policy continued

Meritus Medical Center

documentation as covered in the HHS, U.S. Federal Poverty Measure guidelines.

7. Financial Assistance applications will also be considered for accounts final billed and aged in accounts receivable.
8. Request for Financial Assistance may not be considered for patients who are in bad debt and did not respond to collection activity or statements prior to an account referral to an outside collections agency.
9. A financial application form may be requested by a Patient Financial Services Representative from the patient or responsible party listing all available assets and expenses. All applications and attachments will be forwarded to the Customer Services Unit of the Patient Financial Services Department for review.
10. During the application process, one or more of the following specific documents must be submitted to gain sufficient information to verify income for each employed family member:
 - a. Copy of payroll stub to include year to date wages.
 - b. Letter from employer verifying gross income.
 - c. Letter from federal or state agency indicating the amount of assistance received.
 - d. Copy of most recently filed federal income tax return.
 - e. Proof of other income for all persons living in the family.
11. Every effort will be made to identify a patient's qualifications/approval at or prior to time of admission of service. However, it is recognized that there will be cases in which accurate determinations, at time of admission are not possible and that events may occur subsequent to service with may affect a patient's ability to pay.
 - a. Emergent or medically necessary services will not be delayed based on the financial status of the patient. WCH follows the federal EMTALA regulations for emergency services rendered.
12. An approval or denial letter will be mailed directly to the patient or responsible guarantor to inform of the final disposition of the request for Financial Assistance.
13. Open "self-pay" receivable balance of deceased patients for which no estate has been filed with the Register of Wills, may be considered for Financial Assistance without a financial assistance application on file.
14. Open "self-pay" balance of Medical Assistance patients for which have a valid Medical Assistance number and which Medical Assistance is active or eligible, may be considered for Financial Assistance without a financial assistance application on file.
15. A financial application that has been approved for Financial Assistance will remain

Appendix III – Financial Assistance Policy continued

Meritus Medical Center

eligible for a period of six months. Patients or guarantors incurring accounts after the six month period will be required to reapply so that any changes in their financial status can be reassessed.

- 16. Accounts receivable accounts approved for Financial Assistance will be reconciled by the Finance Department at fiscal year end and reported annually to the Health Services Cost Review Commission (HSCRC) of the State of Maryland.
- 17. If Financial Assistance is denied, a payment arrangement will be obtained on any balance due by the patient or the guarantor by a Patient Financial Services Representative.

RESPONSIBILITY

REFERENCES

RELATED POLICIES

SIGNATURES

Signature	Revision No.	Revision Date:
1.		
2.		
3.		
4.		

Appendix III – Financial Assistance Policy continued

YEAR		2014					
FAMILY SIZE		100%	80%	60%	40%	20%	0%
1	0 - 23,340	23,341 - 29,175	29,176 - 35,010	35,011 - 40,845	40,846 - 46,680	46,680.01+	
2	0 - 31,460	31,461 - 39,325	39,326 - 47,190	47,191 - 55,055	55,056 - 62,920	62,920.01+	
3	0 - 39,580	39,581 - 49,475	49,476 - 59,370	59,371 - 69,265	69,266 - 79,160	79,160.01+	
4	0 - 47,700	47,701 - 59,625	59,626 - 71,550	71,551 - 83,475	83,476 - 95,400	95,400.01+	
5	0 - 55,820	55,821 - 69,775	69,776 - 83,730	83,731 - 97,685	97,686 - 111,640	111,640.01+	
6	0 - 63,940	63,941 - 79,925	79,926 - 95,910	95,911 - 111,895	111,896 - 127,880	127,880.01+	
7	0 - 72,060	72,061 - 90,075	90,076 - 108,090	108,091 - 126,105	126,106 - 144,120	144,120.01+	
8	0 - 80,180	80,181 - 100,225	100,226 - 120,270	120,271 - 140,315	140,316 - 160,360	160,360.01+	
9	0 - 88,300	88,301 - 110,375	110,376 - 132,450	132,451 - 154,525	154,526 - 176,600	176,600.01+	
10	0 - 96,420	96,421 - 120,525	120,526 - 144,630	144,631 - 168,735	168,736 - 192,840	192,840.01+	

* For family units of more than 10 members, add \$8120 for each additional member

**Information Obtained from: <http://aspe.hhs.gov/poverty/14poverty.shtml>

Appendix IV – Patient Information Sheet



MERITUS HEALTH PATIENT INFORMATION SHEET

Hospital Financial Assistance Policy

Meritus Health is committed to providing all patients with medically necessary care regardless of their ability to pay. If you are unable to pay for medical care, you may qualify for Free or Reduced Cost Medically Necessary Care if you have no other insurance options or sources of payment including Medical Assistance, litigation or third-party liability.

Meritus Health meets or exceeds the legal requirements by providing free medically necessary care to those individuals in households below 200% of the federal poverty level and reduced cost-care up to 400% of the federal poverty level.

Patients' Rights

Meritus Health will work with their uninsured patients to gain an understanding of each patient's financial resources.

- Those patients that meet the criteria of Meritus Health's financial assistance policy may receive assistance from Meritus Health in paying their bill.
- Meritus Health will provide assistance with enrollment in publicly-funded entitlement programs (e.g. Medicaid) or other considerations of funding that may be available from other charitable organizations.
- If you do not qualify for Medical Assistance, or financial assistance, you may be eligible for an extended payment plan for your hospital medical bills.
- If you believe you have been wrongly referred to a collection agency, you have the right to contact the hospital to request assistance. (See contact information below).

Patients' Obligations

Meritus Health believes that its patients have personal responsibilities related to the financial aspects of their healthcare needs. Our patients are expected to:

- Pay the hospital bill in a timely manner if they have the ability to pay.
- Contact the hospital immediately if the patient cannot afford to pay the bill in full and seek assistance in resolving their outstanding balance.
- Provide complete and accurate insurance & financial information.
- Provide requested data to complete Medicaid applications in a timely manner.
- Maintain compliance with established payment plan terms.
- Notify us immediately at the number listed below of any changes in circumstances.

Contacts:

Call 240-313-9500 with questions concerning:

- Your hospital bill
- Your rights and obligations with regards to your hospital bill

Call 301-790-8928 with questions concerning:

- How to apply for Maryland Medicaid
- How to apply for free or reduced care

For information about Maryland Medical Assistance

Contact your local department of Social Services

1-800-332-6347 TTY 1-800-925-4434

Or visit: www.dhr.state.md.us

Physician charges are not included in hospitals bills and are billed separately by the physician.

Appendix IVa – Financial Assistance Letter (Page 1)



Meritus Health has a Financial Assistance Program available for patients who find they are unable to pay all or part of their medical bills. This program is based on the Federal Income Guidelines of the household, assets owned by the household and household size. Please complete the entire application and return it with the required documentation to:

Meritus Medical Center
Attn: Patient Accounts/Financial Assistance
11116 Medical Campus Road
Hagerstown, MD 21742

Helpful Hints:

- Please make sure that you include all of the required documentation with your application to avoid any delay in processing your application.
- If you have applied for Financial Assistance in the past, you must submit new and current documentation with your application. We cannot use information from your previous application.
- **Regular Monthly payments are expected until your application is processed and you receive an approval letter in the mail.**

If additional information and/or documentation are required we will contact you by phone or by mail within two (2) business days. You will be notified in writing of the decision regarding this application within 30 days of the completed application. If you have any questions or concerns regarding your application please contact a Financial Counselor at (301) 790-8928 Monday through Friday between the hours of 7:30 am and 4:00 pm.

Sincerely,

Financial Counselor
Meritus Health

Appendix IVa – Financial Assistance Letter (Page 2)



Maryland State Uniform Financial Assistance Application

Information About You

Name _____
First Middle Last

Social Security Number _____ - ____ - _____ Marital Status: Single Married Separated
 US Citizen: Yes No Permanent Resident: Yes No
 Indicate Service Location: _____

Home Address _____ Phone _____

City State Zip code County

Employer Name _____ Phone _____

Work Address _____

City State Zip code

Household members: (Household members are defined as someone who is listed on your Federal Income Tax Form)

Name	Age	Relationship	Social Security Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have you applied for Medical Assistance Yes No
 If yes, what was the date you applied? _____
 If yes, what was the determination? _____

Appendix IVa – Financial Assistance Letter (Page 3)

I. Family Income

List the amount of your monthly income from all sources. You may be required to supply proof of income, assets, and expenses. If you have no income, please provide a letter of support from the person providing your housing and meals.

	Monthly Amount
Employment	_____
Retirement/pension benefits	_____
Social security benefits	_____
Public assistance benefits	_____
Disability benefits	_____
Unemployment benefits	_____
Veterans benefits	_____
Alimony	_____
Rental property income (include copy of tax returns)	_____
Strike benefits	_____
Military allotment	_____
Farm or self-employment (include copy of tax returns and Schedule C)	_____
Other income source	_____
Child Support	_____
Total	_____

II. Liquid Assets

	Current Balance
Checking account	_____
Savings account	_____
Stocks, bonds, CD, or money market	_____
Other accounts (Pension, IRA, Etc.)	_____
Total	_____

III. Other Assets

If you own any of the following items, please list the type and approximate value.

Home	Loan Balance _____	Approximate value _____
Automobile	Make _____ Year _____	Approximate value _____
Additional vehicle	Make _____ Year _____	Approximate value _____
Additional vehicle	Make _____ Year _____	Approximate value _____
Other property		Approximate value _____
Total		_____

IV. Monthly Expenses

	Amount
Rent or Mortgage	_____
Utilities	_____
Car payment(s)	_____
Credit card(s) (Minimum Payments)	_____
Car insurance (Monthly Amount)	_____
Health insurance	_____
Other medical expenses	_____
Other expenses (include food and gas for vehicles)	_____
Total	_____

Do you have any other unpaid medical bills? Yes No

For what service? _____

If you have arranged a payment plan, what is the monthly payment? _____

If you request that the hospital extend additional financial assistance, the hospital may request additional information in order to make a supplemental determination. By signing this form, you certify that the information provided is true and agree to notify the hospital of any changes to the information provided within ten days of the change.

Applicant signature

Date

Appendix IVa – Financial Assistance Letter (Page 4)



Checklist of information that MUST be attached to this Financial Application:

_____ Current Income Tax return for previous calendar year (if business owner, Schedule C is required). If not returned, why? _____

_____ Three current pay stubs from employer for applicant and spouse. If not returned, why? _____

_____ Bank Statement for Check/Savings account on bank letterhead. If not returned, why? _____

_____ Social Security, Pension and/or disability

_____ Unemployment amount received

_____ Food Stamps and any government assistance

_____ Child Support

_____ Copy of Social Security Card

_____ Signed letter of support detailing how living expenses are being met (signed by the person providing support)

_____ Equipped for Life patient will need script from Doctor

HAVE YOU:

_____ Signed the application?

_____ Completed the application?

Please use this as a checklist so you do not forget any information that would cause your application to be denied. If you have any questions about the application and its process please call (301) 790-8928.

Appendix V - Attachment A – Mission, Vision and Value Statement

Mission Meritus Health exists to improve the health status of our region by providing comprehensive health services to patients and families.

This mission emphasizes three core activities:

Providing patient and family centered care

Bringing the patient and family perspectives into the planning, delivery and evaluation of care to improve quality and safety

Improving the health status of our region

Responding to national healthcare reform and total patient revenue economic structures that incentivize value, by expanding the focus to include improving the health status of our region

Functioning as a regional health system

Meeting the healthcare needs of the communities beyond the Meritus Health's traditional service area of Washington County

Vision Meritus Health will relentlessly pursue excellence in quality, service and performance. This vision embodies the imperative expressed by our community that emphasized becoming an organization that continually strives for excellence.

Our Values Respect, Integrity, Service and Excellence.

Our culture is driven by the values of respect, integrity, service, and excellence delivered to patients and families through teamwork. It is through these values that Meritus Health will fulfill our mission and achieve our vision.

Meritus has established a strategic plan to achieve its vision by focusing on improvements in the areas of quality, service, performance, and culture:

Quality

- Successfully manage the quality of care, the cost of care, and the volume (utilization) of care in response to the national healthcare delivery and reimbursement trends.

Service

- Provide an exceptional patient experience by utilizing patient and family centered care principles across the organization.

Performance

- Improve financial performance in response to changes in healthcare reimbursement and to ensure we have the resources to pursue the fulfillment of our mission and vision.

Appendix V - Attachment A – Mission, Vision and Value Statement continued

- Develop information technology capabilities to support the achievement of the organizational vision and strategies.

Culture

- Empower employees and providers to put patients and families at the center of everything we do while attracting, retaining, developing, and rewarding our workforce.
- Strengthen physician and provider alignment with Meritus Health by developing an innovative, high-performing medical staff.

Appendix V - Attachment B – Mission, Vision and Value Statement

Meritus Health

Who We Are

Meritus Medical Center is perhaps our most easily recognized facility, but Meritus Health offers much, much more. For generations, Meritus Health has been responding to the specific needs of the region with the foresight of a true community partner by developing and sustaining a total healthcare system. Branches of care including primary care physician practices, specialists in disciplines from obstetrics to cardiology and satellite services from diagnostics to home medical equipment complement the hospital's efforts to provide quality care. Meritus Health is not just a hospital. That said, Meritus Medical Center does offer cutting-edge technology and services for inpatients and outpatients in a facility without a cold, clinical feel. Care is provided by a multi-generational workforce from around our region—your friends and neighbors. Access to advanced diagnostics, treatments and services is right here, delivered by competent and caring, familiar faces.

The quality services offered include a regional trauma center, a cardiac catheterization lab, a stroke center, a bariatric surgery center, a wound center and a nationally-recognized joint replacement program. Patients seldom have a reason to go “down the road” to receive excellent medical care. Meritus Health is the largest healthcare provider in the region and serves as a leader in the continued evolution of a comprehensive approach to wellness in the tri-state area and beyond.

MISSION

Meritus Health exists to improve the health status of our region by providing comprehensive health services to patients and families.

VISION

Meritus Health will relentlessly pursue excellence in quality, service and performance.

OUR VALUES

Respect, Integrity, Service and Excellence



MeritusHealth.com



Appendix V – Attachment C



Community Health Needs Assessment

FY 2014 Action Plan

Strategic Plan Goal: Improve Population Health

	OBJECTIVE	ACTION	RESPONSIBILITY	TARGET
Obesity	Reduce obesity and physical activity	Implement healthy eating initiatives	Meritus Nutrition Services	12/2013
		Increase awareness and community support groups	Meritus Community Health Education / Weight Loss Center / MEND / BHS / PN / WCBOE	06/2014
		Offer BMI screening and referrals Provide nutritional & dietary counseling		
Diabetes	Improve management of diabetes and reduce mortality	Implement a community case management model for diabetic patients	Meritus / WCHIC	12/2013
		Improve access to diabetes education Increase diabetes outreach and support to primary care practices	Meritus Endocrinology, Nutrition and Diabetes Center / Parish Nursing	06/2014
		Offer Living Well With Diabetes education and support program	Meritus CHE	06/2014
Heart Disease	Reduce heart disease mortality and smoking	Establish Coordinated Approach to Child Health (CATCH) program	Meritus CHE	12/2013
		Provide community screenings and education	Meritus CHE / Cardiac Rehabilitation / PN	06/2014
Cancer	Reduce cancer mortality	Establish Center for Breast Health	Meritus John R Marsh	07/2013
		Expand cancer research	Meritus JRM / Clinical Research	12/2013
		Provide community screenings Offer support and education groups	Meritus JRM / CHE / PN	06/2014
Mental Health	Improve mental health access and reduce ED visits	Decrease utilization of ED and inpatient hospitalization for mental health services	Meritus BHS / WCHIC	06/2014
		Increase public awareness and community support for improved mental health and wellness	Meritus BHS / WCHIC / PN	12/2013
		Implement a community case management program for frequent ED patients	Meritus BHS / Turning Point Way Station	12/2013
Teen Pregnancy	Reduce teen pregnancy	Provide education & prevention measures delivered through school-based health centers	Meritus Nursing / WCBOE	06/2014
		Sponsor faith-based teen sexuality education program	Meritus Parish Nursing	06/2014

Addendum – Table I

Total Registered Accounts by County					
	Total	Medicaid	Medicaid %	Uninsured	Uninsured %
Alleghany	552	86	15.58%	15	2.72%
Anne Arundel	98	30	30.61%	8	8.16%
Baltimore	170	57	33.53%	35	20.59%
Baltimore City	11	7	63.64%	2	18.18%
Calvert	16	1	6.25%	-	0.00%
Caroline	5	1	20.00%	1	20.00%
Carroll	169	29	17.16%	15	8.88%
Cecil	8	-	0.00%	3	37.50%
Charles	21	7	33.33%	1	4.76%
Dorchester	2	1	50.00%	1	50.00%
Frederick	4,013	836	20.83%	227	5.66%
Garrett	46	14	30.43%	2	4.35%
Harford	26	9	34.62%	3	11.54%
Howard	45	7	15.56%	4	8.89%
Kent	8	1	12.50%	1	12.50%
Montgomery	327	91	27.83%	55	16.82%
Prince George's	78	20	25.64%	13	16.67%
Queen Anne's	3	1	33.33%	1	33.33%
Somerset	2	-	0.00%	-	0.00%
St. Mary's	14	5	35.71%	-	0.00%
Washington	107,949	33,912	31.41%	5,850	5.42%
Wicomico	7	6	85.71%	-	0.00%
Worchester	3	2	66.67%	-	0.00%
Pennsylvania	9,927	535	5.39%	485	4.89%
Virginia	106	15	14.15%	16	15.09%
West Virginia	7,719	657	8.51%	389	5.04%
All Other	<u>1,692</u>	<u>235</u>	13.89%	<u>258</u>	15.25%
Total	133,017	36,565	27.49%	7,385	5.55%

Addendum – Table II

Total Gross Charges by County					
	Total	Medicaid	Medicaid %	Uninsured	Uninsured %
Alleghany	2,828,213	257,122	9.09%	48,832	1.73%
Anne Arundel	214,966	51,590	24.00%	8,082	3.76%
Baltimore	295,182	142,212	48.18%	28,762	9.74%
Baltimore City	41,170	38,524	93.57%	947	2.30%
Calvert	59,236	44,101	74.45%	-	0.00%
Caroline	6,419	204	3.17%	325	5.06%
Carroll	560,551	47,050	8.39%	9,278	1.66%
Cecil	6,586	-	0.00%	4,826	73.28%
Charles	19,516	4,069	20.85%	728	3.73%
Dorchester	1,384	552	39.91%	832	60.09%
Frederick	12,842,173	1,865,738	14.53%	341,786	2.66%
Garrett	90,441	36,601	40.47%	982	1.09%
Harford	31,354	15,725	50.15%	1,700	5.42%
Howard	55,684	6,539	11.74%	7,273	13.06%
Kent	6,054	332	5.48%	248	4.09%
Montgomery	919,259	200,914	21.86%	32,558	3.54%
Prince George's	89,804	30,502	33.97%	7,057	7.86%
Queen Anne's	1,589	159	10.01%	910	57.28%
Somerset	2,335	-	0.00%	-	0.00%
St. Mary's	39,748	5,501	13.84%	-	0.00%
Washington	282,613,853	61,397,353	21.72%	5,229,369	1.85%
Wicomico	10,377	9,754	93.99%	-	0.00%
Worchester	11,700	11,214	95.85%	-	0.00%
Pennsylvania	37,534,653	1,094,760	2.92%	560,950	1.49%
Virginia	491,762	37,459	7.62%	18,400	3.74%
West Virginia	22,543,799	1,003,748	4.45%	353,221	1.57%
All Other	<u>4,047,373</u>	<u>333,234</u>	8.23%	<u>315,600</u>	7.80%
Total	365,365,181	66,634,957	18.24%	6,972,665	1.91%

12/11/2015
 Meritus Health, Inc.
 Occurrences - Selected Departments
 For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Department: Administration								
Program: Board Service								
HCC Accreditation Team - 4th qtr. JLough	4/1/2015	1.50	0.00	56	0	56	Unknown	1
CNO Roundtable 2 Day Conference - 4th qtr. JLough	4/1/2015	16.00	0.00	593	0	593	Unknown	2
Chamber of Commerce Meeting - 4th qtr. JLough	4/1/2015	1.50	0.00	56	0	56	Unknown	1
Local Management Board Mtg. - 3rd qtr. JLough	1/1/2015	2.00	0.00	74	0	74	Unknown	1
MONE Research Council Mtg. - 3rd qtr. JLough	1/1/2015	3.00	0.00	112	0	112	Unknown	1
Maryland eCare Board Mtg. - 3rd qtr. JLough	1/1/2015	4.00	0.00	148	0	148	Unknown	1
Washington Co. Nurse Mtg. - 3rd qtr. JLough	1/1/2015	1.00	0.00	36	0	36	Unknown	1
Maryland Patient Safety Mtg. - 3rd qtr. JLough	1/1/2015	7.00	0.00	260	0	260	Unknown	1
Hospice of Wash. Co. Mtg. - 2nd qtr. JLough	10/1/2014	1.00	0.00	36	0	36	Unknown	1

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 Meritus Health, Inc.
 Occurrences - Selected Departments
 For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Magnet Conference (3 days) - 2nd qtr. JLough	10/1/2014	24.00	0.00	889	0	889	Unknown	3
MHEI Conference - 2nd qtr. JLough	10/1/2014	2.00	0.00	74	0	74	Unknown	1
DHMH Govern Body Mtg. - 2nd qtr. JLough	10/1/2014	2.50	0.00	92	0	92	Unknown	1
MONE Board Mtg. teleconference - 2nd qtr. JLough	10/1/2014	0.50	0.00	18	0	18	Unknown	1
Advisory Panel Hospice of Wash. Co. - 2nd qtr. JLough	10/1/2014	2.00	0.00	74	0	74	Unknown	1
School Health Program Presentation to Foundation Board - 2nd qtr. JLough	10/1/2014	0.25	0.00	9	0	9	Unknown	1
Teen Pregnancy Initiatives Meeting - 2nd qtr. JLough	10/1/2014	0.50	0.00	18	0	18	Unknown	1
School Advisory Board - 2nd qtr. JLough	10/1/2014	1.50	0.00	56	0	56	Unknown	1
School Health Program Conf. Call - 2nd qtr. JLough	10/1/2014	0.50	0.00	18	0	18	Unknown	1

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Meritus Health, Inc.
Occurrences - Selected Departments
For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
American Assoc. of Colleges of Nursing Conf. - 2nd qtr. JLough	10/1/2014	16.00	0.00	593	0	593	Unknown	2
NP Program at Shenandoah University - 2nd qtr. JLough	10/1/2014	0.50	0.00	18	0	18	Unknown	1
Wash. Co. Board of Education Partnership - 2nd qtr. JLough	10/1/2014	1.50	0.00	56	0	56	Unknown	1
March of Dimes Meeting - 1st qtr. JLough	7/1/2014	1.50	0.00	56	0	56	Unknown	1
Chamber of Commerce - Meetings 1st qtr. JLough	7/1/2014	9.50	0.00	352	0	352	Unknown	2
Community Impact Panel - Strategic Planning Retreat - 1st qtr. JLough	7/1/2014	8.00	0.00	296	0	296	Unknown	1
Community Initiative Mtg. WCPS - 1st qtr. JLough	7/1/2014	1.50	0.00	56	0	56	Unknown	1
MMC/Waystation Coordination Mtg. 1st qtr. JLough	7/1/2014	1.50	0.00	56	0	56	Unknown	1
Komen MD Affiliates 1st qtr. JLough	7/1/2014	1.50	0.00	56	0	56	Unknown	1

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 Meritus Health, Inc.
 Occurrences - Selected Departments
 For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
CNO Roundtable, St. Louis - 1st qtr. JLough	7/1/2014	4.00	0.00	148	0	148	Unknown	1
Teens Have Choices Planning Mtg. - 1st qtr. JLough	7/1/2014	1.50	0.00	56	0	56	Unknown	1
United Way CEO Mtg and Breakfast - 1st qtr. JLough	7/1/2014	2.00	0.00	74	0	74	Unknown	1
Totals (Program): Board Service		119.75	0.00	4,436	0	4,436	0	35
Program: Community Health Education - Seminars/Presentations								
Teens Have Choices Event - Valley Mall - 2nd qtr. JLough	10/1/2014	2.00	0.00	74	0	74	Unknown	50
Manpower Maryland LIVE Interview - 1st qtr. JLough	7/1/2014	1.00	0.00	36	0	36	Unknown	1
Totals (Program): Community Health Education - Semina		3.00	0.00	110	0	110	0	51
Program: Community Service								
March for Babies Walk at City Park - 4th qtr. JLough	4/1/2015	2.50	0.00	92	0	92	Unknown	1
Cornerstone Giving Club Dinner - 3rd qtr. JLough	1/1/2015	2.00	0.00	74	0	74	Unknown	1

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Meritus Health, Inc.

Occurrences - Selected Departments

For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Shepherdstown University White Coat Ceremony - 3rd qtr. JLough	1/1/2015	3.00	0.00	112	0	112	Unknown	1
Open House at Brooklane - 3rd qtr. JLough	1/1/2015	1.00	0.00	36	0	36	Unknown	1
Shepherd University Lunch with Professor - 3rd qtr. JLough	1/1/2015	3.00	0.00	112	0	112	Unknown	1
MPEA Awards Ceremony Dinner - 2nd qtr. JLough	10/1/2014	3.00	0.00	112	0	112	Unknown	1
Community Free Clinic Tour and Discussion - 2nd qtr. JLough	10/1/2014	1.50	0.00	56	0	56	Unknown	1
Dedication for Rose Parada - 2nd qtr. JLough	10/1/2014	0.50	0.00	18	0	18	Unknown	1
Elizabethtowe Feaste and Frolic at Yuletide with USMH - 2nd qtr. JLough	10/1/2014	2.50	0.00	92	0	92	Unknown	1
103.7 Chambersburg Radio Show - Wash Co Chamber of Commerce topic JLough	7/1/2014	1.00	0.00	36	0	36	Unknown	1
Meritus Open - Pre Event - 1st qtr. JLough	7/1/2014	2.00	0.00	74	0	74	Unknown	1
Totals (Program): Community Service		22.00	0.00	814	0	814	0	11

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 Meritus Health, Inc.
 Occurrences - Selected Departments
 For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Program: Health Professional Education - Other Health Professionals								
AACN Lecture in Florida - 3rd qtr. JLough	1/1/2015	2.00	0.00	74	0	74	Unknown	1
Spiritual Care Conference Speaker - 2nd qtr. JLough	10/1/2014	1.00	0.00	36	0	36	25	1
Totals (Program): Health Professional Education - Oth		3.00	0.00	110	0	110	25	2
Program: Health Professional Education - Other								
Leadership Speaker at Shepherd Univeristy - 2nd qtr. JLough	10/1/2014	2.50	0.00	92	0	92	Unknown	1
Totals (Program): Health Professional Education - Oth		2.50	0.00	92	0	92	0	1
Totals (Department): Administration		150.25	0.00	5,562	0	5,562	25	100
Department: Avon Grant #2								
Program: Grants								
2015 Avon Grant #2 JLough	7/1/2014	0.00	0.00	60,187	60,187	0	Unknown	0
Totals (Program): Grants		0.00	0.00	60,187	60,187	0	0	0
Totals (Department): Avon Grant #2		0.00	0.00	60,187	60,187	0	0	0
Department: Behavioral Services								
Program: Board Service								
Crisis Response Team - Waystation/Turning Point JLough	6/29/2015	2.00	0.00	74	0	74	Unknown	1

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Meritus Health, Inc.
Occurrences - Selected Departments
For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
HEAL Board Meeting JLough	6/11/2015	1.00	0.00	36	0	36	Unknown	1
Community Partners for Healthy Lifestyles -Teleconference JLough	6/4/2015	1.00	0.00	36	0	36	Unknown	1
Hospital State Palliative Care Advisory Group JLough	6/2/2015	5.00	0.00	185	0	185	Unknown	1
Healthy Washington Co. Event and Prep JLough	5/21/2015	2.50	0.00	92	0	92	Unknown	2
Governor's Task Force Public Meeting-Herion/Opiates JLough	5/18/2015	8.00	0.00	296	0	296	Unknown	1
Govenor's Task Force Meeting JLough	5/8/2015	1.00	0.00	36	0	36	Unknown	1
Chamber of Commerce Event JLough	5/6/2015	1.50	0.00	56	0	56	Unknown	1
27th Annual Child Welfare Workshop JLough	4/21/2015	8.00	0.00	296	0	296	Unknown	1
Wash. Co. Health Improvement Coalition - 4th qtr. JLough	4/1/2015	3.50	0.00	130	0	130	Unknown	2

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Meritus Health, Inc.
Occurrences - Selected Departments
For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Community Free Clinic BOD - 4th qtr. JLough	4/1/2015	5.00	0.00	185	0	185	Unknown	3
Million Heart Campaign - 4th qtr. JLough	4/1/2015	4.50	0.00	166	0	166	Unknown	3
CHNA Steering Committee 4th qtr. JLough	4/1/2015	13.00	0.00	481	0	481	Unknown	6
DHMH Overdose Fatality Review Team JLough	3/26/2015	2.00	0.00	74	0	74	Unknown	1
Maryland Hospital Association Mental Health Group JLough	3/20/2015	5.00	0.00	185	0	185	Unknown	1
Wash. Co. Health Improvement Coalition - 3rd qtr. JLough	3/3/2015	1.50	0.00	56	0	56	Unknown	1
Palliative Care Pilot Team in Baltimore JLough	2/23/2015	2.00	0.00	74	0	74	Unknown	1
DHMH Overdose Fatality Review Team JLough	1/29/2015	2.00	0.00	74	0	74	Unknown	1
Hospice Life Care Meetings JLough	1/22/2015	2.00	0.00	130	0	130	20	1

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Meritus Health, Inc.
Occurrences - Selected Departments
For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Hospice Life Care Meeting JLough	1/22/2015	2.00	0.00	74	0	74	Unknown	1
Life Care Advisory Panel JLough	1/22/2015	2.50	0.00	92	0	92	Unknown	1
Community Free Clinic BOD - 3rd qtr. JLough	1/1/2015	5.00	0.00	185	0	185	Unknown	5
Million Hearts Campaign - 3rd qtr. JLough	1/1/2015	9.00	0.00	333	0	333	Unknown	2
Maryland Hospital Association Workgroup JLough	12/11/2015	3.00	0.00	112	0	112	Unknown	1
Community Nursing Home Meeting JLough	11/25/2015	2.00	0.00	74	0	74	Unknown	1
HEAL Health Summit JLough	11/20/2015	3.00	0.00	112	0	112	Unknown	1
Life Care Advisory Panel JLough	10/28/2015	2.00	0.00	74	0	74	Unknown	1
Hospice Advisory Committee JLough	10/28/2015	2.00	0.00	74	0	74	Unknown	1

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Meritus Health, Inc.
Occurrences - Selected Departments
For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
SCIP Steering Committee - 2nd qtr. JLough	10/27/2014	1.50	0.00	56	0	56	Unknown	1
Healthy Howard WCHD - 2nd qtr. JLough	10/9/2014	1.50	0.00	36	0	36	Unknown	1
Wash. Co. Health Improvement Coalition - 2nd qtr. JLough	10/1/2014	5.00	0.00	185	0	185	Unknown	3
Community Free Clinic BOD - 2nd qtr. JLough	10/1/2014	3.00	0.00	0	0	0	Unknown	2
Million Hearts Campaign - 2nd qtr. JLough	10/1/2014	4.50	0.00	166	0	166	Unknown	3
SCIP Steering Committee JLough	9/22/2014	2.00	0.00	74	0	74	Unknown	1
Washington Co. DSS JLough	9/15/2014	2.50	0.00	92	0	92	Unknown	1
Healthy Howard WCHD - 1st qtr, JLough	9/11/2014	1.50	0.00	56	0	56	Unknown	1
United Way Strategic Plan JLough	8/29/2014	3.50	0.00	130	0	130	Unknown	1

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 Meritus Health, Inc.
 Occurrences - Selected Departments
 For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Wash. Co. Health Improvement Coalition - 1st qtr. JLough	7/9/2014	2.00	0.00	74	0	74	Unknown	1
Community Nursing Home Committee JLough	7/1/2014	6.00	0.00	222	0	222	Unknown	3
Community Free Clinic BOD - 1st qtr. JLough	7/1/2014	15.00	0.00	556	0	556	Unknown	7
Million Hearts Campaign - 1st qtr. JLough	7/1/2014	8.00	0.00	296	0	296	Unknown	4
Waystation Steering Committee - all qtrs. JLough	7/1/2014	8.00	0.00	296	0	296	Unknown	4
Hospice/MMC Steering Committees - all qtrs. JLough	7/1/2014	8.00	0.00	296	0	296	Unknown	4
Totals (Program): Board Service		173.00	0.00	6,327	0	6,327	20	81
Program: Community Building Activities								
Yoga for Weight Loss - 3rd qtr. Building Use RW142 JLough	3/3/2015	0.00	0.00	0	0	0	20	20
Totals (Program): Community Building Activities		0.00	0.00	0	0	0	20	20
Program: Community Health Education - Seminars/Presentations								
Lions Club Presentation and Prep JLough	6/16/2015	3.00	0.00	112	0	112	Unknown	2

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 Meritus Health, Inc.
 Occurrences - Selected Departments
 For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Bester/Casey Seminar JLough	3/10/2015	5.00	0.00	185	0	185	Unknown	1
CDC SAMSHA Webinar JLough	2/19/2015	1.00	0.00	36	0	36	Unknown	1
Executive Child and Adolescent Summit and Prep JLough	2/12/2015	10.00	0.00	371	0	371	50	2
Television Interview on Community Health and Wellness JLough	9/24/2014	1.50	0.00	56	0	56	Unknown	0
Totals (Program): Community Health Education - Semina		20.50	0.00	760	0	760	50	6
Program: Community Service								
Community Free Clinic - Hosted: Mud Volleyball Event JLough	7/19/2014	6.00	0.00	222	0	222	100	1
Totals (Program): Community Service		6.00	0.00	222	0	222	100	1
Program: Dedicated Staff								
Community Benefit Prep FY15 JLough	4/1/2015	815.00	0.00	30,196	0	30,196	Unknown	0
Totals (Program): Dedicated Staff		815.00	0.00	30,196	0	30,196	0	0

Program: Health Professional Education - Other Health Professionals

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Meritus Health, Inc.

Occurrences - Selected Departments

For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
MOLST Training - La Plata Nursing Home JLough	6/24/2015	2.50	0.00	92	0	92	20	1
MOLST Training - Solomon's Island Nursing Home JLough	4/30/2015	2.00	0.00	74	0	74	10	1
CPE Pastoral Services - Exit Interviews JLough	4/23/2015	3.00	0.00	112	0	112	10	1
MOLST Training at Golden Living Nursing Home JLough	12/10/2014	1.50	0.00	56	0	56	25	1
MOLST Training to staff at Frederick Memorial Hospital JLough	11/17/2014	3.00	0.00	112	0	112	25	1
Totals (Program): Health Professional Education - Oth		12.00	0.00	446	0	446	90	5
Program: Support Groups								
Bariatric Support Group - 4th qtr. JLough	4/1/2015	7.00	0.00	260	0	260	81	3
Bariatric Support Group - 3rd qtr. JLough	1/1/2015	7.00	0.00	260	0	260	84	3
Bariatric Support Group - 2nd qtr. JLough	10/1/2014	7.00	0.00	260	0	260	70	3

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Meritus Health, Inc.

Occurrences - Selected Departments

For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Bariatric Support Group - 1st qtr. JLough	7/1/2014	6.00	0.00	222	0	222	73	3
Totals (Program): Support Groups		27.00	0.00	1,002	0	1,002	308	12
Totals (Department): Behavioral Services		1,053.50	0.00	38,953	0	38,953	588	125
Department: BHS EPS								
Program: Health Professional Education - Other								
Student Internship - EPS JLough	7/1/2014	577.00	0.00	21,377	0	21,377	1	276
Totals (Program): Health Professional Education - Oth		577.00	0.00	21,377	0	21,377	1	276
Totals (Department): BHS EPS		577.00	0.00	21,377	0	21,377	1	276
Department: BHS Inpatient								
Program: Board Service								
Mental Health Center Advisory Board JLough	12/8/2014	3.00	0.00	112	0	112	Unknown	1
Totals (Program): Board Service		3.00	0.00	112	0	112	0	1
Program: Community Service								
Suicide Prevention Walk JLough	7/27/2014	6.00	0.00	222	0	222	Unknown	1
Totals (Program): Community Service		6.00	0.00	222	0	222	0	1
Program: Health Professional Education - Other Health Professionals								
Presentation on "Spice" to Care Management JLough	4/24/2015	1.00	0.00	36	0	36	25	1

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 Meritus Health, Inc.
 Occurrences - Selected Departments
 For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Totals (Program): Health Professional Education - Oth		1.00	0.00	36	0	36	25	1
Program: Health Professional Education - Other								
Student Shadow Supervision - 3rd qtr JLough	1/1/2015	24.00	0.00	889	0	889	2	24
1West Grad Student Supervision JLough	7/1/2014	18.00	0.00	667	0	667	Unknown	0
Student Internship - 1W JLough	7/1/2014	577.00	0.00	21,377	0	21,377	1	276
Totals (Program): Health Professional Education - Oth		619.00	0.00	22,933	0	22,933	3	300
Totals (Department): BHS Inpatient		629.00	0.00	23,303	0	23,303	28	303
Department: BHS Outpatient								
Program: Board Service								
CISM Coordinator of Region II JLough	2/11/2015	2.00	0.00	74	0	74	Unknown	1
CISM Team - Coordinators Meeting JLough	12/3/2014	2.00	0.00	74	0	74	Unknown	1
Advisory Panel for Hospice of Wash. Co. JLough	10/28/2014	6.00	0.00	780	0	780	Unknown	3

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Occurrences - Selected Departments

For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Project ACT NOW - Overdose Prevention Workgroup JLough	7/1/2014	4.50	0.00	166	0	166	Unknown	3
Totals (Program): Board Service		14.50	0.00	1,094	0	1,094	0	8
Program: Community Health Education - Seminars/Presentations								
L&L - Connecting with Your Kids JLough	6/24/2015	1.00	0.00	36	0	36	15	1
L&L - Being Genuine JLough	5/26/2015	6.00	0.00	222	0	222	36	1
Presentation on the "Sandwich Generation" JLough	5/20/2015	5.00	0.00	185	0	185	20	1
Herald Mail Interview - Adult Coloring Book for Stress Relief JLough	5/19/2015	1.00	0.00	36	0	36	Unknown	1
L&L - Planning for Summer Finances JLough	5/12/2015	3.00	0.00	112	0	112	33	1
L&L - Blended Families JLough	4/22/2015	3.00	0.00	112	0	112	2	1
L&L - How to Help Addicted or Alcoholic Loved Ones JLough	4/14/2015	2.00	0.00	74	0	74	8	1

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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
L&L Bouncing Back from Adversity JLough	3/31/2015	3.00	0.00	112	0	112	33	1
Healthy Lifestyles - Villages of Robinwood JLough	3/17/2015	10.00	0.00	371	0	371	40	1
L&L Parenting Adult Children JLough	2/26/2015	3.00	0.00	112	0	112	16	1
Executive Child and Adolescent Summit JLough	2/12/2015	13.50	0.00	501	0	501	Unknown	1
Facilitator for Executive Child and Adolescent Summit JLough	2/12/2015	3.00	0.00	112	0	112	15	1
L&L Love is in the air JLough	2/10/2015	4.00	0.00	148	0	148	19	1
Interview - Health Focus Article JLough	2/2/2015	2.00	0.00	74	0	74	Unknown	1
L&L Developing Mindful Eating Skills JLough	1/13/2015	2.00	0.00	74	0	74	40	1
L&L - Living with Uncertainty JLough	12/10/2014	3.00	0.00	112	0	112	16	1

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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
L&L - Raising Grateful Kids JLough	12/2/2014	3.00	0.00	112	0	112	16	1
Herald Mail Interview - Taking Care of Yourself over the Holidays JLough	11/24/2014	2.00	0.00	74	0	74	Unknown	1
L&L - Gaining Control of Your Life JLough	11/19/2014	2.00	0.00	74	0	74	42	1
L&L - Difficult People JLough	11/11/2014	2.00	0.00	74	0	74	62	1
WHAG - Dr. Wagner - Marijuana JLough	11/5/2014	1.00	0.00	130	0	130	Unknown	1
L&L - 3 sessions on How to Control Your Holiday JLough	11/4/2014	8.00	0.00	296	0	296	75	3
L&L - Seasonal Affective Disorder JLough	10/14/2014	3.00	0.00	112	0	112	24	1
Lunch and Learn-School Problems JLough	9/30/2014	4.00	0.00	148	0	148	8	1
Life Changes and Aging JLough	9/30/2014	3.00	0.00	112	0	112	93	1

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Occurrences - Selected Departments

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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Lunch and Learn-The Sandwich Generation JLough	9/15/2014	1.00	0.00	36	0	36	16	1
L&L - Grieving Major Loss JLough	8/25/2014	4.00	0.00	148	0	148	14	1
WHAG - Dr. Bhandari - Health Matters JLough	8/14/2014	2.00	0.00	260	0	260	Unknown	1
Dr. Wagner-Herald Mail Interview JLough	8/12/2014	1.00	0.00	111	0	111	Unknown	1
L&L - Simplify Your Life JLough	8/12/2014	4.00	0.00	148	0	148	22	1
Dr. Bhandari WJEJ Radio Interview JLough	8/5/2014	2.00	0.00	221	0	221	Unknown	1
L&L - Developing Mindful Eating JLough	7/22/2014	2.00	0.00	74	0	74	14	1
Suicide Awareness JLough	7/1/2014	12.00	0.00	445	0	445	Unknown	0
Totals (Program): Community Health Education - Semina		120.50	0.00	4,968	0	4,968	679	34

Program: Crisis Services

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 Occurrences - Selected Departments
 For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Accelerated Care Program - RN Intervention JLough	7/1/2014	33.00	0.00	1,201	0	1,201	33	33
Totals (Program): Crisis Services		33.00	0.00	1,201	0	1,201	33	33
Program: Health Professional Education - Other Health Professionals								
Dr. Wagner-Presentation on Depression JLough	6/23/2015	2.00	0.00	260	0	260	50	1
LCPC Presentation on Depression JLough	6/23/2015	2.00	0.00	74	0	74	50	1
LCSW - Presentation on Depression JLough	6/23/2015	2.00	0.00	74	0	74	50	1
Presentation to MMC Nurses on Trauma Credentialing JLough	5/14/2015	2.00	0.00	74	0	74	20	1
LCPC Presentation to Parish Ministers JLough	4/21/2015	2.00	0.00	74	0	74	19	1
LCSW Presentation to Pastoral Care JLough	4/21/2015	3.00	0.00	112	0	112	20	1
Presentation to Spiritual Care on Alcohol/Drug Abusers JLough	4/7/2015	2.00	0.00	74	0	74	17	1

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Meritus Health, Inc.
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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Behavioral Inteegration with Meritus Medical Practices 4th qtr JLough	4/1/2015	94.00	0.00	3,483	0	3,483	Unknown	0
Behavioral Inteegration with Meritus Medical Practices 4th qtr. JLough	4/1/2015	31.00	0.00	1,149	0	1,149	Unknown	0
Behavioral Inteegration with Meritus Medical Practices 4th qtr. JLough	4/1/2015	75.00	0.00	2,779	0	2,779	Unknown	0
Behavioral Inteegration/Depression Screen Coordination JLough	4/1/2015	8.00	0.00	296	0	296	Unknown	0
Behavioral Inteegration/Depression Screen Coordination JLough	4/1/2015	2.00	0.00	74	0	74	Unknown	0
Behavioral Inteegration with Meritus Medical Practices 3rd qtr JLough	1/1/2015	17.50	0.00	649	0	649	Unknown	0
Behavioral Health Integration with Meritus Medical Practices 3rd q JLough	1/1/2015	26.00	0.00	963	0	963	Unknown	0
Behavioral Health Integration with Meritus Medical Practices JLough	1/1/2015	41.00	0.00	1,518	0	1,518	Unknown	0
Behavioral Inteegration with Meritus Medical Practices 3r COPY JLough	1/1/2015	39.00	0.00	1,446	0	1,446	Unknown	0

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 Meritus Health, Inc.
 Occurrences - Selected Departments
 For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Parish Nurses - Stress Management JLough	11/20/2014	4.00	0.00	148	0	148	32	1
Behavioral Integegration with Meritus Medical Practices JLough	10/1/2014	118.50	0.00	4,390	0	4,390	Unknown	0
Behavioral Integegration with Meritus Medical Practices COPY JLough	10/1/2014	22.50	0.00	833	0	833	Unknown	0
Anxiety, Agitation, Agression Education to Healthcare Staff JLough	7/7/2014	6.00	0.00	222	0	222	30	1
Totals (Program): Health Professional Education - Oth		499.50	0.00	18,692	0	18,692	288	9
Program: Health Professional Education - Other								
Student Education on EAP Services JLough	10/16/2014	2.00	0.00	74	0	74	1	1
Student Shadow Supervision - 2nd qtr. JLough	10/1/2014	16.00	0.00	593	0	593	2	2
Clinical Manager/Student Shadow Supervision JLough	9/16/2014	16.00	0.00	593	0	593	1	2
Totals (Program): Health Professional Education - Oth		34.00	0.00	1,260	0	1,260	4	5

Program: Support Groups

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Meritus Health, Inc.

Occurrences - Selected Departments

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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Family or Loved One of Drug Addict - RECOVERY 4th qtr. JLough	5/20/2015	1.00	0.00	36	0	36	12	1
Concerned Person's Group/Addictions 4th JLough	4/1/2015	8.00	0.00	296	0	296	58	8
Family or Loved One of Drug Addict - 4th qtr. JLough	4/1/2015	12.00	0.00	445	0	445	148	11
Concerned Person's Group/Addictions 3rd qtr. JLough	1/1/2015	8.00	0.00	296	0	296	58	8
Family or Loved One of Drug Addict - 3rd qtr JLough	1/1/2015	13.00	0.00	481	0	481	132	13
Family or Loved One of Drug Addict - 2nd qtr JLough	10/1/2014	11.00	0.00	408	0	408	74	11
Concerned Person's Group/Addictions 2nd qtr. JLough	10/1/2014	8.00	0.00	296	0	296	58	8
Concerned Person's Group/Addictions 1st qtr. JLough	7/1/2014	8.00	0.00	296	0	296	58	8
Concerned Person's Group/Mental Health 1st qtr. JLough	7/1/2014	3.00	0.00	112	0	112	18	3

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 Meritus Health, Inc.
 Occurrences - Selected Departments
 For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Obese Support Group/Mental Health-1st qtr JLough	7/1/2014	11.00	0.00	408	0	408	4	4
Totals (Program): Support Groups		83.00	0.00	3,074	0	3,074	620	75
Totals (Department): BHS Outpatient		784.50	0.00	30,289	0	30,289	1,624	164
Department: Care Management								
Program: Community Health Education - Seminars/Presentations								
WHAG Radio Show - Hospice at Hospital JLough	9/16/2014	1.50	0.00	56	0	56	Unknown	1
Diabetes Education in PCP JLough	7/1/2014	640.00	0.00	24,128	0	24,128	53	53
Totals (Program): Community Health Education - Semina		641.50	0.00	24,184	0	24,184	53	54
Program: In-Kind Donations								
Medication Contributions - 4th qtr. JLough	4/1/2015	0.00	0.00	4,303	0	4,303	Unknown	0
Oxygen - 4th qtr. JLough	4/1/2015	0.00	0.00	424	0	424	Unknown	0
Medication Contributions - 3rd qtr. JLough	1/1/2015	0.00	0.00	8,988	0	8,988	Unknown	0
Durable Medical Equipment - 3rd qtr. JLough	1/1/2015	0.00	0.00	2,467	0	2,467	Unknown	0

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Occurrences - Selected Departments
For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Oxygen - 3rd qtr. JLough	1/1/2015	0.00	0.00	424	0	424	Unknown	0
Medication Contributions - 2nd qtr. JLough	10/1/2014	0.00	0.00	6,327	0	6,327	Unknown	0
Durable Medical Equipment - 2nd qtr. JLough	10/1/2014	0.00	0.00	160	0	160	Unknown	0
Oxygen - 2nd qtr. JLough	10/1/2014	0.00	0.00	637	0	637	Unknown	0
Medication Contributions - 1st qtr. JLough	7/1/2014	0.00	0.00	4,842	0	4,842	Unknown	0
Durable Medical Equipment - 1st qtr. JLough	7/1/2014	0.00	0.00	336	0	336	Unknown	0
Oxygen - 1st qtr. JLough	7/1/2014	0.00	0.00	773	0	773	Unknown	0
Totals (Program): In-Kind Donations		0.00	0.00	29,681	0	29,681	0	0
Totals (Department): Care Management		641.50	0.00	53,865	0	53,865	53	54
Department: Cath Lab								
Program: Health Professional Education - Other								
Heart Health Presentation to Francis Murphy Home JLough	7/21/2014	2.00	0.00	0	0	0	20	1

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 Meritus Health, Inc.
 Occurrences - Selected Departments
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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Totals (Program): Health Professional Education - Oth		2.00	0.00	0	0	0	20	1
Totals (Department): Cath Lab		2.00	0.00	0	0	0	20	1
Department: Clinical Education								
Program: Community Health Education - Seminars/Presentations								
Infant CPR Community Education JLough	6/16/2015	1.50	0.00	56	0	56	2	1
Valley Mall Health Fair - Clinical Education JLough	4/11/2015	14.00	0.00	519	0	519	23	1
Totals (Program): Community Health Education - Semina		15.50	0.00	575	0	575	25	2
Program: Health Professional Education - Other								
HCC/Towson Education JLough	10/1/2014	6.00	0.00	222	0	222	54	4
Totals (Program): Health Professional Education - Oth		6.00	0.00	222	0	222	54	4
Totals (Department): Clinical Education		21.50	0.00	797	0	797	79	6
Department: Clinical Research								
Program: Community Service								
Cancer Survivors Picnic JLough	6/7/2015	5.00	0.00	185	0	185	900	1
Totals (Program): Community Service		5.00	0.00	185	0	185	900	1

Program: Research

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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
2015 Clinical Research JLough	7/1/2014	3,768.30	0.00	379,521	410,178	(30,657)	433	433
Totals (Program): Research		3,768.30	0.00	379,521	410,178	(30,657)	433	433
Totals (Department): Clinical Research		3,773.30	0.00	379,706	410,178	(30,472)	1,333	434
Department: Community Health Education and Wellness								
Program: Board Service								
Board Service - CHEW 4th qtr. JLough	4/1/2015	6.00	0.00	195	0	195	Unknown	17
Board Service - CHEW 3rd qtr. JLough	1/1/2015	10.00	0.00	325	0	325	Unknown	33
Board Service - CHEW 2nd qtr. JLough	10/1/2014	7.00	0.00	227	0	227	Unknown	18
Board Service - CHEW 1st qtr. JLough	7/1/2014	2.00	0.00	65	0	65	Unknown	15
Totals (Program): Board Service		25.00	0.00	812	0	812	0	83
Program: Childbirth Education								
Childbirth Education - CHEW 4th qtr. JLough	4/1/2015	7.00	0.00	1,137	915	222	46	46
Childbirth Education - CHEW 3rd qtr. JLough	1/1/2015	18.00	0.00	1,675	1,435	240	62	62

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Childbirth Education - CHEW 2nd qtr. JLough	10/1/2014	10.00	0.00	1,015	1,000	15	44	44
Childbirth Education - CHEW 1st qtr. JLough	7/1/2014	24.00	0.00	2,100	1,500	600	62	62
Totals (Program): Childbirth Education		59.00	0.00	5,927	4,850	1,077	214	214
Program: Community Health Education - Seminars/Presentations								
Valley Mall Health Fair - Cindy Earle JLough	4/11/2015	4.00	0.00	148	0	148	150	1
CHEW 4th qtr. JLough	4/1/2015	103.00	0.00	11,810	3,646	8,164	904	904
Wear Red Event - Cardiac Health Awareness JLough	2/19/2015	30.00	0.00	1,131	0	1,131	188	188
CHEW 3rd qtr. JLough	1/1/2015	198.75	0.00	14,046	17,754	(3,708)	1,828	1,828
CHEW 2nd qtr. JLough	10/1/2014	177.50	0.00	11,004	3,016	7,988	3,205	3,205
CHEW 1st qtr. JLough	7/1/2014	117.20	0.00	8,576	2,834	5,742	1,149	1,149

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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Living Well Diabetes/Chronic Disease JLough	7/1/2014	87.00	0.00	3,619	0	3,619	71	71
CATCH Program in 7 Schools JLough	7/1/2014	210.00	0.00	7,917	0	7,917	2,624	2,624
Totals (Program): Community Health Education - Semina		927.45	0.00	58,251	27,250	31,001	10,119	9,970
Program: Dedicated Staff								
CHEW Dedicated Staff - FY15 JLough	7/1/2014	5.00	0.00	130	0	130	Unknown	0
Totals (Program): Dedicated Staff		5.00	0.00	130	0	130	0	0
Program: Health Professional Education - Other Health Professionals								
CHEW 4th qtr. JLough	4/1/2015	38.50	0.00	1,590	260	1,330	28	28
Living Well - Train the Trainer JLough	4/1/2015	20.00	0.00	754	0	754	17	17
CHEW 3rd qtr. JLough	1/1/2015	8.00	0.00	260	0	260	95	95
CHEW 1st qtr. JLough	7/1/2014	26.00	0.00	845	0	845	512	512
Totals (Program): Health Professional Education - Oth		92.50	0.00	3,449	260	3,189	652	652

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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Program: Health Professional Education - Other								
CHEW 4th qtr. JLough	4/1/2015	3.00	0.00	97	0	97	2	2
CHEW 3rd qtr. JLough	1/1/2015	1.50	0.00	48	0	48	1	2
CHEW 2nd qtr. JLough	10/1/2014	3.00	0.00	97	0	97	7	7
CHEW 1st qtr. JLough	7/1/2014	0.50	0.00	16	0	16	2	2
Totals (Program): Health Professional Education - Oth		8.00	0.00	258	0	258	12	13
Program: Health Screenings								
CHEW - Health Screens - 4th qtr. JLough	4/1/2015	16.00	0.00	605	0	605	136	136
CHEW - Health Screens - 3rd qtr. JLough	1/1/2015	88.00	0.00	2,860	0	2,860	21	21
CHEW - Health Screens - 1st qtr. JLough	7/1/2014	8.00	0.00	260	0	260	631	631
Diabetes Risk Screenings JLough	7/1/2014	75.00	0.00	2,340	0	2,340	1,514	1,514

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Totals (Program): Health Screenings		187.00	0.00	6,065	0	6,065	2,302	2,302
Program: Leadership Development								
CHEW-Leadership FY15 JLough	7/1/2014	300.00	0.00	390	0	390	Unknown	0
Totals (Program): Leadership Development		300.00	0.00	390	0	390	0	0
Program: Other Education								
CHEW 4th qtr. JLough	4/1/2015	17.00	0.00	553	0	553	82	82
CHEW 3rd qtr. JLough	1/1/2015	19.00	0.00	634	0	634	109	109
CHEW 2nd qtr. JLough	10/1/2014	9.00	0.00	293	0	293	62	62
CHEW 1st qtr. JLough	7/1/2014	71.50	0.00	2,323	0	2,323	242	242
Totals (Program): Other Education		116.50	0.00	3,803	0	3,803	495	495
Program: Support Groups								
Labor of Love FY15 JLough	7/1/2014	0.00	0.00	0	0	0	6	12
Totals (Program): Support Groups		0.00	0.00	0	0	0	6	12
Totals (Department): Community Health Education and Wellness		1,720.45	0.00	79,085	32,360	46,725	13,800	13,741

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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Department: Courtesy Van								
Program: Community Service								
Courtesy Van - 4th qtr. JLough	4/1/2015	1,727.00	0.00	63,986	0	63,986	Unknown	0
Courtesy Van 3rd qtr. JLough	1/1/2015	1,548.00	0.00	57,353	0	57,353	Unknown	0
Courtesy Van 2nd qtr. JLough	10/1/2014	1,535.00	0.00	56,872	0	56,872	Unknown	0
Courtesy Van - 1st qtr. JLough	7/1/2014	1,644.00	0.00	60,910	0	60,910	Unknown	0
Totals (Program): Community Service		6,454.00	0.00	239,121	0	239,121	0	0
Totals (Department): Courtesy Van		6,454.00	0.00	239,121	0	239,121	0	0
Department: Decontamination Grant								
Program: Grants								
2015 Decontamination Grant JLough	7/1/2014	0.00	0.00	72,366	0	72,366	Unknown	0
Totals (Program): Grants		0.00	0.00	72,366	0	72,366	0	0
Totals (Department): Decontamination Grant		0.00	0.00	72,366	0	72,366	0	0
Department: Endocrinology & Diabetes Center								
Program: Community Health Education - Seminars/Presentations								
Health Fair - Diabetes Awareness JLough	4/11/2015	4.50	0.00	166	0	166	100	1

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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
World Diabetes Day - Education and Risk Screen JLough	11/13/2014	16.00	0.00	686	0	686	105	105
Totals (Program): Community Health Education - Semina		20.50	0.00	852	0	852	205	106
Program: Mission Drive Health Services								
2015 Hospital Owned Diabetes Education Center (MEND) JLough	7/1/2014	7,863.80	0.00	485,932	202,681	283,251	2,877	2,877
Totals (Program): Mission Drive Health Services		7,863.80	0.00	485,932	202,681	283,251	2,877	2,877
Totals (Department): Endocrinology & Diabetes Center		7,884.30	0.00	486,784	202,681	284,103	3,082	2,983
Department: Endocrinology Practice								
Program: Mission Drive Health Services								
2015 Hospital Owned Endocrinology Practice JLough	7/1/2014	7,998.50	0.00	700,145	461,750	238,395	4,406	4,406
Totals (Program): Mission Drive Health Services		7,998.50	0.00	700,145	461,750	238,395	4,406	4,406
Totals (Department): Endocrinology Practice		7,998.50	0.00	700,145	461,750	238,395	4,406	4,406
Department: Finance								
Program: Academic Assistance								
2015 Academic Assistance JLough	7/1/2014	0.00	0.00	114,840	0	114,840	Unknown	0
Totals (Program): Academic Assistance		0.00	0.00	114,840	0	114,840	0	0
Program: Charity Care								
2015 Charity Care JLough	7/1/2014	0.00	0.00	4,027,266	0	4,027,266	Unknown	0

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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Totals (Program): Charity Care		0.00	0.00	4,027,266	0	4,027,266	0	0
Program: Mission Drive Health Services								
2015 Hospice Voluntary Write-offs (Hospice of Wash. Co.) JLough	7/1/2014	0.00	0.00	454,649	0	454,649	Unknown	0
2015 Medicaid Deficit Assessment Fee JLough	7/1/2014	0.00	0.00	7,626,995	6,522,034	1,104,961	Unknown	0
Totals (Program): Mission Drive Health Services		0.00	0.00	8,081,644	6,522,034	1,559,610	0	0
Totals (Department): Finance		0.00	0.00	12,223,750	6,522,034	5,701,716	0	0
Department: Home Health Care								
Program:								
Community Blood Pressure Clinics 4th qtr. JLough	4/1/2015	11.25	0.00	495	0	495	115	14
Community Blood Pressure Clinics 3rd qtr. JLough	1/1/2015	8.75	0.00	324	0	324	104	12
Community Blood Pressure Clinics 2nd qtr. JLough	10/1/2014	7.25	0.00	331	0	331	77	11
Community Blood Pressure Clinics 1st qtr. JLough	7/1/2014	8.50	0.00	388	0	388	113	13
Totals (Program):		35.75	0.00	1,538	0	1,538	409	50

Program: Community Health Education - Seminars/Presentations

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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Senior Expo - HH Services Education JLough	5/14/2015	8.00	0.00	296	0	296	100	100
HHS - Disability Awareness Fair JLough	10/27/2014	6.50	0.00	241	0	241	50	1
Totals (Program): Community Health Education - Semina		14.50	0.00	537	0	537	150	101
Program: Community Service								
Meal Distribution to Community Members JLough	12/24/2014	1.00	0.00	61	0	61	33	11
Totals (Program): Community Service		1.00	0.00	61	0	61	33	11
Program: Dedicated Staff								
HH Prep of CB report 4th qtr. JLough	4/1/2015	1.00	0.00	61	0	61	Unknown	0
HH Prep of CB report 3rd qtr. JLough	1/1/2015	1.00	0.00	61	0	61	Unknown	0
HH Prep of CB report 2nd qtr. JLough	10/1/2014	1.50	0.00	91	0	91	Unknown	0
HH Prep of CB report 1st qtr. JLough	7/1/2014	1.50	0.00	91	0	91	Unknown	0
Totals (Program): Dedicated Staff		5.00	0.00	304	0	304	0	0

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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Program: Health Professional Education - Other								
HH - Nursing Student Observation JLough	4/1/2015	28.00	0.00	1,037	0	1,037	7	7
HH - Nursing Student Observation JLough	1/1/2015	40.00	0.00	1,482	0	1,482	10	10
HH - Nursing Student Observation JLough	10/1/2014	33.75	0.00	1,251	0	1,251	8	8
HH Nursing Student Observation JLough	7/1/2014	4.00	0.00	148	0	148	1	1
Totals (Program): Health Professional Education - Oth		105.75	0.00	3,918	0	3,918	26	26
Program: Patient Monitoring								
HH Patient Monitoring/Counseling 4th qtr. JLough	4/1/2015	1.00	0.00	42	0	42	1	1
HH Patient Monitoring/Counseling 2nd qtr. JLough	10/1/2014	7.00	0.00	271	0	271	3	3
HH Patient Monitoring/Counseling 1st qtr. JLough	7/1/2014	4.00	0.00	160	0	160	2	2
Totals (Program): Patient Monitoring		12.00	0.00	473	0	473	6	6
Totals (Department): Home Health Care		174.00	0.00	6,831	0	6,831	624	194
Department: Hospitalist								

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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Program: Hospitalist Subsidy								
2015 Hospitalist Subsidy JLough	7/1/2014	0.00	0.00	1,846,678	0	1,846,678	Unknown	0
Totals (Program): Hospitalist Subsidy		0.00	0.00	1,846,678	0	1,846,678	0	0
Totals (Department): Hospitalist		0.00	0.00	1,846,678	0	1,846,678	0	0
Department: Human Resources								
Program: United Way Campaign								
United Way FY2015 JLough	7/1/2014	24.00	0.00	3,889	0	3,889	4,200	4,200
Totals (Program): United Way Campaign		24.00	0.00	3,889	0	3,889	4,200	4,200
Totals (Department): Human Resources		24.00	0.00	3,889	0	3,889	4,200	4,200
Department: JRM Cancer Center								
Program: Community Health Education - Seminars/Presentations								
JRM - Education to Cancer Survivors JLough	11/13/2014	4.00	0.00	250	0	250	24	2
Lung Navigator FY15 JLough	7/1/2014	2,080.00	0.00	96,175	0	96,175	242	847
Totals (Program): Community Health Education - Semina		2,084.00	0.00	96,425	0	96,425	266	849
Program: Community Service								
Cancer Survivors Picnic JRMars JLough	6/7/2015	40.00	0.00	20,044	0	20,044	900	1
Totals (Program): Community Service		40.00	0.00	20,044	0	20,044	900	1

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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs		
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters	
Program: Health Care Support Services									
Breast Navigator FY15 JLough	7/1/2014	2,080.00	0.00	112,760	0	112,760	379	3,032	
Totals (Program): Health Care Support Services		2,080.00	0.00	112,760	0	112,760	379	3,032	
Program: Support Groups									
Leukemia & Lymphoma Support Group 4th qtr. JLough	4/1/2015	7.00	0.00	390	0	390	36	2	
Look Good/Feel Better Support Group 4th qtr. JLough	4/1/2015	4.50	0.00	250	0	250	6	3	
Leukemia & Lymphoma Support Group 3rd qtr. JLough	1/1/2015	6.00	0.00	278	0	278	26	2	
Look Good/Feel Better Support Group 3rd qtr. JLough	1/1/2015	3.00	0.00	56	0	56	3	2	
Leukemia & Lymphoma Support Group 2nd qtr. JLough	10/1/2014	6.00	0.00	278	0	278	19	2	
Look Good/Feel Better Support Group 2nd qtr. JLough	10/1/2014	1.50	0.00	56	0	56	2	1	
Leukemia & Lymphoma Support Group 1st qtr. JLough	7/1/2014	3.00	0.00	140	0	140	21	1	

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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Look Good/Feel Better 1st qtr. JLough	7/1/2014	4.50	0.00	208	0	208	7	3
Totals (Program): Support Groups		35.50	0.00	1,656	0	1,656	120	16
Totals (Department): JRM Cancer Center		4,239.50	0.00	230,885	0	230,885	1,665	3,898
Department: Komen Grant								
Program: Grants								
2015 Komen Grant JLough	7/1/2014	0.00	0.00	107,370	107,370	0	Unknown	0
Totals (Program): Grants		0.00	0.00	107,370	107,370	0	0	0
Totals (Department): Komen Grant		0.00	0.00	107,370	107,370	0	0	0
Department: LDRP								
Program: Support Groups								
Breastfeeding Support Group - 4th JLough	4/1/2015	15.00	0.00	556	0	556	31	31
Labor of Love - 4th qtr. JLough	4/1/2015	30.00	0.00	1,111	0	1,111	30	3
Breastfeeding Support Group - 3rd qtr. JLough	1/1/2015	18.00	0.00	667	0	667	27	27
Labor of Love - 3rd qtr. JLough	1/1/2015	28.00	0.00	1,037	0	1,037	29	3
Breastfeeding Support Group - 2nd qtr. JLough	10/1/2014	12.00	0.00	445	0	445	19	19

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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Labor of Love - 2nd qtr. JLough	10/1/2014	50.00	0.00	1,853	0	1,853	157	3
Breastfeeding Support Group - 1st qtr. JLough	7/1/2014	18.00	0.00	667	0	667	26	26
Labor of Love - 1st qtr. JLough	7/1/2014	20.00	0.00	741	0	741	32	3
Totals (Program): Support Groups		191.00	0.00	7,077	0	7,077	351	115
Totals (Department): LDRP		191.00	0.00	7,077	0	7,077	351	115
Department: Marketing-Corporate Communications								
Program: Community Health Education - Seminars/Presentations								
Blood Pressure Kiosks JLough	4/1/2015	0.00	0.00	2,352	2,352	0	Unknown	0
Wear Red Event - Cardiac Health Awareness CC JLough	2/19/2015	6.00	0.00	12,451	0	12,451	Unknown	0
Website Development -Hypertension-Healthy Wash Co. JLough	1/1/2015	20.00	0.00	1,716	0	1,716	3,000	3,000
Convoy of Hope - Infection Control Education JLough	9/1/2014	3.00	0.00	6,712	0	6,712	1,200	1,200
Distracted Driving - Education to College Students JLough	9/1/2014	4.00	0.00	2,868	0	2,868	500	500

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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Health Matters WJMJ Radio show - all quarters JLough	7/1/2014	288.00	0.00	17,198	0	17,198	5,000	0
Totals (Program): Community Health Education - Semina		321.00	0.00	43,297	2,352	40,945	9,700	4,700
Program: Health Professional Education - Other								
Student Interns JLough	4/1/2015	57.00	0.00	2,111	0	2,111	1	0
Totals (Program): Health Professional Education - Oth		57.00	0.00	2,111	0	2,111	1	0
Program: In-Kind Donations								
Christmas Eve Meal Project/Delivery JLough	12/24/2014	184.00	0.00	15,210	0	15,210	1,066	1,066
Totals (Program): In-Kind Donations		184.00	0.00	15,210	0	15,210	1,066	1,066
Totals (Department): Marketing-Corporate Communications		562.00	0.00	60,618	2,352	58,266	10,767	5,766
Department: Materials Management								
Program: In-Kind Donations								
Donation of IV Solutions to Towson and HCC - 4th qtr. JLough	6/30/2015	0.00	0.00	172	0	172	43	0
Medical Mission - 3rd World Countries - 3rd qtr. JLough	3/31/2015	0.00	0.00	9,010	0	9,010	Unknown	0

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		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Holiday Gift Certificate Donation JLough	3/31/2015	0.00	0.00	645	0	645	43	0
Medical Mission - 3rd World Countries - 1st qtr. JLough	9/30/2014	0.00	0.00	36,215	0	36,215	Unknown	0
Workstations on Wheels Donation 1st qtr. JLough	9/30/2014	0.00	0.00	35,000	0	35,000	Unknown	0
Totals (Program): In-Kind Donations		0.00	0.00	81,042	0	81,042	86	0
Totals (Department): Materials Management Department: Medical Staff		0.00	0.00	81,042	0	81,042	86	0
Program: On-Call Fees-Emergency Specialist Call								
2015 On Call Fees-Emergency Specialist Call JLough	7/1/2014	0.00	0.00	2,150,903	0	2,150,903	Unknown	0
Totals (Program): On-Call Fees-Emergency Specialist C		0.00	0.00	2,150,903	0	2,150,903	0	0
Totals (Department): Medical Staff Department: Non-Medicare Home Health Care		0.00	0.00	2,150,903	0	2,150,903	0	0
Program: Patient Monitoring								
HH Patient Monitoring/Counseling 4th qtr. JLough	4/1/2015	34.00	0.00	1,895	0	1,895	11	14
HH Patient Monitoring/Counseling 4th qtr. JLough	4/1/2015	1.00	0.00	42	0	42	1	1

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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
HH Patient Monitoring/Counseling 3rd qtr. JLough	1/1/2015	21.00	0.00	777	0	777	5	7
HH Patient Monitoring/Counseling 2nd qtr. JLough	10/1/2014	58.00	0.00	2,255	0	2,255	16	20
HH Patient Monitoring/Counseling 1st qtr. JLough	9/1/2014	33.00	0.00	1,284	0	1,284	9	11
Totals (Program): Patient Monitoring		147.00	0.00	6,253	0	6,253	42	53
Totals (Department): Non-Medicare Home Health Care		147.00	0.00	6,253	0	6,253	42	53
Department: Nursing Administration								
Program: Health Screenings								
Blood Pressure Screening Campaign JLough	3/2/2015	70.00	0.00	3,549	0	3,549	751	751
Totals (Program): Health Screenings		70.00	0.00	3,549	0	3,549	751	751
Totals (Department): Nursing Administration		70.00	0.00	3,549	0	3,549	751	751
Department: Nursing-Stroke,Pul,Vasc								
Program: Community Health Education - Seminars/Presentations								
Women's Health - First Data Employees JLough	6/30/2015	5.00	0.00	185	0	185	30	1
Cardiac Rehab-Heart Healthy Eating JLough	6/23/2015	1.25	0.00	47	0	47	2	2
Cardiac Rehab-Heart Healthy Eating JLough	6/17/2015	1.25	0.00	47	0	47	4	4

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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Cardiac Rehab-Heart Healthy Eating JLough	6/15/2015	1.15	0.00	43	0	43	9	9
Meritus Health and Wellness Fair JLough	6/10/2015	2.00	0.00	74	0	74	100	1
Cardiac Rehab-Heart Healthy Eating JLough	6/9/2015	5.00	0.00	185	0	185	6	6
Senior Group-Maximizing Nutrition JLough	5/28/2015	1.50	0.00	56	0	56	14	1
Cardiac Rehab-Heart Healthy Eating JLough	5/21/2015	1.25	0.00	47	0	47	8	8
Wash. Co. CARES Health Fair JLough	5/14/2015	5.00	0.00	185	0	185	50	1
Senior Group-Stretching your food dollar JLough	5/2/2015	1.50	0.00	56	0	56	19	1
Senior Group-Cooking Without Salt JLough	4/28/2015	2.50	0.00	92	0	92	16	1
Valley Mall Health Fair - Stroke Education JLough	4/11/2015	20.00	0.00	741	0	741	150	1

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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
WJEJ Radio Show - Stroke Education JLough	4/7/2015	2.00	0.00	36	0	36	Unknown	1
Using Energy Conservation for Cooking/Shopping JLough	3/13/2015	1.00	0.00	36	0	36	6	1
Heart Healthy and Diabetes Diet Education 3rd qtr. JLough	1/1/2015	4.00	0.00	148	0	148	4	4
Healthier Snack Choices - Cardiac Rehab Education JLough	1/1/2015	3.00	0.00	112	0	112	39	2
Heart Healthy and Diabetes Diet Education 2nd qtr. JLough	10/1/2014	7.50	0.00	278	0	278	13	5
Heart Healthy and Diabetes Diet Education 1st qtr. JLough	8/27/2014	3.00	0.00	112	0	112	16	3
Healthy Packed Lunches - Cardiac Rehab Patients JLough	8/8/2014	2.00	0.00	74	0	74	22	1
Heart Healthy Eating JLough	7/10/2014	1.00	0.00	36	0	36	3	1
Asthma Teaching 1st qtr. JLough	7/1/2014	3.00	0.00	112	0	112	3	2
Totals (Program): Community Health Education - Semina		73.90	0.00	2,702	0	2,702	514	56

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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Program: Health Professional Education - Other Health Professionals								
Hospitalist Ed on Telemedicine JLough	5/15/2015	6.00	0.00	222	0	222	10	6
Stroke Presentation for Nurse's Week JLough	5/4/2015	1.00	0.00	36	0	36	30	1
Education to Parish Nurses JLough	1/15/2015	2.50	0.00	92	0	92	24	1
Totals (Program): Health Professional Education - Oth		9.50	0.00	350	0	350	64	8
Program: Health Professional Education - Other								
Shepherd Student - Stroke Supervision JLough	3/27/2015	20.00	0.00	741	0	741	1	5
RN Grad/Stroke Education JLough	3/26/2015	4.00	0.00	148	0	148	10	1
RN Orientation/Stroke Education (Jan-April) JLough	1/23/2015	5.00	0.00	185	0	185	2	7
Pulmonary Education to Nursing Students JLough	12/5/2014	2.25	0.00	83	0	83	4	1
Totals (Program): Health Professional Education - Oth		31.25	0.00	1,157	0	1,157	17	14

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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Program: Health Screenings								
Vascular Screenings - June 16th JLough	6/16/2015	28.00	0.00	1,037	0	1,037	17	17
Blood Pressure Screening Campaign - Nursing JLough	6/1/2015	120.00	0.00	4,446	0	4,446	750	750
Vascular Screenings - May 19th JLough	5/19/2015	40.00	0.00	1,482	0	1,482	25	25
COPD Screening at Community Health Fair JLough	5/14/2015	2.50	0.00	92	0	92	36	36
COPD Screening Questionnaire JLough	5/10/2015	3.00	0.00	112	0	112	28	28
Vascular Screenings - April 21st JLough	4/21/2015	40.00	0.00	1,482	0	1,482	21	21
PAD Screenings - 4th qtr. JLough	4/1/2015	5.00	0.00	185	0	185	5	5
Vascular Screenings - March 17th JLough	3/17/2015	28.00	0.00	1,037	0	1,037	15	15
Vascular Screenings - Feb 3rd JLough	2/3/2015	28.00	0.00	1,037	0	1,037	17	17

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Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
PAD Screenings - 3rd qtr. JLough	1/1/2015	6.00	0.00	222	0	222	6	6
Vascular Screening - December 2nd JLough	12/2/2014	40.00	0.00	1,482	0	1,482	27	27
Asthma Control Screening JLough	11/1/2014	4.00	0.00	148	0	148	14	1
Vascular Screening - October 28th JLough	10/28/2014	40.00	0.00	1,482	0	1,482	32	32
PAD Screenings - 2nd qtr. JLough	10/1/2014	7.00	0.00	260	0	260	7	7
Vascular Screening - Sept 2nd JLough	9/2/2014	40.00	0.00	1,482	0	1,482	27	27
PAD Screenings - 1st qtr. JLough	7/1/2014	7.00	0.00	260	0	260	7	7
Totals (Program): Health Screenings		438.50	0.00	16,246	0	16,246	1,034	1,021
Program: Support Groups								
Stroke Support Group - 4th qtr. JLough	4/1/2015	4.50	0.00	166	0	166	12	3
Totals (Program): Support Groups		4.50	0.00	166	0	166	12	3
Totals (Department): Nursing-Stroke,Pul,Vasc		557.65	0.00	20,621	0	20,621	1,641	1,102

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 Occurrences - Selected Departments
 For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Department: Nutrition Services								
Program: Community Building Activities								
Farmer's Market FY2015 JLough	7/1/2014	15.00	0.00	556	0	556	7,550	25
Totals (Program): Community Building Activities		15.00	0.00	556	0	556	7,550	25
Program: Community Health Education - Seminars/Presentations								
Nutrition Services - Day of Dance JLough	5/1/2015	4.00	0.00	148	0	148	50	50
Lecture on Nutrition and Aging JLough	4/14/2015	2.00	0.00	0	0	0	25	1
Healthy Snack Demo-Family Healthcare Day of Caring JLough	4/1/2015	4.00	0.00	328	0	328	400	200
Cooking Class - Fountaindale Elementary JLough	10/1/2014	9.00	0.00	768	0	768	20	6
Cooking Demo - MMC Auxillary Fall Ed Day JLough	9/1/2014	3.00	0.00	156	0	156	90	1
Cooking Demonstration-Cumberland Valley Breast Cancer Office JLough	7/1/2014	3.00	0.00	331	0	331	30	1
Totals (Program): Community Health Education - Semina		25.00	0.00	1,731	0	1,731	615	259

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Occurrences - Selected Departments

For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Program: Community Service								
Spaghetti Dinner for Special Olympics JLough	5/1/2015	6.00	0.00	468	0	468	200	1
Totals (Program): Community Service		6.00	0.00	468	0	468	200	1
Totals (Department): Nutrition Services		46.00	0.00	2,755	0	2,755	8,365	285
Department: Parish Nursing								
Program: Parish Nursing								
Parish Nursing 4th qtr. JLough	4/1/2015	365.00	0.00	13,523	1,593	11,930	228	1,178
Parish Nursing 3rd qtr. JLough	1/1/2015	486.00	0.00	18,006	4,018	13,988	1,038	1,038
Parish Nursing 2nd qtr. JLough	10/1/2014	218.00	0.00	8,077	4,117	3,960	1,000	1,000
Parish Nursing 1st qtr. JLough	7/1/2014	459.00	0.00	17,007	0	17,007	2,196	2,196
Totals (Program): Parish Nursing		1,528.00	0.00	56,613	9,728	46,885	4,462	5,412
Totals (Department): Parish Nursing		1,528.00	0.00	56,613	9,728	46,885	4,462	5,412
Department: Pharmacy								
Program: Community Health Education - Seminars/Presentations								
Brown Bag Medication Therapy Management 4th qtr. JLough	4/1/2015	12.00	0.00	445	0	445	42	42

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 Meritus Health, Inc.
 Occurrences - Selected Departments
 For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Brown Bag Medication Management JLough	7/29/2014	6.00	0.00	222	0	222	10	2
Totals (Program): Community Health Education - Semina		18.00	0.00	667	0	667	52	44
Totals (Department): Pharmacy		18.00	0.00	667	0	667	52	44
Department: Project Management								
Program: Community Health Education - Seminars/Presentations								
Valley Mall Health Fair - MyMeritus Patient Portal JLough	4/11/2015	10.00	0.00	371	0	371	75	1
55 and UP Lunch and Individual Education JLough	9/23/2014	11.00	0.00	421	0	421	23	23
Totals (Program): Community Health Education - Semina		21.00	0.00	792	0	792	98	24
Totals (Department): Project Management		21.00	0.00	792	0	792	98	24
Department: Psych Services								
Program: Mission Drive Health Services								
2015 Hospital Owned Psychiatric Practice JLough	7/1/2014	11,742.40	0.00	1,414,211	879,932	534,279	11,995	11,995
Totals (Program): Mission Drive Health Services		11,742.40	0.00	1,414,211	879,932	534,279	11,995	11,995
Totals (Department): Psych Services		11,742.40	0.00	1,414,211	879,932	534,279	11,995	11,995
Department: Radiology								
Program: Board Service								
Lancaster General Nuclear Medicine-Instructor's Mtg. 4th qtr. JLough	4/1/2015	12.00	0.00	1,123	0	1,123	Unknown	2

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Occurrences - Selected Departments

For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Lancaster General Nuclear Medicine-Instructor's Mtg. 3rd qtr. JLough	1/1/2015	12.00	0.00	1,123	0	1,123	Unknown	2
Radiology - HCC Radiography Program Advisory Com. 2nd qtr. JLough	11/3/2014	2.00	0.00	135	0	135	Unknown	1
Radiology - HCC Clinical Instructor's Meeting 2nd qtr. JLough	10/1/2014	10.00	0.00	1,365	0	1,365	Unknown	3
Lancaster General Nuclear Medicine-Instructor's Mtg. 2nd qtr. JLough	10/1/2014	12.00	0.00	1,123	0	1,123	Unknown	2
Lancaster General Nuclear Medicine-Instructor's Mtg. 1st qtr JLough	7/1/2014	12.00	0.00	1,123	0	1,123	Unknown	2
Totals (Program): Board Service		60.00	0.00	5,992	0	5,992	0	12
Program: Dedicated Staff								
Radiology Prep of CB Report JLough	4/1/2015	1.00	0.00	73	0	73	Unknown	1
Totals (Program): Dedicated Staff		1.00	0.00	73	0	73	0	1
Program: In-Kind Donations								
Donation to HCC Radiology Program JLough	6/25/2015	0.00	0.00	4,000	0	4,000	Unknown	0
Totals (Program): In-Kind Donations		0.00	0.00	4,000	0	4,000	0	0
Totals (Department): Radiology		61.00	0.00	10,065	0	10,065	0	13
Department: Respiratory Care								

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 Meritus Health, Inc.
 Occurrences - Selected Departments
 For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Program: Health Professional Education - Other								
ACC Respiratory Therapy Students 2nd qtr. JLough	10/1/2014	70.00	0.00	2,593	0	2,593	11	35
ACC Respiratory Therapy Students 1st qtr. JLough	7/1/2014	42.00	0.00	1,556	0	1,556	9	21
Totals (Program): Health Professional Education - Oth		112.00	0.00	4,149	0	4,149	20	56
Program: In-Kind Donations								
Second Wind Newsletter 2nd qtr JLough	10/1/2014	0.00	0.00	68	0	68	32	3
Second Wind Newsletter 1st qtr. JLough	7/1/2014	0.00	0.00	64	0	64	30	3
Totals (Program): In-Kind Donations		0.00	0.00	132	0	132	62	6
Totals (Department): Respiratory Care		112.00	0.00	4,281	0	4,281	82	62
Department: Spiritual Care								
Program: Board Service								
Spiritual Care - Community Service Organizations 4th qtr. JLough	4/1/2015	23.00	0.00	1,292	0	1,292	120	190
Spiritual Care - Community Service Organizations 3rd qtr. JLough	1/1/2015	20.00	0.00	1,472	0	1,472	58	10

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Meritus Health, Inc.

Occurrences - Selected Departments

For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Spiritual Care - Community Service Organizations 2nd qtr. JLough	10/1/2014	22.00	0.00	1,619	0	1,619	62	11
Spiritual Care - Community Service Organizations 1st qtr. JLough	7/1/2014	12.00	0.00	659	0	659	Unknown	6
Totals (Program): Board Service		77.00	0.00	5,042	0	5,042	240	217
Program: Health Professional Education - Other Health Professionals								
Clergy Education on Community Issues - 3 sessions JLough	4/7/2015	28.00	0.00	1,037	0	1,037	21	3
Accredited Professional Training to Clergy - FY15 JLough	7/1/2014	692.00	0.00	30,011	0	30,011	13	258
Totals (Program): Health Professional Education - Oth		720.00	0.00	31,048	0	31,048	34	261
Program: Health Professional Education - Other								
Conference: Community Clergy Education JLough	10/1/2014	48.00	0.00	7,531	0	7,531	109	12
CPE Student Internships JLough	7/1/2014	36.00	0.00	2,076	0	2,076	10	12
Totals (Program): Health Professional Education - Oth		84.00	0.00	9,607	0	9,607	119	24

Program: Support Groups

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 Occurrences - Selected Departments
 For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Spiritual Care - Labor of Love 2nd qtr. JLough	10/1/2014	8.00	0.00	346	0	346	130	3
Totals (Program): Support Groups		8.00	0.00	346	0	346	130	3
Totals (Department): Spiritual Care		889.00	0.00	46,043	0	46,043	523	505
Department: Total Rehab Care at Robinwood								
Program: Health Professional Education - Other								
TRC Student Education - Penn State JLough	4/1/2015	240.00	0.00	8,892	0	8,892	1	30
TRC Student Education - Carroll Community College JLough	4/1/2015	120.00	0.00	4,446	0	4,446	1	18
CCI for PTA Student JLough	12/19/2014	120.00	0.00	4,446	0	4,446	1	0
TRC Student Supervision 2nd qtr. JLough	10/1/2014	400.00	0.00	14,820	0	14,820	50	60
TRC Student Education 1st qtr. JLough	7/1/2014	590.00	0.00	21,859	0	21,859	4	65
TRC Student Supervision 1st qtr. JLough	7/1/2014	400.00	0.00	14,820	0	14,820	50	60
Totals (Program): Health Professional Education - Oth		1,870.00	0.00	69,283	0	69,283	107	233
Totals (Department): Total Rehab Care at Robinwood		1,870.00	0.00	69,283	0	69,283	107	233
Department: Trauma								

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 Occurrences - Selected Departments
 For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Program: Community Health Education - Seminars/Presentations								
Street Fair at Rehoboth Church - Summer Safety JLough	6/6/2015	24.00	0.00	889	0	889	75	75
Motorcycle Safety at MVA JLough	5/7/2015	7.00	0.00	260	0	260	20	20
Motorcycle Safety at Old Forge Elementary School JLough	5/7/2015	6.00	0.00	222	0	222	50	20
Community Park Event - Hancock - Home Safety JLough	4/25/2015	22.00	0.00	815	0	815	50	50
Volvo Employees - Driving Safety JLough	4/7/2015	4.00	0.00	148	0	148	50	50
EMTP Students - Supervision and Observation JLough	4/1/2015	512.00	0.00	18,970	0	18,970	64	64
Car Seat Check Jan/Feb/Mar JLough	1/1/2015	36.00	0.00	1,334	0	1,334	30	30
Halloween in the Park - Safety JLough	10/31/2014	18.00	0.00	667	0	667	150	1
Distracted Driving to Teenagers JLough	10/31/2014	6.00	0.00	222	0	222	350	1

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 Meritus Health, Inc.
 Occurrences - Selected Departments
 For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs	
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters
Walnut Street Health Fair 2nd qtr. JLough	10/27/2014	1.50	0.00	56	0	56	50	1
Children's Village - Halloween Safety JLough	10/16/2014	10.00	0.00	371	0	371	19	1
Head Start Fall Festival - Halloween Safety JLough	10/9/2014	9.00	0.00	333	0	333	250	1
Convoy of Hope JLough	10/6/2014	27.50	0.00	0	0	0	270	270
Car Seat Check at CRS JLough	10/1/2014	12.00	0.00	445	0	445	14	14
Walnut Street Health Fair 1st qtr. JLough	9/30/2014	8.00	0.00	296	0	296	75	1
Rehoboth Church Wellness Fair - Injury Prevention JLough	7/26/2014	4.50	0.00	166	0	166	100	1
Totals (Program): Community Health Education - Semina		707.50	0.00	25,194	0	25,194	1,617	600
Program: Health Professional Education - Other								
EMTP Student Clinical Shifts 4th qtr. JLough	4/1/2015	512.00	0.00	18,970	0	18,970	64	64

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 Meritus Health, Inc.
 Occurrences - Selected Departments
 For period from 7/1/2014 through 6/30/2015

Description / User /	Date	Time Inputs		Monetary Inputs			Outputs		
		Staff	Volunteer	Expenses	Offsets	Benefit	Persons	Encounters	
EMTP Student Clinical Shifts 3rd qtr. JLough	1/1/2015	736.00	0.00	27,269	0	27,269	18	92	
EMTP Student Clinical Shifts 2nd qtr. JLough	10/1/2014	2,752.00	0.00	99,590	0	99,590	43	43	
EMTP Student Clinical Shifts 1st qtr. JLough	7/1/2014	2,688.00	0.00	99,590	0	99,590	42	42	
Totals (Program): Health Professional Education - Oth		6,688.00	0.00	245,419	0	245,419	167	241	
Program: Mission Drive Health Services									
2015 Level III Trauma JLough	7/1/2014	3,611.30	0.00	6,592,110	1,059,284	5,532,826	1,053	1,053	
Totals (Program): Mission Drive Health Services		3,611.30	0.00	6,592,110	1,059,284	5,532,826	1,053	1,053	
Totals (Department): Trauma		11,006.80	0.00	6,862,723	1,059,284	5,803,439	2,837	1,894	
Department: Western MD Rx Program									
Program: Mission Drive Health Services									
2015 The Medication Assistance Center JLough	7/1/2014	1,836.80	0.00	53,257	0	53,257	340	340	
Totals (Program): Mission Drive Health Services		1,836.80	0.00	53,257	0	53,257	340	340	
Totals (Department): Western MD Rx Program		1,836.80	0.00	53,257	0	53,257	340	340	
Number of Programs	26	Totals:	66,785.95	0.00	27,461,696	9,747,856	17,713,840	74,027	59,479
Number of Occurrences	424								