

COMMUNITY BENEFITS REPORTING FORM

Pursuant to RSA 7:32-c-1

FOR FISCAL YEAR BEGINNING 07/01/2017

to be filed with:

Office of the Attorney General
Charitable Trusts Unit
33 Capitol Street, Concord, NH 03301-6397
603-271-3591

Section 1: ORGANIZATIONAL INFORMATION

Organization Name The New London Hospital Association, Inc.

Street Address 273 County Rd

City New London

County

State NH **Zip Code** 03257

Federal ID # 02-0222171

State Registration # 6281

Website Address: www.newlondonhospital.org

Is the organization's community benefit plan on the organization's website?

Has the organization filed its Community Benefits Plan Initial Filing Information form?

IF NO, please complete and attach the Initial Filing Information Form.

IF YES, has any of the initial filing information changed since the date of submission?

IF YES, please attach the updated information.

Chief Executive: Bruce P. King 603-526-2911

bruce.king@newlondonhospital.org

Board Chair: Douglas Lyon 603-526-2911

Community Benefits

Plan Contact: Lisa Cohen 603-526-5372

lisa.cohen@newlondonhospital.org

Is this report being filed on behalf of more than one health care charitable trust? No

IF YES, please complete a copy of this page for each individual organization included in this filing.

Section 2: MISSION & COMMUNITY SERVED

Mission Statement: New London Hospital provides safe quality care for every patient, every time in partnership with patients, families and healthcare providers.

Has the Mission Statement been reaffirmed in the past year (*RSA 7:32e-I*)? No

Please describe the community served by the health care charitable trust. "Community" may be defined as a geographic service area and/or a population segment.

Service Area (Identify Towns or Region describing the trust's primary service area):

New London Hospital Association, Inc. (NLHA) is the principal provider of primary and secondary health care for 15 towns in Sullivan and Merrimack counties. The towns in the NLHA service area are: Andover, Bradford, Croydon, Danbury, Goshen, Grantham, Lempster, Newbury, New London, Newport, Springfield, Sunapee, Sutton, Washington and Wilmot and are largely representative of the state's rural population. The hospital provides acute and primary health care - from emergency services to family medical practice to neurosurgical care - and essential wellness and prevention services for the 34,000 residents in the area, a significant proportion of whom are uninsured, underinsured and/or dependent on Medicaid/Medicare benefits. This includes a large elderly population and a significant number of rural, low-income families.

Service Population (Describe demographic or other characteristics if the trust primarily serves a population other than the general population):

Serves the General Population

Section 3: COMMUNITY NEEDS ASSESSMENT

In what year was the last community needs assessment conducted to assist in determining the activities to be included in the community benefit plan?

2018 *(Please attach a copy of the needs assessment if completed in the past year)*

Was the assessment conducted in conjunction with other health care charitable trusts in your community? Yes

Based on the needs assessment and community engagement process, what are the priority needs and health concerns of your community?

	NEED (Please enter code # from attached list of community needs)
1	101
2	122
3	128
4	400
5	407
6	120
7	125
8	527
9	319

What other important health care needs or community characteristics were considered in the development of the current community benefits plan (e.g. essential needs or services not specifically identified in the community needs assessment)?

	NEED (Please enter code # from attached list of community needs)
A	370
B	604
C	509
D	601
E	
F	
G	

Please provide additional description or comments on community needs including description of “other” needs (code 999) if applicable. *Attach additional pages if necessary:*

Section 4: COMMUNITY BENEFIT ACTIVITIES

Identify the categories of Community Benefit activities provided in the preceding year and planned for the upcoming year (note: some categories may be blank). For each area where your organization has activities, report the past and/or projected unreimbursed costs for *all* community benefit activities in that category. For each category, also indicate the *primary* community needs that are addressed by these activities by referring to the applicable number or letter from the lists on the previous page (i.e. the listed needs may relate to only a subset of the total reported costs in some categories).

<i>A. Community Health Services</i>	<i>Community Need Addressed</i>	<i>Unreimbursed Costs (preceding year)</i>	<i>Unreimbursed Costs (projected)</i>
<i>Community Health Education</i>	600	\$223,878	\$230,000
<i>Community-based Clinical Services</i>			
<i>Health Care Support Services</i>			
<i>Other:</i>			

<i>. Health Professions Education</i>	<i>Community Need Addressed</i>	<i>Unreimbursed Costs (preceding year)</i>	<i>Unreimbursed Costs (projected)</i>
<i>Provision of Clinical Settings for Undergraduate Training</i>	507	126,673	\$130,000
<i>Intern/Residency Education</i>			
<i>Scholarships/Funding for Health Professions Ed.</i>			
<i>Other:</i>			

<i>A. Subsidized Health Services</i>	<i>Community Need Addressed</i>	<i>Unreimbursed Costs (preceding year)</i>	<i>Unreimbursed Costs (projected)</i>
<i>Type of Service: Primary Care</i>	120	\$2,785,834	2,800,000
<i>Type of Service: Mental Health Services</i>	122	\$237,510	\$238,000
<i>Type of Service: Prescrip Medication & Other</i>	604	\$28,111	\$29,000
<i>Type of Service: ED Losses</i>	521	\$136,962	\$140,000

<i>D. Research</i>	<i>Community Need Addressed</i>	<i>Unreimbursed Costs (preceding year)</i>	<i>Unreimbursed Costs (projected)</i>
<i>Clinical Research</i>			
<i>Community Health Research</i>			
<i>Other:</i>			

<i>E. Financial Contributions</i>	<i>Community Need Addressed</i>	<i>Unreimbursed Costs (preceding year)</i>	<i>Unreimbursed Costs (projected)</i>
<i>Cash Donations</i>	600	\$5,250	\$5,300
<i>Grants</i>			
<i>In-Kind Assistance</i>	600	\$9,713	\$9,700
<i>Resource Development Assistance</i>			

<i>F. Community Building Activities</i>	<i>Community Need Addressed</i>	<i>Unreimbursed Costs (preceding year)</i>	<i>Unreimbursed Costs (projected)</i>
<i>Physical Infrastructure Improvement</i>			
<i>Economic Development</i>			
<i>Support Systems Enhancement</i>	610	\$33,064	\$35,000
<i>Environmental Improvements</i>			
<i>Leadership Development; Training for Community Members</i>			
<i>Coalition Building</i>			
<i>Community Health Advocacy</i>	602	\$58,009	\$58,000

<i>G. Community Benefit Operations</i>	<i>Community Need Addressed</i>	<i>Unreimbursed Costs (preceding year)</i>	<i>Unreimbursed Costs (projected)</i>
<i>Dedicated Staff Costs</i>			
<i>Community Needs/Asset Assessment</i>			
<i>Other Operations</i>			

<i>H. Charity Care</i>	<i>Community Need Addressed</i>	<i>Unreimbursed Costs (preceding year)</i>	<i>Unreimbursed Costs (projected)</i>
<i>Free & Discounted Health Care Services</i>	101	\$636,002	\$626,000

<i>I. Government-Sponsored Health Care</i>	<i>Community Need Addressed</i>	<i>Unreimbursed Costs (preceding year)</i>	<i>Unreimbursed Costs (projected)</i>
<i>Medicare Costs exceeding reimbursement</i>	100	\$1,622,877	\$1,500,000
<i>Medicaid Costs exceeding reimbursement</i>	100	\$1,226,878	\$1,300,000
<i>Other Publicly-funded health care costs exceeding reimbursement</i>			

Section 5: SUMMARY FINANCIAL MEASURES

<i>Financial Information for Most Recent Fiscal Year</i>	<i>Dollar Amount</i>
<i>Gross Receipts from Operations</i>	\$114,664,893
<i>Net Revenue from Patient Services</i>	\$58,932,342
<i>Total Operating Expenses</i>	\$65,171,915
<i>Net Medicare Revenue</i>	\$25,351,020
<i>Medicare Costs</i>	\$26,973,897
<i>Net Medicaid Revenue</i>	\$3,743,792
<i>Medicaid Costs</i>	\$4,548,946
<i>Unreimbursed Charity Care Expenses</i>	\$636,002
<i>Unreimbursed Expenses of Other Community Benefits</i>	\$4,871,882
<i>Total Unreimbursed Community Benefit Expenses</i>	\$5,507,884
<i>Leveraged Revenue for Community Benefit Activities</i>	
<i>Total Community Benefits including Leveraged Revenue for Community Benefit Activities</i>	\$5,507,884

Section 6: Community Engagement in the Community Benefits Process

Community Organizations, Government Officials and other Representatives of the Public consulted in the community benefits planning process.	Identification of Need	Prioritization of Need	Development of the Plan	Commented on Proposed Plan
Healthcare Consumers	X	X	X	X
New London Hospital Medical Staff	X	X	X	X
New London Hospital Volunteers	X	X	X	X
Area Clergy	X	X	X	X
New London Police Department	X	X		
New London Fire Department	X	X		
New London Town Manager	X	X		
Sunapee Town Manager	X	X		
Newbury Town Manager	X	X		
Newport Town Manager	X	X		
Sullivan County Administrator	X	X	X	
Greater Sullivan County Regional Public Health Network	X	X	X	X
KLS Community Food Pantry	X	X		
Colby-Sawyer College	X	X		
Kearsarge SAU #65	X	X		
Newport SAU #43	X	X		
Sunapee SAU #85	X	X		
Kearsarge Council on Aging	X	X		
Newport Senior Center	X	X		
New London Recreation	X	X		
Sunapee Recreation	X	X		
Newport Recreation	X	X		
New London Outing Club	X	X		
New London Rotary Club	X	X		
Newport Rotary Club	X	X		
Lake Sunapee Region Chamber of Commerce	X	X		
Newport Chamber of Commerce	X	X		
ABC's Childcare Center	X	X		
TLC Family Resource Center	X	X		
DH/CHAD Pediatrics	X	X		
Lake Sunapee Region VNA & Hospice	X	X		
Headrest	X	X		
Upper Valley Haven	X	X		
Turning Points Network	X	X		

West Central Behavioral Health	X	X		
Pathways of the Upper Valley	X	X		

Please provide a description of the methods used to solicit community input on community needs (attach additional pages if necessary):

During the period January through June 2018, a Community Health Needs Assessment of the New London Hospital service area was completed by New London Hospital in partnership with Dartmouth-Hitchcock Alice Peck Day Memorial Hospital, Valley Regional Healthcare, Mt. Ascutney Hospital and Health Center, Visiting Nurse and Hospice for VT and NH, and the New Hampshire Community Health Institute. The purpose of the assessment was to identify community health concerns, priorities and opportunities for community health and health care delivery systems improvement. For the purpose of the assessment, the geographic area of interest was 15 municipalities comprising the New London Hospital service area with a total resident population of 32,912 people. Methods employed in the assessment included surveys of community residents made available on-line and paper surveys placed in numerous locations throughout the region; a direct email survey of key stakeholders and community leaders representing multiple community sectors; a set of community discussion groups; compilation of

results from assessment activities focused specifically on behavioral health needs and gaps; and a review of available population demographics and health status indicators. All information collection activities and analyses sought to focus assessment activities on vulnerable and disproportionately served populations in the region including populations that could experience limited access to health-related services or resources due to income, age, disability, and social or physical isolation..

Section 7: CHARITY CARE COMPLIANCE

Please characterize the charity care policies and procedures of your organization according to the following:	YES	NO	Not Applicable
The valuation of charity does not include any bad debt, receivables or revenue	X		
Written charity care policy available to the public	X		
Any individual can apply for charity care	X		
Any applicant will receive a prompt decision on eligibility and amount of charity care offered	X		
Notices of policy in lobbies	X		
Notice of policy in waiting rooms	X		
Notice of policy in other public areas	X		
Notice given to recipients who are served in their home			X

List of Potential Community Needs for Use on Section 3

100 - Access to Care; General

- 101 - Access to Care; Financial Barriers
- 102 - Access to Care; Geographic Barriers
- 103 - Access to Care; Language/Cultural Barriers to Care
- 120 - Availability of Primary Care
- 121 - Availability of Dental/Oral Health Care
- 122 - Availability of Behavioral Health Care
- 123 - Availability of Other Medical Specialties
- 124 - Availability of Home Health Care
- 125 - Availability of Long Term Care or Assisted Living
- 126 - Availability of Physical/Occupational Therapy
- 127 - Availability of Other Health Professionals/Services
- 128 - Availability of Prescription Medications

200 - Maternal & Child Health; General

- 201 - Perinatal Care Access
- 202 - Infant Mortality
- 203 - Teen Pregnancy
- 204 - Access/Availability of Family Planning Services
- 206 - Infant & Child Nutrition
- 220 - School Health Services

300 - Chronic Disease – Prevention and Care; General

- 301 - Breast Cancer
- 302 - Cervical Cancer
- 303 - Colorectal Cancer
- 304 - Lung Cancer
- 305 - Prostate Cancer
- 319 - Other Cancer
- 320 - Hypertension/HBP
- 321 - Coronary Heart Disease
- 322 - Cerebrovascular Disease/Stroke
- 330 - Diabetes
- 340 - Asthma
- 341 - Chronic Obstructive Pulmonary Disease
- 350 - Access/Availability of Chronic Disease Screening Services

360 - Infectious Disease – Prevention and Care; General

- 361 - Immunization Rates
- 362 - STDs/HIV
- 363 - Influenza/Pneumonia
- 364 - Food borne disease
- 365 - Vector borne disease

370 - Mental Health/Psychiatric Disorders – Prevention and Care; General

- 371 - Suicide Prevention
- 372 - Child and adolescent mental health
- 372 - Alzheimer's/Dementia
- 373 - Depression
- 374 - Serious Mental Illness

400 - Substance Use; Lifestyle Issues

- 401 - Youth Alcohol Use
- 402 - Adult Alcohol Use
- 403 - Youth Drug Use
- 404 - Adult Drug Use
- 405 - Youth Tobacco Use
- 406 - Adult Tobacco Use
- 407 - Access/Availability of Alcohol/Drug Treatment

- 420 - Obesity
- 421 - Physical Activity
- 422 - Nutrition Education
- 430 - Family/Parent Support Services

500 – Socioeconomic Issues; General

- 501 - Aging Population
- 502 - Immigrants/Refugees
- 503 - Poverty
- 504 - Unemployment
- 505 - Homelessness
- 506 - Economic Development
- 507 - Educational Attainment
- 508 - High School Completion
- 509 - Housing Adequacy

520 - Community Safety & Injury; General

- 521 - Availability of Emergency Medical Services
- 522 - Local Emergency Readiness & Response
- 523 - Motor Vehicle-related Injury/Mortality
- 524 - Driving Under Influence
- 525 - Vandalism/Crime
- 526 - Domestic Abuse
- 527 - Child Abuse/Neglect
- 528 - Lead Poisoning
- 529 - Work-related injury
- 530 - Fall Injuries
- 531 - Brain Injury
- 532 - Other Unintentional Injury

533 - Air Quality
534 - Water Quality

600 - Community Supports; General

601 - Transportation Services
602 - Information & Referral Services
603 - Senior Services
604 - Prescription Assistance
605 - Medical Interpretation
606 - Services for Physical & Developmental Disabilities
607 - Housing Assistance
608 - Fuel Assistance
609 - Food Assistance
610 - Child Care Assistance
611 - Respite Care

999 – Other Community Need