

UNION MEMORIAL HOSPITAL COMMUNITY BENEFIT REPORTING EVALUATION FOR FY 2009

I. Summary

Union Memorial Hospital, a member of MedStar Health, is one of the top specialty hospitals in Baltimore and a valued member of the communities it serves. For more than 155 years it has provided exceptional health service to the local community and beyond. The affiliation with MedStar Health assures top quality medical services are provided in the community, within an integrated health care system offering advanced care, medical research, education and community outreach.

Definition of community and population served

The hospital is currently licensed to operate 301 beds and is accredited by The Joint Commission. For fiscal year 2009, patient volumes included more than 20,700 inpatient admissions and 50,000 emergency department visits. The largest concentration of patient visits and admissions come from eight zip codes in northern Baltimore City and southern Baltimore County. This includes communities of Arlington, Clifton-East End, Druid, Govans, Hamilton, Hampden, Northwood, Overlea and Waverly. In fiscal year 2009, 36 percent of admissions/visits from this area were self-pay and Medicaid recipients.

The median household income of Union Memorial's community is 40 percent lower than in overall Maryland, while 20 percent of households have an annual income of less than \$15,000, compared to 8.4 percent in all of Maryland. Sixty-eight percent of the population in Union Memorial's community is black non-Hispanic, compared to only 29 percent statewide and 12 percent nationally.

Identification of community needs

Union Memorial's community benefits plan regularly aligns with its strategic initiatives. The plan is developed with the guidance of key stakeholders and assessment of state reports and patient data. The individuals involved in the process range from hospital and board leadership to our own staff of community nurse educators. Priorities and programs are routinely reviewed and discussed, relative to Union Memorial's current efforts, to address health-related issues or the ability to initiate or enhance our support. This process also identifies capital-related needs, such as facility expansion, which are necessary for Union Memorial to continue to serve the health care needs of our service area.

We concentrate on residents who have a high prevalence of severity for a particular health concern, with multiple health problems and limited access to timely high quality health care. We focus on program activities that address the underlying causes of persistent health problems as part of a comprehensive strategy to improve health status and quality of life in local communities.

In identifying community needs, Union Memorial analyzed utilization patterns in the hospital, responded to incoming requests from the community, used data compiled by the state; and consulted with the local health department and non-profit organizations such as the American Heart Association, American Cancer Society, American Stroke Association, Baltimore City Cancer Commission and Maryland Department of Aging.

Identified priority areas included, but not limited to, access to health education and prevention services for cancer, heart and other chronic diseases; healthy living and fitness in older adults; and reducing youth sports injuries.

The evaluation process for the success of community benefit activities focuses mainly on gathering data and tracking activity on an ongoing basis. The key areas of interest include the total number of participants in health education programs, screenings and support services; total number of participants receiving follow-up care; and the hospital's communication process with state and local organizations in addressing community health priorities. Results of the data are used to evaluate existing programs and determine when or if changes are indicated.

Community benefit program initiatives

The following is a listing of some of the specific efforts in fiscal year 2009:

Lung cancer screening

Lung cancer continues to be the leading cause of cancer death among Americans. Thus, early detection offers great hope to people at risk, particularly individuals from diverse populations.

Union Memorial's cancer care program free or low-cost screenings for lung cancer to make it as convenient and accessible as possible for those who otherwise might not have access to health improvement services. The screening is designed to detect early stage lung cancer through a low-dose spiral CT (computerized tomography) scan. The hospital-based radiology practice provides diagnostic interpretation of services, and if additional specialty services are needed, the hospital arranges for care through referrals to Union Memorial specialists. Frequently, other diseases are found by way of the screening.

In fiscal year 2009, 493 lung cancer screenings were performed, with two cases of cancer confirmed. Benefit: \$30,731.

Senior programs

The risk for illness, injury and lack of independence naturally increases as we age. But exercise can slow the aging process and help older adults become stronger and gain optimum health. Through Union Memorial Hospital's senior programs, older adults age 55 and over may participate in safe exercise classes specifically designed for them and taught by certified

professionals. These classes help older adults build flexibility and strength, promote healthy living and ease pain due to chronic diseases such as arthritis.

Some of the classes offered include yoga for seniors and light weight lifting. Union Memorial hosts classes onsite and in partnership with the St. Mary's Outreach Center.

Over the years, the programs have grown steadily, and in fiscal year 2009 more than 190 seniors enrolled in the classes and participated more than 390 times. Benefit: \$14,324.

Preventing and treating youth sports injuries

Youth injuries from playing sports are on the rise. Each year, more than 3.5 million sports-related injuries requiring medical treatment occur in children under age 15. The certified athletic trainers and orthopedic physicians of Union Memorial Orthopedics and Sports Medicine are an integral part of minimizing the risk of injury for youth athletes, while also ensuring they receive proper sports care for their injuries. When a player goes down, they're the first on the scene, evaluating any injury as quickly and thoroughly as possible and determining whether the athlete can continue competing or needs further medical treatment.

Union Memorial has relationships with numerous high schools throughout central Maryland, with certified athletic trainers and physician specialists partnering to provide medical coverage at amateur sporting events. Among the organizations, events and schools benefitting from clinical services and physician coverage from Union Memorial in fiscal year 2009 included: Ripken Baseball, Under Armour High School All-America Lacrosse Showcase, Baltimore Sports and Social Club and Loyola high schools. Benefit: \$78,892.

Financial contributions

Union Memorial Hospital partners with organizations across its community to benefit those we serve. We appreciate these partnerships and recognize the positive impact they have in improving the education, health and well-being of our community. In fiscal year 2009, Union Memorial supported many activities within the community through monetary donations totaling more than \$100,500. Some of the organizations benefitting from our support included the Baltimore Zoo, Village Learning Place, Hampden Family Center, Greater Homewood, Big Brother, Big Sisters and United Way of Central Maryland.

Gaps in availability of specialist providers

This information has remained consistent with our fiscal year 2008 report. Physician leadership and case management staff consistently identified several areas of concern:

- Timely placement of patients in need of inpatient psychiatry services
- Limited availability of outpatient psychiatry services
- Limited availability of inpatient and outpatient substance abuse treatment
- Medication assistance

Physician subsidies

Category 1:

The collections are not high enough in Psychiatry as a result of the uninsured patients and the fact that the 24/7 coverage requires a cost that is disproportionate to the numbers of patients seen in the off-hours.

Category 2:

Hospitalist subsidies ensure 24/7 services in the hospital and focus on preventive health measures and health status improvement for the community.

Category 3:

The subsidies are paid to make up for the shortfall in payments in relation to the cost of providing 24/7 coverage. The collections for these services are not high enough in the emergency department as a result of the large number of uninsured patients.

Other:

Outpatient renal reimbursement does not exceed the cost for providing the program, however, renal services are needed in the community and Union Memorial provides this service at a negative margin.

Category / Title / Department	Expenses	Offsets	Benefit
Subsidized Health Services (C)			
Psychiatry physician Subsidies	117,600	0	117,600
Hospitalists-Subsidies	2,440,350	631,146	1,809,204
ER Physician Subsidies	6,231,130	4,691,325	1,539,805
Pediatrics physician Subsidies	795,917	0	795,917
Renal Dialysis Subsidies	5,507,153	4,844,587	662,566
Subsidized Health Services	15,092,150	10,167,058	4,925,092

Appendix 1: Description of Charity Care Policy

Each MedStar Health facility (in cooperation and consultation with the finance division of MedStar Health) will specify the communities it serves based on the geographic areas it has served historically for the purpose of implementing this policy. Each facility will post the policy, including a description of the applicable communities it serves, in each major patient registration area and in any other areas required by applicable regulations, will communicate the information to patients as required by this policy and applicable regulations and will make a copy of the policy available to all patients.

Appendix 2: Charity Care Policy

See Corporate version.

MedStar Health

Financial Assistance for Uninsured Patients Policy Statement

As one of the region’s leading not-for-profit healthcare systems, MedStar Health is committed to ensuring that uninsured patients within the communities we serve who lack financial resources have access to necessary hospital services.¹ MedStar Health and its healthcare facilities will:

- Treat all patients equitably, with dignity, with respect and with compassion.
- Serve the emergency health care needs of everyone who presents at our facilities regardless of a patient's ability to pay for care.
- Assist those patients who are admitted through our admissions process for non-urgent, medically necessary care who cannot pay for part of all of the care they receive.
- Balance needed financial assistance for some patients with broader fiscal responsibilities in order to keep its hospitals' doors open for all who may need care in the community.

In meeting its commitments, MedStar Health’s facilities will work with their uninsured patients to gain an understanding of each patient’s financial resources prior to admission (for scheduled services) or prior to billing (for emergency services). Based on this information and patient eligibility, MedStar Health’s facilities will assist uninsured patients who reside within the communities we serve in one or more of the following ways:

- Assist with enrollment in publicly-funded entitlement programs (e.g., Medicaid).
- Assist with enrollment in publicly-funded programs for the uninsured (e.g., D.C. Healthcare Alliance).
- Assist with consideration of funding that may be available from other charitable organizations.
- Provide charity care and financial assistance according to applicable guidelines.

¹ This policy does not apply to insured patients who may be “underinsured” (e.g., patients with high-deductibles and/or coinsurance). This policy also does not apply to patients seeking non-medically-necessary services (including cosmetic surgery).

- Provide financial assistance for payment of facility charges using a sliding scale based on patient family income and financial resources.
- Offer periodic payment plans to assist patients with financing their healthcare services.

Each MedStar Health facility (in cooperation and consultation with the finance division of MedStar Health) will specify the communities it serves based on the geographic areas it has served historically for the purpose of implementing this policy. Each facility will post the policy, including a description of the applicable communities it serves, in each major patient registration area and in any other areas required by applicable regulations, will communicate the information to patients as required by this policy and applicable regulations and will make a copy of the policy available to all patients.

MedStar Health believes that its patients have personal responsibilities related to the financial aspects of their healthcare needs. The charity care, financial assistance, and periodic payment plans available under this policy will not be available to those patients who fail to fulfill their responsibilities. For purposes of this policy, patient responsibilities include:

- Completing financial disclosure forms necessary to evaluate their eligibility for publicly-funded healthcare programs, charity care programs, and other forms of financial assistance. These disclosure forms must be completed accurately, truthfully, and timely to allow MedStar Health's facilities to properly counsel patients concerning the availability of financial assistance.
- Working with the facility's financial counselors and other financial services staff to ensure there is a complete understanding of the patient's financial situation and constraints.
- Completing appropriate applications for publicly-funded healthcare programs. This responsibility includes responding in a timely fashion to requests for documentation to support eligibility.
- Making applicable payments for services in a timely fashion, including any payments made pursuant to deferred and periodic payment schedules.

- Providing updated financial information to the facility’s financial counselors on a timely basis as the patient’s circumstances may change.

Charity Care and Sliding-Scale Financial Assistance

Uninsured patients of MedStar Health’s facilities may be eligible for charity care or sliding-scale financial assistance under this policy. The financial counselors and financial services staff at the facility will determine eligibility for charity care and sliding scale financial assistance based on review of income for the patient and her family, other financial resources available to the patient’s family, family size, and the extent of the medical costs to be incurred by the patient.

The determination of eligibility will be made as follows:

1. Based on family income and family size, the percentage of the then-current federal poverty level for the patient will be calculated. If this percentage exceeds 400%, the patient will not be eligible for charity care or sliding-scale financial assistance unless determined eligible in step 3. If the percentage is less than or equal to 400%, the patient is provisionally eligible, subject to the financial resources test in step 2.
2. The patient’s financial resources will be evaluated by calculating a pro forma net worth for the patient and her family, excluding (a) funds invested in qualified pension and retirement plans and (b) the first \$100,000 in equity in the patient’s principle residence.² The pro forma net worth will include a deduction for the anticipated medical expenses to be incurred during the twelve months commencing on the date of the patient’s admission to the facility. If the pro forma net worth is less than \$100,000, the patient is eligible for charity care or sliding-scale financial assistance; if the pro forma net worth is \$100,000 or more, the patient will not be eligible for such assistance.

² Net worth calculations will incorporate the inclusions and exclusions used for Medicaid. [Anticipated recoveries from third parties related to a patient’s medical condition \(i.e. recovery from a motor vehicle accident that caused the injuries\) may be taken into account in applying this policy.](#)

- For patients whose family income exceeds 400% of the federal poverty level, adjusted family income will be calculated by deducting the amount of medical expenses for the subject episode of care anticipated to be paid during the ensuing twelve month period. This calculation will consider any periodic payment plan to be extended to the patient. Based on this adjusted family income, the adjusted percentage of the then-current federal poverty level for the patient will be calculated. If this percentage exceeds 400%, the patient will not be eligible for charity care or sliding-scale financial assistance. Periodic payment plans may be extended to these patients.

For patients who are determined to be eligible for charity care or sliding-scale financial assistance, the following will be applicable based on the patient’s percentage of the federal poverty level (or adjusted percentage, if applicable):

<i>Adjusted Percentage of Poverty Level</i>	<i>Financial Assistance Level</i>	
	<i>HSCRC-Regulated Services³</i>	<i>Washington Facilities and non-HSCRC Regulated Services</i>
0% to 200%	100%	100%
201% to 250%	40%	80%
251% to 300%	30%	60%
301% to 350%	20%	40%
351% to 400%	10%	20%
more than 400%	no financial assistance	no financial assistance

As noted above, patients to whom discounts, payment plans, or charity care are extended have continuing responsibilities to provide accurate and complete financial information. In the event a patient fails to meet these continuing responsibilities, the patient will become financially responsible for the original amount owed, less any payments made to date.

³ The assistance levels described above for HSCRC-regulated services do not include any discounts that may be applicable under the HSCRC’s prompt payment regulations.

Appendix 3: Description of Mission

Union Memorial Hospital's mission is: Union Memorial Hospital is a comprehensive hospital with regional specialty services of distinction and quality community services, all enhanced by clinical education and research.

The current mission statement was developed in 2002 as part of the FY03-05 strategic planning cycle. The mission states the organization's purpose and reason for existence, describes what the organization does and for whom, and forms the frame of reference for the vision. UMH is focused on providing comprehensive care to the immediate community in which it resides as well as advanced specialty care for a broad regional market. In addition to these clinical services, UMH is also committed to supporting teaching and research initiatives. The mission statement is reviewed every three years by the strategic planning committee which is comprised of board members, physicians, executive team members and corporate planning staff. The mission will stand in place until at least 2012.

Appendix 4: Mission, Vision, and Values

MedStar Health and each entity (hospital and diversified business) share a common vision and set of values. MedStar Health's common vision is to be the trusted leader, caring for people and advancing health. MedStar Health's common set of values are services, patient first, integrity, respect, innovation and teamwork. Each entity has a unique mission, or purpose for which it exists. MedStar Health's mission is to serve our patients, those who care for them and our communities. Union Memorial Hospital's mission is: Union Memorial Hospital is a comprehensive hospital with regional specialty services of distinction and quality community services, all enhanced by clinical education and research.

Below is an illustration of Union Memorial Hospital's mission, vision and values for reference.

The infographic features the Union Memorial Hospital logo at the top left, which includes a stylized blue and yellow graphic above the text "Union Memorial Hospital" and "MedStar Health". To the right of the logo is a large yellow box titled "Values" containing seven items: Service, Patient first, Integrity, Respect, Innovation, and Teamwork, each with a brief description. To the left of the "Values" box are two yellow boxes: "Vision" with the text "The Trusted Leader in Caring for People and Advancing Health." and "Mission" with the text "Union Memorial Hospital is a comprehensive hospital with regional specialty services of distinction and quality community services, all enhanced by clinical education and research." At the bottom of the infographic is a dark blue box with white text stating "Union Memorial Hospital is a proud member of MedStar Health, a not-for-profit community-based healthcare organization serving the Baltimore-Washington region through patient care, research, and education." Below this box is the contact information: "Union Memorial Hospital 201 E. University Parkway Baltimore, MD 21218 Phone: 410-554-2000 www.unionmemorial.org".

Union Memorial Hospital
MedStar Health

Vision

The Trusted Leader
in Caring for People
and Advancing Health.

Mission

Union Memorial Hospital is a
comprehensive hospital with
regional specialty services of
distinction and quality community
services, all enhanced by clinical
education and research.

Values

Service
We strive to anticipate and meet the needs of our patients, physicians and co-workers.

Patient first
We strive to deliver the best to every patient every day. The patient is the first priority in everything we do.

Integrity
We communicate openly and honestly, build trust and conduct ourselves according to the highest ethical standards.

Respect
We treat each individual, those we serve and those with whom we work, with the highest professionalism and dignity.

Innovation
We embrace change and work to improve all we do in a fiscally responsible manner.

Teamwork
System effectiveness is built on the collective strength and cultural diversity of everyone, working with open communication and mutual respect.

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