

Better health. Better communities.

FY17 Community Benefit Report

In FY17, Piedmont Healthcare (PHC) executed year one of a three-year plan designed to help our communities grow stronger and healthier. The plan, created during our 2016 community health needs assessment (CHNA), provides a framework for all PHC community benefit activities.

We continually assess and address the needs of those we serve, especially those most vulnerable due to their income, insurance status, age, ongoing chronic health conditions, race or ethnicity. We are fully dedicated to serving all members of our communities and, to that end, have worked to build programs and partner with community organizations so that we are able to truly impact lives in a sustainable, positive way.

We are:

- Piedmont Athens Regional Medical Center (Athens-Clarke County)
- Piedmont Atlanta Hospital (Fulton County)
- Piedmont Fayette Hospital (Fayette County)
- Piedmont Henry Hospital (Henry County)
- Piedmont Mountainside Hospital (Pickens County)
- Piedmont Newnan Hospital (Coweta County)
- Piedmont Newton Hospital (Newton County)



By the numbers

Piedmont annually reports its community benefit figures. Charity care, Medicaid shortfalls, subsidized care for government programs and other community benefit programs are all community benefit expenditures allowed by the IRS. We also include bad debt and Medicare shortfalls figures, as those are also taken at a loss to the system in the interest of providing care to all patients. Piedmont Athens Regional was not included in this calculation.

Total reportable CB: \$102,993,176
 Total reportable % of OE: 4.3%
 Total spend: \$215,067,834
 Total spend % of OE: 8.9%

Piedmont Healthcare hospitals' estimated community benefit FY17 spend:

Charity care	\$63,105,407
Medicaid shortfalls	\$7,783,441
Other subsidized care for government programs	\$20,504,046
Bad debt	\$66,983,362
Medicare shortfalls	\$45,091,296
Other community benefit programs	\$11,600,282
Total FY17 Spend	\$215,067,834
Total FY16 Spend	\$172,161,891

FY17 Estimated spend by hospitals included in the above calculation:

Piedmont Atlanta Hospital

Total reportable CB: \$37,175,503
 Total reportable % of OE: 3.6%
 Total spend: \$82,817,053
 Total spend % of OE: 8%

Piedmont Mountainside Hospital

Total reportable CB: \$6,715,073
 Total reportable % of OE: 6.0%
 Total spend: \$11,917,508
 Total spend % of OE: 10.2%

Piedmont Fayette Hospital

Total reportable CB: \$19,258,334
 Total reportable % of OE: 4.8%
 Total spend: \$38,302,403
 Total spend % of OE: 5.8%

Piedmont Newnan Hospital

Total reportable CB: \$12,729,440
 Total reportable % of OE: 5.1%
 Total spend: \$24,831,449
 Total spend % of OE: 8.4%

Piedmont Henry Hospital

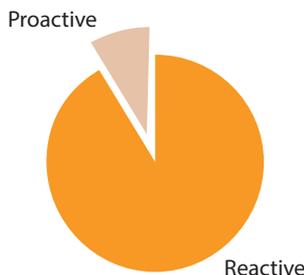
Total reportable CB: \$20,148,173
 Total reportable % of OE: 5%
 Total spend: \$44,159,723
 Total spend % of OE: 7%

Piedmont Newton Hospital

Total reportable CB: \$6,966,653
 Total reportable % of OE: 5.6%
 Total spend: \$13,489,698
 Total spend % of OE: 9.97%

Proactive vs. Reactive Spend

Proactive community benefits are the activities that occur either outside our hospital walls, such as community partnerships, prevention efforts or health education. Reactive community benefits are generally programs that support patients who are sick and need access to hospital care.



PHC spent an estimated \$11.6m in proactive community benefits, including: health professions education (\$9.3m).

Reactive spends are, in order of cost to the system: bad debt (\$67m), financial assistance (\$63m), Medicare shortfalls (\$45m), the provider fee (\$20.5m), and Medicaid shortfalls (\$7.8m).

Community partners

The community benefit grants program extends financial support to not-for-profit, community-based organizations that provide specific health-related services and programs for at-risk and underserved populations that align with our 2016 CHNA and implementation strategy. The goal of the grants program is to improve the health status of communities within Piedmont Atlanta's service area. Twenty-two organizations within six Piedmont service communities were selected for community benefit grants in 2017. **Our FY17 grant recipients were:**

Burnt Mountain Center (PMH)	Hands of Hope Clinic (PHH)
Center for Black Women's Wellness (PAH)	Healing Bridge Clinic (PNH)
CHOICES for Kids (PAH)	Meals on Wheels Coweta (PNH)
Community Farmer's Market (PAH)	Mercy Care Atlanta (PAH)
Coweta County Extension (PNH)	Odyssey Family Counseling (PAH)
Coweta Samaritan Clinic (PNH)	Portal de Salud (PAH)
East Lake Foundation (PAH)	Southern Crescent Sexual Assault and Child Abuse Center (PNH)
Fayette C.A.R.E. Clinic (PFH)	The Health Initiative (PAH)
Georgia Health Policy Center (PAH)	United Way of Greater Atlanta (PAH)
Good Samaritan Health Wellness Center (PMH)	Willing Helpers Medical Clinic (PNTH)
Good Samaritan Health Center (PAH)	

Among the specific programs funded were: three that work to curb instances of preventable readmissions and emergency department encounters, 11 that increase access to care, and 12 that aim to prevent instances of heart disease, hypertension, stroke, diabetes and/or obesity. These programs reach into all our Piedmont communities, and support local nonprofits who have demonstrated a successful track record in addressing the issues that face our most vulnerable neighbors. Because they joined the system in FY17, Piedmont Athens Regional Medical Center was not part of this initial round of funding but will join the grants program in FY18.

Included in these is funding to support health education and cooking classes for mentally disabled individuals and their caregivers in the Pickens County Community at the Burnt Mountain Center. Another grant expands the Fayette C.A.R.E. Clinic's ability to treat low-income patients and provides for an interpreter for patients with limited English proficiency. Funding to the Mercy Care Foundation supports cleanings and denture services for low-income seniors. Support for the Willing Helpers Medical Clinic in Covington provides much-needed smoking cessation tools to low-income adults. Funding to Meals on Wheels Coweta gives nutritious meals for seniors and helps address health issues from inside the home in order to reduce preventable readmissions caused by falls. Through its partnership with Piedmont Henry, Hands of Hope offers a health coaching program that helps patients manage their chronic conditions and connects patients to community resources.

Our priorities and progress

In FY16, on behalf of its then five hospitals, Piedmont Healthcare conducted a series CHNAs, which allows us to identify and prioritize the health needs of our communities. We focused on health challenges in the home counties of our hospitals: Coweta, Fayette, Fulton, Henry, Newton and Pickens counties, and Piedmont Athens Regional Hospital, then its own entity, focused on its home county of Athens-Clarke County for its CHNA.

We paid particular attention to the challenges facing those most vulnerable, but also kept the whole community in mind. From those assessments, and in partnership with our communities, each hospital crafted a three-year implementation strategy to address identified needs. Through these priorities and programs, we are working to help our communities grow stronger and healthier.



Maintain and, when possible, increase access to appropriate and affordable care for low- and no-income patients (all hospitals).



Reduce preventable readmissions and emergency department re-encounters (all hospitals).



Increase access to and awareness of cancer-related programming (all hospitals).



Reduce obesity rates and obesity-related diseases, such as Type II Diabetes (PAR, PFH, PNH and PNTH).



Reduce preventable instances of heart disease, hypertension and stroke (all hospitals).



Support maternal and child health (PAR).



Support senior health (PFH).

FY17 marked the first year of the three-year implementation strategies. We were able to meet almost all Year One goals. Crucial to this success was the creation of the community benefit grants program, which allowed us to partner with local not-for-profit organizations to better serve our most vulnerable populations.

We continued to provide financial assistance to eligible patients and covered shortfalls for low-income patients enrolled in government programs, provided in-kind lab services to eight charitable clinics across the system at no charge, and supported clinic capacity-building through funding and/or partnerships with 12 community clinics across the system.

In sum, first year goals were met in all priority areas, excluding cancer. Unfortunately, due to unforeseen circumstances, we have lost the majority of our funding for screening and diagnostic mammograms, which will impact our progress in this priority area for some hospitals.