

**EMHS Mission:** The mission of EMHS is to maintain and improve the health and well-being of the people of Maine through a well-organized network of local healthcare providers who together offer high quality, cost-effective services to their communities.

## EMHS System-wide Total Benefit: \$ 128,262,321

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|---|--|
| Community Health Improvement Services: \$ 7,362,258 | Charity Care: \$ 23,492,925                          |
| Health Professions Education: \$ 444,218            | Unpaid Cost of Public Programs:                      |
| Subsidized Health Services: \$ 136,380              | Medicare: \$ 40,590,113      Medicaid: \$ 40,601,733 |
| Research: \$ 1,125,669                              | Unrecoverable interest cost on funds used to         |
| Financial Contributions: \$ 195,690                 | subsidize state Mainecare/Medicaid underpayments     |
| Community-Building Activities: \$ 170,388           | of \$ 111M: \$ 11,161,042                            |
| Community Benefit Operations: \$ 2,981,905          |  |

*\$ 2,853,269 is the total amount of donor funds used for community benefit through EMHS Foundation.*

### Community Benefit by EMHS Non-profit Member

#### The Acadia Hospital

**Total Community Benefit: \$ 12,423,358**

**Community Impact:** Mental illness and addictions are considered chronic diseases and Acadia is diligent in providing appropriate treatment and working on prevention and early intervention strategies. During the previous fiscal year, Acadia's Open Mind community education series offered presentations on depression and ECT treatment, and the aging brain. Acadia also participated in National Depression Screening Day and offers a free, confidential screening tool online throughout the year. Also, Acadia created a case manager position to support patients as they learn to manage their illnesses. Additionally, The Acadia Artisan Project provided patients with artistic interests the opportunity to exhibit their artwork, which has proven to be a very therapeutic outlet and an important component for their ongoing recovery. Finally, Acadia launched a new Cognitive Behavioral Therapy pain management program designed to provide a medication-free option for individuals living with chronic pain.

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| Community Health Improvement Services: \$ 30,542 | Community Benefit Operations: \$ 235,500                     |
| Health Professions Education: \$ 286,701         | Charity Care: \$ 7,633,553                                   |
| Subsidized Health Services: \$ 13,520            | Unpaid Cost of Public Programs:                              |
| Research: \$ 2,334                               | Medicare: \$ 3,588,570                                       |
| Financial Contributions: \$ 7,000                | Unrecoverable interest cost on funds used to subsidize state |
| Community Building Activities: \$ 27,832         | Mainecare / Medicaid underpayments                           |
|  | of \$ 6.9M: \$ 597,806                                       |

*\$ 149,604 is the total amount of donor funds used for community benefit at The Acadia Hospital through Acadia Foundation.*

#### The Aroostook Medical Center

**Total Community Benefit: \$ 15,655,224**

**Community Impact:** The influenza virus can cause complications and even death, and those with chronic diseases are most at risk. TAMC provided over 1600 free flu shots to adults in Aroostook County, including many who live with chronic diseases, at clinics held in Presque Isle, Caribou, Fort Fairfield, Mars Hill, and Ashland. Press releases and other promotional materials for these vaccination clinics encouraged people with chronic diseases to get vaccinated. In response to the high volume of influenza cases seen at the hospital this winter, TAMC held a special flu shot clinic in January to allow adults to get vaccinated for free. Through free flu vaccination, TAMC is helping chronic disease sufferers and others stay healthy this winter.

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| Community Health Improvement Services: \$ 86,109 | Unpaid Cost of Public Programs:                    |
| Financial Contributions: \$ 31,440               | Medicare: \$ 8,679,854      Medicaid: \$ 4,281,461 |
| Community Benefit Operations: \$ 64,619          | Unrecoverable interest cost on funds used to       |
| Charity Care: \$ 1,261,212                       | subsidize state Mainecare/Medicaid underpayments   |
|  | of \$ 11.3M: \$ 1,250,529                          |

*\$ 21,377 is the total amount of donor funds used for community benefit at The Aroostook Medical Center through The Aroostook Medical Center Foundation.*

**Blue Hill Memorial Hospital****Total Community Benefit: \$ 1,560,238**

**Community Impact:** Blue Hill Memorial Hospital is committed to improving the health and wellness of the communities they serve. One of the ways in which they will accomplish that goal is to raise awareness of the significant impact that chronic disease has on their local population. Their first annual Women’s Wellness Fair, held in June of 2012, offered a variety of typical health-fair services, community health resources, entertainment, and spa treatments to more than 250 women from their community. In addition, BMMH’s diabetes nurse educator, clinical dietician, nurse care coordinator, and registered nurses raised awareness and provided critical insight with respect to chronic disease management and prevention by presenting valuable information, screenings, interactive tools, analysis, and consultations. They will continue this focus by working with patients in their primary care practices with an emphasis on helping people take better care of themselves with improved communication and a more proactive, team approach.

Community Health Improvement Services: \$ 28,642  
 Subsidized Health Services: \$ 10,156  
 Financial Contributions: \$ 1,842  
 Community-Building Activities: \$ 492  
 Community Benefit Operations: \$ 199,390

Charity Care: \$ 819,190  
 Unpaid Cost of Public Programs:  
 Medicare: \$ 268,605  
 Unrecoverable interest cost on funds used to  
 subsidize state Mainecare/Medicaid underpayments  
 of \$ 1.9M: \$ 231,921

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*\$ 23,196 is the total amount of donor funds used for community benefit at Blue Hill Memorial Hospital through Blue Hill Memorial Hospital Foundation.*

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**Charles A Dean Memorial Hospital****Total Community Benefit: \$ 1,227,081**

**Community Impact:** CA Dean continues to provide much needed health services to the Greenville area that otherwise would not be provided. According to the 2010 Community Health Needs Assessment, Piscataquis County has a high prevalence of diabetes (Piscataquis – 13%, ME overall - 10%) and the highest hospitalization admission rate of any Maine county for the disease. So, helping diabetics stay well and out of the hospital is especially important. CA Dean offers free blood pressure and blood sugar testing clinics, flu shot clinics, as well as educational materials covering healthy eating, activities, and disease management and prevention. In addition, primary care providers are helping their diabetic patients connect with an optometrist to ensure they seek specialized care for their sight as well.

Community Health Improvement Services: \$ 12,619  
 Subsidized Health Services: \$ 840  
 Research: \$ 8,755  
 Financial Contributions: \$ 2,374  
 Community Benefit Operations: \$ 99,582

Charity Care: \$ 345,997  
 Unpaid Cost of Public Programs:  
 Medicare: \$ 117,434      Medicaid: \$ 508,453  
 Unrecoverable interest cost on funds used to  
 subsidize state Mainecare/Medicaid underpayments  
 of \$ 1.2M: \$ 130,937

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*\$ 832 is the total amount of donor funds used for community benefit at Charles A Dean Memorial Hospital through Charles A Dean Memorial Hospital Foundation.*

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**EMHS** (data below reflects Home Office activity only)**Total Community Benefit: \$ 6,282,113**

**Community Impact:** As the 2012 fiscal year wrapped up, the EMHS Home Office was overseeing the final stages of the largest grant project it had ever undertaken, the Bangor Beacon Project. It was very successful on several levels. It demonstrated our ability to more effectively manage chronic disease. It also created remarkable alignment and synergy with several non-EMHS providers, including St. Joseph Hospital and Penobscot Community Health Care. For more information on the Bangor Beacon Community, visit [www.bangorbeaconcommunity.org](http://www.bangorbeaconcommunity.org).

Community Health Improvement Services: \$ 5,551,482  
 Health Professions Education: \$ 64,017  
 Research: \$ 171,110

Financial Contributions: \$ 138,919  
 Community-Building Activities: \$ 35,562  
 Community Benefit Operations: \$ 321,023

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*\$ 247,507 is the total amount of donor funds used for community benefit at EMHS through EMHS Foundation.*

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## Eastern Maine Homecare

**Total Community Benefit: \$ 444,089**

**Community Impact:** Eastern Maine HomeCare continues to expand its telehealth program to assist patients with chronic diseases. Telehealth monitors transmitted patient-specific health data daily to our telehealth nurse who carefully monitors patients for any information outside of their normal parameters. In 2012, patients rated their overall satisfaction of telehealth as a 4.38 (on a scale of 1 – 5). Telehealth improves patient outcomes through timely, clinical intervention and helps patients recognize the signs and symptoms of their disease process. When patients learn to better self-manage their disease process they are more compliant with their care plan. Telehealth is particularly effective for congestive heart failure, chronic respiratory conditions, diabetes, and other chronic diseases.

Community Health Improvement Services: \$ 3,430

Charity Care: \$ 16,286

Community Benefit Operations: \$ 87,000

Medicaid: \$ 337,373

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*\$ 82,037 is the total amount of donor funds used for community benefit at Eastern Maine Homecare through Eastern Maine Homecare Foundation.*

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## Eastern Maine Medical Center

**Total Community Benefit: \$ 79,664,474**

**Community Impact:** EMMC is proud to be recognized as a leader in providing high quality cardiac care to our patients throughout central, eastern, and northern Maine. In fact, our specialists perform more than 50,000 cardiac procedures annually. While we're proud of the remarkable cardiac care we provide, we're equally as proud of the steps we are taking to ensure our neighbors are heart healthy.

February marked American Heart Month, and on Friday, February 1, staff in EMMC Heart Center kicked off the month by hosting two public events to raise awareness for heart disease and good heart health. Early in the day, they set up a table outside of the Chaplain's Desk at EMMC's State Street campus to share information with employees, patients, and visitors about heart disease and tips to keep the heart healthy. And, then later in the evening, they took their message to the Alford Arena at The University of Maine where the UMaine Black Bears played host in a rival hockey game. Hundreds of attendees stopped by to learn more about what they could do to take control of their heart health from EMMC staff.

Community Health Improvement Services: \$ 1,111,041

Community Benefit Operations: \$ 1,600,000

Health Professional Education: \$ 92,999

Charity Care: \$ 10,680,855

Subsidized Health Services: \$ 86,017

Unpaid Cost of Public Programs:

Research: \$ 832,028

Medicare: \$ 24,363,872      Medicaid: \$ 33,376,515

Financial Contributions: \$ 10,000

Unrecoverable interest cost on funds used to subsidize state Mainecare/Medicaid underpayments of \$ 76.7M: \$ 7,491,400

Community-Building Activities: \$ 19,747

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*\$ 2,157,143 is the total amount of donor funds used for community benefit at Eastern Maine Medical Center through Eastern Maine Medical Center Foundation.*

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## Inland Hospital

**Total Community Benefit: \$ 8,947,858**

**Community Impact:** Inland Hospital's Let's Go! Family Fun Series is a collaboration of Inland, EMHS' Youth Healthy Lifestyle Program, Waterville Parks & Recreation, the Alford Youth Center, and many other local organizations that encourage active fun throughout the year. Inland features a free, family-friendly Let's Go! event each month to promote active living and healthy eating habits that ensure the rewards of living a healthier life, help curb the obesity epidemic, and ultimately reduce chronic disease, a key community priority throughout central Maine!

Community Health Improvement Services: \$ 62,298

Unpaid Cost of Public Programs:

Financial Contributions: \$ 4,115

Medicare: \$ 3,571,778      Medicaid: \$ 2,097,841

Community-Building Activities: \$ 81,375

Unrecoverable interest cost on funds used to subsidize state Mainecare/Medicaid underpayments of \$ 11.8M: \$ 1,253,777

Community Benefit Operations: \$ 218,791

Charity Care: \$ 1,657,883

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*\$ 166,974 is the total amount of donor funds used for community benefit at Inland Hospital through the Inland Foundation.*

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**Rosscare**

**Total Community Benefit: \$ 66,815**

**Community Impact:** Rosscare, working with Eastern Maine Homecare and Eastern Maine Community College, developed and launched online clinical education for healthcare professionals to improve chronic disease management of older adults with diabetes. A task force convened to identify strategies to strengthen nurses' knowledge on delivering specialized care to older adults with diabetes. The online curriculum was launched in August, 2012 and is added to Rosscare's growing health education library supporting workforce development and improved chronic disease management in our community.

Community Health Improvement Services: \$ 63,434

Community Building Activities: \$ 880

Health Professions Education: \$ 501

Community Benefit Operations: \$ 2,000

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*\$ 4,599 is the total amount of donor funds used for community benefit at Rosscare through Rosscare Foundation.*

**Sebasticook Valley Health**

**Total Community Benefit: \$ 1,991,071**

**Community Impact:** Sebasticook Valley Health focuses on community outreach and access to care in our efforts to align our services with the priorities identified in the 2010 Community Health Needs Assessment (CHNA). SVH serves as a leader in the "Little Beacon" project, designed to bring area providers and care managers together to reduce barriers to care in our communities, especially for patients with chronic disease. Sebasticook Valley Health also administers Living Well for Better Health, an evidence-based six-week chronic disease self-management program. Living Well is designed for anyone living with a long term health problem and is offered at no cost to patients. As the fiscal agent for the Healthy SV Coalition, a local Healthy Maine Partnership, we provide patient and community education, programs and services to increase physical activity, improve nutrition, decrease tobacco use, and address other CHNA priorities, such as chronic disease and substance abuse.

Community Health Improvement Services: \$ 412,661

Charity Care: \$ 1,077,949

Subsidized Health Services: \$ 25,847

Community Benefit Operations: \$ 154,000

Research: \$ 111,442

Unrecoverable interest cost on funds used to subsidize state Mainecare/Medicaid underpayments of \$ 1.6M: \$ 204,672

Community Building Activities: \$ 4,500

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## Community Benefit Report Glossary of Terms

*Charity Care:* The cost of care provided to uninsured, low-income patients who are not expected to pay all or part of a bill. Charity Care does not include bad debts arising from the failure to pay by patients expected to pay for such services.

*Community Benefit:* A planned, managed, organized, and measured approach to a healthcare organization's participation in meeting identified community health needs. It implies collaboration with a "community" to "benefit" its residents- particularly the poor, minorities, and other underserved groups- by improving health status and quality of life. Community benefit responds to an identified community need and meet at least one of the following criteria:

|                                   |                                 |
|-----------------------------------|---------------------------------|
| Generate a low or negative margin | Community-building activities   |
| Health professions education      | Community benefit operations    |
| Subsidized health services        | Charity care                    |
| Research                          | Government-sponsored healthcare |
| Financial contributions           |                                 |

*Community Benefit Operations:* Costs associated with dedicated staff, community health needs and/or assets assessment, and other costs associated with community benefit strategy and operations

*Community-Building Activities:* Includes cash, in-kind donations, and budgeted expenditures for the development of community health programs and partnerships. Enhancements include physical improvements, economic development, healthy community initiatives, partnerships, environmental improvements, and community leadership skills training.

*Community Health Services:* Activities carried out for the purpose of improving community health. They extend beyond patient care activities and are usually subsidized by the hospital

*Donor Funds:* The donor funds provided by each entity's Healthcare Charities branch are monies distributed to address recognized needs in the community. Donor funds are not included in the individual entity's total community benefit amount or the system-wide community benefit amount.

*Financial Contributions:* Includes funds and in-kind services donated to individuals and/or the community at large. In-kind services include hours donated by staff to the community while on the healthcare organization's work time, overhead expenses of space donated to not-for-profit community groups for meetings, etc., and donation of food, equipment, and supplies.

*Health Professions Education :* This category includes providing a clinical setting for undergraduate/vocational training, internships/clerkships/residencies, and residency education for physicians, nurses and medical students; funding for staff education that is linked to community services and health improvement; nursing scholarships or tuition payments for professional education to non-employees and volunteers; and a clinical setting for undergraduate training for lab and other technicians.

*Research:* Studies on healthcare delivery, unreimbursed studies on therapeutic protocols, evaluation of innovative treatments, and research papers prepared by staff professional journals

*Subsidized Health Services:* Costs for billed services that are subsidized by the healthcare organization. They include clinical patient care services that are provided despite a negative margin because, although they are needed in the community, other providers are unwilling to provide the services and the services would otherwise not be available to meet patient demand. Negative contribution margin departments and/or services can be categorized in the subsidized health services area.

*Unpaid Costs of Public Programs:* EMHS reports both Medicare, a federal government-sponsored healthcare benefit program, and MaineCare, Maine's Medicaid program. The loss for both Medicare and MaineCare is the shortfall that is created when a facility receives payments that are less than the costs incurred for caring for public program beneficiaries.

**Definitions derived from the CHA (Catholic Health Association), VHA Inc., Internal Revenue Service Schedule H of form 990, and Lyon Software - Community Benefit Reporting: Guidelines and Standard Definitions for the Community Benefit report for Social Accountability.**

EMHS' community benefit report comes out quarterly (the EMHS fiscal year starts in October). If you would like to request that another email address be added to our distribution list, request to be taken off our community benefit distribution list, or have any question or concern regarding the EMHS Community Benefit Report, please send an email to [communitybenefit@emhs.org](mailto:communitybenefit@emhs.org), or call (207) 973-7051. The most recent version of our report is always available on the EMHS website, [www.emhs.org](http://www.emhs.org).